

Algılanan Hizmet Kalitesi ve Kurumsal İtibarın Hasta Tatmini Üzerindeki Etkisi: Ankara Hastanelerine İlişkin Karşılaştırmalı Bir Araştırma

The Impact of Perceived Service Quality and Corporate Reputation on Patient Satisfaction: A Comparative Research on Ankara Hospitals

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Öz

Sağlık işletmeleri, faaliyet gösterdiği alan ve sunduğu hizmetin özelliği açısından diğer sektörlerden önemli ölçüde farklılaşmaktadır. Sağlık hizmetlerinin sunumu bir ülkede bireye verilen önemin önemli bir göstergesidir. Türkiye’de de sağlık sektörü sunduğu hizmet açısından kalite ve kurumsal itibarı yansıtan önemli bir sektördür. Araştırmada Türkiye’nin başkenti Ankara’da bulunan hastanelerden hizmet alan katılımcıların, hizmete ilişkin kalite algılarının kurumsal itibar ve tatmin üzerindeki etkisinin yanı sıra kurumsal itibarın tatmin üzerindeki etkisi ortaya konmaya çalışılmıştır. Bu noktada çalışmada kamu hastaneleri ve özel hastaneler ayrımında bu değişkenlerin birbiri üzerindeki etkisinin farklılaşıp farklılaşmadığı da ortaya konmaya çalışılmıştır. Araştırma sürecinde anket yöntemi ile 733 katılımcıdan toplanan verilere SPSS 21 aracılığı ile betimsel analiz, bağımsız örneklem T-testi, faktör analizi, korelasyon ve regresyon analizleri uygulanmıştır. Araştırmada hizmet kalite algısına ilişkin tüm boyutların kurumsal itibar ve tatmin üzerinde etkisi olduğu, benzer şekilde kurumsal itibarın da tatmin üzerinde etkisi olduğu sonucuna ulaşılmıştır. Ayrıca araştırmada tüm değişkenlerin birbiri üzerindeki etkisinin kamu ve özel hastanelerde farklı şekilde yansıdığı sonucuna ulaşılmıştır.

Anahtar sözcükler: Algılanan Hizmet Kalitesi, Kurumsal İtibar, Tatmin, Sağlık Hizmetleri

Abstract

Health businesses differ significantly from other sectors in terms of the field in which they operate and the characteristics of the services they provide. The provision of health services is an important indicator of the importance given to the individual in a country. The health sector is important in terms of service offered that reflects the quality and corporate reputation in Turkey, too. In the study, conducted in Ankara, Turkey's capital, the effects of service quality perceptions' on corporate reputation and satisfaction were researched, as well as the effect of corporate reputation perceptions' on satisfaction. At this point, it is purposed to determine whether the effect of these variables in state hospitals and private hospitals differs or not. At the research process, descriptive analysis, independent sample T-test, factor analysis, correlation, and regression analyses were applied to the data collected from 733 participants by questionnaire method. In the study, it has been concluded that all dimensions

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related to service quality perception have an effect on corporate reputation and satisfaction, and on the other hand, corporate reputation has an effect on satisfaction. Also, it was concluded that the effect of all variables on each other was reflected differently in state and private hospitals.

Keywords: Perceived Service Quality, Corporate Reputation, Satisfaction, Health Services

1. Introduction

Thanks to the ease of access to information in the world, the rise of the service sector in total employment and economy scale have turned our age into a service age. In Turkey, the size of the service sector and its contribution to the economy are increasing day by day. Service sector's share in total venture 41.7% and total employment was 36.8% in 2015, moreover, the service sector's share in total venture increased to 43.5% and in total employment increased to 37.5% in 2018 in Turkey (TUIK, 2016, 2018). At this point, the health sector is one of the important service areas. As a result of the increase in the investment size in Turkey's economy, the health services sector develops day by day and this situation increases the employment and the contribution of businesses to the subsidiary/complementary sectors. This is because, in the modern business context, due to the progress in information and computer technologies, the service sector is vital for accelerating the human element of organizations and helping to combat the unemployment rate (Doğru, 2019).

The basis of successful service delivery in the health care sector is based on service quality. For the marketing discipline, quality not only shapes the perception of the consumers to a great extent, but also determines future buying and consumption behavior (Parasuraman, Zeithaml, & Berry, 1985, Cheung, Luo, Sia, & Chen, 2009). Today, the ability of service businesses to create the demand required to protect their assets, both economically and physically, is only possible by provided service quality (Küçükaltan, 2007, p.58). At this point, since the service is an intangible concept and the presentation / post-presentation perception varies according to the person, at least it has become an important requirement to evaluate the presentation according to certain quality criteria. However, there are several opportunities to help service quality make a difference in the competition offered to businesses. Some of the benefits of service quality include customer satisfaction and loyalty, distancing from price competition, keeping good employees and lowering costs (Kotler, Bowen & Makens, 2003).

As in other service sectors, the importance of the corporate reputation for both the patients and their relatives is an undeniable fact for the businesses providing health services. Service quality's eight characteristics different from each other are performance, other elements, suitability, reliability, durability, visibility, aesthetics, and reputation (Garvin, 1984, pp.25-43). The corporate reputation in healthcare businesses can be determinative in terms of patient satisfaction, as well as perceived service quality.

