

THE ROLE OF JOB CHARACTERISTICS AND SERVICE QUALITY ON CUSTOMER SATISFACTION OF NURSING CARE IN CHINA

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ABSTRACT

This particular article seeks to take a look at job characteristics on service quality of nursing care working in hospitals of China. Service quality has been receiving a lot of attention by healthcare organisations due to increasing competition. For most corporate hospitals superior quality is at the core of their business strategy. Quality and care are the primary factors which differentiate one healthcare institution from another. Service quality provides an excellent opportunity to meet or exceed patient expectations regarding the overall service experience. In the part of job characteristics, there's a substantial direct effect of a) job characteristics on employee involvement and b) employee involvement on service quality.

Keywords: Job characteristics, employee involvement, service quality of nursing care.

INTRODUCTION

1.1 Background

The main aspect of nursing is caring. Quality of caring need to be maintained throughout the provision of nursing care. Evaluation of service quality and patient satisfaction should be an ongoing process for improving the quality of patient care. (Mohebifar et al., 2016). Researchers around the world found association between patient satisfaction and quality of patient care thus patient satisfaction is a key feature evaluating quality of nursing care (Peprah and Atarah, 2014; Chan et al., 2015). Reduction of patient satisfaction is a result of nurses who do not consider the quality of caring (Aiken et al., 2018). From research of E.T. Jagoda,

E.A.K.K. Edirisinghe & M.K.D.L. Meegoda found that evaluation of service quality and patient satisfaction should be an ongoing process for improving the quality of patient care. Quality of caring behaviour significantly impact on patient satisfaction. Jean Watson's theory of care, bedside handover, information provision to the patients, empathetic approach and patients' awareness on ideal nursing care are recommended to further increase quality and satisfaction. Area of culturally appropriate therapeutic touch is recommended for future research.

For Sweta D'Cunha, Sucharita Suresh (2015) found that Quality is what customer wants. In other words, quality is the measure of customer satisfaction. Customer focussed quality management is one of the most important ingredients of successful organisations because the customers are the ultimate judges of service quality. In the healthcare industry the patient perception of service quality positively influences patient satisfaction. When a gap exists between expectations & perceptions of quality attributes and outcomes, dissatisfaction

follows. When expectations are met by service performance, patients are satisfied. When performance exceeds expectations, there is delight with the service quality. It is evident that healthcare providers need to be aware of how patients perceive their quality of care. In identifying patient perceptions the primary indicator used to evaluate quality of care is patient satisfaction.

Service quality provides an excellent opportunity to meet or exceed patient expectations regarding the overall service experience. An organisation generating services requires to measure the quality of service offered to the customer. This enables them to identify the errors and to follow-up corrective measures and focus on specific areas for improvement. So the identification and measurement of quality dimensions is necessary for patient satisfaction and continuous improvement. Hence the administrators should collect data for patient satisfaction in several ways like discharge interviews, patient complaints on service provided, and periodic surveys for knowing patients' expectations on service.

1.2 Research Questions

- 1) What is the level of job characteristics, service quality, and customer satisfaction in China?
- 2) What is the role of the nature and service quality influencing on customer satisfaction of nursing care in China?

1.3 Research Objectives

- 1) To describe the level of job characteristics, and service quality on customer satisfaction in China.
- 2) To investigate the effects of job characteristics and service quality on customer satisfaction of nursing care in China.

1.4 Research Hypothesis

- 1) Job characteristics in nursing care have a positive effect on customer satisfaction in China.
- 2) Service quality have a positive effect on customer satisfaction in China.

LITERATURE REVIEW

2.1 Service Quality Dimensions

The interest to conduct studies on service quality has been raising since the last decades. The growth of studies on this matter has been considered slower than the ones on product quality. Measurements on quality product are considered advanced, even in the early 1980, a massive implementation of total quality management (TQM) and any other measurements started. However, studies on service quality have just started to adjust in only particular field. As a part of economic development, service sectors also grow rapidly lately. This development demands exact measurement to evaluate and control the service quality (Seth et al., 2005). Studies on the service quality was initiated by a study conducted by Parasuraman et al. (1988) that investigated the quality service of appliance repair and maintenance, retail banking, securities brokerage, long-distance telephone and credit cards. In this study, five dimensions

to measure service quality are proposed. The dimensions consist of tangibility, responsiveness, assurance, reliability and empathy. The five dimensions have been generally implemented in almost any kind of service providers. Carman (1990) suggested several modifications on the five dimensions of service quality in various industries. For instance, in the hospitality industry, a modification called DINESERV is being implemented, which is often applied in restaurant service (Kim, 2011; Stevens et al., 1995). Meanwhile, some researchers of education field still apply the five dimensions proposed by (Parasuraman et al., 1988) as seen in several studies conducted by Afridi et al. (2016), Kanakana (2014), Mansori et al. (2014) and Yousapronpaiboon (2014). The concept of service quality proposed by Parasuraman et al. (1988) has inspired other researchers to investigate this concept in various fields of service. According to Singh (2018), quality measurement of Indian commercial hospitals, using a SERVAQUAL framework, is relevant to the present-day context in the healthcare sector.

