

**The Relationship Between Health Service Quality And Patient Satisfaction**Eman Emseir<sup>1</sup>**Abstract**

The aim of the study is to find if there is relationship between patient satisfaction and health service quality in Anadolou hospital Kastamonu-Turkey.

The satisfaction with any service is relative, varies from person to person and from age to else it is genus to another, as many factors, quality is the highest score in the Satisfaction and satisfaction is also the highest score in quality. A cross sectional was conducted by examine random sample of a Libyans families who lived in Kastamonu city- Turkey , they received a questionnaire , the main mass of the study was 85 ,the data collection tool in the study was questionnaire and the scale used for questionnaire was likert scale.

The study showed that there is a strong relationship between service quality and patient satisfaction . the study suggested to carried out more detailed studies and using personal interview technic, the study found that the sample were unsatisfied about waiting time at doctor's office so, it suggested to improve this aspect in the hospital.

**Key words:** Hizmet, kalite, service quality, patient satisfaction.

**Jell Code:** M12

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## **Özet**

Bu çalışmanın amacı Kastamonu-Türkiye özel Hastanesi'nde hasta memnuniyeti ile sağlık hizmeti kalitesi arasında ilişki olup olmadığını bulmaktır.

Herhangi bir hizmetten memnuniyet görecelidir, kişiden kişiye değişir ve yaştan başka bir cinsten diğerine değişir, çünkü birçok faktör, kalite, memnuniyet ve tatminde en yüksek skor, aynı zamanda kalitedeki en yüksek skordur. Kastamonu ili Türkiye'de yaşayan bir Libyalıların ailelerinin rastgele örneklemini incelemek suretiyle kesitsel bir anket yapıldı, anket aldı, çalışmanın ana kütlesi 85, çalışmada veri toplama aracı anket ve anket için kullanılan ölçek likert ölçeğidir.

Çalışma, hizmet kalitesi ile hasta memnuniyeti arasında güçlü bir ilişki olduğunu göstermiştir. çalışma daha ayrıntılı çalışmalar ve kişisel mülakat tekniğini kullanarak yürütülen önerdi, çalışma örnek doktor ofisinde bekleme süresi hakkında tatminsiz bulundu, Bu nedenle, hastanede bu yönünü geliştirmek için önerdi.

**Anahtar kelimeler:** Hizmet, kalite, hizmet kalitesi, hasta memnuniyeti.

## **1. Introduction**

Recent decades have witnessed an important development in the area of services, creating fierce competition among providers, and in these circumstances there became awareness among researchers and those interested in the activities of the importance of service quality in the provision of services and their impact on customer satisfaction in order to create a competitive advantages and increase profitability for service organizations .

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## **2. Theoretical Framework**

In fact, the services are characterized and different from material goods in several fundamental and important points, and dragged about this distinction and differences exist division varied and multiple services . Among those subdivisions in the area of services which is called health services and that of the most important social services provided by the country. Since competition among health care institutions depends on the satisfaction of patients, health care organisations that don't understand the importance of patient satisfaction that are less likely to succeed (Demirer & Bülbül, 2014) So, marketing management turned its focus to external interest like satisfaction of customer rather than internal performance) (Sharma, 2017)

According to ( Küçük, 2011) quality is defined as conformity to customer expectations or the sum of all the expectations the customer expects from the



product. Perceived quality: The customer often perceives the quality of a product but is influenced by the past experiences of the related brand's other products. Besides, advertising etc. other factors also change customer quality perception. (Özkan, 2008). It's difficult to explain what is the meaning of service, because most of the products contain a combination of goods element and service element, wherefore customer satisfaction can only be achieved by providing the goods and services required by the customer at any time and place (Küçük, 2012).

Service quality as "difference between customer's expectations for service performance prior the service encounter and their perceptions of the service received" (Dehghan, 2006), quality of service is the sum of quality, appropriate time, speed, cost and delivery to meet the expectations of the customer (Küçük, 2011).

