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Defining the customer experience: Tourism & Health

Gloria Sanmartín Antolín

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PhD in Business | Gloria Sanmartín Antolín

2024



UNIVERSITAT DE
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PhD in Business

Defining the customer experience: Tourism & Health

Gloria Sanmartín Antolín



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BARC

PhD in Business

Thesis title:

Defining the customer
experience: Tourism & Health

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Date:

May 2024



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Preface: acknowledgments

Mi primer pensamiento es para Oriol Miralbell, una maravillosa persona que tuve el placer de conocer y con la que compartí muchos buenos momentos y una misma pasión por el sector servicios y por la profesión de enseñar y fomentar el aprendizaje de las nuevas generaciones en CETT-UB. Oriol no me dio opción, “tienes que utilizar todo lo que sabes para investigar y aportar conocimiento, yo te ayudaré”. Con él como codirector de tesis todo era posible, me guió en el planteamiento de la investigación, se entusiasmó y me entusiasmó, y meses después lamentablemente una grave enfermedad nos lo arrebató.

Tus “geranios” no te olvidan.

Cuando fui a reunirme con ella por primera vez, acompañada de Oriol, iba muy ilusionada por afrontar un nuevo reto, pero muy nerviosa, y con muchas dudas sobre si mi planteamiento estaría lo suficiente claro, estructurado y llegaría a ser de su interés para plantearle su codirección. (codirección que tras pocos meses se convirtió en Dirección). Gracias Laura Guitart por hacerlo todo tan fácil, por pautarme y guiarme en todo el recorrido, por ser tan empática y comprender en todo momento lo que necesitaba para no desfallecer y seguir y seguir hasta llegar a este momento. Muchas gracias, Laura.

Quiero aprovechar para dar las gracias a todas las personas vinculadas a las investigaciones, expertos entrevistados del sector hotelero y sanitario, sin sus contribuciones mi trabajo no hubiera podido aportar ningún valor.

Por último, pero por ello no menos importante, mi agradecimiento a mi familia, a Diego, Adrián y Eduard, por estar ahí cuando os necesito, por la paciencia y soporte, por comprender el tiempo dedicado al trabajo e investigación. Sois mi base y mi refugio. A mis padres Julián y Tina que me hicieron el regalo más grande, creer en mi e invertir en mi educación. Sigo trabajando en sacar el máximo provecho de todo ello y nunca estaré lo suficientemente agradecida. A mis hermanos Miguel y Ana Mari, teneros cerca me aporta la tranquilidad de saber que siempre puedo contar con vosotros. Os quiero a todos.

Muchas Gracias a todos.

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Chapter 1. Introduction, justification, and objectives

1.1. Introduction to the Study: Customer Experience and Customer Experience Management in Hospitality and Health Firms.

There is a significant amount of literature on quality and total quality management systems in service companies. These systems aim to ensure controlled service production processes, based on process management and a continuous improvement system that generates services meeting the needs of users/customers, ensuring their satisfaction.

The pursuit of continuous improvement in service quality and customer satisfaction are efforts for companies to be competitive in the marketplace. But there is a stalemate in a context where performance levels and service offerings are too similar within an industry and price is the only remaining competitive weapon. To break out of this, companies must focus on the small details that make big differences for customers and to do this they must focus not so much on the performance of their core service but on designing a customer journey that enhances their experience (Ruth N. Bolton et al., 2014).

Customer satisfaction alone does not guarantee customer loyalty or repeat purchases. According to Donnelly, Lynch, and Holden (2008), effective management of customer experiences, including quality, value, and satisfaction, can result in a competitive advantage.

The key to loyalty is creating a memorable experience for the customer, which establishes an emotional bond with the organization. This ensures that the organization remains at the forefront of the customer's mind when considering future purchases.

Since Pine and Gilmore (1999) coined the term "experience economy" to describe the shift of companies towards creating memorable experiences for their customers, numerous authors have contributed to and explored this field. The definition of experiences was initially based on services. Gemmel et al. (2013) describe service companies as those that offer intangible economic activities requiring interaction between service providers and customers. Given the nature of these activities, direct contact with the user or client is key to success.

To define the concept of experience, Pine and Gilmore, along with other authors, emphasize the differences between experiences and services (Hemmington, 2007; Otto & Ritchie, 1996; Voorhees et al., 2017) and introduce the notion of value that persists in memory long after the experience (Pine & Gilmore, 1999). (Hemmington, 2007) (Otto & Ritchie, 1996)

The analysis perspective is the biggest change in customer experience. Previously, services were analyzed by focusing on interactions from the perspective of service processes. However, experience management starts with the customer journey, analyzing behaviors and the customer's experiences (Nenonen et al., 2008). This implies that the organization must manage the processes and their effects on the customer (Berry & Carbone, 2007).

Customer experience is a cornerstone of modern business strategy to establish an emotional bond with users/customers to gain their loyalty (to improve customer retention rates, to efficiently focus on the most impactful customers, and to continuously improve services).

The customer experience ecosystem includes the intricate relationships among a company's employees, partners, and customers that shape the quality of all customer interactions. These interactions occur throughout the customer journey and are facilitated by policies, processes, technology, and culture. They are also influenced by external forces, making them subject to constant change over time (Bodine & Hagen, 2013).

Customer experience management requires a strategic framework and a mighty organizational culture to manage a process of intentional creation, continuous monitoring, and proactive management of the customer experience. It involves putting the core concepts of customer experience into practice. All the above aspects, together with the breadth of the holistic experience, the diversity of participants, and the multitude of elements linked to its generation, make this a very complete and complex discipline.

Given the complexity of the discipline in the service sector, deepening its definition and management process generically, and expanding it with the study of its applicability in two industries in which the customer experience has a transcendental relevance, such as the tourism and health sectors, can facilitate the research process to be more fruitful.

The purpose is to enhance comprehension of the 'holistic experience' by thoroughly examining the entire customer journey across all relevant channels (Voorhees et al., 2017) and analyzing it from all perspectives (McColl-Kennedy et al., 2015). This includes identifying customer journey phases, behaviors, service encounters (Akaka et al., 2015), touchpoints (Becker & Jaakkola, 2020), agents involved, stimuli (Brakus et al., 2009), and emotional impacts. At the same time, providing knowledge on how organizations can manage these elements requires an understanding of the management areas, environments, and partners specific to each sector.

In this research, we believe that initially investigating the applicability in the hotel sector will allow us to use what we have learned as a basis to visualize and understand more quickly the applicability in the health sector.

The biggest difference in applicability between sectors lies in the variation of customer needs. To establish an emotional connection with customers, it is necessary to identify their specific needs, which vary depending on the company's activity. In the hotel industry, individuals are commonly referred to as guests, and their requirements may differ depending on the purpose of their stay, such as for vacation, business, or shopping... Similarly, in the healthcare sector, individuals receiving hospital care are often referred to as patients, and their needs encompass personal, clinical, and emotional aspects such as confidence, integrity, pride, and passion (Robinson, 2010; J. Wolf et al., 2014). Although the needs may differ, the ultimate goal is to have a positive emotional impact on clients.

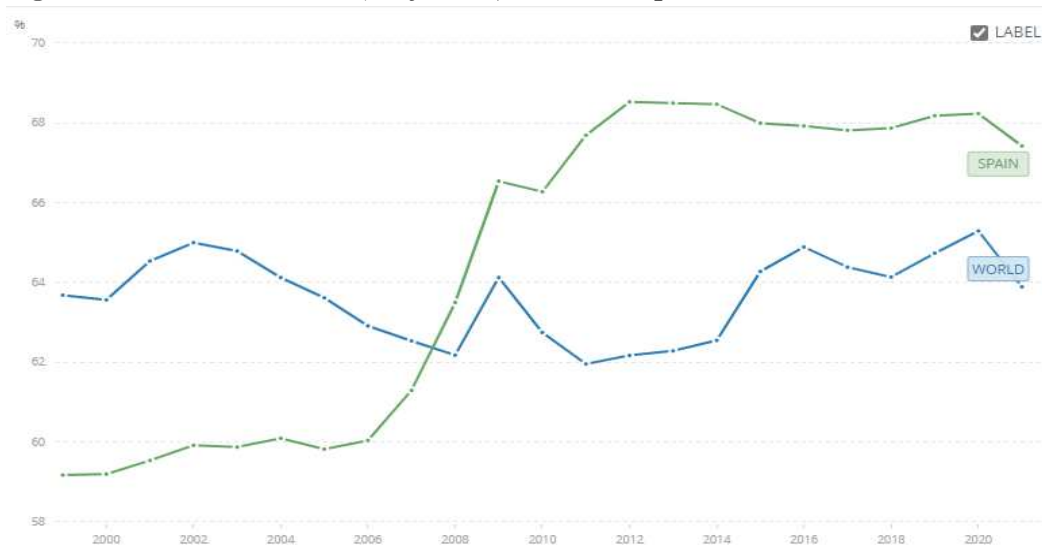
Another specificity to keep in mind is that in healthcare, experience as a concept is linked to the continuum of care, it is not limited only to a specific care setting or clinical care encounter but is related to all points of contact through which one encounters a healthcare organization (Wolf et al., 2021).

Due to the significance of the hotel and hospital sectors for both the global and Spanish economies, this research explores the definition and development of experiences customized for these industries. The objective is to provide a comprehensive explanation of the experience and its elements, along with guidelines for organizations to follow in creating it. Based on in-depth knowledge of the process and objective, the aim is to provide differential guidelines that can be useful to hotel and hospital organizations for a good approach to the patient experience activity.

1.2. Context of the object of the study: The importance of services (tourism & health) in the World's and Spanish Economy.

Services represent between 62% (lowest rate, 2011) and 65.3% (highest rate, 2020) of global GDP in the 21st century. In Spain, GDP exceeded the world average in 2008 and has remained above it since, reaching 67.4% in 2021 (*The World Bank Data*, n.d.). Figure 1 shows the value added by services as a percentage of GDP for both the world and Spain. (*The World Bank Data*, n.d.)

Figure 1 Services, value added (% of GDP) World & Spain



Source 1. (*The World Bank Data*, n.d.)

According to the statistical data portal Statista (López, 2023), within the services sector, the **tourism** sector holds significant weight in the global economy, representing 10.4% of the total GDP in 2019. However, due to the COVID-19 pandemic in 2020, the tourist GDP dropped to 4.78%. It has since started to recover, reaching 5.82% in 2021. The tourism sector is expected to represent 11.6% of the worldwide GDP by 2033, becoming increasingly important.

Another important sector within the service industry is **healthcare**. It has played a significant role in the global GDP, including in Spain. The global GDP in healthcare has been steadily increasing since 2000, reaching over 9% and maintaining a similar trend from 2009 (9.81%) to 2019 (9.83%) (Mendoza, 2023).

In Spain, services accounted for over 67% of the GDP in the last decade. The distribution of gross domestic product (GDP) across economic sectors in Spain from 2012 to 2022 indicates a clear dominance of the services sector over agriculture and industry.

The GDP generated by Spanish tourism has been on the rise since 2010 but was significantly impacted by the COVID-19 pandemic in 2020, dropping from 12.6 in 2019 to 5.8 in 2020. However, it has since shown signs of recovery.

Figure 2 shows the comparison between the Spanish tourist GDP and the total economy in real terms from 2020 to 2023.

Figure 2 The Spanish tourist GDP compared to the total economy in real terms (2020-2023)



Source 2 Exceltur, 2023

As can be seen in the graph and according to Exceltur (2023), the graph shows the real increase in the Spanish economy's GDP, along with the Tourism GDP, and how it has been affected by the restrictions of activity related to COVID-19. Tourism GDP continues its positive trend with a growth of 17.3% in the third quarter of 2023, following the trend since the first quarter of 2021.

In Spain, the GDP in health has remained close to 9% from 2009 to 2019. Both the global health GDP and the Spanish GDP saw a significant increase in 2020, with the former reaching 10.89% and the latter reaching 10.71% (*The World Bank Data*, n.d.).

As indicated by the previous data, tourism and health services are both essential to the global economy, especially in Spain.

1.3. Research objectives.

Many service industries have shown a growing interest in studying the key factors and management processes of customer experience management, which is precisely the approach of this research. Previous literature in this area lacks a unified approach to understanding what the firm must manage to generate a positive experience. The main goal of this thesis is to **provide clarity on the key factors that hotel and hospital organizations must manage to generate holistic experiences for their guests/patients throughout the entire consumption process.**

To accomplish this, we first define the holistic experience of hotel guests from the hotel's perspective. To achieve this goal, we suggest clarifying the process of hotel guest consumption, including behaviors and stages. Additionally, we will identify the service encounters that take place throughout the guest's service experience, and the main touchpoints in an orderly manner, depending on whether they are brand, partner, or consumer-owned, or if, on the contrary, they are social/external.

After identifying customer behaviors throughout the customer journey and the main touchpoints in order to provide management keys to hoteliers, the need arises for research to be aimed at identifying, what are the “objectives” to be achieved by the hotel (directly/indirectly), in each of the stages of the experiential process. Some points are crucial to achieve this goal: to define the clue elements of a hotel customer’s experience (from a holistic perspective), identify the experience providers throughout a guest service experience, and at last to identify the managerial areas related to the guest experience generation.

Knowing what the company must generate to create positive experiences, it is necessary to determine how to achieve it; in consequence, it is a must to identify those specific actions to accomplish each of the “objectives” in the guest. To achieve this clue objective, we intend to validate by hotel experts, those actions that can be carried out in a hotel and that are linked to the generation of the “experiential objectives” in each one of the experience stages. Afterwards, to validate by the guests if the previously identified actions can generate the desired objectives, is a must.

The research approach thus far outlines the process for developing hotel experiences. Beginning with a thorough comprehension of the organizational effects of crafting memorable hotel experiences, the third investigation contextualizes the strategic and operational landscape of creating experiences in hospitals via a practical case study.

The third investigation aims to apply the objectives of the second investigation to the new scenario of hospital outpatient consultations. We intent to identify the key elements of a patient's experience from a holistic perspective by identifying the experience providers and the entire experience framework, including the organization's strategic and operational elements. The definition of a case study enables the analysis of an organization's management reality by identifying each element, its management, applicability, and staging, as well as identifying areas for improvement.

1.4. Research structure

The thesis is structured around three contributions (see Figure 3) to achieve our main research goals (refer to Table 1 for research goals and structure).

Figure 3 Research structure



Source 3 Self-elaboration

As a starting point, the foundation article focuses on defining the holistic experience of hotel guests throughout the consumption process from the hotel's perspective. In this **first paper** (chapter 2), we aim to obtain a comprehensive vision of the guest's journey, validating the concept of the Experiential Guest

journey, identifying stages, guests' behaviors, service encounters, and the agents involved in the experience generation.

The **second paper** (chapter 3) aims to provide finer knowledge about the touchpoints (firm-customer) through which the experience is generated. Maintaining focus on the hotel customer experience, it focuses on providing a greater level of detail of experience encounters and touchpoints to identify the key aspects for the customer and the organization (areas/roles and partners involved).

The objective of the **third phase** (chapter 4) of the research is to apply the knowledge obtained in previous studies on experience generation to another service sector industry, healthcare. The approach of the third investigation was supported by the assessment of an important organization and linked to research and generation of applied knowledge to Patient Experience, such as "the Beryl Institute". The investigation aims to combine all the strategic and operational elements linked to the generation of the Patient's experience from the practical perspective of a hospital center and specifically to one of its services, outpatient clinics.

Table 1 Goals and structure of the research.

Goals	Paper	Focus	Methodology	Scope
To define the holistic experience of hotel guests throughout the consumption process (from the hotel perspective)	1	Hotel guest experience definition	Literature review In-depth interviews with hotel managers	Definition of customer experience in hospitality. Experience Framework Service encounters Touchpoints
To identify the "objectives" to be achieved by the hotel (directly/indirectly) in each stage of the experiential process.	2	Goals for guest experience management	Literature review Focus groups series participated by experience managers	Experiential encounters Touchpoints Guest experience generation
To conceptualize the patient experience in outpatient clinics of a hospital, describing the elements on a detailed level.	3	Patient experience management	Empirical In-depth interviews Study Case	Patient experience conceptualization Strategic framework Experience building blocks

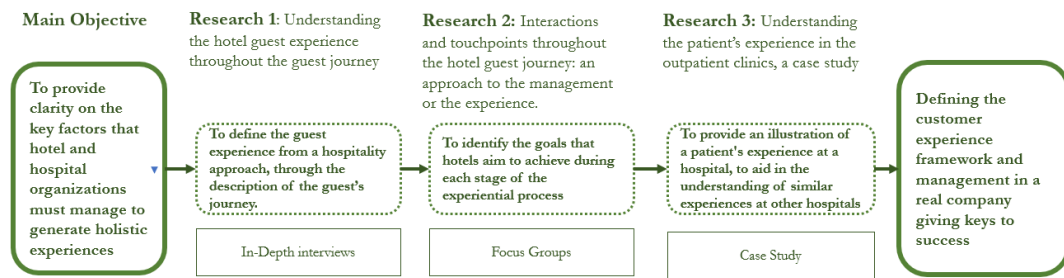
Source 4 - Self elaboration

Methodologically, we aimed to explore various qualitative methodologies, ensuring their suitability for the research. This is how the development of in-depth interviews and focus groups. Finally, the case study methodology has

been proposed as a matter of analytical generalization to illustrate and show what the patient experience is like in a company studied.

The figure below shows the research journey, which identifies the general objective, the three investigations, and their specific contributions.

Figure 4 Research journey for "Defining the customer experience: tourism and health"



Source 5 Self-elaboration

As a measure of the quality of the research conducted, a compendium of potential contributions to publications is included in table 2.

