

Patients' Satisfaction on Selangor Hospitals

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Abstract

Malaysian healthcare is nominated as one of the best healthcare providers in the world. However, does this fact reflect the patients' satisfaction? Therefore, this research aims to investigate whether empathy, competency, and service quality influence patients' satisfaction in healthcare services in Selangor, Malaysia. Primary data are collected using a self-administered questionnaire and a sample of 206 patients from four government and private hospitals in Selangor. Data were analysed through descriptive statistics, correlation and regression analysis. The findings show that empathy has the strongest relationship ($r = .403$) followed by service quality with ($r = .284$) and competency ($r = .176$). All factors also influenced patients' satisfaction. All identified variables contribute to a big amount of variances ($R^2 = 66.8$ percent) to the overall hospital performance that makes its client happy and satisfied. The understanding patients' satisfaction will lead to many improved services. Practically, this study can contribute to a better experience for patients and knowledge for hospitals to strive for a better service healthcare provider.

Index terms— patients' satisfaction, hospitals, empathy, competency, service quality.

1 Introduction

atient satisfaction is a profoundly attractive result of clinical consideration in the medical clinic and may even be a component of a wellbeing status. Patients' satisfaction is an important outcome measure guiding quality improvement in the healthcare setting while the patient-centred care movement places increasing importance on patient engagement in clinical decision-making. A patient's appearance of fulfilment or disappointment is a judgment on the nature of clinic care in the entirety of its viewpoints. Whatever its qualities and restrictions, quiet fulfilment is an indicator that ought to be crucial to the appraisal of the nature of care in clinics. Recently, the International Living Annual Global Retirement Index nominated Malaysia, with a score of 95 out of 100, as the first rank in the Best Healthcare in the World category of the 2019 (Elankovan, 2019). Being number one means that Malaysian hospitals are great in serving their patients. So, does this fact reflect in the patients' satisfaction? Ganasegeran (2015) pointed out some bad images in Malaysian hospitals such as too long waiting times, emotional burnout, service orientation of doctors, particularly doctor's professionalism, the lack of empathy, poor level of competencies, aggressive pursuit of monetary gains, and their disregard for patient suffering in medical practice had caused substantial dissatisfaction towards public healthcare service providers. Quek (2014) argued that these two (2) categories of healthcare which is the public sector and private sector healthcare are serving Malaysia healthcare at its best. ??apport et.al, (2019) documented that good communication and environments can improve patient experience and follow-up at home is vital. They even suggested that a special care centre needs for patients those who are involved in entry and exit from the hospital. Similarly, the Malaysian public healthcare sector is trying to serve its patients despite the influx of patient admissions, propagating surplus demand of uneven population healthcare provider ratio and perceptions of poor service quality. In the scope of patient satisfaction in Selangor, health services are considered to be of good quality if customers' expectations

44 and perceptions are well balanced. Sharifa (2010) alluded the determinants confirming customers' expectations
45 will lead to satisfaction, while factors disconfirming it will result in customers' dissatisfaction, reduced compliance
46 to physicians' treatment and deterioration in overall disease management. The study is to investigate the factors
47 affecting patients' satisfaction, to 'determine the most affecting factors that affect patients' satisfaction and to
48 determine if there are any differences in patient satisfaction based on types of hospitals.

49 2 II.

50 3 Literature Review

51 The satisfaction of patients with technical expertise and outcomes is positively linked with the delivery
52 enhancement efforts of hospitals. Patients' satisfaction is recognized as one of the most important quality
53 dimensions and key success indicators in the health care industry (Oyatoye, 2016).