Service quality research and its influence on important organizational objectives has been a topic of inquiry over the past few decades in both general management literature (e.g., Slatten, Svensson, & Svaeri, 2011) and within sport settings (e.g., Ko & Pastore, 2005; Yu et al., 2014). From a customer behavior perspective, service quality has been linked to positive organizational outcomes such as purchase intention (Cheung & Woo, 2016), brand loyalty (Yoshida, 2017), and overall consumer satisfaction (Shonk & Chelladurai, 2008). In the organizationally focused perspective, scholars have examined how customers' views on service quality affect employee and managerial behaviors such as turnover intention, job satisfaction, and organizational commitment (MacIntosh & Doherty, 2010). Within service quality studies in the sport context, scholars generally explore the relationship with customer outcomes in team-based sport settings, both professional and intercollegiate (Kim & Trail, 2011). One of the primary reasons for examining customer-focused service quality stems from the idea that customers are the better judge of the overall service experience. Considering that service quality is based heavily on the interaction between the organization and the client (Chelladurai & Chang, 2000), this trend is sensible. However, understanding perceptions of service quality from within the organization (i.e., the frontline employees and customer contact staff) is an area that has been under researched. Previous research has covered service quality from the consumer's point of view, and this research has been applied to several outcome variables such as purchase intention, retention, and loyalty (Cheung & Woo, 2016).

Recently, however, researchers in service-related fields have begun to further explore how employee training influences service quality (Dhar, 2015; Slatten et al., 2011). Within sport, prior research indicates that perceptions of frontline employees are related to several outcomes of interest for sport organizations (Martinez, Miller, & Koo, 2016). Therefore, it is prudent to explore service quality, and its related antecedents and outcomes, from the employee perspective.

Quality of service is a worldwide concern of medical institutions. Healthcare structures have created, the standard of service offered by nurses has turned into a main concern for the health and nursing management service system. The caliber of nursing service is exclusively associated with patient safety as well as patient satisfaction. Patient problems is recognized as root cause of worldwide health issues, around 42.7 million unfavorable situations are faced by individuals across the globe (Dong et al., 2020). Thus, enhancing the quality of nursing service is able to have a significant influence on global wellness. The main issue for

exploration on the caliber of nursing service will be the level to which medical service delivery system impacts nursing service quality. The service quality of nurses in medical structures will be the crucial job consequence. An evaluation of patients' perceptions of service quality of nurses determined a selection of common themes which could be good at improving the quality of nursing service (Mauno, Ruokolainen, Kinnunen, & De Bloom, 2016). Further, they found a considerable favorable relation among independent nursing quality indicators and very subjective assessments of nursing service quality. Hashish (2017) discovered that nurses' perceptions of great nursing service quality were related to a reduced chance of mortality along with other negative outcomes. There has been continuous research to identify the key dimensions of service quality in the hospital industry, and to measure customer satisfaction. However, problems inherent in identifying quality attributes and measuring intangible services continue to pose a challenge for health care administrators as well as academicians. It is critical, for successful implementation of quality initiatives, to have a comprehensive understanding of what constitutes quality in health care services.

2.2 The job characteristics model (JCM)

The job characteristics model, designed by Hackman and Oldham in 1975 and they expanded the

skill variety	<i>Skill Variety</i> : The degree to which a job requires various activities, requiring the worker to develop a variety of skills and talents. Jobholders can experience more meaningfulness in jobs that require several different skills and abilities than when the jobs are elementary and routine
task identity	The degree to which the job requires the jobholders to identify and complete a workpiece with a visible outcome. Workers experience more meaningfulness in a job when they are involved in the entire process rather than just being responsible for a part of the work
task significance,	The degree to which the job affects other people's lives. The influence can be either in the immediate organization or in the external environment. Employees feel more meaningfulness in a job that substantially improves either psychological or physical well-being of others than a job that has limited effect on anyone else.
autonomy	The degree to which the job provides the employee with significant freedom, independence, and discretion to plan out the work and determine the procedures in the job. For jobs with a high level of autonomy, the outcomes of the work depend on the workers' own efforts, initiatives, and decisions; rather than on the instructions from a manager or a manual of job procedures. In such cases, the jobholders experience greater personal responsibility for their own successes and failures at work

feedback.	The degree to which the worker has knowledge of results. This is clear, specific, detailed, actionable information about the effectiveness of his or her job performance. When workers receive clear, actionable information about their work performance, they have better overall knowledge of the effect of their work activities, and what specific actions they need to take (if any) to improve their productivity
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theory in 1980, is based on the idea that the task itself is key to employee motivation. Specifically, a boring and monotonous job stifles motivation to perform well, whereas a challenging job enhances motivation. Variety, autonomy and decision authority are three ways of adding challenge to a job. Job enrichment and job rotation are the two ways of adding variety and challenge (Sabra, 2020). This motivational procedure depends on 5 key dimensions, including task identity, autonomy, task significance, skill variety, and feedback. Job characteristics are a helpful sign of job structure dysfunction, which may deepen our comprehension of the emotional perceptions of nurses' job experience (Sabra, 2020). The job characteristics model is useful because managers and human resources professionals can use it to enrich their workplaces. They can use the JCM to help their employees to tailor their jobs to be more engaging, which can boost employee morale, increase productivity, improve employees' quality of work and result in other benefits. The job characteristics model specifies five core job characteristics that have a significant impact on the psychological state of employees as well as the quality of their work. These five characteristics are: task identity, task significance, skill variety, autonomy, and feedback. Table 1 : Five characteristics of job characteristics (Hackman and Oldham, 2010)

