

# A Hospital Case Study: The Effect of MCSQ and Cose on Service Performance And Customer Satisfaction

Kokok Adi Prayogo

Student of Doctoral Program in Economics, Merdeka University of Malang, Indonesia

Widji Astuti, Achmad Firdiansjah

Lecturer of Faculty of Economics and Business, Merdeka University of Malang, Indonesia

## Abstract

This study is aimed at analyzing the influence of management commitment to service quality (MCSQ) and customer orientation of service employees (COSE) to service performance, analyzing the influence of MCSQ, COSE and service performance to customer satisfaction, analyzing the influence of MCSQ and COSE to customer satisfaction through service performance. The number of samples in this study were 200 respondents. The technique used to analyze the data was Structural Equation Modeling (SEM). The results showed that MCSQ and COSE has positive and significant effect on service performance but MCSQ has higher effect on service performance compared to COSE. MCSQ and COSE has positive and significant effect on customer satisfaction but COSE has higher effect on customer satisfaction compared to MCSQ. Service performance has significant and positive effect on customer satisfaction. Service performance is an intervening variable which can mediate the influence of MCSQ and COSE to customer satisfaction. The findings of the research showed that the provision of a high quality service performance can create customer satisfaction.

**Keywords:** MCSQ, COSE, Service Performance, Customer Satisfaction

## 1. Introduction

Hospital as one of health facilities plays an important role for health development. In the history of the hospital, there was an interaction between the environment and the condition in the hospital. Changes always happen in the past, present and future in terms of hospital management system. Various medical technology and new concepts develop, grow and spread rapidly throughout the world by the use of internet and advances information technology. The efficiency, productivity, quality and equity are the key words in the hospital sector development (Trinastoro, 2005: 25).

Hospital products are health services so that the key principles which must be held in health care products marketing are to build and maintain the customers' (patients) trust. To survive and able to grow in the tight hospital competition, every hospital management is required to be more professional in managing the hospital. Therefore, the hospital management should understand the patient's satisfaction.

Quality service that is manifested by the service performance is determined by the behavior of the services provider such as doctors, nurses, medical staff and administration. This is due to the behavior of services providers play an important role in shaping the patient's perception on the service (Chien, 2008: 376). In the context of hospital services, the services provider is the last person to carry out the hospital marketing and the first to directly interact with customers. In other words, employees are required to have an orientation on the needs of the customer or the customer orientation of service employees (COSE). According to Kelly (1992) COSE is defined as the behavior of service employees when serving the needs and wishes of existing and prospect customers. Furthermore, Kelly (1992) formulates four dimensions of COSE namely (1) the employee's social skills, (2) the employee's technical skills, (3) the motivation dimension and (4) the authority dimension.

In order to support employee's behavior which is customer-oriented, management commitment to service quality is important to produce an optimal service performance, as stated by Babakus (2003: 276) that management commitment to service quality (MCSQ) is a critical determinant of employee behaviors in creating service excellence means that MCSQ is an important determinant in creating service excellence. According to Ashill (2008:442), supportive management concerns and supports employee's work and represents the degree to which they create a facilitative climate of support, trust and helpfulness.

Based on the explanation above, it can be concluded that the behavior of employees as a manifestation of COSE and management commitment to service quality (MCSQ) as a services provider is essential to affect service performance and the service performance will create customer satisfaction, considering the interaction between the service provider (hospital) and the patient is sustainable. It means that the interaction is not only ended after the treatment is completed but it will be continued when the patient control in outpatient poly and during patient examination or subsequent treatment. This is because the medical records of the patients placed in the hospital are used as a guideline and reference so that the treatment can be given in a comprehensive manner.

Regional General Hospital of Bangil, Pasuruan is a hospital which has C class accredited by the Committee of Hospital Accreditation (KARS) in 2012. It is also a referral hospital for Pasuruan people and the surrounding areas. In addition, it has the largest area, 7.8 hectares, among other similar hospitals, which only has about 1 to 3 hectares of land. With the potential, the hospital management will be able to develop a better service in the future such as building additional treatment rooms and other supporting facilities in order to increase patient's satisfaction in which it is difficult to be done by other similar hospitals which have limited land.

This study is aimed at describing MCSQ, COSE, service performance and customer satisfaction of Regional General Hospital of Bangil, Pasuruan, analyzing the influence of MCSQ and COSE to the service performance of the hospital, analyzing the influence MCSQ and COSE to customer satisfaction of the hospital, analyzing the effect of service performance on customer satisfaction, and analyzing the influence of MCSQ and COSE to customer satisfaction through service performance.

