

**A MODEL OF LOGISTICS MANAGEMENT FOR HEALTH  
TOURISM IN THAI TRADITIONAL MEDICINE  
PROMOTING HOSPITALS IN THAILAND**

**Yongyut Kaewudom**

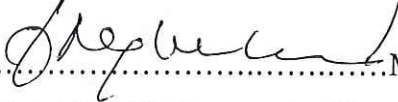
**A Dissertation Submitted in Partial  
Fulfillment of the Requirements for the Degree of  
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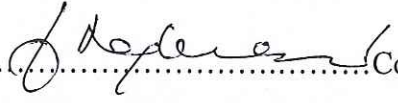
**The Graduate School of Tourism Management**

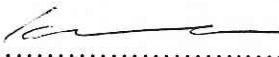
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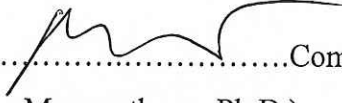
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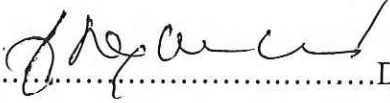
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## ABSTRACT

<b>Titles of Dissertation</b>	A Model of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Thailand
<b>Author</b>	Mr. Yongyut Kaewudom
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This research aims 1) to analyze the implementation of a health tourism promoting policy in Thai traditional medicine promoting hospitals, 2) to evaluate the efficiency and effectiveness of a health tourism logistic management process in Thai traditional medicine promoting hospitals, and 3) to create a model of the health tourism logistic management in Thai traditional medicine promoting hospitals with a combination of quantitative and qualitative research methods.

According to the findings, most of the health tourism tourists who use the services in Thai traditional medicine promoting hospitals are female aged between 41-50, married, hold a bachelor degree, and work as governmental officers/governmental staff with a salary of 15,001-25,000 Baht. For most of them, using the service in Thai traditional medicine promoting hospitals is their first time, and their main purpose is to receive Thai massage service. Regarding the health tourism promoting policy implementation in Thai traditional medicine promoting hospitals, it is found that the policy used for the implementation in the hospitals is clear and in accordance with the economic and social condition as well as the tourists' value. Resources for the implementation include a location, budget, personnel as well as material, equipment, and tools are sufficiently allocated. Technology is applied to support the process. An organization structure is well-arranged to suit the policy implementation while the implementing operators are greatly knowledgeable and skilled. They communicate with each other and with the tourists appropriately and clearly. However, there are some problems such as a delay of budget disbursement due to governmental processes and high maintenance costs for some equipment.

According to an evaluation of the efficiency and effectiveness of the health tourism logistic management process in Thai traditional medicine promoting hospitals, it is found that, for physical flow management, the hospitals provide service areas to the tourists properly despite of a limited resting area. For information flow management, the hospitals provide directional signs around the hospitals for the tourists' convenient accessibility, but they are still far and few between. Storing, forwarding, and linking data is mainly based on a document system. For financial flow management, only one payment channel is available, but it does not affect the speed of the service. For service process flow management, the hospitals have systematic service processes and practices from the first to last process; however, there is no service before the tourists leave. For service quality, the hospitals have service quality management to facilitate the tourists along with the use of innovation and technology in the service and personnel training about service mind and empathy towards the tourists.

According to hypothesis testing, it is discovered that health tourism promoting policy implementation factors including the policy's clarity, resources, and implementing operators have an influence on the health tourism logistic management process in Thai traditional medicine promoting hospitals. Moreover, the result shows that the tourists with different ages lead to a difference in an evaluation of the efficiency and effectiveness of the health tourism logistic management process in Thai traditional medicine promoting hospitals, whereas their different service experience leads to a difference in an efficiency evaluation of the health tourism logistic management process in Thai traditional medicine promoting hospitals. Also, the efficiency and effectiveness of the health tourism logistic management process in Thai traditional medicine promoting hospitals associate with each other and are in the same direction.

A model of the health tourism logistic management in Thai traditional medicine promoting hospitals consists of minor processes underlying the physical flow management, information flow management, financial flow management, service process flow management, and service quality according to a service line from the tourists entering the hospital until leaving.

## ACKNOWLEDGEMENTS

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# CHAPTER 1

## INTRODUCTION

### 1.1 Background and Importance of the Study

Tourism industry has been regarded as one of the fastest growing industries with extreme advancement since 1950, and it is still developing continuously (United Nations World Tourism Organization, 2014). This industry is also perceived to be the largest industry in the world (Chu, 2008, p. 79). Tourism plays a crucial role in improving economic and social systems of a country. It has also become a main source of income for both wealthy and poor countries. Therefore, it brings in various currencies and working opportunities (Tencerio, 2005; Luvanga & Shitunda, 2003; Ministry for Regional Development, the Czech Republic, 2006; Higgins-Desbiolles, 2006; Pearce, 1991, as cited in Constantin & Mitrut, 2007). It also brings civilization to regional areas. Moreover, tourism also takes part in the country's infrastructure development and tremendously creates multiplier effects for other industries or businesses in the economic system (Stynes, 1997). Meanwhile, when a country is faced with an economic crisis, tourism can play an important role in recovering the economy in a short period of time, even faster than the recovery supported by the production sector or by other services (Ministry of Tourism and Sports, Committee of National Tourism Policy, 2011). Throughout recent years, Thai tourism has been ranked as one of the top industries which can produce magnificent revenue for the country, generate income rotation and distribution, and also support the investment in related businesses widely. Overall, Thai tourism is recognized as constantly growing. According to the statistics of tourism income, there were 14,464,228 million foreign tourists in 2007, creating a total revenue of 547,782 million baht. In 2012, the number of foreign tourists was 22,353,903 million, with a total revenue of 776,217 million baht. And in 2013, there were 26,735,583 million foreign tourists, with a total revenue of 1,171,651 million baht, increasing from 2012 to about 395,434 million baht. This was considered the first year that Thailand obtained income from tourism of more

than 1 trillion baht. Recently, 2015 was the most popular year for Thai tourism, with the highest tourist numbers of 29,923,185 million, creating a revenue of 1,457,150 million baht and boosting the statistics up to 20.44% (Ministry of Tourism and Sports, Department of Tourism, 2016). This brings up the statistics from 6.66 in 2014 (Ministry of Tourism and Sports, Department of Tourism, 2015). Over these years, although Thailand had been confronted with extreme internal political conflicts, the number of tourists tends to increase continuously which well reflects the potential and strength of Thailand's tourism industry. As for 2016, the overall number of Thai tourists increased by 16 percent and created a revenue of 1,633,155 million baht, as indicated in Table 1.1 (Ministry of Tourism and Sports, Department of Tourism, 2017)

**Table 1.1** Summary of the Number of Foreign Tourists and Income Obtained from Foreign Tourists in Thailand During 2003-2016

<b>Year</b>	<b>Number of tourists (People)</b>	<b>Income from tourism (million baht)</b>	<b>Average expenses per person/day (baht)</b>	<b>Average stay (days)</b>
2003	10,004,453	324,733	3,775	8.19
2004	11,650,703	403,578	4,058	8.13
2005	11,516,936	385,749	3,890	8.20
2006	13,821,802	506,435	4,048	8.62
2007	14,464,228	547,781	4,121	9.19
2008	14,584,220	574,520	4,142	9.51
2009	14,149,841	510,255	4,011	8.99
2010	15,936,400	592,794	4,079	9.12
2011	19,230,470	776,217	4,187	9.64
2012	22,353,903	983,928	4,393	10.02
2013	26,546,725	1,207,145	4,616	9.85
2014	24,809,683	1,172,798	4,809	9.83
2015	29,923,185	1,457,150	5,142	9.47
2016	32,529,588	1,633,155	5,238	9.56

**Source:** Ministry of Tourism and Sports, Department of Tourism, 2017.

Besides, Thai tourism policy concerns about new tourism market by drawing the attention of tourists who have wealth as well as using each group of tourists' needs to build interest, including families, high salary workers, and special groups like married couples/honeymooners, golf players, health care, and beauty lovers in order to expand the tourist base and draw more tourists from overseas. (Tourism Authority of Thailand, 2013; Korawan Sangkhakon, 2012, p. 1)

By taking a closer look through today's tourists' needs and behavior, diversity and complexity in them can be discovered. The two elements were caused by transition of population structure and tourists' background which creates several new tourist groups. Moreover, as the economy grows and societies develop, a number of the world's population change their values, and this means tourists also have different demands, subject to their desire. Aforementioned changes regarding needs and behavior made tourist destination countries try their best to promote tourism activities, in order to attract tourists to their country, which causes the improvement of tourism products and services to be remarkable and unique, unlike those of their competitors. (Wassana Aiemong, 2004). United Nations World Tourism Organization: UNWTO mentioned that the tourism structure has changed from Sea Sand Sun to an Entertainment Education Environment in order to conform with tourists' behavior, that has been changed (Mustafa, 2010, p. 43).

As a result, the specific group of tourism tends to expand more in accordance with the tourists' behavior which relates to different knowledge and experience they gain during each trip. They also love to be surrounded by pure nature. They focus on co-friendly tourism as well as safety. Moreover, a healthy trend is highly popular among the tourists currently (Tourism Authority of Thailand, 2013), especially in activities regarding health treatment and restoration to balance their body, mind, and soul (Chen, Chang, & Wu, 2013). Now that people around the world concern more about health care for a better living, health tourism becomes a product which is developed in this century. (Kumar, 2009; Haley, 2010; Lunt, Exworthy, Hanefeld, & Smith, 2015; Pocock & Phua, 2011; Reisman, 2010). Consequently, health tourism, a specific tourism that grows rapidly and has become a major part in the tourism industry, attracting tourists significantly.

According to Global Wellness Institute's survey in 2013 on the tourists' expense for health tourism in the countries of which the major or minor purpose is health tourism, the tourists spent about 494.1 billion US dollars on 586.5 million trips in 211 countries worldwide. The proportion of health tourism is 14.6% of the total expense on tourism and is 6.2% of the total number of domestic and international travel in 2013 (Ministry of Tourism and Sports, Department of Economic Tourism and Sports, 2016). As a result, many countries including Thailand focus more on health tourism. In 2012, several countries in Asia earned more than 4,000 million US dollars from health tourism (Sarwar, 2013). As for Thailand, the data from Department of Health Service Support, Ministry of Public Health concludes that in the past 10 years (2005-2015), foreigners who visit Thailand for medical service is 1.2 million times a year on average, while an estimation of the income from medical tourism in 2015 carried out by Kasikorn Research Center is about 96,930 million baht, which is expanding more due to an increasing number of tourists (Ministry of Tourism and Sports, Department of Economic Tourism and Sports, 2016). Besides, there are expenses on other tourism business from health tourism's tourists and followers and on alternative medical services such as Thai massage and spa from healthy people who would like to nourish and take care of their health (Siriwan Chuephudee, 2013).

Although the modern medicine health tourism which is a mainstream world's healthcare is popular, there is still restriction for treatment, cure, and health restoration. Moreover, the change in social context and culture affect the cause of illness. Illness found among people who live in the city are mostly caused by a rush lifestyle, like the consumption of fast food which is high in carbohydrate and fat, working under time pressure, and sedentary lifestyle as well as an economic advancement which causes stress. Chronic diseases are the main cause of deaths among city people (Ministry of Public Health, Department of Health Service Support, 2013) which mainstream medicine cannot meet patients' expectation on their health problems as the curing process causes pain such as chemotherapy and radio therapy. Modern medicine focuses on treating illnesses, not the patient. It solves health problems by healing specific parts of the body where an illness is detected without considering other factors like family, work, lifestyle, society, habit, and personal

health. Moreover, chemically extracted medicine intervening body working process is used which can affect a patient long term. On the other hand, holistic medicine allows all parts of the body, mind, soul, society, and environment to associate with each other. It emphasizes on analyzing the patient in all aspects and situations from their mental state, subconscious state, to emotional state which are all necessary for a successful treatment (Ayuporn Prasitvetchakul, 2014, pp. 39-40). Due to the health problems that modern medicine cannot resolve, most people seek for an alternative. By this chance, traditional Thai medicine, one of the holistic medicine, can provide the patient an all-dimension treatment. Not only are the health problems considered; but the patient's lifestyle, dietary, sleep, daily routine, mental state, and emotion are considered as well to diagnose the illness. Traditional Thai medicine concentrates on these factors as much as the use of modern scientific tools to diagnose a patient's illness. Therefore, the holistic medicine provides the patient a mental satisfaction while receiving a treatment. A method of traditional Thai medicine, which is considered as holistic medicine, does not separate the mind from the body that Thai society has long been familiar with (Uthaiwan Pongboribul, 2014). Although modern medicine plays a major role in today's healthcare system, traditional Thai medicine has been playing a role in Thai society for a long time, especially these days when natural healthcare has become a trend and getting more popular at both national and international level. Traditional Thai medicine which is an indigenous knowledge passed on from generations to generations gets to play more of a role in peoples' healthcare and the country's economic development. The government, acted by Ministry of Public Health, foresees this point and has set up the Department for Development of Thai Traditional and Alternative Medicine to be specially responsible for Thai traditional medicine of which, the mission is to develop Thai traditional medicine to meet the world's standard and quality, to integrate the knowledge of Thai traditional medicine with a complete healthcare service, to develop the knowledge of Thai traditional medicine, to develop a knowledge management system, as well as to protect, preserve, and promote Thai traditional medicine (Ministry of Public Health, Department of Thai Traditional and Alternative Medicine, 2015). Moreover, the government has agreed with the national strategy on Thai indigenous knowledge and healthcare development (Number 2), 2012-2016 of which the goal is to raise awareness

among local communities on the value and importance of supporting the indigenous knowledge development in terms of local medicine, traditional Thai medicine, and alternative medicine; to promote the use of indigenous knowledge on treatment and medicine service; and to improve the alternative medicine's standard including knowledge, location, personnel, medical practice, data system, and medical system, as well as to add it in every main health insurance system. In addition, human resources in the field of local medicine, Thai traditional medicine, and alternative medicine need to be qualified to meet national and international standards (National Strategy Planning's Sub-Committee for Thai Traditional Wisdom Development and Thai Traditional Health Care in 2012-2016, 2012, pp. 2-3). Furthermore, the government plans to improve Thai traditional medicine by combining it with modern medicine at public hospitals so that people can equally gain access to the service. This can be done by improving the public hospitals' standard, promoting the use of herbal medicine more, and provide more service for patients, especially rehabilitating massage. Health tourism is also promoted using traditional Thai medicine. 12 traditional Thai medicine and Thai herbal product centers were established throughout the country: 1) Ranong Hospital, Ranong, 2) Luangpho Pern Hospital, Nakhon Pathom, 3) Chaophraya Abhaiphubejhr Hospital, Prachinburi, 4) Panatnikhom Hospital, Chonburi, 5) Thai Traditional Medicine Institute, Nonthaburi, 6) Research Institute of Thai Traditional Medicine and Hospital, 7) Nopparat Ratchathani Hospital, Bangkok, 8) Jomthong Hospital, Chiang Mai, 9) Patong Hospital, Phuket, 10) Srichiangmai Hospital, Nongkai 11) Sappasittiprasong Hospital, Ubonratchathani, and 12) Damnoen Saduak Hospital, Ratchaburi. Core objectives are to promote Thai indigenous knowledge among Thai people and foreigners, and to be the model of health tourism using traditional Thai medicine for each region (Manager Online, 2009) by applying original health treatment methods as part of the healthcare services which makes Thai healthcare be more diverse, outstanding and acceptable among health-concerned tourists worldwide. Unique Thai traditional treatment methods like Thai massage, Thai hermit exercise, mind and body restoring along with the holistic medicine, detoxification, and personal-based dietary distinguish Thailand's health tourism from other countries which can meet the needs of tourists at all levels, from general to high-class (Natthapol Lilawatthananan, 2016).

Nowadays, Damnoen Saduak Hospital located in Ratchaburi, is a public hospital that follows the health tourism promotion policy by using Thai traditional medicine, and has become a model of health tourism for other public hospitals. The services cover Thai massage, herbal infusion, herbal compression, herbal therapy, health spa, face and body treatment, and a healthcare tour. It is found that Thai traditional medicine clinics have an average number of 20,000 patients per year, or around 15% of all patients which generate an average income of 5 million baht a year. Moreover, the hospital owned clinically proven herbal products and are also sold under a policy of cheap and good products which can help developing Thai traditional medicine more (Damnoen Saduak Hospital, 2015).

Although Thai traditional medicine has played an important role in hospitals, a problem that usually occurs is that the public hospital's service cannot meet customers' needs. According to an evaluation on the service of public hospitals in Bangkok area which is regarded as the center of health service in Thailand, it is found that customer service quality based on the customers' expectation and perception on 5 factors: the service's objectivity, reliability, responsiveness, customers' confidence, and empathy is evaluated as receiving high customers' expectation over their perception. The overall result shows that customers are not satisfied with the services or the services are below standard (Kanokporn Leelataepin, Patchaya Maluesri, & Prathana Punnakittikasem, 2011). Furthermore, lacking of flow during each process is still a problem that might be caused by the staff's lack of attention on assisting the customers to go through each process, or by the hospital's ineffective financial structure. As a result, a major problem of the hospitals is a long waiting queue (Chatree Prakitnanthakan, 2012; Pisith Chanwarasut et al., 2012, p. 10). Problems such as privacy loss, delay in using necessary medical equipment, and delay in medicine reception and payment process can cause inconvenience among the customers which makes the overall customer service ineffective. (Pisith Chanwarasut et al., 2012, p. 10). Therefore, promptitude of the service is at the core of the health service provider because some customers come to the hospital due to their concerning physical health, so waiting a long time may worsen their health condition as well as emotions. They might get frustrated if they do not receive a convenient service which will, at last, impact the curing process (Scottish Executive Health Department.



Scotland, N. H. S., 2003). Thus, service provider should pay attention to the waiting time because it has a huge negative effect on the customers' perception, and is a factor unsatisfying them. Customers will evaluate their satisfaction of the service quality based on the waiting time (Hui & Tse, 1996).

Logistics management related to organizing and coordinating activities to assist the customers to go through every process seamlessly is an essential key leading to an exceptional service, which many organizations pay more attention to as it helps them to improve their competitiveness and fully satisfy their customers (Drucker, 1962) According to a primary study, the researcher finds that the hospitals around Thailand that support Thai traditional medicine can be developed to become the destination of health tourism's tourists who want to have their body cured, treated, and restored. Anyhow, it requires an effective management together with a qualified service that meets the tourists' demands. An interesting issue is the logistics of tourism services (Pairath Piboolrungrach, 2014), which is a management method about planning, processing, and controlling for a seamless progression including product, service, and related detailed storage from the product's origin to targeted consumers in order to respond to customers' demands for their highest satisfaction which is regarded as essential for the hospitals.

The researcher has discovered that there appears to be no studies of logistics management models for health tourism in hospitals. Most studies are just an examination of the quality of hospital services in different dimensions (Meesala & Paul, 2018; Izadi, Jahani, Rafiei, Masoud, & Vali, 2017; Behdioğlu, Acar, & Burhan, 2017; Zarei, 2015. Aghamolaei et al., 2014). In addition, it has been found that most research related to logistics management in hospitals mainly focuses on the management of the flow of drugs, medical supplies, and medical devices as well as the management of the flow of patients (Gutiérrez & Vidal, 2013; Pisith Chanwarasut et al., 2012: 10; Duangphan Kritchanhai et al., 2017). Meanwhile, research related to tourism logistics focuses more on logistics management in tourism businesses, attractions, and accommodation (Takerngsak Chaicharn, 2012; Naiyana Phaibun, 2009; Naphat Thipsri & Khachcechom Chiatrakul, 2015; Thanaphat Thachapan, 2015; Chairit Thongrod, 2016; Odoom, 2012). Nevertheless, research on logistics management in the service sector has not received much attention (Zhang, Song, &

Huang, 2009; Koblun, 2011). Also, there has never been a single study which integrates tourism logistics management into hospital logistics management even though hospitals have become a health tourism destination.

Therefore, the researcher considered that it is truly essential that Thai traditional medicine promoting hospitals implement the logistics management process in order to efficiently move their work processes and flow of the service recipients or tourists and to create satisfaction among the service recipients or tourists in terms of utility, be it the time or place and in terms of operation that maximizes the benefits. This implementation will support the activities included in various steps in the operation of Thai traditional medicine promoting hospitals being carried out in conjunction with providing services to service recipients or tourists with high quality work, which includes good products and services as well as reliability that is accompanied by an efficient operation and the ability to create a competitive advantage (Kritchakhris Na wattanaprasert, 2015). With regard to the reason, this research will be of great benefit to those involved when the post-analysis data and the results of this study are employed in improving and developing better logistics management for health tourism that is in accordance with the expectations of service recipients or tourists. That is to have good products and services which are reliable as well as efficient (Kritchakhris Na Wattanaprasert, 2015). At the same time, in business, efficient logistics management can help operators reduce costs. This means an increase of profits. In addition, logistics management can play an important role in improving the efficiency of operation, enhancing business competitiveness, and creating advantages for an organization (Wadsana Charunsrichotikhamjorn, Suphaporn Munha, Karan Charoensuwan, Kanittha Sripirom, Warang Rammabut, & Cholticha Sanggam, 2017). With the aforementioned reason, the research on a model of logistics management for health tourism in Thai traditional medicine promoting hospitals will be of great benefit to those involved in improving and developing the data after analysis and the results of this study for better logistics management process for health tourism, and for meeting expectations of service recipients or tourists. This will also lead to an increase in the number of service recipients or tourists and can contribute to the economic strength of the country which relies on the foundation of Thai traditional medicine under the preservation of national heritage and wisdom. In addition, this employment will lift the standard of service quality of Thai traditional

medicine promoting hospitals in order for it to be accepted at both national and international levels.

## **1.2 Objectives of the Study**

1.2.1 To analyze the use of health tourism promotion policy in Thai traditional medicine promoting hospitals.

1.2.2 To evaluate the efficiency and effectiveness of logistics management for health tourism in Thai traditional medicine promoting hospitals.

1.2.3 To propose a model of logistics management for health tourism in Thai traditional medicine promoting hospitals.

## **1.3 Research Questions**

1.3.1 How is the result of the use of health tourism promotion policy in Thai traditional medicine promoting hospitals?

1.3.2 How is the efficiency and effectiveness of logistics management for health tourism service in Thai traditional medicine promoting hospitals?

1.3.3 How should a model of logistics management for health tourism in Thai traditional medicine promoting hospitals be?

## **1.4 Significance of the Study**

1.4.1 Understand the use of health tourism promotion policy in Thai traditional medicine promoting hospitals.

1.4.2 Acknowledge the efficiency and effectiveness of logistics management for health tourism in Thai traditional medicine promoting hospitals.

1.4.3 Propose a model of logistics management for health tourism in Thai traditional medicine promoting hospitals.

1.4.4 Other health concerned service providers may adapt this model of logistics management for health tourism in Thai traditional medicine promoting hospitals based on the context of their company's structure and area.

1.4.5 To enhance cooperation between related departments to initiate the model of logistics management for health tourism in Thai traditional medicine promoting hospitals to improve health tourism's quality based on the nation's indigenous knowledge.

## **1.5 Scope of Research**

### **1.5.1 Scope of Content**

- 1.5.1.1 Health tourism
- 1.5.1.2 Public policy and the use of public policy
- 1.5.1.3 Health tourism promotion policy in Thailand
- 1.5.1.4 Logistics management and supply chain for tourism
- 1.5.1.5 Logistics management process for tourism
- 1.5.1.6 Hospital's service quality

### **1.5.2 Scope of Population**

1.5.2.1 Those who are related in the use of health tourism promotion policy in the hospitals that promote Thai traditional medicine include:

- 1) Staff in Thai traditional medicine promoting hospitals
- 2) Health tourists who use services in Thai traditional medicine promoting hospitals

1.5.2.2 Those who are related in logistics management for health tourism in Thai traditional medicine promoting hospitals include

- 1) Staff in Thai traditional medicine promoting hospitals
- 2) Health tourists who use services in Thai traditional medicine promoting hospitals

1.5.2.3 Specialists in logistics management for health tourism in Thai traditional medicine promoting hospitals include:

- 1) Executives of Thai traditional medicine promoting hospitals
- 2) Tour operator and travel agency entrepreneur
- 3) Academic officers in tourism and hospitality field
- 4) Tourism developer

### **1.5.3 Scope of Area**

Criteria for selecting the research areas are as follows:

1.5.3.1 Be a Thai traditional medicine promoting hospital under the Ministry of Public Health;

1.5.3.2 Be a demonstration institute of Thai traditional medicine and Thai traditional medicine product for tourism under the Ministry of Public Health, Department of Thai Traditional and Alternative Medicine; and

1.5.3.3 Be a model hospital for a complete health tourism service such as Thai massage, essential oil massage, foot massage, herbal steam, herbal compress, sauna/skin mask/scrub with Thai herb, Thai herbal facial treatment, essential oil body treatment, or jacuzzi bath therapy in the hospital promoting and supporting Thai traditional medicine, and healthcare related tour programs.

According to the above criteria, Damnoen Saduak Hospital, Damnoen Saduak, Ratchaburi was selected as the study area.

### **1.5.4 Scope of Time**

From the 1<sup>st</sup> of August, 2015 to the 31<sup>st</sup> of May, 2018

## **1.6 Definition of Terms**

1.6.1 Health tourism refers to a tour program that allows tourists to spend an amount of time to heal, treat, and restore their health in a hospital or healthcare service provider after visiting tourist attractions (Tourism Authority of Thailand, Department of Tourism Planning, 2008). In this study, health tourism refers to a tour program that allows the tourists to visit the tourist attractions, then spend an amount of time to treat themselves with Thai massage, oil massage, foot massage, herbal steam, herbal compress, sauna, herbal body mask/scrub, Thai herbal facial treatment, aroma therapy/jacuzzi bath therapy in Thai traditional medicine hospitals.

1.6.2 Health tourists mean individuals or groups of individuals who travel to visit tourist attractions and allocate part of their visit for receiving health treatment and rehabilitation services in a hospital or clinic. As for this study, health tourists refer to individuals or groups of individuals who travel to visit tourist attractions and spend

part of their travel time on services involving Thai massage, aromatherapy massage, foot massage, herbal steam, herbal compress, sauna, skin masking and scrubbing with Thai herbs, facial treatment with Thai herbs, and bathe with essential oils in a jacuzzi in the Thai traditional medicine promoting hospital.

1.6.3 Thai traditional medicine refers to the medical processes related to examination, diagnosis, treatment, prevention or promotion and rehabilitation of health by Thai wisdom by employing knowledge or textbooks that have been transferred and developed from generation to generation.

1.6.4 Thai traditional medicine promoting hospital refers to a state hospital that provides Thai traditional medicine services. As for this study, it is a state hospital that provides Thai traditional medicine and spa services which include Thai massage, aromatherapy massage, foot massage, herbal steam, herbal compress, sauna, skin masking and scrubbing with Thai herbs, facial treatment with Thai herbs, and bathe with essential oils in a jacuzzi.

1.6.5 Health promoting policy refers to guidelines or frameworks set by the government and relevant agencies for operation or implementation regarding the promotion of health tourism in order to achieve set goals. As for this study, it refers to guidelines or framework set by Ministry of Tourism and Sports, Tourism Authority of Thailand, and Ministry of Public Health, Department of Thai Traditional and Alternative Medicine and Thai traditional medicine promoting hospitals to be used in operation or practice related to promoting health tourism in order to achieve set goals.

1.6.6 Following the government policy refers to an execution of a project, activity, or service according to the government policy. In this study, following the government policy refers to an execution of projects, activities, or services related to the health tourism which is a healthcare service using Thai traditional medicine and spa in Thai traditional medicine promoting hospitals according to the health tourism promotion policy released by the Ministry of Public Health, Ministry of Tourism and Sports, and Tourism Authority of Thailand.

1.6.7 An efficiency of logistics management process refers to a capability of managing and cooperating in any activities to assist tourists to go through the origin to destination seamlessly to decrease waiting time, ensure a flawless process, and get the highest satisfaction from the tourists. In this study, the efficiency of logistics

management process refers to a capability of managing the physical flow, information flow, financial flow, service process flow, and the service quality in Thai traditional medicine promoting hospitals to make the tourists go through every step of the service smoothly in order to decrease waiting time, ensure a flawless process, and get the highest satisfaction from the tourists.

1.6.7.1 An efficiency of physical flow management refers to a capability of physical feature management to make the tourists flow smoothly through every step of the service to decrease waiting time, ensure a flawless process, and get the highest satisfaction from them. In this study, the efficiency of physical feature management refers to a capability of physical feature management of the Thai traditional medicine promoting hospitals to make the tourists flow continuously through every step of the service in order to decrease waiting time, ensure a flawless process, and get the highest satisfaction from the tourists.

1.6.7.2 An efficiency of information flow management refers to a capability of information management to make the tourists flow smoothly through every step of the service to decrease waiting time, ensure a flawless process, and get the highest satisfaction. In this study, the efficiency of information flow management refers to a capability of information system management of the Thai traditional medicine promoting hospitals to make tourists flow smoothly through every step of the service to decrease waiting time, ensure a flawless process, and get the highest satisfaction.

1.6.7.3 An efficiency of financial flow management refers to a capability to facilitate customers in the financial process to make them flow smoothly through every step of the service to decrease waiting time, ensure a flawless process, and get the highest satisfaction. In this study, the efficiency of financial flow management refers to a capability to facilitate the customers in a payment process of Thai traditional medicine promoting hospitals to make them flow smoothly through every step of the service to decrease waiting time, ensure a flawless process, and get the highest satisfaction.

1.6.7.4 An efficiency of service flow management refers to a capability to manage a service process and method to make the tourists flow smoothly through every step of the service to decrease waiting time, ensure a flawless process, and get

the highest satisfaction. In this study, the efficiency of service flow management refers to a capability of managing the service process and method of the Thai traditional medicine promoting hospitals to make the tourists flow smoothly through every step of the service to decrease waiting time, ensure a flawless process, and get the highest satisfaction.

1.6.7.5 An efficiency of service quality refers to a customer's expectation towards the service provider including a concrete service, reliability, response to the customer, trustworthiness, and empathy (Zeithaml, Parasuraman, & Berry, 1990). In this study, it refers to the expectation of health tourism's tourists towards the staff in Thai traditional medicine promoting hospitals, which covers a concrete service, reliability, response to the customer, trustworthiness, and empathy.

1.6.8 An effectiveness of logistics management process refers to an achievement and satisfaction from managing and cooperating the projects and activities to make tourists flow smoothly through every step of the service, decrease waiting time, ensure a flawless process, and get the highest satisfaction. In this study, the effectiveness of logistics management process refers to an achievement and satisfaction from the physical flow management, information flow management, financial flow management, service process flow management, and service quality in Thai traditional medicine promoting hospitals to make the tourists flow smoothly through every step of the service to decrease waiting time, ensure a flawless process, and get the highest satisfaction.

1.6.8.1 An effectiveness of physical flow management refers to an achievement and satisfaction from physical flow management to make tourists flow smoothly through every step of the service to decrease waiting time, ensure a flawless process, and get the highest satisfaction. In this study, the effectiveness of physical flow management refers to an achievement and satisfaction from physical feature management of the Thai traditional medicine promoting hospitals to make tourists flow smoothly through every step of the service to decrease waiting time, ensure a flawless process, and get the highest satisfaction.

1.6.8.2 An effectiveness of information flow management refers to an achievement and satisfaction from information flow management to make tourists flow smoothly through every step of the service to decrease waiting time, ensure a



flawless process, and get the highest satisfaction. In this study, the effectiveness of information flow management refers to an achievement and satisfaction from information management of the Thai traditional medicine promoting hospitals to make tourists flow smoothly through every step of the service to decrease waiting time, ensure a flawless process, and get the highest satisfaction.

1.6.8.3 An effectiveness of financial flow management refers to an achievement and satisfaction from financial flow management to make tourists flow smoothly through every step of the service to decrease waiting time, ensure a flawless process, and get the highest satisfaction. In this study, the effectiveness of financial flow management refers to an achievement and satisfaction from financial and payment management of the Thai traditional medicine promoting hospitals to make tourists flow smoothly through every step of the service to decrease waiting time, ensure a flawless process, and get the highest satisfaction.

1.6.8.4 An effectiveness of service process flow management refers to an achievement and satisfaction from managing the service process and method to make tourists flow smoothly through every step of the service to decrease waiting time, ensure a flawless process, and get the highest satisfaction. In this study, the effectiveness of service process flow management refers to an achievement and satisfaction from managing the service processes of the Thai traditional medicine promoting hospitals to make tourists flow smoothly through every step of the service to decrease waiting time, ensure a flawless process, and get the highest satisfaction.

1.6.8.5 An effectiveness of service quality refers to the customer's perception or impression towards the service provider as they have expected covering a concrete service, reliability, the service provider's response to the customers, trustworthiness, and empathy (Parasuraman Zeithaml & Berry, 1990). In this study, the effectiveness of service quality refers to the customer's perception or impression towards the Thai traditional medicine promoting hospitals' service as the health tourism's tourists using the Thai traditional medicine promoting hospital have expected which covers a concrete service, reliability, the service provider's response to the customers, trustworthiness, and empathy.

1.6.9 Logistic management for health tourism in Thai traditional medicine hospitals refers to a management of physical flow management, information flow

management, financial flow management, service process flow management, and service quality of the Thai traditional medicine promoting hospitals to make tourists flow smoothly through every step of the service to decrease waiting time, ensure a flawless process, and get the highest satisfaction

## **CHAPTER 2**

### **LITERTURE REVIEW**

In the study of “A Model of Logistics Management for Health Tourism in Thai traditional medicine promoting hospitals in Thailand”, the researcher has studied related concepts, methods, and research which are demonstrated as the following topics.

- 2.1 Concept of Health Tourism
- 2.2 Concept and Theory of Public Policy
- 2.3 Concept of Public Policy Implementation
- 2.4 A Model and Factor of Public Policy Implementation
- 2.5 Problems on Policy Implementation
- 2.6 Thailand’s Health Tourism Promoting Policy
- 2.7 Concept of Logistics and Supply Chain Management
- 2.8 Concept of Logistics and Supply Chain Management for Tourism and Hospitality Industry
- 2.9 Concept of Tourism Logistics Management’s Process
- 2.10 Concept of Service
- 2.11 Concept of Service Quality
- 2.12 Related Researches

#### **2.1 Concept of Health Tourism**

##### **2.1.1 Definitions of Health Tourism**

Nowadays, health tourism, wellness tourism, and medical tourism are the new terms broadly mentioned in the areas of tourism and service so it is inevitable to clearly understand the true meanings of these terms.

Health Tourism, according to Kaspar, (1996) is a journey from one point to another, or changing accommodation to find physical, mental, and social equilibrium

aiming to use a healthcare service. However, a traveler will stay in a place outside their hometown, permanent residence, or workplace, in order to escape the old environment. Goodrich and Goodrich (1987), state that health tourism is an attempt to provide facilities at a destination to attract tourists by promoting, caring, healing, and providing healthcare facilities to tourists, apart from general facilities. Health tourism is not only a tour program for visiting a natural and cultural tourist attraction which is to relax and learn the local' lifestyle, the tourists also have to spare their sightseeing time for having their bodies healed, treated, and restored by activities like health consulting, a correct way of exercise, massage, herbal steam, herbal compress, meditation, health checkup, medical care, and so on. Health tourism is considered to be healthy and environmentally conscious (Tourism Authority of Thailand, Department of Tourism Planning, 2008). Likewise, Ranees Esichaikul (2014) state that health tourism is an inspiring travel aiming to improve people to be healthy, active, attendant, and maintain their health. In the other hand, health tourism combines body and mind healing at the same time, while maintaining natural and cultural tourism resources and environment.

Wellness tourism refers to a tourism concentrated on wellness; happy living; as well as equilibrium in the body, mind and soul (Myers, Sweeny, & Witmer, 2005, as cited in Smith & Kelly, 2006). It is considered as one type of health tourism (Kaspar, 1996 quoted in Mueller and Kaufmann, 2001). However, The National Wellness Institute (2007, as cited in Smith & Puczkó, 2009, p. 55) defines the term, "Wellness" as a process that people choose to do in order to live their lives blissfully which reflects a positive vision and a way to build a holistic balance including body, mind, soul, wisdom, emotion, social, and career. Additionally, Ardell (1979) states that "Wellness" is a body's condition that demonstrates physical, mental, and soul balance which one can achieve by being responsible for themselves, balancing their body with beauty treatment, eating healthy foods, getting enough rest which is necessary for stress relief, practicing meditation, joining a mental related activity or study, being aware of the environment, and socializing. Mueller and Kaufmann (2001) state that wellness tourism is travelling to a place where it can heal or improve one's health. One can stay in a hotel providing health facilities such as a fitness center, beauty care service, health spa, dietary advice, or dietary control for health

care, weight-losing, relaxation, meditation, mental development activity or study like Buddhism lesson, art class, cooking class, and so on.

Medical Tourism, from Jallad's viewpoint (2000, pp. 11-12, as cited in Harahsheh, 2002), is a travel for a medical purpose to heal illness or to have a surgery under a doctor's custody in a hospital or clinic which a patient or tourist might have to stay there to recover. On the other hand, travel, for a medical purpose to heal a specific illness or to receive a natural resource involving treatment such as hot spring, salted lake, mud, sand, or climatic therapy under the doctor's attendance is called 'curative or therapeutic tourism'. Moreover, Hodges et al. (2012) also noted that medical tourism has a variety of meanings, but it generally means an activity of cross-country travel for the purpose of accessing medical services. These include dental services, screening, diagnosis, and medical treatment.

According to the definition of health tourism, wellness tourism, and medical tourism, it can be concluded that health tourism is a travel that allows the tourists to spend a part of their trip for health improvement activity, to receive a treatment, and to restore their health. Thus, wellness tourism and medical tourism are considered as parts of health tourism. However, wellness tourism focuses more on proper exercise, massage, herbal steam, herbal compression, meditation, relaxation among nature, and holistic health improvement using natural power to freshen up the body, mind, and soul which will strengthen body power and balance, while medical tourism focuses more on health treatment, medical care, and health restoration in the hospital and clinic, for example, health check-up, treatment for illness, dental care, plastic surgery, and sex reassignment surgery.

### **2.1.2 Objectives of Health Tourism**

Bunlert Chittangwattana (2005) states that health tourism is a tourism with the following main objectives:

2.1.2.1 To promote health and life's quality along with developing environmental quality by doing health promotion activities properly such as massage, herbal steam, meditation, and use of herbal products.

2.1.2.2 To heal and restore health by doing health care activities such as health check-ups, treatment for illness, and plastic surgery.

In conclusion, the objectives of health tourism is not only to sustain physical and mental health, healing illness, and restoring health; but it also aims to encourage the tourists to have an opportunity to share their experiences and to socialize while traveling in order to improve their quality of life during their journey leading to the change of behavior, attitude, and social value regarding health promotion and restoration by themselves.

### **2.1.3 Types of Health Tourism**

Health tourism can be divided by tourist objective and demand into two main types (Smith & Puczko, 2009)

1) Wellness or health promotion tourism is a tourism in natural and cultural tourist attractions to relax and experience the local's lifestyle while spending a part of their time for health promotion activities in or outside the accommodation properly based on an international standard. Mostly, the health promotion activities are activities bringing physical and mental pleasure which can be divided into two groups as below.

(1) Holistic health activities are activities promoting physical, mental, social, soul, and emotional balance for a sustainable and happy life. That is strengthening the body to prevent illness, maintaining mental condition, showing empathy to other people, and being able to control the emotion. The activities that can promote those behaviors are yoga, Tai Chi, and meditation.

(2) Leisure and recreation activities are health promotion activities focusing on exercise and beauty care which also bring pleasure to a user such as health massage, spa, herbal steam, herbal compression, healthy food and drinks service.

Therefore, health tourism is considered to be a tourism that brings an awareness of health promotion and quality of life development to the tourists. Nowadays, a destination providing a tour package with a health promotion activity is popular among the tourists and they are likely to choose to stay at a hotel or resort providing global standard health facilities or a fitness center. Therefore, an entrepreneur and service provider should develop their touring programs that include health promotion activities to be theoretically appropriated, qualified, and to meet the standard.

2) Medical tourism or health healing tourism is a tourism in a beautiful tourist attraction in a natural and cultural destination to experience the local's lifestyle and relax while spending parts of the tour for treating and restoring health in the hospital or clinic. Medical tourism or health healing tourism activities can be divided into two types including:

(1) Medical therapeutic tourism refers to an involvement of illness treatment and health restoration while traveling, such as health check-up, illness treatment, dental care, and physical exercise.

(2) Medical surgery is a tourism of which a part of the trip is surgery purpose, mostly focusing on plastic surgery and sex reassignment surgery.

Hence, an entrepreneur and service provider should improve their services by providing a qualified medical tourism or health healing tourism program by cooperating with an international standard hospital.

Tourism Authority of Thailand, Tourism Planning Division (2008) categorizes health tourism similarly to Smith and Puczko (2009) which are:

1) Health promotion tourism/Health and wellness tourism refers to a tourism of a healthy tourist who aims to prevent themselves from illness that can occur by doing a stress relief activity such as exercise, beauty care, spa, and massage. However, tourists like to travel to a natural, relaxing and beautiful destination or to use a health center service, spa, etc.

2) Health healing tourism/Medical tourism refers to a tourism with health treatment and restoration such as health check-up, plastic surgery, and surgery which is distinct from the usual tourism. Not only do the tourists get to receive a treatment or health restoration, they can also spend their time travelling and relaxing at the same time. This can be divided into three types:

(1) Health healing tourism/Medical tourism where the tourists do not have any physical illness, but a mental illness. They would like to search for a way to relax and relieve their stress such as meeting a psychiatrist as well as having physical and mental check-ups.

(2) Health healing tourism/ Medical tourism where tourists have a physical illness and need to receive medical treatment such as surgery and treatment for heart disease or cancer.

(3) Health healing tourism/ Medical tourism where tourists do not have any physical or mental illness, but would like to intensify their beauty, personality, and maintain their wellness with plastic surgery, breast surgery, wrinkle treatment, weight loss, and medical care spa.

In conclusion, health tourism consists of wellness or health promotion tourism and health healing tourism/ medical tourism. Each of them focuses on the different activities, Wellness or health promotion tourism is a tourism for a healthy tourist who would like to strengthen their wellness by involving in healthy activities while health healing tourism/ medical tourism is a tourism that focuses on health treatment and restoration.

#### **2.1.4 Health Tourism Activities and Products**

Smith and Kelly (2006) demonstrate dimensions of health tourism reflecting the tourists' motivation. They tend to an activity and destination based on their personal motivation. For example, those who would like to receive medical services or plastic surgery will decide to go to a hospital or clinic, while those who seek for relaxation and physical stress relief would prefer going to a spa, massage, or doing yoga. The tourists who would like relax or escape from their regular life may determine to relax in a natural destination such as a beach, mountain, or spa. On the other hand, those who seek entertainment and experience from travelling tend to join carnivals and traditional festivals. In addition, the tourists who desire to search for the meaning of life and mind practice will go to a holistic medical center providing a personal development activity that allows them to develop themselves and understand the true identity of their own. The tourists who seek for spiritual peace will choose for pilgrimage to attend a spiritual development activity or to practice yoga to strengthen their body and calm their mind. Meanwhile, those who are interested in the local's lifestyle may offer themselves to be a volunteer for a community that needs assistance such as travelling to build a public facility for the community, being a volunteer for disaster victims or the disabled, which are also considered as self-development.

Health tourism products in Thailand can be divided by a category of health tourism as below:



1) Health promotion tourism product/ Health and wellness tourism product

Health promotion tourism/Health and wellness tourism is the tourism to a beautiful tourist attraction in a natural and cultural destination to experience the local's lifestyle and relax while spending a part of the tour to do theoretically proper and qualified health promotion activities at the accommodation or outside. The tour provides a natural relaxing tour program for the tourists to learn to use natural power to heal and strengthen their physical and mental wellness which can enhance physical power, balance the body and mind, and allow them to adapt this knowledge to daily life (Pathitta Tantivechakul, 2003, pp. 31-34).

(1) Thai massage which is generated from an attempt to relieve pain and bruising by touching or massaging around the area which helps supporting blood circulation, health, body's flexibility as well as preventing joint and muscle pain, and building up a good relationship while massaging.

(2) Foot massage has its basis that all organs link to the foot. Most of them connect to the heels, then spread towards the toes. Thai foot massage uses reflexology which can affect other organs. It helps promote blood circulation as well as lymph node, and stimulate the balanced body systems.

(3) Herbal steam and herbal compression are the processes and methods of health promoting, mental as well as physical treating, and emotion developing by steaming herbs or making a herbal hot compression based on Thai traditional medicine.

(4) Aroma therapy is the process and method of health promoting, mental and physical treating, and emotion developing by using aroma from essential oils or volatile oils extracted from different parts of herbs such as flower, leaf, root, fruit, and bark. The aroma can be applied by simply inhaling it, mixing it in the water, or applying it on the skin and massage throughout the body.

(5) Hydrotherapy is health promoting and healing activities using several methods related to water as the key to enhance one's physical strength including under water aerobics which can improve health because water tension can support the body, reduce fat, and accelerate muscle building.

(6) Mineral water bathing or hot spring bathing is a natural tourist attraction which has been developed to become a famous health tourist attraction. A belief has it, that drinking or bathing with mineral water can heal and improve health. The service is known as “spa”. Thai people have known about the benefits of mineral water for a long time. Today, many mineral water bathing and hot spring services are available around Thailand such as Ranong, Chiangmai, Chiangrai, and Tak; however, they haven’t been developed enough to compete with modern health tourism’s destination like those in other countries.

(7) Thai hermit exercise is considered to be a key to stay healthy by moving body parts properly with power to allow the body to release sweat. The movement of each part of the body should be associated with each other such as bones, joints, muscles, and internal organs. A harmony between the body movement and breath is at the heart of Thai hermit exercise, so meditation is a must to help calming the mind from stress.

(8) Buddhism meditation is a method to calm your mind among beautiful nature, or advance meditation at a temple in the forest with correct instruction to relieve stress in the daily life, as well as to learn the eastern life and spiritual philosophy which helps stabilize emotion and create mental immunity.

(9) Healthy food and drinks service refers to a food or drink recipe made with herbs which benefits the body and mind as herbs contain all the nutrition the body needs. In Thai traditional medicine’s aspect, eating according to a person’s element will benefit a human body, which consists of earth, air, water, and fire. It is believed that when all elements are in balance, no illness will occur.

(10) Herbal products for health and beauty is the use of natural and herbal extract in cosmetic products to decrease danger and chemical allergy such as shampoo, soap, massage oil, skincare, herbal hot press, and so on which tend to be more popular nowadays. Moreover, they can be useful for promoting health tourism in the hotel as well.

## 2) Health healing tourism product/Medical tourism product

(1) Medical care service in the hospital today is not only for a medical care purpose, but also for and health care purpose. Therefore, many hospitals, especially private ones, develop their medical products to be more various to meet

customers' demand which leads to a medical service business improvement. Moreover, the growth of tourism industry and increasing number of tourists targeting medical care services has become a new income source for the private hospitals as this group of customers has high affordability while Thailand's cost of living is lower than other countries. This allows them to be able to afford a cheaper service, so Thai private hospitals get even more popular each year. The most popular services among foreigners are bone surgery, cosmetic surgery, a surgery to cure heart disease and gastrointestinal disease, dental care, and other health check-ups.

(2) Medical spa is a medical treatment and healthcare program by a doctor and specialist using the combination of natural healing and modern medical technology. It is a medical service in a spa-like environment, for example, acupuncture, detox, and smoking rehabilitation program.

Apart from the medical services in the hospitals and clinics, the tourists of health healing tourism also like to use healthcare services at the spa as they can have treatment in relaxing environment and use the spa service to improve their health at the same time.

Nowadays, many private hospitals and clinics develop their medical products to attract more tourists by combining health promotion service with medical service to satisfy both sick and healthy customers who would like to improve their health. The new medical product comes in a form of medical spa.

Spa used to be regarded as an alternative medical treatment. According to research, it is found that people who bathe in mineral water have less free radicals than those who bathe with regular water. However, it takes a long time to see the results, so modern medical treatment is applied to accelerate the effect, and later it became a new type of spa called 'medical spa'.

Medical Spa has gained popularity in Thailand over the last 5 years. it is a spa with modern medicine, Thai traditional medicine, and alternative medicine services under the control of Ministry of Public Health. Apart from beauty treatment, medical spa also cures disease like diabetes, high blood pressure, heart disease, problems related with joints and bones, and menopause (Health & Cuisine, 2014).

### **2.1.5 Health Tourism Products in Thai Traditional Medicine Promoting Hospital**

Health tourism products in Thai traditional medicine promoting hospitals are the result of the integration of Thai traditional medicine into health services for servicing recipients or tourists. Thai traditional medicine can be regarded as a philosophy, knowledge, and way of life for health care and traditional therapies or treatment of diseases that are in line with Thai tradition, cultures and lifestyles. The practice methods of Thai traditional medicine doctors consist of: use of Thai herbs (through boiling, baking, compressing, and balling), treatment by hands, and traditional bone treatment. Moreover, Thai traditional medicine also focuses on eating the food according to individual's physical element and ignoring food that does not correspond to the physical element. It, at the same time, emphasizes the practice for mental peace, the practice of dharma, and meditation. In addition, Thai traditional medicine also believes that to consider whether a person is healthy or not will depend on the influence of seasons, time, and genetics (basic element). If the body lacks the balance, it will be encountered with illnesses. This may be due to food or health care of oneself (The Institute of Thai Traditional Medicine, 2004).

Thai Traditional medicine has been continuously developed because most people pay attention to care, treatment and rehabilitation of health holistically. It can be said that Thai traditional medicine focuses on both physical and mental health. It gives the service recipients mental satisfaction, along with physical therapy. With this popularity, the concept of employing Thai traditional medicine in public hospitals as well as the development of health tourism products occur. As for health tourism products in Thai traditional medicine promoting hospitals, they are:

2.1.5.1 Herbal medicine: Herbal medicine is used for healing and promoting health together with Thai traditional intellect to heal a disease. The Government Pharmaceutical Organization (GPO)'s instant herbal medicines are mainly used, such as turmeric capsules, kariyat creat tablets, senna tablets, phaya yo cream, plygesal cream, and garlic tablets. Also, some service providers also produce their own products such as ply oil, balm, cassia tablets, and herbal drinking powder. These herbal medicines are used to cure disease and heal illness in the gastrointestinal tract, respiratory tract, and skin disease. In addition, aloe vera, turmeric, and

ringworm bush are being studied in a comparative research between with modern medicine, and they are getting positive scientific results.

2.1.5.2 Thai massage is a Thai indigenous intellect passing on from generation to generation. In Thai traditional medicine promoting hospitals, the massage is divided into 2 types (The Institute of Thai Traditional Medicine, 2004, pp. 111-112):

1) Thai traditional massage is a massage by a commoner. A massage pattern may be different depending on each local culture which is suitable for the commoners to massage each other by using both hands and other body parts such as foot, knees, or elbows to form the flexible free-form massaging. It has become a popular massage style today. In the past, Thai massage was not a well-instructed system, but the knowledge was passed on from generation to generation within families. An instructor selected a qualified person in the family or acquaintance who wished to learn the massage and would ask to be his student. There is a teacher respect ceremony before teaching. A student will be privately trained by the instructor starting from exercising the fingers by squeezing bee wax candle to strengthen fingers and hands, followed with tendon line theory, disease theory, basic massage, and important massage point. The student gets to practice the lessons by massaging the instructor and accompanying the instructor which requires high patience in order to master Thai massage.

2) Royal Thai massage is a massage by a royal doctor who provides the King and Royal Family with treatment. This kind of massage takes only a short time with a polite style hand-massage, but yields a highly effective result. Its technique is called “Hold, Focus, and Calm”. In the course, “therapy” method is contained to improve the masseurs’ skill. (Pennapa Supcharoen et al., 2006, p. 4)

2.1.5.3 Herbal compression is various kinds of herb, mostly the ones with aroma oil packed together and steamed until hot, then its aroma oil will come out. It is applied to the pain area. Hot temperature from the compression can improve blood circulation, and the skin will absorb some important extracts which can help relieve aches and pains (The Institute of Thai Traditional Medicine, 2004, p. 144). According to the study of Pennapa Supcharoen (as cited in The Institute of Thai Traditional Medicine, 1996, p. 29) on a massage therapy at Thai Traditional Medicine

Demonstration Center, which is the most renowned for massage therapy, it found that customers who have the massage therapy are usually served with a massage together with herbal compression to decrease inflammation effect and enhance efficiency of the massage.

2.1.5.4 Herbal steaming is a therapy and health promotion based on Thai traditional medicine by boiling various kinds of herbs containing aroma oil and healing herbs resulting in a particular cure altogether. Steam, aroma oil, and inhalant from those herbs will contact the skin resulting in a particular spot. Inhaling it will effect the respiratory system and the whole body. Therefore, healing with herbal steam which is absorbed through the skin and breath can improve blood circulation, relieve stress, detox the body, relax muscle and tendons, improve the respiratory system, decrease allergy, cure basic skin disease, relieve pain, beriberi, and urticarial. The effect is more significant when used together with other health promoting medicines properly (The Institute of Thai Traditional Medicine, 2004, p. 140).

Herbal medicines, Thai massage, herbal steaming, and herbal compression are generally found at most of Thai traditional medicine promoting hospitals, Damnoen Saduak hospital also provides other different health promoting services (Damnoen Saduak hospital, 2016) such as:

- 1) Sauna: steaming in sauna rooms which allows pores to open for useful herbal extracts.
- 2) Natural scrub: a scrub made by many natural ingredients such as Thai herbs, salt, and milk which gently removes old cells and reveals new, healthy looking skin.
- 3) Skin mask: another way to refresh the skin by masking with Thai herbal products.
- 4) Aroma oil bath or jacuzzi bath covered with flowers peels and other natural ingredients
- 5) Herbal product for health and beauty such as shampoo, soap, massage oil, skincare, and compression

It is obvious that health tourism products in Thailand as well as Thai traditional medicine promoting hospitals are various, and they can meet the tourists' demand well. However, Smith and Puczkó (2009) describes types of service usage of the targeted tourist groups as below table:

**Table 2.1** Types of Service Usage of Customers or Target Group

<b>Type or Place of Service</b>	<b>Type of Activity</b>	<b>Objective</b>	<b>Type of User</b>
Traditional spa	Mineral water bath, massage, sauna, steam room	Physical therapy and healing	The elderly
Day spa and Hotel spa	Beauty treatment, relaxing massage, aroma therapy	Beauty and relaxation	High income people, business tourists, and female tourists
Recreational spa	Warm pool, hot steam	Physical therapy, relaxation, and enjoyment	Family
Seaside resorts and thalassotherapy	Hydrotherapy, salt scrub, and aroma	Physical therapy and beauty care	High income hotel customers and the elderly
Yoga center	Yoga, meditation	Physical and spiritual health	Women aged from 40
Meditation place	Meditation	Mental and spiritual health	The elderly and working people (the baby boomers)
Medical center and hospital	Surgery, cosmetic surgery, and dental care	Physical and cosmetic	Western tourists aged above 30

**Sources:** Smith and Puczko (2009, p. 134).

According to the data of health tourism customers, it is found that most of them are female tourists aged above 30, while male tourists and tourists aged below 30 are quite low.

## **2.2 Concept and Theory of Public Policy**

Policy is the core of an organization's management and operation. It is an outline and guideline of planning, decision making, and other procedures. In addition, it is a tool for coordination, control, and specification of framework for an effective operation.

### **2.2.1 Definition of Public Policy**

Anderson (1984, p. 3) broadly mentions that public policy is an act of which the objective is for an individual or group of individuals to follow in order to solve a particular problem. This conforms with Kulthon Thanapongsathorn (1992, p. 563) who describes public policy as a broad guideline specified by the government (at any level) in advance leading to an action to achieve the objective. However, Nage (1984, p. 1) and Dye (1984, p. 1) mention that the policy shall be specified by the government while Anderson (1994, pp. 5-6) state that public policy can be developed by a governmental organization, governmental officer, political party, politician, or private organization that might be influential on the development of the government policy. Dye (1984, p. 1) states that the government shall decide whether to follow the policy or not whereas Nage (1984, p. 1) states that public policy is the government's decision to solve public problems such as foreign affairs, environment, crime, unemployment, etc. Likewise, Thawanrath Worathepphuthipong (1997, p. 10) also describes public policy as the government's guideline to solve a current problem while adding that their policy planning is for preventing and avoiding any problems in the future as well as for a satisfying result. On the other hand, Supachai Yaowaprapas (1995, p. 3) states that public policy is a guideline for governmental activities including the ones in the past, present, and future.

Public policy shall consist of a main concept showing the objective and its detail (Friedrich, 1963, p. 70, as cited in Sombat Thamrongthanyawong, 2006, p. 12) as well as specification of a framework or work plan. The government's project which is a public policy should be in accordance with a social value. It should provide a guideline to achieve a goal (Lasswell & Kaplan, 1970, p. 7, as cited in Sombat



Thamrongthanyawong, 2006, p. 12). However, it should have a clear objective to follow (Anderson, 1994, pp. 5-6).

Main characteristics of the public policy in the aspect of Anderson (1994, pp. 5-6) include:

1) A connection between public policy and action leading to a particular achievement or clear result.

2) A combination of courses or patterns of continuous actions by governmental organization rather than a specific decision for some cases only. Public policy covers enactment of law, regulation, and decision hoped to be enforced or performed.

3) Public policy aims to response to people's demands on people's or individual's policy. It indicates what the government needs to do or not to do, and it is a response to issues proposed by the private sector or representatives of other governmental organization who are responsible for each issue in order to process such issues.

4) Public policy should be the actual action plan, not what government plans to do, or just state that to do.

5) Public policy can be positive or negative. Some are set up to solve a problem for the society or people.

According to the mentioned definitions, it can be concluded that public policy means principle, procedure, or broad guideline specified by the government, organization, or a legally authorized person under a particular political system to use as a guideline for making decisions when processing missions in the way that demonstrates a good executives' and organizations' process and result which will lead to the right decision and direction to achieve the objective.

### **2.2.2 Importance of Public Policy**

Policy is necessary for management as Vijit Srisa-an, Thongin Wongsothorn, and Kejkanok Auewong (2008, p. 8) compare it to a compass and ship rudder, which are important for a voyage. The compass will assist to find the way while the rudder controls the ship to head to the right direction. Therefore, the policy is important for

the management and operation as the importance of the compass and rudder to a voyage.

Sombat Thamrongthanyawong (2015) adds that the policy is essential as a tool for the government to manage the country in several aspects as follows.

1) It is an essential tool for setting the direction for the national development. The direction and focus of the national development mainly depend on each government's policy. An outline of the policy impacts on the success or failure of the development. In some countries, they have a policy to close the country and not to associate with others because they want their country and people to be solitary without any external influences. However, this policy can highly impact on the country's advancement and people will be restricted by underdevelopment.

2) It is the government's tool to respond to people's demand. Generally, people, as members of the nation, are partially responsible for sacrificing to the nation such as joining the conscription and paying tax. Therefore, the government too is responsible for setting a policy that meets the people's demand such as a policy on education, public health, social welfare, and employment.

3) It is a policy to solve major problems. The problems have different levels of severe and characteristics in each country, but every government must focus on solving their people's problems, especially major problems that need to be solved first such as poverty and lack of education.

4) It is the government's use of power to arrange social value. Policy setting normally plays an important part in social value arrangement. For example, some societies place an importance on human rights, so their policy will not be against human rights; or in the society whose policy focusing on sexual equality, the government is not allowed to set the policy against the sexual equality.

5) It is the government's tool to promote social fairness which has become a major political ideology in modern days. That is any governmental policy must aim to create economic, social, and political fairness in the society. In the economic aspect, the government shall abolish the policies that support monopolies and support free economic competition instead in order to create economic fairness. Allowing people to freely compete in the economy will increase production quality and service quality which the fair purchase and service will benefit them. In addition,

it is one of the major movements in deleting “the clustered rich and the expanding poor” condition. In the social aspect, the government shall provide social welfare to people equally in terms of education, public health, social insurance, employment insurance, and retirement pay based on a principle that those who pay tax to the government must receive this welfare equally, not only a particular group of people. In the political aspect, the government shall promote political right and freedom among people without limitation of sex, religion, nationality, or race. For the justice in a process of judgment, everyone must be protected by law equally without limitation of economic, social, or political status so that they are treated equally.

6) It is the government’s tool to create equality among people. Naturally, each human being was born with unequal ability. Some have science or mathematic ability while some have ability in arts, sports, etc. These natural differences do not mean that only human beings who have a particular ability will be successful in their lives. If the government supports them to be able to equally receive opportunities to develop their skills, anyone with different skills can be successful in their lives.

7) It is the government’s tool to distribute income to people. One of the major missions for the government is to distribute income to people fairly. A development’s objective the government desires is to allow the majority to get the benefit from the development fairly and widespread in order to eliminate a gap between the rich and poor, or at least diminish it as much as possible. Therefore, a good government must attempt to set a policy that encourages a fair income distribution.

8) It is the government’s tool for spreading advancement towards rural areas. In the society where urban and rural communities are much different, the government shall set a policy encouraging advancement expansion towards the rural areas to reduce the gap between urban and rural communities as well as emigration into the urban area. A policy to expand political, administrative, management, and financial authority towards the rural areas in order to allow people to set their own management outline for a concrete development plan and self-reliance in the community is an important fundamental for public utility, public assistance, and telecommunication distribution. It makes the community to be a center of self-reliant

manufacturing and service. Success of the policy will lead to the reduction of emigration rate.

9) It is the government's tool for science and technology development which is one of the national development to make the country potentially self-protective from other countries' exploitation because science and technology development is a key fundamental of manufacturing development for both products and services. The production that increases a product's value will provide people with a high return which will make them gain a higher income and higher quality of life. In addition, it helps maintain economic stability and reduce trade and service deficit. In case it can be developed to the same level as the countries that have science and technology potential, it will surplus the balance of trade and service which will increase the country's and people's stability.

10) It is the government's tool for environmental preservation. Nowadays, environmental issues have come into the global society's attention more than in the past. The government of some countries might not pay attention to this issue much, but they will eventually be pressured by mighty nations to provide a defensive measure for environmental preservation. Meanwhile, the countries with more middle class people will be asked to pay attention to the environment. People will request the government to set policies and measures to promote environmental preservation as well as air and water pollution control. Moreover, some private organization performing environmental preservation activities, like NGOs may play a role in suggesting and encouraging people in the communities to participate more in the environmental preservation. They may also play a role in opposing against any governmental projects that affect the environment. As a result, environmental preservation and pollution control policy become an important policy which people pay more attention to. Now that more people are aware of the value of quality living, the government has to establish an organization to be responsible for these issues directly in order to assure people that they seriously pay attention to the environmental issues and to abide by the policies.

Apart from these mentioned importances, Prachum Rodprasert (2004, pp. 16-17) briefly states that the policy plays an important role in the management:

1) The policy will help the executives to know what to do, how to do, and which factor is required. It will help them to perform their tasks confidently.

2) The policy will help personnel at every level of an organization to understand their organization's mission as well as the way to achieve it. Also, it will help facilitate the coordination between organizations.

3) The policy brings an operation goal. It helps saving management costs, such as workforce, operation's budget, material, equipment, and machine which are greatly necessary for the management.

4) The good policy will help supporting the executives' use of power in a right, rational, and fair way which will bring trust, loyalty, and work spirit from their subordinates.

5) The policy will lead to the development of management. Moreover, it will help save time and bring about the coordination that helps stabilizing the organization. It is the outline leading to the executives' decision to be more rightful, fair, and accurate.

According to the abovementioned importance, it is obvious that the policy is necessary for management in many ways, especially as a management framework for the government and organizations. It informs personnel in every related department about the operation's procedure and mission. Furthermore, it helps clarify the operation's target, encourage the executives to use their power rightfully, and lead to improvement of the management. Therefore, significance of the policy is being an operation's framework which has 4 aspects as follows:

1) The policy is the outline for organizational, social, and national development. Organizational policy effects everyone in the organization like the national policy effects people in the country. Therefore, the policy is necessary as it effects all related persons, especially the public policy which effects all people. Everyone gets an advantage and disadvantage from the public policy. Hence, the government needs to declare their policies to the cabinet before beginning their country's administration. A good policy is considered a good management outline which will lead the country to advancement, well-being of people, equality, justice, stability, and peace.

2) The policy is a framework for planning a short-term or long-term plan, economic and social development plan or national education plan, as well as governmental or private organizational plan. Basically, objectives and policies are essentials to be specified, so the policy becomes an important outline for planning.

3) The policy is a scope for decision. A good policy directs the decision into a correct direction fast and helps save time.

4) The policy is a framework for controlling and following up the operation's processes, as mentioned previously that the policy is like the ship rudder which is important for controlling the ship's direction. The policy is necessary as it is a framework for controlling and following up the operation's processes of the responsible department. They will use it as a framework to follow up the operation of the related department and how far the processes go; whether their operation conforms to the policy; and how progressive the operation is.

Besides the importance of the policy, Knezevich (1969, pp. 217-218) states that the values of the policy are:

- 1) It brings responsibility to related persons
- 2) It leads to a straight decision
- 3) It leads to a seamless process
- 4) It helps save time
- 5) It promotes public relation
- 6) It prevents pressure from other groups
- 7) It decreases negative critics on bad management
- 8) It brings management direction
- 9) It leads to a systematic review, and
- 10) It builds good relationship between persons in charge

It can be noticed that the public policy plays an important role to the policy maker as well as people as a tool for directing the country's administration and development which can also meet peoples demand and solve problems. Moreover, it is useful for the executives and employees of the organization in carrying out the mission assigned based on the public policy with necessary resources.

### 2.2.3 Characteristics of Good Public Policy

Prachum Rodprasert (2000) mentioned characteristics of good policies as follows:

1) It should conform with the organization's objectives and be able to help the operation achieve the objectives.

2) It should be made based on facts, not a personal opinion or uncertain data. However, the opinion and external response should also be considered when making the policy.

3) It should be made before the operation by setting a method and organizing resources in accordance with the operation. However, detail of the operation's method should not be specified. It should be opened for those who are responsible for the operation to interpret and follow in accordance with their ability, current situation, and existing resources.

4) It should be made to respond or benefit the majority, and the policy should be prioritized based on the importance and necessity.

5) It should be concise and simple written statement which all members of every level in the organization can understand clearly.

6) A scope and duration of the policy should be specified. That means an organization has various missions and responsibilities, so it is impossible to set a policy that can cover all missions and responsibilities. Moreover, as time passes, situations change. So, the policy once made will not be suitable with the new situations. In conclusion, a good policy must be under the scope of the objective and be flexible-be adaptable to the new situations constantly.

7) It should be a public relation center of the departments in the organization. Any departments in the organization can use it as their operation's guideline and can always use it to coordinate with other departments whose missions are different from them.

8) It should be made to cover future situations as well. However, it should be based on the thoroughly analyzed data. Making a policy for the future situations will help harmonizing the work proceeding future work, and will help them to be seamless.

9) It should be in accordance with the organization's external factor. That means it must conform with laws and regulations in the society. In addition, it must be in accordance with public interest or opinion.

#### **2.2.4 Policy's Structure**

Friedrich (1963) mentions three essential components of policy making which are: targets of the mission, means of the operation, and resources supporting the action based on the policy. The detail are as follows:

1) Setting the policy's target is to set a policy to achieve a mission. The first important element is target, which can refer to both purpose and end result in the way of what to do, what to get, and what for.

2) Setting the policy's mean relies on the policy's principle and criteria which is considered an important element. A policy maker must have knowledge and prepare first. The means of the operation also refer to tactics and strategies.

3) There are two supporting factors in policy making: external and internal. The internal factors are people, money, material, equipment, and method of policy making while external factors are political, economic, and social environment, or even weather. If one of them has a severe effect, the policy might not be able to achieve the target. So, the amendment of the policy is required to be in accordance with the changing circumstance.

In conclusion, the important components of policy making are setting the target on what to do, what to get, and what for; setting the operation's means as the principle and criteria for the policy as well as tactic and strategy which will help the policy to work efficiently; and supporting factors including external and internal factor which the policy needs to be adjusted to match with the factors.

#### **2.2.5 Policy's Procedure**

Policy's procedure has several steps each of which has particular characteristics and departments involved. In each step, scholars have different points of view in categorizing the public policy's procedure.

Lasswell (1956) explains whether a policy is good or correct or not does not depend on a rational determination procedure or an academically correct procedure. Lasswell mentions about seven steps of the rational policy making as below.



1) Research and data collection: a step of acknowledging a problem and the majority's demand as well as each group of people's demand. A person who knows this information can be any person or organization responsible for referring the organization's or the outsiders' problems and demands to the organization's policy making procedure. Mostly, the person who knows the information tends to be a personnel or organization in governmental system more than other sectors.

2) Approval and suggestion on the policy: in many cases, service users or the organization's employees might propose or encourage the organization to proceed a policy by themselves or by sending their opinions through the organization that can initiate the policy. Suggestion on the initiate of the policy can be done in many ways both directly and indirectly such as showing their support or objection as well as giving information.

3) Setting the policy's outline: in this step, when a related person or organization receives the information or suggestion about the policy from the resources, he might consider it and make a proposal or drafted policy to encourage the policy making. The proposal can be done through an administrative and political procedure and submitted to an authorized person for approval, respectively. Setting the policy is considered as the most important step. Lasswell suggests that to consider any information or suggestion, to set the policy and to approve it, the authorized person of each step must make a decision based on rationale and academic principles; evaluate the policy's suitability, possibility, and worthiness; and consider the benefits for the majority. After approved, the policy will be enforced for the organization's employees and related persons to acknowledge and follow.

4) Adjustment of the policy's mechanism and environment: some public policies can initiate a new change. Enforcement of the policy might not be able to be done immediately because there is no management mechanism to do its work in accordance with the policy. Since an old operation system can be an obstruction for proceeding a new policy, it is necessary to adjust the policy's management mechanism or environment to be ready for following the policy.

5) Policy implementation: in this step, the related organization will acknowledge the policy and follow it which can be done by many ways, such as

proceeding an activity related to production, service, public relation, law/regulation enforcement, and so on.

6) Evaluation of the policy: this step relates with an evaluation of the policy's achievement and effect as well as assessment of opinion, satisfaction, and response from a target group and other groups who gain and lose the benefit from the policy.

7) Improvement and adjustment of the policy: after getting the result of achievement and effect evaluation, the policy maker shall use it to improve and adjust the policy to be more suitable.

Afterwards, many scholars pay more attention to the policy's procedure. Although many of them accept its origin from Lasswell, they attempt to explain about the study of the policy's procedure by dividing its procedures in different ways. Dror (1968) divides the policy's procedure into three major steps:

- 1) Preparation for policy setting
- 2) Policy setting
- 3) Post-policy setting

Dror (1968) explains that major keys of the third step are encouraging to implement the policy, implementing the policy, evaluation after implementing the policy, and giving feedback to connect every mentioned step.

Baker, Michaels and Preston (1975) mentions about three steps of the policy's procedure, which each of them associates with each other:

- 1) Policy setting
- 2) Policy analysis
- 3) Policy implementation

Anderson (1975) mentions about five steps of the policy's procedure including:

- 1) Formation of a problem
- 2) Policy setting
- 3) Acceptance
- 4) Implementation
- 5) Evaluation

On the other hand, Jones (1977) categorizes a policy's procedure as follows:

- 1) Indication of a problem including recognizing and understanding the problem, giving its definition, collecting and arranging the problem, and proposing options as a representative
- 2) Policy setting
- 3) Enacting law and regulation
- 4) Policy implementation
- 5) Studying the policy's result
- 6) Improvement or termination of the policy

Besides, Dye (1981) sees the policy's procedure as an activity consisting of five steps:

- 1) Problem indication
- 2) Preparation of policy proposal
- 3) Policy announcement
- 4) Policy implementation
- 5) Evaluation of the policy

According to the aforementioned concept of the policy's procedure from several scholars, it can be concluded that the public policy consists of five steps: formation of the policy, policy setting, deciding the policy, policy implementation, and evaluation of the policy.

1) Problem formation is a study of the occurring problem on what it is and how it will effect. The study requires a procedure to understand the factor or impact of the formation.

2) Policy setting to respond to the occurring problem can have more than one outline which needs to be considered by choosing an option that agrees with a target group.

3) Deciding the policy is making a decision on which policy to choose in order to respond to the problem.

4) Policy implementation is a step of policy transform from a purpose of problem solving. To transform the policy to a plan, appropriateness of the resources as well as participation of related sectors in the policy's procedure should be considered.

5) Evaluation of the policy is the last step after applying the policy to obtain the data to evaluate the success or failure of the policy.

It can be noticed that the policy's procedures closely associate and connect with each other. They aim to solve public problems and benefit the majority.

## **2.3 Concept of Public Policy Implementation**

### **2.3.1 Definition of Public Policy Implementation**

Policy implementation is the main process of the policy's procedure. Mazmanian and Sabatier (1989) as well as Rungreung Sukhapirom (2000) say that the policy implementation is a process following the policy setting done by a department, person, or group of persons to manage the existing resources for achieving the policy's objective. The policy can be transformed to a plan, project, or activity for continuous implementation which will benefit those who need it. Likewise, Van Meter and Van Horn (1975) say that the policy is an activity proceeded by a person or group of persons from the government or private sector to achieve the policy's objective which were decided earlier, In case of a governmental policy, it is a duty of the permanent governmental officers to follow the policy which is considered more complicated than their regular work and requires creativity. That means once the government sets the policy, the permanent government officers are responsible for accomplishing the policy by transforming the abstract policy to be the concrete one, and then implementing the concrete policy to achieve its objective Thawanrath Worathepputhipong (1997). Moreover, Williams (1971) also states that policy implementation is an organization's capability to collect management resources to make them practical for achieving the organization's objective which requires arrangement and preparation of processes with constant efforts to achieve the policy implementation. Policy implementation has two main points: 1) the implementation should be persistent which requires clear activity process. It is not just a temporary activity held for a short period and terminated, or occasionally done. It has to be an activity continuously done, and each step should associate with each other all the time 2) the policy implementation is proceeding an activity in order to achieve the policy's objective (Suranath Khamanarong, 2003). Moreover, Sombat Thamrongthanyawong

(2006) further explains that the policy implementation reflects the success or failure of the policy. Also, it relates with the majority of people since it requires determination towards the practice which will direct the option's direction for achieving the objective. Similarly, Pressman and Wildavsky (1973) also state that the policy implementation is to achieve or complete the procedure, or to make it productive. It is considered as a process associating with objective setting and practicing to achieve the objective.

According to the above definitions, it can be concluded that the policy implementation is an organization or department's process to implement the specified policy using the existing resources in order to achieve the objective indicated in the policy.

### **2.3.2 Related Sectors of Public Policy Implementation**

In the policy implementation, many sectors are involved including: (Hogwood & Gunn, 1984; Woradech Chantharasorn, 2011)

1) Political sector including the congress and cabinet who take part in setting the scope of the policy implementation for the governmental system. Setting the scope can be done by enacting a law, governmental policy, the council agreement, royal enactment, royal decree, and plan of each ministry, department, and division. The political sector is the one who initiates or proposes the policy.

2) Departments in the governmental system which are considered as the most important organization for the policy's procedure and policy implementation as they are responsible for, or have a major mission in that activity directly.

3) Governmental officers or governmental staff are considered mainly involved with or influencing on the success or failure of the policy implementation. Their involvement in the policy implementation can be divided into many levels such as an executive of the organization, project manager, project operator who have different motivations, targets, and values which can lead to different behavior. The chief executive of the department is essential in supporting the policy while the project manager is a person who transforms the chief executive's support or intension for a chief officer who is responsible for the project implementation. Meanwhile, local officers have to interpret the policy statement into practice by themselves. If the

policy is not clear, it will lead to a problem on the policy implementation. For example, a project's policy effecting the governmental officers' daily duty might cause the officers' ignorance or incorrect understanding.

4) Persons effected by the policy are service users, profit receivers, or profit losers in forms of a person, group of persons, private company, and NGOs during the policy implementation.

From the above mentioned, it can be concluded that all sectors related with the public policy like the political sector, departments and organizations, governmental officers, and effected persons are regarded as a stakeholders of the policy with different duties.

### **2.3.3 Process of Public Policy implementation**

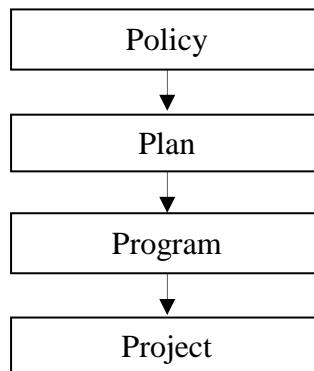
A study of the policy implementation process is the study of each process in implementing the policy which relates and connects with organizations and persons at several levels from the federal organization who initiates the policy to the local one who implements the policy as well as the target group of the policy (Ruengwit Kedsuwan, 2008, p. 46; Woradech Chantarasorn, 2008, p. 32)

Several scholars explain two steps of the policy implementation process which are macro implementation and micro implementation (Berman, 1978).

1) Process of macro implementation involves a process of policy setting done by the federal organization, and the local organization must follow it. This means the macro implementation will cover micro level as well. It can be divided into two main steps: policy transform and policy acceptance.

(1) Policy transform: in implementing the policy, after a national administrative sector which are the congress or cabinet sets a policy, objectives, and scope in forms of a law, cabinet's agreement, or regulation; there will be resource and budget allocation as well as assignment of a central organization who will be responsible for the policy implementation at ministerial and department level. They will transform the policy in to a plan, program, and project for the regional and local organization to follow, respectively (Mayuree Anumarnratchathon, 2006, p. 227). The policy's goal, objective, plan, program, and project should be related to each other. Chumphon Nimpanich (2011, pp. 247-248) explains about two types of the

relationship. The first type is a vertical relationship which is a hierarchical structure of the relationship showing a major part and minor part between the policy, plan, program, and project, respectively. For example, it can be seen that the policy is above the plan, so it means that the policy must be set before making a plan to support it. Likewise, the program is under the plan while the project is under the program, respectively as shown in Figure 2.1.



**Figure 2.1** A Vertical Relationship Among the Policy, Plan, Program, and Project

**Source:** Chumphon Nimpanich (2011).

The second one is a horizontal relationship, which the plan is a connecting point between the policy and implementation after transforming the policy to be a concrete one. That is the policy must be set before transforming it from the abstract form to the concrete one which is in a form of the program and project followed by the implementation as shown in Figure 2.2.



**Figure 2.2** A Horizontal Relationship Among the Policy, Plan, Program, and Project

**Source:** Chumphon Nimpanich (2011, p. 248).

Generally, a process of transforming the program to the project consists of important activities like a study of the policy's objective and content; research of supporting program and project to achieve the policy's objective;

specification of each program's and project's objective and indicator; comparison of each program's and project's pros and cons; analysis of all the program's and project's political, financial, administrative, and technical possibility; and conclusion of the procedure analysis's result which is a step of indicating the best option as well as the analysis's detail.

(2) Policy acceptance: when the central organization transforms the policy to an outline, program, or project, they must make the local organization at both regional and local level as well as other related sectors accept the policy and follow it (Mayuree Anumarnratchathon, 2006, p. 228; Chumphon Nimpanich, 2011, p. 256; Woradech Chantarasorn, 2008, p. 36).

2) Process of micro implementation starts from the local organization accepts the outline, policy, program, and project that comes from the central organization, and implements it by adapting it to be a work plan that matches with the context of the environment and their organization's norm while matching with the policy set by the central organization as well (Mayuree Anumarnratchathon, 2006, p. 228). In implementing the policy, interaction and change are required for a project owner and lower organization who works for the project to jointly obtain the benefit which is called mutual adaption. Moreover, the essence of micro implementation is a local operator's decision. Berman (1978) divides micro implementation into 3 steps including:

(1) Mobilization: in this step, the local or local organization will proceed with two activities, which are considering the policy for acceptance and seek for support from members in the organization, key persons, other local organizations, and other related persons to set a program or project of the local organization together. The difference of the policy implementation depends on the seek for support and other related factors (Chumphon Nimpanich, 2011, p. 256; Mayuree Anumarnratchathon, 2006, p. 229; Woradech Chantarasorn, 2008, p. 36).

(2) Deliverer implementation: this step is directly associated with an operator. It covers the adjustment of the accepted policy or project to be a practical one. It also covers the operator's behavior of decision making, implementation planning for a regular work, or applying equipment for the implementation as seen appropriate. Since the local operators' behavior on decision making are different from



each other, the implementation cannot be in the same pattern (Woradech Chantarasorn, 2008, p. 39).

(3) Institutionalization or continuation: this step depends on the local operator, especially a local executive who has to be a leader encouraging the operators to be aware of the importance of the policy continuously. During this step, the policy's outline is adjusted and accepted as the operators' regular duty which they have to follow willingly as their regular work. To build institutionalization or continuation, the executive needs to use organizational development concept as well as to build motivation, participation, and encouragement among the operators for commitment and acceptance of the project (Mayuree Anumarnratchathon, 2006, p. 229; Chumphon Nimpanich, 2011, pp. 308-309).

In conclusion, there are two major steps of the policy implementation: macro implementation and micro implementation. The federal organization sets a policy and has to make the local organization follow the policy by using a suitable method. This is called macro implementation. On the other hand, after receiving the policy, the local organization has to set their own policy that matches with the national policy. This is called micro implementation.

## **2.4 Models of Policy Implementation**

Policy implementation is a process following the policy setting. It is an activity to be completed in order to accomplish goals and objectives of the set policy. However, the public policy is not always as planned. There must be organizations or people who can implement the policy to achieve its objectives, so there are many factors related to policy implementation. As a result, many scholars have established concepts and models describing how to implement policies. The researcher uses models of policy implementation established by the scholars as follows:

### **2.4.1 Van Meter and Van Horn's Public Policy Implementation Model**

Van Meter and Van Horn (1975) proposes an assumption model of policy implementation called a model of the policy implementation process which includes six variants connecting with the policy and implementation's result.

1) Policy's standard and objective: it is an important factor that decides capacity of the policy. Setting an indicator for the policy's capacity is the first priority. That is the policy's standard and objective must agree with the fact. In some case, it can be noticed and assessed easily.

2) Policy's resources: besides the goal, objective, and indicator which are the policy's standard, the policy also consists of resources which includes a budget and other support to help make the policy implementation effective.

3) Communication between organizations and activity promoting the policy implementation: policy implementation requires communication for transferring the goal and objective towards departments and related persons at every level of the organization. Since communication is a complicated process which a communicator is a main obstruction who can miscommunicate the goal and objective, communication for a successful implementation requires clarity, accuracy, and consistency during the communication process.

4) Formality and informality of the organization: it influences the ability to follow a policy standard both directly and indirectly which relates to the staff's attitude, structure of the relationship between the staff and governmental departments who have tendency to either restrict or support the policy implementation.

5) Economic, social, and political condition: economic, social, and political conditions influencing the policy implementation are the factors that had been ignored in the past. However, it is widely acknowledged that they have both a direct and indirect effect on the policy implementation.

6) Cooperation or response of persons in charge of the policy implementation: understanding of persons in charge of the policy implementation plays an important role, and is considered as one of the factors impacting the policy's result the most. This factor, focusing on the persons in charge, consists of three components:

- (1) Perception and understanding of the persons in charge of the policy;
- (2) Direction of the persons in charge's response to the policy; and
- (3) The persons in charge's level of acceptance to the policy

These three components are the conditions found in every person in charge. The policy cannot become successful if the persons in charge of the implementation reject it from the beginning. The rejection can come from the goal and objective that opposes to the persons' personal value, benefit, or interest which can be solved by encouraging them to participate in setting the policy's goal and objective from the beginning.

#### **2.4.2 Edward's Policy Implementation Model**

Edward (1980) sees that the study of policy implementation model starts from an abstract with questions like what basic conditions bringing success to the policy implementation are, and what basic obstacles impeding the success of policy implementation are. To answer these questions, Edward has proposed to consider the following four factors.

1) Communication: to make policy implementation effective, those who are responsible for making decisions on implementing the policy need to be aware of what they are doing. The command over the policy implementation must be delivered to those responsible properly, which has to be clear, precise, and consistent.

2) Resources: no matter how clear and certain the command over policy implementation is, and no matter how precisely the messages are conveyed, if those responsible have no resources necessary for the work, the policy implementation cannot be effective at all. Therefore, any related authorities who can ensure that the implementation will be as planned have to provide facilities such as location, tools, and budget needed for the work properly.

3) Attitude of the persons in charge of the policy implementation: It is an important factor that influences on the success of policy implementation. Whether the policy implementation will be effective or not, those who implement it must not only know what to do or what they can do, but they also need to be willing to make it successful.

4) Bureaucratic structures: even if the resources are enough for the policy implementation, those who have to implement it know what to do, and they are willing to make it successful, there can still be some problems in policy implementation. It is because the bureaucratic structures are inconsistent with the

policy implementation. Segmentation of the organization might be an obstacle for the coordination necessary for implementing the policy effectively. One fundamental concept of every organization's structure is the standard of work's regulation which helps saving time, so that those who implement the policy can make decision on their regular work faster, and it will help creating patterns of practice for the staff in a large and complex organization. At the same time, it can bring flexibility as the staff from one place can move to another conveniently. Moreover, there will be equality in law enforcement. One disadvantage of the organization's regulation standard is that there is no assessment for its improvement to be suitable with the changing environment. So, it becomes an obstacle for the policy implementation.

#### **2.4.3 Cheema and Rondinelli's Public Policy Implementation Model**

Cheema and Rondinelli (1983) have developed a model of decentralization program implementation process to be used in the study about decentralization program in policy implementation in Asia. It focuses on the study of local organizations' performance in rural development which emphasize on the following factors:

- 1) Environment condition: environmental factor and social structure influence on the policy implementation. Understanding about social, economic, and political conditions is highly essential for the success of the plan. Especially, the influence of the environment conditions might be the factor either supporting or restricting the success of the policy. Examples of the significant environmental factors are the political system, policy determination structure, resource limitation, social and culture factor, benefit of the policy for the organization, and the adequacy of the physical infrastructure.

- 2) Relationship among organizations: policy and plan implementation is directly related to an interaction and coordination among organizations. So, successful policy implementation depends on adequate elements in activities of local, regional, and national organizations. It also depends on context of private organizations (NGO) and other advantage groups. Therefore, theories and mechanisms for coordination and interaction between different levels of the organization are the most important feature for designing the organizations.

3) Organization resources for the policy implementation: an effective organization design leading to the successful policy implementation requires political, administrative, and budget support.

4) Characteristics and capabilities of implementation agencies: internal characteristic of the organizations is another factor influencing the successful policy implementation, and it is an indicator for the determination of the policy's result.

5) Results and impacts of the policy: an evaluation of the success of decentralization policy can be done in two ways. The first way is the evaluation by considering the basis of objectives stated in the government's policy documents. They can be examined by using proper indicators. The second one is the evaluation from social impacts and results of their development by considering the development's goals of development that are generally accepted. Within the decentralization model, the implementation's result and the policy's effect are variables affected by independent variables as mentioned earlier which are environment conditions, relationship among organizations, organization resources, and implementation agencies' characteristics and performance.

#### **2.4.4 Mazmanian and Sabatier's Public Policy Implementation Model**

Mazmanian and Sabatier (1989) have set a concept of policy implementation analysis by considering the relationship among factors that affect the policy implementation as well as other fundamental factors related to the study of policy implementation. Mazmanian and Sabatier categorize variables that relate to policy implementation into three groups:

1) A group of variables in the aspect of the policy's ability in problem solving: regarding the policy's ability to solve social problems, sometimes the social problems are easier to solve than the problems caused by the implementation of the government's policy. For example, a noise pollution problem in the city can be easier to solve than a safety problem of power production from a nuclear plant. It is noticeable that the policy's ability to solve the noise pollution is that it can indicate the solution as there are not many solutions, and it has only few effects on people. From this example, it can be concluded that the factors impacting the successful policy implementation are as follow.

(1) Having an academic theory as a correct guideline with supporting technology: Sabatier and Mazmanian state that the change will lead to the change of a target group's behavior, and technology development will change the target group. In addition, there are other policies believing that technology changes the target group's behavior although it will not be able to achieve the objective.

(2) Diversity of target group's behavior needs to be controlled: the more diverse the behaviors are indicated in the policy, the harder the policy can be clear and successful.

(3) Percentage of the target group from the population: generally, the less the percentage of the target group who wants to change the behavior are, the more advantage the policy implementation will obtain. Also, it can achieve the objective easier.

(4) Extent of the target group's behavior needs to be changed: a number of behavioral changes indicated in the policy's condition and objective refers to a number of persons in the target group along with the number of change they want. The more the behavioral change's demand is, the harder the work to solve the problems will be successful.

2) A group of variables in the aspect of the policy's ability to set an implementation structure: a primary determination of the policy implementation requires identifying a problem and transforming it into an objective to achieve. Furthermore, it must be able to build an implementation structure by selecting an implementing agency, allocating a budget to them, or offer other agencies a chance to implement it. According to the scope of the policy transformed into a clear objective along with the theories related to the behavioral change that can help achieve the objective, there are seven variables that needs to be considered:

(1) A policy underlying a valid theory: indicating a condition of the objective and authorizing an implementing agency can help them to work as proposed, and they can achieve the objective. This theory consists of two components which are "academic validity" and "effectiveness of the implementation". The first component is related to a relationship between the target group's behavior and achievement of the policy's objective whereas the latter is related to the implementing agency's ability to change the target group's behavior which affects the target group the least.

(2) Precision and clear of the policy's objective: prioritizing the related policies is necessary for the evaluation as well as a clear direction of the staff's work and adequacy of the existing resources for supporting the implementation based on the set objective.

(3) Implementing agencies with adequate financial resource: finance is extremely important for personnel and staff employment. Also, it is used for technical analysis related to the policy setting, project management, and examination of cooperation from the agencies.

(4) Integration of the agencies and hierarchies within and among the implementing agencies: according to the result of a study on social service policy implementation, it is found that a major obstacle of the implementation is difficulty in requesting for cooperation from representative agencies or between semi-absolute authorized agencies. So, integration among the related agencies is the most important thing for the policy implementation which can be evaluated by indicators like a number of opinion or clear goal that will help achieving the objective.

