Satisfaction Will Mediate the Effect of Waiting Time and Service Quality on Outpatient Loyalty at Husada Hospital

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ABSTRACT: This study aims to analyze the effect of waiting time and service quality on outpatient loyalty at Husada Hospital, by considering patient satisfaction as a mediating variable. The phenomenon of decreasing number of patient visits over the past three years is an important background of this study. The research method used is quantitative with a survey approach. Data were collected through questionnaires filled out by outpatients at Husada Hospital, with the analysis technique using Partial Least Square-Structural Equation Modeling (PLS-SEM). The results showed that waiting time and service quality had a significant effect on patient satisfaction, with p values of 0.000 each. Patient satisfaction also had a significant effect on patient loyalty (p = 0.000). However, waiting time and service quality did not have a direct effect on patient loyalty without mediation of patient satisfaction. The patient satisfaction variable fully mediates the effect of waiting time and service quality on patient loyalty. This study has implications for the need to increase waiting time efficiency and service quality management as a strategy to increase patient loyalty, especially in private hospitals.

KEYWORDS: Patient Satisfaction, Patient Loyalty, Private Hospital, Service Quality, Waiting Time.

I. INTRODUCTION

From year to year, many countries continue to increase their budgets in an effort to improve the health of their people. Innovation in technology also influences the development of the quality of medical services. Improvements in the health sector have increased life expectancy and slowed population growth in developing countries. But there are new challenges to be faced, such as the increase in non-communicable diseases and chronic and degenerative diseases (WHO, 2020). Indonesia as a developing country also faces these challenges. Indonesia is a developing country with a population of 270 million people. With a high population, Indonesia also has the same burden of health problems as other developing countries. The number of non-communicable diseases is increasing, shifting from old to young, and occurring in all socio-economic classes (Moeloek, 2017). The need for health care facilities is increasing, especially complex health services such as hospitals.

Based on data from the Ministry of Health of the Republic of Indonesia (Kemenkes RI), as of March 2024, the number of hospitals in Indonesia reached 3,176 hospitals. The largest number of hospitals is owned by the private sector, with 866 hospitals out of a total of 3,176 hospitals in Indonesia. DKI Jakarta is a province in Indonesia with a fairly high population, which is 11 million people as of 2019. With a large population, it requires a sufficient number of hospitals to facilitate health services for residents in DKI Jakarta. Based on these data, the number of private hospitals in Indonesia, especially in DKI Jakarta, is quite large. This has caused competition between private hospitals in DKI Jakarta to become more competitive and compete to promote their health services. Therefore, in order to win the competition, hospital performance must be improved in order to compete with its competitors. In order to maintain continuity in the midst of very competitive business competition, a hospital must provide satisfaction to its patients so that patients can become loyal. According Kotler & Keller (2016), one of the characteristics of loyal patients is that they always make repeat purchases continuously. Loyal patients are those who are satisfied with a particular product or service so that they have the enthusiasm to introduce the product or service to people they know. Patients are considered important because they determine the survival of an organization. Patients will stay with a hospital if they are satisfied with the product. Therefore, according to Tjiptono (2016), patient satisfaction must also be accompanied by patient loyalty. However, in reality, based on data obtained from the Husada Hospital, Central Jakarta regarding the number of patient visits in the last three years, it is shown as follows.

Table 1. Number of Outpatient Visits at Husada Hospital, Central Jakarta 2020 - 2022

No.	Year	Information		Total
		Patient Long	Patient New	
1	2020	68,458	17,189	85,647
2	2021	44,793	11,188	55,981
3	2022	44,374	11.255	55,629

Source: Husada Hospital Data

The data on old patient visits that have decreased indicate that patient loyalty at Husada Hospital, Central Jakarta is still low. This phenomenon indicates a significant problem in terms of patient loyalty and the quality of health services provided by the hospital. The decrease in the number of patient visits, especially old patient visits, can provide an overview of dissatisfaction or distrust of existing services. Hospitals need to continue to innovate and improve the quality of their services to retain and attract patients. The decrease in old patient visits can indicate a gap in the management of service quality. Patient satisfaction is one indicator in assessing whether the service provided is in accordance with patient expectations. If the service quality provided is optimal, the patient will feel satisfied (Al-Damen, 2017). Consumers who are satisfied will make repeat purchases, become loyal to a product or service, and then recommend it to others. Patients who are satisfied with the service will be loyal and feel that the service provided is in accordance with expectations, and recommend the service (recommend).

