

# **The Influence Of Competence And Work Productivity Of Inpatient Nurses On The Quality Of Healthcare Service Marketing At The Regional General Hospital Of Bogor City**

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## **ABSTRACT**

This study aims to analyze the influence of the competence and work productivity of inpatient nurses on the quality of healthcare service marketing at RSUD Kota Bogor. Nurse competence is measured through indicators such as clinical knowledge, practical skills, effective communication, leadership, management, ethics, and professionalism. Meanwhile, nurse work productivity is assessed based on time efficiency, accuracy in medical procedures, and the ability to complete tasks effectively. The quality of healthcare service marketing is measured through service quality, patient experience, hospital image, communication, information, and service pricing. The research method used is quantitative with a survey approach. Data were collected through questionnaires distributed to 60 respondents, consisting of patients and their families in the inpatient ward at RSUD Kota Bogor. Data analysis was conducted using multiple linear regression with the assistance of SPSS software. The results indicate that nurse work productivity has a significant influence on the quality of healthcare service marketing, while nurse competence does not show a significant influence. Simultaneously, both nurse competence and work productivity significantly affect the quality of healthcare service marketing. Based on these findings, it is recommended that the management of RSUD Kota Bogor focus on improving nurse work productivity through workload adjustments, provision of adequate facilities, and time management training. Although nurse competence was not significant in this study, competence development remains important for overall service quality improvement. The implementation of a patient feedback system is also recommended to continuously enhance patient satisfaction and the quality of healthcare service marketing.

**Keywords:** Nurse Competence, Work Productivity, Quality of Healthcare Service Marketing, RSUD Kota Bogor.

## **INTRODUCTION**

Clinical nurses play a crucial role in providing quality healthcare services in hospitals, encompassing assessment, planning, implementation, and evaluation of nursing care. The quality of care provided by nurses significantly impacts patient recovery and satisfaction, making the evaluation of these services essential for determining hospital quality standards (Ardian et al., 2022). RSUD Kota Bogor, as a vital healthcare facility and a Primary Teaching Hospital, is committed to integrating education, research, and healthcare services in a multiprofessional manner. Nurse competence, which includes knowledge, skills, attitudes, and behaviors, is necessary to perform nursing tasks effectively (Tarigan & Lumban Gaol, 2019).

Quality healthcare services are an important factor in increasing patient satisfaction and hospital reputation. In Indonesia, RSUD Kota Bogor is expected to meet community

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needs, with nurse competence and work productivity being key to achieving optimal service quality (Buchan et al., 2021; McCoy et al., 2022). This study aims to explore the influence of nurse competence and work productivity on the quality of healthcare service marketing at RSUD Kota Bogor.

Nurse competence, which includes knowledge, skills, and attitudes, has been proven to improve service quality and patient satisfaction (Huang et al., 2021; Kourkouta & Papathanasiou, 2019). Continuous training for nurses is essential to ensure service quality. Additionally, nurse work productivity also plays a role in improving service quality, client satisfaction, and organizational benefits (Chandra & Catur, 2019).

The quality of healthcare service marketing is influenced by the reputation and image of the hospital, which is built through nursing services. Effective marketing relies not only on promotional strategies but also on the quality of service perceived by patients (Kotler & Keller, 2021). Challenges in maintaining service quality are often related to high nurse turnover rates, influenced by excessive workloads, lack of support, and stress (Buchan & Aiken, 2020; McCoy et al., 2022).

This study is expected to provide insights into how nurse competence and work productivity influence the quality of healthcare service marketing at RSUD Kota Bogor. By understanding this relationship, hospital management can formulate effective strategies to improve service quality and marketing (Huang et al., 2021; Ibrahim, 2021). Although previous studies have shown a positive relationship between nurse competence and patient satisfaction (Gustafsson et al., 2020; Tarigan & Lumban Gaol, 2021), there is still a lack of literature discussing the influence of nurse work productivity on the quality of healthcare service marketing. Therefore, this study aims to fill this gap and provide strategic recommendations for improving the quality of healthcare service marketing through the development of nurse competence and work productivity.