(5) The implementing agency's rules for determination supporting the achievement of the policy 's objective: apart from a clear and precise objective in implementing the policy, it is important to consider the motivation bringing the cooperation from the implementing agencies which can be done by a vote to help making a decision.

(6) Work assignment for a person or agency related to the policy implementation in accordance with the policy's objective: it can be considered from a responsible agency which they have to see that the policy to be implemented has high priority, and it must focus on a selection of an implementing agency that supports the policy's objective properly.

(7) A participation of outsiders in the policy implementation: it is considered from a target group who gets benefit, legislative, administrative, and justice institute how much they participate in the policy implementation process.

3) A group of variables that is not the policy's condition effecting the policy implementation: the policy's results from the implementing agencies usually have a relationship between a legal structure and political procedure. Meanwhile, the policy provides only a few guidelines which does not quite allow the implementing

agencies to work independently because there will always be political uncertainty and internal problems in the local area. So, a good policy setting can solve these problems. It will be a suitable guideline that helps dealing with people's protest against the change for a short period, and it helps encouraging the behavioral change wider. This group of variables consists of six important variables:

(1) A variation of the government's economic, social, and technology decision in each period of time impacting the policy's objective: this variation consists of 1) a variation of social economic condition impacting the policy setting 2) a variation of social economic conditions in a local area and seriousness of problems leading to obstacles restricting the success of the implementation 3) a support of environmental policy, people's welfare, and workforce's safety which is related to a variation of economic conditions, and is important for the overall economic system 4) in case of a policy directly related to technology, a continuous change or lack of change in the concept or pattern of technology is highly important. In conclusion, economic, social, and technology conditions are basic variables effecting the policy's result from the implementing agencies, and they motivate the implementation to achieve the objective.

(2) A level of continuity of the media's interest to the problem: the media is important to the policy implementation because of two reasons: 1) the media is a key variable for identifying a conclusion among social economic changes and encouraging people to accept the change 2) a tendency of a television and newspaper media to play more roles in changing people's attitude among many groups of stakeholder.

(3) A variation of people's support on the policy: people can support the government's implementation procedure by three ways which are 1) giving opinions 2) showing legal evidences focusing on the policy's value, especially in case there are major opinions 3) conducting a poll by organizations.

(4) A change of resource and people's attitude towards the policy's objective and result from the implementing agencies: basically, people's interest declines as time passes. A new policy usually draws people's attention, especially a policy related to social problems like consumer protection. People's interest will fade when they or the media pay attention to other policies instead. To solve this problem,



the agencies have to consider that problem first, and they require support from the implementing agencies as well as the country's leader to decide to accept it to be a policy.

(5) A continuous support on the policy implementation from a leader or authorized group: a quantity and direction of the ignored problems as well as a scope of the new policy and conflict policy must be considered. One problem that usually occurs during the implementation is that the agency tries to work aiming to achieve the leader's objective whose policy is different from theirs. For example, different work's directions of the leaders who come from different political parties can cause an ignorance of problems and change in the use of financial resources and the agency's regulations.

(6) Leadership and policy acceptance of the implementing agencies: this variable is very important and influential to the policy's result from the implementing agencies. It consists of two components: 1) direction and hierarchy of the objectives in each policy 2) prioritizing skill such as an ability to consider the most effective way to use the existing resources. However, leadership skill is another concept that is hard to explain. Everyone is aware of its importance, but they apply it in different ways depending on the situation. Also, it is difficult to predict how one can achieve the policy's objective by using the limited resources they have.

#### **2.4.5 Hambleton's Policy Implementation Model**

Hambleton (1983) has studied a concept of policy planning and a governmental agency's work. He proposes a concept called policy planning system used in analyzing the policy implementation. He proposes an analysis of the policy planning system concept by using three theories: 1) procedural planning theory 2) inter-organizational theory and 3) financial crisis theory. According to his study, five factors that are the important components of the policy implementation procedure are taken into consideration: 1) policy conveying factor 2) implementing agency diversity factor 3) implementing the agency's aspect and ideal factor 4) resource factor and 5) political factor related to policy planning.

Hambleton (1983) considers on a significant technique inevitably related to the policy implementation that is the policy planning system, a technique widely used

in many countries. Due to an increase of an ineffectiveness of the implementation planning and the need to place more importance to the policy implementation procedure, the concept of policy planning system is adapted which it consists of the following components

- 1) An analysis of the policy's problems and needs emerging in local environment conditions as well as a survey on their relationship;
- 2) A coordination among departments or agencies that are not related with each other leading to a need to create a cooperation within and outside the organization;
- 3) An emphasis on the policy, especially on its role specified by the central organization reflecting the political impact on the development of public service in the future;
- 4) The budget's role is to transform from a financial controlling tool to a decision assistant aiming to achieve the project's objective;
- 5) An appropriateness of an innovation for proposing new ways to respond to people's changing demand; and
- 6) An effectiveness examination for the policy, project, and implementation in order to achieve the objective by learning from past experiences and applying the new knowledge to improve the policy planning steps

However, Hambleton (1983) has observed the policy planning system and suggested that one should be careful of the differences between each type/field of the policies which leads to the difference of the policy planning system in each agency. Therefore, to understand the difference, he studies the policies in several aspects such as health, social service, land usage, and investment in residential property.

Hambleton (1983) uses the policy planning system to explain the phenomenon occurring in the policy planning and implementation procedure by using the above three theories to show advantages of the use of policy planning system as follows:

- 1) Procedural implementation planning theory: it is a theory based on a concept of general systems. It focuses on the use of the policy planning system to find a valid solution for a problem which is related to a search for an objective of a systematically analytical policy, a search for the policy's option, and a systematic evaluation of the option. This theory helps an agency to learn from past policy implementation

2) Inter-organizational theory: this theory focuses on using the policy planning system to motivate resource exchange between organizations and within the organization which need to rely on each other. The resources include implementation regulations, financial resources, political resources, and information. The theory aims to reduce conflicts within the agencies by negotiation on the resource usage and benefit between and within the agencies.

3) Financial crisis theory: this theory focuses on using the policy planning theory to propose to control the financial centralization resource instead of allowing local agencies to work independently in order to respond to the local's demands and pressure from the upper level agencies by motivating payment. The financial centralization will help preventing financial crisis.

Hambleton's (1983) explanation on the relationship between policy planning and policy implementation is similar to several scholars. That is, considering both procedure as Top-Down and Bottom-Up. The policy and implementation should be considered as they associate with each other. The policy planning is like an upper procedure or administrative procedure while the implementation is a lower procedure or the implementing agency's duty to achieve it. Using the policy planning system to analyze the procedures helps combine the Top-Down policy concept with the Bottom-Up policy concept. The system will consider these procedures as continuous procedures which have interaction and negotiation with each other constantly.

#### **2.4.6 Woradech Chantarasorn's Policy Implementation Model**

Woradech Chantarasorn (2008) has collected models from several scholars who had conducted a study. He aims to synthesize the concepts obtained from the studies and develop them to be models for theories for using to explain what factors the organizations that can implement the policy, program, or project efficiently needed to have as a key condition that will help the policy, program, or project to be successful. There are six models allowing the policy to be implemented which are:

1) Rational Model: this model is based on an assumption that the successful policy requires a clear objective and mission, assigning work and specifying working standards for sub agencies in the organizations, performance evaluation system, and reward and penalty standard. As the policy implementation

starts from setting a clear objective to make an implementing agency understand the goal or the policy maker's demand. Understanding the goal helps the implementing agency to set their mission, assignment, or particular responsibility of each department to match with the policy's objective which will help them coordinate smoothly. Moreover, it helps the evaluation system to be efficient, and the efficient evaluation system with clear work standard will make the penalty system to be fairer which fairness of the system will enhance working standards as well.

2) Management model: this model mainly focuses on the organization's capacity. It believes that success or failure of the policy implementation depends on the implementing organization's capacity whether it meets the agency's expectation. The organization needs a proper organizational structure, adequate professional personnel in terms of both administration and technique, readiness of materials, equipment, location, utilities, and budget. The model attempts to solve problems found during the implementation, such as budget shortage, professional personnel shortage, delay in professional personnel recruitment, delay in planning a work system, solving a coordination related problem.

3) Organization development model: this model mainly focuses on building commitment and acceptance to respond to people's psychological and social needs as well as the organization's participation under an assumption that "participation leads to efficient teamwork". A successful policy implementation is associated with persuasion, appropriate leadership, commitment building among the organization's members, participation for the acceptance, and teamwork oriented instead of control or power usage in form of a commander or supervisor. It is in conflict with the reality to separate that policy planning should come from a higher level and policy implementation should be a lower level's duty. However, it is important to encourage the implementing agency to be aware of the policy's importance and to realize that success of the policy implementation comes from their participation in policy or policy outline planning. It can be said that the organization or agency has two major parts of the implementation's component:

(1) The policy must have clear objectives which can be conveyed for the implementation correctly and properly by the agency; and

(2) An ability to succeed the implementation which is similar to the generally specified objectives and goals. A level of the policy implementation's

success depends on below five factors: 1) A clear policy's or project's objective 2) A clear mission and assignment 3) Work standard specification 4) Creating a suitable evaluation system 5) Creating a suitable penalty standard

4) Bureaucratic process model: this model is based on a sociology concept describing a large organization with many regulations and procedures, formal relationship structure, and fixed merit system. However, it does not have only a formal relationship structure, but it has an informal one as well which is usually the case with lower level government officers because they are familiar with people the most, and they make decisions on public services for them based on their consideration. Since their supervisor cannot control or follow them all the time, the factor that can judge a success or failure of the policy is willingness of persons in charge of the policy, plan, program, or project to make an effort to perform official duties, or face a number of obstacles. Readiness for the policy implementation comes from two factors: 1) a policy maker's level of understanding on the actual conditions of the organization or agency, problems, and limitations like overloaded work, shortage of experts, lack of motivation, and lack of support 2) a level of acceptance or agreement on the policy and policy adjustment to match with a normal mission or to be a part of each personnel's official duty.

5) Political model: a concept of this model is that the policy is an allocation of value in society. As a result, in each policy, there will always be both benefit gainers and benefit losers which, basically, they will place a value on the policy differently and focus on their own benefit as a priority. So, it is difficult to make every sector agree and follow the policy cooperatively. The model sees that a number of related agencies is a key for negotiation. The less the related agencies are, the more chance they will agree with each other. In case of negotiation among several agencies, players' negotiation ability will be related with personality, knowledge, ability, negotiation skill, an authorized person's status and organizational resource, and support from persons or organizations such as a key person, a leader of related agency, media, and other groups of stakeholder.

6) Integrated model: this model is like a combination of the other five models such as a combination of management, organization development, and political model. There are four independent variables as follows.

(1) A variable on planning and control efficiency: it is one of the important conditions for a successful policy implementation which includes clarity and possibility of the policy's objectives and goals, mission and work assignment, work standard specification, monitoring and control, policy evaluation, and fairness of the penalty.

(2) A variable on the organization's or implementing agency's capacity: it includes the organizational structure, budget, personnel, material, equipment, and location.

(3) A variable on leadership and participation: for the successful policy implementation, an executive should apply his leadership skill properly, persuade his subordinates in a positive way such as rewarding or praising their ability and encouraging them to participate in the work in order to build commitment along with creating an efficient team.

(4) A variable on politics and external environment management: this variable is extremely important for the success of the policy implementation because the concept is that the success of the policy implementation comes from the ability of players or the organization, group, or institute representative, and relationship with the organization's external factors. It consists of a level of support or protest from various departments, a level of dependence between organizations, negotiation ability to external environment, and condition of economic, social, and political change.

According to all of Woradech Chantarasorn's (2008) models, it can be concluded that the factors impacting the policy implementation are as follows:

1) Policy: clarity of the policy's objectives and goals, suitable supporting theory, accordance with the target group's demand, accordance with the federal organization's policy or other related policies, and indicator and a clear achievement standard specification.

2) Mission and work assignment: clarity of the implementation procedure, the project's accordance with the main policy's objectives and goals, simple implementation procedure, specification of work's regulation, penalty, and reward, and allocation of authority and duty.

3) Resource: sufficiency of financial resource, readiness of material, equipment, utility, and location, appropriateness of the financial resource allocation, and resource allocation towards various agencies.

4) Implementing organizations: organizational structure, complexity of interaction and network in the organization, flexibility of the implementation, the organization's implementation regulation, number of personnel, feature of organizational communication procedure, and capacity of the policy implementation in the past, formality of the organizational interaction and coordination, feature of the organization's learning skill, and implementation standard specification.

5) An executive and policy maker: the executive's leadership, skill and understanding on management, authority, the executive's support, the executive's participation, complexity of determination procedure, and ability to solve a problem about the delay.

6) Implementing personnel: attitude towards the policy, performance skill, knowledge and ability, acceptance's level on the policy's goals and objectives, willingness to work, loyalty to the organization, adaptability to the change from the policy, ability to learn from the past experience, well-trained personnel, and a scope of change on the implementing personnel.

7) Environment: economic, social, political, and technological impact, effects from the protest against the policy, impact on social ethic, political and legal support, and support from the government's federal and local organization.

8) A target group and service users: attitude towards the policy, understanding on an advantage and disadvantage of the policy.

9) Coordination and cooperation: ability to coordinate among each department or organization responsible for the implementation, number of related agencies, and level of cooperation among the related agencies.

10) Public relation: type of the media used for the public relation and communication as well as the public relation's impact on the implementation and target group.

11) Planning and control: control's efficiency, control, supervision, and evaluation method, promotion measure, and effect on the implementing personnel.

12) Examination and evaluation measure: evaluation of the program, project, and activity being proceeded.

The above policy implementation models show an attempt to create a theoretical model to generalize the policy implementation more. They widely cover groups of variables, and theoretical, rational, and resulting concept are specified as assumption models used for inspecting the reliability of the relationships which can be specified to be in line with each case study.

Apart from the aforementioned models, there are policy implementation factors proposed by other scholars as follows:

#### **2.4.7 Sombat Thamrongthanyawong's Policy Implementation Factors**

Sombat Thamrongthanyawong (2006) emphasizes on the following policy implementation factors:

1) Source of the policy: administrative sector's announcement or order, law's detail, cooperation between legislation and administrative sector compared with the total population, a scope of demand for the change of law enforcement which is considered as the government's key policy, higher level government officers who are in charge of policy initiation and development, and the court's consideration and diagnosis which the judgment considered the last process is a public policy which is important in every society.

2) Clarity of the policy: it is a crucial fundamental of both formal and informal policy's goal. The policy with clear objectives will encourage the policy implementation to be cohesive and be able to achieve the objectives efficiently. The clarity depends on identification of condition of the policy's problem, clear specification of related persons to solve the problem, specification of the target group effected by the problem, and evaluation of the resources properly used for problem solving.

3) Policy support: sufficient political support is necessary, but it is not a sufficient factor for the successful policy implementation. The factors used for considering the policy support include the policy initiator's level of interest and the group of stakeholder's level of interest.

4) A complexity of management: in the aspect of coordination between organizations, each of them might add their personal objectives into the policy which



distorts the policy. So, to ensure that projects are carried out in accordance with the objectives, the project's evaluation, objective setting, and consideration of the implementing personnel's motivation factors are required. Moreover, to implement the policy efficiently and effectively as well as to have a close relationship with the organization's management structure, a highly complicated organization or the organization with a too long hierarchy of supervisors should be avoided as it can distort the policy's objectives as well.

5) Implementing personnel's motivation: it is directly related with the work and motivation factor that motivates the implementing personnel to attempt to achieve the work. Also, Thai bureaucracy lacks information about marketing making it difficult for them to understand what the motivation, reward, or penalty for the implementing personnel are.

6) Resource allocation: as every society has limited resource, prioritizing the plans and projects is necessary for using the existing resources in the most efficient way. The resources used for the implementation include costs, time, personnel, technology, and essential equipment. The limited resources are the important factors for the success of the implementation, so it is extremely essential to use it in the most efficient and effective way along with allocating them properly.

#### **2.4.8 Somphon Fueangchan's Policy Implementation Factors**

Somporn Fueangchan (2009) proposes factors determining the success or failure of the policy implementation as follows:

- 1) Content of the public policy
- 2) Cooperation between implementing agencies: if they seriously cooperate with each other and have positive attitudes towards a person who issues an order or policy, the policy will be implemented and tend to be successful
- 3) Type of the implementing agency
- 4) Policy's objective: clarity or vagueness of the objectives effect the implementation differently. More or less success of the objectives depends on the clarity and coherence
- 5) Full communication and coordination
- 6) The implementing personnel's attitude

As mentioned above, it is noticeable that the policy implementation models and factors proposed by both foreign and Thai scholars have various variables related with each other both in similar and different ways depending on the contexts, problems, or types of policy. The policy implementation variables/ factors can be concluded as in Table 2.2 below.

**Table 2.2** The Factors Related to the Policy Implementation

<b>The variables and factors related to the policy implementation</b>	<b>Van Meter and Van Horn (1975)</b>	<b>Mazmanian and Sabatier (1975)</b>	<b>Edwards (1983)</b>	<b>Cheema and Rondinelli (1987)</b>	<b>Hambleton (1980)</b>	<b>Woradech Chantarasorn (2008)</b>	<b>Sombat Thamrongthanyawong (2006)</b>	<b>Somporn Fuengchan (2009)</b>	<b>Total</b>
Policy/clarity of the policy	✓	✓		✓	✓	✓	✓	✓	<b>7</b>
Organization/organization structure	✓		✓	✓		✓		✓	<b>5</b>
Organization's leader		✓				✓			<b>2</b>
Implementing personnel	✓		✓	✓	✓	✓	✓	✓	<b>7</b>
Communication	✓		✓	✓		✓		✓	<b>5</b>
Coordination and cooperation						✓			<b>1</b>
Evaluation/reward and penalty						✓			<b>1</b>
Target group						✓			<b>1</b>
Resources	✓	✓	✓	✓	✓	✓	✓		<b>7</b>
External environment	✓			✓	✓	✓			<b>4</b>
Support		✓				✓	✓		<b>3</b>

According to Table 2.2, the researcher categorizes by collecting the variables and policy implementation, and specifying the main topics or issues which are the

mutual issues of the policy implementation variables or factors including policy/ clarity of the policy, organization/organization structure, organization's leader, implementing personnel, communication, coordination and cooperation, evaluation/ reward and penalty, target group, resources, external environment, and support, respectively.

For the study of implementation of the health tourism promoting policy in Thai traditional medicine promoting hospitals, the researcher selects the variables/factors proposed by several scholars and in accordance with the issue to be studied as follows:

1) Clarity of the policy: it is an essential fundamental for success and efficiency of the goal. It can be considered from a clearly set goal, objective, and procedure, the policy agreeing with a current situation; projects and activities planned to reflect the policy implementation; and a clear indicator and standard of the successful policy implementation (Van Meter & Van Horn, 1975; Mazmanian & Sabatier, 1989; Cheema & Rondinelli, 1983; Hambleton, 1983; Woradech Chantarasorn, 2008; Sombat Thamrongthanyawong, 2006; Somphon Fueangchan, 2009).

2) External environment: it refers to political, economic, social, cultural, and social value conditions influencing the policy encouragement, possibility of the policy, and the success of the policy implementation (Van Meter & Van Horn, 1975; Cheema & Rondinelli, 1983; Hambleton, 1983; Woradech Chantarasorn, 2008).

3) Organization structure: it's associated with work relationship based on a supervision structure. A proper organization structure arrangement will help the implementing personnel save time, make decisions about their regular work faster, and make the implementation flexible. A proper organization structure arrangement; duties, tasks, and responsibility assignment; and flexibility of the implementation are key factors to the efficient policy implementation (Van Meter & Van Horn, 1975; Edwards, 1983; Cheema & Rondinelli, 1983; Woradech Chantarasorn, 2008; Somporn Fuengchan, 2009).

4) Resources: it refers to a key factor to the efficient policy implementation including a budget, personnel, material, equipment, location, and technology. It can be considered from adequacy of financial resources and personnel, readiness of the material, equipment, and location, appropriate allocation of the

financial resources, and distribution of resource towards agencies (Van Meter & Van Horn, 1975; Mazmanian & Sabatier, 1989; Edwards, 1983; Cheema & Rondinelli, 1983; Hambleton, 1983; Woradech Chantarasorn, 2008; Sombat Thamrongthanyawong, 2006).

5) Implementing personnel: it refers to personnel at an operator level who is regarded as an important person leading to the success or failure of the policy implementation. This factor focuses on the personnel's knowledge and performance ability, use of consideration, and attitude towards the policy implementation (Van Meter & Van Horn, 1975; Edwards, 1983; Cheema & Rondinelli, 1983; Hambleton, 1983; Woradech Chantarasorn, 2008; Sombat Thamrongthanyawong, 2006; Somphon Fueangchan, 2009).

6) Communication: it refers to conveying messages and communication between the staff and implementing agencies as well as conveying messages to the target group. It influences the success of the policy implementation which can be considered from message conveying, communication between organizations or personnel to the target group, and suitable and various communication channels (Van Meter & Van Horn, 1975; Edwards, 1983; Cheema & Rondinelli, 1983; Woradech Chantarasorn, 2008; Somphon Fueangchan, 2009).

## **2.5 Problems on Policy Implementation**

Woradech Chantarasorn (2008) divides problems on the policy implementation into five aspects as follows.

### **2.5.1 Capacity Problem**

Success of the policy implementation partly depends on how much ability the responsible agency has to proceed with the policy as in the stated objectives. Therefore, one of the policy implementation problems is capacity, which depends on several underlying factors including budget factor, material and equipment factor, and academic factor or technology related to that policy. The detail of each underlying factors are as follows:

1) Personnel factor: the number of capacity problems depends on several conditions. The first condition is the quantity, type, and qualification of the personnel the policy requires for the implementation. The second one is whether the demanded personnel are available. If so, are they qualified, knowledgeable, and able to implement the policy?; and are they willing to participate as implementing personnel? The third one is that if the demanded personnel are not available or enough in the governmental system, can the implementing agency search for them from private sector?; and how can they persuade them to work with? These factors, overall, influence the responsible implementing agency's capacity and the overall success of the policy.

2) Budget factor: the capacity problem depends on the implementing agency's limitation on budget conditions. Also, too many regulations will lead to a lack of flexibility which will decrease the implementing agency's capacity. Importantly, if more budget is required, is it possible that the government or federal agency can provide the budget in time or immediately? If not, it will delay the implementation and lead to the failure of policy implementation.

3) Materials, equipment, instructors, and technology: a lack of these factors is regarded as one of the capacity problems. In some cases, the policy implementation relates to the need of an instructor or technology. More capacity problems can occur if the implementing personnel have a lack of knowledge, understanding or skill of the use of related technology. This issue is directly related to the personnel factor. These problems are regarded as the capacity factor influencing the failure of the policy implementation.

### **2.5.2 Control Factor**

One of the factors leading to the successful policy implementation is control ability, which refers to the ability to evaluate progress or implementation's result of the policy, plan, or project. Many works show that if the responsible person doesn't have the ability to evaluate the result or control the implementing agency's work performance, the problems with the policy implementation will increase. The quantity of the control problems depends on various conditions. The first condition is that it depends on the responsible agency's ability to transform the policy into an

implementation plan, program, or project that meets the policy's demand. The second one is that it depends on how clear the plan's, program's, or project's objective is. The third one is that it depends on how much the mission and the implementation's standard specified by the implementing agency match with the plan, program, or project. These three conditions will directly effect building the control ability or evaluation of the implementation's progress that can meet the policy's need. In addition, they will have a direct effect on the policy implementation as well. They are considered as extremely important factors for the success of the policy implementation because the policy cannot be successful unless the implementing personnel have knowledge and understand their roles. This understanding cannot happen if they interpret the policy wrongly; the policy's objectives have lack of clarity; and the underlying agencies do not specify the mission and standard to make it in line with the main activity, plan, or project. Lastly, an evaluation of the implementation is necessary for the executives to find the way to make the implementation's result from each department coherent with each other, and to be able to achieve the set objectives.

### **2.5.3 Problems on Cooperation and Protest Against the Change**

No matter how high the capacity or control ability of the implementing agency is, the policy implementation cannot be successful without cooperation from the organization's or implementing agency's members. It can be said that the implementation problems can increase greatly if the members do not cooperate with each other, or they protest against the change impacted by the policy. The main causes of the noncooperation are as follows:

- 1) The members realize that the policy is not based on their actual demand, or they do not realize its importance
- 2) The members realize that the policy affects the change of their discretion on the implementation and behavior with regular work
- 3) The implementing agency's leader does not support the policy
- 4) The members realize that the implementation will decrease budget and the implementing agency's power for the long term. In addition, it can lead to a massive change of the mission and personnels' duty

5) The members realize that the policy is specified by an administrative sector who does not understand the actual conditions of the implementation.

6) The members do not agree with the implementation's content or method because they do not participate in making the decision.

7) The members do not cooperate because they lack knowledge or understanding on how to follow the policy.

The aforementioned causes are regarded as the conditions that make the implementing agency's members not cooperate with the policy implementation eventually leading to the failure of the policy.

#### **2.5.4 Problems on Authority and Relationships with other Related Organizations**

Consideration on these problems is considered crossing over the scope of capacity problems, control problems, and problems with cooperation and protest against the change to the scope of problems from the responsible organizations. This interaction occurs under a political conditions focusing on confrontation, seeking of support, negotiation for resource allocation or benefit between agencies or organizations during the implementation procedure. This problem depends on three factors which are type of communication and relationship between the implementing agencies and the agencies controlling the policy, level of necessity of seeking for support, dependence, or agreement with other main agencies, and a level of possibility of cooperation between each agency's personnel.

#### **2.5.5 Problems on Support and Commitment to the Organization or Key Personnel**

No matter what the policy it is, unless there is support and commitment to the organization or key persons, problems on the policy implementation can occur. In some cases, the problem can expand and eventually effect the failure of the policy directly. As a result, support and commitment to the organization or key persons including influential groups, stakeholder groups, politicians, high level governmental officers, media, etc. become very important. They might offer political support, funds,

budget, or might even cause obstacles or protest at any time depending on their power and situation.

## **2.6 Thailand's Health Tourism Promoting Policy**

Tharinee Sombun (2005) states that a tourism policy is set to create a framework for achieving the set goal. The goal of tourism development procedure must be set in accordance with the objectives of economic, social, and environmental development which will respond to the country's or destination's demand at both national and local level, such as economic growth rate, employment rate, natural resource and environment preservation, and transportation development. Tourism development must benefit both tourists and local people equally. The development can be divided into six goals as follows:

1) Economic goal refers to result or goal of the procedure in terms of economy, such as tourism income growth rate, employment rate, and economic growth rate in tourist attraction areas.

2) Social goal refers to tourism effect on the society, such as people's education, building awareness of hometown, nationality, history, and culture and unique local lifestyle preservation.

3) Marketing goal refers to a goal to expand tourist market in terms of quantity, nationality, and interest.

4) Tourism resource preservation goal refers to protection and preservation of the tourism resource in terms of both nature and culture not to be destroyed and to respond to the tourism sustainable. It can be considered along with other policy procedures, such as policy on power and environment preservation as well as appropriateness of the use of natural resources.

5) Human resource goal refers to an outline of human resource development in tourism industry for personnel at both operation and administrative level which is coherent and sufficient to support the growth of tourists, and setting outline of tools, equipment, or learning courses to respond to the industry's needs.

6) The governmental procedure goal refers to setting the role and direction for the governmental procedure to support and promote the tourism industry



in terms of development and promotion of the overall country's marketing as well as setting a framework to support the private sector's procedure.

### **2.6.1 Health Tourism Promoting Policy in the National and Ministerial Level**

Thailand has initiated policies and measures concerning the health service for over 10 years, and now they are improved and specified at both national and ministerial level including

2.6.1.1 Health tourism promoting policy in the 12<sup>th</sup> national economic and social development plan (2017-2021) by Office of the National Economic and Social Development Board (NESDB): the 12<sup>th</sup> development plan places an importance to setting a direction for the development aiming to transform Thailand from being a middle income country to a high income country, to be stable and sustainable, and to be a peaceful society. It consists of 10 major strategies (Office of the National Economic and Social Development Board, 2017) which are:

Strategy 1: Reinforcement and development of human resource

Strategy 2: Reinforcement of equality and reduction of difference in the society

Strategy 3: Sustainable reinforcement of economy and competitiveness

Strategy 4: Eco-friendly growth for sustainable development

Strategy 5: The nation's stability

Strategy 6: Enhancement of Governmental administration's efficiency and good governance in Thai society

Strategy 7: Development of infrastructure and logistic system

Strategy 8: Development of sciences, technology, research, and innovation

Strategy 9: Development of region, city, and economic zones

Strategy 10: International relations with neighboring countries and in the region

According to Strategy 3 regarding strengthening the economy and competitive sustainably, it mentions about sectorial economic strengthening to upgrade the competitiveness in agricultural, industrial, service, and trading and

investment fields. There are 10 targeted industries hoped to be the new engine of growth which are extending the development of five existing potential industries, which is the investment on the existing domestic industries to enhance their efficiency on the use of production factors. This kind of investment effects the economic growth in the short and medium term. The five industries include 1) industry of future 2) smart electronics industry 3) tourism industry for high income tourists and health tourism 4) efficient agriculture and biotechnology 5) food industry of the future or processed food industry. On the other hand, other five industries are the investment on new industries to change the forms of products and technology which are 6) industrial robots 7) aviation and logistic industry 8) biofuel and biochemical industry 9) digital industry and 10) complete medical industry. The five new industries will become an essential mechanism to drive the country's economy. The development of the existing industries will increase people's income by 70% from the target while another 30% will come from the new industries. Issues related to tourism are enhancing the potential of the existing service base, expanding new service base to adapt to the stronger economy, and developing the tourism industry to grow with balance and sustainability.

2.6.1.2 Health tourism promoting policy by Ministry of Tourism and Sports: Ministry of Tourism and Sports makes 2015-2017 Thai tourism reformation strategies with a vision to pave the development and promotion for tourism in Thailand as a qualified destination with balance and sustainability which the goal covers three aspects: economic aspect (in 2017, the total income is 2.5 million Baht and the income was distributed towards local areas), social aspect (upgrading people's quality of life in Thai society and strengthening local communities), and environmental aspect (a balanced and sustainable development). The strategies include: (Ministry of Tourism and Sports, 2015)

1) Tourism market supporting strategy consisting of four strategies:

(1) A strategy for upgrading tourism's image to be a "quality leisure destination"

(2) A strategy for adjusting the market structure to be a high value market

- (3) A strategy for expanding tourism opportunities towards every group of Thai people
- (4) A strategy for creating the balance of time and space
- 2) Tourism product and service development strategy
  - (1) A strategy for area development
  - (2) A strategy for sectorial development, especially for health tourism, the elderly tourism, and conference and exhibition tourism
  - (3) A strategy for tourism facility development
  - (4) A strategy for tourism safety development
  - (5) A strategy for tourism logistics development
- 3) Tourism management strategy
  - (1) A strategy for work integration through the entire system driven mechanism
  - (2) A strategy for human resource development in terms of tourism and upgrading tourism entrepreneurs
  - (3) A strategy for tourism data and information system development
  - (4) A strategy for legal improvement and serious enforcement: tourism development zones are divided into five clusters which are Lanna civilization, Southern e-sarn civilization, East coast of the Gulf of Thailand, West coast of the Gulf of Thailand, and Andaman coast

Ministry of Tourism and Sports indicates issues related with health tourism in the sectorial tourism development strategy of the Strategy 2: the development of tourism product and service.

2.6.1.3 Health tourism promoting strategy by the Ministry of Public Health: Ministry of Public Health has been appointed as a main organization to manage the national development strategy to make Thailand to become an international medical hub (refer to international medical hub policy) from 2004 until now. Due to the potential and tendency of the health industry's growth in Thailand and globally, adaptability of health business in Thailand to a current situation and more intense competition, and problems found in some procedures, the Ministry of Public Health and Ministry of Tourism and Sports agrees to regard health tourism as a

national agenda by making a development strategy for Thailand to become an international medical hub (2017-2024) within 10 years to shape the management and policy implementation by each related sector to be in the same direction in accordance with the current situation and global change. Moreover, it truly aims to make Thailand to become an international medical hub (Ministry of Public Health, Department Health Service Support Department, 2016).

A strategy for the development of international medical hub in Thailand (2017-2024) shows five important missions:

- 1) Develop and enhance Thailand's health competitiveness with other countries from the original to terminal level
- 2) Support and develop the potential of hospitals, governmental and private business establishments to be able to provide an excellent and unique international standard health service for additional value of the health products and services
- 3) Support and develop the potential of academic institutes to be academically excellent on the international stage
- 4) Develop a consumer prevention system for the health service by providing the consumers a quality and safe warranty
- 5) Arrange promotions and public relations to introduce identity and traditional wisdom of Thailand to foreigners to make it impressive and internationally accepted as well as to differentiate Thailand's health service from other countries

In addition, major goals of the strategy for the development of international medical hub in Thailand (2017-2024) are as follows:

- 1) Thailand becomes the world's medical service hub.
- 2) Thailand earns income from the sustainable health tourism industry
- 3) Thailand has the following driving forces to achieve the strategy:
  - (1) Wellness hub 1) Thai traditional health massage and spa 2) Beauty massage 3) Medical service 4) Hot spring spa 4) Thalasso therapy/

Climato therapy 6) Long stay for health service 7) Health resort service 8) Rehabilitation center service

(2) Medical service hub

(2.1) Medical treatment service including beauty care, dental care, plastic surgery, medical checkup with high technology, special medical treatment with high technology and experience such as knee joint and thigh surgery, surgery for heart disease, cancer treatment, infertility treatment, Lasik, organ transplant, elderly care, modern technology supported treatment, and anti-aging

(2.2) Thai traditional medicine and alternative medicine service including services provided by Thai traditional medicine hospitals/clinics and alternative medicine hospitals/clinics

(2.3) Laboratory service including medical laboratory service with a national standard or for disease diagnosis support, the use of high technology for treatment follow-up, research, and epidemiology work, international standard laboratory for specimen service, quality guarantee for ingredients and products from Thai herbs, full service dental laboratory, and laboratory for medicine's efficiency evaluation service

(3) Academic hub

(3.1) Education program for professional and post graduate including international program for undergraduate and post graduate

(3.2) Education program for skilled labor including therapist training program, care worker training program, and Thai traditional medicine and alternative medicine training program

(3.3) International conference (MICE) including holding a world congress's medical conference in Thailand and international academic conference bidding.

(4) Medicine and health product hub 1) Modern medicine 2) Thai herbal medicine 3) Cosmetics 4) Health supplement 5) Medical equipment

It is noticeable that the of Office of the National Economic and Social Development Board (NESDB), Ministry of Tourism and Sports, and Ministry of Public Health emphasize the country's health tourism development. Furthermore, Thai traditional medicine promoting hospitals under Thailand Department of

Developmental Medicine and Alternative Medicine, Ministry of Public Health proceed with the task in accordance with the health tourism promoting policy under the international medical hub development strategy (2017-2024) by being a wellness and health service hub providing Thai massage, health spa, medical spa, and services in the alternative medicine hospitals.

### **2.6.2 Ways of Health Tourism Promoting in Thailand**

Tourism Authority of Thailand (2010) conducted a survey on behaviors and satisfaction among foreign tourists in beauty care tourism group in order to collect data from beauty care service providers along with other supporting businesses, and study their behaviors and satisfaction as data to support an overall offensive marketing plan and particular marketing plan to face the serious competition in a correct direction. The major study's results can be concluded as follows:

2.6.2.1 An analysis of strength and weakness as well as opportunity and threat (SWOT analysis) of beauty care service in Thailand from the study's data which can be used to analyze a current situation of health tourism in Thailand is shown as follows:

#### 1) Strength

(1) Have an outstanding image of specialty and uniqueness (such as a reputation for massage, spa, local herb, Thai herb, and reliable location), which is regarded as a key attraction for tourists to choose as a destination

(2) Have an excellent service which provides an impressive experience to customers through all six senses: shape, taste, scent, sound, touch, and mind along with a gentle and friendly service

(3) Service provider's skill which gains a positive feedback from the service usage together with various kinds of service provided by the service providers with their fully-equipped facilities in the service locations, such as a spa room, resting room, steaming room, and so on

(4) Be historical and a collection of beauty service knowledge for a long time along with many skilled therapists and service providers

(5) Be a country with charming culture such as spiritual belief and religion which help supporting and making the beauty service attractive

along with interesting tourist attractions, beautiful surroundings, and unique art and culture

(6) Have a reasonable service fee which is worth the service

(7) Tourists are highly satisfied with the overall service, comparing with other countries' beauty care service with whom interviewees had at least used the service once. Thailand's beauty care service can impress the tourists, which there is high tendency that they will pass down their impressions of the service to others and come to use the service again

## 2) Weakness

(1) A negative image of Thailand for internal conflict, unsafety, and prostitution, which effects the tourists' confidence to travel to Thailand

(2) A control and inspection of a service location's standard including cleanliness, hygiene, a massage with hideous prostitution service in some service locations which impact the image of beauty care service in Thailand

(3) Service providers' language ability such as English, Chinese, Japanese, and so on

(4) Beauty care service communication and public relations both in and outside of the country does not spread widely enough

## 3) Opportunities

(1) A higher tendency of stress among people, people's awareness of health care, disease prevention, and health product and service trend becoming more popular in the global market

(2) A higher tendency of the overall market's growth rate and opportunity to expand the market towards particular groups such as men, working-age, tourists, entrepreneurs using the service while travelling, honeymoon-couples, tourists from East Asia, Southeast Asia, and the Middle East

(3) The beauty service conforms to Thai unique characteristics in terms of belief, religion, faith, Buddhism philosophy, humbleness, flexibility, friendliness, and service mind

(4) An ability to adapt Thai unique culture to the service to offer the tourists an authentic Thai cultural experience such as a service with Thai traditional art and local products

(5) Thailand's beauty care service is well known among foreign tourists which is a good opportunity for Thailand to build a positive image to the global eye

(6) Be able to market and link beauty care tourism with health tourism as a main tourism product of the country and support the country to be the world's healthcare hub

(7) Thailand has an advantage on tourism for being a country with attractive tourist attractions which can help supporting the growth of the beauty care market in the future

(8) A development of service standard and Thai major entrepreneurs' reputation building key roles in introducing and building a positive image of Thai beauty care service

#### 4) Threats

(1) Political instability as well as internal conflicts effect the continuity of the beauty care service and marketing policy. Moreover, news impacting negative images of the county are expanded worldwide which also effects the tourists' confidence to travel to Thailand

(2) Uncertainty and effect from global and national recession

(3) Higher competition rate, especially the development of the countries providing beauty care service such as Indonesia, China, Singapore, Malaysia, and India

(4) Limitation in the service providers' standard and ethic control

(5) Loss of skilled therapists and service providers to foreign countries as well as inadequacy of therapist's and service provider's standard development

(6) Today, the tourists have more experience with beauty care service which encourages them to have higher expectations with the service standard and new experience

According to the SWOT analysis of the beauty care tourism industry, it is obvious that Thailand has many strengths, such as an outstanding image of



expertise, uniqueness, excellent service, service providers' skill, reasonable service fee, worthiness of the service, and the tourists' high satisfaction on the service. However, it is necessary to eliminate the weakness and grab the opportunities.

#### 2.6.2.2 Ways to enhance the potential and marketing promotion of beauty care service

According to data collection and analysis of the study's result, Thailand is suggested to increase the potential and marketing promotion of the beauty care tourism to maintain existing customers, increase their satisfaction, encourage them to use the service again, increase the service users, and expand the market base to build a trend among the tourists that attracts them to travel to Thailand and use the service (Tourism Authority of Thailand, 2010). The suggestion includes:

1) Specify a clear position in the market for Thailand along with applying an efficient communication strategy to promote Thailand's beauty care tourism

(1) Promote Thailand's position in the market as a "healthcare hub" combining beauty care tourism with health tourism

(2) Specify major qualifications for Thai beauty care service to be clear, interesting, and outstanding from the competitors to use as a guideline for communicating and transferring through the experiences the tourists can touch

2) Use an efficient communication strategy and convey Thailand's marketing position to the target group to create perception and image about Thailand

(1) Create an attractive brochure to inform the tourists about Thai beauty care service. Introduction of products and services which are different depending on each region should be done in order to offer the customers various and different experience

(2) Offer information with suggestions about beauty care service at the airport and create a large advertisement board near the immigration point to introduce it and persuade the tourists to be interested in the beauty care service

(3) Promote the service with attractive and modern communication and marketing, such as using digital marketing which people can access Tourism Authority of Thailand's website providing information about the beauty care service

(4) Seek an opportunity to hold an international conference about the beauty care service in Thailand to enhance the image of experience on the beauty care service for the country and to increase people's perception of Thailand as a major country for beauty care service

(5) Arranging a roadshow and exhibition booth with the service providers in other countries, which can be done by arranging it at major spots in the targeted countries such as a shopping mall, plaza, and so on

(6) Invite experts or key persons in the beauty care field such as reporters, columnists, media, leaders, and foreign celebrities to visit and use the beauty care service in Thailand

(7) Present Thailand's image as a country with attractive tourist attractions by using a strategy highlighting or promoting each tourist attraction or province instead of the entire country

(8) Communicate with the target group to inform them about the country's situation and peace in order to assure them about safety

3) Develop an outstanding product and service that meets the target group's needs to increase the opportunity to expand the market and attract new potential target groups

(1) Develop a service/program that focuses on a clear result such as a service/program providing weight loss guarantee or beauty/youth guarantee because consumers' behavior has changed now. They barely have time to do anything, so they tend to focus more on the service's efficiency and its concrete result, especially a service that takes less time, but bears a clear result in many aspects

(2) Develop a product and service that focuses on offering an authentic Thai experience, which a Thai massage itself might not be attractive enough because its available in many countries nowadays. This aims to offer the tourists an opportunity to truly experience Thai spa

(3) Develop variety of the service to be a One-Stop service by offering the services that cover the customers' needs, that are different from others, and that are the current tourists' demands such as rejuvenation treatment, mind therapy, use of two therapists at the same time, lifestyle change course, and so on

(4) Develop a service that can respond to the interest and demand of the tourists who will be important for the beauty care tourism in the future by doing niche marketing such as early working-age males, tourists/ entrepreneurs using the service while traveling, honeymoon couples (especially women who are main person to make a decision on the trip, so men tend to have chance to use the service as well), tourists from East Asia, Southeast Asia, and the Middle East

(5) Plan a strategy as well as a marketing plan, promotion plan, and communication that have special characteristics for particular markets in order to enhance accessibility to the target groups

4) Improve/develop the beauty care service in various aspects for a satisfying service which will draw the customers to come back and spread the word of mouth

(1) Provide a standard certification and a sign for service locations and service providers guaranteeing their reliability, expertise, and standard service to clearly separate them from the ones providing hideous, offensive services

(2) Classify the beauty care service location more thoroughly as an example for the development and upgrade of the tourism industry's standard

(3) Encourage the service providers to improve their standard to increase their opportunity to receive an international reward and standard certification for creating the perception and positive image of Thai beauty care service's quality and reliability

(4) Cooperate with the private sector to train and develop the standard of service of the personnel, especially the use of foreign language, massage skill, and the use of Thai art

(5) Support beauty care related professions to increase a number of personnel to be able to support the increasing demand from the tourists in the future

(6) Facilitate in VISA application and immigration

5) Create an alliance network to build a cooperation and integration for developing health tourism market sustainably

(1) Seek for a cooperation and participation between the public and private sector for the development

(2) Specify a role and duty for each related agency to do a clear marketing promotion for beauty care tourism by focusing on the role of cooperation between agencies

(3) Creating business alliances such as seeking for a cooperation, arranging a marketing promotion activity, for example, a service provider offers a discount promotion for airline customers, or the service providers jointly offers the discount for the tourists to jointly promote the beauty care market and increase their opportunity to access the target groups

(4) Collect data and statistics essential for the market continuously, such as tourists' personal data, behavior, and satisfaction as well as the market's trend for benchmarking and monitoring by sharing and providing information for the benefit of entrepreneurs and those who are interested

Several processes in various aspects for enhancing potential and promoting the beauty care tourism market are necessary, including specifying a clear position in the market, using an efficient communication strategy, developing the product and service to be outstanding and be able to meet the target group's demand. Meanwhile, the service requires improvement and development constantly together with creating an alliance network for a cooperation in developing the beauty care tourism market sustainably.

## **2.7 Concept of Logistics and Supply Chain Management**

Logistics were firstly used in an army around 1898 (Simpson & Weiner, 1989) and later became popular in military service around World War II. After that, logistics was brought into business term in different definitions (Cavinato, 1982; Cox & Blackstone, 1998). However, people were often confused between logistic management and supply chain management; therefore, it is essential to understand the difference. Logistic management refers to a process of planning, processing, and controlling the

resources to flow efficiently and to cover cost, inventory, and information connectivity efficiency. Logistics is considered to be a part of the supply chain management, which supports planning and controlling for the effective and efficient flow, product storage, and information connectivity from the origin to consumers to respond to customers' needs (The Council of Logistics Management (CLM) as cited in Office of the National Economic and Social Development Board, 2007). Therefore, logistic management covers activities from transportation management, inventory management, warehouse management, purchase order management, information service, financial management, material management, procurement, packaging, and demand management. On the other hand, logistic management is a process of goods or service procurement according to customers' needs and deliver them to a correct destination within appropriate time and cost. The core of logistic management is to build a good relationship to create a harmonized communication and procedure between departments in the organization.

Logistic management is a delivery of goods or service requested by the customer to the right place in an appropriate time with the best service for the customer's highest satisfaction while the company also gains profit or has less expense. There are many logistic activities each of which are considered the components of the system that need to be coordinated so that they can collaborate efficiently (Arun Borirak, 2002). Logistic management also includes customer service and product supporting facilities which benefit the company, initial cost, and consumers' satisfaction (Brimer, 1995). A definition of logistics called '7R' refers to the right product in the right quantity and the right condition, at the right place, at the right time, for the right customer, at the right cost (Shapiro & Heskett, 1985) with the efficient planning, implementation, and controlling process of the activities related to the flow of goods and service as well as information storage and the relationship between the information from the source and the consumers based on their demand. The logistic activities are associated with goods and information flow in order to follow the customers' demand. Vogt, Pienaar, and de Wit (2002) state that logistic management is a process of efficient planning, implementation, and controlling of an activity related with goods and service flow as well as preservation and relationship of information from its source towards the consumers in accordance with their

demands. Therefore, logistic activities associate with the flow of goods, service and information to be in accordance with the customers' demand and to get their satisfaction as well as to maximize the highest value with acceptable cost. (Hazen & Byrd, 2012; Kembo & Naslund, 2014; Flint, Lusch, & Vargo, 2014; Maas, Hartmann, & Herb, 2014).

In conclusion, logistic management is the design and management of a system controlling goods, service and information movement and flow from the origin to organization and from the organization to customers effectively and efficiently, or a movement of material to become an instant product from the origin to destination towards the consumers' hands with well-coordinated process. It is noticeable that logistics covers activities as well as goods and service movement process at all levels and procedures of a systematic procedure which the company will connect the goods and service system's activities in the organization with each other instead of processing each activity separately like they used to do.

On the other hand, supply chain management is a systematic cooperation of business activities within the organization and between the organization of the same chain to develop the overall organization's and chain's performance in the long term. Supply chain management is an expansion of the logistics concept. Likewise, supply chain as well as all activities related to goods flow and transformation from material to the last consumer (Handfields & Nichols, 1999) agrees with Christopher (1998) who defines supply chain management as a relationship management from the origin to destination and vice versa. It is related to a producer and customer which requires a management to make the least expense throughout the supply chain. Supply chain management is a concept offering the highest benefit to both suppliers and customers (Burnes & Dale, 1998).

Mentzer et al. (2001) defines supply chain as a group of over three businesses associated with each other by the flow of goods, service, finance, and information from the goods' or service's origin to the consumers. He divides supply chain into three levels. The first level is direct supply chain which consists of three business units or more which are related to each other from the origin (supplier), agent (product and service producer) to the destination (customer) in terms of transporting goods, service, finance, and information among each other. The second level is extended supply chain

which is an expansion of direct supply chain to a wider level by adding a middleman in both supplier and customer level. When the supply chain has more parties, the management will be more complicated. Lastly, the third level is ultimate supply chain which is the business units associated with each other from the origin to the end user through transporting goods and service starting from ultimate supplier to ultimate customer.

Council of Supply Chain Management Professionals (CSCMP) (1986) state that supply chain management is a relationship between planning and managing activities related to procurement, transformation, and all logistic activities as well as cooperation between a supplier, middleman, freight forwarder, and customer. Therefore, supply chain management is an integration of demand and supply management emerging both in the business organization and between businesses.

Supply chain management is considered as a network of components supporting business procedures, which starts from material procurement from a supplier, material transformation process, to product distribution to end users. A complete supply chain should consist of all entrepreneurs participating in the flow of product, service, capital cost, and ultimate supplier information process (Ruthee Phanomyong, 2005).

According to the above definition of supply chain, it can be concluded that the overall definition of supply chain is the business network associated with each other in terms of product, service, finance, and information starting from the ultimate supplier to agent, and then the ultimate customer. On the other hand, supply chain management is the business network management aiming to response to the customers' needs and build the highest satisfaction with the least capital cost.

It is obvious that the supply chain management's scope is expanded throughout all systems in the industry which is too wide to consider only in the organization. Therefore, it can be said that the logistic management is only a part of supply chain management. In conclusion, it is a plan for processing and controlling the flow of goods, service, and information efficiently and effectively from the origin to the destination where there is consumption in order to meet the customers 'needs.

A main role of logistic management are 1) to make the business effective and efficient in the logistic and supply chain management 2) to make business adaptable

to change which adds more major activities to the product and service promotion, 3) to increase benefit on time and place for the customer in need of consumption or use for the production with a specified cost, 4) to be able to adapt information and communication systems to reduce the duration of each production and service process towards consumers' and suppliers' hand with more efficiency, and 5) to empower the business competitiveness altogether to encourage the continuity cooperation to raise customers' satisfaction to the highest point (Kullada Kasuwan, 2016).

It can be seen that logistics have created phenomenon and taken countless parts in the business as it helps supporting the organization in value creation along with improving its profitability. However, logistics is no longer only about goods transport or warehouse management, but its concept has been expanded wider.

## **2.8 Concept of Logistic and Supply Chain Management for Tourism and Hospitality Industry**

Nowadays, logistic and supply chain management is widely used in the business and industry sector (Cavinato, 1982; Cox & Blackstone, 1998). However, the logistic and supply chain management concept is still considered new knowledge for the hospitality industry (Peng, Xu, & Chen 2011, p. 1) that has not been developed much. As it can be seen from the amount of research about logistic and supply chain management in the hospitality industry that are still available in incomplete and limited amount (Zhang & Murphy, 2009; Piboonrungraj, 2009: 2; Koblun, 2011, p. 21). When the concept and theory has not been completed, the implementation becomes harder.

However, Sengupta, Heiserm, and Cook, (2006) compares the major difference between logistics and supply chain in the manufacturing and hospitality industry. The logistic and supply chain management in hospitality industry requires manpower as the main factor in the process of creating and delivering service value. Each time, the service might be different and the result can be uncertain unlike the manufacturing industry, which creating products and controlling their standards can be done easier.

Moreover, demand, or a consumer's needs in the hospitality industry is regarded as complicated (Sigala, 2008; Lafferty & Fossen, 2001), and highly concerns



feelings because the tourists are different from objects in that they can feel, vary, and be sensitive which are difficult to predict. So, the movement should be managed smoothly, fast, economically, safely, and conveniently by considering the customer's mind first. Therefore, it is essential to understand them profoundly in order to manage correctly.

Logistic and supply chain management in manufacturing industry transports the products from the origin (factory) to the distribution center to pass to the market (retail center) for end users. On the other hand, in the hospitality industry, the end users will come to the products and services by themselves not the products and services moving towards them. For example, tourist attractions cannot move towards the tourists, but it is the tourists who must go for them. So, the transportation is not transporting the products from the origin to market, but it is transferred from the market to origin instead. In hospitality industry, there is no inventory timing and logistics cost. Instead, there are invisible products and services which are intangible. Also, they cannot be produced and stocked up like other products. As a result, the service provider should be enthusiastic in responding to customers' needs and providing a service that is better than providing the products from the manufacturing industry to the customers. Special features of the logistics and supply chain in the hospitality industry is an invisible and intangible service (Lovelock, 1981; Parasuraman, Zeithaml, & Berry, 1985). The best thing to be delivered to a customer is the service such as checking in the hotel on holiday, healthcare in hospital, booking an air ticket with a travel agency, and so on. The main benefit that the customers will gain is service satisfaction. In addition, while delivering the service, supporting department is also necessary because the service delivery is not about delivering an object or visible thing; however, the visible object is still necessary as a part of some processes. For example, a hotel requires furniture and facilities to satisfy their customers; or a travel agency needs communication equipment and computer to reserve and issue the air tickets according to the customers' needs to meet their satisfaction. According to Sampson (2000)'s study, it is believed that service is intangible, which means that it is hard to store, count, and identify its supplier (Sengupta, Heiser, & Cook, 2006; Akkermans & Vos, 2003). The service cannot be transferred to an agent and sold to end users. The customers always play an important

role in the service process, which effects the service quality (Ellram, Tate, & Billington, 2004). Therefore, both service providers and customers are parts of the production process. Since the customers' different demand is important, it is necessary to adjust the service and presentation which makes it hard to evaluate and inspect the service quality. (Zeithaml, Berry, & Parasuraman, 1996). Service delivery and service receiving by the customers occur at the same time, so there is no time gap for the uncertainty.

Comparing the characteristics of logistics in the manufacturing industry to hospitality industry, it is totally different. Moreover, the hospitality industry cannot produce a product or service independently (Jafari, 1974; Spreng, Hui Shi, & Page, 2009; Zhang & Murphy, 2009). So, the hospitality industry's product is a combination of a product and service.

**Table 2.3** Compare Characteristics of Logistics and Supply Chain in Manufacture Industry and Hospitality Industry

<b>Characteristics of Logistics and Supply Chain in Manufacture Industry</b>	<b>Characteristics of Logistics and Supply Chain in Hospitality Industry</b>
1. Tangible	1. Intangible
2. Product transportation from a manufacturer to consumer	2. Producing and consuming occur at the same time
3. Customers do not participate in the production process.	3. Customers participate in the service process.
4. A warehouse is required to store the product.	4. A warehouse is not required.
5. The product can be stored as buffer inventory to support the customer's changing demand	5. The service cannot be stored as inventory. Instead, resource planning is used to support the customer's changing demand.
6. Concern with capital cost	6. Concern with human resources

The concept of supply chain in terms of tourism, which is a part of the hospitality industry, has a close definition to a distribution channel. It mainly concentrates on distribution channels and marketing activities in the supply chain (Song, 2012, p. 5). Moreover, it is also similar to the tourism value chain (Kaukal, Werthner, & Hoepken, 2000, p. 11) which consists of tourism supplier, tour operator, travel agency, and tourist who is the main coordinator in the chain (Alford, 2005). Thus, tourism supply chain is a major issue related with many sectors. It is not only between a tourist and service provider, but it also covers the relationship between the service provider and supplier whether they can run their business smoothly or not as well as a relationship with the government sector and local community who manage the tourist attraction. In addition, tourism organizations also have to understand major structures of tourism industry shown as follows:

- 1) Tourism is an industry that focuses on a connection and coherency between the product and service including travelling, foods, and accommodation to assemble as a tourism product

- 2) Tourism product or service has its specific time for each type such as visiting a marigold field or Siam Tulip field which blooms just in a particular period of the year. So, the presentation and selling should be done in that period, and the blooming period cannot be extended or stored to sell later in other seasons

- 3) Tourism is an industry that seriously focuses on information. The information should be up-to-date as new locations emerge all the time; new roads are constructed; or low cost airlines fly to a new destination. These factors affect tour package improvements or price adjustments to suit the situation more

- 4) Generally, the tourism product or service is considered complicated because the tourists usually consider or make a decision on tourism from its overall composition. For example, they choose an accommodation based on its location which is near main tourist attractions or train stations for convenient transportation as well as restaurants

- 5) Tourism organizations must prepare to support the tourists' uncertain and flexible demand (Chanin Yoopetch, 2012, p. 5)

Therefore, tourism supply chain is a process of procurement, production, and distribution with a main target to satisfy the tourists the most with their trip, and to

encourage the tourism organization to be adaptable to respond to the tourists' expectations and satisfaction, which constantly change, promptly (Khomsan Suriya, 2009). On the other hand, tourism logistic management is an integration between the logistic management and tourism management concept. To consider a pattern of the tourism logistic management, it is necessary to understand the tourism supply chain because its concept and pattern is an internal flow management in the supply chain which consists of physical, information, and financial flow management to reach the highest efficiency and effectiveness (Kosol Desilatham, 2005, & Thanit Sorath, 2007, as cited in Thakerngsak Chaicharn, 2012).

In the aspect of (Mingsan Kaosaard & Khomsan Suriya, 2008), the logistic management is an adaptation of logistics knowledge to move passengers who are tourists. A concept of logistic system development can improve the efficiency of the tourism service completely from their arrival to departure from the country. In another aspect, it is a coordination between activities to make the tourists flow smoothly from the origin to destination without mistake, and to gain the tourists' highest satisfaction (Pairach Pibulrunroj, 2009).

It can be concluded that the tourism logistic management consists of two points of view: logistics of tourists and logistics of tourism services (Pairach Pibulrunroj, 2014). Therefore, tourism logistics is not limited to only transporting the tourists from one location to another, but it is one of the activities in tourism logistics that occurs only in a particular period of time, not the entire trip such as car transportation or boat transportation which terminates when the tourists arrive at the attraction or accommodation. However, logistics still plays a management part at the point that transportation does not occur to make the tourists flow smoothly (Paphatsorn Yotharak & Kitti Bunnak, 2013; Chitpong Aysanon, 2015). After elaborate consideration, it is found that tourism logistics is offering convenient, punctual, safe service that meets the tourists' demand (Chutchapol Songsoontornwong, 2011, pp. 15-18). Similarly, Ctirad Schejbal (2015) agrees that tourism logistic management's definition is interpreted wider, compared with the logistic management in the production industry. That is tourism logistic management consists of units supporting the tourists in tourism product and service consumption from traveling to the destination, while they are at the destination or their departure which is an airline,

accommodation, restaurant, tourist attraction, tourism activity, car rent service, and other components representing the service provider's image, atmosphere, and personality like the service's punctuality. These are considered the tourism logistic management's point of view which requires good cooperation and coordination to create tourism activities in the tourism area.

In conclusion, tourism logistic management is an activity management and coordination system for the smooth tourist flow from the origin to destination continuously without mistake while reaching the tourists' highest satisfaction by facilitating them and offering them a convenient, punctual, and safe service that meets the tourists' demands such as managing a location suitable for the service, preparing tools to be ready to use, and delivering a prompt service.

However, logistic management is considered a part of tourism supply chain management. Both of them are an integration between each other which are hard to separate. They need to be processed dependently, but they are not united entirely. Considering from another dimension, it is found that they are different activities with particular roles and procedures. Their roles are just linked with each other as an integration which is similar to the merge of two organizations while they are still running their businesses (Thanit Sorath, 2007). Anyhow, tourism logistic and supply chain management are still different in detail. For example, to take the tourists to a destination from their origin, a tourism logistic manager needs to coordinate between activities like arranging vehicles and accommodation, assigning a driver to pick them up at the meeting point, and providing a tour guide on the bus for entertaining them. In some cases, the tourists might need to change the transportation mode to a van or local bus. In the meantime, the manager might contact the hotel to prepare to welcome the tourists. When they arrive, hotel staff will be ready to welcome and handle their luggage. Foods and drinks are also ready to serve the tourist. All mentioned activities are "tourism logistic management".

In contrary, tourism supply chain management has more detail than tourism logistic management. There is more background behind each tourism supply chain activity. For example, tourist transportation by bus consists of sub-activities like procurement of buses, fuel, drivers, driver training, bus maintenance, vehicle tax, etc. Accommodation service also consists of sub-activities like cleaning rooms, preparing

food and drinks, laundry, staff recruitment, staff training, waste water treatment, etc. These sub-activities are considered “tourism supply chain management” (Chutchapol Songsoontornwong, 2011).

Therefore, tourism logistic management is a process concentrating on activities related to tourist and goods transportation from the origin to destination flawlessly (Khomsan Suriy, 2009). On the other hand, tourism supply chain management focuses on a management of the relationship between each process in an organization both internally and externally to collaborate with each other efficiently and effectively, and to deliver the service to customers with competitive cost. The noticeable difference is that tourism logistic management’s mission is related with “movement function” which is the tourist, product, service, and information movement while tourism supply chain management focuses on “relationship and collaboration” between organizations. However, both tourism logistics and tourism supply chain are concerned with tourist movement.

## **2.9 Concepts of Tourism Logistics Management Process**

Logistics in the manufacturing industry includes integrated processes, which means the process of moving materials, products, and services from the origin to end users punctually and effectively. Logistics focuses on product and service movement process, procurement process, and market forecast process. It can be said that logistic management in the manufacturing industry is the management of products, service, information, and financial movement between suppliers and consumers. The main target is a fast delivery and service, product and service flow, information flow, value adding, cost reduction, and competitiveness enhancement (Thanit Sorath, 2007). For the tourism logistic management procedure, Phukan (2014) describes it as a process of product and service movement. This process consists of various roles which needs appropriate management for effectiveness. However, the effectiveness should be adjusted by all the related persons’ effort in the activity chain which need collaboration and coordination. This activity chain involves tourism products and service suppliers, tourism operators, travel agencies, and tourists. Tourism logistic management is a major tool that helps enhancing the efficiency of tourism system

management because logistic management is a product or service movement process for both the manufacturing and service sector from the origin to destination. Tourism logistic management covers tourist and goods transportation, information providing and receiving, and financial transaction (Kamolchanok Suthiwatnaruephut, 2004). Moreover, tourism logistic management is an activity related to tourist transport, activities and supply chains that support each other, and providing precise information for the tourists. In other words, tourism logistics is associated with various features, including a tourism service in form of a vehicle, accessibility, information providing, service duration, empathy, facilitation, safety, and eco-friendliness (Khomsan Suriya, 2008). Moreover, Mrnjavac and Ivanovic (2007) also mention about tourism logistic management in a different concept. That is tourism logistic management refers to an ability to identify the change of resources which are people flow, information flow, energy flow, waste flow, knowledge flow, place flow, and facility to serve customer efficiently which can change according to time and place. Its goal is to provide a qualified tourism service with the lowest cost. Tourism logistic management system consists of various activity groups associated with each other to create a tourism product which is widely accepted in the tourism market, which are:

- 1) A Hospitality Logistics Sub system consists of an appropriate flow of products, information, human resources, food and drinks service, and accommodation. A higher quality with a lower price of food and drinks, products and service quality depends on the logistic management system which consists of material flow, semi-product, and instant products used in producing a product and service. In this research, it refers to a physical flow from a supplier to consumer.

- 2) Agency-Logistics Sub system is the flow of information to connect tourism service's demand with tourism service supply, information transmitting through an appropriate channel, and pairing demand with supply to benefit all sectors.

- 3) Transportation Logistics Systems is a change of the product, people, information, and tourism waste flow. A proper point for the successful product flow requires a cooperation between a service unit and sale unit. An appropriate flow will affect the tourists' satisfaction on the tourism or agency.

- 4) Tourist Attraction Sub System is a search for a proper point of the objective's flow to present the tourist attractions properly. The area covering the

tourist attractions is very important for tourism logistics because the concept of the tourist attractions depends on the area and the logistics within the area which will affect the tourist attraction's quality and the tourist attraction development

(1) Tourism Destination Logistics is a search for the best material, people, information, power, waste, and knowledge flow as well as other facilities in that tourist attraction to provide a quality tourist attraction

(2) The Macro Logistics System of a Tourism Destination is a search for the best material, people, information, waste, and knowledge flow as well as other facilities to develop that tourist attraction

(3) The Micro Logistics System of a Tourism Destination consists of logistics management in a travel agency or other tourism organizations in the tourist attraction area. These travel agencies or organizations consist of high quality services at an affordable price as there is a specification of a sustainable discount rate by seeking the best product, people, information, power, waste, and knowledge flow as well as other facilities for the best effect and service cost reduction

Moreover, Mrnjavac and Ivanovic (2007) see that the efficient tourism product needs a properly developed process flow. Basically, the concept of tourism logistic management is a management of the flows in supply chain which consists of physical flow, financial flow, and information flow for the most efficient and effective flow in the supply chain (Mentzer et al., 2001; Christopher, 2005).

Kovacic (2010) mentions about a sport tourism logistic management process that it should consist of flow efficiency, including product and service flow, human flow, information flow, power flow, waste flow, financial flow, and knowledge flow.

Lumsdon and Page (2004) state that tourism logistics starts from the tourist transport, and they propose a concept of tourist transport analysis which is suitable for analyzing physical flow and information flow more than just tourism transport.

Rawiporn Khucharoenphaisarn (2006) and Thaweesak Thepphitak (2007) say that logistics is a management of product flow, information flow, resource flow, power flow, and human flow from the origin to where there is consumption in order to response to the customers' needs. For the tourism logistics system, it indicates the channel and time of material, human, power, and waste transport as well as passing on knowledge and benefit to provide a quality service by using the budget worthily.



Chutchapol Songsoontornwong (2011) states that logistics management and loyalty to the destination or tourist attraction is an evaluation through the tourists' satisfaction from the logistics management of the tourist attraction which is related to three procedures: physical flow, information flow, and financial flow.

1) Physical Flow is the procedure related to management of tourist transport, luggage, accommodation, tour program, and security that the tourist should be served and cared for safely.

2) Information Flow is information management of the information used for considering the tourist attraction to the information received when arriving at the tourist attraction. The tourists should be able to access this information conveniently, fast, and accurately.

3) Financial Flow is the financial management including payment method, currency exchange, and tax refund and tourists should receive access to the service conveniently.

Value that the tourists will receive from the three process flows effect the satisfaction and loyalty level towards tourist attractions differently. Therefore, a study of the relationship's structure benefits the development plan for tourism competitiveness enhancement, and be a guideline to develop tourism logistics management system in order to meet the tourists' demands.

Apart from the above literature review, the researcher has also studied research regarding tourism logistic management. Takerngsak Chaicharn (2012) who conducted a study on "Tourism Logistics Management in Wang Nam Kiew, Nakorn Ratchasrima" states that the core composition of tourism logistics management is physical flow, information flow, and service while Dittha Kantasaen (2013) who conducted a study on "Factors Effecting Travelling Abroad Service : Tourism Logistics Attitude" presents the concept of a tour operator's service quality and efficacy of satisfaction measurement proposed by Meng, Turk, and Altintas (2012) and concept of tourism logistics consisting of the three dimensions of the service, which are physical service, information service, and financial service as well as relationship management. Meanwhile, Naphat Thipsri and Khacheechom Chiatrakul (2015) who conducted a study on "Tourism Logistic Management for Tour Operator Business in Chiang Rai" state that logistic management is extremely necessary for

tour operator businesses, which need to pay attention to tourist transport, providing information, payment service, and impressing the tourists during their first visit and encouraging them to revisit. It will enhance Chiang Rai's competitiveness and reputation in the international market.

Naiyana Phaibul (2009) conducted a study on "Internal Tourist Satisfaction Survey Based on Tourism Logistics Management Measurement: Case Study from Koh Chang, Koh Laan, and Koh Samed". The researcher studies are based on the tourism logistics management indicator of Mingsan Kaosaard and Khomsan Suriya (2008) which consists of physical flow, information flow, and financial flow. In addition, Panasaya Sirarungrojkanok (2016) who conducted a study on "Behavior and Satisfaction of Thai Tourist towards Tourism Logistics Management: A Case Study from Amphawa Floating Market, Samut Songkram" states that tourism logistics management should consist of physical flow, information flow, and financial flow which conforms to Thanaphat Thachaphan (2015) who conducted a study on "Tourism Logistics Development in Tarutao Island, Satun" and mentions about the elements of tourism logistics in the same way as Panasaya Sirarungrojkanok (2016) in terms of physical flow, information flow, and service providing. Besides, Chairit Thongrod (2016) who conducted a study on "Nakorn Pathom's Historical and Cultural Tourism Logistics Management" mentions about the composition of Nakorn Prathom's historical and cultural logistics management in many ways, such as physical flow, information flow, financial flow, attraction accessibility, tourist attractions, and convenience for the tourism. Meanwhile, Amarinrad Sribuanam (2016) who conducted a study on "Tourism Logistic Management at Wat Sri Suphan, Mueang Chiang Mai, Chiang Mai" mentions that tourism logistics should consist of physical flow, information flow, service, place, and personnel, whereas Maliwan Phinna (2015) conducted a study on "Tourism Logistics Effect on Tourists' Loyalty in Phae" which is a study on activities leading to tourism. It covers activities related to physical flow transfer, information flow transfer, financial flow transfer, facilitating infrastructure transfer, and sustainability transfer.

In conclusion, tourism logistic management is associated with the management in various aspects. It focuses on the flow of work procedures and activities to provide a service that can respond to the customers' needs promptly and

flawlessly. This flow management includes physical flow (including location, facility, and material flow management, accessibility to tourist attractions, tourism attractions, and tourism convenience), information flow, financial flow, knowledge flow, people flow, energy flow, waste flow, and service/product flow. In addition, it is found from the mentioned research that many researchers include various dimensions of tourism context as a part of tourism logistic management process, such as marketing promotion, relationship management, safety, revisiting, and experience sharing.

Apart from the study of tourism logistics management, the researcher also studied about supply chain management in the hospitality industry of which their activities cover the process of tourism logistics management. According to the study, it is found that Ellram, Tate, and Billington (2004) created a supply chain management model for the hospitality industry called the 'Service Supply Chain Model', consisting of seven main elements: information flow, production ability and skill management, demand management, customer relation management, supplier relation management, service management, and financial flow. Mena, Christopher, Johnson, and Jia (2007) conducted a study on the process of supply chain management in the semi-hospitality industry which is considered complicated because they sell products and services at the same time by combining two concepts: supply chain in manufacturing industry and hospitality industry, then synthesizing them to be a semi-hospitality industry supply chain which consists of 10 components, including information flow, customer relation management, supplier relation management, demand management, production management, purchase order filling, financial management, product claim, product development, and risk management. Therefore, it can be seen that some components of the supply chain management match with tourism logistics management such as information flow, production ability and skill management, hospitality management, and financial flow. However, supply chain management in the hospitality industry might extend its scope of work to be wider than tourism logistics management.

According to the literature review and research related and matched with tourism logistic management, the researcher has gathered variables and factors that are similar or coherent with each other in terms of the objective and content and summarized a category of the factors as Table 2.3.

**Table 2.4** A Summary of Variables Related to Tourism Logistics Management

<b>Variables/factors related to tourism logistic management process</b>	Mentzer et al. (2001)	Lumsdon and Page (2004)	Ellram et al. (2004)	Mrnjavac and Ivanovic (2007)	Johnson and Mena (2007)	Kovacic (2010)	Christopher (2005)	Rawiporn Khuchaoenphaisarn (2006)	Thaweesak Thepphitak (2007)	Mingsan Khawsaad and Khomsan Suriya (2008)	Khomsan Suriya (2008)	Naiyana Phaibul (2009)	Chutchapol Songsoontornwong (2011)	Takerngsak Chaicharn (2012)	Dittla Kantasaeng (2013)	Pairach Pibulrunroj (2014)	Thanaphat Thachaphan (2015)	Panasaya Sirarungrodkanok (2016)	Chaiyarit Thongrod (2016)	Naphat Thipsri and Khacheeom Chiatrakul (2015)	Amarinarat Sribuanam (2016)	Maliwan Phinna (2015)	<b>Total</b>
Service flow			✓	✓	✓	✓							✓			✓		✓	✓	✓	✓	<b>8</b>	
Physical flow	✓	✓		✓			✓			✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	<b>17</b>	
Information flow	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	<b>22</b>	
Financial flow	✓				✓	✓				✓	✓	✓	✓		✓	✓	✓	✓	✓		✓	<b>14</b>	
People flow			✓	✓		✓		✓	✓											✓		<b>6</b>	
Energy flow				✓		✓		✓	✓													<b>4</b>	
Waste flow				✓		✓		✓	✓													<b>4</b>	
Knowledge flow				✓		✓		✓	✓													<b>4</b>	

Considering tourism logistic management in Thai traditional medicine promoting hospitals, as far as the logistics management in the hospitals is concerned, it is found that there are three main components: 1) Flow management 2) Resources management and 3) Information management.

Flow management refers to the flow of service recipients and service (patient flow) and material flow including medicine, medical equipment, medical examination results, and medical records. The patient flow will be followed by material flow. An analysis of the logistics process for these flows starts from patient registers at the registration area, passes a scanning area to the checkup queue, receives an examination, and waits for medicine. If an additional laboratory checkup or X-ray scanning is required, they will need to bring the result to the doctor again for further consideration before proceeding the next step. Either waiting for medicine and then checking out, or being sent to admit at the hospital or passed to other hospitals, it is considered the patient flow through each checking point. Each point should coordinate with each other in terms of both staff and information to check the patient's status. All statuses including queuing, passing the result to the laboratory or x-ray scanning, receiving result and prescription should be linked with each other across the whole system (Information Sharing and Visibility) (Duangphan Kritchanchai, 2015) until the patient checks out. As far as logistics management for health tourism in hospitals is concerned, it is found that it should be an integration between hospital logistics management and tourism logistics management because some of the service recipients are not patients. Therefore, a viewpoint towards medical treatment can change to be a concern for being healthy instead. That is, they are not paying attention to their health only when they are ill, but they tend to focus more on illness prevention, which the hospitals should present the benefit from health promotion to the service recipients more instead of offering only benefit of medical treatment. However, they also have to pay more attention to the service recipients. So, good service is not only about innovation or technology, but it is about the service quality (Positioning, 2006), which plays an important part in the efficiency and effectiveness of health tourism logistic management process in Thai traditional medicine promoting hospitals.

Thus, it is obvious that health tourism logistic management process in Thai traditional medicine promoting hospitals pays attention to every detail from the tourists entering the hospital until they leave. For this reason, health tourism logistic management process in Thai traditional medicine promoting hospitals is associated with four processes in integration of hospital logistic management and tourism logistic management, which are physical flow management, information flow management, financial flow management, and service flow management of which their important issues are as follow.

### **2.9.1 Physical Flow Management**

Physical feature is a concrete thing that can be seen or perceived. It is also a service quality indicator consisting of the overall environment related with the service, facility, or place where the service providers and customers interact with each other, tangible things facilitating or supporting communication with service. Examples of the physical feature are environment designs, decorations, signs, name cards, or even stationery which can build an organization's image and effect the customers' expectations (Langeard, Bateson, Lovelock, & Eiglier, 1981; Shostack, 1977). It can be divided as follows:

1) Services Scape refers to all physical environments related to the place where the service is delivered including:

(1) External environment, such as design or overall appearance is related to the service location, including design and appearance of the building, entering sign, organization's name sign, and parking lot

(2) Internal environment, such as interior design, service equipment, signs inside the building, and air quality inside the building

2) Atmosphere or physical environment are important and sensitive components in the hospitality business. It is a perception of the unique atmosphere through each sense: 1) Visual refers to color, brightness, size, and shape 2) Aural refers to noise level 3) Olfactory refers to smell and freshness

3) Other tangible substances refer to visibly concrete things supporting communication with customers, such as name cards, staff uniforms, brochures, and so on.

According to Society and Health Institute (2014), environment design in the hospitals that support the medical treatment consists of areas including the reception hall, waiting area, patient card room, scanning area, toilet, changing room, examination room, consulting room, education area, dining area, and payment area. Many scholars have given their opinions on the physical management for the service recipients' convenience as follows.

(1) An area with appropriate size for each type of medical service and examination should be provided to facilitate both service recipients and service providers (Chaker & Al-Azzab, 2011; Mosadeghrad, 2013; Lee, Lee, & Kang, 2012; Andrade, Lima, Fornara, & Bonaiuto, 2012; Wanwilai Chantrapa, 1984). A building and location should be accessible easily with a convenient parking lot, proper walk way, enough waiting seats in appropriate positions (Vischer, 2007). Departments or service sections are well-arranged for the service recipients' convenience (Wanwilai Chantrapa, 1984).

(2) Atmosphere and cleanliness of the building should be provided as the hospital's environment influences the service recipients' mind. The air quality should be good (Seppanen, Fisk, & Lei, 2006). The atmosphere inside the building should be fresh and bright enough (Shikder, Mourshed, & Price, 2012). Sunlight might come at noon (Alimoglu & Donmez, 2005). A cool tone color could be used (Dalke, Little, Nicmann, Camgoz, Steadman, Hill, & Scott, 2006) to make it look clean. There should be no noise pollution. Trees or flowers should be provided around the waiting area with music and books for the customers to read while waiting. Soothing scents should be provided to replace the medicine scent to make the customers forget the boredom of waiting (Wanwilai Chantrapa, 1984). Moreover, the hospitals should build a relaxing and homely atmosphere in the building (Andrade, Lima, Fornara, & Bonaiuto, 2012).

(3) Preparation of tools, equipment, and necessary utilities for the service which should be ready to use at all times, (Mosadeghrad, 2013) in a proper amount, not too many or too less (Wanwilai Chantrapa, 1984). A correct way of cleaning is necessary to prevent infection (Lankford, Zembower, Trick, Hacek, Noskin, & Peterson, 2003).

Besides the hospitals, other health service providers like spas should provide a convenient and impressive location and environment for the service recipients as well. Also, allowing them to experience all five dimensions of the service which are shape, taste, smell, sound, and texture is also important. The entrance and exit should be convenient and noticeable easily to avoid interrupting other customers. The place should have a nice environment without congestion and pollution. It should be easily accessible to all service points. It should provide security and an alarm system. Moreover, a resting corner, dining room with healthy food and drinks, reading corner, consulting corner and meditation area should also be provided in the service area (Ministry of Public Health, Department of Health Service Support, 2009).

In conclusion, physical flow management is the management of external and internal environment as well as atmosphere of the place and facilities that create the movement of the service recipients from the origin to destination effectively.

### **2.9.2 Information Flow Management**

Information flow management is an inevitable part in today's business world environment because a good information system management that benefits the business is turning all systems into 'Just in Time', and then developing them to be 'Real Time' which will make them competitive. Information systems can enhance all processes of the logistics and supply chain industries to be the most efficient (Chanida Pongpanarat, 2011). Besides, information flow management is also a core value of customer's demand identification, information distribution, understanding customer expectation, service's scope identification, and provision of service information. A good information flow will decrease uncertainty that causes risk and negative feedback for the service (Lee & Billington, 1995; Davis, 1993; Scott & Westbrook, 1991). In Ellram, Tate and Billington (2004)'s opinion, an efficient information flow in the organization is considered one of the important factors that effects the success of the business. It influences the data exchange and decision making to be faster and more efficient in terms of identifying customer's demands, transferring information, and making accurate understanding on the level and scope of service. Also, it plays an



important role in giving feedback about a service's efficiency, which is essential for following up and controlling the procedure's result. Sasser and Fulmer (1990) state that using information systems to facilitate and coordinate activities or evaluate data promptly will help the service to be able to meet customers' needs, such as using information technology to exchange data with customers or suppliers. Moreover, information technology also helps to access to the data fast, real-time (Youngdahl & Loomba, 2000). Meanwhile, Khomsan Suriya (2008) states that information flow management also includes providing information for tourists such as direction signs, place recommendation signs, instruction signs, and warning signs. The 2 most important things for information flow management in the hospitals are reliability and accuracy (Chaker & Al-Azzab, 2011).

Duangphan Kritchanchai (2015) states that in the information flow management in the hospitals, the data should be shared and visible thoroughly in the information system (Information Sharing and Visibility). Furthermore, redundant process and unnecessary documents should also be eliminated. In this part, a flowchart, study of work procedure, procedure analysis, and application of lean together with an analysis of data linkage in this part is suitable the most. The information system mostly used today is HOSxP which can pass and share the data throughout the system. Today, it is found that most of the systems used for sharing and linking data are not efficient enough. A real-time patient's status presentation can be done via a system, but it has not been used yet. So, there are still redundant processes that need document forms and passing them back and forth as a main method of data sharing. As a result, it is necessary to understand that the information flow must go along with the service recipient and material flow coordinately. Furthermore, Duangphan Kritchanchai, Sophon Mueangchu, Phuthachard Aimdecha, and Pathama Kittisuwan (2017) state that the efficient information system for the logistic management process in the hospitals must be able to unite all data and support determination well. Besides, the hospitals should develop their human resources to have knowledge about information technology system management related to logistics and supply chain.

In conclusion, the information flow management is a management process that offers convenience and fast data access, exchange, and transfer for both service

recipients and service providers which will make the service more efficient and meet the customers' demand.

### **2.9.3 Financial Flow Management**

Financial flow management is one of the activities that necessary for facilitating customers (Mena et al., 2007). Financial flow management in tourist service consists of payment facilitation, product or service payment channels, ATM, credit card usage, and currency exchange (Khomsan Suriya, 2008).

If it is for the dimensions of payment channels and services, it is found that, at present, technology plays an important role in facilitating the services and service recipients. This is called an electronic payment system which means the payment process between the payer and the payee through the media and electronic channels such as credit cards, debit cards, electronic cash cars, internet payment, payment via mobile phone, and so on (Bank of Thailand, 2018).

Therefore, the financial flow management is a financial facilitation for customers from preparing for the process of receiving payment, various payment channels, convenient, convenient and fast receiving payment processes, and accuracy of financial documents.

### **2.9.4 Service Process Flow Management**

A service process flow management by service businesses is considered extremely important, like the manufacturing process in a factory that also needs an efficient management to deliver the best product to customers (Anothai Ngamwichiakit, 2015). It is a process related with procedures, methods, regular work, work with deadlines, and activities about product and service presentation to customers (Thirakitti Nawarath Na Ayuttaya, 2015). Meanwhile, Siriwan Serirath et al. (1998) states that the service process is the activity related to regulation, method and service practice presented to customers to provide them a fast and accurate service as well as to impress them. In Siwarit Pongsakornrangsilpa (2004)'s opinion, the service process is a process of delivering value to customers, which the entrepreneur has to arrange a system and design a process to be convenient for customers and to reduce the redundant process that makes customers wait for a long time along with arranging the service process flow to have less obstacles.

Somchat Toraksa (2007) states that for a service system in the hospitals, they should consider the goal: fast, accuracy, and impressive service for the customers from their first entry to their departure. The service system consists of the following components:

1) Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists.

2) The impressive reception of the service recipients in terms of location, such as cleanliness, tidiness, beauty, and reliability. Also, in terms of service providers' manner and service facilities like communication tools.

3) The prompt emergency service based on the service recipient's condition which suits their demand, such as lifesaving and pain relief.

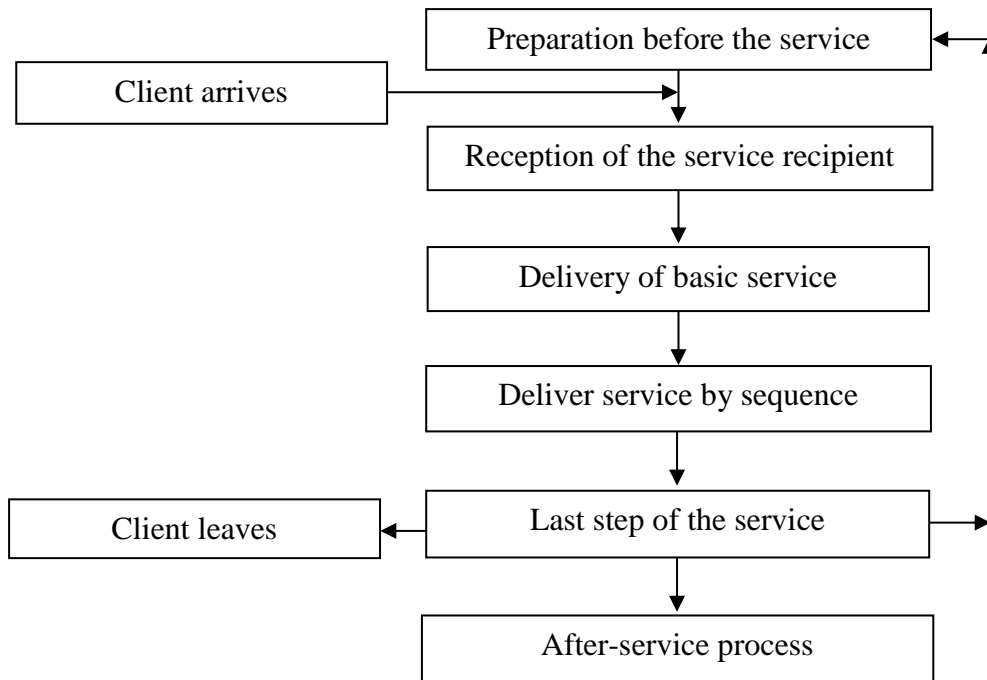
4) The full service based on each service recipient's condition and demand in theoretical way.

5) Hospitality before the service ends, such as giving suggestion or calling a driver for them.

6) Hospitality after the service ends, such as recording and taking care of the place's tidiness to serve the next service recipient.

7) Hospitality after the service ends completely in terms of following up, taking care, and providing a continuous service for the service recipients, such as forwarding and following up via phone, letter, or postcard.

8) Daily after-work processes such as keeping, washing, and cleaning the equipment along with taking care of tidiness and maintaining the tools.



**Figure 2.3** A Flowchart of the Health Service System

**Sources:** Somchat Toraksa (2007).

Besides, it is found that the service process of the spa service in Thai traditional medicine promoting hospitals is also similar to the service process of the healthcare service despite of a few differences in some processes. The spa service process starts from reception and registration, scanning, preparation of service recipient, treatment and health promotion, evaluation after receiving the service, giving suggestion and consulting, making appointment, satisfaction evaluation, and service payment (Ranong Hospital, 2011).

Hence, the service process flow management is to manage the service process to be fast, accurate, efficient, and effective as well as to impress the service recipients from their arrival until departure.

For the study of logistic management process for Thai traditional medicine promoting hospitals, it is an efficiency and effectiveness evaluation of the logistic management process in Thai traditional medicine promoting hospitals which are physical flow management, information flow management, financial flow management, service process flow management, and service quality. Seldin (1988) states that basically, the effectiveness evaluation is an evaluation for considering the

difference between expectation (efficiency or procedure ability) and the procedure's result or satisfaction. If there are less differences, it will be more effective. If there are more differences, it will be less effective. Moreover, it can be considered from coherence between the result and specified goal. Therefore, an efficiency and effectiveness evaluation of the logistic management process in Thai traditional medicine promoting hospitals is an evaluation of both the process's ability and result or satisfaction from the mentioned process.

## **2.10 Concepts of Service**

Service is a process or activity to deliver a product and service from a service provider to service recipients. (Meister, 1990, pp. 50-59). Kotler (2000) describes service as an abstract activity or advantage that a party offers to sell to the other in which the service does not belong to the service recipients completely. However, the service process might come with product selling or not. So, the service is an abstract thing that the service recipients receive from the service provider which can be perceived or can either satisfy or unsatisfy the service recipients Sudaduang Ruengruijira (1997) and Siwarit Pongsakornrangsilpa (2004).

Parasuraman, Zeithaml, and Berry (1988) proposes four characteristics of the service that distinguish the service from other regular products:

- 1) Intangible: it means that, generally, before buying a product, there are many ways to inspect or evaluate the product such as picking it up and considering its package, size, or even a sample which the customers can taste. However, buying a service is different in that the customers cannot test or evaluate its value like they do with the product because they have to use the service to have direct experience so that they can evaluate the service quality.

- 2) Varieties: refers to a change in service quality due to the service provider, service recipient, or time and situation of the service providing and receiving because in providing the service, human factor is required. If the service provider cannot maintain their service standard, or behavior of some customers who cause damage to the business, such as being loud which makes it hard to maintain the service's consistency. So, method of service itself is diverse to respond to different customer's demand.

3) Inseparable: refers to production, delivery, and consumption of the service occurred simultaneously. Service quality usually happens during service transfer which can be found from an interaction between the service providers and service recipients.

4) Perish ability: refers to production and service delivery happening simultaneously. Therefore, it is unable to be produced in advance and stored, then delivered or sold afterwards like general products.

On the other hand, Adul Jaturongkakul (1999, pp. 310-311) mentions six major characteristics of the service as follows:

1) Intangibility: as it is intangible, it is impossible for consumers to test the service in terms of taste, feeling, sight, sound, or smell before buying.

2) Inseparability: the service recipient will consider the service provider and service as the same thing. It cannot be separated to sell in different place and time. Therefore, service producing and selling occur simultaneously. It is a direct production and sale that the service provider has to provide the service recipients. So, this is considered the limitation of multiple market sale or multiple customers at the same time. Moreover, the service providers have to choose both service type and service provider. If they are not satisfied with the service, they will also be unsatisfied with the service provider, and lastly, they will seek for the service from other service providers who can serve them better. If the service provider can satisfy them, they will obtain loyalty from the service recipients. The marketing to satisfy customers is an agreement between the service provider and the service recipients, advanced service reservation to serve them a fully efficient service.

3) Variability: the service is changeable depending on the service providers, time and location. As the service providers' feeling, competence, and intention to deliver the service are different from each other, the service recipients usually ask for information from experienced persons before choosing service provider. Therefore, service provider organizations should control their service quality in the three following ways.

(1) Staff recruitment and training refers to a selection of staff with ability to deliver the service correctly as well as a training course to improve the staff's service ability.

(2) Standard of service process and service result should be set in the same way throughout the organization by planning a service strategy and program along with setting service procedures and service methods from the beginning to the end of the process.

(3) Providing a customer satisfaction evaluation system such as customer's complaint and suggestion, customer survey, and buying service from other service providers to compare service quality.