However, Job Characteristics Theory's introduction into the organizational literature, there have been many changes to the field and to work itself. Oldham and Hackman suggest that the areas more fruitful for development in work design are social motivation, job crafting, and teams. Social sources of motivation are becoming more important due to the changing nature of work in this country. More jobs are requiring higher levels of client-employee interaction, as well as increasing interdependence among employees. With this in mind, it would make sense to investigate the effect the social aspects have on affective and behavioral outcomes. While Job Characteristics Theory was mainly focused on the organization's responsibility for manipulating job characteristics to enrich jobs there has been a considerable buzz in the literature regarding job crafting. In job crafting the employee has some control over their role in the organization. Hackman and Oldham point out there are many avenues of inquiry regarding job crafting such as: what are the benefits of job crafting, are the benefits due to the job crafting process itself or the actual changes made to the job, and what are the negative effects of job crafting?. Finally, they brought up the potential research directions relevant to team work design. Specifically, they discuss the need to understand when to use work-design aimed at the individual or team level in order to increase performance, and what type of team is best suited to particular tasks (Oldham, G. R., & Hackman, J. R., 2010). Besides the concept and models utilized, the experts assessed previous research on the issue of employee effectiveness concerning the five job attributes that are skill variety, task significance, task

identity, feedback, and autonomy. Skill variety will be the example where in a job needs different things to be able to handle a complete function and entails different abilities and skills (Russell, Liggans, & Attoh, 2018).

Task Identity is the ratio at which a specific task must have the realization of an entire portion associated with a job. Job uncertainty is linked with insufficient clarity of employment scope, function, and responsibility of each team member, unclear job description, and also incoherent direction from superiors. Along with other parts of a project, job identity is seen as having an optimistic impact on the production along with typical employee efficiency (Russell et al., 2018). Task significance is discussed as the speed at which the fundamental things of the task are important on the business and also have a pertinent impact on jobs and livelihood of peers as well as those without the group (Hassan, 2014). Task significance is an important component of employment characteristics, which increases employee performance. The study blended literature in social judgments and task significance to be able to assist explain employee participation in its 2 dimensions: job and business engagement. Information was collected from 337 individuals. As an outcome, the relations between task significance with the thought social impact and worth showed the variance inside hindrance stressors as established with the moderated mediation analyses (Saks, 2019). A research on the impact of autonomy on job benefits that are work stress, employee performance, and satisfaction, with self efficacy because of the intervening variable. The descriptive analysis sought to set the effect of job satisfaction on work performance as well as career pressure on work performance (Jermittiparsert, Suan, & Kaliappen, 2019). Employees receive responses from the outcomes which result in the maintenance and construction of the jobs of theirs.

2.3 Role in Quality Improvement in Nursing

Improvement in nursing is similar to continuous quality improvement in nursing and to continuous quality improvement in healthcare overall. The terms continuous quality improvement and quality improvement are often used interchangeably in healthcare, as is the older term quality assurance. Quality improvement theory in nursing is the same as in healthcare generally.

Increasingly, healthcare organizations are creating positions and hiring professionals including nurses — who are focused only on healthcare and nursing quality improvement. An increasingly common job title is quality improvement management nurse. The person in that job does the following: 1) Combines expertise in healthcare, quality improvement, and management to lead systemic improvements in policies and processes 2) Continually assesses performance data and trends in healthcare metrics 3) Continually works with other organization managers to ensure that problems in healthcare processes are identified and fixed 4) Ensures the organization complies with requirements from state and federal agencies and the Joint Commission, which accredits hospitals 5) Helps design and execute training programs 6) Provides feedback and recommendations for improvement to an organization's top leader 7) Solicits and collects feedback from patients, employees, and members of the public. (Kate Eby, 2019) Healthcare professionals, including nurses, play important roles in quality improvement in nursing. Sometimes, these healthcare professionals come together as organized groups to shape the role of nursing in the healthcare industry. Here are some important titles and groups: (Kate Eby, 2019).

Nurse Executive: This person sets up the structure and ensures that resources are available for quality improvement work.

Nurse Manager: A nurse manager oversees staff nurses and can implement a structure to encourage quality improvement.

Quality Assurance Coordinator: This person assists in executing quality improvement processes and collects data to show that the organization meets the requirements set out by insurers and regulatory agencies.

Quality Circles, Quality Councils, and Quality Improvement Forums: These groups help coordinate effective quality improvement work.

Quality Improvement Nursing Teams: These teams focus on specific ways in which professionals can improve nursing and healthcare in a facility.

Staff Nurse: This person has the most direct role in delivering healthcare to patients and seeing where care isn't as effective as it should be.

RESEARCH METHODOLOGY

This research study aims:

1) To describe the level of job characteristics, and service quality on customer satisfaction in China

2) To determine the relationships between the role of job characteristics and service quality on customer satisfaction of nursing care in China. This paper adopts a quantitative research method. The specific details are as follows:

3.1 Research Design

3.2 Population and samples

3.1 Research Design

The purpose of this part is to offer an overview of the project, outline the procedures that will be utilised to collect data and analyse it, and define the research methodologies that will be used to conduct the study itself. In the first section, we will go over the processes that the researcher used in order to gather data from the respondents. The respondents and sampling procedures component is the second one, and it is broken down into four sub-sections as follows: the population of focus, the sampling technique, the sample size, and the number of samples. The techniques that were utilised to gather data are broken out in further depth in Section 3, along with the questionnaire that the researcher developed specifically for this study. The pretest procedure, which is discussed in the fourth part, is utilised to establish the degree to which the independent components may be depended upon. The collection of data is discussed in the fifth section, and in the final section, appropriate statistical methods for processing data in order to get desirable findings are presented.