The research questions in this study are: (1) How does the competence of inpatient nurses influence the quality of healthcare service marketing at RSUD Kota Bogor? (2) How does the work productivity of inpatient nurses influence the quality of healthcare service marketing at RSUD Kota Bogor? (3) Is there a significant relationship between nurse competence and work productivity simultaneously on the quality of healthcare service marketing at RSUD Kota Bogor?

The general objective of this study is to determine the influence of nurse competence and work productivity on the quality of healthcare service marketing at RSUD Kota Bogor. The specific objectives include: (1) measuring the level of nurse competence in providing healthcare services, (2) analyzing factors that influence nurse work productivity, (3) evaluating the impact of service quality on patient perceptions and hospital reputation, (4) analyzing the relationship between nurse competence and work productivity on the quality of healthcare service marketing, and (5) providing data-based recommendations to improve nurse competence and productivity.

The benefits of this study are: (1) practically, providing insights and recommendations to improve nurse competence and productivity, which will enhance the quality of healthcare services and motivate nurses, and (2) theoretically, providing references and data for further research in healthcare, marketing, and hospital management.

This study was conducted at RSUD Kota Bogor, focusing on the conditions and challenges faced by government hospitals in Indonesia. The novelty of this study lies in the integration of three key variables, namely nurse competence, work productivity, and the quality of healthcare service marketing, in one analytical model. This aligns with the importance of understanding how nurse competence and productivity influence patient perceptions of service quality, which in turn impacts hospital reputation and marketing (Nugraheni et al., 2016; Pertiwi, 2016).

## **METHOD**

This study is a quantitative research with a survey approach, using a cross-sectional study design, which aims to examine the relationship between independent and dependent variables at the same time. Quantitative research can be defined as a research

method based on methods used to study a specific population or sample, where the data collected as research instruments are quantitative data that can be measured on a numeric scale, with the aim of testing the hypotheses that have been set.

This study uses primary and secondary data. Primary data is data that is not yet available to answer research problems, in this case, primary data is obtained from respondents through questionnaires. Secondary data is data taken from other sources as already available data used to support primary data analysis, in this study, secondary data includes the number of inpatient nurses at RSUD Kota Bogor in 2023 and literature studies.

This research was conducted as a case study at RSUD Kota Bogor, a regional public hospital managed by the Bogor City government, West Java, which plays an important role in providing healthcare services to the local community. This study focuses on inpatients and their families to measure the quality of healthcare service marketing, nurse competence, and work productivity of inpatient nurses at RSUD Kota Bogor. The population is the generalization area consisting of objects/subjects that have certain qualities and characteristics determined by the researcher to be studied and then conclusions are drawn (Sugiyono, 2020). In this study, the population is inpatients and their families.

The sample is part of the number and characteristics possessed by the population (Sugiyono, 2020). The sampling technique used is non-probability sampling, which is a sampling technique that does not give equal opportunity to all elements or members of the population to be selected as samples.

**Table of Patient Visits to RSUD Kota Bogor 2019-2023**

Year	Emergency Room	Outpatient	Inpatient	Total
2019	40,494	157,390	24,596	222,480
2020	28,154	112,699	16,219	156,072
2021	17,788	126,338	17,516	160,642
2022	52,745	176,939	23,238	251,922
2023	71,952	220,511	27,379	319,842
Total	211,133	793,877	108,948	1,110,958

Source: Medical Department of RSUD Kota Bogor

Based on the table above regarding patient visits to RSUD Kota Bogor over the last five years (2019-2023), it is known that the number of inpatient visits is 105,948, with an average of 21,790 inpatient visits per year. From this data, it is calculated that the average number of inpatients per day is around 60 patients. This figure provides a representative picture of the customer population of RSUD Kota Bogor in one day. Based on this figure, the research sample was determined.