The purpose of this study is to reveal perceptions about service quality, corporate reputation and post-service attitudes of the participants receiving service in state hospitals and private hospitals. The study has four main objectives: (1) Reveal the effects of service quality of hospital on hospitals' corporate reputation, (2) reveal the effects of service quality of hospital on patients' satisfaction, (3) determine the impact of corporate reputation of hospital on patients' satisfaction and (4) determine whether patients' perceptions vary according to whether the hospital is a state or private hospital. In the following part, a concise literature review about health services in Turkey, perceived service quality, corporate reputation and satisfaction will be discussed and hypotheses will be developed. Next in the research methodology part, the data collection procedure and scales used will be described. The fourth

part presents the results. Then the findings will be discussed and managerial implications and suggestions will be presented.

2.Theoretical Framework

2.1. Health services

Health care is one of the major service areas in the world that requires the largest expenditure and investment. According to the WHO report for 2016, the total amount of health expenditures in the world has reached USD 7.5 trillion. While the average per capita amount of these expenditures is 1000 USD, in half of the countries in the world, this figure is below 350 USD per person. 80% of global health expenditures are made in the economies of developed countries. While developed countries increased their health budgets by 4%, budgets of developing countries' economies increased by 6% per year. Although there are differences between the size of national economies, as a result, the budget allocated for health by each economy is increasing day by day. This is an important indicator that the size of health services will also improve day by day.

Health services are defined as “services for the elimination of various factors damaging human health and protection of the society from the effects of factors, treatment of diseases, rehabilitation of those with reduced physical and mental abilities” (Article 4b of the Health Regulation on the Execution of Health Services). The main purpose of health services is not only to restore human health to a pre-illness or accident condition but also to contribute to the improvement and further development of the health of the individual and society. In a global sense, health services can be considered as universal, safe, accessible, high quality, people-centered services that add value to people and society.

Health services also have certain features such as the features of the service. The characteristics of health services can be listed as follows (Turan, 2004, Orhaner, 2014, Atilla, 2016):

- Health care not only protects the individual but also society.
- It is not possible to postpone health care or to consume it by another person instead of the individual.
- Health services cannot start only when the individual wishes to purchase the service. In many cases, the employee (doctor, physiotherapist, etc.) is required to confirm the eligibility of the individual to provide health care.
- Promises cannot be made in the health service except for the physical opportunities offered to the individual.
- Failure to provide health services properly may result in irreversible consequences for individuals. From a society's point of view, not only health but also in many areas of the country such as education and economy can lead to adversities.
- The economic value of the health services benefit cannot be measured. However, the economic value of the negative impact of the negative consequences on society or individuals can be measured.
- It is not possible to determine the need for health services according to time.
- It may be less realistic for health care providers to evaluate the quality of service compared to other service providers.
- The individual who is providing health service is not always sure whether the outcome will be successful or that the outcome will be positively compared with the price paid.
- The performance of health care provided in a country may directly affect global health care performance.

- The provision of health services requires specialized and highly qualified employee performance and harmonized and planned work of these employees.
- While it is provided by experts in the field of health services, the knowledge on the service side is minimal compared to many services.
- The payment of the health care service is not paid by the person receiving the service relative to other services, but the quality of the service is evaluated by the individual who does not pay.
- As in many other service sectors, there is no potential for a trial presentation or served the same service twice in health services.

One of the factors that make health services different is that health services have a valuable purpose like human health. The other element is that the service provided in health services differs due to the physical, environmental and genetic characteristics of the individuals, making it impossible to have the same or the close outcome. At this point, the quality of service and the reputation of the institution come to the forefront in the provision of health services.

2.2. *Perceived quality in health services*

In today's conditions, where consumer demands, needs, desires and expectations are constantly changeable, it is a fundamental necessity for the service sector to show parallel development and change. At this point, quality is what brings consumer expectations and product/service characteristics closer to each other. Quality can be defined as the overlap between what the consumer hopes and finds (Küçükaltan, 2007, p.58). Since service has some uncertainties by its nature some standards have been put forward for overcoming these uncertainties. There are several models developed in the literature for measuring the quality of service. Servqual model is one of them. The Servqual scale was first described by Parasuraman et al. in 1985, and the service quality was listed; physical evidence, reliability, willingness, competence, courtesy, credibility, security, availability and accessibility, and communication. As a result of statistical analysis, the correlation was found between the dimensions and ten dimensions are collected in five dimensions; tangibles, reliability, trust, willingness/responsibility, and empathy (Parasuraman et. al., 1990):

- **Tangibles:** Appearance of physical facilities, staff, and materials.
- **Reliability:** Dependability and accuracy of provided services.
- **Trust:** Staff' s ability to build trust and confidence with knowledge and courtesy.
- **Willingness/Responsibility:** Willingness to solve customers' problems and helping quickly.
- **Empathy:** Simply means sincere care and individual attention to customers that the organization provides.

Quality starts with customer wishes, desires, and needs and ends with customer satisfaction (Kotler, 1999). As a result, the desired service quality will be achieved as long as the services intended for customers' wishes, desires and demands create customer satisfaction (Güney & Arıkan, 2002). "Service quality is a measure of how well the service level delivered matches customer expectations and delivering quality service means conforming to customer expectations consistently" (Lewis & Booms, 1983, p.100). Parasuraman, Zeithaml & Berry (1985) pointed out that quality is shaped entirely by consumer expectations. At this point, the patients who purchase the service in the healthcare sector are a determining factor in the quality of the service.

