

CAUSAL RELATIONSHIP MODEL OF PATIENTS' BRAND LOYALTY WITH PRIVATE HOSPITALS LISTED ON THE STOCK EXCHANGE OF THAILAND

แบบจำลองความสัมพันธ์เชิงสาเหตุของความภักดีในแบรนด์โรงพยาบาลเอกชน
ที่จดทะเบียนในตลาดหลักทรัพย์แห่งประเทศไทย

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ABSTRACT

The knowledge of brand loyalty is applied in various service businesses, including its application in private hospital businesses. The research aims to: 1) develop a causal relationship model of brand loyalty in private hospitals registered in the Stock Exchange of Thailand market, and 2) examine the congruence of the causal relationship model of brand loyalty in private hospitals registered in the Stock Exchange of Thailand market. This study was quantitative research that utilizes a questionnaire as a research tool with reliability value of 0.987. The instrument used were online interviews through Facebook Messenger, collected from a sample group of 508 individuals who had used the services of private hospitals where managed by four major companies. Data was analyzed using descriptive analysis through a structural equation modeling approach developing a model and analyzing Pearson's correlation coefficient. The results found that: 1) the causal relationship model of brand loyalty in registered private hospitals in the Thai Stock Exchange market is statistically significant and fits the empirical data, and 2) brand identity, service quality, and patients' satisfaction have a positive relationship with brand loyalty, with coefficients of 1.00, 0.95, and 0.72, respectively. The results suggest that the ability to create value for the organization and consistently meet the expectations of customers by responding to their needs effectively.

Keywords : Private hospital, Brand loyalty, Service quality, Patients' satisfaction, Brand identity

บทคัดย่อ

องค์ความรู้ด้านความภักดีในแบรนด์นั้นถูกประยุกต์ใช้ในธุรกิจบริการ รวมไปถึงการประยุกต์ใช้ในธุรกิจโรงพยาบาลเอกชน การวิจัยนี้จึงมีวัตถุประสงค์เพื่อ 1) พัฒนาแบบจำลองความสัมพันธ์เชิงสาเหตุของความภักดีในแบรนด์โรงพยาบาลเอกชนที่จดทะเบียนในตลาดหลักทรัพย์แห่งประเทศไทย และ 2) ตรวจสอบความสอดคล้องของแบบจำลองความสัมพันธ์เชิงสาเหตุของความภักดีในแบรนด์โรงพยาบาลเอกชนที่จดทะเบียนในตลาดหลักทรัพย์แห่งประเทศไทย ซึ่งเป็นการวิจัยเชิงปริมาณ ใช้แบบสอบถามที่มีค่าความเชื่อมั่น เท่ากับ 0.987 เป็นเครื่องมือในการเก็บข้อมูลแบบออนไลน์ผ่าน Facebook Messenger กับกลุ่มตัวอย่างที่ใช้วิธีการสุ่มกลุ่มตัวอย่างแบบหลายขั้นตอน ซึ่งเคยใช้บริการโรงพยาบาลเอกชนภายใต้การบริหารงานของบริษัทมหาชนจำกัด 4 แห่ง จำนวน 508 คน และวิเคราะห์ข้อมูลโดยใช้สถิติเชิงพรรณนา โมเดลสมการโครงสร้างในการพัฒนาแบบจำลองและวิเคราะห์ความสัมพันธ์แบบเพียร์สัน ผลการวิจัยพบว่า 1) แบบจำลองความสัมพันธ์เชิงสาเหตุของความภักดีในแบรนด์โรงพยาบาลเอกชนที่จดทะเบียนในตลาดหลักทรัพย์แห่งประเทศไทย มีความสอดคล้องกับข้อมูลเชิงประจักษ์ตามเกณฑ์ที่กำหนดไว้อย่างมีนัยสำคัญทางสถิติ และ 2) อัตลักษณ์ของแบรนด์,

