VISITOR RESPONSE AS THE IMPACT OF SERVICE QUALITY IN PRIVATE HOSPITAL

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ABSTRACT

Lately, there have been a lot of complaints from patients and their families who go to the hospital because they are not satisfied with the services provided by the hospital. Hospitals are a service industry that is starting to become competitive because many private hospitals are competing. This study aims to determine the effect of the response of hospital visitors on the quality of hospital services. The research sample was the introduction of patients in three middle-class private hospitals in Surabaya, namely Adi Husada Hospital, Siloam Hospital and Premier Hospital. A total of 405 samples were divided into 2 groups, namely group 1 with 30 respondents and group 2 with 375 respondents. Data analysis of group 1 with Cronbach's Alpha aims to test the quality of the questionnaire before it is used to produce data analysis. To answer the research objectives, Structural Equation Model (SEM) analysis was carried out on the data in group 2. In this test, 5 data were detected as outliers so that the remaining 370 data were analyzed. The results show that the loyalty of patients and their families to visit the same hospital is influenced by the expectations and satisfaction of patients and their families and is influenced by the quality of hospital services they feel. Service quality has the greatest influence on patient and family loyalty.

Keywords: Expectations, service quality, loyalty, satisfaction

INTRODUCTION

Consumer satisfaction is a consumer response that must be considered for business people. Consumer satisfaction is strongly influenced by service quality (Glemler et al, 2001). So that business people must pay attention to the quality of service. In addition to service quality, business people must also plan for business continuity in the future. To maintain and improve the continuity of a business, customer loyalty is needed. Consumer loyalty is influenced by consumer satisfaction (han and Rya, 2009).

The hospital is a service industry that also competes for its survival. Like other service companies, hospitals must provide the best service. The key to success in the service industry is high service quality (Meesala, A., at, al, 2018). In today's era, many companies are starting to focus and improve the quality of their services to encourage customer satisfaction (Kumar, et al, 2018). As a health service industry, hospitals must improve the quality of service in order to get a response from visitors so that visitors become loyal.

Ironically, the reality that surrounds us, we often hear complaints

from visitors about the low quality of hospital services that are considered not in accordance with the expectations of patients and families. Currently, many private hospitals are referrals for patients who expect better services from regional hospitals. This is the cause of high competition between hospitals, especially private hospitals lately (Raju and Lonial, 2002). In addition to the quality of service, the expectations of patients and their families also greatly affect their satisfaction and loyalty. As the company's competitiveness increases, consumer expectations and demands also increase (Ali et al., 2015). Hospitals as service companies must pay attention to patient expectations in order to increase visitor satisfaction and loyalty. Fu, et al, (2018) have proven that consumer expectations affect consumer satisfaction which in turn has an impact on satisfaction.

Many studies examine the consumer response of a company, as well as the response of patients and families to a hospital. Such as research on the quality of health services in India (Prabhakar, 2014). The quality of service is perceived by patients from various countries (Japan, Myanmar, Arabia, and Thailand) (wongrukmit, et al, 2014). Research that examines various conditions that cause patient loyalty in hospitals (Chie-Wet, et al, 2013). However, there is no linking patient loyalty with patient and family expectations. Because the expectations of patients and their families are very important in the health industry such as hospitals, the authors feel that the results of this study are very important to improve services for patients and their families and to maintain the survival of the hospital itself.

LITERATURE REVIEW AND HYPOTHESES DEVELOPMENT

This study focuses on visitor responses as a result of service quality in private hospitals. In this study want to see the effect of expectations on satisfaction, the effect of service quality on satisfaction, service quality on loyalty, and the effect of satisfaction on loyalty. In accordance with the previous theory, the relationship and influence between expectations, service quality, satisfaction and loyalty is supported by the theory and previous research according to the following discussion.

Consumer Expectations and Satisfaction

In economics, especially marketing, it has been explained that consumer expectations are very important in the consumption process. Expectation Confirmation (ECT) theory is one theory that evaluates customer satisfaction after making a purchase with their expectations (Oh, 2000). Confirmation is done to customers to find out the initial expectations of consumers (Oliver, 1980). Consumer expectations lead to the creation of direct satisfaction, namely high expectations increase consumer satisfaction (Bhattacherjee, 2001). From the theory and previous research, it is hypothesized that the effect of expectations and consumer satisfaction is as follows.

H_1 : Expectations have a positive effect on the satisfaction of hospital visitors.