According to (Küçük, 2016) satisfaction is the acceptance that any action against the product, service, or counter-action is satisfactory, that it is adequate. patient satisfaction is defined as a positive evaluations of different dimensions of health care service (the service that is evaluated could be an one clinic visit, treatment during a disease case, a specific health care regulation or plan, or health care system is general. (Powell, 2001) on the other hand, patient satisfaction the response of health care recipients to health service providers, according to his previous experience, patient satisfaction is the emotional response of the patient to evaluate the quality of the performance of health service providers during his experience in receiving the service. according to his basic knowledge or knowledge in this field. (Shariaa, Ghani, Khalid, Motawea, & Abed, 2014)

More specifically key components of patient satisfaction are: The medical care quality, that includes qualified health professional, appropriate infrastructure and health services, sufficient diagnostic and therapeutic procedures, enough information on disease and therapy, halves in the accessibility to diagnostic, therapeutic and preventive measures, sensible costs and affordable health insurance system for the individual and the community, Acceptable "waiting time" and appropriate "hostelry", Participative approach of care and prevention (integration of the patient and his family in the decision procedures).

The measurement of patient satisfaction has importance to the health sector which allows to describe its work, also assess the quality of care and to



recognize the existing problems in the health sector. (Mpinga & Chastonay, 2011). Essentially, there are two methods for assessing patient satisfaction which they are qualitative and quantitative methods . the accurate methods to measure patient satisfaction are given by quantitative approach .the most common assessment tool for carrying on patient satisfaction studies are standardized questionnaires . .(Al-Abri & Al-Balushi, 2014)

The quality of health service is not only important for health care providers and patients , but also for governments , quality health services will contribute to making people healthier and happier . healthy and happy people will allow governments to vote both in elections and to reduce health spending, and the importance of the health sector and the role of hospitals as a service sector which has a great importance in the economic and social development of countries . In addition, to know the level of quality of services in private hospitals and the satisfaction . Therefore, quality of health services and patient satisfaction in health care services is becoming an important issue. (Dursun & Çerçi, 2004)

### **3. Aim of The Study**

The main purpose of this research is to find if there is a relationship between service quality and patient satisfaction and this examined by disclosing the patient's view of the dimensions of health service they received , and then the study attempt to of patients with the quality of services provided to them in these hospitals .

Provide some solutions and proposals contributes to the possibility of improving and developing the reality of health services in private hospitals and examining the relationship between the quality of services perceived by the contribution of the Anadolu hospital and the satisfaction of patients about it

### **4. Methodology and Scope of The Study**

One of the limitations in this study was that there were Libyan families from the city of Kastamonu traveling to Libya, so we could not obtain a large number of participants in the study sample. We also had to do paper questionnaires and delivered them by hand instead of sending them by e-mail so that they would not be neglected, because of that the distribution and the collection of questionnaires takes a long time. In spite of all this, there were those who did not answer all the questions, or who returned the questionnaire empty without any answer, and Some of them lost the questionnaire and did not return it.



The research was conducted on Anadolou hospital in Kastamonu city. The sampling method is examined in the form of random sampling, a random sample of Libyans families who lived in Kastamonu city, 90 people received an answer, 5 form values are removed, and 85 values was analysed which the sample were considered to represent the main mass in this research, the main mass can represent a very large data set. The main mass is not homogenous and cannot be examined at the same time, it's necessary to select a group of qualitative and quantitative representations of the main mass from within the main mass in cases. ( küçük, 2016)

### **5. Model of The Study**

Patient satisfaction is, in general, based on whether a given service meets the patient's expectations or the patients perceive the service provided. The quality of the service is mainly determined by the level of satisfaction of the patient and all the activities from the application of the patient to the receipt of the results of diagnosis, treatment and care play an important role (Aksarayli & Kidak, 2008). according to published definitions, service quality seems to be an unverified paradigm. in other words, when compared to expectations, perceptions are higher (negative dissatisfaction), lower (positive dissatisfaction) or equal (approval). The definition of service quality will be the art of having the right thing, at the right time, in the right way, for the right person, and the best possible outcome will have. (Wesso, 2014). the research model is shown in the figure 1.