คุณภาพในการบริการ, ความพึงพอใจของผู้รับบริการ มีความสัมพันธ์ในทางบวกกับความภักดีในแบรนด์เท่ากับ 1.00, 0.95 และ 0.72 ตามลำดับ ซึ่งแสดงถึงความสามารถในการสร้างคุณค่าให้กับองค์กรและตอบสนองต่อความคาดหวังของผู้รับบริการได้ตรงตามความต้องการอย่างต่อเนื่องและมีประสิทธิภาพ

คำสำคัญ : โรงพยาบาลเอกชน, ความภักดีในแบรนด์, คุณภาพการบริการ, ความพึงพอใจของผู้รับบริการ, อัตลักษณ์ของแบรนด์

INTRODUCTION

The knowledge of branding and communication strategies is widely applied in various service-oriented organizations, not just limited to specific types of businesses. Brand building and communication have become necessary aspects that every organization must develop, including businesses crucial to people's health, such as hospitals (Jamshidi & Rousta, 2021). Hospitals are a fundamental factor everyone needs. It is essential for health and encompasses the significance of the country's economic aspects, particularly in Thailand's private hospital industry. This industry is considered crucial to the economy and holds importance beyond just healthcare (Desch et al., 2021; Cham et. al, 2020; Aguerrebere, 2019). According to TTB Analytics (2021) predict on the revenue of the private hospital business in Thailand will grow by 15% compared to 2022, with a market value of 3.2 trillion baht. The typical situation of reopening the country and conducting business within it is estimated to drive the growth of the Thai and international markets. The overall revenue of the private hospital business is expected to grow by 8-10% in 2023. This growth is expected to be driven by the increasing demand from the Thai market and foreign visitors.

Based on the abovementioned reasons, knowledge about brand integrity is crucial for creating a competitive advantage within the highly valued market. Private hospitals with a greater number of branches have a more incredible business opportunity compared to their competitors. However, the potential consequences could be more severe if service issues arise (Ahmed et al., 2022; Asnawi et al., 2019). For these reasons, brand integrity, especially for private hospitals under limited company (public) management, carries a higher risk of reputational damage in the eyes of investors. Therefore, the researchers are interested in studying the causal relationship model of patients' brand loyalty to private hospitals listed on the stock exchange of Thailand, with studying the relationship between Brand Identity, Service Quality, Patients' Satisfaction, and Brand Loyalty to improve the medical community's approach to patients more favorably.

RESEARCH OBJECTIVES

1. To develop the causal relationship model of patients' brand loyalty to private hospitals listed on the stock exchange of Thailand.
2. To verify the congruence of the causal relationship model of patients' brand loyalty of private hospitals listed on the stock exchange of Thailand with empirical data.

RESEARCH BENEFITS

Academic benefits

1. Discover the variable relations in the causal relationship model of patients' brand loyalty of private hospitals listed on the stock exchange of Thailand.
2. Confirmation of the relevant research's result and the application to the patients' brand loyalty of private hospitals listed on the stock exchange of Thailand.

Implementation Benefits

1. This research can help improve the medical community's approach to patients more favorably.
2. This research will state the importance of hospital branding and brand loyalty.

Literature Review :

Brand Identity: Brand Identity is something that companies create to present the essence of their brand. It signifies the most important characteristics that reflect the brand's image, ideas, and relevant concepts consumers perceive through its branding elements. It serves as the organization's first step and guides it toward success. Brand Identity also relates to other parts of the company, such as the products or services provided to customers (Huang & Lai, 2021; Kristal et al., 2020; Le et al., 2019).

Creating a Brand Identity necessitates establishing a relationship between the brand and customers. When the consumers think about it, the mentioned elements immediately evoke the type of service, the symbol or logo design, the color scheme, and the associated imagery. These elements make customers remember and differentiate the brand, giving it a competitive edge (Huang & Lai, 2021; Khosravizadeh et al., 2021; Le et al., 2019). By a review of related literature, there are four observable variables from the brand identity synthesis, which consist of 1) Brand Name (BN), 2) Logo (LG), 3) Visual Element (VE), and 4) Brand Positioning (BP).