Service Quality and Consumer Satisfaction

Quality is the totality of features and characteristics of a product or service that depend on its ability to satisfy stated or implied needs (Kotler and Keller, 2009). Service quality refers to the expected service and consumer perceptions of the actual service (Parasuraman et al, 1988). Service quality starts from the needs of service

users and ends with the perceptions of service users, so that service quality depends on the ability of service providers or parties providing services to consistently meet the expectations of service users.

The concept of service quality is an assessment factor that reflects consumer perceptions of five specific dimensions of service performance. (Parasuraman et al, 1988) concluded that there are five dimensions of ServQual (Quality of Service) used to measure service quality, namely tangible, reliability, responsiveness, assurance and empathy. Concrete evidence is a facility that can be seen and used by the company in an effort to meet customer satisfaction, such as office buildings, office equipment, employee appearance and others. Constraints (Reliability), namely the ability to provide services to customers as expected, such as the ability to keep promises, the ability to solve problems and the ability to minimize errors. Responsiveness, namely responsiveness, willing to listen to and respond to customers in an effort to satisfy customers, for example: being able to provide information correctly and appropriately, not showing a pretentious attitude and being able to provide immediate help. Assurance, namely the ability of employees to generate trust and confidence in customers through knowledge, courtesy and respect for customer feelings. While caring / Empathy (Empathy) is the ability or willingness of employees to provide personal attention, such as being friendly, understanding the needs and caring for their customers.

According to Kotler and Keller (2009), satisfaction is a person's feelings of pleasure or disappointment arising from comparing the perceived performance of a product (or outcome) with their expectations. Several researchers have proven the importance of the influence of service quality on consumer loyalty. Farooq, et al, 2018 proved the influence of service quality on customer satisfaction of Malaysian airlines. Jiang, et al, 2016 have proven the effect of service quality on air transportation user satisfaction in China. H_2 : Service quality has a positive effect on the satisfaction of hospital visitors.

Service Quality And Consumer Loyalty

Loyalty (service loyalty) is loyalty that shows the possibility of a customer or visitor to make repeat visits within a certain period of time (Kotler and Keller, 2009). Various studies have proven that loyalty is influenced by service quality, including Jiang and Zhang (2016) who prove that airline quality affects passenger loyalty in China. Meesala, et al (2018) showed in their research that the quality of service in hospitals affects patient loyalty in India. Faroog, et al (2018) prove that Malaysian airline consumers will be loyal if they get good service. Dan Shi, et al, 2014 show that the quality of service in casinos makes their customers loyal. The theory and previous research are the basis for proposing the following hypothesis.
H_3 : Service quality has a positive effect on the loyalty of hospital visitors.

Customer Visitor Satisfaction and Loyalty

Kepuasan dan loyalitas pelanggan adalah dua variabel yang sering dikaitkan dalam riset pemasaran. Banyak ilmuwan, khususnya ilmuwan pemasaran mengatakan bahwa kepuasan merupakan faktor yang menyebabkan konsumen menjadi loyal. Banyak penelitian di berbagai bidang membuktikan hubungan antara kedua variabel tersebut. Seperti penelitian di

Casino yang membuktikan bahwa kepuasan pelanggan membuat pelanggan loyal dan kembali lagi ke Casino (shi, Y., Prentice, C. and He, Wei., 2014). Kepuasan konsumen meningkatkan loyalitas, rekomendasi dan pembelian kembali (Wilson, et al, 2008). Jiang, Zhang (2016) membuktikan bahwa kepuasan maskapai di China membuat penumpang loyal. Dalam penelitian pada maskapai lain, kepuasan penumpang selama transit juga penting untuk loyalitas penumpang (Fu, et al, 2018). Penelitian pada pasien rumah sakit di India juga menunjukkan bahwa kepuasan pasien merupakan faktor yang mempengaruhi loyalitas pasien tersebut terhadap rumah sakit (Meesala, et al, 2018). Teori dan penelitian sebelumnya merupakan dasar untuk mengajukan hipotesis berikut.

H_4 : Satisfaction has a positive effect on the loyalty of hospital visitors.