The variables in this study consist of independent and dependent variables. The independent variables are Competence (X1), which includes clinical knowledge, practical skills, effective communication, leadership, management, ethics, and professionalism, and Productivity (X2), which includes time efficiency, accuracy in medical procedures, and the ability to complete tasks effectively.

The dependent variable is the Quality of Healthcare Service Marketing (Y), which refers to the healthcare service process received by inpatients and their families at RSUD Kota Bogor, encompassing Service Quality, Patient Experience, Hospital Image, Communication, Information, and Service Pricing.

The model and hypotheses in this study are formulated based on theory and previous findings, which serve as the foundation for explaining the direction of further research. Data collection methods include questionnaires for quantitative data. Quantitative data were collected through questionnaires distributed to customers of RSUD Kota Bogor (Appendix 4). The data collection process was carried out by visiting the hospital and distributing questionnaires to inpatient nurses and family members of patients who met the criteria. Each respondent was given an explanation of the research objectives and asked to fill out the questionnaire voluntarily.

The collected data were analyzed using IBM Statistical Package for the Social Sciences (SPSS) Version 25. All data were analyzed using Multiple Linear Regression (t-test, F-test, and coefficient of determination) after conducting instrument tests (validity and reliability tests) and classical assumption tests (normality, multicollinearity, heteroscedasticity, and autocorrelation tests) (Raharjo, 2019).

The research was conducted at RSUD Kota Bogor, located at Jl. Dr. Sumeru No. 120 Bogor. The research period was from January 15 to February 15, 2025.

**Operationalization of Research Variables**

Variable	Operational Definition	Indicators	Measurement	Scale
Nurse Competence (X1)	The ability of nurses to provide quality healthcare services.	1. Clinical Knowledge 2. Practical Skills 3. Effective Communication 4. Leadership and Management 5. Ethics and Professionalism	Questionnaire to assess nurse knowledge, skills, communication, leadership, and professionalism	Likert 1-5
Nurse Productivity (X2)	The efficiency and effectiveness of nurses in performing tasks.	1. Task Completion Time 2. Responsiveness in Nursing Care 3. Task Completion Rate	Questionnaire	Likert 1-5
Quality of Healthcare Service Marketing (Y)	The level of patient satisfaction and hospital image.	1. Service Quality 2. Patient Experience 3. Hospital Image 4. Communication and Information	Questionnaire to assess patient satisfaction, experience, and hospital image	Likert 1-5

Source: Sugiyono, 2020 (modified)

**RESULTS AND DISCUSSION**

The respondents in this study consisted of 32 females (53.33%) and 28 males (46.67%). Approximately 26.67% of the respondents were aged 25-36 years, with 17 respondents, while 21.67% were aged 37-45 years, with 12 respondents. There were 11 respondents aged 56-65 years (18.33%), 9 respondents under 25 years (15%), 8 respondents aged 46-55 years (13.33%), and 3 respondents over 65 years (5%).

In terms of education, 71.76% of the respondents had a high school education, with 43 respondents, while 15% (9 respondents) had an elementary school education, 10% (6 respondents) had a junior high school education, and only 3.33% (2 respondents) had a bachelor's degree.

Most of the respondents were housewives, with a percentage of 36.67% (22 respondents), followed by private employees at 20% (12 respondents), self-employed at 13.33% (8 respondents), students at 6.67% (4 respondents), and the remaining 23.33% worked in other occupations not listed in the options provided by the researcher.

The Validity Test table presents the results of the validity test for the three main variables: Competence (X1), Work Productivity (X2), and Quality of Healthcare Service Marketing (Y). Each variable consists of several measured items, such as X11 to X17 for Competence, X21 to X24 for Work Productivity, and Y1 to Y6 for Quality of Healthcare Service Marketing. The Pearson correlation value indicates the strength of the relationship

between the items and the variables, where the higher the value, the stronger the relationship.