Perception of the service delivery and service's performance of the purchased service refers to the perceived service quality (Parasuraman et al., 1985). The perceived quality of service in the health services sector may not always be provided in line with patient expectations. Regaining or improving

the health of the patient is beyond the perception of service quality in the marketing dimension. Most of the errors that occur at this point are due to lack of communication, lack of interaction and emotional intelligence, lack of communication, lack of knowledge, lack of trust between patients and education.

To be able to measure the quality of the service provided by health businesses, it is necessary to clearly understand the patients' expectations about the service providers and health institutions as well as understanding the current performance. Even though the business believes that its performance is excellent, excellence is limited only by the perception of the individual's experience. At this point, the objective result for the service quality will be achieved by objectively be synchronized the desired and perceived service quality.

Achieving the desired quality in health services is a necessity for businesses. This obligation is important both for the patients to get what they deserve and to achieve the objectives for the business. Although reaching the same quality with patient expectations in the provision of health services initially leads to higher costs, the benefits that will be provided later eliminate this handicap. The overlap between perceived quality of service and expected quality of service will create high quality, high standard service from the perspective of patients and will bring satisfaction and loyalty. So they can recommend the hospital to their environment.

2.3. Corporate reputation

Since reputation is one of the important elements of quality, it is an undeniable fact that corporate reputation is an impressive factor in the perception of the quality of health services. At this point, reputation is the performance of the service from the customer perspective and affects the perceived service quality (Garvin, 1984, p.25-43). "Corporate reputation is based on the expectations about the ability of the firm to fulfill the interest of its stakeholders" (Perez-Cornejo, Quevedo-Puente & Delgado-García, 2019, p.505). Corporate reputation is defined as how much demand a business can see in an individual's Many variables have a significant impact on the health businesses' achieving sustainable success. Corporate reputation becomes more important as it provides hospitals with opportunities to provide competitive advantage (Ünal, Akbolat, Amarat & Bozkurt, 2018, p.1036). So, businesses have begun to recognize the importance of building a corporate reputation to achieve business goals and maintain competitiveness (Kim, Kim & Kim, 2019, p.365).

In today's rapidly developing competitive environment, businesses are looking for ways to move one step ahead through corporate reputation development. Businesses that want to achieve the successful results of these efforts, in the long run, should influence the feelings of stakeholders (Lu, Tong & Wong, 2017). It is observed that corporate reputation also increases when customers feel secure and satisfied with service (Skallerud, 2011). It is possible to list some of the benefits provided to institutions by reputation as follows (Karaköse, 2012):

- The most competent and experienced personnel are employed during recruitment.
- Businesses can achieve higher success and revenue.
- The business can easily overcome the possible crisis process or suffer less damage.
- The public-gives respect to the business.
- The happiness and loyalty of internal and external stakeholders increases.
- The employees can make higher efforts by themselves.
- Stakeholders' tolerance to business is higher.
- The business creates customer value.

- The businesses' products and services advice and positive sharing increase.
- New customer acquisition
- Easy and strong communication with internal and external stakeholders.

Reputation reflects the viewpoint of the businesses not only to the internal customer but also to all stakeholders, such as external customers, suppliers, and investors. Therefore, to achieve corporate reputation, which is an abstract concept, necessary standards must be met for all stakeholders. A positive or negative attitude in any of the stakeholders may also benefit or harm the opinion of other stakeholders.

2.4. Satisfaction

“Satisfaction is the characteristics of a product or service, or the degree of enjoyment of a product or service itself, by consumption, when the service is fulfilled or exceeds the expectation” (Oliver, 1997, p.13). Quality and satisfaction are not the same. “Service quality represents the long-term and overall assessment of service; satisfaction is a short-term and a judgment about the consumption of a particular service” (Öztürk, 2011, p.151).

Businesses need to have some shopping features for their customers to think they are creating satisfied customers. Satisfied customers are those who continue shopping with the business for a long time, buy more of the new products and services produced by the business, buy the products and services of the business without paying attention to the price, talk positive about these products to the environment and give feedback to the business (Kotler, 2000, p.48).

Creating customer satisfaction is one of the main goals of the business. Failure to satisfy the company's products and services can lead to some negativities. These are negative attitudes towards the enterprise or its products/services (Boshoff, 1997), non-faithfulness in the enterprise and negative feedback about the enterprise (Johnston, 1998, Andreassen, 1999, Jones & Farquhar, 2007, Smith & Bolton, 1998; Tax, Brown) & Chandrashekar, 1998) and ultimately abandonment (Jamal and Naser, 2002, Keaveney, 1995).

2.5. Hypothesis development

The research model is shown in Figure 1. The study's hypotheses are directly associated with the perceived service quality, corporate reputation, and satisfaction.