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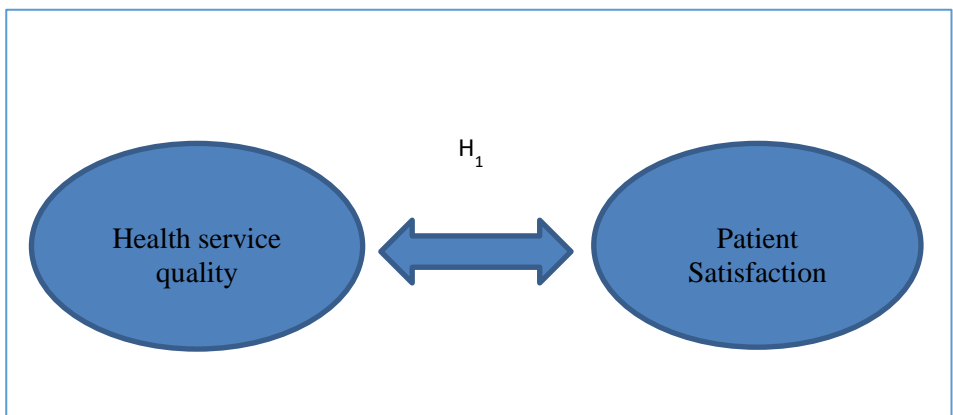


Figure 1. Research Model



In this research the data collection method was survey method which is the most commonly used method, the survey method widely used in defining customer expectations and satisfaction levels. The data collection tools was questionnaire, the data collection is meant to be convenience by means of the survey as well as the meaning, but it's important to know the reality in order for intermediate crop to reach the result to be able to analyse the obtained data to present a conclusion in the frame of the objectives, the data setting agent must be correctly identified (Orhan Küçük, 2016). The questionnaire of this study consists of three parts, in the first part, general information about the patient and questions about demographic data. The second part of the questionnaire was about health service quality, and the researcher used SERVEQUAL scale in this part, the last part about the patient satisfaction and in this part of questionnaire the researcher improved it from literature review.

The survey was conducted by patients who visit Anadolou hospital in Kastamonu city, the scale used in this questionnaire is Likert scale, which is a measure based on the choice of alternatives as (1 -totally agree, 2- agree, 3- no idea, 4- totally disagree, 5- disagree) that include sorting to determine the level of importance of judgments, statements (Küçük, 2016).

## **6. Hypothesis of Research**

(Dehghan, 2006) The study was about "relationship between service quality and customer satisfaction: In the case of CCG (customer centric group) CO. The aim of the study was to had better understanding of service quality dimensions that affect customer satisfaction from customer view, in this study a qualitative approach was used, the empirical data were collected by interviews with 10 people, the research conducted that the all dimensions of quality performance had strong impact on customer satisfaction.

(Rad, Som, & Zainuddin, 2010) the study was about "service quality and patients satisfaction in medical tourism" the aim of this study is to examine the effect of health care service quality on the satisfaction of medical tourists who come as international patients to Malaysia, they findings demonstrated that there is a positive relationship between health care service quality and patient satisfaction.

(Wesso, 2014) studied the perceived quality of health care services and patient satisfaction in South African public hospitals, this study determined



that there are considerable differences between the perceived and expected service quality for all dimensions, and its suggested relationships between dimensions of services.

(Aliman & Mohamad, 2016) the study was about “linking service quality, patient satisfaction and behavioural intentions: An investigation on private health care in Malaysia, the study /used survey questionnaire to collect data and multiple regressions for testing the hypothesis , the study found that service factors had a positive relationship with patient’s satisfaction and both of them were strongly related to behavioural intentions.

H<sub>1</sub>: There is a relationship between health service quality and patient satisfaction .

### **7. Analysis**

Table 1. shows the factor analysis for quality scale



Table 1. The Factor Analysis for Quality Scale

Factors and variables	Factor loads	Eigen value	variance Explanation rate (%)	Cronbach's alpha	Mean	KMO
<b>QUALITY</b>		<b>12.067</b>	<b>54.851</b>	<b>0.960</b>		<b>0.925</b>
1.this hospital has up-to-date equipment	0.728				3.04	
2.the hospital's facilities are visually appealing	0.830				2.94	
3.the hospital's employees are well dressed and appear neat.	0.817				2.85	
4. the appearance of the physical facilities of the hospital is keeping with the type of services provided.	0.787				2.84	
5.when hospital promises to do something by certain time, it does it.	0.806				2.92	
6.when you have problems ,hospital is sympathetic and reassuring	0.786				2.88	
7. this hospital is dependable	0.766				2.81	
8.this hospital provides its services at the time it promises to do so.	0.830				2.92	





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Table 1. The Factor Analysis for Quality Scale (continuous)

