

# The Effect of Service Quality and Patient Satisfaction on Patient Loyalty with Patient Trust as an Intervening Variable

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## ABSTRACT

*This study aims to analyze the influence of service quality on patient satisfaction and the effect of patient satisfaction on patient trust in the context of health services. The method used is quantitative with a survey approach. The sample was selected using purposive sampling from 120 patients, who met the minimum sample requirements according to G\*Power's calculation, which was 111 respondents. Data were analyzed using hypothesis testing to determine the significance of relationships between variables. The results show that not all dimensions of service quality have a significant influence on patient satisfaction. The dimensions of Process, Interaction, and Environment have a significant influence, where Process is the dominant factor in increasing patient satisfaction. In contrast, the dimensions of Tangibility, Reliability, and Responsiveness did not have a significant effect on patient satisfaction. In addition, the results of the study also revealed that patient satisfaction did not have a significant effect on patient trust, but patient trust had a significant positive effect on patient loyalty. The conclusion of this study states that improving the quality of the service process, interaction between medical personnel and patients, and the environment of health facilities need to be the main focus to improve patient satisfaction. Meanwhile, building patient trust is the main key to increasing patient loyalty to health care institutions. These findings provide strategic direction for healthcare management in designing and improving the quality of services to strengthen patient satisfaction and loyalty.*

## INTRODUCTION

The global healthcare industry is undergoing a rapid transformation along with the development of medical technology and the increasing expectations of the public on the quality of services. The use of advanced technologies such as telemedicine, electronic medical records, and robotics in medical operations has brought about major changes in the way healthcare is delivered. Globalization and high mobility of people have also made the healthcare industry increasingly connected with other sectors, such as medical tourism and chronic disease management at a global level (Wu et al., 2022). However, despite this progress, the global healthcare industry still faces major challenges, such as inequalities in access to care, especially in developing countries, and the growing burden of healthcare costs (Han et al., 2021).

The healthcare industry in Indonesia has grown rapidly in recent decades, although it still faces major challenges. One of them is the uneven distribution of health facilities between urban and rural areas, as well as the limited number of qualified medical personnel available in certain areas. In addition, despite the government's efforts through the National Health Insurance (JKN) program, there are still challenges in terms of uneven service quality and patient satisfaction levels. The quality of health services provided by hospitals and other health facilities affects patients' perceptions of these institutions, as well as affecting the level of patient satisfaction and loyalty (Zaid et al., 2020). With the increase in the number of private hospitals and other healthcare options, competition in the industry has intensified, and factors such as service quality, patient satisfaction, and trust have become increasingly important for creating patient loyalty.

Patient loyalty refers to a patient's commitment to continue using healthcare services from the same provider over the long term. This loyalty is reflected in the patient's tendency to continue to choose a particular hospital or clinic even if there are other alternatives that are more affordable or closer to their location. Patient loyalty is not only influenced by the quality of medical services received, but also by the overall experience felt by the patient during the service process. For example, a good relationship between patients and medical personnel, as well as an empathetic attitude from the hospital, can increase the level of patient loyalty (Wu et al., 2022). Research shows that patient loyalty is also related to their

satisfaction with the overall care experience, including effective communication with doctors, information disclosure, and trust in the treatment process (Liu et al., 2021). Thus, this study aims to explore how service quality and patient satisfaction can influence patient loyalty, by examining the important role of the trust factor that links the two variables.

Patient trust is a crucial component in the relationship between patients and healthcare providers that acts as a mediator in the patient decision-making process. This trust develops based on consistent positive experiences with healthcare providers, as well as attitudes and behaviors that demonstrate integrity and professionalism from medical personnel (Ai et al., 2022). Patients who have a high level of trust in a hospital or doctor tend to feel more secure in undergoing treatment, which in turn increases their satisfaction with the services provided. Patient trust is often the bridge that connects patient satisfaction with their loyalty, as patients who feel valued and trusted by healthcare providers are more likely to return and use the same services in the future (Liu et al., 2021). In addition, trust also influences the patient's intention to recommend the service provider to others, which directly contributes to the reputation and long-term loyalty of the healthcare provider (Ai et al., 2022).

Service quality is a fundamental factor affecting patient satisfaction. Service quality includes aspects such as the professionalism of medical personnel, timeliness in providing services, openness of communication, and facilities that support patient comfort during the treatment process (Ha et al., 2023). Good service can improve the patient experience, thereby increasing their satisfaction with the health facility.

