

The Influence of Effective Communication and Responsiveness of Pediatricians on Patient Loyalty with Patient Trust as an Intervening Variable at the Depok Hospital Executive Polyclinic

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ABSTRACT

Patient loyalty is an important thing that a hospital needs to have because it describes the performance of a hospital. This research aims to determine the effect of effective communication and doctor responsiveness on patient loyalty and patient trust as an interventionist in the Polyclinic at one of the hospitals in Depok. The research population was all parents of pediatric patients visiting the executive polyclinic at Depok Hospital who had previously visited the executive polyclinic. The sample consisted of 111 respondents. The sample size was measured using G*Power software (Error 0.05; Effect size 0.3; power 0.95; sample size 111). The data analysis method uses path analysis. The research results show that effective doctor communication has a positive effect on patient loyalty. Doctor responsiveness has a positive effect on patient loyalty. Effective communication from doctors has a positive effect on patient trust. Doctors' responsiveness has a positive effect on patient confidence. Patient trust has no effect on patient loyalty. Trust does not mediate the effect of effective communication and doctor responsiveness on patient loyalty. This research contributes to efforts to increase patient loyalty through factors such as effective doctor communication, doctor responsiveness, and patient trust in the health sector in Indonesia.

Keywords: Effective Communication, Patient Loyalty, Responsiveness, Trust

INTRODUCTION

Pediatricians have special knowledge and expertise in caring for children. Children are a vulnerable group that requires special attention in the health sector because their health conditions can have an impact on their quality of life in the future. Children also experience many physical, mental, and emotional changes as they grow and develop. The hospital's role is to support the growth and development of a child.

The core of corporate competition is customer-oriented, gaining and creating customer loyalty to products or service quality to achieve sustainable development (Liu et al., 2021). This also applies in the health service sector.

Pediatric patient services at one of the executive hospitals in the city of Depok have experienced an increase in the number of visits every year. The number of pediatric patient

visits in 2022 tends to be stable. The number of pediatric patient visits in January to October 2023 fluctuated, with a decrease in March to April by 33%, May to June by 13%, June to July by 1%, and September to October by 20%. Based on Google reviews, patient complaints occur in terms of the doctor not being friendly and the doctor's arrival time not being on schedule. After conducting a preliminary survey by distributing questionnaires to ten respondents (parents of child patients), 10% said the doctor was not friendly and did not arrive on time according to schedule, another 10% said the doctor did not arrive on time according to schedule. One of the factors that causes the number of visits to fluctuate is patient loyalty.

Patient loyalty is a deep commitment from patients to purchase or support preferred services again in the future despite situations that cause patients to switch to other hospitals.



(Kotler, 2009). The factors that determine a patient's level of loyalty to a hospital are caused by various things. Patient loyalty is determined by the factors of satisfaction, trust, service quality, hospital brand, commitment, customer complaints, organizational citizenship behavior of the patient (Zhou et al., 2017). Perceived value was found to be a driving factor for patient loyalty (Huang et al., 2021). Enthusiasm and interaction factors also determine the loyalty of health service users (Kholis & Ratnawati, 2021). Effective communication between patients and doctors determines the level of patient loyalty towards the doctor and the hospital (Unal et al., 2018).

Responsiveness is the willingness to provide service quickly (Zeithaml et al., 1990). Meanwhile, communication is a stimulus that is understood by the recipient and comes from the sender (Tubbs & Moss, 2005). Responsiveness and effective communication are one dimension of service quality. The dimensions of service quality are factors that determine the level of patient trust (Zarei et al., 2015). The quality of service provided by a hospital will be directly proportional to the level of patient loyalty (Aladwan et al., 2021). Meanwhile, trust is a factor that can increase patient loyalty (Liu et al., 2021). This is the basis that the influence of service quality on patient loyalty can be bridged by the trust of the patient. This research aims to analyze the influence of effective communication and doctor responsiveness on patient loyalty through the mediation of trust.

METHOD

This research was conducted with a quantitative approach and a cross-sectional research design because the survey of respondents was carried out over a certain

period of time. The research population was all parents of pediatric patients visiting the executive polyclinic at Depok Hospital who had previously visited the executive polyclinic. The sample consisted of 111 respondents. The sample size was measured using G*Power software (Error 0.05; Effect size 0.3; power 0.95; sample size 111). The data analysis method uses path analysis.