## 2. Review of Related Literature

### 2.1 Customer Satisfaction

The word satisfaction has an important meaning in the concept of marketing which is related to needs and desires of customers. The term satisfaction is the goal or goals to be achieved by the business organization. The term "customer satisfaction" in marketing management has a specific meaning. Customer satisfaction is a part of the employees' performance as an effort in satisfying customers (Respati and Amin, 2014). There are several definitions of customer satisfaction as follow:

- 1) Howard and Sheth (1969:145) define satisfaction as "the buyer's cognitive state of being adequately or inadequately rewarded for the sacrifices he has undergone".
- 2) Engel and Blackwell (1982:501) conceive satisfaction as "an evaluation that the chosen alternative is consistent with prior beliefs with respect to that alternative".
- 3) Oliver (1997:14) define customer satisfaction as a judgement that a product or service feature, or the product or service itself, provided (or is providing) a pleasurable level of consumption-related fulfillment.
- 4) Kotler (2003:62) define satisfaction as "a person's feelings of pleasure or disappointment resulting from comparing a product's perceived performance (or outcome) in relation to his or her expectations".
- 5) Roberts-Lombard (2009: 73) define customer satisfaction as "the degree to which a business's product or service performance matches up to the expectation of the customer.

According to Rangkuti (2002 : 30), there are several factors that can affect customer satisfaction, namely: value, competitiveness, image, price, service and service situations. Meanwhile, according to Zeithaml and Bitner (2000:87) there are several factors that affect customer satisfaction: (a) features of the products and services; (b) customer emotion; (c) attribution to the success or failure of services; (d) perceptions of equity and fairness; (e) other customers, family and coworkers.

According to Christina and Gursoy (2008 :249), customer satisfaction, especially in hospital services, is formed by the following indicators:

- 1) Very satisfied with the stay at hospital.
- 2) Delighted with the services that hospital offers.
- 3) Hospital exceeded patient expectations.

### 2.2. Services Performance

Cronin and Taylor (1994:126) disagree with Parasuraman, Zeithaml, and Berry in measuring the quality of services by comparing perceptions and expectations. Cronin and Taylor (1992:1994) state that measuring the quality of services using the proposed model of SERVQUAL has caused confusion and create double meaning. In addition, the measurement of the quality services using SERVQUAL model may form less powerful paradigm (Cronin and Taylor, 1994) because costumers' expectations for service quality refers to the expectations of costumers to services providers in general. While the perception of the services performance led to more specific company services. SERVPERF scale expressed more precise measure of service quality (R. Kenneth Teas, 1994 in Cronin and Taylor, 1994) because SERVQUAL scale uses a comparison perceptions and expectations to measure the services quality, defines the concept of services quality received as associated with the perception-expectation. Definition of hope used is not what will be provided but what 'should' be provided by the service provider. It is concluded that the word 'should' is defined by Parasuraman, et al as hope which means the normative expectations of costumers who represent the ideal standard expectations of service performance in general, not the size of the particular service provider. There is a serious problem in the quality of services/ which is expressed as the difference in value between the expectations and perceptions of costumers, so that most appropriate quality services measurement is based on performance (Peter, Churchill, and Brown, 1994 Cronin and Taylor, 1994). In addition, there is little evidence to support the relevance of the distance or the gap that exists between the expectations and perceptions as a basis for assessing the services quality so that

the services performance/SERVPERF can be a good predictor of service quality and customer satisfaction. Service performance is more able to answer problems that arise in determining the customers services quality because in fact they only be able to assess the quality they receive from a particular manufacturer rather than on their perceptions of the services quality in general (Cronin and Taylor, 1994). According to Cronin and Taylor (1994: 126), service performance is the costumer's assessment of overall service quality IS ALSO directly affected by perceptions of performance levels.

Rashidian, et al (2012:74) disagree with Cronin and Taylor Parasuraman, Zeithaml , and Berry because in order to be more specific on the hospital product and services, the service performance indicators of hospital services should include: process quality, interactional quality, environment quality and cost.

### 2.3 MCSQ

To understand the management commitment to service quality (MCSQ), below are the meaning of MCSQ according to some experts :

- 1) Ahmed and Parasuraman (1994:85) define management commitment to service quality as "encompassing the conscious choice of quality initiatives as operational and strategic options for the firm, and engaging in activities such as providing visible quality leadership and resources for the adoption and implementation of quality initiatives."
- 2) Hartline and Ferrell (1996:59) define management commitment to service quality as "the manager's affective desire to improve his or her unit's service quality"
- 3) Babakus (2003:273) defines management commitment to service quality as a critical determinant of employee behaviors in creating service excellence.
- 4) Hennig and Claudia (2003:30) define management commitment to service quality as the activities and attitude of the service provider's top management as it relates to the employees behave in a customer-oriented way.
- 5) Cooper (2006:1) defines management commitment as engaging in and maintaining behavior that help others achieve a goal.

Based on the experts' opinion, it can be concluded that management commitment to service quality is the management 's determination to develop the quality of services as an excellence continuously and consistently .