Patient satisfaction itself refers to the extent to which patients' experiences match their expectations of the services provided. Patient satisfaction is often a key predictor of patient loyalty, as patients who are satisfied with the health services they receive are more likely to choose them again in the future and less likely to switch to another provider (Aljumah et al., 2020). Previous research shows that high service quality is closely related to patient satisfaction, which in turn affects the level of patient loyalty (Shie et al., 2022).

Referring to the results of the analysis of various previous studies, several main problems were found that have not been discussed in depth in the existing literature. First, although there have been several studies examining the relationship between service quality and patient satisfaction on patient loyalty, many of these studies do not comprehensively consider the role of patient trust as an intervening variable. The study of (Wu et al., 2022) for example, emphasizes more on the doctor-patient relationship and doctor empathy in building patient trust without looking at how service quality affects such trust and in turn contributes to patient loyalty. Similarly, (Nguyen et al., 2021) discusses the effect of total quality management and service quality on patient satisfaction but does not include the element of patient trust as a possible connecting factor that can strengthen patient loyalty.

Other research such as that conducted by (Liu et al., 2021), Despite showing that patient satisfaction has an important role in shaping loyalty, it has not thoroughly addressed how service quality and patient satisfaction play a role in increasing patient loyalty through indirect effects mediated by patient trust. This creates a gap in the literature regarding an in-depth understanding of the factors that play a role in enhancing patient loyalty, particularly in the healthcare sector. Moreover, while studies have touched on the importance of service quality in the medical context, they have not fully explored the complex interactions between service quality, patient satisfaction and patient loyalty by considering the important role of patient trust.

In addition, some research, such as that conducted by (Aljumah et al., 2020) and (Nguyen et al., 2021), more focused on foreign patients or specific patient groups, which results in difficulties in generalizing their findings to the wider population. Research conducted by (Aladwan et al., 2021) were limited to specific hospitals or regions, which led to limitations in the external validity of their studies. Even research by (Shie et al., 2022) and (Han et al., 2021) This study emphasizes the direct relationship between service quality and patient loyalty, but does not include an analysis of the indirect effect through patient trust. Thus, there is a research gap that needs to be bridged through a more in-depth study of the role of patient trust as an intervening variable in the relationship between service quality, patient satisfaction, and patient loyalty.

The research gaps found in this literature include, first, no study has thoroughly explored the role of patient trust as a mediator in the relationship between service quality and patient satisfaction on patient loyalty. Secondly, many studies are limited to a specific context or region, so their findings cannot be generalized to a wider population. Third, while there are many studies focusing on patient satisfaction,

few studies have examined the complex relationship between service quality, patient satisfaction, and patient loyalty by considering the central role of patient trust. Therefore, this study aims to address these gaps by developing a more comprehensive model, in which patient trust serves as an intervening variable linking service quality and patient satisfaction to patient loyalty.

It was also found that the gap phenomenon that occurs in the healthcare industry can be explained through several factors that affect patient loyalty. First, the number of patient visits to hospitals worldwide is very high, with data showing that in 2022, approximately 313.5 million patient visits were recorded for BPJS Kesehatan in Indonesia, an increase of 34.5% compared to the previous year (Databoks, 2023). On a global level, the number of patient visits is estimated to reach more than 1.4 billion per year (World Health Organization, 2022). This increase has led to intensified competition among hospitals, as more choices are available to patients, which in turn affects their decision in choosing a healthcare provider. The increasing diversity of hospital choices exacerbates the challenge of maintaining patient loyalty.

