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Effect of Marketing Mix on Outpatient Loyalty at Hajj Hospital, Jakarta, Indonesia

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Abstract: Since 2018, there have been disparities in the research results on items, prices, locations, promotions, people, processes, and physical evidence associated with customer loyalty based on the marketing mix and customer or patient loyalty. This study compares the theory and practice concerning the effect of marketing mix on outpatients' loyalty. Hajj Hospital is currently experiencing a drop in the number of patients, although numerous promotional efforts have been made, particularly during the COVID-19 pandemic. It is anticipated that the marketing mix will enhance consumer views of a product's quality, as measured by consumers' evaluations of the product. If the consumer perceives that the hospital provides high-quality services, the hospital's image will be positive; this condition might boost customer or patient satisfaction. This study aims to determine which element of the marketing mix has the most significant impact on patient loyalty at Hajj Hospital. This study used a quantitative cross-sectional design approach with 100 outpatient samples and was analyzed using SPSS. Additional studies incorporated planning, control, monitoring, and evaluation into the marketing mix utilizing longitudinal studies or interventions for healthcare professionals that provide services to patients.

Keywords: marketing mix, patient, loyalty, Hajj Hospital Jakarta.

营销组合对印度尼西亚雅加达朝觐医院门诊忠诚度的影响

摘要：自 2018 年以来，基于营销组合和客户或患者忠诚度，与客户忠诚度相关的商品、价格、地点、促销、人员、流程和实物证据的研究结果存在差异。本研究比较了营销组合对门诊患者忠诚度影响的理论和实践。尽管做出了大量宣传工作，特别是在新冠肺炎大流行期间，朝觐医院目前的患者数量仍在下降。预计营销组合将增强消费者对产品质量的看法（通过消费者对产品的评价来衡量）。如果消费者认为医院提供的服务质量高，医院的形象就会正面；这种情况可能会提高客户或患者的满意度。本研究旨在确定营销组合中的哪个元素对朝觐医院的患者忠诚度影响最大。本研究采用定量横断面设计方法，收集了 100 个门诊样本，并使用统计软件进行分析。其他研究利用纵向研究或针对为患者提供服务的医疗保健专业人员的干预措施，将规划、控制、监测和评估纳入营销组合中。

关键词：营销组合、患者、忠诚度、雅加达朝觐医院。

1. Introduction

A hospital is an institution that offers comprehensive individual health services that can be operated by the government and the private sector. Outpatient services, inpatient services, and emergency services, which comprise skilled medical services and medical assistance, can be found in hospitals [1]. Patient care is crucial in generating patient happiness. People (people) or participants are all actors who play a role in service delivery and influence the buyer's view as a result. Employee expertise in performing hospital operational tasks is crucial to the production and provision of services that can make hospitals more competitive and add value to their offerings. Five questions were posed to the respondents: Doctor dependability, trained nurses, agile cleaning service, agile laboratory personnel, and officer-friendly information [2].

Hospital rates are calculated based on the number of unit cost components required by considering regional conditions and creating marketing programs to achieve targets. The marketing program needs tools to attain its objectives. These tools are programs that can be managed by the organization; these tools are generally referred to as the marketing mix. Marketing is a challenge for all hospitals and other healthcare providers [3]. The lack of success in marketing is largely due to the lack of hospitals in favor of clients. Because what has been supplied when it is marketed is frequently inconsistent with what the client receives, and this will undoubtedly harm the hospital's reputation. According to [4], the marketing strategy is designed to instruct managers on how to get the product or service to consumers and how to encourage them to buy it.

The normal waiting time for services begins with registration and ends when they receive medical services. It takes 60 minutes, 10 to 15 minutes for medical doctor services for universal healthcare (BPJS), 60 minutes for concoction medications and 30 minutes for non-concoction medications.