RESEARCH METHODS

This study focuses on private hospital services in Surabaya. Three private hospitals in Surabaya were chosen because they are middle class private hospitals in Surabaya. Respondents were randomly selected from the three hospitals to be used as samples. The sample was selected based on age and education criteria. The age of the respondent is at least 17 years with a minimum education of junior high school. This respondent criterion is very important to ensure that the respondent can and is able to fill out the questionnaire properly so that it produces good data as well. The sample is divided into two groups, namely the first sample group of 30 respondents which aims to test the quality of the questionnaire and the second sample group for hypothesis testing. The sample of group two with a quota of 375 respondents fulfilled the analysis needs with SEM. Respondents are patients who come to three selected hospitals. Questionnaires were distributed to 375 patients who were willing to contribute to the study.

The first group sample of 30 respondents was asked to fill out the initial questionnaire. Data from the initial questionnaire was used to test the validity and reliability of the questions in the questionnaire. Test the validity and reliability using Cronbach's Alpha with the help of SPSS software. Valid and reliable questionnaires were used to obtain data from the second sample group of 375 respondents. Data from the second sample group was then analyzed by SEM analysis using AMOS software. Prior to the SEM analysis, a descriptive analysis was conducted to provide an overview of the data.

There are two models of analysis in SEM, namely first, SEM analysis with a measurement model test which aims to test the indicators and variables being measured. AMOS is software that is built with parametric principles so that the analyzed data must meet the assumption of normality in a multivariate manner. After the assumption of normality is met, CFA is carried out to confirm the quality of the data, namely to confirm the validity and reliability of the indicators. The second test model is the structural model test. In this structural model, the goodness of fit criteria are tested to ensure that the hypothesized data are sufficiently fit. Furthermore, hypothesis testing is carried out and see the magnitude of the influence between variables, both direct, indirect and total effects.

DATA ANALYSIS

The validity and reliability test aim to test the questions in the questionnaire whether it is valid and reliable to measure variables. In this

study, validity and reliability tests were carried out for the first sample group. The first 30 respondents were asked to fill out a questionnaire. Data from 30 respondents was used to test the validity and reliability of the indicators in the questionnaire. The test results are presented in tables 1 and 2 below. With the help of SPSS software, the results of data analysis showed that there were several invalid items. The next stage invalid items are removed one by one while being retested so that all items are valid. All valid items are shown in table 1 with the Corrected Item-Total Correlation value above 0.3.

Reliability test is a tool to measure the questions in the questionnaire which is an indicator of a variable or construct. A questionnaire is said to be reliable if the answers are consistent or stable over time. This can be tested with Alpha Cronbach. The higher (closer to number 1) the value of Cronbach's Alpha, the more reliable the indicator in that variable. Table 2 shows that the three variables have fairly good reliability because the Cronbach's Alpha value of the three variables shows numbers above 0.7.

Table 1. Validity Test

Indicator	Corrected Item-Total Correlation	Description
h1	0,768	Valid
h2	0,569	Valid
h3	0,507	Valid
h4	0,490	Valid
S1	0,611	Valid
S2	0,716	Valid
S3	0,437	Valid
S4	0,565	Valid
S5	0,617	Valid
S6	0,416	Valid
S7	0,469	Valid
S8	0,629	Valid
I1	0,424	Valid
I2	0,588	Valid
I3	0,508	Valid
I4	0,660	Valid
K1	0,567	Valid
K2	0,723	Valid
K3	0,451	Valid
K4	0,308	Valid

Table 2. Reliability Test

Variable	Cronbach's Alpha	Description

Expectation	0,825	Reliable
Service quality	0,721	Reliable
loyalty	0,783	Reliable
satisfaction	0,704	Reliable

Valid and reliable questionnaires were then distributed to the second sample group. Questionnaires were distributed randomly to patients who were willing and willing to fill out the questionnaire. A total of 375 respondents from three private hospitals were obtained for 10 days from 22-31 May 2022. The results of this second sample group were analyzed by SEM. Prior to the SEM analysis, a description of the respondent's characteristics is presented in the following descriptive analysis.

DESCRIPTIVE ANALYSIS

Data on respondent characteristics were obtained from questionnaires filled out by respondents in the respondent data section which included gender, age and education level. The data regarding the characteristics of the respondents in this study are described in Tables 3, 4 and 5 below. Table 3 shows that of the 375 respondents 47.2% were male while 52.8% were female. Thus, it can be concluded that the number of respondents who inaugurate patients in hospitals is almost the same between men and women. Table 4 shows that of the 375 respondents who are inpatients, most are adults aged 36-45 years, as many as 177 respondents or 47.3%. From the data above, there are rarely patients who are less than 25 years old who are willing to be respondents.