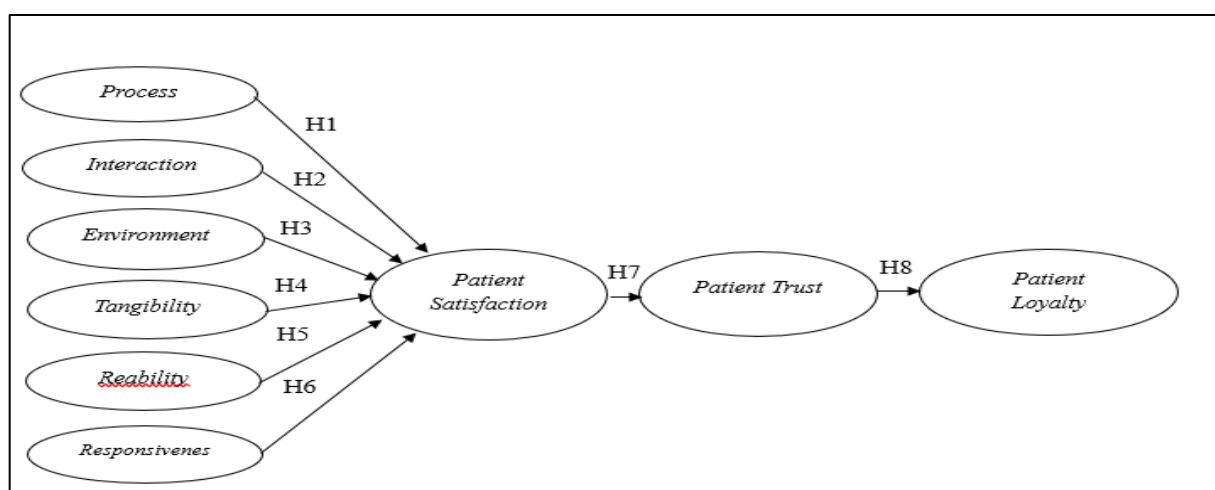
Second, regarding hospital revenue, many hospitals rely on the volume of patient visits to increase revenue. In Indonesia, for example, BPJS Kesehatan recorded revenue of IDR148.1 trillion in 2022 (Databoks, 2023). This source of revenue is largely derived from patient care, which shows how important patient loyalty is to the financial sustainability of the hospital. The more hospitals operate and compete, the greater the need to manage patient loyalty to ensure revenue stability.

In addition, the choice of hospital location is an important factor in attracting patients. Rumah Sakit Bhayangkara Polda Banten, located in Serang City, Banten, was chosen as a strategic location to provide easy access for the local community. The hospital operates on an area of 5,300 m<sup>2</sup> and is equipped with facilities that can fulfill the health needs of the people in the area (HelloSehat, 2023). This location selection serves to maximize the number of patients who come, but this also adds to the challenge of maintaining patient loyalty due to increasingly fierce competition with other hospitals.

The urgency of this research is very high considering the increasingly intense competition in the healthcare industry. Hospitals and other healthcare providers must be able to maintain and increase patient loyalty in order to remain relevant in the midst of increasingly fierce competition. Loyal patients will not only continue to use the same service, but are also likely to recommend the service to others, which will ultimately improve the reputation and competitiveness of healthcare providers. However, patient loyalty cannot be built through satisfaction alone. Patient trust in the healthcare provider is a key factor that can strengthen the relationship between service quality and patient loyalty. This is particularly important because patients who are satisfied with the service provided, but do not have a sufficient level of trust, may move to another provider if they feel there is a better alternative.

### Conceptual Framework

This study includes 9 core variables, which are further presented in the research model below:



**Figure 1. Research Model**

Source modified from Zaid et al. (2020), Aljumah et al. (2020)

This research model was developed to analyze the factors that influence patient satisfaction and its impact on patient trust and patient loyalty in healthcare. The model is based on nine main hypotheses that link various aspects of healthcare with patient satisfaction and trust.

RESEARCH METHOD

This type of research is quantitative research with a causal approach. The population of this study were all patients who received services at Bhayangkara Serang Hospital during the study period. This study aims to analyze the effect of service quality and patient satisfaction on patient loyalty, with patient trust as an intervening variable. Determination of the number of samples in this study was carried out using the G\*Power approach with multiple linear regression statistical analysis. Thus, the ideal number of respondents in this study ranged from 120 people. Primary data in this survey research was obtained directly from respondents through structured questionnaire instruments, and the data was processed using the PLS-SEM method. In addition, secondary data were obtained from literature or other written sources to support the research. This research uses a quantitative approach with a survey, where inferential analysis is carried out using certain statistical methods. The data analysis method chosen, according to the level of complexity of the research, is multivariate analysis (Sekaran, 2021).

RESULTS AND DISCUSSION

Respondent Profile

The respondent profile includes information of gender and age of 120 participants. Based on table 1, the gender ratio are distributed equally which allow more representative understanding of patient experiences. The age of the respondents were grouped into three main age categories, with majority of respondent were young adults (18-27 years). It suggest that young adult individuals made up the largest share of the sample. This is important because different age groups may have varying expectation regarding the experience in healthcare.

Table 1 Respondent Profile

Characteristic	Category	Total (n)	Percentage (%)
Gender	Woman	60	50%
	Men	60	50%
Age	18-27 years	58	48,3%
	28-43 years	37	30,83%
	44-59 years	25	20,8%

Source: Bayangkara Serang Hospital, 2024

Outer Loading

The measurement of outer model was conducted by running indicator reability, internal consistency reliability, construct reability, and discriminant validity.