4) Perish ability: if there is no service usage in the offered period, the service cannot be reused. Since the organizations cannot store the service in the warehouse and use it later, they can have problems when demand for that service changes periodically. Such a situation is called "Seasonal Demand", for example, a public bus will have many users in the morning and evening on weekdays and will be free at noon and on weekends. In the aspect of marketing, this problem can be solved as follows:

(1) Differential pricing based on duration: by decreasing price during less-demand period and springing back to the usual price in peak time. This method is suitable for price-sensitive customers as it can draw more customers to use the service during the discount period and the organization can use their resources in the worthiest way.

(2) Offering other services along with the main service to allow customers to spend their time with other services, for example, a bank provides a coffee corner for customers so that they can spend time drinking coffee while waiting for the banking service. This can raise the customers' satisfaction. A phone service carrier provides free internet for customers who are waiting for a bill payment service or repair service.

(3) Offering an opportunity for customers to participate in the service, such as self-served ice and beverage in a convenience store, and buying a ticket from vending machine by themselves. These processes help decrease a crowded service.

5) Heterogeneity: each service provider has their own service pattern and method. So, it is hard for them to set a service standard to be the same. Moreover, the same service provider might provide different services at different times, so it is

hard for the service recipients to determine the service quality. In some cases, it is hard to inform the customers in advance what the service will be like, such as watching a sports match which one can never know in advance whether it will be fun or exciting, it is important to pay extra attention to service planning to ensure that the service quality will be consistent.

6) Simultaneous production and consumption: a product needs to be produced before being sold and consumed, but most of the service will be sold first, then produced (serve) and consumed (receive) at the same time. For example, to use an airline service, customers need to buy a ticket first, and they will receive the service from the airline while traveling. Therefore, the service cannot be separated from the service provider.

After considering, it is found that four out of six major characteristics of the service proposed by Adul Jaturongkakul, 1999, pp. 310-311) are in accordance with Parasuraman, Zeithaml, and Berry (1990)'s concept, and there are two different characteristics which are heterogeneity and simultaneous, production and consumption.

For a non-product related service, it is considered intangible, thus it cannot be separated from the service provider. It can be changeable, lost, diverse, unable to store, and duplicated. Moreover, production and consumption occur simultaneously, and it is difficult to set the standard. Anake Suvanbundit and Passakorn Adulpattanakit (2005, pp. 25-26) add that trustworthiness is necessary for the service, as the customers can never know how they will be treated. Therefore, the customer's decision should be built on trust, which is different from general products that we can consider from their appearance or quality. Also, the customers have ownership over the goods, but they have non-ownership over the service. Meanwhile, Nithipol Putachote (2006, pp. 170-171) also adds that the service intensity depends on the service provider's feeling as they are the one who has direct interaction with the customers. Each party might have different needs, personalities, and feelings in each period. Although the Department of Tourism provides several types of standards for tourism services, they are still unpopular among entrepreneurs.

Service consists of three main parts which are a service provider, customer, and service. A service provider must be able to meet the customer's needs to satisfy



them because if the customers are satisfied with the service, the service provider will gain loyalty from them. Meanwhile, the customers usually expect a good and fast service with suggestion and confirmation from other customers, service quality guarantee, and willingness of the service provider. If the customers are not satisfied with the service, they might no longer use the service. Lastly, the service is a thing that allows the service provider and customers to meet each other which can build the customer's perception and satisfaction level, especially with the tourism service. A competent service will create a good image for tourism as it impresses the tourists which will lead to a word-of-mouth advertisement. Therefore, building good relations between the service providers and customers is at the core of good service which should consist of response to the customer's needs, safety building, satisfaction building, completion of service, worthiness, convenience, and no negative effects to the customer and environment. The service provider is considered having an important part in the success of the service.

## **2.11 Concept of Service Quality**

Nowadays, studies about service quality has become a significant topic for research. It is obvious that service quality is essential for the organization to gain profit (Zahorik and Rust, 1992) and build customer's satisfaction (Boulding, Kalra, Staelin, and Zeithaml, 1993). Also, it plays an important role for business organizations to maintain their customer base (Reichheld & Sasser, 1990). Moreover, service quality also helps the organization to gain market share (Morash & Ozment, 1994, as cited in referred to Park, Robertson & Wu, 2006). Therefore, service quality is considered the driving force to enhance the organization's competitiveness, and it is also important for building positive differences for the business. According to Gronroos (2001), a business that can provide a good and qualified product or service consistent with the customer's demand or expectations will satisfy and impress the customers (Piyaphan Klanklin, 2001). Furthermore, Alexandris, Tsorbatzoudis, and Grouios (2002) supports the idea that service quality affects the consumer's behavior in sharing their words of mouth and using the service which will finally lead to loyalty to the service.

### **2.11.1 Definition of Service Quality**

Lewis and Boom (1983) describe service quality as a response to customers' needs and ability to deliver the service that meets their expectation. In addition, service quality builds customer's impression towards the product or service (Bitner and Hubbert, 1994).

Parasuraman, Zeithaml, and Berry (1985; 1988); Cronin and Taylor (1992) state that the service quality is an attitude towards the service provided by an organization which comes from the comparison between the customer's expectation and the received service. It is in accordance with Boone and Kurt (1998)'s opinion that the service quality is an expectation of the quality and the quality perceived from the service.

Customers determine the service quality by comparing their perception of the service with their expectation of the service; therefore, service quality will be evaluated based on the customer's perception. What the customers see as qualified means that it truly contains quality (Gerson, 1993). Service quality is the key relationship between the customer's existing expectations towards the service and their perception while experiencing the service including after service (Fitzsimmons & Fitzsimmons, 1994).

Lloyd-Walker and Ping Cheung (1988) state that service quality is an excellent service that meets or exceeds the customer's expectations which can bring customer's satisfaction and loyalty. Nonetheless, service quality is an ability to response to the customer's needs which means that it meets the customer's or service recipient's demands (Conformance to Requirement) who gain benefit from that product or service (Jiruth Srirattanabal, 1994).

Garvin (1984) states that service quality is a service that the service recipients receive, and it meets their expectation which can be considered as service measurement based on the customer's regular expectations. In Lewis and Booms (1983)'s point of view, the customer's expectation is the behavior that can either be positive or negative depending on their previous experience (Oliver, 1981).

Service quality is a comparison between expectation of the service and perception, or a comparison between customer's expectation of the service and their perception of the actual result of the service (Cronroos, 1983). Customer's (1983)

perception impacting the service quality is in six dimensions: reliability, trustworthiness towards the service and safety, convenient and fast, interaction and communication, ethics and morals of the service provider, education and suggestion (Orachon Acharit, 1998).

Jiruth Sriratthanabal (1994) defines service quality in marketing terms as an ability to response to the service recipient's requirement which is to meet the customer's demand (Conformance to Requirement) who gains benefit from that product or service provided. Due to the four characteristics of the service: intangibility, variability, inseparability, and perish ability, service quality is evaluated from the service process and outcome.

Parasuraman, Berry, and Zeithaml (1991) state that in order to provide an excellent service, the service should meet or exceed the customer's expectations. Leaders among the service providers should have the following characteristics:

1) Service Vision: it is believed that the service will be a part of the business's future. A high service quality will be a great strategy leading the organization to be the at top of the industry and gain profit.

2) High Standard: it is believed that an excellent service is good, but it is not enough to make the organization outstanding from the competitor. Leading organizations in the hospitality business should pay attention to detail and see an opportunity from what is ignored by the competitors.

3) In-the-field leadership style: focusing on a serious practice more than a theory. A two-way communication must be focused in order to receive information and fact as well as to foresee the situation from the actual practice.

4) Integrity: it is necessary to instill service-mind attitude into all staff's mind to build pride towards the service among them.

From service fundamentals towards the leader in the service business, it might not be enough to be different from other organization. Service quality enhancement can elevate the organization's service level and clearly bring out its uniqueness, which is one of the organization's strategy to meet or exceed the customer's expectations which will bring loyal customers to the organization.

To build service quality, it is important that the service components should conform to each other starting from understanding the necessity and customer's

requirements along with their expectations and different service experiences to arrange service elements and relations to create good service characteristics as information for the customers to help them make decisions. For the organization or agency that provides a service, they need to understand and consider the essential components to adapt the concept into practice in order to provide an exceptional service that meets the customer's expectations and demand as well as related with the service quality as follows (Jittinan Dechakupt, 2006)

1) Customer's satisfaction: a goal of a good service should mainly focus on the service recipient. Satisfying the customers as much as possible should be taken as the service provider's direct duty because the service recipients usually have their service target in mind and they expect the service provider to respond to their needs. If the service provider is aware of or knows the customer's needs and is able to response to it properly, the service recipient will be satisfied and feel good with the service.

2) Customer's expectation: the service recipients usually expect from the service; therefore, the service provider should know the basic customer's expectations and survey the specific customer's expectations in order to present the right service for the customers and satisfy or impress them with the service exceeding their expectations, which basically is a prompt and efficient service with the service provider's hospitality.

3) Service preparedness: readiness of the service at the right time and form will bring service efficiency. Organizations or agencies need to inspect and take care of their staff and equipment to be ready for service all the time in order to deliver the service promptly.

4) Service value: refers to a straightforward service that does not take the customer's advantage and shows its worthiness. So, the service value depends on the service the customers receive and are impressed with.

5) Service interest: a sincere and fair attention to customers at all levels, or an equal service is regarded as the most important principle of the service. Therefore, it is necessary that the service provider must pay attention to all customers fairly and always treat them with respect.

6) Hospitality: customer reception with a smile, polite manner, and friendliness as well as understanding their demand will make the customers feel good and impressed with the service they receive.

7) Service efficiency: a successful service depends on a service system, clear process, service plan, and service strategy development to maintain service quality. To build service efficiency, the organization should start with analyzing the customer's demands, customer's responses, and impressions in order to set service's goals, patterns, and basic factors in accordance with the customer's demands.

In conclusion, service quality is a result of service management and delivery that is convenient and appropriate for the customer. Also, it must be able to respond to the customer's requirements and expectations along with impressing them to meet their highest satisfaction.

### **2.11.2 Service Quality Evaluation**

Many scholars agree that service quality is specified by the customers themselves. They will compare their expectations on the service with perception towards the service they received whether they are satisfied with the service or not. Therefore, a lot of research usually questioned how customers perceive the service quality and how to measure or evaluate the service quality (Akan, 1995; Hill, 1995; Min & Min, 1997; Pariseau & McDaniel, 1997; Gabbie & O Niell, 1996; Galloway, 1998; Tsang & Qu, 2000; Victorino, Verma, Plaschka, & Dev, 2005; Akbaba, 2006; Taner & Anthony, 2006; Wilkins, Merrilees, & Herington, 2007; Nasution & Mavondo, 2008; Wang, Royo Vela & Tyler, 2008).

Service quality evaluation is regarded as a challenge for researchers and organizations because of the uniqueness of the service characteristics (Tiernan, Rhoades, & Waguespack, 2008; Parasuraman, Zeithaml, & Berry, 1985; Johnson, Tsiros, & Lancioni, 1995), which is different from the product quality evaluation. That is physical differences of the product are that it is visible, tangible, and customers can consider before buying or consuming. Unlike the product, service quality evaluation is an evaluation of intangible things; however, the service is a process of production and consumption at the same time (Tiernan, Rhoades, &

Waguespack, 2008). Furthermore, service quality is unable to evaluate only from the service outcomes (Johnson, Tsiros, & Lancioni, 1995), but the service production process also needs to be considered.

Several scholars have designed various service quality evaluations such as IPA generated by Martilla and James (1977), SERVQUAL generated and developed by Parasuraman, Zeithaml, and Berry (1985) SERVPERF generated by Cronin and Taylor (1992) which was developed from SERVQUAL and SERVEX (Service Expectation) which was generated and developed by Robledo (2001), which is a measurement of customer's expectation towards the service only. The tool is accurate and efficient, but it still is not compared with anything, therefore, it is hard for the service provider to understand customer's expectation in order to satisfy them.

Spreng and Mackoy (1996) suggests that service quality evaluation can be weighted from the customer's perception and satisfaction of the service, or Model of Perceived Service Quality and Satisfaction proposed by Spreng and Mackoy (1996) in order to strengthen the understanding of a group of variables, the customer's perception of service quality, and customer's satisfaction by modifying the model of Rust and Oliver (1993) which evaluates service quality from 10 characteristics: convenience in making an appointment, staff's friendliness, attention to customer's inquiries, correct information providing, knowledge, consistency of consultant, assistant on long-term planning, suggestion for choosing a training course suitable for their profession, attention to staff's living, and professionalization.

Haywood-Farmer (1988) mentions that service quality evaluation can be done by using the three characteristics of attribute service quality, which are physical facilities, service operator's behavior process, and professional decision.

Evan and Lindsay (1999) suggests that service quality evaluation can be done by evaluating the duration of the service, completion of the service, politeness of the service provider, consistency of the service, convenience of the service, accuracy of the service, and the service provider's response to customer's requirement.

Frost and Kumar (2000) proposes that the service quality evaluation can be done by internal service survey using perception and expectation gap evaluation in terms of internal customers or front-line staff's interest compared with the service delivered by internal suppliers or support staff. According to an evaluation of internal

service quality. Service gaps consist of three internal service gaps. The first internal service gap shows the difference of support staff's perception about the expectation of front-line staff over who is the internal customer. The second internal service gap is the difference between service quality and service outcome, or in other words, the gap of internal customer service's result. The third internal service gap focuses on front-line staff. This gap is based on the difference between front-line staff's expectation and support staff's perception on service quality.

Philip and Hazlett (1997) suggests that service quality evaluation can be done by P-C-P or Pivotal-Core-Peripheral Attribute, which is a service evaluation model consisting of three main attributes: pivotal attribute, core attribute, and peripheral attribute. Service quality related to these attributes might have an overlapping scope. The ranking starts from pivotal attribute, which is the ultimate service or product from service provider. In other words, it is a service that the customer required. Core attribute is a combination of process, staff, and service structure that customers can participate in and perceive. It highly affects the satisfaction level. The next attribute is peripheral attribute which is a factor or process that creates a service that exceeds the customer's expectations. When the customers evaluate the service, they will be satisfied if the pivotal attribute is exceeded. If the service frequently depends on core attribute and peripheral attribute, it means that these attributes become more important.

Werarath Kijlertphairoj (2005) states that if quality is the service that meets customer's expectation, then service quality will depend on the service outcome the customers receive from the service and processes leading to this outcome. According to research, it is found that there are 10 factors the customers use for service quality evaluation:

- 1) Reliability: reliability in service quality standard is related to outcome and readiness of the service. Therefore, the organization should deliver the service properly since the beginning, and should keep the promise with customers such as accurate payment collection, accurate data storage, and punctual service.

- 2) Responsiveness: it is related to staff's willingness or readiness to deliver the service, and it is also related to a prompt service, such as immediately sending a copy of the transaction form, and immediately calling the customers back, and delivering a fast service.

3) Competence: service delivery with competence means having skills and knowledge to deliver the service in their related fields. Knowledge and skills of staff is also important, as it's those who have to communicate with customers.

4) Accessibility: it is related with easy and fast communication, such as not too long waiting time during the service, open or close time that is convenient for customers.

5) Courtesy: it is related to politeness, respect, empathy, and courtesy received from communicating with the service staff such as attention to customer's belongings, staff's friendliness, attention, and thoughtfulness.

6) Communication: means providing information to customers in a simple way along with willingness to listen to customer's opinions. Also, it can mean that the organization might need to change the language level according to each customer group, such as using more profound and complicated knowledge when communicating with the customers who know about that service well while using simpler and more understandable language with another group who don't. Moreover, it is also related to explaining service instructions, informing service expenses, and ensuring consumers that their needs will be responded to.

7) Credibility: it involves value, trustworthiness, and honesty. However, trustworthiness is related to awareness of the customer's highest benefits. Factors leading to the trustworthiness include the organization's reputation, staff's personality, and the service provider's honesty.

8) Security: customers should be safe from danger, risk, or worry. Security is related to safety in terms of body, financial stability, and personal information storage.

9) Knowing the customer: an attempt to understand customer's needs, such as studying about the customer's expectations and requirements, paying attention to customers' individually, and remembering regular customers.

10) Tangible service: it is the only tangible factor among all factors that customers use for evaluating the service quality. For example, facilities, interior and exterior decoration, service staff's appearance, equipment or tools for service, service representative in terms of other customers' physical feature and behavior of those who come to use the service in the same place.



However, according to research, it is found that a well-known tool used for service quality evaluation, which is considered the most standard and acceptable is SERVQUAL (Akan, 1995; Buttle, 1996; Chang & Chen, 1998; Juwaheer, 2004; Akbaba, 2006; Liou & Chen, 2006; Taner & Anthony, 2006; Carrillat, Jaramillo, & Mulki, 2007)

Service quality evaluation model of Parasuraman et al. (1985) is commonly used to evaluate service quality. It is developed for evaluating service quality based on the customer's perception. The development of SERVQUAL model of Parasuraman, et al. (1985) comes from research on "Factors Impacting on the Service Quality" which is divided into four phases, including Phase 1) a study on a group of service providers and quality service recipients from several companies and service developments from the study result; Phase 2) an empirical research focusing on the study of the service recipients using the service quality pattern developed in Phase 1 as SERVQUAL service quality evaluation tool; Phase 3) an empirical research like Phase 2, but the scope is expanded to cover more companies and procedures. It starts from research in 89 offices of the five leading companies in the hospitality business by in-depth interviewing a group of executives and conducting a survey on each group. Next, the researcher studies six types of hospitality businesses, which are maintenance business, credit card business, insurance business, toll call business, sub branch bank business, and service agent business; and Phase 4) a study on the service recipients' expectations and perception of the service. Expectation is an actual standard used for determining a service quality (Kotler, 2000). Several researchers such as Parasuraman, Zeithaml, & Berry (1988) define 'expectation' as an attitude towards consumer's desire or demand that they expect to happen in the service. Customers buy a service to respond to their specific demand and evaluate it based on their expectations. Demand is rooted deeply in human's subconscious resulting from each person's living and status. Once the need emerges, the motivation to get the response will appear. Albrecht (1990) states that expectation arises from knowledge of product and service along with information they receive before using such product or service. Rust, Anthony and Timothy (1996) indicate that expectation is a process of the possible result reflecting what might happen, should happen, or happened in the best circumstance only. Oliver (1981) states that expectation is the customer's

prediction towards what is about to happen in the near future. Meanwhile, Oxford's dictionary (1989, p. 281) describes it as a mental state which is a thought or discrete opinion of a person who forecasts how a thing should be or happen. Clay (1988, p. 252) describes the expectation towards an action or situation as a prediction of positive future or positive hope as a level of probability of the expected thing. Finn (1921, pp. 15-16) states that expectation is a person's or self-evaluation in terms of conscious mind, and that expectation will be used as a guideline to specify behaviors that can impact the person one has an expectation on or on himself in the way he believes is right. Therefore, expectation means a thing that one desires or wishes to happen, which this desire comes from one's past experience, environment, hearsay, and so on as his determination criteria.

On the other hand, 'perception', according to Kotler (2000)'s theory, is one of the psychological factors which supports purchase decision. Once a person gets motivated, they will seek for a response. However, each person's response or behavior is different depending on perception towards the situation. Perception is a process of each person's selections, evaluation, and interpretation of the same input, but the perception might vary depending on each person's fundamental and internal condition. For example, some people have a perception towards a fast-speaking salesman as an aggressive and unfaithful person while some think of him as smart and supportive. Different perception of each person comes from three types of perception processes: selective attention, selective distortion, and selective retention. For example, consumers can see many advertisements in a day, but they tend to be interested in only some of them. Therefore, marketers attempt to make their advertisement attractive for their target group. According to the study, consumers responded to the stimulator diversely, but most of all, they likely responded to the stimulator that met their interest, such as the people who were looking for a computer will be interested in a computer ad and ignore stereo ads. Moreover, consumers tend to be interested in the stimulator that meets their expectations. For example, when customers visit a computer shop, they are interested in computers more than stereos as they do not expect to see any stereos in a computer shop. Moreover, they also tend to be interested in outstanding or special stimulators rather than a normal ones. Selective distortion occurs when consumers tend to receive information and translate it

differently from what the messenger wants to convey, instead, they translate it from their own aspect, which the marketer cannot do much to solve this matter. For selective retention, people might forget what they once perceived, but some of them will conform to their attitudes or beliefs. Since, people have selective retention, the marketer attempts to use an interesting stimulator such as a TV series and sending information repeatedly to build recognition among the target group. For instance, a kid's product advertisement usually has a cartoon character or a story that kids are interested in to make them recognize the product while a teenager's product advertisement usually use a teenager as a presenter with phrases popular among the teenagers. Various scholars give the definition to the term 'perception' similarly. Assael (1998) states that the perception is a selection, management, and translation of the marketing stimulator and stimulator in the environment of consumer's thought. In other words, Mowen and Minor (1998) explains that the perception is a process that each person opens up to the information, and gives an interest, management, and translation to the stimulator or information. Garrison and Magoon (1972, p. 109) mention that the perception is a process that the brain translates/interprets the information received from their body senses and environment which is a stimulator to understand the stimulator's meaning and features. Benjamin, Hopkins, and Jack (1994, p. 131) define the perception as a process of system arrangement, translation, and screening of information with feelings associated with consideration. Kotler (2003) also adds that the perception is a process that people select, manage, and translate the information. Numerous scholars agree that perception is a process that an individual selects to receive, manage, and interpret the information which the perception will be different based on the individual's experience and fundamentals.

Zeithaml, Parasuraman, and Berry (1990) state that service quality comes from expectations (Expected) and perception (Perceived) of the customers. According to a study on the hospitality business, it is discovered that demand or expectation in the service attributes indicates the service quality, and the researcher has specified 10 dimensions of service quality as a tool for service quality evaluation:

- Dimension 1     Tangible
- Dimension 2     Reliability
- Dimension 3     Responsiveness

Dimension 4	Competence
Dimension 5	Courtesy
Dimension 6	Creditability
Dimension 7	Security
Dimension 8	Access
Dimension 9	Communication
Dimension 10	Understanding of Customer

Later, the SERVQUAL model was tested again by a group interview method. SERVQUAL service quality evaluation model is divided into two parts: the first part is service expectation evaluation from the organization, and the second part is perception evaluation after receiving the service. The score obtained from the SERVQUAL model can be converted by the difference of perception evaluation score and expectation evaluation score. After the accuracy and reliability test, it is found that the SERVQUAL model can be divided into five major dimensions by combining some dimensions with each other, but they are still related with the original 10 dimensions of service quality evaluation. The improved SERVQUAL model consists of:

Dimension 1	Tangibility
Dimension 2	Reliability
Dimension 3	Responsiveness
Dimension 4	Assurance
Dimension 5	Empathy

For a study of Logistic Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, the researcher chooses SERVQUAL as a tool for evaluating service quality of operators in the hospital, which can well explain a detail of the current quality. The detail of each factor used for the service quality evaluation are as follows: (Lovelock, 1996, pp. 464-466; Zeithaml, Bitner, & Gremler, 2009)

1) Tangibility refers to a visible physical attribute of facilities, such as tools, equipment, personnel, and the use of signs or documents for communicating with customers as well as a concrete service the customers can perceive.

2) Reliability refers to the ability to deliver the service as promised to the customers. The service must always be appropriate and accurate as well as

consistent, which will make the customers believe in the service's reliability and trustworthiness.

3) Responsiveness refers to preparedness and willingness to deliver the service. The service must be able to respond to the customer's demands promptly. It should allow the customers to use the service easily and conveniently. Moreover, the service should be distributed evenly and fast so that the customers do not have to wait for a long time.

4) Assurance refers to a service provider's skill, knowledge, and ability to deliver the service and respond to the customer's demands in a polite manner that will assure them that they will receive the best service.

5) Empathy refers to care, attention, and customized service provided to satisfy the customer with various demands.

## **2.12 Related Research**

Rawipa Homsetthi (1998) a study on "Effectiveness of Tourism Policy Implementation: Case Study of Chiang Rai" which is a study of a work plan, Chiang Rai's tourism supporting policy, and tourism policy implementation. The result of the study is considered from a number of tourists visiting Chiang Rai during the first half of the year which was higher than the target level. The amount of income in the first half of the year was also higher than the target at a middle level, whereas the tourist's satisfaction level towards Chiang Rai's service and tourism facilities is at a high level. Factors related to the policy and management associated with the effectiveness of the policy implementation are clearness of the objective, readiness of the tourism supply, sufficiency of the management resource, personnel's competence, communication process with the personnel, personnel's support, and social condition.

Buranasak Rueksamruad (2001) a study on "An Evaluation of Tourism Supporting Policy in 2000: Thai Tourism's Year" which studies only the scope of Tourism Authority of Thailand of District 5, Central region. The study aims to evaluate the result of the organization's tourism supporting policy for campaign 2000: Thai Tourism's Year, the organization's management and preparation, and threats of the policy implementation and solutions. The results showed that Office of the

Tourism Authority of Thailand in District 5 in Central region improved their human resource, including improvement of operation, participation, and adaptability to the environment. For an evaluation of the tourism supporting organization's policy including an evaluation of management, planning, and activity and project arrangement conforming to the campaign, it is found that the organization prepares themselves for the campaign and implements the policy until achieving the objective. Eventually, they can succeed 2000: Thai Tourism's Year campaign. However, major threats are insufficient and limited budget, insufficient personnel for the work and size of the responsible area, and lack of cooperation and coordination from external agencies. Moreover, tourist attractions in the area have not been developed properly for supporting tourism. The locals still lack knowledge about tourism, leading to a lack of participation in the campaign. The research's suggestion is that budget and equipment should be allocated; the personnel should be educated about tourism; tourism related data should be well-stored and easy to use; coordination and public relation should be encouraged more to allow the related agencies as well as the locals to participate in supporting the tourism more.

Duangta Chatuporn (2000) a study on "Effectiveness of the Policy Implementation: Case Study of 1998-1999 Thai Tourism's Year" which the objective is to study the effectiveness of the policy implementation. According to the result, a group of samples from tourism business thinks that this policy is very successful in presenting information about Thailand, especially a marketing strategy and advertisement to gain potential tourists. However, small and medium domestic travel agents gain fewer benefits from the project while the larger ones which are joint venture with foreign companies gain more benefit. Moreover, Tourism Authority of Thailand's attempt to develop new tourist attractions and impressive service is not satisfying enough. Staff in the organization agree that the project should be continued along with the policy. Nevertheless, the lack of skilled personnel and budget are still the main problems against the policy implementation.

Wanchalee Noriya (2005) a study on "Evaluation of Water Sports Competition Project, Nakhon Pathom" aiming to evaluate the project's result and study problems and threats from the project implementation. CIPP evaluation model is applied to assess context, input, process, and output of the project by interviewing

and using a questionnaire to collect data from four executives in terms of input factors and processes, along with interviewing committees responsible for the project from 19 departments. The data collection is done by purposive sampling which two people from each side are selected: 38 people consisting of chairmen and secretaries or committees. On the other hand, the data collection in terms of output is done by a satisfaction questionnaire given to 420 visitors at the event. According to context evaluation's result, it is found that Nakhon Pathom has a potential in terms of location and environment which is suitable for arranging the water sports event, except the weather because there is usually heavy rain during the event. The event is operated by the collaboration among three agencies: Nakhon Pathom province, Royal Police Cadet Academy, and Mahidol University together with the provincial governor as a chief executive for the management leading to an efficient decision during the procedure as well as an achievement of the event which can meet the objective and goal. For the input evaluation, it is found that the input factors including committee, budget, and equipment of each department are well-prepared, sufficient, and appropriate where the process evaluation's result is that almost every department has a systematic working process such as planning, organization arrangement, recruitment, and command and control system which makes each department's procedure successful. Meanwhile, product evaluation shows that the overall visitor's satisfaction towards this event is high, but it is suggested that the event needs more publication; coordination points should be set; staff's responsibility should be allocated clearly; meetings should be held for more opinion exchanges and discussions; more preparation for handling unpredictable weather is necessary; the starting point should be relocated to a more noticeable position; and the activities should be set up within the same appropriate area in order to make the event more successful.

Wang and Ap (2013) a study on "Factors Affecting Tourism Policy Implementation: A Conceptual Framework and a Case Study in China". According to the result, it is found that there are four affecting factors: 1) economy, society, and environment, 2) preparation of major organizations, 3) relationship between organizations, and 4) support from each organization. In addition, the case study in China can separate a rule of each factor which has limitations. The rule helps the study to be more practically real and helps linking each factor's concept to each other.

Chawadee Kosol (2012) a study on “Effectiveness of Office of Tourism and Sports’ Policy Implementation in Sukhothai” of which the objectives are to study a policy, plan, and effectiveness level of the policy implementation as well as to study factors affecting the effectiveness of Office of Tourism and Sports of Sukhothai’s tourism policy implementation. There are 1,022 participants in this study including executives and tourism related governmental staff, community leaders, related private companies, local people, and Thai tourists visiting Sukhothai. Tools used in data collection are an interview, questionnaire, and observation, which are done by conducting a qualitative study from a quantitative research’s data to find a guideline for Sukhothai tourism policy development. Semi-structure interview is done using a sample group who are experts and those who truly have experiences on tourism in order to obtain the most complete information about tourism. The result shows that all three sample groups including tourism related governmental staff, Sukhothai people, and tourists visiting Sukhothai adapt the implementation model, which is Woradech Chantarasorn’s management model and organization development model to evaluate the result of Office of Tourism and Sports’ policy implementation including organization structure, personnel, budget, location, leadership, participation, teamwork, and motivation. According to the result, the level of effectiveness of tourism policy implementation by Sukhothai’s Office of Tourism and Sports is at a high level for all three groups.

Sombat Thamrongthanyawong (2015) conducted a study on factors affecting the policy implementation from several scholars, and it is concluded that the factors including a source of the policy, clearness of the policy, policy support, complication of management, operator’s motivation, and resources management to support policy implementation appropriately and sufficiently are effected by several related conditions, such as legal limitation, and necessity of the consideration based on the government system’s rationale. Successful policy implementation might depend either on co-factors or specific factors according to the features of policy, plan, or project.

Paphatsorn Yocharak and Kitti Bunnak (2016) conducts a study on “Tourism Supporting Policy Implementation: A Case Study of Koh Samui, Suratthani” which aims to study context of the area, factors affecting the tourism supporting policy implementation, outcome and effect of the policy implementation, and suggestions in



terms of policy and practice for supporting the tourism. Qualitative research is used as the research's methodology, and a questionnaire is used as the data collection tool. The result finds that the context of Koh Samui area has 252 km of area, which Koh Samui itself has 227 km of area while the rest is the area of 18 other islands. There is a population of 62,529, including numerous non-registered population who have settled in the area. Due to the landscape of the island with abundant natural resources along with culture, local tradition, and friendliness, the locals have shaped the identity of Koh Samui for a long time. These are all attractions bringing tourists to Koh Samui and making the place to be regarded as a 'paradise'. It has become one of the world's most popular destinations and the main tourist attraction that brings income and reputation to Suratthani and Thailand. As a result, the tourism supporting policy is set to develop the economy and distribute the income towards the locals. The factors affecting the tourism supporting policy implementation, are leadership of a chief local executive, personnel's knowledge on tourism, clearness and properness of the regulation, budget system, marketing strategy's efficiency, cooperation among local entrepreneurs, safety of life and property, transportation system, and facilities in the area. Although the mentioned factors affect the success of the policy, the policy implementation is like a double-edged sword. That is, it leads to both positive outcomes and negative effects to Koh Samui in various aspects. The first outcome is continuous growth of the economic system leading to employment, income, income distribution, and tourism benefit for the locals. The second outcome is continuous learning development in the society and community and people's attention to foreign language learning to prepare themselves for ASEAN. The third outcome is people's awareness and participation in environmental preservation and tourist attraction development. On the other hand, the first effect is economic effect. The tourism support raises people's cost of living in the area to be higher; price of products and services are higher. The second effect is social effect. An expansion of tourism industry intensifies the population in Koh Samui, and non-registered population increases as well. This leads to insufficient public utilities, and makes it hard to organize the area. The last effect is environmental effect, such as illegally letting waste water into the sea, land excavation, public land invasion, and increasing waste bringing pollution that damages the local's health.

Chayanee Prakorbchat and Sanor Klinngam (2016) a study on “Implementation of 30-Baht Health Care Policy by Hua Hin Hospital, Prachuabkhirikhan” finds that factors affecting the success of this policy is structural factor. It is found that the result of the policy implementation is mostly at a high level. The hospital sets their own internal management plan for organizing a service system. They arrange the service process by sequence with appropriate waiting times. The service process is simple and fast which allows patients to access to the public health service easily. The service that meets the patients’ and their relatives’ needs is provided, for instance, sending a doctor appointment by post; a continuous follow up with the patients such as making a monthly appointment for the patients, or seeing the doctor before the appointed date if they feel unusual; coordination among hospitals to pass the patient who needs continuous treatment to the higher potential hospital in emergency case promptly and suitably; following up with the patient who is sent to another hospital to inform their relatives about their condition; dealing with customers’ complaints efficiently; and arranging public relations or announcing information about the 30-Baht health care policy such as making a clear and understandable brochure/ poster/ information board about the 30-Baht health care project to allow people to be informed widely. For human resource factor, the policy implementation is at a high level, mostly. Hua Hin Hospital has sufficient personnel for the medical services and management as well as potential of the policy implementing personnel, such as giving accurate and reliable information about medical care, explaining about the patient’s symptoms and how the patient should take care of themselves in detail; willing to listen to the patient’s concerns and needs; paying attention to the patient’s symptoms and willing to give them advice; and readiness to deliver the service in terms of body condition and the patient’s safety. For a health care budget factor, the policy implementation is also at a high level. The hospital charges the expense of 30-Baht health care fee appropriately. The budget obtained from 30-Baht fee is enough to cover the expense from public health service improvement/ development which allows people to save their health care expense. For a location factor, the policy implementation is at a high level. The hospital’s location is easy to access with convenient transportation. Area arrangement and environment is appropriate, especially in terms of cleanliness, safety, convenience and adequacy of the provided facilities, such as telephone, parking lot, toilet, drinking

water, etc. The hospital provides a spacious and ventilated waiting area with enough seats. A garden with trees and seats is also provided properly and neatly. For the material factor, most of the policy implementation is at a high level as well. The hospital has good quality medicine and medical supplies, clean and modern medical equipment, which is ready and has enough medical equipment and supplies for the service, availability of medicines and medical supplies for a specific disease to deliver a complete service, and qualified and modern medical equipment for the medical treatment. Methods for the health insurance policy implementation are that the personnel should have specific knowledge on health care and should be trained how to cooperate with people. The hospital should instill a good attitude into the implementing personnel. Moreover, information technology should be applied to the policy implementation as a driving force for the success on health insurance.

Naiyana Phaibul (2009) a study on “A Survey of Domestic Tourists’ Satisfaction Based on Tourism Logistic Management Indicators: A Case Study of Koh Chang, Koh Lan, and Koh Samed”. The sample group is 399 Thai tourists travelling in Koh Chang, Koh Lan, and Koh Samed area. Data collection is divided into three aspects based on indicators: 1) physical flow with 17 indicators, 2) financial flow with five indicators, and 3) information flow with six indicators. There are 28 indicators in total. Percentage, average, standard deviation is used for the data analysis while Chi-square, T-test, and median test are used for the comparative analysis. According to the results, information on a personal factor shows that most of the tourists are female which the portion of female and male tourists is 54.0:46.0. 52% of the tourists are aged between 20-35, which is higher than children and adult tourists. Also, it is found that a number of the tourists visiting the areas more than once are higher than those visiting for the first time by 56.0:44.0. Therefore, research realizes that the tourist attraction resource in the areas have high potential because the tourists are satisfied and return to these destinations. Moreover, most of them are independent tourists rather than with a tour program by 69.0:31.0. 41% of the tourists have over 10,000 -20,000 Baht of income. According to the survey on the domestic tourists’ satisfaction on tourism logistic management in three aspects, the survey shows that the overall satisfaction level for the tourism logistic management is at a medium level, which is 3.03% including information flow, financial flow, and

physical flow, respectively. The result of the hypothesis test shows that different personal factors in terms of sex, age, number of visit, type of travel, and average monthly income lead to significantly different levels of satisfaction on the physical flow, financial flow, and information flow by 0.05. According to the study, 82 people of the sample group or 23.9% of them suggest that the tourism resources in the areas should be maintained for their abundance. 76 people or 22.2% of them suggest that the places should have publication measures and channels to promote the outstanding tourist attractions in order to reach out to the tourists. 65 people or 19.0% of them suggest that time management is necessary to allow the tourists to spend their waiting time in the most useful way. 58 people or 16.9% of them suggest that waste control system should be provided to prevent negative tourism effects. 47 people or 13.7% of them suggest that transportation area management is required to use the area in the most efficient way. 10 people or 2.9% of them suggest that the government sector should play a role in supporting and controlling the use of resources. Lastly, 5 people or 1.5 % of them suggest that transport route system in tourism areas which are islands with mountains should be improved as they can be highly dangerous.

Takerngsak Chaicharn (2012) a study on “Tourism Logistics Management in Wang Nam Kiew, Nakorn Rachasrima”. The research aims to study a recent tourism logistics in Wang Nam Kiew, Nakorn Rachasrima in order to improve, develop, and elevate an ability to support the tourist. The researcher collects data from four sample groups which are tourists, communities, entrepreneurs, and local leaders in Wang Nam Kiew sub district, Thai Samakkee sub district, Udomsup sub district, Wang Mee sub district, Ra Rueng sub district which are five areas and 570 samples in total. The result shows that tourists’ satisfaction towards the overall present tourism logistics components is at a medium level. Satisfaction on overall income is at a low / medium level, and the satisfaction on physical flow is at a low level as five minor points underlying the physical flow are in the lowest level including mass transportation, transportation hub safety, and travel by mass transportation, preparedness of tour agents, and emergency transportation. According to an analysis of the relationship between tourism logistic components and tourist’s satisfaction encouraging them to revisit the places, it is found that, statistically, satisfaction towards most of the components relates to the tourist’s revisit rate significantly by 0.05. For the local

group, they see that the tourist attractions bring development to the community in various ways, and they comply with tourism logistics, is at a medium level, while entrepreneur's satisfaction is at a high level. Local leaders see that preparedness is at a medium level. For opinions on preparedness and tourism logistics development plan, each group agrees that it is quite well-prepared, and they similarly suggest that tourists should be facilitated to the access the attractions easier, more convenient and safer; persons or departments should collaborate with each other to perform different roles; both internal and external meeting on logistics should be held; tourism activities should be provided all year; an agencies should be assigned to be responsible for tourism related tasks directly; and new attractions should be promoted; and more supporting budget should be provided. However, tourist's and entrepreneur's satisfaction towards logistic components and logistic management are obviously different from each other, which is should be raised to seek for an explanation.

Thanaphat Thachaphan (2015) a study on "Tourism Logistic Development Plan for Koh Tarutao, Satun" which aims to study the current situation of tourism logistics in Koh Tarutao, Satun, tourist's and related sector's aspect to find a way to develop, improve, and elevate an ability to support the tourists. The researcher collects data from 150 people in four sample groups which are tourists, local people, entrepreneurs, and governmental staff in Koh Tarutao, Satun. The results show that, overall, the tourists are highly satisfied with the current tourism logistic components. Considering each aspect, it is found that only two aspects receive a medium level of satisfaction: values of physical logistic management and marketing promotion. Meanwhile, the tourist's satisfaction towards the service process is in a low level. Furthermore, according to an analysis of the relationship between tourism logistic components and tourist's satisfaction encouraging them to revisit the places, it is found that, statistically, satisfaction towards personnel, service process, revisiting/experience sharing, and expense significantly relates with revisiting by a level of 0.05. Local people see that the tourist attractions bring development to the community in many ways, but their satisfaction towards the tourism logistic management is at a low level, while the entrepreneur's overall satisfaction is at a medium level. Lastly, the governmental staff agrees that the preparedness of the area is at a good level.

Naphat Thipsee and Kacheechom Chiatrakul (2015) a study on “Tourism Logistic Management of Travel Agents in Chiang Rai” which aims 1) to evaluate the tourism logistic management of the travel agents in Chiang Rai and 2) to compare the tourism logistic management of the travel agents in Chiang Rai based on types of business, cost of the procedure, duration of the procedure, and number of employees. The sample group for this research includes 127 entrepreneurs in the travel agent business in Chiang Rai. A questionnaire is used for the data collection whereas frequency, percentage, average, and standard deviation are used for analysis. The results show that, overall, the tourism logistic management of the travel agents in Chiang Rai is at a high level in every aspect. Considering each aspect, it is found that empathy for customers receives the highest score, followed by payment service while the lowest one is entertainment during travel. For the comparison of the tourism logistic management of the travel agents in Chiang Rai based on types of business, cost of the procedure, duration of the procedure, and number of employees, it is found that different types of business, cost of the procedure, duration of the procedure, and number of employees lead to different ways of tourism logistic management. In conclusion, the study’s result can be used as a guideline for developing and improving the tourism logistic management of the travel agents in Chiang Rai for increasing the procedure’s efficiency and competitiveness.

Maliwan Phinna (2015) a study on “Effect of Tourism Logistic on Tourist’s Loyalty in Phrae” which aims to study the tourists’ satisfaction towards tourism logistic components of Phrae and to study tourism logistic components’ factors affecting the tourists’ loyalty in Phrae. Data collection is done by a convenient sampling of 400 tourists who visit tourist attractions in Phrae through a questionnaire. Likert Scale is used to analyze the tourist’s satisfaction towards Phrae’s tourism logistic components affecting the tourist’s decision to revisit the province, whereas Structural Equation Model (SEM) is used to analyze the affecting factors of tourism logistic on the tourist’s loyalty in Phrae. The results show that most of the participants are females aged up to 30 years old, single, hold a bachelor degree, work as employees and governmental officers, and earn less than 15,000 Baht a month. They have been to Phae less than three times and know about Phae’s information from their friends or acquaintances. They usually travel by themselves (by a private car).

However, they cannot decide whether they will come back or recommend their friends about Phrae. According to the result of the Likert Scale analysis on factors affecting on the tourist's decision to revisit the province, it can be concluded that a physical factor: travel route in Phae is at a medium level by 37.25%, the information factor: direction signs is at a medium level by 35.25%, the financial information factor: ATM machine points is at a high level by 33.75%, the public utility factor: Internet, WiFi, 3G is at the highest level by 32.75%, the sustainability factor: the use of eco-friendly material is at a medium level by 34.25%, the attraction factor: cultural and historical tourist attraction is at a high level by 35.50%, the travel facility factor: a highway connecting to nearby provinces is at a high level by 36.25%, the facility factor: basic public utilities and hospitals is at a high level by 33.50%, the accommodation factor: clean and pleasant accommodation with a reasonable price is at a high level by 34.50%, and the cultural factor: Thai Lanna Red Cross Society's winter festival and Kham Fah festival is at the highest level by 38.50%. According to the SEM model to analyze the affecting factor of tourism logistics on the tourist's loyalty in Phrae, the analysis is done by R program and PIFFs ~FiveA~ Loyalty is obtained. It is found that all three factors associate with each other in the same way. A relationship between PIFFS factor impacting on FiveA are direction signs, waste separation, and ATM machines (quantity of ATM machines around tourist attractions in Phrae) which equal to 0.641 significantly at a statistic level of 0.01. That is, when PIFFS empirical variables increase once, FiveA factor will increase 0.641 units. On the other hand, FiveA factor affecting on the tourist's loyalty in Phrae are learning activities through nature walks, national parks, accommodation with a reasonable prices, natural tourist attractions such as Huay Rong waterfall, Kaeng Luang, and Khao Hin Prakarang which equal to 0.489 significantly at a statistic level of 0.01. That is, when FiveA factors increase once, the tourist's loyalty will increase 0.489 units.

Panasaya Sirarungrojkanok (2016) a study on "Thai Tourists' Behavior and Satisfaction on Tourism Logistic Management: A Case Study of Amphawa Floating Market, Samutsongkram" which aims to study the tourists' behavior and satisfaction on several aspects of the tourism logistic management of Amphawa Floating Market, Samutsongkram which has different types of demography in order to be a guideline

for the development of Amphawa's tourism logistic management for a sustainable tourism in the future. A sample group of 73 people is used for the data collection. SPSS program for Window Version 22 is used for the data analysis while frequency, percentage, average, standard deviation, t-test, and one-way analysis of variance (f-test) are used statistically. The results show that, overall, the tourists' satisfaction towards Amphawa's tourism logistic management is at a medium to high level. Considering each aspect, physical convenience, information receiving, service, personal and property safety are at a high level, whereas expense and finance is at a medium level. When considering the tourists with different demography, it creates different satisfaction levels towards the overall tourism logistic management. According to overall tourism logistic management in all aspects, tourists of different genders do not have different overall satisfaction levels towards the tourism logistic management. However, statistically, different age, income, and domicile effects the different overall satisfaction significantly. Suggestion on the development and improvement of Amphawa's tourism logistic management are that an integration among every agency and sector related to tourism logistic management in the tourist attractions should be created in order to be the development and improvement guideline for more efficient tourism and to support the tourists' demands. An ICT management system should be used for more systematic management together with other supporting or assistance systems, such as a assistance system for travelling, restaurants, and other related information. Lastly, nearby tourist attractions should cooperate with each other in the future. A map of nearby attractions might be made to increase more opportunities to distribute income towards the community more.

Thanyamas Phumanon (2004) a study on "A Level of OPD Patients' Expectation and Satisfaction towards Police Hospital's Service Quality". The researcher compares the OPD patients' expectation and satisfaction towards the Police Hospital's service quality based on personality and service type as well as the relationship between the OPD patients' expectation and satisfaction towards Police Hospital's service quality. The result shows that the patients' expectation and satisfaction towards the hospital's service quality is at a high level both overall and in each aspect. Difference in education level, department of the service, and use of privilege leads to the different expectation towards the service quality, while



difference in age, income, amount of service usage, department of service, and use of privileges leads to the different satisfaction levels towards the service quality. It can be seen that the patients' expectation and satisfaction towards Police Hospital's service quality associate with each other.

Bangorn Praschayakul (2003) a study on "A Customer's Satisfaction on Ministry of Public Health's Hospital and Factors Affecting the Customer's Satisfaction on Ministry of Public Health's Hospital". The results show that the customers' satisfaction towards the hospital's service is at a high level. Friendliness aspect receives the highest satisfaction (when considering each aspect, the doctor's manner when replying to the patients receives the highest average while the staff's manner at the registration room receives the lowest average), followed by service quality aspect (when considering each aspect, the highest average is the doctor's indiscriminate service while the lowest average is proper service equipment), location aspect (when considering each aspect, the highest average is cleanliness of the hospital while the lowest average is parking area for customers.), and received information aspect (when considering each aspect, the highest average is a doctor's advice on medical treatment while the lowest average is knowledge and information from a brochure or video), respectively. According to hypothesis testing, it is found that difference in sex and waiting time does not affect the difference of the customers' satisfaction towards the hospital's service. However, difference in career and understanding on communication effects the difference of the customers' satisfaction towards the hospital's service.

Ornchuma Weerasai (2005) a study on "A Satisfaction Level of OPD Patients towards the Internal Medicine Department of a Private Hospital's Service". Also, the researcher compares the patients' satisfaction level towards the internal medicine department's service based on personal traits and service accessibility factors. The result shows that the satisfaction level of the OPD patients in the internal medicine department of the private hospital is at a high level. The patients' different waiting times lead to different service satisfaction; however, difference in sex, age, education level, income, career, number of service usage, and travel time does not effect the difference in service satisfaction.

Sriwan Udompoch (2007) a study on “A Tourist’s Satisfaction towards Health Tourism Service in Damnoensaduak Hospital, Ratchaburi”. Most tourists are females aged between 61-70 who are married and receiving government pension as they are former government officials. Their average monthly income is 20,000 - 30,000 baht. Also, they were using the services for the first time. Moreover, the results show that the tourists have a high level of satisfaction towards the health tourism service in Damnoensaduak Hospital, Ratchaburi. It is found that the difference in sex, age, marital status, income, present residence, number of service usage, and underlying disease does not effect the difference of satisfaction towards the health tourism service. On the other hand, tourists with different careers have different satisfaction levels towards the health tourism service.

Bunjai Limsila (2007) a study on “Factors Affecting on a Success of Alternative Medicine Service by Public Service Providers: A Case Study of Damnoensaduak Hospital, Ratchaburi”. The study’s objectives include 1) to study leadership, 2) to study management patterns which are team building, service pattern, and service expense, 3) to study preparedness of the service provider in terms of location, personnel, and budget, 4) condition of being a tourist attraction, 5) support from federal and regional organizations, and 6) to study the customers’ satisfaction and other factors affecting the success of the alternative medicine service in Damnoensaduak Hospital. Participants selected based on purposive sampling include, 15 of executives and alternative medicine service operators in Damnoensaduak Hospital as well as 100 alternative medicine service recipients in Damnoensaduak Hospital. Data collection is done by interviewing the executives and service operators along with surveying the service recipients’ satisfaction. Content analysis is used in the interview’s data analysis while descriptive statistics including percentage, average, and standard deviation is used in the data analysis of the service recipients’ satisfaction. The result shows that major factors affecting on the success of alternative medicine service in Damnoensaduak Hospital are 1) leadership: a leader should have a vision to adjust the paradigm of health care and use an informal management policy, 2) management: an efficient team should be built and a systematic service pattern should be set by focusing on teamwork which requires efficiency, strength, and patience, 3) preparedness of the service provider in terms of location, personnel, and

sufficient supporting budget, which will satisfy the customers and encourage them to use the service again, and 4) being a tourist attraction: this factor can be used to set the service pattern in various ways, and it can be a selling point outstanding from other service providers. Supporting factors leading to the success are 1) supporting budget from federal and regional organizations in terms of budget, location, manpower, and human resource development, 2) a clear and continuous policy for the development and combination of alternative medicine with the public health care service providers, 3) service recipients' satisfaction, 4) public relations and marketing, 5) professional managers to manage alternative medicine related tasks in terms of business, 6) support, facilitation, and cooperation in forms of a network from local organizations to plan the development for the tourist attraction.

Monthipa Songpanich (2009) a study on "Integrated Health Care Service by a Public Service Provider" which aims to study patterns of the integrated health care service using a public hospital as a model, and to study the integrated health care service method for a sustainable service. Four public hospitals were studied for this research. Qualitative research methodology is used for the study along with data collection and data analysis. Data collection is done through an in-depth interview with hospital executives, staff, and service recipients along with observing types of the service provided in the hospitals and customers who come to use the integrated health care service. According to the result, it is found that all four hospitals are quite successful in providing the integrated health care service. Although they can respond to some targets in just a short period of time, they have been able to maintain the service continuously until now. This is considered as a beginning of providing various types of service as alternatives to solve health problems long term. Therefore, executives and staff should focus on the team's preparedness by conveying and informing about the integrated health care service to all personnel in the hospital through various forms of media to make them understand its advantage, goal and objective of the procedure, and holistic concept as well as to foster them a positive attitude towards the integrated health care such as holding a conference, training course, or seminar on internal and external operation knowledge sharing continuously for a sustainable operation. Meanwhile, Department of Thai Traditional and Alternative Medicine, as an agency responsible for controlling the integrated health

care service process, should provide academic support by holding an academic conference about the integrated health care service, sharing scrutinized and accepted knowledge about alternative medicine to people, studying the advantages and disadvantages of alternative medicine to allow personnel who are interested in applying to the integrated health care department in their hospital to attend conferences, training courses, and seminars. Moreover, the department should be a center to arrange workshops among the hospitals providing integrated health care services or the ones that provide it to exchange experiences with each other about the integrated health care service provisions, problems, threats, solutions, and suggestions useful for developing the process. Since arranging a field trip can waste a lot of budget, such as an organization located in the North goes to a field trip in the South, the policy level organizations which are Department of Thai Traditional Medicine and Division of Complementary and Alternative Medicine should be key agencies to provide this knowledge. In addition, research on the result of the integrated health care treatment should be supported to build confidence among the health care staff for their acceptance. Staff participation and expansion of team network should be focused to proceed the task in accordance with a local and provincial policies relying on the public and private network's support in terms of budget and human resource. For example, a hospital can link the provincial policy by making a work plan to be a part of the provincial policy, so they eventually receive a higher supporting budget from the provincial development budget. Also, they receive cooperation from various departments in the governmental and public sector, which makes the integrated health care service blended in with a community. The community can participate in the service, and most of the locals can access to the service leading to a more sustainable service. For the problems and obstacles of the integrated health care service, they are similar among the four hospitals, which are caused by both service providers and service recipients. According to the aforementioned, there is a limited quantity of personnel, and most of them lack knowledge and understanding on the concept of an integrated health care service. They also lack the skill and experience on the integrated health care service. Position rotating among personnel usually happens, so the hospital often has to rebuild a new team. It is found that almost all hospitals have teams of local masseuses or Thai traditional masseuses certified by an institute as

their assets. Furthermore, the staff still lacks preparedness, so the service still focuses mostly on the body aspect. Holistic care in the mental, emotional, social, and intellectual aspect that meets the customers' expectation can also only be done partially. On the other hand, the researcher attempts to follow up and evaluate the four hospital's procedures and their results, but it cannot be done continuously.

Bunyada Jaihan (2013) a study on "A Marketing Strategy of Thai Traditional Medicine Service in Damnoensaduak Hospital, Ratchaburi". It is found that the staff has a positive attitude towards their work. They also have good cooperation and listen to each other's opinion. However, the hospital should consider adjusting the wage structure to be more appropriate in order to build motivation among the staff. According to a survey on the customers' satisfaction, the result shows that, overall, the customers have a high satisfaction towards the service. The product or service aspect receives the highest level of satisfaction followed by the staff's hospitality and service quality, respectively. On the other hand, the product and service's price receives the lowest satisfaction. For the future goal and strategy, the hospital should focus on developing Thai traditional medicine departments to be a service center and full-service herbal product distributor. For a study on the relationship between personal traits, factors and satisfaction level towards the Thai traditional medicine service, it is found that 1) the customers with different sex have different satisfaction levels towards Thai traditional medicine service in terms of a product/service, cost, location and facility, staff's hospitality, and marketing promotion and public relations, while their satisfaction levels towards the service process and service quality is indifferent, 2) the customers with different age have different satisfaction levels towards Thai traditional medicine service in terms of the staff's hospitality, service process, service quality, marketing promotion and public relations, while their satisfaction levels towards the product/service, cost, and location and facility is indifferent, 3) the customers with different education levels have different satisfaction levels towards Thai traditional medicine in terms of the product/service, while their satisfaction levels towards other aspects is indifferent.

Natthada Srimook (2015) a study on "A Performance Development Model of a Health Promoting Service Provider under Active Beach Group to Support Russian Tourists" The research objectives are 1) to study the performance of spa businesses in

five-star hotels and resorts, 2) to study the performance of spa service providers in Active Beach health promoting group's and 3) to develop a performance development model of a health tourism service provider and organization under the Active Beach group to support Russian tourists. It is a mixed method research mainly based on a qualitative method together with a quantitative method to analyze data. A study on the organization's potential is done by conducting an in-depth interview with managers of spa businesses, Public Health officers, spa customers and spa service providers. The results show that the selected spas follow the standard, and it is approved and evaluated based on the management standards in accordance with the policy specified by the hotel where the spa is located. The organization's structure consists of one manager who controls the operation and all processes, one to two receptionists, and seven to twelve service staff. A customer record should be made. Staff performance evaluation should be done systematically. An operation manual and customer record should be done systematically. Staff's salary should be based on their experience. The spa should use high quality products, and develop their marketing strategy for competitiveness such as developing their product/service to be outstanding. Spa products are unique under their own brand. Also, a service cost should be based on a type of service: the cost should be cheaper when the customers use several types of service. In terms of location, the spa should 1) be located inside the hotel building, separated from the accommodation zone, and 2) be located outside the building with uniqueness. Therefore, being surrounded by natural attractions, beaches and convenient transportation is considered the strength of the spa due to its good location with a potential to attract Russian tourists staying at the hotel to use the spa services more. Also, several styles of service rooms with unique decoration are provided for the tourists to choose from. For marketing promotion, the spa has their own website. According to the results of the service provider's potential analysis, it is found that the potential of a spa service provider is at a very high level; attitude has the highest average which is at a very high level; and a skill is at high level, respectively. Most of the service staff cannot communicate in Russian, but the receptionists of all spas can speak Russian. According to the findings, performance development method for spa enterprises and service providers consists of 1) operator's potential, 2) enterprise's potential, 3) service staff's potential, 4) a potential to create outstanding marketing, 5)

a potential of organizations supporting spa business, and 6) reaching a related spa business's standard.

Bhatia and Cleland (2004) a comparative study on "A Comparison of Public Hospital's and Private Hospital's Service Quality for Female OPD Patients in Karnataka State, India". It is a qualitative research, which the data is compiled from 25 observers working in the public hospital and 18 observers working in the private hospital. The data collection is done by observing the service for 5 days, which the total observation includes 650 service recipients in the public hospital and 451 service recipients in the private hospital. The results show that the public hospital provided more information to the service recipients along with a higher personal data security than the private hospital. A cost of medical treatment in the private hospital is higher than the public one. Public and private hospital's staff have similar communication levels with the patients. For the overall service quality, the public hospital's service quality is lower than the private hospital.

Taner and Antony (2006) a comparative study on "The Difference between Expectation and Perception of Public and Private Hospitals in the Dimension of Service Quality in Turkey". The researcher applies a service quality evaluation equipment called SERVQUAL as a questionnaire to evaluate hospitals' service quality in Turkey. The dimensions of service quality evaluation consist of Tangibles, Reliability, Responsiveness, Assurances, and Empathy. The questionnaire is used to collect data from 200 customers in public and private hospitals. The results show that customers' expectation towards all five dimensions of the service quality of public and private hospitals is at a high level while the perception on all five dimensions of the service quality of the private hospital is higher than the public hospital. Regarding the difference or gap between expectation and perception in five dimensions of the service quality in the public and private hospital, some dimensions of the service quality evaluation in the private hospital like Responsiveness, Assurances, and Empathy have a positive outcome, which it can be assumed that the private hospital should concentrate on the service similar to a hotel's service. Regarding the difference or gap between perception and expectation, the private hospital, which has a very high level of the difference/gap, or when the customers realize that they receive a low-level service, but they expect a high-level service like a sufficiency of parking spaces.

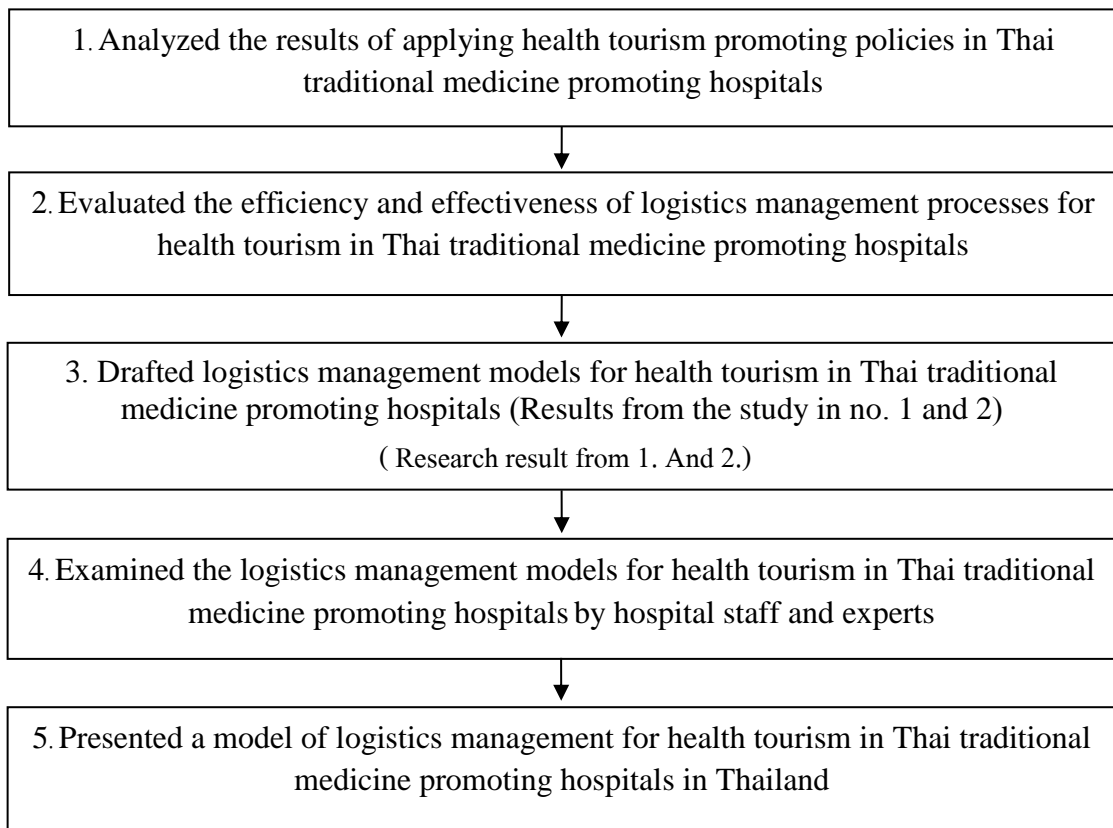
However, the difference or gap between expectation and perception is low, or the customers realize that they receive a high-level service while their expectation is lower than that in terms of respect and personal data security. On the other hand, in the public hospital, the difference or gap between perception and expectation which is very high is waiting time, while the low level of the difference or gap refers to doctor's knowledge. Besides, it is found that the customers are also satisfied with the service quality, especially from doctor, nurse, and other services provided by the private hospital more than that of the public hospital. The main factors affecting the customers' decision to use a public hospital are doctors and price.



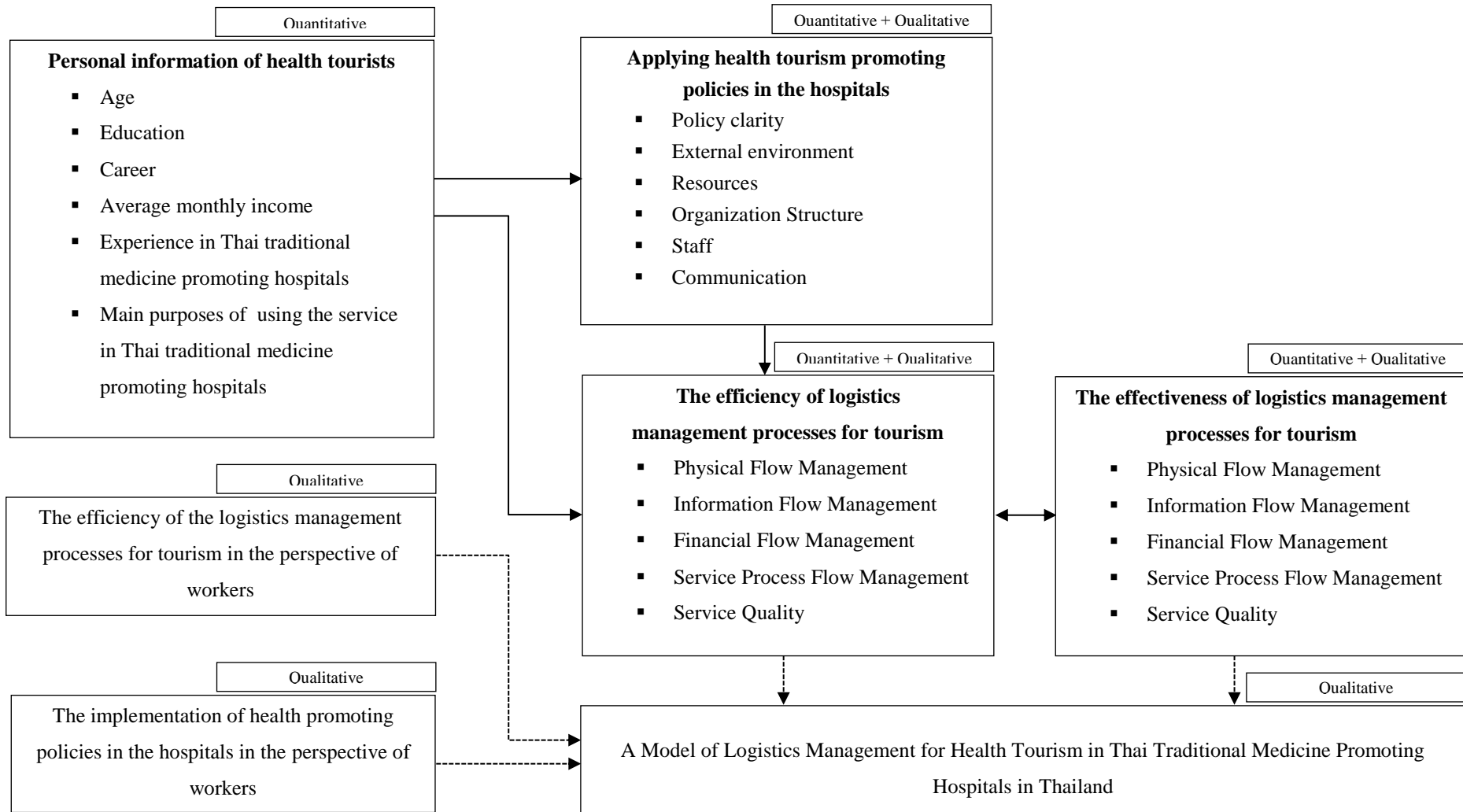
## **CHAPTER 3**

### **RESEARCH METHODOLOGY**

In the research on the subject of “A Model of Logistics Management for Health Tourism in Thai traditional medicine promoting hospitals in Thailand”, the researcher used a combining research-method, which includes both a qualitative and quantitative research approach. Qualitative research design is a research approach that aims to analyze and interpret meanings of phenomena related to people’s behavior. It describes general thoughts and feelings, as well as appreciation, displeasure, belief, and experiences over a certain period of time. The analysis of the data is the one that starts from subsections, which, later on, concludes into facts. (Suphang Chantawanich, 2010). Quantitative research is the research approach that pays attention to how to attain knowledge and facts by emphasizing on numerical data. The research design is to control variables that are studied, provide reliable and precise tools in order to measure quality of data, and use statistical methods to analyze and assess the conclusions in order to get the ones that are the least accurate (Waewdao Pornsang, 2011). The researcher has conducted the research as follows:



### 3.1 Research Framework



From the conceptual framework of the study mentioned above, regarding creating a model for logistics management for health tourism in Thai traditional medicine promoting hospitals, it was necessary to analyze the implementation of a health promotion policy in the practice of Thai traditional medicine promoting hospitals by conducting a survey carried out with health tourists who have used services in Thai traditional medicine promoting hospitals and the staff in Thai traditional medicine promoting hospitals. The survey was conducted for issues, which include the clarity of policies, external environment, resources, organizational structure, practitioners, and communication. The study employed both quantitative and qualitative research. There was also the need to evaluate the efficiency and the effectiveness of logistics management process for health tourism in Thai traditional medicine promoting hospitals in order to understand the ability to manage, and the satisfaction that comes from managing physical flow, data flow, financial flow, servicing process flow and quality of service. Similar to the analysis of the implementation of the health tourism promoting policy in Thai traditional medicine hospitals mentioned earlier, this evaluation has also employed both qualitative and quantitative methods. The data obtained would later on be used to create a logistics management model for health tourism in Thai traditional medicine promoting hospitals. In addition, the qualitative method was used as the last step.

## **3.2 Variables Used in the Research**

### **3.2.1 Quantitative Research**

#### 3.2.1.1 Independent Variables

1) Characteristic information is the general information of health tourists who use service in Thai traditional medicine promoting hospitals. It includes the following characteristics:

- (1) Gender
- (2) Age
- (3) Education
- (4) Career
- (5) Average monthly income

(6) Experience in Thai traditional medicine promoting hospitals

(7) Main purposes of using the service in Thai traditional medicine promoting hospitals

#### 3.2.1.2 Dependent Variables

1) Quantitative data is the implementation of health promoting policies in the hospitals. It includes the following information:

- (1) Policy clarity
- (2) External environment
- (3) Organization structure
- (4) Resources
- (5) Staff
- (6) Communication

2) Quantitative data is the effectiveness of the implementation of health promoting policies in the hospitals. It includes the following information:

- (1) Physical Flow Management
- (2) Information flow management
- (3) Financial Flow Management
- (4) Service Process Flow Management
- (5) Service Quality

3) Quantitative data is the efficiency of the implementation of health promoting policies in the hospitals. It includes the following information:

- (1) Physical Flow Management
- (2) Information flow management
- (3) Financial Flow Management
- (4) Service Process Flow Management
- (5) Service Quality

### 3.2.2 Qualitative Research

3.2.2.1 The implementation of health promoting policies in Thai traditional medicine promoting hospitals:

- 1) Policy clarity
- 2) External environment
- 3) Organization structure
- 4) Resources
- 5) Staff
- 6) Communication

3.2.2.2 The efficiency of logistics management processes for health tourism in Thai traditional medicine promoting hospitals includes the following management aspects:

- 1) Physical Flow Management
- 2) Information flow management
- 3) Financial Flow Management
- 4) Service Process Flow Management
- 5) Service Quality

3.2.2.3 The effectiveness of logistics management processes for health tourism in Thai traditional medicine promoting hospitals includes the following management aspects:

- 1) Physical Flow Management
- 2) Information flow management
- 3) Financial Flow Management
- 4) Service Process Flow Management
- 5) Service Quality

### **3.3 Research Hypothesis**

3.3.1 Hypothesis 1: personal information of health tourists who using service in Thai traditional medicine promoting hospitals that varies is able to result in the difference of the evaluation of the efficiency of logistics management processes for health tourism in Thai traditional medicine promoting hospitals.

3.3.2 Hypothesis 2: personal information of health tourists who using service in Thai traditional medicine promoting hospitals that varies is able to result in the

difference of the evaluation of the effectiveness of logistics management processes for health tourism in Thai traditional medicine promoting hospitals.

3.3.3 Hypothesis 3: efficiency of logistics management processes for health tourism in Thai traditional medicine promoting hospitals relates to the effectiveness of logistics management processes for health tourism in Thai traditional medicine promoting hospitals.

3.3.4 Hypothesis 4: factors related to the implementation of health promoting policies in Thai traditional medicine promoting hospitals influence the efficiency of logistics management processes for health tourism in Thai traditional medicine promoting hospitals.

### **3.4 Research Methodology for Objective 1, is to Analyze the Implementation of Health Tourism Policies in Thai Traditional Medicine Promoting Hospitals and Objective 2, is to Evaluate the Effectiveness and Efficiency of Logistics Management Processes in Thai Traditional Medicine Promoting Hospitals**

#### **3.4.1 Quantitative Research Methodology**

##### 3.4.1.1 Population

The population in this research are health tourists who use the services in Thai traditional medicine promoting hospitals.

##### 3.4.1.2 Sample

Health tourists who using service in Thai traditional medicine promoting hospitals

They are related to the implementation of health tourism policies in Thai traditional medicine promoting hospitals. The sample has been regarded as the one who has been affected by the policies.

##### 3.4.1.3 Sample Size

Health tourists who using service in Thai traditional medicine promoting hospitals

Due to the fact that the exact number of the population is unknown, the number of the sample therefore had to be calculated by the following formula in which the number of population is not presented, using Cochran (1953) formula as follows:

$$n = \frac{P(1-p)Z^2}{e^2}$$

Explanation

$n$  refers to Sample size

$N$  refers to Population size

$e$  refers to Acceptable sampling tolerances

$Z$  refers to The level of confidence that the researcher determines. There are 2 levels which are frequently used.

At 95% confidence level,  $Z$  equals to 1.96.

At 99% confidence level,  $Z$  equals to 2.58.

In this study, the researcher has chosen the sample at 50%, which is a statistically acceptable mean or 0.50 from the total population. The confidence level is at 95% and the acceptable sampling tolerance was at 5% or 0.05 of the sample. It can be calculated as follows:

$$n = \frac{0.5(1-0.5)(1.96)^2}{0.05^2}$$

$$n = 385$$

Therefore, the researcher has got the size of the research sample, which are 385 health tourists who use the services in Thai traditional medicine promoting hospitals. However, in order to prevent any errors and to correctly complete the questionnaire, the sample size has been increased to 400 tourists.

#### 3.4.1.4 Methods of Choosing Sample

The accidental sampling was used to choose the 400 sample from groups of tourists who experienced Thai massage, oil massage, foot massage, herbal steam, herbal compress, sauna, skin mask/Thai herbal scrub, Thai herbal facial scrub, essential oil bath, and jacuzzi baths in Thai traditional medicine promoting hospitals.



### 3.4.1.5 Research Tool

#### 1) Research Tool of Objective 1

The tool used to study the implementation of health promoting tourism in Thai traditional medicine promoting hospitals is the questionnaire developed by the researcher, based on the study of related concepts and theories, which is divided into sub-topics thereafter. The advantages of using questionnaires as a research tool are that they can be used to collect data in large and extensive quantities. Moreover, the expenses and labor used are at a lower rate compared to interviews and observations. There is also no bias, because respondents are free to respond and have time to review before responding. They can also send answers and respond to mail surveys and social media (McNabb, 2004, p. 109; Singh & Baipai, 2008, pp. 176-177; Arun Jirawatkul, 2013, pp. 12-13; Surasak Amornrattanasak, 2011, p. 115).

Questionnaire for health tourists who use the services in Thai traditional medicine promoting hospitals contains 3 parts as follows:

Part 1 Personal information of the respondents, including gender, age, education, career, average monthly income, service experience in Thai traditional medicine promoting hospitals, and main purposes of using health tourism services in Thai traditional medicine promoting hospitals.

Part 2 The implementation of health promoting tourism in Thai traditional medicine promoting hospitals which are divided into 5 topics: 1) policy clarity, 2) external environment, 3) organization structure, 4) resources, 5) staff, and 6) communication.

Part 3 Additional feedback and comments regarding the implementation of health promoting tourism in Thai traditional medicine promoting hospitals

Part 1 and 2 in the questionnaire contains closed ended questions, which means the messages of each question and the answer are already fixed. The answer is the one that is exact or related to the respondents. The use of closed ended questions is an important part of the research tool. The advantages are that it can motivate respondents to answer questions without having to waste their time answering questions. The researcher is able to get answers from everyone by

using the same standard which is easy for data processing, and the data can be compared immediately. Moreover, the respondents will have a better understanding of the meaning of the closed ended questions. Lastly, the researcher can get complete information which meets the requirements (Bryman, 2012, p. 246; Duhme, 2012, p. 37; Sorachai Phisarnbuth, 2015, p. 70).

Part 3 contains open ended questions in which the answers are not fixed. Using open ended questions as a component of the research tool, the advantages are that it is flexible in itself. It allows us to get the additional answers to the researcher's prediction. The respondents are free to answer and are able to answer every detail as thorough as needed. Open ended questions can also give better answers for complex and in-depth questions (Bryman, 2012, p. 246; Duhme, 2012, p. 37; Sorachai Phisarnbuth, 2015, p. 69).

## 2) Research Tool of Objective 2

The tool used to study the effectiveness and efficiency of the logistics management processes for health tourism in Thai traditional medicine promoting hospitals is the questionnaire developed by the researcher, based on the study of related concepts and theories, which is divided into sub-topics thereafter. The advantages of using questionnaires as a research tool are that they can be used to collect data in large and extensive quantities. Moreover, the expenses and labor used are at a lower rate compared to interviews and observations. There is also no bias, because respondents are free to respond and have time to review before responding. They can also send answers and respond to mail surveys and social media (McNabb, 2004, p. 109; Singh & Baipai, 2008, 176-177; Arun Jirawatkul, 2013, pp. 12-13; Surasak Amornrattanasak, 2011, p. 115).

Questionnaire for health tourists who use the services in Thai traditional medicine promoting hospitals contains 5 topics as follows:

Part 1 Personal information of the respondents, including gender, age, education, career, average monthly income, service experience in Thai traditional medicine promoting hospitals, and main purposes of using health tourism services in Thai traditional medicine promoting hospitals.

Part 2 Assessment of efficiency of the logistics management processes for health tourism in Thai traditional medicine promoting hospitals, which

are divided into 5 topics: 1) Physical Flow Management, 2) Information Flow Management, 3) Financial Flow Management, 4) Service Process Flow Management, 5) Service quality

Part 3 Assessment of effectiveness of the logistics management processes for health tourism in Thai traditional medicine promoting hospitals, which are divided into 5 topics: 1) Physical Flow Management, 2) Information Flow Management, 3) Financial Flow Management, 4) Process Flow Management Service, 5) Service Quality

Part 4 Further opinions for giving suggestions regarding efficiency and effectiveness of the logistics management processes for health tourism in Thai traditional medicine promoting hospital

Questions in parts 1, 2, and 3 are close ended questions which consist of questions and the answers that are already set. The respondents have to choose the answers that are true and related to them. The use of close ended questions is an important part of the research tool. The advantages are that it can motivate respondents to answer questions as they do not have to waste time answering the questions. It allows researchers to get answers from each of the respondent on the same standard. It's easy for data processing and the data can be compared immediately. The respondents will have a better understanding of the meaning in close ended questions. Lastly, the researcher can get complete information which meets with the requirements (Bryman, 2012, p. 246; Duhme, 2012, p. 37; Sorachai Phisarnbuth, 2015, p. 69).

Part 4 contains open ended questions in which the answers are not fixed. Using open ended questions as a component of the research tool, the advantages are that it is flexible in itself. It allows us to get the additional answers to the researcher's prediction. The respondents are free to answer and are able to answer every detail as thorough as needed. Open ended questions can also give better answers for complex and in-depth questions (Bryman, 2012, p. 246; Duhme, 2012, p. 37; Sorachai Phisarnbuth, 2015, p. 69).

#### 3.4.1.6 Determining the Range and Criteria of the Measurement

In this study, the researcher selected the Likert scale because of its strict criteria, which is easy to apply and contains not too many questions. On the other

hand, the reliability rate is higher than other measurement types. (Snaw & Wright, 1967). The researcher has determined the measurement as follows:

1) Determining the range and criteria of the measurement in objective 1

The implementation of health promoting policies in Thai traditional medicine promoting hospitals.

5 represents Very satisfied with the policy implementation

4 represents Satisfied with the policy implementation

3 represents Neutral with the policy implementation

2 represents Dissatisfied with the policy implementation

1 represents Very dissatisfied with the policy implementation

2) Determining the range and criteria of the measurement in objective 2

(1) Efficiency of logistics management processes for health tourism in Thai traditional medicine promoting hospitals

5 represents the highest level of efficiency

4 represents high level of efficiency

3 represents moderate level of efficiency

2 represents low level of efficiency

1 represents the lowest level of efficiency

(2) Effectiveness of logistics management processes for health tourism in Thai traditional medicine promoting hospitals

5 represents the highest level of effectiveness

4 represents high level of effectiveness

3 represents moderate level of effectiveness

2 represents low level of effectiveness

1 represents the lowest level of effectiveness

To interpret the meaning of the score, the mean score of the sample is used as the criterion. The researcher used the interpretation criteria by using the following formula to calculate the range based on the levels.

The highest score – The lowest score

Number of level

$$\frac{5 - 1}{5} = 0.80$$

5

Range 4.21 – 5.00 means the highest

Range 3.41 – 4.20 means high

Range 2.61 – 3.40 means moderate

Range 1.81 – 2.60 means low

Range 1.00 – 1.80 means the lowest

#### 3.4.1.7 Tool Testing

1) In order to test the validity, the questionnaire developed by the researcher has been taken to the thesis advisor to check the validity of the content. The questionnaire was then sent to 5 experts who are able to examine. After that, the researcher calculated the IOC: Item-Objective Congruence Index by using the following criteria:

In order to examine the content validity of the questions, it must be fixed to these three answers:

Consistent (+1) means that the question is related to the subject.

Uncertain (0) means that it is impossible to conclude whether the question is consistent or not.

Inconsistent (-1) means that the question does not correspond to the subject.

In order to calculate the IOC, the applicable question must have an IOC value of 0.50 or higher (Wisakha Phuchinda, 2012, p. 186).

Formula

$$IOC = \frac{\sum R}{N}$$

IOC refers to Item-Objective Congruence Index.

N refers to number of experts.

$\sum R$  refers to the sum of all experts' opinion points.

Once the content validity check was completed, the researcher presented the thesis to the advisor in order to gain comments and make appropriate changes further.

2) In order to test the reliability, the researcher tested the adjusted questionnaire using the Try-Out with non-sample populations, which is, however, similar to the research sample. The reliability is measured by using the Measure of Internal Consistency, which is a measurement that uses only a single test. The test is to consider all the questions in the questionnaire to see whether all of the questions are in the area of the same subject or not. The reliability has been calculated using the alpha coefficient. (Coefficient-  $\alpha$ ) for the questions of which score was not 0 and 1 (Wisakha Phuchinda, 2012, pp. 188-189). The formula used for calculating the Coefficient-  $\alpha$  is as follows:

$$\alpha = \frac{n}{n-1} \left\{ 1 - \frac{\sum S_i^2}{S_t^2} \right\}$$

$\alpha$  refers to reliability of the questionnaire

$n$  refers to number of items in the test

$S_i^2$  refers to tolerances of each item in the test

$S_t^2$  refers to tolerances of the test

The calculated value of alpha indicates levels of consistency of the sets of questions, which are between  $0 \leq \alpha \leq 1$ . A level which is close to 1 indicates a high reliability level. The alpha value must be greater than 0.70 because it is a reliable and acceptable standard (Kanlaya Vanichbuncha, 2003, p. 449). It can be used as a tool to collect data. The result will be accurate, reliable, and highly consistent. Therefore, this tool can be used to collect data from the sample further.

The researcher conducted the reliability test by using 30 draft questionnaires in the sample group, and then the data obtained from the experiment was coded on the computer to calculate the reliability of the questionnaire, which, later on, the researcher analyzed the result in order to improve and complete the questionnaire for the research sample. The reliability of the questionnaire was at 0.98.

#### 3.4.1.8 Data Collection

The research in this section is based on quantitative research method. The data was collected as follows:

1) Secondary Data is the source of data compiled by the researcher (Compilation) in order to analyze the subjects desired to include in the study. It was from documents, books, articles, research papers, statistics, reports, laws, rules, regulations, online media, official governmental papers, and other relevant governmental documents.

2) Primary Data, the researcher collected new data (Collection) which are pertinent with the topic of the study. The collection was conducted by a field study to collect data by using questionnaires from the sample to get the concrete information.

#### 3.4.1.9 Data Analysis

Data obtained from the questionnaire has been analyzed by computer program which is for calculating any possible values by using descriptive statistics and inferential statistics.

#### 3.4.1.10 Statistics Used in Data Analysis

1) Descriptive Statistics was used to calculate the following measurements.

(1) Percentage calculates the proportion of respondents' data in each questionnaire compared to the whole data. The total value is calculated as in percentage (Thanin Silcharu, 2012: 148).

(2) Mean or Average are the values derived from the substitutes calculated from values of all the data (Sirichai Pongwichai, 2011, p. 86).

(3) Standard Deviation: SD is used to calculate the difference between each data and the average of the data. Standard deviation is the best measure to be used for calculating dispersion compared to the range, Quartile Deviation, and Mean Deviation (Sirichai Pongwichai, 2011, p. 93).

2) Inferential Statistic was used in order to analyze data for hypothesis testing.

(1) The different personal information of Health tourists who using service in Thai traditional medicine promoting hospitals influences

the assessment of efficiency of the logistics management processes for health tourism in Thai traditional medicine promoting hospitals by using t-test in data analysis. If differences are found, they will be tested in pairs using the LSD method (fisher's least-significant different).

(2) The different personal information of health tourists who use the services in Thai traditional medicine promoting hospitals influences the assessment of effectiveness of the logistics management processes for health tourism in Thai traditional medicine promoting hospitals by using t-test in data analysis. If differences are found, they will be tested in pairs using the LSD method (fisher's least-significant different).

(3) The efficiency of the logistics management processes for health tourism Thai traditional medicine promoting hospitals is related to the effectiveness of the logistics management processes for health tourism in Thai traditional medicine promoting hospitals. Pearson correlation coefficient was used to study the relationship between two variables to see whether they are related or not. (Thannin, Silpcharu, 2012, p. 204). Using Pearson correlation coefficient, it does not matter which variable is a cause or effect. This study has adopted Pearson Product Moment Correlation Coefficient as a measurement of the relationship between two variables or two sets of data in terms of interval or ratio scale, which corresponds to this research.

The correlation measurement criteria of the correlation coefficient between efficiency and the effectiveness of the logistics management processes for health tourism Thai traditional medicine promoting hospitals is as follows:

Greater than .81 means there is high correlation

.61-.80 means there is rather high correlation

.41-.60 means there is moderate correlation

.21-.40 means there is rather low correlation

Less than .21 means there is low correlation

(4) Factors related to the implementation of health promoting policies in Thai traditional medicine promoting hospitals influence the efficiency of logistics management processes for health tourism in Thai traditional medicine promoting hospitals. Using multiple regression analysis.



### **3.4.2 Qualitative Research Methodology**

#### 3.4.2.1 Population

The population in this research is as follows.

- 1) Health tourists who use the services in Thai traditional medicine promoting hospitals
- 2) Staff in Thai traditional medicine promoting hospitals

#### 3.4.2.2 Sample

- 1) 30 health tourists who use the services in Thai traditional medicine promoting hospitals
- 2) 18 Staff in Thai traditional medicine promoting hospitals

#### 3.4.2.3 Sample Selection

1) Convenience sampling method was used to select health tourists who use the services in Thai traditional medicine promoting hospitals. They are those who experienced Thai massage, oil massage, foot massage, herbal steam, herbal compress, sauna, skin mask/Thai herbal scrub, Thai herbal facial scrub, essential oil bath, and jacuzzi bath in Thai traditional medicine promoting hospitals.

As for the size of the sample of 30 people, it has stemmed from the fact that the researcher has interviewed and obtained information that eventually became redundant (Redundancy). According to Glaser and Strauss (2009), when the researcher feels that there is no information different from those earlier obtained, it indicates that there is the saturation or repetition of data, and this means that the researcher will know the size of the sample clearly.

2) Purposive sampling method was used to select staff in Thai traditional medicine promoting hospitals.

As for the size of the sample in this research of 18 persons, it must involve those who work in the Thai traditional medicine and spa divisions. These people must be long-term employees, not those who have been hired periodically, and must have worked in this division more than 1 year.

The characteristics of the selected group can represent or provide key information for the purpose of the research due to the fact that the research subject requires specific information from people who are close to it, who are exposed to the problem and who have in depth knowledge about it in order to get the most accurate and the largest amount of information.

#### 3.4.2.4 Research Tools

##### 1) Research tools of objective 1

The researcher used the semi-structured interview form as a research tool. This is based on qualitative research as the interviewees are people who are close to or who have experienced problems, and those who know about the subject well as mentioned above in order to use the results of this analysis to answer the objectives of this research. The researcher has selected in-depth interview to obtain clear information on the subject, and the semi-structured interview as a tool for the sample. Using semi-structured interview as a research tool has the advantages as follows. The interviews were the direct contact between interviewers and interviewees, therefore; in case of any misunderstandings, it can be corrected and explained immediately which results in the high quality of the information in terms of accuracy and reliability. The interviews are available to all people regardless of different education levels. It also solves the problem of low response rate, and the absence of an answer. Other interviewing methods, such as observation, can be used as well, and it is good due to the fact that the behavior of interviewees can be seen clearly (Forza, 2002, 167; Opdenakker, 2006, 2; Phellas, Bloch, & Seale, 2011, p. 182; Bunchom Srisaard, 2013, p. 93; Sorachai Phisarnbuth, 2015, p. 60).

(1) The interview for health tourists who use the services in Thai traditional medicine promoting hospitals included questions about the implementation of health promoting tourism in Thai traditional medicine promoting hospital. It is as follows:

(1.1) Consideration regarding whether the implementation of health promoting tourism in Thai traditional medicine promoting hospitals has clear objectives, and procedures of the project or not

(1.2) Consideration regarding whether the implementation of health promoting tourism policies in Thai traditional medicine promoting hospitals relates to economy status, society, culture, and values of the service receivers or the tourists or not

(1.3) Consideration regarding whether the organizational structure is appropriate for the implementation of health promoting tourism policies in Thai traditional medicine promoting hospitals or not

(1.4) Consideration regarding whether staff have knowledge and ability for the implementation of health promoting tourism policies in Thai traditional medicine promoting hospitals or not

(1.5) Consideration regarding whether staff have the cooperation and positive attitude for the implementation of health promoting tourism policies in Thai traditional medicine promoting hospitals or not

(1.6) Consideration regarding whether the implementation of health promoting tourism policies in Thai traditional medicine promoting hospitals has got suitable resources such as location, materials, equipment, tools or not.

(1.7) Consideration regarding whether the implementation of health promoting tourism policies in Thai traditional medicine promoting hospitals has got suitable and clear communication among staff and service receivers or the tourists or not.

(2) Interview for staff in Thai traditional medicine promoting hospitals consists of questions about the implementation of the policies in Thai traditional medicine promoting hospitals. They are as follows:

(2.1) Consideration regarding whether the implementation of health promoting tourism policies in Thai traditional medicine promoting hospitals has got clear objective, aims, and operating procedures or not.

(2.2) Consideration regarding whether the implementation of health promoting tourism policies in Thai traditional medicine promoting hospitals relate to economy status, society, culture, and values of the service receivers or the tourists or not.

(2.3) Consideration regarding whether the organizational structure is appropriate for the implementation of health promoting tourism policies in Thai traditional medicine promoting hospitals or not.

(2.4) Consideration regarding whether staff have appropriately improved their knowledge and ability due to the implementation of health promoting tourism policies in Thai traditional medicine promoting hospitals or not.

(2.5) Consideration regarding whether staff have collaborated in implementing the health promoting tourism policies in Thai traditional medicine promoting hospitals or not, as well as regarding the attitude of the workers towards the implementation.

(2.6) Consideration regarding whether the implementation of health promoting tourism policies in Thai traditional medicine promoting hospitals has got sufficient resources such as location, materials, equipment, and tools or not.

(2.7) Consideration regarding whether the implementation of health promoting tourism policies in Thai traditional medicine promoting hospitals has got suitable communication or not. It covers whether there is both the communication among workers and that among workers and service receivers or not, as well as the clarity of the communication.

