



Kaohsiung Veterans General Hospital

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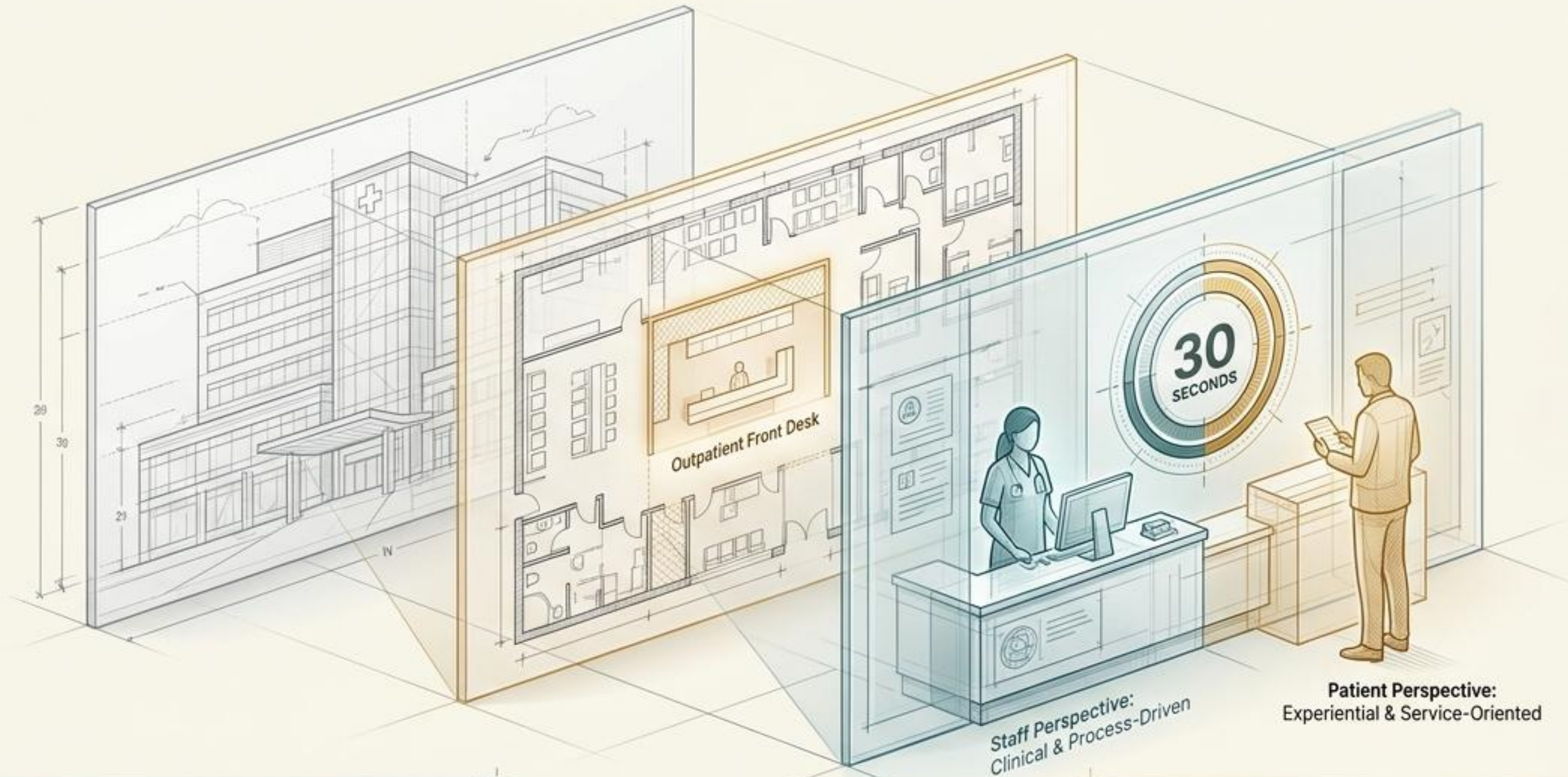
From intentions to experience: a Theory of Planned Behavior-based staff-patient assessment of outpatient front-desk micro-interactions in a Taiwanese veterans hospital

A Southern Taiwan Medical Centre Study

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The most critical 30 seconds of patient experience occur before clinical care begins.



