

The Effect of Service Quality, Patient Trust and Hospital Reputation on Patient Satisfaction in Jordanian Public Hospital

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Abstract: - This study aims to investigate the impact of service quality, patient trust, and hospital reputation on patient satisfaction within public hospitals in Jordan. Employing the partial least squares structural equation modelling (PLS-SEM) tool, the authors analysed a survey sample comprising 400 patients. The findings indicate that service quality, patient trust, and hospital reputation positively influence patient satisfaction. The results of this research have significant implications for healthcare practitioners in Jordan, underscoring the importance of not only providing excellent medical care but also implementing marketing strategies to cultivate lasting relationships with patients.

Key-Words: - Service Quality, Hospital Reputation, Patients Satisfaction, Patients Trust, Public Hospital, Patient, Jordan.

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1 Introduction

Patient satisfaction often serves as an indicator of the quality of healthcare provided. When patients express satisfaction with their healthcare experience, it typically signifies that they have received effective treatment and timely care, and have achieved positive outcomes, [1]. Therefore, public hospitals need to prioritize patient-centered care, as patient satisfaction reflects how well healthcare providers and institutions meet their patients' needs and preferences. This encompasses elements such as communication, empathy, and involving patients in decision-making processes, [2].

Exploring the domain of patient satisfaction can help identify areas within public healthcare that require improvement. For instance, a satisfied patient base can lead to favorable outcomes for healthcare organizations, including increased patient retention rates, a positive reputation, and a reduction in medical malpractice claims. Conversely, the opposite holds true as well, [1]. Therefore, conducting a comprehensive study on this subject is

important, as it can provide valuable insights for public hospital management to comprehend patient satisfaction and formulate strategies to enhance and elevate the quality of healthcare delivery. It is worth noting that there are limited studies available regarding patient satisfaction with public hospital services in Jordan, [3].

The demand for improved and better healthcare service quality has increased, putting pressure on service providers, and making it a difficult task for researchers, hospital administrators, government policymakers, and therapeutic specialists to meet the needs of patients, thereby increasing satisfaction in the developing public healthcare sector, [4].

Healthcare practitioners and academic researchers are becoming increasingly interested in investigating how customers perceive quality before increasing their satisfaction and generating behavioral intentions, [5]. In Jordan, the government owns and highly subsidizes the public healthcare sector, but the quality of care, personnel, and facilities is far from satisfactory for many reasons

some of which include regional political burdens, lack of vision and guided growth, and budgetary constraints, [6], [7]. Most importantly, it functions without governance: no clinical pathways, no clinical audits, no accountability, and no measurement of health care outcomes, quality of life, near misses, medical errors, misdiagnosis, medication error, hospital infections, and patient experience among others and this vacuum of real data masks the outcomes; the costs incurred both financially and at a humanitarian level, and the specific areas of improvement, [8].

Exacerbating the situation is the overburdened medical education sector coupled with weak residency programs that are not properly monitored or accredited; let alone the lack of enforcement of continuing education and continuous skills evaluation and monitoring, [9]. The public healthcare sector, despite its breadth, has no depth, is not empowered, and lacks efficiency and effectiveness, while tertiary care is mismanaged, and has no leadership or goals to improve performance and decrease cost. This of course is further complicated by a scattered health insurance and coverage system despite all the efforts towards universal health coverage. Investments in the health sector are unorganized, focused on infrastructure, and do not follow a road map, [6].

The Jordanian Ministry of Health has stated that there are disparities in the service quality of public hospitals between rural and urban areas, [6]. In addition, the service accessibility of public hospitals does not necessarily mean that Jordanian citizens are fully satisfied with the quality of the services provided, [7]. The Jordan Strategy Forum 2020 has emphasized the conspicuous absence of official studies evaluating the quality of services provided by public hospitals, [8]. Official documents offering insights into service quality are in short supply, and there is an ongoing pattern of voicing concerns and complaints about the services delivered in these public healthcare facilities.

Quality of healthcare services has become a primary concern for patients, particularly in public hospitals, [10]. As a result, it is critical for public hospitals to understand the significance of superior service quality to satisfy and retain more patients to justify the enormous budgetary allocation by the government knowing fully well that healthcare in public hospitals is a social service burden on the government of any country, [11]. Public hospitals that have failed to provide quality services and satisfaction have been identified continuously

ultimately inviting loss and a sharp reduction in the number of patronages and eventually may be closed, [12]. That is why patient satisfaction is regarded as the prime determinant that leads to sustainable prosperity for healthcare organizations including public hospitals, [2].

Additionally, when patients are satisfied and have a positive relationship with their healthcare provider such as public hospitals, they may be more likely to trust and follow their recommendations, leading to better health outcomes, [13]. For instance, because of satisfied patients on public hospital services, there is a heightened likelihood of their active participation in follow-up appointments, adherence to health advice, and consistent medication intake as prescribed by the doctor. Such patient behaviors play a crucial role in promoting the physical and mental well-being of the Jordanian population, subsequently leading to decreased mortality rates and a reduction in diseases. This positive trend can in turn bolster the overall capabilities and productivity of the Jordanian population, thereby advancing their overall well-being and making a substantial contribution to the comprehensive economic progress of Jordan.

Hospital reputation refers to the collective perception and overall image that a healthcare institution holds in the eyes of its patients, this reputation is shaped by various factors, including the hospital's performance in terms of patient care, clinical outcomes, safety, ethical conduct, community engagement, and other elements that contribute to its standing within the healthcare industry and the community it serves. Hospital reputation in the context of public hospitals is a critical factor that can significantly impact the success and effectiveness of the healthcare institution, [14]. This can help to increase the number of patients who seek healthcare from public hospitals, which can lead to improved access to healthcare for the community in Jordan. Additionally, when patients recommend a public hospital to their family and friends, it can help to build patient trust in the Jordan public hospital and encourage others to seek healthcare when needed. Building and maintaining strong relationships with patients and providing high-quality healthcare can help to foster satisfaction and lead to improved health outcomes for patients and the community, [15].

Previous literature falls short of providing a thorough examination of the cultural elements influencing patient satisfaction in Jordan. The

significance of cultural nuances in shaping healthcare perceptions cannot be overstated, and a comprehensive understanding of how these factors contribute to patient satisfaction is essential. Most studies tend to focus on hospital processes or structures, frequently overlooking patient-centered outcomes. Furthermore, there is a noticeable gap in research that highlights the importance of the ultimate healthcare goal: patient satisfaction and overall well-being. There is a scarcity of studies specifically focusing on the Jordanian context and existing literature is limited in addressing the dynamics of service quality, patient trust, and hospital reputation in Jordanian public hospitals. Some studies focus on individual factors such as service quality, patient trust, or hospital reputation, but there is little research that comprehensively examines the interactions and combined effects of these factors on patient satisfaction. With this context in mind, the study's aim is to examine the impact of service quality, patient trust, and hospital reputation on patient satisfaction at Jordanian public hospitals.