Table 2 The current state of the publication of papers

Paper	Journal	Current state
Paper 1	Journal of tourism, heritage & services marketing International, open-access, multi-disciplinary, refereed journal, aiming to promote and enhance research in tourism, heritage, and services marketing. Journal indexed, among others, in Scopus and the Directory of Open Access Journals	Send
Paper 2	Ara: Journal of tourism research. International publication in the field of tourism and related disciplines. Journal indexed, among others, in the Directory of Open Access Journals	Accepted (May, 2024)
Paper 3	Journal of Services Marketing. Addresses a range of services-related issues of interest to marketing scholars and relevant to marketing professionals who represent a broad range of service industries. Journal indexed, among others, in Scopus and the Directory of Open Access Journals	Under revision

Source 6 Self-elaboration

1.5. Conclusions

Regarding the approach of this thesis, we can conclude that it is relevant from several perspectives:

- The focus of the thesis. It focuses on two sectors, Tourism and Health, which are very important for the economy and society, both globally and Spanish.
- Richness of the analysis. Different qualitative methodologies have been used that allow the author to draw extremely important conclusions in each of the papers.
- The impact of the contributions. The deep analysis (three papers) related to the customer experience, allows the author to obtain recommendations for the hotel and health sectors. These will remain available to those interested and are intended to contribute directly to the companies' improvement.

Chapter 2. Understanding the hotel guest experience throughout the guest journey (first paper)

2.1. Abstract

The hotel industry, a crucial cornerstone of tourism, must innovate through value co-creation processes to generate customer-centric service experiences. Understanding the guest's journey is essential to comprehending the guest experience. This research aims to provide a comprehensive view of the guest's journey by identifying their behaviors, service encounters, touchpoints, and agents involved in generating the experience. Thus, answering the research question: How the guest's journey can define the guest experience in hospitality?

Kandampully et al. (2018) stated that customer experience is approached from different disciplinary perspectives, but as Ivens and Show (2003) noted, the integration of multiple perspectives is not common. This research aims to address the objectives with a multidisciplinary approach.

After analyzing a vast amount of literature on customer experience, both in general and within hotel contexts, several key themes have emerged. To obtain high-quality information on the hotel's reality, in-depth interviews were conducted with hospitality management experts located in an important tourist city such as Barcelona, Spain.

The research has validated the concept of the 'Experiential Guest Journey' as an adaptation of the customer journey in the hotel experiential context. The research defines service encounters as a sequence, providing clarity about the process and identifying the principal partners and management areas involved. This provides a base for future research to focus on managing touchpoints in the generation process of the holistic experience.

Various authors have defined customer journey behavior, with some focusing on products and others on services. However, none have specifically examined the customer journey behavior of hotel guests. Identifying the guest's experiential journey in hospitality in detail is a valuable field of study that can help hoteliers create memorable experiences.

Keywords: guest journey, service encounters, partners, touchpoints, experience.

2.2. Introduction

The hotel sector, which is the cornerstone of tourism, must innovate through value co-creation processes to generate customer-centric service experiences. This is because creating memorable experiences is the essence and reason for the hospitality industry (Pizam, 2010). As with any industry, the competitiveness of a service is dependent on customer satisfaction, which is determined by the consumer's evaluation of whether the service met their expectations and their experience with the service delivery process (Stickdorn & Zehrer, 2009).

The initial step in customer experience management, which involves connecting with customers and growing the business, is to analyze the experiential world of the customer. This analysis helps to understand both the company's and the customer's perspective (Schmitt, 2003).

To define and create optimal experiences, a hotel must comprehend the scope of the customer experience through the customer journey. According to Schmitt, (2003), researchers have primarily focused on core service delivery, leading to a lack of recognition of evolving customer needs for a holistic service experience.

To comprehend the so-called 'holistic experience,' it is useful to conduct a thorough micro-level examination of the complete customer journey across all relevant channels (Voorhees et al., 2017) and analyze it from all angles (McColl-Kennedy et al., 2015).

2.2.1. Defining the guest experience.

Pine and Gilmore (1999) coined the term 'experience economy' to describe the shift towards businesses providing memorable experiences for their customers. This concept has been further developed by several authors. Initially, experiences were defined through their differences from services (Hemmington, 2007; Otto & Ritchie, 1996, Voorhees et al., 2017).

To define the concept of experience, most of the authors highlighted the essence of the experience from a global perspective, not applying it to a specific sector (Meyer & Schwager, 2007; Pine & Gilmore, 1999; Pine & Gilmore, 1998). However, the experience in customer service companies has common specific implications: the need to understand the guest, the role of employees as hosts, the feeling of generosity, managing social protocols, defining the type of

hospitality relationship, and the importance of the human resource function (King, 1995).

In the hospitality industry, customer experiences are called Guest Experiences (King, 1995; Knutson et al., 2008). The key concepts that define a Guest Experience were extracted by Hemmington (2007) through a literature review, pointing out the differences between services. Resulting from the summary, the guest experience was defined according to various dimensions: Who it is for (GUEST), who manages it (HOST), how it is managed (AS A THEATER), the economic function (STAGING), the economic relationship (GENEROUSITY), who delivers it (CAST), the delivery goal (PERFORMANCE), the timing (LOTS OF LITTLE SURPRISES), the needs (EXPERIENTIAL), who leads (HOST LED), the nature of the offering (MEMORABLE), the factors of demand (SENSATIONS), and the security concerns (OF STRANGERS). After compiling all previous contributions, the following table (Table 2) was created to summarize the clues for defining the guest experience.

Table 3 Clues to the definition of customer experience in hospitality

In hospitality, Experiences are defined for...		
Who it is for	<i>Guest</i>	<i>Lashley (2000), Hemmington (2007)</i>
Who manage these	<i>Host</i>	<i>C Lashley (2000), Hemmington (2007), C Lashley (2015)(Lashley, 2015)</i>
How it is managed	<i>As a Theatre</i>	<i>King (1995), Pine & Gilmore (1999) Hemmington (2007)</i>
The economic function	<i>Staging</i>	<i>Pine & Gilmore (1999), Hemmington (2007)</i>
The economic relationship	<i>Generosity</i>	<i>(Pine & Gilmore, 1999), Hemmington (2007), Pizam & Shami (2009)</i>
Who delivers it	<i>Cast</i>	<i>Pine & Gilmore (1999) Tsiotsou R. H. (2014)</i>
The delivery goal	<i>Performance</i>	<i>Pine & Gilmore (1999) Hemmington (2007)</i>
The timing	<i>Lots of little surprises</i>	<i>King (1995) Hemmington (2007)</i>

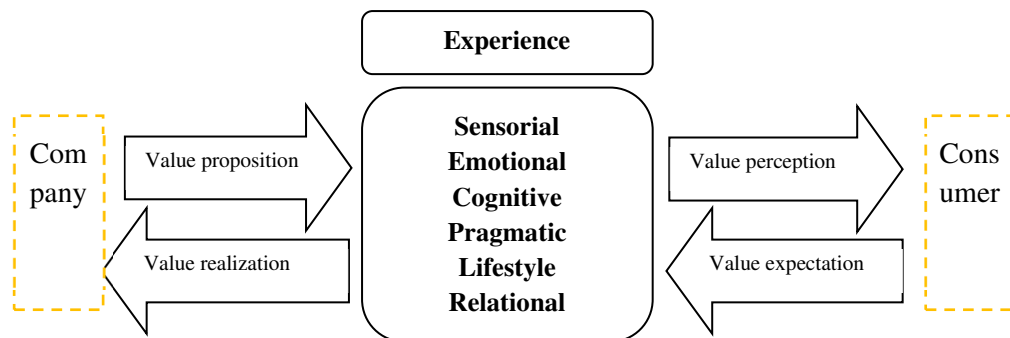
The needs	<i>Experiential</i>	<i>Holbrook & Hirschman (1982), Ryan (1995), Otto & Ritchie (1996), Berry et al (2002) (Berry et al., 2002)</i>
Who leads	<i>Host led</i>	<i>Hemmington (2007)</i>
The nature of the offering	<i>Memorable</i>	<i>(Fitzsimmons, 2000) (J. H. Kim, 2010), Pizam (2010), Tung & Ritchie (2011)</i>
The factors of demand	<i>Sensations</i>	<i>Brakus et al., (2009), Tung & Ritchie (2011)</i>
The security concerns	<i>Of strangers</i>	<i>Pine & Gilmore (1999), Hemmington (2007), R.Kearney, J Taylor (2011)</i>

Source 7 - Self elaboration

2.2.2. Customer Experience framework: the experience through the customer journey.

There is a lot of literature related to Experience Management: one of the most important contributions was made by Schmitt (1999) identifying "the experiential modules" to be managed in experiential marketing (Sense, Feel, Think, Act, and Relate), each one with its own objectives, internal structure, and principles. Berry et al. (2002) pointed out that to provide customers with satisfactory experiences, organizations must orchestrate all the "experiential clues" (anything that people can recognize by its absence during the buying process). The clues primarily relate to the functionality of the product or service, and secondarily relate to the emotions and the environment in which they are given. The compendium of clues comprises the customer's entire experience, therefore identifying the clues and ensuring their inclusion should be a method for customer experience management. Gentile et al. (2007) added a sixth module called "lifestyle" to Schmitt's five modules to configure the context of the experience (Figure 5).

Figure 5 General framework of the experience



Source 8 - Self elaboration (adapted from Gentile et al, 2007)

Conceiving the Customer Experience as the customer's journey with firm overtime during the purchase cycle (from the search to the purchase and post-purchase), across multiple touchpoints, and as an iterative and dynamic process that flows throughout the customer journey, and that incorporates past experiences and external factors, Mosley affirms that its management involves multiple management areas of a firm (Mosley, 2007).

To manage the experiences, firms must involve the employees and partners, to have a complete picture of what the customer experience entails (considering the customer's journey across all the touchpoints) and to generate the necessary dynamics for the experience creation (understanding how their actions affect the customer experience) (Bodine & Hagen, 2013). The customer experience ecosystem encompasses the complex relationships between the firm's employees, partners, and customers that make up the quality of all customer encounters or interactions. These interactions given throughout ongoing customer journeys are enabled by policies, processes, technology, and culture and influenced by external forces, and thus are ever-changing over time (Bodine & Hagen, 2013).

If the customer experience is a multidimensional construct centered on a customer's cognitive, emotional, behavioral, sensorial, and social response to a firm's offering during the customer's entire purchase journey (Lemon & Verhoef, 2016), the process to follow to describe the experiential journey of a guest is to identify the stages of the journey, the service encounters of each stage, and finally bring out the touchpoints through which the experience will be created.

2.2.2.1. Customer behaviors.

The intention of describing the experiential process throughout the consumption process has led several authors to define the customer journey behavior (Wirtz & Lovelock, 2009; Escobar & González, 2011; Cole, 2011; Lemon & Verhoef, 2016; Voorhees et al., 2017), some of them focused on products, others on services, but no one focused on the customer journey behavior of the hotel guest.

The previous figure (Figure 5) gives a general framework of the experience, but to understand it and the implications of the experience, it is critical for firms to understand the **customer journey over time**. To understand the hotel guest experience throughout the guest journey, it is necessary to identify the **main behaviors** of the guest over the journey in hotels and to validate if all those behaviors contribute to generating the guest experience.

Most authors have defined the consumption process in services by identifying the different customer behaviors (Schmitt, 2003; Hawkins et al., 1994; Wirtz & Lovelock, 2009; Zomerdijk & Voss, 2010; Escobar & González, 2011; Bodine & Hagen, 2013; Lemon & Verhoef, 2016; Voorhees et al., 2017). However, there is no consensus regarding the scope and quantity of behaviors or their names. In Table 3 we present a summary of the behaviors (from 5 to 9) related to the customer consumption process for services/tourism identified by various authors.

Table 4 Customer behaviors of the consumption process

Reference	Customer Behaviors	Scope
Lemon & Verhoef (2016)	Need Recognition / Consideration / Information search / Choice / Ordering / Payment / Consumption- usage / Post Purchase engagement / Service Request	Products & services
Lovelock (2009)	Need Recognition / Information search / Evaluation / Decision making to purchase / Service request to the provider / Delivery of service / Evaluation of performance / Future intentions	Services
Escobar (2011)	Need Recognition / Information search / Evaluate / Purchase / Post-purchase	Tourism Retail

Puccinelli et al. (2009)		
Cole (2011)	Inspiration / Search / Plan / Reservation / Servuction / Share	Services
Voorhees et al. (2017)	Communication / Information search / Initial contact / Service recovery efforts / Customer Feedback / Reviews	Services

Source 9 - Self elaboration

Most researchers have categorized these behaviors into three global stages: Pre-Purchase – Purchase – Post-Purchase (Wirtz & Lovelock, 2009; Lemon & Verhoef, 2016). Voorhees has given these **stages** different names for services: Pre-Core Service Encounter – Core-Service Encounter – Post-Core Service Encounter (Voorhees et al., 2017). Some other authors have defined the behaviors without identifying them with one specific stage (Voorhees et al., 2017; Escobar & González, 2011).

Until Verhoef et al. (2009) linked a holistic vision of the experience to a customer journey (including the stages of search, purchase, consumption, and the after-sale) and, encompassing a total experience, all previous research had been focused on identifying the clues of the experience or in defining the experience from partial perspectives. Most of them related to marketing (Holbrook & Hirschman, 1982; Schmitt, 1999; Pine & Gilmore, 1998), operations (Cetin & Walls, 2016), or human resources (Mosley, 2007) and treat the experience in a biased way, considering specific parts of the client's journey and **analyzing them from non-global perspectives.**

2.2.2.2. Service encounters and Touchpoints.

The customer experience is the result of an engaging act intentionally led by a firm and co-created by a customer, creating a memorable event. As the customer perceives value in the encounter and in the subsequent memory of that encounter (Pine & Gilmore, 1999; Poulson & Kale, 2004). Voorhees et al. (2017) have defined a conceptual model of service encounters that identifies them based on different stages: pre-core (communication, information search, initial contact, and onboarding activities), core (core interactions and environment), and post-core (service recovery efforts, customer feedback, reviews, crowdsourcing for new service development, and recommendation). To understand the generation of the guest experience, it is crucial to contextualize

the behavior of guests during "**service encounters**" in the hotel context and identify the agents involved in them.

Hotel service experiences are co-created by guests with other actors at the service encounters and in their service ecosystems (e.g. McColl- Kennedy et al., 2015; Bodine & Hagen, 2013). The customers' participation in the activities led by the firm (of encountering or living) is given in a social context. So, these customers' experiences relate the firm and the brand to the customer's lifestyle in a social context (Voorhees et al., 2017). Behind-the-scenes employees and partners can have an impact on the customer experience that's greater than that of frontline employees like retail staff and call center agents (Bodine & Hagen, 2013).

For hotel firms to understand how their actions affect the Customer Experience, it is necessary to identify **the actors that could influence it** and the impacts of these agents involved (employees, partners, and other customers) during each interaction throughout the guest experience.

The experience is created through many touchpoints during the stages of the customer's decision process or purchase journey (while they discover, evaluate, buy, access, use and get support for a firm's products and services) (Verhoef et al., 2009; Bodine & Hagen, 2013), and these touchpoints contribute as the facilitators of the service encounters (discrete nature) which create the interactions with the customers during their service experience (continuous nature) (Puccinelli et al., 2009; Voorhees et al., 2017).

During the "encounters" (Kandampully et al., 2018; Carbone & Haeckel, 1994; Otto & Ritchie, 1996; Verhoef et al., 2009), or the key encounters called "Moments of truth" (James, 2011; Voorhees et al., 2014; Voorhees et al., 2017), the contacts of the guest with the firm are made through many "**Touchpoints**" (Puccinelli et al., 2009; Kim et al., 2011; Tung & Ritchie, 2011), as points that can make the difference between the success and the failure at the moment of generating the adequate experience (Dhebar, 2013).

The customer experience, as an interaction between an organization and a customer, is a consequence of a blend of an organization's physical performance, the senses stimulated and emotions evoked, each intuitively measured against customer expectations across all the moments of contact" (Ivens & Shaw, 2003). Firms can manage directly brand-owned touchpoints,

and indirectly those owned by partners, and try to influence the social/external and customer-owned ones. As Voorhees identifies, different functions are involved in the delivery of the service encounters (marketing or sales and operations).

For product firms, the most important and critical touchpoint is the product itself, (James, 2011), but for hotels, the main touchpoints are those related to the managed service processes in contact with the customer (key processes such as reservations, check-in, checkout, room service, business, laundry, food and beverage services...), to the facilities (exercise facilities,...) and policies (frequent-stay programs,...) (Lemon & Verhoef, 2016), as factors that affect the process of generating expectations of the guest and also to the service encounters, and consequently to the guest satisfaction and experience.

De Keyser et al. (2020) noted that the literature focuses predominantly on firm-controlled touchpoints but notes a growing recognition of non-firm-controlled touchpoints and their special role.

2.3. Research objectives.

The objective of this research is to address the question **How can the guests' journey define the guest experience in hospitality?**

The aim is to obtain a comprehensive vision of the guest's journey, identifying scopes and stages, guest behaviors, service encounters, agents involved in the generation of the experience, and management areas linked to the generation of the experience. A first approach to the main touchpoints will allow future research to deepen the study of these touchpoints and the management keys for the generation of experiences from a global perspective.

The sub-objectives linked to the main objective are detailed below:

- To identify the guest experience behaviors in the hotel industry and clarify if all of them contribute directly or indirectly to creating the guest experience.
- To define the appropriate treatment for behaviors at different stages (if necessary) and their proper names in the hotel industry.
- Validate whether the combination of these behaviors can be called the “Guest Experiential Journey” (a concept not explicitly validated yet).
- Identify service encounters and clarify who is involved during them.

