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DETERMINANTS OF PATIENT SATISFACTION IN FIRST-LEVEL HEALTH FACILITIES: A LITERATURE REVIEW

Niken Grah Prihartanti[1)]*, Anis Satus Syarifah[2)], Dwi Sri Rahandayani[3)], Desy Siswa Anjar Sari[4)]

[1)] nikengrah01@gmail.com, **STIKES Pemkab Jombang**
[2)] anissatus196@gmail.com, **STIKES Pemkab Jombang**
[3)] dwisrirahandayani1@gmail.com, **STIKES Pemkab Jombang**
[4)] desysiwi@gmail.com, **STIKES Pemkab Jombang**

Abstract
Patient satisfaction is a key indicator of healthcare quality in primary healthcare facilities, where patients' experiences are shaped by both clinical and non-clinical aspects of care. This study aims to identify the determinants of patient satisfaction in primary healthcare facilities. A scoping review was conducted following the PRISMA-ScR framework, utilizing the PICO framework to guide the search strategy, eligibility criteria, data extraction, and synthesis. Of the 268 articles initially identified, eight studies met the inclusion criteria and were analyzed using narrative synthesis. The findings indicate that patient satisfaction is influenced by multiple factors, including service quality, healthcare provider communication, accessibility, waiting time, technical competence, consultation quality, facility conditions, medication availability, pharmaceutical services, patient characteristics, and continuity of care. The most frequently reported determinants were provider communication, consultation quality, accessibility, waiting time, and medication availability. Consequently, efforts to improve patient satisfaction should focus on enhancing communication, reducing waiting times, improving consultation quality, strengthening service accessibility, ensuring medication availability, and promoting patient-centered care. Ultimately, this review synthesizes current evidence on the multidimensional determinants of patient satisfaction in primary healthcare, providing valuable insights for healthcare quality improvement.
Keywords: Determinants; Patient Satisfaction; Primary Health Care Facilities; Primary Health Care; Quality of Care

Abstrak
Kepuasan pasien merupakan indikator utama kualitas layanan kesehatan di fasilitas kesehatan tingkat pertama, di mana pengalaman pasien dibentuk oleh aspek perawatan klinis maupun non-klinis. Penelitian ini bertujuan untuk mengidentifikasi determinan kepuasan pasien di fasilitas kesehatan tingkat pertama. Tinjauan pelingkupan (scoping review) dilakukan dengan mengikuti kerangka PRISMA-ScR, serta menggunakan kerangka PICO untuk memandu strategi pencarian, kriteria kelayakan, ekstraksi data, dan sintesis. Dari 268 artikel yang diidentifikasi pada awalnya, delapan studi memenuhi kriteria inklusi dan dianalisis menggunakan sintesis naratif. Hasil temuan menunjukkan bahwa kepuasan pasien dipengaruhi oleh berbagai faktor, termasuk kualitas layanan, komunikasi penyedia layanan kesehatan, aksesibilitas, waktu tunggu, kompetensi teknis, kualitas konsultasi, kondisi fasilitas, ketersediaan obat, pelayanan kefarmasian, karakteristik pasien, dan kesinambungan perawatan. Determinan yang paling sering dilaporkan adalah komunikasi penyedia layanan, kualitas konsultasi, aksesibilitas, waktu tunggu, dan ketersediaan obat. Oleh karena itu, upaya untuk meningkatkan kepuasan pasien harus difokuskan pada peningkatan komunikasi, pengurangan waktu tunggu, peningkatan kualitas konsultasi, penguatan aksesibilitas layanan, jaminan ketersediaan obat, dan promosi perawatan yang berpusat pada pasien. Pada akhirnya, tinjauan ini menyintesis bukti terkini tentang determinan multidimensional dari kepuasan pasien di fasilitas kesehatan tingkat pertama, sehingga memberikan wawasan penting bagi peningkatan kualitas layanan kesehatan.
Kata Kunci: *Kepuasan Pasien, Fasilitas Pelayanan Kesehatan Primer, Pelayanan Kesehatan Primer, Kualitas Pelayanan, Faktor Penentu.*

INTRODUCTION

Patient satisfaction is a key indicator in assessing the quality of healthcare services. Patients evaluate services not only from a medical perspective but also based on their experience, from arrival and registration to waiting, consultation, receiving medication, and obtaining follow-up information from healthcare providers. Therefore, patient satisfaction is not merely a simple end result; it is shaped by many interrelated factors.