Table 2 Validity and Reability Testing

Indicator and Construct	Outer Loading
<b>Patient trust (CR= 0.943 ; AVE= 0.675)</b>	
PT 1 I trust the ability of health service providers at Bhayangkara Serang Hospital.	0.798
PT2 I trust the competence of health service providers at Bhayangkara Serang Hospital.	0.747
PT3 I believe that health service providers act in the interests of patients condition.	0.800
PT4 I believe that my privacy is secured at Bhayangkara Serang Hospital.	0.801
PT 5 I trust the ability of health service providers to handle patient needs.	0.749
<b>Process (CR=0.910 ; AVE= 0.675)</b>	

Indicator and Construct	Outer Loading
P1 Do you think that Bhayangkara Serang Hospital provides health services according to the allocated time?	0.736
P2 Are you informed about the service times that will be carried out at Bhayangkara Serang Hospital?	0.730
P3 Are health workers or staff at Bhayangkara Serang Hospital available when needed?	0.769
P4 Are medical services at Bhayangkara Serang Hospital carried out immediately?	0.756
P5 Are non-medical services at Bhayangkara Serang Hospital carried out immediately?	0.734
<b>Interaction (CR=0.923 ; AVE= 0.588)</b>	
I1 Are the services at Bhayangkara Hospital available all around the clock?	0,809
I2 Are the staff at Bhayangkara Hospital polite to you?	0,842
I3 Are the staff at Bhayangkara Hospital considered friendly?	0,838
I4 Do the staff at Bhayangkara Hospital prioritize your interest/needs as patient?	0,875
I5 Do the staff at Bhayangkara Serang Hospital understand your specific needs as a patient?	0,824
I6 Are the staff at Bhayangkara Serang Hospital knowledgeable when answering your questions?	0,793
<b>Environment (CR=0.909 ; AVE= 0.555)</b>	
E1 Is the environment of Bhayangkara Serang Hospital clean?	0.799
E2 Is the environment of Bhayangkara Serang Hospital comfortable?	0.788
E3 Do the staff of Bhayangkara Serang Hospital wear uniforms?	0.807
E4 Do the staff of Bhayangkara Serang Hospital look presentable?	0.825
E5 Does the equipment at Bhayangkara Serang Hospital use the latest technology?	0.761
<b>Tangibility (CR=0.897 ; AVE= 0.675)</b>	
T1 Is the location of Bhayangkara Serang Hospital easy to find?	0.762
T2 Are the directional signs at Bhayangkara Serang Hospital clear?	0.827
T3 Are the wards of Bhayangkara Serang Hospital easy for patients to access?	0.815
T4 Are the wards of Bhayangkara Serang Hospital comfortable for patients?	0.797
T5 Are the staff of Bhayangkara Serang Hospital professional?	0.643
T6 Do you get free complementary medicines from Bhayangkara Serang Hospital?	0.747
<b>Reability (CR=0.899 ; AVE= 0.611)</b>	
R1 Is the registration process at Bhayangkara Serang Hospital fast?	0.713
R2 Is the registration process at Bhayangkara Serang Hospital easy?	0.769
R3 Do the staff at Bhayangkara Serang Hospital respond promptly when called?	0.786
R4 Do the staff at Bhayangkara Serang Hospital show genuine interest in handling your problem?	0.794
R5 Do the staff at Bhayangkara Serang Hospital dependable for handling your problem?	0.776
R6 Is the service at Bhayangkara Serang Hospital Perfect?	0.802
<b>Responsiveness (CR=0.916 ; AVE= 0.576)</b>	
RS1 Do you feel that the registration staff at Bhayangkara Serang Hospital are friendly?	0,809
RS2 Do you feel that the registration staff at Bhayangkara Serang Hospital are polite?	0,842
RS3 Do the staff at Bhayangkara Serang Hospital respond to your requests quickly?	0,838
RS4 Is the information provided to you sufficient regarding your health condition?	0,875
RS5 Do you feel that the prescribed medicines are reasonably priced?	0,824
<b>Patient Satisfaction (CR=0.949 ; AVE= 0.600)</b>	
PS1 Overall, I am satisfied with the health services provided by Bhayangkara Serang Hospital	0.822
PS2 Overall, I am satisfied with the price of health services charged by Bhayangkara Serang Hospital	0.822
PS3 I am satisfied with the interaction between medical service providers and patients.	0.844
PS4 I am satisfied with the ease of access to health services at Bhayangkara Serang Hospital	0.859
PS5 I am satisfied with the punctuality of health services at Bhayangkara Serang Hospital.	0.776
<b>Patient Loyalty (CR=0.910 ; AVE= 0.718)</b>	

