

The elusive formula: managing consumer expectations to meet budgets and guidelines

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The aim of this paper is to explore the meaning of consumer expectation in the context of aged and community services and to relate expectation to economic theory and service delivery guidelines. The example used to develop the theory is the provision of foodservices. Foodservice has been selected because in community services, it is often thought of as a “hotel” service rather than a critical component of health care. The move toward a “user pay” system, expected to increase as the population ages also poses challenges in terms of providing appropriate food within budgetary constraints in a climate of increased consumer demand and awareness.



The majority of recent service quality research has its foundations in expectancy-disconfirmation theory, which defines perceived service quality as the difference between the actual service performance and expectations. This theory is somewhat limiting, not only because it does not classify expectations but because it is unable to definitely anticipate expectation, but relies on detecting dissatisfaction and then trying to rectify this later.

Food is a unique dimension, and research indicates it has a major influence over expectations and perceptions of quality within healthcare systems. A challenging issue is the differences between groups of clients according to context, for example publicly versus privately funded.

In the future, foodservice is likely to move toward customisation, as this can deliver higher levels of satisfaction as well as improved health outcomes. We know that older people tend to be happier with foodservices than younger people. This may be as a result of lower education levels or the provision of “socially desirable” responses, but is likely to change. Those mature adults of today who will become the elders of tomorrow are not expected to hold these same views and so foodservice will have to change in response.



So the elusive formula that we need to find is that balance between anticipating desired standards, anticipating expectations as to charges and fees and willingness to pay, *and* meeting quality guidelines for nutrition and food safety in a dynamic and turbulent environment. It is not good enough to use “in house” evaluation tools that may not be valid, and it will not be acceptable to assess satisfaction by yes/no answers, as these have been shown to be inaccurate and unable to detect the nuances of satisfaction. But it will also not be possible to remain using the expectancy-disconfirmation theory as this is reactive. It measures a difference after the event rather than forecasting and predicting future events. Research by our group has led to the development of a valid tool using this theoretical base but new research is underway to explore what our consumers mean by quality in foodservice, whether there are variations according to age and education, or location, what relatives of persons entering the community service system want and what these consumer groups are prepared to pay in order to have these needs met.

We need to learn from economic theory to explore issues such as the price service nexus. What will people pay for foodservice before it is deemed too expensive? Will services be able to be reconceptualised as a series of services where the basic service provides a minimum nutritional service but of plainer foods with fewer choices, while those prepared to pay more received additional value added extras? To reach this position, foodservice must move from its traditional position as a “cinderella” of health research. Foodservice companies must invest in research that not only has the potential to benefit their business but will contribute to our understanding of the issues. Partnerships will be important to achieve common goals. This then is the elusive formula: correctly differentiated markets based on demographic profiles delivering nutritious and safe food for which informed consumers pay their true cost.



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