2 Literature Review

2.1 Patients' Satisfaction

Satisfaction is defined as “a fairly temporal post-usage state for one-time consumption or a repeated experienced state for ongoing consumption that reflects how the product or service has fulfilled its purpose”, [16]. Within the service industry, cultivating customer relationships not only enhances customer satisfaction but also fosters long-term commitment, [17]. As a result, consumer satisfaction stems from their assessments of the characteristics of goods and services, as well as whether the goods and services can provide a high level of consumer satisfaction, in fact, customer satisfaction is the result of a customer's assessment of a product or service that meets his needs, [18].

Patient satisfaction refers to a patient's belief that his or her expectations were met or exceeded. Patient satisfaction is the level of feeling a patient has because of the performance of health services as measured by the patient's expectations. When the results meet or exceed expectations, there is a sense of satisfaction; otherwise, when the results fall short of expectations, there is a sense of disappointment or dissatisfaction, [19]. Patient satisfaction, one of the main indicators of service quality, is a parallel

term with customer satisfaction in healthcare services, [18].

The interaction between a doctor and a patient can be likened to engaging with a customer and cultivating strong relationships is essential for maintaining a competitive edge in attracting and retaining those, [20]. Satisfaction can also have an impact on public hospitals. In the context of the healthcare sector, satisfaction can refer to a patient's willingness to continue seeking care from a particular provider or facility, [21].

Patients who are satisfied with health providers such as public hospitals are more likely to engage in behaviors that benefit their health, such as attending follow-up appointments and adhering to treatment plans. The intention of individuals to seek healthcare services from public hospitals holds significant importance, given its potential to enhance patients' health outcomes, [22]. Those with a strong intention to patronize such hospitals are more inclined to receive consistent care from a specific provider or facility, contributing to the maintenance of seamless healthcare continuity, [23].

2.2 Service Quality

Service quality is deemed a strategic weapon in a service-oriented sector, as well as a source of competitive advantage. Service quality is defined as a comprehensive evaluation of the perceived excellence of a service, [24]. It involves the anticipated level of benefit and the degree of control over these benefits in meeting customer expectations, [25]. Furthermore, service quality encompasses the overall impression a consumer has regarding the relative inferiority and superiority of an organization and its services, [26]. In the healthcare sector, particularly in the hospital, service quality is generally viewed as an outcome. Services given by a hospital may be divided into medical and non-medical aspects. The medical aspect includes its support, consisting of human resources, both in quantity and quality, as well as various instruments for disease diagnosis and treatment purposes. The non-medical aspect consists of information, administration, finance, nutrition, pharmacy, cleanliness, and security of hospital environment services, [27].

The concept of quality in the healthcare sector particularly in the hospital varies depending on the types of people who work in or interact with the organization, and how they view and evaluate the quality from their perspectives, [17]. In hospitals, service quality also means providing the highest

level of knowledge and skills among medical staff, and the best medical equipment and devices to care for patients, [28]. In addition, quality in administration entails providing the best human and material resources required to provide the service, conducting ongoing evaluations of services provided by doctors, nurses, and other related staff, and training human resources to ensure that these services are continually improved. A mentioned quality, from a patient's perspective, implies that every human interaction, whether direct or indirect during their hospitalization is characterized by complete respect, unwavering attention, genuine empathy, and profound understanding, [28].

2.3 Patient Trust

Trust can be described as the expectation that both parties will behave predictably and the willingness to rely on an exchange partner in whom one has confidence, [29]. Trust involves the willingness to embrace vulnerability rooted in optimistic anticipations of someone else's intentions or actions. Trust arises from the foundations of honesty and assurance, wherein a shared sense of trust gives rise to constructive intentions aimed at the other party, [30]. Trust constitutes a logical decision stemming from the acknowledgment of others' motivations. Those who place trust possess an anticipation that the individual they trust will act benevolently and exhibit competence in the relevant area of their trust, [31].

Patient trust signifies the patients' conviction that the healthcare service provider, especially the hospital, will adhere to consistent behavior, [32]. Therefore, patient trust materializes when individuals have a strong belief in their doctors' commitment to their well-being and the provision of appropriate medical treatment and care. The significance of patient trust lies in its capacity to establish the cornerstone for forthcoming doctor-patient connections, [33]. As noted, patient trust holds a central position within the dynamic of the doctor-patient relationship, [34].

2.4 Hospital Reputation

Hospital reputation is an important factor in the healthcare sector, as it can significantly impact patient decisions about where to seek care and influence physician referrals, [35]. One of the primary factors that shape hospital reputation is the quality of healthcare provided, [21]. Prior research has shown that hospitals with higher quality scores tend to have better reputations, as measured by

patient satisfaction, physician referrals, and financial performance. In addition to clinical outcomes, patients also value factors such as communication with staff, cleanliness, and amenities, [36]. Supported by the findings of, [37], patients indicate that their trust is manifested when greater attention is given to aspects such as effective communication with healthcare professionals and nursing staff, prompt responsiveness to patient requirements, and the cleanliness of hospital rooms.

Good quality is reflected in the hospital's reputation and can be utilized by hospitals to get a competitive advantage. Patients value the competence of a hospital, the staff's qualifications, the use of modern medical procedures as well as the cleanliness and interior of the rooms, [38]. Nevertheless, a hospital's reputation per se may also be affected by word-of-mouth recommendations about the perceived quality of a hospital, [39]. Another important aspect of a hospital's reputation is brand image and marketing. Hospitals that invest in marketing and branding efforts tend to have higher visibility and stronger reputations, [40]. This can be achieved through a variety of channels, such as social media, advertising, and community outreach.

Hospital reputation is a complex and multifaceted concept that is influenced by a variety of factors, including quality of healthcare and medical personnel, cleanliness, good amenities, brand image, third-party rankings, online reviews, and transparency. Hospitals that prioritize these factors and invest in reputation management efforts may be better positioned to attract patients, [24].

3 Hypotheses Development

3.1 Service Quality and Patient Satisfaction

Service quality and patient satisfaction are crucial aspects of healthcare management and delivery. Service quality refers to the overall excellence of healthcare services provided, while patient satisfaction is a measure of how well the services meet or exceed patients' expectations and needs, [41]. Patients enter healthcare settings with certain expectations regarding the quality of care they will receive. These expectations may be influenced by factors such as previous experiences, word of mouth, and cultural norms and influenced by the perception of how well the healthcare services align with their expectations. The widely recognized SERVQUAL model is employed globally to measure service quality, including its application

within hospital services, [35].

The relationship between service quality and patient satisfaction is intricate and multifaceted. Many studies have found a positive correlation between service quality and patient satisfaction, [42]. High-quality healthcare services, including effective communication, empathy, and timely care, tend to be associated with higher levels of patient satisfaction. Healthcare providers and organizations need to focus on both the tangible and intangible aspects of service delivery, foster effective communication, and actively involve patients in their care to achieve high levels of patient satisfaction, [19]. Continuous efforts to monitor and improve service quality based on patient feedback are essential for maintaining and enhancing patient satisfaction levels. Numerous studies have affirmed that greater satisfaction levels contribute to enhanced customer retention and loyalty, further substantiating the significant influence of service quality on customer satisfaction, [43]. Given the competitive landscape and regulatory constraints, hospitals find limited flexibility in their operations. Consequently, they place substantial reliance on service quality as a critical strategy for customer satisfaction, [44]. Thus, the hypothesis is:

H₁: Service quality has a positive effect on patient satisfaction.