Indicator and Construct	Outer Loading
PL1 I am willing to recommend the healthcare provider to others	0.767
PL2 I am likely to use the healthcare services of Bhayangkara Serang Hospital again in the future.	0.821
PL3 I am committed to continuing to use the same healthcare provider.	0.821
PL4 I am willing to intently visit on RS Bhayangkara Serang in the future	0.861
PL5 I have an emotional attachment to the medical staff at Bhayangkara Serang Hospital.	0.773

Note : CR= Composite Reliability; AVE= Avarage Variance Extracted

Source: Data Processing, 2025

Table 2 shows that all indicators on the variables studied have an outer loading value above 0.70, indicating good convergent validity. In the Patient Trust variable (PT1-PT5), all indicators are valid with the highest value in PT4 (0,801). For Service Quality, all indicators meet the criteria, with the highest values in I4 (0,875) and E4 (0,875), while T5 (0,643) is still considered acceptable. The Patient Satisfaction and Patient Loyalty variables also showed strong convergent validity, with the highest values in PS4 (0,859) and PL4 (0,861), respectively. Overall, all indicators are valid and reliable in measuring the variable constructs. AVE values above the 0.50 threshold, indicating good discriminant validity. Constructs such as Environment (0.555), Interaction (0.588), Responsiveness (0.576), and Patient Satisfaction (0.600) are slightly above the minimum limit but still acceptable in social research. Patient Loyalty has the highest AVE (0.718), followed by Patient Trust, Process, Tangibility, and Reliability (around 0.675). Overall, the constructs in this model have adequate discriminant validity, although some need further attention. All constructs in this study meet the criteria for good reliability, with Cronbach's Alpha and Composite Reliability (CR) values above 0.70. Patient Satisfaction has the highest value (Alpha: 0.940; CR: 0.949), followed by Patient Trust and Interaction, showing very high internal consistency. Other constructs such as Patient Loyalty, Process, Environment, Tangibility, Reliability, and Responsiveness also showed CR values above 0.89. Overall, all constructs were found to be reliable and suitable for structural analysis

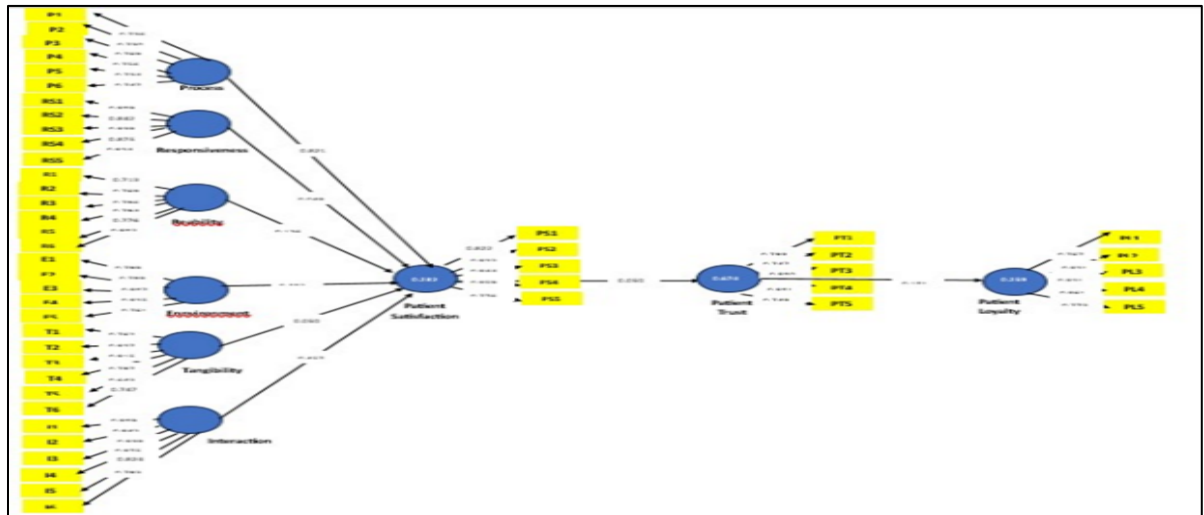
**Table 3. Discriminant Validity (HTMT)**

	<i>PL</i>	<i>PT</i>	<i>PS</i>	<i>P</i>	<i>I</i>	<i>E</i>	<i>T</i>	<i>R</i>	<i>RS</i>
<i>PL</i>									
<i>PT</i>	0.473								
<i>PS</i>	0.425	0.876							
<i>P</i>	0.857	0.494	0.474						
<i>I</i>	0.232	0.199	0.207	0.265					
<i>E</i>	0.077	0.333	0.159	0.096	0.102				
<i>T</i>	0.048	0.101	0.174	0.032	0.145	0.093			
<i>R</i>	0.557	0.480	0.436	0.872	0.613	0.557			
<i>RS</i>	0.893	0.410	0.369	0.500	0.893	0.410			

