

The Role of Health Facility in Mediating Service Quality and Patient Perceptions of Hospital Patient Satisfaction

DIndra Prasetyo¹*, DRusdiyanto², DNur Fadjrih Asyik³, DNabilah Aliyyah⁴, DRahmat Luthfi Haidar⁵, Umar Burhan⁶

1.4.5 Universitas Wijaya Putra, Faculty of Economics and Business, Department Management, City Surabaya, East Java, Indonesia; indraprasetyo@uwp.ac.id (I.P.) nabilah@uwp.ac.id (N.A.) rahmat@uwp.ac.id (R.L.H.)

²Universitas Gresik, Faculty of Economics, Department Accounting, City Gresik, East Java, Indonesia; rusdiyanto.se.m.ak-2017@feb.unair.ac.id (R.)

³Indonesian College of Economics Surabaya (STIESIA), Department Accounting, City Surabaya, East Java, Indonesia; nurfadjrih@stiesia.ac.id (N.FA.)

⁶Universitas Gresik, Faculty of Economics, Department Management, City Gresik, East Java, Indonesia; umarburhan@unigres.ac.id (U.B.)

Abstract. This study aims to gather empirical data on how health facility in Indonesia, specifically in the city of Gresik, influence patient perceptions of hospital patient satisfaction and service quality. Research Methodology - The hypothesis of this research is that health facility play a mediating role in service quality and patient perceptions of patient satisfaction in public hospitals in Indonesia, particularly in the city of Gresik. A quantitative approach is used, employing Google Forms to conduct an online survey shared on social media. Responses are measured on a Likert scale of 1 to 5. Purposive sampling was used to select 99 participants, mostly from the city of Gresik, to complete the online survey, which was distributed to outpatient and inpatient hospital facility throughout Indonesia. The sampling strategy employed in this study was the Slovin's formula. SmartPLS software version 3.0 is used for Structural Equation Modeling of Partial Least Squares (SEM-PLS) statistical data analysis. Findings - The study found that patient satisfaction in Indonesian hospitals, particularly in the city of Gresik, is significantly influenced by evaluations of health facility and the quality of care they provide. Health facility are greatly impacted by patient perception and the quality of their services. The likelihood of influencing hospital patient satisfaction levels through suitable healthcare facility increases with service quality and patient perception. By providing proper healthcare facility, service quality, and favorable patient impressions, patient happiness can be enhanced. Implications and Recommendations - This research can contribute to the development of theories regarding the variables that influence patient satisfaction in the healthcare industry. By highlighting the role of health facility in shaping service quality and perceptions of hospital patient satisfaction, the findings of this study can add to the body of knowledge in health service management. The results of this study may also contribute to the development of a comprehensive conceptual model that explains how healthcare facility influence patient satisfaction levels and perceptions of service quality in hospitals. Hospitals can benefit greatly from the conclusions of this research by improving the quality of their facility and services. The focus on patient perceptions in this study emphasizes the importance of teaching medical staff appropriate patient interaction techniques. The study's findings can assist hospitals in developing more effective marketing plans. Furthermore, the results of this study can serve as a basis for the creation of more informed health policies by the government and relevant organizations.

Keywords: Service Quality, Consumer Perception, Health Facility, Consumer Satisfaction, SEM, SmartPLS, Hospital, Indonesia. JEL Classification: A11; A12; C10; C12; C30.

1. INTRODUCTION

t is crucial to understand how health facility impact patient perceptions of hospital satisfaction and service quality in Indonesia in order to enhance patient satisfaction in hospitals. Good and high-quality medical facility can improve patient satisfaction, provide patients with a positive experience, and enhance the hospital's reputation (Sabriyah et al., 2016); (Sudaryanto et al., 2024). When patients' needs and goals are met, they can be satisfied. However, patients experience disappointment when their expectations and requirements are not fulfilled (Sumaedi et al., 2016); (Indrawati et al., 2024). Various factors, such as the hospital's amenities and service quality, can influence patient satisfaction (Imran et al., 2023); (Martha Hendrati et al., 2024; Utari et al., 2024). This study aims to explore the relationship between patients' perceptions of current healthcare facility and the quality of services they receive from hospitals, and how these relationships impact patient satisfaction (Swain & Kar, 2018); (Prasetio et al., 2024; Sabihaini et al., 2024). A good and high-quality hospital can play a significant role in mediating patients' satisfaction with the quality of services provided. To meet patient needs, hospitals must offer sufficient and high-quality facility (Amin & Zahora Nasharuddin, 2013); (Hendrati et al., 2024; Sabihaini et al., 2023).

The lack of medical facility in hospitals is a phenomenon that can lead to patient dissatisfaction and lower levels of patient satisfaction (Amin & Zahora Nasharuddin, 2013); (Laily et al., 2023; Shabbir et al., 2023). According to this research, hospital management should recognize the importance of health facility in improving patient satisfaction levels (McKinnon et al., 1998); (Asyik et al., 2023; Eko Prasetio et al., 2023). Hospitals can enhance patient satisfaction by improving the quality of services they offer and making necessary improvements to their facility, while understanding how health facility impact patient perceptions of satisfaction (Das et al., 2021); (Nuswantara et al., 2023; Prasetyo et al., 2023). In this case, factors to consider when enhancing hospital health facility include: 1. Providing sufficient and modern amenities, such as comfortable waiting areas, clean restrooms, well-organized treatment areas, and the latest medical technology. 2. Enhancing regular cleaning, proper management of medical waste, infection control, as well as overall cleanliness and sanitation in the hospital environment. 3. Providing kind and compassionate care from both medical and non-medical staff, including a friendly attitude, concern, and understanding of patient requirements and preferences (Ramli et al., 2018); (Hendrati et al., 2023; Prasetyo et al., 2022). Health facility play a crucial mediating role between patient perceptions of hospital satisfaction and service quality. Patients' satisfaction with care in hospitals is influenced by

good and high-quality health facility.(Tan et al., 2019); (Asyik et al., 2022; Kalbuana et al., 2022).

The presence of good-quality healthcare facility can positively impact patients' perceptions of hospital patient satisfaction, as previous research has shown. This research has highlighted the role of health facility in mediating service quality and shaping patients' contentment with their hospital experience (Fadhilah & Ayubi, 2023). It has been found that individuals who are satisfied with the medical facility at the hospital are more likely to give positive ratings to the services provided and believe that there is room for improvement (Fadhilah & Ayubi, 2023); (Sudaryanto et al., 2022; Tjaraka et al., 2022). Furthermore, well-maintained medical facility can help reduce waiting times for patients and enhance the effectiveness and efficiency of treatments, ultimately leading to improved patient satisfaction (Merawati et al., 2021a); (Prasetio et al., 2021; Utari, Sudaryanto, et al., 2021).

Therefore, in order to ensure service quality and promote patient satisfaction, hospitals need to continuously strive to improve their facility. This can include providing clean restrooms, comfortable beds, welcoming waiting areas, and ample parking spaces, among other amenities_(Aliyyah, Siswomihardjo, et al., 2021; Indrawati et al., 2021). Additional research has shown that patients may feel dissatisfied with their care if they encounter subpar medical facility (Merawati et al., 2021a); (Endarto, Taufiqurrahman, Kurniawan, et al., 2021; Utari, Iswoyo, et al., 2021). To address this issue and ensure that patients are happy and receive high-quality care, hospitals must focus on making improvements to healthcare facility that do not meet expectations_(Endarto, Taufiqurrahman, Suhartono, et al., 2021; Prasetyo et al., 2021). Studies have also indicated that the cleanliness of medical facility, including well-maintained sleeping quarters, spotless restrooms, and inviting waiting areas, can greatly enhance patients' experiences and perceptions of hospital services (Abadi et al., 2021; Prasetyo et al., 2021). Additionally, having well-maintained medical facility can also contribute to more efficient recording of hospital staff performance, thereby improving overall treatment efficiency and quality for patients. In this regard, hospitals should ensure that they have sufficient medical facility to meet the needs of their patients.

Marketing theory suggests that patient satisfaction can be positively influenced by the quality of healthcare facility (Kalbuana, Prasetyo, et al., 2021; Prasetyo, Endarti, et al., 2021). Hospitals can enhance patient satisfaction by providing high-quality medical amenities (Aliyyah, Prasetyo, et al., 2021; Rusdiyanto et al., 2021). Adequate and excellent medical facility in hospitals can contribute to patients' well-being and increase their satisfaction with hospital services (Kalbuana, Suryati, et al., 2021; Prasetyo, Aliyyah, Rusdiyanto, Nartasari, et al., 2021a). Therefore, it is essential to improve the quality of healthcare services in hospitals, as this plays a crucial role in shaping patient perceptions of satisfaction and service quality (Ayuningsih et al., 2019); (Prasetyo, Aliyyah, Rusdiyanto, Chamariah, et al., 2021; Prasetyo, Aliyyah, Rusdiyanto, Nartasari, et al., 2021b). According to (Luwihono et al., 2021; Prasetyo et al., 2021) high-quality healthcare facility can enhance patients' experiences, elevate their satisfaction with the services they receive, and improve the performance records of hospital staff in terms of efficiency.

The research problem can be stated as follows, based on the description of earlier studies given above: What role do health facility play in shaping patient perceptions of hospital patient satisfaction and service quality in Indonesia? The purpose of this study is to investigate and assess how health facility in Indonesia influence patient perceptions of hospital patient satisfaction and the quality of services provided. Hospitals can enhance patient satisfaction by providing excellent care and by understanding and improving the factors that contribute to patient perception of suitable healthcare facility.

Given the importance of research in contributing to current knowledge, this study has specific limitations. The study aims to examine how health facility mediate the relationship between patient perceptions of hospital patient happiness and service quality in Indonesia. Furthermore, this study is limited to the analysis of variables related to hospital patient satisfaction, health facility, patient perceptions, and service quality in Indonesia from 2022 to 2023.

2. HEORETICAL BASIS AND DEVELOPMENT OF HYPOTHESES

2.1. Marketing Theory

Over the past few decades, marketing theory (Kotler, 2012); (Rusdiyanto, Karman, et al., 2020; Susanto et al., 2021) has enhanced the academic discipline of marketing by introducing several essential principles that have broadened the understanding and use of marketing. (Kotler, 1994); (Hidayat et al., 2020; Prabowo et al., 2020) provides four distinct definitions of marketing, including megamarketing, marketing for non-profit organizations, and widening the definition of marketing to include social issues. Additionally (Kotler, 1994); (Juanamasta et al., 2019; Rusdiyanto, Agustia, et al., 2020) has created a competitive strategy model that illustrates several competitive marketing strategies through computer analysis of optimal marketing strategies (Kirby, 1977). As part of the effort to rethink marketing, the concept of social marketing and marketing is being discussed. According to (Kotler, 1994), marketing now emphasizes social influence and reducing specific types of consumption for the benefit of society rather than solely focusing on sales. Kotler has also developed the megamarketing strategy, which combines elements of public power, politics, and commercial strategy to promote goods in fiercely competitive markets governed by the state (Kotler, 1994). Marketing theory (Kotler, 1994) has significantly impacted how marketers and businesses perceive and apply marketing strategies. In modern marketing, concepts such as positioning, targeting, and market segmentation still play a crucial role and are frequently utilized.

The variables of service quality, patient happiness, health facility, and patient perception are interconnected in the context of marketing theory. The satisfaction of patients can be influenced by the quality of service they receive, which in turn affects their perception of medical facility. Healthcare facility play a significant role in patient satisfaction ratings and service quality (Ariany & Lutfi, 2021). Inpatient administration services have a significant correlation with patient and family satisfaction (Wulandari et al., 2017). Health facility are crucial in raising public awareness and promoting health, particularly in relation to illnesses like rabies, which can improve the public's perception of healthcare (R. Novita, 2019). Patient satisfaction at health clinics is positively correlated with the quality of medical treatments provided (Sunarsih & Yuniastini, 2016). During the Covid-19 pandemic, patient satisfaction levels are correlated with perceptions of treatment quality (Salafas, 2022). Enhancing the level of service quality, including elements such as dependability and responsiveness, can enhance patients' satisfaction levels. High-quality healthcare facility and services that meet patient expectations influence patient loyalty and sustained happiness.

2.2. Hypothesis Development

2.2.1. The Relationship between Health Facility and Hospital Patient Satisfaction

In order to satisfy customers, marketing theory (Kotler, 1994) places a strong emphasis on identifying and meeting customers' needs and desires. Within the hospital setting, medical facility play a significant role in influencing patient satisfaction ratings (Lega, 2006). Quality healthcare facility can enhance patient satisfaction in hospitals. This can be achieved through features such as easy access, prompt service, advanced medical technology, comfortable and clean surroundings, and knowledgeable and compassionate staff. Good medical facility not only improve patients' perceptions of safety and comfort, but also create a positive atmosphere and instill trust that they will receive high-quality care (Djaya et al., 2018). When patients are pleased with the medical services provided by the hospital, they are more likely to feel respected and cared for as individuals. This, in turn, increases the likelihood that they will continue as regular patients and refer new patients to the facility. In the face of intense competition, quality service has become crucial for both competing in the health services sector and retaining patients (Mohammad Mosadeghrad, 2013).

Hospital patient satisfaction is influenced by healthcare facility, according to previous studies (Zulfikar et al., 2022). This study aims to investigate the connection between hospital patient satisfaction and healthcare facility. The findings can enhance our understanding of how healthcare facility impact hospital patient happiness. In this study, hospital patient satisfaction is the dependent variable, while healthcare facility are the independent variable. The main focus is on the association between high hospital patient satisfaction rates and quality healthcare facility. Previous research has shown that healthcare facility have a positive impact on hospital consumer satisfaction. This suggests that an increase in healthcare facility will positively affect hospital patient satisfaction, while a decrease will have a negative impact (Amin & Zahora Nasharuddin, 2013). Moreover, prior studies have demonstrated that high-quality healthcare facility can increase patient loyalty, improve the hospital's reputation, and contribute to a growth in public trust (Asnawi et al., 2019).