Factors and variables	Factor loads	Eigen value	variance Explanation rate (%)	Cronbach's alpha	Mean	KMO
9.this hospital keeps its records accurately.	0.736	12.067	54.851	0.960	2.96	0.925
10.this hospital does not tell patients exactly when services will be performed.	0.624				2.99	
11.patients don't receive prompt service from hospital's employees.	0.704				2.88	
12.employees of hospital are not always willing to help patients.	0.695				2.88	
13.employees of hospital are too busy to respond to patient requests promptly.	0.704				2.95	
14.you can trust employees of hospital.	0.678				2.91	
15.you feel safe in your transactions with hospital's employees.	0.648				2.89	
16.employees of hospital are polite.	0.763				2.91	
17.employees of hospital have adequate support from their hospital to do their jobs well.	0.616				3.02	

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Table 1. The Factor Analysis for Quality Scale (continuous)

Factors and variables	Factor loads	Eigen value	variance Explanation rate (%)	Cronbach's alpha	Mean	KMO
18.this hospital doesn't give individual attention to the patients.	0.841				2.99	
19.employees of the hospital doesn't give the patients personal attention.	0.701				2.76	
20.employees of hospital doesn't know what the needs of the patients	0.724				2.92	
21.this hospital doesn't give the patients best interests at heart.	0.639				2.98	
22.this hospital doesn't have operating hours convenient to all their patients.	0.801				2.91	

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Table 1 as we can see, the KMO sampling adequacy criterion was found to be above 0,80 , The fact that the KMO value is above 0,80 indicates that it is very good and excellent. Since the eigenvalue >1 and factor loads are above 0,40, it is also decided that the scale of quality is reliable. The value of Croanbach Alpha ,which indicates that the scale is reliable, was found as 0,960.



Table (2) Factor Analysis for Satisfaction Scale

Factors and variables	Factor loads	Eigen value	variance Explanation rate (%)	Cronbach's alpha	Mean	KMO
Satisfaction		9.072	56.699	0.947		0.928
1.admission is fitted with home arrangements.	0.621				3.00	
2.staff careful to check everything on admission.	0.794				2.99	
3.care I received was just about perfect.	0.773				2.96	
4.I have all the equipment necessary to care for me.	0.666				2.89	
5.my doctor explains things in away is easy for me to understand.	0.751				2.82	
6.I'm confident of my doctor's knowledge and skills.	0.703				2.85	
7.my doctor listens carefully to me.	0.772				3.12	
8.doctors are good about explaining the reasons for medical tests.	0.799				3.04	
9.sometimes doctors make me wonder if their diagnosis is correct.	0.805				2.89	
10.I have to pay for more of my medical care than I can afford.	0.853				2.75	
11.people have to wait too long time for emergency treatment.	0.809				2.80	
12.I find it hard to get an appointment for medical care right away .	0.794				2.84	



Table (2) Factor Analysis for Satisfaction Scale (cont.)

Factors and variables	Factor loads	Eigen value	variance Explanation rate (%)	Cronbach's alpha	Mean	KMO
13.I am dissatisfied with something about the medical care I received.	0.838				2.82	
14.I'm very satisfied with the medical care I receive.	0.834				2.91	
15.it is easy for me to get medical care in an emergency.	0.582				3.11	
16.I'm usually kept waiting for long time when I'm at doctor's office.	0.571				3.18	

For the Table 2, which examining the scale of patient satisfaction, The scale consists of 5 questions. The scale describes 56.69% of the total variance. As shown in the table, Kaiser-Meyer-Olkin (KMO) sample adequacy criterion was 0.928. This result shows the is above 0,80 indicates that it is very good and excellent. The Barlett test (Barlett test of diversity) is within acceptable limits ( $p < 0.000$ ). The Cronbach alpha value, which demonstrates reliability in the test, was 0.947. According to the result, the scales are reliable. Thus, it was decided that the scale was reliable and valid and that it could be used in scientific research and analysis ( Küçük, 2016).

After calculating the overall mean of the transitions that represent the quality of service and the variables that represent the satisfaction of the patients and calculated the correlation coefficient between the converts we obtained the following table:



Table (3) Correlation Between Quality Service And Patient Satisfaction

Correlations		quality	satisfaction
quality	Pearson Correlation	1	.765**
	Sig. (2-tailed)		.000
	N	85	85
satisfaction	Pearson Correlation	.765**	1
	Sig. (2-tailed)	.000	
	N	85	85

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

The for correlation value as for (orhan küçük, 2016) if :

$r > 0,80$  = very strong relationship.