Marketing is a challenge for all hospitals and other healthcare providers. The lack of marketing success is attributable, in part, to the lack of hospitals that favor patients. Because what has been supplied when it is marketed is frequently inconsistent with what the client receives, this will undoubtedly harm the hospital's reputation [4]. The marketing strategy is designed to instruct managers on how to get the product or service to consumers and how to encourage them to buy it [5]. Marketing is a mix of a commercial activity that involves planning, promotion, pricing, and delivery of customer-focused products or services. It is viewed as a collection of components required for planning and

executing all marketing operations as a whole [6]. A marketing mix is a commercial technique that enables managers to remain competitive in a global market.

The hospital's capacity to attract and retain new customers depends not only on the product or service itself but also on the manner in which existing customers are served and the hospital's reputation both inside and outside the hospital. Finding new customers is more difficult and more expensive than retaining current customers. Customer loyalty is the key not only to short-term success but also a durable competitive edge [7]. Customers who are loyal because of their satisfaction and will continue to purchase from the company. Customer loyalty refers to a customer who not only repurchases goods and services but also demonstrates a positive commitment and attitude toward service providers, such as by promoting the product to others. Meanwhile, according to [8], loyal customers exhibit the following characteristics: frequent purchases, purchase of products outside of the typical product or service line, provision of recommendations to third parties, and reluctance or resistance to competing products.

To create a competitive edge, it is necessary to recruit and train the proper personnel for service delivery, as people are a crucial component. Customers judge a clinic's service provision and delivery based on the individuals who represent it. People are one of the few elements of the services, and patients might interact with and observe them. A service is any intangible (not physically material), but perceivable by the buyer, action provided by one party that does not result in ownership. The quality of hospital services influences patient happiness. For instance, a hospital that treats its patients with kindness and compassion will have a positive impact on the patient's prognosis.

People or participants are the actors participating in the provision of services, influencing buyer attitudes as a result. In this research, the term "people" refers to the knowledge of hospital staff. The presence of people (staff or physician knowledge) within the hospital is a crucial component of the service production process and service delivery that can add value and make homes more competitive for the disease at hand. Service is the process of fulfilling wants through actions. Five items were posed to respondents: nurse's responsiveness, hospitality of house staff discomfort, doctor's correctness, doctor's friendliness, and information that was simple to comprehend [9].

The marketing mix is anticipated to enhance consumer perceptions of a product's quality, i.e., consumer evaluations [10]. If consumer impressions of the quality of the hospital's services are positive, the hospital will have a positive corporate image, which can boost customer or patient satisfaction. Customer

loyalty, or customer behavior as a result of the offered services, is the impact of patient satisfaction [11]-[12]. To create customer loyalty, businesses must manage demand to be elastic by altering their marketing mix, focusing on service quality, executing intensive promotions, and engaging in relationship marketing [13]-[16].

The objective of this study was to determine the greatest effect of marketing mix (product, price, place, promotion, people, physical evidence, process, planning) and characteristics on outpatient loyalty at the Jakarta Hajj Hospital.

This study offers various insights for organizations in Hajj Hospital and Mitra Keluarga West Bekasi that are contemplating enhancing their marketing mix and customer loyalty. This has caused an exponential rise in interest in marketing mix and customer loyalty among organizations and academic scholars.

The research findings will aid the administration of both hospitals in devising interventions and launching programs and activities to enhance their marketing mix and customer loyalty [17]-[18]. In addition, this study combines marketing mix research with customer loyalty research to provide a theoretical model for improving hospital revenue and patient visits.

This study will contribute to gaining a deeper understanding of the marketing mix (product, people, price, place, product, promotion, physical evidence, and planning) and customer loyalty, since these are the primary aspects connected with marketing, especially in the healthcare industry.

2. Methodology

The method applied is quantitative research with numeric for 8 Ps and category for characteristic variable [19]-[20]. The type of research is a cross-sectional study with a quantitative analytic approach. Cross-sectional research employs independent and dependent variables being observed at the same time [21]-[24].

The population in this study comprised all patients according to the inclusion and exclusion criteria who had received health services at the Jakarta Hajj Hospital. The total population in this study was 2,032 patients. This number includes patients who received health services at the Hajj Hospital in 2020. The research sample comprised patients who visited the Hajj Hospital service unit according to the inclusion and exclusion criteria.