This research is an example of survey research that makes use of the quantitative method. According to Zikmund et al. (2010), quantitative research is a type of business research that aims to address research objectives through empirical assessments that involve numerical measurement. Quantitative research is recognised for being able to stand on its own, with the logic being that it requires less interpretation overall. With this information in mind, the researcher decided to conduct this study using quantitative research because it is the best

method for the study's ideal nature, which is for an empirical assessment to be made based on finding out the extent to which the elderly and their families who utilise nursing care services in private health care in Beijing are associated with job characteristics and customer satisfaction, with a strong emphasis placed on programmes offered by the private health care in Beijing in question. On the other hand, surveys are another method that can be used for data collection and can also be used to gauge the level of response from the population that is being studied.

According to Zikmund et al. (2010), a survey is a method of data collection that can involve either verbal or nonverbal questioning. Due to the restrictions imposed by COVID-19, the survey will consist of a number of questions that will be formulated using a Likert scale that has five points, and these questions will be presented to the population in question via the Internet. After that, the questions pertaining to the programme experience and the research variables, such as the role of job characteristics in nursing care and service quality on customer satisfaction in China, will be posed to the respondents, and they will be asked to provide their responses. The collected data will be used later to determine the degree to which respondents agree or disagree with the survey questions.

The researcher used a variety of research approaches in order to complete this chapter's work. The first is the quantitative method, which uses questionnaires to collect empirical data for a causal relationship study. Both methodologies are referred to as "research methodologies." The following is a list of the specifics: 1) To describe the level of job characteristics and service quality affecting customer satisfaction in China. 2) To investigate the effects of job characteristics in nursing care and service quality on customer satisfaction in China.

3.2 Population and Sample

Definition of Population in as far as research study is concerned can best be defined as the large collection of individuals that have similar characteristics or features (Greener, 2008). The research comprised of the private health care in Beijing. The target respondents were both male and female of patient's family or service users in private health care in Beijing.

The next sections describe the overall population and the methods used to choose a representative sample.

Healthcare providers in Beijing are the focus of this study's population.

Table 3.1 Beijing's healthcare services

Healthcare service
HPV, neonatal, and other immunizations
Beijing dentists and ophthalmologists
China offers travel, flu, neonatal, and HPV immunizations
Beijing maternity
Psychotherapy
STD tests
Specific medical insurance clinics
Beijing dentists and ophthalmologists

Sample sampling

The unit of study is the Beijing healthcare service and the patient's family or service users. Subjects were chosen at random for the study. The elements are chosen by the researcher using probability theory and basic random sampling from a lottery technique. If the population size is unknown, the sample size can be estimated using the population proportion. A population proportion is a parameter that defines a percentage value connected with a population. The following formula can be used to determine the size of the sample needed to make a statistically reliable estimate of a proportion with 95% certainty.

$$n = \frac{(1.96^2)pq}{d^2}$$

The formulas for the minimum sample size (n), the proportion of the population (p), the frequency (q), and the accuracy (d) can be written as $n = p q d$. If you don't know what percentage of the population you're dealing with, you can choose the value $p = 0.5$, which represents maximum heterogeneity (a 50/50 split). For every acceptable percentage of error, there is a desired degree of precision, denoted by d . For instance, if $d = 0.02$, then the margin of error would be 2%. Cochran's Method (Cochran, 1977).

If the population size is unknown but a lot, the population proportion is known

$$n = \frac{p(1 - p)z^2}{e^2}$$

$$n = \frac{(0.1)(1-0.1)(2.58)^2}{(0.05)^2} = 400$$

n = sample size

p = the population proportion ($p = 0.1$)

e = acceptable sampling error ($e = 0.05$)

z = z value at reliability level or significance level.

- Reliability level 95% or significance level 0.05; $z = 1.96$

- Reliability level 99% or significance level 0.01; $z = 2.58$

Table 3.2 Sample in Healthcare service in Beijing and patient's family and service users

Healthcare service	Size of sample: patient's family	
China vaccinations: travel, flu, infant, HPV, etc.	50	50
STD labs	50	50
Private insurers	50	50
Checkup clinics	50	50
Total	200	200

RESEARCH RESULTS

The purpose of this research is to: 1) describe the impact of job characteristics and service quality on customer satisfaction in China. 2) To investigate the effects of job characteristics in nursing care and service quality on customer satisfaction in China. This study uses questionnaires to collect data and conducts quantitative research. The researcher chose a sample for the study that included patients' families and service consumers in Beijing's private health care system. This study chose a probability sampling method for the sampling process by using analysis units from seven different health service areas. Next, the researcher used a simple random sampling method by holding a lottery for half of the total four locations that would be used in this study. Finally, they determined the sample size by determining the proportion of the total population that consisted of families and service visitors during the months of September and October, 2022.

Quantitative research methodology and a single round of primary data collection were used to investigate the overarching research topic addressed in this study. The study's quantitative approach findings, data analysis, and data interpretation are presented and explained to address research questions.