- Recognize all the relevant touchpoints in a hotel service experience.
- Identify the management areas involved in generating the guest experience.

After a literature review, Kandampully et al. (2018) pointed out that customer experience is approached from various disciplinary perspectives such as marketing (including technology and social media), operations (including service design), or human resources (including organizational behavior and strategy). However, it was noted that contributions integrating multiple perspectives are not common (Ivens & Shaw, 2003). Therefore, we intend to address the aforementioned objectives with a multidisciplinary approach.

2.4. Methodology

Descriptive research was conducted using a qualitative methodology to achieve the objectives outlined in the previous section. This method allows for answering the research questions. The inclusion of case studies allows for the illustration of how different organizations understand and manage their customer experiences. Yin (1994) states that this methodology is suitable for analyzing the connections that may exist between complex phenomena and their contexts when the research question implies a 'how' or 'why'. In order to obtain the opinions of a group of experts, in-depth interviews were used as an information-gathering technique.

Considering the grounded theory (Barney & Anselm, 1967), it is of interest to triangulate the information through various contributions from different interviewees. The individuals to be interviewed are selected depending on the expectations that they generate to contribute new ideas concerning the developing theory based on the state in which it is at a precise moment.

In this vein, the relevance of the participants interviewed should guarantee the representativeness of the results as the synthesis of the thoughts of a special group (multidisciplinary experts). The selection criteria are based on three factors: category (4-5 stars), hotel chain affiliation, and operator with national or international presence.

The global scope of the aspects to be defined (throughout the entire guest journey) makes it necessary to rely on participants/interviewed who have a global perspective and knowledge of the hotel industry: general managers and hotel managers. Additionally, Voorhees et al. (2017) noted that the primary

function involved in delivering pre-core and post-core encounters is often marketing or sales, while the operations function is a key factor in the core encounters. Accordingly, we identify the operations managers and marketing managers as important providers of information related to the service encounters and touchpoints related to the hotel guest experience.

To have and provide the necessary perspective and knowledge to contribute to achieving the research objectives, the research process has considered uniting the vision of general managers of hotel chains in Barcelona (10th top place on Euromonitor International's Top 100 City Destinations Index for 2021), and directors of establishments to obtain the most global vision of the guest's experiential process. Additionally, the process will incorporate the vision of operations and marketing managers to add specific knowledge of related areas.

Considering the 4-5-star hotels as the most complete ones in facilities, services, and personnel, and therefore the ones with a more complex vision of hotel management, we must analyze the vision of 4- and 5-star hotel experts in the city of Barcelona to guarantee the maximum level of contributions. To consider the possible differences between the organizational culture and its structure (nomenclature and professional profiles), a mix of national and international hotel chains, as well as independent hotels, are included in the interviewed sample.

Following the guidelines given by Francis et al. (2010), an initial analysis sample was determined in 8 interviews, and a stopping criterion with a point of data saturation was reached after 2 additional conducted interviews with no new themes emerging. Thereafter, 10 in-depth interviews with an average duration of 46 minutes were carried out. The profile of the experts interviewed corresponds to a person with a current managerial position in a hotel or corporate position in a hotel chain, linked to a national and/or international hotel company, with an average of 20 years of experience in the hotel sector.

Accordingly, throughout the interviews with hotel chain general managers (Olha Boutique Hotels and Yurbban Hotels), and hotel managers (Pulitzer & Regina, Monument Hotel, and Alimara Hotel), the global view of customer experience management from a strategic perspective is provided. The Guest Experiential journey has links with Marketing functions (pre- and post) and Operations (before and during the stay); these expert visions are integrated through interviews with Operation Managers (Casa Fuster and H10 Hotels), and with

Marketing Managers (Renaissance/ Marriot International, Axel Hotels and Majestic Hotels). All the aforementioned hotels are among the best Barcelona hotels according to recognized publications in the sector as Condé Nast Traveler (Móvil & Sahelices, 2024), Time Out (Time Out Barcelona Editors, 2023), and commercial platforms as Booking o Small Luxury Hotels.

Table 5 Cases

	Category	hotel chain affiliation	Operator with national or international presence
Case 1	5*	hotel chain (2 hot)	National
Case 2	4*	hotel chain (3 hot)	National
Case 3	5*	independent hotel	National
Case 4	4*	hotel chain (2 hot)	National
Case 5	4*	independent hotel	National
Case 6	5*	independent hotel	National
Case 7	4*&5*	hotel chain (358 hot)	International
Case 8	4*&5*	hotel chain (66 hot)	International
Case 9	4*&5*	hotel chain (8700 hot)	International
Case 10	4*	hotel chain (10 hot)	International

Source 10 Self-elaboration

Through the research, the aim was to obtain valuable information about the guest's behaviors during the guest experiential journey, stages, and all the service encounters included in it. This deep definition of the guest experiential journey should allow us to conduct further research to identify all of the touchpoints to be managed to build the desired customer experience.

Given these motivations, the following propositions can be put forward for the study of the importance and characteristics of experience management in hotels:

- Proposition 1: Customer experience is a key factor for the hotel industry to guarantee success.
- Proposition 2: Customer behavior during the hotel consumption process aligns with one of the five identified theoretical definitions.
- Proposition 3: The identification of different stages in the guest experience is a reality.
- Proposition 4: All aspects of the guest journey contribute to the creation of the guest experience.

- Proposition 5: 'Hotel Guest Experiential Journey' is the correct term to describe the entirety of a customer's consumption behaviors that generate their experience in hotels.
- Proposition 6: All management areas are involved in the Guest Experience generation.

2.5. Results and findings

According to all the experts interviewed, Customer Experience is a very interesting issue that represents a key factor to manage for the hotel industry to guarantee success. Totally vital need or absolutely necessary were the answers to the question of whether experience management is a necessity for the hotel sector.

The interviewees have directly identified the close relationship between the customer experience and the various moments of the customer journey, although it is believed that the journey changes according to the type of client.

Many authors have defined the "Customer Journey behavior" or consumer behavior throughout the purchasing process. From the basis of 5 theoretical definitions of behaviors linked to the Customer Journey, according to various reference authors (Wirtz & Lovelock, 2009), in search of the definition that best reflects the behavior of the customer in hospitality, both in terms of behaviors and nomenclature, the experts were not unanimous, identifying all the different definitions as possible. The most identified as optimal were those defined by (Voorhees et al., 2017), but summarizing the diverse proposals argued by the experts, we are in a position to define **the customer journey in hospitality as Inspiration / Need recognition / Information search / Plan / Evaluate / Reservation / Servuction / Evaluation of performance / Share (reviews) / Future intentions.**

To group the above behaviors throughout the Customer Journey, most experts identified the classification according to **Pre-Core Service Encounter / Core Service Encounter / Post-Core Service Encounter as optimal**, being the second option chosen to classify them as Pre-purchase / Purchase / Post-purchase and some of them determined that they would not identify the behaviors in stages, prioritizing the global view of the customer journey.

All the experts interviewed consider that **all the stages of consumer behavior “Pre”, “in the factory”, and “post” contribute to the generation of the customer experience**, but they have different influences on the customer experience. A major influence on the customer experience is given to the “in the factory” or core service encounter stage, followed by the “preservice encounter”, and with a lesser influence but still not exempt from it, the “post-service encounter” stage. Aligned with the above, the interviewed expert of the Pulitzer Hotel identifies the client's first contact with the hotel and how it is received as the most important touchpoint.

Hotel Guest Experiential Journey is the concept validated by the experts to name the entirety of the customer’s consumption behaviors that generate an experience. The total direct or indirect experience of the service processes, the organization, the facilities, and how the customer interacts with the representatives of the company and other customers are considered to make up the “Customer Experience” as a cognitive, emotional, and behavioral response, which is a memorable experience (Walter et al., 2010). All the customer behaviors identified in previous paragraphs have been pointed out as elements that contribute to the generation of the customer experience, affirming that the stages of the Customer Journey behavior in hospitality would correspond to the stages of the “journey” of the guest’s experience.

Throughout the service experience, it is during service encounters that customer interactions are facilitated. As facilitators of the meetings, there are many touchpoints and a customer interacts with an organization through hundreds of discrete touchpoints in multiple stages of the decision process or the customer's purchase process (Puccinelli et al., 2009; Verhoef et al., 2009). The customer interacts through those touchpoints while discovering, evaluating, purchasing, accessing, using, and being helped by the products and services of an organization (Bodine & Hagen, 2013).

Figure 6 - Service encounters throughout the guest experiential journey

Guest Experiential Journey Stages	Principal Service Encounters
PRE-CORE SERVICE ENCOUNTERS	<ul style="list-style-type: none"> Communication / awareness raising activities. References (Direct/indirect) Search for information by the client (technology/ Intermediaries / Influencers) Asking for information (Employees/other clients/ technology/ Intermediaries) Initial contact during the reservation process (information request, budget...)
CORE SERVICE ENCOUNTERS	<ul style="list-style-type: none"> Booking PRE arriving contact (service operations) Guest arriving to the hotel. Check in / Accommodation. Continuous reception service requiring (room change, wake-up service, reservation of internal services, custody of goods ...) Concierge service needs F&B and event services (breakfast service, cafeteria, catering, room service...) Interactions with Guest Experience team Sporadic interactions with housekeeping and maintenance teams Service recovery efforts & customer feedback Check out.
POST-CORE SERVICE ENCOUNTERS	<ul style="list-style-type: none"> Customer reviews & firm feedback post stay (social networks, rating platforms...) Loyalty programs communications / reminders Service recovery efforts & customer feedback Collection of information for the development of new services

Source 11 - Own elaboration

Encounters with employees are very important, according to the interviewee of Olha Hotels. The guest looks for happiness, and it is through interactions with company people that it is possible to make the guest smile and contribute to the overall experience. Thus, it is necessary to control aspects such as the voice timbre of the people who interact.

In most properties, hotel teams manage these service encounters directly, but some hotels rely on partner companies to handle some of these interactions. Taking into account the input of hospitality professionals, **the potential key partners** associated with each stage of the Hotel Guest Experiential Journey in hotel management are depicted in the following table.

Table 6 Guest experiential management principal partners

Guest Experiential Journey Stage	Principal Partners
Pre-core Service Encounters	<ul style="list-style-type: none"> - Marketing agencies - Multichannel distributors - Loyalty System Provider - Communication channels and social networks - Intermediaries: AAVV, TTOO - Communication companies and Representatives - Collaborating companies and related brands - Influencers & bloggers - Associations
Core Service Encounters	<ul style="list-style-type: none"> - Communication/awareness raising activities - Outsourcing firms (internal): housekeeping, maintenance... - External company of catering services. - External security company - Travel agencies/excursions / guides - Service providers: transfers, activities, ... - Loyalty System Provider - Material supplier - Customer service provider (translators/interpreters, personal shoppers...)
Post-core Service Encounters	<ul style="list-style-type: none"> - Communication agencies - Loyalty System Provider - Online reputation provider - Intermediaries: AAVV, TTOO - Representatives

Source 12 - Own elaboration

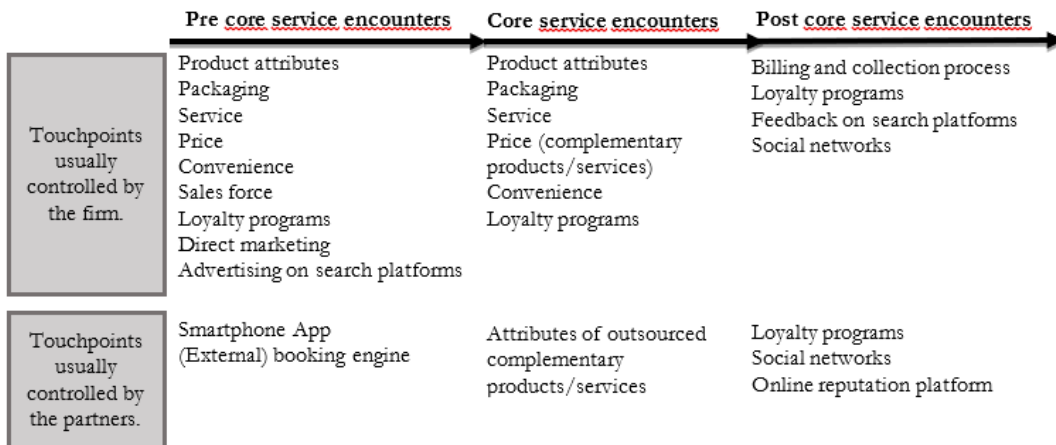
The fact that partner companies are responsible for key points in the generation of the customer experience makes the identification of these partners (which must be fully aligned with the company's experiential strategy) a key strategic aspect. In this vein, the interviewees pointed out that to ensure the global experiential approach, partner standards, and outputs must always be guided and controlled by the hotel firm.

Although some management is entrusted to these partners, it is necessary to maintain the consistency of the customer experience. The hotel management must establish very clearly the necessary experiential approach as well as the minimum product/service levels or standards.

One of the most common mistakes and one that is vital to avoid when it comes to generating a holistic experience is not establishing a periodic follow-up on the results of the partners, as well as monitoring the feedback of the clients on these services.

Going deeper into the guest experience generation, the experts have identified the **most important touchpoints in each stage:**

Figure 7 - Touchpoints throughout the guest experiential journey



Source 13 - Self elaboration

Validating what was contributed by Kandampully, et al. (2018), who clarifies that a positive Customer Experience is the result of an intelligently orchestrated, multifunctional approach that uses marketing, operations, human resources, strategy, technology, social media, and design. All the experts interviewed have had a resounding response stating that **all management areas are involved in the Guest Experience generation.**

2.6. Conclusions and limitations

The main objective of the research was to define the guest experience throughout their journey and given the lack of contributions integrating multiple perspectives, we aim to do it by integrating multiple perspectives from a hospitality approach. The inclusion of case studies allowed for the illustration of how different organizations understand and manage their customer experiences (5 propositions were initially raised and finally resolved with the analysis of the case studies). Through in-depth interviews with the group of experts, it was possible, in addition to responding to the propositions, to also successfully address all the sub-objectives.

After conducting a literature review, Kandampully et al. (2018) noted that customer experience was approached from a variety of disciplinary perspectives, including marketing, operations, and human resources. However, Ivens and Shaw (2003) also observed that contributions integrating multiple perspectives were not common. Therefore, our goal was to address the aforementioned objectives with a multidisciplinary approach.

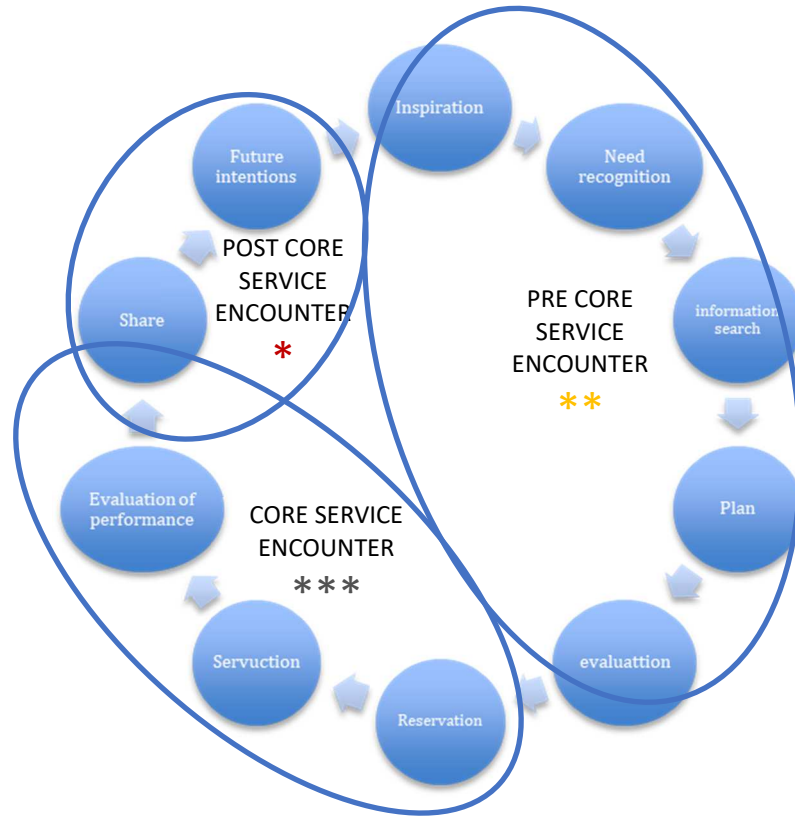
The concept of the **Guest Experiential Journey** has been explicitly identified and validated to encompass all behaviors of hotel guests that generate their experience in the context of hospitality.

The different **stages** of the guest experiential journey and the main customer **behaviors** in each stage have also been identified (see *Figure 4* for a graphic visualization). Based on the diverse proposals put forth by experts, the Guest Experiential Journey in hospitality has been defined as Inspiration / Need Recognition / Information Search / Planning / Evaluation / Reservation / Servuction / Evaluation of performance / Sharing (reviews) / Future intentions.

The optimal classification of these behaviors would be to divide them into three main stages: Pre-core service encounters / Core service encounters / Post-core service encounters. From the perspective of managers to generate experiences, the focus is on the "core service" stage, followed by the "pre-core service" and lastly place the "post-service encounter" stage. As the interviewed expert of Renaissance said, the experience is constantly changing and these stages are intertwined, the experience is constantly changing and currently guests are

sharing their experiences with their phones simultaneously they are living the experience.