Currently, patients have the ability to choose the Hospital where they receive treatment, various considerations will of course be determining factors for patients to seek treatment at a Hospital, the location of the Hospital, the price offered by a Hospital, Hospital facilities, Doctors who practice at a Hospital will be factors that are highly considered by a patient. Therefore, Hospitals in Indonesia, especially Private Hospitals, must provide the highest quality services at prices that can compete with other Hospitals to attract patients for treatment. Factors that influence patient loyalty and patient satisfaction are service quality and waiting time. Outpatient waiting time is one of the national quality indicators. Waiting time is a benchmark for the quality of health services (Galih, 2021). The waiting time indicator is used as a tool in the process of evaluating the success of the Hospital (Yulianti et al., 2022). In fact, from customer voices on Google reviews, it shows that the waiting time at Husada Hospital still has problems, such as waiting time in the pharmacy section of more than 60 minutes, which is up to 3 hours, waiting time for the administration process, waiting time to get test results for days, waiting time to get patient services more than 1 hour. Based on the assessment, it indicates that the waiting time at Husada Hospital is still not optimal. Quality of service is the result of a comparison made by patients between their expectations of a health service and their perception of how the service is provided (Al-Damen, 2017).

Ampaw et al. (2020) explain the service quality in health services as the extent to which patient health services can increase the likelihood of desired health outcomes according to current professional knowledge, and are able to meet the expectations felt by health care clients (patients). Patient expectations in doctor's services include doctor's skills, accuracy of medical diagnosis, consultation process, service process, and administration process. In reality, from customer voices on Google reviews, it shows that the service at Husada Hospital still has problems, namely not in accordance with procedures such as doctors arriving late, uncommunicative service, unfriendly or rude doctors and nurses, and less than optimal administration processes. Based on this assessment, it indicates that the quality of service at Husada Hospital is still not optimal.

Another problem, which was found based on previous observations and research, is that patients generally complain about practicing doctors in a hospital, including feeling that practicing doctors rarely arrive on time, a small number of practicing doctors are considered unfriendly, and doctors seem less caring, such as patients entering the room, being examined without being greeted warmly, and then given a prescription for medication to be filled and then the patient is asked to leave the room. These two factors, namely waiting time and quality of service, greatly contribute to patient satisfaction and loyalty. Frichi et al. (2020) in their propositions explain that if expectations are met, patients think that the service quality has been provided optimally, and patient satisfaction will increase. Wu (2011) also stated that high patient satisfaction will increase patient revisit behavior and will increase patient loyalty. Even though the service quality is very good, doctors often arrive late, postpone practice hours or eliminate practice, this of course will greatly reduce patient satisfaction and loyalty. In reality, the waiting time factor can be the main consideration for patients in seeking treatment at a hospital.

II. LITERATURE REVIEW

Waiting Time

Waiting time is the time used by hospital health workers to provide services to patients. So that the waiting time can describe the management of hospital management, long waiting times will cause patient dissatisfaction because the service does not meet patient expectations (Usman et al., 2020). Waiting time is a problem that many hospitals frequently complain about because it shows how the hospital handles service components that are tailored to the patient's situation and expectations. Paramita (2017) asserts that waiting time is one of the key factors that will determine the initial image of hospital services. It is one of the components that has the potential to cause dissatisfaction; if patients must wait for a long time, they will consider health services to be poor. In addition, the Indonesian Ministry of Health Number 129 / Menkes / SK / II 2008 states that the waiting time for outpatient services is the amount of time that passes between a patient registering at the outpatient registration location (TPPRJ) and a doctor at the destination polyclinic calling them for examination services. The average waiting time for outpatient services is set at ≤ 60 minutes.