## 2) Research tools of objective 2

The researcher used the semi-structured interview form as a research tool. This is based on qualitative research as the interviewees are people who are close to or who have experienced problems, and those who know about the subject well as mentioned above in order to use the results of this analysis to answer the objectives of this research. The researcher selected in-depth interview to obtain clear information on the subject, and the researcher used semi-structured interview as a tool for the sample.

The interviews are divided into 2 sets.

(1) The interview for staff in Thai traditional medicine promoting hospitals, including questions regarding the efficiency of the logistics management processes for health tourism in Thai traditional medicine promoting hospitals

(1.1) How the hospitals manage the Physical Flow, including provision of parking spaces in the hospital for people who come to use the service, provision of pathways to the health service building, provision of a reception and registration area, provision of a waiting area, provision of a scanning area, provision of changing rooms, provision of health service area, provision of shower rooms and toilets, provision of a payment area, provision of an area for giving advice and guidance related to health, and provision of an area for resting

(1.2) How the hospitals manage the Data Flow, including provision of a sign indicating the service area in the health service building, recommendation of products and services in the reception and registration area, storing and forwarding the information and details of the service recipients or tourists in the reception and registration area, storing and forwarding health information of the service recipients or tourists in the screening area, storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area, storing and forwarding payment information in the payment area, provision of advice related to health in the area for health advice and guidance, and provision of health information and knowledge in the areas for resting

(1.3) How the hospitals manage the Financial Flow, including preparation of equipment and tools for receiving payments, payment channel management, informing the details of service fees to the service recipients or tourists, process of receiving payment, and issuing a document or proof of payment.

(1.4) How the hospitals manage the Service Process Flow, including reception of the service recipients or tourists, screening of the service recipients or tourists, preparation of the service recipients or tourists before the health service is given, preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists, health services for the service recipients or tourists, and the services before the service recipients or tourists leave.

(1.5) How the hospitals manage Service quality, including the convenience when being serviced, innovation and technology in the service, accuracy and completeness of the service, reliability of the service, responsiveness to the needs of the service recipients, knowledge and capabilities in the service, safety in providing the service, the speed of the service, and attentiveness when providing the service

(2) Interviews for health tourists who use services in Thai traditional medicine promoting hospitals, including questions about the efficiency and effectiveness of the logistics management process for hospitals promoting and supporting Thai traditional medicine

(2.1) How the hospitals manage the Physical Flow and whether the health tourists are satisfied or not, including provision of parking spaces in the hospital for people who come to use the service, provision of pathways to the health service building, provision of a reception and registration area, provision of a waiting area, provision of a scanning area, provision of changing rooms, provision of health service area, provision of shower rooms and toilets, provision of a payment area, provision of an area for giving advice and guidance related to health, and provision of an area for resting

(2.2) How the hospitals manage the Data Flow and whether the health tourists are satisfied or not ,including provision of a sign indicating the service area in the health service building, recommendation of products and services in the reception and registration area, storing and forwarding the information and details of the service recipients or tourists in the reception and registration area, storing and forwarding health information of the service recipients or tourists in the screening area, storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area, storing and forwarding payment information in the payment area, provision of advice related to health in the area for health advice and guidance, and provision of health information and knowledge in the areas for resting

(2.3) How the hospitals manage the Financial Flow and whether the health tourists satisfied or not, including preparation of equipment and tools for receiving payments, payment channel management, informing the details of service fees to the service recipients or tourists, process of receiving payment, and issuing a document or proof of payment

(2.4) How the hospitals manage the Service Process Flow and whether the health tourists satisfied or not, including reception of the service recipients or tourists, screening of the service recipients or tourists, preparation of the service recipients or tourists before the health service is given, preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists, health services for the service recipients or tourists, and the services before the service recipients or tourists leave

(2.5) Service quality and whether the health tourists are satisfied or not, including the convenience when being serviced, innovation and

technology in the service, accuracy and completeness of the service, reliability of the service, responsiveness to the needs of the service recipients, knowledge and capabilities in the service, safety in providing the service, the speed of the service, and attentiveness when providing the service

#### 3.4.2.5 Tool Testing

There are two steps for tool testing:

Step one is the literature review. The researcher reviewed the literature related to the subject by studying the related papers, then applied the knowledge from the concepts and theories related to public policy, public policy implementation, evaluation of public policy, and health promoting tourism in Thailand, as well as the experience of the researcher itself to be the information for the questionnaire regarding the implementation of health promoting tourism policies in Thai traditional medicine promoting hospitals.

Step 2 is checking and creating an interview. The researcher took the results from step 1 to create an interview, set the scope of content to create an interview that is more complete and suitable for the objective. The researcher gave the interview form which was created for the research to the thesis advisor and 5 experts for a content validity check. After that, the researcher improved the interview to make it more complete in order to use it as a tool for the sample of this research.

#### 3.4.2.6 Data Collection

This study was conducted based on qualitative research. The data was collected using the following methods.

1) Secondary Data is the source of data compiled by the researcher (Compilation) to analyze the topics related to the study. The data came from research papers, books, articles, related research papers, statistics, reports, laws, regulations, online media and governmental documents, for example, the national economic and social development plan and Thailand's tourism development plan.

2) Primary Data, the researcher collected new data (Collection) which are pertinent with the topic of the study. The collection was conducted by a field study to collect data by using semi-structured interviews with key informants concerning those who are health tourists who using service in Thai

traditional medicine promoting hospitals, and those who work in Thai traditional medicine promoting hospitals to get concrete information.

#### 3.4.2.7 Data Analysis

The researcher applied the content analysis method. Norwood (2000: 376) said that qualitative data analysis is broadly based on information arrangement and tracking of narrative information in order to analyze a specific point, draw conclusion, and make a decision of what the anticipated answer is. Sin Phanphinij (2011, pp. 274-275) explained that qualitative data analysis requires systematic thinking. It also needs to be academic and aim to find the phenomena-based hypothesis rather than the hypothesis that was set beforehand in the research. Accordingly, concepts and theories are needed in the analysis. The data was analyzed by using the data from the interviews together with the academic papers that have been reviewed using content analysis-a method of narrative analysis, which focuses on interpreting and summarizing information from visual or specific phenomena as presented by interviewees, mainly based on the researcher's judgment (Bordens & Abbott, 1999).

### **3.5 Research Methodology for Objective 3, Which is to Create Logistics Management Models for Health Tourism in Thai Traditional Medicine Promoting Hospitals.**

#### **3.5.1 Qualitative Research Methodology**

##### Using Focus Group Interviews

The research used the results from objective 1 and 2 to create a draft regarding logistics management model for health tourism in Thai traditional medicine promoting hospitals, then conducted the focus group interview which can be seen as follows.

##### 3.5.1.1 Population

Staff in Thai traditional medicine promoting hospitals

##### 3.5.1.2 Sample

8 Staff in Thai traditional medicine promoting hospitals



As for the size of the sample in this research of 8 persons, it must involve those who work in the Thai traditional medicine and spa divisions. These people must be long-term employees, not those who have been hired periodically and must have worked in this division more than 1 year.

#### 3.5.1.3 Sample Selection

The method of selecting the sample is purposive sampling, which is appropriate for selecting samples that relate to research problems (Wisakha Phuchinda, 2012, p. 100). The characteristics of the selected group can represent the key informants which are suitable for the purpose of this research. The selected group is the group of staff in Thai traditional medicine promoting hospitals due to the fact that the research subjects require specific information from those who are close to and have experienced the problem, as well as those who know the subjects well in order to get accurate and the largest amount of information.

#### 3.5.1.4 Research Tool

The researcher used focus group interview as a research tool which is based on qualitative research method. Those who participated in the group interviews were close to and have truly experienced the problem in order to use the results of this analysis to answer the questions set in the objectives of this research. Consequently, the focus group interview was selected as a research tool. When considering the advantages, it was found that this method enables the collection of data from multiple samples in a short period of time; the information has been passed through the controversial discussion of groups, which ensures accuracy, reliability, and variety of information (Kornkaew Chantapasa, 2016).

#### 3.5.1.5 Tool Testing

There are two steps for tool testing.

Step one is the literature review. The researcher reviewed the literature related to the subject by studying the related papers, then applied the knowledge from concepts and theories related to logistics management for tourism, and the research results obtained from objective 1 and 2, as well as the experience of the researcher to be the information for the questions regarding logistic management model for health promoting tourism in Thai traditional medicine promoting hospitals.

Step 2 is checking and creating an interview. The researcher took the results of step 1 to create a group interview, set the scope of content to create a group interview that is more complete and suitable for the objective. The researcher gave the group interview form which was created for the research to the thesis advisor for accuracy check. After that, the researcher improved the interview to make it more complete in order to use it as a tool for the sample of this research.

#### 3.5.1.6 Data Collection

This study was conducted based on qualitative research. The data was collected as in the following methods.

1) Secondary Data is the source of data compiled by the researcher (Compilation) to analyze the areas related to the study. The data came from documents, books, articles, related research papers, statistics, reports, laws, regulations, online media and related governmental documents such as logistics management for tourism, the logistics management processes for tourism, logistics management in hospitals, logistics management model for tourism, and logistics management model in hospitals.

2) Primary Data, the researcher collected new data (Collection) which are pertinent with the topic of the study. The collection was conducted by a group interview to collect data from the key informants which are those who work in Thai traditional medicine promoting hospitals to get concrete information.

#### 3.5.1.7 Data Analysis

Content analysis was used

### **3.5.2 Qualitative Research Methodology**

Using in-depth interview

The researcher gave the logistics management model for health tourism in Thai traditional medicine promoting hospitals based on the focus group interviews to the experts in order for them to consider the suitability and possibility as can be seen in the following processes.

#### 3.5.2.1 Population

The population of this study consists of experts in logistics management for health tourism in Thai traditional medicine promoting hospitals

### 3.5.2.2 Sample

The researcher set the sample according to the qualitative research approach. The sample of this study was from 4 groups consisting of those who have expertise in logistics management for health tourism in Thai traditional medicine promoting hospitals. The sample consists of the following.

- 1) 3 Executives in Thai traditional medicine promoting hospitals
- 2) 3 Tour operator and travel agency entrepreneurs
- 3) 3 Academic officers in tourism and hospitality field
- 4) 3 Tourism developers

Different sources of information from different people were taken to be considered. A triangulation pattern is used to verify the data. The pattern is used to consider the information from different sources to see whether the change of the sources influences the change of the information or not. (Arunee Ornsawad, 2008, p. 282; Suphang Chantawanich, 2010, p. 128). If the people providing the information have been changed and the information was still the same, that means the results of the research were accurate.

### 3.5.2.3 Sample Selection

The method of selecting the sample is Purposive Sampling, which is appropriate to selecting a sample that relates to research problems (Wisakha Phuchinda, 2012, p. 100). The characteristics of the selected group can represent the key informants which are suitable for the purpose of this research. The selected groups consist of the executives in Thai traditional medicine promoting hospitals, tourism entrepreneurs, tourism and service academics, and tourism developers due to the fact that the research subjects require specific information from those who are close to and have experienced the problems, as well as those who know the subjects well in order to get accurate and the most information.

### 3.5.2.4 Research Tools

The researchers used the structured interview form as a research tool which is based on qualitative research approach. The interviewees were both experts and those involved in logistics management for health tourism in Thai traditional medicine promoting hospitals who know and understand about the subject of the

study well as mentioned above. In order to find the answers for the objectives of this research, the researcher selected in-depth interview types to obtain clear information on the subject, and used the structured interview as a tool for the sample.

The interview consists of questions regarding logistics management models for health tourism in Thai traditional medicine promoting hospitals.

#### 3.5.2.5 Data Collection

This study was conducted based on qualitative research and the data was collected from the primary data source. The researcher collected new data (Collection) which is pertinent with the topic of the study. The collection was conducted by interviewing individuals using an in-depth interview with the Key-Informants consisting of senior executives in Thai traditional medicine promoting hospitals, tourism entrepreneurs, tourism and service academics, and tourism developers in order to get concrete information.

#### 3.5.2.6 Data Checking and Analysis

Data checking and analysis processes in the research were conducted based on qualitative research methods using data triangulation checking approach, and content analysis in order to acquire the complete logistics management model for health tourism in Thai traditional medicine promoting hospitals, which can be practical in Thai traditional medicine promoting hospitals.

**Table 3.1** Research Methodology Summary

<b>Research objectives</b>	<b>Research methodology</b>	<b>Sample</b>	<b>Sample size</b>	<b>Selecting techniques</b>	<b>Tool</b>	<b>Data analysis</b>
1.To analyze effectiveness of the implementation of health tourism policies in Thai traditional medicine promoting hospitals	Quantitative	Tourists	400 people	Accidental Sampling	Questionnaire	Descriptive statistics Inferential statistics
	Qualitative	Tourists	30 people	Convenience Sampling	Interview (Semi- structure)	Content analysis
	Qualitative	Staff in the hospitals	18 people	Purposive Sampling	Interview (Semi- structure)	Content analysis
2. To assess the efficiency of the logistics management processes for health tourism in Thai traditional medicine promoting hospitals	Quantitative	Tourists	400 people	Accidental Sampling	Questionnaire	Descriptive statistics Inferential statistics
	Qualitative	Tourists	30 people	Convenience Sampling	Interview (Semi- structure)	Content analysis
	Qualitative	Staff in the hospitals	18 people	Purposive Sampling	Interview (Semi- structure)	Content analysis
3.To evaluate the effectiveness of the of the logistics management processes for health tourism	Quantitative	Tourists	400 people	Accidental Sampling	Questionnaire	Descriptive statistics Inferential statistics
	Qualitative	Tourists	30 people	Convenience Sampling	Interview (Semi- structure)	Content analysis

**Table 3.1** (Continued)

<b>Research objectives</b>	<b>Research methodology</b>	<b>Sample</b>	<b>Sample size</b>	<b>Selecting techniques</b>	<b>Tool</b>	<b>Data analysis</b>
in Thai traditional medicine promoting hospitals						
4. To propose the logistics management models for health tourism in Thai traditional medicine promoting hospitals	Qualitative	Staff in the hospitals	8 people	Purposive Sampling	Focus Group interview	Content analysis
	Qualitative	1) Executives in hospitals 2) Tour Operator and Travel Agency Entrepreneur 3) Academic officers in tourism and hospitality 4) Tourism developer field	12 people	Purposive Sampling	Structured Interview	Content analysis

## CHAPTER 4

### DATA ANALYSIS AND RESEARCH RESULTS

The analysis and the presentation of results of the research entitled “A Model of Logistics Management for Health Tourism in Thai traditional medicine promoting hospitals in Thailand” have employed a mixed method research process which involves both quantitative and qualitative researches. The researcher has analyzed and therefore presented the research results according to the research objectives. And as for the understanding of the presentation of results of data analysis, the researcher has specified symbols used in presenting the data analysis as follows:

n	means	Population size
$\bar{X}$	means	Arithmetic mean
S.D.	means	Standard deviation
df	means	Degrees of freedom
MS	means	Mean of squares
SS	means	Sum of squares
t	means	t-test
Sig	means	Level of statistical significance
F	means	F-test
r	means	Pearson correlation coefficient
Adjusted R <sup>2</sup>	means	Adjusted Coefficient of Determination or Reliability
B	means	Regression coefficient
Beta	means	Standardized Regression Coefficient or Beta
Coefficient		
*	means	Level of statistical significance of .05

#### 4.1 The Results of the Analysis of General Information of Medical Tourists Who Have Used Services in Thai Traditional Medicine Promoting Hospitals

The following includes personal information of medical tourists who have used services in Thai traditional medicine promoting hospitals, categorized according to gender, age, level of education, occupation, average monthly income, experience in using the services in Thai traditional medicine promoting hospitals, and main purpose of using the services in Thai traditional medicine promoting hospitals. The statistics used are Frequency Distribution and Percentage, and the information is presented in tables with the results explained.

**Table 4.1** Indicating the Number and the Percentage of Tourists' General Information Categorized According to Gender

<b>Gender</b>	<b>Number (persons)</b>	<b>Percentage</b>
Male	96	24.00
Female	304	76.00
<b>Total</b>	<b>400</b>	<b>100.00</b>

Table 4.1 illustrates the results of the analysis of general information of medical tourists who have used services in Thai traditional medicine promoting hospitals, the sample group for this study. The information analyzed was categorized according to gender. It was found that the majority of the sample group are female, represented by 304 persons or a percentage of 76, while there were 96 male participants or a percentage of 24.



**Table 4.2** Indicating the Number and the Percentage of Tourists' General Information Categorized According to Age

Age	Number (persons)	Percentage
21 - 30 years old	54	13.50
31 - 40 years old	91	22.75
41 - 50 years old	103	25.75
51 - 60 years old	93	23.25
Over 61 years old	59	14.75
<b>Total</b>	<b>400</b>	<b>100.00</b>

Table 4.2 illustrates the results of the analysis of general information of medical tourists who have used services in Thai traditional medicine promoting hospitals, the sample group for this study. The information analyzed was categorized according to age. It was found that the majority of the sample group are between 41-50 years old, 103 persons or a percentage of 25.75, followed by those who are 51-60 years old, 93 persons or a percentage of 23.25, followed by 31-40 years old, 91 persons or a percentage of 22.75, next, those older than 61 years old, 59 persons or a percentage of 14.75, and those who are 21-30 years old, 54 persons or a percentage of 13.50, respectively.

**Table 4.3** Indicating the Number and the Percentage of Tourists' General Information Categorized According to Marital Status

<b>Marital status</b>	<b>Number (persons)</b>	<b>Percentage</b>
Single	164	41.00
Married	192	48.00
Widowed/Divorced/Separated	44	11.00
<b>Total</b>	<b>400</b>	<b>100.00</b>

Table 4.3 illustrates the results of the analysis of general information of medical tourists who have used services in Thai traditional medicine promoting hospitals, the sample group for this study. The information analyzed was categorized according to marital status. It was found that the majority of the sample group are married, 192 persons or a percentage of 48, followed by those who are single, 164 persons or a percentage of 41, and those who are widowed/divorced/separated, 44 persons or a percentage of 11.00, respectively.

**Table 4.4** Indicating the Number and the Percentage of Tourists' General Information Categorized According to Level of Education

<b>Level of education</b>	<b>Number (persons)</b>	<b>Percentage</b>
Lower than High school/Vocational school	31	7.75
High school/Vocational school	53	13.25
Diploma/High vocational school	66	16.50
Bachelor's degree	210	52.50
Higher than bachelor's degree	40	10.00
<b>Total</b>	<b>400</b>	<b>100.00</b>

Table 4.4 illustrates the results of the analysis of general information of medical tourists who have used services in Thai traditional medicine promoting hospitals, the sample group for this study. The information analyzed was categorized according to level of education. It was found that the majority of the sample group hold a bachelor's degree, 210 persons or a percentage of 52.50, followed by a group of those who have finished diploma or high vocational school, 66 persons or a percentage of 16.50, those who finished high school or vocational school, 53 persons or a percentage of 13.25, those who finished higher than a bachelor's degree level, 40 persons or a percentage of 10, and those who finished lower than high school or vocational school, 31 persons or a percentage of 7.75, respectively.

**Table 4.5** Indicating the Number and the Percentage of Tourists' General Information Categorized According to Occupation

<b>Occupation</b>	<b>Number (persons)</b>	<b>Percentage</b>
Government officer/government employee	109	27.25
State enterprise employee	58	14.50
Private enterprise employee	94	23.50
Trader/Business owner	61	15.25
Student/College student	45	11.25
Other occupation	33	8.25
<b>Total</b>	<b>400</b>	<b>100.00</b>

Table 4.5 illustrates the results of the analysis of general information of medical tourists who have used services in Thai traditional medicine promoting hospitals, the sample group for this study. The information analyzed was categorized according to occupation. It was found that the majority of the sample group work as a government officer or a government employee, 109 persons or a percentage of 27.25, followed by a group of private enterprise employees of 94 persons or a percentage of 23.50, a group of traders/business owners of 61 persons or a percentage of 15.25, a group of state enterprise employee of 58 persons or a percentage of 14.50, a group of

students/college students of 45 persons or a percentage of 11.25, and a group of those who have other occupations, 33 persons or a percentage of 8.25, respectively.

**Table 4.6** Indicating the Number and the Percentage of Tourists' General Information Categorized According to Average Income Per month

Average income per month	Number (persons)	Percentage
Less than or equal to 15,000 baht	54	13.50
15,001 - 25,000 baht	142	35.50
25,001 - 35,000 baht	116	29.00
Higher than 35,001 baht	88	22.00
<b>Total</b>	<b>400</b>	<b>100.00</b>

Table 4.6 illustrates the results of the analysis of general information of medical tourists who have used services in Thai traditional medicine promoting hospitals, the sample group for this study. The information analyzed was categorized according to average income per month. It was found that the majority of the sample group receive an average income of 15,001-25,000 baht per month, represented by 142 persons or a percentage of 35.50, followed by those who receive 25,001-35,000 baht per month, represented by 116 persons or a percentage of 29, those who receives higher than 35,001 baht per month, represented by 88 persons or a percentage of 22, and those who receive lower than or an income equal to 15,000 baht per month, represented by 54 persons or a percentage of 13.50, respectively.

**Table 4.7** Indicating the Number and the Percentage of Tourists' General Information Categorized According to Experience in Using the Services in Thai Traditional Medicine Promoting Hospitals

<b>Experience in using the services in Thai traditional medicine promoting hospitals</b>	<b>Number (persons)</b>	<b>Percentage</b>
First time using the services	243	60.75
Used to using the services	157	39.25
<b>Total</b>	<b>400</b>	<b>100.00</b>

Table 4.7 illustrates the results of the analysis of general information of medical tourists who have used services in Thai traditional medicine promoting hospitals, the sample group for this study. The information analyzed was categorized according to experience in using the services. It was found that the majority of the sample group have experience in using the services in medical tourism, 243 persons or a percentage of 60.75, and those who have used the services in medical tourism for the first time include 157 persons or a percentage of 39.25

**Table 4.8** Indicating the Number and the Percentage of Tourists' General Information Categorized According to Main Purposes of Using the Services in Thai Traditional Medicine Promoting Hospital

<b>Main purposes of using the services in Thai traditional medicine promoting hospitals</b>	<b>Number (persons)</b>	<b>Percentage</b>
Thai massage	108	27.00
Aromatherapy massage	51	12.75
Foot massage	63	15.75
Herbal sauna	36	9.00
Herbal compress massage	41	10.25
Sauna	23	5.75
Masks or scrubs with Thai herbs	29	7.25

**Table 4.8** (Continued)

<b>Main purposes of using the services in Thai traditional medicine promoting hospitals</b>	<b>Number (persons)</b>	<b>Percentage</b>
Facial treatments with Thai herbs	26	6.50
Nourishing bath with essential oils or nourishing jacuzzi	23	5.75
<b>Total</b>	<b>686</b>	<b>100.00</b>

Table 4.8 illustrates the results of the analysis of general information of medical tourists who have used services in Thai traditional medicine promoting hospitals, the sample group for this study. The information analyzed was categorized according to the main purposes of using the services in Thai traditional medicine promoting hospitals. It was found that the majority of the sample group go to the hospital for Thai massage, 108 persons or a percentage of 27, followed by foot massage, 63 persons or a percentage of 15.75, aromatherapy massage, 51 persons or a percentage of 12.75, herbal compress massage, 41 persons or a percentage of 10.25, herbal sauna, 36 persons or a percentage of 9, masks or scrubs with Thai herbs, 29 persons or a percentage of 7.25, facial treatments with Thai herbs, 26 persons or a percentage of 6.50, sauna, 23 persons or a percentage of 5.75, and nourishing bath with essential oils or nourishing jacuzzi, 23 persons or a percentage of 5.75, respectively.

## **4.2 The Results of Data Analysis According to Objective 1, to Analyze the Use of Health Tourism Promotion Policy in Thai Traditional Medicine Promoting Hospitals**

### **4.2.1 Quantitative Research Methodology**

The results of the analysis of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals towards the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals. The statistics used were mean and S.D. The results are presented in tables, with data explained. In addition, the mean value can be interpreted as follows:

Score range of 4.21-5.00	means	the highest level
Score range of 3.41-4.20	means	high level
Score range of 2.61-3.40	means	mediocre level
Score range of 1.81-2.60	means	low level
Score range of 1.00-1.80	means	the lowest level

**Table 4.9** Indicating Percentage, Mean, S.D. and Levels of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals Towards the Implementation of the Policy Promoting Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to the Clarity of the Policy

Implementation of the policy promoting tourism in a hospital	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. The implementation of the policy promoting health tourism in a hospital has set clear goals.	3.80	0.40	High	3
2. The implementation of the policy promoting health tourism in a hospital has set clear objectives.	3.57	0.50	High	4
3. The implementation of the policy promoting health tourism in a hospital has set clear steps of operation.	4.06	0.42	High	1
4. The implementation of the policy promoting health tourism in a hospital has set clear projects, activities, and services.	3.82	0.57	High	2
<b>Total</b>	<b>3.81</b>	<b>0.35</b>	<b>High</b>	

From Table 4.9, it is found that the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals towards the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals,

categorized according to the clarity of the policy are as follows. The results of data analysis, overall, found that tourists have a high opinion, ( $\bar{X} = 3.81$ , S.D = 0.35). When each item is considered, it shows that for the implementation of the policy promoting health tourism in a hospital has set clear goals, tourists have a high opinion, ( $\bar{X} = 3.80$ , S.D = 0.40), for the implementation of the policy promoting health tourism in a hospital has set clear objectives, tourists have a high opinion, ( $\bar{X} = 3.57$ , S.D = 0.50), for the implementation of the policy promoting health tourism in a hospital has set clear steps of operation, tourists have a high opinion, ( $\bar{X} = 4.06$ , S.D = 0.42), and for the implementation of the policy promoting health tourism in a hospital has set clear projects, activities, and services, tourists have a high opinion, ( $\bar{X} = 3.82$ , S.D = 0.57).

According to an analysis of the aforementioned data, it can be seen that for the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, categorized according to the clarity of the policy, tourists have a high opinion towards all points which are 1) the implementation of the policy promoting health tourism in a hospital has set clear steps of operation, 2) the implementation of the policy promoting health tourism in a hospital has set clear projects, activities, and services, 3) the implementation of the policy promoting health tourism in a hospital has set clear goals, and 4) the implementation of the policy promoting health tourism in a hospital has set clear objectives, respectively.

**Table 4.10** Indicating Percentage, Mean, S.D. and Levels of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals Towards the Implementation of the Policy Promoting Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to External Surroundings

Implementation of the policy promoting tourism in a hospital	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. The implementation of the policy promoting health tourism in a hospital is in line with the economic condition.	4.17	0.37	High	1



**Table 4.10** (Continued)

<b>Implementation of the policy promoting tourism in a hospital</b>	<b>n = 400</b>		<b>Level</b>	<b>Rank</b>
	$\bar{X}$	<b>S.D</b>		
2. The implementation of the policy promoting health tourism in a hospital is in line with the social condition.	3.71	0.49	High	4
3. The implementation of the policy promoting health tourism in a hospital is in line with Thai culture.	3.89	0.36	High	3
4. The implementation of the policy promoting health tourism in a hospital is in line with tourists' values.	3.90	0.56	High	2
<b>Total</b>	<b>3.92</b>	<b>0.30</b>	<b>High</b>	

From Table 4.10, the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals towards the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, categorized according to external surroundings are as follows. The results of data analysis, overall, found that tourists have a high opinion, ( $\bar{X} = 3.92$ , S.D = 0.30). When each item is considered, it shows that for the implementation of the policy promoting health tourism in a hospital is in line with the economic condition, tourists have a high opinion, ( $\bar{X} = 4.17$ , S.D = 0.37), for the implementation of the policy promoting health tourism in a hospital is in line with the social condition, tourists have a high opinion, ( $\bar{X} = 3.71$ , S.D = 0.49), for the implementation of the policy promoting health tourism in a hospital is in line with Thai culture, tourists have a high opinion, ( $\bar{X} = 3.89$ , S.D = 0.36), and for the implementation of the policy promoting health tourism in a hospital is in line with tourists' value, tourists have a high opinion, ( $\bar{X} = 3.90$ , S.D = 0.56).

According to an analysis of the aforementioned data, it can be seen that for the implementation of the policy promoting health tourism in Thai traditional medicine

promoting hospitals, categorized according to external surroundings, tourists have a high opinion towards all points which are 1) the implementation of the policy promoting health tourism in a hospital is in line with the economic condition, 2) the implementation of the policy promoting health tourism in a hospital is in line with tourists' value, 3) the implementation of the policy promoting health tourism in a hospital is in line with Thai culture, and 4) the implementation of the policy promoting health tourism in a hospital is in line with the social condition, respectively.

**Table 4.11** Indicating Percentage, Mean, S.D. and Levels of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals Towards the Implementation of the Policy Promoting Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Resources

<b>The implementation of the policy promoting health tourism in a hospital</b>	<b>n = 400</b>		<b>Level</b>	<b>Rank</b>
	$\bar{X}$	<b>S.D</b>		
1. The implementation of the policy promoting health tourism in a hospital has an appropriate venue management.	3.85	0.38	high	4
2. The implementation of the policy promoting health tourism in a hospital has surroundings and facilities which indicate that the budget has been adequately allocated.	3.60	0.49	high	5
3. The implementation of the policy promoting health tourism in a hospital has sufficient personnel.	4.15	0.36	high	2
4. The implementation of the policy promoting health tourism in a hospital has materials, equipment, and tools enough for services.	3.90	0.55	high	3

**Table 4.11** (Continued)

<b>The implementation of the policy promoting health tourism in a hospital</b>	<b>n = 400</b>		<b>Level</b>	<b>Rank</b>
	$\bar{X}$	<b>S.D</b>		
5. The implementation of the policy promoting health tourism in a hospital has employed technology for supporting the operation appropriately.	4.16	0.37	high	1
<b>Total</b>	<b>3.93</b>	<b>0.28</b>	<b>High</b>	

From Table 4.11, it is found that the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals towards the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, according to resources, are as follows. The results of data analysis, overall, found that tourists have a high opinion, ( $\bar{X} = 3.93$ , S.D = 0.28). When each item is considered, it shows that for the implementation of the policy promoting health tourism in a hospital has appropriate venue management, tourists have a high opinion, ( $\bar{X} = 3.85$ , S.D = 0.38), for the implementation of the policy promoting health tourism in a hospital has surroundings and facilities which indicate that the budget has been adequately allocated, tourists have a high opinion, ( $\bar{X} = 3.60$ , S.D = 0.49), for the implementation of the policy promoting health tourism in a hospital has sufficient personnel, tourists have high opinion, ( $\bar{X} = 4.15$ , S.D = 0.36), for the implementation of the policy promoting health tourism in a hospital has materials, equipment, and tools enough for services, tourists have a high opinion, ( $\bar{X} = 3.90$ , S.D = 0.55), and for the implementation of the policy promoting health tourism in a hospital has employed technology for supporting the operation appropriately, tourists have a high opinion, ( $\bar{X} = 4.16$ , S.D = 0.37).

According to an analysis of the aforementioned data, it can be seen that for the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, categorized according to resources, tourists have a high opinion

for all points which are 1) the implementation of the policy promoting health tourism in a hospital has employed technology in supporting the operation appropriately, 2) the implementation of the policy promoting health tourism in a hospital has sufficient personnel, 3) the implementation of the policy promoting health tourism in a hospital has materials, equipment, and tools enough for services, 4) the implementation of the policy promoting health tourism in a hospital has appropriate venue management, and 5) the implementation of the policy promoting health tourism in a hospital has surroundings and facilities, which indicate that the budget has been adequately allocated.

**Table 4.12** Indicating Percentage, Mean, S.D. and Levels of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals Towards the Implementation of the Policy Promoting Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According Organizational Structure

Implementation of the policy promoting tourism in a hospital	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. The implementation of the policy promoting health tourism in a hospital has established responsible divisions, departments, or groups appropriately.	3.82	0.39	High	1
2. The implementation of the policy promoting health tourism in a hospital has specified duties, tasks, and responsibilities of staff appropriately.	3.65	0.48	High	2
<b>Total</b>	<b>3.73</b>	<b>0.36</b>	<b>High</b>	

From Table 4.12, it is found that the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals towards the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, according to organizational structure, are as follows. The results of data analysis,

overall, found that tourists have a high opinion, ( $\bar{X} = 3.73$ , S.D = 0.36). When each item is considered, it shows that for the implementation of the policy promoting health tourism in a hospital has established responsible divisions, departments, or groups appropriately, tourists have a high opinion, ( $\bar{X} = 3.82$ , S.D = 0.39), and for the implementation of the policy promoting health tourism in a hospital has specified duties, tasks, and responsibilities of staff appropriately, tourists have a high opinion, ( $\bar{X} = 3.65$ , S.D = 0.48).

According to an analysis of the aforementioned data, it can be seen that for the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, categorized according to organizational structure, tourists have a high opinion for all points which are 1) the implementation of the policy promoting health tourism in a hospital has established responsible divisions, departments, or groups appropriately and 2) the implementation of the policy promoting health tourism in a hospital has specified duties, tasks, and responsibilities of staff appropriately, respectively.

**Table 4.13** Indicating Percentage, Mean, S.D. and Levels of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals Towards the Implementation of the Policy Promoting Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Staff

Implementation of the policy promoting tourism in a hospital	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. Knowledge and capabilities of staff in the implementation of the policy promoting health tourism in a hospital	4.15	0.36	High	1
2. Cooperation of staff in the implementation of the policy promoting health tourism in a hospital	4.00	0.23	High	2
<b>Total</b>	<b>4.08</b>	<b>0.24</b>	<b>High</b>	

According to Table 4.13, for the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals towards the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, categorized according to staff, the results of data analysis, overall, found that tourists have a high opinion, ( $\bar{X} = 4.08$ , S.D = 0.24). When each item is considered, it shows that for knowledge and capabilities of staff in the implementation of the policy promoting health tourism in a hospital, tourists have a high opinion, ( $\bar{X} = 4.15$ , S.D = 0.36), and for cooperation of staff in implementation of the policy promoting health tourism in a hospital, tourists have a high opinion, ( $\bar{X} = 4.00$ , S.D = 0.23).

According to an analysis of the aforementioned data, it can be seen that for the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, categorized according to staff, tourists have a high opinion for all items which include 1) knowledge and capabilities of staff in the implementation of the policy promoting health tourism in a hospital and 2 cooperation of staff in the implementation of the policy promoting health tourism in a hospital, respectively.

**Table 4.14** Indicating Percentage, Mean, S.D. and Levels of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals Towards the Implementation of the Policy Promoting Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Communication

Implementation of the policy promoting tourism in a hospital	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. The implementation of the policy promoting health tourism in a hospital has appropriate communicating channels between fellow staff.	3.58	0.49	High	3
2. The implementation of the policy promoting health tourism in a hospital has appropriate communicating channels between staff and service recipients or tourists.	3.85	0.36	High	2

**Table 4.14** (Continued)

<b>Implementation of the policy promoting tourism in a hospital</b>	<b>n = 400</b>		<b>Level</b>	<b>Rank</b>
	$\bar{X}$	S.D		
3. The implementation of the policy promoting health tourism in a hospital has correct and clear communication.	3.86	0.53	High	1
<b>Total</b>	<b>3.76</b>	<b>0.33</b>	<b>High</b>	

From Table 4.14, for the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals towards the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, categorized according to communication, the results of data analysis, overall, found that tourists have a high opinion, ( $\bar{X} = 3.76$ , S.D = 0.33). When each item is considered, it shows that for the implementation of the policy promoting health tourism in a hospital has appropriate communicating channels between fellow staff, tourists have a high opinion, ( $\bar{X} = 3.58$ , S.D = 0.49), for the implementation of the policy promoting health tourism in a hospital has appropriate communicating channels between staff and service recipients or tourists, tourists have a high opinion, ( $\bar{X} = 3.85$ , S.D = 0.36), and for the implementation of the policy promoting health tourism in a hospital has correct and clear communication, tourists have a high opinion, ( $\bar{X} = 3.86$ , S.D = 0.53).

According to an analysis of the aforementioned data, it can be seen that for the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, categorized according to communication, tourists have a high opinion for all items which include 1) the implementation of the policy promoting health tourism in a hospital has correct and clear communication 2) the implementation of the policy promoting health tourism in a hospital has appropriate communicating channels between staff and service recipients or tourists, and 3) implementation of the policy promoting health tourism in a hospital has appropriate communicating channels between fellow staff, respectively.

**Table 4.15** Indicating Mean, S.D., and Levels of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals Towards the Implementation of the Policy Promoting Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Different Categories

Assessment of the efficiency of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. Clarity of the policy	3.81	0.35	High	4
2. External surroundings	3.92	0.30	High	3
3. Resources	3.93	0.28	High	2
4. Organizational structure	3.73	0.36	High	6
5. staff	4.08	0.24	High	1
6. Communication	3.76	0.33	High	5
<b>All categories</b>	<b>3.87</b>	<b>0.28</b>	<b>High</b>	

From Table 4.15, for the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals towards the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, the results of data analysis, overall, found that tourists have a high opinion ( $\bar{X} = 3.87$ , S.D = 0.28). When each item is considered, it shows that for clarity of the policy, tourists have a high opinion ( $\bar{X} = 3.81$ , S.D = 0.35), for external surroundings, tourists have a high opinion ( $\bar{X} = 3.92$ , S.D = 0.30), for resources, tourists have a high opinion ( $\bar{X} = 3.93$ , S.D = 0.28), for organizational structure, tourists have a high opinion ( $\bar{X} = 3.73$ , S.D = 0.36), and for staff, tourists have a high opinion ( $\bar{X} = 4.08$ , S.D = 0.24), and for communication, tourists have a high opinion ( $\bar{X} = 3.76$ , S.D = 0.33).

According to an analysis of the aforementioned data, it can be seen that for the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, categorized according to different categories, tourists have a high opinion for all items which include 1) Staff 2) Resources 3) External surroundings 4) Clarity of the policy 5) Communication, and 6) Organizational structure, respectively.



## 4.2.2 Qualitative Research Methodology

4.2.2.1 The results of the data analysis on the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals from health tourists who have used services in Thai traditional medicine promoting hospitals

From the data collection, it was found that for the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, health tourists who have used services in Thai traditional medicine promoting hospitals have their opinions for each aspect as follows:

1) As for clarity of policy, based on interviews with tourists who have used services in Thai traditional medicine promoting hospitals, it is found that most tourists see that the hospital has adopted the health promotion policy in the hospital. The goals, objectives, and steps of its operation are clearly set. Therefore, tourists understand the contents and details of the policy. Moreover, tourists know that the hospital has a policy to implement and promote health tourism via providing health services by Thai traditional medicine and spas, including Thai massage services, aromatherapy massage, foot massage, herbal sauna, herbal compress, sauna, body scrub with Thai herbs, facial treatment with Thai herbs, nourishing bath with essential oils, and nourishing jacuzzi. The services are promoted through media such as leaflets, brochures, the website of the hospital, the website of the province, and the website of Tourism Authority of Thailand as well as social media platforms. This makes visitors aware and understand the origin, objectives, and goals of the policy.

By visiting the hospital's website, I knew that there were health services with Thai traditional medicine and spas provided at the hospital. Then, I was interested and decided to look for more details. This, later on, helped me learn that the hospital wanted to promote health tourism and aimed to increase the number of service receivers in the hospital.

At first, I came to use the hospital's spa but did not know the details of the provision of health services with Thai traditional medicine and spas. After the staff provided me with a brochure in order to recommend the hospital's services to me, I read it and then knew about the origin and the goal of the hospital in promoting health tourism.

I think that the hospital has set a clear policy which promotes health tourism and is suitable for current situations, particularly the popularity of health tourism which is very strong. Therefore, it is good to have health services with Thai traditional medicine and spas in the hospital.

It is the provision of health services that are in line with the state's health promotion policy, and I rarely see the public hospital provide this type of services to tourists.

I saw these services from a program on YouTube, so I knew that the hospital has an objective of promoting tourism and a goal in increasing the number of service recipients and a clear rise of income because these type of services will meet the needs of most people well. It also makes people become more interested in using the services at the hospital.

The hospital has public relations on the provision of health services with Thai traditional medicine and spas, so this makes me know the source of the services and understand the purpose of these type of services, which are to promote health tourism in the province and to attract more tourists to use the services in the hospital.

I know that the hospital has many services, including Thai Massage, aromatherapy massage, foot massage, herbal steam, herbal compress massage, sauna, body scrub, and aromatherapy nourishing bath. The key objectives probably are to increase the revenue for the hospital and to promote tourism as well since most of the visitors are tourists.

For the hospital's health tourism, it is a service that holistically promotes health, with the use of Thai wisdoms that include Thai herbs and traditional Thai Medicine, combined with modern medicine. At the same time, the topic of health care is applied to link with local eco-tourism because the hospital is located in a place where tourism potential exists and is well known to Thais and foreigners.

2) As for external surroundings, from the interviews with tourists who have used services in Thai traditional medicine promoting hospitals, it is found that most tourists agree that the implementation of the policy promoting health

tourism in Thai traditional medicine promoting hospitals is consistent with the external surroundings. So, the researcher has summarized the following key points:

As for compliance with economic conditions, the majority of tourists who have used services in Thai traditional medicine promoting hospitals see that the implementation of the policy promoting health tourism in the hospital is consistent with the economic conditions in Thailand at present since the country is currently having a volatile economy. People must save money and cut unnecessary spending, even for traveling or health and beauty services. Therefore, a public Thai traditional medicine promoting hospital which promotes and supports services with Thai traditional medicine and spa can meet the needs of tourists because the quality of services is more reliable and cheaper than those of the private services.

When I knew that the hospital has Thai massage and spa services, I came right the way because it is cheaper than getting massaged and or enjoying spa at a commercial shop and the quality of service here is good.

I think the current economy is not as good as it should be. Most people need to save money. The spa is considered to be extravagant. But when I knew that the public hospital provides health tourism services, I was interested in and decided to use the service because it is cheap and reliable with quality since it is a public hospital.

For the fact that the public hospitals provide health services such as Thai massage and spa, I think that this is consistent with the economic situation. The current Thai economy is not as good as it should be. People cut unnecessary expenses, including travel. But when hospitals provide this kind of services, people can come and use because it is cheaper than the private sector, and the service quality is much more reliable, good and full of quality since most of service providers are doctors and nurses.

Nowadays, most people are paying more attention to health care. But with the high price and the economy that is not good, they cannot access the health services. But when the hospital, which is a public hospital, opens for health tourism, it can meet the needs of people and tourists in this economic era.

As for the consistency with social condition, the majority of tourists who have used services in Thai traditional medicine promoting hospitals see that the implementation of the policy promoting health tourism in the hospital is consistent with the social conditions because currently, Thailand is moving towards becoming an aging society. The number of older people is increasing, and they need to be cared for in terms of health for longevity. In addition, the implementation of a health promotion policy in the hospitals also gives people the opportunity to be equally healthy by providing health services with traditional Thai medicine and spa services in the state-owned hospital. This is an opportunity for all people to access the service equally at reasonable prices. It is considered to be the reduction of the social gap as well.

Now, Thailand is an aging society which needs health care. The fact that the hospital provides health services with traditional Thai medicine and spa services for health will help the elderly maintain being healthy longer. Also, the use of Thai herbs and Thai massage can meet the needs of this group of population as well.

I think the health services provided by Thai traditional medicine and spas are in harmony with the current social situation. In particular, Thai society has a higher number of elderly people, so hospital services will make the elderly healthier, with more longevity.

It is very consistent with the social conditions because the hospital's health services will reduce the social gap. By this, I mean everyone can access the service equally. No segregation because the public hospital runs the services by itself. Services are not expensive, and everyone can afford it.

The hospital's health tourism activities make everybody in society have the opportunity to receive equal health care. The hospital provides such services cheaper than the general stores. Every citizen can access the service.

Now, the number of elderly population is high, so the hospital offers services, both with traditional Thai medicine and spa so that the elderly has more choices for medical treatment. This way, the elderly people who use the services can take care of their health without waiting for an illness, and then

come to the doctor. So I think that this kind of health services is appropriate for the present social conditions in which the number of elderly people is increasing.

In terms of consistency with Thai culture, the majority of tourists who have used services in Thai traditional medicine promoting hospitals see that the implementation of the policy promoting health tourism in the hospital by providing health services with Thai traditional medicine and spa services is consistent with the Thai culture because such services have employed the local wisdom in the aspect of Thai medicine, and applied it to the provision of health services for tourists such as Thai massage, herbal sauna, and herbal compress.

The hospital provides health services, such as traditional Thai massage, herbal sauna, and herbal compress massage which comes from the application of local wisdom and is very useful.

I know that the hospital has the idea of bringing local wisdom to the service. In addition to health care for tourists, it also gives us the opportunity to experience Thai culture.

I think the implementation of policy promoting health tourism of the hospital is very consistent with Thai culture because the science of Thai massage and Thai traditional herbs are used in health services. So, in addition to promoting health, these also promote cultural tourism. Tourists will get to learn how to maintain their health in Thai style and to use the traditional massage and Thai herbs to take care of their own health as well.

I do not know the exact policy but know that the hospital is promoting health tourism by providing health services with traditional Thai medicine, which is the application of Thai traditional medicine wisdom to serving tourists. There are health services and health products for sale. Personally, I think that the implementation of a health promotion policy in the hospital is very consistent with Thai culture.

As for consistency with tourists' values, the majority of tourists who have used services in Thai traditional medicine promoting hospitals see that the implementation of the policy promoting health tourism in the hospital is consistent with the tourists' values, as tourists pay more attention to health care and travel more for health tourism. They also focus on tourism activities that promote the health of the body in a natural way in order to prevent sickness and reduce the use of medicine. Tourists are also more likely to travel to learn different cultures and experiences than just to visit an attraction. Therefore, the health services with Thai traditional medicine and spa services provided in Thai traditional medicine promoting hospitals is the implementation of the policy that promotes health tourism, which can meet the needs and tourists' values for maintaining, recovering and improving their health well. It also makes tourists learn and experience the culture of health care with Thai traditional medicine.

Health care services with Thai traditional medicine are consistent with the values very much because today, more and more tourists travel for health. Tourists want to do activities that help strengthen their health. They focus on health protection, rather than waiting for illness to occur and then go to see a doctor. So if they can have a good trip and good health, it can meet their needs.

The values of today's tourists are quite related to health. When traveling, it is a place where they can do activities for health that will be selected. But they also want to learn the culture of the community. So, I think the fact that the hospital provides health services with Thai traditional medicine and spas can also meet the needs of tourists well.

I only know that the hospital has organized health tourism activities which are consistent with the values of today's people well. Because it will not only be the traveling, but also contains activities that enhance health. This way, we have more travel experience.

I think that the policy promoting health tourism in the hospital is very consistent with the values of tourists. Today, tourists are more interested in health care, especially tourists who are elderly. In addition, when traveling,

tourists still need to include activities to do at tourist attractions and to learn more about culture, rather than to just walk, shop, and be photographed.

3) As for resources, from the data collection and analysis regarding the implementation of policy promoting health tourism in Thai traditional medicine promoting hospitals regarding suitability of the service area, budget adequacy, sufficiency of staff, sufficiency of materials, equipment and tools, and implementation of technology to support operation, the tourists have provided their comments, and the key points collected are as follows.

Regarding the suitability of service area, most tourists agree that the hospital has established a place to provide health services with Thai traditional medicine and spas appropriately. There is a clear separation of the service area, from other parts. The decorated environment is good and relaxing, which can attract the attention of the service recipients or tourists well.

The service area is very suitable. The hospital separates the area for Thai traditional services and the spa from other parts clearly. This makes me feel good when using the services, and I did not feel like I was in a hospital.

I like the fact that the hospital separates the Thai massage and spa area from the building for general patients because it shows good organization, and I feel relaxed and don't have to be depressed to see patients.

The facility or area for health services is suitable because it is proportionally organized, separated from other segments. The environment is also good. There are trees giving shade. The interior is beautiful, with the smell of aromatic herbs that make me feel relaxed.

The area is beautifully decorated, providing the atmosphere of relaxation, like a private-sector spa.

It is a beautiful place, with good ambience, and service sections are clearly separated.

The hospital arranged its area beautifully, both inside and outside.

In terms of budget adequacy, most tourists see that the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals has sufficient budget. This is because the tourists who have come to use the services more than once have seen that the hospital has renovated the premises and has built new buildings, for which the duration of the construction and decoration was not long. Also, the materials used for decorating the building as well as the interior design are beautiful, making good ambience for service recipients. In addition, the hospital also purchased materials, equipment and tools and amenities that are modern and sufficient in order to provide good health services. So, tourists have the same view that the hospital has been sufficiently and effectively allocating budget for health services with Thai traditional medicine and spas.

Personally, I think the hospital has allocated its budget well because we can see from the building and health service area where the decoration is beautiful and modern, with good atmosphere attracting people to come and use the services.

The hospital seems to have a lot of money for its management because after I knew that the hospital would open its Thai traditional medicine and spa services, it did not take long for the building, service rooms and other things to be completed. This means that the money has been allocated well. It may be due to the hospital's emphasis on such services.

I think the hospital has sufficient budget. I used to use the spa service here and found that the interior is beautiful, and the atmosphere is very good. The equipment is modern. It is so similar to a private spa although it is operated by a state-owned hospital. This shows that the hospital has enough budget to manage this part of its operation.

I do not know how much money the hospital has been given. But I think that the hospital has adequate and appropriate amount of budget because it can be seen from the old building which has been renovated and another new building. Construction was completed swiftly, showing that there is enough budget.



I used to use both the Thai massage and spa services from which I could see the decoration of the building, massage room, and spa room which are beautifully and have good quality furnishings. The spa also has a whirlpool/jacuzzi of which I personally think that the price is quite expensive, but the hospital can supply. So, I think there was enough budget.

In terms of sufficiency of staff, most tourists find that there are enough service personnel here because when using the services, tourists do not have to wait long for being serviced. This is due to the fact that the hospital allocates sufficient staff appropriately to meet the needs of tourists. This has resulted in the effectiveness of the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals.

There are enough staff available. Because of the talk with the Thai masseuse, I have known that the hospital employs both regular staff and local people who were trained how to give Thai massage as temporary employees. This is good, I think. In addition to having enough staff, it also helps to promote the career and income of the villagers.

When I went to use Thai massage service, I got the service immediately, did not wait at all because there were enough Thai masseuses. Most of the times when I go to get a massage, I do not have to queue, or if I have to wait, it will not take long.

I think there are enough service staff which suits the services well. When using the services, I did not have to wait for a long time. The staff are available for providing services all the time.

The number of servicing employees is sufficient. Every time I used the service, I did not need to queue, and it would not take long if I had to wait. This means that the hospital is providing tourists with employees adequately and appropriately for the services.

From my hands-on experience, it was found that the hospital has enough staff seen from all points of services, whether it is reception, screening, or payment. There are always employees available, I do not have to wait long.

As for my previous services, I think the number of staff in the Thai traditional medicine department and spa sector is sufficient.

Regarding sufficiency of materials, equipment, and tools, most of the tourists see that the implementation of policy promoting health tourism in the hospital has sufficient materials, equipment, and tools. In addition, the tourists see that when delivering health services, both for Thai traditional medicine services and spa services, the hospital has sufficiently and appropriately provided materials, equipment, and tools which match the styles of services. There is also the preparation of materials, equipment, and tools before the services begin as well. This way, the service is smooth and fast.

When using Thai massage and herbal compress services, the staff had already prepared the equipment, including massage oil and herbal compress beside the massage bed. So after arriving, I got to be serviced right away without having to wait for the staff to prepare that equipment.

The time when I come to use the services, the staff will normally have prepared the equipment. When being serviced, we never see employees walk around looking for tools or equipment because they would have prepared everything already. So I think the amount of materials or tools is sufficient, and these things are ready to be used for services.

Personally, I think the hospital has prepared enough materials, tools and equipment. For example, when using the spa, I saw full set of equipment, so I could use all the spa services that I wanted.

I used to use the spa service and felt that the equipment was prepared sufficiently for servicing because at that time I did not have to wait to queue for the service. It showed that there was ample material to serve customers and when using the service, I would see that the equipment would already be prepared. This also indicates that employees would prepare things before we get it. I felt the service was smooth and fast.

As for the appropriateness of technology implementation to support operation, the majority of health tourists who have used the services in Thai traditional medicine promoting hospitals see that the implementation of policy promoting health tourism in Thai traditional medicine promoting hospitals employs technology properly in providing services, and it is consistent with the form of the services, making the service recipients or tourists feel that the services are fast and effective.

I think the hospital has adopted the technology properly. Because technology is employed in providing health services, it makes the service faster.

I feel that the hospital follows the current trends well, using new technologies to make its services more efficient.

The hospital has adopted technology which is consistent with the health services it has, for example, for a facial massage in the spa, there is a modern machine for facial massage which looks modern and provides a fast service.

Most of the time, I came to get a Thai massage, so the services I got did not deal with technology. But I know from a TV show that the hospital has modern equipment when providing services. I think it is very okay because some services require technology.

As far as I know, the hospital's spa has a whirlpool/jacuzzi, laser equipment for skin, and electric bed. I feel that the hospital has a modern concept for bringing technology into use. And I think that it is appropriate because some health services need to have equipment and technology to assist. This will make the services more quality.

The hospital is using modern technology to provide services such as, jacuzzi, electric bed, a massage machine for face.

4) In terms of organizational structure, based on interviews with health tourists who have used services in Thai traditional medicine promoting hospitals, it is found that the hospital has an appropriate organizational structure. There is a clear division of responsibilities. It is divided into Thai traditional medicine

and spas under the rehabilitation medicine group. Such structure of the organization makes tourists understand the nature of each division of work and able to access the health services properly.

The hospital's service departments are well and properly divided, and they are consistent with the responsibilities of employees and service recipients.

By looking at the organizational chart of the hospital, it lets me know that the hospital has sections of Thai traditional medicine and spa, which is appropriate. Because of the separation from other segments, the service recipients understand the hospital servicing system more clearly and would not be confused when using the services.

The management of service departments is appropriate because the division of Thai traditional medicine and spa from other departments is clear, letting us know where we can contact them when we need services.

The fact that state-owned hospitals have increased more health services, besides the usual medical care, has significantly confused the service recipients by making them wonder whether such services are health promotion services or medical treatments. So at first, for me, I did not dare to use the services because I thought they were the services for patients. But when I knew that the hospital has a separate spa section. It made me understand the nature of their work more clearly. And I could access or use the service without any confusion about which part of the hospital I should go to. So, I think the organizational structure is proper.

In addition, most tourists see that the hospital has set duties, tasks, and responsibilities for various positions clearly and in line with the organizational structure, as seen from the fact that the hospital has set roles, duties, and responsibilities of the staff according to their knowledge, capabilities, skills, and expertise, which makes the staff understand the characteristics of their work clearly and the services can be provided to service recipients quickly and correctly, without duplication of services. This would, therefore, result in the success of the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals.

I personally think that the hospital assigns the responsibilities of each employee based on their skills, knowledge, and capabilities such as the spa staff who specialize in spa services and the massage therapists who are good at Thai massage. This makes the service accurate and efficient.

Specifying the responsibilities and duties of the staff is quite clear. This makes employees understand what to do based on their own knowledge and capabilities. The work would not be overlapping, which is good for the service recipients who would get the services that are fast and quality.

I think that the hospital has set duties for different positions clearly and appropriately. This can be seen because each employee is aware of what they have to do and the service recipients themselves are not confused when using the services.

The hospital has specified roles and responsibilities according to knowledge, capabilities of employees, for example, Thai masseuses must have good knowledge of massage and be well trained. This ensures that the customer is confident when accessing the service. So, I think that the setting of employees' duties based on knowledge is appropriate and very clear.

5) In terms of staff, from interviews with health tourists who have used services in Thai traditional medicine promoting hospitals, most of them have the opinion that all the staff have knowledge and the ability to provide health services through traditional Thai medicine and spas, which has been recognized by the qualifications of the staff who have been certified professionally. Also, the tourists found that the staff have skills and expertise in providing services. They can service correctly and can answer questions as well as help the service recipients or tourists well.

I think all employees are knowledgeable, with very good abilities because they hold a training certificate, such as a Thai massage therapist who can say that she has been trained and is certified with a certificate.

Thai masseuses here are good and very friendly. I think it is because of their skills after good training.

The staff here are smart and knowledgeable and always providing good services, they also explain about health information. If you have questions, they can always answer. This makes us have more knowledge of health.

The spa staff are very professional, probably because they were well trained. The services can be as good as those of a private spa, but they are actually provided in a public hospital. I am very impressed.

Tourists also have the opinion that the staff have good coordination and good attitudes towards providing health services through Thai traditional medicine and spas according to the policy promoting health tourism. This is evident from the services provided by the coordination and teamwork. This way, services can be delivered quickly, with no mistakes. The staff also are willing to serve tourists, demonstrating good attitudes towards the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals.

From using the service, I could see good cooperation of staff. At the time of service, the staff would welcome and ask some preliminary questions, and then they would tell us to go to the next point where other staff would already be waiting, as if they knew that we were there for the services.

There is a feeling that the staff here are working well as a team. No matter where we go to use the service, each employee will know our health information without having to repeat it many times. This means that employees would share our information to one another.

I think the staff are willing to serve because everyone who served us acted friendly, always smiled, and answered well when we asked.

The staff coordinated well. This helps in serving customers faster and everyone was willing to serve very well.

All employees are smiling, showing a good attitude in the workplace. There is good coordination at each service point.

There is a very good teamwork. Coordination is shown at all service points. All employees are smiling and working hard to treat the people who come to use the services, and this can be seen so clearly.

6) As for communication, according to the data collected and analyzed, it is found that most health tourists who have used services in Thai traditional medicine promoting hospitals before, see that the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals by providing health services with Thai traditional medicine and spas, in terms of communication, is appropriate. The details are as follows.

As for the communication among staff, it is found that the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals has proper communication channels among the staff. Most tourists know that communication channels among workers are carried out via telephone and direct conversation. And they see that the communication among the staff is quick when it comes to forwarding the information of the service recipients or tourists. This makes the staff at each point of service know the information of the service recipients or tourists, without tourists having to repeat it many times.

It's not clear exactly what channels of communication among employees are used. But I think the communication channels they have are okay because all employees know about our health information. They do not ask repeatedly. We do not have to tell the information many times-just tell it at a single service point. Then wherever we go, the employees would know about our health information and can serve quickly and correctly.

The communication channels among employees are appropriate. I see they talk directly and contact one another over the phone, by which I think it is a quick channel, making information received thoroughly and aiding a faster customer service.

Heard the employees communicate with each other over the phone which is considered to be a good channel of communication. It's convenient and fast. Employees do not have to walk to around to transfer our information because they can in an instant know about our health information, and the service is fast.

Not sure what channels the employees are communicating with. But it can be seen clearly that there is a direct conversation and communication on

the phone. Both of which are considered good and appropriate communication channels because they are fast. And this makes employees provide faster services.

As for communication between the staff and the service recipients or tourists, it was found that the tourists know that the hospital has a variety of communication channels which are appropriate and can meet the needs of the tourists. The communication between the staff and the service recipients or tourists include direct communication from the staff, telephone communication, web-based communication, and brochures. The tourists see that the communication channels between the staff and the service recipients are appropriate. By communicating through all channels, visitors can quickly access the hospital's information and news. Also, direct communication from the staff enables visitors to receive information accurately and clearly. If they have any questions, they can ask immediately. For telephone communication, visitors will use this channel when inquiring before using the service or making a reservation for advance health care services. The tourists can see that the latter can help them in communicating with the staff conveniently and quickly. Moreover, communication via the website gives visitors instant access to the hospital's information at all time. It also encourages them to come and use the hospital's health services well. And for communication channel through brochures, it provides health information and the hospital's services. The tourists see that this communication channel can help them get accurate information, and it can be carried and stored.

The hospital has a variety of communication channels, especially the communication channel by which we can communicate with staff directly. This way, we can obtain correct and clear information.

Most of the time, I used the telephone method because it is convenient and fast. And I think that it is a proper channel because we can talk directly with the staff. If we have questions, we can ask and get answers right away.



I think the communication channels between the staff and the service recipient are quite proper, especially via phone calls. Normally, when I want to use Thai massage service here, I will call ahead. So when I arrive for the service, I do not have to wait in a long queue.

As far as I know, the hospital has channels of communication through its staff and the hospital's website, which are considered to be suitable. This is due to the time at the hospital in which we can inquire directly with the staff. Also, in order to get the right information before using the spa, I have visited the hospital's website, which, I thought, could provide information and details about health services well. Visiting the site makes me want to use the services.

Communication between staff and service recipients or tourists is quite suitable. We can communicate directly with the staff or talk to them on the phone. In addition, when using Thai massage. They also provide health information brochures for us. This is good because it gives us information about health care, we do not have to wait for the staff to tell us, and we can bring it back to read at home.

The communication channels between the staff and the service recipients are appropriate and consistent with the needs. The hospital has a variety of communication channels. This allows us to use any channels to communicate with our service providers as needed and at our convenience.

In addition, most tourists also see that the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals has clear and accurate communication. Also, tourists see that the staff can give health information and information related to the hospital's services correctly and make it easy for them to understand, so they do not get confused about the information given.

The information received was clear. The staff explained in detail, and the language used is easy to understand.

I think the information received was accurate and clear. The staff could explain well and help me understand. No confusion.

Clear communication both from employees and brochures because the language is easy to understand and the staff are friendly

After using the Thai massage service in the hospital, I felt that the staff showed clear communication. The information communicated was quite correct making us have the correct understanding of the hospital's health services. And when there were any doubts, the staff would explain them until we understood. They also gave out brochures. This helped us in correctly gaining better understanding of health information.

4.2.2.2 The results of the data analysis on the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals from the staff in Thai traditional medicine promoting hospitals

From the data collected, it was found that for the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, the staff in Thai traditional medicine promoting hospitals have their opinions for each aspect as follows:

1) In terms of policy clarity, from the data collected, it was found that a Thai traditional medicine promoting hospital has been operating according to the policy promoting health tourism and has set the objectives, goals, and indicators of success clearly, and most of the staff see that they can accomplish the tasks successfully according to the indicators set by a Thai traditional medicine promoting hospital.

Policy clarity or clarity of policy means that the policy must not be ambiguous or lack specification of the policy. As for the study of the clarity of policy, it was a search for the question "Does the leader in the implementation of the policy have a clear understanding of the contents and purposes of the policy, and how, and is the policy clear enough for implementation?" From conducting the study of the policy promoting health tourism of Thai traditional medicine promoting hospitals, it was found that under the policy, it is defined as the provision of health service with Thai traditional medicine and spas, with the main objectives, which are to promote the wisdom of Thai traditional medicine and Thai herbs as well as to support tourism alongside holistic health promotion. The goal is to increase the number of service

recipients and occurred income. The program includes activities such as providing health services through Thai traditional medicine, including treatment, promotion, protection, and restoration of health, and spa services are also available.

The operation according to the policy promoting health tourism of the high-ranking bodies has a clear goal which is to promote the wisdom of Thai traditional medicine and Thai herbs. And they want to support tourism alongside the holistic health promotion. The hospital has an important goal, in addition to promoting holistic health, which is to increase the number of service recipients as well as income that occurs.

The policy is clear because the hospital's executives had a meeting in order to understand the origin, importance, purposes, contents and details of the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals.

The staff have a clear understanding of the policy. The policy, itself, is clearly defined in terms of plans for operation. Also, everybody understands the goals clarified by the primary, middle, and senior management teams.

The hospital provides knowledge about how to implement the policy. This enables the staff to understand the ways which have been defined and agreed upon.

As far as I know, the hospital provides health services with Thai traditional medicine in order to promote health with local knowledge/wisdom and promote tourism in the area as well.

By collecting and analyzing the data, it was found that the staff felt that the policy was clear enough for the implementation, and they have good understanding of the contents and objectives of the policy. This is evident from the opinions of most of the interviewees which appear in the same way. Therefore, the researcher sees that policy clarity is an important factor in the success of policy implementation.

In addition, the study found that the programs, action plans, activities, and services of the Thai traditional medicine promoting hospitals through

the provision of health services by Thai traditional medicine and spas were consistent with the central policy and other relevant policies. the policy promoting health tourism of a Thai traditional medicine promoting hospitals is in line with the policy promoting health of the central government and other related agencies, which are the Office of the National Economic and Social Development Board, Ministry of Public Health, Ministry of Tourism and Sports, Tourism Authority of Thailand, and the Department of Thai Traditional and Alternative Medicine. This could be clarified that:

Action plans, programs, activities, and services of Thai traditional medicine promoting hospitals are in line with the National Economic and Social Development Plan No. 12 in Strategy 3, Build economic strength and compete sustainably in the tourism industry of high-income groups and health tourism in Thai traditional medicine promoting hospital providing health services with Thai traditional medicine, in addition to services for general patients, by using local wisdom of Thai herbs, Thai traditional medicine, and alternative medicine combined with modern medicine. At the same time, the application of health care to tourism was carried out. As a result, the competition limit has well increased.

In addition, there is the consistency between the plans, programs, activities, and services of Thai traditional medicine promoting hospitals and the policy promoting health tourism of the Ministry of Tourism and Sports, Strategy 2: Development of tourism products and services. The policy focuses on the development of an individual sector, especially health tourism. Similarly, Thai traditional medicine promoting hospitals develop health tourism products and services by providing comprehensive Thai traditional medical services, along with health promotion, health treatment, and health recovery, and including the sale of Thai herbal products.

For the consistency between the plans, programs, activities, and services of Thai traditional medicine promoting hospitals and the policy of developing Thailand as an international health center by the Ministry of Public Health in Mission 2: Promote and develop the potential of hospitals, establishments, both public and private, to provide health services that meet international standards, with outstanding quality and excellence in order to add value to health services and products. A Thai traditional medicine promoting hospital provides excellent health services by

providing the wisdom of Thai traditional medicine combined with modern technology to create value and impress the service recipients or tourists.

The goals and activities of the hospital are consistent with the National Economic and Social Development Plan by using health tourism as an important mission for economic development and increase of competitiveness.

In order to make the operation correct, clear, and consistent with the government's policies, the hospital has set policies based on the integration of strategic plans of the central government, including the National Economic and Social Development Plan, tourism promotion policy of Ministry of Tourism and Sports, and health promotion policy of the Ministry of Public Health.

In the promotion of health tourism, the hospital has set policies in line with the policies of the Ministry of Tourism and Sports, Ministry of Public Health, Department of Thai Traditional and Alternative Medicine, which focus on the development of health tourism products and services, especially the application of folk medicine and Thai traditional medicine to tourism.

From the executives' announcements, the policy is in line with the central government's policies, so that work can be done in the same way. In practice, there will be no confusion in terms of policies.

So it can be seen that the National Bureau of Economic and Social Development, Ministry of Tourism and Sports, and Ministry of Public Health see the importance of the development of health tourism in the country. In addition, a Thai traditional medicine promoting hospital, as a public agency under the Department of Thai Traditional and Alternative Medicine, Ministry of Public Health, has been operating under the policy of promoting health tourism under the strategy of developing Thailand as an international health center (2017-2026) by being a center for health promoting services and health service center, providing Thai massage, health spa, medical spa, and services in the specialized hospital in Thai traditional medicine.

In addition, the researcher found that Thai traditional medicine promoting hospitals have clearly set indicators of achievement. Indicators play an important role in assessing the achievement of policies. Indicators are designed to measure whether the performance of an individual project or activity achieves its goals. For the determination of indicators under the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, it is found that the hospital has set quantitative indicators. This type of indicator is a measure of the success of the operation by calculating numbers or frequency clearly. This means that the hospital has set its performance indicators from the number of health tourism users and its increased revenue from the use of health tourism services. According to a survey of access to traditional Thai medicine and spa services, a comparison between the year 2014 and 2015, the total number of Thai traditional medicine and spa services users increased, demonstrating the success of policy implementation in which the staff were able to operate according to the set policy which affected the increase in number of service recipients or tourists.

The hospital has set indicators to evaluate the success of policy implementation by considering the number of users increased each year and the increased revenue.

The hospital has clearly measured the success of its operation. This is determined by the increasing number of and income from the service recipients. If the number increased, then the operation would be deemed to be successful.

Each year the hospital determines its indicators of success by seeing the number of recipients which is shown in the annual report. For example, in 2015, the number of service recipients increased compared to the preceding year.

Most of the time, the number of and the income from people who received the services would be considered. If the number or the income increased, we would be successful in implementing or operating according to the policy. For example, in 2015, the number and the income increased, overall.

By defining indicators of achievement, the researcher found that the hospital has clearly defined its indicators of achievement by setting quantitative indicators based on the number of service recipients and revenue increase each year. This is concrete. The researcher believes that abstract indicators should be defined as well, such as the satisfaction survey done by the service users. This will make it possible to measure the success of policy implementation more accurately. It is also useful for understanding the needs of the service recipients, which can help improve the services to meet the criteria of the indicators more.

For the implementation of policy promoting health tourism, it is found that there are clear steps of operation to be taken. Initially, meetings are held to create understanding of the origin, importance, purposes, contents, and details of the policy. Then, projects, activities, and services are defined, in line with the policy. Operational planning will be carried out afterwards in order to control the operation as defined. Also, organizational structure is defined to define the scope of authority, duties, and responsibilities of the people involved. Resource allocation and resource planning are done in line with the projects, activities, or services. Later on, the operation takes place, followed by the evaluation of the operation. During the operation, in addition to the implementation of the planned projects, activities, or services, the hospital also encourages the pursuit of new information, knowledge, or techniques related to the operation. And when the operation of each project or activity is completed, there will be the performance evaluation to see whether it is consistent with the policy.

After the policy has been clarified, the hospital also defined the types of projects and activities and began the implementation. Firstly, a meeting was held to provide the relevant stakeholders with an understanding of the policy objectives and to together help plan the operation as well as provision of persons responsible for each activity. The hospital's activities which are in line with the policy of promoting health tourism are the services provided by Thai traditional medicine, medical spa, and spa for health.

The hospital has followed the policy in a step-by-step manner, from the meeting to clarify policy, operation planning, provision of resources to support operation, operation itself, and monitoring and assessment.

The hospital would first call for a meeting to clarify the policy. Then, everybody would brainstorm the operation plan to determine what to do in order to comply with the defined policy.

Compliance with the policy is the fact that the hospital implements the policy that was set by the government. This will result in the achievement of the goal.

The hospital's policy compliance starts with a meeting to clarify the origin and the details of the policy. Then there would be planning of activities and provisions of relevant staff and resources. And the implementation of the plan would follow. Then, the operation would be evaluated. If this procedure is followed. It is believed that it would make the operation effective and in line with the policy.

According to the conclusion of policy implementation issues, the researcher found that the hospital has taken steps to implement the policy, starting by holding a meeting to make understanding of the policy's details, followed by operation planning, resource sourcing, policy implementation, and the evaluation of the operation, respectively. Also, the implementation of policy is very important. If the operation was not done as the intended purpose, this would lead to the failure of the policy. Therefore, the policy implementation that is carried out step by step will allow the staff to understand details and direction of the operation clearer, not confused, and they can implement the policy correctly, creating efficiency in the operation.

2) External surroundings, as for the study of external factors influencing the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, the researcher conducted a study on the issue of compliance with the economic, social, cultural conditions, and tourists' values, and from data collection and analysis, it can be summarized as follows:



As for compliance with the economic conditions, it is found that the staff have the opinion that the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals is consistent with economic conditions. This is because of the fact that operating according to the policy promoting health tourism has stemmed from one important cause, which was the economic downturn, along with the budget allocation from the central government that is limited. This has affected the operation of the hospital. Therefore, the hospital has to adjust its management and operation strategies. With the trends of health tourism and holistic health care using the wisdom of Thai traditional medicine and the central government having a policy to promote health tourism, the hospital, therefore, provides health services with Thai traditional medicine and spas in order to be in line with the policy promoting health tourism by the central government. In addition, the hospital business is very competitive. This may affect the operation of the hospital. So to enhance the competitiveness, a Thai traditional medicine promoting hospital makes a difference in its services by providing holistic health services, in addition to modern medical services. There are Thai traditional medicine and spa sectors that support health tourism services which add value to the economy as well as increase revenue.

I think that the hospital's implementation of the policy to promote health tourism is consistent with economic conditions because the hospital has provided health services with Thai traditional medicine and spas in order to fix the crisis during the economic downturn.

The year 2000, economic downturn occurred, and the hospital was affected: there were few patients, lots of empty beds. The hospital, then, adjusted its strategy by implementing the health promotion policy in order to provide health services with Thai traditional medicine and spas, and the hospital has been able to increase its income.

Long ago, there was an economic downturn. There were few people using the hospital's services, and the income was low. So, the hospital had to change its ways of operation. At that time, the health trends were growing, and the government was supporting health and tourism policy. The hospital had, then, come up with the concept of providing health services with Thai

traditional medicine and spas for health in order to increase competency in competition and increase the economic value.

At present, competition in hospital businesses is fiercer. This affects the operation of the hospital. The hospital, therefore, has adopted a policy of promoting health tourism so as to make a difference in its services and increase revenue for the hospital.

The implementation of the policy promoting health tourism through Thai traditional medicine and spa services is appropriate and consistent with economic conditions. Since the past economic bubble occurred, the hospital must find ways to increase revenue by providing tourism, Thai traditional medicine and Thai spa services. Now that the hospital is in a more competitive market, the hospital has adopted a holistic health service strategy combined with tourism in order to make a difference, add value to the economy, and make more money.

The provision of health services by Thai traditional medicine has heled the hospital reduce costs because Thai herbal medicine is cheaper than modern drugs, by quite a lot.

The use of spa services in public hospitals is cheaper than that of traditional spas. Also, being treated with Thai traditional medicine, in some cases, medical expenses can be compensated.

For the compliance with social conditions, it was found that the staff have their opinions that the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals is consistent with current social conditions because the proportion of the elderly population increased and the working population has to bear more burden, resulting in stress and diseases easily. With such social conditions, a Thai traditional medicine promoting hospital pays attention to health care and promotes health to prevent diseases and sickness. The hospital also wants people to take care of their health by themselves. Therefore, health services by Thai traditional medicine and spas are created by the use of Thai traditional medicine and local knowledge combined with tourism services. In addition, the staff also see that the implementation of the policy promoting health

tourism in Thai traditional medicine promoting hospitals meets the needs of the community by enhancing the quality of life of people in neighboring communities for betterment. About which, the hospital provides Thai massage training to nearby villagers, to provide additional careers and increase income from health services.

The hospital offers Thai massage training to interested residents. This is a response to the needs of the community for the creation of careers and supplementary income, besides their primary careers.

In the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, I think that it is well consistent with social conditions because for the current social situations, there are more elderly people, and the working people have more stress. Therefore, the fact that the hospital provides health promotion services through Thai traditional medicine and spa services will help meet the social needs well.

As for the current social situation, the society has more elderly population. And the fact that the hospital has adopted a policy to promote health tourism can ensure the operation that is relevant to the needs of the society since the elderly want to maintain their health and longevity, rather than waiting for illness and going to the doctor.

As for the current society, people are more stressed, especially working-class people with heavy workloads. This makes them sick easier. Therefore, the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals is consistent and suitable for current social conditions. The focus is on people turning to holistic health care with the use of Thai traditional medicine.

Regarding the consistency with Thai culture, it was found that the staff opined that the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals is consistent with Thai culture. This is because the hospital provides health services with Thai traditional medicine which is considered to be a medical wisdom from the ancestors. The Thai traditional medicine promotes health by utilizing found local resources to protect and maintain the health

of the people in the community. And the knowledge regarding medical science has been transferred from generation to generation and become a major cultural heritage of the country. And a Thai traditional medicine promoting hospital has applied Thai traditional medicine wisdom to holistic health services such as Thai traditional massage, Thai herbal compress, services from Thai herbs, etc.

The implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals is certainly consistent with Thai culture because the hospital provides Thai traditional medicine services, which are the wisdom and cultural heritage of the Thai people.

The hospital is operating according to the policy promoting health tourism of a Thai traditional medicine promoting hospital which is consistent with Thai culture. It provides services through Thai traditional medicine, such as Thai massage, Thai herbal treatment, and herbal compress. These are the inherited knowledge from the ancestors.

The hospital is providing services with Thai traditional medicine which is the use of local resources to protect and maintain health. This is a culture that has been inherited from the past. Therefore, it is seen that the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals is very consistent with the culture.

For consistency with the values of tourists, it was found that the staff opined that the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals is consistent with the values of tourists. At present, the needs and values of tourists are changing rapidly. Visitors will have the needs and values in tourism that give them the quality experience for life rather than traveling for mere fun or enjoyment. With the popularity of health tourism, tourists are more interested in traveling for and doing more of health tourism activities. Due to the rising demand for health tourism, the hospital has transformed its service offerings from simply treating illnesses to providing care and promoting health holistically. It aims to provide health services with Thai traditional medicine to meet the needs and values of tourists. This has contributed to the success of the implementation of health promotion policy as well.

Nowadays, the values of tourists are changing very much. They do not travel for just fun. They also want to get experiences. And now the health tourism is undeniably a current popular trend, and the hospitals have always supported and promoted this.

Hospital have adopted a policy to promote health tourism through the practice of providing health services through Thai traditional medicine and spas, and this is consistent with the values of tourists. Today's tourists are more interested in health tourism. As for the changing interest, they have changed the service from the treatment of illness alone to providing care and promoting health with Thai traditional medicine, which matches the needs of tourists as well.

As for the values of the people in modern times, they will care for maintaining their health more. This made the hospital add holistic health services with Thai traditional medicine wisdom. As for the operation, in addition to operating in accordance with tourism promotion policy, the hospital also operates in line with the values and health needs of today's people.

To successfully provide health services through Thai traditional medicine, there is the need to take into account the values and needs of tourists. The hospital has been operating in line with the values of today's travelers who care for their health and beauty.

So from the data collection and analysis of data, the researcher concluded that the hospital operates in harmony with the external surroundings in terms of economy, society, culture, and values of tourists. This will contribute to the implementation of the policy because the consideration of external surroundings will enable the hospital to operate in accordance with the current situations, influencing the efficiency of implementing the policy promoting health.

3) As for resources, the researcher studied different issues, including suitability of the place, budget adequacy, sufficiency of staff, sufficiency of materials, equipment and tools, and the implementation of technology to support the operation. The researcher collected and analyzed the data as follows:

As for the suitability of the area for services, the staff in Thai traditional medicine promoting hospitals agreed that the hospital has arranged a place to provide health services with Thai traditional medicine and spas appropriately. In the beginning, the hospital used the existing buildings and facilities, then, it renovated and refurbished them. And it later built its own building. The surrounding environment and landscaping have been made to look natural. The atmosphere is beautiful and shady so that the guests feel relaxed during the services.

The hospital used the existing place which was an existing building and then planned to renovate the premises. Later on, a small working group was formed, consisting of the hospital's directors, deputy directors, deputy medical directors, chief executive officers, and departments' heads who helped set the plan and structure. It took about 1 year to renovate.

The hospital uses existing premises. During the first phase of the service, only the 2<sup>nd</sup> floor of the existing building was used, then the 1<sup>st</sup> floor was renovated, which is now part of the Thai massage and health spa.

The hospital uses and has renovated the existing building. The budget came from the central funds. The board of committee has been set up in order to specify plans and lay out the entire structure of the services. It took about 1 year to prepare. A new building for the spa services was built afterwards.

The hospital uses existing resources, the original building. It planned and carried out the renovation for about 1 year and built a new building with a beautiful atmosphere to make the guests feel relaxed and comfortable while waiting for services.

The hospital used existing buildings and facilities for renovation. The management team of the hospital did all the planning itself. Then they hired outsiders for the design. It took about a year to complete, and the surroundings were decorated for shady and relaxed atmosphere.

The hospital used both outsiders and its staff who jointly designed the building and garden.

The hospital spent about a year preparing for the buildings, starting with the renovation of the former hospital building. Later, a new building was built.

For the adequacy of the budget, it is found that the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals has received allocated budget from the hospital's operating budget, which is the revenue from medical treatment, income from the sale of herbal medicines, and income from other sources such as donation and so on. Also, the staff of the Thai traditional medicine promoting hospital see that the budget allocation for the implementation of the health promotion policy is sufficient. The hospital pays attention to the care and restoration of health by employing Thai traditional medicine. In addition, the hospital's staff also see that the hospital has a good budget management, from budget plan, budget approval, budget use tracking, budget control, to troubleshooting for budget issues as well as conducting evaluations of the hospital's operating budget. However, there may be some problems in the budget disbursement process which may be slow.

The hospital has an allocated budget for Thai traditional medicine and spa services sufficiently. It has a good budgeting system, from budget plan, budget approval, budget use tracking, budget control, and troubleshooting for budget issues as well as an evaluation of the hospital's operating budget. Most of the problems that are encountered are related to budget disbursements that may be delayed, which is because of the government's system. So there are many steps to be followed.

The operation in terms of budget for the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, has sufficient budget allocation because the hospital's executives are very concerned about this issue.

Thai traditional medicine and spa sections are adequately funded by the hospital. Most of the funds come from the income of the hospital such as money from medical treatment, money from the sale of Thai herbs or money from donations.

The implementation of the policy promoting health tourism, both in terms of the Thai traditional medicine and spa services has sufficient budget

allocation from the hospital, not only a budget for location or building improvements but also a budget for the procurement of equipment and tools.

The Thai traditional medicine and spa sections have been allocated budget for health tourism operation according to the government's policy. The allocated budget is sufficient. Part of this is from the hospital's executives who see the importance of this policy.

The budget is sufficiently allocated. Each year, if we want to use our budget, we have to propose projects or submit a budget estimation to the executives for approval.

As for the sufficiency of staff, the results of interviews with staff in Thai traditional medicine promoting hospitals revealed that at first, the implementation of the health promotion policy came from the hospital's management team who were the leaders in building a team to operate the policy by selecting volunteers who had the potential and readiness to participate. Later, there was the establishment of the internal agency which is called the Thai traditional medicine and spa services sector. It was set up under the Physical Medicine and Rehabilitation Group. In terms of management of workforce, it is found that, currently the Thai traditional medicine and spa sector has a total of 18 staff, including 1 Thai traditional medicine doctor, the head, 1 staff for medical records, 2 other Thai traditional medicine doctors and 14 Thai traditional medicine doctor assistants or masseuses. The staff also revealed similarly that the hospital has enough staff, especially in the Thai traditional medicine and spa sector. In the beginning, there were only two Thai masseuses, so the hospital managed its workforce by sourcing people in the community for occupation and income by providing Thai traditional massage courses to nearby villagers in order to increase the number of Thai masseuses to meet the number of service recipients.

In the beginning, the hospital teamed up the personnel at executive level and those who would carry main responsibilities first. It began by recruiting and selecting personnel with interest, potential and readiness to form a team as the group with main responsibilities. When the group for main responsibilities had



been formed, it selected the staff from the volunteers who have knowledge to be part of the team. Then it turned the team into a Thai traditional medicine and spa sector under the Physical Medicine and Rehabilitation Group. At present, there are 18 people who are sufficiently qualified to perform their duties.

In the past, the hospital had 2 Thai masseuses. Later on, its services became more popular with more service recipients. The hospital, therefore, employ more Thai masseuses. Also, the hospital has a policy to promote occupation and income for the villagers already, so it has allowed the villagers who are interested to learn how to give a massage at the hospital. This makes the number of Thai masseuses enough for the service and also makes people earn extra income.

At first, the team consisted of several levels of personnel: executives, and staff. All of the team members must be qualified as follows: willing to work voluntarily, passionate about the work, patient, and sacrificing. When the team was built, it was established as one of the agencies in the hospital. This includes the head of the Physical Medicine and Rehabilitation Group, the head of Thai traditional medicine, Thai traditional medicine doctors, Thai traditional medicine doctor assistants, and medical records staff. At present, there are about 18 personnel who are considered to be sufficiently qualified for the jobs and the needs of the service recipients.

At first a team was set up from volunteers, based on an idea of having different professions in the team, particularly the physical therapy related professions. The team members included physicians, nurses, physiotherapists, nutritionists, pharmacists and staff. Currently, it is now the physical medicine and rehabilitation group which includes physical therapy, Thai traditional medicine, and spa, with 18 personnel. I think this would not be problematic because they can perform tasks sufficiently.

As for the initial operation, in addition to building an operating team from the hospital's personnel, there were two Thai masseuses under the government's Miyazawa Program who would provide massage services in order to give treatment to patients. It appeared that the activity attracted the

attention of people in the community and nearby areas to come and use the service greatly. The hospital, therefore, has expanded its services to accommodate the increasing number of service recipients. Nowadays I think that the number of personnel who provide the service is sufficient. And the hospital has both Thai masseuses who are temporary employees and part-time employees. Some of the employees have participated in the training for Thai massage from the hospital.

There has been a group of workers who are set to work together on a voluntary basis. Now, there is the establishment of Thai traditional medicine and spa sectors, which consist of the head of Thai traditional medicine sector, the highest position, Thai traditional medicine doctors, and Thai traditional medicine doctor assistants, as both temporary employees and part-time employees. The part-time employees are the people in the community who have been trained in massage from the hospital. I think

Currently, the hospital has 18 people involved in Thai traditional medicine and spa. In addition, the hospital also has periodic employees who have been trained in massage courses from the hospital.

As for the sufficiency of materials, equipment, and tools, the results of interviews with staff in Thai traditional medicine promoting hospitals, it is found that the hospital has adequate materials and tools to meet the needs of the service recipients. And the equipment and tools are suitable for the hospital's services. In addition, the materials, equipment and tools are maintained at all times and always ready to be used. However, there are still problems with the cost of the maintenance and repair of electrical system and modern technological equipment such as herbal steam room, jacuzzi, sauna rooms, electric beds, etc. because some devices require specially skilled technicians. When the problem occurs, it requires a skilled technician or a specialized one. And the cost is therefore high. Moreover, there is also the government's procurement procedure which takes a long time for the budget to be disbursed for the cost of fixing those devices.

There is a procurement of supplies and equipment according to the needs of each section. This begins after the servicing team sets what they need and submits the list to the sector's leader. After that, the management department of the hospital will carry out the procurement as required. Currently, the hospital has equipment and tools needed to meet the needs of the service recipients. There is also a good maintenance of the equipment since we always check the conditions of equipment before services.

The hospital has equipment, tools, and materials that can be considered modern, and it takes good care of these supplies. But there may be some problems of maintenance because some devices require a special way of maintenance. For example, when it is damaged, it requires skilled technicians to repair it. Also, the cost is quite high and the disbursement of the budget for maintenance takes a long time too.

For the materials, tools, and equipment, the procurement is done by using the operating budget, budget from health services, and budget from other supporting sources, which varies from case to case. At present, the hospital has enough equipment and tools to meet the needs.

Supply of equipment and supplies are from the hospital's budget. For this, the hospital provides full support because health services by Thai traditional medicine is an important policy of the hospital.

The hospital has equipment, tools, and materials that are modern such as sauna rooms, jacuzzi, massage beds, and skin care equipment. And these things are well taken care of. The problem is that maintenance, if something is damaged, can be costly. For the procurement, the process would begin by proposing the list of things to buy to the head of each sector, in sequence. And the procurement is normally carried out by the hospital's management department, which may have some delays because it has a quite long procedure.

The management of tools and materials get the budget from the hospital for the purchase. The hospital supports the procurement of tools and materials for health services very well because this is an important policy of

the hospital and the number of service recipients are increasing. Therefore, the hospital must be prepared for such demand.

Today, for the appliances, tools, or equipment used in providing health services with Thai traditional medicine and spas, the hospital has purchased them sufficiently and maintained the conditions consistently. In addition, most of the products that are used with the services are produced in the hospital.

The procurement of equipment and supplies uses the operating budget, budget from health services, or budget from other supporting sources, on case by case basis, which is sufficient for the needs of the service recipients. There might be some problems in terms of maintenance if the damage occurs. It takes a long time, when it comes to the government's system, for the budget to be disbursed for maintenance. This makes the services lack continuity.

As for the appropriateness of technology to support operation, the results of the interviews with the hospital's staff in Thai traditional medicine promoting hospitals show that the staff reveal the same opinion that the hospital has adopted technology to support the operation appropriately, in particular, the use of technology in providing services such as jacuzzi, electric beds, facial laser, and so on. Such technology used in providing such services will make the services fast and more efficient. This has resulted in the successful implementation of health tourism promotion policy.

The hospital uses technology to deliver services. This makes the service quick and convenient, and service recipients are satisfied.

In providing services, the hospital has purchased modern equipment such as jacuzzi, electric beds, skin lasers, and facial lasers. These devices are cared for in order to prepare for the services regularly.

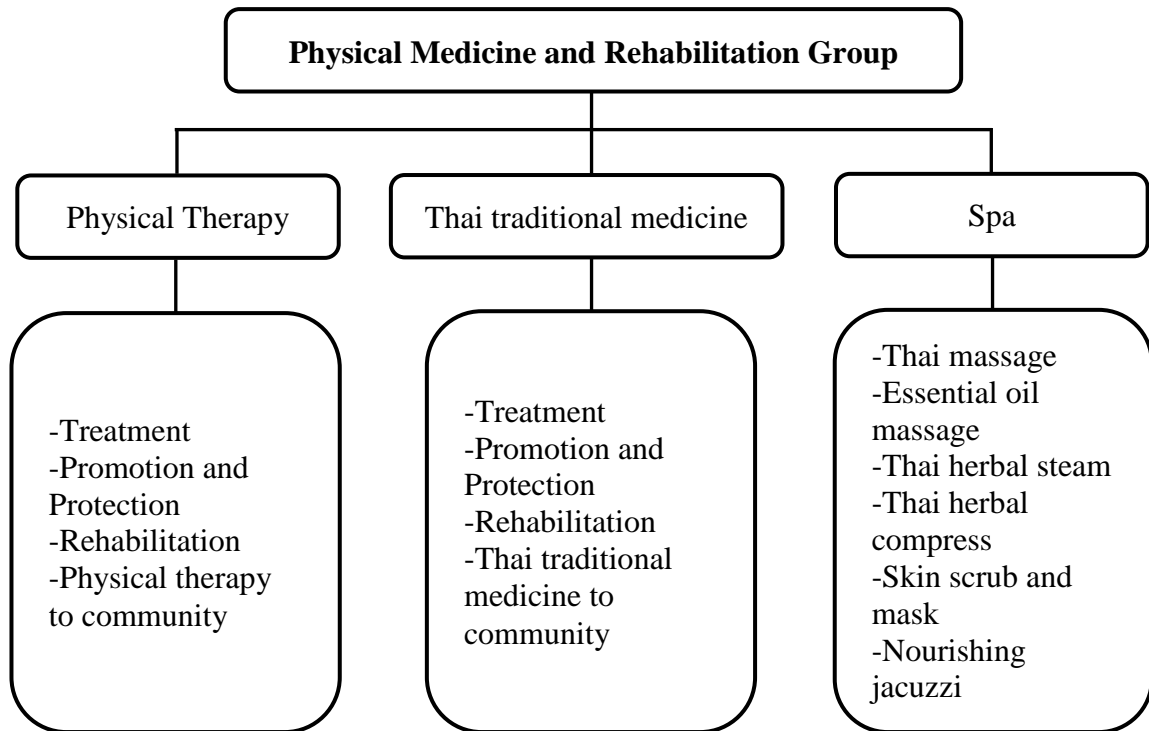
The hospital has a policy to provide health services with the wisdom of Thai traditional medicine combined with modern technology in order to create excellence in service. So the hospital is always searching for modern technology that is suitable for services to increase the efficiency of operation.