The Front Desk: The primary contact point shaping patient safety and service perception.

This initial interaction sets the trajectory for the entire patient journey, impacting compliance, trust, and operational efficiency through accurate information exchange and safety protocols.

The Challenge: These micro-interactions are universally experienced but rarely measured systemically.

Often overlooked, these moments are highly subjective, making them difficult to quantify and improve using traditional metrics, yet they significantly influence satisfaction and willingness to return.

A dual-perspective study measuring both sides of the front desk simultaneously.



Theory of Planned Behavior (TPB) Assessment

42 Front-Desk Staff evaluated over 3 months.

Rigorous Alignment

Reliability
($\alpha = 0.85$)

Content Validity
(CVI = 1.00)



Parallel Patient Experience Survey

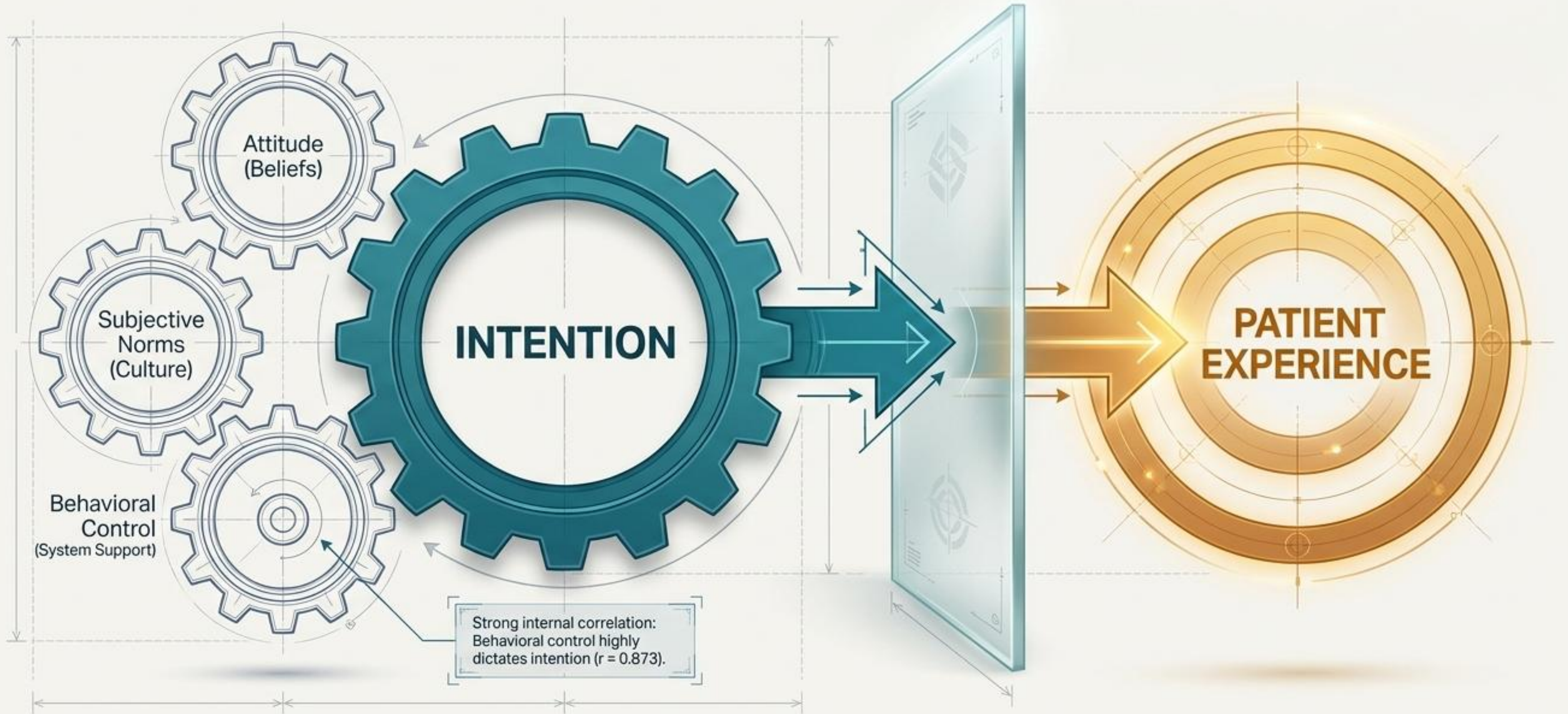
Outpatients surveyed at the exact same **42** counters.