To achieve the research objectives, this research adopts a quantitative method with a sample size of only 100 patients because when the study was conducted from October to December 2021, the situation and conditions in Indonesia were experiencing very high cases of COVID-19, so that sampling at the Hajj Hospital was limited. The questionnaires were filled

out in two ways, namely, manually and using the Google Form application to minimize direct contact (physical distancing) with patients as respondents.

3. Results

The findings show the results of patient services provided by health workers at the Hajj Hospital such as: the attitude of the registration clerk and cashier is good, neat, polite and friendly or not, the number of registration and cashier administration staff is sufficient, the marketing team has carried out promotional activities well and optimally; the attitude of nurses who look good, neat, polite, friendly and skilled, nurses provide good and reliable service and provide clear information, there are enough nurses on duty; long waiting time for specialist doctor services, the attitude of the doctor in providing good and friendly service, doctors provide diagnostic information about the patient's disease clearly, doctors provide services carefully, reliably, and accurately, the waiting time for specialist doctor service is short.

The number of specialist doctors on duty is sufficient. The attitude of the laboratory staff is good, neat, polite and friendly. Laboratory staff provide good and clear information. The number of laboratory personnel is sufficient. The attitude of the radiology officer is good, neat, polite and friendly. Radiologists provide good and clear information. The number of radiology officers is sufficient. The attitude of the pharmacy staff is good, neat, polite and friendly. The number of pharmacists is sufficient. Pharmacists check and explain the procedure for taking prescribed medicine. Product services such as the outpatient examination at Hajj Hospital use sophisticated, modern, and complete equipment, adequate availability, and completeness of required medicine.

The specialist doctor services provided by the hospital are quite complete according to the patient's needs, the public knows that Hajj Hospital accepts BPJS, (universal Health Coverage) general and insurance patient services. The public knows that Hajj Hospital accepts referral patients. Supporting services (Laboratory, Radiology, Pharmacy, etc.) are quite good. Patient registration can be done online and it was very helpful and makes it easier for patients, outpatient services can be used every day because there were many clinic specialists, despite up to know the number outpatient still lowest than before pandemic of COVID-19. The researchers chose cross-sectional research because it seeks to know the cause of decreased out patients, and how to solve the problem and take good solution and strategy.

Table 1 presents results of the multivariate linear analysis between final study, variable product, place, people, promotion, physical, planning.

Table 1 Results of the multivariate linear analysis (Developed by the authors using SPSS 25)

No.	Variable	P value	Coefficient Beta	95% CI		VIF	R	R ²
				Lower	Upper			
1	Product	0.012	-0.0267	-0.483	-0.061	3.063	0.817	0.667
2	Place	0.003	0.284	0.128	0.585	2.369		
3	Promotion	0.026	0.225	0.016	0.248	2.794		
4	People	0.031	0.305	0.013	0.272	5.490		
5	Process	0.012	0.329	0.073	0.586	4.704		

1. Product correlation with loyalty was significant: p-value 0.000, R 0.482 correlation positive, R Square 0.233 (23.3% contribution product to patient's loyalty in Hajj Hospital). Correlation between people with loyalty was significant: p-value 0.000, R 0.737, R Square 0.544 (contribution people amount 54.4% to patient's loyalty).

2. Correlation between price and loyalty was significant: p-value 0.000, R 0.486, R Square 0.236 (contribution price amount 23.6% to patient's loyalty). Correlation between place and loyalty was significant: p-value 0.000, R 0.648, R Square 0.420 (contribution place amount 42.0% to patients' loyalty).

3. Correlation between promotion and loyalty was significant: p-value 0.000, R 0.720, R Square 0.518

(contribution promotion amount 51.8% to patient's loyalty).

4. Correlation between process and loyalty was significant: p-value 0.000, R 0.578, R Square 0.334 (contribution process amount 33.4% to patient's loyalty).