Source: Data Processing, 2025

On the last step of outer model evaluation, discriminant test using HTMT ratio were done. Based on the result in Table 3, almost all variables are below 0,85 which indicate that the model achieved good discriminant validity. Patient loyalty and responsiveness (0.893), Patient loyalty and process (0,875), in addition Patient trust and patient satisfaction (0,876) are above 0,85. However, the value are still within an acceptable range.





**Figure 2. Outer Model**

*Source: Processed by researchers (2025)*

### **Inner Model Evaluation**

#### **R-Square**

**Table 4 R-Square**

Dependent Variable	R-square	Interpretation
Patient Loyalty	0.259	Weak Explanatory
Patient Trust	0.674	Strong Explanatory
Patient Satisfaction	0.282	Moderate Explanatory

*Source: Data Processing, 2025*

Table 4 shows that the model is most effective in explaining the Patient Trust variable with an R-Square of 0,674, meaning that 0,674% of the variation can be explained by the model. In contrast, Patient Loyalty ( $R^2 = 0,259$ ) and Patient Satisfaction ( $R^2 = 0,282$ ) have lower values, indicating that most of the variation in these two variables is influenced by factors outside the model. Overall, the model is more powerful in explaining Patient Trust than other variables.

#### **Variance Inflation Factor (VIF)**

**Table 5. VIF Inner Value**

Independent Variable	PL	PT	PS
Patient Loyalty			
Patient Trust	3,534		
Patient Satisfaction	3,534		
Interaction	3,278	1,000	3,278
Environment	3,278	1,000	3,278
Process			
Tangibles	3,278	1,000	3,278
Reability	3,278	1,000	3,278
Responsiveness	3,278	1,000	3,278

*Source: Data Processing, 2025*

Table 5 shows that all VIF values in the model are below the tolerance limit of 5, indicating that there is no multicollinearity problem. The highest value (3,534) appears for Patient Trust and Patient Satisfaction on Patient Loyalty, but it is still acceptable. Most of the other constructs have VIF values

around 3,278 or even 1,000, indicating low correlation between variables. Thus, the inner model is valid and suitable for further analysis.

### **Predictive Relevance ( $Q^2$ )**

**Table 6. Predictive Relevance**

Dependent Variable	$Q^2$	Category
Patient Loyalty	0.161	Medium Predictive Relevance
Patient Trust	0.451	Large Predictive Relevance
Patient Satisfaction	0.181	Medium Predictive Relevance

*Source: Data Processing, 2025*

Table 6 shows that all endogenous variables-Patient Loyalty ( $Q^2 = 0.161$ ), Patient Trust ( $Q^2 = 0.451$ ), and Patient Satisfaction ( $Q^2 = 0.181$ )-have a  $Q^2$  value  $> 0$ , indicating that the model has good predictive relevance. This means that the model is able to predict the variation of each variable effectively and describe the phenomenon under study quite accurately.

### **F-Square**

**Table 7. F-square**

	F-square
Process	0.028
→ Patient Satisfaction	
Interaction	1.138
→ Patient Satisfaction	
Environment → Patient Satisfaction	0.008
Tangibility → Patient Satisfaction	0.010
Reability → Patient Satisfaction	1.340
Responsiveness → Patient Satisfaction	0.015
Patient Satisfaction → Patient Trust	0.025

*Source: Data Processing, 2025*

Table 7 shows that Reability ( $F^2 = 1.340$ ) and Interaction ( $F^2 = 1.138$ ) have a very large effect on Patient Satisfaction, indicating a significant contribution in increasing patient satisfaction. In contrast, Process (0.028), Environment (0.008), Tangibility (0.010), and the relationship of Patient Satisfaction to Patient Trust (0.025) show very little effect. Overall, only a few variables made a dominant contribution to the model.