The method for determining the sample size is Cochran's Method (Cochran, 1977). Descriptive statistics for analysing data are frequency, percentage, mean, and standard deviation, and inferential statistics are multiple regression analysis. The specific details are as follows:

Symbols used in data analysis

n	=	Number of samples
\bar{X}	=	Sample mean
S.D.	=	Standard Deviation
t	=	The statistical values used in t – Distribution
F-Ratio	=	The statistical ratio used in F – Distribution
df	=	Degree of Freedom
r	=	Correlation coefficient
R ²	=	Multiple prediction coefficients
Beta (β)	=	Regression coefficients in standard score form
p-value	=	Probability for statistical significance
Tolerance	=	The statistical value used for linear poly

	correlation	
VIF	=	statistical value used
		for linear poly correlation
S.E.	=	Forecast Standard Toleran
X1	=	Job characteristic nursing
X2	=	Service quality
Y	=	Customer satisfaction

There was a total of 400 respondents who took part in this study, as shown in the table. There were only 250 female responses, or 62.5 % of the total. There were 150 male out of 400 total individuals, or 37.5% of the population.

4.1 Opinion-level results of job characteristic nursing care, service quality, customer satisfaction

According to the research objectives, the level of job characteristics and service quality on customer satisfaction in China should be described. This is a discourse based on descriptive statistical analysis. Each assessed construct is explained as follows: (5 = Very satisfied; 4 = Moderately satisfied; 3= Neither satisfied nor dissatisfied; 2 = Moderately dissatisfied; 1 = Very dissatisfied.

4.1.1 acteristics of nursing care

Table 4.1 Overall mean score of Job characteristics of nursing care
N= 400

No	Job characteristics of nursing care	Mean	SD	
1	Performs the roles of caretaker, comforter, and rovider.	3.22	1.00	and protecting the client's rights; the lowest mean
2	Offers direct care to the customer and works to ensure their comfort.	3.00	0.82	score was
3	Exhibit concern for the customer's well-being and accept the client as a person at all times.	3.27	0.93	M=3.00 and SD=.82. Provides direct care and promotes client
4	Is a field that is engaged in the process of providing medical treatment to individuals and ommunities.	3.11	1.02	comfort had the lowest mean score.
5	Nursing requires maintaining close personal contact with the individual who is receiving care.	3.20	0.67	

4.3.2 Service Quality

No	Job characteristics of nursing care	Mean	SD
6	Ensures that the client's needs are satisfied while also defending the client's legal rights while also advocating for what is in the client's best interest.	3.52	0.86
7	Provides explanation in client's language and support clients decisions.	3.47	0.72
8	Changes should be initiated, or clients should be assisted in making changes either to themselves or to the system of care.	3.44	0.69
9	Rather of fostering the client's academic development, the emphasis is placed on assisting the client in the development of new attitudes, feelings, and behaviors	3.18	0.95
10	Motivates the client to consider alternate behaviors, become aware of the available options, and build a sense of control over their situation	3.27	3.27
Overall		3.27	1.09

4.1.2 vice Quality

Table 4.2 Overall Mean Score of Service Quality

No	Service quality	Mean	SD
	Reliability		
1	Seen according to expectations	3.38	.85
2	Got the problem solved	3.28	1.14
	Responsiveness		
3	Healthcare nursing staff gives prompt attention	3.64	.84
4	Healthcare nursing staff does not keep patient waiting	3.56	.82
	Assurance		
5	Healthcare nursing is trustworthy	3.47	.83
6	Healthcare nursing are courteous	3.43	.77
	Empathy		
7	Staff give individual attention	3.21	.82
8	Healthcare nursing staff are caring	3.40	.82
	Tangibility		
9	Healthcare nursing staff use standard instruments	3.28	1.14
10	Prescription given is easy to understand	3.47	.83

No	Service quality	Mean	SD
11	Office is clean	3.37	.80
Overall		3.41	.87

According to the service quality tables, the total mean score for service quality was $M = 3.41$, and the standard deviation was 0.87. $M = 3.64$, with a standard deviation of 0.84, was the highest possible mean score. The category with the highest mean score was "healthcare nursing staff gives prompt attention," with a score of $M = 3.56$ and a standard deviation of 0.82. The category with the lowest mean score was "healthcare nursing staff does not keep patient waiting," with a score of $M = 3.21$ and a standard deviation of 0.82. The staff members who gave each customer special attention received the lowest mean score

4.1.3 Customer Satisfaction

Table 4.3 Overall Mean Score of Customer Satisfaction

No	Service quality	Mean	SD
1	Nurses explained tests, treatments, what to expect	4.18	.82
2	Nurses' ability to comfort and reassure	3.88	.82
3	Nurses described test and surgery preparation	4.14	.84
4	Nurses' willingness to answer, questions	3.64	.84
5	Nurses notified them of condition and needs	3.78	.84
6	The Daily Routine of the Nurses: they changed their schedules to demands	3.88	.82
7	Courtesy and respect were given; friendliness and compassion	3.88	.82
8	Nursing staff responded quickly	3.61	.73
9	Nurses ask what's essential and provide options	3.60	.72
10	Coordination of Care After Discharge: Nurses' attempts to provide for needs after left the hospital	3.88	.82
Overall		3.54	.80

According to data on customer happiness, the average rating is 3.84 out of 5, with a standard deviation of 0.80. The maximum average was $M = 4.18$ with a standard deviation of 0.82. Information: how clear and thorough the nurses' explanations were on tests, treatments, and what to expect received the highest mean score ($M = 3.60$ and $SD = 72$). As a whole, the recognition of opinions category had the lowest mean score.

4.2 Research hypothesis test results

Multiple Regression analysis

From research objective: to determine the relationships between the role of job characteristics of nursing care and service quality on customer satisfaction in China.