Patients' Satisfaction: Patients' satisfaction refers to assessing and evaluating patients' experiences, perceptions, and overall contentment with the healthcare services they receive. It measures how well healthcare providers meet patients' expectations, needs, and desires regarding the quality of care and the overall healthcare experience. Patient's satisfaction is a critical aspect of healthcare delivery as it reflects the effectiveness of the healthcare system in meeting patients' requirements and preferences. Patients' satisfaction is essential not only for individual patients but also for healthcare providers and organizations. Satisfied patients are more likely to have better adherence to treatment plans, engage in positive health behaviors, and maintain long-term relationships with healthcare providers. Additionally, high levels of patients' satisfaction contribute to reputation-building, patient's loyalty, and positive word-of-mouth recommendations, ultimately benefiting the healthcare provider and the overall healthcare system (Cham, Lim, & Sigala, 2022; Odoom, Narteh, & Odoom, 2021). It encompasses various dimensions, including: 1) Outcome of Care (OC), 2) Communication (CM), 3) Convenience (CV), and 4) Cost (CO).

Service Quality: Service quality refers to the extent to which a service meets or exceeds customer expectations and requirements. It measures a service's excellence, effectiveness, and overall performance in delivering value and satisfying customer needs. Service quality is particularly relevant in industries with significant customer experiences and interactions, such as hospitality, healthcare, financial services, retail, and telecommunications. By consistently meeting and exceeding customer expectations, organizations can differentiate themselves, foster customer loyalty, and maintain a sustainable customer base (Cham, Lim, & Sigala, 2022; Elizar, Indrawati, & Syah, 2020). These dimensions include 1) Tangible (TA), 2) Reliability (REL), 3) Responsiveness (RES), 4) Assurance (AS), and 5) Empathy.

Brand Loyalty: Brand loyalty in hospitals refers to the patients consistently choosing and remaining loyal to a particular hospital or healthcare provider over time. It signifies the strong connection and trust patients have developed with a specific hospital brand, leading them to seek healthcare services from that provider repeatedly. Building brand loyalty in the hospital industry is crucial for maintaining patient retention, attracting new patients, and differentiating the hospital from competitors. Loyal patients tend to have longer-term relationships with the hospital, resulting in increased revenue and a positive reputation in the healthcare market (Kalhor et al., 2021; Heskiano et al., 2020; Angela & Adisasmito, 2019). Brand loyalty in the hospital setting is built upon several factors, including: 1) Re-visit Intention (RV), 2) Recommendation (REC), and 3) Activity Participation (AP).

Research Hypothesis

H1: Brand Identity is positively related to Brand Loyalty

H2: Service Quality is positively related to Patients' Satisfaction

H3: Service Quality is positively related to Brand Loyalty

H4: Patients' Satisfaction is positively related to Brand Loyalty

RESEARCH METHODOLOGY

This research was conducted using a quantitative research methodology, and the steps involved are as follows:

Population and Sample

This research utilizes a population of patients who used to pay a visit to the private hospitals listed on the stock exchange of Thailand. The size of the population is unknown. The process of determining the research conditions and sampling procedure is as follows:

Step 1: The Population of this research are private hospitals listed on the stock exchange of Thailand in 2023 (The Stock Exchange of Thailand, 2023). There are a total of 23 limited companies (public) as below:

Table 1 Private hospitals listed on the stock exchange of Thailand.