54 4 a) Definition of Patients' Satisfaction

55 Patients' satisfaction is defined as an individual assessment of health care providers and services and patients'
56 satisfaction prompts compliance with medical advice and treatment, service utilization, and enhancement of the
57 doctor-patient relationship. Patients' satisfaction with hospital treatment positively influences the image of the
58 medical facility ??Afthanorhan et al, 2018). They found that many factors are involved which are the assessment
59 of the quality of the medical service associated with the rapid solution of the reported P problem, staff empathy,
60 as well as the understanding and precise knowledge. Experience with a health care service can have a positive
61 influence on the patient's expectations of the services. Besides, these researchers suggested the need to satisfy
62 the health needs of patients by the staff competency but also strive to meet these expectations which lead to
63 enhanced satisfaction considering the quality of medical services. As the health care staff meets the expectation
64 of patients, the patients' will be more satisfied. Thiedke (2007) documented that patients' satisfaction reflects the
65 provider's ability to successfully deliver care or laboratory services that meet patients' expectations and needs.

66 5 b) Empathy

67 Empathy refers to how hospital staffs caring and personalized attention to its patients that will gradually lead
68 to patients' satisfaction. In the case of healthcare services, empathy is the ability to treat, care for and cure
69 the patients. Empathic involvement occurs when an individual responds to the emotional state of someone else
70 without experiencing the emotion themselves. The patients hope the doctors can give more attention and listen
71 to them. Other than ease of communication attention and patience of the staffs are indicators of empathy.
72 This element is important especially for the female patient during embarrassing examinations performed by the
73 physician (Chiapponi, 2016). In a similar vein, Kitapcia, (2014) found that empathy is positively related to the
74 patients' satisfaction.

75 6 c) Competency

76 For another variable, competency, it is the capability of the hospital staffs when they are communicating with
77 patients. It comprises training of the healthcare staff, their technical and cultural abilities as well as their
78 communication ability with patients. The most important aspect that determines patients' satisfaction is the
79 quality of the health care service provided as patients' perception of the ability of their health care provider will
80 likely to affect their selfconfidence in the skill of their health care provider. Poor competency level of health care
81 staffs could lead to substantial dissatisfaction due to patients suffering. Ganasegeran et.al, (2015) emphasized
82 that professionalism is imperative to improve patients' satisfaction by enhancing the relationship between doctors
83 and patients. Hassali, (2014) also studied patients' satisfaction and discovered that there is a positive relationship
84 between competence and patients' satisfaction.

85 7 d) Service Quality

86 Service quality is "a function of the difference between service expected and customers' perceptions of the actual
87 service delivered" (Goel, 2015). Shabbir et al. (2016) emphasized that patient satisfaction is commonly used
88 to determine service quality. They also found that there is an association between service quality and patient
89 satisfaction. Service quality is the most vital key factor regarding service suppliers to get the upper hand, so it
90 should be to be very much enhanced and well-measured (Lee & Yom, 2007). In the case of patients' satisfaction
91 service quality is meeting or exceeding the patient's expectation. Patients' satisfaction and health service quality
92 both should be considered together for the balance and stability of health care organization in a competitive
93 environment. In the case of healthcare services, if the provided care and services fall short of their expectations,
94 the expected outcome is dissatisfaction. On the other hand, service quality may play a more significant role in
95 overall patient satisfaction ??Johnson, 2015). In fact, to a patient, service quality is about satisfying the needs
96 and providing the necessary medical services (Sathiyaseelan et al., 2015). In this study of patients' satisfaction,
97 there is a positive relationship between service quality and patients' satisfaction.

98 **8 III.**

99 **9 Research Framework**

100 In regards to the above discussion, a research framework has been established between the independent variables
101 and the dependent variable.

102 **10 Methodology**

103 This study is categorized as a quantitative study method that uses a survey method to collect relevant data.
104 Research design selected for this study is a descriptive study. The descriptive study can be used to determine
105 the relationship between variables and usually used to describe the current situation (Husin, 2017). Descriptive
106 research is used in a study that has conclusive data based on quantitative ability. Some factors have been shown
107 to influence patients' satisfaction with health care services including patients' socio-demographic characters,
108 the physical appearance of the hospital, general environment of the premises, patients' understanding and
109 expectations from various health care services (Muhondwa, 2008). The patients' satisfaction questionnaire used
110 in this study were taken from Afthanorhan et al, (2019). These measures have then been adapted to suit the
111 patients' satisfaction in the Selangor hospitals context. The questionnaire was reconstructed to figure out the
112 performance of the hospitals based on the patients' perception of the hospital staff empathy, staff competency,
113 service quality and their satisfaction.