30 IN

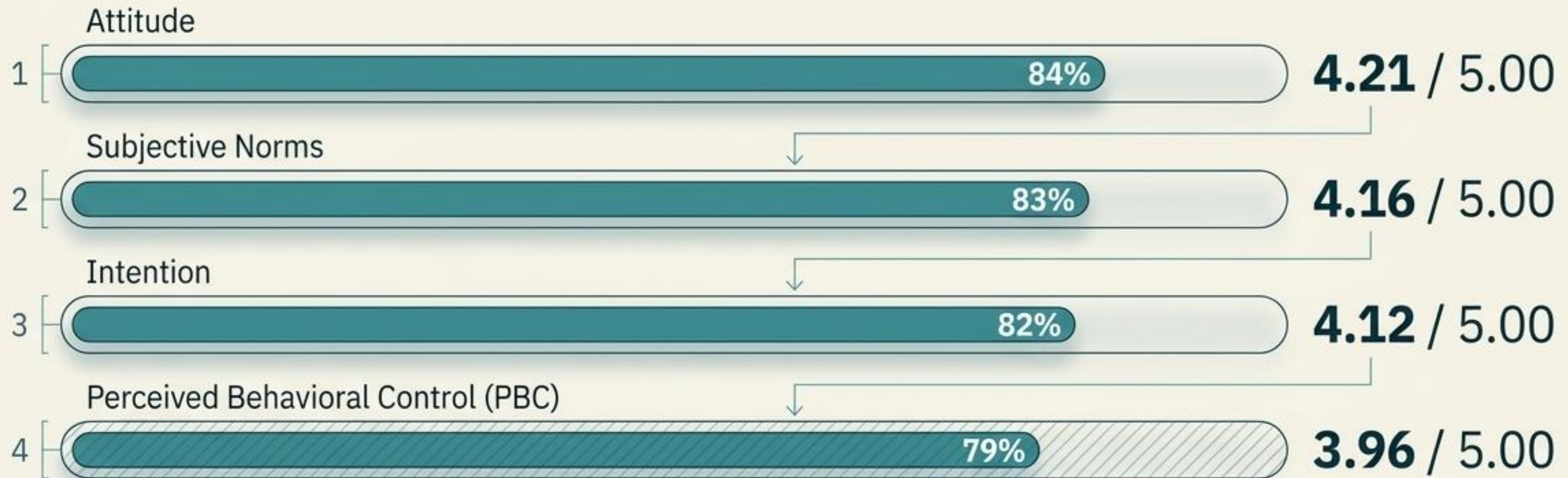
39 IN

How psychological drivers are designed to create the patient experience.