Loyalty is measured using the dimensions of repeat visits, not being influenced by other hospitals, referring to others. Trust is measured using the dimensions of integrity, sincerity, ability, willingness to depend. Effective communication is measured using the dimensions of understanding, familiarity, influencing attitudes, good relationships, and actions. Responsiveness is measured using the dimensions of providing services in a timely manner, willingness to help, and responding to patient requests.

RESULT and DISCUSSION

Respondent Characteristics

Respondents consisted of 19 men (17.1%) and 92 women (82.9%). Respondents aged ≤ 30 years were 26 people (23.4%), aged 31 to 40 years were 59 people (53.2%), aged > 40 years were 26 people (23.4%). Respondents with a final education level of high school/equivalent were 66 people (59.5%), D3 were 13 people (11.7%), Bachelor degrees were 32 people (28.8%). The occupations of the respondents were 67 housewives (60.4%), 13 entrepreneurs (11.7%), 31 private employees (27.9%). Respondents who visited twice in 2023 were 32 people (28.8%), respondents who visited three times in 2023 were 39 people (35.1%), respondents who visited twice in 2023 were 36 people (23.4%).

Validity Tests

Table 1. Validity Test Results for Pediatricians' Effective Communication

Item	r-count	r-table (n=111)	Decision
X1.01	0,692	0,187	Valid
X1.02	0,700	0,187	Valid
X1.03	0,763	0,187	Valid
X1.04	0,809	0,187	Valid
X1.05	0,819	0,187	Valid
X1.06	0,754	0,187	Valid
X1.07	0,693	0,187	Valid

Item	r-count	r-table (n=111)	Decision
X1.08	0,793	0,187	Valid
X1.09	0,813	0,187	Valid
X1.10	0,672	0,187	Valid
X1.11	0,772	0,187	Valid
X1.12	0,852	0,187	Valid
X1.13	0,795	0,187	Valid
X1.14	0,726	0,187	Valid
X1.15	0,712	0,187	Valid

Based on Table 1, it is known that the range of r-calculated values is between 0.672 - 0.852; so that all indicators of effective pediatrician communication produce r-count values > r-table (0.187) and are declared valid.

Table 2. Results of the Validity Test of Pediatrician Responsiveness

Item	r-count	r-table (n=111)	Decision
X2.01	0,660	0,187	Valid
X2.02	0,737	0,187	Valid
X2.03	0,637	0,187	Valid
X2.04	0,736	0,187	Valid
X2.05	0,776	0,187	Valid
X2.06	0,801	0,187	Valid
X2.07	0,841	0,187	Valid
X2.08	0,820	0,187	Valid
X2.09	0,821	0,187	Valid

Based on Table 2, it is known that the range of r-calculated values is between 0.637 - 0.841, so that all pediatrician responsiveness indicators produce r-calculated values > r-table (0.187) and are declared valid.

Table 3. Validity Results of Patient Trust Variables

Item	r-count	r-table (n=111)	Decision
Z.01	0,794	0,187	Valid
Z.02	0,822	0,187	Valid
Z.03	0,835	0,187	Valid
Z.04	0,796	0,187	Valid
Z.05	0,872	0,187	Valid
Z.06	0,789	0,187	Valid
Z.07	0,738	0,187	Valid
Z.08	0,857	0,187	Valid
Z.09	0,855	0,187	Valid
Z.10	0,665	0,187	Valid
Z.11	0,637	0,187	Valid
Z.12	0,627	0,187	Valid

Based on table 3, it is known that the range of r-calculated values is between 0.627 - 0.872, so that all indicators of patient trust produce r-calculated values > r-table (0.187) and are declared valid.

Table 4. Validity Results of Patient Loyalty Variables

Item	r-count	r-table (n=111)	Decision
Y.01	0,745	0,187	Valid
Y.02	0,782	0,187	Valid

Item	r-count	r-table (n=111)	Decision
Y.03	0,780	0,187	Valid
Y.04	0,676	0,187	Valid
Y.05	0,748	0,187	Valid
Y.06	0,425	0,187	Valid
Y.07	0,815	0,187	Valid
Y.08	0,803	0,187	Valid
Y.09	0,825	0,187	Valid

Based on Table 4, it is known that the range of r-calculated values is between 0.425 – 0.825, so that all indicators of patient loyalty produce r-calculated values > r-table (0.187) and are declared valid.