The hospital has used technology in supporting its operation appropriately, particularly, the technology that is used in health promotion and spa services.

Today, the hospital is using modern technology which is sufficient and suitable for services such as facial laser machine and jacuzzi baths, and these tools will be checked in terms of their conditions to prepare for services all the time.

4) In terms of organizational structure, the researcher studied the appropriateness of organizational structure and the appropriateness of assignments, responsibilities, and duties. The researcher collected and analyzed the data from interviews with the staff as follows:

As for the appropriateness of organizational structure, it was found that the organizational structure of the Thai traditional medicine promoting hospital is the use of an existing organizational structure, but the hospital just added new missions to comply with the implementation of the policy promoting health tourism. Originally, the hospital had the Physical Medicine and Rehabilitation Group with the mission of providing services regarding physical medicine and rehabilitation as well as physical therapy. Later, when the health promotion policy was introduced in the hospital, it added Thai traditional medicine and spa sector to the group in order to comply with the policy. All stakeholders are involved in the creation of the organizational structure, as shown in Figure 4.1



**Figure 4.1** Organizational Structure of Physical Medicine and Rehabilitation Group

In addition, staff also see that the hospital structured the organizational structure appropriately by structuring it based on the characteristics of jobs, with the head of the Physical Medicine and Rehabilitation Group as the highest commander. The structure consists of head of Thai traditional medicine, Thai traditional medicine doctors, Thai traditional medicine doctor assistants and the medical records staff, respectively. This structure helps every staff clearly understand their roles and responsibilities. And the work will be done in a sequence of steps, with no confusion and duplication of work.

As for appropriateness of setting duties, tasks, and responsibilities, it is found that the Thai traditional medicine promoting hospital has set the scope of authority, responsibilities, and duties clearly. As for Thai traditional medicine sector, its main duty is to maintain, promote, and protect health by using Thai traditional medicine while the spa sector has the main duty of providing health and beauty services, including oil massage, body scrub, body mask, nourishing bath, and Thai massage. When considering the roles and responsibilities of various

positions, it was found that the positions were consistent with organizational structure and the main mission of the group.

The hospital has set up its organizational structure by placing Thai traditional medicine and spa services under the Physical Medicine and Rehabilitation Group in order to comply with the implementation of policy promoting tourism in the hospital.

When health promotion policy was implemented, the hospital set the organizational structure that is consistent with the nature of the operation and assigned tasks and responsibilities based on the organizational structure.

The hospital has set the Thai traditional medicine and spa sectors under the Physical Medicine and Rehabilitation Group which is the hospital's existing unit. The hospital added the Thai traditional medicine and spa sectors in this unit because of the similar nature of work.

The organizational structure has been set suitably because they see the characteristics of responsibilities. So, it is easy to know each individual's duties.

The specification of organizational structure and the roles and responsibilities is very good. This way, the staff can work correctly and clearly. They do not work repeatedly. Also, the hospital has assigned the Thai traditional medicine and spa sector as a separate unit under the Physical Medicine and Rehabilitation group.

The assignment of responsibilities is determined by the organizational structure and the main mission of the agency in order to be consistent and not to produce overlapped duties. The assignment of duties is done according to the organizational structure.

5) In terms of staff, the researcher studied the issues of knowledge and abilities of staff in the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals and the attitudes of staff towards the implementation of health promotion policy. By collecting and analyzing data, it is found that there are interesting points as follows:

From the study of knowledge and ability of staff in the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, it is revealed that the staff have the same view; every staff has knowledge and ability to work properly for their assigned tasks. Staff will be assigned duties and responsibilities based on knowledge and ability that suit the nature of each piece of work. This way, each employee has clear responsibilities and duties according to their knowledge. This produces efficient work. In addition, the hospital also promotes the development of knowledge, skills and competencies of staff by inviting lecturers to educate the hospital's personnel and sending staff to join training, seminars and study tours periodically. The hospital also has the concept of managing its workforce by building and developing personnel from people in the community so as to create careers and income for them. The hospital then employs people in the community who have been trained to be masseuses, and they will be paid a fixed wage.

Each employee will be assigned the duties in line with the primary mission of the agency and organizational structure. The assignment is based on knowledge and ability of the employees. Personnel with different skills will do the jobs that fit them. This makes the assignment of duties meet the knowledge and ability of each person truly.

Every staff has knowledge and ability according to their assigned duties. So work is not duplicated. Personnel with different expertise will be differently assigned the tasks to fit the knowledge and the ability they have.

The hospital has sent personnel to attend training, seminars, and study tours, both domestic and international. There is also the creation and development of personnel from the community in order that they can have good jobs and income. The hospital will employ residents who have been trained in massage courses that meet the standard criteria as an assistant of a Thai medical medicine doctor or a masseuse.

All personnel are knowledgeable and have the skills that are required by professional standards. Like Thai masseuses, they will hold a certificate of massage training according to the standard of the Ministry of Public Health.



The hospital also provides training to increase the knowledge of Thai traditional medicine and holds regular study tours, both domestic and international.

The personnel have knowledge and ability which fit their duties. In addition, the hospital has developed its personnel through a variety of internal and external activities, such as study tours in various locations, both domestic and international. Or sometimes, the hospital will invite the lecturers to give lectures and train the personnel at the hospital.

Employees will be tasked according to their knowledge and ability. For example, the staff who are in the Thai massage sector, he or she must have a certificate of Thai massage. We will not let them interfere with one another's duties. No one works in place of others because everyone understands their roles and the workload they have. As for human resources development, the development of personnel involves both training from the lecturers in the hospital and from those who are from other organizations, field trips as well as seminars. Besides gaining knowledge from these activities, sometimes we can enjoy networking too because we could talk to people who are working in the same industry. This is another way of getting knowledge.

As for the attitudes of the staff towards the implementation of the health tourism promotion policy, it is found that the staff think positively towards the health tourism promotion policy. They see that it is a good policy because it is a policy that promotes tourism in the area along with holistic health promotion. Also, the implementation of policy promoting health tourism in the hospital, besides its benefits for service recipients and tourism, is also beneficial for the hospital to create economic value and increase competitiveness. The hospital will be able to increase the number of health service recipients and revenue as well. In addition, the staff also see that in order to efficiently implement the health tourism promoting policy, the hospital needs to develop its potential in various aspects, especially its personnel who need to be supported in terms of knowledge, ability and motivation to work. This allows the staff to benefit from the implementation of the policy as well.

The policy promoting health tourism is a good policy because it emphasizes the promotion of tourism in a particular area and the promotion of health care. If the policy is implemented in the hospital, the hospital will have more income.

When I know that the hospital has adopted a health tourism policy, I feel that the policy is good and beneficial to both the service recipients and the hospital because the service recipients will receive better health care while the hospital will have more and more people accessing its health services. This way, it can make more money. And this income can be used to develop its personnel.

The implementation of health promotion policy in the hospital will cause an increase in economic value and the ability to compete because of the services that combine tourism and holistic health care.

I think it is good to have a policy to promote health tourism in the hospital. It will encourage the hospital to develop its potential to prepare for the implementation of the policy, especially the development of the personnel's potential.

The implementation of health promotion policy in the hospital will benefit all sectors involved, including service recipients, the hospital, the community, and staff.

6) As for communication, according to the data collection and analysis, the staff see that the hospital has a wide range of communication channels, which are appropriate, in order to reach the target recipients thoroughly, accurately and clearly. The researcher can summarize important points regarding communication as follows:

As for the communication between staff, it has been found that the hospital has appropriate means of communication between staff. There is both formal and informal communication. In order to communicate accurately and clearly, the hospital uses communication media such as meetings, announcements, memos, and surveys of personnel. At the beginning after the working group has been set up, there would be meetings frequently in order to build knowledge and understanding of

implementation of the health promotion policy. And when things were more ready, the number of meetings was less because all staff have understood the process more. However, there are still other ways of communicating such as announcements, circulating memos within the organization, etc., so that the staff can get information, including orders to be used in the implementation of health promotion policy. In addition, in case of urgency, when the hospital needs to clarify information or rules, the hospital will use informal means such as communication through LINE and communicate over the phone so that communication is fast and easily passed on. All in all, the staff see that the hospital has the right communication channels between staff. And such communication channels can provide accurate and clear information so that the staff can efficiently implement the policy promoting health tourism.

The hospital uses both formal and informal communication channels such as meetings, announcements, memos, conversations, and surveys of personnel.

The hospital has both formal and informal communication. At the beginning of the team building, meetings will be held frequently in order to create knowledge and understanding of the operation. When employees understand their roles and the process well, the number of meetings will be less. But the hospital will use other methods of communication to inform information such as circulating letters and announcements. In addition, in urgent cases, it will use communicate through LINE or talk over telephone.

As for the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, there is communication between the staff themselves, which is both formal and informal. Each time, communication is correct and can be understood clearly.

Communication in the organization makes staff understand and can work according to the policy promoting health correctly, without confusion because there is a way of communication that is good and proper.

Most of the time, our department can communicate with each other easily because there are many ways to communicate such as meetings, informal meetings, telephone contact, and sending messages through LINE. The communication makes us understand the operation and work consistently.

This results in teamwork and more cooperation, and the policy promoting health tourism is properly implemented.

For communication between staff and service recipients, it was found that the staff have employed appropriate communication channels and communicate to make sure that the service recipients received the information completely, correctly, and clearly. The hospital communicates information to recipients through the hospital's public relations channels such as brochures, websites, and so on. On the other hand, the communication between the staff and the service recipients, there are both person-to-person communications and communications without humans. In order to clarify, in communication, service recipients can communicate directly with the staff in order to hear the explanation of information, introduction to health services, and answers to questions of service recipients as well as to make appointments for health services. The communication channels include telephone communication and face-to-face communication. With the communication methods, the information provided by the staff is accurate, complete and clear because the information is received directly. And when service recipients have questions, they can ask immediately and get the answers right away. This makes the communication efficient. In addition, the communication between the staff and the service recipients also uses passive communication, such as health information leaflets and newsletters for informing the hospital's information. Such communication will enable the recipients to obtain accurate and clear information as the information is pre-verified before the leaflets or the news can be released. Also, this type of communication can reach a wide range of groups of recipients. Therefore, the staff agree that the communication between the staff and the service recipients is appropriate, and the information can be accurately and clearly given, resulting in the implementation of health promotion policy being more effective.

For communication between staff and service recipients, most of the time, it will be direct conversation, such as when the service recipients call and ask information about the services or to make an appointment for services or book queue for services. I think that by using this method, the information is

delivered to the service recipients quickly and accurately, because the staff provides the information by themselves.

There are both person-to-person communication in which the staff communicates directly with the recipient and document-based communication such as leaflets and newsletters. Both of which are appropriate and can reach the service recipients widely.

As for the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, it has proper communication between staff and the recipients because it uses a variety of channels. As for the hospital, it will promote its operation through brochures or its website. For our department, we will focus on talking directly with the recipients in order to give them accurate and clear information.

Communication affects the success of the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals. We have communication between our staff and customers in many ways, both direct communication over the phone and face-to-face. There is also communication through brochures to introduce health services and newsletters for informing information. I think all the communication methods are good.

So from the collection and analysis of data, the researcher concluded that the hospital uses a variety of communication channels which are appropriate. This will be beneficial for policy implementation because communication in both formal and informal channels can contribute to the success of the work and can build on engagement and collaboration as well as teamwork.

7) Other factors, by collecting and analyzing data, it was found that for the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, besides the aforementioned factors, the researcher found that there are other factors that affect the success of the operation which are:

The organization's management team is an important factor in the success of the implementation of health promotion policy. If the management team has leadership and broad vision, it will contribute to the successful

implementation of the policy. For the arrangement of health services and spa through Thai traditional medicine in Thai traditional medicine promoting hospitals, it is based on the concept from the hospital's management team who are the leaders in team building. The team stemmed from the selection of volunteers who have the potential and were ready to work. The management's idea of providing such services is due to the importance of maintaining health by using both Thai traditional medicine and modern medicine. Also, they see the opportunities in health tourism which is gaining popularity. This popularity will increase the number of health service recipients, affecting the hospital's income and the distribution of money towards the community and tourist attractions. As for this, the staff see that the management team's concept is modern and keeping up with the current situations, and this can enhance the implementation of the policy promoting health tourism of a Thai traditional medicine promoting hospital.

I think the executives largely contribute to the success of the implementation of the health promotion policy because the executives have a broad vision and always keep up with the current situations. This will make the operation successful and meet the goals.

The key factor that influences efficient implementation of health promotion policy in the hospital are the organization's leaders because they are visionary leaders who can push the policy to succeed.

At the beginning, the hospital's concept of having integrated health services was based on the ideas of the hospital's management team who believe that people, nowadays, are paying more attention to health care, and the government is promoting health tourism. From this view, the management team saw the opportunity to generate revenue for the hospital. So the integrated health care program occurred. The management team was the initiator of building an operating team by selecting volunteers who have potential and ready to work as well.

If there is no management team to support the services of Thai traditional medicine, the implementation of the health tourism promotion policy will not be successful because the policies, programs and activities are all based on the concepts and ideas of the management team.

I just know that Thai traditional medicine and the spa were based on the ideas of the hospital's management team who focus on holistic health services. So integrated health services occurred to make money for the hospital. It also helps to distribute income to nearby villagers. The concepts or ideas of the management team have resulted in the successful implementation of health promotion policy.

In addition, staff also see that the management team has strong leadership skills because they could create new things in the organization which benefit the organization and staff. The hospital's executives were the initiators of the implementation of the policy of promoting health tourism in the hospital. They were and are also an important leading team in integrating health care project. They also made staff understand the implementation of health tourism promotion policy to create acceptance and persuaded them to work together. So, they, inevitably, created a volunteer working team. In addition, staff have been involved in organizational structure management and commented on the work. This makes the staff or workers proud of their operation and show the commitment to the organization. These are all good things coming from having good leaders.

The hospital's leaders have leadership. They were the first to adopt a policy to promote health tourism in the hospital, and they encouraged employees to work together. It was not mandatory whether the employees would join, but it was a voluntary act. This is why all employees agree with and respect them.

I think the hospital's management team have good leadership because of their understanding of the staff. They allow the staff to participate in organizational structure management and give them the opportunity to comment on the work.

The hospital leaders have leadership skills. They can motivate employees to work with them. They also give employees the freedom to work and comment or show ideas. This makes the staff proud of the operation and love the organization more.

The hospital's executives are a major force in the implementation of the integrated health care program. They are the center of the people to link and work together. I think the management team has good leadership.

Based on the analysis of the data of tourists and staff in the Thai traditional medicine promoting hospital, it can be seen that for the implementation of health promotion policy in the practice of Thai traditional medicine promoting hospitals, tourists and staff have similar opinions in terms of the clarity of the policy. As for implementing health promotion policies in the Thai traditional medicine promoting hospital, there are clearly defined plans, projects and activities which include the provision of health services by Thai traditional medicine and a spa. In addition, under the services, the hospital has also set objectives, goals, and concrete operational procedures. At the same time, health tourists in the hospital have also received information on the implementation of policies through the media. This demonstrates the efficiency of good policy implementation.

In terms of external environments, both tourists and staff in the hospital see that the implementation is consistent with the economy, social condition, cultural aspect, and values. The staff agree that the implementation of policies in the practice by providing Thai traditional medicine and spa services can generate income for the hospital. At the same time, tourists can afford to use the services because the prices are reasonable. As for compliance with social condition, tourists see that Thailand is in the age of the elderly. Therefore, Thai traditional medicine and spa services must respond to changes that are occurring. The services can also reduce the social gap because everyone can access the services equally. Not only they are the staff who have the same opinion as that of the tourists, different perspectives can also be seen. Some staff see that the implementation of health promotion policy can improve the quality of life of people in the communities nearby because there is a distribution of income to the communities. For the consistency with Thai culture, both tourists and staff have the same opinion that the implementation of health tourism promotion policy in the hospital is the act of upgrading Thai wisdoms by using them in maintaining and restoring health. It also helps preserve the cultural heritage of the nation. In addition, the implementation is also consistent with the values of tourists.



Regarding which, both tourists and staff have the same view that the trend in health care and health tourism is gaining popularity for the people of today. Also, the health care stereotype is changing from just treatment after sickness to health care and health promotion. People nowadays, moreover, are interested health care with Thai traditional medicine and alternative medicine.

In terms of resources which include budget, adequacy of the staff, suitability of facilities, sufficiency of materials, equipment, and tools, and appropriate use of technology in the services, tourists and staff in the hospital have a view regarding the budget that the hospital was adequately and appropriately allocated a budget for health services by Thai traditional medicine and spa because the management team see the importance of the policy. At the same time, budget allocation and usage makes the tourists feel that the hospital has adequate budget for policy implementation or operation according to the policy. As for the adequacy of staff, the staff see that the hospital has sufficient staff, both long-term and temporary ones. And tourists have the same opinion that the hospital has enough staff to meet their needs. In addition, regarding suitability of the location, the staff see that the hospital has been improving its servicing area and decorating the environment to be shadier and perfect for services. For this, the tourists also have the same opinion, and they also see that the separation of hospital services between general patients and tourists create a good atmosphere for those accessing the services. For adequacy of materials, equipment, and tools, the staff view that the hospital had a sufficient supplies for services. However, there might be delays in the procurement process of the government, and the cost of maintenance is quite high. At the same time, tourists believe that the materials, equipment, and tools are sufficient and appropriate which indicates that the hospital can manage in terms of materials, equipment, and tools to meet the needs of tourists although there are some problems, but this does not affect the services for tourists. For the appropriateness of technology used in the services, both tourists and staff have the same opinion that the hospital has been using new technologies and innovations in its services appropriately and in accordance with the needs and types of services.

As for organizational structure, tourists have the opinion that the fact that the hospital has been divided its services into Thai traditional medicine

department and spa department has made it easy for them to access the services. Meanwhile, the staff see that when health promotion policy was about to be implemented through the provision of Thai traditional medicine and spas, the hospital has set responsible departments, which are the Thai traditional medicine department and the spa departments under the Rehabilitation Medicine Group. The division of the two departments will be helpful for the staff to understand their roles and responsibilities and make it easy for the services recipients or tourists to access the services.

With regard to staff, tourists have the opinion that the hospital has competent and knowledgeable staff and have a good attitude towards the management of Thai traditional medicine and spa services. At the same time, the staff noted that the hospital has continually supported its staff in developing their skills, knowledge, and abilities by providing them with training courses with more knowledge, seminars, and field trips.

In terms of communication, tourists have the opinion that communication is proper, well-defined, and has channels for easy access. They can also interact directly with the staff through telephone, websites, and publications. For the staff, they have the opinion that is not very different from that of the tourists. They see that the hospital has managed clear, accurate, and complete communication. For the communication between the staff, there are meetings, announcements, memorandum, discussions, and surveys in some cases. Meanwhile, for communication with tourists, the staff use both direct talks, telephone communication, and other publications or online media. These acts of communication indicate quality management for both the staff and the service recipients.

In addition, hospital staff give further opinion that for the success of the implementation of health promotion policy towards practice in Thai traditional medicine promoting hospitals, another important factor besides the clarity of the policy, external environment, organizational structure, resources, staff, and communication, there are also factors related to the corporate management team which are one of the key parts to success.

### 4.3 The Results of Data Analysis According to Objective 2 to Evaluate the Efficiency and Effectiveness of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals

#### 4.3.1 Quantitative Research Methodology

4.3.1.1 The results of the analysis of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals involved statistics, which are mean and S.D. The results are presented in the form of a table with details explained. As for the mean, it can be interpreted as follow:

Range of scores 4.21-5.00	indicates	the highest level
Range of scores 3.41-4.20	indicates	high level
Range of scores 2.61-3.40	indicates	mediocre level
Range of scores 1.81-2.60	indicates	low level
Range of scores 1.00-1.80	indicates	the lowest level

**Table 4.16** Indicating Mean, S.D., and Level of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Physical Flow Management

The assessment of the efficiency of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. Provision of parking spaces in the hospital	3.47	0.52	High	9
2. Provision of pathways to the health service building	3.48	0.52	High	8
3. Provision of a reception and registration area	3.53	0.51	High	7

**Table 4.16** (Continued)

The assessment of the efficiency of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
4. Provision of a waiting area	2.99	0.25	Mediocre	11
5. Provision of a scanning area	4.01	0.26	High	2
6. Provision of changing rooms	3.89	0.37	High	4
7. Provision of a health service area	4.18	0.39	High	1
8. Provision of shower rooms and toilets	3.89	0.38	High	4
9. Provision of a payment area	3.69	0.47	High	6
10. Provision of an area for giving advice and guidance related to health	3.96	0.32	High	3
11. Provision of an area for resting	3.21	0.46	Mediocre	10
<b>Total</b>	<b>3.66</b>	<b>0.21</b>	<b>High</b>	

According to Table 4.16, for the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to physical flow management, the results of data analysis, overall, show that tourists' assessment is at a high level ( $\bar{X} = 3.76$ , S.D = 0.33). When each item is considered, it shows that for Provision of parking spaces in the hospital, tourists' assessment is at a high level ( $\bar{X} = 3.47$ , S.D 0.52), for Provision of pathways to the health service building, tourists' assessment is at a high level ( $\bar{X} = 3.48$ , S.D 0.52), for Provision of a reception and registration area, tourists' assessment is at a high level ( $\bar{X} = 3.53$ , S.D 0.51), for Provision of a waiting area, tourists' assessment is at a mediocre level ( $\bar{X} = 2.99$ , S.D 0.25), for Provision of a scanning area, tourists' assessment is at a high level ( $\bar{X} = 4.01$ , S.D 0.26), for Provision of changing rooms, tourists' assessment is at a high level ( $\bar{X} = 3.89$ , S.D 0.37), for Provision of a health service area, tourists' assessment is at a high level ( $\bar{X} = 4.18$ , S.D 0.39), for Provision of shower rooms and toilets, tourists' assessment is at a high level ( $\bar{X} = 3.89$ , S.D 0.38), for Provision of a payment

area, tourists' assessment is at a high level ( $\bar{X}$  =3.69, S.D 0.47), for Provision of an area for giving advice and guidance related to health, tourists' assessment is at a high level ( $\bar{X}$  =3.96, S.D 0.32), and for Provision of an area for resting, tourists' assessment is at a mediocre level ( $\bar{X}$  =3.21, S.D 0.46).

From the data analysis above, it can be seen that regarding the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to physical flow management, tourists' assessment is at a high level in terms of: 1) Provision of a health service area 2) Provision of a scanning area 3) Provision of an area for giving advice and guidance related to health 4) Provision of changing rooms 5) Provision of shower rooms and toilets 6) Provision of a payment area 7) Provision of a reception and registration area 8) Provision of pathways to the health service building, and 9) Provision of parking spaces in the hospital. Besides, for 1) Provision of an area for resting and 2) Provision of a waiting area, tourists' assessment is at a mediocre level.

**Table 4.17** Indicating Mean, S.D., and Level of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Information Flow Management

The assessment of the efficiency of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. Provision of directional signs towards the health service building	3.07	0.27	Mediocre	9
2. Provision of a sign indicating the service area in the health service building	4.00	0.27	High	3
3. Recommendation of products and services in the reception and registration area	4.18	0.38	High	1

**Table 4.17** (Continued)

The assessment of the efficiency of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
4. Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area	3.31	0.49	Mediocre	5
5. Storing and forwarding health information of the service recipients or tourists in the screening area	3.29	0.48	Mediocre	6
6. Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area	3.23	0.45	Mediocre	7
7. Storing and forwarding payment information in the payment area	3.11	0.36	Mediocre	8
8. Provision of advice related to health in the area for health advice and guidance	4.10	0.30	High	2
9. Provision of health information and knowledge in the areas for resting	3.37	0.48	Mediocre	4
<b>Total</b>	<b>3.52</b>	<b>0.19</b>	<b>High</b>	

According to Table 4.17, for the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to information flow management, the results of data analysis, overall, show that tourists' assessment is at a high level ( $\bar{X} = 3.52$ , S.D = 0.19). When each item is considered, it shows that for Provision of directional signs towards the health service building, tourists' assessment

is at a mediocre level ( $\bar{X} = 3.07$ , S.D = 0.27), for Provision of a sign indicating the service area in the health service building, tourists' assessment is at a high level ( $\bar{X} = 4.00$ , S.D = 0.27), for Recommendation of products and services in the reception and registration area, tourists' assessment is at a high level ( $\bar{X} = 4.18$ , S.D = 0.38), for Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area, tourists' assessment is at a mediocre level ( $\bar{X} = 3.31$ , S.D = 0.49), for Storing and forwarding health information of the service recipients or tourists in the screening area, tourists' assessment is at a mediocre level ( $\bar{X} = 3.29$ , S.D = 0.48), for Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area, tourists' assessment is at a mediocre level ( $\bar{X} = 3.23$ , S.D = 0.45), for Storing and forwarding payment information in the payment area, tourists' assessment is at a mediocre level ( $\bar{X} = 3.11$ , S.D = 0.36), for Provision of advice related to health in the area for health advice and guidance, tourists' assessment is at a high level ( $\bar{X} = 4.10$ , S.D = 0.30), and for Provision of health information and knowledge in the areas for resting, tourists' assessment is at a mediocre level ( $\bar{X} = 3.37$ , S.D = 0.48).

From the data analysis above, it can be seen that for the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to information flow management, tourists' assessment is at a high level in terms of 1) Recommendation of products and services in the reception and registration area, 2) Provision of advice related to health in the area for health advice and guidance, 3) Provision of a sign indicating the service area in the health service building. Besides, for 1) Provision of health information and knowledge in the areas for resting, 2) Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area, 3) Storing and forwarding health information of the service recipients or tourists in the screening area, 4) Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area, 5) Storing and forwarding payment information in the payment area, and 6) Provision of directional signs towards the health service building, tourists' assessment is at a mediocre level.

**Table 4.18** Indicating Mean, S.D., and Level of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Financial Flow Management

The assessment of the efficiency of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. Preparation of equipment and tools for receiving payments	3.91	0.32	High	4
2. Payment channel management	3.30	0.48	Mediocre	5
3. Informing the details of service fees and privileges to the service recipients or tourists	4.09	0.28	High	2
4. Process of receiving payment	3.96	0.32	High	3
5. Issuing a document or proof of payment	4.13	0.34	High	1
<b>Total</b>	<b>3.88</b>	<b>0.18</b>	<b>High</b>	

According to Table 4.18, for the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to financial flow management, the results of data analysis, overall, show that tourists' assessment is at a high level ( $\bar{X} = 3.88$ , S.D = 0.18). When each item is considered, it shows that for Preparation of equipment and tools for receiving payments, tourists' assessment is at a high level ( $\bar{X} = 3.91$ , S.D = 0.32), for Payment channel management, tourists' assessment is at a mediocre level ( $\bar{X} = 3.30$ , S.D = 0.48), for Informing the details of service fees and privileges to the service recipients or tourists, tourists' assessment is at a high level ( $\bar{X} = 4.09$ , S.D = 0.28), for Process of receiving payment, tourists' assessment is at a high level ( $\bar{X} = 3.96$ , S.D = 0.32), and for Issuing a document or proof of payment, tourists' assessment is at a high level ( $\bar{X} = 4.13$ , S.D = 0.34).



From the data analysis above, it can be seen that regarding the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to financial flow management, tourists' assessment is at a high level in terms of 1) Issuing a document or proof of payment, 2) Informing the details of service fees and privileges to the service recipients or tourists, 3) Process of receiving payment, and 4) Preparation of equipment and tools for receiving payments. Besides, for Payment channel management, tourists' assessment is at a mediocre level.

**Table 4.19** Indicating Mean, S.D., and Level of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Service Process Flow Management

The assessment of the efficiency of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. The reception of the service recipients or tourists	3.52	0.53	High	5
2. Screening of the service recipients or tourists	4.12	0.33	High	2
3. Preparation of the service recipients or tourists before the health service is given	4.03	0.28	High	3
4. Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists	4.02	0.26	High	4
5. Health services for the service recipients or tourists	<b>4.18</b>	<b>0.38</b>	<b>High</b>	<b>1</b>
6. The services before the service recipients or tourists leave	3.30	0.48	Mediocre	6
<b>Total</b>	<b>3.86</b>	<b>0.21</b>	<b>High</b>	

According to Table 4.19, for the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to service process flow management, the results of data analysis, overall, show that tourists' assessment is at a high level ( $\bar{X} = 3.86$ , S.D = 0.21). When each item is considered, it shows that for The reception of the service recipients or tourists, tourists' assessment is at a high level ( $\bar{X} = 3.52$ , S.D = 0.53), for Screening of the service recipients or tourists, tourists' assessment is at a high level ( $\bar{X} = 4.12$ , S.D = 0.33), for Preparation of the service recipients or tourists before the health service is given, tourists' assessment is at a high level ( $\bar{X} = 4.03$ , S.D = 0.28), for Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists, tourists' assessment is at a high level ( $\bar{X} = 4.02$ , S.D = 0.26), for Health services for the service recipients or tourists, tourists' assessment is at a high level ( $\bar{X} = 4.18$ , S.D = 0.38), and for The services before the service recipients or tourists leave, tourists' assessment is at a mediocre level ( $\bar{X} = 3.30$ , S.D = 0.48).

From the data analysis above, it can be seen that regarding the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to service process flow management, tourists' assessment is at a high level in terms of 1) Health services for the service recipients or tourists, 2) Screening of the service recipients or tourists, 3) Preparation of the service recipients or tourists before the health service is given, 4) Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists, and 5) The reception of the service recipients or tourists. Besides, for the services before the service recipients or tourists leave, tourists' assessment is at a mediocre level.

**Table 4.20** Indicating Mean, S.D., and Level of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Service Quality

The assessment of the efficiency of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. Convenience when being serviced	4.00	0.32	High	3
2. Innovation and technology in the service	3.90	0.36	High	4
3. Accuracy and completeness of the service	3.64	0.48	High	7
4. Reliability of the service	3.68	0.48	High	6
5. Responsiveness to the needs of the service recipients	3.56	0.50	High	8
6. Knowledge and capabilities in the service	4.16	0.36	High	2
7. Safety in providing the service	4.19	0.39	High	1
8. The speed of the service	3.35	0.48	Mediocre	9
9. Attentiveness when providing the service	3.83	0.43	High	5
<b>Total</b>	<b>3.81</b>	<b>0.23</b>	<b>High</b>	

According to Table 4.20, for the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to service quality, the results of data analysis, overall, show that tourists' assessment is at a high level ( $\bar{X} = 3.81$ , S.D = 0.23). When each item is considered, it shows that for Convenience when being serviced, tourists' assessment is at a high level ( $\bar{X} = 4.00$ , S.D = 0.32), for

Innovation and technology in the service, tourists' assessment is at a high level ( $\bar{X} = 3.90$ , S.D = 0.36), for Accuracy and completeness of the service, tourists' assessment is at a high level ( $\bar{X} = 3.64$ , S.D = 0.48), for Reliability of the service, tourists' assessment is at a high level ( $\bar{X} = 3.68$ , S.D = 0.48), for Responsiveness to the needs of the service recipients, tourists' assessment is at a high level ( $\bar{X} = 3.35$ , S.D = 0.48), for Knowledge and capabilities in the service, tourists' assessment is at a high level ( $\bar{X} = 4.16$ , S.D = 0.36), for Safety in providing the service, tourists' assessment is at a high level ( $\bar{X} = 4.19$ , S.D = 0.39), for The speed of the service, tourists' assessment is at a high level ( $\bar{X} = 3.56$ , S.D = 0.50), and for Attentiveness when providing the service, tourists' assessment is at a high level ( $\bar{X} = 3.83$ , S.D = 0.43).

From the data analysis above, it can be seen that regarding the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to service quality, tourists' assessment is at a high level in terms of 1) Safety in providing the service, 2) Knowledge and capabilities in the service, 3) Convenience when being serviced, 4) Innovation and technology in the service, 5) Attentiveness when providing the service, 6) Reliability of the service, 7) Accuracy and completeness of the service, and 8) Responsiveness to the needs of the service recipients. Besides, for the speed of the service, tourists' assessment is at a mediocre level.

**Table 4.21** Indicating Mean, S.D., and Level of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Different Aspects

The assessment of the efficiency of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
In terms of physical flow management	3.66	0.21	High	4
In terms of information flow management	3.52	0.19	High	5

**Table 4.21** (Continued)

<b>The assessment of the efficiency of the process of logistics management</b>	n = 400		Level	Rank
	$\bar{X}$	S.D		
In terms of financial flow management	3.88	0.18	High	1
In terms of service process flow management	3.86	0.21	High	2
In terms of service quality	3.81	0.23	High	3
<b>Total</b>	<b>3.72</b>	<b>0.15</b>	<b>High</b>	

According to Table 4.21, for the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, overall, it is found that tourists' assessment is at a high level ( $\bar{X} = 3.72$ , S.D = 0.15). When each aspect is considered, in terms of physical flow management, tourists' assessment is at a high level ( $\bar{X} = 3.66$ , S.D = 0.21), in terms of information flow management, tourists' assessment is at a high level ( $\bar{X} = 3.52$ , S.D = 0.19), in terms of financial flow management, tourists' assessment is at a high level ( $\bar{X} = 3.88$ , S.D = 0.18), in terms of service process flow management, tourists' assessment is at a high level ( $\bar{X} = 3.86$ , S.D = 0.21), and in terms of service quality, tourists' assessment is at a high level ( $\bar{X} = 3.81$ , S.D = 0.23).

From the data analysis above, it can be seen that the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to different aspects, tourists' assessment is at a high level in terms of 1) in terms of financial flow management, 2) in terms of service process flow management, 3) in terms of service quality, 4) in terms of physical flow management, and 5) in terms of information flow management, respectively.

4.3.1.2 The results of the analysis of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals involved statistics which are

mean and S.D. The results are presented in a form of table, with details explained. As for the mean, it can be interpreted as follow:

Range of scores 4.21-5.00 indicates the highest level

Range of scores 3.41-4.20 indicates high level

Range of scores 2.61-3.40 indicates mediocre level

Range of scores 1.81-2.60 indicates low level

Range of scores 1.00-1.80 indicates the lowest level

**Table 4.22** Indicating Mean, S.D., and Level of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Physical Flow Management

The assessment of the effectiveness of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. Provision of parking spaces in the hospital	3.45	0.54	High	9
2. Provision of pathways to the health service building	3.50	0.50	High	8
3. Provision of a reception and registration area	3.59	0.50	High	7
4. Provision of a waiting area	3.00	0.25	Mediocre	11
5. Provision of a scanning area	4.01	0.26	High	2
6. Provision of changing rooms	3.89	0.36	High	5
7. Provision of a health service area	4.19	0.39	High	1
8. Provision of shower rooms and toilets	3.91	0.36	High	4
9. Provision of a payment area	3.73	0.46	High	6
10. Provision of an area for giving advice and guidance related to health	3.96	0.31	High	3
11. Provision of an area for resting	3.18	0.45	Mediocre	10
<b>Total</b>	<b>3.67</b>	<b>0.20</b>	<b>High</b>	

According to Table 4.22, for the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to physical flow management, the results of data analysis, overall, show that tourists' assessment is at a high level ( $\bar{X} = 3.76$ , S.D = 0.20). When each item is considered, it shows that for Provision of parking spaces in the hospital, tourists' assessment is at a high level ( $\bar{X} = 3.45$ , S.D 0.54), for Provision of pathways to the health service building, tourists' assessment is at a high level ( $\bar{X} = 3.50$ , S.D 0.50), for Provision of a reception and registration area, tourists' assessment is at a high level ( $\bar{X} = 3.59$ , S.D 0.50), for Provision of a waiting area tourists' assessment is at a mediocre level ( $\bar{X} = 3.00$ , S.D 0.25), for Provision of a scanning area, tourists' assessment is at a high level ( $\bar{X} = 4.01$ , S.D 0.26), for Provision of changing rooms, tourists' assessment is at a high level ( $\bar{X} = 3.89$ , S.D 0.36), for Provision of a health service area, tourists' assessment is at a high level ( $\bar{X} = 4.19$ , S.D 0.39), for Provision of shower rooms and toilets, tourists' assessment is at a high level ( $\bar{X} = 3.91$ , S.D 0.36), for Provision of a payment area, tourists' assessment is at a high level ( $\bar{X} = 3.73$ , S.D 0.46), for Provision of an area for giving advice and guidance related to health, tourists' assessment is at a high level ( $\bar{X} = 3.96$ , S.D 0.31), and for Provision of an area for resting, tourists' assessment is at a mediocre level ( $\bar{X} = 3.18$ , S.D 0.45).

From the data analysis above, it can be seen that regarding the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospital, categorized according to physical flow management, tourists' assessment is at a high level in terms of 1) Provision of a health service area, Provision of a scanning area, 2) Provision of an area for giving advice and guidance related to health, 3) Provision of changing rooms, 4) Provision of shower rooms and toilets, 5) Provision of a payment area, 6) Provision of a reception and registration area, 7) Provision of pathways to the health service building, and 8) Provision of parking spaces in the hospital. Besides, for 1) Provision of an area for resting and 2) Provision of a waiting area, tourists' assessment is at a mediocre level.

**Table 4.23** Indicating Mean, S.D., and Level of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Information Flow Management

The assessment of the effectiveness of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. Provision of directional signs towards the health service building	2.96	0.35	Mediocre	9
2. Provision of a sign indicating the service area in the health service building	4.11	0.39	High	3
3. Recommendation of products and services in the reception and registration area	4.19	0.39	High	2
4. Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area	3.52	0.54	High	4
5. Storing and forwarding health information of the service recipients or tourists in the screening area	3.29	0.48	Mediocre	6
6. Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area	3.24	0.45	Mediocre	7
7. Storing and forwarding payment information in the payment area	3.14	0.39	Mediocre	8
8. Provision of advice related to health in the area for health advice and guidance	4.21	0.41	Highest	1



**Table 4.23** (Continued)

The assessment of the effectiveness of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
9. Provision of health information and knowledge in the areas for resting	3.39	0.49	Mediocre	5
<b>Total</b>	<b>3.56</b>	<b>0.21</b>	<b>High</b>	

According to Table 4.23, for the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to information flow management, the results of data analysis, overall, show that tourists' assessment is at a high level ( $\bar{X} = 3.56$ , S.D = 0.21). When each item is considered, it shows that for Provision of directional signs towards the health service building, tourists' assessment is at a mediocre level ( $\bar{X} = 2.96$ , S.D = 0.35), for Provision of a sign indicating the service area in the health service building, tourists' assessment is at a high level ( $\bar{X} = 4.11$ , S.D = 0.39), for Recommendation of products and services in the reception and registration area, tourists' assessment is at a high level ( $\bar{X} = 4.19$ , S.D = 0.39), for Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area, tourists' assessment is at a high level ( $\bar{X} = 3.52$ , S.D = 0.54), for Storing and forwarding health information of the service recipients or tourists in the screening area, tourists' assessment is at a mediocre level ( $\bar{X} = 3.29$ , S.D = 0.48), for Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area, tourists' assessment is at a mediocre level ( $\bar{X} = 3.24$ , S.D = 0.45), for Storing and forwarding payment information in the payment area, tourists' assessment is at a mediocre level ( $\bar{X} = 3.14$ , S.D = 0.39), for Provision of advice related to health in the area for health advice and guidance, tourists' assessment is at the highest level ( $\bar{X} = 4.21$ , S.D = 0.41), and for Provision of health information and knowledge in the areas for resting, tourists' assessment is at a mediocre level ( $\bar{X} = 3.39$ , S.D = 0.49).

From the data analysis above, it can be seen that regarding the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to information flow management, tourists' assessment is in the highest level in terms of Provision of advice related to health in the area for health advice and guidance, and tourists' assessment is at a high level in terms of 1) Recommendation of products and services in the reception and registration area, 2) Provision of a sign indicating the service area in the health service building, 3) Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area. Additionally, for 1) Provision of health information and knowledge in the areas for resting, 2) Storing and forwarding health information of the service recipients or tourists in the screening area, 3) Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area, 4) Storing and forwarding payment information in the payment area, and 5) Provision of directional signs towards the health service building tourists' assessment is at a mediocre level.

**Table 4.24** Indicating Mean, S.D., and Level of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Financial Flow Management

The assessment of the effectiveness of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. Preparation of equipment and tools for receiving payments	3.92	0.32	High	4
2. Payment channel management	3.32	0.50	Mediocre	5
3. Informing the details of service fees and privileges to the service recipients or tourists	4.09	0.30	High	2
4. Process of receiving payment	3.97	0.34	High	3

**Table 4.24** (Continued)

<b>The assessment of the effectiveness of the process of logistics management</b>	<b>n = 400</b>		<b>Level</b>	<b>Rank</b>
	$\bar{X}$	<b>S.D</b>		
5. Issuing a document or proof of payment	4.14	0.34	High	1
<b>Total</b>	<b>3.89</b>	<b>0.18</b>	<b>High</b>	

According to Table 4.24, for the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to financial flow management, the results of data analysis, overall, show that tourists' assessment is at a high level ( $\bar{X} = 3.89$ , S.D = 0.18). When each item is considered, it shows that for Preparation of equipment and tools for receiving payments, tourists' assessment is at a high level ( $\bar{X} = 3.92$ , S.D = 0.32), for Payment channel management, tourists' assessment is at a mediocre level ( $\bar{X} = 3.32$ , S.D = 0.50), for Informing the details of service fees and privileges to the service recipients or tourists, tourists' assessment is at a high level ( $\bar{X} = 4.09$ , S.D = 0.30), for Process of receiving payment tourists' assessment is at a high level ( $\bar{X} = 3.97$ , S.D = 0.34), and for Issuing a document or proof of payment, tourists' assessment is at a high level ( $\bar{X} = 4.14$ , S.D = 0.34).

From the data analysis above, it can be seen that regarding the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to financial flow management, tourists' assessment is at a high level in terms of 1) Issuing a document or proof of payment, 2) Informing the details of service fees and privileges to the service recipients or tourists, 3) Process of receiving payment, and 4) Preparation of equipment and tools for receiving payments. Besides, for Payment channel management, tourists' assessment is at a mediocre level.

**Table 4.25** Indicating Mean, S.D., and Level of Tourists' Opinions on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Service Process Flow Management

The assessment of the effectiveness of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. The reception of the service recipients or tourists	3.36	0.49	Mediocre	5
2. Screening of the service recipients or tourists	4.13	0.34	High	2
3. Preparation of the service recipients or tourists before the health service is given	4.05	0.27	High	4
4. Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists	4.07	0.30	High	3
5. Health services for the service recipients or tourists	4.17	0.38	High	1
6. The services before the service recipients or tourists leave	3.29	0.46	Mediocre	6
<b>Total</b>	<b>3.84</b>	<b>0.22</b>	<b>High</b>	

According to Table 4.25, for the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to service process flow management, the results of data analysis, overall, show that tourists' assessment is at a high level ( $\bar{X} = 3.84$ , S.D = 0.22). When each item is considered, it shows that for The reception of the service recipients or tourists, tourists' assessment is at a

mediocre level ( $\bar{X} = 3.36$ , S.D = 0.49), for Screening of the service recipients or tourists, tourists' assessment is at a high level ( $\bar{X} = 4.13$ , S.D = 0.34), for Preparation of the service recipients or tourists before the health service is given, tourists' assessment is at a high level ( $\bar{X} = 4.05$ , S.D = 0.27), for Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists, tourists' assessment is at a high level ( $\bar{X} = 4.07$ , S.D = 0.30), for Health services for the service recipients or tourists, tourists' assessment is at a high level ( $\bar{X} = 4.17$ , S.D = 0.38), and for The services before the service recipients or tourists leave, tourists' assessment is at a mediocre level ( $\bar{X} = 3.29$ , S.D = 0.46).

From the data analysis above, it can be seen that regarding the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospital, categorized according to service process flow management, tourists' assessment is at a high level in terms of 1) Health services for the service recipients or tourists, 2) Screening of the service recipients or tourists, 3) Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists, and 4) Preparation of the service recipients or tourists before the health service is given. Besides, for 1) The reception of the service recipients or tourists and 2) The services before the service recipients or tourists leave, tourists' assessment is at a mediocre level.

**Table 4.26** Indicating Mean, S.D., and Level of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Service Quality

The assessment of the effectiveness of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. Convenience when being serviced	4.03	0.35	High	4
2. Innovation and technology in the service	3.92	0.33	High	5

**Table 4.26** (Continued)

The assessment of the effectiveness of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
3. Accuracy and completeness of the service	3.74	0.45	High	7
4. Reliability of the service	4.14	0.36	High	3
5. Responsiveness to the needs of the service recipients	3.67	0.50	High	8
6. Knowledge and capabilities in the service	4.19	0.39	High	2
7. Safety in providing the service	4.22	0.41	High	1
8. The speed of the service	3.52	0.50	High	9
9. Attentiveness when providing the service	3.88	0.39	High	6
<b>Total</b>	<b>3.92</b>	<b>0.21</b>	<b>High</b>	

According to Table 4.26, for the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to service quality, the results of data analysis, overall, show that tourists' assessment is at a high level ( $\bar{X} = 3.92$ , S.D = 0.21). When each item is considered, it shows that for Convenience when being serviced, tourists' assessment is at a high level ( $\bar{X} = 4.03$ , S.D = 0.35), for Innovation and technology in the service, tourists' assessment is at a high level ( $\bar{X} = 3.92$ , S.D = 0.33), for Accuracy and completeness of the service, tourists' assessment is at a high level ( $\bar{X} = 3.74$ , S.D = 0.45), for Reliability of the service, tourists' assessment is at a high level ( $\bar{X} = 4.14$ , S.D = 0.36), for Responsiveness to the needs of the service recipients, tourists' assessment is at a high level ( $\bar{X} = 3.67$ , S.D = 0.50), for Knowledge and capabilities in the service, tourists' assessment is at a high level ( $\bar{X} = 4.19$ , S.D = 0.39), and for Safety in providing the service, tourists'

assessment is at the highest level ( $\bar{X} = 4.22$ , S.D = 0.41), for The speed of the service, tourists' assessment is at a high level, ( $\bar{X} = 3.52$ , S.D = 0.50), and for Attentiveness when providing the service, tourists' assessment is at a high level ( $\bar{X} = 3.88$ , S.D = 0.39).

From the data analysis above, it can be seen that regarding the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to service quality, tourists' assessment is at a high level in terms of 1) Safety in providing the service, 2) Knowledge and capabilities in the service, 3) Reliability of the service, 4) Convenience when being serviced, 5) Innovation and technology in the service, 6) Attentiveness when providing the service, 7) Accuracy and completeness of the service, 8) Responsiveness to the needs of the service recipients, and 9) The speed of the service, respectively.

**Table 4.27** Indicating Mean, S.D., and Level of Tourists' Opinions on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Different Aspects

The assessment of the effectiveness of the process of logistics management	n = 400		Level	Rank
	$\bar{X}$	S.D		
1. In terms of physical flow management	3.67	0.20	High	4
2. In terms of information flow management	3.56	0.21	High	5
3. In terms of financial flow management	3.89	0.18	High	2
4. In terms of service process flow management	3.84	0.22	High	3
5. In terms of service quality	3.92	0.21	High	1
<b>Total</b>	<b>3.76</b>	<b>0.15</b>	<b>High</b>	

According to Table 4.25, for the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, when each aspect is considered, in terms of physical flow management, tourists' assessment is at a high level ( $\bar{X} = 3.67$ , S.D = 0.20), in terms of information flow management, tourists' assessment is at a high level ( $\bar{X} = 3.56$ , S.D = 0.21), in terms of financial flow management, tourists' assessment is at a high level ( $\bar{X} = 3.89$ , S.D = 0.18), in terms of service process flow management, tourists' assessment is at a high level ( $\bar{X} = 3.84$ , S.D = 0.22), and in terms of service quality, tourists' assessment is at a high level ( $\bar{X} = 0.92$ , S.D = 0.21).

From the data analysis above, it can be seen that regarding the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospital, categorized according to different aspects, tourists' assessment is at a high level in terms of 1) in terms of service quality, 2) in terms of financial flow management, 3) in terms of service process flow management, 4) in terms of physical flow management, and 5) in terms of information flow management, respectively.

### **4.3.2 Test Results Hypothesis**

4.3.2.1 Hypothesis 1: Personal information of health tourists who using the service in Thai traditional medicine promoting hospitals that varies is able to result in the difference of the evaluation of the efficiency of logistics management processes for health tourism in Thai traditional medicine promoting hospitals. The researcher conducted the statistics *T-test* when there are 2 independent sample groups or the statistics F-test (ANOVA) when there are more than 2 independent sample groups.

1) The results of the analysis and comparison of tourists' opinions on the assessment of the efficiency of the process of logistics management in different aspects for health tourism in Thai traditional medicine promoting hospitals, categorized according to gender, Table 4.28.



**Table 4.28** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management in Terms of Physical Flow Management, Information Flow Management, Financial Flow Management, Service Process Flow Management, and Service Quality for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Gender

<b>The assessment of the efficiency of the process of logistics management</b>	<b>Gender</b>	<b>n</b>	$\bar{X}$	<b>S.D.</b>	<b>t</b>	<b>Sig</b>
1. In terms of physical flow management	Male	96	3.66	0.22	-0.197	.844
	Female	304	3.66	0.21		
2. In terms of information flow management	Male	96	3.52	0.20	0.495	.621
	Female	304	3.51	0.19		
3. In terms of financial flow management	Male	96	3.88	0.19	0.300	.764
	Female	304	3.87	0.17		
4. In terms of service process flow management	Male	96	3.89	0.21	1.729	.085
	Female	304	3.85	0.21		
5. In terms of service quality	Male	96	3.81	0.26	-0.084	.933
	Female	304	3.81	0.22		
<b>for every aspect</b>	<b>Male</b>	<b>96</b>	<b>3.72</b>	<b>0.17</b>	<b>0.426</b>	<b>.670</b>
	<b>Female</b>	<b>304</b>	<b>3.72</b>	<b>0.15</b>		

**Note:** \*With the level of statistical significance at .05

According to Table 4.28, the opinions of male and female health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, overall, are different, without the statistical significance of 0.05. When each aspect/item is considered, it is discovered that male

and female tourists have different opinions for all aspects, without the statistical significance of 0.05.

2) The results of the analysis and comparison of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to age, Table 4.29.

**Table 4.29** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management, Categorized According to Age

Source of variation	SS	df	MS	F	Sig.
Between groups	0.920	4	0.230	5.468	.008*
Errors	16.622	395	0.042		
<b>Total</b>	<b>17.542</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.29, the opinions of health tourists with different ages who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.30.

**Table 4.30** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management, Categorized According to Age

Age	$\bar{X}$	21-30	31-40	41-50	51-60	Over 61
		years old	years old	years old	years old	years old
		3.57	3.72	3.68	3.64	3.65
21-30 years old	3.57	-	-0.15*	-0.11*	-0.07*	-0.08*
31-40 years old	3.72		-	0.04	0.08*	0.07*
41-50 years old	3.68			-	0.04	0.03
51-60 years old	3.64				-	-0.01
Over 61 years old	3.65					-

**Note:** \* With the level of statistical significance at .05

According to Table 4.30, the opinions of health tourists aged 21-30 who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management are different from tourists who are in other ranges of age, with the statistical significance of .05. And the opinions of tourists aged 31 - 40 are different from those of the tourists aged 51 - 60 and aged 61 or older, with the statistical significance of .05.

**Table 4.31** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Information Flow Management, Categorized According to Age

Source of variation	SS	df	MS	F	Sig.
Between groups	0.225	4	0.056	1.527	.194
Errors	14.539	395	0.037		
<b>Total</b>	<b>14.764</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.31, opinions of health tourists, aged differently, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management are different, without the statistical significance of 0.05.

**Table 4.32** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Financial Flow Management, Categorized According to Age

Source of variation	SS	df	MS	F	Sig.
Between groups	0.110	4	0.028	0.875	.479
Errors	12.469	395	0.032		
<b>Total</b>	<b>12.579</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.32, the opinions of health tourists, aged differently, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management are different, without the statistical significance of 0.05.

**Table 4.33** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management, Categorized According to Age

Source of variation	SS	df	MS	F	Sig.
Between groups	0.437	4	0.109	2.571	.038*
Errors	16.777	395	0.042		
<b>Total</b>	<b>17.214</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.33, the opinions of health tourists, aged differently, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.34.

**Table 4.34** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management, Categorized According to Age

Age	$\bar{X}$	21-30	31-40	41-50	51-60	Over 61
		years old	years old	years old	years old	years old
		3.83	3.81	3.87	3.88	3.91
21-30 years old	3.83	-	0.02	-0.04	-0.05	-0.08*
31-40 years old	3.81		-	-0.06	-0.07*	-0.10*
41-50 years old	3.87			-	-0.01	-0.04
51-60 years old	3.88				-	-0.03
Over 61 years old	3.91					-

**Note:** \* With the level of statistical significance at .05

According to Table 4.34, the opinions of health tourists, aged over 61, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management, are different from the opinions of those who are 21-30 years old and 31-40 years old, with the statistical significance of .05. And the opinions of tourists aged 31-40 are different from those of tourists aged 51-60, with the statistical significance of .05.

**Table 4.35** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Age

Source of variation	SS	df	MS	F	Sig.
Between groups	1.601	4	0.400	8.328	.000*
Errors	18.990	395	0.048		
<b>Total</b>	<b>20.591</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.35, the opinions of health tourists, aged differently, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.36.

**Table 4.36** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Age

Age	$\bar{X}$	21-30	31-40	41-50	51-60	Over 61
		years old	years old	years old	years old	years old
		3.70	3.79	3.90	3.78	3.83
21-30 years old	3.70	-	-0.09*	-0.20*	-0.08*	-0.13*

**Table 4.36** (Continued)

Age	$\bar{X}$	21-30	31-40	41-50	51-60	Over 61
		years old	years old	years old	years old	years old
		3.70	3.79	3.90	3.78	3.83
31-40 years old	3.79		-	-0.11*	0.01	-0.04
41-50 years old	3.90			-	0.12*	0.07
51-60 years old	3.78				-	-0.05
Over 61 years old	3.83					-

**Note:** \* With the level of statistical significance at .05

According to Table 4.36, the opinions of health tourists, aged 21-30, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different from tourists of other ranges of ages, with the statistical significance of .05. And the opinions of tourists aged 41-50 are different from the opinions of those who are 31- 40 years old and 51-60 years old, with the statistical significance of .05.



**Table 4.37** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals for Every Aspect, Categorized According to Age

Source of variation	SS	df	MS	F	Sig.
Between groups	0.296	4	0.074	3.185	.014*
Errors	9.186	395	0.023		
<b>Total</b>	<b>9.482</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.37, the opinions of health tourists, aged differently, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.38.

**Table 4.38** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals for Every Aspect, Categorized According to Age

Age	$\bar{X}$	21-30	31-40	41-50	51-60	Over 61
		years old	years old	years old	years old	years old
		3.66	3.72	3.75	3.71	3.74
21-30 years old	3.66	-	-0.06*	-0.09*	-0.05*	-0.08

**Table 4.38** (Continued)

Age	$\bar{X}$	21-30	31-40	41-50	51-60	Over 61
		years old	years old	years old	years old	years old
		3.66	3.72	3.75	3.71	3.74
31-40 years old	3.72		-	-0.03	0.01	-0.02
41-50 years old	3.75			-	0.04	0.01
51-60 years old	3.71				-	-0.03
Over 61 years old	3.74					-

**Note:** \* With the level of statistical significance at .05

According to Table 4.38, the opinions of health tourists, aged 21-30, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect are different from the opinions of those who are in different age ranges, except the range of 51-60 years old, with the statistical significance of .05.

3) The results of the analysis and comparison of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to marital status, Table 4.39-4.44.

**Table 4.39** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management, Categorized According to Marital Status

Source of variation	SS	df	MS	F	Sig.
Between groups	0.165	2	0.083	1.887	.153
Errors	17.377	397	0.044		
<b>Total</b>	<b>17.542</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.39, the opinions of health tourists, with different marital statuses, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management are different, without the statistical significance of 0.05.

**Table 4.40** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Information Flow Management, Categorized According to Marital Status

Source of variation	SS	df	MS	F	Sig.
Between groups	0.021	2	0.010	0.277	.758
Errors	14.743	397	0.037		
<b>Total</b>	<b>14.764</b>	<b>399</b>			

According to Table 4.40, the opinions of health tourists, with different marital statuses, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management are different, without the statistical significance of 0.05.

**Table 4.41** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Financial Flow Management, Categorized According to Marital Status

<b>Source of variation</b>	<b>SS</b>	<b>df</b>	<b>MS</b>	<b>F</b>	<b>Sig.</b>
Between groups	0.036	2	0.018	0.578	.562
Errors	12.543	397	0.032		
<b>Total</b>	<b>12.579</b>	<b>399</b>			

According to Table 4.41, the opinions of health tourists, with different marital statuses, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management are different, without the statistical significance of 0.05.

**Table 4.42** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management, Categorized According to Marital Status

Source of variation	SS	df	MS	F	Sig.
Between groups	0.016	2	0.008	0.184	.832
Errors	17.198	397	0.043		
<b>Total</b>	<b>17.214</b>	<b>399</b>			

According to Table 4.42, the opinions of health tourists, with different marital statuses, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management are different, without the statistical significance of 0.05.

**Table 4.43** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Marital Status

Source of variation	SS	df	MS	F	Sig.
Between groups	0.093	2	0.047	0.902	.407
Errors	20.499	397	0.052		
<b>Total</b>	<b>20.592</b>	<b>399</b>			

According to Table 4.43, the opinions of health tourists, with different statuses, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different, without the statistical significance of 0.05.

**Table 4.44** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals for Every Aspect, Categorized According to Marital Status

Source of variation	SS	df	MS	F	Sig.
Between groups	0.056	2	0.028	1.183	.308
Errors	9.426	397	0.024		
<b>Total</b>	<b>9.482</b>	<b>399</b>			

According to Table 4.44, the opinions of health tourists, with different statuses, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect are different, without the statistical significance of 0.05.

4) The results of the analysis and comparison of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to level of education, Table 4.45-4.52.

**Table 4.45** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management, Categorized According to Level of Education

Source of variation	SS	df	MS	F	Sig.
Between groups	0.593	4	0.148	3.457	.009*
Errors	16.949	395	0.043		
<b>Total</b>	<b>17.542</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.45, the opinions of health tourists, with different levels of education, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.46.

**Table 4.46** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management, Categorized According to Level of Education

level of education	$\bar{X}$	Lower than	High school	Diploma	Bachelor's	Higher than
		High school			degree	bachelor's degree
		3.61	3.68	3.60	3.69	3.64
Lower than High school/Vocational school	3.61	-	-0.07	0.01	-0.08*	-0.03
High school/Vocational school	3.68		-	0.08*	-0.01	0.04
Diploma/High vocational school	3.60			-	-0.09*	-0.04
Bachelor's degree	3.69				-	0.05
Higher than bachelor's degree	3.64					-

**Note:** \* With the level of statistical significance at .05



According to Table 4.46, the opinions of health tourists holding a bachelor's degree who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management are different from the opinions of those who have their education lower than high school or vocational school and those who have a diploma or finished high/vocational school, with the statistical significance of .05. Moreover, the opinions of tourists who have finished high school/vocational school are different from those of the tourists who have a diploma, with the statistical significance of .05.

**Table 4.47** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Information Flow Management, Categorized According to Level of Education

Source of variation	SS	df	MS	F	Sig.
Between groups	0.094	4	0.023	0.632	.640
Errors	14.670	395	0.037		
<b>Total</b>	<b>14.764</b>	<b>399</b>			

According to Table 4.47, the opinions of health tourists, with different levels of education, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management are different, without the statistical significance of 0.05.

**Table 4.48** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Financial Flow Management, Categorized According to Level of Education

Source of variation	SS	df	MS	F	Sig.
Between groups	0.098	4	0.024	0.772	.544
Errors	12.482	395	0.032		
<b>Total</b>	<b>12.580</b>	<b>399</b>			

According to Table 4.48, the opinions of health tourists, with different levels of education, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management are different, without the statistical significance of 0.05.

**Table 4.49** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management, Categorized According to Level of Education

Source of variation	SS	df	MS	F	Sig.
Between groups	0.124	4	0.031	0.716	.582
Errors	17.090	395	0.043		
<b>Total</b>	<b>17.214</b>	<b>399</b>			

According to Table 4.49, the opinions of health tourists, with different levels of education, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management are different, without the statistical significance of 0.05.

**Table 4.50** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Level of Education

Source of variation	SS	df	MS	F	Sig.
Between groups	1.028	4	0.257	5.188	.000*
Errors	19.564	395	0.050		
<b>Total</b>	<b>20.592</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.50, the opinions of health tourists, with different levels of education, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.51.

**Table 4.51** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Level of Education

level of education	$\bar{X}$	Lower than	High school	Diploma	Bachelor's	Higher than
		High school			degree	bachelor's degree
		3.66	3.81	3.81	3.84	3.76
Lower than High school/Vocational school	3.66	-	-0.15*	-0.15*	-0.18*	-0.10*
High school/Vocational school	3.81		-	0.00	-0.03	0.05
Diploma/High vocational school	3.81			-	-0.03	0.05
Bachelor's degree	3.84				-	0.08*
Higher than bachelor's degree	3.76					-

**Note:** \* With the level of statistical significance at .05

According to Table 4.51, the opinions of health tourists, with the level of education lower than high school/vocational school, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different from those of the tourists who have other levels of education, with the statistical significance of .05. Besides, tourists who hold a bachelor's degree have opinions different from those of the tourists whose level of education is higher than bachelor's degree, with the statistical significance of .05.

**Table 4.52** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals for Every Aspect, Categorized According to Level of Education

Source of variation	SS	df	MS	F	Sig.
Between groups	0.144	4	0.036	1.522	.195
Errors	9.339	395	0.024		
<b>Total</b>	<b>9.483</b>	<b>399</b>			

According to Table 4.52, the opinions of health tourists, with different levels of education, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect are different, without the statistical significance of 0.05.

5) The results of the analysis and comparison of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to occupation, Table 4.53-4.59.

**Table 4.53** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management, Categorized According to Occupation

Source of variation	SS	df	MS	F	Sig.
Between groups	0.403	5	0.081	1.854	.101
Errors	17.139	394	0.044		
<b>Total</b>	<b>17.542</b>	<b>399</b>			

According to Table 4.53, the opinions of health tourists, having different occupations, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management are different, without the statistical significance of 0.05.

**Table 4.54** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Information Flow Management, Categorized According to Occupation

Source of variation	SS	df	MS	F	Sig.
Between groups	0.388	5	0.078	2.127	.061
Errors	14.376	394	0.036		
<b>Total</b>	<b>14.764</b>	<b>399</b>			

According to Table 4.54, the opinions of health tourists, having different occupations, who have used services in Thai traditional medicine promoting

hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management are different, without the statistical significance of 0.05.

**Table 4.55** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Financial Flow Management, Categorized According to Occupation

<b>Source of variation</b>	<b>SS</b>	<b>df</b>	<b>MS</b>	<b>F</b>	<b>Sig.</b>
Between groups	0.287	5	0.057	1.842	.104
Errors	12.292	394	0.031		
<b>Total</b>	<b>12.579</b>	<b>399</b>			

According to Table 4.55, the opinions of health tourists, having different occupation, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management are different, without the statistical significance of 0.05.

**Table 4.56** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management, Categorized According to Occupation

Source of variation	SS	df	MS	F	Sig.
Between groups	0.186	5	0.037	0.861	.507
Errors	17.028	394	0.043		
<b>Total</b>	<b>17.214</b>	<b>399</b>			

According to Table 4.56, the opinions of health tourists, having different occupations, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management are different, without the statistical significance of 0.05.

**Table 4.57** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Occupation

Source of variation	SS	df	MS	F	Sig.
Between groups	0.689	5	0.138	2.728	.019*
Errors	19.903	394	0.051		
<b>Total</b>	<b>20.592</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05



According to Table 4.57, the opinions of health tourists, having different occupations, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.58.

**Table 4.58** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Occupation

Occupation	$\bar{X}$	Government	State	Private	Trader/Business	Student/College	Others
		officer/government employee	enterprise employee	enterprise employee	owner	student	
		3.80	3.77	3.83	3.89	3.74	3.81
Government officer/government employee	3.80	-	0.03	-0.03	-0.09*	0.06	-0.01
State enterprise employee	3.77		-	-0.06	-0.12*	0.03	-0.04
Private enterprise employee	3.83			-	-0.06	0.09*	0.02
Trader/Business owner	3.89				-	0.15*	0.08
Student/College student	3.74					-	-0.07
Others	3.81						-

**Note:** \* With the level of statistical significance at .05

According to Table 4.58, the opinions of health tourists, working as a trader/business owner, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different from those of the tourists who are a government officer/government employee, state enterprise employee, and student/college student, with the statistical significance of .05. Besides, the opinions of tourists who are student/college students are different from the opinions of those who are private enterprise employees, with the statistical significance of .05.

**Table 4.59** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals for Every Aspect, Categorized According to Occupation

Source of variation	SS	df	MS	F	Sig.
Between groups	0.108	5	0.022	0.904	.478
Errors	9.375	394	0.024		
<b>Total</b>	<b>9.482</b>	<b>399</b>			

According to Table 4.59, the opinions of health tourists, having different occupations, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect are different, without the statistical significance of 0.05.

6) The results of the analysis and comparison of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to monthly income, Table 4.60 - 4.67.

**Table 4.60** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management, Categorized According to Monthly Income

Source of variation	SS	df	MS	F	Sig.
Between groups	0.320	3	0.107	2.454	.063
Errors	17.222	396	0.043		
<b>Total</b>	<b>17.542</b>	<b>399</b>			

According to Table 4.60, the opinions of health tourists who have different monthly incomes and have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management are different, without the statistical significance of 0.05.

**Table 4.61** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Information Flow Management, Categorized According to Monthly Income

Source of variation	SS	df	MS	F	Sig.
Between groups	0.063	3	0.021	0.567	.637
Errors	14.701	396	0.037		
<b>Total</b>	<b>14.764</b>	<b>399</b>			

According to Table 4.61, the opinions of health tourists who have different monthly incomes, and have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management are different, without the statistical significance of 0.05.

**Table 4.62** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Financial Flow Management, Categorized According to Monthly Income

<b>Source of variation</b>	<b>SS</b>	<b>df</b>	<b>MS</b>	<b>F</b>	<b>Sig.</b>
Between groups	0.216	3	0.072	2.302	.077
Errors	12.364	396	0.031		
<b>Total</b>	<b>12.579</b>	<b>399</b>			

According to Table 4.62, the opinions of health tourists who have different monthly incomes and have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management are different, without the statistical significance of 0.05.

**Table 4.63** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management, Categorized According to Monthly Income

Source of variation	SS	df	MS	F	Sig.
Between groups	0.367	3	0.122	2.877	.036*
Errors	16.847	396	0.043		
<b>Total</b>	<b>17.214</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.63, the opinions of health tourists who have different monthly incomes and have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.64.

**Table 4.64** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management, Categorized According to Monthly Income

Monthly income	$\bar{X}$	Below or equal	15,001 - 25,000	25,001 - 35,000	Over 35,001
		to 15,000 baht	baht	baht	baht
		3.94	3.85	3.85	3.84
Below or equal to 15,000 baht	3.94	-	0.09*	0.09*	0.10*
15,001 - 25,000 baht	3.85		-	0.00	0.01
25,001 - 35,000 baht	3.85			-	0.01
Over 35,001 baht	3.84				-

**Note:** \*With the level of statistical significance at .05

According to Table 4.64, the opinions of health tourists, with monthly income below or equal to 15,000 baht, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management are different from the opinions of other tourists who have different ranges of monthly income, with the statistical significance of .05.

**Table 4.65** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Monthly Income

Source of variation	SS	df	MS	F	Sig.
Between groups	0.704	3	0.235	4.672	.003*
Errors	19.888	396	0.050		
<b>Total</b>	<b>20.592</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.65, the opinions of health tourists who have different monthly incomes and have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.66.



**Table 4.66** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Monthly Income

Monthly income	$\bar{X}$	Below or equal	15,001 - 25,000	25,001 - 35,000	Over 35,001
		to 15,000 baht	baht	baht	baht
		3.80	3.76	3.86	3.84
Below or equal to 15,000 baht	3.80	-	0.04	-0.06	-0.04
15,001 - 25,000 baht	3.76		-	-0.10*	-0.08*
25,001 - 35,000 baht	3.86			-	0.02
Over 35,001 baht	3.84				-

**Note:** \*With the level of statistical significance at .05

According to Table 4.66, the opinions of health tourists, with a monthly income of 15,001-25,000 baht, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different from the opinions of those who have a monthly income of 25,001-35,000 baht and of over 35,001 baht, with the statistical significance of .05.

**Table 4.67** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals for Every Aspect, Categorized According to Monthly Income

Source of variation	SS	df	MS	F	Sig.
Between groups	0.155	3	0.052	2.190	.089
Errors	9.328	396	0.024		
<b>Total</b>	<b>9.483</b>	<b>399</b>			

According to Table 4.67, the opinions of health tourists who have different monthly income and have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect are different, without the statistical significance of 0.05.

7) The results of the analysis and comparison of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to experiences in using health tourism services, as indicated in Table 4.68.

**Table 4.68** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management in Terms of Physical Flow Management, Information Flow Management, Financial Flow Management, Service Process Flow Management, and Service Quality for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Experiences in Using Health Tourism Services

<b>The assessment of the efficiency</b>	<b>experiences in using health tourism services</b>	<b>n</b>	<b><math>\bar{X}</math></b>	<b>S.D.</b>	<b>t</b>	<b>Sig</b>
1. In terms of physical flow management	Have used the services	243	3.68	0.21	1.779	.076
	First time using the services	157	3.64	0.20		
2. In terms of information flow management	Have used the services	243	3.53	0.20	1.951	.052
	First time using the services	157	3.49	0.17		
3. In terms of financial flow management	Have used the services	243	3.89	0.18	1.778	.076
	First time using the services	157	3.86	0.17		
4. In terms of service process flow management	Have used the services	243	3.88	0.22	2.046	.041*
	First time using the services	157	3.83	0.19		
5. In terms of service quality	Have used the services	243	3.83	0.22	2.733	.007*
	First time using the services	157	3.77	0.23		
<b>for every aspect</b>	<b>Have used the services</b>	<b>243</b>	<b>3.74</b>	<b>0.16</b>	<b>2.885</b>	<b>.004*</b>
	<b>First time using the services</b>	<b>157</b>	<b>3.69</b>	<b>0.14</b>		

**Note:** \* With the level of statistical significance at .05

According to Table 4.68, the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals many times, and the opinions of the first-time users on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect are different, with the statistical significance of .05. When each aspect/item is considered, it is discovered that the opinions of tourists who have used the services many times and the opinions of the first-time users are different in terms of process flow management and in terms of service quality with the statistical significance of .05.

8) The results of the analysis and comparison of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to the main purpose of using the services, Table 4.69.

**Table 4.69** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management, Categorized According to the Main Purpose of Using the Services

Source of variation	SS	df	MS	F	Sig.
Between groups	0.656	8	0.082	1.900	.059
Errors	16.886	391	0.043		
<b>Total</b>	<b>17.542</b>	<b>399</b>			

According to Table 4.69, the opinions of health tourists, with different main purposes of using the services, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management are different, without the statistical significance of 0.05.

**Table 4.70** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Information Flow Management, Categorized According to the Main Purpose of Using the Services

Source of variation	SS	df	MS	F	Sig.
Between groups	0.232	8	0.029	0.780	.621
Errors	14.532	391	0.037		
<b>Total</b>	<b>14.764</b>	<b>399</b>			

According to Table 4.70, the opinions of health tourists, with different main purposes of using the services, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management are different, without the statistical significance of 0.05.

**Table 4.71** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional medicine Promoting Hospitals in Terms of Financial Flow Management, Categorized According to the Main Purpose of Using the Services

Source of variation	SS	df	MS	F	Sig.
Between groups	0.253	8	0.032	1.005	.432
Errors	12.326	391	0.032		
<b>Total</b>	<b>12.579</b>	<b>399</b>			

According to Table 4.71, the opinions of health tourists, with different main purposes of using the services, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management are different, without the statistical significance of 0.05.

**Table 4.72** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management, Categorized According to the Main Purpose of Using the Services

<b>Source of variation</b>	<b>SS</b>	<b>df</b>	<b>MS</b>	<b>F</b>	<b>Sig.</b>
Between groups	0.574	8	0.072	1.685	.100
Errors	16.640	391	0.043		
<b>Total</b>	<b>17.214</b>	<b>399</b>			

According to Table 4.72, the opinions of health tourists, with different main purposes of using the services, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management are different, without the statistical significance of 0.05.

**Table 4.73** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to the Main Purpose of Using the Services

Source of variation	SS	df	MS	F	Sig.
Between groups	0.634	8	0.079	1.552	.138
Errors	19.958	391	0.051		
<b>Total</b>	<b>20.592</b>	<b>399</b>			

According to Table 4.73, the opinions of health tourists, with different main purposes of using the services, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different, without the statistical significance of 0.05.

**Table 4.74** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals for Every Aspect, Categorized According to the Main Purpose of Using the Services

Source of variation	SS	df	MS	F	Sig.
Between groups	0.176	8	0.022	0.926	.495
Errors	9.306	391	0.024		
<b>Total</b>	<b>9.482</b>	<b>399</b>			

According to Table 4.74, the opinions of health tourists, with different main purposes of using the services, who have used services in Thai traditional medicine promoting hospitals on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect are different, without the statistical significance of 0.05.

4.3.2.2 Hypothesis 2: Personal information of health tourists who using service in Thai traditional medicine promoting hospitals that varies is able to result in the difference of the evaluation of the effectiveness of logistics management processes for health tourism in Thai traditional medicine promoting hospitals. The researcher conducted the statistics *T-test* when there are 2 independent sample groups or the statistics *F-test* (ANOVA) when there are more than 2 independent sample groups.

1) The results of the analysis and comparison of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management in different aspects for health tourism in Thai traditional medicine promoting hospitals, categorized according to gender, Table 4.75.



**Table 4.75** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management in Terms of Physical Flow Management, Information Flow Management, Financial Flow Management, Service Process Flow Management, and Service Quality for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Gender

<b>The assessment of the effectiveness of the process of logistics management</b>						
	<b>Gender</b>	<b>n</b>	$\bar{X}$	<b>S.D.</b>	<b>t</b>	<b>Sig</b>
1. In terms of physical flow management	Male	96	3.67	0.21	-0.038	.970
	Female	304	3.67	0.20		
2. In terms of information flow management	Male	96	3.58	0.23	0.809	.419
	Female	304	3.56	0.21		
3. In terms of financial flow management	Male	96	3.89	0.19	-0.036	.972
	Female	304	3.89	0.18		
4. In terms of service process flow management	Male	96	3.87	0.24	1.598	.111
	Female	304	3.83	0.21		
5. In terms of service quality	Male	96	3.94	0.22	0.909	.364
	Female	304	3.92	0.21		
<b>for every aspect</b>		<b>Male</b>	<b>96</b>	<b>3.77</b>	<b>0.16</b>	<b>0.884</b>
		<b>Female</b>	<b>304</b>	<b>3.75</b>	<b>0.15</b>	

According to Table 4.75, the opinions between male and female health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, overall, are different, without the statistical significance of 0.05. When each aspect/item is considered, it is discovered that every aspect is different, without the statistical significance of .05.

2) The results of the analysis and comparison of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to age, Table 4.76-4.83.

**Table 4.76** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management, Categorized According to Age

Source of variation	SS	df	MS	F	Sig.
Between groups	0.558	4	0.140	3.519	.008*
Errors	15.661	395	0.040		
<b>Total</b>	<b>16.219</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.76, the opinions of health tourists, with different ages, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.77.

**Table 4.77** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management, Categorized According to Age

Age	$\bar{X}$	21-30	31-40	41-50	51-60	Over 61
		years old	years old	years old	years old	years old
		3.59	3.71	3.69	3.66	3.66
21-30 years old	3.59	-	-0.12*	-0.10*	-0.07*	-0.07
31-40 years old	3.71		-	0.02	0.05	0.05
41-50 years old	3.69			-	0.03	0.03
51- 60 years old	3.66				-	0.00
Over 61 years old	3.66					-

**Note:** \* With the level of statistical significance at .05

According to Table 4.77, the opinions of health tourists, aged 21-30, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management are different from the opinions of tourists aged 31-40, 41-50, and over 51-60, with the statistical significance of .05.

**Table 4.78** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Information Flow Management, Categorized According to Age

Source of variation	SS	df	MS	F	Sig.
Between groups	0.319	4	0.080	1.793	.129
Errors	17.550	395	0.044		
<b>Total</b>	<b>17.869</b>	<b>399</b>			

According to Table 4.78, the opinions of health tourists, with different ages, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management are different, without the statistical significance of 0.05.

**Table 4.79** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Financial Flow Management, Categorized According to Age

Source of variation	SS	df	MS	F	Sig.
Between groups	0.096	4	0.024	0.706	.588
Errors	13.426	395	0.034		
<b>Total</b>	<b>13.522</b>	<b>399</b>			

According to Table 4.79, the opinions of health tourists, with different ages, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management are different, without the statistical significance of 0.05.

**Table 4.80** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management, Categorized According to Age

Source of variation	SS	df	MS	F	Sig.
Between groups	0.490	4	0.123	2.577	.037*
Errors	18.785	395	0.048		
<b>Total</b>	<b>19.275</b>	<b>399</b>			

\* With the level of statistical significance at .05

According to Table 4.80, the opinions of health tourists, with different ages, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.81.

**Table 4.81** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management, Categorized According to Age

Age	$\bar{X}$	21-30	31-40	41-50	51-60	Over 61
		years old	years old	years old	years old	years old
		3.84	3.78	3.87	3.85	3.88
21-30 years old	3.84	-	0.06	-0.03	-0.01	-0.04
31-40 years old	3.78		-	-0.09*	-0.07*	-0.10*
41-50 years old	3.87			-	0.02	-0.01
51- 60 years old	3.85				-	-0.03
Over 61 years old	3.88					-

**Note:** \* With the level of statistical significance at .05

According to Table 4.81, the opinions of health tourists, aged 31-40, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management are different from the opinions of tourists aged 41-50, aged 51-60, and aged over 61, with the statistical significance of .05.

**Table 4.82** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Age

Source of variation	SS	df	MS	F	Sig.
Between groups	1.298	4	0.325	7.552	.000*
Errors	16.978	395	0.043		
<b>Total</b>	<b>18.276</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.82, the opinions of health tourists, with different ages, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.83.

**Table 4.83** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Age

Age	$\bar{X}$	21-30	31-40	41-50	51-60	Over 61
		years old	years old	years old	years old	years old
		3.81	3.89	3.99	3.93	3.93
21-30 years old	3.81	-	-0.08*	-0.18*	-0.12*	-0.12*
31-40 years old	3.89		-	-0.10*	-0.04	-0.04
41-50 years old	3.99			-	0.06*	0.06
51-60 years old	3.93				-	0.00
Over 61 years old	3.93					-

**Note:** \* With the level of statistical significance at .05

According to Table 4.83, the opinions of health tourists, aged 21 - 30, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different from those of tourists with other ranges of age, with the statistical significance of .05. Besides, the opinions of tourists aged 41-50 are different from those of tourists aged 31-40 and 51-60, with the statistical significance of .05.



**Table 4.84** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals for Every Aspect, Categorized According to Age

Source of variation	SS	df	MS	F	Sig.
Between groups	0.264	4	0.066	3.028	.018*
Errors	8.612	395	0.022		
<b>Total</b>	<b>8.876</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.84, the opinions of health tourists, with different ages, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.84.

**Table 4.85** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals for Every Aspect, Categorized According to Age

Age	$\bar{X}$	21-30	31-40	41-50	51-60	Over 61
		years old	years old	years old	years old	years old
		3.71	3.74	3.78	3.76	3.77
21-30 years old	3.71	-	-0.03	-0.07*	-0.05*	-0.06*
31-40 years old	3.74		-	-0.04*	-0.02	-0.03
41-50 years old	3.78			-	0.02	0.01
51- 60 years old	3.76				-	-0.01
Over 61 years old	3.77					-

**Note:** \* With the level of statistical significance at .05

According to Table 4.85, the opinions of health tourists, aged 21-30, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect are different from the opinions of tourists aged 41-50, 51-60, over 61, with the statistical significance of .05. Besides, the opinions of tourists aged 31-40 are different from those of tourists aged 41 - 50, with the statistical significance of .05.

3) The results of the analysis and comparison of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics

management for health tourism in Thai traditional medicine promoting hospitals, categorized according to marital status, Table 4.86-4.91.

**Table 4.86** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management, Categorized According to Marital Status

<b>Source of variation</b>	<b>SS</b>	<b>df</b>	<b>MS</b>	<b>F</b>	<b>Sig.</b>
Between groups	0.127	2	0.064	1.572	.209
Errors	16.091	397	0.041		
<b>Total</b>	<b>16.218</b>	<b>399</b>			

According to Table 4.86, the opinions of health tourists, with different marital statuses, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management are different, without the statistical significance of 0.05.

**Table 4.87** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Information Flow management, Categorized According to Marital Status

Source of variation	SS	df	MS	F	Sig.
Between groups	0.070	2	0.035	0.783	.458
Errors	17.798	397	0.045		
<b>Total</b>	<b>17.868</b>	<b>399</b>			

According to Table 4.87, the opinions of health tourists, with different marital statuses, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management are different, without the statistical significance of 0.05.

**Table 4.88** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Financial Flow Management, Categorized According to Marital Status

Source of variation	SS	df	MS	F	Sig.
Between groups	0.039	2	0.020	0.576	.563
Errors	13.483	397	0.034		
<b>Total</b>	<b>13.522</b>	<b>399</b>			

According to Table 4.88, the opinions of health tourists, with different marital statuses, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management are different, without the statistical significance of 0.05.

**Table 4.89** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management, Categorized According to Marital Status

<b>Source of variation</b>	<b>SS</b>	<b>df</b>	<b>MS</b>	<b>F</b>	<b>Sig.</b>
Between groups	0.027	2	0.014	0.281	.756
Errors	19.248	397	0.048		
<b>Total</b>	<b>19.275</b>	<b>399</b>			

According to Table 4.89, the opinions of health tourists, with different marital statuses, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management are different, without the statistical significance of 0.05.

**Table 4.90** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Marital Status

Source of variation	SS	df	MS	F	Sig.
Between groups	0.033	2	0.016	0.358	.699
Errors	18.244	397	0.046		
<b>Total</b>	<b>18.277</b>	<b>399</b>			

According to Table 4.90, the opinions of health tourists, with different marital statuses, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different, without the statistical significance of 0.05.

**Table 4.91** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals for Every Aspect, Categorized According to Marital Status

Source of variation	SS	df	MS	F	Sig.
Between groups	0.034	2	0.017	0.772	.463
Errors	8.842	397	0.022		
<b>Total</b>	<b>8.876</b>	<b>399</b>			

According to Table 4.91, the opinions of health tourists, with different marital statuses, who have used services in Thai traditional medicine

promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect are different, without the statistical significance of 0.05.

4) The results of the analysis and comparison of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to level of education, Table 4.92-4.99.

**Table 4.92** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management, Categorized According to Level of Education

Source of variation	SS	df	MS	F	Sig.
Between groups	0.409	4	0.102	2.553	.039*
Errors	15.810	395	0.040		
<b>Total</b>	<b>16.219</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.92, the opinions of health tourists, with different levels of education, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.93.

**Table 4.93** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management, Categorized According to Level of Education

level of education		Lower than	High school	Diploma	Bachelor's	Higher than
		High school			degree	bachelor's degree
		3.65	3.71	3.62	3.69	3.63
Lower than High school/Vocational school	3.65	-	-0.06	0.03	-0.04	0.02
High school/Vocational school	3.71		-	0.09*	0.02	0.08
Diploma/High vocational school	3.62			-	-0.07*	-0.01
Bachelor's degree	3.69				-	0.06
Higher than bachelor's degree	3.63					-

**Note:** \* With the level of statistical significance at .05



According to Table 4.93, the opinions of health tourists, having finished diploma/high vocational school, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management are different from the opinions of tourists who finished high school/vocational school and who hold a bachelor's degree, with the statistical significance of .05.

**Table 4.94** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Information Flow Management, Categorized According to Level of Education

<b>Source of variation</b>	<b>SS</b>	<b>df</b>	<b>MS</b>	<b>F</b>	<b>Sig.</b>
Between groups	0.191	4	0.048	1.066	.373
Errors	17.678	395	0.045		
<b>Total</b>	<b>17.869</b>	<b>399</b>			

According to Table 4.94, the opinions of health tourists, with different levels of education, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management are different, without the statistical significance of 0.05.

**Table 4.95** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Financial Flow Management, Categorized According to Level of Education

Source of variation	SS	df	MS	F	Sig.
Between groups	0.045	4	0.011	0.332	.857
Errors	13.476	395	0.034		
<b>Total</b>	<b>13.521</b>	<b>399</b>			

According to Table 4.95, the opinions of health tourists, with different levels of education, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management are different, without the statistical significance of 0.05.

**Table 4.96** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management, Categorized According to Level of Education

Source of variation	SS	df	MS	F	Sig.
Between groups	0.307	4	0.077	1.597	.174
Errors	18.968	395	0.048		
<b>Total</b>	<b>19.275</b>	<b>399</b>			

According to Table 4.96, the opinions of health tourists, with different levels of education, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management are different, without the statistical significance of 0.05.

**Table 4.97** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Level of Education

<b>Source of variation</b>	<b>SS</b>	<b>df</b>	<b>MS</b>	<b>F</b>	<b>Sig.</b>
Between groups	0.723	4	0.181	4.069	.003*
Errors	17.553	395	0.044		
<b>Total</b>	<b>18.276</b>	<b>399</b>			

According to Table 4.97, the opinions of health tourists, with different levels of education, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.98.

**Table 4.98** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Level of Education

level of education		Lower than High school	High school	Diploma	Bachelor's degree	Higher than bachelor's degree
		3.78	3.96	3.93	3.94	3.91
Lower than High school/Vocational school	3.78	-	-0.18*	-0.15*	-0.16*	-0.13*
High school/Vocational school	3.96		-	0.03	0.02	0.05
Diploma/High vocational school	3.93			-	-0.01	0.02
Bachelor's degree	3.94				-	0.03
Higher than bachelor's degree	3.91					-

**Note:** \* With the level of statistical significance at .05

According to Table 4.98, the opinions of health tourists, having education lower than high school/vocational school, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different from the opinions of tourists who have other levels of education, with the statistical significance of .05.

**Table 4.99** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals for Every Aspect, Categorized According to Level of Education

Source of variation	SS	df	MS	F	Sig.
Between groups	0.088	4	0.022	0.985	.415
Errors	8.788	395	0.022		
<b>Total</b>	<b>8.876</b>	<b>399</b>			

According to Table 4.99, the opinions of health tourists, with different levels of education, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect are different, without the statistical significance of 0.05.

5) The results of the analysis and comparison of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to occupation, Table 4.100-4.106.

**Table 4.100** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management, Categorized According to Occupation

Source of variation	SS	df	MS	F	Sig.
Between groups	0.257	5	0.051	1.268	.277
Errors	15.962	394	0.041		
<b>Total</b>	<b>16.219</b>	<b>399</b>			

According to Table 4.100, the opinions of health tourists, having different occupation, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management are different, without the statistical significance of 0.05.

**Table 4.101** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Information Flow Management, Categorized According to Occupation

Source of variation	SS	df	MS	F	Sig.
Between groups	0.333	5	0.067	1.496	.190
Errors	17.536	394	0.045		
<b>Total</b>	<b>17.869</b>	<b>399</b>			

According to Table 4.101, the opinions of health tourists, having different occupation, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management are different, without the statistical significance of 0.05.

**Table 4.102** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Financial Flow Management, Categorized According to Occupation

<b>Source of variation</b>	<b>SS</b>	<b>df</b>	<b>MS</b>	<b>F</b>	<b>Sig.</b>
Between groups	0.276	5	0.055	1.644	.147
Errors	13.245	394	0.034		
<b>Total</b>	<b>13.521</b>	<b>399</b>			

According to Table 4.102, the opinions of health tourists, having different occupation, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management are different, without the statistical significance of 0.05.

**Table 4.103** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management, Categorized According to Occupation

Source of variation	SS	df	MS	F	Sig.
Between groups	0.112	5	0.022	0.462	.805
Errors	19.163	394	0.049		
<b>Total</b>	<b>19.275</b>	<b>399</b>			

According to Table 4.103, the opinions of health tourists, having different occupations, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management are different, without the statistical significance of 0.05.

**Table 4.104** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Occupation

Source of variation	SS	df	MS	F	Sig.
Between groups	0.629	5	0.126	2.807	.017*
Errors	17.648	394	0.045		
<b>Total</b>	<b>18.277</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05



According to Table 4.104, the opinions of health tourists, having different occupations, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.105.