In addition, Ashill et al (2008 : 460-461 ) found that the relevant indicators of MCSQ are: training, empowerment, employee rewards, supportive management, servant leadership and investment in technology.

### 2.4 COSE

Kelly (1992) was the first researcher who try to learn customer orientation of service employees (COSE). Building COSE using the same premise as in this study, orientation of employees who are in the front of a company's services to customers is an important factor in business success, Kelly conduct an empirical test to the organizational conceptions such as organizational and socialization climate as well as leadership. The definition of COSE according to some experts are as follows :

- 1) Brown *et al.* (2002:19) define COSE as an "individual's tendency or predisposition to meet customer needs in an on-the-job context" and conceptualize it as two-dimensional. According to their thinking, COSE is composed of :
  - a) a needs dimension which covers the employee's belief that he or she can fulfill customers' wishes; and
  - b) an enjoyment dimension which represents the extent to which the employee enjoys interactions with customers
- 2) Hennig-Thurau and Thorsten (2003:27) define COSE as the behavior of service employees when serving the needs and wishes of existing and prospect customers
- 3) Hennig-Thurau (2004:462) defines COSE as the employee's behavior in person-to-person interactions and suggest a three-dimensional conceptualization of COSE

Hennig-Thurau approach was based on the requirements which must be met by the employees in providing services which meet the customerneeds during the process of employee -customer interaction . Hennig -Thurau approach is based on the motivation of employees to meet customer requirements, the ability of employees to meet the needs of customers, and the freedom of employees or the authority ( as perceived by employees themselves ) to make relevant decisions in fulfilling the needs and desires of customers .

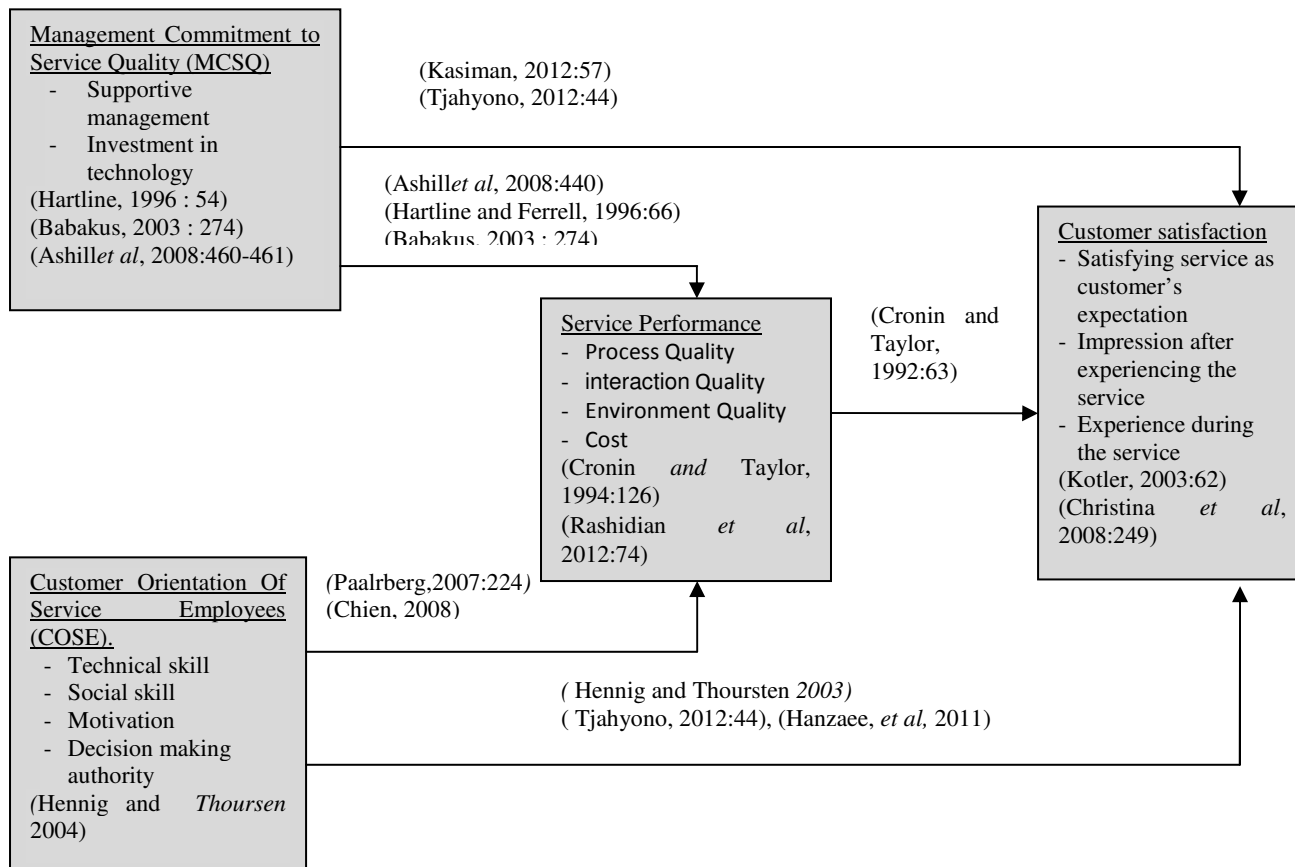
Hennig - Thurau (2004 : 462) introduces three-dimension of COSE :