TPB Engine Framework

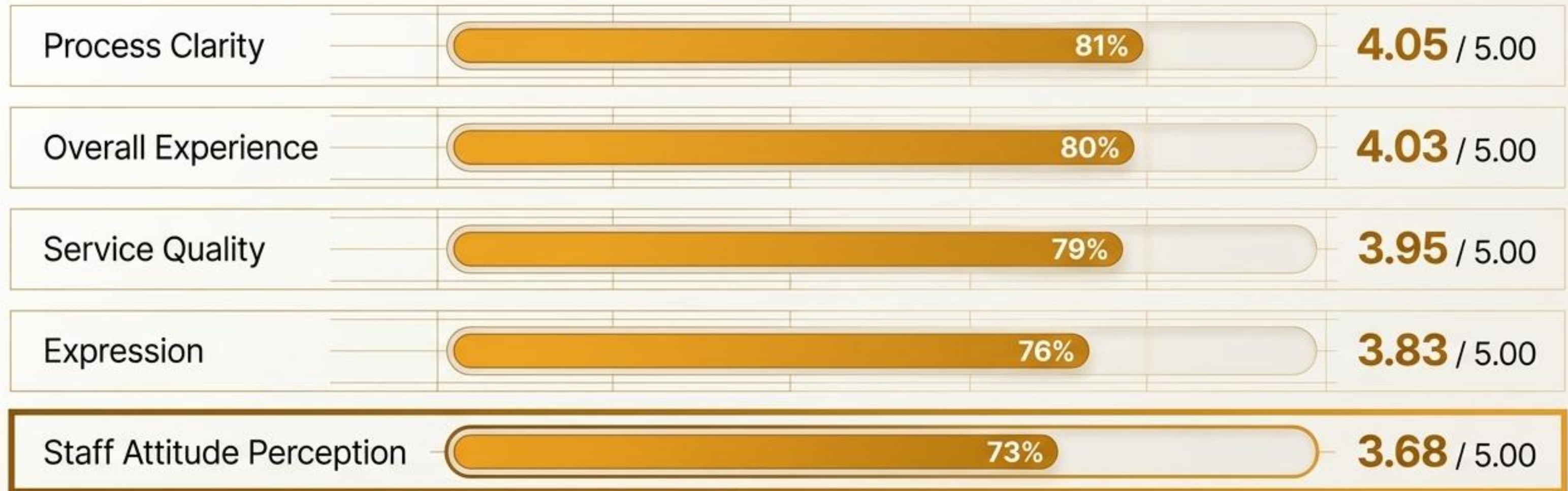


Front-desk staff possess high intentions, but feel slightly restricted by systemic constraints.



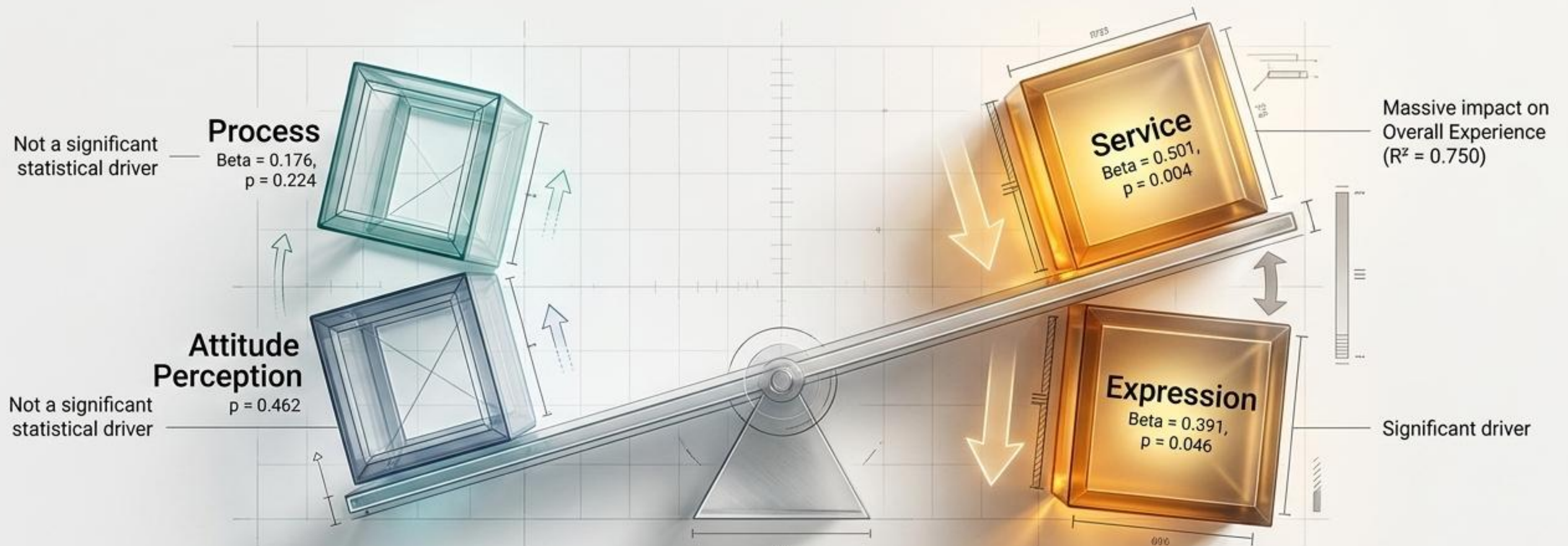
Staff genuinely want to provide excellent service and maintain positive attitudes. The limiting factor is their Perceived Behavioral Control—their actual bandwidth and systemic capability to execute.