However, other studies suggest that the quality of healthcare facility does not affect hospital patient satisfaction. These results clarify that there is no meaningful or constructive relationship between the two factors (Djaja & Maniksulistya, 2010). In other words, subpar healthcare facility do not significantly or favorably impact hospital patient satisfaction. Therefore, this study aims to further investigate this issue and determine the connection between hospital patient happiness and health facility (Imran et al., 2023). It is anticipated that this study will provide evidence of a correlation between hospital patient satisfaction and healthcare facility (Merawati et al., 2021b). Based on the theoretical framework and previous research mentioned earlier, the first hypothesis can be stated as follows:

 H_1 : Health facility have a positive influence on patient satisfaction in hospitals.

2.2.2. Relationship Between Patient Perceptions and Hospital Facility

According to marketing theory (Kotler, 1994), there are ways to improve patients' perception of quality healthcare services. Customer happiness, as per marketing theory, can be achieved by recognizing and fulfilling their needs and aspirations (Rahman et al., 2021). High-quality healthcare facility should provide convenient access, prompt service, state-of-the-art medical equipment, clean and comfortable environments, and knowledgeable and welcoming staff. Furthermore, studies suggest that patient satisfaction is influenced by their perception of hospital facility (Amin & Zahora Nasharuddin, 2013). By providing high-quality care and adequate medical facility, hospitals can significantly impact patients' opinions. When patients feel they are receiving proper treatment and care, they are more likely to be pleased and comfortable with the hospital's facility. This positive relationship between patients and hospitals not only enhances patient satisfaction (Tengilimoglu et al., 2001), but also influences hospital recommendations and patient loyalty. Positive impressions of a hospital's facility often lead to loyal patients and referrals to others (Rahman et al., 2021).

The results of previous studies provide an explanation for why perceptions have a positive impact on hospital health facility. Marketing theory now emphasizes the importance of identifying and meeting customers' needs and desires in order to achieve their satisfaction (Zulfikar et al., 2022). Patient perception and satisfaction in hospital health facility are influenced by various factors, including staff knowledge and friendliness, modern medical equipment, cleanliness, comfort, and ease of access (Chen et al., 2016). This study aims to enhance our understanding of the relationship between hospital health facility and patient perceptions by building upon previous research. Specifically, this study examines how patient perceptions contribute to hospital loyalty and patient happiness. The independent variable to be examined is patients' opinions on medical facility, while patient

satisfaction and hospital loyalty serve as the dependent variables (Merawati et al., 2021b).

According to previous studies (Fauzi & Abidin, 2012), patient perceptions do not have an impact on hospital health facility. In this study, we aim to investigate the relationship between hospital health facility and patient perceptions. The results of this study will provide a deeper understanding of the factors that influence hospital loyalty and patient satisfaction. Furthermore, this study will help us gain a clearer understanding of how to improve the quality of hospital care to better meet the wants and needs of patients (Amin & Nasharuddin, 2013). The research findings indicate that a higher patient perception does not necessarily result in fewer hospital health facility, while a lower patient perception does not necessarily lead to better hospital health facility. However, in order to validate the findings of this study, a larger and more representative sample, as well as a more comprehensive statistical analysis, are required (Tuami et al., 2018). Building on the theoretical framework and previous research mentioned above, the second hypothesis can be stated as follows:

 H_2 : Patient perceptions have a positive influence on hospital facility.

2.2.3. The Relationship Between Patient Perceptions and Hospital Patient Satisfaction

According to (Kotler, 1994), marketing theory is frequently applied in various industries, including the health services industry. In this context, research often focuses on the connection between patient satisfaction levels and their perceptions of the treatments they receive. Research conducted in South Korea found that patient satisfaction is mainly influenced by service quality rather than service value. Moreover, service quality and value significantly impact patients' behavioral intentions (Choi et al., 2004). The level of patient satisfaction with the care they receive directly correlates with the job satisfaction of employees, particularly nurses. Low job satisfaction can have a negative impact on patient loyalty, satisfaction, and the quality of care provided (Atkins et al., 1996).

However, research examining the literature on patient satisfaction challenges the application of this idea, citing lack of consistency, poor validity, and low dependability. Therefore, it is recommended that the health sector pays more attention to perceived service quality by considering specific concepts and models from the service marketing literature (Gill & White, 2009). Interactions between service providers and consumers play a significant role in interpersonal-based service encounters, and trust influences service quality and consumer satisfaction. This is demonstrated in research comparing patient perceptions of interpersonal medical services, service quality, patient trust, and satisfaction (Chang et al., 2013). According to marketing theory, patient happiness and perceived service quality are closely related, and this holds true for the healthcare industry as well. In order to enhance patient happiness, healthcare providers may need to reassess and modify their marketing and service quality management approaches. This will not only improve the patient experience but also have a positive impact on patient loyalty and behavioral intentions.

Patient satisfaction and trust are influenced by how patients perceive the quality of healthcare treatments (Alrubaiee & Alkaa'ida, 2011). According to experiences in chronic pain clinics, patient perceptions of provider quality, which are influenced by strong patient-physician interaction qualities, significantly impact patient satisfaction (Trentman et al., 2013). However, research by (Williams, 1994) suggests that patient satisfaction may only create the illusion of consumer satisfaction and often maintains the status quo. This indicates that patient perceptions may contain important beliefs that satisfaction alone cannot capture. In the outpatient clinical setting, perceived service quality has a significant effect on patient satisfaction, but the aspects of service quality may vary over time, suggesting gaps in the patient care cycle (Johnson et al., 2016). It is important for research and clinical practice to consider the complexity and range of factors that influence the relationship between patient satisfaction and the perceived quality of healthcare. Research shows that enhancing the quality of engagement and communication between medical professionals and patients can greatly improve patient contentment. Taking into account the theoretical framework and previous studies mentioned above, the third hypothesis can be formulated as follows:

 H_3 : Patient perceptions have a positive influence on hospital patient satisfaction.

2.2.4. Relationship Between Service Quality and Hospital Health Facility

Hospital health facility and service quality are closely connected, as explained by marketing theory (Kotler, 1994). For a hospital to provide high-quality care, it is essential to have adequate and comprehensive health facility, along with sufficient medical and non-medical services (Santi et al., 2017). When patients receive care in well-maintained hospitals, it creates a positive experience that instills confidence and comfort in the medical staff. Moreover, combining good services with sufficient medical facility can increase patient satisfaction and improve the hospital's reputation (Janmaimool et al., 2024). Other factors that contribute to service quality include effective communication between patients and medical staff, timely treatment, cleanliness of the surroundings, and convenience of administrative procedures. According to (Mariyam et al., 2024), all of these aspects influence how patients perceive the quality of medical services and amenities in a hospital. Consequently, hospital administration plays a critical role in ensuring that service quality remains comparable to that of other medical facility.

Prior studies have shown that service quality has a positive impact on hospital health facility. This means that when service quality is increased, there is an improvement in hospital health facility, and when service quality decreases, there is a reduction in hospital health facility (Abkar et al., 2024). Therefore, it is crucial to take an integrated approach in managing both hospital health facility and service quality. Hospital administration must

ensure that they not only improve the standard of care but also update and enhance hospital facility according to patient needs and technological advancements (Suter et al., 2009).

There are several ways to enhance health facility. These include updating medical equipment, maintaining infrastructure, improving patient accessibility, and ensuring the upkeep of the hospital environment. Additionally, hospital human resources need to be well-trained and developed so that they can deliver high-quality services that align with the existing facility. Health facility that are managed with integrity, focusing on both service quality and management, create an atmosphere that promotes safety, comfort, and overall patient satisfaction (Janmaimool et al., 2024).

However, other studies suggest that the quality of hospital health facility is not influenced by service quality (Merawati et al., 2021a). Therefore, improving service quality does not directly lead to better hospital facility, and reducing service quality does not necessarily result in a decline in hospital facility (Tarjo, 2020). Currently, there are two opposing views on the relationship between hospital health facility and service quality. However, it is evident that the interaction between hospital health facility and service quality significantly impacts patient experience and satisfaction (Renaldo et al., 2020). Although some studies suggest that hospital health facility can be improved independently of service quality, it is still important to consider service quality factors (Nyoman Ayuningsih, 2019). The ultimate objectives of high service quality are positive patient experiences and increased trust in healthcare (Das et al., 2021). Therefore, it is crucial to consistently assess and monitor the quality of hospital medical services and infrastructure. Based on the theoretical framework and previous studies mentioned above, the fourth hypothesis can be formulated as follows:

H₄: Service Quality Has a Positive Influence on Hospital Health Facility

2.2.5. The Relationship between Service Quality and Hospital Patient Satisfaction

According to marketing theory (Kotler, 1994), customer satisfaction is the result of comparing customers' expectations of performance or service with what they actually receive. In a hospital setting, patient satisfaction refers to how well the hospital's services meet the expectations of the patient (Zulfikar et al., 2022). High-quality care directly affects patient satisfaction in a hospital. If the medical and non-medical treatments patients receive meet their expectations, they will feel satisfied. Good medical facility also play a significant role in improving patient satisfaction (Dewi et al., 2022). When hospital amenities are sufficient and comprehensive, patients feel at ease and confident while receiving medical care. Furthermore, patient satisfaction can be increased by providing high-quality services along with adequate medical facility (Zulfikar et al., 2022). In order for hospital staff to deliver high-quality services that align with the current infrastructure, it is necessary to enhance their training and development. Health facility that operate with integrity create an atmosphere that promotes patient safety, comfort, and overall contentment (B. Mohamed & Azizan, 2015).

Prior studies have shown that the quality of service in hospitals has a positive effect on patient satisfaction. This means that as service quality improves, patient satisfaction increases, and as service quality declines, patient satisfaction decreases (Merawati et al., 2021a). These findings suggest that service quality significantly influences patient satisfaction in hospitals. Therefore, hospital administrators must ensure that patient expectations are met while also improving and maintaining the quality of care. Furthermore, the availability of adequate medical facility contributes to higher levels of patient satisfaction (Tarjo, 2020). When facility are comprehensive and sufficient, patients feel more comfortable and confident in receiving medical care. Patient satisfaction is not only influenced by the quality of medical facility and services but also requires continuous monitoring and assessment (Amin & Zahora Nasharuddin, 2013). This allows for the identification of areas in need of improvement and helps gauge the level of patient satisfaction with the provided facility and services (Sumaedi et al., 2016).

However, some studies have found that there is no positive impact on hospital patient satisfaction from service quality. This means that there is no relationship between service quality and the happiness of hospital patients. In other words, improving service quality does not affect the level of patient satisfaction, and vice versa. The ultimate goal of hospital healthcare is to enhance the quality of life for patients (B. Mohamed & Azizan, 2015). Therefore, it is crucial for hospital administration to continuously assess and improve the quality of facility and services. Collaboration among different departments within the hospital is also essential in order to achieve the highest standards of healthcare (M. F. Ahmad et al., 2017). Additionally, staying up-to-date with technological advancements helps to enhance the effectiveness and quality of healthcare services. By integrating technology in various areas of healthcare, such as electronic health record systems, telemedicine, and advanced medical equipment, it is possible to improve diagnostic accuracy, optimize efficiency in medical procedures, and expedite access to essential health services for patients (Laurenza et al., 2018). Considering the theoretical framework and previous studies mentioned above, the fifth hypothesis can be stated as follows:

 H_5 : Service quality has a positive influence on patient satisfaction in hospitals.

2.2.6. The Role of Health Facility in Mediating Patient Perceptions and Hospital Patient Satisfaction

Physical hospital amenities play a vital role in influencing patient happiness and perception, as stated by marketing theory (Kotler, 1994). (Yuliantine et al., 2018) further emphasize that pleasant surroundings and high-quality healthcare facility can enhance patients' trust and confidence in the hospital's services. However, improving the quality of hospital amenities and healthcare services can be challenging due to various obstacles. One significant obstacle is the shortage of human resources (Samuel et al., 2021). To ensure that hospital staff can deliver high-quality care, continuous training is necessary. Unfortunately, funding and manpower constraints

often hamper the provision of sufficient training. Additionally, substantial financial investments are essential for the development and maintenance of healthcare facility (Hassanain et al., 2013). Hospitals must ensure that their existing facility are suitable and can meet the needs of patients. Equally important is the availability of state-of-the-art medical equipment to perform medical procedures successfully and efficiently (Kabeta et al., 2023).

According to previous studies (Wagner & Bear, 2009), the presence and quality of healthcare facility have a significant impact on patients' satisfaction with hospitals. In order to address budgetary and human resource constraints, hospitals can consider partnering with educational or training institutions to provide staff training (Bajwa et al., 2021). Furthermore, partnerships with the business sector or financial organizations can help secure the necessary funding for the growth of health facility (R. D. Novita & Damayanti, 2020). Additionally, the use of technology in healthcare facility administration can enhance resource management, including the maintenance of medical equipment. By implementing an integrated management system that allows real-time tracking of building upkeep and condition, health facility can prevent damage or disruptions (Ismail, 2019). Collaboration between departments, the private sector, and academia is crucial in sustaining an adequate number of medical facility and delivering high-quality services in hospitals. Through these partnerships, hospitals aim to maintain their current trend of increasing patient satisfaction and providing the best possible care that meets patients' expectations (Izadi et al., 2017).

Health facility do not mediate patients' views of hospital patient satisfaction, as shown in other studies (Djaja & Maniksulistya, 2010). However, the importance of healthcare facility in maintaining the quality of hospital services cannot be disputed. The level of service provided by the hospital is a significant factor in improving patient satisfaction. To overcome obstacles in improving the quality of hospital medical services and facility (Siregar & Marliyah, 2022), a solid and well-thought-out plan is necessary. Hospital administration can prioritize training and HRD initiatives as a starting point. Training that meets the needs of hospital staff can be provided with the help of educational or training institutes. Additionally, hospitals can seek financial support by forming partnerships with the business sector or financial institutions to sustain and enhance their medical facility. Moreover, the use of technology in healthcare facility management can aid in effective resource management. Collaborative efforts among departments, the private sector, and educational institutions are essential for seamless integration in maintaining the quality of health services and facility. The expected outcomes of this collaborative endeavor are increased patient satisfaction and health services that meet patient expectations (Santosa & Nugraha, 2022). Based on the theoretical framework and previous studies mentioned above, the sixth hypothesis can be formulated as follows:

H₆: The Role of Health Facility in Mediating Patient Perceptions of Hospital Patient Satisfaction

2.2.7. The Role of Health Facility in Mediating Service Quality and Hospital Patient Satisfaction

According to marketing theory (Kotler, 1994), the physical attributes or amenities of a company can influence how customers perceive its satisfaction. This also applies to hospital health services. The presence of high-quality healthcare facility directly affects patients' opinions of hospital services (Santosa & Nugraha, 2022). If patients are provided with contemporary, pleasant, and clean facility, they will be happier. Additionally, well-equipped institutions can enhance the effectiveness of health services by utilizing integrated information systems and cutting-edge medical technology (Merawati et al., 2021a). Hospitals with well-maintained facility are able to offer patients more effective and efficient care, which increases patient satisfaction.