Table 3. Research Respondents by Gender

Gender	Total	%
Man	177	47,2
Woman	198	52,8
Total	**375**	**100**

Table 4. Research Respondents by Age

Age	Total	%
< 25	27	7.2
26 - 35	89	23.8
36 - 45	177	47.3
> 45	82	21.7
Total	**375**	**100**

Table 5. Research Respondents Based on Visitor Status

Education	Total	%
Junior high school	41	10.9
Senior High School	136	36.3

College	198	52.8
Total	**375**	**100**

Table 5 shows the education level of the respondents. To ensure that respondents can read and understand the questionnaire well, the data used is data from respondents who have a minimum of junior high school education. From the data in table 5, most of the respondents are patients who are introductory to higher education as many as 198 people from 375 respondents or 52.8% of the total respondents.

RESULTS

The statistical method used to test the hypothesis in this study uses structural equation modeling (SEM). The choice of SEM analysis technique is because SEM has the ability to test data that cannot be measured directly, even complex test models that cannot be tested by OLS analysis. In this study, all variables are variables that cannot be measured directly and there are direct and indirect effects between variables so that it is more effective when using SEM.

There are two test models in SEM analysis, namely the measurement model test or the measurement model and the structural model test. Measurement model testing is part of the SEM model that describes the latent variables and indicators. Testing the measurement model is one part of the test in SEM which aims to test the latency indicator. Testing the measurement model can be tested separately for each latent variable or can be together by connecting two directions for each latent variable as proposed by Adedeji (Adedeji, at al, 2016). Normality and outlier tests are also available in SEM. Because the SEM used in this study uses AMOS software, it must meet the normality assumption.

Measurement Model

AMOS is a software for SEM that is parametric so that several assumptions must be met, including the data must be normally distributed. The data is normally distributed if the cr (critical ratio) skeness or cr kurtus is between -1.96 to 1.96 (according to the table value $Z_{0.05}$). If the data is not multivariately normal, then the outlier data is excluded based on skewness and kurtosis (Chahal, et al, 2016).

The results of the processing of 375 data that were processed the multivariate cr value (overall) was 2.97 so that it was concluded that the data were not normally distributed. Because the data is not normally distributed, then the outlier test was performed. If p1 and p2 in the mahalanobis distance table are less than 0.05, then the data is entered as an outlier. From the results of the analysis, there are 5 data detected as outliers. Furthermore, the five data are removed gradually until the cr value is multivariately less than 2.58. From 370 data, after eliminating five data that were detected as outliers, a multivariate cr value of 1.565 was obtained, so it was concluded that the data were normally distributed and could be analyzed further.

Construct Validity Test

The construct validity test aims to see whether the indicator is valid or appropriate to measure the latent variable with the indicator. Confirmatory factor analysis (CFA) is used to ensure that the indicators used in this study are valid enough to measure variables. Testing using Confirmatory Factor Analysis (CFA) also aims to test the reliability and contribution of indicator variables in measuring latent variables.

The indicator is said to be valid if the standard regression weight (SRW) is more than 0.5 and the CR value is more than 1.96 or the probability is less than 0.05 (Chahal, et al, 2016). In this test there is one question item that measures satisfaction has a value of 0.349 so that one indicator is omitted for further testing. Further test results show that all SRW and CR values meet the requirements so that all indicators are valid for measuring variables. The test results are shown in table 6.

Table 6. Construct Validity Test

			SRW	C.R.	P	
h3	<---	Expectation	0,712			Valid
h2	<---	Expectation	0,646	9,924	***	Valid
h1	<---	Expectation	0,547	8,696	***	Valid
h4	<---	Expectation	0,725	10,563	***	Valid
s3	<---	Service quality	0,676			Valid
s2	<---	Service quality	0,568	9,794	***	Valid
s1	<---	Service quality	0,648	11,02	***	Valid
s4	<---	Service quality	0,691	11,661	***	Valid
s5	<---	Service quality	0,638	10,875	***	Valid
s6	<---	Service quality	0,591	10,15	***	Valid
s7	<---	Service quality	0,656	11,148	***	Valid
s8	<---	Service quality	0,612	10,475	***	Valid
l2	<---	Loyalty	0,674			Valid
l3	<---	Loyalty	0,695	11,361	***	Valid
l4	<---	Loyalty	0,714	11,609	***	Valid
l1	<---	Loyalty	0,689	11,281	***	Valid
k1	<---	Satisfaction	0,682			Valid
k2	<---	Satisfaction	0,648	8,381	***	Valid
k3	<---	Satisfaction	0,632	8,32	***	Valid