114 **11 a) Data Collection**

115 The researchers have collected the data at the hospitals' pharmacy as the patients were waiting to be called for
116 medication at Hospital Shah Alam, Hospital Ampuan Rahimah Klang, AVISENA and Colombia Hospitals. The
117 questionnaires were given to patients from four hospitals in Selangor which are both public and private. This
118 study managed to collect feedback from 206 patients from four hospitals namely. The data collection lasted
119 for four weekends. There are (6) parts in the distributed questionnaires. The first part consists of 1 section;
120 (A) Demographic Information. Demographic information is self-developed by researchers based on respondent's
121 details, consists of 6 items that include information such as gender, age, marital status, occupation, monthly
122 income and type of disease. All of this information is collected through multiple-choice questions. The second
123 part in the questionnaire consist of 1 section; (B) suggestion for further improvement in patient's satisfaction
124 on Selangor hospital. The third part in the questionnaire consists of 4 sections; (C) Patient's Satisfaction, (D)
125 Empathy, (E) Competency and (F) Service Quality. The respondents of this study were requested to indicate their
126 level of perception which presented by using a seven-point Likert scale of frequency, ranging from '1' (Strongly
127 disagree) to '7' (Strongly agree). The data was then analysed using Statistical Package for the Social Sciences
128 (SPSS).

129 V.

130 **12 Result a) Demographic Analysis**

131 The respondents consist of male and female patients. Table 1 shows the demographic characteristics of the
132 respondents in which 53.4% of them are male, and 46.6% are female. Next, most of the respondents were in the
133 age group 25 -30 years old is 51.0, total respondent was 31 -35 years old is 17.0%, in a group of 36 -40 years are
134 15.5%, and the remaining 16.5% of the respondent were 40 years above. From the descriptive analysis in marital
135 status, it shows of the respondent were single constituting 50.0%, 42.2% are married, 2.4% are widowed and 5.3%
136 respondents of them are divorced. For the occupation, the majority of the respondents are private which hold
137 42.2%, 32.5% are come from the government sector and respondent from self-employed in 25.5%. Other than
138 that, monthly income where the respondents were income RM1001 -RM3000 which hold 38.8%, respondents'
139 income RM3001 -RM5000 was 28.6%, 17.0% from monthly income more than RM5000 and income less than
140 RM1000 is 15.5%. Lastly, it was followed by the type of disease in others show in higher per cent which holds
141 38.3%, high in fever are 30.1%, for influenza are 3.4% of respondents, for dengue are 12.1%, for asthma 11.7%
142 and diabetes are 4.4%. 2 shows the result of the reliability test. The reliability coefficient of Cronbach's alpha
143 is acceptable if the value is greater than 0.7. Therefore, based on the result of the reliability test that has been
144 analysed, it shows that the Cronbach's alphas of variables in the study are all above 0.7. This means that the
145 reliability test among the variables has high internal consistency. Based on Table 2, the Cronbach's alpha for
146 Patients' Satisfaction (DV) is 0.835, 0.915 for Empathy (IV1), 0.871 for Competency (IV2), and 0.866 for Service
147 Quality (IV3).

148 **13 c) Independent Sample T-test**

149 Next, Table 3 shows the t-test. The primary concerned with the significance value-if it is greater than 0.05(i.e.,
150 $p > .05$), the group variances can be treated as equal. However, if $p < 0.05$, we have unequal. From the result of
151 Levene's Test for Equality of Variance is statically significant, which indicates that the group variances are equal.
152 These are ratios of the mean of the differences to the standard errors of the difference under the two assumptions:
153 $(0.05420/0.10334) = 0.525$, $(0.05420/0.10255) = 0.529$. The format of the test is $t(df) = p = \text{significant value}$,
154 the value $t(204) = 0.525$, $p = .600$. It can be concluded there is no difference in patient satisfaction towards