Primary care facilities play a crucial role in the healthcare system. These facilities are the first point of access for the public when they require basic healthcare services. The services

provided include health promotion, disease prevention, early diagnosis, basic treatment, management of chronic diseases, pharmaceutical services, and referrals to higher-level facilities when necessary. Consequently, the quality of the patient experience at primary care facilities can influence public trust in the broader healthcare system.

Patient satisfaction can also help healthcare facilities understand patient needs. Gao et al. (2022) explain that patient satisfaction is a key indicator for evaluating healthcare outcomes. Such assessments can help providers understand patient needs and identify service factors that require improvement. In primary health facilities in rural China, patient satisfaction is influenced by provider-related factors, the consultation process, affordability, and service comfort.

At primary healthcare facilities, the patient experience is often influenced by aspects closely tied to daily operations. Patients may feel satisfied when staff are friendly, doctors provide clear explanations, medications are available, service areas are clean, waiting times are not too long, and the service process is easy to understand. Conversely, patients may feel dissatisfied when communication is poor, waiting times are long, facilities are uncomfortable, or medications are unavailable (Danduru et al., 2025).

Widodo & Prayoga (2022) found that patient satisfaction among those with chronic conditions at primary health care facilities is influenced by age, distance to the clinic, number of visits, waiting time, the values and attitudes of staff, clinic cleanliness, service safety, service effectiveness, and medication availability. These findings indicate that patient satisfaction in primary care is not merely a matter of the patient-healthcare provider relationship but is also linked to the service system and facility conditions.

Pharmacy services also play a crucial role in shaping patient satisfaction. Ramadhani et al. (2025) demonstrated that patients at primary health care centers in Qatar are generally satisfied with pharmacy services. However, satisfaction remains low regarding pharmacist communication, information on medication side effects, health counseling, and waiting times. These findings demonstrate that pharmaceutical services are not limited to medication dispensing but also involve patient education and communication.

These various findings indicate that the determinants of patient satisfaction need to be systematically mapped. This mapping is crucial so that primary healthcare facilities can identify which factors most frequently influence patient satisfaction. Quality improvement strategies can then be targeted at aspects that patients actually perceive as important.

Based on the above, this literature review was conducted to identify determinants of patient satisfaction in primary healthcare facilities. This review employed an article selection process based on PRISMA-ScR, data extraction using PICO, and results analysis using narrative synthesis.

METHODS

Research Design

This study employed a literature review method using a scoping review approach. This approach was used to map the scientific evidence related to the determinants of patient satisfaction in primary care facilities. The article selection process followed the *Preferred Reporting Items for Systematic Reviews* and *Meta-Analyses Extension for Scoping Reviews* (PRISMA-ScR) guidelines.

PRISMA-ScR was used to ensure that the article selection process was conducted systematically and transparently. The selection stages included *identification, screening, eligibility, and inclusion*. This study did not conduct a meta-analysis because the analyzed articles had diverse designs, contexts, populations, and satisfaction indicators. Therefore, the results of the articles were presented through a narrative synthesis. Scientific inclusion criteria

for 2021–2026: open-access articles focusing on the keywords service satisfaction, public satisfaction, and determinants.

The PICO framework was used to determine the focus of the article search, establish inclusion and exclusion criteria, perform data extraction, and compile the review results.

Table 1. PICO Framework

Component	Description
Population	Patients receiving care at primary-level health facilities, primary care, primary health care, primary health facilities, community health centers (puskesmas), primary clinics, or primary health care centers
Intervention/Interest	Determinants or factors influencing patient satisfaction, such as service quality, healthcare provider communication, accessibility, waiting time, technical competence, facility cleanliness, medication availability, pharmacy services, and continuity of care
Comparison	Different service conditions, such as high-quality versus low-quality care, easy versus difficult access, short versus long wait times, effective versus ineffective communication, or adequate versus inadequate facilities
Outcome	Patient satisfaction

Source: data proceed

In this review, the I component is interpreted as *interest* or the primary focus of attention. This is appropriate because this study does not examine clinical interventions but rather maps the determinants related to patient satisfaction.

Article selection process

The article selection process was conducted in four stages. In the *identification* stage, 268 articles were identified from the initial search results. Subsequently, articles were screened based on title, abstract, duplication, and topic relevance. A total of 210 articles were excluded because they were irrelevant to patient satisfaction, did not pertain to primary care facilities, or did not address service determinants.