Construct Reliability Test

The second test is a reliable measuring instrument, namely an index that shows the extent to which the measuring instrument is reliable or trustworthy. Reliability is a measure of the consistency of these indicators, the indicator is said to be reliable in general if the AVE (Average Variance Extracted) value is above 0.6 (Nunnally, 1978) with the following formula:

$$AVE = \frac{\Sigma \lambda^2}{\Sigma \lambda^2 + (1-\lambda^2)}$$

From the calculation using the above formula, the AVE values for the variables of satisfaction, loyalty, expectation and service quality are 0.692, 0.787, 0.754 and 0.844, respectively. From these results indicate that the four variables have an AVE value above 0.5, so that the indicators of the four variables are reliable.

Structural Model

The next test is the structural model testing. In this test, the model is described in accordance with the theory and hypothesized problems. In this structural model, the influence between latent variables and the contribution of each indicator in compiling the latent variables is measured together.
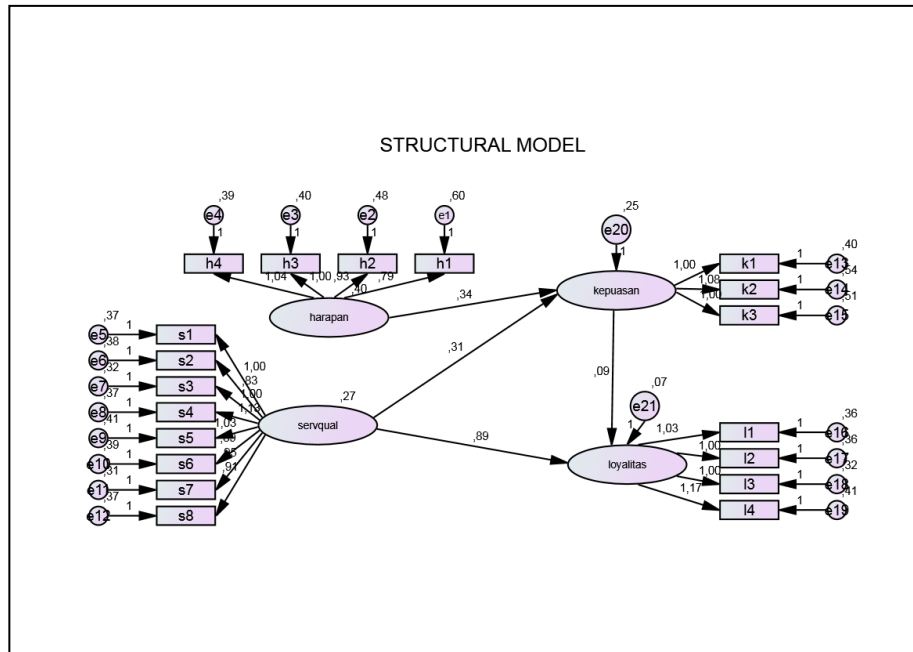
Figure 1 Structural Test Model

Table 7. Goodness of Fit

Name of category	Name of index	Value	Level of acceptance
Absolute fit	Chi-square	P = 0,00	P > 0,05
	RMSEA	0,037	RMSEA < 0,08
	GFI	0,94	GFI > 0,9
Incremental fit	AGFI	0,923	AGFI > 0,9
	CFI	0,964	CFI > 0,9
	TLI	0,959	TLI > 0,9
	NFI	0,903	NFI > 0,9
Parsimonious fit	Chi-square / df	1,517	Chi-square / df < 5,0

The goodness of fit value to see the level of model feasibility can be seen from several measurements as shown in table 7 (Awang, Z., 2014). Based on the goodness of fit value from the structural model test, according to the criteria of Awang, Z., (2014), all values in the table above are in accordance with the criteria except the Chi-square probability value which is below 0.05. However, Awang, Z also explains in his book that the goodness of fit with Chi-square is very sensitive for the number of samples above 200. In this study, the number of samples that became the data analysis was 370, so the chi-square could not be used as a reference for fit. Thus, the other match values are used as references. Because all goodness of fit criteria are met except for chi-square, it can be concluded that the hypothesized model is quite fit. The ratio between chi-squared and frequency degrees (df) is 1.517. This number is far below 5, so the model we use is parsimony.