Table 4.4 Analysis of the effect of the role of job characteristics of nursing care and service quality toward customer satisfaction in China

Elements	B	SE b	Beta	t	Sig.
(Constant)	22.188	2.922	-	7.594	.000
Skill variety	.277	.168	.052	1.645	.101
Task identity and significance	1.291	.080	.779	16.179	.000**
Autonomy	.108	.080	.059	1.355	.176
Feedback from job itself	0.41	.114	-.015	-.361	.719

R = .812 R² = .659 Adjusted R² = .655 SE = 6.89415

Significance level .05

Table 4.4 presents a list of significant variables, which includes job characteristics of nursing care in terms of task identity and significance, respectively, at a 5% level of significance (P-value 0.05). The variables on this list are significant if the level of significance is greater than or equal to 0.05. Based on the findings of the regression model, the independent variables are responsible for explaining 65.9% (R²

=.659) of the total observed variability in customer satisfaction levels. In addition, the regression model illustrates how each of the factors influences the level of customer satisfaction. According to the findings, the characteristics of a nursing care job in terms of the relevance of tasks and their identities are good indicators of the level of pleasure experienced by customers. The fact that the P-statistics are significant (the P-value is less than 0.05) suggests that there is a connection between the dependent variable (CS) and the relevant independent variables

Table 4.5 Analysis of the effect of the role of service quality toward customer satisfaction in China

Elements	B	SE b	Beta	t	Sig.
(Constant)	6.634	1.013	-	6.547	.000
Reliability	.063	.028	.125	2.281	.023**
Responsiveness	.036	.040	.047	.914	.361
Assurance	.222	.058	.152	3.798	.000***
Empathy	.245	.028	.541	8.856	.000***
Tangibility	.015	.032	.018	.470	.639

R = .672 R² = .452 Adjusted R² = .446 SE = 2.39083

Significance level .05

Table 4.5 presents a list of significant characteristics at 5% significance (P-value 0.05) for service quality, including reliability, assurance, and empathy. According to the regression model, independent factors explain 45.2% (R² = .452) of total customer satisfaction variability. The regression model also demonstrates how variables affect customer satisfaction. Service quality in reliability, assurance, and empathy predicts customer satisfaction. P-statistics (P-value 0.05) show that the dependent variable (CS) and significant independent factors are related.

Table 4.6 Analysis of the effect of the role of job characteristics toward customer satisfaction in the part of the quality of nursing care

Elements	B	SE b	Beta	t	Sig.
(Constant)	7.478	1.260	-	58.936	.000**
Skill variety	-1.019	.949	-.337	-1.074	.283
Task identity and significance	1.063	.118	.607	8.994	.000**
Autonomy	-.362	.130	-.156	-2.781	.006**
Feedback from job itself	.222	.112	.077	1.980	.048**

R = .795 R² = .633 Adjusted R² = .623 SE = 2.87928
Significance level .05

Table 4.6 identifies a list of significant variables at 5% significance (P-value 0.05), including nursing care work qualities including task identity, autonomy, and job feedback. The regression model showed that independent factors explain 63.3 percent (R² = .633) of total customer satisfaction variability.

Table 4.7 Analysis of the effect of the role of job characteristics toward customer satisfaction in the part of improve nursing service quality

Elements	B	SE b	Beta	t	Sig.
(Constant)	4.775	.888	-	5.380	.000
Skill variety	-1.432	.668	-.692	-2.142	.033**
Task identity and significance	.166	.083	.097	1.396	.164
Autonomy	.043	.079	.031	.539	.590
Feedback from job itself	.257	.067	.143	3.844	.000**

R = .782 R² = .611 Adjusted R² = .601 SE = 2.02862
Significance level .05

Table 4.7 shows a list of significant variables, which include job characteristics of nursing care in terms of skill variety and feedback from the job itself, respectively, at the 5% level of significance (P-value 0.05). The regression model showed that 61.1% (R² = .611) of the observed variability in total customer satisfaction is explained by the independent variables. Further, the regression model shows how the individual variables affect customer satisfaction.

Table 4.8 Analysis of the effect of the role of job characteristics toward customer satisfaction in the part of quality of concern and caring

Elements	B	SE b	Beta	t	Sig.
(Constant)	17.200	2.763	-	6.224	.000
Skill variety	-.271	2.081	-.036	-.130	.896
Task identity and significance	1.689	.259	.385	6.515	.000**
Autonomy	-.902	.285	-.155	-3.163	.002**
Feedback from job itself	.136	.246	.027	.555	.579

R = .845 R² = .716 Adjusted R² = .703 SE = 6.31461
Significance level .05

Table 4.8 identifies a list of significant variables, including nursing care work qualities such as task identification, significance, and autonomy, at 5% significance (P-value 0.05). The regression model indicated that independent variables explain 71.6% (R2 =.716) of total customer satisfaction variability.

Table 4.9 Analysis of the effect of the role of service quality toward customer satisfaction in the quality of nursing care

Elements	B	SE b	Beta	t	Sig.
(Constant)					
Reliability					
Responsiveness					
Assurance					
Empathy					
Tangibility					
R =.840 R 2 = .698 Adjusted R2 = .705 SE = 1.84865					
Significance level .05					

Table 4.9, presents a list of significant characteristics, including service quality in responsiveness, assurance, empathy, and tangibility at 5% significance (P-value<0.05). The regression model indicated that independent variables explain 69.8% (R2 =.698) of total customer satisfaction variability

Table 4.10 Analysis of the effect of the role of service quality toward customer satisfaction in improve nursing service quality

Elements	B	SE b	Beta	t	Sig.
(Constant)	7.467	1.160	-	5.636	.000
Reliability	.042	.095	.016	.445	.656
Responsiveness	.222	.112	.077	1.980	.048**
Assurance	-.019	.085	-.013	-.228	.820
Empathy	.853	.151	.432	5.632	.000**
Tangibility	.882	.507	.564	1.739	.083
R =.790 R 2 = .629 Adjusted R2 = .619 SE = 2.87819					
Significance level .05					

Table 4.10 identified a list of significant variables, including responsiveness and empathy in service quality, at 5% significance (P-value 0.05). According to the regression model, independent factors explain 62.9% (R2 =.629) of total customer satisfaction variability.