18 B) THE RELATIONSHIP BETWEEN COMPETENCY AND PATIENTS' SATISFACTION

155 different hospitals. The finding of this study showed that there is no difference in patient satisfaction between
156 private and public hospitals since the significant value is $p < 0.05$. This finding means that both types of hospitals
157 in the current study provide equal services to their patients. Majority of patients were equally satisfied with
158 the service provided at both types of hospital in Selangor. Based on the results obtained in Table 4, it can be
159 observed that the sig. value from the Levene Test is $0.008 < 0.05$, meaning that the variances for two samples
160 are equal and the results from the independent t-test procedure is $.600 > 0.05$. It can be concluded that there is
161 no difference between private and government hospitals in term of patients' satisfaction.

162 14 d) Correlation

163 Next, Table 5 shows the correlation analysis. It is found that the correlation between patients' satisfaction and
164 empathy a positive correlation of 0.786.

165 The correlation between competency and patients' satisfaction positive correlation of 0.758 and between
166 patients' satisfaction and service quality is a positive correlation of 0.765. Based on Table 6, it shows that
167 adjusted R Square value is 0.663. It means that 66.3% of the dependent variable; patients' satisfaction on
168 Selangor hospitals is explained by the current independent variable; empathy, competency and service quality.

169 15 f) F Test (Goodness of Fit Model)

170 Based on Table 7 below, the significant value of the model is 0.000 which is less than 0.005. It depicts significant
171 relationships exist between all three independent variables; empathy, competency, and service quality with
172 patients' satisfaction on Selangor hospital. Thus, the model used is compatible and fit. Therefore, all variables
173 used in this study are considered as valid. 8, shows the model of results. All three independent variables have
174 positive affected patients' satisfaction, with a significant value of less than 0.05. Empathy, competency and
175 service quality make patients satisfied. This result also showed that empathy has the highest beta value, .403.
176 Second is service quality with .284. and competency with beta value .176. .001

177 Next, Table 9 shows the hypothesis testing. It is found that the significance effect between patients' satisfaction
178 and empathy positive correlation. The relationship between empathy and patients' satisfaction significant due
179 to its p-value of 0.000 is less than the alpha value of 0.01. Thus, the null hypothesis (H0) is rejected while the
180 alternative hypothesis (H1) is failed to reject. The relationship between competency and patients' satisfaction
181 significant due to its p-value of 0.046 is less than the alpha value of 0.01. Thus, the null hypothesis (H0) is
182 rejected while the alternative hypothesis (H1) is failed to reject. The relationship between service quality and
183 patients' satisfaction significant due to its p-value of 0.001 is less than the alpha value of 0.01. Thus, the null
184 hypothesis (H0) is rejected while the alternative hypothesis (H1) is failed to reject. VI.

185 16 Finding and Discussion

186 This study has tried to identify the patients' satisfaction on Selangor hospitals that are categorized in following
187 types: (i) the relationship between empathy and patients' satisfaction, (ii) the relationship between competency
188 and patients' satisfaction, and (iii) the relationship between service quality and patients' satisfaction.

189 17 a) The Relationship between Empathy and Patients' Satisfaction

191 The result shows that there is a positive relationship between empathy and patients' satisfaction. Besides, the
192 relationship is found to be significant. Empathy plays a very important role in making patients happy. The
193 result is consistent with prior studies which concluded clinicians who use more empathic communication can
194 elicit more relevant information from patients about their illnesses and concerns, thus the outcome of this study
195 was important in terms of management practices ??Blatt, 2010). The results of this study showed that the
196 hospital staff's empathic skills significantly and substantially influenced patients' satisfaction (Kitapcia, 2014).

197 18 b) The Relationship between Competency and Patients' Satisfaction

199 Based on the correlation results, there is moderate (.758) relationship between competency and patients'
200 satisfaction. The result for multiple regression shows that this variable does influence patients' satisfaction.
201 This study is consistent with prior studies that concluded the quality of the health care service provided affects
202 patients' confidence in the skill of health care provided (Loh, 2019). Probably, this finding document that
203 Selangor people are concerned about the staff competency in treating them as the respondents considered this
204 staff already capable and competent in delivering their job well. So, the factor of competency is one of the keys
205 to patient satisfaction.