According to previous studies, there is a significant connection between hospital patient satisfaction and service quality, with health facility playing a crucial role (Merawati et al., 2021a). Patients generally receive high-quality care from hospitals that have excellent medical facility. These facility support an efficient and successful service process, as well as provide patients with a comfortable and safe environment. However, other studies suggest that health facility do not have a significant impact on how patients perceive hospital services (Merawati et al., 2021a). While well-maintained medical facility can enhance patient comfort, most patients are more concerned with the hospital's ability to diagnose problems, communicate clearly, connect with medical professionals, and provide personal attention. In other words, while high-quality medical facility are important, they are not the primary factor that determines patient satisfaction (Amin & Zahora Nasharuddin, 2013).

Regarding human resources, numerous studies also demonstrate that interactions between patients and physicians and nurses have a greater impact on the quality of care than the training that hospital staff members receive (Naidu, 2009). Even with consistent training, providing effective care is challenging if interactions with medical staff are subpar. Research generally indicates that the value of medical facility and hospital staff training may not be as high as previously believed (Thomas, 2009). Therefore, a comprehensive reevaluation of the development strategy for hospital health facility and health services is necessary.

While research has revealed that health facility may not have a significant impact on patients' perceptions of hospital services, they still play a crucial role in promoting service quality. Good amenities can help create a comfortable and secure atmosphere for patients. This makes the role of healthcare facility as a mediator between hospital patient satisfaction and service quality more complex. Communication with medical personnel, diagnostic skills, clarity of information, and personalized attention from the hospital are the primary determinants of patient satisfaction, according to research (Tan et al., 2019). To achieve the highest level of patient satisfaction, a more integrated approach is needed for the development of hospital health facility and health services. One tactic that can be used is increasing cooperation between hospital departments, the commercial sector, and educational institutions in the creation of training and human resource development

programs (Ariyanto et al., 2020). Considering the theoretical framework and earlier studies mentioned above, the seventh hypothesis can be formulated as follows:

H7: The Role of Health Facility in Mediating Service Quality on Hospital Patient Satisfaction

3. RESEARCH METHODS

The hypothesis of this research is that health facility in public hospitals in Indonesia, specifically in the city of Gresik, play a crucial role as mediators of service quality and patient satisfaction. In order to gather quantitative data for this study, an online survey was created using a Google form and shared through social media. The questionnaire used a Likert scale from 1 to 5, with the scores representing different levels of agreement or disagreement (1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, and 5 = Strongly Agree). Purposive sampling was employed to select 99 participants, mostly from the city of Gresik, who were asked to complete the online survey. The survey was distributed to both outpatient and inpatient facility across Indonesia. The sampling strategy used in this study followed the Slovin's formula (Tejada & Punzalan, 2012). The statistical data analysis involved two techniques: inferential statistical analysis and descriptive statistical analysis. Descriptive statistical analysis was used to determine the average and standard deviation of the respondents' evaluations and to characterize their traits. Inferential analysis, specifically Structural Equation Modeling of Partial Least Squares (SEM-PLS), was conducted using the SmartPLS software version 3.0 in order to process the data.

To conduct prediction studies, explore, or develop structural models, researchers often employ Structural Equation Modeling of Partial Least Squares (SEM-PLS). This multivariate statistical technique calculates the influence of variables simultaneously (Hair et al., 2019). In this study, SEM-PLS was chosen for two reasons: firstly, it does not assume a specific data distribution, such as a normal distribution; secondly, the sample size is limited to 99 respondents (Hair et al., 2019). The mediating variable used in this study is health facility.

The measurement model, also known as the outer model, and the structural model, sometimes referred to as the inner model, are assessed to evaluate the applicability and goodness of the Structural Equation Modeling of Partial Least Squares (SEM-PLS) model. The criteria used to evaluate the outer model are as follows: convergent validity with Average Variance Extracted (AVE) > 0.50, reliability level with Cronbach's alpha and Composite Reliability at a minimum of 0.70, and outer loading > 0.60 (Chin, 1998). Discriminant validity is indicated by HTMT (Heterotrait Monotrait Ratio) < 0.90 (Hair et al., 2017). The significance testing of the bootstrapping process reveals the evaluation of the inner model, with a p-value of less than 0.05 (5%) indicating significance. The term "effect size f square" refers to the square of the mediation coefficient, with 0.01 for low, 0.075 for medium, and 0.175 for high values, as obtained by (Lachowicz et al., 2018); (Ogbeibu et al., 2021). (Hair et al., 2017). provided the F square direct effect values of 0.02 for low, 0.15 for medium, and 0.35 for high. The R Square values are as follows: 0.19 for low, 0.33 for moderate, and 0.67 for high (Chin, 1998). A blindfolding Q square > 0 indicates predictive relevance, according to (Hair et al., 2017). Additionally, the Goodness of Fit Index (Sarstedt et al., 2020), PLS Predict (Hair et al., 2019), and SRMR (Standardized Root Mean Square Residual) between 0.08 and 0.10, indicating a good fit, confirm the suitability of the PLS model (Schermelleh-Engel et al., 2003).

Patient satisfaction, perception of the patient, health facility, and service quality are all interconnected. Health facility play a crucial role in this relationship. A health facility is defined by certain characteristics such as having a treatment area, physicians (including specialists), and full office amenities (Supranoto & Suparman, 2022). Service quality, on the other hand, can be measured through various indicator dimensions, namely tangible aspects, assurance, responsiveness, empathy, and consistency, as stated by (Yogaswara, 2022). When it comes to the patient's perception, it can be broken down into three aspects: sensation, attention, and interpretation, as identified by (Putra et al., 2022). Patient satisfaction, which is a key factor in this research model, consists of indicator dimensions such as experience, comparison, hope, and performance, as highlighted by (Bali, 2022). Based on the information provided, the research model can be summarized as follows:

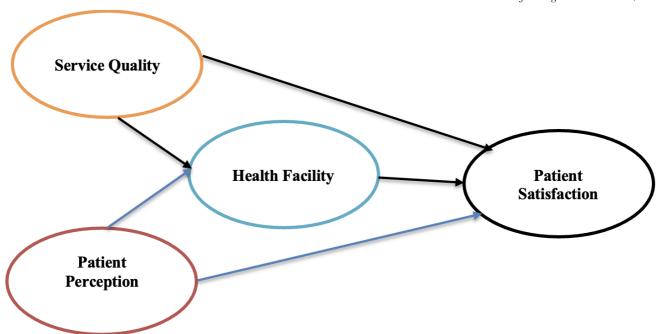


Figure 1: Research Model.

4. RESEARCH RESULTS AND DISCUSSION

4.1. Research Result

In the analysis of data using Structural Equation Modelling of Partial Least Squares (SEM-PLS), a step-by-step approach is followed to find a suitable measurement model. The model hypothesis test is then conducted, and it must be approved at a significance level of 5%. The participants in this study are hospital visitors in Surabaya, Indonesia. Here are the details:

Table 1: Research Respondent Data.

No	Respondent	Profile	Amount	Percentage	
1	Gender				
	1	Man	31	31, 3%	
	2	Woman	68	68,7%	
		Total	99	100%	
2	Age				
	1	17-24 Year	16	16,2%	
	2	25-34 Year	34	34,3%	
	3	35-49 Year	43	43,4%	
	4	> 50 Year	6	6,1%	
		Total	99	100%	
3	Education				
	1	Junior high school	2	2.0%	
	2	Senior High School	47	47.5%	
	3	Diploma	19	19.2%	
	4	Bachelor degree	27	27.3%	
	5	Stratum 2	2	23.0%	
	6	Stratum 3	2	2.0%	
		Total	99	100%	
4	Visit				
	1	1-5 Times	69	69.7%	
	2	6-10 Times	6	6.1%	
	3	≥ 10 Times	24	24.2%	
		Total	99	100%	
5	Work				
	1	Government employees	24	24.2%	
	2	Private employees	38	38.4%	
	3	Students	12	12.1%	
	4	Etc	12	12.1%	
	5	Doesn't work	13	13.1%	
		Total	99	100%	
6	Facility				
	1	Outpatient	87	87.9%	
	2	Inpatient	12	12.1%	
		Total	99	100%	

Based on the table above, it is evident that the majority of the research sample consisted of 68 people or 68.7% who were female, while 31 people or 31.3% were male. This suggests that female patient visitors are more prevalent, possibly because women tend to prioritize their health more. The age group over 50 years accounted

for six people or 6.1%, making it the largest group, followed by the age group 35-49 years with 43 people or 43.4%. The third largest group was the age group 25-34 years, consisting of 34 people or 34.3%, and the fourth largest group was the age group 17-24 years, comprising 16 people or 16.2%. These findings indicate that visitors are primarily individuals aged 35-49 years, as people in this age range are more susceptible to illness due to unhealthy lifestyle choices, such as poor dietary habits and lack of physical activity. Among the respondents, 47 people or 47.5% had a high school education level, while 27 people or 27.3% had a bachelor's degree (Strata 1). The third largest group, consisting of 19 people or 19.2%, had a Diploma education level. In contrast, the smallest group was composed of only 2 people or 2.0% of the total respondents who had a Strata 2 or Strata 3 education level. These findings suggest that visitors mostly have a high school education, which indicates a lower level of education among the respondents. Higher education typically equips individuals with knowledge about the importance of maintaining a healthy diet and lifestyle. The group of respondents with 1-5 medical visits accounted for 69 people or 69.7% of the sample, while the second largest group, with ≥ 10 medical visits, consisted of 24 people or 24.2%. The third largest group, with 6-10 medical visits, included six people or 6.1%. These findings indicate that visitors primarily have 1-5 medical visits, which suggests that these visits are used for optimizing and maintaining health. Among the respondents, 38 people or 38.4% were private employees, 24 people or 24.2% were civil servants, 13 people or 13.1% were unemployed, and 12 people or 12.1% were students or in other occupations. These findings imply that visitors are mostly private employees, who are likely exposed to various safety and health risks in their workplaces. Furthermore, 87 people or 87.9% of the respondents received outpatient care, while 12 people or 12.1% received inpatient care. This indicates that outpatient visitors dominate general hospital visitors, as outpatient care is more cost-effective compared to inpatient care.

4.1.1. Outer Model Test

The first step in analyzing the outer model is to examine the outer loading, which should be at least 0.60. If the outer loading is less than 0.60, the estimation results for the items assessing patient happiness, health facility, service quality, and patient perceptions are considered invalid. The estimation results of all PLS models (Chin, 1998) will only show outer loadings > 0.60, which are considered valid.

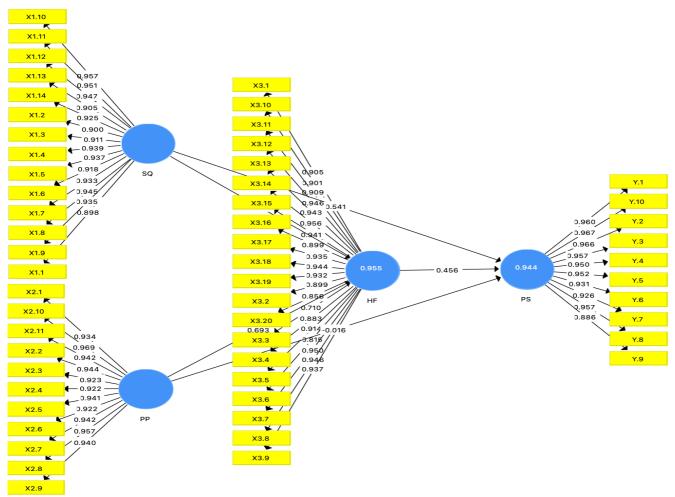


Figure 2: Outer Model Testing

Table 2: Descriptive Statistics, Outer Loading, Reliability Level and Convergent Validity

Variable	Mean Standard Deviation	&	Outer Loading	Cronbach's Alpha	Composite Reliability	Average Variance Extracted (AVE)
Health Facility (HF)	0,74 (0,21)		0,710 - 0,950	0.989	0.989	0.824
Patient Perception (PP)	0,41 (0,12)		0,922 - 0,957	0.987	0.988	0.883
Patient Satisfaction (PS)	0,37 (0,11)		0,886 - 0,966	0.987	0.988	0.894
Service Quality (SQ)	0,53 (0,15)		0,898 - 0,957	0.988	0.989	0.863

The degree of internal consistency is achieved, as demonstrated by Cronbach's alpha and Composite Reliability > 0.70 (reliable), which indicates reliability. The accepted convergent validity is achieved when the variance of indicators in patient satisfaction, service quality, patient perception, and health facility exceeds 50%. Convergent validity is measured by AVE, and each research variable has an AVE value above 0.50 (Hair et al., 2019).

Table 3: Discriminant Validity of HTMT

Variable	Health Facility (HF)	Patient (PP)	Perception	Patient Satisfaction (PS)	Service Quality (SQ)
Health Facility (HF)	0.908				
Patient Perception (PP)	0.975	0.940			
Patient Satisfaction (PS)	0.961	0.953		0.945	
Service Quality (SQ)	0.963	0.971		0.964	0.929

The HTMT is used because it has been found to have better discriminant validity compared to the Fornell Lacker and Cross Loadings criteria measures, as stated by (Hair Jr et al., 2021). According to the results of the model estimates, discriminant validity is achieved when the HTMT of the variable pair is less than 0.90. The variables have lower variances compared to other variable indicators and larger variations compared to each indicator that makes up the variable.