Table 4.11 Analysis of the effect of the role of service quality toward customer satisfaction in quality of concern and caring

Elements	B	SE b	Beta	t	Sig.
(Constant)	4.665	.788	-	5.370	.000
Reliability	1.071	.357	1.000	2.996	
Responsiveness	.841	.107	.622	7.887	.003**
Assurance	-.494	.060	-.469	-8.242	.000**
Empathy	.460	.079	.231	5.809	.000**
Tangibility	.257	.066	.142	3.834	.000**

R = .780 R² = .610 Adjusted R² = .601 SE = 2.01862

Significance level .05

Table 4.11 displays a list of significant variables, which, at a 5% level of significance (P-value 0.05), include reliability, responsiveness, assurance, empathy, and tangibility, respectively. According to the results of the regression model, the independent variables are responsible for explaining 61% (R² = .610) of the total observed variability in customer satisfaction levels. In addition, the regression model illustrates how the various factors contribute to the overall level of customer satisfaction in terms of the quality of concern and care. Based on the findings, it appears that factors such as dependability, responsiveness, assurance, empathy, and tangibility are excellent predictors of customer satisfaction.

Based on the findings of the preceding study, it can be concluded that the overall and individual levels of employment qualities related to nursing care are moderate. According to the findings, both service quality and total customer satisfaction were on average fairly high. Furthermore, the findings revealed a significant relationship between job characteristics, service quality, and total and each component of customer satisfaction in the healthcare industry.

4.3 Analysis of the Research Questions

4.3.1 What do you think the future of healthcare will look like?

Alterations in the following five areas will have an effect on the medical industry as a whole: technology advancements in areas such as big data, biometrics, and the IoT.

There are a lot of connections between different parts of medicine, so their resources must be combined to solve the problem.

Treatments and adjustments in lifestyle, including diet and exercise, may be suggested. Select a health issue for which additional screening or testing is required. Effective, safe, person-centered, timely, equitable, integrated, and efficient health care services are essential.

4.3.2 simple was the process of scheduling an appointment with the facility?

One of the most significant responsibilities that a medical assistant is tasked with is controlling the flow of patients through a medical office or clinic. This includes making appointments for patients and ensuring that they are seen in a timely manner. The most successful medical facilities do everything in their power to show that they value the time of their patients, and one of the ways that they do this is by adhering to the appointment times that patients have scheduled for themselves.

4.3.3 happy are you with the overall cleanliness and appearance of our facilities?

When it comes to medical care, cleanliness is one of the most important considerations, and it also plays a big role as an indicator of the level of care provided. After all, the basic objectives of health care are to both stop the spread of disease and treat existing cases of illness and infection.

To guarantee that the facility always maintains a clean atmosphere that is also friendly, this should be one of the primary focuses.

The level of order and cleanliness in the workplace has a direct effect on how well and efficiently workers do their jobs.

4.3.4 How do you think you got the full care you needed from medical services and nursing care?

Although customers may be delighted with the facility as a whole, if they do not have a great experience with the member of staff who is accountable for their care, they will not return. Because getting medical care is such a personal experience, the people who give it should be friendly, trustworthy, and knowledgeable.

They need to allot a sufficient amount of time to resolving the issues that have been brought up by the patients, and they shouldn't do anything to make the patients feel uneasy.

One of the most efficient strategies to grow your patient base is to solicit recommendations from people you already know, such as relatives and family. However, if the current patients that you have aren't satisfied with their experiences at your institution as a whole, you won't be able to bring in a large number of new patients.

Every patient touchpoint (i.e., receptionist, nurse, doctor, etc.) may produce a lasting impression. Before it is too late, you should find out how patients feel about your facility by issuing a patient satisfaction survey that asks respondents whether or not they would recommend the institution to a member of their family or friend group.

Most patients at a health institution say that they would recommend it to a friend or family member. This means that the institution is probably meeting or exceeding the patients' expectations in all areas, which is the end goal.

It is common for a patient's anxiety to interfere with their capacity to remember vital pieces of therapeutic information, such as instructions for self-care. Before starting clinical treatment, it helps for practitioners to spend a few minutes getting to know their patients and building trust with them.

These healthcare providers ease their patients' concerns early in the therapy process to empower them to manage their health. Instead of looking at their computer screens or charts, medical professionals who make eye contact with patients show their concern for their well-being. All nurses must be able to do timely and appropriate holistic nursing assessments.

By using teach-back techniques and language that is not medically specific, communication can be improved, and the patient can learn more about their health condition. It is also crucial to provide patients with written documents that they can take home with them. This will help even more to ease any confusion or worry that the patients might be feeling.

One of the best ways to protect patients and make them feel at ease is to keep the whole building clean, from the reception area to the exam rooms.

Modernizing antiquated internal systems is essential in order to enhance the overall quality of care provided to patients. Even small changes to platforms for making appointments, signs and systems in waiting rooms, and nurse call buttons can have a big effect on how happy patients are.