In the eligibility stage, 58 full-text articles were assessed based on inclusion and exclusion criteria and the PICO framework. Of these, 50 articles were excluded because they did not meet the inclusion-exclusion criteria, did not align with the PICO framework, lacked a complete full text, or were editorials, opinions, or commentaries. A total of 8 articles met the criteria and were analyzed in this literature review

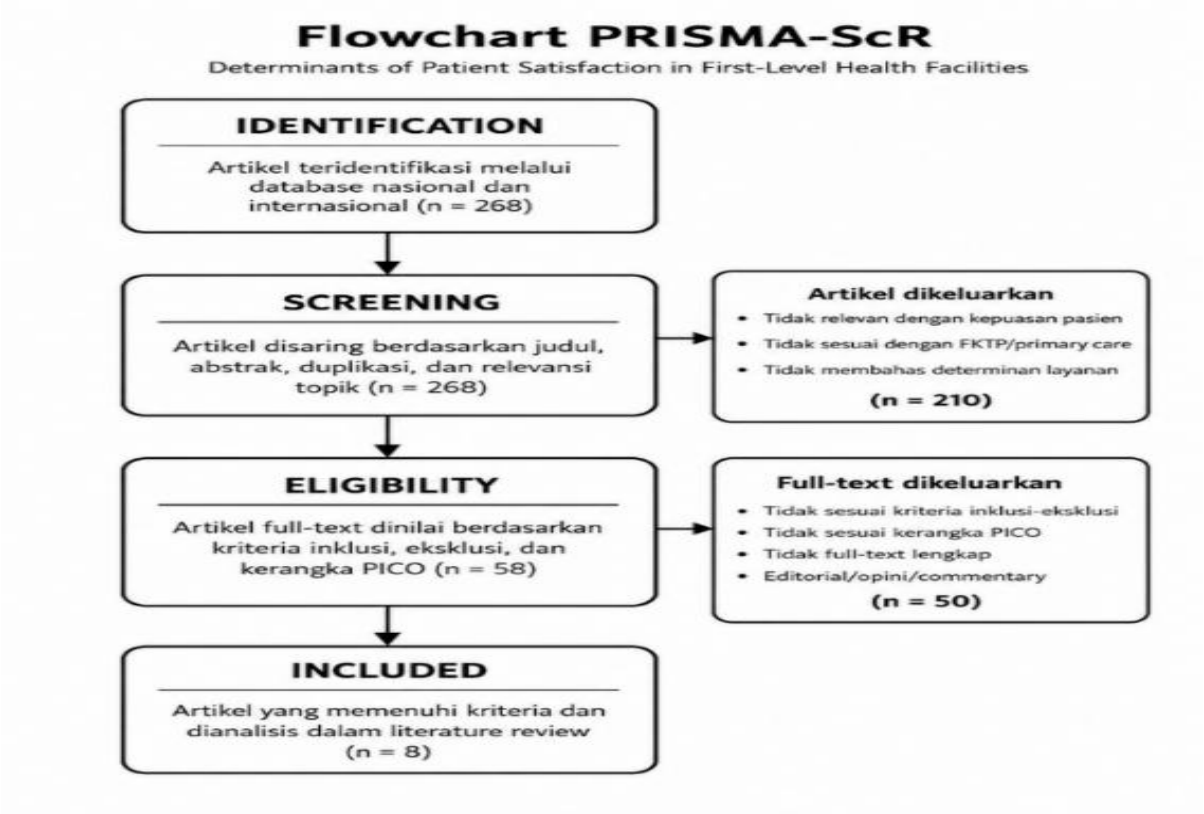


Figure 1. PRISMA-ScR Flowchart

Data Extraction

Data were extracted using the PICO approach. Each article was analyzed based on *population, intervention/interest, comparison*, and *outcome*. Additionally, information regarding authors, publication year, article title, study design, country of study, and primary outcomes was recorded to support the synthesis process.

Data Extraction Procedure

The article selection process was conducted using the PRISMA-ScR flowchart, which consists of the identification, screening, eligibility, and inclusion stages. During the identification stage, a total of 268 articles were identified through searches in national and international databases. Subsequently, articles were screened based on their titles and abstracts.

A total of 210 articles were excluded because they were not relevant to the topics of patient satisfaction, primary healthcare facilities, primary care, or service determinants. During the eligibility stage, 58 full-text articles were assessed for eligibility based on inclusion and exclusion criteria and the PICO framework. A total of 50 articles were excluded because they did not discuss determinants of patient satisfaction, were not relevant to primary health care facilities, did not have a complete full text available, were opinion pieces or editorials, or did not align with the PICO framework. A total of 8 articles met the criteria and were analyzed in this literature review.