Reliability Test

Table 5. Reliability Test Results

Variable	Cronbach's Alpha	Decision
Effective Doctor Communication (X1)	0,958	Reliable
Doctor's Responsiveness (X2)	0,927	Reliable
Patient Trust (Z)	0,951	Reliable
Patient Loyalty (Y)	0,919	Reliable

Based on Table 5, it is known that the range of Cronbach's Alpha values is between 0.919 – 0.958, so that all research variables produce Cronbach's Alpha values > 0.70 and are declared reliable.

Normality Test

Table 6. Normality Test Results

Variable	Skewness			Decision
	Statistik	Std. Error	Rasio	
Effective Doctor Communication (X1)	0,003	0,229	0,012	Normally distributed
Doctor's Responsiveness (X2)	-0,337	0,229	-1,469	Normally distributed
Patient Trust (Z)	0,010	0,229	0,046	Normally distributed
Patient Loyalty (Y)	0,506	0,229	2,208	Normally distributed

The normality test aims to find out whether the data is normally distributed or not. The way to detect data normality is to use the Skewness Ratio. Skewness is the degree of skewness of the data distribution. Data is normally distributed if the Skewness Ratio value with an alpha of 1% is between -2.58 to +2.58. Skewness formula = Skewness statistical value / Standard Error. Based on Table 6, it is known that the range of Skewness Ratio values is between -1.469 to +2.208, so that all research variables produce Skewness Ratio values that are between -2.58 to +2.58 and are stated to be normally distributed.

Table 7. Multicollinearity Test Results

Independent Variable	Dependent Variable	Collinearity Statistics		Decision
		Tolerance	VIF	
Effective Doctor Communication	Patient Trust	0,268	3,730	No Multicollinearity
Doctor's Responsiveness	Patient Trust	0,268	3,730	No Multicollinearity
Effective Doctor Communication	Patient Loyalty	0,155	6,454	No Multicollinearity
Doctor's Responsiveness	Patient Loyalty	0,254	3,937	No Multicollinearity
Patient Trust	Patient Loyalty	0,192	5,217	No Multicollinearity

Based on table 7, it is known that the Tolerance value range is between 0.155 – 0.268 which is > 0.10 and the VIF value range is between 3.730 – 6.454 which is < 10.00; so that all independent variables are declared to have no multicollinearity.

Hypothesis Testing

F Test

Table 8. F Test Results



Model Summary	R ²	F-hit	Sig.
Structural Model 1	0,808	227,726	0,000
Structural Model 2	0,464	30,848	0,000

The simultaneous influence of effective doctor communication, doctor responsiveness, patient trust on patient loyalty

The one-variable structure model tests the patient's trust model as the dependent variable which is explained by the independent variables (the pediatrician's effective communication and the pediatrician's responsiveness). Structural model 1 = patient trust = $b_0 + b_1 \times \text{pediatrician's effective communication} + b_2 \times \text{pediatrician's responsiveness} + e_1$; where b_0 is a constant, b_1 is the coefficient of effective communication, b_2 is the coefficient of responsiveness, e_1 is the error of model 1. The two-variable test structure model in the patient loyalty model is the dependent variable which is explained by the independent variables (effective communication of pediatricians, responsiveness of pediatricians, and patient confidence). Structural model 2 = patient loyalty = $b_0 + b_1 \times \text{pediatrician's effective communication} + b_2 \times \text{pediatrician's responsiveness} + b_3 \times \text{patient's trust} + e_2$; where b_0 is a constant, b_1 is the effective communication coefficient, b_2 is the

responsiveness coefficient, b_3 is the trust coefficient, e_2 is the model 2 error.

The one-variable structure model tests the patient's trust model as the dependent variable which is explained by the independent variables (the pediatrician's effective communication and the pediatrician's responsiveness). Structural model 1 = patient trust = $b_0 + b_1 \times \text{pediatrician's effective communication} + b_2 \times \text{pediatrician's responsiveness} + e_1$; where b_0 is a constant, b_1 is the coefficient of effective communication, b_2 is the coefficient of responsiveness, e_1 is the error of model 1. The two-variable test structure model in the patient loyalty model is the dependent variable which is explained by the independent variables (effective communication of pediatricians, responsiveness of pediatricians, and patient confidence). Structural model 2 = patient loyalty = $b_0 + b_1 \times \text{pediatrician's effective communication} + b_2 \times \text{pediatrician's responsiveness} + b_3 \times \text{patient's trust} + e_2$; where b_0 is a constant, b_1 is the effective communication coefficient, b_2 is the responsiveness coefficient, b_3 is the trust coefficient, e_2 is the model 2 error.