Limited Companies (Public)	Stock Symbol	Private Hospitals Operating
Mahachai PCL.	M-CHAI	Mahachai Hospital
Vibhavadi Hospital PCL.	VIBHA	Vibhavadi Hospital
Ramkamhaeng Hospital PLC.	RAM	Ramkamhaeng Hospital Group
Srivichai Vejvivat PLC.	VIH	Vichaivej International Hospital Group
Thonburi Healthcare Group PLC.	THG	Thonburi Hospital Group
Ekachai Medical Care PLC.	EKH	Ekachai Hospital
Ratchaphruek Hospital PLC.	RPH	Ratchaphruek Hospital
Bangkok Chain Hospital PLC.	BCH	Kasemrad Hospital Group
Ladprao General Hospital PCL.	LPH	Ladprao Hospital
Chularat Hospital PCL.	CHG	Chularat Hospital Group
Rathanee Hospital PCL.	RJH	Rathanee Hospital
Aikchol Hospital PCL.	AHC	Aikchol Hospital
Sikarin PCL.	SKR	Sikarin Hospital Group
Chiang Mai Ram Medical Business PCL.	CMR	Lanna Hospital
Bangkok Dusit Medical Services PCL.	BDMS	Bangkok Hospital Group
Bamrungrad Hospital PLC.	BH	Bamrungrad Hospital
Praram 9 Hospital PCL.	PR9	Praram 9 Hospital
Wattanapat Hospital Trang PCL.	WPH	Wattanapat Hospital Group
Principle Capital PCL.	PRINC	PRINCE Hospital Group
Krungdhon Hospital PCL.	KDH	Samithivej Thonburi Hospital
Samitivej PCL.	SVH	Samitivej Hospital Group
Nonthavej Hospital PCL.	NTV	Nonthavej Hospital
Wattana Karnpeat PCL.	NEW	Wattana Hospital Group

Source: The Stock Exchange of Thailand, 2023.

Step 2: The researchers specifically consider using purposive sampling for limited companies (public) that have multiple private hospitals operating under the same name and have 10 or more branches as follows:

Table 2 The limited companies (public) that meet the criteria.

Limited Companies (Public)	Private Hospitals Operating	Amount of branches
Bangkok Dusit Medical Services PLC.	Bangkok Hospital Group	29
Ramkamhaeng Hospital PLC.	Ramkamhaeng Hospital Group	16
Thonburi Healthcare Group PLC.	Thonburi Hospital Group	12
Bangkok Chain Hospital PLC.	Kasemrad Hospital Group	10

The researcher determined that the sample group for the research would consist of patients who pay a visit from private hospitals listed on the stock exchange of Thailand. These hospitals are managed by four limited companies (public). The sample group should include those who used to visit at least one of these hospitals, and the population size is unknown. By using Yamane's formula (Yamane, 1973) with a 5% margin of error and a 95% confidence level, the calculated sample size is 400 individuals. Next, the researcher assessed the suitability of the sample size for analyzing the Structural Equation Modeling (SEM) model, which should be 10-20 times the number of observed variables (Hair et al., 2010). There are 16 observed variables in this research, so a minimum suitable sample size of 320 individuals is needed. Therefore, the sample size of 400 individuals is appropriate for conducting the Structural Equation Modeling analysis.

Step 3: The researcher implemented proportionate stratified random sampling to select the sample groups. The process is as follows:

Table 3 Proportionate Stratified Random Sampling.

Private Hospitals Operating	Amount of Hospital	Amount of Sample
Total	67	400
Bangkok Hospital Group	29	173
Ramkamhaeng Hospital Group	16	107
Thonburi Hospital Group	12	80
Kasemrad Hospital Group	10	67

Research Instrument

The questionnaires were conducted using the Likert Rating Scale with 5 levels of measurement in a total of 48 questions. The questions were divided into categories, including 4 questions about general information which were nominal and ordinal scales, 9 questions about brand identity, 15 questions about patients' satisfaction, 16 questions about service quality, and 8 questions about brand loyalty.

The questionnaire was evaluated for content validity by examining the Index of item-objective congruence (IOC) through the assessment of 3 qualified experts. The result found that all questions met the criteria with an average score between 0.852-0.985, which higher than 0.70 and showed that the question was relevant to the topic (Sungthong, 2023). Then, the questionnaire was tested on a non-sample group of 30 scholars to determine the reliability using Cronbach's alpha coefficient. The reliability score was found to be 0.987, which higher than 0.70 is considered acceptable (Hair et al., 2010).

This research has been certified as ethical by the Human Research Ethics Committee of the Regional Network, Sripatum University (Khon Kaen campus). It has been certified as compliant with DPE. No. SPUIRB-2023-009.