Data Analysis

Data were analyzed using narrative synthesis. Articles meeting the criteria were read in full, and the results were compared and grouped based on common determinants of patient satisfaction. Themes emerging from this review include quality of care, healthcare provider communication, service accessibility, waiting time, technical competence, physical facilities, cleanliness, medication availability, pharmacy services, patient characteristics, and continuity of care.

RESULTS AND DISCUSSION

The following is a summary of the data extracted from the 8 selected articles that met the inclusion criteria:

Table 2. Data Extraction Using the PICO Approach

Author (s) and Year	Title	P (Population)	I (Intervention/Interest)	C (Comparison)	O (Outcome)
Alshahrani A, (2023)	Predictors of Patients' Satisfaction with Primary Health Care Services in the Kingdom of Saudi Arabia: A Systematic Review	Patients using primary health care services in Saudi Arabia	Predictors of patient satisfaction, including availability, accessibility, communication, rational conduct, technical skills, and personal qualities	Primary health care services with suboptimal access, communication, technical skills, and staff quality	Patient satisfaction is influenced by five key determinants: service availability, accessibility, communication, the rational behavior of healthcare providers, technical skills, and the personal qualities of healthcare providers.
Marzuq & Andriani, (2024)	Hubungan Service Quality terhadap Kepuasan Pasien di Fasilitas Pelayanan Kesehatan: Literature Review	Patients at health care facilities	Service quality based on the SERVQUAL dimensions: tangibles, reliability, responsiveness, assurance, and empathy	Healthcare facilities with low service quality or unmet SERVQUAL dimensions	Service quality is linked to patient satisfaction. The dimensions of assurance and responsiveness are most frequently found to be associated with patient satisfaction.
Gao et al., (2022)	Patient Satisfaction and Its Health Provider-Related Determinants in Primary Health Facilities in Rural China	Patients at rural primary health care facilities in China	Service provider factors, including physician characteristics, the consultation process, affordability, comfort, consultation duration, diagnosis, and the provision of medical advice	Services with low consultation quality, short consultation times, unclear medical information, or inconvenient access	Patient satisfaction is influenced by the quality of the consultation process, consultation duration, diagnosis, medical advice, affordability, and convenience of services.
Gavurova et al., (2021)	Patient Satisfaction Determinants of Inpatient Healthcare	Inpatients at health care facilities	Determinants of inpatient satisfaction, including the quality of medical staff, physician expertise, quality of care, health information, patient rooms, food, and the discharge process	Inpatient services with suboptimal quality of staff, facilities, health information, or care processes	Patient satisfaction is influenced by the quality of medical staff, quality of care, clarity of health information, patient involvement in care decisions, and the discharge process. This article can serve as a comparison because it discusses inpatient care, not primary care facilities (FKTP).
Alhenaidi et al., (2023)	Patient Satisfaction of Primary Care Services in Gulf	Patients using primary care	Provider-related and patient-related factors, including	Primary care services with limited access,	Patient satisfaction in primary care is influenced by provider-related factors and

	Cooperation Council Countries: A Scoping Review	services in Gulf Cooperation Council countries	technical care, interpersonal care, communication, respect, trust, physical environment, accessibility, availability, affordability, and continuity of care	ineffective communication, poor physical environment, or weak service continuity	patient-related factors. Key determinants include communication, respect, trust, accessibility, service availability, affordability, waiting time, and continuity of care.
Kagura et (al., 2023)	Patient Satisfaction with Chronic Disease Care and Its Associated Factors in Primary Health Care Facilities in Johannesburg, South Africa	Patients with chronic conditions at primary health care facilities in Johannesburg, South Africa	Sociodemographic and service factors, including age, distance to the clinic, visit frequency, waiting time, staff attitude, clinic cleanliness, service safety, service effectiveness, and medication availability	Patients facing longer travel distances, longer wait times, poor hygiene, low service safety, or inadequate medication availability	Patient satisfaction with chronic disease care is influenced by age, distance to the clinic, number of visits, wait times, staff values and attitudes, clinic cleanliness, service safety, service effectiveness, and medication availability.
Al Zaidan et al., (2022)	Pharmaceutical Care Service at Primary Health Care Centers: An Insight on Patient Satisfaction	Patients receiving pharmacy services at primary health care centers in Qatar	Pharmacy services, including pharmacist communication, medication instructions, information on medication side effects, health counseling, wait times, pharmacy staff, location, design, and layout	Pharmacy services with poor communication, incomplete medication information, suboptimal counseling, or longer wait times	Patients are generally satisfied with pharmacy services. However, satisfaction remains low regarding pharmacist communication, information on medication side effects, health counseling, and wait times.
Kijima et al., (2021)	Patient Satisfaction and Loyalty in Primary Care	Patients using primary care services	Primary care attributes, including first contact, urgent access, continuity of care, coordination, comprehensiveness, family-centeredness, community orientation, and service access	Primary care services with limited access, weak patient-provider relationships, or suboptimal continuity of care	Longitudinality, first contact, family-centeredness, and other primary care attributes play a role in building patient satisfaction and loyalty toward primary care services.