**Validity Test Results**

Variable	Item	Pearson Correlation	p-value	R Table	Criteria
Competence (X1)	X11	0.613	0.005	0.254	Valid
	X12	0.649	0.005	0.254	Valid
	X13	0.827	0.005	0.254	Valid
	X14	0.911	0.005	0.254	Valid
	X15	0.874	0.005	0.254	Valid
	X16	0.853	0.005	0.254	Valid
	X17	0.880	0.005	0.254	Valid
Productivity (X2)	X21	0.864	0.005	0.254	Valid
	X22	0.889	0.005	0.254	Valid
	X23	0.820	0.005	0.254	Valid
	X24	0.873	0.005	0.254	Valid
Quality of Healthcare Service Marketing (Y)	Y1	0.779	0.005	0.254	Valid
	Y2	0.686	0.005	0.254	Valid
	Y3	0.762	0.005	0.254	Valid
	Y4	0.657	0.005	0.254	Valid
	Y5	0.480	0.005	0.254	Valid
	Y6	0.709	0.005	0.254	Valid

Source: SPSS Data Analysis, 2025

The test results show a p-value of 0.005, indicating the statistical significance of the tested relationship. Since this p-value is less than 0.05, it can be concluded that the relationship between the items and the variables is significant. Additionally, the R table value used as a reference is 0.254. All tested items show a Pearson correlation value higher than the R table, indicating that each item is valid for measurement.

**Reliability Test Results**

Variable	Number of Items	Cronbach's Alpha	Criteria
Competence (X1)	7	0.900	Reliable
Work Productivity (X2)	4	0.883	Reliable
Quality of Healthcare Service Marketing (Y)	6	0.768	Reliable

Source: SPSS Data Analysis, 2025

The Cronbach's Alpha value for each variable indicates a very good level of reliability. For the Competence variable (X1), the Cronbach's Alpha value is 0.900, indicating that the instrument has very high consistency. Similarly, for Work Productivity (X2), the Cronbach's Alpha value of 0.883 also shows very good reliability. Both are well above the general threshold of 0.7, indicating that the items in these variables are reliable for measuring the intended concept.

Meanwhile, for the Quality of Healthcare Service Marketing variable (Y), the Cronbach's Alpha value is 0.768, which also indicates that this variable has good reliability, although slightly lower than the other two variables. All variables in this study are declared reliable, indicating that the instruments used can be trusted in measuring each variable. Thus, the results of this study can be trusted and provide a strong basis for further analysis regarding the influence of these variables in the studied context.

To determine the accuracy of the model, it is necessary to test several classical assumptions, including normality, multicollinearity, heteroscedasticity, and autocorrelation tests (Ghozali, 2018).

The figure above shows that the distribution points are around the diagonal line and follow the diagonal line on the curve. This indicates that the normality test results for the variables Nurse Competence (X1) and Work Productivity (X2) on the Quality of Healthcare Service Marketing (Y) meet the normality assumption. One of the main indicators is the position of the distribution points close to the diagonal line on the P-P plot graph (Field, 2018). The closer the points are to the diagonal line, the stronger the evidence that the residuals are normally distributed, which is an important requirement in regression analysis.

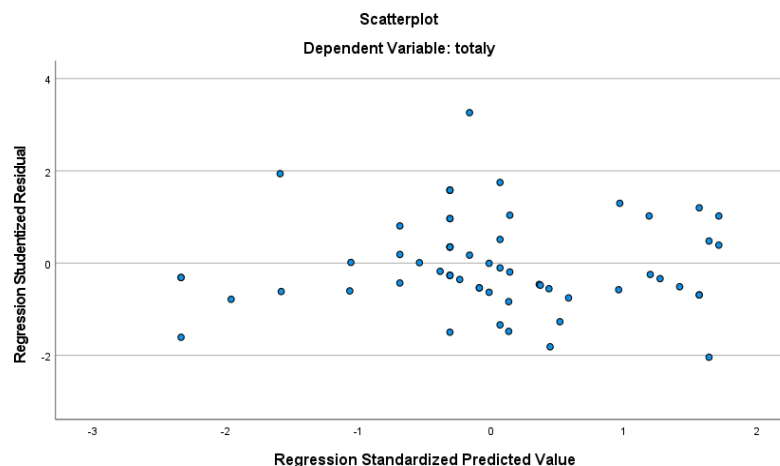
The multicollinearity test is conducted by looking at the tolerance value and VIF (Variance Inflation Factor). If the tolerance value  $> 0.10$  and  $VIF < 10$ , then there is no multicollinearity. However, if the tolerance value  $< 0.10$  and  $VIF > 10$ , then multicollinearity occurs. The results of the multicollinearity test are as follows:

**Multicollinearity Test Results Table**

Model	Tolerance	VIF	Criteria
X1	0.481	2.077	No Multicollinearity
X2	0.481	2.077	No Multicollinearity

Source: SPSS Data Analysis, 2025

The table above shows the results of the multicollinearity test for the variables Nurse Competence (X1) and Work Productivity (X2). The tolerance value for Nurse Competence (X1) is 0.481, and the VIF value is 2.077. Similarly, the Work Productivity (X2) variable also has a tolerance value of 0.481 and a VIF value of 2.077. Therefore, it can be concluded that there is no multicollinearity between these two independent variables.



Source: SPSS Data Analysis, 2025

In this graph, each point represents an observation in the dataset, with the horizontal axis showing standardized predicted values and the vertical axis showing standardized residuals. From a visual observation of the scatterplot, it appears that the residual points are randomly distributed without a clear pattern. This indicates that the variability of the residuals is not dependent on the predicted values, which is one of the main conditions for assuming that the regression model does not suffer from heteroscedasticity. Ideally, if heteroscedasticity were present, the points on the scatterplot would show a specific pattern, such as forming a cone shape or other regular patterns.

The t-test (partial) method is performed by comparing the t-calculated value with the t-table value. In the partial test, the data is said to have a partial influence and the hypothesis is accepted when  $t\text{-calculated} > t\text{-table}$ . However, if  $t\text{-calculated} < t\text{-table}$ , the data is declared to have no influence, or the hypothesis is rejected. The results of the t-test are presented in the following table:

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	8.627	1.854		4.652	.000
	ttx1	.144	.086	.204	1.682	.098
	ttx2	.736	.146	.611	5.027	.000

a. Dependent Variable: ttly

Source: SPSS Data Analysis, 2025

**T-table:**

(a/2 : n-k-1)

(0.05/2:60-2-1)

(0.025:57) see t-distribution table

= 0.678

**H1:** The influence of the Nurse Competence variable (X1) on the Quality of Healthcare Service Marketing (Y). The significance value of 0.098 > 0.05 and the t-calculated value of 1.682 > 0.678, so it can be concluded that H1 is rejected, meaning there is no influence between the Nurse Competence variable (X1) and the Quality of Healthcare Service Marketing (Y).

Hypothesis H1 is rejected because the analysis shows no significant influence between Nurse Competence (X1) and the Quality of Healthcare Service Marketing (Y). The significance value of 0.098, which is greater than 0.05, and the t-calculated value of 1.682, which is less than the t-table value of 1.977, indicate that this relationship is not statistically significant. This may be due to other variables that may have a greater influence, such as management policies, healthcare facilities, or patient satisfaction, which were not included in the analysis model.

**H2:** The influence of the Work Productivity variable (X2) on the Quality of Healthcare Service Marketing (Y). The significance value of 0.000 < 0.05 and the t-calculated value of 5.027 > 0.678, so it can be concluded that H2 is accepted, meaning there is an influence between the Work Productivity variable (X2) and the Quality of Healthcare Service Marketing (Y).

The second hypothesis (H2) tests the influence of the Work Productivity variable (X2) on the Quality of Healthcare Service Marketing (Y). Based on the analysis results, the significance value (p-value) for this variable is 0.000, which is much smaller than 0.05. This indicates that the relationship between Work Productivity and the Quality of Healthcare Service Marketing is statistically significant, suggesting that increased work productivity contributes to improved service marketing quality.