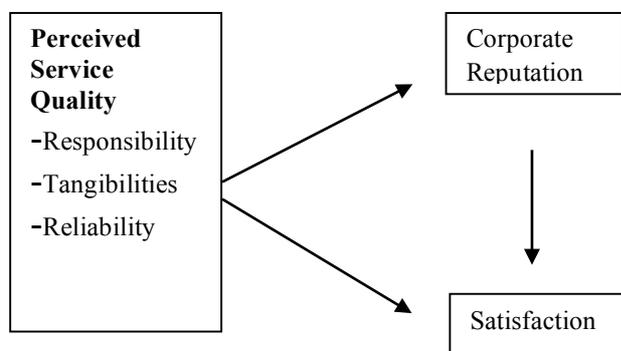


Figure 1. Research model

It is known that perceived service quality has an impact on corporate reputation. Quality is an important determinant of a company's corporate reputation (Fombrun & Shanley, 1990, Rindova,

Williamson, Petkova, & Sever, 2005, Brammer & Pavelin, 2006, Gatti, Caruana & Snehota, 2012, Erođluer, 2013). These studies show that high-quality products and services afford to higher corporate reputation to the companies. Based on these arguments, we propose:

H₁: The patients' perceptions of service quality affect hospitals' corporate reputation significantly and positively.

H_{1a}: The patients' perceptions of service quality of the responsibility dimension affect hospitals' corporate reputation significantly and positively.

H_{1b}: The patients' perceptions of service quality of the tangibilities dimension affect hospitals' corporate reputation significantly and positively.

H_{1c}: The patients' perceptions of service quality of the reliability dimension affect hospitals' corporate reputation significantly and positively.

Health services are going on intensive growth in the world. This situation makes it an interesting area of research for many researchers. The decision of whether the patient will remain, or not, the services of a hospital depends on the services' quality provided. So, the patients will be satisfied if better quality of services is provided (Izogo & Ogba, 2015). It is generally accepted that service quality is antecedent to satisfaction (Cronin & Taylor, 1992, Anderson & Sullivan, 1993, Parasuraman, Zeithaml, & Berry, 1994, Taylor & Baker, 1994, Oliver, 1997, Caruana, 2002). Based on these arguments, we propose:

H₂: The patients' perceptions of service quality affect patients' satisfaction significantly and positively.

H_{2a}: The patients' perceptions of service quality of the responsibility dimension affect patients' satisfaction significantly and positively.

H_{2b}: The patients' perceptions of service quality of the tangibilities dimension affect patients' satisfaction significantly and positively.

H_{2c}: The patients' perceptions of service quality of the reliability dimension affect patients' satisfaction significantly and positively.

In various studies conducted in the literature, it has been concluded that corporate reputation facilitates customer satisfaction (Anselmso, Bondesson & Johansson, 2014; Melo & Garrido-Morgado, 2012; Gorondutse, Hilman & Nasidi, 2014). The studies (Ünal, Akbolat, Amarat & Bozkurt, 2018, Sadeghi, Ghujali & Bastam, 2019) show that corporate reputation has a significant impact on satisfaction. Based on these arguments, we propose:

H₃: The patients' perceptions of hospitals' corporate reputation affect patients' satisfaction significantly and positively.

3. Research Methodology

In this part, population, sample, and scales are given.

3.1. Data collection

The population of the study consists of individuals over the age of 18 receiving services from state and private hospitals in Ankara. In Ankara, there are 41 state hospitals, 16 of which are education and research hospitals, 25 of which are state hospitals. Also, there are 32 private hospitals. The population of Ankara in 2018 is 5,503,985 people (Provincial Population Report by Years, 2019). Given the number and variability of patients receiving services from hospitals in Ankara, it is not possible to

reach the entire universe. Also, as the study is descriptive, a non-random convenience sampling method was used. It is known that if the universe is 1.000.000 people or more, 384 samples are sufficient in 95% confidence interval (Yazıcıoğlu & Erdoğan, 2004, p. 50). At this point, a questionnaire was applied to the patients who received service from the hospitals in Ankara in the last 6 months. The survey was initiated in September 2019 and 733 participants reached until December 2019 were included in the sample. Data were collected through face-to-face survey and closed-ended questions were asked to the participants. Ethical permission needs not obtained because the research was not conducted in specific hospitals and it was conducted on individuals.

3.2. Scales of research

The questionnaire includes the perceived service quality of the hospitals, the hospital's corporate reputation, and the post-service patients' satisfaction, as well as information on demographic information and social security of the patients. The scale expressions about the quality of service used in the survey are Parasuraman et al. (1985)'s the Servqual scale expressions and they were adapted to health institutions. The scale expressions about satisfaction were adapted from Cronin, Brady & Hult's (2000) study. For the corporate reputation scale, the reputation perception dimension of the corporate reputation perception scale developed by Karaköse (2006) was used. Other dimensions of the scale were not used because they included statements except that patient knowledge and experience. The all scale expressions in the questionnaire were measured using the 5-point Likert scale "Strongly disagree", "Disagree", "Undecided", "Agree" and "Strongly agree".

4. Data Analysis and Findings

4.1. Demographic characteristics

The analysis was started with the demographic characteristics of the participants. According to the results of frequency and percentage analysis, it is observed that 49% of the participants evaluated state hospitals and 51% of them evaluated private hospitals. Also, of the participants evaluating state hospitals, 61% were male, 31.5% were between 26-40 years old and 32.6% had high school and equivalent education, 34.3% have income level of 0-1600 TL, 57.7% are married and 91.1% have social security insurance.

Of the participants evaluating private hospitals, 54% were male, 32.6% were in the 26-40 age range, 38% were college graduates, 26.2% had 0-1600 TL income, 52.9% were married and 64.7% of them have social security insurance.