3.2 Patient Trust and Patient Satisfaction

Patient trust is defined as an individual's belief that healthcare providers will consistently act in the best interest of the patient. Thus, examining the impact of patient trust becomes particularly significant due to the recognition that a deficiency in trust has been identified as a primary contributor to the significant strain and conflicts that can arise in the patient-doctor relationship, [22]. Research in the healthcare field has often found a positive relationship between patient trust and patient satisfaction. Patient trust is a critical component of the patient-provider relationship and healthcare experience. Trust fosters open and effective communication between healthcare providers and patients, [31]. Patients who trust their healthcare providers are more likely to share relevant information about their symptoms, concerns, and medical history, leading to better-informed and personalized care. Patients who trust their healthcare providers are more likely to adhere to prescribed treatments and follow-up recommendations. This can contribute to better health outcomes and increased satisfaction with the care received, [29].

Gaining trust is an antecedent to achieving customer satisfaction because trust reduces perceived risk and customer uncertainty, and it allows patients to have confidence in their expectations, [38]. In prior studies, trust and satisfaction were found to be correlated with each other, and academic literature supports the above relationship, [45]. Several research studies have revealed a reciprocal relationship between customer satisfaction and trust. On one hand, customer satisfaction has been found to exert a positive influence on trust. Conversely, a customer's favorable perceptions of trust have been demonstrated to contribute to increased customer satisfaction, [46].

Many researchers have supported the idea that trust is the basis of ensuring customer satisfaction and loyalty, [47]. Furthermore, in situations where suitable alternatives are available, a lack of trust may result in negative satisfaction and loyalty; hence, emphasizing the significant positive impact of trust on customer satisfaction and loyalty, [48]. A previous study examined the effect of patient trust on patient satisfaction, and the result showed that patient trust has a significant impact on patient satisfaction, [49], [50], [51]. The evidence suggests that fostering patient trust is a valuable aspect of healthcare delivery that positively influences patient satisfaction and contributes to a positive patient experience. This underscores the importance of building and maintaining trustful relationships between healthcare providers and their patients, [34]. Hence, the hypothesis is:

H₂: Patient Trust has a positive effect on patient satisfaction.

3.3 Hospital Reputation and Patient Satisfaction

There is evidence to suggest that a hospital's reputation can have a positive effect on patient satisfaction. The reputation of a hospital encompasses various factors, including its perceived quality of care, patient outcomes, facilities, and the overall patient experience. Hospitals with positive reputations are often associated with higher perceived quality of care, [21]. Patients may believe that a hospital with a good reputation is more likely to provide effective, safe, and reliable healthcare services, which can positively impact their satisfaction. A hospital's reputation is closely tied to the expertise of its healthcare providers. Patients may be more satisfied when receiving care from providers affiliated with a

reputable hospital, as the hospital's positive reputation may reflect the competence and skills of its staff. Patients often rely on word of mouth and referrals from friends, family, or healthcare professionals when choosing a hospital. Positive experiences shared by others contribute to the hospital's reputation and can influence a patient's satisfaction, [38].

Hospital reputation and patient satisfaction are closely related, as a hospital's reputation can significantly impact how satisfied patients are with their care experience, [10]. Research has consistently shown that patients are more likely to choose hospitals with good reputations and that hospitals with higher reputations tend to have higher levels of patient satisfaction. This is because a hospital's reputation can be seen as a proxy for its overall quality and ability to provide high-quality healthcare. Patients may also perceive hospitals with good reputations as being more trustworthy and reliable, [52].

In addition, hospitals with good reputations may be better equipped to provide a positive patient experience, which can impact high patient satisfaction, [53]. For example, hospitals that invest in amenities such as comfortable rooms, quality food, and personalized healthcare may be more likely to provide a positive patient experience, which can lead to higher levels of patient satisfaction, [37]. Conversely, hospitals with poor reputations may struggle to attract patients and retain physicians, which can negatively impact patient satisfaction, [24].

Previous studies have shown that hospital reputation plays an essential role in determining patients' satisfaction, [54], [55]. In addition, previous studies have suggested that reputation is a direct antecedent of satisfaction and achieved a consensus that a more favorable reputation and image is likely to lead to a higher level of customer satisfaction, [17], [53], [56], [57]. Based on this premise, this study proposes that hospital reputation is an antecedent of patient satisfaction as set out in the following hypothesis:

H₃: Hospital reputation has a positive effect on patient satisfaction.

4 Methodology

In this study, data collection was conducted through the utilization of questionnaires, which were adapted from prior research. These questionnaires were distributed to participants through the convenience

sampling method. The study population comprised patients who had sought medical care in public hospitals within Jordan. Public hospitals were selected for this study due to their central role in delivering healthcare services to a significant segment of Jordan's population. These institutions play a vital role in addressing healthcare disparities and catering to underserved communities, all while being easily accessible to a wide and diverse patient demographic.

The determination of the sample size was contingent on the complexity of the model and was aligned with the statistical power of analysis. To establish the minimum sample size, Green's table was consulted, considering two predictors derived from the research framework with a medium effect size. Consequently, a minimum of 74 patients were deemed necessary for the study. However, it's important to note that a larger sample size offers advantages such as increased homogeneity, higher confidence levels, reduced variance error, and enhanced representation of results. As a result, a total of 413 questionnaires were disseminated to patients in 8 public hospitals in the capital city of Jordan.

Thirteen questionnaires were excluded from the analysis due to missing data, leaving a total of 400 questionnaires for analysis. Patient satisfaction was assessed using a measurement scale consisting of five (5) items adapted from, [58]. Service quality was measured using a scale comprising twenty-two (22) items, drawing from the study of, [59], and, [60]. Patient trust was assessed with two different measurements: one with five (5) items, based on, [61], and another with five (5) items, sourced from the research of, [62], and, [63]. All variables were evaluated using a 5-point Likert scale, allowing respondents to express their level of agreement with the questionnaire statements, ranging from 1 for "strongly disagree" to 5 for "strongly agree." To analyze data, Smart PLS version 3.3.2 was employed in this investigation.

5 Results

This study applied quantitative analysis to analyze the data. The author conducted a survey, with 400 participants meeting the eligibility criteria (yielding an 84% response rate). The quantitative research approach employed data processing tools, specifically SPSS 25 software and Smart PLS version 3.3.2.