- 1 ) Employee's ability (skills) in order to be customer-oriented
- 2 ) Employee's motivation to serve customers
- 3 ) Authority to make self-decision

Refer to Hennig-Thurau (2004:463), COSE is described as a development of employee's behavior in the personal interaction with customers that meet the needs of the customer. Then, Hennig-Thurau (2004 : 462 )

divides the dimensions of COSE into 4 dimensions: Employee's social skills, Employee's technical skills, the motivation dimension and the authority dimension.

Figure 1. Research Framework



### 3. Research Hipotesis

- H<sub>1</sub> : MCSQ and COSE have significant effect on service performance at Regional General Hospital of Bangil, Pasuruan
- H<sub>2</sub> : MCSQ and COSE have significant effect on customersatisfaction at Regional General Hospital of Bangil, Pasuruan
- H<sub>3</sub> : Service performance has significant effect on customersatisfaction at Regional General Hospital of Bangil, Pasuruan
- H<sub>4</sub> : *MCSQ* and *COSE* have significant effect on customersatisfaction through service performance at Regional General Hospital of Bangil, Pasuruan

### 4. Research Method

#### 4.1 Research Design

This study is an explanatory research. Explanatory research is intended to clarify or explain a phenomenon or relationships as well as examine the effect of variables (including the causality of the relationship) ( Ulfatin, 2014:10). This study used four variables: MCSQ, COSE, service performance and customer satisfaction which were explored using survey to express outpatient's opinion on some statement items (indicators).

#### 4.2 Population and Sample, Sample Size, and Sampling Technique

##### 4.2.1 Population

This study used the entire population of outpatients who had been hospitalized at the Regional General Hospital of Bangil, Pasuruan as recorded in Hospital Management Information System since 2012 with 28.431 patients .

##### 4.2.2 Sample and Sample Size

The Sample used in this study were some outpatient of BPJS who had been hospitalized at least a day and a night, aged  $\geq 17$  years, and were able to fill out the questionnaire. In average, 890 patients per month were used. The sample size was determined based on the requirements of the sample size in SEM analysis. Ferdinand (2000:43) argues that the sample size plays an important role in the estimation and interpretation of the results so it is recommended to use 100-200 numbers of sample. Therefore, the samples used in this study were 200 outpatients who had undergone inpatient care in the hospital.

#### 4.2.3 Sampling Technique

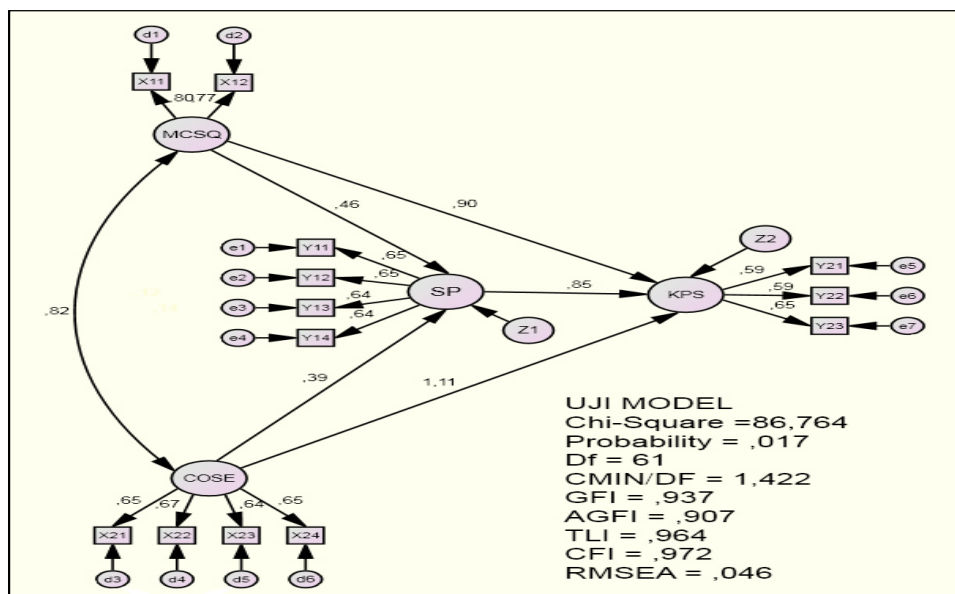
The samples were taken using simple random sampling method means that the process of selecting a sampling unit was in such a way that each individual sampling unit in the population had an equal chance of being selected in the sample (Sanusi, 2012: 89).