4.2. Normality analysis findings

Before analyzes, normality analysis was performed to see whether the data met the normal distribution requirement. Since all data in the perceived service quality, corporate reputation scale, and satisfaction scales were $p < 0.05$ according to Kolmogorov Smirnov test, it was concluded that the data did not show normal distribution. Since the data appearing outside the normal distribution are real data, no data was extracted. However, since parametric tests can be used since the scale scores of skewness and kurtosis coefficients are between -1.5 and +1.5 in all four scales (Tabachnick & Fidell, 2007), the analysis was continued with parametric tests.

4.3. *Participants' perceptions of service quality*

Independent Sample T-Test was conducted to determine whether the perceived service quality differentiated between state and private hospitals. According to the result of the analysis, the most important indicators of perceived service quality of participants receiving service from state hospitals are “This hospital performs billing procedures correctly.” (\bar{x} :3,78), “The employees of this hospital (doctor, nurse, secretary, etc.) are clean and neat looking.” (\bar{x} :3,77), “The employees of this hospital (doctor, nurse, secretary, etc.) are knowledgeable.” (\bar{x} :3,72) and “This hospital does its best for your patients.” (\bar{x} :3,72). These indicators are “This hospital does its best for your patients.” (\bar{x} :4,20), “The employees of this hospital (doctor, nurse, secretary, etc.) are insightful and reassuring to solve the problem when the patient has a problem.” (\bar{x} :4,18) and “The employees of this hospital (doctor, nurse, secretary, etc.) are polite.” (\bar{x} :4,17) in private hospitals. When these statements regarding the perceived service quality are taken into consideration, p values are examined to determine which statements have the same importance for both state and private hospitals. As the p values of all variables were 0.00, it was concluded that there was a significant difference between state and private hospitals for all variables in perceived service quality.

4.4. *Participants' perceptions of corporate reputation*

Independent Sample T-Test was conducted to determine whether the perceived corporate reputation differentiated between state and private hospitals. According to the result of the analysis, the most important indicators of perceived corporate reputation participants receiving service from state hospitals are “The fact that the employees of the hospital are qualified and qualified in the field affects the reputation of the institution positively.” (\bar{x} :4,05), “Corporate reputation is increased by kept ethical values at the foreground of the hospital's practices.” (\bar{x} :4,05) and “This hospital is highly respected and appreciated” (\bar{x} :3,70). These indicators are “The fact that the employees of the hospital are qualified and qualified in the field affects the reputation of the institution positively.” (\bar{x} :4,30), “Corporate reputation is increased by kept ethical values at the foreground of the hospital's practices.” (\bar{x} :4,18) and “This hospital is highly respected and appreciated” (\bar{x} :4,12) in private hospitals. When these statements regarding the perceived corporate reputation are taken into consideration, p values are examined to determine which statements have the same importance for both state hospitals and private hospitals. As the p values of all variables were 0.00, it was concluded that there was a significant difference between state and private hospitals for all variables in perceived service quality.

4.5. *Findings related to factor analysis*

To perform factor analysis, KMO (Kaiser-Meyer-Olkin Measure of Sampling Adequacy) the sample adequacy criterion and sphericity (Barlett's Test of Sphericity) must first be sufficient. In the Principal Component Analysis applied to the data, it was seen that the sample size was sufficient (KMO value: 0,939) for factor analysis according to KMO test (Tabachnick & Fidell, 2007). The Barlett Sphericity Test was also significant ($X^2 = 6999,890$; $p < 0,001$) (Tabachnick & Fidell, 2007). Also, since the Measures of Sampling Adequacy (MSA) value was above 0.50, the analysis was continued without any questions. Being ensured the assumption of multivariate normality indicates that the assumption of linearity is also provided (Çokluk, Şekercioğlu, & Büyüköztürk, 2012).

Factor analysis was applied to determine the factors under which the scale prepared for perceived service quality consisting of 15 variables was collected and varimax rotation method is used. In the study, this analysis was used to analyze the relationship between several variables (Gegez, 2010).

As a result of factor analysis, 3 factors with eigenvalues greater than 1 were determined. The total explained variance is well above the desired 0.5 with a value of 68,017%. Factors and factor loads are shown in Table 1.

Table 1.

Explanatory Factor Analysis, Eigenvalues, Factor Loads and Variance Statement

SCALE	Factor Loads	Eigenvalues	Explained Variance	Total Variance
Perceived Service Quality- Responsibility		8,124	54,163	54,163
This hospital does its best for your patients.	,893			
The employees of this hospital (doctor, nurse, secretary, etc.) are knowledgeable.	,886			
The employees of this hospital (doctor, nurse, secretary, etc.) pay personal attention to the patients.	,774			
The employees of this hospital (doctor, nurse, secretary, etc.) are polite.	,760			
The employees of this hospital (doctor, nurse, secretary, etc.) receive adequate support from their employers to do their job better.	,680			
The employees of this hospital (doctor, nurse, secretary, etc.) are always willing to help patients.	,616			
Patients feel safe in the relations with the employees (doctors, nurses, secretaries, etc.) of this hospital.	,560			
Perceived Service Quality- Tangibility		1,069	7,123	61,286
The physical facilities of this hospital (interior and exterior buildings decor, lighting, furniture, etc.) are visually appealing.	,898			
This hospital is equipped with modern equipment.	,835			
The employees of this hospital (doctor, nurse, secretary, etc.) are clean and neat looking.	,622			
Perceived Service Quality- Reliability		1,010	6,731	68,017
The employees of this hospital (doctor, nurse, secretary, etc.) tell patients exactly when they will perform the service.	,897			
The employees of this hospital (doctor, nurse, secretary, etc.) provide the services as soon as possible.	,742			
This hospital performs billing procedures correctly.	,701			
This hospital performs services as promised.	,621			
The employees of this hospital (doctor, nurse, secretary, etc.) are insightful and reassuring to solve the problem when the patient has a problem.	,548			
Corporate Reputation		1,725	57,495	57,495
The fact that the employees of the hospital are	,693			