**Table 4.105** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Occupation

Occupation	$\bar{X}$	Government	State	Private	Trader/Business	Student/College	Others
		officer/government employee	enterprise employee	enterprise employee	owner	student	
		3.93	3.93	3.93	3.97	3.82	3.93
Government officer/government employee	3.93	-	0.00	0.00	-0.04	0.11*	0.00
State enterprise employee	3.93		-	0.00	-0.04	0.11*	0.00
Private enterprise employee	3.93			-	-0.04	0.11*	0.00
Trader/Business owner	3.97				-	0.15*	0.04
Student/College student	3.82					-	-0.11*
Others	3.93						-

**Note:** \* With the level of statistical significance at .05

According to Table 4.105, the opinions of health tourists, who are Student/College students and have used services in Thai traditional medicine promoting hospitals, on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different from the opinions of tourists who work as a government officer/government employee, a state enterprise employee, a private enterprise employee, a trader/business owner, and other occupation, with the statistical significance of .05.

**Table 4.106** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals for Every Aspect, Categorized According to Occupation

Source of variation	SS	df	MS	F	Sig.
Between groups	0.081	5	0.016	0.726	.604
Errors	8.795	394	0.022		
<b>Total</b>	<b>8.876</b>	<b>399</b>			

According to Table 4.106, the opinions of health tourists, having different occupation, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect are different, without the statistical significance of 0.05.

6) The results of the analysis and comparison of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to monthly income, Table 4.107-4.114.

**Table 4.107** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management, Categorized According to Monthly Income

<b>Source of variation</b>	<b>SS</b>	<b>df</b>	<b>MS</b>	<b>F</b>	<b>Sig.</b>
Between groups	0.158	3	0.053	1.300	.274
Errors	16.061	396	0.041		
<b>Total</b>	<b>16.219</b>	<b>399</b>			

According to Table 4.107, the opinions of health tourists who have different monthly income and have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management are different, without the statistical significance of 0.05.

**Table 4.108** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Information Flow Management, Categorized According to Monthly Income

Source of variation	SS	df	MS	F	Sig.
Between groups	0.274	3	0.091	2.056	.106
Errors	17.595	396	0.044		
<b>Total</b>	<b>17.869</b>	<b>399</b>			

According to Table 4.108, the opinions of tourists who have different monthly income on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management are different, without the statistical significance of 0.05.

**Table 4.109** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Financial Flow Management, Categorized According to Monthly Income

Source of variation	SS	df	MS	F	Sig.
Between groups	0.163	3	0.054	1.609	.187
Errors	13.359	396	0.034		
<b>Total</b>	<b>13.522</b>	<b>399</b>			

According to Table 4.109, the opinions of health tourists who have different monthly income and have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management are different, without the statistical significance of 0.05.

**Table 4.110** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management, Categorized According to Monthly Income

Source of variation	SS	df	MS	F	Sig.
Between groups	0.477	3	0.159	3.350	.019*
Errors	18.798	396	0.047		
<b>Total</b>	<b>19.275</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.110, the opinions of health tourists who have different monthly income and have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management are different, with the statistical significance of .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.109.

**Table 4.111** Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management, Categorized According to Monthly Income

Monthly income	$\bar{X}$	Below or equal to	15,001 - 25,000	25,001 - 35,000	Over 35,001 baht
		15,000 baht	baht	baht	
		3.93	3.83	3.83	3.82
Below or equal to 15,000 baht	3.93	-	0.10*	0.10*	0.11*
15,001 - 25,000 baht	3.83		-	0.00	0.01
25,001 - 35,000 baht	3.83			-	0.01
Over 35,001 baht	3.82				-

**Note:** \*With the level of statistical significance at .05

According to Table 4.111, the opinions of health tourists, with monthly income below or equal to 15,000, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management are different from the opinions of tourists who have other levels of monthly income, with the statistical significance of .05.

**Table 4.112** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Monthly Income

Source of variation	SS	df	MS	F	Sig.
Between groups	0.377	3	0.126	2.783	.041*
Errors	17.899	396	0.045		
<b>Total</b>	<b>18.277</b>	<b>399</b>			

**Note:** \* With the level of statistical significance at .05

According to Table 4.112, the opinions of health tourists who have different monthly incomes and have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different, with the level of statistical significance at .05. Therefore, pairwise comparisons of means (LSD) must be tested, as indicated in Table 4.113.



**Table 4.113** Indicating the Results of Pairwise Comparisons of Means (LSD) of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to Monthly Income

Monthly income	$\bar{X}$	Below or equal to	15,001 - 25,000	25,001 - 35,000	Over 35,001 baht
		15,000 baht	baht	baht	
		3.92	3.88	3.95	3.95
Below or equal to 15,000 baht	3.92	-	0.04	-0.03	-0.03
15,001 - 25,000 baht	3.88		-	-0.07*	-0.07*
25,001 - 35,000 baht	3.95			-	0.00
Over 35,001 baht	3.95				-

**Note:** \*With the level of statistical significance at .05

According to Table 4.113, the opinions of health tourists who have monthly income of 15,001-25,000 and have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different from the opinions of tourists who have monthly income of 25,001-35,000 baht and more than 35,001 baht, with the statistical significance of .05.

**Table 4.114** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals for Every Aspect, Categorized According to Monthly Income

Source of variation	SS	df	MS	F	Sig.
Between groups	0.115	3	0.038	1.730	.160
Errors	8.761	396	0.022		
<b>Total</b>	<b>8.876</b>	<b>399</b>			

According to Table 4.114, the opinions of health tourists who have different monthly incomes and have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect are different, without the statistical significance of 0.05.

7) The results of the analysis and comparison of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to experiences in using health tourism services, as indicated in Table 4.115.

**Table 4.115** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management in Terms of Physical Flow Management, Information Flow Management, Financial Flow Management, Service Process Flow Management, and Service Quality for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Experiences in Using Health Tourism Services

<b>The assessment of the efficiency</b>	<b>experiences in using health tourism services</b>	<b>n</b>	$\bar{X}$	<b>S.D.</b>	<b>t</b>	<b>Sig</b>
1. In terms of physical flow management	Have used the services	243	3.69	0.20	1.902	.058
	First time using the services	157	3.65	0.20		
2. In terms of information flow management	Have used the services	243	3.58	0.22	1.794	.074
	First time using the services	157	3.54	0.19		
3. In terms of financial flow management	Have used the services	243	3.89	0.18	0.277	.782
	First time using the services	157	3.88	0.19		
4. In terms of service process flow management	Have used the services	243	3.86	0.23	2.130	.034*
	First time using the services	157	3.81	0.19		
	First time using the services					
5. In terms of service quality	Have used the services	243	3.93	0.22	0.823	.411
	First time using the services	157	3.91	0.21		

**Table 4.115** (Continued)

<b>The assessment of the efficiency</b>	experiences in using health tourism services	n	$\bar{X}$	S.D.	t	Sig
<b>for every aspect</b>	<b>Have used the services</b>	<b>243</b>	<b>3.77</b>	<b>0.16</b>	<b>1.956</b>	<b>.051</b>
	<b>First time using the services</b>	<b>157</b>	<b>3.74</b>	<b>0.13</b>		

**Note:** \* With the level of statistical significance at .05

According to Table 4.115, the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals many times and for the first time on the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, overall, are different, without the statistical significance of 0.05. When each aspect/item is considered, it is discovered that the opinions between tourists who have used the services many times and those who are the a first-time user are different in terms of service process flow management, with the statistical significance of .05.

8) The results of the analysis and comparison of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to the main purpose of using the services, Table 4.116-4.121.

**Table 4.116** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management, Categorized According to the Main Purpose of Using the Services

<b>Source of variation</b>	<b>SS</b>	<b>df</b>	<b>MS</b>	<b>F</b>	<b>Sig.</b>
Between groups	0.465	8	0.058	1.443	.177
Errors	15.754	391	0.040		
<b>Total</b>	<b>16.219</b>	<b>399</b>			

According to Table 4.116, the opinions of health tourists, with different main purposes of using the services, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management are different, without the statistical significance of 0.05.

**Table 4.117** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Information Flow Management, Categorized According to the Main Purpose of Using the Services

<b>Source of variation</b>	<b>SS</b>	<b>df</b>	<b>MS</b>	<b>F</b>	<b>Sig.</b>
Between groups	0.211	8	0.026	0.585	.790
Errors	17.657	391	0.045		
<b>Total</b>	<b>17.868</b>	<b>399</b>			

According to Table 4.117, the opinions of health tourists, with different main purposes of using the services, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management are different, without the statistical significance of 0.05.

**Table 4.118** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Financial Flow Management, Categorized According to the Main Purpose of Using the Services

Source of variation	SS	df	MS	F	Sig.
Between groups	0.219	8	0.027	0.804	.599
Errors	13.303	391	0.034		
<b>Total</b>	<b>13.522</b>	<b>399</b>			

According to Table 4.118, the opinions of health tourists, with different main purposes of using the services, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management are different, without the statistical significance of 0.05.

**Table 4.119** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management, Categorized According to the Main Purpose of Using the Services

Source of variation	SS	df	MS	F	Sig.
Between groups	0.543	8	0.068	1.416	.188
Errors	18.732	391	0.048		
<b>Total</b>	<b>19.275</b>	<b>399</b>			

According to Table 4.119, the opinions of health tourists, with different main purposes of using the services, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management are different, without the statistical significance of 0.05.

**Table 4.120** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality, Categorized According to the Main Purpose of Using the Services

Source of variation	SS	df	MS	F	Sig.
Between groups	0.590	8	0.074	1.630	.115
Errors	17.687	391	0.045		
<b>Total</b>	<b>18.277</b>	<b>399</b>			

According to Table 4.120, the opinions of health tourists, with different main purposes of using the services, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality are different, without the statistical significance of 0.05.

**Table 4.121** Indicating the Results of the Analysis and Comparison of the Opinions of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals on the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals for Every Aspect, Categorized According to the Main Purpose of Using the Services

Source of variation	SS	df	MS	F	Sig.
Between groups	0.159	8	0.020	0.892	.523
Errors	8.717	391	0.022		
<b>Total</b>	<b>8.876</b>	<b>399</b>			

According to Table 4.121, the opinions of health tourists, with different main purposes of using the services, who have used services in Thai traditional medicine promoting hospitals on the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect are different, without the statistical significance of 0.05.



4.3.2.3 Hypothesis 3: Efficiency of logistics management processes for health tourism in Thai traditional medicine promoting hospitals relates to the effectiveness of logistics management processes for health tourism in Thai traditional medicine promoting hospitals. The statistics used in the hypothesis testing was the Pearson Product-Moment Correlation Coefficient, which was used as a method to estimate the relation between variables or 2 sets of data, and then the results are presented in tables, along with explanation.

1) The results of the analysis conducted to find the relationship between the efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to physical flow management, as indicated in Table 4.122.

**Table 4.122** Indicating the Value of Correlation between the Efficiency and the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Physical Flow Management

<b>Efficiency</b>	<b>Effectiveness</b>	<b>r</b>	<b>Sig. (2-tailed)</b>	<b>Level of relation</b>
1. Provision of parking spaces in the hospital	1. Provision of parking spaces in the hospital	.936	.000*	High
2. Provision of pathways to the health service building	2. Provision of pathways to the health service building	.952	.000*	High
3. Provision of a reception and registration area	3. Provision of a reception and registration area	.884	.000*	High
4. Provision of a waiting area	4. Provision of a waiting area	.921	.000*	High
5. Provision of a scanning area	5. Provision of a scanning area	.962	.000*	High
6. Provision of changing rooms	6. Provision of changing rooms	.954	.000*	High
7. Provision of a health service area	7. Provision of a health service area	.967	.000*	High
8. Provision of shower rooms and toilets	8. Provision of shower rooms and toilets	.911	.000*	High
9. Provision of a payment area	9. Provision of a payment area	.916	.000*	High

**Table 4.122** (Continued)

<b>Efficiency</b>	<b>Effectiveness</b>	<b>r</b>	<b>Sig. (2-tailed)</b>	<b>Level of relation</b>
10. Provision of an area for giving advice and guidance related to health	10. Provision of an area for giving advice and guidance related to health	.975	.000*	High
11. Provision of an area for resting	11. Provision of an area for resting	.922	.000*	High
<b>Total efficiency</b>	<b>Total effectiveness</b>	<b>.937</b>	<b>.000*</b>	<b>High</b>

**Note:** \* With the level of statistical significance at .05

According to Table 4.122, as for the results of the analysis of the relationship between the assessment of the efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management, overall, by employing the statistics: Pearson Product Moment Correlation Coefficient, it is found that the assessment of the overall efficiency in terms of physical flow management and the overall effectiveness in terms of physical flow management of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals have the Sig. (2-tailed) of .000. This means that the assessment of the overall efficiency in terms of physical flow management of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals have a positive relationship with the assessment of the overall effectiveness in terms of physical flow management of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, with the statistical significance of .05. And the value of correlation (r) is equal to .937, which indicates that a relationship is at a high level and consistent. When each item is considered, it shows that 1) The efficiency regarding provision of parking spaces in the hospital has a positive relationship with the effectiveness of provision of parking spaces in the hospital, with the statistical significance of .05, and the value of correlation (r) is equal to .936, which indicates a relationship that is at a high level and consistent. 2) The efficiency regarding provision of pathways to the health service building has a positive relationship with the effectiveness of provision of pathways to the health service building, with the statistical significance of .05, and the value of correlation (r) is equal to .952, which indicates a relationship that is at a high level and consistent. 3) The efficiency regarding provision of a reception and registration area has a positive relationship with the effectiveness of provision of a reception and registration area, with the statistical significance of .05, and the value of correlation (r) is equal to .884, which indicates a relationship that is at a high level and consistent. 4) The efficiency regarding provision of a waiting area has a positive relationship with the effectiveness of provision of a waiting area, with the statistical significance of .05, and the value of correlation (r) is equal to .921, which indicates a relationship that is at a high level and consistent. 5) The efficiency regarding provision of a scanning area has a positive

relationship with the effectiveness of provision of a scanning area, with the statistical significance of .05, and the value of correlation (r) is equal to .962, which indicates a relationship that is at a high level and consistent. 6) The efficiency regarding provision of changing rooms has a positive relationship with the effectiveness of provision of changing rooms, with the statistical significance of .05, and the value of correlation (r) is equal to .954, which indicates a relationship that is at a high level and consistent. 7) The efficiency regarding provision of a health service area has a positive relationship with the effectiveness of provision of a health service area, with the statistical significance of .05, and the value of correlation (r) is equal to .967, which indicates a relationship that is at a high level and consistent. 8) The efficiency regarding provision of shower rooms and toilets has a positive relationship with the effectiveness of provision of shower rooms and toilets, with the statistical significance of .05, and the value of correlation (r) is equal to .911, which indicates a relationship that is at a high level and consistent. 9) The efficiency regarding provision of a payment area has a positive relationship with the effectiveness of provision of a payment area, with the statistical significance of .05, and the value of correlation (r) is equal to .916, which indicates a relationship that is at a high level and consistent. 10) The efficiency regarding provision of an area for giving advice and guidance related to health has a positive relationship with the effectiveness of provision of an area for giving advice and guidance related to health, with the statistical significance of .05, and the value of correlation (r) is equal to .975, which indicates a relationship that is at a high level and consistent. 11) The efficiency regarding provision of an area for resting has a positive relationship with the effectiveness of provision of an area for resting, with the statistical significance of .05, and the value of correlation (r) is equal to .922, which indicates a relationship that is at a high level and consistent.

2) The results of the analysis conducted to find the relationship between the efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to information flow management, as indicated in Table 4.123

**Table 4.123** Indicating the Value of Correlation of the Efficiency and the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Information Flow Management

<b>Efficiency</b>	<b>Effectiveness</b>	<b>r</b>	<b>Sig. (2-tailed)</b>	<b>Level of relation</b>
1. Provision of directional signs towards the health service building	1. Provision of directional signs towards the health service building	.436	.000*	Mediocre
2. Provision of a sign indicating the service area in the health service building	2. Provision of a sign indicating the service area in the health service building	.498	.000*	Mediocre
3. Recommendation of products and services in the reception and registration area	3. Recommendation of products and services in the reception and registration area	.926	.000*	High
4. Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area	4. Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area	.667	.000*	Relatively high
5. Storing and forwarding health information of the service recipients or tourists in the screening area	5. Storing and forwarding health information of the service recipients or tourists in the screening area	.989	.000*	High

**Table 4.123** (Continued)

<b>Efficiency</b>	<b>Effectiveness</b>	<b>r</b>	<b>Sig. (2-tailed)</b>	<b>Level of relation</b>
6. Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area	6. Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area	.994	.000*	High
7. Storing and forwarding payment information in the payment area	7. Storing and forwarding payment information in the payment area	.875	.000*	High
8. Provision of advice related to health in the area for health advice and guidance	8. Provision of advice related to health in the area for health advice and guidance	.660	.000*	Relatively high
9. Provision of health information and knowledge in the areas for resting	9. Provision of health information and knowledge in the areas for resting	.937	.000*	High
<b>Total efficiency</b>	<b>Total effectiveness</b>	<b>.881</b>	<b>.000*</b>	<b>High</b>

**Note:** \* With the level of statistical significance at .05

According to Table 4.123, as for the results of the analysis of the relationship between the assessment of the efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management, overall, by employing the statistics: Pearson Product Moment Correlation Coefficient, it is found that the assessment of the overall efficiency in terms of information flow management and the overall effectiveness in terms of information flow management of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals has the Sig. (2-tailed) of .000, which means that the assessment of the overall efficiency in terms of information flow management of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals has a positive relationship with the assessment of the overall effectiveness in terms of information flow management of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .881, which indicates a relationship that is at a high level and consistent. When each item is considered, it shows that 1) The efficiency regarding provision of directional signs towards the health service building has a positive relationship with the effectiveness of provision of directional signs towards the health service building, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .436, which indicates a relationship that is at a mediocre level and in the same direction. 2) The efficiency regarding provision of a sign indicating the service area in the health service building has a positive relationship with the effectiveness of provision of a sign indicating the service area in the health service building, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .498, which indicates a relationship that is at a mediocre level and in the same direction. 3) The efficiency regarding recommendation of products and services in the reception and registration area has a positive relationship with the effectiveness of recommendation of products and services in the reception and registration area, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .926, which indicates a relationship that is at a high level and consistent. 4) The efficiency of storing and forwarding the information and details of the service recipients or tourists in the reception and



registration area has a positive relationship with the effectiveness of storing and forwarding the information and details of the service recipients or tourists in the reception and registration area, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .667, which indicates that a relationship is at a relatively high level and consistent. 5) The efficiency of storing and forwarding health information of the service recipients or tourists in the screening area has a positive relationship with the effectiveness of storing and forwarding health information of the service recipients or tourists in the screening area, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .989, which indicates a relationship that is at a high level and consistent. 6) The efficiency of storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area has a positive relationship with the effectiveness of storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .994, which indicates a relationship that is at a high level and consistent. 7) The efficiency of storing and forwarding payment information in the payment area has a positive with the effectiveness of storing and forwarding payment information in the payment area, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .875, which indicates a relationship that is at a high level and consistent. 8) The efficiency regarding provision of advice related to health in the area for health advice and guidance has a positive relationship with the effectiveness of provision of advice related to health in the area for health advice and guidance, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .660, which indicates that a relationship is at a somewhat high level and consistent. 9) The efficiency regarding provision of health information and knowledge in the areas for resting has a positive relationship with the effectiveness of provision of health information and knowledge in the areas for resting, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .937, which indicates a relationship that is at a high level and consistent.

3) The results of the analysis conducted to find the relationship between the efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to in terms of financial flow management, as indicated in Table 4.124.

**Table 4.124** Indicating the Value of Correlation of Tourists' Opinions on the Assessment of the Efficiency and the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Terms of Financial Flow Management

<b>Efficiency</b>	<b>Effectiveness</b>	<b>r</b>	<b>Sig. (2-tailed)</b>	<b>Level of relation</b>
1. Preparation of equipment and tools for receiving payments	1. Preparation of equipment and tools for receiving payments	.781	.000*	Relatively high
2. Payment channel management	2. Payment channel management	.908	.000*	High
3. Informing the details of service fees and privileges to the service recipients or tourists	3. Informing the details of service fees and privileges to the service recipients or tourists	.776	.000*	Relatively high
4. Process of receiving payment	4. Process of receiving payment	.897	.000*	High
5. Issuing a document or proof of payment	5. Issuing a document or proof of payment	.839	.000*	High
<b>Total efficiency</b>	<b>Total effectiveness</b>	<b>.823</b>	<b>.000*</b>	<b>High</b>

**Note:** \* With the level of statistical significance at .05

According to Table 4.124, as for the results of the analysis of the relationship between the assessment of the efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management, overall, by employing the statistics: Pearson Product Moment Correlation Coefficient, it is found that the assessment of the overall efficiency in terms of financial flow management and the overall effectiveness in terms of financial flow management of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals has the Sig. (2-tailed) of .000, which means that the assessment of the overall efficiency in terms of financial flow management of the process of logistics management for health tourism in Thai traditional medicine promoting hospital has a positive relationship with the assessment of the overall effectiveness in terms of financial flow management of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .823, which indicates a relationship that is at a high level and consistent. When each item is considered, it shows that 1) The efficiency of preparation of equipment and tools for receiving payments has a positive relationship with the effectiveness of preparation of equipment and tools for receiving payments, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .781, which indicates that a relationship is at a relatively high level and consistent. 2) The efficiency of payment channel management has a positive relationship with the effectiveness of payment channel management, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .908, which indicates a relationship that is at a high level and consistent. 3) The efficiency of informing the details of service fees and privileges to the service recipients or tourists has a positive relationship with the effectiveness of Informing the details of service fees and privileges to the service recipients or tourists, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .776, which indicates that a relationship is at a relatively high level and consistent. 4) The efficiency of process of receiving payment has a positive relationship with the effectiveness of process of receiving payment, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .897, which indicates a relationship that is at a high level and consistent.

5) The efficiency of issuing a document or proof of payment has a positive relationship with the effectiveness of issuing a document or proof of payment, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .839, which indicates a relationship that is at a high level and consistent.

4) The results of the analysis conducted to find the relationship between the efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, categorized according to service process flow management, as indicated in Table 4.125.

**Table 4.125** Indicating the Value of Correlation between the Efficiency and the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals, Categorized According to Service Process Flow Management

<b>Efficiency</b>	<b>Effectiveness</b>	<b>r</b>	<b>Sig. (2-tailed)</b>	<b>Level of relation</b>
1. The reception of the service recipients or tourists	1. The reception of the service recipients or tourists	.663	.000*	Relatively high
2. Screening of the service recipients or tourists	2. Screening of the service recipients or tourists	.796	.000*	Relatively high
3. Preparation of the service recipients or tourists before the health service is given	3. Preparation of the service recipients or tourists before the health service is given	.549	.000*	Mediocre
4. Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists	4. Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists	.585	.000*	Mediocre
5. Health services for the service recipients or tourists	5. Health services for the service recipients or tourists	.815	.000*	High

**Table 4.125** (Continued)

<b>Efficiency</b>	<b>Effectiveness</b>	<b>r</b>	<b>Sig. (2-tailed)</b>	<b>Level of relation</b>
6. The services before the service recipients or tourists leave	6. The services before the service recipients or tourists leave	.850	.000*	High
<b>Total efficiency</b>	<b>Total effectiveness</b>	<b>.796</b>	<b>.000*</b>	<b>Relatively high</b>

**Note:** \* With the level of statistical significance at .05

According to Table 4.125, as for the results of the analysis of the relationship between the assessment of the efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management, overall, by employing the statistics: Pearson Product Moment Correlation Coefficient, it is found that the assessment of the overall efficiency in terms of service process flow management and the overall effectiveness in terms of service process flow management of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals has the Sig. (2-tailed) of .000, which means that the assessment of the overall efficiency in terms of service process flow management of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals has a positive relationship with the assessment of the overall effectiveness in terms of service process flow management of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .796, which indicates that a relationship is at a relatively high level and consistent. When each item is considered, it shows that 1) The efficiency of the reception of the service recipients or tourists has a positive relationship with the effectiveness of the reception of the service recipients or tourists, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .663, which indicates a relationship that is at a relatively high level and consistent. 2) The efficiency of screening of the service recipients or tourists has a positive relationship with the effectiveness of screening of the service recipients or tourists, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .796, which indicates a relationship that is at a relatively high level and consistent. 3) The efficiency of preparation of the service recipients or tourists before the health service is given has a positive relationship with the effectiveness of preparation of the service recipients or tourists before the health service is given, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .549, which indicates a relationship that is at a mediocre level and in the same direction. 4) The efficiency of preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists has a positive relationship with the effectiveness of



preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .585, which indicates a relationship that is at a mediocre level and in the same direction. 5) The efficiency of health services for the service recipients or tourists has a positive relationship with the effectiveness of health services for the service recipients or tourists, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .815, which indicates a relationship that is at a high level and consistent. 6) The efficiency of the services before the service recipients or tourists leave has a positive relationship with the effectiveness of the services before the service recipients or tourists leave, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .850, which indicates a relationship that is at a high level and consistent.

5) The results of the analysis conducted to find the relationship between the efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality, as indicated in Table 4.126.

**Table 4.126** Indicating the Value of Correlation of Tourists' Opinions on the Assessment of the Efficiency and the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality

<b>Efficiency</b>	<b>Effectiveness</b>	<b>r</b>	<b>Sig. (2-tailed)</b>	<b>Level of relation</b>
1. Convenience when being serviced	1. Convenience when being serviced	.613	.000*	Relatively high
2. Innovation and technology in the service	2. Innovation and technology in the service	.737	.000*	Relatively high
3. Accuracy and completeness of the service	3. Accuracy and completeness of the service	.777	.000*	Relatively high
4. Reliability of the service	4. Reliability of the service	.686	.000*	Relatively high
5. Responsiveness to the needs of the service recipients	5. Responsiveness to the needs of the service recipients	.674	.000*	Relatively high
6. Knowledge and capabilities in the service	6. Knowledge and capabilities in the service	.790	.000*	Relatively high
7. Safety in providing the service	7. Safety in providing the service	.827	.000*	High
8. The speed of the service	8. The speed of the service	.437	.000*	Mediocre

**Table 4.126** (Continued)

<b>Efficiency</b>	<b>Effectiveness</b>	<b>r</b>	<b>Sig. (2-tailed)</b>	<b>Level of relation</b>
9. Attentiveness when providing the service	9. Attentiveness when providing the service	.747	.000*	Relatively high
<b>Total efficiency</b>	<b>Total effectiveness</b>	<b>.822</b>	<b>.000*</b>	<b>High</b>

**Note:** \* With the level of statistical significance at .05

According to Table 4.126, as for the results of the analysis of the relationship between the assessment of the efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality, overall, by employing the statistics: Pearson Product Moment Correlation Coefficient, it is found that the assessment of the overall efficiency in terms of service quality and the overall effectiveness in terms of information flow management of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals has the Sig. (2-tailed) of .000, which means that the assessment of the overall efficiency in terms of service quality of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals has a positive relationship with the assessment of the overall effectiveness in terms of service quality of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .822, which indicates a relationship that is at a high level and consistent. When each item is considered, it shows that 1) The efficiency of convenience when being serviced has a positive relationship with the effectiveness of convenience when being serviced, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .613, which indicates a relationship that is at a relatively high level and consistent. 2) The efficiency of innovation and technology in the service has a positive relationship with the effectiveness of innovation and technology in the service, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .737, which indicates a relationship that is at a relatively high level and consistent. 3) The efficiency of accuracy and completeness of the service has a positive relationship with the effectiveness of accuracy and completeness of the service, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .777, which indicates a relationship that is at a relatively high level and consistent. 4) The efficiency of reliability of the service has a positive relationship with the effectiveness of reliability of the service, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .686, which indicates a relationship that is at a relatively high level and consistent. 5) The efficiency of responsiveness to the needs of the service recipients has a positive relationship with the effectiveness of responsiveness to the needs of the

service recipients, with the statistical significance of .05, and the value of correlation (r) is equal to .674, which indicates a relationship that is at a relatively high level and consistent. 6) The efficiency of knowledge and capabilities in the service has a positive relationship with the effectiveness of knowledge and capabilities in the service, with the statistical significance of .05, and the value of correlation (r) is equal to .790, which indicates a relationship that is at a relatively high level and consistent. 7) The efficiency of safety in providing the service has a positive relationship with the effectiveness of safety in providing the service, with the statistical significance of .05, and the value of correlation (r) is equal to .827, which indicates a relationship that is at a high level and consistent. 8) The efficiency of the speed of the service has a positive relationship with the effectiveness of the speed of the service, with the statistical significance of .05, and the value of correlation (r) is equal to .437, which indicates a relationship that is at a mediocre level and in the same direction. 9) The efficiency of attentiveness when providing the service has a positive relationship with the effectiveness of attentiveness when providing the service, with the statistical significance of .05, and the value of correlation (r) is equal to .747, which indicates a relationship that is at a relatively high level and consistent.

6) The results of the analysis conducted to find the relationship between the efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect, as indicated in Table 4.127.

**Table 4.127** Indicating the Value of Correlation of Tourists' Opinion on the Assessment of the Efficiency and the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals for Every Aspect

<b>The efficiency and the effectiveness of the process of logistics management</b>	<b>r</b>	<b>Sig. (2-tailed)</b>	<b>Level of relationship</b>
1. In terms of physical flow management	.937	.000*	High
2. In terms of information flow management	.881	.000*	High
3. In terms of financial flow management	.823	.000*	High
4. In terms of service process flow management	.796	.000*	Relatively high
5. In terms of service quality	.822	.000*	High
<b>For every aspect</b>	<b>.940</b>	<b>.000*</b>	<b>High</b>

**Note:** \* With the level of statistical significance at .05

According to Table 4.127, as for the results of the analysis of the relationship between the assessment of the efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect by employing the statistics: Pearson Product Moment Correlation Coefficient, it is found that the assessment of the efficiency for every aspect and the effectiveness for every aspect of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals has the Sig.(2-tailed) of .000, which means that the assessment of the efficiency for every aspect of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals has a positive relationship with the assessment of the effectiveness for every aspect of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, with the statistical significance of .05, and the value of correlation (r) is equal to .940, which indicates a relationship that is at a high level and consistent. When each aspect/item is considered, it is discovered that 1) The efficiency of physical flow management has a

positive relationship with the effectiveness of physical flow management, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .937, which indicates a relationship that is at a high level and consistent. 2) The efficiency of information flow management has a positive relationship with the effectiveness of information flow management, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .881, which indicates a relationship that is at a high level and consistent. 3) The efficiency in terms of financial flow management has a positive relationship with the effectiveness in terms of financial flow management, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .823, which indicates a relationship that is at a high level and consistent. 4) The efficiency in terms of service process flow management has a positive relationship with the effectiveness in terms of service process flow management, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .796 which indicates a relationship that is at a somewhat high level and consistent. 5) The efficiency in terms of service quality has a positive relationship with the effectiveness in terms of service flow management, with the statistical significance of .05, and the value of correlation ( $r$ ) is equal to .822, which indicates a relationship that is at a high level and consistent.

4.3.2.4 Hypothesis 4: Factors related to the implementation of health promoting policies in Thai traditional medicine promoting hospitals influence the efficiency of logistics management processes for health tourism in Thai traditional medicine promoting hospitals, the statistics employed in hypothesis testing was Multiple Regression Analysis, and results are presented in tables, with explanations.

The results of the analysis of multiple linear regression regarding factors in the implementation of the policy promoting health tourism in different aspects in Thai traditional medicine promoting hospitals that affect the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, as in Table 4.128-4.131.

**Table 4.128** Indicating the Results of the Analysis of Multiple Linear Regression Regarding Factors in the Implementation of the Policy Promoting Health Tourism in Different Aspects in Thai Traditional Medicine Promoting Hospitals that Affect the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management

Factors in the implementation of the policy promoting health tourism	Unstandardized Coefficients	Standardized Coefficients	t	Sig
	B	Bate		
(Constant)	2.554		14.181	.000*
1. In terms of the clarity of the policy	.145	.244	2.448	.015*
2. In terms of external surroundings	-.005	-.007	-0.079	.937
3. In terms of resources	-.217	-.293	-2.105	.036*
4. In terms of organizational structure	-.032	-.054	-0.734	.464
5. In terms of staff	.162	.184	2.840	.005*
6. In terms of communication	.236	.376	2.872	.004*
Adjusted $R^2 = .154$		Sig = .000		

**Note:** \* With the level of statistical significance at .05

According to Table 4.128, as for the results of the analysis of regression coefficient ( $\beta$ ) regarding the variables that affect the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management, with the statistical significance of .05, the followings are the variables that affect the efficiency, ranked in order: 1) In terms of communication, the value of coefficient is equal to .376,



which indicates a positive relationship that is at a relatively low level. 2) In terms of resources, the value of coefficient is equal to  $-.293$ , which indicates a negative relationship that is at a relatively low level. 3) In terms of the clarity of the policy, the value of coefficient is equal to  $.244$ , which indicates a positive relationship that is at a relatively low level. And 4) In terms of staff, the value of coefficient is equal to  $.182$ , which indicates a positive relationship that is at a low level.

The value of coefficient (B) of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals regarding factors in the implementation of the policy promoting health tourism in different aspects in a Thai traditional medicine promoting hospitals that affect the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management, with the statistical significance of  $.05$ , categorized according to different aspects are as follows: 1) In terms of the clarity of the policy, the value is equal to  $.145$ , which indicates that when tourists have an opinion towards factors in the implementation of the policy promoting health tourism in different aspects in Thai traditional medicine promoting hospitals in terms of the clarity of the policy, it increases by 1 point, without the influence of other variables involved, tourists will have an opinion towards the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management increasing by  $.145$  point. 2) In terms of resources, the value is equal to  $-.217$ , which indicates that when tourists have the opinion towards the factors in the implementation of the policy promoting health tourism in different aspects in Thai traditional medicine promoting hospitals in terms of resources, it increases by 1 point, without the influence of other variables involved, tourists will have the opinion towards the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management decreasing by  $.217$  point. 3) In terms of staff, the value is equal to  $.162$ . This indicates that when tourists have the opinion towards factors in the implementation of the policy promoting health tourism in different aspects in Thai traditional medicine promoting hospitals in terms of staff, it increases by 1 point without the influence of other variables involved, tourists will have the opinion towards the efficiency of the

process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management increases by .162 point. 4) In terms of communication, the value is equal to .236. This indicates that when tourists have the opinion towards factors in the implementation of the policy promoting health tourism in different aspects in Thai traditional medicine promoting hospitals in terms of communication, it increases by 1 point without the influence of other variables involved, tourists will have the opinion towards the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management increases by .236 point.

The value of Adjusted  $R^2$  is equal to .154, and the sig. is equal to .000. This means that the factors in the implementation of the policy promoting health tourism in different aspects in Thai traditional medicine promoting hospitals can explain tourists' opinions regarding the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management for the percentage of 15.4, with the statistical significance of .05.

**Table 4.129** Indicating the Results of the Analysis of Multiple Linear Regression Regarding Factors in the Implementation of the Policy Promoting Health Tourism in Different Aspects in Thai Traditional Medicine Promoting Hospitals that Affect the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Information Flow Management

Factors in the implementation of the policy promoting health tourism	Unstandardized Coefficients	Standardized Coefficients	t	Sig
	B	Bate		
(Constant)	1.556		12.078	.000*
1. In terms of the clarity of the policy,	-.016	-.030	-0.385	.700

**Table 4.129** (Continued)

Factors in the implementation of the policy promoting health tourism	Unstandardized	Standardized	t	Sig
	Coefficients B	Coefficients Bate		
2. In terms of external surroundings	.105	.165	2.240	.026*
3. In terms of resources	.326	.479	4.417	.000*
4. In terms of organizational structure	.097	.180	3.148	.002*
5. In terms of staff	.024	.030	0.586	.558
6. In terms of communication	-.034	-.060	-0.587	.558
Adjusted $R^2 = .486$				

**Note:** \* With the level of statistical significance at .05

According to Table 4.129, as for the results of the analysis of regression coefficient ( $\beta$ ) regarding the variables that affect the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management, with the statistical significance of .05, the followings are the variables that affect the efficiency, ranked in order: 1) In terms of resources, the value of coefficient is equal to .479, which indicates a positive relationship that is at a mediocre level. 2) In terms of organizational structure, the value of coefficient is equal to .180, which indicates a positive relationship that is at a low level. And 3) In terms of external surroundings, the value of coefficient is equal to .165, which indicates a positive relationship that is at a low level.

The value of coefficient (B) of the opinions of health tourists who have used services in Thai traditional medicine promoting hospitals regarding factors in the implementation of the policy promoting health tourism in different

aspects in Thai traditional medicine promoting hospitals that affect the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management, with the statistical significance of .05, categorized according to different aspects are as follows: 1) In terms of external surroundings, the value is equal to .105. This indicates that when tourists have the opinion towards factors in the implementation of the policy promoting health tourism in different aspects in Thai traditional medicine promoting hospitals in terms of external surroundings, it increases by 1 point without the influence of other variables involved, tourists will have the opinion towards the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management increases by .105 point. 2) In terms of resources, the value is equal to .326. This indicates that when tourists have the opinion towards factors in the implementation of the policy promoting health tourism in different aspects in Thai traditional medicine promoting hospitals in terms of resources, it increases by 1 point without the influence of other variables involved, tourists will have the opinion towards the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management increases by .326 point. 3) In terms of organizational structure, the value is equal to .097. This indicates that when tourists have the opinion towards factors in the implementation of the policy promoting health tourism in different aspects in Thai traditional medicine promoting hospitals in terms of organizational structure, it increases by 1 point without the influence of other variables involved, tourists will have the opinion towards the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management increases by .097 point.

The value of Adjusted  $R^2$  is equal to .486, and the Sig. is equal to .000. This means that the factors in the implementation of the policy promoting health tourism in different aspects in Thai traditional medicine promoting hospitals can explain tourists' opinions towards the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in

terms of information flow management for the percentage of 48.6, with the statistical significance of .05.

**Table 4.130** Indicating the Results of the Analysis of Multiple Linear Regression Regarding Factors in the Implementation of the Policy Promoting Health Tourism in Different Aspects in Thai Traditional Medicine Promoting Hospitals that Affect the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Financial Flow Management

Factors in the implementation of the policy promoting health tourism	Unstandardize	Standardized	t	Sig
	d Coefficients	Coefficients		
	B	Bate		
(Constant)	1.691		14.566	.000*
1. In terms of the clarity of the policy,	.026	.051	.674	.501
2. In terms of external surroundings	.004	.007	.100	.921
3. In terms of resources	.243	.387	3.654	.000*
4. In terms of organizational structure	.022	.045	.812	.418
5. In terms of staff	.255	.343	6.934	.000*
6. In terms of communication	-.002	-.004	-.040	.968
Adjusted $R^2 = .510$				

**Note:** \* With the level of statistical significance at .05

According to Table 4.130, as for the results of the analysis of regression coefficient ( $\beta$ ) regarding variables that affect the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting

hospitals in terms of financial flow management, with the statistical significance of .05, the followings are the variables that affect the efficiency, ranked in order: 1) in terms of resources, the value of coefficient is equal to .387, which indicates a positive relationship that is at a relatively low level. And 2) in terms of staff, the value of coefficient is equal to .343, which indicates a positive relationship that is at a relatively low level.

The value of coefficient (B) of tourists' opinions towards factors in the implementation of the policy promoting tourism in Thai traditional medicine promoting hospitals that affect the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management, with the statistical significance of .05, categorized according to different aspects are as follows: 1) In terms of resources, the value is equal to .243. This indicates that when tourists have an opinion towards factors in the implementation of the policy promoting tourism in Thai traditional medicine promoting hospitals in terms of resources, it increases by 1 point without the influence of other variables involved, the tourists will have an opinion towards the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management increases by .243 point. 2) In terms of staff, the value is equal to .255. This indicates that when tourists have an opinion towards factors in the implementation of the policy promoting tourism in Thai traditional medicine promoting hospitals in terms of staff, it increases by 1 point without the influence of other variables involved, the tourists will have the opinion towards the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management increases by .255 point.

The value of Adjusted  $R^2$  is equal to .510, and the sig. is equal to .000, which indicates that factors in the implementation of the policy promoting tourism in different aspects in Thai traditional medicine promoting hospitals can explain the tourists' opinion regarding the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management by a percentage of 51.0, with the statistical significance of .05.

**Table 4.131** Indicating the Results of the Analysis of Multiple Linear Regression Regarding Factors in the Implementation of the Policy Promoting Health Tourism in Different Aspects in Thai Traditional Medicine Promoting Hospitals that Affect the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management

Factors in the implementation of the policy promoting health tourism	Unstandardize	Standardized	t	Sig
	d Coefficients	Coefficients		
	B	Beta		
(Constant)	1.392		10.515*	.000
1. In terms of the clarity of the policy,	-.073	-.125	-1.688	.092
2. In terms of external surroundings	.076	.111	1.588	.113
3. In terms of resources	.445	.605	5.859*	.000
4. In terms of organizational structure	-.020	-.034	-.629	.530
5. In terms of staff	.184	.212	4.396*	.000
6. In terms of communication	.006	.010	.100	.921
Adjusted $R^2 = .534$				

**Note:** \* With the level of statistical significance at .05

According to Table 4.131, as for the results of the analysis of regression coefficient ( $\beta$ ) regarding the variables that affect the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management, with the statistical significance of .05, the followings are the variables that affect the efficiency, ranked in order: 1) In terms of resources, the value of coefficient is equal to .605, which

indicates a positive relationship that is at a relatively high level. 2) In terms of staff, the value of coefficient is equal to .212, which indicates a positive relationship that is at a relatively low level. And 3) In terms of external surroundings, the value of coefficient is equal to .181, which indicates a positive relationship that is at a low level.

The value of coefficient (B) of tourists' opinions towards factors in the implementation of the policy promoting tourism in Thai traditional medicine promoting hospitals that affect the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management, with the statistical significance of .05, categorized according to different aspects are as follows: 1) In terms of resources, the value is equal to .445. This indicates that when tourists have an opinion towards factors in the implementation of the policy promoting tourism in Thai traditional medicine promoting hospitals in terms of resources, it increases by 1 point without the influence of other variables involved, the tourists will have an opinion towards the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management increases by .445 point. 2) In terms of staff, the value is equal to .184. This indicates that when tourists have an opinion towards factors in the implementation of the policy promoting tourism in Thai traditional medicine promoting hospitals in terms of staff, it increases by 1 point without the influence of other variables involved, the tourists will have an opinion towards the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management increases by .184 point.

The value of Adjusted  $R^2$  is equal to .534, and the sig. is equal to .000, which indicates that factors in the implementation of the policy promoting tourism in different aspects in Thai traditional medicine promoting hospitals can explain the tourists' opinion regarding the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management by a percentage of 53.4, with the statistical significance of .05.



**Table 4.132** The Results of the Analysis of Multiple Linear Regression Regarding Factors in the Implementation of the Policy Promoting Health Tourism in Different Aspects in Thai Traditional Medicine Promoting Hospitals that Affect the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality

Factors in the implementation of the policy promoting health tourism	Unstandardized Coefficients	Standardized Coefficients	t	Sig
	B	Bate		
(Constant)	1.908		10.599	.000*
1. In terms of the clarity of the policy,	.172	.267	2.903	.004*
2. In terms of external surroundings	-.069	-.092	-1.062	.289
3. In terms of resources	.007	.009	.068	.946
4. In terms of organizational structure	-.058	-.090	-1.340	.181
5. In terms of staff	.305	.321	5.352	.000*
6. In terms of communication	.123	.181	1.499	.135
Adjusted $R^2 = .280$				

**Note:** \* With the level of statistical significance at .05

According to Table 4.132, as for the results of the analysis of regression coefficient ( $\beta$ ) regarding the variables that affect the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality, with the statistical significance of .05, the followings are the variables that affect the efficiency, ranked in order: 1) In terms of staff, the value of coefficient is equal to .321, which indicates a positive

relationship that is at a relatively low level. And 2) In terms of the clarity of the policy, the value of coefficient is equal to .267, which indicates a positive relationship that is at a relatively low level.

The value of coefficient (B) of tourists' opinions towards factors in the implementation of the policy promoting tourism in Thai traditional medicine promoting hospitals that affect the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality, with the statistical significance of .05, categorized according to different aspects are as follows: 1) In terms of the clarity of the policy, the value is equal to .172. This indicates that when tourists have an opinion towards factors in the implementation of the policy promoting tourism in Thai traditional medicine promoting hospitals in terms of the clarity of the policy, it increases by 1 point without the influence of other variables involved, the tourists will have the opinion towards the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality increases by .172 point. 2) In terms of staff, the value is equal to .305. This indicates that when tourists have an opinion towards factors in the implementation of the policy promoting tourism in Thai traditional medicine promoting hospitals in terms of staff, it increases by 1 point without the influence of other variables involved, the tourists will have the opinion towards the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality increases by .305 point.

The value of Adjusted  $R^2$  is equal to .280, and the sig. is equal to .000, which indicates that factors in the implementation of the policy promoting tourism in different aspects in Thai traditional medicine promoting hospitals can explain the tourists' opinion regarding the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality for a percentage of 28.0, with the statistical significance of .05.

**Table 4.133** The Results of the Analysis of Multiple Linear Regression Regarding Factors in the Implementation of the Policy Promoting Health Tourism in Different Aspects in Thai Traditional Medicine Promoting Hospitals that Affect the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals for Every Aspect

Factors in the implementation of the policy promoting health tourism	Unstandardized Coefficients	Standardized Coefficients	t	Sig
	B	Bate		
(Constant)	1.902		19.241	.000*
1. In terms of the clarity of the policy	.067	.154	2.063	.040*
2. In terms of external surroundings	.019	.036	.516	.606
3. In terms of resources	.112	.206	1.982	.048*
4. In terms of organizational structure	.000	.000	-.001	.999
5. In terms of staff	.178	.276	5.689	.000*
6. In terms of communication	.085	.185	1.895	.059
Adjusted $R^2 = .528$				

**Note:** \* With the level of statistical significance at .05

According to Table 4.133, as for the results of the analysis of regression coefficient ( $\beta$ ) regarding the variables that affect the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect, with the statistical significance of .05, the followings are the variables that affect the efficiency, ranked in order: 1) In terms of staff, the value of coefficient is equal to .276, which indicates a positive relationship

that is at a relatively low level. 2) In terms of resources, the value of coefficient is equal to .206, which indicates a positive relationship that is at a relatively low level. And 3) In terms of the clarity of the policy, the value of coefficient is equal to .154, which indicates a positive relationship that is at a low level.

The value of coefficient (B) of tourists' opinions towards factors in the implementation of the policy promoting tourism in Thai traditional medicine promoting hospitals that affect the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect, with the statistical significance of .05, categorized according to different aspects are as follows: 1) In terms of the clarity of the policy, the value is equal to .067. This indicates that when tourists have an opinion towards factors in the implementation of the policy promoting tourism in Thai traditional medicine promoting hospitals in terms of staff, it increases by 1 point without the influence of other variables involved, the tourists will have an opinion towards the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect increases by .067 point. 2) In terms of resources, the value is equal to .112. This indicates that when tourists have an opinion towards factors in the implementation of the policy promoting tourism in Thai traditional medicine promoting hospitals in terms of staff, it increases by 1 point without the influence of other variables involved, the tourists will have an opinion towards the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect increases by .112 point. 3) In terms of staff, the value is equal to .178. This indicates that when tourists have an opinion towards factors in the implementation of the policy promoting tourism in Thai traditional medicine promoting hospitals in terms of resources, it increases by 1 point without the influence of other variables involved, the tourists will have the opinion towards the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect increases by .178 point.

The value of Adjusted  $R^2$  is equal to .528, and the sig. is equal to .000, which indicates that factors in the implementation of the policy promoting tourism in different aspects in Thai traditional medicine promoting hospitals can

explain the tourists' opinion regarding the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for every aspect for a percentage of 52.8, with the statistical significance of .05.

### **4.3.3 Quantitative Research Methodology**

4.3.3.1 The results of the analysis of the data regarding the efficiency and effectiveness of the process of logistics management for health tourists in Thai tradition medicine promoting hospitals from staff who work in Thai traditional medicine promoting hospitals

#### 1) Physical flow management

##### (1) Provision of parking spaces in the hospital

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospital provides parking space for the service recipients. It can accommodate 340 vehicles per day. The parking area is divided into two areas, the parking area within the hospital which designating line is clearly marked for each car to park. There are also staff to assist with parking for the service recipients. This area can accommodate up to 135 cars per day. And another area is the parking lot at the roadside front of the hospital. It can accommodate 205 cars per day. There is separation of parking areas for motorcycles and cars. This area is sufficient for the use of the service recipients or tourists.

The hospital has enough parking spaces for people who come to use the services. It can accommodate about 340 cars, including the parking area in the hospital and the roadside parking area in front of the hospital.

There is enough parking space in the hospital. There are staff to assist in parking. The parking area for cars and motorcycles are clearly divided. There will normally be a lot of vehicles from 09.00 to 12.00 am at the parking lot. But it is still enough to meet the demand.

The hospital has managed quite a good parking lot, enough to meet the needs of the service recipients. It can fit up to 340 cars, with 135 cars in the hospital's area and 205 cars at the parking lot on the street in front of the hospital. The parking lots are clearly marked with lines.

The hospital has ample parking space for the needs of the service recipients or tourists.

The hospital has ample parking. And there are staff to facilitate parking.

### (2) Provision of pathways to the health service building

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospital provides a linking way between buildings to facilitate the service recipients or the tourists. There is a clear separation of the pedestrian area from the vehicles' lane. There are no obstacles in the walking path.

The entrance to the health service building of the hospital is well organized. No obstruction. The service recipients can walk through the building easily.

The hospital arranged a pathway between the health service building and the other buildings. The passages are separated from the car lanes for the safety of the recipients. On the way, the environment is full of plants and flowers, providing shade.

### (3) Provision of a reception and registration area

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospital has set a reception and registration area at the front of the service building for convenience of sight and access of service recipients or tourists. The reception area has a counter for inquiries. The arrangement of furniture is not obstructing the way and enough to serve the service recipients or tourists.

The hospital located it in the front of the building for convenience and making it easy to see when someone comes to contact or to use the services.

The hospital arranges reception and registration areas to be clearly visible for people who enter the health service building and has made sure that

it will not obstruct the path. The area is furnished with seating, and there are counters for those who come to receive the services.

It is arranged to be located in the first part of the building for those who come to contact to notice it clearly.

#### (4) Provision of a waiting area

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals have arranged the waiting area in a nice order, not obstructing the walkway. It is also found that the number of seats in the area would not be enough when there is a large number of service recipients at certain times.

The waiting area is well organized. There are chairs for the service recipients. However, the number of chairs may be inadequate at the time when there are a lot of service recipients.

The hospital has arranged the space in the building beautifully, so that the service recipients will feel good and relaxed when they come for the services. It also focuses on the convenience of access to various areas of services. There may be some problems with seating due to insufficient number of seats because of the higher number of tourists/patients and, sometimes, of the persons who accompany patients who are using Thai traditional medicine who also come to the waiting area to sit and kill time.

The hospital has arranged its waiting area well, proportionally, and in order, but the area may be congested when there are a lot of service recipients at the same time.

#### (5) Provision of a scanning area

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the area is well proportioned and is easy for access. The size of the area is appropriate for the number of screening staff. There are tables and chairs for the screening staff and the service recipients or tourists. There is space for the equipment and medical supplies.

The screening area has tables and chairs for staff and service recipients. There are also shelves for tools and medical equipment which are in a conveniently accessible position.

I think the screening area is adequate and appropriate in terms of size. We do not feel uncomfortable or cramped at work. The area is separated into parts to make it more convenient, and the service recipients feel the privacy.

The screening area is adjacent to the waiting area. This is easy to notice. It makes the services easily accessible. The area is well proportioned, making the guests feel private when being diagnosed or serviced.

Personally, I think the screening area is proportionate even though it is near the waiting area. The size of the area is sufficient to accommodate both the staff and the service recipients. And there are all kinds of equipment for providing services such as tables and chairs, tools, and medical equipment.

#### (6) Provision of changing rooms

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals have arranged the space to be easily accessible, it provides lockers and changing rooms for both male and female service recipients or tourists. And the rooms for women are well covered.

We have separate changing rooms for men and women in order to make the service recipients feel safe and to provide them with privacy.

For personal storage area, the hospital has lockers and separate changing rooms, which are rooms for men and women. This is to increase the confidence regarding security for our customers.

The service recipients can go to the private storage area for belongings and the changing rooms conveniently. In the private storage area, the hospital has lockers to service customers. And in the changing rooms, they are clearly proportioned, with rooms for men and women.

The hospital has separate changing rooms for men and women. The doors can be closed tightly. And they are conveniently located because of being in the same area as the health service room.



#### (7) Provision of a health service area

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals make it convenient for service recipients to access the areas from the waiting area and the screening area. The rooms are divided by the types of services such as massage room, herbal steam room, room for herbal compress, sauna room, aromatherapy massage room, bath with essential oils/soothing whirlpool or jacuzzi, etc. Inside the area, it is relaxing.

The hospital has provided health service areas by classifying service rooms according to types of services. And within the health service area, there is a relaxing atmosphere.

The health service area is classified or divided by types of services such as massage rooms, herbal steam rooms, herbal compress massage rooms, sauna rooms, nourishing jacuzzi rooms, and rooms for bathing with essential oils.

The hospital provides health service area next to the waiting area and the screening area, making it more accessible. The rooms have been divided by types of services, such as sauna rooms, massage rooms, jacuzzi rooms, etc.

For the health service area, the hospital has arranged the area to suit the use of services such as creating an atmosphere for the service recipients to feel relaxed, the arrangement of the area that is divided into rooms according to the service types, etc.

#### (8) Provision of shower rooms and toilets

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals have provided convenient access to the shower rooms and toilets from the waiting area, screening area, and health service area. There is a distinction of area between male and female recipients. There is also appropriate ventilation, and it is not damp inside the rooms. Things that have been provided are sinks, toilets, bidets, and other convenient facilities or tools, sufficiently.

The hospital provides shower rooms and toilets with adequate facilities that meet the needs such as sinks and toilets, and it separates rooms for men and women.

The shower rooms and toilets are very easy to access because they are close to the health service area. The shower rooms and toilets are well-equipped with amenities, and we also have regular cleaning.

The hospital provides separate shower rooms and toilets for male and female recipients. This service is accessible to the service recipients because it is a service area next to other service areas, such as the waiting area and the screening area as well as the health service area. In addition, the equipment and facilities are fully provided. It also has proper ventilation.

The shower rooms and toilets are clean and not damped. They have enough equipment or facilities, such as sinks, bidets, toilet paper. And the hospital separates rooms between men and women.

#### (9) Provision of a payment area

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals have their payment area near the exit. It does not block the walkway. There are counters for the staff, materials, tools, and equipment for payment services.

The payment area is convenient for access. It is located at the exit which is easy to spot.

The hospital arranges its payment area near the exit which does not block the path. This makes it easy and convenient to use.

The payment area is reasonably arranged because it is located at the exit, and there are counters for the staff who will receive payments. There is also the preparation of tools, appliances, and supplies to receive payments, making the service convenient and fast.

(10) Provision of an area for giving advice and guidance related to health

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that it is easily accessible. The hospital provides consultation desks and chairs for both Thai traditional medicine doctors and service recipients.

The hospital has set an area for health consultation. There are counseling desks and chairs for Thai traditional medicine doctors and service recipients.

After the service recipients have paid for their services, they can get health consultation. The hospital provides a health consultation area. The area is easily accessible. There are counseling desks, and the area is proportionate.

(11) Provision of an area for resting

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the area for resting of the hospital is limited due to the ongoing improvements in the hospital's area. For this, the service recipients or tourists are not as comfortable as they should be.

The hospital has arranged an area for resting for its service recipients. But the area is quite limited. Sometimes, it is not enough to support the service recipients.

The space for resting is rather constricted because at this time, the hospital is improving its internal space. This makes it difficult to access the area for resting.

The hospital has been improving its internal space. The service recipients may not be comfortable in using the area for resting. But later on, when the renovation is done, the area for resting will be spacious and comfortable.

## 2) Information flow management

### (1) Provision of directional signs towards the health service building

The results of interviews with staff in Thai traditional medicine promoting hospital reveal that the hospital has made directional signs, from various points in the hospital to the health service building. However, it is found that the number of signs is still low, and the signs have been placed discontinuously, resulting in the first-time service recipients having to ask the staff for directions because they do not know where the service building is located in the hospital.

The hospital has made signs indicating directions to the health service building. But most tourists are unable to find their way to the building. I think this is because the signs have been placed far from one another. There is discontinuity.

Most service recipients who come for the first time will ask for directions to the health service building from the staff. But only if you come here frequently, you will then remember the path. This is because there are only a few signs.

The hospital provides signs from various points in the hospital to the health service building. Visitors can walk on any route. But most of the time, if it is the first time coming here, visitors often get lost because the signs are not placed continuously, and there are only a few of them. So, there is a need to ask for directions from the staff.

I think the number of signs to the health service building is low, and they are not positioned continuously. First-time service recipients usually get lost since they do not know where the building is located.

### (2) Provision of a sign indicating the service area in the health service building

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals have signs providing locations

of service points inside the health service building. And the service recipients or visitors can see them clearly.

The signs indicating locations are installed in spots that are easily noticeable. This way, the service recipients can see them clearly.

The hospital has made signs to indicate different points of services inside the health service building. These signs are quite clear.

The service recipients can use the health service easily and can walk to the right servicing points. This is because we have clear signs for indicating servicing points that are clear and easy to see.

(3) Recommendation of products and services in the reception and registration area

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals have provided staff who will give advice on the products and services of the hospital. They also have a menu for the service recipients or tourists to look at and choose services for themselves.

Before the customers access the services, the hospital will have a health service staff who will recommend health services to the recipients in order to build basic understanding that will be the information for customers to decide the services to take.

The hospital has staff who will provide advice on health products and services, and it has a spa menu for its service recipients to read and choose the services on their own.

The hospital has a menu book for tourists to choose services on their own. In addition, the staff can provide advice and information on the hospital's services. If tourists have any questions, they can ask the staff, making it easy for the tourists to make their choices.

(4) Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that for the collection of service recipients' or tourists' medical history at the reception and registration area, the information would be recorded and stored in history files/folders, and an officer would send the files to the next service area.

For storing and forwarding service recipients' information or medical history at the reception and registration area, the hospital keeps records of the medical history in folders. Then there will be an officer who would send the files/folders to the next point.

The hospital will record customers' information at the reception and registration area before putting it in folders. And one of the staff will bring the files to the next service area.

(5) Storing and forwarding health information of the service recipients or tourists in the screening area

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that for storing screened information of service recipients or tourists at the screening area, the information would be kept in the history files which were forwarded from the reception and registration area. There will be staff who send the files to the health service area.

The folders of recipients' medical history will be forwarded from the reception and registration area. Then the screened information will be recorded on these very same files.

The hospital will record the screened data in the folders of medical history of the service recipients that were sent from the reception and registration area. Once the data has been saved, an officer will bring the history files to another service area.

(6) Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area

The results of interviews with staff in Thai traditional medicine promoting hospital reveal that for storing of information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area, it is done through files of medical history which has been sent from the screening area. And an officer will forward them to the payment area and the area for health counseling later on.

After the service recipient has received the services, we will record information related to treatment in the files what have been sent to us from the screening area. And then we send the files to the payment area.

In order to store and forward health service information, the hospital will have an officer who will send the medical records from the health service area to the payment area and the health counseling area. We will not let the service recipients send them by themselves.

The medical history files will be sent from the screening area to the health service area. The Thai traditional medicine doctor or staff will review the medical history before giving treatment or restoration of health. When we have done providing health services, we will record the information regarding health treatment and restoration into the files and send them to a staff to deliver to the next servicing point.

(7) Storing and forwarding payment information in the payment area

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that storing payment information of service recipients or tourists at the payment area is entered into the computer system after the information was sent from other service areas.

For storing payment information, the hospital will record it into the computer system.

When files of medical history have been sent to the payment area. The staff will check the data and summarize the service charges, and then they will record the information about the payment into the computer.

(8) Provision of advice related to health in the area for health advice and guidance

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals provide a Thai traditional medicine doctor who will ask for symptoms and carry out the examination after the service recipient's health has been treated, maintained, and restored by Thai traditional medicine. The doctor will also give some advice on how to take care of the health of the service recipient or tourist after he or she leaves the hospital.

The hospital will provide a Thai traditional medicine doctor for health consultation after the services have been given.

The hospital has provided health consultation area. There are Thai traditional medicine doctors who will examine and ask for symptoms related to health after treatment.

For the area of health counseling, there will be Thai traditional doctors who will check for symptoms and examine recipients' health after treatment. They will also give advice on health care at home.

After the service recipient's health has been treated, maintained, and restored, they can come to the area for health consultations where the hospital has prepared Thai traditional medicine doctors whom patients can get consultations, care instructions, self-health healing techniques, and health recovery tips to do at home.



(9) Provision of health information and knowledge in the areas for resting

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that in the area for resting in the hospitals, there are leaflets, brochures, magazines related to health provided to service recipients or tourists to read in order to get helpful info for taking care of their health.

The area of resting will feature health magazines as well as brochures that are health-related for service recipients to read.

The hospital will put leaflets, flyers and health magazines in the area for resting so that service recipients can read, and this will benefit the health of our customers.

### 3) Financial flow management

(1) Preparation of equipment and tools for receiving payments

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals have provided materials, equipment and tools for payment before service recipients or tourists come and get services. They will also ensure the preparedness and the availability of materials, equipment and tools such as computers and document printers.

Before the service recipients will pay for the services, the hospital will prepare materials, equipment and tools that will be used in receiving payment each time. This is done to prepare and increase the speed of the payment process.

The hospital will prepare equipment, tools, and materials for receiving payment, and they will check the availability and readiness of the computers and printers for the convenience and speed of the payment service.

We will check whether everything is ready, whether it is the computer, printer, supplies or materials needed to receive payment. This is to prepare ourselves for payment service.

## (2) Payment channel management

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that that the hospitals currently offer only one payment channel, cash payment. However, this channel of payment is fast.

For payment, the service recipients or tourists pay by cash.

They pay by cash.

There is only one way to pay for the services, cash payment. If you want to use credit cards, you would have to go to the center point of the hospital, this may take a little time.

## (3) Informing the details of service fees to the service recipients or tourists

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals inform the details of service fees and the benefits or privileges to all customers or tourists before proceeding to receive payment.

Before the service recipients pay for their services, the staff will inform them about the service charges or fees and benefits or privileges before the payment begins.

The hospital will always inform detailed information and all the benefits before the service recipients will pay.

The hospital will provide details on the costs or fees and benefits or privileges such as social security right, health insurance to service recipients every time.

## (4) Process of receiving payment

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals pay attention to the care, accuracy and speed in receiving money, from checking the amount of money received

from the service recipients or tourists and recording of payment information to providing proof of payment.

The payment process is fast. This is because the hospital is well prepared.

To receive payment, the hospital staff will check the information thoroughly for accuracy.

The payment is fast for every step, from receiving money, checking the amount received from the service recipients, giving change, saving the payment information, to issuing the receipt.

#### (5) Issuing a document or proof of payment

The results of interviews with staff in Thai traditional medicine promoting hospital reveal that the hospital issues proof of payment by computer system. The importance of this process is accuracy.

To issue a service receipt, the hospital will issue documents by computer system.

The hospital focuses on accuracy. Therefore, they issue documents of payment by computer system in order to prevent erroneous data.

#### 4) Service process flow management

##### (1) The reception of the service recipients or tourists

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals have staff to welcome and facilitate the service recipients or tourists, who always wear a smile on their face and are always ready to serve in order to create impression at the first time for recipients.

The hospital provides staff who will welcome guests in order to create impression.

The hospital's staff who work as receptionists will have to smile and always ready to serve.

The hospital has staff who will welcome and facilitate when the service recipients come to use the services or to ask for any advice.

(2) Screening of the service recipients or tourists

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals will screen all the service recipients. It will ask for their medical history, measure their height and weight, and diagnose symptoms, and it will assess the condition of the service recipients or tourists' health by measuring blood pressure, pulse rate, and respiration rate in order to ensure that the service recipients' and tourists' health are properly treated and restored.

The hospital provides screening for all service recipients. This will include asking for their medical history, measuring height and weight, blood pressure, pulse, and respiratory rate in order to ensure the confidence of service recipients towards the services.

For the recipients' health to be properly maintained and restored according to their physical condition, the hospital therefore has a preliminary examination for everyone before the services are provided.

When the tourists have successfully registered. It will come to the screening part in which we will have them weigh their weight, measure their height as well as their pulse and blood pressure. We will ask for their medical history as well to ensure that our health services are as effective and safe as much as possible for our service recipients.

(3) Preparation of the service recipients or tourists before the health service is given

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals provide instructions, procedures and create readiness to attend the services for each of its customer.

The hospital has staff to advise all service users about the steps in using the services.

All service recipients will need to be ready for services, such as changing clothes, showers, foot bath, and the staff will be there to guide and facilitate them.

(4) Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals will prepare the products such as compress balls, massage oil, aromatherapy oil, facial and body skin care products, and equipment including facial lasers, jacuzzi, electric bed, enough and ready for use at any time.

The hospital has prepared enough products for its clients daily, whether it is a compress ball, massage oil, aromatherapy oil or body lotion.

We have equipment and tools that can meet the needs of tourists well. These include lasers for face, electric beds, or jacuzzi, with daily check-up before use.

The hospital has tools and appliances that are ready for use and modern.

The hospital has produced some products by itself such as compress ball and skin cream. This makes it enough to meet the needs of use.

(5) Health services for the service recipients or tourists

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals provide comprehensive health services. It has products and a variety of services such as Thai massage, aromatherapy massage, foot massage, herbal steam, herbal compress, sauna, Thai herbal facial and body scrub and mask, nourishing bath with essential oil, and nourishing jacuzzi. Each type of service is based on the academic and professional principles.

The hospital provides comprehensive health services. And we can say that it is the first public hospital to provide this kind of services.

The hospital has set standards for the provision of services according to academic and professional principles. There are steps to provide health services in each category clearly.

The hospital offers a wide range of services including Thai massage, aromatherapy massage, foot massage, herbal steam, herbal compress, sauna, body scrub and mask with Thai herbs, facial treatment with Thai herbs, and nourishing bath with essential oil/nourishing jacuzzi. Each type of service meets the standards to ensure the safety and satisfaction of the service recipients.

The hospital has health services that meet the standards of the Ministry of Public Health in order to build trust for service recipients.

(6) The services before the service recipients or tourists leave

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals have not yet provided tangible services before the service recipients or tourists leave the hospital. There are only inquiries after using the services from the servicing staff. Other services will only be available to recipients or tourists when they have been asked for such as inquiries related to travel/directions, inquiries about nearby attractions, and those about contacting public transport for the tourists.

There are only inquiries about the satisfaction from tourists regarding the quality of services.

There is only a session of questions regarding satisfaction with the hospital's services, verbally. It is not a questionnaire.

If tourists come to ask about travel or tourist attractions, we are happy to help. But we do not ask them or recommend things to them first.

### 5) Quality of service

The results of interviews with staff in Thai traditional medicine promoting hospitals reveal that the hospitals have managed the quality of services to make the tourists more comfortable. It has also brought innovations and modern technologies to be used to provide services such as health care equipment, training sessions for staff so that they have service mind and understand the needs of service recipients and tourists.

The hospital has managed to achieve good service quality. This includes the management of the place to be comfortable and the application of modern technology to health services.

The hospital is regularly training its staff to make them service-minded in order to provide services to service recipients or visitors.

The hospital's staff are well trained to be competent, knowledgeable and serve customers well.

The hospital has staff training sessions in terms of providing services regularly in order to impress the service recipients.

4.3.3.2 The results of data analysis regarding the efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals from health tourists who have used services in Thai traditional medicine promoting hospitals.

#### 1) Physical flow management

##### (1) Provision of parking spaces in the hospital

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the hospitals have arranged several parking spaces. The staff are also assigned to help and facilitate with parking. As a result, service recipients or tourists can park their car quickly and be on time if they have made a reservation in advance. In addition, staff are available to facilitate the service recipients or the tourists so that they feel safe about leaving their car in the parking area when being serviced.

Good parking space. There are staff helping with parking. This makes parking more convenient.

The hospital has several parking lots and is very convenient to park.

The parking area has staff who help us park faster.

The hospital has ample parking spaces, and because there are many parking spots and the staff to take care, this makes us feel safe and do not have to worry that our car will be hit or stolen.

## (2) Provision of pathways to the health service building

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the paths accessing the health service building are convenient, safe, and spacious. There is a link between the paths and buildings, which is clean and safe. This way, the service recipients or the tourists who are accessing the health service building feel comfortable.

Easy access to the building because the walkways are spacious.

The entrance to the building is clean and spacious. There is a link between buildings: it is easy to walk into the building.

I feel that the path to the building is comfortable, spacious, no obstructions and makes me feel safe.

## (3) Provision of a reception and registration area

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that that the reception and registration facilities are located in the front of the health service building. As a result, service recipients or tourists can see and access the facilities easily.

The reception and registration area is in front of the building, making it easy to see.

The reception and registration are is easy to access since it is located at the front of the service building.



I feel comfortable in accessing the reception and registration area because is located at the front of the building, making it easy to see.

#### (4) Provision of a waiting area

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the waiting areas have an appropriate atmosphere but too narrow in terms of space. There are insufficient number of seats per service recipients. Sometimes, when registration is done, service recipients might have to wait for services in other areas. As a result, service recipients or tourists are not as comfortable as they should be.

The atmosphere is good at the waiting area. But it's too narrow, not that comfortable.

If a lot of people come to get the services, there will not be enough seats in the waiting area. Sometimes, I have to sit somewhere else for waiting, and I would not hear the staff calling my name for check-up.

The waiting area is constricted. Not enough chairs. Sometimes, I need to stand and wait from which I do not feel comfortable.

The waiting area has a good atmosphere, making me feel relaxed although the area is confined, and sometimes the number of seats is not enough.

#### (5) Provision of a scanning area

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the areas are continuously arranged next to the reception and registration area. And it is in the same area as the waiting area. This makes it easy to access. The table for recording medical history is also arranged, and there are chairs for service recipients or tourists to sit.

You can easily access the screening area. It is adjacent to the reception and registration area as well as the waiting area.

The screening area is in the same area as the waiting area, making it easy and convenient.

At the screening area, it is very comfortable. There is a desk for recording medical history and seats for screening.

#### (6) Provision of changing rooms

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that they are found to be easily accessible. There is separation between men and women. There are lockers for service recipients. This makes the tourists feel comfortable and safe to get services.

The changing rooms are separated between men's and women's. This makes it feel comfortable and safe.

The changing room is easily accessible. There are separate rooms between men and women. This makes us feel safe and gives privacy.

In the changing room, there will be cabinets to keep our belongings. This makes us feel safe and comfortable in using the changing room.

#### (7) Provision of a health service area

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that they are easily accessible. The service rooms are divided by the types of services such as massage rooms, herbal steam rooms, herbal compress rooms, sauna rooms, jacuzzi bathtubs, etc. Each room has a suitable atmosphere. Most visitors feel the privacy and relaxation while being served.

The health service area has a very good atmosphere and suitable for using the services. It makes me feel relaxed.

The health service area is well-proportioned, such as massage rooms, steam rooms, and saunas, and you can feel privacy when being serviced.

The health service area is easily accessible and convenient. There are several rooms for different services such as massage room, sauna room, compress room, jacuzzi room, and sauna room.

The health service area is easily accessible. The hospital has decorated the area with the atmosphere that makes us feel relaxed.

#### (8) Provision of shower rooms and toilets

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that they are easily accessible. The proportions of male and female rooms are made. This makes the tourists feel safe. Inside the rooms, there are sinks, bidets, toilets and shower rooms as well as enough equipment to meet the needs of the service recipients. This makes the tourists or service recipients feel comfortable. In addition, regular cleaning can affect the good hygiene of service recipients or tourists.

Shower rooms and toilets are very safe because of the separation between men's and women's.

We can access the shower rooms and toilets conveniently. And the rooms are very clean.

In the shower rooms and toilets, we have amenities such as sinks and toilets, which can be considered adequate.

Inside the toilet, there is a sink and a toilet, and inside the shower room, there is enough equipment for taking a shower. It makes us get comfortable.

#### (9) Provision of a payment area

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that for the arrangement of payment areas, it is easy and convenient for the tourists to gain access. But there should be ATMs in the payment areas for the convenience of service recipients who need cash.

In the payment area, we want an ATM, which will make it more convenient.

The payment area does not have ATMs, sometimes when there is not enough money, you have to walk to somewhere else to get the money from other ATMs.

The payment area can be conveniently accessed, and it is easy to make the payment.

(10) Provision of an area for giving advice and guidance related to health

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that they are easily accessible and well separated which makes it easy for service recipients or visitors to access and makes the recipients feel the privacy in the consultation with the Thai traditional medicine doctors.

The hospital will have a separate health consultation area, creating privacy when getting a consultation.

The area for consultation is easily accessible and convenient.

You would feel the privacy when you come to have a consultation in this area because the hospital has separated it proportionally.

(11) Provision of an area for resting

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the areas for resting in the hospitals are limited. As a result, tourists cannot use or benefit from the areas. Some tourists need to use the areas to wait for other service recipients who have come together.

I did not use the service area because now the hospital is improving the area

The hospital is improving some parts of the area, making the space narrow. It is not very comfortable.

Now the hospital is renovating the area. So the area for resting is restricted. It is not easy to access the area.

Sometimes, I come here to use Thai massage services with friends. And when I am done first, I do not know where to wait for my friends because the area for resting is limited, and I cannot access the area.

## 2) Information flow management

### (1) Provision of directional signs towards the health service building

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the number of signs indicating directions to the health service buildings were not sufficient, and they lack continuity. The first-time tourists who come to use the services would get confused, and it takes time to get into the health service building.

There are very few signs.

There are few signs, and their positions are not connected.

When I first came here to use the services, I could not find this building because the signs are insufficient.

### (2) Provision of a sign indicating the service area in the health service building

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the health service buildings have signs showing the service areas clearly. Tourists can easily access the service areas without confusion.

The hospital has prepared signs showing the service areas.

The signs show the service areas clearly. It is then easy to access those areas.

Within the health service building, there are clear signs. So we do not get confused or get lost.

(3) Recommendation of products and services in the reception and registration area

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that at the reception and registration areas, there are staff to welcome and introduce the products and services of the hospital. They also have a spa menu from which tourists can study and choose their own services. As a result, visitors who come to use the service for the first time know the hospital's products and services. In addition, service recipients or visitors who visit the hospital more than once have the opportunity to know new products and services from the staff and the spa menu as well.

At the reception and registration area, the hospital has a spa menu which gives us information about the products, and it is easy for us to choose the service for ourselves.

When we arrived the reception and registration area, there were staff who introduced the services and products to us.

(4) Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that for the data collection of service recipients or tourists, the hospital uses documents or a paper system. The tourists' information would be recorded into the medical history files. As for this matter, tourists opined that saving data onto computer may be more convenient and fast when it comes to storing and transferring data to other service areas.

As far as I could see, they used files for collecting and forwarding the medical records of the recipients.

The staff will let us record our medical history in the files.

I want the hospital to use the computer system to record medical history data. This way, they will not waste time filling the data on documents, and the data can also be forwarded to various departments faster.

The staff will give us a form to fill in our medical history which will be forwarded to other departments for which I think that it is not convenient and fast. We should use the computer system: it is better.

(5) Storing and forwarding health information of the service recipients or tourists in the screening area

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the screened data at the screening areas is recorded in the medical history folders of service recipients or tourists. For this, tourists have the opinion that saving the data onto the computer can be very convenient to store and provide better transfer of data to other service areas.

Using a computer system to help in the storage is better to save it in the files or documents.

I think that if they use a computer system instead of using medical history files, it will be convenient and fast to store and forward data. And the service recipients themselves do not have to wait for a long time.

(6) Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that information on health care and health restoration at the health service area would be recorded in the medical history files of service recipients or tourists which would be forwarded to other service areas.

As far as I could see, the storage and forwarding of health care information were done by using documents/files.

The hospital still uses files/folders which have been continuously transferred from other areas.

When we finished using health services, I could see the staff recorded information in the medical history files and send the files to another service areas.

(7) Storing and forwarding payment information in the payment area

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that computer systems have been used to record data. This results in a convenient and fast service.

At the payment area, computer system is used. So our payment has been quick and easy.

The computer system has been used to record data.

(8) Provision of advice related to health in the area for health advice and guidance

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the areas have where Thai traditional medicine doctors who will give advice to service recipients or tourists about health care. As a result, service recipients and tourists receive information for health care that is correct before they leave for home.

The hospital arranges Thai traditional medicine doctors for health consultation.

At the consultation area, there will be Thai traditional medicine doctors who will give advice on health care. This gives us the right information from which we can take use in taking care of our own health at home.



At the area of consultation, Thai traditional medicine doctors provide counseling and advice on health care. This can be useful for us to take of ourselves at home as well.”

(9) Provision of health information and knowledge in the areas for resting

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that as for the areas for resting, it is arranged with books and documents involving health care for the service recipients or visitors to read. This makes the tourists get more knowledge. However, the tourists have a comment that the hospital should organize activities in the area for resting, so visitors will get more information and knowledge.

There are magazines and brochures related to health in the area for waiting. This way, I get more knowledge.

As for the area for waiting, I want the hospital to organize more health activities. So, we can learn more information and more knowledge.

In the area for resting, the hospital has provided health books. But I want them to have more health activities here.

### 3) Financial flow management

(1) Preparation of equipment and tools for receiving payments

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the hospitals have provided the computers, printers, calculators, receipt forms, deposit forms as well as coins and banknotes used for change, sufficiently and appropriately both in terms of amount and readiness for use. So, tourists do not have to waste time waiting and get fast services.

The payment process was fast, and I did not have to wait for so long.

As far as I have seen, the staff already prepared to give change. So, when we paid, he would be able to give change immediately. No need to exchange money elsewhere and no wasted time.

From what I have seen, the payment point has computers, calculators, and different forms for receiving payment which have all been prepared. This way, we did not have to wait for so long and could make our payment quickly.

## (2) Payment channel management

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that as for payments, the payments can be made by cash. The payment service is fast. However, health tourists also consider that the availability of a variety of payment channels will result in more choices for recipients or tourists and more comfort and speed in making payments.

Payment can be made in cash only. It is convenient and fast.

As far as I have experienced, the hospital only receives cash.

I want them to allow a payment with a credit card. It will be more convenient for me.

Cash is good, but I want them to add more channels, for example, payments by credit card.

## (3) Informing the details of service fees to the service recipients or tourists

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the hospitals do inform the details or information of service fees. It also checks the rights or privileges of service recipients or tourists in accordance with the rules and conditions and notifies them accurately and completely. The staff can also answer financial questions to their service recipients or tourists clearly.

The staff has clearly stated the service charges. This let us know the correct information.

The hospital has provided details of expenses, checked special rights, and informed us clearly.

The times when we have questions about service charges or our rights regarding the services, the staff can answer questions and make us understand.

#### (4) Process of receiving payment

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the hospitals have fast and accurate payment processes, from receiving and checking the amount of money received from the service recipients or tourists, giving change to them, to recording the payment information in order to issue proof of payment as the next step.

Payment process is fast and good. And the staff calculate the fees correctly.

The hospital accepts payment and gives change correctly.

The receipt of payment is correct because the staff will check the amount of money first. Then they will give change and save the payment information in order to issue a receipt. All of this is very fast.

#### (5) Issuing a document or proof of payment

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the hospitals use computers and printers to issue proof of payment. This is why the service is fast. The proof of payment from the service provider is always checked before sending it to the service recipients or the tourists.

The hospital issue a receipt quickly because they use computer and printer.

The staff will check the validity of the proof of payment before sending it to us. I think that's good for being careful.

#### 4) Service process flow management

##### (1) The reception of the service recipients or tourists

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the hospitals provide staff to welcome service recipients or tourists. However, there are no other hospitality activities such as free drinks or provision of refreshing towels.

When you come to the hospital, there will be staff waiting for welcoming you.

There was a receptionist. But I also want them to add free drinks or refreshing towels, too.

##### (2) Screening of the service recipients or tourists

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the hospitals will examine, ask for medical history, diagnose symptoms of service recipients or tourists as well as assess the service recipients' or tourists' health conditions by measuring blood pressure, pulse rate, and respiratory rate in order to get the right services for them. This can ensure that the service recipients or tourists are confident about using the services as well.

When we are at the screening point, staff will come and ask for our medical history to diagnose symptoms and carry out the preliminary check-up. Then the health services shall be given.

The staff will check for initial symptoms such as measuring pulse and blood pressure to determine if we are ready for health services. This ensures that we have confidence in accessing the services.

The hospital will assess our readiness first by conducting preliminary examination and asking health history questions. This makes us feel sure that we are safe in receiving services.

(3) Preparation of the service recipients or tourists before the health service is given

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the hospitals are prepared for servicing recipients or tourists by introducing service procedures to each individual.

The staff will guide you through the process of getting serviced. This helps us prepare ourselves for the health services.

Before any health service begins, there will be staff to guide you to the steps of getting serviced. They will do this to each individual.

(4) Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the hospitals provide and prepares products, materials, equipment, tools, and utensils based on types of services well. So, the service recipients or tourists do not have to wait long.

To access health services, we do not have to waste time waiting because the hospital would prepare the equipment for providing services already.

As seen from when we used the services, the staff would immediately serve us. They did not let us wait because they would have prepared equipment and tools already.

When entering the Thai massage room, we will see the massage oil and compress ball and equipment are ready to be used. This way, we can get the service immediately without waiting for materials preparation.

(5) Health services for the service recipients or tourists

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that health services, whether it is Thai massage, aromatherapy massage, foot massage, herbal steam,

herbal compress, sauna, body mask/Thai herbal scrub, Thai herbal facial treatment and bath in the essential oils/jacuzzi, follow the academic and professional principles. This makes the tourists feel confident and safe to access the services.

The hospital offers a variety of health services such as massage for health, herbal steam, herbal compress massage, and foot massage.

The hospital has many services. We feel safe to use its services because the servicing staff include Thai traditional medicine doctors and the staff who are well trained.

The hospital has displayed a certificate of Thai traditional massage training of each masseuse for Thai massage services. This makes us feel sure to use the services.

Servicing staff have been trained by their set curriculum. The hospital would put their certificates in the health service area. This makes us feel confident and safe.

(6) The services before the service recipients or tourists leave

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that the hospitals ask for the opinions of the service recipients, but there has not yet been any documentation or concrete evaluation. It is only verbal inquiry. And they do not have any other services, in addition to this, such as the introduction to other services of the hospital or the introduction to nearby attractions, etc.

When the health service is completed, the staff will inquire about the service. There were staff asking for feedback after using the services. This was not documented or evaluated on paper though.

There are inquiries after the use of health services. But no other services are recommended, and there are no suggestions about nearby attractions.

After using the health services, there will be staff who will come and ask for opinions. But I want them to make a document or a form for us to evaluate. It's better because sometimes we do not dare to express opinions directly to the staff.

#### 5) Service quality

The results of interviews with health tourists who have used services in Thai traditional medicine promoting hospitals reveal that tourists are comfortable to use the services and feel safe because it is a hospital who provides the services. They are confident about knowledge, ability and expertise of personnel which are in accordance with academic principles. However, there are some delays in the service process when there are many service recipients. This actually affects the response to the needs of the recipients.

I feel safe to use services here because it's a hospital.

The hospital has new tools and supplies and many services.

I believe in the fame and quality of the hospital.

The hospital's staff have the knowledge and are very talented.

I feel comfortable every time I come for the services here.

Getting services has been very comfortable. But sometimes when there is a large number of service recipients, things may be delayed.

The time when there were many tourists, the attentiveness of the staff was not thorough.

I received complete and correct service, nothing was missing.

I feel that I experienced good service right from entering the hospital.

All staff were smiling and took care of me very well.

According to the analysis of the data from tourists and staff, it can be seen that for the efficiency and effectiveness of the logistics management process in Thai traditional medicine promoting hospitals in terms of physical flow management, tourists and staff in the hospital have the same opinion that the management of both indoor and outdoor areas is appropriate, for example, having

sufficient parking space for the service recipients, the entrance to the health service building is well-organized. Also, health service areas are easily accessible. The rooms are divided by the type of service such as massage room, herbal steam room, sauna room, etc. Moreover, restrooms are conveniently accessible. There is separation between males' and females' restrooms with sufficient facilities. However, it has also been found that the waiting area for services is still confined. There are not enough seats for tourists. Likewise, the rest area inside the hospital is limited. These matters make the tourists not as comfortable as they should be.

As for information flow management, tourists are satisfied with the introduction of products and services in the reception and registration area where there are staff providing information about the products and services as well as Thai traditional medicine doctors for consultation and health advice. However, the number of signs indicating direction the health service building is still not enough, and they do not have continuity. Also, storing and forwarding information at various service points still employ the document system when it is possible that information should be stored and forwarded by computer system in order to increase convenience and maintain fast services.

As for financial flow management, tourists see that the payment process is very convenient and fast. Meanwhile, the staff themselves have an efficient management of payment system. However, tourists think that the payment channels should be diversified.

In terms of service process flow management, the staff see that the hospitals have set stages and methods of providing services well, from welcoming tourists with a smile, screening service recipients upon every visit, preparation for individual service recipient, and preparation of materials, equipment, and tools to be available at all times to providing comprehensive health services with a wide range of products and services. At the same time, tourists see that stages and methods of services are efficient since there are initial screening service for service recipients, preparation of service recipients before actual services such as giving advice on how to use the services, and health services that are based on academic and professional principles. However, the services should include the provision of herbal drinks or other beverages or snacks in order to impress the service recipients. Also, before the



tourists leave, there should be more concrete questioning instead of verbal inquiry or other services of the hospital and nearby attractions might be introduced to the tourists upon their leave. As for service quality, the staff see that the hospital has managed its operation to achieve good service quality in order to impress tourists from the time they enter the hospital until when they leave. In the meantime, tourists also see the quality of hospital's services. They feel confident in receiving the services with the expertise of the staff, but there are some delays in services in the case of a large number of service recipients coming at the same time.

#### **4.4 The Results of Data Analysis According to the Objective 3, to Propose a Model of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals**

From the mixed method research, between quantitative research and qualitative research by employing explanatory sequential design in which the researcher employed in the main research, a quantitative research, in order to answer the research questions and later on used the qualitative research in order to explain the research results more profoundly and completely (Anothai Ngamwichaikit, 2015, p. 4; Richards & Morse, 2013, pp. 99-102; Teddlie & Tashakkori, 2009, pp. 270-277), the researcher has brought the discovered points from Objective 1 and Objective 2 to be analyzed, synthesized, and used in drafting a model of logistics management for health tourism in Thai traditional medicine promoting hospitals. Also, to be used in conducting focus groups with staff in Thai traditional medicine promoting hospitals in order to obtain a model of logistics management for health tourism in Thai traditional medicine promoting hospitals that can be implemented in reality and useful for service recipients. Moreover, the completeness and accuracy of the model will be verified one more time by conducting an in-depth interview with the experts in logistics management for health tourism in Thai traditional medicine promoting hospitals. The details are as follows:

#### **4.4.1 From the Analysis of Data in Objective 1**

The implementation of the policy promoting health tourism in different aspects in Thai traditional medicine promoting hospitals, which includes factors in terms of the policy, external surroundings, resources, organizational structure, staff, and communication, when the hypothesis was tested, it is found that the factors in the implementation of the policy promoting health tourism in different aspects in a Thai traditional medicine promoting hospital that affect the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals consist of 3 main factors which are:

- 1) The clarity of the policy, which includes specifying clear goals, specifying clear objectives, specifying clear steps of operation, and specifying projects, activities, and services clearly
- 2) Resources, which include the appropriateness of managing the area, budget adequacy, personnel adequacy, adequacy in terms of materials and tools, and the implementation of technology in supporting the operation
- 3) Staff, which include knowledge, capabilities and attitudes, and cooperation

Moreover, the qualitative research found that there are factors related to the management team that affect the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals.

