



EXECUTIVE SUMMARY

The focus of this research is to find out common criteria concerning medical and service quality in healthcare facilities, which are regarded valuable by several stakeholders in the industry.

The geographical orientation of this report is based on the research of different medical tourism destinations from the previous research during the year 2009/2010

At the moment there is no international uniform standard system which compares the hospitals and gives advice to the medical tourist concerning which hospital to choose for a treatment. The task given was how to create a quality ranking system by creating a general set of quality criteria shared by all stakeholders of the medical tourism industry. The stakeholders are the following: accreditation systems operators, multinational employers, insurance companies, facilitators, and patients.

The team focused the research on 18 inbound and 4 outbound countries that were already used as a basis for the previous report.

The project is split into different parts. First of all the medical tourism market is analysed. Medical tourism can be divided into elective and necessary treatment. Elective treatment is planned non-emergency and non-surgical procedures, which are usually optional such as dental prostheses or special diets. Necessary procedures need to be performed to maintain life or gross quality of life such as heart bypass or hip replacement.

There are four main driving factors that trigger medical tourists to undergo medical procedure abroad, which are: the quality of the treatment, the availability of the treatment, shorter waiting times and cost savings. In contrast there are also four main barriers which might hinder patients from leaving their home country and familiar environment in order to receive medical treatment elsewhere. These are the following: language and cultural differences, satisfaction with the healthcare system in their home country, lack of transparent information and inconvenience of undergoing the treatment far away from home.

During the market analysis it became clear that the medical tourism branch is an emerging business which is still in its infancy. There is much strength that the industry can already make use of, but it also has to face some weaknesses which still have to be overcome.

In addition, there are also external factors called opportunities and threats, which cannot be influenced by the industry but nevertheless, have a great impact on it.

Besides, there are trends that affect the medical tourism sector. The industry has to adapt to these trends, such as the need for more personalised service, in order to stay attractive for its potential customers. The adaptation to the trends often leads to a change in the facility, as far as emerging technology and the augmentation of the work force is concerned.

Mainly in private hospitals, the development concerning facilities and technology is very advanced in comparison to the public hospitals.

Especially emerging countries are influenced by medical tourism as it leads to many benefits for locals, such as improvement of the infrastructure to achieve better accessibility to the hospitals.



The main content of the study is an analysis of the different national and international accreditation systems. To visualise the results, a grid containing several facts and information was created. With the grid, it is possible to compare very basic characteristics of the accreditation systems, such as the period of validity, the method of assessment and the initial costs. However, a comparison of the quality criteria themselves could not be made, due to confidentiality reasons. The only common goals that can be determined are 1) all strive to improve quality in healthcare facilities, and 2) all wish to ensure the safety of the patient.

After studying systems on how to measure and ensure quality, it is also very important to see how different stakeholders perceive good quality in a medical tourism destination. Multinational employers, insurance companies, facilitators and patients were analysed in terms of their criteria which define quality.

Although embassies are not directly involved with medical tourism, they are a large employer and reference for many people worldwide and therefore an important source. Usually, they provide a list with medical facilities in certain countries, to facilitate their citizens' choice in case of an emergency. However, almost all embassies state that all lists are only recommendations and objective lists, and that they do not feel in any way responsible for the quality of the treatment received there.

As far as insurance and assistance companies are concerned, only limited information can be achieved. Almost all existing data and criteria are confidential. Only direct billing can be stated as a criterion for insurance companies in terms of the choice of a cooperating hospital.

In general, assistance companies do not work together with specific hospitals; they are only responsible for the transport and repatriation of injured people to the home country.

Facilitators are another stakeholder in the medical tourism industry. There are several homepages and books which give potential patients much information.

On their homepages, many different quality criteria can be found, such as education of doctors, new technology, regular hygiene check-ups and other, among other categories.

After the desk research the team also conducted a field study comparing the requirements of patients and the offerings of hospitals. This research was carried out by means of e-mail based surveys, which are sent to potential patients and hospitals all over the world.

As a conclusion the primary goal of establishing a general criteria catalogue concerning quality cannot be established due to the diverse interests of the different stakeholders of the industry and confidentiality reasons which made the sources of information somewhat limited. The team sees a huge potential in setting up a global quality assurance system in the future.