T Test

Table 9. Path Analysis Results on Direct Effects

Variable	Standardized Coefficients Beta	T count	Sig.
Effective doctor communication on patient loyalty	0.507	2.819	0.006
Doctor's responsiveness to patient loyalty	0,286	2.035	0,044
Effective communication between doctors and patient beliefs	0,723	8.881	0,000
The doctor's responsiveness to the patient's beliefs	0,199	2.451	0,016
Patient trust in patient loyalty	-0,096	-0.595	0,553

The influence of effective doctor communication on patient loyalty

Based on Table 9, it is known that the t-value is $2.819 > 1.96$ ($t\text{-calculation} > 1.96$) and the p value is 0.006 ($p < 0.05$) with a beta coefficient value of 0.507 so that pediatricians' effective communication has a significant

positive effect on patient loyalty. These results are supported by previous research that effective communication plays an important role in increasing patient satisfaction and loyalty regarding health services (Lampus & Wuisan, 2024). Previous research results also found that effective communication between



doctors and patients was a driving factor in increasing patient loyalty (Handayani et al., 2021). It is important to maintain and improve doctor-patient communication skills. Communication between patients and doctors is important in providing effective health services and developing hospital patient loyalty (Unal et al., 2018). Doctor skills consisting of doctor competence, listening skills, and explanation skills lead to the creation of loyalty from patients (AlOmari, 2022). Aspects of service quality such as communication are positively related to patient loyalty (Fatima et al., 2018).

The influence of doctor responsiveness on patient loyalty

Based on Table 9, it is known that the t-value is 2.035 > 1.96 (t-calculation > 1.96) and the p value is 0.044 (p<0.05) with a beta coefficient value of 0.286 so that pediatrician responsiveness has a significant positive effect on patient loyalty. Responsiveness is one dimension of service quality that makes patients more satisfied and loyal (Bentum-Micah et al., 2020). Responsiveness has an impact on increasing patient satisfaction, while patients who are satisfied will be more loyal to the hospital (Meesala & Paul, 2018). The findings of this study indicate that empathy and responsiveness are important factors in the context of service delivery (Murray et al., 2019). Aspects of service quality such as responsiveness are positively related to patient loyalty (Fatima et al., 2018).

The influence of effective doctor communication on patient trust

Based on Table 9, it is known that the t-value is 8.881 > 1.96 (t-calculation > 1.96) and the p value is 0.000 (p<0.05) with a beta coefficient value of 0.723 so that pediatricians' effective communication has a significant positive effect on patient loyalty. The communication skills possessed by doctors are

able to increase patient confidence from a cognitive perspective, then this has an impact on intentions to continue use (Lee, 2021). Doctor communication is more able to increase patient trust in rural areas compared to urban areas (Ward, 2018). Patient-centered communication tends to foster patient trust in healthcare providers (Hong & Oh, 2019). Patient-centered communication skills were significantly associated with increased trust in physicians as sources of information (Asan et al., 2021).

The influence of doctor responsiveness on patient trust

Based on Table 9, it is known that the t-value is 2.451 > 1.96 (t-calculation > 1.96) and the p value is 0.016 (p<0.05) with a beta coefficient value of 0.199 so that pediatricians' effective communication has a significant positive effect on patient loyalty. These results are supported by previous research where the better the quality of service provided, the greater the patient's trust in the hospital (Zarei et al., 2015). Responsiveness, which is one of the dimensions of service quality, influences patients' feelings towards hospital services (Lonial et al., 2010). Responsiveness as part of service quality contributes to increasing patient trust (Alrubaiee & Alkaa'ida, 2011).

The influence of patient trust on loyalty

Based on Table 9, it is known that the t-value is -0.595 > 1.96 (t-calculation > 1.96) and the p value is 0.553 (p> 0.05) with a beta coefficient value of -0.096 so that pediatricians' effective communication does not have a significant effect on patient loyalty. These results contradict previous research where patient trust was a driving factor in creating patient loyalty (Liu et al., 2021). Further research is needed to see whether there are connecting factors in the influence of trust on patient loyalty.