qualified in their area of expertise affects the reputation of the institution positively.				
This hospital is highly respected and appreciated		,752		
Corporate reputation is increased by kept ethical values at the foreground of the hospital's practices.		,824		
SCALE	Factor Loads	Eigenvalues	Explained Variance	Total Variance
SATISFACTION		2,514	83,803	83,803
My choice to receive this service in this hospital was a wise one.		,853		
I think that I did the right thing to receive this service in this hospital.		,838		
This hospital serves exactly what is needed for this service.		,823		

The three factors obtained according to Table 1 explain 68.01% of the total variance. The variables that characterize the first factor obtained as a result of the analysis are generally those related to willingness/responsibility and empathy, and have an eigenvalue of 8,124, explaining 54,163% of the total variance. This factor has been shown as responsibility. The second factor is the change in physical properties. The eigenvalue of these variables is 1,069 and explains 7,123% of the explained variance. The third factor was determined as trust and reliability and explained 6,731% of the variance explained and its eigenvalue was 1,010. The third factor has been shown as reliability.

The KMO value of the corporate reputation scale was 0.613, and Barlett Sphericity Test also significant ($X^2 = 282,541$; $p < 0.001$). As a result of factor analysis, one factor with eigenvalues greater than 1 was determined. Since a single factor structure is used, rotation was not performed. The total explained variance is well above the desired 0.5 with a value of 57,495%. Factors and factor loads are shown in Table 1.

The KMO value of the satisfaction scale was 0.753, and Barlett Sphericity Test also significant ($X^2 = 1399,955$; $p < 0.001$). As a result of factor analysis, one factor with eigenvalues greater than 1 was determined. Since a single factor structure is used, rotation was not performed. The total explained variance is well above the desired 0.5 with a value of 83,803%. Factors and factor loads are shown in Table 1.

In the final stage, the factors were then averaged for preparation for correlation analysis and regression analysis.

4.6. Reliability of scales and correlation result

To measure the reliability of the scales, reliability analysis was performed first. Cronbach's alpha values for the scales are shown in Table 2.

Table 2.

Reliability Statistics

Scale	Cronbach's Alfa	Number of Items
Perceived Service Quality	0,939	15
-Responsibility	0,914	7
-Tangibility	0,822	3
-Reliability	0,859	5
Corporate Reputation	0,627	3
Satisfaction	0,903	3

When Table 2 is examined, it is concluded that the Cronbach's alpha values of all scales are greater than 0.60 and that the scales are reliable. Cronbach alpha coefficient greater than 0.70 is considered sufficient for internal reliability in social sciences (Baum & Wally, 2003).

The Pearson correlation analysis was done to show the relationship between variables. The analysis result shows that all variables are positively associated with each other. The highest correlation was observed between corporate reputation and reliability (.634**) and the lowest between responsibility and satisfaction (.516**). High correlation coefficients were tested using multicollinearity in Table 3.

Table 3.

Correlation Result

Variables	1	2	3	4	5
Responsibility	1				
Tangibility	,619**	1			
Reliability	,752**	,656**	1		
Corporate Reputation	,620**	,587**	,634**	1	
Satisfaction	,516**	,524**	,525**	,539**	1

*p < 0.05. **p < 0.01.

4.7. Findings of regression analysis

After concluding that there is a high level of relationship between variables, Regression Analysis was performed based on independent variables to reveal the effect of perceived service quality, corporate reputation and satisfaction' s effects on each other. The results of the regression analysis are shown in Table 4.

Table 4.

Effects of Perceived Service Quality, Corporate Reputation, Satisfaction Variables on Each Other

HOSPITAL TYPE	Independent Variables	Dependent Variables	Std.Beta	R2	Std. Error	t	p	F
State Hospital	Responsibility	Corporate Reputation	0,486	0,237	0,036	10,518	0,00	110,624
Private Hospital	Responsibility	Corporate Reputation	0,571	0,326	0,037	13,403	0,00	179,652
State Hospital	Tangibility	Corporate Reputation	0,341	0,117	0,17	6,863	0,00	47,106
Private Hospital	Tangibility	Corporate Reputation	0,565	0,319	0,04	13,199	0,00	174,225
State Hospital	Realiability	Corporate Reputation	0,446	0,199	0,039	9,415	0,00	88,647
Private Hospital	Realiability	Corporate Reputation	0,654	0,428	0,038	16,691	0,00	278,575
State Hospital	Responsibility	Satisfaction	0,512	0,262	0,054	11,256	0,00	126,707
Private Hospital	Responsibility	Satisfaction	0,472	0,223	0,053	10,321	0,00	106,525
State Hospital	Tangibility	Satisfaction	0,399	0,16	0,07	8,233	0,00	67,781
Private Hospital	Tangibility	Satisfaction	0,445	0,198	0,058	9,584	0,00	91,846
State Hospital	Realiability	Satisfaction	0,498	0,248	0,058	10,848	0,00	117,681
Private Hospital	Realiability	Satisfaction	0,448	0,201	0,06	9,67	0,00	93,511
State Hospital	Corporate Reputation	Satisfaction	0,456	0,208	0,073	9,687	0,00	93,846
Private Hospital	Corporate Reputation	Satisfaction	0,482	0,235	0,061	10,694	0,00	114,363