4.1.2. Inner Model Test

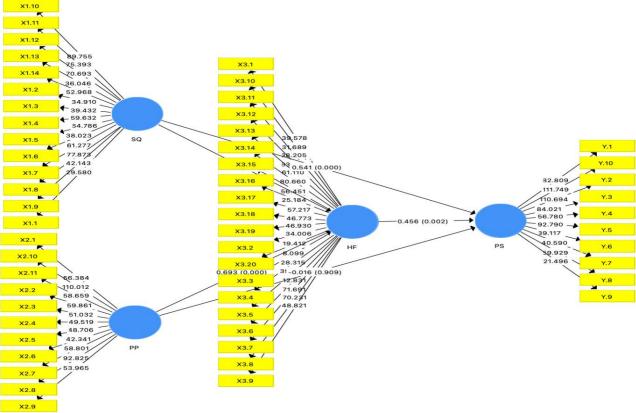


Figure 3: Hypotheses Testing.

4.1.3. Goodness of Fit Model

A structural equation modeling analysis focused on prediction and exploration is referred to as Structural Equation Modeling of Partial Least Squares (SEM-PLS). Consequently, several statistical metrics, such as the

goodness of fit index (Henseler & Sarstedt, 2013) and SRMR (Standardized Root Mean Square Residual) (Hair Jr et al., 2017), have been developed to determine whether the overall model is satisfactory.

Table 4: Goodness of Fit Model.				
Indeks Goodness of Fit	SRMR			
0.879	0.030			

The Goodness of Fit Index (GoF Index) evaluates both the measurement model and structural model within the overall model. It is calculated by taking the geometric mean communality multiplied by the mean R square. According to (Wetzels et al., 2009), GoF index values are interpreted as follows: 0.1 for low GoF, 0.25 for mid GoF, and 0.36 for high GoF. In this case, the computed GoF model value is 0.879, indicating a high GoF category. Additionally, the PLS model fits the data well, as demonstrated by the Standardized Root Mean Square Residual (SRMR) value of 0.030. This value is less than 0.10 (10%) according to (Schermelleh-Engel et al., 2003).

4.1.4. PLS Predict

PLS Predict to SEM analysis aimed at prediction, as specified in (Hair et al., 2019) concluding evaluation of the PLS Predict model. In order to showcase the model's ability to forecast future outcomes effectively, it is necessary to establish a metric for model validation. If the PLS model's Q2 Predict value surpasses that of the LM model or if its RMSE (Root Mean Squared Error) value is lower than that of the LM model (linear model), the PLS model is regarded as having strong predictive capability.

Table 5: PLS Predict

T 12	PLS Model		LM Model	
Indicator	RMSE	Q ² _predict	RMSE	Q ² _predict
HF.1	0.527	0.810	0.608	0.747
HF.2	0.498	0.803	0.661	0.654
HF.3	0.892	0.417	1.045	0.200
HF.4	0.558	0.761	0.699	0.625
HF.5	0.456	0.850	0.609	0.733
HF.6	0.725	0.591	0.825	0.472
HF.7	0.389	0.899	0.484	0.843
HF.8	0.401	0.880	0.468	0.836
HF.9	0.439	0.848	0.544	0.767
HF.10	0.568	0.764	0.650	0.690
HF.11	0.578	0.784	0.762	0.625
HF.12	0.509	0.820	0.440	0.865
HF.13	0.453	0.850	0.568	0.764
HF.14	0.462	0.848	0.622	0.725
HF.15	0.504	0.810	0.507	0.808
HF.16	0.556	0.765	0.640	0.688
HF.17	0.506	0.811	0.603	0.732
HF.18	0.471	0.843	0.605	0.740
HF.19	0.499	0.813	0.587	0.741
HF.20	0.671	0.652	0.809	0.495
PS.1	0.402	0.890	0.557	0.789
PS.2	0.410	0.880	0.531	0.798
PS.3	0.436	0.865	0.526	0.803
PS.4	0.469	0.828	0.596	0.722
PS.5	0.491	0.844	0.615	0.756
PS.6	0.488	0.838	0.634	0.726
PS.7	0.563	0.775	0.637	0.711
PS.8	0.488	0.826	0.535	0.791
PS.9	0.679	0.687	0.853	0.505
PS.10	0.444	0.867	0.516	0.820

The evaluation results of PLS Predict indicate that the PLS model outperforms the LM model in terms of lower RMSE values for thirty endogenous variable indicators. Additionally, the PLS model exhibits a higher Q2 prediction value compared to the LM model for all indicators. These findings clearly demonstrate the strong predictive capability of the proposed PLS model.

5. DISCUSSION

5.1. Direct Testing

Table 6: Direct Testing.

Hypothesis	Hypothesis Statement	Path coefficients	95% Path Interval	Coefficient Confidence	F square	R Square	Q Square
	Statement	coefficients	Lower Limit	Upper Limit			
H1	HF -> PS	0.456***	0.178	0.703	0.168	0.955	0.774 (HF)
H2	$PP \rightarrow HF$	0.693***	0.487	0.925	0.614	(HF)	0.000 (PP)
Нз	$PP \rightarrow PS$	-0.016	-0.255	0.313	0.108	0.955	0.833 (PS)
H4	$SQ \rightarrow HF$	0.291***	0.050	0.498	0.274	(PS)	0.000 (SQ)
H5	$S\widetilde{Q} \rightarrow PS$	0.541***	0.223	0.769	0.168	` '	(~,

Note: ***sig<0,01, **sig<0,05, *sig<0,10

Based on the results of data analysis, the PLS model was found to have an acceptable level of prediction. The R-square value of 0.955 indicates that 95.5% of the variation in patient satisfaction is influenced by patient perception and service quality, which is considered a moderate influence. On the other hand, patient perception and health facility have a high influence on patient satisfaction, with an R-square of 95.5% (Chin, 1998). The PLS model is considered to have predictive importance when the Q square value is greater than zero (Hair Jr et al., 2017). Furthermore, the following explanation applies to the results of hypothesis testing:

5.1.1. Health Facility Influence Hospital Patient Satisfaction

With a path coefficient of 0.456 and a significant p-value of 0.000 (which is less than 0.05 or 5%), it is evident that health facility have a positive and substantial impact on patient satisfaction. The level of influence at the structural level is also quite high, as indicated by an effect size (f square) of 0.168. Additionally, at a 95% confidence level, it is found that the impact of service quality can increase patient satisfaction by up to 0.703. This reveals that lower quality health facility will negatively affect the satisfaction levels of hospital patients in Indonesia, while higher quality health facility will have a greater positive impact on patient satisfaction levels.

The empirical results show that patient happiness is positively and significantly influenced by health facility. The findings support the hypothesis that health facility have a positive and significant impact on patient satisfaction (p-value 0.00 < 0.05 (5%)), and the hypothesis is accepted. (Susanti et al., 2015) found that the Appointment Registration System significantly and favorably affects patient satisfaction and waiting times, which aligns with the empirical data. At Al-Islam Hospital Bandung, the Appointment Registration System can reduce wait times and indirectly enhance patient happiness. However, there is no noticeable correlation between patient healthcare decisions and the quality of services provided. This highlights the importance of improving patient satisfaction through better service quality (Rita & Afconneri, 2019). Specifically, in the areas of tangibles, empathy, and assurance, these elements are crucial for raising patient satisfaction levels (Rahmadhani et al., 2021). According to research (Kusumawati & Rahardjo, 2012), malnutrition in children aged 6 to 24 months is associated with the utilization of health services. This suggests that inefficient use of health services can affect users' perceptions of service satisfaction and lead to unfavorable outcomes. Although the level of care provided during the COVID-19 pandemic is considered good, there is still room for improvement in the areas of assurance, empathy, and tangibles to enhance patient satisfaction. This indicates that health services can be enhanced, which may impact patient satisfaction levels (Rahmadhani et al., 2021).

The majority of respondents did not have a positive perception of the quality of care they received at Hasanuddin Hospital, and there was no discernible correlation between patient treatment selection decisions and service quality (Rita & Afconneri, 2019). Students' critical thinking abilities are influenced by the cooperative learning model, similar to window shopping, highlighting the importance of methodologies and approaches in service delivery (Rasidi & Nuruddin, 2019). Just as patient satisfaction with hospital treatments can be compared, the influence of achievement motivation and critical thinking abilities on mathematics learning outcomes suggests that internal motivation and cognitive skills also contribute to favorable results (Sanderayanti, 2015). In addition to health facility, other factors that significantly impact patient satisfaction include service quality, delivery techniques, and psychological and motivational aspects. This indicates that hospitals should consider more than just physical improvements to their facility in order to improve patient happiness. Health facility, including the scheduling system, service quality, and staff job satisfaction, have a significant impact on patient satisfaction. Improvements in these areas can lead to an overall increase in patient satisfaction.

According to marketing theory (Kotler, 1994), the establishment of a loyal client base primarily depends on elements such as service, product quality, and customer happiness. This aligns with research that indicates patient satisfaction in hospitals is positively influenced by high-quality healthcare facility. Based on the concept of customer satisfaction, patient satisfaction arises from meeting or exceeding the patient's expectations for the services they receive. Research (Susanti et al., 2015) states that the Appointment Registration System at Al-Islam Hospital Bandung significantly and positively impacts waiting times and patient satisfaction, reflecting the high standards patients have for efficiency and quality of care. Patient satisfaction during the COVID-19 pandemic is greatly affected by service quality, particularly in the areas of assurance, empathy, and tangibles— all crucial components of the marketing mix (Rahmadhani et al., 2021). Marketing theory (Kotler, 1994) emphasizes value creation for customers. This implies that in the context of healthcare facility, patient happiness will increase with

upgrades to amenities that they value. Customer loyalty to The Prime Steak & Ribs restaurant in Surabaya is positively and significantly correlated with consumer satisfaction, suggesting that happy customers are more likely to remain loyal(Foedjiawati & Samuel, 2005). The secret to raising patient satisfaction lies in having high-quality healthcare facility and effective service systems. This is in line with marketing theories (Kotler, 1994) that emphasize value creation and high-quality services as the paths to consumer loyalty and satisfaction.

5.1.2. Patient Perceptions Influence Hospital Health Facility

With a coefficient of determination of 0.693 and a synchronization level indicated by a p-value (0.000 < 0.05 (5%)), it is clear that patient perception has a significant impact on improving health facility. Additionally, the degree of influence at the structural level is quite high, with an effect size of 0.614 (f square). The 95% confidence interval further supports this finding, indicating that patient perceptions can raise service quality up to 0.925. This highlights the crucial role that patient perception plays in improving healthcare facility. Conversely, a decrease in patient perception can result in inadequate healthcare facility.

The empirical results demonstrate the positive impact of patient views on healthcare facility. The second hypothesis, which states that patient perception significantly affects health facility, is supported by these empirical findings and is accepted (p-value 0.00 < 0.05 (5%)). The empirical results are consistent with previous research findings (Minarti, 2018), which indicate that favorable opinions about the motivation and competence of teachers and students are associated with a greater interest in pursuing further education. This relationship can be compared to an increase in the utilization of healthcare facility when patients perceive them as competent and inspiring. Furthermore, perceptions of the incorporation of ISO 9001 standards have a positive and significant impact on performance in Higher Education Institutions. Positive opinions regarding the adoption of these standards in healthcare facility are crucial, as highlighted by Holcim Indonesia Tbk Cilacap (Sulasih, 2016). (Lie & Nawawi, 2023) Patient satisfaction and loyalty are strongly influenced by perceptions of service quality and perceived value, emphasizing the importance of healthcare institutions paying attention to patient perceptions in order to foster greater patient loyalty (Ariany & Lutfi, 2021). Students' perceptions of teachers' competency significantly affect learning outcomes, similar to how patients' opinions of the competence of healthcare personnel affect their trust and satisfaction with medical facility (Prayogo, 2019). Just as patient perception and motivation positively impact their decision to use healthcare facility, perception and motivation also play a significant role in determining interest in a career in sharia banking (Karima, 2022). Positive patient perceptions, particularly those related to contentment, trust, and loyalty towards the services provided, have a beneficial influence on how patients utilize health facility.

According to (Kotler, 1994) marketing theory, customer opinions about a product or service can impact their purchasing decision. The marketing mix, which includes pricing, promotion, place, and product quality, shapes this perception. Patients evaluate the quality of healthcare based on the qualifications of medical staff, the amenities provided, and the outcomes. Research has shown a positive correlation between patients' perception of medical staff competence and learning outcomes, similar to studies that demonstrate a positive correlation between patient satisfaction with healthcare facility and perceptions of service quality (Prayogo, 2019). Patients' satisfaction is also influenced by their perception of the cost of medical services. If patients believe that the cost is reasonable in relation to the quality of care they receive, they are more likely to be content and loyal. Similarly, studies have shown that pricing perceptions influence consumer satisfaction with products (Lie & Nawawi, 2023). Patients' perception of a health facility's services is influenced by how it communicates with them. Effective marketing can raise awareness, create a positive impression, and ultimately influence patients to choose the service. Accessibility and convenience for patients in accessing medical services are crucial factors. Research indicates that well-chosen and conveniently located healthcare facility can improve patient satisfaction and frequency of service utilization. According to (Kotler, 1994) marketing theory, customer perceptions play a significant role in influencing consumer decisions. This suggests that in the context of healthcare facility, patients' positive opinions about the quality, cost, promotion, and location of their medical care can enhance their satisfaction and encourage continued use of the services.

5.1.3. Patient Perceptions Influence Hospital Patient Satisfaction

With a path coefficient of (-0.016) and a significance level of p-value (0.000 > 0.05 (5%) on patient satisfaction, patient perception is not found to have a negative or negligible effect, and the level of influence at the structural level is relatively high (effect size f square 0.108). Any shift in patient perception will not result in higher patient satisfaction; within the 95% confidence interval, patient perception influence cannot raise satisfaction levels above 0.313. This implies that declining patient satisfaction scores will not be impacted by increased patient perception levels, and vice versa. In Indonesia, low patient perception has little effect on rising hospital patient satisfaction ratings, particularly in Gresik.