Table 1. Demographic variables

Variable	Category	Frequency	Percent (100%)
Gender	Male	209	52.3
	Female	191	47.8
Age	Less than 18	33	8.3
	18-30	76	19.0
	31-40	81	20.3
	41-50	76	19.0
	51-60	83	20.8
	More than 60	51	12.8
Marital Status	Single	108	27.0
	Married	276	69.0
	Widowed / Separated	16	4.0
Educational Level	High school	67	16.8
	Diploma	48	12.0
	First University	193	48.3
	Master	86	21.5
	PhD	6	1.5

Based on Table 1, there is a difference in the number of patients divided by gender participating in the survey between males and females. Accordingly, the number of male patients is higher than that of female patients, specifically: 209/400 patients (accounting for 52.3%) compared to 191/400 patients (accounting for 47.8%). Moreover, the majority of the respondents in Jordanian public hospitals, fell within the age range between 51 and 60 (20.8%), followed by those between 31 and 40 (20.3%), those that are between 41 and 50 years 76 (19 %), and was the lowest category those less than 18 of age, 33 (8.3%) these patients are children who were in public hospitals and the questionnaire was filled out by their companions. The analysis results also showed that most of the respondents, 276 (69%), are married.

However, 108 (27%) of respondents are single and 16 (4%) of respondents are divorced/widows in Jordanian public hospitals. Lastly, as for the respondents' educational level of the respondents in this study, almost half of the patients in Jordanian

public hospitals 193 (48.3%) had attended their first university degree, followed by Master 86 (21.5%), 67 (16.8%) respondents had attended High school, and finally, those with had attended Diploma 48 (12%) and Ph.D. 6 (1.5%).

5.1 Testing the Reliability of Scales

The reliability of the instrument was evaluated in the current study using Cronbach's alpha coefficient approach. Table 2 provides the reliability analysis's Cronbach's alpha coefficient for the pilot research. All variables indicate an acceptable level of internal consistency because all variables have achieved values between 0.751 and 0.935 for Cronbach's alpha coefficient. In addition, it can be noticed that there were no items deleted to improve the internal consistency of the constructs. In general, all the items included in the study have proven to show a good level of internal consistency when measuring their respective intended measures.

Table 2. Results of Cronbach's Alpha of the scales

Variable	No. of Items	Cronbach's Alpha	Item Deleted	
Service Quality	Reliability	4	0.873	Nil
	Assurance	4	0.792	Nil
	Tangibles	4	0.868	Nil
	Empathy	6	0.910	Nil
	Responsiveness	4	0.842	Nil
Patient Trust	5	0.751	Nil	
Hospital reputation	5	0.921	Nil	
Patient Satisfaction	5	0.874	Nil	

5.2 Removal of Outliers

Outliers are observations for a specific variable that has aberrant values.

Table 3. Univariate Outliers based on Standardized Values

Construct	Item	Standardized value (z-score)	
		Lower bound	Upper bound
Reliability	REL 1	-1.843	1.349
	REL 2	-1.154	1.427
	REL 3	-2.156	1.361
	REL 4	-1.833	1.322
Assurance	ASU 1	-1.765	1.342
	ASU 2	-1.834	1.233
	ASU 3	-1.713	1.172
	ASU 4	-1.881	1.273
Tangibles	TNG 1	-1.864	1.271
	TNG 2	-2.119	1.349
	TNG 3	-1.994	1.471
	TNG 4	-2.125	1.611
Empathy	EMP 1	-2.025	1.834
	EMP 2	-1.899	1.438
	EMP 3	-1.980	1.524
	EMP 4	-2.099	1.451
	EMP 5	-1.956	1.506
	EMP 6	-1.823	1.256
Responsiveness	RES 1	-1.854	1.213
	RES 2	-2.200	1.762
	RES 3	-2.111	1.234
	RES 4	-2.198	1.220
Trust	TR 1	-2.126	1.560
	TR 2	-2.119	1.762
	TR 3	-2.109	1.631
	TR 4	-2.123	1.655
	TR 5	-2.296	1.304
Hospital reputation	HR 1	-2.188	2.101
	HR 2	-1.840	1.101
	HR 3	-2.122	1.850
Patient Satisfaction	HR 4	-2.019	1.897
	HR 5	-2.499	1.740
	PS 1	-2.222	2.103
	PS 2	-2.219	2.211
	PS 3	-2.250	2.146
	PS 4	-2.216	2.204

Each variable was assessed for unit-variate disclosure using the standardized (z) score, histograms, and boxplots. Any z-score that is > 4 or -4 is regarded as an outlier. A case is considered an outlier if it has a regular score of > 4.0 . The remaining instances' z scores for the elements in each construct are shown in Table 3. The studied variables had scores ranging from -2.499 to 2.211. Hence no item exceeded the ± 4 threshold. Therefore, there was no univariate outlier in 400 cases.

5.3 Assessment of Data Normality

The variables' skewness ranged from -0.83 to -0.072 in the data that were derived from web-power which are well within the recommended range of +1 to -1. Meanwhile, the Kurtosis value for measurement variables ranges from -1.31 to -0.35, which is well within the recommended range of +3 to -3. As such, the test indicates that the data have a normal distribution.

5.4 Multicollinearity Test

As shown in Table 4, the variance inflated factor (VIF) and tolerance value were used to evaluate the multicollinearity problem. The VIF value and tolerance values for the exogenous latent construct. It illustrates that extreme multicollinearity did not exist among the exogenous latent constructs because the VIF values were less than 5, and the tolerance value exceeded .20. Hence, this study does not have a multicollinearity problem.

Table 4. Multicollinearity test

Variable	Collinearity Statistics	
	Tolerance	VIF
Service Quality	.902	1.109
Trust	.933	1.071
Hospital Reputation	.730	1.369

5.5 Descriptive Statistic

In Table 5, the descriptive statistics for the constructs display the overall mean for the latent variables stretched between 3.2595 and 3.5120. Unequivocally, the mean value of 3.4121 for service quality illustrates that the perceived service quality of the hospital is moderate. While patients' trust in the hospital is considered moderate as well at a mean value of 3.4470. The mean value shows that the patient's perception of the hospital's reputation is likewise considered moderate at 3.5120 on a 5-point scale. Nevertheless, a lower moderate mean value of 3.2595 was recorded from the patients based on their satisfaction with the hospital's service.

Table 5. Descriptive statistics of the variables

Variable	Mean	Std. Deviation	Variance
Service Quality	3.4121	.68349	.467
Trust	3.4470	1.01438	1.029
Hospital Reputation	3.5120	.90770	.824
Patient Satisfaction	3.2595	1.15399	1.332

5.6 Assessment of the Measurement Model

5.6.1 Assessment of the Convergent Validity of the Measurement Model via Confirmatory Factor Analysis

The current study conducted a two-stage approach that used the repeated indicator approach in the first stage then extracted the Average variance extracted, and composite reliability for the higher-order construct from the first-order construct that existed in the higher-order construct. Furthermore, this type of approach is recommended when the higher-order construct is an endogenous or a mediating variable. In the current study, there was one higher-order construct (reflective-reflective), namely service quality included five first-order constructs (reliability, responsiveness, empathy, assurance, and tangibility), and in addition, three first-order-reflective constructs (hospital reputation, trust, and patient satisfaction). The service quality was the independent variable that used a two-stage approach.