### 5. Research Results

#### 5.1 Structural Equation Modelling

By using AMOS 18 computation of this SEM model, the resulted suitability model indices (goodness of fit) as a whole has met so that the model is acceptable.

Figure 1. The Structural Equation Model



Note:

MCSQ (Management Commitment to Service Quality)

COSE (Customer Orientation of Service Employees)

SP (Service Performance)

KPS (Customer Satisfaction)

#### 5.2 Hypothesis Testing

The hypothesis test in this study was conducted by considering the value of p (probability). If the value of p is  $\leq 5\%$ , it is concluded that there is a significant influence.

Table 1. Results of Hypothesis Testing

Exogen	Variables		Coefficient			P Value	Results
	Intervening	Endogen	Direct	Indirect	Total		
MCSQ →	Service Performance →	-	0.462	-	0.462	0.014*	H1 is accepted
COSE →	Service Performance →	-	0.385	-	0.385	0.041*	
MCSQ →	-	Costumer's satisfaction	0.897	-	0.897	0.008*	H2 is accepted
COSE →	-	Costumer's satisfaction	1.114	-	1.114	0.000*	
	Service Performance →	Costumer's satisfaction	0.846	-	0.846	0.000*	H3 is accepted
MCSQ →	Service Performance →	Costumer's satisfaction	0.897	0.462 x 0.846 = 391	1.288	-	H4 is accepted
COSE →	Service Performance →	Costumer's satisfaction	1.114	0.462 x 0.846 = 326	1.440	-	

\* Significant statistically at the level of  $\alpha = 5\%$

## 6. Analysis and Discussion

### 6.1 The Influence of MCSQ and COSE on the Service Performance

MCSQ has influence on the service performance. This was indicated through the MCS as service providers which is very important in affecting the service performance as it provides good quality of service, and quality of service requires leadership and support from the higher management. Without commitment and strong leadership from the higher management, and also without the willingness to accept the difficulties that may arise in a change, the better quality of service will not occur and the contact personnel cannot develop the quality. The commitment from the management to the service quality (MCSQ) should be constant, and the commitment should be reflected on the implementation of their policy. As the opinion of Ahmed and Parasuraman (1994: 85) stated that management's commitment to service quality is defined as "encompassing the conscious choice of quality initiatives as operational and strategic options for the firm, and engaging in activities such as providing a visible quality leadership and resources for the adoption and implementation of quality initiatives." These results are consistent with research by Ashill et al, (2008: 440), Hartline and Ferrell (1996: 66) and Babakus (2003: 274).

COSE has influence on the service performance. This was proven that doctors, nurses and other medical staffs with their technical ability as well as social skills are able to motivate the patients and also capable of taking decisions which may improve the service performance. Technical capabilities in this case are essential to meet the needs the characteristic of the service process, which requires the employees to give appropriate responses as soon as possible to the customers. While social skills, on the other hand, are focused on the ability of the employees in giving appropriate responses to the customer's perspective during the interaction takes place (Flavell, et al, 1968; Mead, 1934 in Hennig-Thurau, 2004: 462). As research results by Kelly (1992) that built COSE on the same premise as in the research, for example, that the employee's orientation which is apparently as the frontline of a company's service to the customers is an influential factor in business success. Results of this study were consistent with the researches by Paalrberg (2007: 224) and Chien (2008: 380).

The findings of this study indicate that management's commitment to service quality (MCSQ), which is supported by technology investment along with the medical staff's approaches to the customer's expectation (COSE), especially in terms of the ability in social relationships, will be able to generate service performance or the qualified medial staff's performance. In particular, it will affect the quality in the interaction between the patients with medical staffs even though the influence from the MCSQ is more dominant to the service performance compared to COSE's influence. This was proven by the respondents' perception that in order to support the service performance from the medical and non-medical staffs requires management's support in terms of providing medical equipments at the Public Hospital of Bangil with the newest medical equipment to meet the patient's expectation. In addition, the receipt of payment should be in computerized system instead of the officer's subjective behavior to the costumer's needs.

If the management of Public Hospital Bangil is able to provide the up-to-date medical equipments that meet the needs of patients' expectation, this becomes part of the technology investment that will produce valid medical observation so it may support the performance of physicians in providing diagnosis and management of the treatment given to the patients. This circumstance will yield qualified service performance. In terms of administration, as the management of Public Hospital Bangil is able to provide a computerized payment system, it may affect the performance of the administrative personnel in completing the paperwork to the patients

quickly and accurately. It can be concluded that the management's commitment to service quality (MCSQ) is required to improve the service performance of the medical officers compared with COSE.