Figure 8 - Hotel guest experiential journey: phases and behaviors



Source 14 Self-elaboration

The research has identified service encounters as the events to manage during the stages of the customer experience. Partners related to experience generation during these encounters were also identified, providing management scope. Additionally, a list of main touchpoints was provided as a base for applying stimuli to generate experience in hospitality.

One of the main challenges of this investigation has been to secure the invaluable participation of highly experienced experts in the relevant field, while also ensuring sufficient time for conducting thorough interviews. Although a larger number of expert interviews may have expanded the scope of the study, the high level of expertise of the selected participants and the quality of the in-depth interviews have enabled us to make a significant and substantial contribution to the field.

The results of the interviews conducted have confirmed all initial propositions, with the exception of proposition number 2 (the comments of the interviewees have allowed us to generate a list of customer behaviors aligned with all the cases). The results regarding the validation of the propositions are shown in Table 6.

Table 7 Validation of the propositions in the case analysis

	P.1	P.2	P.3	P.4	P.5	P.6
Case 1	Confirmed	Not Confirmed (the most similar is Cole 2011)	Confirmed	Confirmed	Confirmed	Confirmed
Case 2	Confirmed	Not Confirmed (the most similar is Vorhees et al, 2017)	Confirmed	Confirmed	Confirmed	Confirmed
Case 3	Confirmed	Not Confirmed (the most similar is Vorhees et al, 2017)	Confirmed	Confirmed	Confirmed	Confirmed
Case 4	Confirmed	Not Confirmed (the most similar is Cole 2011)	Not Confirmed	Confirmed	Confirmed	Confirmed
Case 5	Confirmed	Not Confirmed (the most similar is Vorhees et al, 2017)	Confirmed	Confirmed	Confirmed	Confirmed
Case 6	Confirmed	Not Confirmed (the most similar is Escobar, 2011)	Confirmed	Confirmed	Confirmed	Confirmed
Case 7	Confirmed	Not Confirmed (the most similar is Vorhees et al, 2017)	Confirmed	Confirmed	Confirmed	Confirmed
Case 8	Confirmed	Not Confirmed (the most similar is Escobar, 2011)	Not Confirmed	Confirmed	Confirmed	Confirmed
Case 9	Confirmed	Not Confirmed (the most similar is Escobar, 2011)	Confirmed	Confirmed	Confirmed	Confirmed
Case 10	Confirmed	Not Confirmed (the most similar is Cole 2011)	Confirmed	Confirmed	Confirmed	Confirmed

Source 15 Self-elaboration

This research describes the guest experience throughout their journey, identifying phases, behaviors, and service encounters. Future research could

focus on identifying additional touchpoints and classifying them to help hotel firms manage all points of contact.

A guide for the hotel industry on contact points could be helpful for companies focused on creating memorable experiences.

Chapter 3. Interactions and the touchpoints throughout the hotel guest journey: an approach to managing the experience (second paper)

3.1. Abstract

To generate the long-awaited memorable experience for its customers, the hotel firm must know and control the process of generating it, down to the smallest detail. This research had the purpose of deepening the experience generation process, from a business perspective, in experiential encounters and touchpoints detail level. Aiming to identify, from the hotel perspective, the objectives to be achieved (directly / indirectly) in each of the stages of the experiential process, it was a must the identification of the experiential encounters and the touchpoints through which value is generated for the guest, the key elements of a hotel customer's experience, the providers linked and, the managerial areas related to the guest experience generation. The goal is to answer the question "What objectives should hotels aim to achieve to create a positive experience at every stage of the experiential process, both directly and indirectly?".

After an assessment of an extensive body of literature, a series of focus groups were conducted, with participation from contact staff in hotel processes related to the service encounters throughout the guest experiential journey. Focus groups revealed the main service encounters that occur during the customer behaviors of the Hotel Guest Experiential Journey, allowing for the identification of principal touchpoints (products, interactions, messages, settings) (brand-owned, partner-owned, customer-owned, social/external) through which the experience is generated. This, consequently, allows for the identification of the aspects to manage to generate positive guest experiences.

Understanding how the experience is generated is a key issue for hotels to be able to manage and improve the Guest Experience generation. The vision at the maximum level of detail obtained with this research is intended to be a guideline that can be used by any hotel to manage the experience of its customers.

Keywords: Guest Experiential Journey, Experiential encounters, Stimuli, Touchpoints, Guest Experience generation.

3.2. Introduction

The generation of the hotel guest experience extends throughout the three phases of the customer journey: a prospective phase (pre-purchase, booking,

purchase, post-purchase, pre-experience ex-situ), an Active Phase (in-situ pre-experience, experience, in-situ post-experience), and a Reflective Phase (ex-situ post-experience) (Yachin, 2018).

Firm-customer encounters along the customer journey are the point of value creation and knowledge sourcing (Akaka et al., 2015). And the value creation along the journey should be different depending on the moment: anticipating (expectations and imagination) in the prospective phase, realizing (participation) in the active phase, and recollecting (satisfaction, nostalgia, reinterpretation, and self-image) in the reflective phase (Yachin, 2018).

The points through which a customer comes into contact with the organization, across multiple channels and at various points in time, are called touchpoints (Zomerdijk & Voss, 2010). The sequence of customer behaviors (inspiration, need recognition, information, reservation, use/servuction, evaluation of performance, and share) and the given several service encounters are the loci in which through the touchpoints, the experience is generated.

To be competitive in a service-based industry, a company must look for ways to complement existing service offerings with new experience-staging techniques to maximize the effect of each service encounter. Authors such as Dewar, Mackay, Smith, Pullin, and Tocher (2010) focus on the concept of service design, relating it directly throughout the customer journey.

As Mossberg (2007) advanced, consumer experience cannot be granted by the organization, firms can only construct the setting in which willing consumers can partake in an experience. Some other researchers reinforce this point of view, which posits that firms may establish emotional connections with their clients by creating impressive environments, resulting in satisfied and loyal customers (Bitner, 1992 ; Holbrook & Hirschmar, 1982 ; Pine & Gilmore, 1998 ; Pullman & Gross Michael A, 2004).

Recent research evidenced a lack of insight into touchpoints beyond firm control, pointing out that most of the reviewed research shows a narrow scope of stimuli and touchpoints (Becker & Jaakkola, 2020). This approach gives rise to studying diverse offering-related stimuli through multiple levels of aggregation.

3.2.1. The experience generation in hotels, from Service Encounters to Experience Encounters.

Along the Guest Experiential journey, there are technological, organizational, and temporal interdependencies between the service encounters.

Customer service encounters may be with employees, other customers, technology, intermediaries, and the environment (physical elements and ambient factors also influence the generation of experience). Service encounters can also be classified depending on the purchase phase in the customer journey: pre-, during, or post (Lemon & Verhoef, 2016).

- Pre-Core Service Encounters are interactions with the brand, category, and environment before a purchase transaction. These service encounters are important to familiarize the customer with the firm's service offering, to initially engage with the customer to bring them into the service, to customize the service, and to generate expectations.
- Core Service Encounters are interactions with the brand and environment during the purchase transaction (Lemon & Verhoef, 2016), and in services also the usage-service (Langeard & Eiglier, 1987).
- Post Core Service Encounters are interactions with the brand and its environment following the purchase. These service encounters are important to maintain a relationship with the customer over time.

The possibility to generate knowledge about experiential purposes is conditioned by the firm's ability to bestow encounters with an experience-like quality and promote the customers' transformation into participants.

Unlike other businesses, tourism firms should address customers' latent desires and experiential purposes more than understanding expectations and functional needs. This fact makes the difference between service encounters and experiential encounters, making the latter personalized and dynamic interactions in which front-line employees should apply experiential intelligence and flexibility to address customers' latent desires and purposes (Akaka et al., 2015). Experiential encounters integrated into the guest experiences create added experiential value for them at the same time permit to increase in the creation of knowledge about guests (Sorensen & Jensen, 2015).

As Yachin (2018) defined, to transform a customer into a participant in an experiential encounter, the key factors are to invite and involve (give room to customers in discussions, preparations, and decision-making), to adopt an experiential discourse (focus on imagination, fulfillment, past experiences, and dreams), and to include supporting moments designed to socialize.

3.2.2. TouchPoints.

Touchpoint concept was linked to services by Shostack in 1984, as tangible evidence of the so-called service plan. Touchpoints were defined as those key elements that the consumer uses to verify the effectiveness of their service and through which an exceptional service could be generated (Shostack, 1984).

Touchpoints, also known as moments of contact between the customer and the organization (Zomerdijk & Voss, 2010), contact points (Stauss and Weinlich, 1997), service events (Lillrank, 2009), or moments of truth (Carlzon, 1989), deliver what Voss, Roth, and Chase (2008) identify as experience-centric services, services in which firms craft the customer experience proactively to create distinctive product and service offerings (Voss et al., 2008).

A guest experiences a service process consisting of multiple touchpoints along the customer journey, which encompasses all phases of the experience. For a firm, touchpoints influence customers' thoughts, feelings, and behaviors and offer a framework for understanding what customer experience means and what needs to be improved (Zomerdijk & Voss, 2010). Touchpoints occur whenever a customer comes into contact with the organization, across multiple channels and at various points in time (Zomerdijk & Voss, 2010).

The effect of an individual touchpoint may depend on when it occurs in the overall customer journey (Lemon & Verhoef, 2016).

A guest journey includes not only direct touchpoints between customers and a service provider but also indirect ones, such as review websites and social media platforms. In the service sector, that is, in hospitality, the majority of indirect touchpoints are the starting point of a guest journey, by attracting the attention of guests to a certain service/product (Stickdorn & Zehrer, 2009) (Stickdorn et al., 2011).

Along the journey, customers are exposed to multiple touchpoints, each of which has direct and indirect effects on purchases and other customer

behaviors. It is crucial for a company to identify critical touchpoints (called moments of truth) throughout the customer journey that would have the most significant impact on key customer outcomes (Lemon & Verhoef, 2016).

According to Richardson and Li (2010), there are four categories of touchpoints: products, interactions, messages, and settings (Richardson & Li, 2010).

- Products as touchpoints, are the hardware, software, and services themselves the same as vans or the website as central to every aspect of business, from acquiring to servicing customers can be classified as product touchpoint. Depending on the use of the touchpoint for a specific company, they may be classified differently, for example, for companies where the website is a straightforward marketing tool, it may be better to classify the Web in Messages.
- Interactions as touchpoints are bidirectional interactions that can be in person (such as in a store), on the phone, or virtual (websites, blogs, social networking user forums, etc.).
- Messages as touchpoints are these one-way communications that include the brand, collateral, manuals, advertising, packaging, and the like.
- Settings as touchpoints are anywhere the product is seen or used: a retail store, a friend's house, TV product placement, events, or shows.

Another differentiation of touchpoints is provided by Lemon and Verhoef (2016), who classify touchpoints by their owner as brand-owned, partner-owned, customer-owned, and social/external.

- Brand-owned touchpoints are customer interactions during the experience that are designed, managed, and under the control of the company. They include brand-owned media (e.g., advertising, websites, loyalty programs) and brand-controlled elements of the marketing mix (e.g., product attributes, packaging, service, price, convenience, sales force).
- Partner-owned touchpoints are customer interactions during the experience that are jointly designed, managed, or controlled by the company and one or more of its partners. This type of touchpoint can include marketing agencies, multichannel distribution partners, multivendor loyalty program partners, and communication channel partners.

- Customer-owned touchpoints are customer actions that are part of the overall customer experience but that the firm, its partners, or others do not influence or control. Customer-owned touchpoints are most critical and prevalent in a post-purchase phase when individual consumption and usage take center stage.
- Social/external touchpoints recognize the important roles of others in the customer experience.

Throughout the experience, customers are surrounded by external touchpoints (e.g., other customers, peer influences, independent information sources, and environments) that can influence the process. During the purchase process or for products and services that are consumed immediately after purchase (such as theaters, concerts, restaurants, sporting events, and mobile apps), other customers may influence a customer's decision-making through extra-role behavior or simply through proximity. Studies by Baxendale, Macdonald, and Wilson (2015) and Risselada, Verhoef, and Bijmolt (2014) have shown that these effects can be significant and comparable to or even larger than advertising effects (Baxendale et al., 2015).

In many service settings, service delivery to a customer occurs in the presence of other customers, leading to frequent interactions between them (Grove & Fisk, 1997; Wu, 2007). These interactions can significantly impact the outcomes and processes of service delivery, resulting in either positive or unpleasant experiences for customers. Grove and Fisk (1997) found that customer-to-customer interactions can have a positive or negative impact on customer satisfaction and quality perception.

Additionally, Lin and Liang (2011) suggest that the social environment can also influence the customer experience (Lin & Liang, 2011).

Third-party information sources, such as review sites (e.g., TripAdvisor) and social media, can also exert influence on customers. Sometimes sources are independent; while others are more closely aligned with the brand or firm (Manchanda et al., 2015), or considered partner touchpoints. Social media has gained significant attention within the marketing literature. The role of reviews in the purchase process has also been extensively documented (Chevalier & Mayzlin, 2003).

Other researchers have differentiated between firm-initiated and customer-initiated touchpoints (Anderl et al., 2015; de Haan et al., 2016). They suggest that brand-owned and partner-owned touchpoints are more likely to be firm-initiated, while customer-owned and social/external touchpoints are more likely to be customer-initiated.

De Keyser, Verleye, Lemon, Keiningham, and Klaus (2020) pointed out that while the literature predominantly focuses on firm-controlled touchpoints, there is a growing recognition of non-firm-controlled touchpoints, particularly the role of others (De Keyser et al., 2020a).

As a strategic option primarily aimed at improving dissatisfying touchpoints, some firms outsource these touchpoints to third parties. Either through branded outsourcing (where the firm uses a third-party brand) or unbranded outsourcing (without being explicitly visible to the consumer)(Kranzbühler et al., 2019).

These touchpoint classifications provide firms with an organizing framework for understanding potential leverage points in the customer experience. For instance firms can identify the touchpoints in the journey that they own or can influence, and be cognizant of those touch points that they have no or minimal influence over (customer-owned, social/ external) (Lemon & Verhoef, 2016).

Table 8 Diverse Touchpoints Classifications

	Diverse Touchpoints classifications			
(Richardson & Li, 2010).	Lemon and Verhoef (2016)	De Haan,Wiesel, and Pauwels (2016)	Kranzbühler et al., (2019)	De Keyser, Verleye, Lemon, Keiningham, & Klaus (2020)
Products Interactions Messages Social/external	Brand-owned Partner-owned Customer-owned Social/external	firm-initiated customer-initiated	branded outsourcing Unbranded outsourcing	firm-controlled non-firm-controlled

Source 16 Self-elaboration

3.2.3. The generation of the experience through the touchpoints and stimuli.

Service companies often conceptualize service delivery as customer journeys consisting of interconnected touchpoints (Zomerdijk and Voss, 2010). A customer journey examines the customer's perspective, including their actions, goals, questions, and barriers over time (Richardson & Li, 2010). To achieve this, it is recommended to walk in the customer's shoes (Holmlid & Evenson, 2008).

Customer journey maps are visual representations of events or touchpoints depicted chronologically, often accompanied by emotional indicators. They are used as a visualization technique within service design (Blomkvist & Segelström, 2014).

Touchpoints are usually presented horizontally on customer journey maps, following a process timeline that is divided into three periods: pre-service, service, and post-service (Rosenbaum et al., 2017). The timeline is just the starting point, it is necessary to understand what is happening in each stage and in a useful framework to look at actions, motivations, questions, and barriers.

The organization supports the customer journey by orchestrating touchpoints, which are any points of interaction between the customer and the Brand. The key to creating a superior customer experience is to integrate these touchpoints seamlessly. There are two ways to approach this: longitudinally throughout the customer journey or by ensuring that each touchpoint type supports the others for each stage of the journey (Richardson & Li, 2010).

Nowadays, customer journeys are often described as multitouch and multichannel, meaning that there are multiple touchpoints at each stage of the journey, and new types of stimuli are emerging every day. This suggests that firms need to understand a broad range of touchpoints both within and outside of their control, in both offline and online settings (Bolton et al., 2018; Lemon and Verhoef 2016; Becker & Jaakkola, 2020). Customers actively construct their own consumption experiences through personalized interaction, co-creating unique value for themselves (Prahalad & Ramaswamy, 2003). Experiences are created/lived by customers based on their interpretation of encounters and interactions designed by a service provider (Hume et al., 2006). Organizations cannot fully control these experiences. An experience is generated within an

individual, and the outcome depends on how they react to the staged event in a specific mood and state of mind (Pine & Gilmore, 1999; Hanefors & Mossberg, 2003). Therefore, for a tourism service provider to be successful, it is essential to understand how companies can create circumstances that enhance customers' experiences (Mossberg, 2007).

The various dimensions of a customer's experience with a firm can be categorized as cognitive/mental, emotional/affective, sensorial/physical, social/relational, and behavioral/pragmatic (Brakus et al., 2009 ; Lemon & Verhoef, 2016).

3.2.4. Customer experience management.

Customer experience management (CEM) captures and distributes customer feedback at points of interaction or touchpoints with a firm. This feedback can be obtained through surveys, targeted studies, observational studies, or voice of customer research. The purpose of CEM is to enable business or functional leaders to create fulfillable expectations and improve customer experiences with products and services (Meyer & Schwager, 2007).