Data Collecting

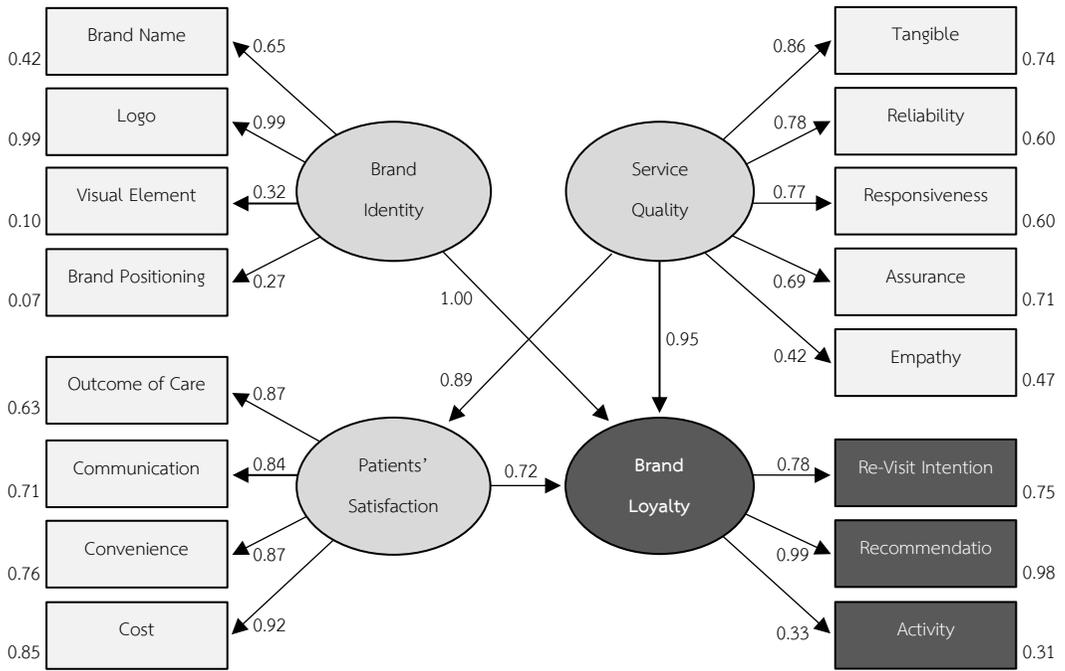
Prepare the questionnaire in an online format (Google form) and distribute it to social network groups expected to include the sample group in the research. The sample group consists of patients who pay a visit from private hospitals listed on the stock exchange of Thailand, managed by four specified companies. The screening question used in the questionnaire is: "Are you a patient who pays a visit from these private hospitals as follows?" (If the response is "Never used the specified hospitals," the survey ends). Data was collected by using an online questionnaire via Google Forms, which were distributed through Facebook Messenger in Facebook Groups that relate to the sample interest.

Statistics Analysis

Validate and check the completeness of the collected data, then analyze it using descriptive statistics (Number and Percentage), Pearson correlation for variable relationships, confirmatory factor analysis (CFA) for component analysis, path analysis for linear relationships, and structural equation modeling (SEM) for model analysis. For the assessing criteria of the goodness of fit, the researcher determine $p\text{-value} > 0.05$ (Hair et al., 2010), $CMIN/df: \chi^2/df = 1 < C^2/df < 2$, Goodness of Fit Index (GFI) > 0.90 , Adjusted Goodness Fit Index (AGFI) > 0.90 , Approximation (RMSEA) < 0.06 , and Comparative Fit Index (CFI) > 0.90 (Hair et al., 2019).