#### **4.4.2 According to the Data Analysis in Objective 2**

Regarding the assessment of the efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals, it is found that:

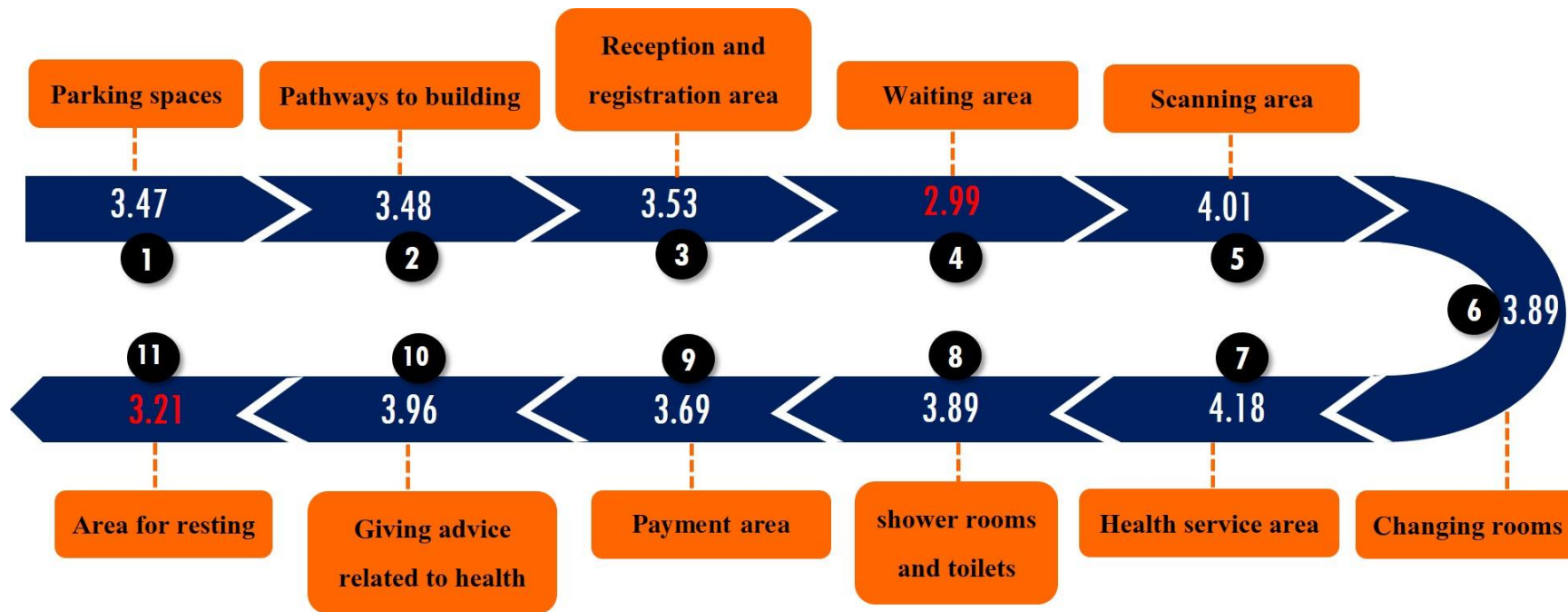
4.4.2.1 The assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals

- 1) Physical flow management, which is the ability to manage the physical appearance of a Thai traditional medicine promoting hospital in order to make the flow of tourists, from entering the hospital to leaving the hospital, incessantly continue, which reduces waiting times, lessens mistakes during the operation, and gives the highest satisfaction, includes 11 sub processes as follows:

- (1) Provision of parking spaces in the hospital
- (2) Provision of pathways to the health service building
- (3) Provision of a reception and registration area
- (4) Provision of a waiting area
- (5) Provision of a scanning area
- (6) Provision of changing rooms
- (7) Provision of a health service area
- (8) Provision of shower rooms and toilets
- (9) Provision of a payment area
- (10) Provision of an area for giving advice and guidance

related to health

- (11) Provision of an area for resting

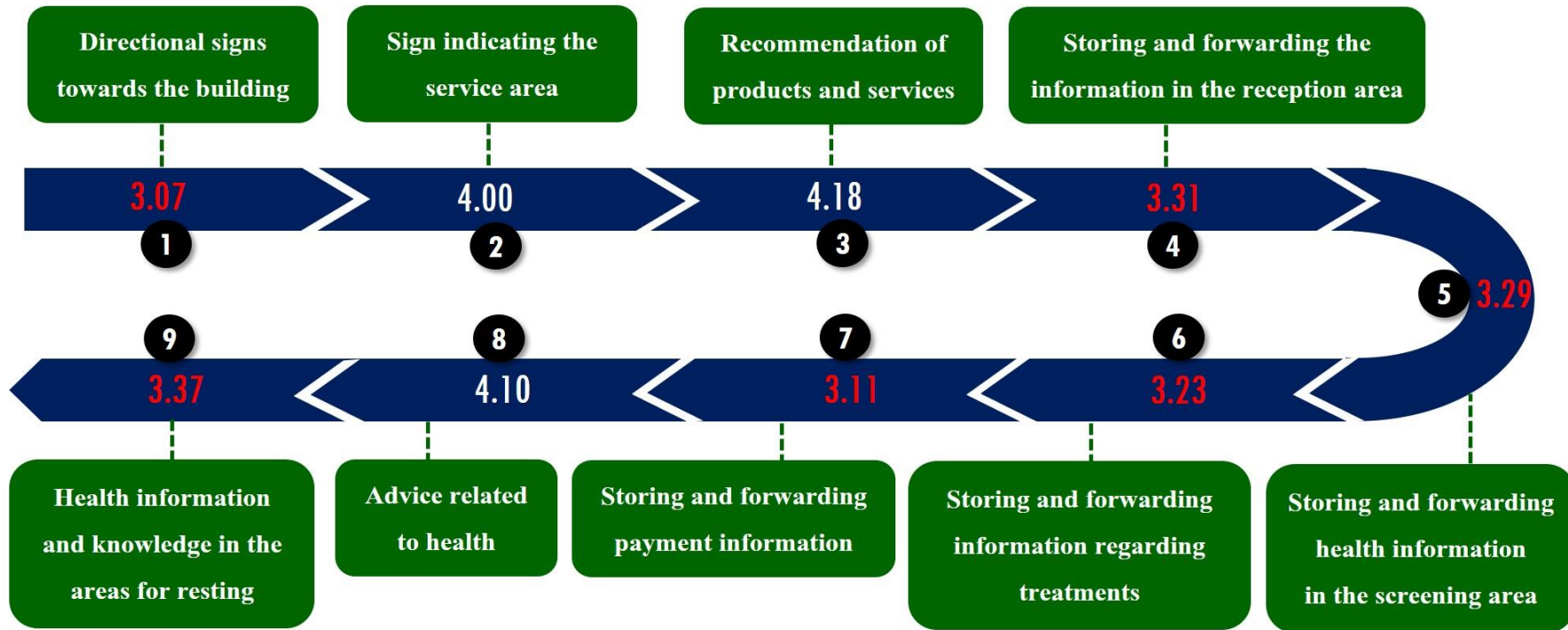


**Figure 4.2** Indicating the Results of the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management

According to Figure 4.2, it is found that the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management that should be developed include the sub process (D) Provision of a waiting area and (K) Provision of an area for resting because the assessment results of 2 aforementioned sub processes are still at a mediocre level while other sub processes are at a high level.

2) Information flow management, which is the ability in managing information system of a Thai traditional medicine promoting hospitals in order to make the flow of tourists, from entering the hospital to leaving the hospital, incessantly continue, which reduces waiting times, lessens mistakes during the operation, and gives the highest satisfaction, includes 9 sub processes which are:

- (1) Provision of directional signs towards the health service building
- (2) Provision of a sign indicating the service area in the health service building
- (3) Recommendation of products and services in the reception and registration area
- (4) Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area
- (5) Storing and forwarding health information of the service recipients or tourists in the screening area
- (6) Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area
- (7) Storing and forwarding payment information in the payment area
- (8) Provision of advice related to health in the area for health advice and guidance
- (9) Provision of health information and knowledge in the areas for resting

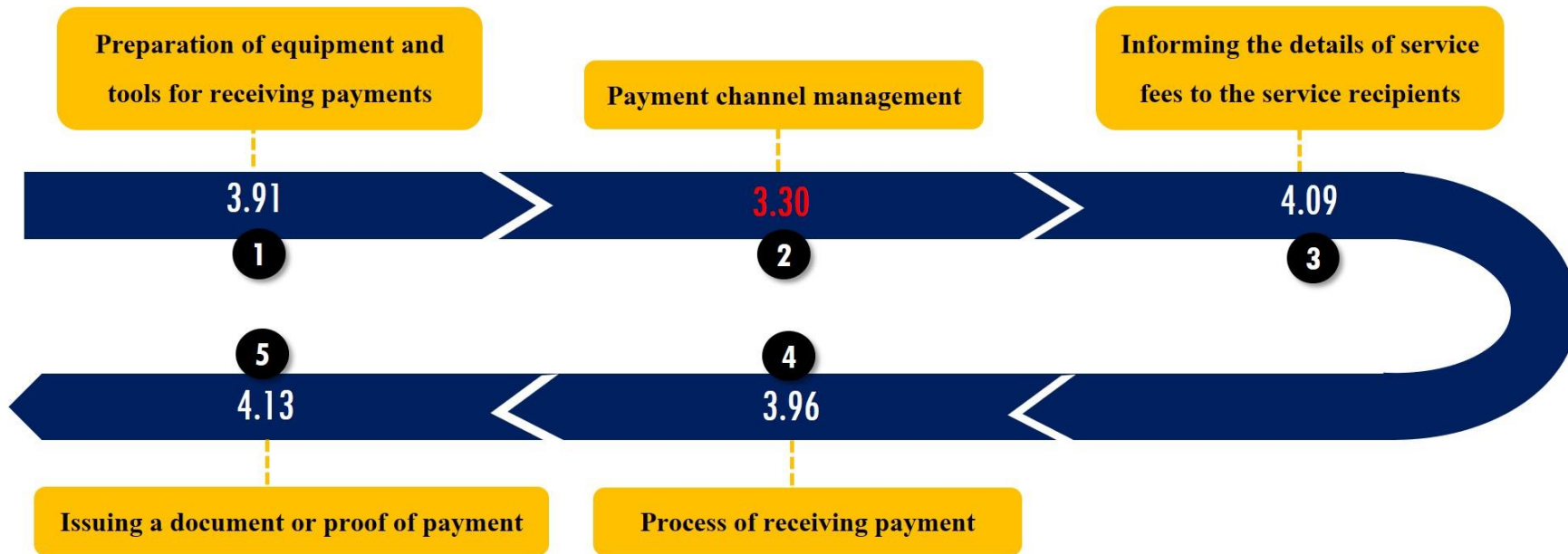


**Figure 4.3** Indicating the Results of the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Information Flow Management

According to Figure 4.3, it is found that the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management that should be developed include the sub process (A) Provision of directional signs towards the health service building (D) Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area (E) Storing and forwarding health information of the service recipients or tourists in the screening area (F) Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area (G) Storing and forwarding payment information in the payment area and (I) Provision of health information and knowledge in the areas for resting because the assessment results of 6 aforementioned sub process are still at a mediocre level while other sub processes are at a high level.

3) Financial flow management, which is the ability in facilitating payments in a Thai traditional medicine promoting hospitals in order to make the flow of tourists, from entering the hospital to leaving the hospital, incessantly continue, which reduces waiting times, lessens mistakes during the operation, and gives the highest satisfaction, includes 5 sub processes which are:

- (1) Preparation of equipment and tools for receiving payments
- (2) Payment channel management
- (3) Informing the details of service fees and privileges to the service recipients or tourists
- (4) Process of receiving payment
- (5) Issuing a document or proof of payment



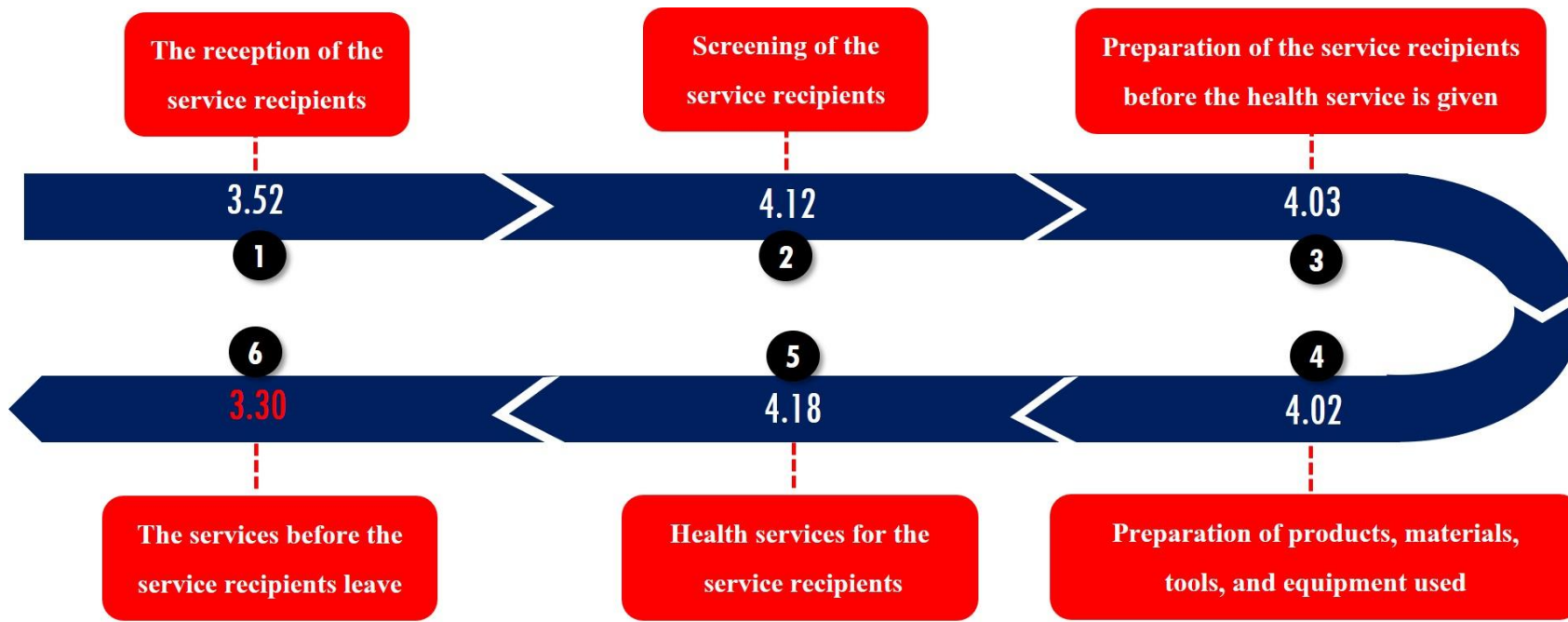
**Figure 4.4** Indicating the Results of the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Financial Flow Management



According to Figure 4.4, it is found that the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management that should be developed include the sub process (B) Payment channel management because the assessment results are still at a mediocre level while other sub processes are at a high level.

4) Service process flow management, which is the ability in managing steps of providing services of Thai traditional medicine promoting hospitals in order to make the flow of tourists, from entering the hospital to leaving the hospital, incessantly continue, which reduces waiting times, lessens mistakes during the operation, and gives the highest satisfaction, includes 6 sub processes which are:

- (1) The reception of the service recipients or tourists
- (2) Screening of the service recipients or tourists
- (3) Preparation of the service recipients or tourists before the health service is given
- (4) Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists
- (5) Health services for the service recipients or tourists
- (6) The services before the service recipients or tourists leave

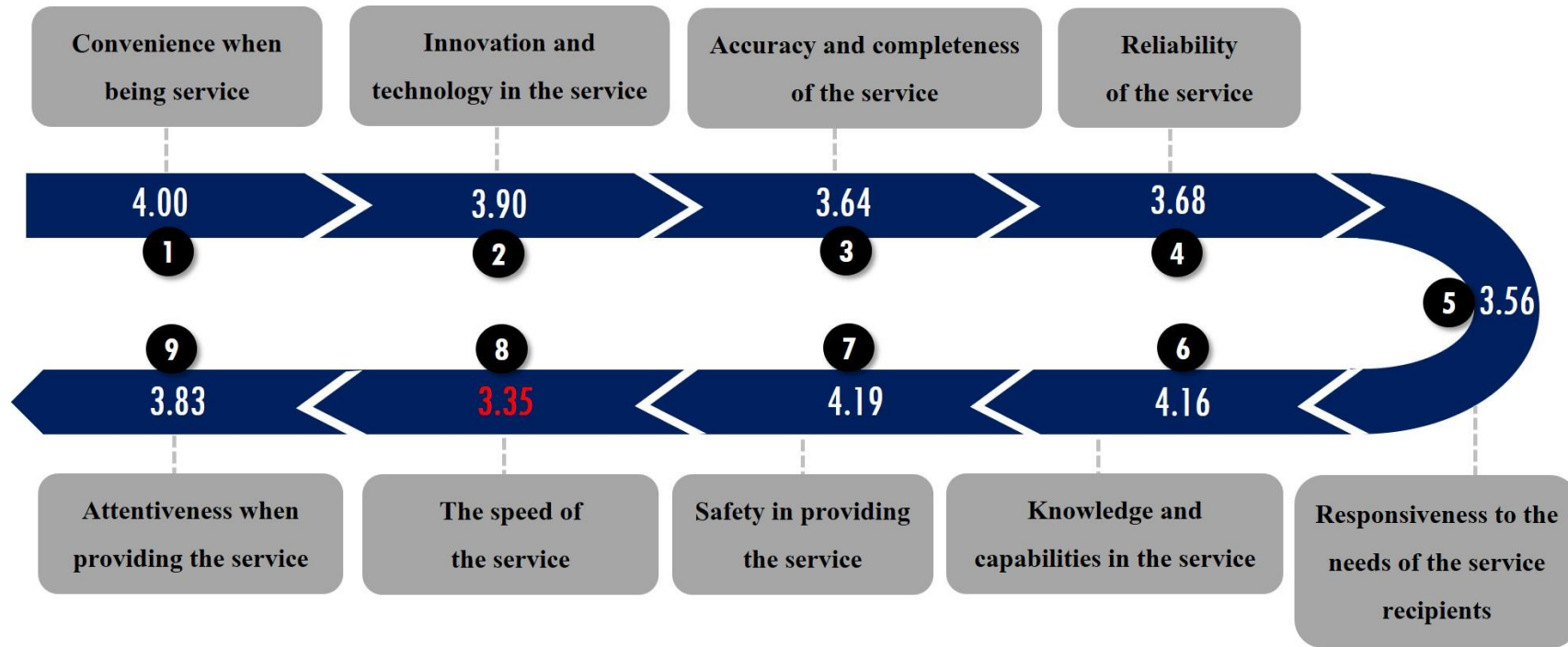


**Figure 4.5** Indicating the Results of the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management

According to Figure 4.5, it is found that the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management that should be developed is the sub process (F) The services before the service recipients or tourists leave because the assessment results are still at a mediocre level while other sub processes are at a high level.

5) Service quality, which is the expectation of health tourists who have used services in Thai traditional medicine promoting hospitals that needs to be received from staff in Thai traditional medicine promoting hospital which covers concreteness of services, reliability, responsiveness to service recipients, confidence given to service recipients, familiarity and understanding of service recipients, includes 9 sub factors which are:

- (1) Convenience when being serviced
- (2) Innovation and technology in the service
- (3) Accuracy and completeness of the service
- (4) Reliability of the service
- (5) Responsiveness to the needs of the service recipients
- (6) Knowledge and capabilities in the service
- (7) Safety in providing the service
- (8) The speed of the service
- (9) Attentiveness when providing the service



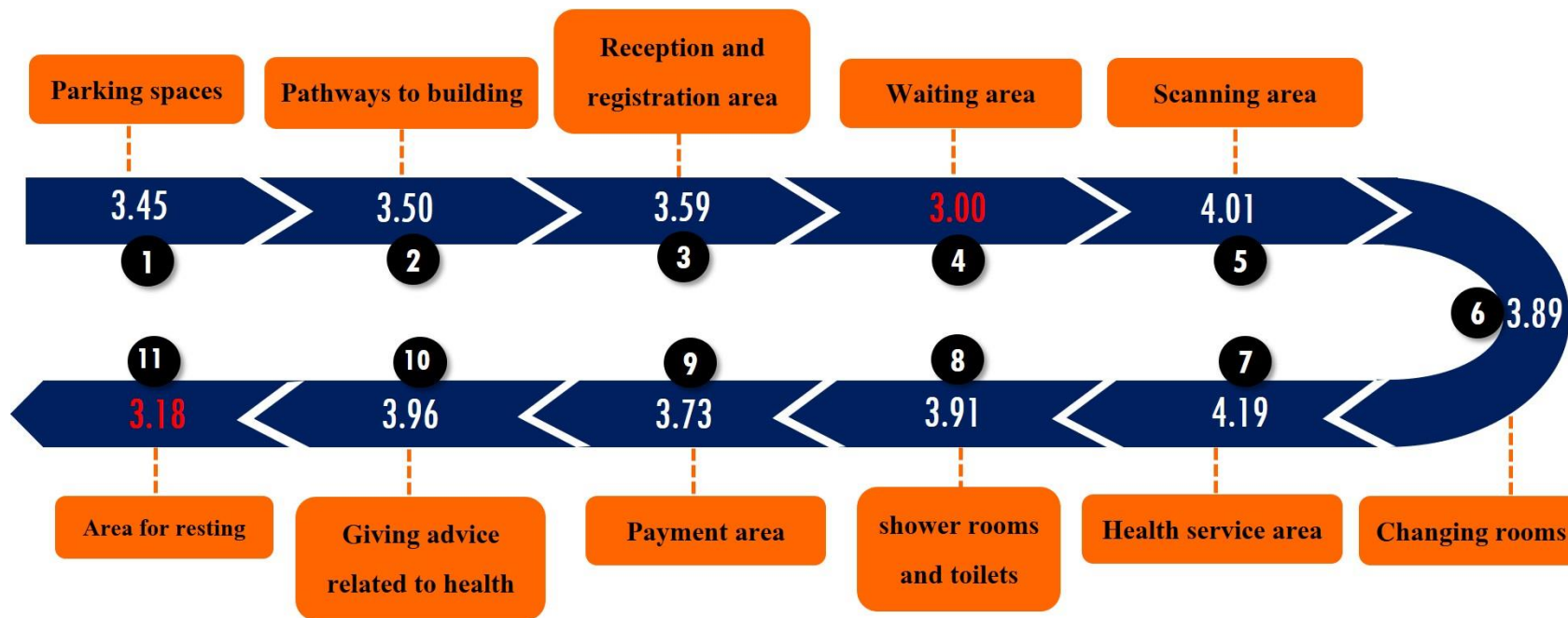
**Figure 4.6** Indicating the Results of the Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality

According to Figure 4.6, it is found that the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service quality that should be developed is the sub factor (H) The speed of the service because the assessment results are still in a mediocre level while other sub factors are at a high level.

4.4.2.2 The assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals

1) Physical flow management, which is the success and satisfaction stemming from the physical appearance of Thai traditional medicine promoting hospitals in order to make the flow of tourists, from entering the hospital to leaving the hospital, incessantly continue, which reduces waiting times, lessens mistakes during the operation, and gives the highest satisfaction, includes 11 sub processes which are:

- (1) Provision of parking spaces in the hospital
- (2) Provision of pathways to the health service building
- (3) Provision of a reception and registration area
- (4) Provision of a waiting area
- (5) Provision of a scanning area
- (6) Provision of changing rooms
- (7) Provision of a health service area
- (8) Provision of shower rooms and toilets
- (9) Provision of a payment area
- (10) Provision of an area for giving advice and guidance related to health
- (11) Provision of an area for resting

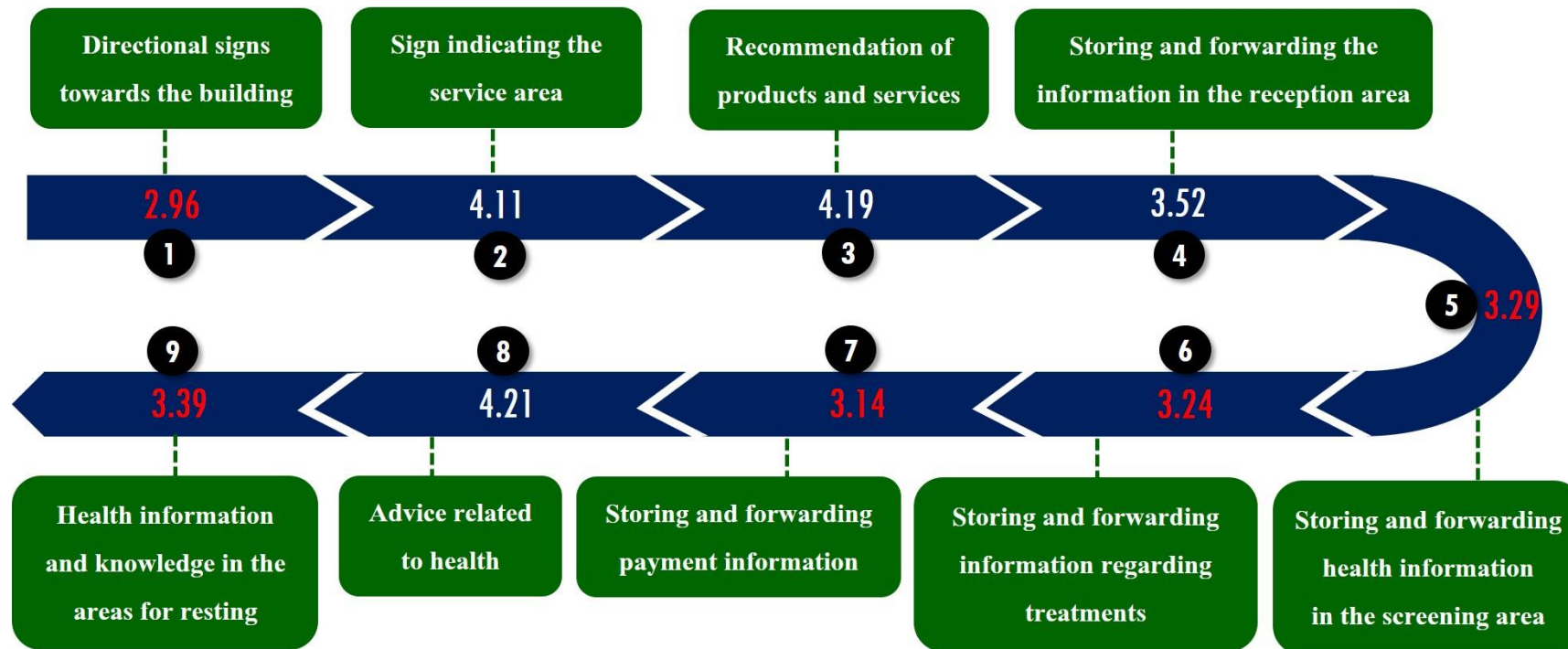


**Figure 4.7** Indicating the Results of the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management

According to Figure 4.7, it is found that the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of physical flow management that can make tourists satisfied at a mediocre level includes sub processes (D) Provision of a waiting area and (K) Provision of an area for resting while other sub processes are at a high level.

2) Information flow management, which is the success and satisfaction stemming from the management of information of Thai traditional medicine promoting hospitals in order to make the flow of tourists, from entering the hospital to leaving the hospital, incessantly continue, which reduces waiting times, lessens mistakes during the operation, and gives the highest satisfaction, includes 9 sub processes which are:

- (1) Provision of directional signs towards the health service building
- (2) Provision of a sign indicating the service area in the health service building
- (3) Recommendation of products and services in the reception and registration area
- (4) Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area
- (5) Storing and forwarding health information of the service recipients or tourists in the screening area
- (6) Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area
- (7) Storing and forwarding payment information in the payment area
- (8) Provision of advice related to health in the area for health advice and guidance
- (9) Provision of health information and knowledge in the areas for resting



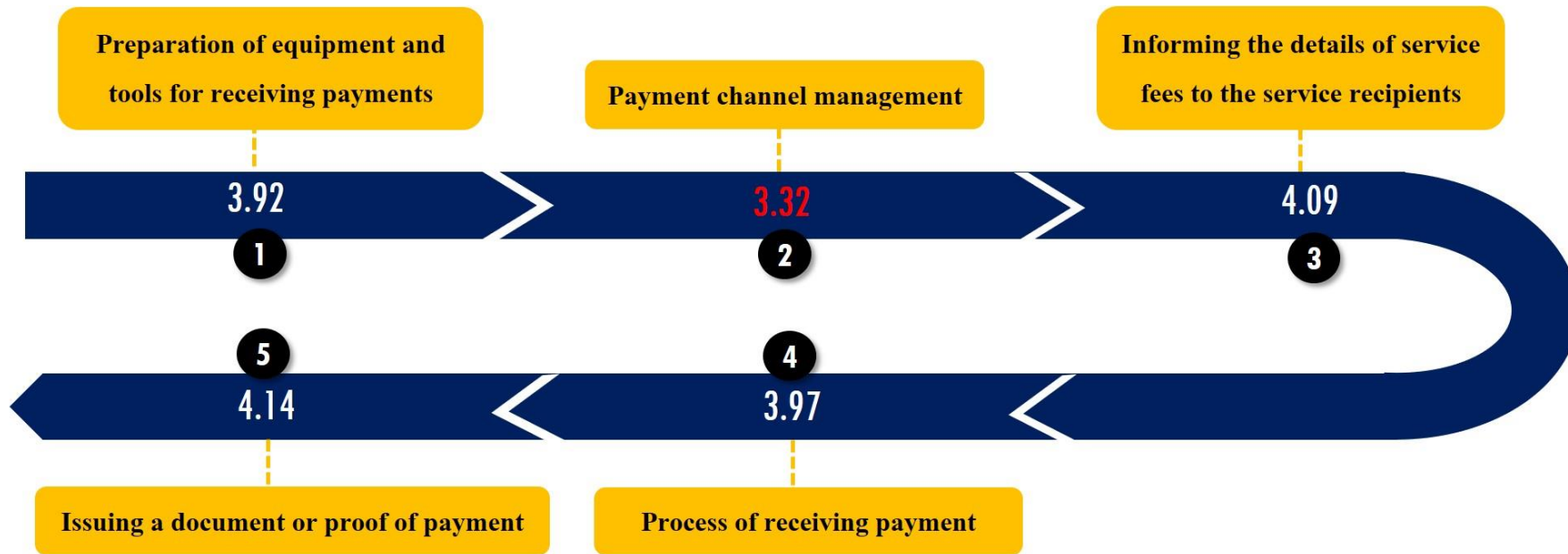
**Figure 4.8** Indicating the Results of the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Information Flow Management



According to Figure 4.8, it is found that the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of information flow management that can make tourists satisfied at a mediocre level includes sub processes (A) Provision of directional signs towards the health service building (E) Storing and forwarding health information of the service recipients or tourists in the screening area (F) Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area (G) Storing and forwarding payment information in the payment area, and (I) Provision of health information and knowledge in the areas for resting while other sub processes are at a high level and the highest level.

3) Financial flow management, which is the success and satisfaction stemming from facilitating payment of Thai traditional medicine promoting hospitals in order to make the flow of tourists, from entering the hospital to leaving the hospital, incessantly continue, which reduces waiting times, lessens mistakes during the operation, and gives the highest satisfaction, includes 5 sub processes which are:

- (1) Preparation of equipment and tools for receiving payments
- (2) Payment channel management
- (3) Informing the details of service fees and privileges to the service recipients or tourists
- (4) Process of receiving payment
- (5) Issuing a document or proof of payment

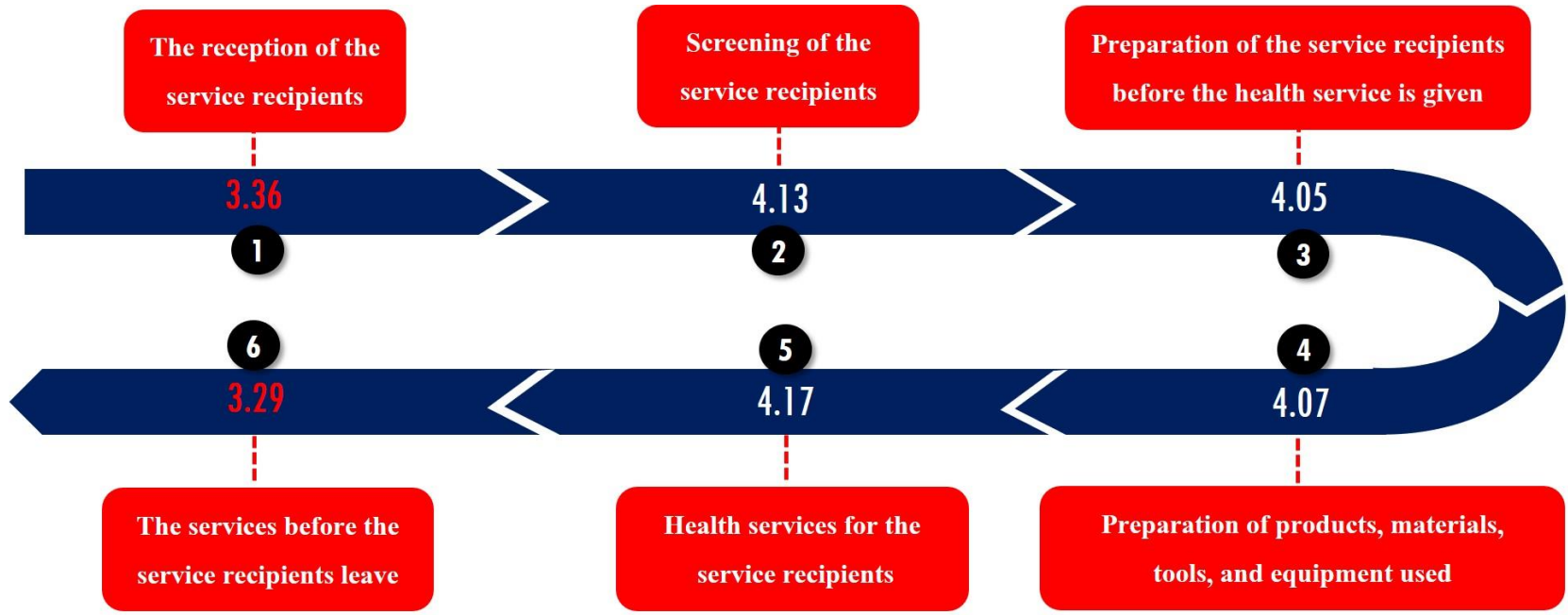


**Figure 4.9** Indicating the Results of the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Financial Flow Management

According to Figure 4.9, it is found that the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of financial flow management that can make tourists satisfied at a mediocre level is the sub process (B) Payment channel management while other sub processes are at a high level.

4) Service process flow management, which is the success and satisfaction stemming from steps of providing services of Thai traditional medicine promoting hospitals in order to make the flow of tourists, from entering the hospital to leaving the hospital, incessantly continue, which reduces waiting times, lessens mistakes during the operation, and gives the highest satisfaction, includes 6 sub processes which are:

- (1) The reception of the service recipients or tourists
- (2) Screening of the service recipients or tourists
- (3) Preparation of the service recipients or tourists before the health service is given
- (4) Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists
- (5) Health services for the service recipients or tourists
- (6) The services before the service recipients or tourists leave

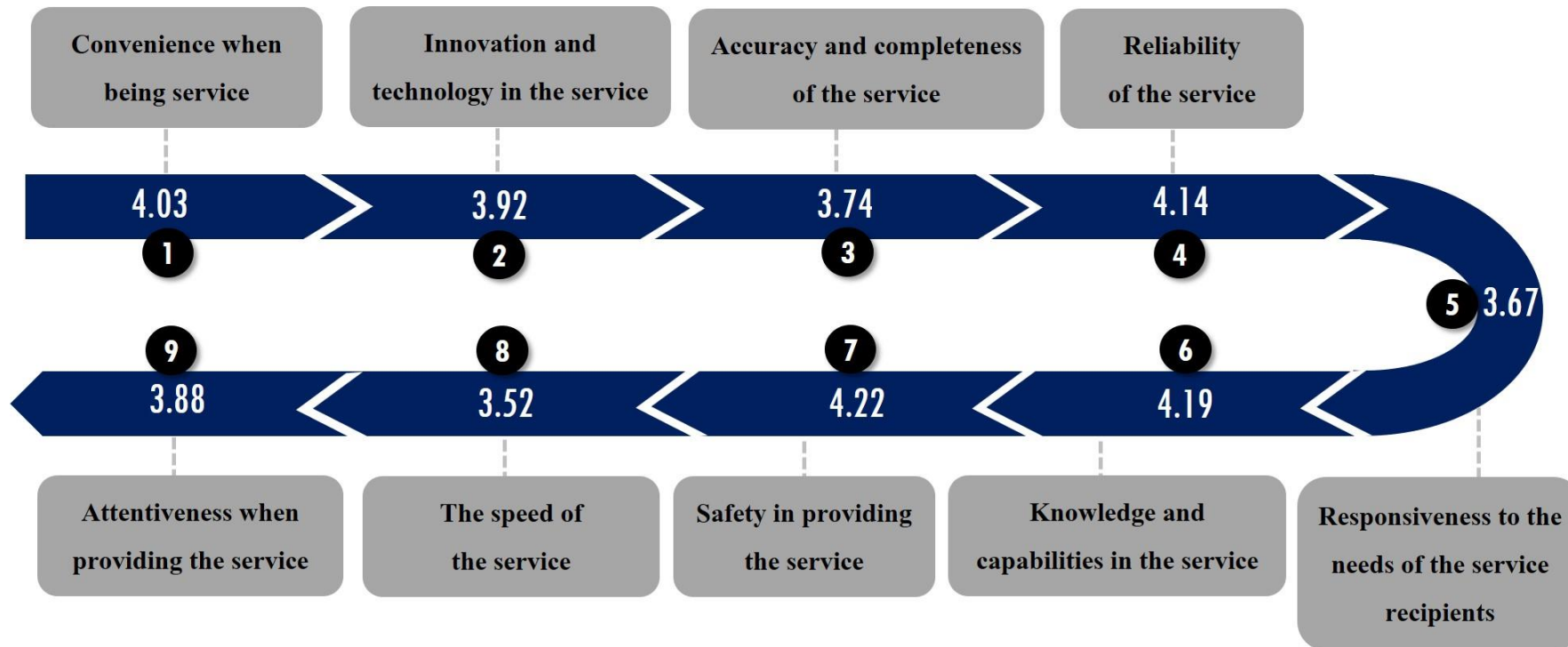


**Figure 4.10** Indicating the Results of the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management

According to Figure 4.10, it is found that the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals in terms of service process flow management that can make tourists satisfied at a mediocre level are (A) The reception of the service recipients or tourists and (F) The services before the service recipients or tourists leave while other sub processes are at a high level.

5) Service quality, which is the perception of health tourists who have used services in Thai traditional medicine promoting hospitals that needs to be received from staff in Thai traditional medicine promoting hospital which covers concreteness of services, reliability, responsiveness to service recipients, confidence given to service recipients, familiarity and understanding of service recipients, includes 9 sub factors which are:

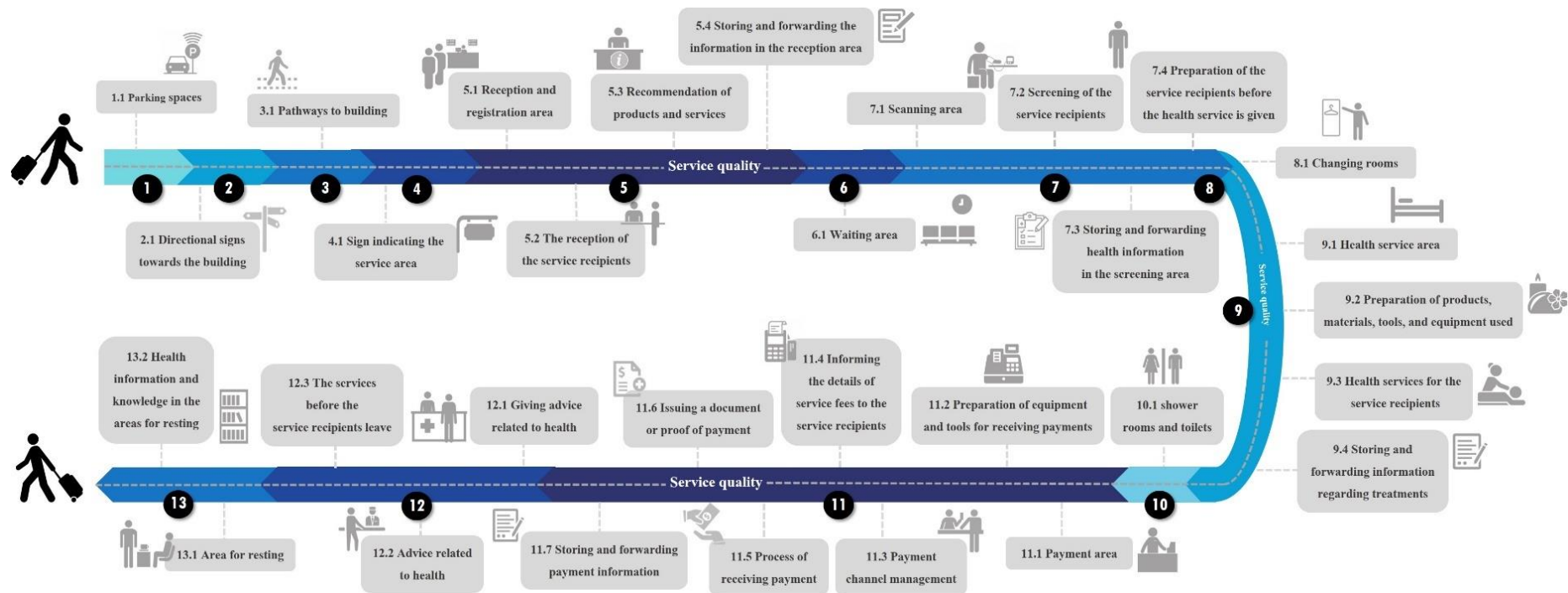
- (1) Convenience when being serviced
- (2) Innovation and technology in the service
- (3) Accuracy and completeness of the service
- (4) Reliability of the service
- (5) Responsiveness to the needs of the service recipients
- (6) Knowledge and capabilities in the service
- (7) Safety in providing the service
- (8) The speed of the service
- (9) Attentiveness when providing the service



**Figure 4.11** Indicating the Results of the Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality

According to Figure 4.11, it is found that the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospital in terms of service quality is at a high level for every sub factor.

From the results of the analysis of the assessment of effectiveness and the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals for health tourism in Thai traditional medicine promoting hospitals, the researcher has drafted a model of logistics management for health tourism in Thai traditional medicine promoting hospitals by separating sub processes under physical flow management, information flow management, financial flow management, and service process flow management and ordering them according to the path of services, from the time when tourists enter the hospital to the time when they leave, into 13 service points. And throughout the path of services, the service quality shall be included, as in Figure 4.12

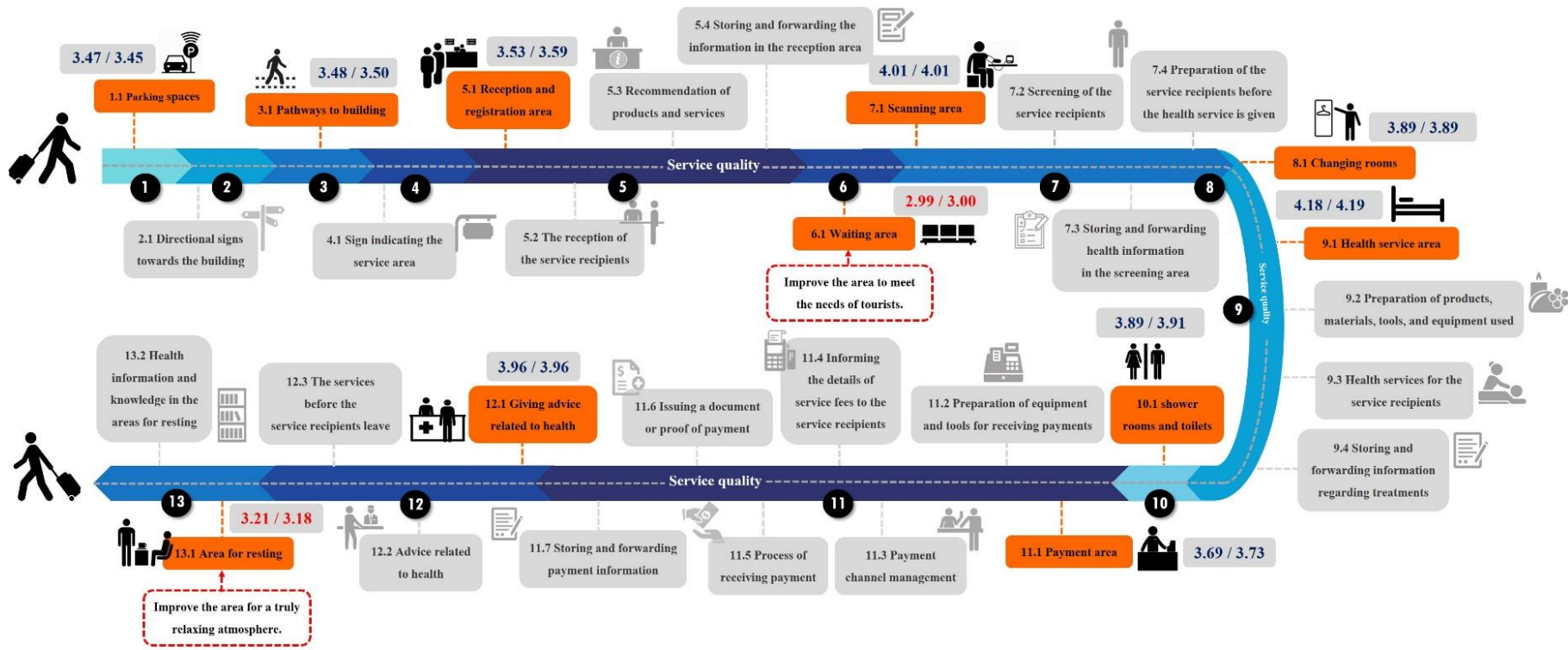


**Figure 4.12** Draft of a Model of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals by Separating Sub Processes Under Physical Flow Management, Information Flow Management, Financial Flow Management, Service Process Flow Management, and Service Quality and Ordering them According to the Path of Services, from the Time When Tourists Enter the Hospital to the Time When They Leave



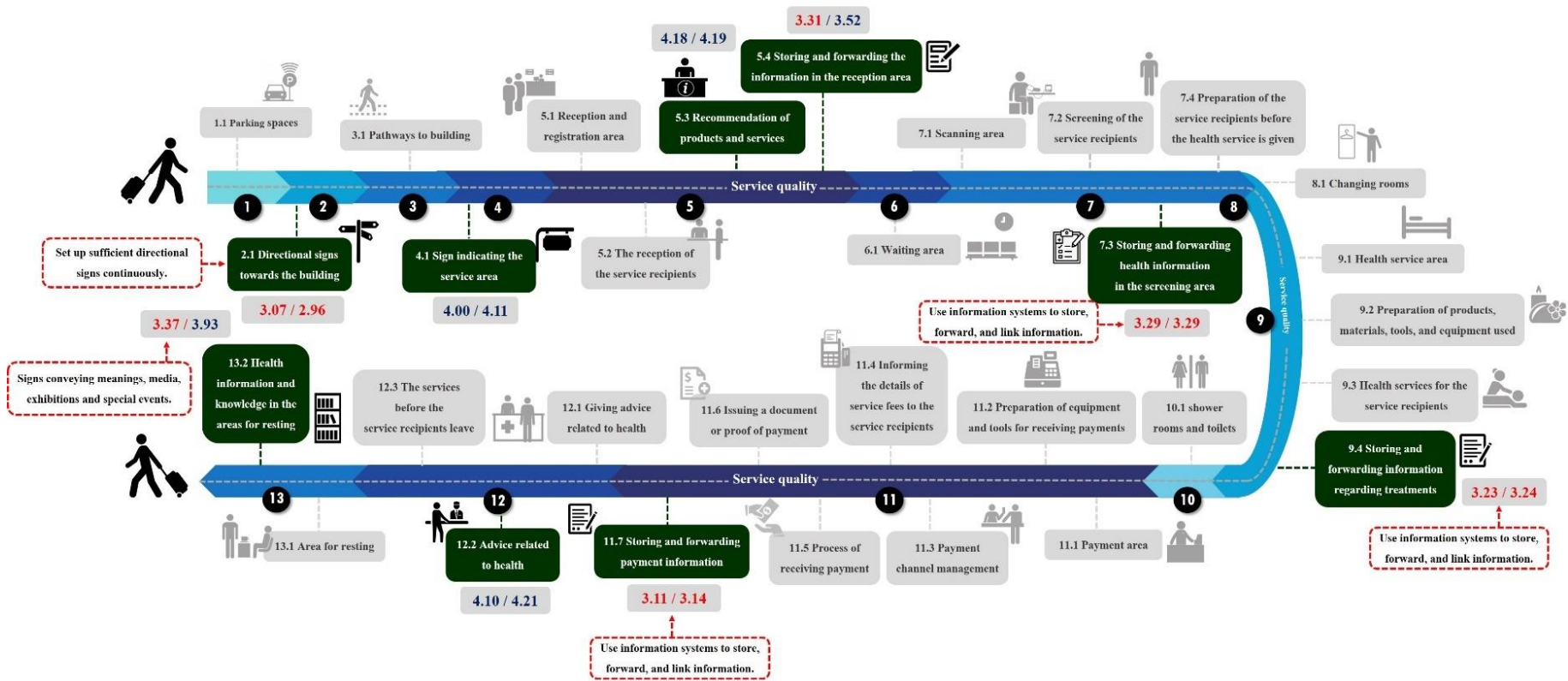
According to Figure 4.12, a draft of a model of logistics management for health tourism in Thai traditional medicine promoting hospitals, the researcher presents the development of sub processes under physical flow management, information flow management, financial flow management, and service process flow management, and service quality according to the path of services, from the time when tourists enter the hospital to the time when they leave as follows:

Physical flow management: for Servicing point no.6, Provision of a waiting area, should be proportionate, does not obstruct the traffic, and seating capacity should be sufficient and in good condition, for Servicing point no.13, Provision of an area for resting, there should be sufficient space for services, along with shady, beautiful and peaceful atmosphere with good ventilation, and there should be a shop selling products made from Thai herbs or a restaurant selling healthy food.



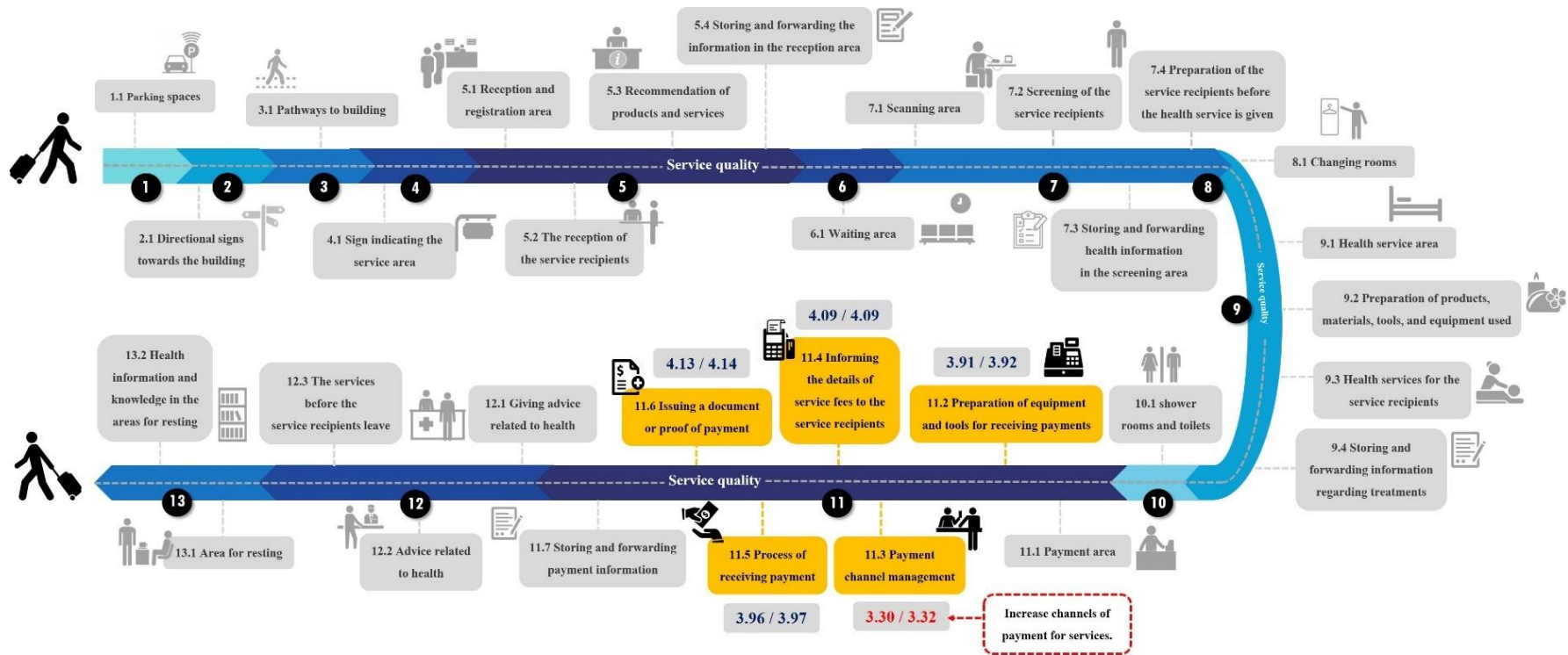
**Figure 4.13** The Development of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Physical Flow Management

Information flow management: for Servicing point no.2, Provision of directional signs towards the health service building, the directional signs should be installed in appropriate locations and can be seen clearly, for Servicing point no.5, Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area, Servicing point no.7, Storing and forwarding health information of the service recipients or tourists in the screening area, Servicing point no.9, Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area, and Servicing point no.11, Storing and forwarding payment information in the payment area, for all of them, information systems should be used in storing and forwarding information, and information should be linked for unity or consistency with all services, and Servicing point no.13, Provision of health information and knowledge in the areas for resting, documentation, publications, exhibitions and special events on health should be provided so as to provide service recipients or tourists with information, news and the knowledge that are useful.



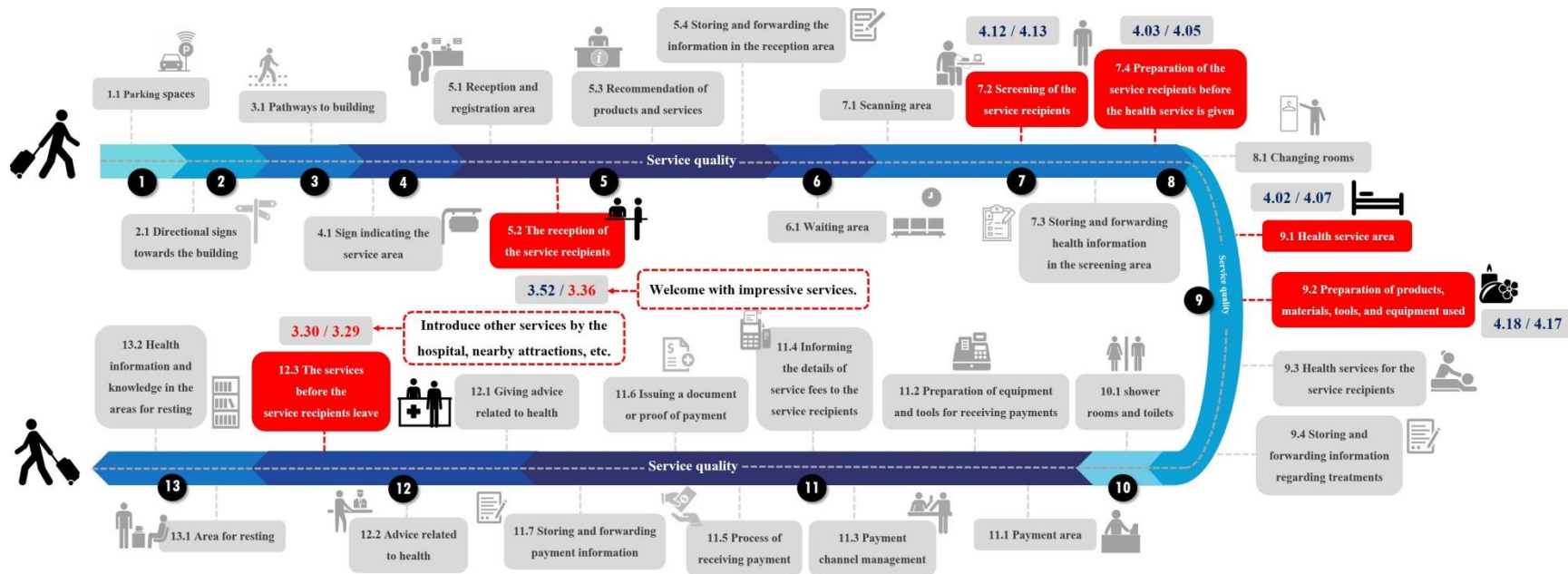
**Figure 4.14** The Development of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Information Flow Management

Financial flow management: for Servicing point no.11, Payment channel management, more payment channels for services such as credit card payment or payment through the application of the bank should be added.



**Figure 4.15** The Development of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Financial Flow Management

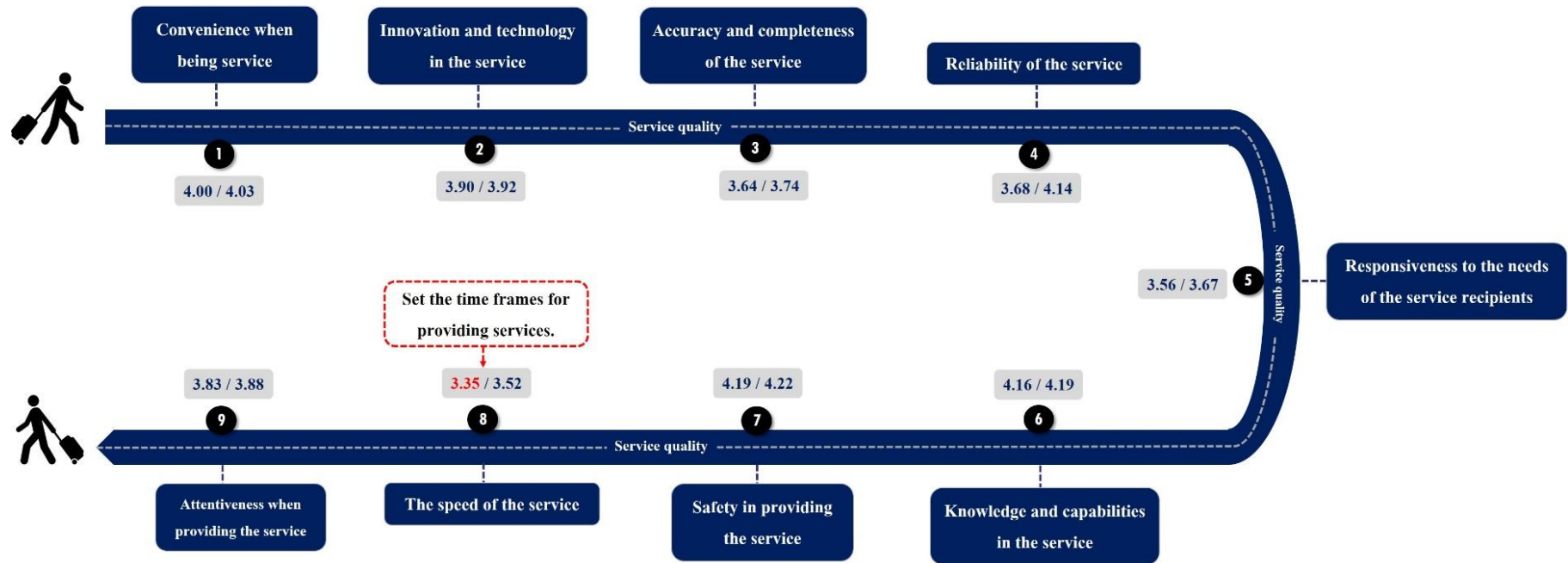
Service process flow management: for Servicing point no. 5, The reception of the service recipients or tourists, should provide a welcoming staff/receptionist who will serve Thai herbal drinks and a refreshing towel, for Servicing point no.12, The services before the service recipients or tourists leave, should add services such as public transport service, introduction to other products and services inside the hospital, and introduction to nearby attractions.



**Figure 4.16** The Development of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Process Flow Management



Service quality: for The speed of the service, the duration of each service point should be determined according to the service process in each of the main objectives of using health tourism services in the hospital, the service of each point must be completed within the specified period.

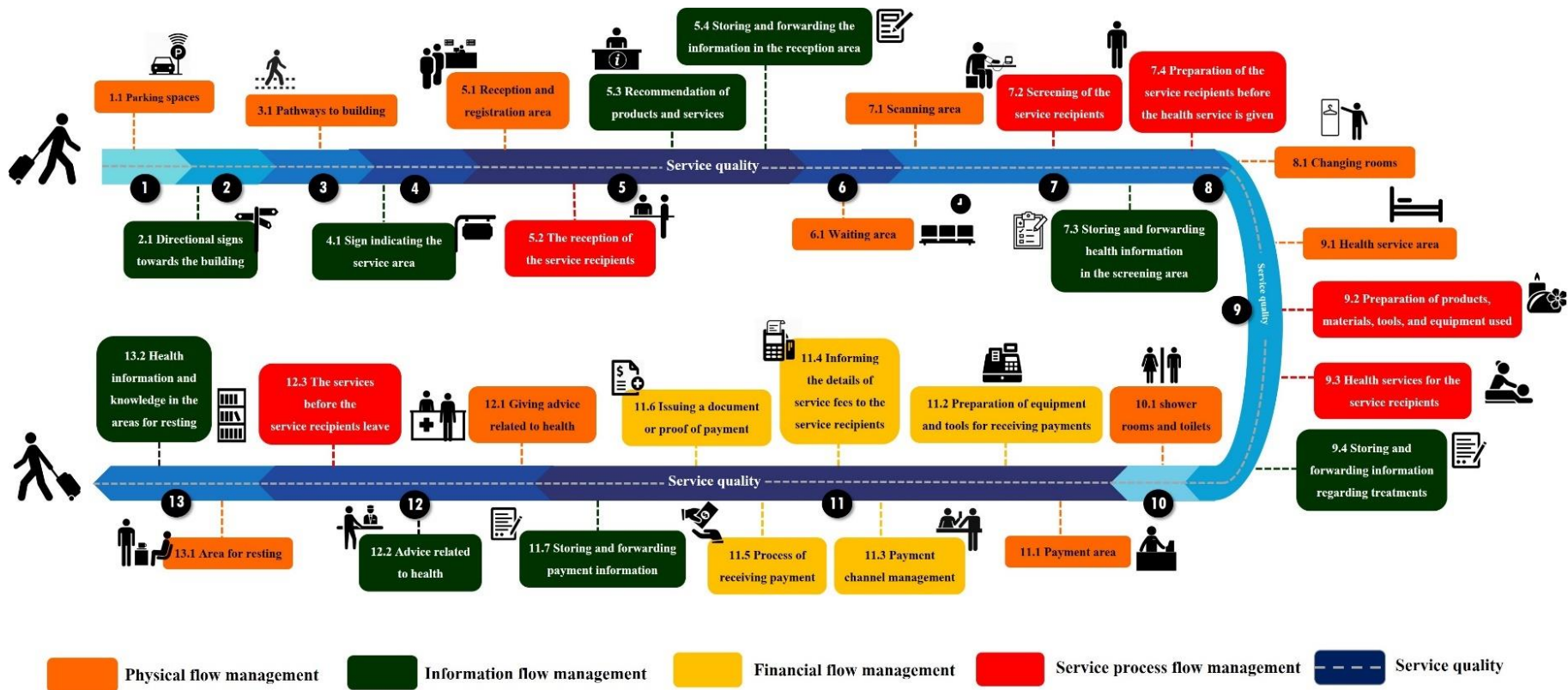


**Figure 4.17** The Development of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Terms of Service Quality

According to the aforementioned information, model of logistics management for health tourism in Thai traditional medicine promoting hospitals, the researcher has conducted focus group interviews so as to listen to the opinions of staff in Thai traditional medicine promoting hospitals. The results of the focus group interviews show that: for Servicing point no.2 Provision of directional signs towards the health service building, in addition to being installed in the right place or position, they should be seen clearly and should be put in the eye level, and they should have strong durability. Also, there should be sufficient and continuous numbers of signs from the parking area to the health service building. Similarly, for Servicing point no.4, Provision of a sign indicating the service area in the health service building, there should be clear and durable signs, at eye level, to indicate the service areas. For Servicing point no.3, Provision of pathways to the health service building, the pathways should be designed proportionately to make it convenient for service recipients or tourists and should be clean and safe, and also, there should be a ramp for wheelchairs, along with planted ornamental flowers or herbs throughout the walkway. For Servicing point no.9, Provision of a health service area, in addition to easy access, the area should be classified or proportionated according to the types of services. The atmosphere should be appropriate and provide privacy. Also, provision of a health service area should be separated from the area for general patients because most of the service recipients are not patients but tourists and customers who want to take care and promote their health more. Therefore, the atmosphere needed is different from that of other general hospitals. The area for health services should have healthy, cozy, shady, and peaceful environment, similar to that of a natural resort. There should also be appropriate lighting system by using natural light as well as using of different lights according to each service point. For color, should focus on the color tone that is comfortable and natural. For the sound, there should be some instrumental music or local music and adjust the volume appropriately. The smell in the area of health services should not smell like drugs or the chemicals. It should have a Thai herbs' smell. For Servicing point no.10, Provision of shower rooms and toilets, there should be appropriate facilities such as shower soap, soap for hands, toilet paper, trash can, and so on. For Servicing point no.13, Provision of an area for resting, besides having enough reception area that meets the needs of the services and that is

shady, beautiful, and peaceful with air flowing, there may be a shop where Thai herbal products can be sold or a restaurant selling food and beverages for health. Also, designing and decorating as best as possible according to naturalness are also needed.

The researcher has used the results obtained from conducting focus group interviews in creating a model of logistics management for health tourism in Thai traditional medicine promoting hospitals to be more complete before submitting it to experts who will verify the possibility of implementing the model in reality, as indicated in Figure 4.18



**Figure 4.18** A Model of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals

According to Figure 4.18 a model of logistics management for health tourism in Thai traditional medicine promoting hospitals by separating sub processes under physical flow management, information flow management, financial flow management, and service process flow management and ordering them according to the path of services, from the time when tourists enter the hospital to the time when they leave, into 13 service points. And throughout the path of services, the service quality shall be included, there are 13 servicing points as follows:

1) Servicing point no.1 Provision of parking spaces in the hospital

Provide fixed and well-proportioned parking spaces with clear separation of parking space for each vehicle. Separate parking area for each type of vehicle and set the runway. Staff at the parking area should be available for facilitation.

2) Servicing point no.2 Provision of directional signs towards the health service building

Install in the right place. Can be seen clearly. And should be at eye level. Strong durability. There are sufficient and continuous numbers from the parking area to the health service building.

3) Servicing point no. 3 Provision of pathways to the health service building

Designed proportionally to make it more convenient for the service recipients. There is a clear separation of the footpaths from the traffic lanes of the vehicles. Clean, safe, no obstacles in the area along the walking paths. There is a roof or cover that can protect tourists from the sun or rain. And have a ramp arrangement for wheelchairs, along with ornamental flowers or herbs planted throughout the walkways.

4) Servicing point no.4 Provision of a sign indicating the service area in the health service building

There are signs showing directions to the service areas which can be seen clearly and at eye level. The signs are made of durable materials.

5) Servicing point no. 5 Provision of a reception and registration area

Placed in front of the health service building to facilitate the visibility to and access of the service recipients. There are PR counters in the area. The

arrangement of furniture is organized, not obstructing the paths, and there is enough furniture for the service recipients. For welcoming the service recipients or tourists, provide a welcome staff who will serve Thai herbal drinks and refreshing towels.

Recommendation of products and services in the reception and registration area. Provide staff who will give advice on hospital products and services and create a menu of products and services so that tourists can study and choose the services on their own.

Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area. The information system is used to store and forward information. Able to link information for unity and consistency with all parts of the services.

6) Servicing point no. 6 Provision of a waiting area

Should be organized well, not blocking the paths, and the number of seats is sufficient for use and in good condition.

7) Servicing point no. 7 Provision of a scanning area

The area is well proportioned, easy for access, with an appropriate size of space. There are tables and chairs for staff and guests and space for equipment and medical equipment which are easy to reach for use.

Screening of the service recipients or tourists. They will ask for patients' medical history, measure height, diagnose symptoms, and assess the condition of the service recipients or tourists by measuring blood pressure, pulse rate, and respiration rate to get the right services for them.

Storing and forwarding health information of the service recipients or tourists in the screening area. The information system is used to store and forward information. They can link information to be united and consistent with all parts of services.

Preparation of the service recipients or tourists before the health service is given. By introducing individualized services according to the type of services.

8) Servicing point no. 8 Provision of changing rooms

Easily accessible, with men and women sections separated. The area is sufficient for the number of service recipients or tourists. There are lockers available.

9) Servicing point no. 9 Provision of a health service area

Should be easily accessible and classified or proportionated according to the types of services. The atmosphere should be appropriate and provide privacy. Also, provision of a health service area should be separated from the area for general patients because most of the service recipients are not patients but tourists and customers who want to take care and promote their health more. Therefore, the atmosphere needed is different from that of other general hospitals. The area for health services should have healthy, cozy, shady, and peaceful environment, similar to that of a natural resort. There should also be appropriate lighting system by using natural light as well as using of different lights according to each service point. For color, should focus on the color tone that is comfortable and natural. For the sound, there should be some instrumental music or local music and adjust the volume appropriately. The smell in the area of health services should not smell like drugs or the chemicals. It should smell like Thai herbs. As for preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists, there is the provision of products, materials, equipment, tools, and appliances by type of services. Health services for service recipients or tourists include Thai massage, aromatherapy massage, foot massage, herbal steam, herbal compress massage, sauna, body scrub with Thai herbs, facial scrub with Thai herbs, and bath with the essential oil or in a jacuzzi, according to academic and professional principles.

Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area. The information system is used to store and forward information. They can link information to be united and consistent with all parts of services.

10) Servicing point no.10 Provision of shower rooms and toilets

Easily accessible, the parts for men and women are separated. There are enough rooms to meet the needs of the service recipients. Good ventilation, no damp, no odor, and enough light can be experienced. Within the restroom, there are sinks, bidets, toilets, and shower rooms. The proper facilities provided include bath amenities, soap, toilet paper, trashcan, and so on.



#### 11) Servicing point no.11 Provision of a payment area

Arranged near the exit and easily accessible. There is an automatic cash dispenser for servicing the recipients, and there are enough seats for people waiting.

Preparation of equipment and tools for receiving payments. There is the preparation of computers, printers, calculators, receipt forms, deposit forms as well as coins and banknotes sufficiently and appropriately in terms of numbers and availability for services.

Payment channel management. Provide a variety of payment channels such as credit card payments or payments made through banks' applications

Informing the details of service fees and privileges to the service recipients or tourists. The service fee details are announced, and they also check and inform the benefits or privileges to the service recipients correctly and completely.

Process of receiving payment. There are proper steps in the process of receiving payment, from receiving money, checking the amount received from the service recipients or tourists to giving change and recording the payment details.

Issuing a document or proof of payment. In issuing a document or proof of payment, the computer system and document printers are used in issuing a document or proof of payment, and for storing and forwarding payment information, the information system is used to store and forward information and link information to be other parts of the services for consistency and unity.

#### 12) Servicing point no. 12 Provision of an area for giving advice and guidance related to health

Easily accessible and private. There is a counseling desk. There are chairs for Thai traditional medicine doctors and the service recipients.

Provision of advice related to health in the area for health advice and guidance. Thai traditional medicine doctors are available for any inquiries and for examining after the treatment and recovery as well as giving advice on health care after leaving the hospital.

The services before the service recipients or tourists leave. Provide a service satisfaction evaluation form towards the quality of the hospital and also give recommendations on other hospital's services, nearby attractions, public bus services and so on.

### 13) Servicing point no. 13 Provision of an area for resting

There is enough space to support the services. The design and decoration should be based on the nature. There should be beauty and peace in the atmosphere with good ventilation. The pathway connecting a Thai herbal products shop and a restaurant for healthy food and drink should be made.

Provision of health information and knowledge in the areas for resting. If it is inside the building, should provide a health-related circulation of exhibitions. If it is outside the building, there are plants that provide useful knowledge, such as aromatic plants, herbal garden, and health garden.

From a model of logistics management for health tourism in Thai traditional medicine promoting hospitals, the researcher has verified the possibility of implementing the model with experts, and the results of the interview show that a model of logistics management for health tourism in Thai traditional medicine promoting hospitals is possible for implementation. Besides, there are some key suggestions from experts as follows:

1) Provision of an area for resting: if it is the management of an herbal garden or a health park, there should be lawns for walking both covered with grass and stones for foot massage, for resting, and for learning about herbs, and there should be signs indicating meanings. In addition, there should be a courtyard for activities on special occasions or a place to meditate, and so on.

2) Provision of a health service area: if possible, should be decorated in accordance with local culture in order to provide service recipients or tourists with local arts and culture at the same time. This will also reflect the uniqueness and identity of health services through Thai traditional medicine.

3) Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists: should be maintained for the usage at all times.

4) Health services for the service recipients or tourists: the hospital should develop unique products and services that can be distinguished and remembered by service recipients for repeating services.

5) Changing rooms, restrooms, and toilets: should be designed for privacy, with fragrance of air conditioning spray or the aroma of Thai herbs.

## **CHAPTER 5**

### **CONCLUSION, CONTRIBUTIONS, RECOMMENDATIONS AND IMPLIMENTATIONS**

“A Model of Health Tourism Logistic Management in Thai Traditional Medicine Promoting Hospitals in Thailand” is a mixed method research using both quantitative and qualitative research. The main objective is to create an efficient and effective model of health tourism logistic management in Thai traditional medicine promoting hospitals that can well respond to the service recipients’ or tourists’ demands. The conclusion, discussion, and recommendation for this research are as follows.

#### **5.1 Conclusions**

The research’s findings can be concluded based on the objective as follows.

##### **5.1.1 To Analyze the Implementation of Health Tourism Promoting Policy in Thai Traditional Medicine Promoting Hospitals**

###### **5.1.1.1 Quantitative Research**

According to a personal data analysis of health tourism tourists who use the service in Thai traditional medicine promoting hospitals, most of them are female ages between 41-50, married, hold a bachelor degree, work as governmental officers/governmental staff, and earn 15,001-25,000 a month. Most of them have used the service in Thai traditional medicine promoting hospitals for the first time, and their main purpose is to receive Thai massage service.

The analysis’s results of the health tourism tourists’ opinions who use the service in Thai traditional medicine promoting hospitals towards the implementation of health tourism promoting policy in Thai traditional medicine promoting hospitals demonstrates that, overall, clearness of the policy is at a high level. When considering by topic, they are also at a high level: 1) the health tourism

promoting policy implementation in the hospitals has a clear procedure, 2) the health tourism promoting policy implementation in the hospitals has a clear project, activity, and service, 3) the health tourism promoting policy implementation in the hospitals has a clear goal, and 4) the health tourism promoting policy implementation in the hospitals has a clear objective, respectively.

In the aspect of environment, overall, it is at a high level, and when considering by topic, they are all at a high level: 1) the health tourism promoting policy implementation in the hospitals conforms to economic conditions, 2) the health tourism promoting policy implementation in the hospitals conforms to the tourists' values, 3) the health tourism promoting policy implementation in the hospitals conforms to Thai culture, and 4) the health tourism promoting policy implementation in the hospitals conforms to social conditions, respectively.

In the aspect of resources, overall, it is at a high level, and when considering by topic, they are all at a high level: 1) technology is applied appropriately to support the health tourism promoting policy implementation in the hospitals, 2) the personnel is sufficient for the health tourism promoting policy implementation, 3) materials, equipment, and tools are sufficient for the health tourism promoting policy implementation, 4) the location is provided properly for the health tourism promoting policy implementation, and 5) the budget is allocated properly for the health tourism promoting policy implementation, respectively.

In the aspect of organizational structure, overall, it is at a high level, and when considering by topic, they are all at a high level: 1) an establishment of agencies, departments, and divisions is done properly for the health tourism promoting policy implementation in the hospitals, and 2) a specification of roles, duties, and responsibilities for the personnel is done properly for the health tourism promoting policy implementation in the hospitals, respectively.

In the aspect of staff, overall, it is at a high level, and when considering by topic, they are all at a high level: 1) the staffs' skill and knowledge on the health tourism promoting policy implementation in the hospitals, and 2) cooperation among the staff on the health tourism promoting policy implementation in the hospitals, respectively.

In the aspect of communication, overall, it is at a high level, and when considering by topic, they are all at a high level: 1) the health tourism promoting policy implementation in the hospitals has precise and clear communication, 2) the health tourism promoting policy implementation in the hospitals has proper communication channels between the staff and service recipients, and 3) the health tourism promoting policy implementation in the hospitals has proper communication channels among the staff, respectively.

#### 5.1.1.2 Qualitative Research

The analysis's results of the staff's opinions who work in Thai traditional medicine promoting hospitals towards the implementation of health tourism promoting policy in Thai traditional medicine promoting hospitals demonstrates that in the aspect of the policy's clearness, the staff see that the policy is clear enough to be implemented. They also understand its content and objectives well. In addition, the projects, programs, activities, and services provided by the Thai traditional medicine promoting hospitals are in accordance with the health tourism promoting policy specified by Ministry of Public Health, Ministry of Tourism and Sports, Tourism Authority of Thailand, and other related organizations with clear success indicators. The implementation procedure is also set clearly, starting from holding a meeting to create understanding about the policy's detail, setting an implementation plan, arranging the organization's structure, procuring resources, implementing the policy, and evaluating the implementation, respectively.

In the aspect of external environment, the staff see that the health tourism promoting policy implementation in Thai traditional medicine promoting hospitals conforms to economic, social, and cultural condition as well as the tourists' value.

In the aspect of resource, the staff see that the budget is allocated to the hospitals sufficiently for the health tourism promoting policy implementation. The budget is also well managed from a process of making a budget plan, approving the budget, monitoring budget usage, controlling budget usage, solving budget problems, and evaluating the hospitals' budget process. However, some problems occur such as budget disbursement delay. For human resources, the hospitals have enough personnel including both permanent staff and part-time staff who are trained by the hospital. For

the location, the location is organized properly for health care services such as renovation of the existing buildings and building the new ones to support the service recipients or tourists. Moreover, the hospitals provide enough materials, equipment, and tools for usage, and they are suitable for the hospitals' types of service. They are well maintained to be ready to use at all times as well. Nevertheless, the problem is the maintenance cost because some equipment requires special maintenance technique and needs to be fixed by a skilled technician which comes with a high cost. In addition, the hospital also applied technology to support the process suitably which makes the service faster and more efficient.

In the aspect of organizational structure, the staff see that the Thai traditional medicine promoting hospitals use their existing organizational structure and add a mission to match with the health tourism promoting policy implementation. For example, basically, the hospital provides physical medicine and rehabilitation (PM&R) or physiatrists of which the mission is to provide rehabilitation treatment and physical therapy. Later, the health tourism promoting policy is implemented in the hospital, so the hospital adds Thai traditional medicine and spas into the physiatrist service. Furthermore, the hospital specifies a scope, role, task, and responsibility of the staff clearly with written notice so that they understand and work in accordance with the specified scope, role, task, and responsibility.

In the aspect of staff, all staff are knowledgeable and capable to perform their work appropriately with the assigned task. Besides, the hospitals also encourage the development of the staffs' skill and ability by always providing a training program, seminar, and field trip. They also have an idea of manpower development by creating and developing personnel who are the locals to offer them a career and income. They recruit the locals who are trained in massage based on a specified standard to be masseuses earning wages based on a specified rate. In addition, most of the staff have positive attitudes towards the health tourism promoting policy implementation in the hospitals because they think that it is useful for the hospitals and majority.

In the aspect of communication, the staff see that the hospitals have proper communication channels among the staff including both formal and informal communication which are meetings, announcements, memos, greetings, and opinion

surveys. For the communication between the staff and service recipients or tourists, they use an appropriate communication channel as well. The service recipients or tourists can receive complete, accurate, and clear information through the staff themselves, document, social media, and so on.

Besides, it is found that there is another factor associated with an effectiveness of the health tourism promoting policy implementation, which is an organization's executive who must have broad vision and good leadership in order to lead the policy implementation to be successful.

According to the analysis's results of the health tourism tourists' opinion who use health care service in Thai traditional medicine promoting hospitals towards the health tourism promoting policy implementation, in the aspect of policy's clearness, most of the tourists see that the hospitals implement the policy by clearly specifying the goal, objective, and process under a project, activity, and service which makes the tourists understand the policy's detail well.

In the aspect of environment, the health tourism tourists see that the policy implementation in Thai traditional medicine promoting hospitals conforms to economic, social, and cultural conditions as well as the tourists' values.

In the aspect of resource, the health tourism tourists see that the hospitals renovate the old buildings along with building new ones to support increasing service recipients or tourists. The hospitals have sufficient personnel as well as proper materials, equipment, and tools for the health care service which are modern and sufficient for the service recipients. From the service recipients' or tourists' viewpoint, these show that the hospitals receive enough budget with efficient allocation.

In the aspect of communication, the health tourism tourists see that the hospitals have various communication channels which are suitable and meet the tourists' demands. The communication between the staff and service recipients are direct communication with the staff, telephone, website, and brochure which the tourists see that these communication channels allow them to access the hospitals' information fast, accurately, and clearly.

Therefore, regarding the implementation of health tourism promoting policy in the practice of the Thai traditional medicine promoting hospitals, it can be

concluded that all aspects are at a high level. In addition, tourists and staff have the same view that the health tourism promoting policy of the hospital is clear. The objectives and goals are well set. The policy is consistent with the economy, society, culture and values of the tourists. Also, there are appropriate and adequate resources for services. However, there might be delays in the budget disbursement according to the government's system. There is also a division of departments which is clear and recognizes different individual services well. The staff are knowledgeable and are developed continuously. There are appropriate communication channels between staff and those between staff and service recipients. Additionally, the staff can receive news or information quickly, simply, accurately, and clearly.

### **5.1.2 To Evaluate the Efficiency and Effectiveness of Health Tourism Logistic Management Process in Thai Traditional Medicine Promoting Hospitals**

#### **5.1.2.1 Quantitative Research**

The analysis's results of the health tourism tourists' opinion who use health care service in Thai traditional medicine promoting hospitals towards the evaluation of health tourism logistic management process's efficiency in Thai traditional medicine promoting hospitals are as follows.

1) Physical flow management: overall, is at a high level, and when considering by topic, they are also at a high level: 1) provision of health service area, 2) provision of scanning area, 3) provision of an area for giving advice and guidance related to health, 4) provision of changing rooms, 5) provision of shower rooms and toilets, 6) provision of a payment area, 7) provision of a reception and registration area, 8) provision of pathways to the health service building, and 9) provision of parking spaces in the hospital, respectively whereas 1) provision of an area for resting and 2) provision of a waiting area are at a medium level.

2) Information flow management: overall, is at a high level, and when considering by topic, they are also at a high level: 1) recommendation of products and services in the reception and registration area, 2) provision of advice related to health in the area for health advice and guidance, and 3) provision of a sign indicating the service area in the health service building, respectively. On the other



hand, 1) provision of health information and knowledge in the areas for resting, 2) storing and forwarding the information and details of the service recipients or tourists in the reception and registration area, 3) storing and forwarding health information of the service recipients or tourists in the screening area, 4) storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area, 5) storing and forwarding payment information in the payment area, and 6) provision of directional signs towards the health service building are at a medium level.

3) Financial flow management: overall, is at a high level, and when considering by topic, they are also at a high level: 1) issuing a document or proof of payment, 2) informing the details of service fees to the service recipients or tourists, 3) process of receiving payment, and 4) preparation of equipment and tools for receiving payments, respectively. Apart from the mentioned, payment channel management is at a medium level.

4) Service process flow management: overall, is at a high level, and when considering by topic, they are also at a high level: 1) health services for the service recipients or tourists, 2) screening of the service recipients or tourists, 3) preparation of the service recipients or tourists before the health service is given, 4) preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists, and 5) the reception of the service recipients or tourists, respectively. Besides the mentioned, the services before the service recipients or tourists leave is at a medium level.

5) Service Quality: overall, is at a high level, and when considering by topic, they are also at a high level: 1) safety in providing the service, 2) knowledge and capabilities in the service, 3) convenience when being serviced, 4) innovation and technology in the service, 5) attentiveness when providing the service, 6) reliability of the service, 7) accuracy and completeness of the service, and 8) responsiveness to the needs of the service recipients, respectively whereas the speed of the service is in a medium level.

The analysis's results of the health tourism tourists' opinions who use the service in Thai traditional medicine promoting hospitals towards the evaluation of health tourism logistic management process's effectiveness in Thai traditional medicine promoting hospitals are as follows.

1) Physical flow management: overall, is at a high level, and when considering by topic, they are also at a high level: 1) provision of health service area, 2) provision of scanning area, 3) provision of an area for giving advice and guidance related to health, 4) provision of shower rooms and toilets, 5) provision of changing rooms, 6) provision of a payment area, 7) provision of a reception and registration area, 8) provision of pathways to the health service building, and 9) provision of parking spaces in the hospital, respectively whereas 1) provision of an area for resting and 2) provision of a waiting area are at a medium level.

2) Information flow management: overall, is at a high level, and when considering by topic, they are also at a high level: 1) provision of advice related to health in the area for health advice and guidance, 2) recommendation of products and services in the reception and registration area, 3) provision of a sign indicating the service area in the health service building, 4) storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area, respectively. Besides, 1) provision of health information and knowledge in the areas for resting, 2) storing and forwarding health information of the service recipients or tourists in the screening area, 3) storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area, 4) storing and forwarding payment information in the payment area, and 5) provision of directional signs towards the health service building are at a medium level.

3) Financial flow management: overall, is at a high level, and when considering by topic, they are also at a high level: 1) issuing a document or proof of payment, 2) informing the details of service fees to the service recipients or tourists, 3) process of receiving payment, and 4) preparation of equipment and tools for receiving payments, respectively. Apart from the mentioned, payment channel management is at a medium level.

4) Service process flow management: overall, is at a high level, and when considering by topic, they are also at a high level: 1) health services for the service recipients or tourists, 2) screening of the service recipients or tourists, 3) preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists, and 4) preparation of the service recipients

or tourists before the health service is given, respectively. Besides the mentioned, the services before the service recipients or tourists leave is at a medium level.

5) Service Quality: overall, is at a high level, and when considering by topic, they are also at a high level: 1) safety in providing the service, 2) knowledge and capabilities in the service, 3) reliability of the service, 4) convenience when being serviced, 5) innovation and technology in the service, 6) attentiveness when providing the service, 7) accuracy and completeness of the service, 8) responsiveness to the needs of the service recipients, and 9) the speed of the service.

A result of hypothesis test can be concluded as follows.

According to a comparison's result of the health tourism tourists' opinions who use health care service in Thai traditional medicine promoting hospitals towards the efficiency evaluation of logistic management process in Thai traditional medicine promoting hospitals, it is discovered that in the aspect of physical flow management, opinions of the health tourism tourists using the Thai traditional medicine promoting hospitals' service are various based on age and education level. In the aspect of information flow management, opinions of the health tourism tourists using the Thai traditional medicine promoting hospitals' service are indifferent. Also, in the aspect of financial flow management, opinions of the health tourism tourists using the Thai traditional medicine promoting hospitals' service are indifferent. In the aspect of service process flow management, opinions of the health tourism tourists using the Thai traditional medicine promoting hospitals' service are different based on age, monthly income, and experience on health tourism service in Thai traditional medicine promoting hospitals. In the aspect of service quality, the opinions are different based on education level, career, and experience on health tourism service in Thai traditional medicine promoting hospitals.

According to the comparison's result of the health tourism tourists' opinions who use health care service in Thai traditional medicine promoting hospitals towards the effectiveness evaluation of logistic management process in Thai traditional medicine promoting hospitals, it is found that in the aspect of physical flow management, opinions of the health tourism tourists using the Thai traditional medicine promoting hospitals' service are various based on age and education level.

In the aspect of information flow management, opinions of the health tourism tourists using the Thai traditional medicine promoting hospitals' service are indifferent. Likewise, in the aspect of financial flow management, opinions of the health tourism tourists using the Thai traditional medicine promoting hospitals' service are indifferent as well. In the aspect of service process flow management, opinions of the health tourism tourists using the Thai traditional medicine promoting hospitals' service are various based on age, monthly income, and experience on health tourism service in Thai traditional medicine promoting hospitals. In the aspect of service quality, the opinions are different based on education level and career.

An analysis's result of a relationship of the health tourism tourists' opinion using health care service in Thai traditional medicine promoting hospitals towards the effectiveness evaluation towards the efficiency and effectiveness evaluation on health tourism logistic management process in Thai traditional medicine promoting hospitals, shows that the efficiency and effectiveness of all aspects of the health tourism logistic management process in Thai traditional medicine promoting hospitals associate with each other.

According to the result of a multiple regression analysis on the factors of health tourism promoting policy implementation in Thai traditional medicine promoting hospitals affecting the efficiency of health tourism logistic management process in Thai traditional medicine promoting hospitals, the policy implementation's factors including the policy's clearness, resources, and staff influence on the efficiency of the health tourism logistic management process in Thai traditional medicine promoting hospitals.

#### 5.1.2.2 Qualitative Research

The analysis's results of the opinions of the Thai traditional medicine promoting hospitals' staff towards the evaluation on health tourism logistic management process's efficiency in Thai traditional medicine promoting hospitals are as follows.

In the aspect of physical flow management, the staff see that there is provision of parking spaces in the hospital. It can support 340 cars per day, which is enough for the service recipients or tourists, and there are staff facilitating them in the area as well. For provision of pathways to the health service building, the hospitals

provide pathways connecting each building. A footpath is clearly separated from the vehicle lane, and there is no barrier on the footpath. For provision of a reception and registration area, the reception and registration area are provided at the front inside the health care service building. There is an information counter in the reception area with well-arranged furniture which does not block the walk way. For provision of a waiting area, it is well-arranged, orderly, and does not obstruct the walk way. However, seats provided in the area are not enough for the service recipients during some periods. For provision of a scanning area, the area is well-arranged and easily accessible. The size is appropriate with a number of scanning staff. There are tables and chairs provided for the scanning staff and service recipients or tourists. There is an area for medical equipment and tools as well. For provision of changing rooms, the area is arranged to be easily accessible. Lockers and changing rooms are separated between male and female service recipients or tourists. For provision of a health service area, the area is arranged to be easily accessible. The rooms are divided by the service types with a relaxing atmosphere. For provision of shower rooms and toilets, they are arranged to be easily accessible and separated between male and female service recipients. They are well ventilated and not musty with sufficient facilities. For provision of a payment area, it is located near the exit without blocking the walk way. There are staff counters along with tools and equipment for receiving payment. For provision of an area for giving advice and guidance related to health, it is arranged to be easily accessible with desks and chairs for Thai traditional medicine doctors and service recipients. For provision of an area for resting, the area is limited because the building is under the renovation, so it is not quite convenient for the service recipients or tourists.