Quality of Service

Health services, whether in health centers, hospitals, or other health service institutions, are a system made up of various components that are interrelated, interdependent, and influence each other. The complexity of interactions and dependencies between various components or aspects of service determines the quality of health services in health centers and hospitals (Purwoastuti, 2015). Quality can be defined as the overall characteristics of goods or services that demonstrate the ability to satisfy consumer needs, both stated and implied needs (Bustami, 2016). Hospitals must pay close attention to service quality since it directly affects their ability to compete and their level of performance. The hospital will be less competitive if the quality is poor. If customers are dissatisfied with the quality of a service, they are unlikely to use the company's products again. Of course, they might even relocate to a rival facility that provides higher quality care. Because consumers are the ones who play an important role in assessing quality, hospitals need to identify expectations and measure consumer satisfaction.

Patient Satisfaction

Tjiptono (2016) defines satisfaction as a post-purchase assessment in which the selected option meets or beyond the customer's expectations, whereas dissatisfaction occurs when the results do not meet the expectations. A person has satisfaction when they accomplish a goal or when something they wanted to happen occurs. When a person compares their expectations with their view of a product's performance or results, they can feel either satisfied or disappointed. They will feel emotionally dissatisfied if the quality falls well short of their expectations. According to Kristianto (2019), consumer satisfaction encompasses the gap between expectations and perceived performance or results, and the degree to which these two interests are met will determine how satisfied a customer is with a product. From the patient's perspective, hopes or expectations are described as what a health care provider should offer. Perception is described as an evaluation by patients of their expectations of a particular medical service. Operationally, the quality of hospital services depends on the balance of patient perception and expectations. Patients evaluate hospital services based on outcomes, processes, and their physical environment. If it is in accordance with the quality according to the patient's needs, then the service is considered satisfactory (Sulistyo & Gumilar, 2019).

Patient Loyalty

One definition of loyalty is behavioral intention. Hospital patient loyalty offers the same advantages as consumer loyalty at other service providers like banks or retail establishments. In the health market, loyalty is used as a metric. As a result, hospitals leverage patient loyalty as a competitive advantage (Sulistyo & Gumilar, 2019). In the medical industry, a patient's propensity to return to the hospital and/or refer others to its facilities is used to gauge their level of loyalty (Kim et al., 2017). Kolonio & Soepeno (2019) define customer loyalty as a strong commitment on the part of customers to regularly repurchase goods or services in the future. Kotler (2016), on the other hand, defines consumer loyalty as a strong will to continue buying favored goods or services in the future.

Conceptual Framework

Patient satisfaction will mediate patient loyalty if waiting time can be reduced and the service quality can be increased. Therefore, the conceptual model of the research is as follows.
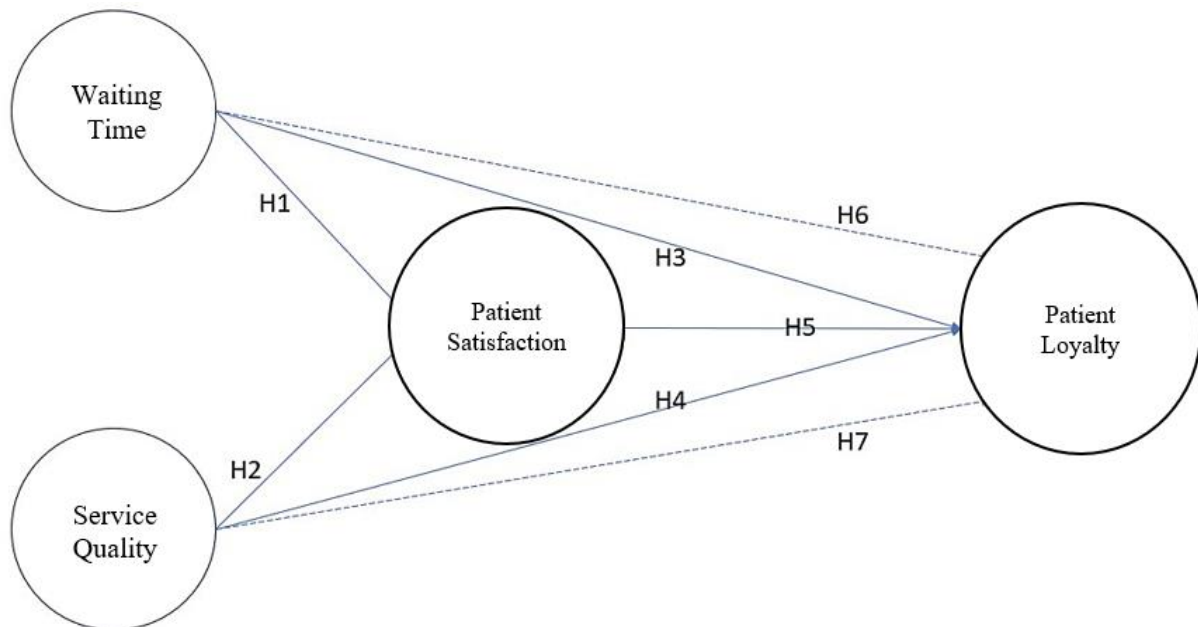
Figure 1. Conceptual Framework
Source: Author, 2024