The empirical results show that patient satisfaction is not affected by patient perceptions, even in a negligible way. The third hypothesis, which suggests that patient perception significantly and positively impacts patient satisfaction, is not supported by these empirical data. The third hypothesis was rejected (p-value $0.00 > 0.05 \ [5\%]$). The findings of (Alrubaiee & Alkaa'ida, 2011) are consistent with the empirical evidence, demonstrating that patient perceptions of health service quality are positively related to patient satisfaction and trust. However, patient satisfaction plays a significant mediating role in enhancing the relationship between patient satisfaction and health service quality. In addition, patient perceptions of factors such as communication,

the physical environment, cleanliness, and the technical competence of healthcare workers have a significant impact on patient satisfaction, although they are not essential components of patient satisfaction or other health outcomes (MacAllister et al., 2016). Technical proficiency and patients' satisfaction with the medical treatment they receive are closely correlated (Robin DiMatteo & Hays, 1980). Patient satisfaction and their opinions of the quality of care they receive are strongly correlated, and patient satisfaction itself is one of the key mediating variables in this relationship. This suggests that patient views influence their level of satisfaction, but satisfaction acts as a mediating variable.

In the context of marketing theory, patient satisfaction is often tied to the marketing of health services and its impact on patient perceptions. It is important to note that patient satisfaction is not solely determined by the perceived quality of the health services. Studies have shown that other factors like communication, trust, and personal experiences also play a role in influencing satisfaction. These factors are essential components in the marketing of health services (Linder-Pelz, 1982). Contrary to many marketing strategies that target patient satisfaction based on their preferences, a study found that patient satisfaction was not significantly influenced by their preferences. This suggests that traditional marketing elements may not always be applicable in the healthcare context (Ross et al., 1993). Patient satisfaction is often viewed as an unreliable measure because it lacks a clear definition and is often confused with the concept of perceived service quality. This suggests that patient satisfaction may be more closely related to how the service is marketed rather than the actual quality of the service itself (Gill & White, 2009). As patient satisfaction has become an important indicator of treatment outcomes and service quality, it underscores the significance of marketing strategies in shaping perceptions of service quality. However, it should be noted that these perceptions may or may not directly influence satisfaction (Padhy & Rath, 2010). In conclusion, patient satisfaction is not directly influenced by their perceptions, but rather by how health services are marketed or sold to them. This highlights the need for a more integrated and patient-focused approach in healthcare marketing.

5.1.4. Service Quality Affects Hospital Health Facility

With a path coefficient of 0.291 and a significance level of p-value (0.000 < 0.05 (5%) for health facility, service quality has a positive and significant impact. The level of influence at the structural level is also rather high, with an effect size of f square 0.274. Any improvement in service quality will benefit healthcare facility, with a 95% confidence range showing that it can benefit facility by up to 0.498. Accordingly, the value of health facility will rise in proportion to the quality of care provided, while the value of hospital facility in Indonesia will decrease in proportion to the quality of care provided.

The empirical results show that health institutions greatly benefit from high-quality services. These findings are in line with Hypothesis 4, which states that service quality has a significant and positive impact on health facility (p-value 0.00 < 0.05 (5%)). The results support the conclusions of the study conducted by (Alfarizi, 2019), which suggest that improving healthcare standards can increase patient satisfaction by improving the communication skills of medical staff and addressing patients' social needs. These improvements can also enhance the reputation of hospital services. It is crucial to enhance the quality of services and facility, as patient loyalty is greatly influenced by price, satisfaction, and the quality of care (Arianto, 2017). However, studies have indicated that taxpayer compliance is not significantly affected by the quality of tax services, implying that other factors may have a greater influence on compliance (Nurazhari & Halimatusadiah, 2023). While enhancing patient happiness and contributing to a favorable reputation for the hospital are important, it is worth noting that there are some inconsistent results suggesting that factors other than service quality, like taxpayer compliance, may also impact the outcome.

According to (Kotler, 1994), satisfying customers' needs and desires is crucial for influencing their decision to buy and fostering loyalty. This idea can be applied to hospital health facility by enhancing the quality of the services provided. This includes factors such as medical care protocols, administrative procedures, hospital reputation, patient safety, infrastructure, staff caliber, and the patients' sense of social responsibility. Research by (Tan et al., 2019) supports this, as it shows that hospital patient satisfaction is significantly impacted by aspects of service quality, including medical treatment protocols, administrative procedures, hospital image, trust, patient safety, infrastructure, personnel quality, and social responsibility. This aligns with marketing theory, which emphasizes the significance of service quality in influencing customer satisfaction and perceptions (Kotler, 1994). According to (Meesala & Paul, 2018) also conducted research on this topic and found that aspects of service quality such as tangibles, assurance, responsiveness, consistency, and empathy have an impact on patient satisfaction. According to (Kotler, 1994), the interactions between medical staff and patients play a major role in fostering trust and preserving patient relationships, which is a crucial component of the marketing process. According to (Zheng et al., 2018) discovered a correlation between the amount of avoidable adverse events and the quality of internal hospital services. This reinforces the idea that, in line with marketing theory (Kotler, 1994), the internal quality of services must be well controlled to guarantee patient safety and high satisfaction. According to marketing theory (Kotler, 1994), a hospital's image and reputation are largely shaped by the quality of its services and the satisfaction of its patients. These factors can ultimately boost patient satisfaction and contribute to the hospital's long-term success.

5.1.5. Service Quality Influences Hospital Patient Satisfaction

With a path coefficient of 0.541 and a significance level of p-value (0.000 < 0.05 (5%)), it can be concluded

that service quality has a positive and substantial impact on patient satisfaction. Additionally, the influence at the structural level is relatively high (effect size f square 0.168). It is important to note that every improvement in service quality will lead to an increase in patient satisfaction. The 95% confidence interval suggests that the influence of service quality can elevate patient satisfaction to 0.769. This implies that while lower service quality may result in reduced value, enhanced service quality has a significant impact on elevating patient satisfaction and contentment among hospital patients in Indonesia, specifically in Gresik.

The empirical results show that service quality has a positive and significant impact on patient satisfaction. These findings support the hypothesis and are accepted (p-value 0.00 < 0.05 (5%)). The study by (Ariany & Lutfi, 2021) also supports these results, showing that patient satisfaction acts as a mediator between loyalty and service quality, both of which have a favorable and significant impact on patient satisfaction. At The Trans Resort Bali, perceived value and service quality significantly contribute to visitor satisfaction (Jaya et al., 2023). However, factors such as lengthy wait times and lack of counseling make customers less likely to seek services. Research by (Pratiwi & Surahman, 2016) indicates that service quality has a positive influence on customer satisfaction at the Pharmacy Depo. Go-Jek's study suggests that while information technology utilization and service quality positively affect customer happiness, they do not directly impact customer loyalty significantly. This suggests the presence of unidentified mediating factors (Al Rasyid, 2017).

According to (Kotler, 1994), service quality is a primary factor in generating customer happiness. (Kotler, 1994) explains that the quality of service can be measured using the five RATER dimensions: Reliability, Assurance, Tangibles, Empathy, and Responsiveness. Studies by (Ariany & Lutfi, 2021) indicate that patients' perceptions of the value and quality of care have a significant impact on their satisfaction. This aligns with the emphasized dimensions of Assurance and Empathy by (Kotler, 1994), where patients require high-quality service assurance and treatment. (Jaya et al., 2023) found that patient satisfaction is influenced by perceptions of pricing and service quality. This relates to the dimensions of tangibles and reliability described by (Kotler, 1994), highlighting the importance of tangible proof and dependable services in delivering satisfaction. Studies by (Pratiwi & Surahman, 2016) suggest that customer happiness is influenced by the quality of services provided. This supports Kotler's Responsiveness dimension, which emphasizes the value of promptness and responsiveness in customer service. Reliability, assurance, tangible proof, empathy, and responsiveness are all components of high-quality service, contributing to greater patient or customer satisfaction. (Kotler, 1994) asserts that providing high-quality services is crucial for fostering client loyalty and satisfaction across various industries, including the health sector.

5.2. Mediation Testing

Table 7: Mediation Testing.

Hipotesis	Pernyataan Hipotesis	Path coefficients	95% Selang Kepercaya	F square	R Square	
Hipotesis	r ernyataan ripotesis		batas Bawah	batas Atas		
H6	PP -> HF -> PS	0.316***	0.119	0.525	0.100	
H7	$SQ \rightarrow HF \rightarrow PS$	0.132*	0.019	0.288	0.018	0.955

Note: ***sig<0,01, **sig<0,05, *sig<0,10.

Based on the results of the data analysis, the PLS model's prediction level was deemed acceptable. The R-square value, which was 0.955, indicates that 95.5 percent of the variation in patient satisfaction can be attributed to service quality and patient perception. This influence is considered moderate. On the other hand, the influence of service and health facility perception on patient satisfaction is classified as high, with an R-square of 95.5 percent (Chin, 1998). According to (Hair Jr et al., 2017), the PLS model is deemed to have predictive importance when the Q-square value is greater than zero. This same explanation also applies to the outcomes of hypothesis testing.

5.2.1. The Role of Health Facility in Mediating Patient Perceptions of Hospital Patient Satisfaction

Health facility play a significant role in mediating the relationship between patient satisfaction and perception. The mediation coefficient is 0.316, indicating a relatively high level of influence at the structural level. This effect is statistically significant with a p-value of 0.000 < 0.05 (5%). The f-square value, derived from previous research (Lachowicz et al., 2018); (Ogbeibu et al., 2021), represents the square of the mediation coefficient. Patient satisfaction is directly influenced by patient perception (0-0.016), which has a greater direct impact compared to the mediating effect of service quality (0.316). The impressions of patients can greatly affect hospital patient satisfaction ratings, particularly in Gresik, Indonesia.

The empirical results in Indonesia, specifically in the city of Gresik, demonstrate that the role of health facility has an impact on patient satisfaction in hospitals. These findings support Hypothesis 6, which suggests that healthcare facility play a mediating role in patient satisfaction perceptions, especially in Gresik City. Hypothesis 6 has been accepted (p-value 0.00 < 0.05 (5%)). These results align with the research conducted by (Agyapong et al., 2018), which found a positive and significant correlation between patient behavioral intentions, satisfaction with health services, and perceived service quality. The quality of the physical environment affects patient happiness through their perceptions of environmental quality. The relationship between environmental

quality and patient status (inpatient or outpatient) is influenced differently. According to (Andrade et al., 2013), outpatients are more affected by the physical environment's quality of care, while inpatients are more influenced by the social environment's quality. Patient satisfaction and trust are significantly and positively influenced by the quality of health services, with patient satisfaction acting as a mediator between patient trust in health service providers and the quality of health services (Alrubaiee & Alkaa'ida, 2011).

Meanwhile, studies have shown that individuals lack trust and contentment in healthcare providers and are unhappy with the quality of care they receive (S. T. Mohamed et al., 2018). This highlights the need to enhance hospital administration and services in order to improve patient satisfaction. Patient demographics, such as gender, place of origin, and socioeconomic status, influence patient satisfaction. Different groups have different perceptions and levels of satisfaction with the services they receive. For example, young men from rural backgrounds and lower socioeconomic classes are the most dissatisfied (I. Ahmad et al., 2011). The perception of empathy in physicians by their patients strongly affects patient satisfaction and compliance, which can be influenced by mediating factors such as information sharing, perceived competence, interpersonal trust, and cooperation. Therefore, in addition to the direct impact of healthcare facility, clinicians' compassionate communication may also have a significant effect on patient satisfaction (Kim et al., 2004).

Since its development in 1994, marketing theory (Kotler, 1994) has consistently emphasized the importance of understanding customer wants and expectations to achieve satisfaction. This concept can also be applied to analyzing the impact of patients' perceptions of the quality of medical care on their overall satisfaction with healthcare facility. Research conducted by (Alrubaiee & Alkaa'ida, 2011) suggests that patient satisfaction and trust are strongly influenced by how patients perceive the quality of healthcare services. Patient satisfaction plays a pivotal role in strengthening the relationship between patient satisfaction and trust in healthcare providers. (Agyapong et al., 2018) further assert that patient satisfaction significantly affects both behavioral intentions and perceived service quality. Healthcare institutions can enhance patient satisfaction by effectively managing service quality based on contemporary marketing principles. This, in turn, positively influences patients' perception of the services they receive. These findings underscore the importance of incorporating marketing theory into healthcare facility management to improve patient happiness.

5.2.2. The Role of Health Facility in Mediating Service Quality and Hospital Patient Satisfaction

With a mediation path coefficient of 0.132 and a significant p-value (p < 0.10 (10%)), health facility are an important mediating variable for the indirect influence of service quality on patient satisfaction. The influence at the structural level is relatively low (effect size: f square = 0.018). The f square value, which is derived from suggestions (Lachowicz et al., 2018), represents the square of the mediation coefficient (Lachowicz et al., 2018); (Ogbeibu et al., 2021). The mediation effect through health facility (0.018) is greater than the direct effect of service quality on patient satisfaction (0.541). Therefore, patient satisfaction will increase in proportion to the value of health facility and service quality, and vice versa for lower values of health facility and service quality. This will impact Indonesia's hospital patient satisfaction rates, particularly in Gresik.

The empirical results demonstrate the impact of service quality on patient satisfaction and its mediating effect. These findings align with Hypothesis 7, which proposes that health facility play a mediating role in patient satisfaction through service quality. Hypothesis 7 has been accepted, with a p-value of $0.00 \le 0.10$ (10%). The empirical data explain the relationship between quality of care, perceived value, and patient satisfaction and loyalty, highlighting their positive and significant influence. Patient satisfaction plays a significant mediating role in the relationship between perceived value, patient loyalty, and service quality (Ariany & Lutfi, 2021). This is evident in the third-class ward of Dr. H. Soewondo Kendal Regional General Hospital, where high-quality services lead to higher levels of satisfaction (Putri et al., 2018). Furthermore, the interaction between medical professionals and patients has also been found to contribute to improved patient satisfaction, particularly in the administration of oral medication (Sudarta, 2015).