Commonalities in the service process promote unambiguity in service characterization and bring rigor and formalism to customer journeys (Halvorsrud et al., 2016). Service organizations should strategically map out every touchpoint, evaluate their service performances at each touchpoint, and identify how they can improve by adding or redesigning touchpoints (Stickdorn et al., 2011). The design principles include the following:

1. Design from the customer's perspective, the journey, and its associated touchpoints.
2. Conduct sensory design.
3. Ensure front-line employees engage with customers.
4. Pay attention to the dramatic structure of events.
5. Manage the presence of fellow customers.
6. Closely couple backstage employees and frontstage experiences.

The integration of touchpoints requires collaboration among multiple departments within a company, as well as external partners, to enhance the customer experience (Richardson & Li, 2010).

As journeys become more intricate and personalized, it is essential to avoid silos in the literature that concentrate on a limited number of stimuli and touchpoints,

as they fail to capture the true customer experience. Literature fields that consider customers' holistic experiences in their lifeworld take a broader view but lack precision and insight into how experiences related to particular offerings emerge (Becker & Jaakkola, 2020).

The impact of one point of contact on subsequent experiences has been noted (Statuss & Weinlich, 1997). It is crucial to comprehend the factors that influence customer experiences to create an environment that enables customers to connect and create their own experiences (Diller et al., 2006).

3.3. Research Objectives

Due to its high impact, there has been a growing interest in studying the process of experience generation from a business perspective, which is precisely the approach of this research. Our main goal is to delve into the experience generation process in detail focusing on experiential encounters and touchpoints. We intend to carry out a touchpoint analysis at a level of micro detail not previously done.

The objective of this study is to identify the goals that hotels aim to achieve, both directly and indirectly, during each stage of the experiential process. To accomplish this, it is crucial to identify the experiential encounters and touchpoints through which value is generated for the guest, the key elements of a hotel customer's experience, the suppliers involved, and the management areas related to the guest experience generation. Therefore the research question is "What objectives should hotels aim to achieve to create a positive experience at every stage of the experiential process, both directly and indirectly?".

Experience as a response to consumption processes, as focused on in the research tradition, can also be analyzed deeply in terms of journey composition, as is done from a managerial point of view, focusing on the meanings that emerge at specific touchpoints. (Becker & Jaakkola, 2020)

This research aims to identify the touchpoint level meanings and key factors for generating experiences through the knowledge of managers involved in experience management.

The goal is to identify the guest experience service encounters along the guest experiential journey and all touchpoints through which the experience is generated during each service encounter. The analysis of deep touchpoints will

facilitate their classification and control, as well as the identification of the key factors to manage them from the hotel's perspective.

3.4. Methodology

To achieve the main objective of the research, the qualitative technique of the focus group has been identified as optimal. Focus groups are a useful method for exploring people's thoughts, ideas, attitudes, and experiences concerning a particular topic. They combine interviewing, participant observation, and group interaction. (Petrus, 2017).

To obtain knowledge from hotel experts on touchpoints and management keys that generate positive experiences, it is important to encourage interaction among experts in focus groups. This will stimulate discussion and encourage participants to justify their contributions and draw conclusions based on initial perceptions.

In an area that has not been extensively researched, the focus group technique serves a triple purpose: to contrast the existing level of knowledge about the discipline; to gather the information that would serve to confront what has already been reported in the literature; and to identify potential emerging areas for future research (García, 2005).

Focus groups can vary in size from three participants (Lane et al., 2001) to twelve (Krueger & Casey, 2014; Stewart et al., 2014). However, small groups are suitable when the aim is to obtain in-depth insights or if the participants have a lot of experience in the area (Krueger & Casey, 2014). Therefore, for this research, small groups consisting of experts in the field have been chosen.

To gain insight into the perspectives of different groups, it is necessary to conduct multiple focus groups on the same topic (Grudens-Schuck et al., 2004). In the context of the hotel guest experience journey, this includes pre-core service encounters managed by marketing and commercial teams, core service encounters managed by guest experience managers, and post-core service encounters managed by social media managers. Therefore, three different series of focus groups were planned.

The first was attended by guest experience managers to identify the key touchpoints in the core experience encounters and to draw out the key aspects to be managed to bring out the guest experience.

The second workshop was attended by marketing, commercial, and social media managers to identify the key touchpoints in the pre- and post-core service encounters and to draw out the key aspects to manage to bring out the guest experience.

There are no established rules for determining the optimal number of groups. This decision should be based on the research objectives (Stewart et al., 2014). The saturation point of the research (Morgan, 1996); Krueger & Casey, 2014) should determine when no more focus groups are necessary to achieve the desired insights.

In this study, the first focus group consisted of Guest Experience Managers from 4-5-star hotels in Barcelona, second most visited city in Spain, with 15.6M visitors in 2023 (Observatori del Turisme Barcelona Ciutat i Regió, 2024). Following literature suggestions that groups should be oversampled by two to four participants to ensure an appropriate number of participants, the group was over-recruited by seven individuals.

Three guest experience managers share their perspectives on the guest experience throughout the touchpoints in a 1 hour and 15-minute session.

The researcher acted as the moderator, as they possess the necessary background knowledge and familiarity with the study's goals and question route (Petrus, 2017).

During the focus group, the moderator not only listened to the content of the discussions, but also paid attention to emotions, ironies, contradictions, and tensions. The focus group method enables researchers to gain insight into the meaning behind the facts, rather than just the facts themselves (as in survey methods). This is a major advantage of the focus group method.

The moderator's role is to facilitate group processes and ensure that the discussion covers the topics of interest. This role is fulfilled by a non-participant (Fern, 2001);(Sim & Snell, 1996).To ensure the success of the focus group, the moderator's role is to create a purposeful introduction that sets the ground rules and establishes a permissive environment to encourage participants to share their points of view (Krueger and Casey, 2014; Stewart and Shamdasani, 2014; Gelling, 2015), maintain the focus of the discussion without directing or constraining it (Sim and Snell, 1996; Gelling, 2015), encourage those who are less forthcoming (Hurworth, 1996 ; Sim and Snell, 1996), establish rapport

while remaining non-judgmental (Parsons & Greenwood, 2000); Morrison-Beedy et al., 2001; Gelling, 2015), use pauses and probes effectively (Carey & Smith, 1994; Hurworth, 1996; Greenwood and Parsons, 2000), clarify and paraphrase what has been said (Hollis et al., 2002), and remain focused on key questions.

A preliminary study was conducted to identify touchpoints for questioning or validation during the focus group. This study also served as a starting point for identifying additional touchpoints to add value. Following the guidelines outlined in (Petrus, 2017), a question route was prepared to ensure a natural progression towards key discussion points.

A second focus group was necessary, and ten experts were invited, of which only five finally participated. They collectively possess over 70 years of experience in serving hotel guests. The aspects identified in the initial focus were confirmed and some were further explored, while other unrelated aspects did not arise. It appears that further focus groups with guest experience managers are not necessary to narrow the focus of this research.

To further enhance the guest experience, we propose conducting focus groups (as needed) with marketing, commercial, and social media managers to reinforce pre- and post-stay knowledge. This will provide an additional perspective on how to improve the guest experience. During the third focus group, seven participants were initially summoned, but only four experts with over 90 years of combined experience in hotel marketing and commercialization ultimately participated. The group confirmed and expanded upon some of the aspects identified in the previous focus group but did not uncover any significantly different aspects.

After conducting three focus groups it was determined that no new insights were being gained, indicating that the saturation point had been reached (Morgan, 1996; Krueger and Casey, 2014). Therefore, additional groups were deemed unnecessary to gain further insights on this topic.

3.5. Results and findings

This research focuses on encounters and touchpoints. However, to understand the experience generation, it is important not to forget that the touchpoints, classified by control, nature, and stage as products, interactions, messages, and settings, as summarized in Table 8 compose the three overarching experience

building blocks next to the context (individual, social, market and environmental) and the qualities (participation, dimensionality, time flow, valence, and ordinariness) (De Keyser et al., 2020b).

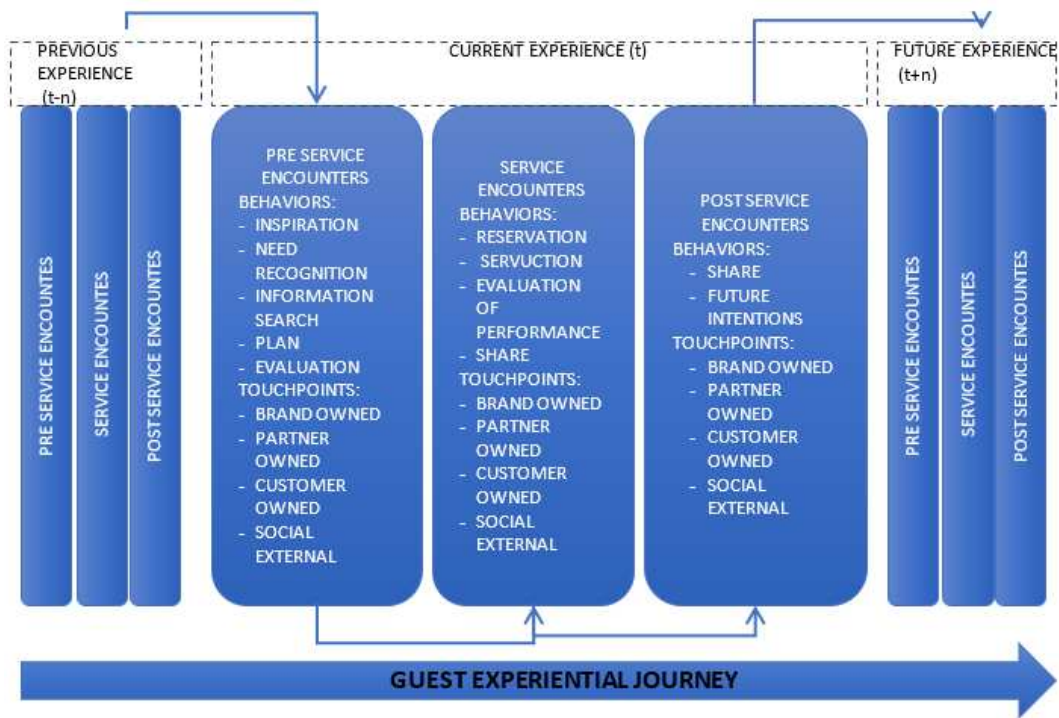
Table 9 Touchpoint Classification Compendium

Building block	Element	Sub-elements	
TOUCHPOINTS Products Interactions Messages Settings	Control	Firm-controlled	
		Non-firm-controlled	Partner /outsourcing
			Customer
	Nature	Human	
		Physical	
		Digital	
	Stage	Pre-core service encounters	
		Core Service Encounters	
		Post Core Service Encounters	

Source 17 Self-elaboration

To effectively manage touchpoints from an organizational perspective, it is crucial to analyze them based on their level of control. We have developed a process model tailored to the guest experience by incorporating the details of other touchpoint classifications (Richardson & Li, 2010; Lemon & Verhoef, 2016; Kranzbühler et al., 2019) into the Keyser summary (see *Figure 9*).

Figure 9 Process Model for Guest Experience



Source 18 Adaptation of Lemon & Verhoef Process Model for Customer Journey and Experience to the Hotel Context

During the focus groups, the service encounters were identified by analyzing each of the customer behaviors in the guest experience journey, including inspiration, need recognition, information, reservation, use, evaluation of performance, and sharing. Figure 10 shows the main thirty-one encounters related to the stage of the customer journey in which they occur. Identifying these key encounters provides a foundation for customer journey analysis, which can aid in understanding the sequencing of customer experiences.

Figure 10 Service and experiential encounters related to the customer behaviors



Source 19 Self elaboration

The analysis of experiential encounters has identified touchpoints based on customer behavior. These touchpoints include interactions with employees, other customers, technologies, or intermediaries. The service encounters have been itemized and touchpoints have been detailed.

Each touchpoint has been classified by typology, including products, interactions, messages, and settings, as well as by who controls it, such as brand, partner, customer, or social. The related organizational entities and functions

have been linked to each touchpoint, allowing them to add value to the guest. Please refer to *Table 9* for more information. Knowing the contact points associated with a function enables the organization to establish the function's objectives, which are linked to the value contribution through the touchpoints, and competency management.

Table 10 Example of the level of detail and the classification of touchpoints made.

CUSTOMER BEHAVIOURS	With employees With other customers With technology With intermediaries	Service encounter	Touch point	Core service encounters							Related Organizational entities (functions teams or firms)
				touchpoints types	In person	Phone	Virtual	Message	Settings	Customer owned	
RESERVATION	With employees	Reservation Activities / Booking Walk in customers	In person contact at the reception looking for information and availability	x in person							Reservations
RESERVATION	With employees	Reservation Activities / Booking Initial contact, during the information search process	Telephone support (after an information request)	x phone							Reservations
RESERVATION	With employees	Reservation Activities / Booking Initial contact, during the information search process	Chat box / email (after an information request)	x virtual							Reservations
RESERVATION	with technology	Reservation Activities / Booking Looking for a budget on de web	Web booking engine	x							Reservations
RESERVATION	with technology	Reservation Activities / Booking Intermediaries reservation platforms	Intermediaries Web booking engine	x virtual							Commercial /Sales
RESERVATION	with intermediaries	Reservation Activities / Booking at Intermediaries office	Intermediaries contact staff	x in person							Commercial /Sales

Source 20 - Own elaboration

The servuction behavior has 93 touchpoints, including 37 products, 34 interactions (2 by phone, 3 virtual and, 29 in person), 1 message, and 21 settings.

The majority of touchpoints (88) are controllable by the organization/brand, while only a small portion is owned by partners (4) and customers (1).

The list's detailed nature allowed for validation by the experts during the focus groups. Experts identified touchpoints that generate differentiation and positive experiences. The following aspects were identified:

- The touchpoints associated with service encounters during the inspiration stage should focus on generating curiosity and providing unexpected experiences to create a positive customer experience.
- For touchpoints related to the stages of need recognition, information gathering, and reservation, it is important to prioritize product coherence,

accuracy, and uniqueness for the client. During the reservation process, it is crucial to ensure ease of use.

- During Servuction, positive experiences can be generated through various key aspects in touchpoints. These include focusing on the client's needs, avoiding standardization during interactions (while still aligning with corporate standards), providing accurate and concise information, delivering emotional messages, smiling, using the guest's name and providing recognition, and maintaining eye contact during in-person touchpoints.
- During the performance evaluation process, guests provide feedback and share their experiences. It is important to encourage customer feedback empathetically and reactively, being honest and using it to improve and adapt their experience as quickly as possible.
- Social media has made sharing experiences during use or servuction more common, making this aspect of the experience crucial for a company's online reputation and marketing success.
- Performance evaluations are typically conducted during use or servuction.

The deployment and classification of all touchpoints provide a comprehensive, holistic, and in-depth understanding of the process of creating the patient experience. This, when linked to organizational entities, provides a structure for control and improvement.

3.6. Conclusions and limitations

This study highlights the critical importance of controlling the generation of customer experiences, particularly for service companies.

By focusing on the customer journey and behavior, certain service encounters can be identified where contact between the customer and organization intensifies. The experience is generated through touchpoints in these encounters.

After reviewing the existing literature and implementing the focus group methodology, this section discusses the results and provides a final response to

the research goals. It also delves into the process of experience generation from a business perspective.

From the hotel's perspective, we have identified the objectives to achieve, both directly and indirectly, in each stage of the experiential process. Firstly, we identified the experiential encounters and touchpoints through which value is generated for the guest. Secondly, we pointed out the key elements of a hotel customer's experience, the linked providers, and the managerial areas related to guest experience generation.

Twenty-two service encounters linked to seven main guest behaviors have been identified. One of these encounters has been identified as an experiential encounter linked to service within the establishment itself. These encounters have the greatest influence on the guest experience.

According to experience management experts, the majority of touchpoints in the guest experience journey are generated through service encounters during the use/servuction stage. Therefore, firms consider this stage to be the most important for controlling and managing the guest experience.

Ninety-three touchpoints have been identified concerning the servuction process. Of these, 37 are products, 34 are interactions (2 by phone, 3 virtual, and 29 in person), 1 is a message, and 21 are settings.

The organization/brand controls the majority of touchpoints (88), while the partners own a small portion (4) and customers own an even smaller portion (1).

The research findings provide a solid foundation for any hotel firm to analyze their guest journeys from a management perspective. However, as Richardson & Li (2010) pointed out, each company must analyze its case from its perspective. This involves answering questions such as whether the touchpoints address customers' motivations, answer their questions, or allay their concerns. Are the touchpoints working effectively for both novice and expert customers? Are they addressing your customers' underlying and latent needs? Is there consistency in tone, messaging, and language across all touchpoints? Is your brand being communicated clearly and effectively? Are the touchpoints helping to differentiate you from your competitors and retain customers?

The research output provides extensive insight into the touchpoints that each organization must consider when addressing the aforementioned questions. This approach ensures control over the creation of experiences.

Becker and Jaakkola (2020) previously concluded that studies often focus on measuring customer experience at the touchpoint level. However, the literature is unclear about how the interplay of diverse stimuli affects customer experience. Therefore, future research should study the interaction between types of stimuli and their dynamic effect on customer experience. This research is focused on identifying, classifying, and analyzing encounters and touchpoints in the hotel context in a very detailed way, contributing to a deeper knowledge of the customer experience. However, to complete the understanding of the guest experience generation, further research must analyze specific cases, analyzing the context (individual, social, market, and environmental) and the qualities (participation, dimensionality, time flow, valence, ordinariness).

Chapter 4. Understanding the patient's experience in the outpatient clinics. A case study (third paper)

4.1. Abstract

Prioritizing the patient experience is essential for the success and sustainability of any healthcare organization. It is necessary to first describe the key elements of the experience framework and then explain how they are integrated. The outpatient department is a critical management point due to the high volume of patients seen daily and the diversity of medical services and specialties.