### **Hypothesis Testing**

**Table 8. Hypothesis Test**

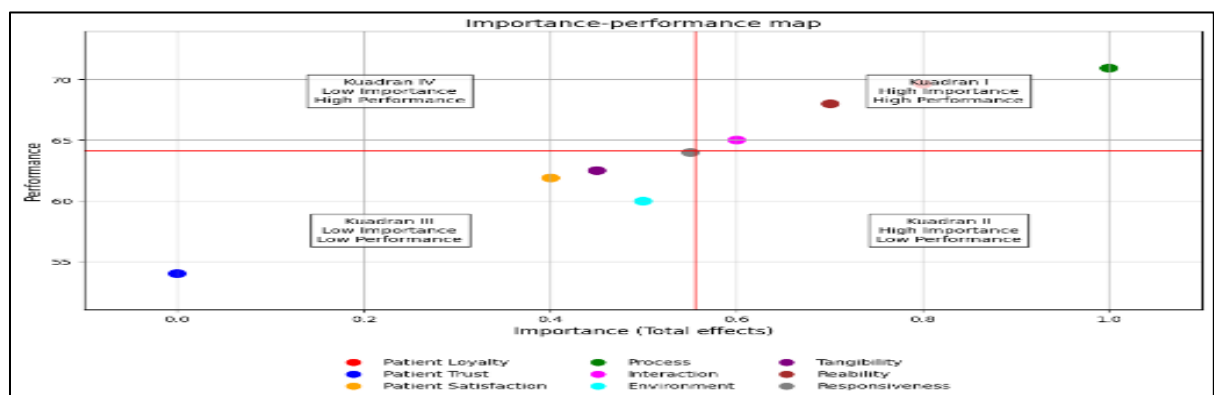
Hipotesis	Original sample	T statistics	P values	Analysis
Process → Patient Satisfaction	0,821	43,127	0,000	Accepted
Interaction → Patient Satisfaction	0,457	6,450	0,000	Accepted
Environment → Patient Satisfaction	0,402	4,376	0,000	Accepted
Tangibility → Patient Satisfaction	0,050	0,693	0,488	Rejected
Reability → Patient Satisfaction	0,126	1,346	0,179	Rejected
Responsiveness → Patient Satisfaction	0,048	1,048	0,295	Rejected
Patient Satisfaction → Patient Trust	0,050	1,062	0,288	Rejected
Patient Trust → Patient Loyalty	0.101	2.003	0.023	Rejected

*Source: Data Processing, 2025*



Based on the results of hypothesis testing in Table 8, it can be concluded that not all relationships between variables in the model are statistically significant. Of the six hypotheses regarding the effect of service quality on patient satisfaction (Patient Satisfaction), only three have proven significant, namely the Process, Interaction, and Environment variables. The Process variable has the strongest influence with a t-statistic value of 43,127 and a p-value of 0.000, followed by Interaction ( $t = 6.450$ ;  $p = 0.000$ ) and Environment ( $t = 4.376$ ;  $p = 0,000$ ), which indicates that the service process, interaction with medical personnel, and the environment of health facilities play an important role in shaping patient satisfaction. In contrast, the variables Tangibility, Reability, and Responsiveness did not have a significant effect because their p-value was above 0.05. In addition, the effect of Patient Satisfaction on Patient Trust is also insignificant ( $t = 1,062$ ;  $p = 0,288$ ), which indicates that increasing satisfaction does not necessarily directly build patient trust. However, the relationship between Patient Trust and Patient Loyalty proved to be significant ( $t = 2,003$ ;  $p = 0,023$ ), meaning that the higher the patient trust, the more likely they are to remain loyal to the service provider. This finding confirms that the focus of service quality improvement should be on process, interaction, and environment, while other aspects require further evaluation.

## IPMA



**Figure 3. IPMA**

*Source: Processed by researchers (2025)*

Based on Importance-Performance Map (IPMA) mapping, most variables are in quadrants II and III, indicating an imbalance between the importance and performance of services according to patients. Quadrant II, which includes Patient Loyalty, Process, Interaction, and Reability, shows variables with high importance but low performance, so they need to be prioritized for improvement so that services meet patient expectations. While quadrant III, which contains Patient Trust, Patient Satisfaction, Environment, Tangibility, and Responsiveness, reflects low importance and performance, so improvement in this area is not a major short-term focus. There are no variables in quadrant I (high importance and performance) or quadrant IV (high performance and low importance), which means that no aspect of the service is optimal or excessive. Overall, these results indicate the need for strategic improvements in important low-performing aspects, particularly patient loyalty, service processes, interactions, and reliability, to increase patient satisfaction and trust.