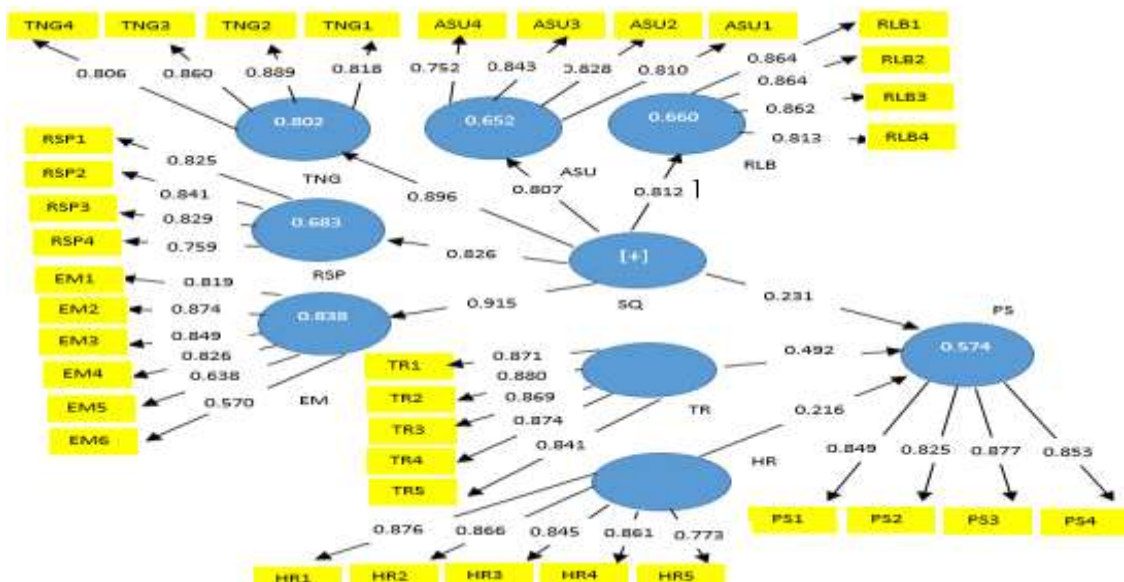


Fig. 1: Results of PLS algorithm

Table 6. Convergent validity

First order Construct	Items	Factor loading	CR	AVE
Reliability (Rel)	REL 1	0.864	0.913	0.725
	REL 2	0.864		
	REL 3	0.862		
	REL 4	0.813		
Assurance (Ass)	ASU 1	0.810	0.883	0.654
	ASU 2	0.822		
	ASU 3	0.843		
	ASU 4	0.752		
Tangibility (Tan)	TNG 1	0.818	0.908	0.712
	TNG 2	0.889		
	TNG 3	0.880		
	TNG 4	0.806		
Empathy (Emp)	EMP 1	0.819	0.896	0.595
	EMP 2	0.874		
	EMP 3	0.849		
	EMP 4	0.826		
	EMP 5	0.638		
	EMP 6	0.670		
Responsiveness (Res)	RSP 1	0.825	0.887	0.663
	RSP 2	0.841		
	RSP 3	0.829		
	RSP 4	0.759		
Patient Trust (PT)	TR 1	0.871	0.939	0.754
	TR 2	0.880		
	TR 3	0.869		
	TR 4	0.879		
	TR 5	0.841		
Hospital Reputation (HR)	HR 1	0.876	0.926	0.714
	HR 2	0.866		
	HR 3	0.846		
	HR 4	0.861		
	HR 5	0.773		
Patient Satisfaction (PS)	PS 1	0.849	0.913	0.724
	PS 2	0.825		
	PS 3	0.877		
	PS 4	0.853		
Second order constructs				
Service Quality (SQ)	Reliability	0.812	0.930	0.727
	Assurance	0.807		
	Tangibility	0.896		
	Empathy	0.915		
	Responsiveness	0.826		

5.6.2 Confirmatory Factor Analysis for the Measurement Model

A confirmatory factor analysis was also employed to evaluate the measurement model. The latent constructs and their specified indicators from the earlier individual CFA models made up the assessed measurement model. The measurement model is shown in Figure 1. The results of the measurement model evaluation, including path coefficients, factor loading, and coefficient of determination. All the goods had a loading greater than 0.70. Thus, all the objects have been kept, [64].

5.6.3 Reliability and Convergent Validity for the Model

The composite reliability test, Cronbach's alpha, and average variance extracted were used to confirm convergent validity. Table 6 displays the results of the convergent validity test, which revealed that Cronbach's alpha and composite reliability for all constructs were higher than the specified threshold values of 0.70 and above, [64]. All constructs had values greater than the specified threshold value of 0.50 in terms of average variance extracted, [65]. From Table 6, the model items' originally normalized factor loadings ranged from 0.638 to 0.915, exceeding the 0.6 threshold value recommended. The table also reveals that the AVE values varied between 0.595 and 0.754, exceeding the suggested threshold value of 0.5, [65]. Finally, the CR values were also more than the recommended threshold value of 0.7 as they ranged from 0.883 to 0.939.

5.6.4 Discriminant Validity

The Heterotrait-Monotrait Ratio (HTMT) test was used to ensure discriminant validity. From Table 7, it is evident that all the HTMT values for the latent constructs in the model variables fell below the 0.90

point and ranged from 0.541 to 0.826. This finding demonstrated the complete selective nature of each latent construct assessment. It was determined that the measurement scale was valid and reliable for evaluating the constructs and their associated items in the model after establishing the CV and DSV of the overall measurement model, [64].

5.7 Analysis of the Structural Model

This study uses PLS bootstrapping techniques incorporated in Smart PLS version 3.3.2 with 5000 bootstrap samples for hypotheses testing. Table 8 illustrates the Std. beta, Std. Error, t-value, p-value, and confidence interval for hypotheses testing. The estimated results show that the relationship between service quality, patient trust, hospital reputation, and patient satisfaction is statistically significant ($p < 0.01$). The results of the hypothesis testing are as follows:

H1: service quality has a direct and positive impact on patient satisfaction (T-Value = 2.457; P-Value = 0.000; 95% LL= 0.049; 95% UL= 0.373). The research results support the results of, [1], [2], [4], on the impact of service quality on patient satisfaction.

H2: patient trust has a direct and positive impact on patient satisfaction results (T-Value = 5.927; P-Value = 0.000; 95% LL= 0.023; 95% UL= 0.3381). The research results are consistent with the results of, [32], [23], and, [33], on the impact of patient trust on patient satisfaction.

H3: hospital reputation has a direct and positive impact on patient satisfaction results (T-Value = 3.483; P-Value = 0.017; 95% LL= 0.455; 95% UL= 0.416). The research results are consistent with the results of, [15], [31], and, [53], on the impact of hospital reputation on patient satisfaction.