This research analyzes the elements that define a patient's experience in hospital outpatient clinics through a case study of one of the hospitals of the Quirónsalud group, the leading healthcare provider in Spain. The aim is to determine if the hospital's patient experience management covers all the necessary elements of the patient experience definition.

To understand how the Hospital Universitario General de Catalunya (one of the largest Quirónsalud hospitals in Catalonia) operates, an analysis of its organizational information, in-depth interviews with its management team, and direct observation of its services were conducted. This allowed for a precise understanding of the outpatient clinic's patient experience.

The research provides a conceptualization of the patient experience. The patient-company encounters produced throughout the patient's journey are influenced by both the needs of the patients and the organization's elements. The experience building blocks, including touchpoints, context, and qualities, allow for the identification of value contributions and areas for improvement.

The structure of the conceptualization itself, as well as the detailed description of all the elements of the conceptualization, are intended to serve as a guide for managers of similar hospitals, facilitating planning and identification of aspects with room for improvement.

KEYWORDS: outpatient patient experience, experience framework, outpatient clinics, context, touchpoints, qualities

4.2. Opportunity or challenge.

Prioritizing the patient experience is crucial to the success and sustainability of any healthcare organization. It leads to a high return on investment, improved quality, and increased customer loyalty (Betts et al., 2016).

Hospitals must recognize and prioritize the patient experience to establish and maintain a competitive advantage (Birkelien, 2017). Having a clear understanding of the meaning and scope of Patient Experience is essential for an organization to define its strategy.

Patient experience is reflected in how an organization operates, and by focusing on these core concepts, organizations can create a dynamic framework that reflects the active nature of the experience.

Quirónsalud is the leading healthcare provider in Spain and the third-largest in Europe. Their business model is based on a commitment to quality, supported by a prestigious professional team, advanced technology, and a strong focus on research and education.

The Hospital Universitario General de Catalunya (HUGC) is one of 14 Quirónsalud hospitals, offering a wide range of outpatient services with 52 types of provisions and services. In 2021, the hospital conducted 468,599 medical consultations.

This study aims to provide an illustration of the patient experience at the center under investigation and to facilitate the comprehension of similar experiences at other centers. This will lay the foundation for improving the patient experience through a holistic understanding of it.

The research questions that need to be addressed are:

Is the strategic framework for patient experience management at Quirónsalud Hospital the same as the theoretical framework?

What are the building blocks of the outpatient experience at a Quirónsalud Hospital?

In order to address the research questions, the results section begins with a compendium of the definition of patient experience. Following this, all aspects

linked to the organizational culture are analyzed in the context of the strategic definition of this experience. From a more strategic perspective, the focus then shifts to the building blocks of the patient experience (touchpoints, context, and qualities). We conclude by discussing the conclusions and implications for this case in further practice and suggestions for further research in this area.

4.3. Methodology.

The research focuses on the organizational elements and culture of Quironsalud, as well as the experience building block elements in their hospital outpatient departments (Keyser et al., 2020).

The main research question is what the Outpatient Experience is like in a hospital, and the Case Study method allows us to generalize to other cases that represent similar theoretical conditions (Yin, 1998). This study takes the case study method as a matter of analytical generalization to illustrate and show what the Patient Experience is like in the studied hospital. This description enables the patient experience understanding in similar centers, laying the foundations to work on the experience improvement from a holistic understanding of it.

Following the proposals of Yin (1989:29-36) for the design of a study, five elements have been developed: research questions, theoretical proposals, units of analysis, logical linkage of the data with the proposals, and criteria for the interpretation of the data.

After reviewing the literature that supports the theoretical proposals, it is necessary to resolve some research questions with the development of the case study:

- Is the Strategic Framework for the Management of the Patient Experience in a Quironsalud Hospital the same as that described in the theoretical framework?
- What elements make up the outpatient experience in a Quironsalud Hospital?

To ensure the reliability and validity of the research method, a protocol (ANNEX 1) is provided to guide the research process (Yin, 1998). The research protocol entails the definition of the study profile and research questions of the case study, the research procedures to perform, and the report guide.

The case study method provides a comprehensive view of all aspects related to the patient experience. This is due to the multiple sources of information available, such as documentation, records, direct interviews, direct observation, and observation of participants and facilities or physical elements (Chetty, 1996).

Empirical social research quality is thus a must for construct validity, both internal and external, and reliability tests have commonly been used for that purpose (Kidder & Judd, 1986). To ensure construct validity, the draft case study report was reviewed by key informants during the research composition, and multiple sources of evidence were used during data collection. To guarantee internal validity, time series analysis and explanation building were conducted during data analysis. To achieve reliability, a case study database was created.

To address the problem, we conducted practical and replicable steps, including secondary research to identify the theoretical framework, data collection, analysis of organizational information, sketching the patient journey, and conducting in-depth interviews with all managers.

4.4. Results and findings.

The expectations of patients in outpatient consultations at HUGC are based on three types of needs: clinical, personal, and emotional. Clinical needs refer to the specific medical requirements of the patient, while personal needs are addressed through the patient's clinical history. Emotional needs, such as confidence, integrity, and pride, are also taken into account in the design of the processes. The contact personnel are committed to the Quironsalud culture and work to meet these needs.

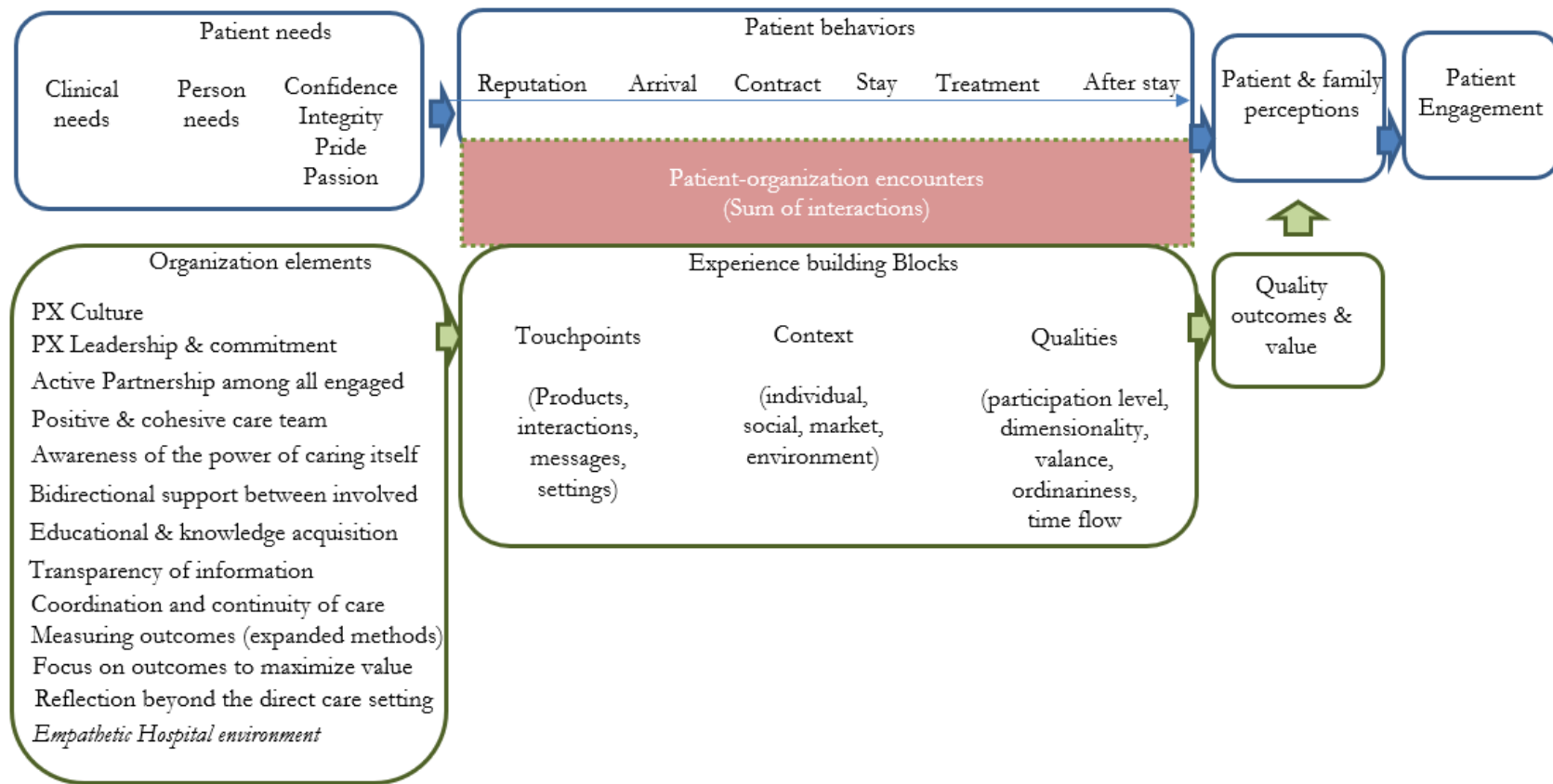
According to the Beryl Institute (global community of healthcare professionals, a pioneer, and leader of the experience movement and patient experience profession), the patient experience is the result of all interactions that are influenced by an organization's culture and that shape patient perceptions throughout the care process. Several authors (Wolf et al. 2014; 2021) have identified the elements of this experience as the organizational culture, the sum of interactions, the perception of the patient and family, and continuity of care. The organizational culture includes the vision, values, and people committed and involved with the organization. The sum of interactions refers to the orchestrated touchpoints of people, processes, policies, communications,

actions, and environment. It is important to ensure continuity of care and consider the perception of the patient and family. The investigation yielded a detailed description of the aforementioned aspects, which will be outlined in the following sections.

4.4.1. Patient experience definition compendium.

Figure 11 presents a graphic representation of all the contributions analyzed in the secondary research, which together define the patient experience. The interviewees have validated this representation as aligned with the conceptualization of the Quirónsalud (QS) patient experience.

Figure 11 Patient experience conceptualization



Source 21 Self-elaboration

4.4.2. Organizational culture as the strategic framework for defining patient experience.

Summarizing the contributions of key elements within the hospital organization to create experiences, an organizational strategic framework is proposed:

- a strong organizational culture that supports patient experience.
- leadership commitment to supporting experience efforts (Birkelien, 2017; Wolf et al., 2021).
- creating an empathetic environment and ensuring accessibility for consumers through a positive and cohesive care team.
- actively partnering with all involved to improve the patient experience (Lavoie-Tremblay et al., 2016 ; Vahdat et al., 2014).
- coordination and continuity of care (Wolf et al., 2021).
- commitment to facilitating effective patient-provider communication,
- transparent management of information (Birkelien, 2017; Carman et al., 2013).
- contributions to the third sector and community (Wolf et al., 2021).
- education, knowledge acquisition, and awareness of the power of caring itself (Vahdat et al., 2014).
- a focus on outcomes to maximize value and metrics.

This framework is based on the works of Weiss & Tyink (2009), Wolf et al. (2014), Betts et al. (2016), Birkelien (2017), and the defining elements of the experience identified by Wolf et al. (2021).

Since its creation in 2015, Quirónsalud has made the patient its central focus. The organization's activities revolve around the individual, making Quirónsalud's value proposition 'Quirónsalud is person-to-person health.'

The patient experience at Quirónsalud begins by addressing the patient's personal, clinical, and user needs, including confidence, integrity, pride, and passion. According to the hospital doctors' representative, understanding a patient's illness situation and clinical needs, as well as their emotional needs, requires knowledge of their personal history and antecedents. Therefore, it is important to consider these factors when providing care.

Patient experience management flows through various organizational elements that generate a patient experience culture. One of the most important elements is the values of Quirónsalud.

4.4.2.1. Commitment to a strong organizational culture.

Quirónsalud has a strong organizational culture and commitment to supporting the patient experience. To achieve this objective, the company has defined a focused organizational structure.

The role of the Patient Experience Manager has evolved from that of the Patient Care Manager in recent years. To reinforce the patient experience, a specific job structure has been created. This includes a Patient and Family Experience Manager in every center, who is responsible for ensuring that the patient's voice is considered in all decision-making moments of hospital management. Additionally, there are Patient and Family Experience Regional Coordinators, a Corporate Patient Experience Manager, and a Quality and Patient Experience Corporate Director.

According to the head of Patient Experience, the organization periodically conducts training and awareness actions to emphasize the importance of patient experience. As part of the onboarding process for new employees, a training course titled 'The Experience is You' has been integrated to reinforce the organization's approach and equip teams with tools to maintain focus on the patient.

4.4.2.2. Leadership focus and commitment to support experience efforts.

Quirónsalud has established policies to ensure the positive Patient Experience is achieved. These policies are fixed and deployed in hospitals through yearly objectives, which are shared by all centers but adapted to each center's reality. Control indicators are also used to monitor progress on a monthly basis. The policies are communicated and deployed through specific management tools and training.

Periodic meetings are held to jointly review indicators between corporate management and the center's management team.

As the patient experience manager confirms, active work is done so that the professional feels part of the patient experience. The hospital manager leads the

patient experience, which is the main objective of the patient experience manager and a cross-cutting objective of the entire management committee.

In 2020, a committee was established to centralize all aspects related to patient experience.

4.4.2.3. Positive and cohesive care team.

Teamwork is a core value at Quironsalud and defines the company's approach to health and relationships with people. The relationship model between the patient and the care team is the deliberative model. This model is crucial in ensuring the active participation of the patient and giving them a sense of control and responsibility. It is based on transparency of information, assurance of understanding, shared analysis of alternatives, and decision-making support.

The Patient's clinical history management system guides and controls the processes to ensure coordination among all parties involved in the patient's experience, guaranteeing that their needs are met.

A project is currently underway to increase team participation in addressing the emotional needs of patients during outpatient consultations. The project appeals to the responsibility of team members in shaping the patient experience.

According to the nurse's representative, positive and cohesive teamwork is ensured independently of the projects. However, when faced with specific needs or problems, coordination meetings are held with the participation of physicians and nursing representatives.

4.4.2.4. Partnership among all engaged.

Patient involvement in the HUGC is related to receiving information, consultation, and participation in specific projects. Throughout the healthcare process, patients are informed about their illness and healthcare, enabling them to exchange information with the care team. During the pre- and post-care process, patients also receive health guidelines through the Quironsalud Patient Portal. This portal allows patients to access their diagnostic tests and clinical reports, manage their appointments, and receive health guidelines without the need to wait or travel.

Patients are consulted through a survey after the care processes concerning their perception through the contact points of their journey. The survey also has an open section for free comments.

A sample of patients is called to participate in focus groups to analyze topics related to their experiences based on improvement projects or specific needs.

4.4.2.5. Coordination and continuity of service/care.

According to the Patient Experience Manager, their primary responsibility is to coordinate all agents involved in the patient experience. It is crucial to analyze patient journeys, identify any disconnections, and propose solutions that ensure a smooth flow of patients tailored to their needs and expectations at each stage of their journey.

The health experience is evaluated based on customer behavior in three stages: pre-service encounters, core service encounters, and post-core service encounters. During pre-service encounters, patients are recruited and they identify their needs. Core service encounters occur during interactions in the hospital, and post-core service encounters happen during ongoing care.

To ensure continuity of care, the patient's clinical history management system must provide control and traceability of the patient throughout all services and their journey. The patient portal ensures complete transparency of the patient's clinical history to the patient and facilitates two-way communication between the patient and the care team.

4.4.2.6. Communication: Effective, open, and clear.

Multiple bidirectional communication channels are available for patients and families to access various center services, including the global call center, direct contact phones, direct email addresses, and the Quirónsalud Corporate Digital Patient Portal (PDP). The Patient Portal allows patients to access various healthcare services, view their medical history and diagnostic test results, request or modify appointments, receive alerts and reminders, and communicate directly with their specialists without the need to visit the health center.

4.4.2.7. Transparency of information.

The organization's code of ethics and conduct embodies transparency.

The HUGC provides a Transparency Portal website, which is an information and communication platform that offers citizens access to relevant information about the hospital's management. The hospital aims to provide comprehensive health services to the public.

4.4.2.8. Contributions to the third sector and community environments.

Quirónsalud social contribution is based on improving the health and well-being of people through their own activities. They also share resources, knowledge, and experience to contribute to social solidarity in the society in which they operate. Quirónsalud integrates its social commitment into its business through direct social action and the Quirónsalud Foundation. The foundation focuses on international cooperation, patient and family support, knowledge generation, volunteering, promotion of healthy habits and lifestyles, and research and teaching support. In 2021, the HUGC developed seven projects related to these areas of focus.

4.4.2.9. High awareness of the power of caring itself.

Quirónsalud corporate services provide information, awareness, and training campaigns to patients to help them manage their health status and provide support tools. The Patient Digital Portal displays 'health tips' and a 'Health Channel' section linked to the access profile data.

Direct consultations with patients can have a significant impact by providing information, consultation, and decision-making support. In the deliberative model of the patient-doctor relationship, empowering patients to make decisions about their own health is crucial. This requires providing patients with the necessary information and training, as well as raising awareness about the power of self-care.

4.4.2.10. Education and knowledge acquisition and transfer opportunities for all involved.

In 2016, Quirónsalud Campus was established as part of the company's strategy to advance the healthcare system. The campus is divided into eight areas of expertise: leadership, care, research, innovation, science, wellness, talent, and corporate.

Employees at HUGC receive annual training plans that include legally required training, skills training related to their job functions, and support training for their development.

The Patient Portal provides patients with a health channel that offers information on maintaining a healthy lifestyle.