Source: data proceed

The results of the analysis indicate that patient satisfaction is a multidimensional construct. The main themes that emerged from the narrative synthesis include quality of care, communication with healthcare providers, accessibility of services, wait times, technical

competence, condition of physical facilities, cleanliness, availability of medications, pharmacy services, patient characteristics, and continuity of care.

Discussion

Based on the results of a literature review of 8 articles meeting the selection criteria using PRISMA-ScR, it was found that patient satisfaction at primary healthcare facilities is influenced by various determinants. These determinants do not operate in isolation but are interrelated in shaping the patient's experience during care. Generally, determinants of patient satisfaction can be grouped into the following discussion points.

Quality of Care

Quality of care is the primary determinant most frequently identified in the analyzed articles. Quality of care reflects a healthcare facility's ability to provide services that align with patients' needs, expectations, and service standards. In primary healthcare facilities, service quality can be assessed through several aspects, such as service reliability, accuracy of care, staff response time, the sense of safety provided to patients, empathetic attitude, and the condition of physical facilities. In the SERVQUAL framework, service quality generally encompasses five dimensions: *tangibility, reliability, responsiveness, assurance, and empathy.*

The *tangible* dimension relates to the physical evidence of the service, such as waiting areas, cleanliness, the completeness of facilities, and the comfort of the environment. The *reliability* dimension relates to the healthcare facility's ability to provide services accurately and consistently. The *responsiveness* dimension indicates the speed and readiness of staff to assist patients. The *assurance* dimension relates to the sense of safety, trust, and competence of healthcare personnel. Meanwhile, the *empathy* dimension reflects the staff's attention and concern for patients. Service quality is a crucial foundation for patient satisfaction. Patients will be more satisfied if healthcare facilities can provide services that are prompt, clear, safe, friendly, and tailored to their needs. Conversely, low service quality can erode patients' trust in primary healthcare facilities (Malintoi et al., 2025).

Healthcare Provider Communication

Healthcare provider communication is a key determinant of patient satisfaction. Effective communication makes patients feel heard, valued, and understood. Patients need not only medical treatment but also clear explanations regarding their health condition, diagnosis, treatment, medication side effects, and follow-up care. In primary healthcare facilities, communication is particularly crucial as these services often serve as patients' first point of contact with the healthcare system. If healthcare providers can explain information using language that is easy to understand, patients will feel more at ease and have greater trust in the care provided.

Poor communication can lead to dissatisfaction, even if the medical care provided is appropriate. Patients may feel confused, neglected, or unable to ask questions. This situation can reduce satisfaction and affect patient adherence to treatment (AlOmari & Hamid, 2022). Therefore, healthcare providers' communication must be a primary focus in improving service quality. Healthcare providers need to foster open, friendly, polite, and informative interactions so that patients feel comfortable while receiving care.

Service Accessibility

Service accessibility is also a factor influencing patient satisfaction. Accessibility encompasses patients' ease in reaching healthcare facilities, distance to the facility, transportation costs, availability of service schedules, administrative convenience, and affordability of services.

Primary-level healthcare facilities should ideally be the most accessible services for the public (Wardiah et al., 2023). However, in practice, patients may still face access barriers, such as long distances, limited operating hours, long queues, or complex administrative procedures.

Patients will be more satisfied if services are easily accessible and do not require cumbersome processes. Conversely, difficult access can make patients feel uncomfortable and reduce their willingness to return for care. Accessibility is particularly critical for patients with chronic conditions, the elderly, pregnant women, and those requiring routine visits. These patient groups need easily accessible services to ensure continuous care.