Table 10. Path Analysis Results on Indirect Effects

Variable	Standardized Indirect Effect
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Doctors' effective communication towards patient loyalty is mediated by patient trust	-0.07
Doctors' responsiveness to patient loyalty is mediated by patient trust	-0.019

The effect of effective doctor communication on patient loyalty is mediated by patient trust

Based on table 10, it is known that the indirect effect of a doctor's effective communication on patient loyalty through patient trust is the multiplication of the direct effect of the Standardized Coefficients Beta value of a pediatrician's effective communication on patient trust with the Standardized Coefficients Beta value of patient trust on patient loyalty, namely $0.723 \times (-0.096) = -0.070 < \text{direct effect } (0.507)$, so trust does not mediate the effect of effective doctor communication on patient loyalty. This occurs due to patient trust being unable to increase patient loyalty. In contrast to previous findings, trust is able to mediate the impact of effective communication on patient loyalty (Fitriah, 2023).

The influence of doctor responsiveness on patient loyalty is mediated by patient trust

Based on table 10, it is known that the indirect influence between pediatrician responsiveness on patient loyalty through patient trust is the multiplication of the direct influence of the Standardized Coefficients Beta value of doctor responsiveness on patient trust with the Standardized Coefficients Beta value of patient trust on patient loyalty, namely $0.199 \times (-0.096) = -0.019 < \text{direct effect } (0.286)$, so trust does not mediate the effect of doctor responsiveness on patient loyalty. Responsiveness is part of service quality. The results of this study are different from previous research where trust mediates the influence of service quality on patient loyalty (Elizar et al., 2020).

CONCLUSION

The conclusion that can be drawn is that effective communication and responsiveness of doctors each have a positive effect on patient trust and patient loyalty. However, trust has no effect on patient loyalty so that the mediating effect of effective communication

and doctor responsiveness on patient loyalty is not significant.

This research has its own limitations. The instrument used in collecting data for this research was a questionnaire, where questionnaires were distributed to parents of pediatric patients to fill out, so the limitation was that they could not dig deeper into their opinions or views. Data were collected from 111 parents of child patients using a questionnaire where they were asked to fill in the questionnaire while they were waiting for their turn to be examined in the waiting room, however there were several parents of child patients who seemed to be in a rush when filling out the questionnaire so it was possible that the answers were filled out incorrectly. with what is actually felt. Future research can anticipate this by using a questionnaire via Google Form so that it can be filled in at any time by respondents accompanied by asking for the respondent's contact. This research was only conducted in one private hospital in Depok. Future research can use more than one private hospital in the city of Depok in order to more generalize the research findings.

REFERENCES

- Aladwan, M. A., Salleh, H. S., Anuar, M. M., ALhwadi, H., & Almomani, I. (2021). The relationship among service quality, patient satisfaction and patient loyalty: case study in Jordan Mafraq hospital. *Linguistics and Culture Review*, 5(S3), 27–40.
- AlOmari, F. (2022). Does a doctor's skill influence patient satisfaction, loyalty and compliance in low-medium income countries? *International Journal of Information and Decision Sciences*, 14(2), 149–163.
- Alrubaiee, L., & Alkaa'ida, F. (2011). The mediating effect of patient satisfaction in the patients' perceptions of healthcare quality-patient trust relationship. *International Journal of Marketing Studies*, 3(1), 103.