Patients recognize efficient processes, but perceive a lack of expressive communication.



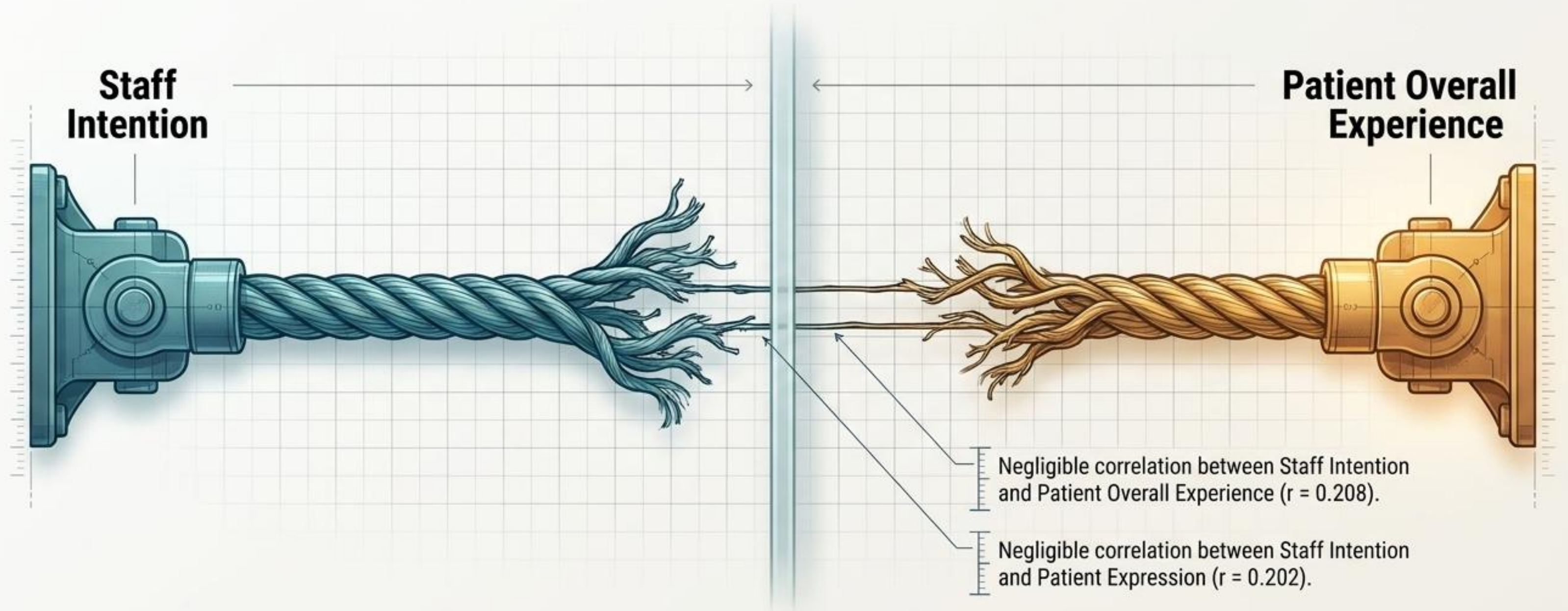
Patients feel the logistical mechanics are clear, but rate the relational behaviors—courtesy and expressive communication—significantly lower.

Process clarity does not drive overall experience; expressive communication does.