Service Wait Times

Waiting time is one of the key factors that often influence patient satisfaction. Patients tend to feel dissatisfied if they have to wait too long for registration, examinations, consultations, medication pickup, or administrative services. In primary care facilities, waiting time is often a problem because patient volume is high, while the number of healthcare staff and service facilities is limited. Inefficient service workflows can also prolong waiting times.

Long wait times can create a negative perception of service quality. Patients may feel that the healthcare facility is unresponsive, disorganized, or does not value their time. Conversely, shorter wait times can enhance patient comfort and satisfaction. Improvements in wait times can be achieved through optimizing service workflows, implementing clear queuing systems, digitizing registration, assigning staff duties, and strengthening daily service management. With a more organized workflow, patients can receive care more quickly and comfortably (Muzaki et al., 2023).

Technical Competence and Consultation Quality

The technical competence of healthcare providers also plays a crucial role in shaping patient satisfaction. Technical competence relates to the ability of healthcare providers to conduct examinations, determine diagnoses, administer treatment, and provide appropriate medical recommendations. Patients will be more satisfied when they feel that healthcare providers possess strong capabilities and deliver care professionally. Patient trust in healthcare providers can increase when examinations are conducted thoroughly, diagnoses are explained clearly, and treatments are provided according to individual needs (Bernadette & Loisa, 2024). Consultation quality is also a vital component of technical competence. A good consultation is not merely judged by the duration of the session but also by the quality of interaction between the patient and the healthcare provider. Patients need the opportunity to describe their symptoms, ask questions, and understand the necessary treatment steps. Consultations that are too brief, rushed, or lacking in information can reduce patient satisfaction. Therefore, primary healthcare facilities must ensure that the consultation process is conducted in a humane, communicative, and patient-centered manner.

Physical Facilities, Cleanliness, and Environmental Comfort

Physical facilities and cleanliness are key determinants of the patient experience. Patients assess the quality of care from the moment they enter the healthcare facility. The waiting room, restroom cleanliness, comfort of treatment areas, availability of seating, ventilation, information boards, and spatial layout can influence patients' perceptions of service quality. Clean, safe, and well-organized facilities can enhance patient trust. Patients will feel more comfortable when the service environment appears clean and professional. Conversely, facilities that are unclean, overcrowded waiting rooms, or inadequate amenities can reduce patient satisfaction (Ai et al., 2022). In primary healthcare, physical facilities are often viewed as a simple aspect. However, for patients, the condition of the service environment is a crucial part of the care experience. Therefore, improving service quality must address both the physical aspects and the comfort of the facilities, not just medical aspects.

Availability of Medications and Pharmaceutical Services

The availability of medications is a key determinant of patient satisfaction, especially for patients requiring routine treatment. Patients will be more satisfied when prescribed medications are available at the healthcare facility.

Conversely, the unavailability of medications can lead to dissatisfaction because patients must purchase medications outside the facility or delay treatment. Pharmaceutical services are not limited to dispensing medications. Pharmacists or pharmacy staff must provide clear information regarding medication usage, dosage, administration guidelines, side effects, and precautions during treatment. If patients receive medications without adequate explanation, they may feel confused and lose trust in the service. This situation can also affect patient adherence to medication. Therefore, medication education and pharmaceutical communication are crucial components in enhancing satisfaction (Noviyanti & Antari, 2024).

Patient Characteristics

Patient characteristics also influence satisfaction levels. Factors such as age, gender, education level, occupation, distance from home, visit frequency, prior experience, and health condition can shape patients' expectations of the service. Patient satisfaction is subjective. Two patients may receive the same service but provide different evaluations because they have different expectations and experiences. Patients who have frequently used the service may have different evaluation standards compared to first-time patients. Patients with chronic illnesses may also have different needs because they require long-term care and repeated visits (Zhu et al., 2022). Therefore, healthcare facilities need to understand patient characteristics so that services can better align with the needs of service users.

Continuity of Care

Continuity of care is a key determinant in primary healthcare facilities. Continuity of care indicates a long-term relationship between patients and healthcare providers or the healthcare facility. Patients will be more satisfied if they feel known, understood, and consistently cared for by healthcare providers. A sustained relationship can enhance patient trust, adherence to treatment, and loyalty to the healthcare facility. Continuity of care is particularly vital in managing chronic diseases, maternal and child health services, immunization, family health, and regular monitoring of patients' conditions. If care is provided in a fragmented manner, patients may feel neglected and lack clear guidance (Maarsingh, 2024). Primary healthcare facilities need to strengthen patient record-keeping systems, follow-up schedules, service follow-through, and ongoing communication so that patients feel continuously supported.