### **6.2 The Influence of MCSQ and COSE on the Costumer's Satisfaction**

MCSQ has influence on the patient's satisfaction. This suggests that in order to support the employee's behavior that is oriented to the patients, it is very necessary for the management to be committed to the service quality so as to produce an optimum service performance that as the result will provide patient's satisfaction. As the opinion by Babakus (2003: 276) who states that the management's commitment to service quality (MCSQ) is a critical determinant of the employee's behaviors in creating excellent service. The results of this study were consistent with the research by Kasiman (2012: 57) and Tjahyono (2012: 44).

Patient's satisfaction is also influenced by COSE. COSE is the patient's perception to medical staff's services based on the patient's need approach whether the medical service is perceived well by the patients, and vice versa. As the opinion by Hennig Thureau and Thorsten (2003: 27), COSE is defined as the behavior of service employees when serving the needs and wishes of existing and prospect customers. Further Thureau formulated four dimensions of COSE, namely (1) the employee's social skills, (2) the employee's technical skills, (3) the motivation dimension, and (4) the authority dimension. These results support the researches conducted by Hennig-Thureau (2004: 464), Tjahyono (2012: 44) and Hanzae, et al (2011: 136).

The research findings show that COSE gave more dominant influence on the patient's satisfaction compared with MCSQ's influence. It means that in the view of the customer's side, in order to improve customer's satisfaction requires the medical staff's behavior which concerns with the needs of customers compared with the commitment and support from the management on the service quality.

The greatest contribution of the formation COSE is derived from social skills of the medical staffs. With a good social ability they may interact well with the patients directly. They are also able to communicate and explain the condition of the patient as well as the medical symptoms so that patients feel comfortable with their services; the patient's needs and expectations are met which could ultimately lead to the satisfaction of the patients. This is different from the influence from the management's commitment (MCSQ), in this case is through technology investment in the form of the newest medical equipments provision as well as the availability of medical devices that meet the needs of the patients. Patients will feel more satisfied when the exposure is directly and obviously related to their needs, such as the interaction and communication abilities of doctors, nurses or other medical personnel. It can be concluded that COSE has more dominant influence on the patient's satisfaction compared with MCSQ's influence.

### **6.3 The Influence of Service Performance on the Costumer's Satisfaction**

Service performance has influence on the patient's satisfaction. Therefore the hospital is expected to constantly change and improve its services, so it is not left behind by the current trends and also patient's expectation. As the opinion stated by Cooper (1994: 106) that there are 14 factors to consider costumers at hospitals, namely (Cooper, 1994: 106): (1) the quality of the medical staffs, (2) the quality of emergency services, (3) the quality of nurse's services, (4) the availability of a complete service, (5) doctor's recommendations, (6) modern equipments, (7) employees' manners and attitudes, (8) good and conducive environment, (9) the use of previous hospitals, (10) the cost of treatment, (11) family's recommendation, (12) close location from residence, (13) private rooms, and (14) friend's recommendation.

In anticipation of the increasing competition in the service industry, the hospital should be able to provide services to meet the needs and satisfaction of the patients. Therefore it is necessary to do a good management of the quality of service offered by the institutions to meet the customer's satisfaction. Service quality which is managed well will give good results for the patient's satisfaction. If the patient experiences satisfactory services in accordance with the patient's expectation, it will be beneficial to the hospital as well. The results of the study were consistent with researches by Cronin and Taylor (1992) who stated that the influence of service performance is significant on the customer's satisfaction.

Service performance which is generated particularly by the quality indicators in the interactions consisting of care, attention, and friendly attitude by the doctors and nurses in providing medical services will have a direct impact on the recovery of the patients, so that patients feel their problems resolved. In addition, patients would perceive that their needs and desires will be fulfilled so that the healing process may lead to a satisfying experience for medical services at the Public Hospital Bangil.

### **6.4 The Influence of MCSQ and COSE on the Costumer's Satisfaction through Service Performance**

Service performance is capable of mediating the influence of MCSQ and COSE to the patient's satisfaction. Service performance is perceived as one of the components that need to be realized by the hospital because it has influence to create patient's preference to come to the hospital and may reduce the possibility of former patients

to move to other hospitals. As the opinion stated by Yamit (2001) that the service performance as an effort to fulfill the needs and desires of the consumers and delivery accuracy in balancing consumer's expectations. This means that good quality is not based on the viewpoint or perception by service providers, namely the hospital, but it is based on the customer's perception or assessment. In this case, the patients are the ones who experience the services at the hospital, so they deserve to determine the quality of the services. Customer's perception of service quality may become overall value on the service excellence of one institution. The better COSE is applied at the Public Hospitals Bangil will increase patient's satisfaction. COSE is formed from technical skills, social skills, motivation and decision-making authority. Besides COSE, management's commitment to service quality (MCSQ) plays an important role to realize the quality of hospital services. The management of Public Hospital Bangil should be able to reassure patients that the hospital is able to provide quality service through the support of management and technology investments so that it may results to costumer's satisfaction. The better the quality of services provided by hospitals and patient-oriented, it will make the patient feel more satisfied.