Table 7. Discriminant validity by HTMT

Constructs	Ass	Emp	HR	PS	Rel	Res	SQ	Tan	PT
Ass									
Emp	0.792								
HR	0.678	0.797							
PS	0.574	0.673	0.668						
Rel	0.612	0.791	0.643	0.549					
Res	0.786	0.811	0.541	0.562	0.660				
SQ	0.653	0.818	0.754	0.684	0.826	0.661			
Tan	0.650	0.763	0.687	0.695	0.757	0.806	0.791		
PT	0.774	0.637	0.607	0.787	0.557	0.642	0.696	0.645	

Table 8. Hypotheses testing

No.	Hypotheses	Std. beta	Std. Error	T-Value	P-Value	Confidence Interval		Decision
						95% LL	95% UL	
H1	SQ→PS	0.231	0.094	2.457	0.000	0.049	0.373	Supported
H2	PT→PS	0.492	0.083	5.927	0.000	0.023	0.381	Supported
H3	HR→PS	0.216	0.062	3.483	0.017	0.455	0.416	Supported

6 Discussion

As Jordan's ongoing medical and healthcare system reform continues, the landscape for medical services is gradually becoming more open, leading to heightened competition among medical facilities. Public hospitals are now facing the challenge of not only expanding sustainably but also earning the trust of patients in a fiercely competitive medical services market. Current research investigates the impact of service quality, patient trust, and hospital reputation on patient satisfaction. This investigation provides compelling evidence that there is a positive influence between service quality, patient trust, hospital reputation, and patient satisfaction (H1, H2, and H3).

In this context, the argument is presented that the expectation of a substantial positive correlation between service quality and patient satisfaction is well-founded. Jordanian public hospitals operate under the assumption that competing healthcare providers strive to enhance patient satisfaction as a means of gaining a competitive edge. Consequently, when hospitals prioritize tools and techniques to improve service quality, it naturally leads to increased patient satisfaction. Factors such as accurate diagnosis, prompt responses to patient inquiries, access to state-of-the-art medical equipment, and ensuring patient comfort and safety during treatment all contribute to elevating patients' overall satisfaction with the hospital.

The impact of patient trust on patient satisfaction is statistically significant, providing robust evidence that higher levels of patient satisfaction with a hospital result in stronger and more profound bonds between patients and the institution. When patients trust a hospital, they develop deep and meaningful connections characterized by understanding, affection, and a behavioral reliance on the hospital. Patients who perceive the hospital and its staff as honest and trustworthy are more likely to maintain ongoing engagement, indicating a greater propensity to return for future care, [36]. These findings align with prior research that underscores the critical role

of patient trust as a prerequisite for achieving patient satisfaction, highlighting that the key to enhancing satisfaction lies in earning patients' trust, [30].

In the scope of public services, particularly in the case of public hospitals, the importance of maintaining a strong reputation cannot be overstated. The reputation of a hospital carries considerable weight, as any damage to it can result in a decline in market share attributable to patient choices, vendor associations, or referrals from physicians. Additionally, a negative reputation for a public hospital can have far-reaching consequences, extending even to the perception of the government itself. Furthermore, a hospital's diminishing reputation can pose challenges in recruiting and retaining qualified healthcare professionals, including physicians and nurses. It is imperative to investigate how reputation impacts a hospital's ability to maintain its legitimacy and professional standing and to explore effective strategies for managing and safeguarding reputation. In complex service sectors like healthcare organizations, reputation emerges as a central element that ultimately contributes to patient satisfaction.

High service quality in public hospitals can lead to improved patient satisfaction. When patients receive prompt, effective, and compassionate care, it enhances their overall experience. Quality services contribute to better health outcomes, increased trust in the healthcare system, and a positive perception of the hospital. Trust is a crucial factor in healthcare. When patients trust their healthcare providers and the system, they are more likely to follow medical advice, feel secure in their treatment, and experience greater satisfaction. Trust can be built through transparent communication, consistent and reliable services, and positive interactions with healthcare professionals. A positive hospital reputation can instill confidence in patients. If a hospital is known for providing high-quality care, having skilled healthcare professionals, and maintaining ethical standards, it can positively influence patient satisfaction. Reputation also plays a role in

attracting patients, as individuals may choose a hospital based on its perceived standing in the community. When service quality, patient trust, and hospital reputation work together, they create a synergistic effect on patient satisfaction. For example, high service quality can enhance trust, and a positive hospital reputation can further bolster patient confidence. A hospital with a strong reputation for quality care is likely to attract patients who have trust in the services provided, leading to increased overall patient satisfaction. It's essential to consider cultural factors specific to Jordan in understanding patient satisfaction. Cultural preferences, expectations, and communication styles may influence how patients perceive and respond to healthcare services. Tailoring services to align with cultural norms can enhance patient satisfaction. Hospitals in Jordan focus on continuous improvement in service quality, building and maintaining trust, and actively managing their reputation. Regular feedback mechanisms, patient surveys, and engagement with the community can help hospitals identify areas for improvement and strengthen their overall performance.

7 Conclusion

In summary, this study makes a valuable addition to the existing body of knowledge concerning patient experiences within the healthcare sector, specifically the public hospital. It offers concrete evidence that the evolution of patient satisfaction is markedly impacted by variables like service quality, patient trust, and hospital reputation. These findings carry immediate implications for healthcare practitioners in Jordan, emphasizing the importance of not only delivering top-notch medical care but also employing marketing strategies to foster enduring relationships with their patients.

7.1 Limitations and Future Studies

While this research has yielded significant results, it remains susceptible to notable shortcomings that require attention. Primarily, the study exclusively focuses on public hospitals, yet it is evident that different hospital types may be influenced by distinct factors when it comes to shaping patient satisfaction. Additionally, the research framework relies on certain assumptions and is relatively simplistic, omitting crucial considerations like the impact of demographic variables such as the distinction between inpatients and outpatients.

Furthermore, the study highlights potential avenues for future research, particularly in the realm of comparative analyses involving patients from both domestic and international contexts. Such investigations could offer a more comprehensive grasp of the dynamics governing patient satisfaction. A future study might also center on investigating the cultural factors that could potentially impact patient satisfaction within the healthcare sector.

References:

- [1] Abu-Rumman, A., Al Shraah, A., Al-Madi, F., & Alfalah, T. (2022). The impact of quality framework application on patients' satisfaction. *International Journal of Human Rights in Healthcare*, vol.15(2), pp.151-165.
- [2] Russo, G., Moretta Tartaglione, A., & Cavacece, Y. (2019). Empowering patients to co-create a sustainable healthcare value. *Sustainability*, vol.11(5), 1315.
- [3] Fatih Şantaş, Özlem Özer, Meltem Saygili & Şirin Özkan (2020) The effect of corporate reputation on work engagement: A case study in a public hospital. *International Journal of Healthcare Management*, vol.13(1), 340-346.
- [4] Amara, Naser, & Esra. (2023). Patient Satisfaction with Pharmaceutical Services in Jordan: A Cross-Sectional Study. *Jordan Journal of Pharmaceutical Sciences*, vol.16(1), pp.1-10.
- [5] World Health Organization (2018) Delivering quality health services: global imperative, [Online]. <https://www.oecd.org/health/delivering-quality-health-services-a-global-imperative-9789264300309-en.htm> (Accessed Date: July 1, 2023).
- [6] Al-Faouri, Al-Dmour, A., Al-Ali, N., AbuALRub, R., & Abu Moghli, F. (2019). Effect of Health Care Accreditation Council survey site visit on perceived stress level among Jordanian healthcare providers. Paper presented at the Nursing forum, [Online]. <https://onlinelibrary.wiley.com/doi/abs/10.1111/nuf.12294> (Accessed Date: July 10, 2023).
- [7] Jordan 'Health Vision Roadmap 2022, [Online]. <https://jsf.org/uploads/2022/12/the-global-health-security-index-ghsi.pdf> (Accessed Date: June 25, 2023).
- [8] Nazer, L. H., & Tuffaha, H. (2017). Health care and pharmacy practice in Jordan. *The*