The influence of Competence (X1) and Work Productivity (X2) on the Quality of Healthcare Service Marketing (Y). The significance value is 0.005 < 0.05, and the F-calculated value is 41.820 > 3.15, so it can be concluded that H3 is accepted, meaning there is an influence between variables X1 and X2 on Y.

The analysis of variance (ANOVA) presented shows the results of testing the influence of the Nurse Competence (X1) and Work Productivity (X2) variables on the Quality of Healthcare Service Marketing (Y). The ANOVA table shows a significance value (p-value) of 0.000, which is much smaller than 0.05. This indicates that the regression model involving both independent variables has a significant overall influence on the dependent variable under study.

		ANOVA <sup>a</sup>				
Model		Sum of Square	df	Mean Square	F	Sig.
1	Regression	224.761	2	112.380	41.820	.000b
	Residual	153.173	57	2.687		
	Total	377.933	59			

a. Dependent Variable: ttly

b. Predictors: (Constant), ttlx2, ttlx1

Source: SPSS Data Analysis, 2025

R square = 0,595

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.824 <sup>a</sup>	.679	.668	1.225

b. Predictors: (Constant), ttlx2, ttlx1

Source: SPSS Data Analysis, 2025

It can be seen that the coefficient of determination value is R Square = 0.595. This value indicates that the ability of the independent variables Competence and Work Productivity (X) to explain the dependent variable (Y) is 67.9%, and the remaining 32.1% is explained by other variables not discussed in this study. It can be said that the independent variables provide a significant contribution to the dependent variable.

## CONCLUSIONS

Based on the research results regarding the influence of the competence and work productivity of inpatient nurses on the quality of healthcare service marketing at RSUD Kota Bogor, several important points can be concluded: **Influence of Competence (X1):** The analysis results show that the competence of inpatient nurses does not have a significant influence on the quality of healthcare service marketing. The significance value greater than 0.05 indicates that although nurse competence is important in the context of healthcare services, other factors such as management policies, available facilities, and patient satisfaction may have a greater influence.

**Influence of Work Productivity of Inpatient Nurses (X2):** Conversely, the work productivity of inpatient nurses has a significant influence on the quality of healthcare service marketing. Increased productivity allows inpatient nurses to handle more patients with high efficiency, which contributes to increased patient satisfaction. These results

show that productive inpatient nurses not only provide better services but also strengthen the image of RSUD Kota Bogor in the eyes of the community.

**Simultaneous Influence:** The analysis of variance (ANOVA) shows that both Competence and Work Productivity of inpatient nurses have a significant influence on the quality of healthcare service marketing, as evidenced by the F-calculated value > F-table, indicating a strong simultaneous relationship in improving service competitiveness. The F-calculated value being greater than the F-table indicates that the combination of these two independent variables interacts to influence service quality. This confirms the importance of a holistic approach in human resource management at RSUD Kota Bogor. Based on the conclusions outlined above, the following are some recommendations from the researcher to improve the quality of healthcare service marketing at RSUD Kota Bogor:

**Recommendations: (1)** Although the influence of nurse competence was not significant in this study, continuous development remains important. RSUD Kota Bogor is advised to conduct structured training programs that include clinical skills, effective communication, and stress management. Management should focus on strategies to improve nurse work productivity. **(2)** RSUD is recommended to implement a patient and family feedback system as part of the evaluation process. This feedback can provide valuable insights into patient satisfaction and areas for improvement. **(3)** The results of this study can be used as a basis for decision-making regarding policies at RSUD Kota Bogor. Relevant policy recommendations include increasing budget allocation for nurse training and formulating policies that support a healthy and productive work environment for nurses. **(4)** This study shows that improving nurse competence can impact service quality. Therefore, RSUD is advised to implement programs that facilitate collaboration between nurses and other healthcare teams. Additionally, encouraging nurse participation in decision-making related to nursing practices and healthcare service policy development is recommended. **(5)** This study has limitations, such as a limited sample size. Future researchers are advised to expand the sample size and research location to improve the generalization of results and identify other variables not examined in this study that may have an influence.

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