19 c) The Relationship between Service Quality and Patients' Satisfaction

The result shows that there is a relationship between service and patients' satisfaction. Besides, the relationship is found to be significant. The result is consistent with prior studies which that concluded personal relationships greatly affect the service quality perception since the services are intangible and inseparable from consumers (Abbasi-Moghaddam, 2019).

20 VII.

21 Conclusion

This study provides an addition of an empirical study that for Malaysia hospitals, be it in private or public hospitals, they serve the same. Thus, there is no difference in patients' satisfaction. Both types of hospitals provide a good quality service. Empathy or good emotional treatment is found the biggest factor that satisfies patients. The second factor is no doubt service quality that links significantly to patient fulfilment. All identified variables contribute a big amount ($R^2 = 66.8$ percent) to the overall hospital performance that makes its client happy and satisfied. There is a relationship found between staff competency and patients' satisfaction, it does affect patients' satisfaction. All these doctors and nurses are considered highly qualified. Their competency does make differences in the respondents' satisfaction. Thus, this new finding would provide an insight to the stakeholders for better serve healthcare provider.

22 VIII.

23 Recommendation

Since empathy is found as the highest influence, the future research is recommended to make the staff more empathetic to the patients. The hospital staff should have more ability to recognize, understand and share the thoughts and feelings of the patients. By doing so, they could develop sensitivity to others that could be therapeutic and life-saving. For the service quality, hospitals should always ensure that the patients are given professional and prompt service. Service quality should be further enhanced as nowadays it becomes one of the most crucial elements for gaining sustainable advantage and it will give the hospital industry a great opportunity to create a competitive differentiation among others. Another element is staff competency that could be further adequate Malaysia hospital to be at the top-notch healthcare provider in the world. ^{1 2}

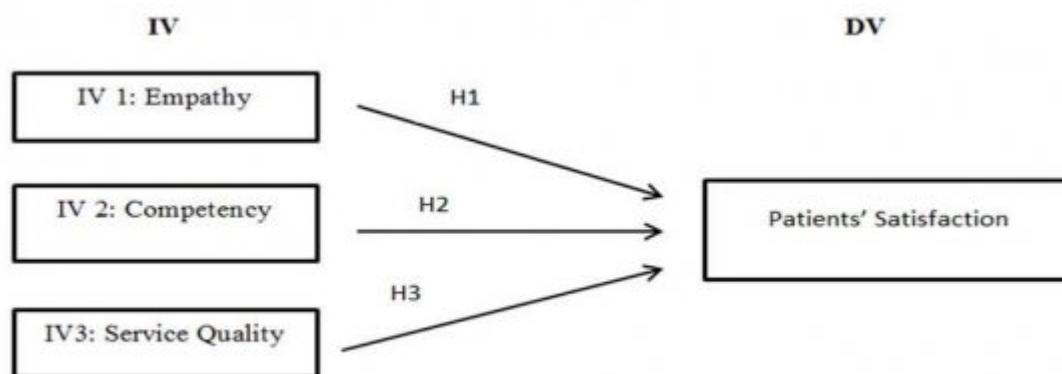


Figure 1:

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1

	Frequencies	Percentage
Gender		
Male	110	53.4
Female	96	46.6
Age		
25 -30 Years	105	51.0
31 -35 Years	35	17.0
36 -40 Years	32	15.5
More than 40 Years	34	16.5
Marital Status		
Divorced	11	5.3
Married	87	42.2

Figure 2: Table 1 :

2

Variables	No. of Items	Cronbach Alpha
Patients' Satisfaction	5	0.835
Empathy	5	0.915
Competency	5	0.871
Service Quality	5	0.866

Figure 3: Table 2 :