According to marketing theory (Kotler, 1994), marketing is primarily focused on generating customer satisfaction through a series of steps. These steps begin with understanding the needs and desires of the target market, then move on to designing suitable market offers, and finally, conclude with maintaining relationships with clients. In the hospital setting, patient satisfaction is often influenced by the quality of care provided, including factors such as medical staff communication, the healing process, and the facility available. (Kotler, 1994) emphasizes the importance of adding value for clients, which in the healthcare field includes having suitable facility and excellent medical services. Research by (Ariany & Lutfi, 2021) supports the idea that patient satisfaction is significantly influenced by perceived value and service quality. This aligns with (Kotler, 1994) concept that customers' perception of value directly impacts their level of satisfaction. Another study by (Putri et al., 2018) found a positive correlation between patient satisfaction levels at the Social Security Administration and the quality of healthcare services provided. This supports Kotler's argument that customer satisfaction is achieved by evaluating the performance of a product or service based on the client's expectations. (Sudarta, 2015) research demonstrates a positive correlation between patient satisfaction and nurses' therapeutic communication, which aligns with (Kotler, 1994) thesis on the role of interaction in service marketing. This indicates that effective communication is essential for achieving customer satisfaction between service providers, such as nurses, and clients, in this case, patients. Perceptions of quality are also influenced by the tangible aspects of services. Research by (Septiyany & Yuswantina, 2023) shows that accessibility and facility are part of the tangible component and have an impact on patient satisfaction. Having access to high-quality medical facility is one of the

factors that affect patient happiness. Quality, as perceived by patients, encompasses both tangible and conceptual aspects.

6. CONCLUSION

Based on the analysis and research findings, it can be concluded that the quality of health services and facility plays a crucial role in determining patient satisfaction with hospitals in Indonesia, particularly in the city of Gresik. Patients' perceptions of the quality of services and facility provided have a significant impact on their level of satisfaction. Patients generally have certain expectations regarding the quality of services and health facility offered by hospitals in Indonesia, especially in Gresik. Health facility encompass the quality of medical equipment, cleanliness of the environment, and the availability of necessary resources for treatment. Positive perceptions of these facility can enhance patient satisfaction.

The quality of service provided by hospital staff, including doctors, nurses, and administrative staff, plays a crucial role in mediating the relationship between patients' perceptions of service quality and their satisfaction. Good service includes aspects such as effective communication skills, empathy, prompt response to patient needs, and professional competence. Patient satisfaction can be seen as the ultimate outcome of patients' perceptions of the facility and service quality. When patients feel that the facility are adequate and the service they receive is of high quality, they are more likely to feel satisfied. Health facility act as mediators because they can reinforce positive perceptions of service quality. Even if the healthcare facility are not as good as expected, exceptional service from staff can still ensure patient satisfaction. In the Indonesian context, there are various types of hospitals, ranging from small to large scale, with different levels of facility. Therefore, the quality of service is of utmost importance. Patients' perceptions of service quality may vary depending on the location and type of hospital, making service consistency a crucial factor in determining patient satisfaction.

6.1. Research Implications

There are two parts to the role that health facility play in mediating service quality and patient perceptions of hospital patient satisfaction in Indonesia: practical and theoretical ramifications. The study's theoretical implications clarify how the inclusion of health facility' function as intermediaries between service quality and patients' perceptions of hospital patient satisfaction broadens the scope of patient satisfaction theory, gives patient satisfaction modeling a fresh perspective, and can be applied to test analogous models in other sectors of the economy. This research sheds light on how different elements of health facility affect service quality and patients' perceptions of hospital patient satisfaction by concentrating on the mediating role of health facility. This research contributes to the validation and expansion of the SERVQUAL model in developing markets and the healthcare context by implementing it in Indonesian hospitals or other comparable settings.

The creation of a satisfaction scale tailored to Indonesian hospital patients is another consequence of this research, and it may prove to be a helpful instrument for future studies comparing and evaluating patient happiness in other settings. Meanwhile, hospitals can use the information that health facility have an impact on patient satisfaction to raise the bar for their services and ensure that every part of their facility is designed to enhance patient satisfaction, as stated in the practical implications. The creation of hospital staff training programs, particularly those pertaining to complaint handling, communication skills, and providing patients with accurate information, is another practical consequence. To increase overall satisfaction, hospitals can use the findings of this study to make additional investments in improving healthcare facility and infrastructure based on patient opinions. Based on an understanding of how health facility affect service quality and perceptions of hospital patient satisfaction, hospitals can implement or enhance patient relationship management methods to better target patient needs and expectations. The results can be applied to the development of health policies that target the variables that substantially raise patient satisfaction in an effort to raise the standard of healthcare provided in Indonesia. To promote the standardization of best practices, hospitals can assess and compare the quality of their services with those of other hospitals using the research's findings as a benchmark.

6.2. Research Limitations

There are certain limitations to this research that need to be acknowledged. The purpose of discussing these limitations is to ensure that the research is interpreted in a transparent manner. Furthermore, by highlighting the study's limitations, it allows for future research to address these gaps. The following limitations should be noted: Firstly, the study only focused on hospitals in Gresik, which may not be representative of hospitals nationwide. Given that Indonesia is made up of multiple islands, each with its own population density and resource availability, the findings of this study may not be applicable across the entire country. Secondly, there are differences between hospitals with varying accreditation levels, as well as between government and private hospitals. These distinctions can lead to significant variations in the facility and services provided, which in turn may impact patient satisfaction. Additionally, the sample size was restricted to inpatient and outpatient visitors, and the study population was chosen randomly. Consequently, the generalizability of the findings may be limited. Lastly, the study does not adequately capture the impact of recent efforts by hospitals or the government to improve quality, nor does it consider changes in health policies. Furthermore, the research does not sufficiently address how the Covid-19 outbreak has influenced patient perceptions of healthcare facility and service quality, as well as operational standards.

Data Availability Statement:

The data supporting the findings of this study are available from the author, $\lceil R \rceil$, upon reasonable request.

Author's Contribution

No	Author	Information
1	IP, R, NFA, NA, RLH, UB	Carried out the research, wrote and revised the article
2	IP, R, NFA, NA, RLH, UB	Conceptualised the central research idea and provided the
		theoretical framework.
3	IP, R, NFA, NA, RLH, UB	Designed and supervised the research progress;
4	IP, R, NFA, NA, RLH, UB	Anchored the review revisions and approved the article
		submission.

REFERENCES

- Abadi, S., Endarto, B., Taufiqurrahman, Aji, R. B., Kurniawan, W., Daim, N. A., Ismono, J., Alam, A. S., Purwati, A., Wijaya, A. U., Rusdiyanto, & Kalbuana, N. (2021). Indonesian Desirious Finality Of The Community In Regard. *Journal of Legal, Ethical and Regulatory Issues*, 24(Special Is), 1–10.
- Abkar, M. M. A., Yunus, R., Gamil, Y., & Albaom, M. A. (2024). Enhancing construction site performance through technology and management practices as material waste mitigation in the Malaysian construction industry. *Heliyon*.
- Agyapong, A., Afi, J. D., & Kwateng, K. O. (2018). Examining the effect of perceived service quality of health care delivery in Ghana on behavioural intentions of patients: The mediating role of customer satisfaction. *International Journal of Healthcare Management*, 11(4), 276–288.
- Aliyyah, N., Prasetyo, I., Rusdiyanto, R., Endarti, E. W., Mardiana, F., Winarko, R., Chamariyah, C., Mulyani, S., Grahani, F. O., Rochman, A. S., Hidayat, W., & Tjaraka, H. (2021). What Affects Employee Performance Through Work Motivation? *Journal of Management Information and Decision Sciences*, 24, 1–14.
- Aliyyah, N., Siswomihardjo, S. W., Prasetyo, I., Rusdiyanto, P., Rochman, A. S., & Kalbuana, N. (2021). THE EFFECT OF TYPES OF FAMILY SUPPORT ON STARTUP ACTIVITIES IN INDONESIA WITH FAMILY COHESIVENESS AS MODERATION. Journal of Management Information and Decision Sciences, 24(Special Is), 1–15.
- Ariyanto, R., Rohadi, E., & Lestari, V. A. (2020). The effect of information quality, system quality, service quality on intention to use and user satisfaction, and their effect on net benefits primary care application at primary health facilities in Malang. *IOP Conference Series: Materials Science and Engineering*, 732(1), 12084.
- Asnawi, A., Awang, Z., Afthanorhan, A., Mohamad, M., & Karim, F. (2019). The influence of hospital image and service quality on patients' satisfaction and loyalty. *Management Science Letters*, 9(6), 911–920.
- Asyik, N. F., Muchlis, , Triyonowati, , Rusdiyanto, , Hendrati, I. M., Nuswantara, D. A., & Suyanto, . (2023). The effect of male CEO masculinity face on earnings management: Evidence from Indonesia. Cogent Economics & Finance, 11(1), 2164556. https://doi.org/10.1080/23322039.2022.2164556
- Asyik, N. F., Muchlis, M., Riharjo, I. B., & Rusdiyanto, R. (2022). The impact of a male CEO'S facial masculinity on leverage. Cogent Business & Management, 9(1), 2119540. https://doi.org/10.1080/23311975.2022.2119540
- Bajwa, J., Munir, U., Nori, A., & Williams, B. (2021). Artificial intelligence in healthcare: transforming the practice of medicine. Future Healthcare Journal, 8(2), e188.
- Das, A. K., Islam, M. N., Billah, M. M., & Sarker, A. (2021). COVID-19 pandemic and healthcare solid waste management strategy—A mini-review. Science of the Total Environment, 778, 146220.
- Dewi, W. P., Peristiowati, Y., & Wardani, R. (2022). Determinants of Satisfaction of Inpatients in Hospitals. *Journal for Quality in Public Health*, 5(2), 444–452.
- Eko Prasetio, J., Sabihaini, Sudaryanto, Setyorini, H., Rusdiyanto, Hasanah, A., Syamlan, A. F., & Rupa Anjeli, A. M. (2023). The role of earnings management as mediator the effect of male CEO masculinity face on Research & Event & Event
- Endarto, B., Taufiqurrahman, Kurniawan, W., Indriastuty, D. E., Prasetyo, I., Aliyyah, N., Endarti, E. W., Abadi, S., Daim, N. A., Ismono, J., Rusdiyanto, & Kalbuana, N. (2021). GLOBAL PERSPECTIVE ON CAPITAL MARKET LAW DEVELOPMENT IN INDONESIA. *Journal of Management Information and Decision Sciences*, 24(Special Is), 1–8.
- Endarto, B., Taufiqurrahman, Suhartono, S., Setyadji, S., Abadi, S., Aji, R. B., Kurniawan, W., Daim, N. A., Ismono, J., Alam, A. S., Purwati, A., Wijaya, A. U., Chamdani, Widianto, R. M., Kusnadi, S. A., Saleh, F., Indriastuti, D. E., Setiabudi, W., Prasetyo, I., ... Kalbuana, N. (2021). The Obligations Of Legal Consultants In The Independent Legal Diligence Of The Capital Market Supporting Proportion Of Legal Prepparement. *Journal of Legal, Ethical and Regulatory Issues, 24*(Special Issue 1), 1–8. https://www.scopus.com/inward/record.uri?eid=2-s2.0-85112357752&partnerID=40&md5=694b79fadc1008323bfef8cb5f6de470
- Fadhilah, A. N., & Ayubi, D. (2023). Lean Six Sigma Approach for Wait Time Analysis in Radiology Services at Krakatau Medika Hospital. Devotion: Journal of Research and Community Service, 4(12), 2371–2375.
- Hair Jr, J. F., Hult, G. T. M., Ringle, C. M., Sarstedt, M., Danks, N. P., Ray, S., Hair, J. F., Hult, G. T. M., Ringle, C. M., & Sarstedt, M. (2021). Evaluation of reflective measurement models. Partial Least Squares Structural Equation Modeling (PLS-SEM) Using R: A Workbook, 75–90.
- Hair Jr, J. F., Matthews, L. M., Matthews, R. L., & Sarstedt, M. (2017). PLS-SEM or CB-SEM: updated guidelines on which method to use. *International Journal of Multivariate Data Analysis*, 1(2), 107–123.
- Hendrati, I. M., Esquivias, M. A., Perdana, P., Yuhertiana, I., & Rusdiyanto, R. (2024). US-China trade war on ASEAN region: oligopoly or systemic market structure? Cogent Business & Management, 11(1), 2306686. https://doi.org/10.1080/23311975.2024.2306686
- Hendrati, I. M., Soyunov, B., Prameswari, R. D., Suyanto, R. D., Rusdiyanto, R. D., & Nuswantara, D. A. (2023). The role of moderation activities the influence of the audit committee and the board of directors on the planning of the sustainability report. *Cogent Business and Management*, 10(1). https://doi.org/10.1080/23311975.2022.2156140
- Hidayat, W., Tjaraka, H., Fitrisia, D., Fayanni, Y., Utari, W., Indrawati, M., Susanto, H., Tjahjo, J. D. W., Mufarokhah, N., & Elan, U. (2020). The Effect of Earning per Share, Debt to Equity Ratio and Return on Assets on Stock Prices: Case Study Indonesian.