The analysis was first started by investigating the effect of sub-dimensions of perceived service quality on corporate reputation. When Table 4 is analyzed, it is seen that 23.7% of the hospital's corporate reputation perception levels of the participants receiving service from state hospitals are affected by the responsibility dimension of perceived service quality. Also 32.6% of private hospitals are affected it. A one-unit increase in the responsibility dimension of perceived service quality in state hospitals led to an increase of 0.486 units ($p < 0,05$) in the participants' perception of the corporate reputation of the hospital, while this level increased by 0.571 ($p < 0,05$) units in private hospitals. At this point, because perceived service quality's responsibility dimension has a significant and positive effect on corporate reputation, H_{1a} hypothesis is supported.

When the effect of tangibilities dimension of perceived service quality on hospitals' corporate reputation is examined, it is seen that 11.7% of the corporate reputation perception levels of the participants receiving service from state hospitals are affected by physical tangibilities dimension of

perceived service quality, while this ratio is 31.9% in private hospitals. A one-unit increase in the tangibilities dimension of perceived service quality in state hospitals led to an increase of 0.341 units in participants' perceptions of the corporate reputation of the hospital, while this increased 0.565 units in private hospitals. At this point, because perceived service quality's tangibility dimension has a significant and positive effect on corporate reputation, H_{1b} hypothesis is supported.

When the effect of reliability, which is the last dimension of perceived service quality, to the corporate reputation is examined, it is concluded that 19.9% of the corporate reputation perception levels of the participants receiving service from state hospitals are affected by the reliability dimension of perceived service quality and this ratio is 42.8% in private hospitals. A one-unit increase in the reliability dimension of perceived service quality in state hospitals led to an increase of 0.446 units in participants' perceptions of the corporate reputation of the hospital, while this level increased by 0.654 units in private hospitals. At this point, because perceived service quality's reliability dimension has a significant and positive effect on corporate reputation, H_{1c} hypothesis is supported.

In the next part of the study, the effect of perceived service quality sub-dimensions on satisfaction was examined. According to this, 26.2% of the satisfaction levels of the participants receiving service from state hospitals are affected by the responsibility dimension of perceived service quality, while this level is 22.3% in private hospitals. One unit increase in the responsibility dimension of perceived service quality in state hospitals leads to an increase of 0.512 units in the satisfaction level of the participants regarding the service they receive from the hospital, and this level increases 0.472 units in private hospitals. At this point, because perceived service quality's responsibility dimension has a significant and positive effect on satisfaction, H_{2a} hypothesis is supported.

When the effect of perceived service quality of tangibilities dimension on satisfaction was examined, it was concluded that 16% of the satisfaction levels of service participants received from state hospitals were affected by tangibilities dimension of perceived service quality and this level was 19.8% in private hospitals. A one-unit increase in the tangibilities of perceived service quality in state hospitals led to an increase of 0.399 units in the satisfaction level of the service received by the participants while this level increased 0.445 units in private hospitals. At this point, because perceived service quality's tangibilities dimension has a significant and positive effect on satisfaction, H_{2b} hypothesis is supported.

When the effect of reliability which is the last dimension of perceived service quality, on satisfaction is examined, 24.8% of the satisfaction levels of the service providers received from state hospitals are affected by the reliability dimension of perceived service quality and this level is 20.1% in private hospitals. A one-unit increase in the reliability dimension of perceived service quality in state hospitals led to an increase of 0.498 units in the satisfaction level of the participants regarding the service they received from the hospital, while this level increased 0.448 units in private hospitals. At this point, because perceived service quality's reliability dimension has a significant and positive effect on satisfaction, H_{2c} hypothesis is supported.

Finally, in the analysis, the effect of corporate reputation on satisfaction was also examined and it was found that 20.8% of the satisfaction levels of the service providers received from state hospitals were affected by the perception of corporate reputation and it was found that this level was 23.5% in private hospitals. A one-unit increase in perceived corporate reputation in state hospitals led to an increase of 0.456 units in the satisfaction level of the participants regarding the service received from the hospital, while this level increased 0.482 units in private hospitals. At this point, because corporate reputation has a significant and positive effect on satisfaction, H_3 hypothesis is supported.

5. Conclusion

Corporate reputation and the perception of quality service are important objectives that must be maintained and improved after being achieved. Corporate reputation, which reflects the value of the business in the eyes of the public, is an indicator of the sustainable success performance of health businesses just like the provision of quality services. In addition, to improve the health of individuals for healthcare businesses, providing perceive of high-quality service and creating a positive reputation in public opinion to hospitals can be effective in creating positive attitudes towards the hospital or changing existing attitudes for both the patients/potential patients and their relatives.