III. METHODOLOGY

The subjects in this study were outpatients at Husada Hospital, Central Jakarta, from September to November 2024. The population of the study was all outpatients at Husada Hospital. The study used a purposive sampling method, namely samples that met the criteria then became research samples. The number of outpatients at Husada Hospital is not known for certain, but by using the Hair formula and the sample size provisions in the SEM analysis which states that if there are more than 20 indicators, the sample size is between 100-200. Data were collected using a questionnaire by providing written statements to respondents directly to be answered or given approval. In addition to using questionnaires, data in this study also came from literature or journals, books, documents and took data from patient medical records at the hospital. Data analysis in this study used the regression method assisted by the Partial Least Square - Structural Equation Model (PLS-SEM) approach method. PLS-SEM is used primarily to develop theories in exploratory research.

IV. RESULTS AND DISCUSSION

Results of Measurement Model and Structural Model
In this study, two types of models were created through data processing using Smart PLS: the measurement model (Outer Model) and the structural model (Inner Model). Assessing the validity and reliability of the measurement model (Outer Model) is done through evaluation. However, the structural model's (Inner Model) evaluation seeks to quantify the extent to which latent variables impact one another.
Measurement Model (Outer Model)
The measurement model (Outer Model) for validity and reliability testing for the equation model can be obtained by implementing the PLS Algorithm process on SmartPLS Software. Convergent validity testing uses outer loading or loading factor values, here are the convergent validity values of this study.

Table 2. Convergent Validity

Indicator	Loading Factor	Criteria	Description
X1.1	0,734	0,7	Valid
X1.2	0,723	0,7	Valid
X1.3	0,775	0,7	Valid
X1.4	0,781	0,7	Valid
X1.5	0,781	0,7	Valid
X1.6	0,765	0,7	Valid
X1.7	0,748	0,7	Valid
X2.1	0,748	0,7	Valid
X2.2	0,750	0,7	Valid
X2.3	0,868	0,7	Valid
X2.4	0,764	0,7	Valid
X2.5	0,882	0,7	Valid
X2.6	0,742	0,7	Valid
X2.7	0,841	0,7	Valid
X2.8	0,819	0,7	Valid
X2.9	0,703	0,7	Valid
X2.10	0,749	0,7	Valid
X2.11	0,776	0,7	Valid
X2.12	0,796	0,7	Valid
X2.13	0,778	0,7	Valid
X2.14	0,735	0,7	Valid
X2.15	0,752	0,7	Valid
Z1	0,702	0,7	Valid
Z2	0,731	0,7	Valid
Z3	0,724	0,7	Valid
Z4	0,840	0,7	Valid
Z5	0,799	0,7	Valid
Z6	0,776	0,7	Valid
Z7	0,799	0,7	Valid
Z8	0,829	0,7	Valid
Z9	0,798	0,7	Valid
Z10	0,832	0,7	Valid
Z11	0,768	0,7	Valid
Z12	0,792	0,7	Valid
Y1	0,754	0,7	Valid
Y2	0,770	0,7	Valid
Y3	0,779	0,7	Valid
Y4	0,860	0,7	Valid
Y5	0,793	0,7	Valid
Y6	0,740	0,7	Valid
Y7	0,710	0,7	Valid
Y8	0,824	0,7	Valid

Source: Researcher Data Processing (2024)

As can be seen from the above table, all indicators of this research variable pass the convergent validity test because their values are greater than the criterion of 0,7. Additionally, discriminant validity can be ascertained using other techniques, such as examining the average variance extracted (AVE) value.