 *Academy of Entrepreneurship Journal, 26(2), 1–10.
- Imran, A., Mahendika, D., Rante, A., Saputra, M. K. F., Briliannita, A., Wijayanti, L. A., & Nurhaedah, N. (2023). Patient Satisfaction in the Inpatient Room of the Management Board of Arifin Nu'mang General Hospital. *International Journal of Health Sciences*, 1(1), 30–34.
- Indrawati, M., Chamariyah, Halima, N., Irawan, & Rusdiyanto. (2024). The Mediating Role of Price in Service Quality for MSME Product Purchases. *Journal of Ecohumanism*, 3(5), 51–68. https://doi.org/10.62754/joe.v3i5.3639

- Indrawati, M., Utari, W., Prasetyo, I., Rusdiyanto, & Kalbuana, N. (2021). HOUSEHOLD BUSINESS STRATEGY DURING THE COVID 19 PANDEMIC. Journal of Management Information and Decision Sciences, 24(Special Is), 1–12.
- Juanamasta, I. G., Wati, N. M. N., Hendrawati, E., Wahyuni, W., Pramudianti, M., Wisnujati, N. S., Setiawati, A. P., Susetyorini, S., Elan, U., Rusdiyanto, R., Muharlisiani, L. T., & Umanailo, M. C. B. (2019). The role of customer service through customer relationship management (Crm) to increase customer loyalty and good image. *International Journal of Scientific and Technology Research*, 8(10), 2004–2007.
- Kabeta, S. H., Chala, T. K., & Tafese, F. (2023). Medical equipment management in general hospitals: Experience of Tulu Bolo General Hospital, South West Shoa Zone, Central Ethiopia. *Medical Devices: Evidence and Research*, 57–70.
- Kalbuana, N., Kusiyah, K., Supriatiningsih, S., Budiharjo, R., Budyastuti, T., & Rusdiyanto, R. (2022). Effect of profitability, audit committee, company size, activity, and board of directors on sustainability. *Cogent Business and Management*, 9(1). https://doi.org/10.1080/23311975.2022.2129354
- Kalbuana, N., Prasetyo, B., Asih, P., Arnas, Y., Simbolon, S. L., Abdusshomad, A., Kurnianto, B., Rudy, R., Kardi, K., Saputro, R., Yohana, Y., Sari, M. P., Zandra, R. A. P., Pramitasari, D. A., Rusdiyanto, R., Gazali, G., Putri, I. A. J., Nazaruddin, M., Naim, M. R., & Mahdi, F. M. (2021). Earnings Management Is Affected By Firm Size, Leverage And Roa: Evidence From Indonesia. *Academy of Strategic Management Journal*, 20(SpecialIssue2), 1–12. https://www.scopus.com/inward/record.uri?eid=2-s2.0-85107756548&partnerID=40&md5=f648ed22972be531e4986f7c43a47ad4
- Kalbuana, N., Suryati, A., Rusdiyanto, R., Azwar, A., Rudy, R., Yohana, Y., Pramono, N. H., Nurwati, N., Siswanto, E. H., Sari, M. P., Nazaruddin, M., & Hidayat, W. (2021). Interpretation of Sharia Accounting Practices in Indonesia. *Journal of Legal, Ethical and Regulatory Issues, 24*, 1–12.
- Lachowicz, M. J., Preacher, K. J., & Kelley, K. (2018). A novel measure of effect size for mediation analysis. *Psychological Methods*, 23(2), 244.
- Laily, N., Mustika, H., Irdiana, S., Rusdiyanto, & Silalahi, M. (2023). Antecedents of knowledge management: The case of professional employees in Indonesia. *Knowledge and Performance Management*, 8(1), 49–62. https://doi.org/10.21511/KPM.08(1).2024.04
- Luwihono, A., Suherman, B., Sembiring, D., Rasyid, S., Kalbuana, N., Saputro, R., Prasetyo, B., Taryana, Suprihartini, Y., Asih, P., Mahfud, Z., & Rusdiyanto. (2021). Macroeconomic effect on stock price: Evidence from Indonesia. *Accounting*, 7(5), 1189–1202. https://doi.org/10.5267/j.ac.2021.2.019
- Martha Hendrati, I., Ika Kusumawardhani, N., Asmara, K., Marseto, & Rusdiyanto. (2024). Strategy For Developing Planning For Post-Covid-19 SME Economic Recovery: Evidence From Indonesia. *Quality Access to Success*, 25(199), 94–107. https://doi.org/10.47750/QAS/25.199.11
- McKinnon, K., Crofts, P. D., Edwards, R., Campion, P. D., & Edwards, R. H. T. (1998). The outpatient experience: results of a patient feedback survey. *International Journal of Health Care Quality Assurance*, 11(5), 156–160.
- 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.
- Merawati, E. E., Derriawan, D., & Supriyadi, E. (2021a). The Analysis of Factors in Increasing Patient Satisfaction in Hospital. *Proceedings of the Ninth International Conference on Entrepreneurship and Business Management (ICEBM 2020)*, 174(Icebm 2020), 233–239. https://doi.org/10.2991/aebmr.k.210507.035
- Merawati, E. E., Derriawan, D., & Supriyadi, E. (2021b). The Analysis of Factors in Increasing Patient Satisfaction in Hospital. Ninth International Conference on Entrepreneurship and Business Management (ICEBM 2020), 233–239.
- Minarti, A. (2018). pengaruh persepsi, motivasi dan fasilitas kampus terhadap minat mahasiswa studi lanjut ke strata dua (s2) studi pada stie lamappapoleonro SOPPENG. *Jurnal Ilmiah Metansi (Manajemen Dan Akuntansi)*, 1(2), 11–17.
- Mohamed, B., & Azizan, N. A. (2015). Perceived service quality's effect on patient satisfaction and behavioural compliance. *International Journal of Health Care Quality Assurance*, 28(3), 300–314.
- Mohamed, S. T., Morsy, S. M., & Mohamed, F. R. (2018). The Mediating Effect of Patient Satisfaction on the Patient's Perception of Healthcare Quality and Patient Trust. Assiut Scientific Nursing Journal, 6(15), 78–85.
- Mohammad Mosadeghrad, A. (2013). Healthcare service quality: towards a broad definition. *International Journal of Health Care Quality Assurance*, 26(3), 203–219.
- Naidu, A. (2009). Factors affecting patient satisfaction and healthcare quality. International Journal of Health Care Quality Assurance, 22(4), 366–381. https://doi.org/10.1108/09526860910964834
- Novita, R. (2019). Peran fasilitas pelayanan kesehatan dalam menghadapi tantangan rabies di Indonesia. *Jurnal Penelitian Dan Pengembangan Pelayanan Kesehatan*, 94–105.
- Novita, R. D., & Damayanti, N. A. (2020). Readiness to Change in Jemursari Islamic Hospital in Change to be a Educational Hospital. *The Indonesian Journal of Public Health*, 15(1), 81–92.
- Nurazhari, A., & Halimatusadiah, E. (2023). Pengaruh Kualitas Pelayanan Fiskus dan Pengetahuan Wajib Pajak terhadap Kepatuhan Wajib Pajak Pemilik Usaha Rumah Kos. Bandung Conference Series: Accountancy, 3(2).
- Nuswantara, D. A., Fachruzzaman, , Prameswari, R. D., Suyanto, , Rusdiyanto, R., & Hendrati, I. M. (2023). The role of political connection to moderate board size, woman on boards on financial distress. *Cogent Business & Management*, 10(1), 2156704. https://doi.org/10.1080/23311975.2022.2156704
- Nyoman Ayuningsih, N. (2019). The Effect of Service Quality on the Satisfaction of Inapest Askes Patients in Sanglah Hospital Denpasar. Universal Journal of Management, 7(4), 125–133. https://doi.org/10.13189/ujm.2019.070401
- Ogbeibu, S., Jabbour, C. J. C., Gaskin, J., Senadjki, A., & Hughes, M. (2021). Leveraging STARA competencies and green creativity to boost green organisational innovative evidence: A praxis for sustainable development. *Business Strategy and the Environment*, 30(5), 2421–2440.
- Padhy, P. K., & Rath, D. S. (2010). Patient Satisfaction and Marketing Effectiveness in Selected Large Hospitals. *Available at SSRN* 1537255.
- Prabowo, B., Rochmatulaili, E., Rusdiyanto, & Sulistyowati, E. (2020). Corporate governance and its impact in company's stock price: case study. *Utopia y Praxis Latinoamericana*, 25(Extra10), 187–196. https://doi.org/10.5281/zenodo.4155459
- Prasetio, J. E., Sabihaini, Bintarto, B., Susanto, A. A., Rahmanda, G. A., Rusdiyanto, Rochman, A. S., & Kalbuana, N. (2021). Corporate Social Responsibility Community Development And Empowerment Program In Indonesia. *Journal of Management Information and Decision Sciences*, 24(1), 1–11.
- Prasetio, J. E., Sabihaini, Bintarto, B., Susanto, A. A., & Rusdiyanto. (2024). Assessing Indonesian Community Development and Empowerment Program for Mandatory CSR Implementation in Mining Industry. *Quality Access to Success*, 25(199), 119–127. https://doi.org/10.47750/QAS/25.199.13
- Prasetyo, I., Aliyyah, N., Endarti, E. W., Asyik, N. F., Rusdiyanto, R., Nuswantara, D. A., & Gazali, G. (2023). The role of leverage as mediator the effect of male CEO masculinity face on research & development. *Cogent Business & Management*, 10(1), 2167289. https://doi.org/10.1080/23311975.2023.2167289
- Prasetyo, I., Aliyyah, N., Endarti, E. W., Rusdiyanto, R., & Rahmawati, A. (2022). The role of research & development as mediating the effect of male CEO masculinity face on earnings management: evidence from Indonesia. *Cogent Business and Management*, 9(1). https://doi.org/10.1080/23311975.2022.2140491

- Prasetyo, I., Aliyyah, N., Rusdiyanto, Chamariah, Syahrial, R., Nartasari, D. R., Yuventius, Wibowo, H., Sanjayanto, & Sulistiyowati. (2021). Discipline and work environment affect employee productivity: Evidence from Indonesia. *International Journal of Entrepreneurship*, 25(5). https://www.scopus.com/inward/record.uri?eid=2-s2.0-85107284417&partnerID=40&md5=e2b840845ed6fa18d1638485a88ba268
- Prasetyo, I., Aliyyah, N., Rusdiyanto, Kalbuana, N., & Rochman, A. S. (2021). Corporate Social Responsibility Practices In Islamic Studies In Indonesian. *Journal of Legal, Ethical and Regulatory Issues*, 24(Special Is), 1–15.
- Prasetyo, I., Aliyyah, N., Rusdiyanto, Nartasari, D. R., Nugroho, S., Rahmawati, Y., Groda, S. P., Setiawan, S., Triangga, B., Mailansa, E., Prayogi, G. D., Etruly, N., Jazuli, M., Wahyuningsih, N. D., Kusumawati, N. D., Kurniawan, S., Ratri, I. N., Atmojo, W., Sugiarno, Y., ... Rochman, A. S. (2021a). Impact Financial Performance to Stock Prices: Evidence From Indonesia. *Journal of Legal, Ethical and Regulatory Issues*, 24, 1–11. https://www.scopus.com/inward/record.uri?eid=2-s2.0-85109943966&partnerID=40&md5=464bee156a56a2a7bdc88fd95c8f99ab
- Prasetyo, I., Aliyyah, N., Rusdiyanto, R., Nartasari, D. R., Nugroho, S., Rahmawati, Y., Groda, S. P., Setiawan, S., Triangga, B., Mailansa, E., Kalbuana, N., & Rochman, A. S. (2021b). What Affects Audit Delay in Indonesia? *Academy of Entrepreneurship Journal*, 27, 1–15.
- Prasetyo, I., Aliyyah, N., Rusdiyanto, Tjaraka, H., Kalbuana, N., & Rochman, A. S. (2021). Vocational Training Has An Influence On Employee Career Development: A Case Study Indonesia. *Academy of Strategic Management Journal*, 20(2), 1–14.
- Prasetyo, I., Aliyyah, N., Rusdiyanto, Utari, W., Suprapti, S., Kartika, C., Winarko, R., Chamariyah, Panglipursari, D. L., Muninghar, Farid, M. M., & Kalbuana, N. (2021). Effects of organizational communication climate and employee retention toward employee performance. *Journal of Legal, Ethical and Regulatory Issues, 24*(Special Is), 1–11.
- Prasetyo, I., Endarti, E. W., Endarto, B., Aliyyah, N., Rusdiyanto, Suprapti, S., Kartika, C., Winarko, R., Chamariyah, Panglipursari, D. L., Kalbuana, N., & Al-asqolaini, M. Z. (2021). Performance Is Affected By Leadership And Work Culture: A Case Study From Indonesia. *Academy of Strategic Management Journal*, 20(SpecialIss), 1–15.
- Pratiwi, A. M., & Surahman, E. (2016). Pengaruh Kualitas Pelayanan dan Kepuasan Pelanggan terhadap Niat Beli Obat di Depo Farmasi Anggrek RSUP Dr. Hasan Sadikin, Bandung. *Jurnal Farmasi Klinik Indonesia. Fakultas Farmasi Universitas Padjadjaran, Sumedang.*
- Prayogo, B. (2019). Pengaruh Persepsi Siswa Tentang Kompetensi Guru Terhadap Hasil Belajar Siswa Kelas XI Pada Mata Pelajaran Ekonomi di SMA Negeri 15 Surabaya Tahun Ajaran 2018/2019. *Jurnal Pendidikan Ekonomi (JUPE)*, 7(1), 12–17.
- Putra, A. R., Rudiansyah, M. M. D. H., Darmawan, D., Mardikaningsih, R., & Sinambela, E. A. (2022). Pengaruh Gaya Hidup, Lingkungan Fisik, dan Persepsi Harga terhadap Loyalitas Pelanggan Lottemart. *Jurnal Ekonomi Dan Manajemen*, 2(1), 71–85.
- Putri, O., Winarti, R., & Windyastuti, W. (2018). Hubungan Kualitas Pelayanan Kesehatan dengan Tingkat Kepuasan Pasien BPJS. *Jurnal Ners Widya Husada*, 5(2), 49–58.
- Rahmadhani, W., Kusumastuti, K., & Phu, P. T. (2021). The Effect of Service Quality on Patient Satisfaction in Obstetrics and Gynecology Polyclinic of PKU Muhammadiyah Gombong Hospital, Kebumen District During the Covid-19 Pandemic. *Jurnal Aisyah: Jurnal Ilmu Kesehatan*, 6(3), 515–519.
- Rahman, M. K., Bhuiyan, M. A., & Zailani, S. (2021). Healthcare services: patient satisfaction and loyalty lessons from islamic friendly hospitals. *Patient Preference and Adherence*, 2633–2646.
- Ramli, N. A., Zawawi, E. M., Arif, N. R. M., Mahbob, N. S., Sulaiman, Z., & Zainol, N. N. (2018). A perspective study on green cleaning for Malaysian public hospital. *IOP Conference Series: Earth and Environmental Science*, 117(1), 12017.
- Rasidi, M. A., & Nuruddin, N. (2019). Pengaruh Model Pembelajaran Kooperatif Tipe Windows Shopping Terhadap Keterampilan Berpikir Kritis Mahasiswa PGMI UIN Mataram. *Jurnal Elementary: Kajian Teori Dan Hasil Penelitian Pendidikan Sekolah Dasar*, 2(2), 31–33.
- Renaldo, R., Anggoro, Y., & Menik, K. (2020). Influence Patient Satisfaction Quality of Non-JKN Hospital Clinic. Wiga: Jurnal Penelitian Ilmu Ekonomi, 10(1), 30–34.
- Rita, N., & Afconneri, Y. (2019). Faktor-Faktor yang Mempengaruhi Keputusan Pasien Memilih Jasa Pelayanan Kesehatan. *Jurnal Endurance*, 4(1), 132–140.
- Robin DiMatteo, M., & Hays, R. (1980). The significance of patients' perceptions of physician conduct: A study of patient satisfaction in a family practice center. *Journal of Community Health*, 6(1), 18–34.
- Ross, C. K., Steward, C. A., & Sinacore, J. M. (1993). The importance of patient preferences in the measurement of health care satisfaction. *Medical Care*, 31(12), 1138–1147.
- Rusdiyanto, Agustia, D., Soetedjo, S., & Septiarini, D. F. (2020). The effect of cash turnover and receivable turnover on profitability. *Opcion*, 36(Special Edition 26).
- Rusdiyanto, Hidayat, W., Bahari, C., Susetyorini, Elan, U., Indrawati, M., Panglipursari, D. L., Aminatuzzuhro, & Gazali. (2021). Company Profitability is Influenced by sales and Administration & Samp; General Costs: Evidence from Indonesia. *Journal of Legal, Ethical and Regulatory Issues, 24.*
- Rusdiyanto, R., Karman, J., Toyib Hidayat, A., Muli Peranginangin, A., Tambunan, F., & Hutahaean, J. (2020). Analysis of Decision Support Systems on Recommended Sales of the Best Ornamental Plants by Type. *Journal of Physics: Conference Series*, 1566(1). https://doi.org/10.1088/1742-6596/1566/1/012047
- Sabihaini, Kurniawan, A., Eko Prasetio, J., & Rusdiyanto. (2024). Environmental analysis and impact on green business strategy and performance in SMEs post the Covid-19 pandemic. Cogent Economics & Finance, 12(1), 2330428. https://doi.org/10.1080/23322039.2024.2330428
- Sabihaini, Prasetio, J. E., Rusdiyanto, & Kurniawan, A. (2023). Moderating Effects of Business Strategy and Environmental Uncertainty on the Relationship Between Personal Characteristics and Performance of Indonesian SMEs. *International Journal of Sustainable Development and Planning*, 18(9), 2819–2828. https://doi.org/10.18280/ijsdp.180920
- Sabriyah, S., Sudirman, S., & Nor, A. R. A. C. (2016). Mplementation Proffering of Claim Guarantee Health of National Health in Hospital Anutapura Palu. *PROMOTIF: Jurnal Kesehatan Masyarakat*, 6(2), 118–128.
- Salafas, E. (2022). Hubungan Persepsi Mutu Pelayanan ANC Masa Pandemi Covid-19 dengan Tingkat Kepuasan Pasien: Relationship between ANC Service Quality Perception during the Covid-19 Pandemic with Patient Satisfaction Level. *Journal of Holistics and Health Sciences (JHHS)*, 4(1), 180–191.
- Samuel, R., Zaini, N. H., Hassan, W. H. W., Talib, A. N., & Ramly, F. A. (2021). Nurses' perspective of work-related stressors. *IOP Conference Series: Earth and Environmental Science*, 704(1), 12026.
- Sanderayanti, D. (2015). Pengaruh motivasi berprestasi dan kemampuan berpikir kritis terhadap hasil belajar matematika siswa di sdn kota depok. *Jurnal Pendidikan Dasar*, 6(2), 222–231.
- Santi, Y., Rahmat, T. Y., & Darmansyah, N. E. (2017). Marketing strategy in startup business of housekeeper provider. Russian Journal of Agricultural and Socio-Economic Sciences, 72(12), 42-53.
- Santosa, I., & Nugraha, R. A. (2022). Implementasi Learning Management System untuk Mendukung Pembelajaran Jarak Jauh Sekolah Menengah Kejuruan. *Dinamisia: Jurnal Pengabdian Kepada Masyarakat*, 6(4), 905–914.
- Sarstedt, M., Ringle, C. M., Cheah, J.-H., Ting, H., Moisescu, O. I., & Radomir, L. (2020). Structural model robustness checks in PLS-SEM. Tourism Economics, 26(4), 531–554.