Patient satisfaction at primary healthcare facilities is multidimensional. Satisfaction is determined not only by the success of treatment but also by the service process as experienced by the patient from the beginning to the end of the visit. The strongest and most frequently cited determinants are service quality, healthcare provider communication, accessibility, wait times, consultation quality, facility cleanliness, medication availability, and service continuity. These factors are interrelated. For example, good communication can enhance patient trust, short wait times can improve comfort, and medication availability can reinforce patients' perceptions of service effectiveness.

Efforts to improve patient satisfaction cannot be achieved by addressing just one aspect. Primary healthcare facilities need to develop a comprehensive approach, ranging from improving service workflows, enhancing healthcare workers' communication skills, strengthening pharmacy services and medication management, improving facility cleanliness, to ensuring service continuity. Patient satisfaction is the result of care that is humane, accessible, responsive, safe, and sustainable. Therefore, primary healthcare facilities must incorporate patient satisfaction into their routine service quality evaluations.

CONCLUSION

Patient satisfaction at primary care facilities is influenced by various determinants. The main determinants identified include quality of care, healthcare provider communication,

accessibility, wait times, technical competence, quality of consultation, facility cleanliness, safety of care, medication availability, pharmacy services, patient characteristics, and continuity of care. Healthcare provider communication and the quality of consultations are particularly important determinants because both are directly related to the patient's experience while receiving care. Accessibility, wait times, facility cleanliness, and medication availability are also operational factors that tangibly influence patient satisfaction. Patient satisfaction at primary healthcare facilities cannot be improved through a single aspect of service alone. Improvement efforts must be undertaken in an integrated manner through enhancing service quality, strengthening healthcare provider communication, reducing wait times, improving access, ensuring medication availability, upgrading physical facilities, and strengthening service continuity. With this approach, primary healthcare facilities can provide services that are more responsive, humane, and aligned with patients' needs.

REFERENCES

Ai, Y., Rahman, M. K., Newaz, M. S., Gazi, M. A. I., Rahaman, M. A., Mamun, A. Al, & Chen, X. (2022). Determinants of patients' satisfaction and trust toward healthcare service environment in general practice clinics. Frontiers in Psychology, 13. https://doi.org/10.3389/fpsyg.2022.856750

Al Zaidan, M., Mohammed, A. M., Mohamed Ibrahim, M. I., Al Mahmoud, M., Al Abdulla, S., & Al-Kuwari, M. G. (2022). Pharmaceutical Care Service at Primary Health Care Centers: An Insight on Patient Satisfaction. International Journal of Clinical Practice, 2022, 6170062. https://doi.org/10.1155/2022/6170062

Alhenaidi, A., Al Nadabi, W., Al-Haqan, A., & Kelender, H. (2023). Patient satisfaction of primary care services in Gulf Cooperation Council Countries: A scoping review. Journal of General and Family Medicine, 24(5), 279–287. https://doi.org/10.1002/jgf2.640

AlOmari, F., & Hamid, A. B. A. (2022). Strategies to improve patient loyalty and medication adherence in Syrian healthcare setting: The mediating role of patient satisfaction. PLoS ONE, 17(11 November), 1–27. https://doi.org/10.1371/journal.pone.0272057

Alshahrani, A. M. (2023). Predictors of Patients' Satisfaction with Primary Health Care Services in the Kingdom of Saudi Arabia: A Systematic Review. Healthcare (Switzerland) [revista en Internet] 2023 [acceso 30 de marzo de 2023]; 11(22): 1-11. Healthcare, 11, 1–11.

Bernadette, K., & Loisa, R. (2024). Pengaruh Kualitas Pelayanan Dan Komunikasi Dokter-Pasien Terhadap Kepuasa... Jurnal Manajemen Bisnis Dan Kewirausahaan, 9, 1–12.

Danduru, D., Adam, A., & Alim, A. (2025). Studi Kualitatif tentang Persepsi dan Pengalaman Pasien terhadap Pelayanan. Jurnal Pemikiran Dan Pengembangan Pembelajaran, 7(1), 60–69.