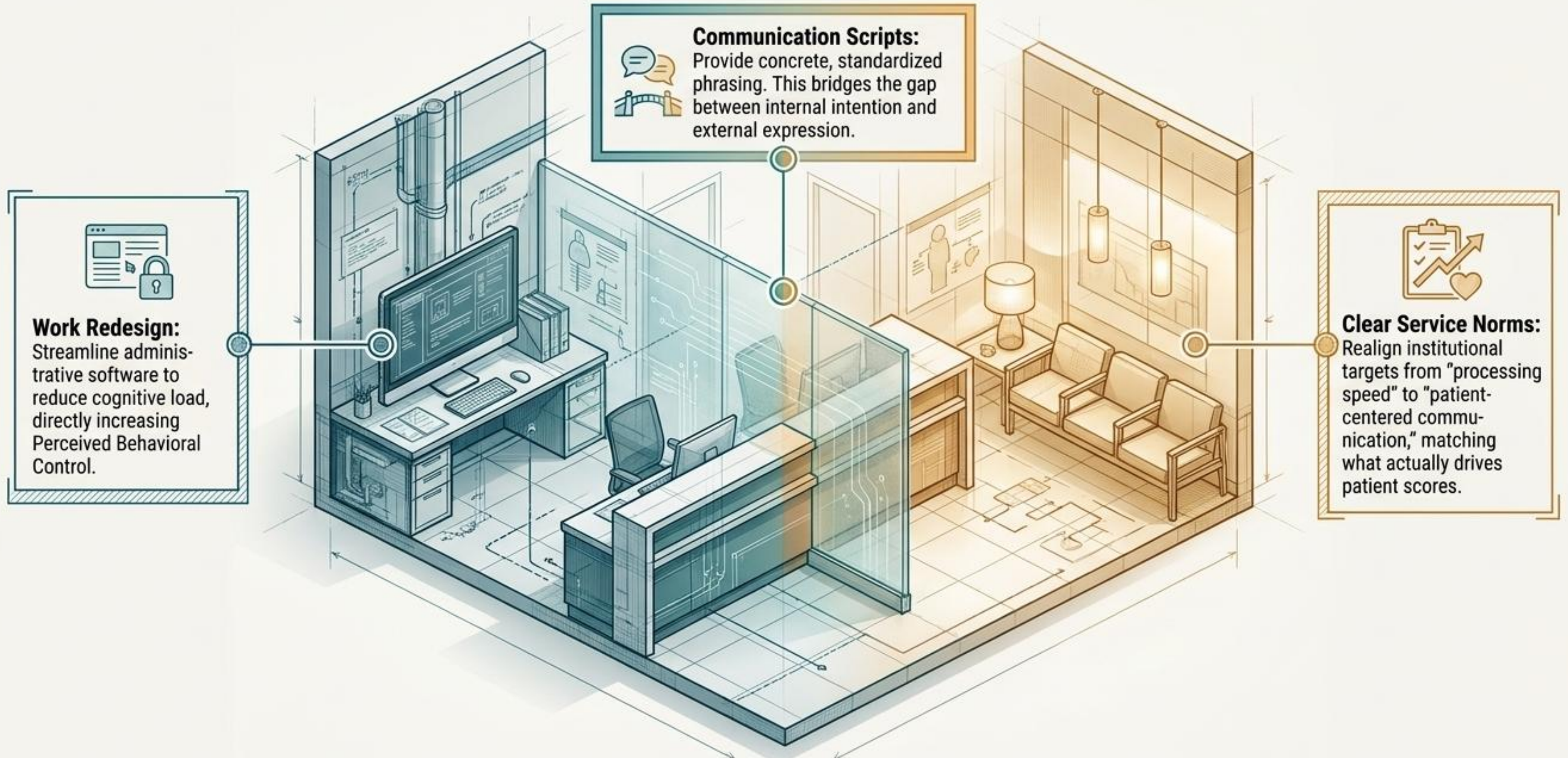
The behaviors patients rate the lowest (Expression) are the exact behaviors that dictate their overall satisfaction.

Good intentions fail to cross the front-desk interface.



A near-zero correlation proves that relying on 'staff willpower' or 'good intentions' is mathematically ineffective.

Operational leverage points to restore behavioral control and expression



Transforming the hospital-community interface through staff empowerment

The HPH Mandate:
Meaningful patient experience monitoring must occur at the critical hospital-community interface.

Focus on the intersection of staff capability and patient need.

The Paradigm Shift: Moving from measuring “what patients complain about” to measuring “the systemic barriers preventing staff from delivering care.”

Shift from symptom management to root cause resolution.

The Ultimate Outcome: By designing systems that support behavioral control, hospitals unlock the expressive communication that drives genuine patient safety and satisfaction.

Empowerment is the prerequisite for exceptional care.



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