3

HOSPITAL	N	T-test Mean	Std. Deviation	Std. Error Mean
DV1Public	105	4.9314	.87170	.08507
Private	101	4.8772	.57548	.05726

Figure 4: Table 3 :

4

	Levene's Test for Equality of Variances	T-test for Equality of Means					95% CI of the Difference Lower	
		F	Sigt	df	Sig (2 tailed)	Mean Difference		Std Error Difference
Patients' Satisfaction	Equal variances assumed	7.119	.008	.525	.600	.05420	.10334	-.14954
	Equal variances not assumed		.529	180.959	.598	.05420	.10255	-.14814

Figure 5: Table 4 :

5

	Patients' Satisfaction	Empathy	Competency	Service Quality
Patients' Satisfaction	Pearson Correlation	1	.786 **	.758 **
	Sig. (2-tailed)		.000	.000
	N	206	206	206

*Correlation is significant at the 0.05 level (2-tailed)

**Correlation is significant at the 0.01 (2-tailed)

e) Determination Coefficient (R²)

Figure 6: Table 5 :

6

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.817	.668	.663	.42977

a

a. Predictors: (Constant), Empathy, Competency, Service Quality

Figure 7: Table 6 :

7

	Model	Sum of Squares	df	Mean Square	F	Sig
1	Regression	74.985	3	24.995	135.325	.000
	Residual	37.310	202	.185		
	Total	112.295	205			

a. Dependent Variable: Patients' Satisfaction

b. Predictors: (Constant), Empathy, Competency, Service Quality

Figure 8: Table 7 :

8

Model	Unstandardised Coefficient		Standardised Coefficient	T	Sig
	B	Std. Error	Beta		
Constant	.236	.239		.986	.326
Empathy	.415	.085	.403	4.904	.000
Competency	.185	.092	.176	2.011	.046
Service Quality	.323	.094	.284	3.438	

Figure 9: Table 8 :

9

Hypothesis	Result	Significance (p-value) less than 0.01
H1: There is a relationship between empathy and patient satisfaction	H1 is supported	.000
H2: There is a relationship between staff competency and patient satisfaction	H2 is supported	.046
H3: There is a relationship between service quality and patient satisfaction	H3 is supported	.001

Figure 10: Table 9 :