RESEARCH RESULTS

569 responses were received, of which 61 were incomplete, resulting in 508 complete questionnaires. Thus, the response rate for this study is considered acceptable. The sample group that responded to the questionnaire consisted of 508 individuals. They were divided as follows: Bangkok Hospital Group with 211 people, or 41.5%; Ramkamhaeng Hospital Group with 124 people, or 24.4%; Thonburi Hospital Group with 97 people, or 19%; and Kasemrad Hospital Group with 76 people, or 14.9%. Regarding gender, there were 287 females, or 56.4%; 199 males, or 39.1%; and 22 respondents who chose not to specify their gender or 4.3%. According to age, the most respondents' age was 167, or 32.8% of 31 – 40 years; followed by 124, or 24.4% of 41 – 50 years; 98, or 19.3% of 20 – 30 years; 87, or 17.1% of 51 – 60 years; and 32, or 6.3% of age which more than 60 years. For income, most respondents' income was 201, or 39.5% of 80,000 – 100,000 Baht, followed by 146, or 28.7% of respondents' income more than 100,000 Baht; 98, or 19.2% of 60,000 – 80,000 Baht; 35, or 6.8% of 40,000 – 60,000 Baht; 20, or 3.9% of 20,000 – 40,000 Baht; and 8, or 1.5% of respondents' income less than 20,000 Baht.



Chi-square=61.142, df=39, p=0.062, CMIN/df=1.568, GFI=0.922, AGFI=0.938, RMSEA=0.034, CFI=0.961

Figure 1 Causal Relationship Model of Patients' Brand Loyalty of Private Hospitals Listed on The Stock Exchange of Thailand

Table 4 Correlations

Hypothesis	Correlation	Estimate	S.E.	C.R.	p
H1: Brand Identity is positively related to Brand Loyalty	1.00	1.063	0.042	25.237	***
H2: Service Quality is positively related to Patients' Satisfaction	0.89	1.003	0.006	179.959	***
H3: Patients' Satisfaction is positively related to Brand Loyalty	0.72	0.025	0.017	1.490	***
H4: Service Quality is positively related to Brand Loyalty	0.95	0.027	0.017	1.629	***

*** p<0.01

Table 5 The criteria for assessing the goodness of fit index of the model.

Index	Criteria	Results
p-value	p>0.05	0.062
CMIN/df: χ^2/df	$1 < C^2/df < 2$	1.568
Goodness of Fit Index (GFI)	>0.90	0.922
Adjusted Goodness Fit Index (AGFI)	>0.90	0.938
Approximation (RMSEA)	<0.06	0.034
Comparative Fit Index (CFI)	>0.90	0.961

Figure 1 presents the statistical results of the correlation analysis, which accept all research hypotheses. In the H1 test, it was found that Brand Identity has a positive correlation with Brand Loyalty, with a correlation coefficient of 1.00. In the H2 test, it was found that Service Quality has a positive correlation with Patients' Satisfaction, with a correlation coefficient of 0.89. In the H3 test, it was found that Service Quality has a positive correlation with Brand Loyalty, with a correlation coefficient of 0.95. Lastly, in the H4 test, it was found that Patients' Satisfaction has a positive correlation with Brand Loyalty, with a correlation coefficient of 0.72 at a significant p -value <0.01 .

According to the observed variables of The Brand Identity factor, statistically significant values range from 0.07 to 0.99. Logo has the highest impact on Brand Identity, followed by Brand Name, Visual Element, and Brand Positioning. Moving on to the observed variables of The Service Quality factor, statistically significant values range from 0.47 to 0.74. Tangible has the highest impact on Service Quality, followed by Reliability, Responsiveness, Assurance, Empathy, and Respectively. As for the observed variables of the Patients' Satisfaction factor, statistically significant values range from 0.63 to 0.85. Cost has the highest impact on Patients' Satisfaction, followed by Outcome of Care, Convenience, Communication, and Respectively. Finally, the observed variables of The Brand Loyalty factor have statistically significant values ranging from 0.31 to 0.98. Recommendation has the highest impact on Brand Loyalty, followed by Re-visit Intention, and Activity Participation, in that order. The statistical summary of the hypothesis testing for H1 to H4 is presented in Table 4.

The Goodness of Fit test in Figure 1 indicates an acceptable level of fit for the SEM model that meets the criteria presented in Table 5.