Table 3. Average Variance Extracted (AVE)

Variables	Average Variance Extracted *(AVE)*
Patient Satisfaction	0,614
Service Quality	0,611
Patient Loyalty	0,608
Waiting Time	0,575

Source: Researcher Data Processing (2024)

An Average Variance Extracted (AVE) value > 0,5 indicates that all variables waiting time, service quality, patient satisfaction, and patient loyalty meet the requirements of AVE and are therefore deemed to have passed the discriminant validity test.

Reliability can be demonstrated using either cronbach's alpha or composite reliability. According to the following table, a variable is deemed dependable if its cronbach's alpha value is greater than 0,6 and its composite reliability value is greater than 0,7 (Ghozali 2014).

Table 4. Composite Reliability and Cronbach Alpha Results

Variables	*Composite Reliability*	*Cronbach's Alpha*
Patient Satisfaction	0,950	0,943
Quality of Service	0,959	0,954
Patient Loyalty	0,925	0,908
Waiting Time	0,905	0,877

Source: Researcher Data Processing (2024)

All of the variables in the preceding table, waiting time, service quality, patient happiness, and patient loyalty have composite reliability ratings more than 0,7 indicating that they all satisfy the test's objectives. Additionally, the chart demonstrates that all variables waiting time, service quality, patient happiness, and patient loyalty have Cronbach alpha values greater than 0,6 indicating that all of the statements are trustworthy, consistent, and suitable for use in research.

Structural Model (Inner Model)

The following is a schematic of the suggested PLS program model. The structural model (Inner Model) was evaluated using the Coefficient Determination (R^2), Goodness of Fit Test, and Hypothesis Test (Direct Effect and Indirect Effect).

Table 5. Determination Coefficient Test

Variable	R Square	R Square Adjusted
Patient Satisfaction	0,618	0,614
Patient Loyalty	0,621	0,614

Source: Researcher Data Processing (2024)

The first R-Square is used to see the magnitude of the influence of the waiting time variable, the service quality on patient satisfaction with a value of 0.618 and is stated to have a value with a good category, meaning that the variability of patient satisfaction can be explained by Waiting Time (X1) and Service Quality (X2) of 61,8%. Then the second R-square is used to see the influence of the waiting time variables, the service quality and patient satisfaction on patient loyalty with a value of 0.621 and is stated to have a value with a good category, meaning that the variability of patient loyalty can be explained by Waiting Time (X1), Service Quality (X2) and Patient Satisfaction (Z) of 62,1%.

Additionally, Q-square value is used to determine the quality of fit within the structural model evaluation (Inner Model). There is a sense of improvement or increased fit between the model and the data. These are the findings from the Q-Square computation.

$$Q2 = 1 - (1 - R_1^2)(1 - R_2^2)$$
$$= 1 - (1-0{,}618)(1-0{,}621)$$
$$= 1 - (0{,}382)(0{,}379)$$
$$= 1 - 0{,}145$$
$$= 0{,}855$$

According to the above calculation results, the Q-Square value is 0,855 or 85,5%, indicating that the research model can submit a wide variety of research data, with the remaining 14,5% being explained by factors not related to this study. Based on these findings, the research model can be said to have very good goodness of fit.