After it is proven that the hypothesized model is quite feasible, it

can be seen the influence between variables. Based on parameter estimation, the model can be written mathematically. While the p-value can be seen whether the variable has a significant effect. Based on the P value of the estimated coefficients in table 8, all coefficients are significant. Expectations have a significant effect on satisfaction with an estimated coefficient of 0.344 and a p-value of 0.00 so that hypothesis 1 which states that expectations have a positive effect on hospital visitor satisfaction can be accepted. Service quality has a significant effect on satisfaction with an estimated coefficient of 0.313 and a p-value of 0.00. This proves that hypothesis 2 which states that service quality has a positive effect on hospital visitor satisfaction is accepted.

Table 8. Estimation Coefficient

			Coefficient Estimate	P-value	Label
Satisfaction	<---	Expectation	,344	***	significant
Satisfaction	<---	Service quality	,313	***	significant
Loyalty	<---	kepuasan	,091	,075	significant at 10%
loyalty	<---	servqual	,893	***	Significant

Service quality has a significant effect on loyalty, so hypothesis 4 satisfaction has a positive effect on hospital visitor loyalty. This is evidenced by the coefficient value of 0.893 with a p-value of 0.00. However, specifically for the effect of satisfaction on loyalty, the significance level is 10% or the confidence level is 90% because the P-value coefficient is 0.075 greater than 0.05 so it is not significant at 0.05 but smaller than 0.10. This shows that hypothesis 3, namely the quality of service has a positive effect on the loyalty of hospital visitors. From the estimation results in table 8, the causal model can be formed mathematically as follows.

Satisfaction = 0.344 Expectation + 0.313 service quality
Loyalty = 0.091 Satisfaction + 0.893 service quality

SEM analysis is also able to show the effect of a variable with other variables. The influence can be in the form of direct influence, indirect influence or total influence. The total effect is the result of the sum of the direct and indirect effects which are also presented in table 9.

Table 9. Effect between latent variables

	Direct Effects	Indirect Effects	Total effects
service quality ==> Satisfaction	0.282	-	0.282
service quality ==> Loyalty	0.838	0.029	0.865
Expectation ==> Satisfaction	0.381	-	0.381

Expectation ==> Loyalty	-	0.031	0.036
Satisfaction ==> Loyalty	0.095	-	0.095

Table 9 shows that service quality has a direct effect on satisfaction of 0.282. Service quality also affects loyalty either directly or indirectly. The influence of service quality on loyalty directly is 0.838 and indirectly is 0.029. The total effect of service quality on loyalty is 0.865. Expectations have a direct effect on satisfaction of 0.381 and an indirect effect on loyalty of 0.031. While satisfaction has a direct influence on loyalty of 0.095. Overall, the biggest influence is the effect of service quality on loyalty. It can be explained that the strongest influence on loyalty in this case is the quality of service.

DISCUSSION

The results of the above study indicate that all hypotheses are accepted so that it is evident that the loyalty of hospital visitors is influenced by the expectations and satisfaction of patients and families as well as service quality. There are direct and indirect effects of the research variables above. Overall the strongest influence is the direct effect of service quality on the loyalty of hospital visitors. This result is in line with the results of many studies. For example Faroog, et al, (2018) which says that Malaysia Airlines customer satisfaction is influenced by the dimensions of service quality. Other studies also say the same thing that airline customer satisfaction in China is influenced by service quality and affects consumer loyalty (Jiang, and Zhang, 2016). Similar to previous research, Meesala (2018) also stated the results of research on the importance of service quality on patient satisfaction and loyalty in hospitals in India. In another study, expectations affect the satisfaction and loyalty of transit passengers (Fu, et al 2018).

The importance of high service quality in the service industry as stated by several researchers has been proven in this study. The results showed that the direct influence of service quality has a high enough value to affect visitor loyalty. This is in line with Meesala, et al, (2018), Anderson and Zeithamal (1984), and Babakus and Boller (1992) who said that in today's era with a lot of competition, it is necessary to monitor and develop service quality to increase efficiency and volume. business.

CONCLUSION

This study aims to see the response of visitors to the quality of service at a private hospital in Surabaya. The visitor's response in this case is satisfaction and loyalty. The results of the research and discussion above prove that the expectations of visitors and the quality of hospital services have a positive effect on the satisfaction of hospital visitors. And visitor loyalty is influenced by the quality of hospital services, visitor expectations and hospital visitor satisfaction. Of all the factors that influence loyalty, the quality of hospital services has a very large direct influence. So it can be said that the quality of service at the hospital is the main key to the loyalty of hospital visitors.

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