Gao, Q., Liu, M., Peng, L., Zhang, Y., Shi, Y., Teuwen, D. E., & Yi, H. (2022). Patient satisfaction and its health provider-related determinants in primary health facilities in rural China. BMC Health Services Research, 22(1), 1–12. https://doi.org/10.1186/s12913-022-08349-9

Gavurova, B., Dvorsky, J., & Popesko, B. (2021). Patient satisfaction determinants of inpatient healthcare. Int J Environ Res Public Health. [revista en Internet] 2021 [acceso 5 de octubre de 2022]; 18(21): 11337. International Journal of Environmental Research and Public Health, 18(21), 1–18.

Kagura, J., Khamisa, N., Matsena Zingoni, Z., Dulaze, N., Awuku-Larbi, Y., & Tshuma, N. (2023). Patient satisfaction with chronic disease care and its associated factors in primary health care facilities in Johannesburg, South Africa. Frontiers in Health Services, 3(May), 1–10. https://doi.org/10.3389/frhs.2023.967199

Kijima, T., Matsushita, A., Akai, K., Hamano, T., Takahashi, S., Fujiwara, K., Fujiwara, Y., Sato, M., Nabika, T., Sundquist, K., Sundquist, J., Ishibashi, Y., & Kumakura, S. (2021). Patient satisfaction and loyalty in Japanese primary care: a cross-sectional study. BMC Health Services Research, 21(1), 1–12. https://doi.org/10.1186/s12913-021-06276-9

Maarsingh, O. R. (2024). The Wall of Evidence for Continuity of Care: How Many More Bricks Do We Need? Annals of Family Medicine, 22(3), 184–186. https://doi.org/10.1370/afm.3116

Malintoi, C., Kolibu, F., & Tucuan, A. (2025). Hubungan Antara Persepsi Mutu Jasa Pelayanan Kesehatan Dengan Kepuasan Pasien Rawat Jalan Di Puskesmas Poigar Kabupaten Bolaang Mongondow. Jurnal Kesehatan Tambusai, 6(3), 11952–11961. https://doi.org/10.31004/jkt.v6i3.48548

Marzuq, N. H., & Andriani, H. (2024). Hubungan Service Quality terhadap Kepuasan Pasien di Fasilitas Pelayanan Kesehatan. Jurnal Pendidikan Tambusai, 6(2), 1299–14008.

Muzaki, F. I., Sari, W. U., Putri, I. K., Arianto, R. S., & Putra, R. S. (2023). Faktor-Faktor yang Mempengaruhi Kinerja Karyawan: Motivasi, Kepemimpinan, Lingkungan Kerja, Budaya Organisasi, dan Prestasi Kerja. Greenomika, 05(1), 52–60.

Noviyanti, A. A. V., & Antari, N. P. U. (2024). Effective Communication in Providing Medication Information and Patient Satisfaction: A Cross-sectional Survey in Denpasar. JURNAL MANAJEMEN DAN PELAYANAN FARMASI (Journal of Management and Pharmacy Practice), 14(1), 15. https://doi.org/10.22146/jmpf.86099

Ramadhani, N. A., Ramadhani, A., & Yantiningrum, D. (2025). PENGARUH PELAYANAN DENGAN PRINSIP-PRINSIP SYARIAH TERHADAP KEPUASAN PASIEN DI RUANG FARMASI PUSKESMAS KARANGDORO KOTA SEMARANG. Jurnal Imiah Nusantara, 3(April), 2025.

Wardiah, R., Guspianto, G., & Hikmah, N. (2023). Pemetaan Aksesibilitas Fasilitas Kesehatan Tingkat Pertama (FKTP) di Kelurahan Bagan Pete Kota Jambi. Jik Jurnal Ilmu Kesehatan, 7(2), 468. https://doi.org/10.33757/jik.v7i2.949

Widodo, M. R., & Prayoga, D. (2022). Kepuasan dan Loyalitas Pasien terhadap Pelayanan di Fasilitas Kesehatan Primer: Sebuah Tinjauan Literatur. JIIP - Jurnal Ilmiah Ilmu Pendidikan, 5(2), 568–572. https://doi.org/10.54371/jiip.v5i2.458

Zhu, L. H., Ying, Q. S., Yang, M., Zhu, L. F., & Chen, H. X. (2022). The Impact of Chronic Illness on the Patient Experience: Results From a Cross-Sectional Comparative Study in a Comprehensive Tertiary Hospital in China. Inquiry (United States), 59. https://doi.org/10.1177/00469580221090382