$0,60 < r < 0,80$  = strong relationship.

$0,40 < r < 0,60$  = relationship.

$0,20 < r < 0,40$  = weak relationship.

$r < 0,20$  = no relationship.

So, there is a strong relation

Hypothesis accepted

The above table shows that the correlation coefficient between quality of service and patient satisfaction a strong relationship.

## 8. Result

The study found that there is strong relationship between service quality and patient satisfaction,

And also about the attention of hospital for the patients, the willing of



employee to help patients, the appealing of facilities of hospitals for the external appearance and refinement of staff and appropriate services of the hospital with its facilities to meet the hospital promises and the preservation of the hospital files correctly, the sample of the recent study are satisfied about those statement.

## **9. Discussion**

Recent study showed for the satisfaction about the quality of service at the Anadoul 's hospital that the most of the sample of the study are satisfied about the appealing of facilities of hospital, the attention of hospital for the patients, the willing of employee to help patients, As for the external appearance and refinement of staff and appropriate services of the hospital with its facilities to meet the hospital promises and the preservation of the hospital files correctly, the sample of the recent study tends to satisfaction about those aspects , while the sample tended to be unsatisfied for waiting time at doctor's office.

(Dursun & ÇERÇİ, 2004) A research on perceived health service quality, perceived value, patient satisfaction and behavioural intentions. showed that the patient satisfaction and behavioural intention in health care services have significant positive correlations with other variables, which compatible with the result of our study as well as (Rad et al., 2010). which revealed that service quality have a positive influence on customer satisfaction and it illustrated the positive interrelation between patient and service care provider, also the finding of this study showed that there was significant relationship between responsiveness of hospital and patient satisfaction, and there was a positive relationship between patient satisfaction and the empathy of the medical staff, and (De Man, Gemmel, Vlerick, Van Rijk, & Dierckx, 2002), (Abdelhafez et al., 2012), (Aliman & Mohamad, 2016) on private healthcare in Malaysia, (Yağcı & Duman, 2006) found a relationship between patient satisfaction and the quality of services in a study about service quality - customer satisfaction relationship by hospital types: state, private and university hospitals practice.

For (Agbor, 2011) the relationship between customer satisfaction and service quality: a study of three Service sectors in Umeå, revealed that there is significant relationship between service quality and customer satisfaction which agree with our study some result recorded by (Şişe & Altınel, 2012) in university hospital, although the level of satisfaction of patients is high in this



study, patients are not satisfied with physical conditions of hospital On the contrary with this study.

while (Aljeesh & Alkariri, 2015) studied patients' satisfaction with the quality of health services provided at the outpatient department at Al-Shifa Hospital, which is revealed the highest level of satisfaction declared by patients expectation dimension whereas ,the lowest level of satisfaction was revealed by the waiting time dimension , which is consistent with our study . Moreover Patients' satisfaction for health care services at Thi-qar province, Iraq this study founded that about the half of the samples of study were un satisfied or very un satisfied with health care services provided at five health care facilities (Sa'adoon, Hussien, & Museher, 2008).

### **10. Suggestions**

This study aimed to measure the relationship between health service quality and patient satisfaction in Anadolu hospital at Kastamonu city ,the data collected by distributing a questionnaire to 85 people who are Libyan families lives in Kastamonu city . In view of the importance of hospitals in the health sector and their role in services that affect the economic development of countries, as well as the increase of diseases, injuries and accidents, all of this made it important to study the quality of health services provided and their relationship with patient satisfaction.

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As a result, according to data analysis the hypothesis of this study was accepted . Suggestions that will guide the researchers in future research can be listed as follows:

\*This study is located at a private hospital Whose services do not benefit all strata of society , so the findings would be different if it accomplished at governmental hospital .


\*Conduct further studies in this area in a more in-depth manner and also use more detailed questionnaires.

\*This study was carried out only in Anadolu hospital ,therefore it may be more useful to conduct future studies at more than one hospital .

\*This study emphasized that the sample was unsatisfied about waiting time at doctor's office and This will help to improve and develop hospital services in this regard in the future .

\*Further studies on the subject of patient satisfaction can be done with





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other subjects .

\*Such a study can be conducted using a personal interview technique.

The scope of the study can be extended to include the effect of age, gender, and occupation of patient on satisfaction with quality of health service.





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