- 233 [Sharifa et al. ()] , E W P Sharifa , M Jamsiah , S A Malka . *Azimatun Noor A., TutiNingseh , Noor Izzah A.*
234 *S* 2010.
- 235 [Oyatoye et al. ()] , E O Oyatoye , B B Amole , S O Adebisi . 2016.
- 236 [Lee and Yom ()] ‘A comparative study of patients’ and nurses’ perceptions of the quality of nursing services,
237 satisfaction and intent to revisit the hospital: a questionnaire survey’. M A Lee , Y H Yom . *International*
238 *Journal of Nursing Studies* 2007. 44 (4) p. .
- 239 [Goel and Yang ()] ‘An assessment of service quality and resulting customer satisfaction in Pakistan International
240 Airlines: Findings from foreigners and overseas Pakistani customers’. A Goel , N Yang . *International Journal*
241 *of Quality and Reliability Management* 2015. 32 (5) p. .
- 242 [Hassali et al. ()] ‘Assessment of general public satisfaction with public healthcare services in Kedah’. A M Hassali
243 , A Alian , A A Alrasheedy , A R Afifah , S A Saleh Karamah , Tamimi , F Saleem , U H Noman , A Hisham
244 . *Malaysia. Australasian Medical Journal* 2014. 7 p. .
- 245 [Husin et al. ()] *Business Research A Step-by-Step Approach for Beginners*, N A Husin , M F Mohd Salleh , M
246 Saad , M S Abbas , Z Alias , A Yulia . 2017. Shah Alam, Selangor: Imtiyaz Multimedia & Publication.
- 247 [Abbasi-Moghaddam et al. ()] ‘Evaluation of service quality from patients’ viewpoint’. M A Abbasi-Moghaddam
248 , E Zarei , R Bagherzadeh , H Dargahi , P Farrokhi . *BMC health services research* 2019. 19 (1) p. 170.
- 249 [Elankovan (2019)] *Malaysia Ranked Number 1 for having World’s Best Healthcare*, V Elankovan . <https://worldofbuzz.com/malaysia-ranked-number-1-for-having-worlds-best-healthcare/>
250 February 7, 2019.
- 251
- 252 [Shabbir et al. ()] ‘Measuring patients’ healthcare service quality perceptions, satisfaction, and loyalty in public
253 and private sector hospitals in Pakistan’. A Shabbir , S A Malik , S A Malik . *International Journal of Quality*
254 *& Reliability Management* 2016. 33 (5) p. .
- 255 [Muhondwa et al. ()] ‘Patient Satisfaction at the Muhimbili National Hospital in Dares Salaam Tanzania’. E
256 Muhondwa , M Leshabary , N Mbambati , M Ezaklel . *East Afr. J. Pub. Health* 2008. 5 (2) p. .
- 257 [Ganasegeran ()] ‘Patient Satisfaction in Malaysia’s Busiest Outpatient Medical Care’. K Ganasegeran .
258 10.1155/2015/71475. <https://doi.org/10.1155/2015/71475> *The Scientific World Journal* 2015.
- 259 [Patients’ perception of quality service delivery of public hospitals in Nigeria using analytical hierarchy process Journal of Health
260 ‘Patients’ perception of quality service delivery of public hospitals in Nigeria using analytical hierarchy
261 process’. *Journal of Health Management & Informatics* 3 (3) p. 73.
- 262 [Johnson et al. ()] ‘Perceptions of care quality and the effect on patient satisfaction’. D M Johnson , R S Russell
263 , S W White . *International Journal of Quality & Reliability Management* 2016. 33 (8) p. .
- 264 [Satisfaction Among Urban And Rural Public Health Clinics In State Of Selangor Malaysia, Malaysian Journal of Public Health
265 ‘Satisfaction Among Urban And Rural Public Health Clinics In State Of Selangor’. *Malaysia, Malaysian*
266 *Journal of Public Health Medicine* 10 (2) p. .
- 267 [Sathiyaseelan et al. ()] ‘Service quality and patients satisfaction on ayurvedic health services’. T Sathiyaseelan
268 , W A C Gnanapala , C Athula . *American Journal of Marketing Research* 2015. 1 (3) p. .
- 269 [Kitapcia et al. ()] ‘The Impact of Service Quality Dimensions on Patient Satisfaction, Repurchase Intentions and
270 Word-of-Mouth Communication in the Public Healthcare Industry’. O Kitapcia , ?brahim Ceylan Akdoganb
271 , D I Taylan . *Procedia-Social and Behavioral Sciences* 2014. 2014. 148 p. .
- 272 [Afthanorhan et al. ()] ‘The influence of hospital image and service quality on patients’ satisfaction and
273 loyalty’. Asnawi Afthanorhan , & Assila , Awang , & Zainudin , & Asyraf , Mohamad , Fazida Karim .
274 10.5267/j.msl.2019.2.011. 911-920, 10.5267/j.msl.2019.2.011 *Management Science Letters* 2019. 9.
- 275 [Quek ()] ‘The Malaysian Health Care System: A Review’. D Quek . *Malaysian Medical Association* 2014.
- 276 [Chiapponi et al. ()] ‘The Perception of Physician Empathy by Patients with Inflammatory Bowel Disease’. C
277 Chiapponi , M Witt , G E Dlugosch , V Gulberg , M Siebeck . *Journal Pone* 2016. 11 (11) .
- 278 [Rappoport et al. ()] ‘What do patients really want? An in-depth examination of patient experience in four
279 Australian hospitals’. F Rappoport , P Hibbert , J Braithwaite . *BMC Health Service Res* 2019. 19 p. 38.
- 280 [Thiedke ()] ‘What do we really know about Patient Satisfaction ?’. C Thiedke . *Fam. Pract. Manag* 2007. 14
281 (1) p. .