In this study, there are direct and indirect influences because there are independent variables, dependent variables, and intervening variables. The direct influence in this study proposes 5 hypotheses. Hypothesis testing uses bootstrapping analysis techniques. Through the results of the t statistics obtained, the influence of the significant level between the independent variables and the dependent variables can be obtained. The summary results of the direct influence test are as follows:

Table 6. Results of Direct Effect Hypothesis Test

Hypothesis	Original Sample (O)	Sample Mean (M)	Standard Deviation (STDEV)	T Statistics	P Values
Patient Satisfaction Waiting Time→	0.426	0.426	0.070	6,110	0,000
Service Quality →Patient Satisfaction	0.455	0.457	0.063	7,255	0,000
Patient Loyalty Waiting Time→	0.274	0.285	0.089	3,097	0.002
Service Quality →Patient Loyalty	0.187	0.181	0.082	2,281	0.023
Patient Satisfaction →Patient Loyalty	0.421	0.422	0.081	5,212	0,000

Source: Researcher Data Processing (2024)

Based on the analysis with Smart PLS, it shows that the effect of waiting time on patient satisfaction is r equal to 0.426, while the t-statistic value is equal to 6.110 which is greater than the t-table of 1.974 and the P-value is equal to $0.000 < 0.05$. Furthermore, the effect of the service quality on patient satisfaction is r equal to 0.455, while the t-statistic value is equal to 7.255 which is greater than the t-table of 1.974 and the P-value is equal to $0.000 < 0.05$.

The effect of waiting time on patient loyalty is r equal to 0.274, while the t-statistic value is equal to 3.097 greater than the t-table equal to 1.974 and the P-value is equal to $0.002 < 0.05$. Then the effect of the service quality on patient loyalty is r equal to 0.187, while the t-statistic value is equal to 2.281 greater than the t-table equal to 1.974 and the P-value is equal to $0.023 < 0.05$. So the results of this hypothesis are proven. And finally the effect of patient satisfaction on patient loyalty is r equal to 0.421, while the t-statistic value is equal to 5.212 greater than the t-table equal to 1.974 and the P-value is equal to $0.000 < 0.05$. So the results of this hypothesis are proven.

To find out the results of the indirect influence test through the indirect effects boostrapping technique, a summary of the results is presented below.

Table 7. Results of Indirect Effect Hypothesis Testing

Hypothesis	Original Sample (O)	Sample Mean (M)	Standard Deviation (STDEV)	T Statistics	P Values
Waiting Time →Patient Satisfaction →Patient Loyalty	0.179	0.179	0.041	4,334	0,000
Service Quality →Patient Satisfaction →Patient Loyalty	0.191	0.194	0.051	3,741	0,000

Source: Researcher Data Processing (2024)

Based on the analysis with Smart PLS shows that the effect of waiting time on patient loyalty through patient satisfaction is r equal to 0,179 while the t-statistic value is equal to 4,334 greater than the t-table equal to 1,974 and the P-value is equal to 0,000 < 0,05. Then for the effect of the service quality on patient loyalty through patient satisfaction is r equal to 0.191, while the t-statistic value is equal to 3,741 greater than the t-table equal to 1,974 and the P-value is equal to 0,000 < 0,05.

Discussion

The results of the analysis show that waiting time has a positive and significant effect on the satisfaction of outpatients at Husada Hospital. The results of this study are in accordance with the results of Lestari et al. (2019) which showed that there is a relationship between outpatient service waiting time and patient satisfaction levels. Negative perceptions of longer waiting times tend to decrease patient satisfaction levels. This is because long waiting times are often interpreted as a form of lack of efficiency and attention from health facilities. Conversely, short waiting times or those that are in accordance with patient expectations can increase satisfaction because they indicate that the service is running efficiently and respects patient time.

Furthermore obtained results The service quality has a positive and significant effect on the satisfaction of Outpatients at Husada Hospital. The results of this study are in accordance with the results of the study by Adelia et al. (2016) showing a significant positive relationship between the service quality and patient consumer satisfaction. Research by Larasati et al. (2023) found a direct influence such as the service quality has a more significant relationship to patient satisfaction. Service Quality includes medical competence, doctor-patient communication, empathy, attention to patient needs, and the ability to provide clear information, for example doctors who explain the diagnosis in detail and use language that is easy to understand tend to increase patient trust, responsive to patient questions also show appreciation for their emotional needs.

Likewise, waiting time has a positive and significant effect on the loyalty of outpatients at Husada Hospital. The results of this study are in accordance with the results of research by Sousa & Freire (2022); Pradana (2014) showing that there is a relationship between waiting time and the level of patient loyalty. The perception of waiting time is considered a determinant of loyalty. Waiting time is considered a determinant of loyalty because the assessment of consumer reactions in waiting is more influenced by subjective assessment components than objective assessment components. Therefore, if the waiting time is in accordance with patient expectations, it will make patients make return visits and vice versa.