- Asan, O., Yu, Z., & Crotty, B. H. (2021). How clinician-patient communication affects trust in health information sources: Temporal trends from a national cross-sectional survey. *PLoS One*, 16(2), e0247583.
- Bentum-Micah, G., Ma, Z., Wang, W., Atuahene, S. A., & Bondzie-Micah, V. (2020). Perceived service quality, a key to improved patient satisfaction and loyalty in healthcare delivery: the servqual dimension approach. *Journal of Health and Medical Sciences*, 3(2).
- Elizar, C., Indrawati, R., & Syah, T. Y. R. (2020). Service quality, customer satisfaction, customer trust, and customer loyalty in service of Paediatric Polyclinic over Private H Hospital of East Jakarta, Indonesia. *Journal of Multidisciplinary Academic*, 4(2), 105–111.
- Fatima, T., Malik, S. A., & Shabbir, A. (2018). Hospital healthcare service quality, patient satisfaction and loyalty: An investigation in context of private healthcare systems. *International Journal of Quality & Reliability Management*, 35(6), 1195–1214.
- Fitriah, Z. (2023). The Influence of Effective Communication, Patient Experience on Patient Loyalty Mediated By Trust. *Jurnal Multidisiplin Indonesia*, 2(9), 2674–2685.
- Handayani, R., Ruswanti, E., Hilmy, M. R., & Adhikara, M. F. A. (2021). Communication Effectiveness of Doctors and Patients, Loyalty, Word of Mouth, On Repurchase Intentions at District Public Hospital Tangerang, Indonesia. *Journal of Multidisciplinary Academic*, 5(4), 334–340.
- Hong, H., & Oh, H. J. (2019). The effects of patient-centered communication: exploring the mediating role of trust in healthcare providers. *Health Communication*.
- Huang, I.-C., Du, P.-L., Lin, L.-S., Liu, T.-Y., Lin, T.-F., & Huang, W.-C. (2021). The effect of perceived value, trust, and commitment on patient loyalty in Taiwan. *INQUIRY: The Journal of Health Care Organization, Provision, and Financing*, 58, 00469580211007217.
- Juhana, D., & Kadir, K. (2020). The Organizational Communication Climate Human Relations Based in Facing the Industry 4.0. *Kontigensi: Jurnal Ilmiah Manajemen*, 8(1), 1-9.
- Kholis, N., & Ratnawati, A. (2021). The effects of customer engagement and brand trust on brand loyalty: A case study of BPJS healthcare participants in Indonesia. *The Journal of Asian Finance, Economics and Business*, 8(11), 317–324.
- Kotler, P. (2009). *Marketing management*. Pearson Education India.
- Lampus, N. S., & Wuisan, D. S. S. (2024). Correlation between Doctor-Patient Communication with Patient Satisfaction and Loyalty. *Medical Scope Journal*, 6(2), 149–158.
- Lee, C. (2021). Patient loyalty to health services: The role of communication skills and cognitive trust. *International Journal of Healthcare Management*, 14(4), 1254–1264.
- Liu, S., Li, G., Liu, N., & Hongwei, W. (2021). The impact of patient satisfaction on patient loyalty with the mediating effect of patient trust. *INQUIRY: The Journal of Health Care Organization, Provision, and Financing*, 58, 00469580211007221.
- Lonial, S., Menezes, D., Tarim, M., Tatoglu, E., & Zaim, S. (2010). An evaluation of SERVQUAL and patient loyalty in an emerging country context. *Total Quality Management*, 21(8), 813–827.
- Meesala, A., & Paul, J. (2018). Service quality, consumer satisfaction and loyalty in hospitals: Thinking for the future. *Journal of Retailing and Consumer Services*, 40, 261–269.
- Murray, J., Elms, J., & Curran, M. (2019). Examining empathy and responsiveness in a high-service context. *International Journal of Retail & Distribution Management*, 47(12), 1364–1378.
- Ortavian, A., & Toni, A. (2022). *Organizational Communication Management at PT. Paramount Enterprise International in*

- Efforts to Increase Product Sales. *Kontigensi: Jurnal Ilmiah Manajemen*, 10(2), 383-390.
- Tubbs, S. L., & Moss, S. (2005). Human Communication: konteks-konteks komunikasi.
- Unal, O., Akbolat, M., & Amarat, M. (2018). The influence of patient-physician communication on physician loyalty and hospital loyalty of the patient. *Pakistan Journal of Medical Sciences*, 34(4), 999.
- Ward, P. (2018). Trust and communication in a doctor-patient relationship: a literature review. *Arch Med*, 3(3), 36.
- Zarei, E., Daneshkohan, A., Khabiri, R., & Arab, M. (2015). The effect of hospital service quality on patient's trust. *Iranian Red Crescent Medical Journal*, 17(1).
- Zeithaml, V. A., Parasuraman, A., & Berry, L. L. (1990). Delivering quality service: Balancing customer perceptions and expectations. Simon and Schuster.
- Zhou, W.-J., Wan, Q.-Q., Liu, C.-Y., Feng, X.-L., & Shang, S.-M. (2017). Determinants of patient loyalty to healthcare providers: An integrative review. *International Journal for Quality in Health Care*, 29(4), 442-449.