DISCUSSION

The Causal Relationship Model of Patients' Brand Loyalty of Private Hospitals Listed on The Stock Exchange of Thailand is consistent with the empirical data, as evidenced by statistical significance based on the specified criteria. According to testing the goodness of fit of SEM, the result showed that Chi-square=61.142, $df=39$, $p=0.062$, CMIN/ $df=1.568$, GFI=0.922, AGFI=0.938, RMSEA=0.034, CFI=0.961 The above result aligns with the research conducted by Zhang et al. (2021), Limbu, Pham, and Mann (2020), and Dwiputri (2019). Among these elements, the brand name strongly impacts brand identity, especially in the private hospital context. The brand name establishes a standard for providing services to patients under the same name, akin to a promise to deliver a consistent service experience across all branches, corresponding to the studies conducted by Huang and Lai (2021). Follow by Logo, also significantly impacts a brand identity by serving as a visual representation of its identity and facilitating differentiation simultaneously, which corresponds to Khosravizadeh et al. (2021) and Limbu, Pham, and Mann (2020). However, Due to the requirement of using the red cross symbol as part of the logo for hospitals, the design of the logo may need to incorporate other elements to create differentiation. This may include visual elements such as colors, font, patterns, and brand positioning, which also have an influence, albeit to a lesser extent.

As the result of the second hypothesis testing, Service quality significantly impacts patient satisfaction. When healthcare providers deliver high-quality services, it positively affects patients' overall experience and their perception of the care they receive. Siripipatthanakul and Sixl-Daniell (2021) and Cham et al. (2020). Moreover, the tangible is the most impact factor that corresponds to the study of Wulur, Militina, and Achmad (2020) and Simanjorang et al. (2019). Tangibles are physical and visible aspects of the healthcare service environment that can impact the perception of service quality. Second, Sukawati (2021) showed that reliability ensures that healthcare services are delivered consistently and uniformly to all patients. Patients expect consistent levels of quality and standards across different healthcare encounters. Third, responsiveness refers to the willingness and ability of healthcare providers to respond to patient needs, concerns, and inquiries promptly and effectively. (Sukawati, 2021). This is followed by assurance and empathy, two critical factors that significantly impact service quality in healthcare. Assurance builds confidence and trust in healthcare providers' expertise and communication, while empathy creates a compassionate and patient-centered care environment (Siripipatthanakul & Sixl-Daniell, 2021).

Patients' satisfaction is closely linked to brand loyalty from the third hypothesis testing. The outcome of care, communication, convenience, and cost are positive experiences with healthcare providers. Hospitals prioritizing patient satisfaction and continuously striving to improve the patient experience are more likely to build and maintain patient loyalty over time. The reason why the cost is a more related factor to patients' satisfaction than the outcome of care, communication, or convenience can be analyzed by the private hospital context; patients often assess the value they receive concerning the cost they pay for healthcare services. If they perceive that the cost is justified by the quality and effectiveness of the care they receive, it can positively influence their satisfaction. On the other hand, if patients feel that the cost outweighs the perceived value or that they are not receiving fair value for the money spent, it can negatively impact their satisfaction. These reasons align with the research conducted by Cham, Lim, and Sigala (2022) and Sukawati (2021).

Finally, the last hypothesis testing shows that service quality is directly related to brand loyalty, which can explain why customers receiving high-quality service influences their perceptions of brand loyalty. According to Saranya et al. (2022) and Zarei and Maleki (2019) research, customers who receive excellent service are likelier to recommend the brand to others. Positive word-of-mouth referrals can significantly influence brand loyalty, as potential customers trust recommendations from friends, family, or online reviews. Moreover, Tangible (the most subfactor refers to the physical aspects of service quality, such as the appearance of facilities, equipment, or the tangible elements of a service encounter. It also includes cleanliness, aesthetics, and the overall physical environment.

SUGGESTIONS

1. Future research should focus on the different contexts of healthcare providers, such as the dimension of the hospital sizes, which are divided by the number of active beds (small, medium, large), the extent of the categories (public hospitals, regional hospitals, community hospitals, Sub-district Health Promoting Hospitals, Etc.), and the dimension of stakeholders (administrators, doctors, nurses, staff, health insurance companies, Etc.).

2. In more depth and details of the results, future research can use mixed methodologies by combining qualitative research for the new variable findings.

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