Service quality has a positive and significant effect on the loyalty of outpatients at Husada Hospital. The results of this study are in accordance with the results of the study by Umoke et al. (2020) which shows that there is a relationship between the service quality and the level of patient satisfaction, research by Adelia et al. (2016) It was also found that the higher the service quality, the higher the consumer satisfaction of outpatients using BPJS Kesehatan cards. Providing quality services will greatly affect the level of patient loyalty to the service provider. Patient loyalty increases when patients are satisfied with the use of health facilities. Quality is a key factor in the use of health services in various facilities.

Then obtained a positive and significant influence of patient satisfaction on the loyalty of outpatients at Husada Hospital. The results of this study are in accordance with the results of the research of Kijima et al. (2021); Antoinette et al. (2020) which shows that there is an influence of patient satisfaction on patient loyalty. If patients are satisfied with the services provided by the hospital, patient satisfaction will definitely lead to their loyalty. There is a positive correlation between patient satisfaction and their loyalty, so that patients who feel more satisfied with the service, they will be more loyal to the hospital, and the result is increased loyalty to patients which is the goal of all hospitals in providing health services. Likewise in Meesala & Paul (2018), patient satisfaction is directly related to patient loyalty to the hospital.

Waiting time is unknown own positive and significant influence on patient loyalty through patient satisfaction in Outpatients at Husada Hospital. The results of this study are in accordance with the results of the study by Sousa & Freire (2022); Abadi et al. (2020) found that customer assessment of waiting time has a positive and significant influence on customer loyalty through intermediaries or mediated by customer satisfaction. Abadi et al. (2020) found that the perception of customer assessment of waiting time has a positive and significant influence on customer loyalty if through intermediaries or mediated by customer satisfaction. This can be interpreted that the higher the level of customer satisfaction with the waiting time given, the higher the customer loyalty. And finally, from results analysis found that the service quality has a positive and significant effect on patient loyalty through patient satisfaction in Outpatients at Husada Hospital. The results of this study are in accordance with the results of research by Larasati et al. (2023); Sholeh & Chalidyanto (2021); Ricca & Antonio (2021) found that service quality has an effect on loyalty through patient

satisfaction. Good service quality usually results in patient satisfaction. Patient satisfaction is the result of a comparison between patient expectations and the reality they feel after receiving service. If the doctor's service exceeds patient expectations, the level of satisfaction will be high. Satisfied patients tend to be more loyal to doctors or health facilities. This loyalty can be shown through behavior such as returning for re-examination, recommending services to others, or giving positive reviews.

V. CONCLUSION

Conclusion

The results of this study indicate that waiting time and service quality have a positive and significant effect on the satisfaction and loyalty of Outpatients at Husada Hospital. The shorter the waiting time, the higher the patient's satisfaction and loyalty. Likewise, improving the service quality directly increases patient satisfaction and loyalty. In addition, patient satisfaction is proven to act as a significant mediator in the relationship between waiting time and service quality on patient loyalty. In other words, shorter waiting time and better service quality will increase patient satisfaction, which ultimately has an impact on increasing patient loyalty to hospital services. This finding emphasizes the importance of optimizing waiting time and improving the service quality to increase patient satisfaction and loyalty.

Recommendation

Husada Hospital is advised to continue to maintain and even shorten waiting times through regular evaluations of service duration and patient arrivals, while improving the service quality through ongoing training, consistent implementation of SOP, and reprimands to doctors who violate the rules. These efforts are important to maintain patient satisfaction and prevent them from switching to competitors. In addition, hospitals need to conduct in-depth research and regular evaluations of doctor services and waiting times to strengthen competitiveness and attractiveness in the eyes of patients. Further researchers are expected to expand this study by adding other relevant variables, such as promotions, facilities, hospital image, service rates, or other aspects that influence patient purchasing decisions. Thus, the results of the study can provide a more comprehensive picture in improving the quality and loyalty of patients in the health sector.

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