- Schermelleh-Engel, K., Moosbrugger, H., & Müller, H. (2003). Evaluating the fit of structural equation models: Tests of significance and descriptive goodness-of-fit measures. Methods of Psychological Research Online, 8(2), 23-74.
- Septiyany, P. S., & Yuswantina, R. (2023). Analisis Kepuasan Pasien Peserta JKN Rawat Jalan terhadap Kualitas Pelayanan Kefarmasian di Puskesmas: Analysis of Outpatient JKN Participant Patient Satisfaction on the Quality of Pharmaceutical Services at the Health Center. Journal of Holistics and Health Sciences (JHHS), 5(1), 194–202.
- Shabbir, M. S., Mahmood, A., Setiawan, R., Nasirin, C., Rusdiyanto, R., Gazali, G., Arshad, M. A., Khan, S., & Batool, F. (2023). RETRACTED ARTICLE: Closed-loop supply chain network design with sustainability and resiliency criteria(Environmental Science and Pollution Research). Environmental Science and Pollution Research, 30(6), 16778. https://doi.org/10.1007/s11356-021-
- Siregar, E., & Marliyah, M. (2022). Analysis of Cooperative Health Level Assessment by the Office of Small and Medium Enterprises (UKM) of North Sumatra Province. Jurnal Fokus Manajemen, 2(1), 17-26.
- Sudarta, I. W. (2015). HUBUNGAN KOMUNIKASI TERAPEUTIK PÉRAWAT DALAM MEMBERIKAN OBAT ORAL DENGAN TINGKAT KEPUASAN PASIEN. Jurnal Kesehatan, 3(1).
- Sudaryanto, S., Courvisanos, J., Dewi, I. R., Rusdiyanto, R., & Yuaris, J. R. (2022). Determinants of purchase intention during COVID-19: A case study of skincare products in East Java. Innovative Marketing, 18(1), 181-194. https://doi.org/10.21511/im.18(1).2022.15
- Sudaryanto, S., Irawan, B., Dewi, İ. R., Hanim, A., Istiyani, N., & Rusdiyanto. (2024). How Customer Value and Customer Self Construal Influence Repurchase Intentions Moderated by Customer's Country Origin: Study of Gen Z in Indonesia-Malaysia. Journal of Ecohumanism, 3(7), 723-740. https://doi.org/10.62754/joe.v3i7.4240
- Sulasih, S. (2016). Pengaruh Motivasi, Persepsi dan Internalisasi Standar ISO 9001 terhadap Kinerja. El-Jizya: Jurnal Ekonomi Islam, 4(2), 317-344.
- Sumaedi, S., Bakti, I. G. M. Y., Rakhmawati, T., Astrini, N. J., Widianti, T., & Yarmen, M. (2016). Indonesian public healthcare service institution's patient satisfaction barometer (IPHSI-PSB): a new public healthcare patient satisfaction index. International Journal of Productivity and Performance Management, 65(1), 25-41.
- Sunarsih, S., & Yuniastini, Y. (2016). Kualitas Pelayanan Kesehatan Dengan Tingkat Kepuasan Pasien Di Klinik Terpadu Poltekkes Kemenkes Tanjungkarang. Jurnal Kesehatan, 5(2).
- Supranoto, P. M., & Suparman. (2022). Pengaruh Kualitas Pelayanan dan Fasilitas Kesehatan Terhadap Kepuasan Pasien Rawat Inap Ruang Anggrek (Studi Kasus Rumah Sakit Umum Daerah dr . Chasbullah Abdulmadjid Kota Bekasi) Putri Maryani Supranoto 1 , Suparman , 2 , Program Studi Administrasi Bisn. *Jurnal Administrasi Bisnis*, 2(4), 619–626. Susanti, Y., Azis, Y., & Kusnadi, D. (2015). Pengaruh appointment registration system terhadap waktu tunggu dan kepuasan pasien. *Global*
- Medical and Health Communication, 3(1), 40-47.
- Susanto, H., Prasetyo, I., Indrawati, T., Aliyyah, N., Rusdiyanto, Tjaraka, H., Kalbuana, N., Syafi'ur Rochman, A., Gazali, & Zainurrafiqi. (2021). The impacts of earnings volatility, net income and comprehensive income on share price: evidence from Indonesia stock exchange. Accounting, 7(5), 1009-1016. https://doi.org/10.5267/j.ac.2021.3.008
- Suter, E., Oelke, N. D., Adair, C. E., & Armitage, G. D. (2009). Ten key principles for successful health systems integration. Healthcare Quarterly (Toronto, Ont.), 13(Spec No), 16.
- Swain, S., & Kar, N. C. (2018). Hospital service quality as antecedent of patient satisfaction-a conceptual framework. International Journal of Pharmaceutical and Healthcare Marketing, 12(3), 251-269.
- Tan, C. N.-L., Ojo, A. O., Cheah, J.-H., & Ramayah, T. (2019). Measuring the influence of service quality on patient satisfaction in Malaysia. Quality Management Journal, 26(3), 129-143.
- Tarjo, T. (2020). The effect of service quality and facilities on patient satisfaction (study at the tanah sepenggal health center in bungo district). International Journal of Human Resource Studies, 10(3), 190205.
- Tejada, J. J., & Punzalan, J. R. B. (2012). On the misuse of Slovin's formula. The Philippine Statistician, 61(1), 129-136.
- Tengilimoglu, D., Kisa, A., & Dziegielewski, S. F. (2001). Measurement of patient satisfaction in a public hospital in Ankara. Health Services Management Research, 14(1), 27-35.
- Thomas, A. J. (2009). Exercise intervention in the critical care unit-what is the evidence? *Physical Therapy Reviews*, 14(1), 50-59.
- Tjaraka, H., Hidayat, W., & Rusdiyanto, R. (2022). The role of earning management as a mediator of the effect of the facial width to height $ratio\ CEOs\ on\ leverage.\ \textit{Cogent Business and Management, 9} (1),\ 1-19.\ https://doi.org/10.1080/23311975.2022.2115733$
- Trentman, T. L., Cornidez, E. G., Wilshusen, L. L., Chang, Y. H., Seamans, D. P., Rosenfeld, D. M., Freeman, J. A., & Chien, J. J. (2013). Patient satisfaction in an academic chronic pain clinic. Pain Practice, 13(5), 372-379.
- Tuami, H., Sidin, A. I., & Zulkifli, A. (2018). The analysis service quality based on patient expectation and assessment at Mamuju regecy local public Hospital 2016. Proceedings of the International Conference on Healthcare Service Management 2018, 226-231.
- Utari, W., Indrawati, M., Sobakh, N., Waras, & Rusdiyanto. (2024). The Effect of Service Quality, Consumer Perceptions, and Facilities on Consumer Satisfaction: Case study in Indonesia. *Journal of Ecohumanism*, 3(4), 652–663. https://doi.org/10.62754/joe.v3i4.3465 Utari, W., Iswoyo, A., Chamariyah, Waras, Mardiana, F., Rusdiyanto, & Hidayat, W. (2021). Effect Of Work Training, Competency and
- Job Satisfaction on Employee Productivity: A Case Study Indonesia. Review of International Geographical Education Online, 11(4), 696–711. https://doi.org/10.33403/rigeo.8006783
- Utari, W., Sudaryanto, Jannah, N., Sobakh, N., & Rusdiyanto. (2021). Consumer interest with regard to product completeness, promotion and location: The case of Indonesia. Economic Annals-XXI, 188(3-4), 127-133. https://doi.org/10.21003/ea.V188-15
- Wagner, D., & Bear, M. (2009). Patient satisfaction with nursing care: a concept analysis within a nursing framework. Journal of Advanced Nursing, 65(3), 692-701.
- Wetzels, M., Odekerken-Schröder, G., & Van Oppen, C. (2009). Using PLS path modeling for assessing hierarchical construct models: Guidelines and empirical illustration. MIS Quarterly, 177-195.
- Williams, B. (1994). Patient satisfaction: a valid concept? Social Science & Medicine, 38(4), 509-516.
- Wulandari, A., Adenan, A., & Musafaah, M. (2017). Hubungan antara persepsi pada pelayanan administrasi rawat inap dengan kepuasan keluarga pasien peserta jaminan kesehatan nasional. Jurnal Publikasi Kesehatan Masyarakat Indonesia, 3(2).
- YOGASWARA, A. (2022). Pengaruh Kualitas Pelayanan Publik Terhadap Kepuasan Masyarakat Penerima Pelayanan Di Masa Pandemi Covid 19 Pada Kantor Kecamatan Tawang Kota Tasikmalaya. Universitas Jenderal Soedirman.
- Yuliantine, T., Indasah, I., & Siyoto, S. (2018). Analysis of marketing mix characteristics of marketing factor 7P (Product, Price, Place, Promotion, People, Process, Physical Building) to patient satisfaction of inpatient patient hospital Muhammadiyah Ahmad Dahlan Kediri City. Journal for Quality in Public Health, 1(2), 50-57.
- Zheng, S., Tucker, A. L., Ren, Z. J., Heineke, J., McLaughlin, A., & Podell, A. L. (2018). The impact of internal service quality on preventable adverse events in hospitals. Production and Operations Management, 27(12), 2201-2212.
- Zulfikar, A., Damarsiwi, E. P. M., & Indriasari, N. (2022). Influence Quality Of Service And Facility To Satisfaction Of Patient Take Care Of To Stay With Pain Of Assyifa Paradise Fruit Of Bengkulu South. Jurnal Ekonomi, Manajemen, Akuntansi Dan Keuangan, 3(4), 1325 - 1332.