5. Correlation between planning and loyalty was significant: p-value 0.000, R 0.689, R Square 0.475 (contribution planning amount 47.5% to patient's loyalty). Correlation between physical evidence and loyalty was significant: p-value 0.000, R 0.688, R Square 0.473 (contribution physical evidence amount 47.3% to patient's loyalty).

The research findings are summarized in Table 2.

Table 2 Summarized findings

One-Sample Kolmogorov-Smirnov Test										
		Product	Price	Place	Promotion	People	Physical	Process	Planning	Loyalty
N		100	100	100	100	100	100	100	100	100
Normal Parameters ^{a,b}	Mean	3.6880	3.69	4.00	3.46	3.88	3.73	3.82	3.70	3.82
	Std. Dev.	0.70055	0.611	0.488	0.577	0.483	0.644	0.518	0.594	0.580
Most Extreme Differences	Absolute	0.152	0.190	0.267	0.097	0.168	0.170	0.149	0.168	0.176
	Positive	0.108	0.190	0.213	0.097	0.168	0.170	0.149	0.168	0.174
	Negative	-0.152	-0.144	-0.267	-0.079	-0.127	-0.157	-0.114	-0.124	-0.176
Test Statistic		0.152	0.190	0.267	0.097	0.168	0.170	0.149	0.168	0.176
Asymp. Sig. (2-tailed)		0.000 ^c	0.000 ^c	0.000 ^c	0.021 ^c	0.000 ^c	0.000 ^c	0.000 ^c	0.000 ^c	0.000 ^c

4. Conclusion

4.1. Implications of the Study

Academics, entrepreneurs, police makers, and regulators can use these findings to enhance marketing mix programs in achieving targets.

4.1.1. Implications for Academics

Human resources, especially doctors and nurses, laboratories, radiologists, and pharmacists, are essential in maintaining quality and quantity in providing services to outpatients out of hospital.

4.1.2. Implications for Entrepreneurs

The results of this study can be used to improve more focused products in the form of services for doctors, nurses, laboratories, radiology, and pharmacy in patient care; to increase the comfort of patient waiting rooms, toilets, and parking spaces; design better outpatient service promotions, hospital service processes, and planning for physical factors.

4.1.3. Implications for Policymakers and Regulators

Policy makers need strategic planning for human resources, hospital service products, and more comfortable and safe places, improving services,

especially private patients, which are still few, promotions according to the times.

Reward and punishment if people did not come on time to the patients' services.

Online patient registration application and control of standard procedures according to the authority of each doctor, nurse, laboratory, radiology, and pharmacy.

4.2. Recommendations

The recommendations given for the progress of the marketing mix at the Jakarta Hajj Hospital are improvements in the areas of product, people, promotion, and process.

1. Product marketing mix with positive weak relations to patient loyalty, researchers can give suggestions to the management of Hajj Hospital Jakarta to add superior products so that it can be a characteristic for Outpatient Units of Hospital Hajj Jakarta as to equip specialist doctors who do not yet exist so as to provide services to patients completely. In addition, it can also add other supporting tools.

2. Credit Card or ATM service is already available at Hajj Hospital Jakarta. It may be possible for management to cooperate with banks to make installment programs so that patient costs will be reduced if the costs are relatively high. In addition, the management can create a tariff promotion package for certain products and times.

3. Promotions carried out through brochures, internet, and banners should further lead to explanations to patients of the products and facilities contained in the Outpatient Unit of Hajj Hospital Jakarta.

4. In addition to the above, communication is also an important thing in information about the course of service, reviewing research that the *process* is the most staking to patient loyalty, it was expected that the support of all parties to create the service process who is of s quality.

5. It can be recommended to make decoration improvements so that the service place looks newer and modern.

6. It can be suggested that the next researcher further develop a participant and look for other variables that correlate with patient loyalty.

4.3. Limitations

The limitations in this study were because it was conducted during the COVID-19 pandemic so that the number of samples obtained was only 100, there was a limited research time due to the lengthy licensing process from the hospital, and the respondent's time in filling out the questionnaire was also limited because it was simultaneously waiting for a doctor's examination and waiting drug taking at the pharmacy.

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