In the aspect of information flow management, the staff see that there is provision of directional signs towards the health service building. The hospitals provide directional signs around the hospital area towards the health service building, but they are in low quantity and lack of continuity. For provision of a sign indicating the service area in the health service building, signs indicating each service area are provided inside the health service building, which the service recipients or tourists can notice easily. For recommendation of products and services in the reception and registration area, there are staff available for giving advice about the hospital's products and services. Moreover, the product and service information are gathered in

a book for the service recipients or tourists to choose by themselves. For storing and forwarding the information and details of the service recipients or tourists in the reception and registration area, it is done by recording in an information folder, and then the staff will pass the folder to the next service area. On the other hand, storing and forwarding payment information in the payment area is done by recording into a computer system, which the information comes from other service areas. For provision of advice related to health in the area for health advice and guidance, Thai traditional medicine doctors are available for examining the service recipients after receiving Thai traditional medicine treatment. Besides, they also give the service recipients advice and guidance about health care after leaving the hospital. For provision of health information and knowledge in the areas for resting, brochures, posters, and health magazines are available for the service recipients or tourists to read for their health care benefit.

In the aspect of financial flow management, the staff see that there is preparation of equipment and tools for receiving payments, which the hospitals prepare equipment and tools for receiving payment every time before the service recipients or tourists use the service. Furthermore, they check readiness of the equipment and tools such as computers and printers to make sure they are ready to use. For payment channel management, there is only one payment channel which is cash payment; however, the process is fast. For informing the details of service fees to the service recipients or tourists, the staff informs the details of service fees and privilege to all service recipients or tourists before receiving the payment. For process of receiving payment, the hospitals pay attention to deliberateness, accuracy, and promptness of the process of receiving payment from receiving cash, checking an amount of money receiving from the service recipients or tourists, returning the change, recording payment data, to issuing a document or proof of payment. Lastly, for issuing a document or proof of payment, the document is issued through a computer, which the hospitals mainly emphasis on its accuracy.

In the aspect of service process flow management, the staff see that there is the reception of the service recipients or tourists, which the hospitals provide staff to welcome and facilitate the service recipients or tourists. For screening of the service recipients or tourists, all service recipients or tourists must be screened and

evaluate their conditions in order to receive an appropriate treatment. For preparation of the service recipients or tourists before the health service is given, they will be given advice on steps of the service and preparation before receiving the service individually. For preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists, the products, materials, tools, and equipment are well-prepared in a sufficient quantity and ready to use at all time. For health services for the service recipients or tourists, a full-serviced health care service as well as variety of products and services are provided to the service recipients or tourists, and each type meets academic and professional standards. Lastly, for the services before the service recipients or tourists leave, the hospitals do not provide it to the service recipients or tourists concretely. The staff only asks them about their opinions after receiving the service. Other services will be provided only when asked by the service recipients or tourists such as an inquiry about direction, nearby tourist attraction, and public transport.

In the aspect of service quality, the staff see that the hospitals provide service quality management for the tourists' convenience when being serviced. Innovation and technology are used in the service such as tools and equipment related to health care service, staff training to make them service minded and understand the service recipients' or tourists' demands.

The analysis's results of the opinions of the health tourism tourists using the Thai traditional medicine hospitals' service towards the evaluation on health tourism logistic management process's efficiency and effectiveness in Thai traditional medicine promoting hospitals are as follows.

In the aspect of physical flow management, the health tourism tourists using the Thai traditional medicine hospitals' service see that there is provision of parking spaces in the hospital. Parking spaces are provided in several areas with staff available for facilitating the service recipients' parking which makes them park the cars fast. For provision of pathways to the health service building, it is clean, convenient, and safe. For provision of a reception and registration area, it is located in the forefront part of the building which makes it easily noticeable and accessible. For provision of a waiting area, the area has appropriate atmosphere, but too small. There are not enough seats for the service recipients. For provision of a scanning area, it is

located next to the reception and registration area, and also near the waiting area which makes it easily accessible. A medical history taking desk is provided together with seats for the service recipients or tourists. For provision of changing rooms, they are accessible conveniently with separated rooms for male and female service recipients which provide convenience and safety to the service recipients when being serviced. For provision of a health service area, it is easily accessible and divided by types of service. Inside, each type of service room is well arranged with suitable atmosphere, which provides most of the tourists' privacy and relaxation during the service. For provision of shower rooms and toilets, they are easily accessible with separated rooms between male and female service recipients which make them feel safe. There is also convenient and sufficient equipment which helps facilitating them. For provision of a payment area, it is easily accessible and convenient. For provision of an area for giving advice and guidance related to health, it is easily accessible and separated into functional areas, which allows the service recipients to access the area easily and have their privacy when asking a Thai traditional medicine doctor for advice. For provision of an area for resting, the area is limited, so the tourists cannot take advantage of the resting area while some of them have to use it for waiting for those who come to use the service with them.

In the aspect of information flow management, the health tourism tourists using the Thai traditional medicine hospitals' service see that, for provision of directional signs towards the health service building, the directional signs towards the health service building are not enough and lack of continuity which confuse the tourists who come to the hospitals for the first time. They have to take a long time to reach the health service building. For provision of a sign indicating the service area in the health service building, the sign indicating the service area is provided clearly which allows the tourists to access the service areas easily without confusion. For recommendation of products and services in the reception and registration, staff are available for giving advice about the hospitals' products and services. A spa menu is provided for the service recipients or tourists to consider and choose the service by themselves. For storing and forwarding the information and details of the service recipients or tourists in the reception and registration area, it is a record in the service recipients' or tourists' personal data folder which will be passed to the next service



area by the staff. For storing and forwarding health information of the service recipients or tourists in the screening area, it is done by recording the data into the computer system, which is fast and convenient for the service. For storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area, it is done by recording into the service recipients' or tourists' personal data folder and passed to the next service area by the staff. For storing and forwarding payment information in the payment area, the computer system is applied for convenience and promptness of the service. For provision of advice related to health in the area for health advice and guidance, Thai traditional medicine doctors are available for giving advice about health care to the service recipients or tourists so they will receive right information after leaving. Lastly, for provision of health information and knowledge in the areas for resting, books and documents about health care are available for the service recipients or tourists to read which allow them to receive more knowledge. However, they still think that the hospitals should provide more activities in the resting area so that they receive more information and knowledge.

In the aspect of financial flow management, the health tourism tourists using the Thai traditional medicine hospitals' service see that, for preparation of equipment and tools for receiving payments, equipment and tools for receiving payment are provided properly and sufficiently, which help the service recipients or tourists save time while waiting for the service. For payment channel management, currently the service recipients can pay for the service fee by cash, but they think that if the hospitals provide more payment channels, they will have more payment alternatives as well as convenience and faster service. For informing the details of service fees to the service recipients or tourists, the service recipients are informed about the details of service fees and their privilege according to the terms and conditions correctly and completely. For process of receiving payment, the process is done step by step with accuracy and promptness. For issuing a document or proof of payment, it is done by the computer and printer which makes the process fast.

In the aspect of service process flow management, the health tourism tourists using the Thai traditional medicine hospitals' service see that, for the reception of the service recipients or tourists, the staff are available for welcoming the

service recipients or tourists; however, there is no other kind of hospitality such as a welcome drink and cool towel. For screening of the service recipients or tourists, the service recipients or tourists will be examined for their medical history, diagnosed their symptom, and evaluated on their condition so that they receive an appropriate service. This can build the service recipients' confidence well. For preparation of the service recipients or tourists before the health service is given, they will be given advice on the steps of the service individually. For preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists, the products, materials, tools, and equipment are well prepared based on the service types, so the service recipients or tourists do not have to wait for a long time. For health services for the service recipients or tourists, various types of service are provided based on academic and professional standards, which help building the service recipients' or tourists' confidence and safety in providing the service. Lastly, for the services before the service recipients or tourists leave, there are no other types of service apart from a verbal request for the service recipients' comments.

In the aspect of service quality, the health tourism tourists using the Thai traditional medicine hospitals' service think that the service is convenient and safe because it is provided by the hospital, so they trust the personnel's knowledge and capabilities in the service that meet academic standard. It is also fast, except some delay when there are a lot of service recipients or tourists. However, they are still satisfied with the hospitals' service.

Therefore, with regard to the evaluation of efficiency and effectiveness of health tourism logistics management process in the Thai traditional medicine promoting hospitals, it can be concluded that for physical flow management, overall, it is at a high level because different areas are properly managed, except the waiting areas for services that do not have sufficient numbers of seats for service recipients or tourists. There also seemed to be a problem with the rest area because of its limited space. For, information flow management, overall it is at a very high level, especially the introduction of products and services at the reception and registration area and the health guidance given at the area for giving advice and guidance related to health. However, it was also found that the signs indicating directions the health service building are insufficient. Also, storing and forwarding information at each service

point are still done, manually, in history folders, and the information is mainly then passed on by the staff. As for financial flow management, overall, it is at a high level because of good management, but for payment channels, there is only one, lacking diversity as a result. Regarding service process flow management, overall, it is at a high level. However, there was no service before service recipients or tourists leave the hospital. It was just asking for verbal feedback. For service quality, overall, it is at a high level in terms of speed of services although there could be some delays in the case of when a large number of service recipients are there at the same time. However, the assessment of the effectiveness showed that the tourists were satisfied.

### **5.1.3 To Create a Model of the Health Tourism Logistic Management in Thai Traditional Medicine Promoting Hospitals**

A model of the health tourism logistic management in Thai traditional medicine promoting hospitals consists of processes underlying the physical flow management, information flow management, financial flow management, and service process flow management starting from the tourists' arrival at the hospital to their departure. There are 13 service areas including 1<sup>st</sup> service area: parking space, 2<sup>nd</sup> service area: directional sign towards the building, 3<sup>rd</sup> service area: pathway to the building, 4<sup>th</sup> service area: signs indicating the service area, 5<sup>th</sup> service area: reception and registration area, the reception of the service recipients or tourists, and storing and forwarding the information and details of the service recipients or tourists, 6<sup>th</sup> service area: waiting area, 7<sup>th</sup> service area: scanning area, screening of the service recipients or tourists, storing and forwarding health information of the service recipients or tourists in the screening area, and preparation of the service recipients or tourists before the health service is given, 8<sup>th</sup> service area: changing rooms, 9<sup>th</sup> service area: health service area, preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists, health services for the service recipients or tourists, and storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists, 10<sup>th</sup> service area: shower rooms and toilets, 11<sup>th</sup> service area: payment area, preparation of equipment and tools for receiving payments, informing the details of service fees and privilege to the service recipients or tourists, payment channel management, process

of receiving payment, issuing a document or proof of payment, and storing and forwarding payment information, 12<sup>th</sup> service area: provision of an area for giving advice and guidance related to health, provision of advice related to health, and the services before the service recipients or tourists leave, and 13<sup>th</sup> service area: provision of an area for resting and provision of health information and knowledge. Throughout the service process from the tourists' arrival to the hospital to their departure, it is important to focus on service quality including convenience when being serviced, innovation and technology in the service, accuracy and completeness of the service, reliability of the service, responsiveness to the needs of the service recipients, knowledge and capabilities in the service, safety in providing the service, the speed of the service, and attentiveness when providing the service.

## **5.2 Discussions**

According to the research's analysis and conclusion, discussions on major issues are as follows.

### **5.2.1 General Information of Health Tourists Who have Used Services in Thai Traditional Medicine Promoting Hospitals**

Based on the study of general information of health tourists, who have used services in the Thai traditional medicine promoting hospital, most tourists are married females aged between 41-50 years old and work as government officers or state employees with average salary of 15,001-25,000 baht and have come for health tourism in the Thai traditional medicine promoting hospital for the first time. This is in line with the research conducted by Sriwan Udompod (2007) who conducted a study on "A Tourist's Satisfaction towards the Health Tourism Service in Damnoensaduak Hospital, Ratchaburi", in which, the results show that most tourists were female, married, and were at the time retired and getting a pension from the government with average monthly income of 20,000-30,000 baht, and the majority of them came for the services for the first time. When considering in terms of age, it was found that there is a difference because the study of Sriwan Udompod (2007) shows that most tourists are between 61-70 years old. It, therefore, is possible that the

current health care values are happening to people of young ages and not limited to the elderly because there is a desire for longevity.

### **5.2.2 A Health Tourism Promoting Policy Implementation in Thai Traditional Medicine Promoting Hospitals**

According to the study of effectiveness of the health tourism promoting policy implementation in Thai traditional medicine promoting hospitals in the aspect of the policy's clearness, the quantitative research finds that it is at a high level while the qualitative research finds that the mentioned hospitals have clear goals; objectives; procedures; and projects, activities, or services leading to the success of the policy implementation. It is in line with Sombat Thamrongthanyawong (2006)'s concept about policy implementation factors mentioning that the policy's clearness is a major fundamental of the policy's official and unofficial goal. A clear policy objective will lead to coherent implementation and efficient objective accomplishment. The concept conforms to Bunjai Limsila (2007)'s research on the study of factors affecting a success of alternative medicine service management by a public service provider, which Damnoensaduak Hospital, Ratchaburi was used as a case study. It is found that having a clear and continuous policy's objective for developing and integrating the alternative medicine to the public service provider greatly affects the success of the public service provider's alternative medicine service management. Likewise, Rawipa Homsetthi (1998) who conducted a study on an effectiveness of the policy implementation with a case study of Chiang Rai province, finds that a major factor of the policy and management related to the policy implementation's effectiveness is the clearness of the policy's objective. Accordingly, Paphatsorn Yotharak and Kitti Bunnak (2016) who conducted a study on tourism promoting policy implementation with a case study of Kho Samui district, Suratthani, finds that a major factor affecting the tourism promoting policy implementation is the clearness and appropriateness of a practice. It demonstrates that the success of the health tourism promoting policy implementation in Thai traditional medicine promoting hospitals must depend on clear procedures so that the implementing staff work efficiently in the same direction.

In the environmental aspect, the quantitative research finds that the effectiveness of the health tourism promoting policy implementation in Thai

traditional medicine promoting hospitals is at a high level as well. Meanwhile, the qualitative research finds that economic, social, cultural, and value condition affect the health tourism promoting policy implementation in Thai traditional medicine promoting hospitals, that agrees with Van Meter and Van Horn (1975)'s concept which mentioned that although the economic, social, cultural, and value condition affect the health tourism promoting policy implementation are not widely studied in the past, it is commonly acknowledged that they extremely have an impact on the policy implementation both directly and indirectly. Also, Cheema and Rondinelli (1983) state that the environmental conditions and social structure impact on the policy implementation. Moreover, understanding of social, economic, and political condition is highly necessary for the success of the policy, especially the impact of environmental condition factors which can either be supporting or obstructing factors for the policy's success. The important environmental condition factors include a political model, policy's structure, limitation of resources, social and cultural factors, the policy's benefits for the organization, and sufficiency of physical infrastructures. Likewise, Woradech Chantharasorn (2008) mentions about his concept in an integrated model which is one of the policy implementation models, and a major variable of this model is politics and external environment management which is extremely crucial for the successful policy implementation. It consists of a level of support or protest from different sectors, level of dependence among the organizations, negotiation ability with the external environment, and conditions of economic, social, and political change. In addition, it is also in accordance with Wang and Ap (2013)'s research: "Factors Affecting Tourism Policy Implementation: A Conceptual Framework and a Case Study in China" which the findings demonstrate that economic, social, and environmental factors have an influence on the policy implementation.

In the resource aspect, the quantitative research finds that the effectiveness is at a high level, while the qualitative research finds that location, budget, personnel, equipment and tools, and technology are essential for the health tourism promoting policy implementation in Thai traditional medicine promoting hospitals, the hospitals must manage resource usage appropriately for the highest efficiency and effectiveness. This agrees with Sombat Thamrongthanyawong (2006)'s concept who

mentions about the factors affecting the policy implementation that the resources for the policy implementation including cost, time, personnel, technology, and essential equipment are limited resources. They are regarded as essential factors for the success of the policy implementation; therefore, it is necessary to use them in the most efficient and effective way and to distribute them properly. It is also in line with Edward (1980)'s concept conveying that no matter how clear and certain the policy implementation order is and how precisely the statement is conveyed, the policy implementation cannot be effective unless the implementing staff lack of essential resources for the work. As a result, an authorized person who must ensure that the policy implementation will as need to be planned properly to provide facilities such as location for the implementation, equipment, and budget necessary for the work. Likewise, Chayanee Prakorbchat and Sanor Klinngam (2016) who conducted a study on the implementation of Universal Health Care Insurance policy by Hua Hin Hospital, Prachuabkirikhan find that budget, location, and equipment factor influence on the success of the policy implementation in Hua Hin Hospital. Besides, Duangta Chatuporn (2000)'s research on the effectiveness of the policy implementation with the case study of Thai Tourism Year during 1998 to 1999 mentions about the importance of the resources to the policy implementation's effectiveness, especially sufficiency of budget and personnel. Woradech Chantarasorn (2008) also adds that the policy implementation cannot be accomplished if problems related to fund, equipment and tools, and academic or technology factor occur. Therefore, the Thai traditional medicine promoting hospitals should place importance on the resources related to the health tourism promoting policy implementation in order to achieve the policy's objective.

In the aspect of organization structure, the quantitative research finds that the effectiveness of the health tourism promoting policy implementation in Thai traditional medicine promoting hospitals is at a high level. For the qualitative research, it is found that the hospitals have an appropriate organization structure as well as specification of role, duty, and responsibility. The Thai traditional medicine promoting hospitals specify Thai traditional medicine and spa as the services underlying rehabilitation medicine. The personnel's duty and responsibility are specified systematically as well. The aforementioned hospitals' organization structure

positively affects the policy implementation because it allows Thai traditional medicine and spa service to be independent and flexible. It is in line with Edward (1980)'s concept mentioning that other problems can happen during the policy implementation although there are sufficient resources for the policy implementation and the implementing staff know what to do and want to follow the policy. This is because a bureaucracy structure, which is significantly influential for the success of the policy implementation, does not match with the policy implementation. One of the organization structure principles is the standard of the organization's practice. It helps saving the implementing staff's time, which allows them to make a decision about their regular work faster. It also helps creating an implementation pattern for the personnel of a large and complex organization while bringing flexibility to the implementation. Similarly, Woradech Chantharasorn (2008)'s management model also states that the success or failure of the policy implementation depends on the responsible implementing organization's ability to implement the policy as expected. It is necessary that they should have a proper organizational structure. Moreover, it agrees with Wanchalee Noriya (2005)'s research on "An Evaluation of Water Sports Competition, Nakhon Pathom" which finds that, in the aspect of process evaluation, the competition has processes like planning, organization management, human resource management, and systematic command and control which help bringing success to the implementation of the event. In the same way, Chayanee Prakorbchat and Sanor Klinngam (2016) who conducted a study on the implementation of Universal Health Care Insurance policy by Hua Hin Hospital, Prachuabkirikhan found that the factors affecting the success of the Universal Health Care Insurance policy implementation are structure, human resource, budget, location, and equipment factor. For the structure factor, it is found that each step of the work assignment should be clear and able to let everyone engage in the procedure in order to build a positive awareness towards the work among all of them. Chawadee Kosol (2012)'s research on "Effectiveness of Sukhothai's Tourism and Sports Office's Policy Implementation" also shows that the organization structure is a factor affecting the success of the policy implementation, so it is obvious that the organization structure that matches with the policy implementation will lead to efficient operation, and it plays a major role in leading the policy to be successful. Monthipa Songpanich (2009) who conducted



research on an integrated health care service by public service providers found that a right operation structure impacts on sustainability as well. For example, arranging an integrated health care service management structure to match with the organization's main mission as much as possible such as arranging it under the rehabilitation medicine service and department of family clinical practice. Staff who are physiotherapists and nurses can perform their work in accordance with the organization's main mission as well, so their performance result can be used for an evaluation. This is considered as human resource management in accordance with their duty and responsibility, which will bring them professional progression as well as moral support leading to the sustainability of the integrated medicine as well.

In the aspect of the staff, the quantitative research finds that it is at a high level while the qualitative research finds that all staff are knowledgeable and able to work suitably with their assigned work. Furthermore, the hospitals support the development of their personnel's knowledge and skill by inviting instructors to educate the personnel at the hospital along with sending personnel to attend meetings, seminars, training courses, and field trips periodically. This is in accordance with Paphatsorn Yotharak and Kitti Bunnak (2016)'s research on a tourism promoting policy implementation with a case study of Koh Samui district, Suratthani, which finds that the personnel's knowledge and skill is an important factor for the tourism promoting policy implementation as well as Duangta Chatuporn (2000)'s research on the effectiveness of the policy implementation with a case study of Thai Tourism Year during 1998 to 1999 which finds that for the effectiveness of the Thai Tourism Year policy implementation, knowledgeable and skilled personnel are extremely necessary. Buranasak Rueksamruad (2000)'s research on an evaluation of a tourism promoting policy implementation in 2000: Thai Tourism Year, which only Tourism Authority of Thailand's Central Region Office of the 5<sup>th</sup> District is studied finds that one of the problems on the tourism promoting policy implementation is that the locals still lack of tourism knowledge leading to lack of participation in tourism promotion in 2000 which is the year of Thai Tourism. As a result, it is necessary to develop the personnel to have tourism knowledge so that they can perform their work efficiently. For the implementing staff's attitudes towards the health tourism promoting policy implementation in Thai traditional medicine promoting hospitals, the staff have

positive attitudes towards the policy, which agrees with Edward (1980)'s concept stating that the staff's attitude is a very important factor for the success of the policy implementation. Its success does not only depend on the staff's awareness of their duty and their ability to do it, but they must desire to accomplish it as well. Besides the research's result regarding the personnel's knowledge, ability, and attitude, Woradech Chantharasorn (2008) also further mentions about the staff and their attitude towards the policy, operation skill, commitment to the organization, adaptability to the policy's change, ability to learn from an experience, personnel training, and a scope of change to the staff.

In the aspect of communication, the quantitative research finds that it is at a high level, whereas the qualitative research finds that the hospitals have appropriate communication channels, and the communication can convey accurate and clear information, which allows the staff to proceed the tourism promoting policy implementation efficiently. Accordingly, Somphon Fueangchan (2009) states that fully communicating and coordinating are significant factors indicating the success or failure of the policy implementation, which is similar to the idea of a policy implementation model proposed by Van Meter and Van Horn (1975), presenting that a variable connecting the policy to the policy implementation's result is a communication between organizations and policy implementation promoting activities. Conveying a goal and objective to the organizations and related persons at every level of the organization is required for the policy implementation. For a successful policy implementation, clarity, accuracy, and consistency is essential for the communication process. The idea is coherent with Rawipa Homsetthi (1998)'s research on the effectiveness of the policy implementation with a case study of Chiang Rai province. It is found that apart from clarity of an objective, preparedness of tourism supply, sufficiency of management resources, personnel's knowledge and skill, support from the personnel, and social condition, another significant factor related to the policy and management associating with effectiveness of the policy implementation is communication. Monthipa Songpanich (2009)'s research on an integrated health care service by public service providers shows communication problems in the organizations. The integrated health care service is a cooperation between conventional medicine and alternative medicine, but the alternative medicine

is still considered as a new thing for personnel in the hospitals. So, one of the most significant factors is communication for conveying the alternative medicine concept and method not only to the alternative medicine department, but towards the personnel of all departments intensely. Therefore, various methods are required for conveying them, such as arranging a monthly meeting to inform health personnel and public relation about the integrated medicine process in order to make them understand the concept, objectives and goals of the process, advantage of the integrated health care service, and its effect to the external and internal personnel.

For other factors, the quantitative research finds that an organization's executive is also a significant factor for the success of the health tourism promoting policy implementation in Thai traditional medicine promoting hospitals. Their leadership and broad vision play an important role in driving the policy implementation to be successful. Mazmanian and Sabatier (1989)'s idea is that leadership and the implementing staff's acceptance on the policy are important variables for the policy's result. Woradech Chantarasorn (2008) similarly mentions in his integrative model that an organization's executive requires proper leadership in order to succeed the policy implementation. He should be able to provide positive motivation to the staff such as reward or praise. In addition, he should be able to encourage the organization's members to take part in the operation to build commitment and acceptance from other members and should be able to create an efficient team. Paphatsorn Yotharak and Kitti Bunnak (2013)'s research on a tourism promoting policy implementation with a case study of Koh Samui district, Suratthani also finds that an executive's leadership is obviously associated with the tourism promoting policy implementation. Leadership is regarded as a factor influencing on the policy implementation's success level. If the executive is determined to work for developing the local community, the personnel in the organization will trust in him and certainly follow the policy. So, it is highly possible that the policy implementation will be successful. According to the study, overall, a local leader of Koh Samui relies on democratic leadership as his major qualifications are morality and transparency, broad vision, problem solving skill, and open mind to the staffs' opinions. Besides, Wanchalee Noriya (2005)'s research on "An Evaluation of Water Sports Competition, Nakhon Pathom" demonstrates that the competition is a

collaboration between three organizations including Nakhon Pathom province, Royal Police Cadet Academy, and Mahidol University, which a management executive is the governor of Nakhon Pathom who makes a decision for efficient event's process leading the project to achieve the objectives and goals as planned. This shows that an executive with leadership and broad vision will bring success to the project or activity.

However, in the study of Chawadee Kosol (2012), which examines the effectiveness of the implementation of tourism policy in the practice of the Tourism and Sports Office in Sukhothai Province, it has been shown that in addition to the factors including organizational structure, staff, budget, location, and leadership that affect the success of implementing the tourism promoting policy to the practice, there are also other different factors that influence the success of the implementation of tourism promotion policy in practice which are participation, teamwork, and motivation. Hence, the researcher found that these factors are a key feature for corporate executives who have to create a process, which initiates participation in policy implementation, collaboration for teamwork as well as motivation within the organization. Therefore, these factors are part of the factors related to corporate executives or the management team.

### **5.2.2 Efficiency and Effectiveness of the Health Tourism Logistic Management Process in Thai Traditional Medicine Promoting Hospitals**

As for the assessment of the efficiency and effectiveness of the logistics management process for health tourism in the Thai traditional medicine promotion hospitals, overall, is at a high level. While the study of Naiyana Phaibul (2009) on a survey on domestic tourists' satisfaction based on tourism logistics management indicators with a case study of Koh Chang, Koh Lan, and Koh Samet found that the tourists were satisfied with tourism logistics management at a mediocre level. With regard to this, the researcher sees that differences in the satisfaction with tourism logistics management were due to the different context of different areas, which made the expectations and perceptions of tourists different. In addition, there may be other components involved such as time frame, activities, services, etc.

For the aspect of physical flow management including provision of parking spaces in the hospital, provision of pathways to the health service building, provision of a reception and registration area, provision of a waiting area, provision of a scanning area, provision of changing rooms, provision of a health service area, provision of shower rooms and toilets, provision of a payment area, provision of an area for giving advice and guidance related to health, and provision of an area for resting, it is in accordance with Society and Health Institute (2014)'s concept stating that the physical qualifications of the hospital must consist of areas such as a reception area, waiting area, registration area, scanning area, dining area, toilets, changing rooms, medical examination rooms, advice rooms, education area, dining area, and payment area. It agrees with Vischer (2007)'s and Wanwilai Chantrapa (1984)'s concept as well. That is, a building or location should be easily accessible along with convenient parking spaces, proper pathways, and sufficient seats for service recipients in an appropriate area. Moreover, service areas should be arranged in order which will facilitate the service recipients. According to Natthada Srimook (2015 who conducted a study on "A Performance Development Model of a Health Promoting Service Provider under Active Beach Group to Support Russian Tourists", a spa under The Active Beach group is located both inside the hotel building separately from the accommodation area as well as outside the building with outstanding design. Furthermore, it is located near natural tourist attractions and the beach and is easy to access as well. These are regarded as its strengths as the location has a potential to attract more Russian tourists who stay in the hotel to use the spa service. Several types of service rooms with unique decoration are available for the tourists to choose from. It is obvious that the efficiency of physical flow impacts the service demand, and it can satisfy the service recipients or tourists as well.

For the aspect of information flow management including provision of directional signs towards the health service building, provision of a sign indicating the service area in the health service building, recommendation of products and services in the reception and registration area, storing and forwarding the information and details of the service recipients or tourists in the reception and registration area, storing and forwarding health information of the service recipients or tourists in the screening area, storing and forwarding information regarding treatments, remedies,

and health restoration of the service recipients or tourists in the health service area, storing and forwarding payment information in the payment area, provision of advice related to health in the area for health advice and guidance, and provision of health information and knowledge in the areas for resting, it is in accordance with Khomsan Suriya (2008) who states that the information flow management also includes provision of information to the tourists, directional signs, signs indicating location, regulation of the location, and warning signs. In addition, Chaker and Al-Azzab (2011) state that accuracy and reliability are the essence of information management in the hospitals. However, a research's result on provision of directional signs towards the health service building shows that the directional signs are still in low quantity and lack of continuity, so they confuse the tourists who visit the hospital for the first time, and they have to take a long time to go to the health service building. Besides, storing and forwarding data is still done by recording into the service recipient's or tourist's personal data folders before passing them to the staff in the next service area. Using information technology system will help accelerating the process and uniting all data to link with other service areas. It is similar to Duangphan Kritchanai (2015)'s concept mentioning that information sharing and visibility throughout the system together with reduction of redundant process and unnecessary documents are crucial for the information system management in the hospitals.

For the financial flow management including preparation of equipment and tools for receiving payments, payment channel management, informing the details of service fees to the service recipients or tourists, process of receiving payment, and issuing a document or proof of payment, it conforms to Mena, Christopher, Johnson, and Jia (2007)'s statement that the financial flow management is regarded as a necessary activity requiring facilitation for the customers, which is in accordance with Khomsan Suriya (2008)'s concept that is the financial flow management in terms of delivering service to the tourists consists of facilitating the customers in a payment process, payment channels, ATM machines, credit card usage, and currency exchange. Also, Chutchapol Songsoontornwong (2011) states that the financial flow refers to financial management as well as payment, currency exchange, and tax refund, which should be convenient for the tourists.

For the service process flow management including the reception of the service recipients or tourists, screening of the service recipients or tourists, preparation of the service recipients or tourists before the health service is given, preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists, health services for the service recipients or tourists, and the services before the service recipients or tourists leave, it agrees with Siriwan Serirath et al. (1998)'s concept mentioning that the service process is an activity concerning regulation, method, and operation of the service presenting to the service recipients with accuracy and promptness which will impress them. Also, Somchat Toraksa (2007) states that the goals of the service providers' service system for providing the service are promptness, accuracy, and impressiveness from the service recipients' arrival to their departure. Siwarit Pongsakornrangsilpa (2004) further describes the service process as a process of providing value to the customers. The service providers should set a system and design a process to facilitate the customers as much as possible. The process making the customers to wait for a long time should be eliminated, and the service process flow management should have as less obstacles as possible.

For the service quality including convenience when being serviced, innovation and technology in the service, accuracy and completeness of the service, reliability of the service, responsiveness to the needs of the service recipients, knowledge and capabilities in the service, safety in providing the service, the speed of the service, and attentiveness when providing the service, it is in line with Evans and Lindsay (1999)'s concept that a service quality evaluation can be done through service's duration, service's completeness, service provider's politeness, service's consistency, convenience when receiving the service, service's accuracy, and responsiveness to the service recipients' demand. According to an evaluation of efficiency and effectiveness of the health tourism logistic management process in Thai traditional medicine promoting hospitals, overall, both efficiency and effectiveness, which are expectation and perception towards the service, are at a high level. It conforms to Thanyamas Phumanon (2004)'s research on "A Level of OPD Patients' Expectation and Satisfaction towards Police Hospital's Service Quality", which finds that the OPD patients have high level of expectation and satisfaction on the service quality of the

Police Hospital both in overall and in each aspect. Considering an average between the efficiency and effectiveness, it is found that an average of effectiveness is higher than the efficiency's, which means that the perception level of health tourism tourists using the Thai traditional medicine promoting hospitals' service is higher than the expectation. It agrees with Spreng and Mackoy (1996)'s concept that a service quality evaluation can be done from the perception and satisfaction on the service quality.

### **5.2.3 Hypothesis Testing**

Regarding the result of hypothesis testing, different personal data of the health tourism tourists who use the Thai traditional medicine promoting hospitals' service leads to the differences in an evaluation of efficiency and effectiveness of the health tourism logistic management process in Thai traditional medicine promoting hospitals. The result shows that different sex of the health tourism tourists who use the Thai traditional medicine promoting hospitals' service leads to an indifference of the evaluation of the health tourism logistic management process in Thai traditional medicine promoting hospitals, in the aspect of physical flow management, information flow management, financial flow management, and service process flow management. It can be explained that regardless of what sex the tourists are, they might be able to perceive the logistic management process's efficiency and effectiveness equally since people in all sexes have independent thoughts as well as equal educational opportunities and perceptions. This is in accordance with Panasaya Sirarungrojkanok (2016)'s research on Thai tourists' behaviors and satisfaction on tourism logistic management with a case study of Amphawa Floating Market, Samutsongkram, which finds that the tourists with different sex have indifferent satisfaction on the tourism logistic management in terms of physical convenience, information perception, service delivery, personal and property safety, and expense and finance. Bunyada Jaihan (2013) who conducted a study on a marketing strategy for Thai traditional medicine service in Damnoensaduak Hospital, Ratchaburi also found that the service recipients with different sex have indifferent satisfaction levels on the Thai traditional medicine service in terms of service process. Similarly, Bangorn Praschayakul (2004)'s research on the service recipients' satisfaction towards the Ministry of Public Health's hospital and factors affecting their



satisfaction also shows that the service recipients with different sex have indifferent satisfaction towards the service of the Ministry of Public Health's hospital.

Nevertheless, from the study conducted by Ornachuma Weerasai (2005) on a satisfaction level of OPD patients towards the service of a private hospital's internal medicine department, the results of this study suggest that out-patients with different genders were differently satisfied with the services given by the internal medicine department. Concerning which, the researcher sees that it may be the fact that the types of services given to the patients and those given to the health tourists are different. This is because the patients are treated according to the occurring symptoms, and some diseases occur based on sexuality, so expectations and perceptions of treatment or services are different. Meanwhile, health tourism services are provided to service recipients or tourists who do not specify gender or gender-based types of products and services. But these are services provided because of the need without separating males or females as that done to the patients. Therefore, the results of satisfaction levels are not different.

Difference in the health tourism tourists' age who use the Thai traditional medicine promoting hospitals' service leads to a difference in the evaluation of efficiency and effectiveness of the health tourism logistic management process in Thai traditional medicine promoting hospitals, in the aspect of physical flow management and service process flow management. It can be explained that the tourists in different age range demand for different physical description management such as a location, facility, material, equipment, and tools, as well as regulation, method, and service practice. These demands are variable according to each person's age range. It conforms to Naiyana Phaibul (2009)'s research on a survey on domestic tourists' satisfaction based on tourism logistic management indicators with a case study of Koh Chang, Koh Lan, and Koh Samet. The result demonstrates that the tourists with different age range have different satisfaction opinions on the tourism logistic management in the physical aspect.

Difference in marital status among the health tourism tourists who use the Thai traditional medicine promoting hospitals' service leads to an indifference in the evaluation of efficiency and effectiveness of the health tourism logistic management process in Thai traditional medicine promoting hospitals, in the aspect of physical

flow management, information flow management, financial flow management, and service process flow management. According to Sriwan Udompoch (2007)'s research on the health tourism tourists' satisfaction towards the service of Damnoensaduak Hospital, Ratchaburi, married tourists have indifferent satisfaction towards the health tourism service.

Difference in occupation among the health tourism tourists who use the Thai traditional medicine promoting hospitals' service leads to an indifference in the evaluation of efficiency and effectiveness of the health tourism logistic management process in Thai traditional medicine promoting hospitals in the aspect of physical flow management, information flow management, financial flow management, and service process flow management. It agrees with Ornchuma Weerasai (2005)'s research on a satisfaction level of OPD patients towards the service of a private hospital's internal medicine department. The result shows that the OPD patients with different occupation have indifferent satisfaction towards the service.

Difference in educational level among the health tourism tourists who use the Thai traditional medicine promoting hospitals' service leads to a difference in the evaluation of efficiency and effectiveness of the health tourism logistic management process in Thai traditional medicine promoting hospitals in the aspect of physical flow management. It is noticeable that educational level is a main factor affecting the service recipients' expectation on the service. The higher educational level the service recipients have, the more ability to search for information as well as more perception they have. According to Bunyada Jaihan (2013)'s research on a marketing strategy for Thai traditional medicine service in Damnoensaduak Hospital, Ratchaburi, the service recipients with different educational level have different satisfaction levels towards the Thai traditional medicine service in terms of products and services. Besides, the difference in educational level has an impact on the difference in the evaluation of efficiency and effectiveness of the health tourism logistic management process in Thai traditional medicine promoting hospitals in the aspect of service quality as well. According to research on "A Level of OPD Patients' Expectation and Satisfaction towards the Police Hospital's Service Quality" by Thanyamas Phumanon (2004), which are a comparative study between the OPD patients' expectation and satisfaction towards the Police Hospital's service quality based on their personal traits and types

of service together with a study on relationship between the OPD patients' expectation and satisfaction towards the Police Hospital's service quality. It is found that the difference in educational level has an impact on the difference in expectation on the service quality. Moreover, the service recipients' expectation and satisfaction towards the Police Hospital's service quality are associated with each other.

The difference in occupation among the health tourism tourists who use the Thai traditional medicine promoting hospitals' service leads to a difference in the evaluation of efficiency and effectiveness of the health tourism logistic management process in Thai traditional medicine promoting hospitals in the aspect of service quality. According to Bangorn Praschayakul (2004)'s research on the service recipients' satisfaction towards the Ministry of Public Health's hospital and factors affecting their satisfaction, the service recipients with different occupations have different satisfaction towards the service of the Ministry of Public Health's hospital. It is similar to Sriwan Udompoch (2007)'s research on the health tourism tourists' satisfaction towards the service of Damnoensaduak Hospital, Ratchaburi, which finds that the tourists with different occupations have different satisfaction towards the health tourism service. It can be noticed that an occupation relates to an educational level and social status, which means that those who have a high educational level tends to have an upper-class occupation and social status. So, the upper-class tends to use the service more than other classes leading to the difference in the efficiency and effectiveness evaluation or expectation and satisfaction towards the service quality among people with different occupations and social statuses.

The difference in monthly income and service experience in Thai traditional medicine promoting hospitals among the health tourism tourists who use the Thai traditional medicine promoting hospitals' service leads to a difference in the efficiency and effectiveness evaluation of the health tourism logistic management process in Thai traditional medicine promoting hospitals in the aspect of service process flow management. It is in accordance with Thanaphat Thachaphan (2015)'s research on tourism logistic development method in Koh Tarutao, Satun. The result of a comparison on the tourists' satisfaction towards the tourism logistic components based on their income shows that the tourists with different incomes have different satisfaction towards the service process. It can be noticed that income level can affect

the efficiency and effectiveness evaluation of the logistic management process because the tourists with a high income will demand a higher service quality, and they tend to have more experiences on the service usage than those who have a lower income, which changes the viewpoint towards the efficiency and effectiveness evaluation into a different way. Furthermore, the difference in service experience in Thai traditional medicine promoting hospitals leads to the difference in the efficiency and effectiveness evaluation of the health tourism logistic management process in Thai traditional medicine promoting hospitals in the aspect of service quality, which is in the same way as the Tourism Authority of Thailand (2010)'s survey on behaviors and satisfaction of foreign tourists in the beauty care group. It is found that, nowadays, the tourists have more experience in the beauty care service, so they have higher expectation on the service quality and hope to have new experience. In the researcher's opinion, each time they receive the service, they do not only gain more experience, but they have higher expectation on the service quality as well. Similarly, Fitzsimmons and Fitzsimmons (1994) state that the service quality is an important relationship between the customer's existing expectation of the service and perception during and after experiencing the service. It emphasizes that the service experience influences a different expectation on service quality, while the efficiency and effectiveness evaluation of the health tourism logistic management process in Thai traditional medicine promoting hospitals is indifferent. Sriwan Udompoch (2007)'s research on the health tourism tourists' satisfaction towards the service of Damnoensaduak Hospital, Ratchaburi, also finds that difference in number of services offered does not impact the difference in tourists' satisfaction towards the health tourism service. As a result, the researcher sees that the efficiency evaluation of the health tourism logistic management in Thai traditional medicine promoting hospitals in terms of service quality is different because the tourists with different service experience will have different expectations on the service quality. Meanwhile, if they receive a good service experience, the effectiveness evaluation or perception will be indifferent.

The difference in the purpose of receiving the service among the health tourism tourists who use the Thai traditional medicine promoting hospitals' service leads to an indifference in the efficiency and effectiveness evaluation of the health

tourism logistic management process in Thai traditional medicine promoting hospitals in the aspect of service process flow management. In the researcher's opinion, no matter what purpose encourages them to use the hospital's service, they usually focus on the service process and practice. Therefore, the efficiency and effectiveness evaluation are indifferent.

The efficiency and effectiveness of the health tourism logistic management process in Thai traditional medicine promoting hospitals evaluated by the health tourism tourists who use the Thai traditional medicine promoting hospitals' service associate with each other. It is found that the efficiency of physical flow management, information flow management, financial flow management, service process flow management, and service quality associate with the effectiveness of physical flow management, information flow management, financial flow management, service process flow management, and service quality. This shows that good management ability leads to the success and the health tourism tourists' satisfaction on the service of the Thai traditional medicine promoting hospitals. According to Seldin (1988), the effectiveness evaluation is generally an evaluation to consider the difference between an expectation, referring to an efficiency or ability to process, and operation's result or satisfaction. A low level of difference refers to a high level of effectiveness, whereas a high level of difference refers to a low level of effectiveness. Besides, it can be considered from coherence between an outcome and specified goal.

Factors regarding the health tourism promoting policy implementation in Thai traditional medicine promoting hospitals including the policy's clarity, resources, and implementing staff have an impact on the efficiency of the health tourism logistic management process in Thai traditional medicine promoting hospitals. The policy's clarity is in accordance with Sombat Thamrongthanyawong (2006)'s concept mentioning that the policy's clarity is a significant fundamental of both official and unofficial policy's objectives. A policy with clear objectives will lead to good coordination in the policy implementation and achieve the objectives efficiently. The policy's clarity depends on a clear specification of the policy's problems and a responsible person for the problem solving, target group effected by the problem solving, and a proper evaluation of required resources. Therefore, the researcher regards the policy's clearness as a significant fundamental for successful and efficient

implementation. If the policy has clear goals, objectives, procedures, and projects and activities, the implementing staff will profoundly understand the work's procedure and direction and eventually achieve the implementation. In addition, a resource factor also influences on the efficiency of the health tourism logistic management process in Thai traditional medicine promoting hospitals. According to Edward (1980)'s concept stating that resources are essential for the policy implementation. They include a sufficient quantity of personnel with sufficient skills, sufficient related information systems, and good cooperation from related persons. Moreover, an authorized person, who has to assure that the policy implementation will be as planned, must provide facilities like a location for implementation, equipment, and proper budget for the implementation. Meanwhile, they influence on the physical flow management, information flow management, financial flow management, and service process flow management as well; therefore, a location, equipment and tools, information technology, budget, and personnel are inevitably required for the implementation process in order to keep the tourist and service flow smooth and to receive the highest satisfaction. Moreover, it conforms to Woradech Chantarasorn (2008)'s concept mentioning about the implementing staffs' requirements, which include attitude towards the policy, implementation skill, knowledge and ability, level of acceptance on the policy's goals and objectives, willingness in the implementation, commitment to the organization, adaptability to the policy's change, and experience learning skill. Considering the influence of the implementing staff on the health tourism logistic management process in Thai traditional medicine promoting hospitals, it can be noticed that the implementing staff are required for driving the service process flow management, financial flow management, and information flow management. Furthermore, Bunjai Limsila (2007) who conducted a study on "Factors Affecting on a Success of Alternative Medicine Service by Public Service Providers: A Case Study of Damnoensaduak Hospital, Ratchaburi" also found that an important factor affecting the success of Damnoensaduak Hospital's alternative medicine service is preparedness of the service provider, including location as well as sufficient personnel and budget, which are the factors that can satisfy the service recipients and encourage them to use the service again.

A model of logistic management for health tourism in Thai traditional medicine promoting hospitals consist of physical flow management, information flow management, financial flow management and service process flow management, which are divided into 13 service areas beginning from the tourists' arrival to their departure. There are 13 servicing points as follows: Servicing point no. 1 Provision of parking spaces in the hospital, Servicing point no. 2 Provision of directional signs towards the health service building, Servicing point no. 3 Provision of pathways to the health service building, Servicing point no. 4 Provision of a sign indicating the service area in the health service building, Servicing point no. 5 Provision of a reception and registration area, Recommendation of products and services in the reception and registration area, Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area, Servicing point no. 6 Provision of a waiting area, Servicing point no. 7 Provision of a scanning area, Screening of the service recipients or tourists, Storing and forwarding health information of the service recipients or tourists in the screening area, Preparation of the service recipients or tourists before the health service is given, Servicing point no. 8 Provision of changing rooms, Servicing point no. 9 Provision of a health service area, Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area, Servicing point no. 10 Provision of shower rooms and toilets, Servicing point no. 11 Provision of a payment area, Preparation of equipment and tools for receiving payments, Payment channel management, Informing the details of service fees and privileges to the service recipients or tourists, Process of receiving payment, Issuing a document or proof of payment, Servicing point no. 12 Provision of an area for giving advice and guidance related to health, Provision of advice related to health in the area for health advice and guidance, The services before the service recipients or tourists leave, Servicing point no. 13 Provision of an area for resting, Provision of health information and knowledge in the areas for resting. The model makes the tourist flow smooth from their arrival to departure, reduces their waiting time, eliminates an error during the process, and provides them the highest satisfaction. It is in line with Khomsan Suriya (2009)'s concept that the tourism logistic management is a process focusing on an activity related to tourist and object movement from the origin to

destination without any mistake, while Paphatsorn Yotharak and Kitti Bunnak (2013); Chitpong Aysanon (2015) state that the tourism logistics is not only about moving the tourist from one place to another, but the tourist movement is an activity underlying the tourism logistics that occurs only during a sector, not the entire way. For example, car or boat transportation will end when the tourists reach their destination or accommodation. However, the logistics still plays a management role in the area without transport in order to keep the tourist flow smooth. Considering the Thai traditional medicine promoting hospitals, they are similar to tourist attractions or accommodation in that there is no transport activity, but a proper logistic management is still required in order to maintain the smoothness of the service process from the tourists' arrival at the hospital to their departure, speed of the service, and customer's highest satisfaction. Likewise, Ctirad Schejbal (2013) sees that the tourism logistic management is wider interpreted, comparing with the industrial logistic management. That is, the tourism logistic management is regarded as a process consisting of sectors supporting the tourists' tourism product and service consumption since the beginning of their journey until arriving at the destination, while staying at the destination, and leaving the destination. They refer to airlines, accommodations, restaurants, tourist attractions, tourism activities like car rental, other components representing the service provider's image, atmosphere, and characteristic, and service's punctuality. These are regarded as a viewpoint of tourism logistic management which require good cooperation and coordination to create tourism activities in the tourism areas.

### **5.3 Recommendations**

#### **5.3.1 Application of Research Results**

1) Government agencies involved in the formulation of health promotion policies who employ the model of logistics management for health tourism in Thai traditional medicine promoting hospitals as the information for setting policies for promoting health tourism must focus on the clarity of the policies set and resources, which include place, budget, materials, equipment, tools, technology, and staff because these factors will contribute to the efficiency and effectiveness of logistics management process for health tourism.



2) Thai traditional medicine promoting hospitals and other health care facilities that provide health tourism services who employ the model of logistics management for health tourism should follow the context of their area and should focus on managing the flow of tourists since they enter the hospital until they leave. This management involves physical flow management, financial flow management, service process flow management, and service quality. In addition, these hospitals and health care centers should pay attention to age, education, occupation, average income per month, and experience of using this type of services of the service recipients because these characteristics will affect different types of services that will be provided.

### **5.3.2 Recommendations for the Research**

1) The hospitals should specify a service duration for each service area to set a standard and bring the speed of the operation to the personnel as well as the speed of the service to the service recipients or tourists.

2) The hospitals should develop their tourism products and services to be modern which will meet the tourists' demand in the present time, such as other alternative medicine service while maintain their uniqueness or the local uniqueness.

3) The hospital should provide a health tourism program in form of a combined product as an alternative for the service recipients or tourists along with developing the tourism logistic management of the tourism program to be efficient.

4) The hospital should create a network and alliance with tourism businesses, travel agencies, and other related organization to increase more service recipients or tourists.

### **5.3.3 Recommendations for Further Research**

1) A health tourism supply chain management in Thai traditional medicine promoting hospitals should be studied.

2) A value chain management for the health tourism service process in Thai traditional medicine promoting hospitals should be studied.

3) Foreign tourists' behaviors and demands on the health tourism service in Thai traditional medicine promoting hospitals should be studied in order to

develop the logistic management process to be able to respond to the mentioned behaviors and demands.

4) Development of other tourism logistic management processes should be studied in order to make the tourist flow smoothly from entering until leaving the tourist attraction, reduce the tourists' waiting time, prevent errors during the service process, and provide them the highest satisfaction.

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## **APPENDICES**

**APPENDIX A**  
**QUESTIONNAIRE AND INTERVIEW FORM**



## QUESTIONNAIRE

### **For health tourists who have used services in Thai traditional medicine promoting hospitals**

“A Model of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Thailand”

This questionnaire is part of the data collection for the thesis for Doctor of Philosophy Program in integrated tourism management, Faculty of Tourism Management, National Institute of Development Administration. The purposes of this questionnaire was to analyze the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals and to assess the efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals.

The data obtained will be analyzed and used **for research purposes only**. Therefore, the researcher would like to ask you to answer all questions truthfully for the benefit of the research and thank you for your cooperation on this occasion.

**The questionnaire is divided into 5 parts as follows:**

**Part 1** Personal information of the respondent

**Part 2** The implementation of the policy promoting tourism in Thai traditional medicine promoting hospitals

**Part 3** The assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals

**Part 4** The assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals

**Part 5** Other suggestions related to the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals and the

efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals

The researcher would like to thank you very much for taking the time to answer the questions in this questionnaire.

*Yongyut Kaewudom*

Doctor of Philosophy Program in Integrated Tourism Management,  
The Graduated School of Tourism Management,  
National Institute of Development Administration



**Part 1** Personal Information of the Respondent**Instructions** Please mark ✓ in the box  that meets your opinion or the truth most.

## 1. Gender

 Male  Female

## 2. Age

 Younger than 20 years old or than 20 years  
 21 – 30 years old  31 – 40 years old  
 41 – 50 years old  51 – 60 years old  
 Over 61 years old

## 3. Marital status

 Single  
 Married  
 Widowed/Divorced/Separated

## 4. Level of education

 Lower than High school/Vocational school  
 High school/Vocational school  
 Diploma/High vocational school  
 Bachelor's degree  
 Higher than bachelor's degree

## 5. Occupation

 Government officer/government employee  
 State enterprise employee  
 Private enterprise employee  
 Trader/Business owner  
 Student/College student  
 Other occupation (please specify).....

## 6. Average income per month

- Below or equal to 15,000 baht
- 15,001 – 25,000 baht
- 25,001 – 35,000 baht
- Higher than 35,000 baht

## 7. Experience in using services in Thai traditional medicine promoting hospital

- Used to use the services
- First time using the services

## 8. Main purposes of using services in Thai traditional medicine promoting hospital

- Thai massage
- Aromatherapy massage
- Foot massage
- Herbal sauna
- Herbal compress massage
- Sauna
- Masks or scrubs with Thai herbs
- Facial treatments with Thai herbs
- Nourishing bath with essential oils or nourishing Jacuzzi

**Part 2** The Results of the Implementation of the Policy Promoting Health Tourism in Thai Traditional Medicine Promoting Hospitals

The implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals means the operation of projects, activities, or services that is in line with the government's policy of promoting health tourism which include **the provision of services by Thai traditional medicine and spa** to service recipients or tourists.

**Instructions** Please mark ✓ in the box  that meets your opinion or the truth most.

<b>The implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals</b>	<b>Level of opinion</b>				
	<b>Highest</b>	<b>High</b>	<b>Mediocre</b>	<b>Low</b>	<b>Lowest</b>
<b>In terms of policy clarity</b>					
1. The implementation of the policy promoting health tourism in a hospital has set clear goals.					
2. The implementation of the policy promoting health tourism in a hospital has set clear objectives.					
3. The implementation of the policy promoting health tourism in a hospital has set clear steps of operation.					
4. The implementation of the policy promoting health tourism in a hospital has set clear projects, activities, and services.					
<b>In terms of external surroundings</b>					
1. The implementation of the policy promoting health tourism in a hospital is in line with the economic condition.					
2. The implementation of the policy promoting health tourism in a hospital is in line with the social condition.					
3. The implementation of the policy promoting health tourism in a hospital is in line with Thai culture.					
4. The implementation of the policy promoting health tourism in a hospital is in line with tourists' values.					

The implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals	Level of opinion				
	Highest	High	Mediocre	Low	Lowest
<b>In terms of resources</b>					
1. The implementation of the policy promoting health tourism in a hospital has appropriate venue management.					
2. The implementation of the policy promoting health tourism in a hospital has surroundings and facilities which indicate that the budget has been adequately allocated.					
3. The implementation of the policy promoting health tourism in a hospital has sufficient personnel.					
4. The implementation of the policy promoting health tourism in a hospital has materials, equipment, and tools enough for services.					
5. The implementation of the policy promoting health tourism in a hospital has employed technology in supporting the operation appropriately.					
<b>In terms of organizational structure</b>					
1. The implementation of the policy promoting health tourism in a hospital has established responsible divisions, departments, or groups appropriately.					
2. The implementation of the policy promoting health tourism in a hospital has specified duties, tasks, and responsibilities of operators appropriately.					

The implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals	Level of opinion				
	Highest	High	Mediocre	Low	Lowest
<b>In terms of operators</b>					
1. Knowledge and capabilities of operators in the implementation of the policy promoting health tourism in a hospital					
2. Cooperation of operators in the implementation of the policy promoting health tourism in a hospital					
<b>In terms of communication</b>					
1. The implementation of the policy promoting health tourism in a hospital has appropriate communicating channels between fellow operators.					
2. The implementation of the policy promoting health tourism in a hospital has appropriate communicating channels between operators and service recipients or tourists.					
3. The implementation of the policy promoting health tourism in a hospital has correct and clear communication.					

**Part 3** The Assessment of the Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals

The assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals is the assessment of **ability in operating and the expectation of the quality of the services** of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals.

**Instructions** Please mark ✓ in the box  that meets your opinion or the truth most.

Points for the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals	Level of efficiency				
	Highest	High	Mediocre	Low	Lowest
<b>In terms of physical flow management (Management of physical characteristics)</b>					
1. Provision of parking spaces in the hospital					
2. Provision of pathways to the health service building					
3. Provision of a reception and registration area					
4. Provision of a waiting area					
5. Provision of a scanning area					
6. Provision of changing rooms					
7. Provision of a health service area					
8. Provision of shower rooms and toilets					
9. Provision of a payment area					
10. Provision of an area for giving advice and guidance related to health					
11. Provision of an area for resting					

Points for the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals	Level of efficiency				
	Highest	High	Mediocre	Low	Lowest
<b>In terms of information flow management (Providing, storing and forwarding information)</b>					
1. Provision of directional signs towards the health service building					
2. Provision of a sign indicating the service area in the health service building					
3. Recommendation of products and services in the reception and registration area					
4. Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area					
5. Storing and forwarding health information of the service recipients or tourists in the screening area					
6. Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area					
7. Storing and forwarding payment information in the payment area					
8. Provision of advice related to health in the area for health advice and guidance					
9. Provision of health information and knowledge in the areas for resting					

Points for the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals	Level of efficiency				
	Highest	High	Mediocre	Low	Lowest
<b>In terms of financial flow management (Facilitation of the payment process)</b>					
1. Preparation of equipment and tools for receiving payments					
2. Payment channel management					
3. Informing the details of service fees to the service recipients or tourists					
4. Process of receiving payment					
5. Issuing a document or proof of payment					
<b>In terms of service process flow management (Steps and methods of providing services)</b>					
1. The reception of the service recipients or tourists					
2. Screening of the service recipients or tourists					
3. Preparation of the service recipients or tourists before the health service is given					
4. Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists					
5. Health services for the service recipients or tourists					
6. The services before the service recipients or tourists leave					



Points for the assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals	Level of efficiency				
	Highest	High	Mediocre	Low	Lowest
<b>In terms of service quality</b>					
1. Convenience when being serviced					
2. Innovation and technology in the service					
3. Accuracy and completeness of the service					
4. Reliability of the service					
5. Responsiveness to the needs of the service recipients					
6. Knowledge and capabilities in the service					
7. Safety in providing the service					
8. The speed of the service					
9. Attentiveness when providing the service					

**Part 4** The Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals

The assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals is the assessment of **success and satisfaction resulting from operation as well as the perception of service quality** of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals.

**Instructions** Please mark ✓ in the box  that meets your opinion or the truth most.

Points for the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals	Level of effectiveness				
	Highest	High	Mediocre	Low	Lowest
<b>In terms of physical flow management (Management of physical characteristics)</b>					
1. Provision of parking spaces in the hospital					
2. Provision of pathways to the health service building					
3. Provision of a reception and registration area					
4. Provision of a waiting area					
5. Provision of a scanning area					
6. Provision of changing rooms					
7. Provision of a health service area					
8. Provision of shower rooms and toilets					
9. Provision of a payment area					
10. Provision of an area for giving advice and guidance related to health					
11. Provision of an area for resting					

<b>Points for the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals</b>	<b>Level of effectiveness</b>				
	<b>Highest</b>	<b>High</b>	<b>Mediocre</b>	<b>Low</b>	<b>Lowest</b>
<b>In terms of information flow management (Providing, storing, and forwarding information)</b>					
1. Provision of directional signs towards the health service building					
2. Provision of a sign indicating the service area in the health service building					
3. Recommendation of products and services in the reception and registration area					
4. Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area					
5. Storing and forwarding health information of the service recipients or tourists in the screening area					
6. Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area					
7. Storing and forwarding payment information in the payment area					
8. Provision of advice related to health in the area for health advice and guidance					
9. Provision of health information and knowledge in the areas for resting					

Points for the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals	Level of effectiveness				
	Highest	High	Mediocre	Low	Lowest
<b>In terms of financial flow management (Facilitation of the payment process)</b>					
1. Preparation of equipment and tools for receiving payments					
2. Payment channel management					
3. Informing the details of service fees to the service recipients or tourists					
4. Process of receiving payment					
5. Issuing a document or proof of payment					
<b>In terms of service process flow management (Steps and methods of providing services)</b>					
1. The reception of the service recipients or tourists					
2. Screening of the service recipients or tourists					
3. Preparation of the service recipients or tourists before the health service is given					
4. Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists					
5. Health services for the service recipients or tourists					
6. The services before the service recipients or tourists leave					

Points for the assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals	Level of effectiveness				
	Highest	High	Mediocre	Low	Lowest
<b>In terms of service quality</b>					
1. Convenience when being serviced					
2. Innovation and technology in the service					
3. Accuracy and completeness of the service					
4. Reliability of the service					
5. Responsiveness to the needs of the service recipients					
6. Knowledge and capabilities in the service					
7. Safety in providing the service					
8. The speed of the service					
9. Attentiveness when providing the service					

### Part 5 Other Suggestions

1. Suggestions related to the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals and the efficiency and the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals

**Instructions:** Please comment according to your opinion or the truth.

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2. Suggestions related to the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals

**Instructions:** Please comment according to your opinion or the truth.

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## **INTERVIEW**

### **For health tourists who have used services in Thai traditional medicine promoting hospitals**

“A Model of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Thailand”

#### **Point 1 The Implementation of the Policy Promoting Health Tourism in Thai Traditional Medicine Promoting Hospitals**

1. Has the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals set clear goals, objectives, and steps of operation, and how?
2. Is the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals in line with economic and social conditions, Thai culture, and service recipients' or tourists' values, and how?
3. Has the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals arranged the organizational structure appropriately, and how?
4. For the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, do the service providers have appropriate knowledge and abilities, and how?
5. For the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, do the service providers cooperate, and how are their attitudes towards the implementation of the policy?

6. Has the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals prepared resources such as place, materials, equipment, and tools appropriately?
7. Does the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals have appropriate communication channels between service providers, and between service providers and service recipients, and how, and is the communication clear?

**Point 2 The Efficiency and the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals**

**1. How is the physical flow management, are you satisfied with it, and why?**

- 1.1. Provision of parking spaces in the hospital
- 1.2. Provision of pathways to the health service building
- 1.3. Provision of a reception and registration area
- 1.4. Provision of a waiting area
- 1.5. Provision of a scanning area
- 1.6. Provision of changing rooms
- 1.7. Provision of a health service area
- 1.8. Provision of shower rooms and toilets
- 1.9. Provision of a payment area
- 1.10. Provision of an area for giving advice and guidance related to health
- 1.11. Provision of an area for resting

**2. How is the information flow management, are you satisfied with it, and why?**

- 2.1. Provision of directional signs towards the health service building
- 2.2. Provision of a sign indicating the service area in the health service building
- 2.3. Recommendation of products and services in the reception and registration area



2.4. Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area

2.5. Storing and forwarding health information of the service recipients or tourists in the screening area

2.6. Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area

2.7. Storing and forwarding payment information in the payment area

2.8. Provision of advice related to health in the area for health advice and guidance

2.9. Provision of health information and knowledge in the areas for resting

**3. How is the financial flow management, are you satisfied with it, and why?**

3.1. Preparation of equipment and tools for receiving payments

3.2. Payment channel management

3.3. Informing the details of service fees to the service recipients or tourists

3.4. Process of receiving payment

3.5. Issuing a document or proof of payment

**4. How is the service process flow management, are you satisfied with it, and why?**

4.1. The reception of the service recipients or tourists

4.2. Screening of the service recipients or tourists

4.3. Preparation of the service recipients or tourists before the health service is given

4.4. Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists

4.5. Health services for the service recipients or tourists

4.6. The services before the service recipients or tourists leave

**5. How is the service quality, are you satisfied with it, and why?**

5.1. Convenience when being serviced

5.2. Innovation and technology in the service

5.3. Accuracy and completeness of the service

- 5.4. Reliability of the service
- 5.5. Responsiveness to the needs of the service recipients
- 5.6. Knowledge and capabilities in the service
- 5.7. Safety in providing the service
- 5.8. The speed of the service
- 5.9. Attentiveness when providing the service



## **INTERVIEW**

### **For Staff in Thai traditional medicine promoting hospitals**

**Title** “A Model of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals in Thailand”

#### **Point 1 The Implementation of the Policy Promoting Health Tourism in Thai Traditional Medicine Promoting Hospitals**

1. Has the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals set clear goals, objectives, and steps of operation, and how?
2. Is the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals in line with economic and social conditions, Thai culture, and service recipients’ or tourists’ values, and how?
3. Has the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals arranged the organizational structure appropriately, and how?
4. For the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, have the service providers been developed in terms of knowledge and abilities appropriately, and how?
5. For the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals, do the service providers cooperate, and how are their attitudes towards the implementation of the policy?

6. Has the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals prepared resources such as place, materials, equipment, and tools appropriately?
7. Does the implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals have appropriate communication channels between service providers, and between service providers and service recipients, and how, and is the communication clear?

## **Point 2 The Efficiency of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals**

### **1. How is the physical flow management?**

- 1.1. Provision of parking spaces in the hospital
- 1.2. Provision of pathways to the health service building
- 1.3. Provision of a reception and registration area
- 1.4. Provision of a waiting area
- 1.5. Provision of a scanning area
- 1.6. Provision of changing rooms
- 1.7. Provision of a health service area
- 1.8. Provision of shower rooms and toilets
- 1.9. Provision of a payment area
- 1.10. Provision of an area for giving advice and guidance related to health
- 1.11. Provision of an area for resting

### **2. How is the information flow management?**

- 2.1. Provision of directional signs towards the health service building
- 2.2. Provision of a sign indicating the service area in the health service building
- 2.3. Recommendation of products and services in the reception and registration area

2.4. Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area

2.5. Storing and forwarding health information of the service recipients or tourists in the screening area

2.6. Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area

2.7. Storing and forwarding payment information in the payment area

2.8. Provision of advice related to health in the area for health advice and guidance

2.9. Provision of health information and knowledge in the areas for resting

### **3. How is the financial flow management?**

3.1. Preparation of equipment and tools for receiving payments

3.2. Payment channel management

3.3. Informing the details of service fees to the service recipients or tourists

3.4. Process of receiving payment

3.5. Issuing a document or proof of payment

### **4. How is the service process flow management?**

4.1. The reception of the service recipients or tourists

4.2. Screening of the service recipients or tourists

4.3. Preparation of the service recipients or tourists before the health service is given

4.4. Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists

4.5. Health services for the service recipients or tourists

4.6. The services before the service recipients or tourists leave

### **5. How is the service quality?**

5.1. Convenience when being serviced

5.2. Innovation and technology in the service

5.3. Accuracy and completeness of the service

5.4. Reliability of the service

- 5.5. Responsiveness to the needs of the service recipients
- 5.6. Knowledge and capabilities in the service
- 5.7. Safety in providing the service
- 5.8. The speed of the service
- 5.9. Attentiveness when providing the service

**APPENDIX B**  
**INDEX OF ITEM-OBJECTIVE CONGRUENCE (IOC)**

**Results of Index of Item-Objective Congruence**  
**“A Model of Logistics Management for Health Tourism in Thai**  
**Traditional Medicine Promoting Hospitals in Thailand”**

**Part 1 Personal Information of the Respondent**

Item	Expert's opinions					IOC
	1	2	3	4	5	
<b>1. Gender</b>						
▪ Male	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Female	+1	+1	+1	+1	+1	<b>1.00</b>
<b>2. Age</b>						
▪ Younger than 20 years old or 20 years old	+1	+1	+1	+1	+1	<b>1.00</b>
▪ 21 – 30 years old	+1	+1	+1	+1	+1	<b>1.00</b>
▪ 31 – 40 years old	+1	+1	+1	+1	+1	<b>1.00</b>
▪ 41 – 50 years old	+1	+1	+1	+1	+1	<b>1.00</b>
▪ 51 – 60 years old	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Over 61 years old	+1	+1	+1	+1	+1	<b>1.00</b>
<b>3. Marital status</b>						
▪ Single	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Married	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Widowed/Divorced/Separated	+1	+1	+1	+1	+1	<b>1.00</b>
<b>4. Level of education</b>						
▪ Lower than High school	+1	+1	+1	+1	+1	<b>1.00</b>
▪ High school/Vocational school	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Diploma/High vocational school	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Bachelor's degree	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Higher than bachelor's degree	+1	+1	+1	+1	+1	<b>1.00</b>
<b>5. Occupation</b>						
▪ Government officer	+1	+1	+1	+1	+1	<b>1.00</b>



Item	Expert's opinions					IOC
	1	2	3	4	5	
▪ State enterprise employee	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Private enterprise employee	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Private enterprise employee	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Student/College student	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Other occupation (please specify)	+1	+1	+1	+1	+1	<b>1.00</b>
<b>6. Average income per month</b>						
▪ Less than or equal to 15,000 baht	+1	+1	+1	+1	+1	<b>1.00</b>
▪ 15,001 – 25,000 baht	+1	+1	+1	+1	+1	<b>1.00</b>
▪ 25,001 – 35,000 baht	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Higher than 35,001 baht	+1	+1	+1	+1	+1	<b>1.00</b>
<b>7. Experience in using services in Thai traditional medicine promoting hospital</b>						
▪ Used to use the services	+1	+1	+1	+1	+1	<b>1.00</b>
▪ First time using the services	+1	+1	+1	+1	+1	<b>1.00</b>
<b>8. Main purposes of using services in Thai traditional medicine promoting hospital</b>						
▪ Thai massage	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Aromatherapy massage	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Foot massage	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Herbal sauna	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Herbal compress massage	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Sauna	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Masks or scrubs with Thai herbs	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Facial treatments with Thai herbs	+1	+1	+1	+1	+1	<b>1.00</b>
▪ Nourishing bath with essential oils or nourishing Jacuzzi	+1	+1	+1	+1	+1	<b>1.00</b>

**Part 2 The Results of the Implementation of the Policy Promoting Health  
Tourism in Thai Traditional Medicine Promoting Hospitals**

Item	Expert's opinions					IOC
	1	2	3	4	5	
<b>In terms of policy clarity</b>						
1. The implementation of the policy promoting health tourism in a hospital has set clear goals.	+1	+1	+1	+1	+1	<b>1.00</b>
2. The implementation of the policy promoting health tourism in a hospital has set clear objectives.	+1	+1	0	+1	0	<b>0.60</b>
3. The implementation of the policy promoting health tourism in a hospital has set clear steps of operation.	+1	+1	+1	+1	+1	<b>1.00</b>
4. The implementation of the policy promoting health tourism in a hospital has set clear projects, activities, and services.	+1	+1	+1	+1	+1	<b>1.00</b>
<b>In terms of external surroundings</b>						
5. The implementation of the policy promoting health tourism in a hospital is in line with the economic condition.	+1	+1	+1	+1	+1	<b>1.00</b>
6. The implementation of the policy promoting health tourism in a hospital is in line with the social condition.	+1	+1	+1	+1	+1	<b>1.00</b>
7. The implementation of the policy promoting health tourism in a hospital is in line with Thai culture.	+1	+1	+1	+1	+1	<b>1.00</b>
8. The implementation of the policy promoting health tourism in a hospital is in line with tourists' values.	+1	+1	+1	+1	+1	<b>1.00</b>

Item	Expert's opinions					IOC
	1	2	3	4	5	
<b>In terms of resources</b>						
9. The implementation of the policy promoting health tourism in a hospital has appropriate venue management.	+1	+1	+1	+1	+1	<b>1.00</b>
10. The implementation of the policy promoting health tourism in a hospital has surroundings and facilities which indicate that the budget has been adequately allocated.	0	+1	+1	0	+1	<b>0.60</b>
11. The implementation of the policy promoting health tourism in a hospital has sufficient personnel.	+1	+1	+1	+1	+1	<b>1.00</b>
12. The implementation of the policy promoting health tourism in a hospital has materials, equipment, and tools enough for services.	+1	+1	+1	+1	+1	<b>1.00</b>
13. The implementation of the policy promoting health tourism in a hospital has employed technology in supporting the operation appropriately.	+1	+1	+1	+1	+1	<b>1.00</b>
<b>In terms of organizational structure</b>						
14. The implementation of the policy promoting health tourism in a hospital has established responsible divisions, departments, or groups appropriately.	0	+1	+1	+1	+1	<b>0.80</b>
15. The implementation of the policy promoting health tourism in a hospital has specified duties, tasks, and responsibilities of operators appropriately.	+1	+1	+1	+1	0	<b>0.80</b>

Item	Expert's opinions					IOC
	1	2	3	4	5	
<b>In terms of operators</b>						
16. Knowledge and capabilities of operators in the implementation of the policy promoting health tourism in a hospital.	+1	+1	+1	+1	+1	<b>1.00</b>
17. Cooperation of operators in the implementation of the policy promoting health tourism in a hospital	0	+1	+1	+1	+1	<b>0.80</b>
<b>In terms of communication</b>						
18. The implementation of the policy promoting health tourism in a hospital has appropriate communicating channels between fellow operators.	+1	+1	+1	+1	+1	<b>1.00</b>
19. The implementation of the policy promoting health tourism in a hospital has appropriate communicating channels between operators and service recipients or tourists.	+1	+1	+1	+1	+1	<b>1.00</b>
20. The implementation of the policy promoting health tourism in a hospital has correct and clear communication.	+1	+1	+1	+1	+1	<b>1.00</b>

**Part 3 The Assessment of the Efficiency of the Process of Logistics Management  
for Health Tourism in Thai Traditional Medicine Promoting Hospitals**

Item	Expert's opinions					IOC
	1	2	3	4	5	
<b>In terms of physical flow management (Management of physical characteristics)</b>						
1. Provision of parking spaces in the hospital	+1	+1	+1	+1	+1	<b>1.00</b>

Item	Expert's opinions					IOC
	1	2	3	4	5	
2. Provision of pathways to the health service building	+1	+1	+1	+1	+1	<b>1.00</b>
3. Provision of a reception and registration area	+1	+1	+1	+1	+1	<b>1.00</b>
4. Provision of a waiting area	+1	0	+1	+1	+1	<b>0.80</b>
5. Provision of a scanning area	+1	+1	+1	+1	+1	<b>1.00</b>
6. Provision of changing rooms	+1	+1	+1	+1	+1	<b>1.00</b>
7. Provision of a health service area	+1	+1	+1	+1	+1	<b>1.00</b>
8. Provision of shower rooms and toilets	+1	+1	+1	+1	+1	<b>1.00</b>
9. Provision of a payment area	+1	+1	+1	+1	+1	<b>1.00</b>
10. Provision of an area for giving advice and guidance related to health	0	+1	+1	+1	+1	<b>0.80</b>
11. Provision of an area for resting	+1	+1	+1	+1	+1	<b>1.00</b>
<b>In terms of information flow management (Providing, storing and forwarding information)</b>						
12. Provision of directional signs towards the health service building	+1	+1	+1	+1	+1	<b>1.00</b>
13. Provision of a sign indicating the service area in the health service building	+1	+1	+1	+1	+1	<b>1.00</b>
14. Recommendation of products and services in the reception and registration area	+1	+1	+1	+1	+1	<b>1.00</b>
15. Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area	+1	+1	+1	+1	+1	<b>1.00</b>
16. Storing and forwarding health information of the service recipients or tourists in the screening area	+1	+1	+1	+1	+1	<b>1.00</b>
17. Storing and forwarding information	+1	+1	+1	+1	+1	<b>1.00</b>

Item	Expert's opinions					IOC
	1	2	3	4	5	
regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area						
18. Storing and forwarding payment information in the payment area	+1	+1	+1	+1	+1	<b>1.00</b>
19. Provision of advice related to health in the area for health advice and guidance	0	+1	+1	+1	+1	<b>0.80</b>
20. Provision of health information and knowledge in the areas for resting	+1	0	0	+1	+1	<b>0.60</b>
<b>In terms of financial flow management (Facilitation of the payment process)</b>						
21. Preparation of equipment and tools for receiving payments	+1	+1	+1	+1	+1	<b>1.00</b>
22. Payment channel management	+1	+1	+1	+1	+1	<b>1.00</b>
23. Informing the details of service fees to the service recipients or tourists	+1	+1	+1	+1	+1	<b>1.00</b>
24. Process of receiving payment	+1	+1	+1	+1	+1	<b>1.00</b>
25. Issuing a document or proof of payment	+1	+1	+1	+1	+1	<b>1.00</b>
<b>In terms of service process flow management (Steps and methods of providing services)</b>						
26. The reception of the service recipients or tourists	+1	+1	+1	+1	+1	<b>1.00</b>
27. Screening of the service recipients or tourists	+1	+1	+1	+1	+1	<b>1.00</b>
28. Preparation of the service recipients or tourists before the health service is given	+1	+1	+1	0	+1	<b>0.80</b>
29. Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists	+1	+1	+1	+1	+1	<b>1.00</b>

Item	Expert's opinions					IOC
	1	2	3	4	5	
30. Health services for the service recipients or tourists	+1	+1	+1	+1	+1	<b>1.00</b>
31. The services before the service recipients or tourists leave	+1	+1	0	+1	+1	<b>0.80</b>
<b>In terms of service quality</b>						
32. Convenience when being serviced	+1	+1	+1	+1	+1	<b>1.00</b>
33. Innovation and technology in the service	+1	+1	+1	+1	+1	<b>1.00</b>
34. Accuracy and completeness of the service	+1	+1	+1	+1	+1	<b>1.00</b>
35. Reliability of the service	+1	+1	+1	+1	+1	<b>1.00</b>
36. Responsiveness to the needs of the service recipients	+1	+1	+1	+1	+1	<b>1.00</b>
37. Knowledge and capabilities in the service	+1	+1	+1	+1	+1	<b>1.00</b>
38. Safety in providing the service	+1	+1	+1	+1	+1	<b>1.00</b>
39. The speed of the service	+1	+1	+1	+1	+1	<b>1.00</b>
40. Attentiveness when providing the service	+1	+1	+1	+1	+1	<b>1.00</b>

**Part 4 The Assessment of the Effectiveness of the Process of Logistics Management for Health Tourism in Thai Traditional Medicine Promoting Hospitals**

Item	Expert's opinions					IOC
	1	2	3	4	5	
<b>In terms of physical flow management (Management of physical characteristics)</b>						
1. Provision of parking spaces in the hospital	+1	+1	+1	+1	+1	<b>1.00</b>
2. Provision of pathways to the health service building	+1	+1	+1	+1	+1	<b>1.00</b>

Item	Expert's opinions					IOC
	1	2	3	4	5	
3. Provision of a reception and registration area	+1	+1	+1	+1	+1	<b>1.00</b>
4. Provision of a waiting area	+1	0	+1	+1	+1	<b>0.80</b>
5. Provision of a scanning area	+1	+1	+1	+1	+1	<b>1.00</b>
6. Provision of changing rooms	+1	+1	+1	+1	+1	<b>1.00</b>
7. Provision of a health service area	+1	+1	+1	+1	+1	<b>1.00</b>
8. Provision of shower rooms and toilets	+1	+1	+1	+1	+1	<b>1.00</b>
9. Provision of a payment area	+1	+1	+1	+1	+1	<b>1.00</b>
10. Provision of an area for giving advice and guidance related to health	0	+1	+1	+1	+1	<b>0.80</b>
11. Provision of an area for resting	+1	+1	+1	+1	+1	<b>1.00</b>
<b>In terms of information flow management (Providing, storing and forwarding information)</b>						
12. Provision of directional signs towards the health service building	+1	+1	+1	+1	+1	<b>1.00</b>
13. Provision of a sign indicating the service area in the health service building	+1	+1	+1	+1	+1	<b>1.00</b>
14. Recommendation of products and services in the reception and registration area	+1	+1	+1	+1	+1	<b>1.00</b>
15. Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area	+1	+1	+1	+1	+1	<b>1.00</b>
16. Storing and forwarding health information of the service recipients or tourists in the screening area	+1	+1	+1	+1	+1	<b>1.00</b>
17. Storing and forwarding information regarding treatments, remedies, and health	+1	+1	+1	+1	+1	<b>1.00</b>



Item	Expert's opinions					IOC
	1	2	3	4	5	
restoration of the service recipients or tourists in the health service area						
18. Storing and forwarding payment information in the payment area	+1	+1	+1	+1	+1	<b>1.00</b>
19. Provision of advice related to health in the area for health advice and guidance	0	+1	+1	+1	+1	<b>0.80</b>
20. Provision of health information and knowledge in the areas for resting	+1	0	0	+1	+1	<b>0.60</b>
<b>In terms of financial flow management (Facilitation of the payment process)</b>						
21. Preparation of equipment and tools for receiving payments	+1	+1	+1	+1	+1	<b>1.00</b>
22. Payment channel management	+1	+1	+1	+1	+1	<b>1.00</b>
23. Informing the details of service fees to the service recipients or tourists	+1	+1	+1	+1	+1	<b>1.00</b>
24. Process of receiving payment	+1	+1	+1	+1	+1	<b>1.00</b>
25. Issuing a document or proof of payment	+1	+1	+1	+1	+1	<b>1.00</b>
<b>In terms of service process flow management (Steps and methods of providing services)</b>						
26. The reception of the service recipients or tourists	+1	+1	+1	+1	+1	<b>1.00</b>
27. Screening of the service recipients or tourists	+1	+1	+1	+1	+1	<b>1.00</b>
28. Preparation of the service recipients or tourists before the health service is given	+1	+1	+1	0	+1	<b>0.80</b>
29. Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists	+1	+1	+1	+1	+1	<b>1.00</b>
30. Health services for the service recipients	+1	+1	+1	+1	+1	<b>1.00</b>

Item	Expert's opinions					IOC
	1	2	3	4	5	
or tourists						
31. The services before the service recipients or tourists leave	+1	+1	0	+1	+1	<b>0.80</b>
<b>In terms of service quality</b>						
32. Convenience when being serviced	+1	+1	+1	+1	+1	<b>1.00</b>
33. Innovation and technology in the service	+1	+1	+1	+1	+1	<b>1.00</b>
34. Accuracy and completeness of the service	+1	+1	+1	+1	+1	<b>1.00</b>
35. Reliability of the service	+1	+1	+1	+1	+1	<b>1.00</b>
36. Responsiveness to the needs of the service recipients	+1	+1	+1	+1	+1	<b>1.00</b>
37. Knowledge and capabilities in the service	+1	+1	+1	+1	+1	<b>1.00</b>
38. Safety in providing the service	+1	+1	+1	+1	+1	<b>1.00</b>
39. The speed of the service	+1	+1	+1	+1	+1	<b>1.00</b>
40. Attentiveness when providing the service	+1	+1	+1	+1	+1	<b>1.00</b>
<b>Total</b>						<b>0.97</b>

**APPENDIX C**  
**LIST OF FIVE EXPERTS EVALUATING IOC**

**List of Five Experts Evaluating IOC**  
**“A Model of Logistics Management for Health Tourism in Thai**  
**Traditional Medicine Promoting Hospitals in Thailand”**

Assistant Professor Tawit Sudsakron (D.B.A.)	Lecturer, Faculty of Police Science Royal Police Cadet Academy
Thitikan Satchabut (Ph.D.)	Lecturer, School of Tourism and Services University of the Thai Chamber Commerce
Assistant Professor Teerasak Jindabot (Ph.D.)	Lecturer, Department of Business Administration Faculty of Management Science Prince of Songkla University
Kingkan Bunluepuech (Ph.D.)	Associate Dean for Thai Traditional Medicine Hospital, Faculty of Thai Traditional Medicine Prince of Songkla University
Rattanawalai Kantichanruechai	Head of Tourism Standards Development Group Division of Tourism service Development Department of Tourism Ministry of Tourism and Sports

**APPENDIX D**  
**THE RELIABILITY OF QUESTIONNAIRE**

**Result of Reliability the Questionnaire**  
**“A Model of Logistics Management for Health Tourism in Thai**  
**Traditional Medicine Promoting Hospitals in Thailand”**

<b>The implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals</b>	<b>Cronbach's Alpha Coefficient</b>
<b>In terms of policy clarity</b>	
1. The implementation of the policy promoting health tourism in a hospital has set clear goals.	.452
2. The implementation of the policy promoting health tourism in a hospital has set clear objectives.	.638
3. The implementation of the policy promoting health tourism in a hospital has set clear steps of operation.	.588
4. The implementation of the policy promoting health tourism in a hospital has set clear projects, activities, and services.	.579
<b>In terms of external surroundings</b>	
1. The implementation of the policy promoting health tourism in a hospital is in line with the economic condition.	.715
2. The implementation of the policy promoting health tourism in a hospital is in line with the social condition.	.718
3. The implementation of the policy promoting health tourism in a hospital is in line with Thai culture.	.726
4. The implementation of the policy promoting health tourism in a hospital is in line with tourists' values.	.674
<b>In terms of resources</b>	
1. The implementation of the policy promoting health tourism in a hospital has appropriate venue management.	.553

<b>The implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals</b>	<b>Cronbach's Alpha Coefficient</b>
2. The implementation of the policy promoting health tourism in a hospital has surroundings and facilities which indicate that the budget has been adequately allocated.	.613
3. The implementation of the policy promoting health tourism in a hospital has sufficient personnel.	.727
4. The implementation of the policy promoting health tourism in a hospital has materials, equipment, and tools enough for services.	.525
5. The implementation of the policy promoting health tourism in a hospital has employed technology in supporting the operation appropriately.	.569
<b>In terms of organizational structure</b>	
1. The implementation of the policy promoting health tourism in a hospital has established responsible divisions, departments, or groups appropriately.	.507
2. The implementation of the policy promoting health tourism in a hospital has specified duties, tasks, and responsibilities of operators appropriately.	.569
<b>In terms of operators</b>	
1. Knowledge and capabilities of operators in the implementation of the policy promoting health tourism in a hospital	.572
2. Cooperation of operators in the implementation of the policy promoting health tourism in a hospital	.525
<b>In terms of communication</b>	
1. The implementation of the policy promoting health tourism in a hospital has appropriate communicating channels between fellow	.583

<b>The implementation of the policy promoting health tourism in Thai traditional medicine promoting hospitals</b>	<b>Cronbach's Alpha Coefficient</b>
operators.	
2. The implementation of the policy promoting health tourism in a hospital has appropriate communicating channels between operators and service recipients or tourists.	.676
3. The implementation of the policy promoting health tourism in a hospital has correct and clear communication.	.633
<b>The implementation of the policy promoting health tourism to overall</b>	<b>.930</b>

<b>The assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals</b>	<b>Cronbach's Alpha Coefficient</b>
<b>In terms of physical flow management</b>	
1. Provision of parking spaces in the hospital	.713
2. Provision of pathways to the health service building	.517
3. Provision of a reception and registration area	.723
4. Provision of a waiting area	.749
5. Provision of a scanning area	.657
6. Provision of changing rooms	.643
7. Provision of a health service area	.668
8. Provision of shower rooms and toilets	.732
9. Provision of a payment area	.747
10. Provision of an area for giving advice and guidance related to health	.776



<b>The assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals</b>	<b>Cronbach's Alpha Coefficient</b>
11. Provision of an area for resting	.797
<b>In terms of information flow management</b>	
1. Provision of directional signs towards the health service building	.608
2. Provision of a sign indicating the service area in the health service building	.752
3. Recommendation of products and services in the reception and registration area	.687
4. Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area	.804
5. Storing and forwarding health information of the service recipients or tourists in the screening area	.630
6. Storing and forwarding information regarding treatments, remedies, and health restoration of the service recipients or tourists in the health service area	.621
7. Storing and forwarding payment information in the payment area	.575
8. Provision of advice related to health in the area for health advice and guidance	.579
9. Provision of health information and knowledge in the areas for resting	.504
<b>In terms of financial flow management</b>	
1. Preparation of equipment and tools for receiving payments	.655
2. Payment channel management	.600
3. Informing the details of service fees to the service recipients or tourists	.693
4. Process of receiving payment	.714

<b>The assessment of the efficiency of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals</b>	<b>Cronbach's Alpha Coefficient</b>
5. Issuing a document or proof of payment	.482
<b>In terms of service process flow management</b>	
1. The reception of the service recipients or tourists	.746
2. Screening of the service recipients or tourists	.689
3. Preparation of the service recipients or tourists before the health service is given	.794
4. Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists	.658
5. Health services for the service recipients or tourists	.771
6. The services before the service recipients or tourists leave	.511
<b>In terms of service quality</b>	
1. Convenience when being serviced	.638
2. Innovation and technology in the service	.741
3. Accuracy and completeness of the service	.589
4. Reliability of the service	.771
5. Responsiveness to the needs of the service recipients	.436
6. Knowledge and capabilities in the service	.644
7. Safety in providing the service	.588
8. The speed of the service	.495
9. Attentiveness when providing the service	.670
<b>The efficiency of the process of logistics management to overall</b>	<b>.970</b>

<b>The assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals</b>	<b>Cronbach's Alpha Coefficient</b>
<b>In terms of physical flow management</b>	
1. Provision of parking spaces in the hospital	.591
2. Provision of pathways to the health service building	.611
3. Provision of a reception and registration area	.544
4. Provision of a waiting area	.420
5. Provision of a scanning area	.585
6. Provision of changing rooms	.684
7. Provision of a health service area	.583
8. Provision of shower rooms and toilets	.575
9. Provision of a payment area	.715
10. Provision of an area for giving advice and guidance related to health	.697
11. Provision of an area for resting	.661
<b>In terms of information flow management</b>	
1. Provision of directional signs towards the health service building	.557
2. Provision of a sign indicating the service area in the health service building	.606
3. Recommendation of products and services in the reception and registration area	.652
4. Storing and forwarding the information and details of the service recipients or tourists in the reception and registration area	.502
5. Storing and forwarding health information of the service recipients or tourists in the screening area	.648
6. Storing and forwarding information regarding treatments,	.525

<b>The assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals</b>	<b>Cronbach's Alpha Coefficient</b>
remedies, and health restoration of the service recipients or tourists in the health service area	
7. Storing and forwarding payment information in the payment area	.762
8. Provision of advice related to health in the area for health advice and guidance	.609
9. Provision of health information and knowledge in the areas for resting	.735
<b>In terms of financial flow management</b>	
1. Preparation of equipment and tools for receiving payments	.753
2. Payment channel management	.697
3. Informing the details of service fees to the service recipients or tourists	.621
4. Process of receiving payment	.675
5. Issuing a document or proof of payment	.709
<b>In terms of service process flow management</b>	
1. The reception of the service recipients or tourists	.706
2. Screening of the service recipients or tourists	.602
3. Preparation of the service recipients or tourists before the health service is given	.642
4. Preparation of products, materials, tools, and equipment used in providing the service to the service recipients or tourists	.702
5. Health services for the service recipients or tourists	.733
6. The services before the service recipients or tourists leave	.772

<b>The assessment of the effectiveness of the process of logistics management for health tourism in Thai traditional medicine promoting hospitals</b>	<b>Cronbach's Alpha Coefficient</b>
<b>In terms of service quality</b>	
1. Convenience when being serviced	.654
2. Innovation and technology in the service	.609
3. Accuracy and completeness of the service	.774
4. Reliability of the service	.592
5. Responsiveness to the needs of the service recipients	.725
6. Knowledge and capabilities in the service	.662
7. Safety in providing the service	.667
8. The speed of the service	.473
9. Attentiveness when providing the service	.615
<b>The effectiveness of the process of logistics management to overall</b>	<b>.967</b>
<b>Total of reliability the questionnaire</b>	
<b>.985</b>	

## **BIOGRAPHY**

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<b>PRESENT POSITION</b>	2004 - 2008 Tour Operation Officer Unithai Travel Co., Ltd.  2008 - 2012 Head of Tourism Department School of Liberal Arts Sripatum University Chonburi Campus  2012 - 2017 Head of Tourism Department School of Humanities and Applied Arts University of the Thai Chamber of Commerce  2017 - Present Vice Dean for Academic Affairs School of Tourism and Services University of the Thai Chamber of Commerce