Based on this importance, the research was conducted to determine the effect of the service providers' perceptions about the quality of service on corporate reputation and satisfaction and the effect of corporate reputation on satisfaction and determine whether the effect of these differences between state and private hospitals.

According to the research results, perceived service quality has a positive and significant effect on satisfaction. This result is similar to previous studies (Kasiri, Cheng, Sambasivan, & Sidin, 2016, Izogo & Ogba, 2015, Lympelopoulos, Chaniotakis & Soureli, 2013, Malik, Akhtar, Raziq & Ahmad, 2020). Also, however, the impact of perceived service quality on the satisfaction of the responsibility and reliability dimension is higher in state hospitals, whereas the impact of the physical characteristics dimension on satisfaction is significantly higher in private hospitals.

The results obtained in the research are that perceptions about service quality have a positive and significant effect on corporate reputation. This result is similar to previous research (Gatti et al., 2012, Erođluer, 2013, Ergün, 2015, Güllüpunar, 2016, Pérez-Cornejo et al., 2019). Also, while the three dimensions, responsibility, physical characteristics, and reliability, determined in the study as sub-dimensions of perceived service quality affect much more corporate reputation at private hospitals, similarly, the impact of corporate reputation on satisfaction in private hospitals.

Another result of the research is that corporate reputation has a positive and meaningful effect on satisfaction. This result is in line with previous studies (Helm, 2007, Ünal, Akbolat, Amarat & Bozkurt, 2018, Kim, Kim & Kim 2019, Sadeghi, Ghujali & Bastam, 2019). However, Helm (2007) concluded that Garnefeld & Tolsdorf (2009) do not have a significant effect on satisfaction in corporate reputation. Also, it is reached the result that the impact of corporate reputation on satisfaction is higher in private hospitals than state hospitals.

6. Managerial Implications and Suggestions

The conclusions reached are that the quality of service provided by private hospitals is more effective in creating a sense of corporate reputation from the perspective of individuals. At this point, of course, both state and private hospitals should provide their service quality with patient expectations. In addition to this, it is important for hospitals to continuously follow modern technology and create patient trust for their services. Today, health businesses are obliged to invest in technology and to work with expert and knowledgeable personnel who are positively recognized by all stakeholders. Since patients entrust their health and life to physicians and other assistant health personnel when they apply to health care facilities, they expect them to be valued and felt as an individual before a patient and a customer. At this point, feeling that their problems will be solved quickly and empathically and to be informed about the procedures to be done determines the trust in the hospital and hospital employees and the credibility of their approaches. Institutions and employees must create the perception that these trusts and responsibilities will be fulfilled, especially when it comes to the health

of individuals. When the history of private hospitals in Turkey was researched, a significant size of the public started to receive services from private hospitals for the last 10 years. This is a sign that the creation of a sense of corporate reputation arises from the lack of options in state hospitals. But, unlike it requires special efforts in private hospitals. This requires private hospitals to continuously review the service quality and to exceed patient expectations without stopping. Similarly, the impact of patients' judgments about the corporate reputation of the hospital on service quality is more pronounced in private hospitals. The fact that the hospital in which they receive or decide to receive service is publicly respected shapes the decisions of receiving services to a great extent.

State hospitals continue to undergo an important process both in terms of modernization and physical conditions as well as managerially within the scope of the investments made in the health sector in Turkey. In the study, it was seen that the participants evaluated the effect of physical characteristics dimension of service quality on satisfaction more positively in private hospitals. This is yet an indication that state hospitals have a long way to go in terms of technological investment. However, in terms of responsibility and reliability, satisfaction assessments of state hospitals are more evident. This assessment is a sign that the price paid in private hospitals should add other dimensions in addition to physical conditions. It is necessary to create an environment that makes the individual feel safe with expert, experienced and knowledgeable employees. In this way, satisfaction attitudes in private hospitals can be brought to the desired level.

For both state and private hospitals, health personnel must manage interpersonal communication correctly. The health sector is still one of the two resisting sectors in this age when human interaction is rapidly decreasing in the service sector. At this point, the empathic, respectful, polite approach of the health personnel to the patients is one of the basic requirements. Besides, it is important to neutralize many negative situations. Health businesses should employ not only experts, knowledgeable and equipped employees, but also employees who can use the communication and body language correctly. In interpersonal communication and different behavior patterns should be developed with different individuals via continuous efforts. So positive behavioral models can be sustained through in-service training and performance evaluations.

As a result, perceived service quality and perceived corporate reputation shape satisfaction towards the service. Especially with the increasing use of social media, the change in the technological habits of individuals and the increase of internet use in daily life, individuals share their thoughts and attitudes about any subject for the benefit of other individuals. When approached with this perspective, health businesses' affecting patients' perceptions about corporate reputation and service quality in a positive way will contribute to their's success. Unlike state hospitals, it will make a difference if private hospitals pay particular attention to the corporate reputation as well as the quality of service and reliability and responsibility to ensure the continuity and development of the business and to achieve the objectives of the stakeholders.

7. Research Limitations

The research was carried out within the framework of certain limitations. These are listed below:

- The sample used in the study is composed of individuals residing in Ankara, the results do not reflect overall Turkey.
- In the results section of the research, the effect comparisons of independent variables on the dependent variables mentioned in the state and private hospitals are based on the comparison of the Standard beta and R^2 values obtained by the Regression Analysis.

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