- Canadian journal of hospital pharmacy*, vol.70(2), 150.
- [9] Jordan Strategy Forum. (2020). Enhancing the Competitiveness of the Tourism Sector in Jordan: Prospect and Adaptation to New Trends. Jordan, [Online]. www.jsf.go (Accessed Date: July 11, 2023).
- [10] USAID, 2020. Human Resources for Health (HRH) 2030 in Jordan, [Online]. https://pdf.usaid.gov/pdf_docs/PA00WJW8.pdf (Accessed Date: July 10, 2023).
- [11] Goodyear-Smith, F., & Ashton, T. (2019). New Zealand health system: universalism struggles with persisting inequities. *The Lancet*, 394(10196), 432-442.
- [12] Kruk, M. E., Gage, D., Arsenault, C., Jordan, K., Leslie, H. H., Roder-DeWan, S., ... & Pate, M. (2018). High-quality health systems in the Sustainable Development Goals era: time for a revolution. *The Lancet global health*, 6(11), e1196-e1252.
- [13] Tasneem, S., & Ozdal, M. A. (2023, March). Pregnant Women's Perceptions of the Quality of Antenatal Care in a Public Hospital in Punjab, Pakistan during COVID-19: A Cross-Sectional Study. In *Healthcare* (Vol. 11, No. 7, p. 996). MDPI.
- [14] Addo, A. A., Wang, W., Dankyi, A. B., Abban, O. J., & Bentum-Micah, G. (2020). Sustainability of health institutions: The impact of service quality and patient satisfaction on loyalty. *European Journal of Business and Management Research*, 5(4).
- [15] Akbolat, M., Amarat, M., Ünal, Ö & Sütü, E. S. (2023). The mediating role of hospital reputation in the effect of doctor reputation on patients loyalty. *International Journal of Healthcare Management*, 16(1), 12-18.
- [16] Fatima, Malik, S. A., & Shabbir, A. (2018). Hospital healthcare service quality, patient satisfaction and loyalty: An investigation in context of private healthcare systems. *International Journal of Quality & Reliability Management*, 35(6), 1195-1214.
- [17] TOSYALI, H., Sütücü S., & TOSYALI, F. (2019). Patient Loyalty in the Hospital Patient Relationship: The Mediating Role of Social Media. *Erciyes İletişim Dergisi*, 6(1), 783-804.
- [18] Bakrie, M., Sujanto, B., & Rugaiyah, R. (2019). The influence of service quality, institutional reputation, students' satisfaction on students' loyalty in higher education institution. *International Journal for Educational and Vocational Studies*, 1(5), 379-391.
- [19] Zuriati, Z., & Chiew, L. (2020). Relationship quality of health services with satisfaction of patients in H. Hanafie Muara Bungo Hospital in 2019. *Enfermería clínica*, 30, 168-170.
- [20] Al-Fakeh, F. A., Padlee, S. F., Omar, K. & Salleh, H. S. (2020). The moderating effects of organizational commitment on the relationship between employee satisfaction and employee performance in Jordanian Islamic banks. *Management Science Letters*, 10(14), 3347-3356.
- [21] Ellynia & Widjaj (2020). The Effect of Service Quality on Patient Loyalty (A Study on Inpatients of Regional Public Hospitals in Jakarta, Indonesia). *International Journal of Advanced Engineering, Management and Science*, 6(1).
- [22] Juhana, D., Manik, E., Febrinella, C., & Sidharta, I. (2015). Empirical study on patient satisfaction and patient loyalty on public hospital in Bandung, Indonesia. *International Journal of Applied Business and Economic Research*, 13(6), 4305-4326.
- [23] Jiang (2019). The relationship between face-to-face and online patient-provider communication: examining the moderating roles of patient trust and patient satisfaction. *Health communication. Health Communication*, vol. 35 (3).
- [24] Parasuraman, Zeithaml, V., & Berry, L. (1985). A conceptual model of service quality and its implications for future research. *the Journal of Marketing*, 41-50.
- [25] Mmutle, T., & Shonhe, L. (2017). Customers' perception of service quality and its impact on reputation in the hospitality industry. *African Journal of Hospitality*, Volume 6 (3).
- [26] Bansal, H. S., & Taylor, S. F. (2015). Beyond service quality and customer satisfaction: investigating additional antecedents of service provider switching intentions. In *Proceedings of the 1999 Academy of Marketing Science (AMS) Annual Conference* (pp. 75-82). Springer, Cham.
- [27] Widjaja, A. (2021). Factors Affecting the Quality of Hospital Service for Inpatients. *Journal of Research in Business and Management*, 9(6), 62-67.
- [28] Freund, B., & Dorczak, R. (2019). How nurses understand the concept of