## 7. Conclusion and Suggestions

### 7.1 Conclusion

According to the results and discussion, there are some conclusions drawn as follows:

1. MCSQ and COSE have positive and significant influence on the service performance. MCSQ's influence is more dominant than COSE to the service performance, which means that MCSQ is indispensable in providing excellent service, and supported by medical staffs with good technical skills, social skills, motivation and decision-making authority will be able to improve service performance. The results of this study were consistent with researches by Ashill et al, (2008: 440), Hartline and Ferrell (1996: 66), Babakus (2003: 274), Paalrberg (2007: 224) and Chien (2008: 380).
2. MCSQ and COSE have positive and significant influence on the customer's satisfaction. COSE has more dominant influence on the customer's satisfaction compared with MCSQ's influence. This suggests that patients will be more satisfied with the medical services from medical staffs that have the technical ability, social motivation and decision-making authority in accordance with the expectations of patients, compared with MCSQ in the support of institutional management and technology investment. The results of this study were consistent with researches by Kasiman (2012: 57), Tjahyono (2012: 44), Hennig-Thurau (2004: 464), Tjahyono (2012: 44) and Hanzae, et al (2011: 136).
3. Service performance has significant positive influence on the customer's satisfaction. If the hospital has good service quality, the quality in interaction, environmental quality, and reasonable costs, it will be able to improve customer's satisfaction. The results of the study were consistent with research by Cronin and Taylor (1992).
4. Service performance is an intervening variable that is able to mediate the influence of MCSQ and COSE to the customer's satisfaction. This shows that the provision of qualified service performance at Public Hospital Bangil may build customer's satisfaction.

### 7.2 Suggestions

According to the results of the analyses and conclusions, there are some suggestions in this study namely:

1. Theoretical suggestion  
There should be consideration of other variables that may create the patient's loyalty out of MCSQ, COSE, service performance, and patient's satisfaction, such as brand image.
2. Practical suggestions
  - a. The management of Public Hospital Bangil should conduct periodical maintenance to the medical equipments in order to guarantee they function properly.
  - b. The need for training (upgrading) for the medical staffs to improve their skills in the field of pharmacy, so that the pharmaceutical personnel are more skill full in serving the patients.
  - c. To improve service performance, there should be written reprimand or sanction for doctors who cannot give proper service or be punctual based on the appointment. There should standardized operational and procedures especially for the nurses who have to provide medical information before taking action. In addition, management of the hospital management should ensure the flow of clean water and bathrooms at the hospital are always clean.
  - d. Regarding patient's satisfaction, doctors should always be on time; so that the patients are confidence and satisfied in using hospital services.
  - e. In order to improve and guarantee service quality performance of the medical staffs, the management of the hospital is expected to impose a standard competency test either for the doctors, nurses, laboratory, pharmaceutical staffs and radiology staffs periodically.