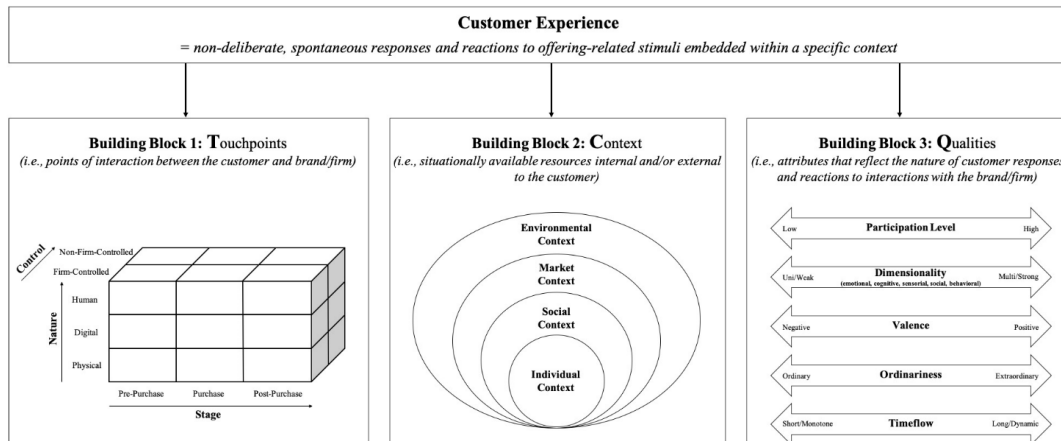
4.4.2.11. Focus on outcomes and their measurement.

The definition and improvement of services fully consider the patient. The needs of the patient serve as the basis for defining any service. After testing or starting up the service, tools are implemented to gather the patient's feedback and perception in all aspects, including NPS, detractor management, complaints, and suggestions. In addition to the above, the hospital conducts an average of two focus groups with patients annually to address specific items in greater detail. These focus groups serve to complement, rather than replace, the other methods of gathering feedback.

4.4.3. Outpatient patient experience building blocks.

De Keyser et al. (2020a) conducted a rigorous bibliographic review and presented a summary of the customer experience generation process based on three building blocks: Touchpoints (interactions between the customer and company), Context (internal and/or external resources available to the customer), and Qualities (attributes that reflect the nature of customer responses to interactions with the company). Figure 12 illustrates all the concepts related to each block.

Figure 12 Experience building blocks



Source 22 De Keyser et al. (2020)

Patients attend outpatient clinics for a variety of reasons, including a routine visit, to obtain test results, to evaluate treatment, or because of increased symptoms of disease (Zandbelt et al., 2004), and their motivation determines their expectations.

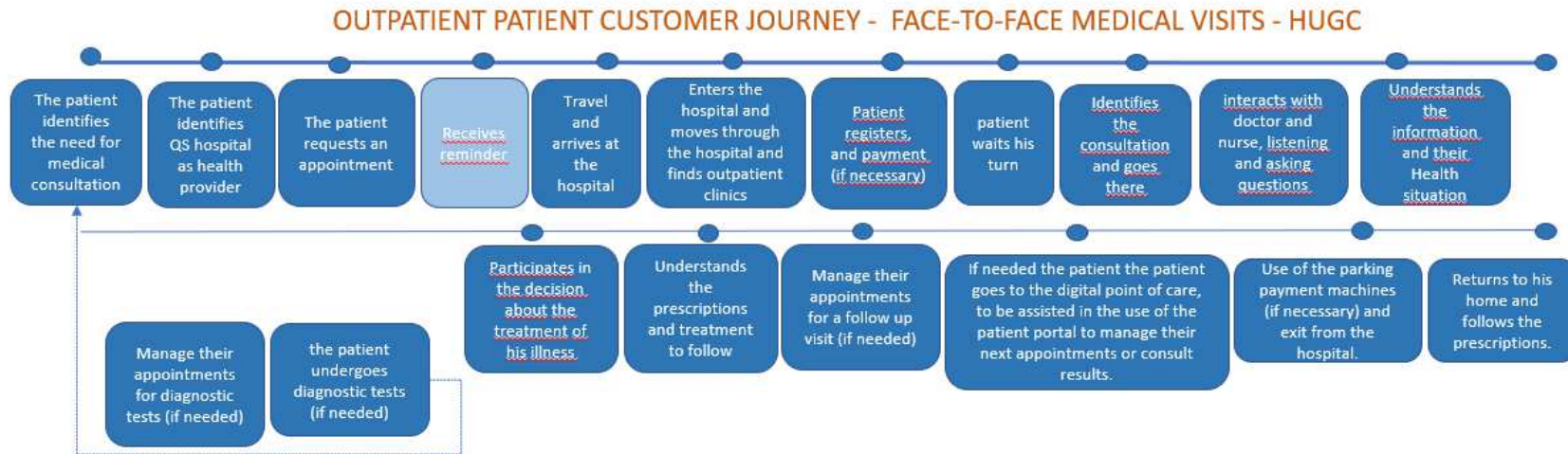
A patient's experience should be understood as the impact of all interactions on the individual, their family, and care partners, reflecting events and occurrences that occur independently and collectively across the continuum of care (Wolf et al., 2014), and based on the expectations and perceptions of those involved. To generate positive experiences, hospitals must focus their efforts on closing the gap between the service experience and consumer expectations, and by identifying the dimensions of the patient experience valued by the customer, hospitals can tailor their services to meet customer expectations (Birkelien, 2017). To generate the patient's expectations, three types of needs must be covered: the patient's clinical needs, the patient's personal needs, and the patient's emotional needs (confidence, integrity, pride, and passion) (Wolf et al., 2014).

4.4.3.1. Touchpoints.

The patient experience is generated throughout their journey via touchpoints such as products, interactions, messages, and settings.

The outpatient patient journey map (Figures 13 and 14) identifies patient behaviors and corresponding service encounters, including diagnostic tests (Simonse et al., 2019).

Figure 13 Outpatient patient customer journey - Face-to-face medical visits HUGC

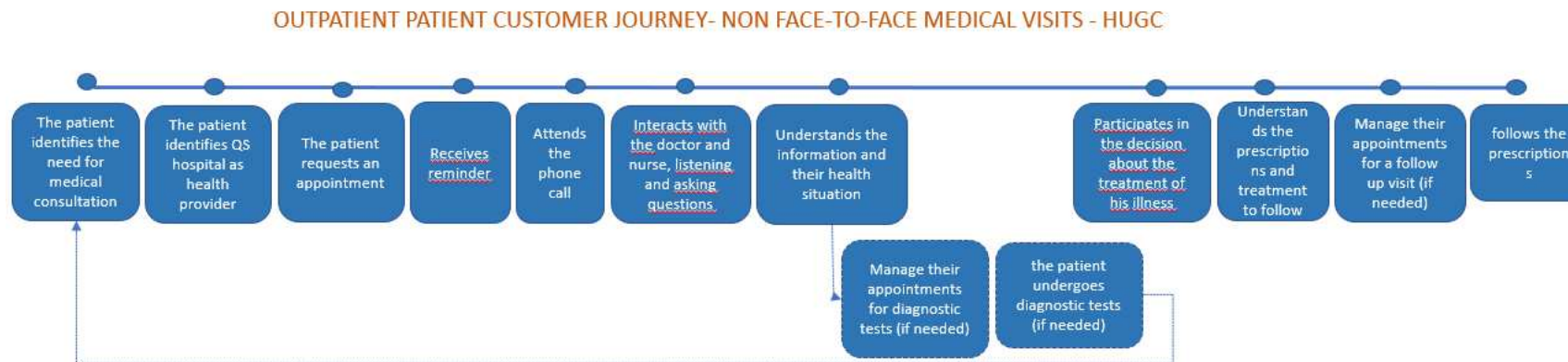


Touchpoints

Products	Interactions	Messages	Settings
Appointment Reminder	With Patient's Portal (digital) With Contact centre team (Phone) With patient care service team (phone / face-to-face)	Health reputation. Convenience appointment. Appointment reminder.	Hospital positional signage. Directional signage in the hospital. Facilities in good state of maintenance and cleanliness.
First visit Follow-up visit Cures	With outpatient administrative staff (face-to-face) With nurse team (face-to-face) With medical team (face-to-face)	Power of caring itself. The patient is empowered to make decisions regarding their health.	Controlled environmental states in waiting rooms and consulting rooms.
Medical Checkups			

Source 23 Self-elaboration

Figure 14 Outpatient patient customer journeys: Non-face-to-face visits.



Touchpoints

Products	Interactions	Messages	Settings
Appointment Reminder	With Patient's Portal (digital) With Contact centre team (Phone) With patient care service team (phone / face-to-face)	Health reputation Convenience appointment Appointment reminder	Punctuality of the call according to appointment.
First visit Follow-up visit	With outpatient administrative staff (face-to-face) With nurse team (face-to-face) With medical team (face-to-face)	Power of caring itself The patient is empowered to make decisions regarding their health	

Source 24 Self-elaboration

There are two types of medical consultations: face-to-face and virtual. The former is conducted in person, while the latter is carried out via phone, video call, or specific platforms. The patient journey and service encounters differ depending on the type of visit.

Before 2020, virtual visits were not commonly utilized. However, in response to the COVID-19 pandemic, the HUGC has increased the scheduling of virtual visits for all external consultations to ensure care and expand services. Additionally, new virtual Telemedicine services, such as 'telederma', have been incorporated (see ANNEX 4 for Outpatient Visit Data).

The behaviors of the outpatient during their journey are explained below.

- The touchpoint of reputation is crucial, as noted by the Head of Experience at HUGC, as it influences the patient's interest in both the company and the specific hospital. This, in turn, assists the patient in selecting the most appropriate hospital for their specific medical needs. According to Merco, a benchmark monitor that has been measuring the reputation of companies operating in Spain since 1999, HUGC is ranked 25th among private state hospitals (2020 data).
- Schedule an appointment. Patients can make or change appointments through the patient portal, in person at the outpatient counters, or via the contact center.

Quironsalud has centralized and local call centers that use a unified telephony platform. This allows for the sharing of information, such as patient preferences and history, across platforms. Standardizing quality improvement and avoiding fragmentation in the patient experience is crucial due to the longitudinal journey and record. Additionally, the appointment confirmation is reinforced with an SMS appointment reminder system.

- Arrival. For face-to-face visits, patients can arrive by private transport, train, bus, or even on foot from nearby locations. Private parking facilities are available, and there is ample parking in the area. The building has two entrances: the main entrance and the emergency patient care entrance, both of which provide easy access to outpatient consultations. Over the years, the continuous growth of outpatient services and space limitations of the building have caused consultations to become ungrouped. Currently, 14 outpatient consultation modules differentiate the 34 various specialties.

According to the head of Patient Experience, the hospital strives to create an empathetic environment for patients by identifying and integrating solutions that can positively impact their journey through the hospital. Recently, the hospital has incorporated 'Wayfinder' screens into the main accesses to help patients locate their destination and display the route they must take to get there. This is due to the hospital's large size and the outpatient consultations not being located within a small area, making it complex to integrate all the signage information.

- **Contract:** This behavior covers the registration of patients' arrival and identification of their service coverage, as well as the validation of the contract for charges related to the service, if necessary.

HUGC provides medical services to both private patients and those covered by mutual companies. Private patients must pay the full cost of their treatment after receiving a quote for the services they require. Patients covered by mutual companies are treated on a case-by-case basis depending on the insurance company they have contracted and the coverage conditions of their contract. Non-covered services are quoted beforehand, and the patient must validate that they will pay the cost.

- **Wait to be attended.** The patient in the waiting room, patient identifying his access shift, and walking to the consultation room. Waiting rooms are designed for patient comfort and equipped with screens displaying the patient's turn and corresponding room. To comply with LOPD regulations, random codes are used to call patients, which are provided in paper format during registration.
- **Visit.** This behavior covers all the patient's interactions with the nurse and doctor and performing additional tests, if necessary. The hospital has integrated a deliberative relationship model, which prioritizes providing information to the patient and ensuring their comprehension to facilitate their involvement in decision-making.
- **After visit.** If a follow-up visit is necessary, the patient can schedule it through the Patient Portal. A proactive appointment system will soon be implemented in the hospital. If the patient has any questions regarding their prescriptions after the visit, they can also ask through the portal.

These patient behaviors can be identified by companies in relation to service encounters as occurring in three main phases: pre-service encounters, core

service encounters (in-situ experience), and post-core service encounters (ex-situ post-experience).

4.4.3.2. Context.

Although the context of outpatient consultations is transient, it is possible to identify the primary context in which patients experience them at the hospital. All interviewees confirmed that the experience of outpatient consultations at the hospital is mainly individual.

In this context, the customer experience is complex and influenced by various factors such as their emotional state, previous experiences, judgments, and physical and economic circumstances.

The significance of the social context in health services, where multiple patients are present in the same location, lies in the fact that other customers can influence customer experiences through extra-role behavior or simply through proximity (Risselada et al., 2014 ; Baxendale et al., 2015 ; De Keyser et al., 2015).

The environmental context is composed of wider external elements that are natural, economic, public, or political in nature, or a combination of them (De Keyser et al., 2020). The pandemic that began in 2020 is the most determining factor in this section. Although its impact has softened over time, it has altered the needs of patients and other agents involved, resulting in changes in the demand for health services in terms of volume and time. This has generated new challenges that cannot be addressed by the current system.

The market context refers to the conditions created by market-related actors with which the customer interacts, including complements, competitors, substitutes, and future entrants into the market in which the focal company operates.

Health centers have a vital need to innovate in order to meet demand, which is worsened by the structural lack of doctors in the Spanish health system. This has led them to propose new products such as telemedicine and other virtual services. A review of the mutual company-based traditional health coverage system is necessary to address the conflict with the new solutions required to ensure the sustainability of the health system.

4.4.3.3. Qualities

When designing and analyzing interactions, it is important to consider several distinctive features that can generate customer responses and reactions. These include the level of participation, dimensionality, time flow, valence, and ordinariness.

To maximize active participation and reduce negative perceptions of waiting, processes should be designed with consideration of the participation level. This can create a sensation of dynamism and give patients a sense of empowerment. HUGC outpatient services prioritize patient participation and explore innovative methods to enhance it, such as the Patient Portal App, Wayfinder screens, and self-check-in machines.

To generate experiences, the company must consider various dimensions of customer response, including cognitive, emotional, sensorial, social, and behavioral aspects, throughout the customer journey. HUGC has not explored the patient experience in the sensorial and social dimensions, focusing primarily on behavioral and cognitive factors and, to a lesser extent, on emotional approaches to the services provided.

The time flow reflects the customer's perceived dynamics and determines in their judgment the length of their experience. In an outpatient clinic, the patient's perception of time is influenced by the service flow and the waiting time before being attended. It is important to minimize waiting times and ensure a smooth service flow to improve the patient's perception of their experience. Effective consultation management can redirect negative perceptions of waiting. Patients should leave with the perception that enough time has been dedicated to thoroughly review their case and make a correct decision. According to patient perception records in 2021, waiting time is the second least valued factor, surpassed only by appointment availability.

Valence refers to the value that the experience holds for the customer, whether it is negative, neutral, or positive. Ordinariness reflects how ordinary or extraordinary the experience is for the customer. Since the starting point of a visit is usually a health question or an illness, and since consultations carried out in hospital outpatient clinics are not normally urgent, most visits are considered to have a neutral valence.

4.5. Conclusions and Implications for this case on further practice and suggestions for further research in this area.

The case study presents a conceptualization of the patient experience by combining the insights from the documentary review and the analysis of the elements present in the case of HUGC.

The data was obtained through a review of secondary sources and interviews with various individuals associated with the organization and patient experience.

The patient experience conceptualization (Figure 1) considers the patient's needs and organizational elements that affect patient-company encounters throughout the patient's journey and the three experience building blocks. During these interactions, results and value are generated, which influence the patient's and their family's perception of the experience. These perceptions are directly linked to patient loyalty.

The conceptualization of the patient experience has been thoroughly described and validated by interviewees, providing an approach to the outpatient patient experience that is adapted to the reality of the HUGC. This detailed view allows for the identification of areas where work can be continued to ensure that each aspect contributes optimal value.

After analyzing the definition of outpatient patient experience as reflected in the operations of HUGC Quirónsalud Hospital, some conclusions can be drawn:

- The strategic framework for the patient experience is jointly created by Quirónsalud as a corporation through the central corporate services, the T2vallès territorial structure, and the hospital's management team.
- Although the organization guarantees an approach to the needs of patients (clinics, personal, emotional), continuous work is required to integrate these specifics into the day-to-day running of services.
- Quirónsalud's corporate services primarily promote and guide the organizational elements, while the HUGC management team is strongly committed to enhancing the patient experience through its management structure, values, policies, team training, and more.
- There is potential to enhance collaboration between the faculty, nursing, and administrative teams at the operational level, emphasizing a team approach to the patient experience.

- While the involvement of patients in the HUGC currently includes information, consultation, and participation in specific projects, there is room for improvement in involving patients in decision-making processes and establishing stable collaborative forums.
- The context in which this case study is described faces several challenges in guaranteeing supply due to the current lack of doctors and managing demand due to a large increase.
- Improvements can be made in the approach and control of the patient experience by integrating specific qualities.

Examining each section of the research will provide the HUGC management team with opportunities for improvement. The clear structure and conceptualization will aid in analyzing their reasoning and identifying areas for improvement.

The structure of the conceptualization itself, as well as the detailed description of all the elements of the conceptualization, are intended to serve as a guide for managers of similar hospitals, facilitating planning and identification of aspects with room for improvement.