- development: implication for management of healthcare organizations, [Online]. <https://library.iated.org/view/FREUND2019HOW> (Accessed Date: July 22, 2023).
- [29] Gilligan, C., & Lowe, R. (2018). Marketing and healthcare organizations: CRC Press, [Online]. [https://books.google.jo/books?hl=en&lr=&id=q01WDwAAQBAJ&oi=fnd&pg=PT6&dq=%5B29%5D%09Gilligan,+C.,+%26+Lowe,+R.,+\(2018\).+Marketing+and+healthcare+organizations](https://books.google.jo/books?hl=en&lr=&id=q01WDwAAQBAJ&oi=fnd&pg=PT6&dq=%5B29%5D%09Gilligan,+C.,+%26+Lowe,+R.,+(2018).+Marketing+and+healthcare+organizations) (Accessed Date: July 25, 2023).
- [30] Muldoon, Bauman, A., & Lucy, C. (2018). Entrepreneurial ecosystem: do you trust or distrust?. *Journal of Enterprising Communities: People and Places in the Global Economy*, 12(2), 158-177.
- [31] Liu, J. H., North, M., & Li, C. (2017). Relationship building through reputation and tribalism on companies' Facebook pages: A uses and gratifications approach. *Internet Research*, 27(5), 1149-1169.
- [32] Sullivan, L. S. (2020). Trust, risk, and race in American medicine. *Hastings Center Report*, 50(1), 18-26.
- [33] Sumaedi, S., Gede Mahatma Yuda Bakti, I., Rakhmawati, T., J. Astrini, N., Widiyanti, T., & Yarmen, M. (2014). The empirical study on patient loyalty: The role of trust, perceived value, and satisfaction (a case study from Bekasi, Indonesia). *Clinical Governance: An International Journal*, 19(3), 269-283.
- [34] Ward, (2018). Trust and communication in a doctor-patient relationship: a literature review. *Arch Med*, 3(3), 36.
- [35] Han, H & Hyun, S. (2015). Customer retention in the medical tourism industry: Impact of quality, satisfaction, trust, and price reasonableness. *Tourism management*, 46, 20-29.
- [36] 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.
- [37] Lim, J., Lim, K., Heinrichs, J., Al-Aali, K., Aamir, A., & Qureshi, M. (2018). The role of hospital service quality in developing the satisfaction of the patients and hospital performance. *Management Science Letters*, 8(12), 1353-1362.
- [38] Nepal, S., Keniston, A., Indovina, K. A., Frank, M. G., Stella, S. A., Quinzanos-Alonso, I., ... & Burden, M. (2020). What do patients want? a qualitative analysis of patient, provider, and administrative perceptions and expectations about patients' hospital stays. *Journal of patient experience*, 7(6), 1760-1770.
- [39] Jin, N., Line, N., & Merkebu, J. (2016). The impact of brand prestige on trust, perceived risk, satisfaction, and loyalty in upscale restaurants. *Journal of Hospitality Marketing & Management*, 25(5), 523-546.
- [40] Bamfo, B. A., & Dogbe. S. K. (2017) Factors influencing the choice of private and public hospitals: empirical evidence from Ghana. *International Journal of Pharmaceutical and Healthcare Marketing*. 11(1), 80-96.
- [41] Del-Castillo-Blanco-González, A., & González-Vázquez, E. (2019). The relationship between image and reputation in the Spanish public university. *European research on management and business economics*, 25(2), 87-92.
- [42] Raza, S. A., Umer, A., Qureshi, M. A., & Dahri, A. S. (2020). Internet banking service quality, e-customer satisfaction and loyalty: the modified e-SERVQUAL model. *The TQM Journal*. 32(6), 1443-1466.
- [43] Serra-Cantalops, A., Cardona, J. R., & Salvi, F. (2020). Antecedents of positive eWOM in hotels. Exploring the relative role of satisfaction, quality and positive emotional experiences. *International Journal of Contemporary Hospitality Management*. 32(11), 3457-3477.
- [44] Kasiri, L. A., Cheng G., Sambasivan, M., & Sidin, S. M. (2017). Integration of standardization and customization: Impact on service quality, customer satisfaction, and loyalty. *Journal of Retailing and Consumer Services*, 35, 91-97.
- [45] Smith, P. (2018). Advancing Universal Health Coverage, [Online]. <http://hdl.handle.net/10986/29183> (Accessed Date: July 25, 2023).
- [46] Li, M., Pérez-Díaz, P. A., Mao, Y., & Petrides, K. V. (2018). A multilevel model of teachers' job performance: Understanding the effects of trait emotional intelligence, job satisfaction, and organizational trust. *Frontiers in Psychology*, 9, 2420.
- [47] Uzir, M. U. H., Al Halbusi, H., Thurasamy, R., Hock, R. L. T., Aljaberi, M. A., Hasan, N., & Hamid, M. (2021). The effects of service

- quality, perceived value and trust in home delivery service personnel on customer satisfaction: Evidence from a developing country. *Journal of Retailing and Consumer Services*, 63, 102721.
- [48] Chou, S. K., & Kohsuwan, P. (2019). Impact of corporate image, service quality, trust, and perceived value on Chinese customer satisfaction and loyalty. *Human behavior, development and society*, 20(3), 41-51.
- [49] Alkhurshan, M., & Rjoub, H. (2020). The scope of an integrated analysis of trust switching barriers, customer satisfaction and loyalty. *Journal of Competitiveness*, 12(2), 5.
- [50] Diputra, I. G. A. W., & Yasa, N. N. (2021). The influence of product quality, brand image, brand trust on customer satisfaction and loyalty. *American International Journal of Business Management (AIJBM)*, 4(1), 25-34.
- [51] Cuong, D. T., & Khoi, B. H. (2019). The relationship between service quality, satisfaction, trust and customer loyalty a study of convenience stores in Vietnam. *Journal of Advanced Research in Dynamic and Control Systems*, 11, 327-333.
- [52] Yildiz, E. (2017). Effects of service quality on customer satisfaction, trust, customer loyalty and word of mouth: an application on cargo companies in gümüşhane. *Global Journal of Economics and Business Studies*, 6(12), 81-88.
- [53] Sageder, M., Mitter & Feldbauer-Durstmüller, B. (2018). Image and reputation of family firms: a systematic literature review of the state of research. *Review of Managerial Science*, 12(1), 335-377.
- [54] Kim, C. E., Shin, J. S., Lee, J., Lee, Y. J., Kim, M. R., Choi, A., & Ha, I. H. (2017). Quality of medical service, patient satisfaction and loyalty with a focus on interpersonal-based medical service encounters and treatment effectiveness: a cross-sectional multicenter study of complementary and alternative medicine (CAM) hospitals. *BMC complementary and alternative medicine*, 17(1), 1-12.
- [55] Blind, K., Filipović, E., & Lazina, L. K. (2022). Motives to publish, to patent and to standardize: an explorative study based on individual engineers' assessments. *Technological Forecasting and Social Change*, 175, 121420.
- [56] Alzailai, M. S., & Almeshal, S. A. (2019). The Impact of Pay Level Satisfaction and Company Reputation on Work Engagement: A Study on Employees Graduated Between 2010 and 2017 working in Saudi Arabia Universities. *Journal of Management Research*, 11(3), 36.
- [57] Khan, U., Salamzadeh, Y., Iqbal, Q., & Yang, S. (2022). The impact of customer relationship management and company reputation on customer loyalty: The mediating role of customer satisfaction. *Journal of Relationship Marketing*, 21(1), 1-26.
- [58] Antecedents and consequences of destination image gap. *Annals of tourism research*, 62, 13-25.
- [59] Huyen, T. H. (2016). Service Quality and Patient satisfaction & loyalty in public hospitals in Ho Chi Minh City (Master's thesis).
- [60] Almutawa, Muejohn, & Zhang. (2018). Attitudes and behaviors as predictors of service quality in the telecommunications sector context. *International Journal of Quality & Reliability Management*, 35(3), 656-677.
- [61] Michael, F. (2015). Assessment of Service Quality in Private Health Facilities from Patients' Perspectives in Kinondoni District. The Open University of Tanzania, [Online]. <http://repository.out.ac.tz/id/eprint/1285> (Accessed Date: July 14, 2023).
- [62] Alrubaiee, L. & Alkaa'ida, F. (2011). The mediating effect of patient satisfaction in the patients' perceptions of healthcare quality-patient trust relationship. *International Journal of Marketing Studies*, 3(1), 103.
- [63] Torres, E., Vasquez-Parraga, A. Z., & Barra, C. (2009). The path of patient loyalty and the role of doctor reputation. *Health marketing quarterly*, 26(3), 183-197.
- [64] ARACI, M., & Emine, G. E. N. Ç. (2015). The management of corporate reputation in health care institutions: A research study for measuring the perception about corporate reputation of employees working in public and private hospitals. *Journal of International Health Sciences and Management*, 1(1), 74-82.
- [65] Hair Jr, J. F., Sarstedt, M., Matthews, L. M., & Ringle, C. M. (2016). Identifying and treating unobserved heterogeneity with FIMIX-PLS: part I—method. *European Business Review*. 28(1), 63-76.

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