## References

- Ahmed, Irfan and A. Parasuraman. (1994). Environmental and Positional Antecedents of Management Commitment to Service Quality: A Conceptual Framework. *Advances in Services Marketing and Management*. Vol. 3. Teresa A. Swartz, David E. Bowen, and Stephen W. Brown, ed.s. Greenwich, CT: JAI Press. pp 69-93.
- Ashill, Nicholas J, Janet Carruthers and Jayne Krisjanous. (2008). The Effect Of Management Commitment To Service Quality On Frontline Employees' Affective And Performance Outcomes: An Empirical Investigation Of The Newzealand Public Healthcare Sector. *Journal of Strategic Marketing*. Vol. 16, No. 5. pp 437-462
- Babakus, E., Yavas, U., Karatepe, O.M., and Avci, T. (2003). The Effect Of Management Commitment To Service Quality On Employees' Affective And Performance Outcomes. *Journal of the Academy of Marketing Science*, 31(3), pp 272-286.
- Brown, T.J., Mowen, J.C., Donavan, D.T. And Licata, J.W. (2002). The Customer Orientation of Service Workers: Personality Trait Influences on Self And Supervisor Performance Ratings. *Journal f Marketing Research*, Vol. 39 No. 1, pp. 19-110.
- Chien. (2008). A Conceptual Model Of Nurses' Goal Orientation, Service Behavior, And Service Performance. *Nursing Economic Journal*, Vol. 26. No.6. pp 374-383
- Christina G. Chi and Dogan Gursoy. (2008). *Employee Satisfaction, Customer Satisfaction, And Financial Performance: An empirical examination*. New York : John Wiley & Sons.
- Cooper, Dominic. (2006). The Impact Of Management's Commitment On Employee Behavior : A Field Study, 7<sup>th</sup> Professional Development Conference & Exhibition, Kingdom Of Bahrain, pp 1-8
- Cooper, Donald R and C. Willeam Emory. (1994). *Business Research Methods*. Prentice Hall.
- Cronin, J.J and Taylor, S.A. (1992) Measuring Service Quality: A Reexamination and Extension, *Journal of Marketing*, July (56): pp 55-68.
- Cronin, J.J and Taylor, S.A. (1994). "SERVPERF Versus SERVQUAL: Reconciling Performance Based and Perception Minus Expectation Measurement of Service Quality", *Journal of Marketing*, January (58): pp 125-131.
- Engel, James F. and Blackwell, Roger D. (1982). *Consumer Behavior*, New York: Holt, Rinehard and Winston .
- Ferdinand. (2000) *Structural Equation Model dalam Penelitian Manajemen..* Semarang : Universitas Diponegoro.
- Hanzaee, Kambiz, Mirvaizi and Majid. (2011). Customer Orientation of Service Employees : A Case Study of Iranian Islamic Banking (Based on COSE Model), *International Journal of Marketing Studies*, Vol. 3. No. 4, pp 130-145.
- Hartline, M.D, O.C Ferrell. (1996). The Management Of Customer-Contact Service Employees : An Empirical Investigation. *Journal Of Marketing*, Vol. 60, pp 52-70.
- Hennig-Thurau and Thorsten (2004) Customer Orientation Of Service Employees. Its Impact On Customer Satisfaction, Commitment, And Retention. *International Journal of Service Industry Management*, Vol. 15 No. 5, pp 460-478
- Hennig-Thurau and Thorsten, C. (2003). Customer Orientation Of Service Employees – Toward A Conceptual Framework Of A Key Relationship Marketing Construct", *Journal Of Relationship Marketing*, Vol. 2 No. 1, pp 1-32.
- Howard, John A. and Jagdish N Sheth (1969) *The Theory of Buyer Behavior*, New York: John Wiley & Sons.
- Kasiman (2012). Analisis Pengaruh Customer Value dan MCSQ terhadap Kepuasan Pelanggan dan Brand Image Di Rumah Sakit Ganesha Medika Purwosari Pasuruan. *Disertasi*. Program Pascasarjana Universitas Merdeka Malang.
- Kelley, S.W. 1992, "Developing Customer Orientation Among Service Employees", *Journal of the Academy of Marketing Science*, Vol. 20 No. 1, pp. 27-36.
- Kotler (2003) *Marketing Management*, International Edition, Prentice Hall, Singapore
- Oliver, R.L. (1997) *Satisfaction : A Behavioral Perspective on The Consumer*, New York : McGraw Hill.
- Paarlberg, Laurie. (2007). The Impact Of Customer Orientation On Government Employee Performance, *International Public Management Journal*, Vol. 10. No.2. pp 201-231.
- Rangkuti, Freddy. (2002). *Measuring Customer Satisfaction*. Jakarta : Gramedia Pustaka Utama
- Rashidian, Ghazi Tabatabaei, Arab, Rahimi Forushani and Zarei. (2012). The Effect of Service Quality on Patient loyalty : a Study of Private Hospitals in Tehran, Iran, *Iranian of Journal Public Health*, Vol. 41, No.9, Sep 2012, pp. 71-77.
- Respati, Harianto and Rofikul Amin. (2014). Research on Continues Mediation: Employee Behaviour and TQM Practice as ISO 9000 Strategy to Improve Performance of Manufacturing Company in East Java, Indonesia. *European Journal of Business Management*. Vol.6.No.29. pp 125-136

- Roberts-Lombard, M. (2009). 'Customer retention strategies implemented by fast-food outlets in the Gauteng, Western Cape and KwaZulu-Natal provinces of South Africa: a focus on Something Fishy, Nando's and Steers', *African Journal of Marketing Management*, 1(2). pp 70–80.
- Sanusi, Anwar (2012) *Metodologi Penelitian Bisnis*. Jakarta : Salemba Empat.
- Tjahyono, Rudi (2012). Implikasi Dimensi COSE dan MCSQ Terhadap Kepuasan dan Loyalitas Pelanggan Di RSI Sultan Agung Semarang. *Disertasi*. Program Pascasarjana Universitas Merdeka Malang.
- Trinastoro, Laksono. (2005). *Aspek Strategis Manajemen Rumah Sakit*.. Yogyakarta : Andi.
- Ulfatin, Nurul (2014). *Metode Penelitian Kualitatif di Bidang Pendidikan : Teori dan Aplikasinya*. Malang : Bayumedia Publishing.
- Von Rosenstiel, L. 1988, "Motivations Management", in Hofmann, M. and Von Rosenstiel, L. (Eds), *Functionally Management*, Springer, Berlin, pp. 214-19.
- Yamit. (2001). *Manajemen Kualitas Produk dan Jasa*. Yogyakarta: Ekonisia.
- Zeithaml, Valerie A. Bitner, Mary Jo. (2000).. *Service Marketing : Integrating Customer Focus Across The Firm*. Boston : Mc Graw Hill.