**Table 9. IPMA Result of Importance and Performance**

Variable	Importance	Performance	Result
Patient Loyalty	0.800	69.652	High Importance; Low Performance
Patient Trust	0.000	54.011	Low Importance; Low Performance
Patient Satisfaction	0.400	61.870	Low Importance; Low Performance
Process	1.000	70.949	High Importance; Low Performance
Interaction	0.600	65.000	High Importance; Low Performance
Environment	0.500	60.000	Low Importance; Low Performance

Variable	Importance	Performance	Result
Tangibility	0.450	62.500	Low Importance; Low Performance
Reability	0.700	68.000	High Importance; Low Performance
Responsiveness	0.550	64.000	Low Importance; Low Performance
<b>Average</b>	0.556	64.109	Low Importance; Low Performance

*Source: Data Processing, 2025*

Based on the IPMA results in Table 9, the Process and Patient Loyalty variables have a high level of importance but performance is still low, so they need priority improvement. Reability and Interaction are also important but their performance is not optimal. While Patient Satisfaction, Patient Trust, Environment, Tangibility, and Responsiveness have lower importance and performance, so they need regular evaluation. Overall, service quality improvement should focus on Process, Patient Loyalty, and Reability because their influence is large but their performance is inadequate.

## Discussion

Based on the results of the hypothesis testing that has been carried out, it is found that not all service qualities have a significant effect on patient satisfaction. In particular, Process, Interaction, and Environment showed a significant effect, while Tangibility, Reability, and Responsiveness did not show a significant effect on patient satisfaction. These findings are in line with previous research that emphasizes the importance of certain elements in healthcare quality.

First, Process shows a significant influence on patient satisfaction. This is consistent with the findings of Ai et al. (2022), who stated that elements such as service process, service delivery, interior decoration, and cleanliness have a significant influence on patient trust and satisfaction. However, exterior design was not associated with patient satisfaction or trust. This study highlights the importance of service quality in shaping positive patient experiences.

Interaction also showed a significant influence on patient satisfaction. This is in line with the research of Liu et al. (2021), which emphasizes that patient satisfaction is not always directly related to patient loyalty, but trust plays an important role in the relationship. Trust can reduce patients' psychological risk and increase their loyalty.

However, Tangibility, Reability, and Responsiveness did not show a significant influence on patient satisfaction. This may be due to a shift in patient expectations, where aspects such as physical facilities and speed of service are no longer top priorities. Instead, elements such as service processes and direct interaction with medical personnel have become more important in shaping patient satisfaction perceptions.

In addition, the finding that patient satisfaction does not have a significant effect on patient trust suggests that trust in healthcare requires more than just short-term satisfaction. Long-term service consistency and integrity are needed to build patient trust. This is in line with the research of Liu et al. (2021), which states that although patient satisfaction is important, trust plays a greater role in shaping patient loyalty.

Overall, the results of this hypothesis test indicate that improving the quality of processes, interactions, and the environment is a top priority for improving patient satisfaction. Meanwhile, others require further evaluation because they have not shown a significant contribution in the model used. The practical implication of these findings is the need for health facility management to focus on improving service procedures and building good interpersonal communication, rather than investing only in physical aspects or speed of service.

In this context, previous research provides additional insights. For example, Aladwan et al. (2021) found that service quality has a direct positive influence on patient satisfaction and patient loyalty. In addition, patient satisfaction mediates the relationship between service quality and patient loyalty. This study recommends that public hospital managers and healthcare providers initiate continuous quality improvement programs and monitor healthcare quality to gain patient satisfaction and loyalty in return. The study also suggests that future research include other factors such as perceived value, trust, and availability of hospital resources that may influence patient satisfaction and loyalty.

Thus, to increase patient satisfaction and trust, healthcare facilities need to focus on improving the quality of service processes, interactions between medical personnel and patients, and the facility environment. In addition, it is important to establish effective communication and maintain consistency and integrity of services in the long term. This will contribute to increased patient loyalty and the overall reputation of the healthcare facility.

## CONCLUSION

Patient satisfaction on patient trust in the context of health services. Based on the results of the research that has been conducted, it can be concluded that not all parts of service quality significantly affect patient satisfaction in the context of this study. Only process, interaction, and environment are proven to have a significant influence on patient satisfaction, with process being the most dominant factor. In contrast, tangibility, reliability, and responsiveness did not show a significant influence, so their effectiveness in shaping patient satisfaction needs to be re-evaluated. Furthermore, the results also show that patient satisfaction does not directly affect patient trust, indicating the possible role of mediating variables or other external factors that are more decisive in forming patient trust. Nevertheless, patient trust was found to play a significant role in increasing patient loyalty, confirming the importance of building trust as the foundation of patient loyalty to healthcare providers. Overall, these findings provide strategic direction that improving the quality of service processes, interactions between individuals, and the facility environment needs to be the main focus in an effort to strengthen patient satisfaction and loyalty.

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