For the healthcare industry, having additional case studies based on outpatient clinics or other services that can be compared and contrasted with the one conducted at HUGC will undoubtedly refine the definition and management of the patient experience.

4.6. Annexes

Annex 1. The research protocol of the study case

1. DEFINE THE PROFILE OF THE STUDY
 - Background of the Project. Patient experience as an axis in Quironsalud strategy.
 - Main topics to be investigated.
 - Theoretical propositions to be confirmed.
 - Relevant literature review.
2. DEFINE RESEARCH QUESTIONS OF THE CASE STUDY
3. RESEARCH PROCEDURES TO BE PERFORMED
 - Secondary research to identify the theoretical framework
 - Data collection (organization documentation)/Case study database (to guarantee reliability)
 - Organizational information analysis
 - Sketch of the patient journey
 - In-depth interview with the **corporate management for quality and the patient experience**, to get a clear and accurate description of the key elements that facilitate the understanding of what the Patient Experience entails in Quironsalud. The interview also pursues analyzing the experience through the eight strategic lenses (culture and leadership, infrastructure and governance, staff and provider engagement, policy and measurement, environment and hospitality, innovation and technology, patient family and community engagement, and quality and clinical excellence)/Transcription of data/Case Study database (to guarantee reliability)
 - Definition of the Quironsalud Strategic Framework for Patient Experience Management
 - Validate Quironsalud Strategic framework for Patient Experience management (by the corporate management for quality and the patient experience)
 - In-depth interview with the **Medical Director at the Hospital** to identify the leadership focus and commitment of the team of doctors, streamline the touchpoints overview, recognize the outpatient patient experience context, and assess the doctor team delivered qualities.) Transcription of data/Case study database (to guarantee reliability)

- In-depth interview with the **Director of Nursing at the Hospital** to identify the leadership focus and commitment of the team of nurses, streamline the touchpoints overview, recognize the outpatient patient experience context, and assess the nursing team delivered qualities. Transcription of data/Case study database (to guarantee reliability)
- In-depth interview with the **administrative head of the outpatient department** at the Hospital to identify the leadership focus and commitment of the administrative team, streamline the touchpoints overview, recognize the outpatient patient experience context, and assess the administrative team delivered qualities. Transcription of data/Case study database (to guarantee reliability)
- In-depth interview with the **patient experience manager** at the Hospital to identify the leadership focus and commitment of the administrative team, streamline the touchpoints overview, recognize the outpatient patient experience context, and assess the administration team delivered qualities. Transcription of data/Case study database (to guarantee reliability)
- Draft review of key informants (to validate)
- Direct observation of the service/Transcription of data/Case study database (to guarantee reliability)
- In-depth data analysis
- Describe the patient journey and patient experience (touchpoints, context, and qualities)
- Validate patient journey and patient experience (by Medical Director, Director of Nursing and Head of Administration)
- General conclusions and implications of the research

4. REPORT GUIDE

- First Draft Case Study
- Review of the draft by interviewees and validation (or redefining the draft if needed and review until validated version)
- Second Draft Case Study, and later ones if needed
- Review of the draft by interviewees and validation
- Review of the draft by Quironsalud Patient experience manager and validation

Annex 2. Experience building blocks elements and sub-elements

<u>Experience building blocks</u>	<u>Elements</u>	<u>Sub-elements</u>	<u>Experience building blocks</u>	<u>Elements</u>	<u>Experience building blocks</u>	<u>Elements</u>	<u>Sub-elements</u>
TOUCHPOINTS - <u>Products</u> - <u>Interactions</u> - <u>Messages</u> - <u>Settings</u>	Control	<u>Controlled by the firm</u> <u>Non firm controlled</u>	CONTEXT	Individual Social Market Environmental	QUALITIES	<u>Dimensionality</u>	<u>Emotional</u> <u>Cognitive</u> <u>Sensorial</u> <u>Social</u> <u>Behavioral</u>
	Nature	Human Physical Digital		Partner Customer Social/external		<u>Timeflow</u>	<u>Duration</u> <u>Dynamism</u>
Etapas	<u>Pre-core service encounters</u> <u>Core service encounters</u> <u>Post-core service encounters</u>			<u>Valence</u>		<u>Positive</u> <u>Negative</u> <u>Indifferent</u> <u>Ordinary</u> <u>Extraordinary</u>	

Chapter 5. Conclusions/ limitations and research continuity lines.

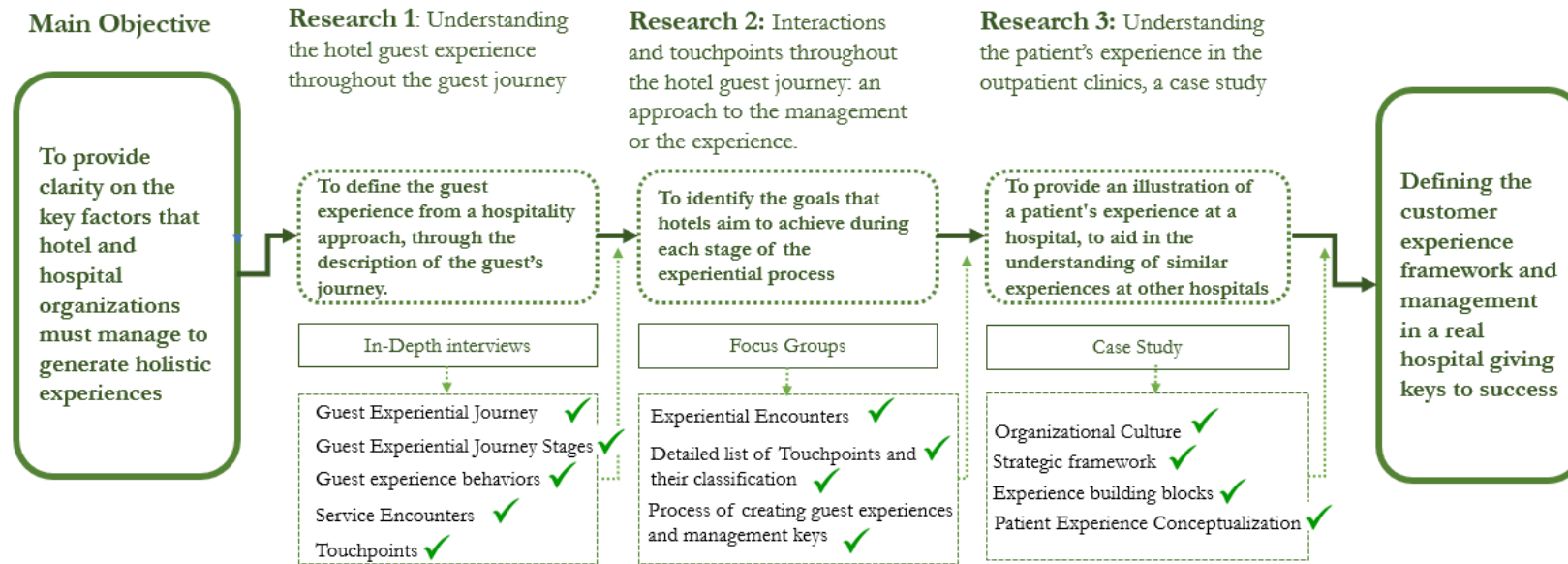
The initial approach of this research had the general objective of delving into the process of defining and generating customer experience in service organizations, focusing on hospitality in two different types of service organizations such as hotels and hospitals.

The importance of the service sector in the world and Spanish economy, and more specifically in tourism and health, as identified in Chapter 1 of this document, justifies the importance of the research. In this context, the approach of this research, searching for operational keys that can help organizations generate positive experiences for their customers, is identified as relevant.

Given the nature of the field of study, the research methods used in this thesis are entirely qualitative. The intention is not to provide statistically representative conclusions but to gain insight into the complex world of lived experience from the perspective of those who live it.

Figure 15 illustrates the research journey of the thesis, identifying its main objective and the three research projects developed to achieve it. The figure details the specific objectives of each project, the research methodology employed, and their main contributions.

Figure 15 Thesis Research Journey and Achievements



Source 25 Self-elaboration

Once the research is completed, we can affirm that the objectives have been met, both the general and specific sub-objectives and the three articles included in this thesis have contributed to the fulfillment of the goals of this research.

In the first research, an in-depth study of the related literature allows us to describe the keys to the definition of the hotel guest experience and to understand the experience framework. It provides a global definition of the hotel guest experience that is linked to the entire guest journey and takes into account all stages and guest behaviors. The concept of the guest experiential journey is validated and the service encounters that generate the experience are identified through in-depth interviews with expert managers of 4 and 5-star hotels. To provide greater value for organizations, the agents involved in generating the experience and the related management areas are also identified.

The second study seeks to deepen the process of generating the experience by going into more detail on the classification and identification of the touchpoints through which it is generated. The study emphasizes the crucial significance of managing the creation of customer experiences, especially for service companies. It explores the process of experience generation from a business standpoint. The objective is covered by identifying the aspects that hotels must manage directly and indirectly during each phase of the experiential process.

The third research seeks to extend the applicability of the knowledge of the keys to experience management to another service subsector such as hospitals. With the case study linked to the outpatient department of a Quironsalud hospital, a conceptualization of the patient experience is defined. This includes some organizational strategic elements and the detail of touchpoints, context, and qualities as building blocks of the experience along the patient journey.

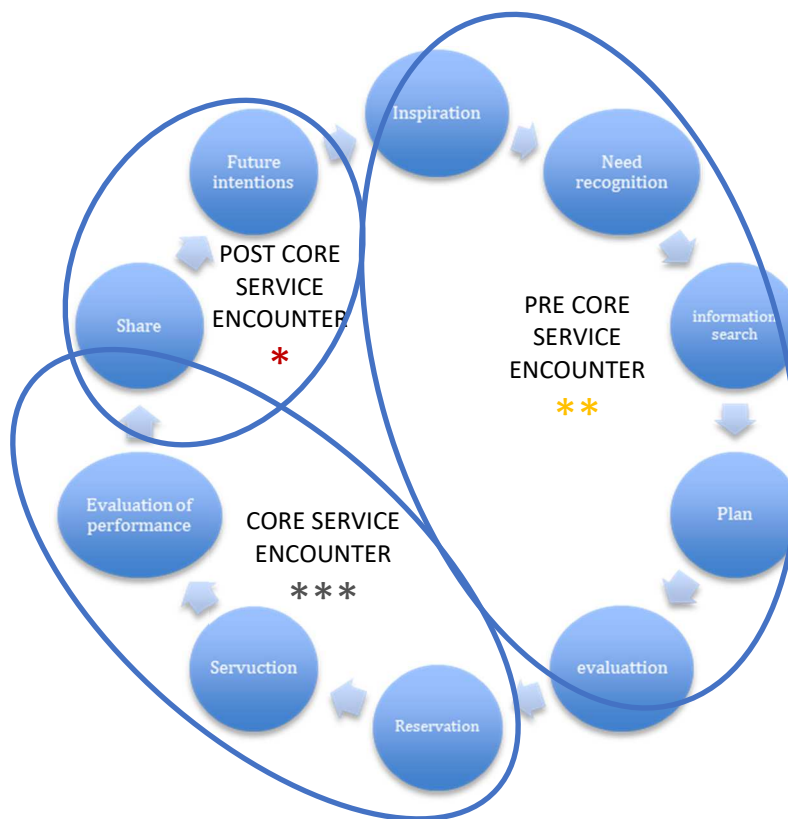
5.1. Findings and contributions

This dissertation contributes to the literature from different standpoints.

Researchers have primarily focused on core service delivery, leading to a lack of recognition of evolving customer needs for a holistic service experience (Schmitt, 2003). The initial study in this thesis validates the concept of Hotel Guest Experiential Journey to name the entirety of the customer's consumption behaviors that generate an experience. It also clarifies the comprehensive

definition of the holistic customer experience first in the hospitality industry (see Table 2) and adapts the general experience framework of Gentile et al. (2007) (see Figure 4). The provided segregation of the stages and behaviors of the guest experience and, the identification of the main service encounters (Figure 5) allow us to obtain a real vision of the process of generating the guest experience in hotels, and the weight that each moment of the consumption process has concerning the experience. (See Figure 8). According to experts, the most influential service encounters for generating a positive experience are the core service encounters, followed by the pre-core service encounters, and finally the post-core service encounters.

Figure 8 - Hotel guest experiential journey: phases and behaviors



Source 126 - Self elaboration

The second research focuses on describing the process of generating experiences. Previous research evidenced a lack of insight into touchpoints beyond firm control, pointing out that most of the reviewed research shows a narrow scope of stimuli and touchpoints (Becker & Jaakkola, 2020). This approach gives rise to studying diverse offering-related stimuli through multiple

levels of aggregation. Through focus groups with experts, the most relevant aspects were identified to achieve an emotional impact on customers, guaranteeing the generation of positive and memorable experiences.

The theory review allowed for the adaptation of Lemon & Verhoef's model by creating a process model for guest experience. This model classifies the most representative behaviors and touchpoints, such as products, interactions, messages, or environments, based on who controls them, their nature, and the stage of the journey. The previous structure was validated by differentiating experiential encounters from service encounters through focus groups with experts.

The research output provides the most relevant aspects to achieve an emotional impact on the customer and ensure the generation of positive and memorable experiences through detailed touchpoints. When linked to organizational entities, it provides a structure for control and improvement. The insights offered must be considered by organizations when creating experiences.

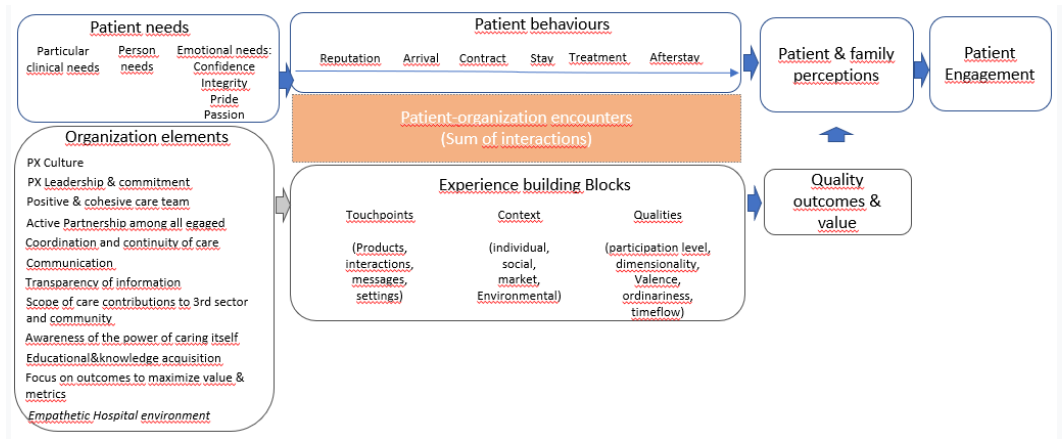
Finally, the third research study examines the outpatient patient experience at HUGC, a Quironsalud hospital. It provides an applied vision of the process of generating experiences in health. The case study (3rd paper) defines, contextualizes, and assesses various aspects of outpatient patient experience, providing a comprehensive understanding of both organizational and intrinsic factors that may impact it. According to a PXJ reviewer, the framework contributes to the existing literature, even with the abundance of existing frameworks.

A graphic summary is provided based on the contributions analyzed in secondary research, which relates to the conceptualization of the patient's experience. This summary (see Figure 11) facilitates the understanding of the experience generation process and all the strategic and operational elements that need to be considered.

It provides a vision that integrates the patient's needs (personal, clinical, and emotional) as the input element in the patient journey (temporal sequence of customer behaviors), the experience building blocks (touchpoints, context, and qualities) that generate the patient's experience in contact with the patient's journey. All the strategic elements that affect the relationship with the patient are linked to the building blocks and the relationship with the patient. Finally,

as a final part, outcomes and value are linked as output factors that will favor the positive and memorable perception that generates patient engagement and loyalty.

Figure 11 Patient experience conceptualization



Source Self-elaboration

The study illustrates the patient experience at HUGC, providing insight into similar experiences at other hospitals. It serves as a guide for managers of similar hospitals, facilitating planning and identification of areas for improvement.

5.2. Future research recommendations.

Future research could be conducted to adjust the basis of experience management in simpler hotels, such as 1–3-star hotels, which cover basic needs with more limited-service offerings. This research could be based on the detailed description of the guest experiential journey in 4–5-star hotels from the first study, as well as the vision of experiential encounters and touchpoints from the second study, and the aspects linked to experience management from the latter.

Additionally, a case study could be used to describe and contextualize the guest journey of guests at a particular establishment. This detailed description of a specific reality, without the intention of being representative, can provide ideas that may serve as a guide for hotels facing similar situations.

However, to further advance knowledge in the healthcare industry, case studies should focus on patient experiences in other hospital services, such as the

emergency department, surgical block, hospitalization, radio diagnostics, and laboratory. All these needs are linked to specific patient journeys and, as a result, require different service settings and touchpoints to create positive and memorable experiences. Case studies may not be representative of all hospitals, but they can guide the management of similar hospitals in planning and directing experience management. In the healthcare sector, any contribution that improves organizational effectiveness and efficiency generates positive patient experiences and enhances patient loyalty will strengthen the sector's overall performance.

The research interest has led the author of this thesis to initiate a research project with the objective of creating experience management guidelines for hospital management teams.

A self-assessment tool has been developed and its validation is being carried out through a qualitative methodology not developed in this thesis, the Delph Method. The practice of this research method will undoubtedly provide the author with a broader knowledge of qualitative research methodologies and will provide the sector with a viable and complete tool for self-evaluating the level of experience management and at the same time will detail good practices or actions for improvement.

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