Being prompt indicates to a patient that a practitioner respects the importance of their hectic schedule. If a business is having trouble seeing patients in a timely manner, they may need to look at how they schedule patients or see if they have enough staff.

4.3.5 According to your perspective, what components should nursing care have?

Table 4.12 In your opinion, what should the basic components of nursing care be?

Opinion	Numbers
1. Nursing cares.	79
2. Nursing is personal.	68
3. Nursing addresses human physiological, psychological, and sociological needs.	79
4. Nursing promotes individual, family, community, and national health goals as best it can.	78
5. Nursing provides personalized care to all regardless of race, creed, or socioeconomic position.	53
6. Nursing engages in ethical, legal, and political health care concerns.	36
7. Most fundamental and time-honored function	35
8. Nurtures, comforts, provides	25
9. Provides client care and comfort	43
10. Activities require understanding and sensitivity to customer needs	79
11. Care for clients and accept them as people	38
12. Helps client identify and manage difficult psychologic or social issues, strengthen interpersonal connections, and grow personally	45
13. Supports emotionally, intellectually, and psychologically	56
14. Encourages client change rather than intellectual growth.	76
15. Encourages the client to consider alternatives, realize choices, and gain control.	45
16. Involves customer concern and action to change.	65
17. Promotes client needs and rights.	45
18. Explains and supports client decisions.	46

As a top-five priority in nursing care, 1) nursing is caring; 2) nursing is concerned with services that take humans into account as physiological, psychological, and sociological organisms; 3) nursing is committed to promoting individual, family, community, and national health goals in the best way possible; 4) activities involve knowledge and sensitivity to what matters and what is important to clients; and 5) focuses on helping a client develop new attitudes, feelings, and behaviours rather than promoting.

CONCLUSION

This study investigates how job characteristics and service quality influence customer satisfaction in China. This study is quantitative, with data collected by questionnaires. This study's sample comprises 400 current customers who are either patients' relatives or service consumers in Beijing's private health care facilities. The number of samples is obtained using the formula from Cochran's Method (Cochran, 1977). Frequency, mean, standard deviation, percentage, and inferential statistics for multiple regression analysis are examples of data for descriptive statistical analysis. The following is an overview of the findings, research discussions, and recommendations:

5.1 Summary of research findings

Part 1: Summarize the results of the questionnaire quality inspection. Part 2: Summarize the results for demographic characteristics.

Part 3: Summarize opinion-level results on job characteristics and service quality influence customer satisfaction in China.

Part 4: Summarize the results of the research hypothesis test

Part 1: Summarize the results of the questionnaire quality inspection.

The scope of the research is separated into three categories: population, variables, and data methodology. The target respondents were both male and female members of the patient's family and service users in private health care in Beijing. Descriptive statistics, Anova (F-Test correlation analysis, and multiple regression were used to test the hypothesis that there is a relationship between job characteristics of nursing care and service quality in China.

Three experts in the subject used the Index of the Item-Objectives Congruence (IOC) forms to analyse the items in the questions. In conclusion, because the IOC value is more than 0.5, the query can be utilised. Customer satisfaction had the highest score of 0.879, followed by service quality at 0.867 and nursing care job characteristics at 0.857. We can observe that the overall construct reliability for all 30 factors in the measurement model is 0.926, which is more than 0.9. It's fantastic. It is recognised as acceptable.

Part 2: Summarize the results for demographic characteristics.

The goal of this study was to examine the relationships between the role of work features in nursing care jobs and the quality of service on customer satisfaction in Chinese healthcare services. According to the findings of the study, a total of 400 individuals who were either patients' families or service consumers in private health care facilities in Beijing took part in the research procedure.

There were 250 female responses, accounting for 62.5 percent of the total; respondents had a high school diploma, accounting for 37.5% of the overall population, and a bachelor's degree, accounting for 35%. the number of years of service in private health care in Beijing. The vast majority of participants (38%) have 5-6 years of experience with Beijing's private health-care system. The number of private health care service users in Beijing was split 50/50 between patients' relatives and service consumers.

Part 3: Summarize opinion-level results on job characteristics and service quality influence customer satisfaction in China.

Research objective 1: To describe the level of job characteristics, and service quality on Customer Satisfaction in China.

The highest score was $M = 3.52$ and $SD = .86$, according to job characteristic research. The highest mean score was for promoting customer needs and best practices. Service quality averaged M

$= 3.41$ and $SD = 0.87$. $M=3.64$, $SD=0.84$. Healthcare nurse personnel who deliver fast attention and do not keep patients waiting had the highest mean score ($M = 3.56$, $S.D. = 0.82$). Customer satisfaction averaged 3.84, with a standard deviation of .80. The highest score was $M=4.18$ and $SD=.82$. Information had the highest mean score because nurses explained testing, treatments, and expectations well. The second research objective is to determine the relationships between the role of nursing care job characteristics and service quality on customer satisfaction in China.

Part 4: Summarize the results of the research hypothesis test

Nursing care employment features like work identity and relevance predict client satisfaction. P-statistics (P-value 0.05) show that the dependent variable (CS) and significant independent factors are related. 65.9%. Service reliability, assurance, and empathy predict customer satisfaction (45.2%). Furthermore, at 0.05, autonomy has a statistically significant and positive effect on customer satisfaction in the quality of concern and caring for nursing care work qualities such as task identity and significance. Regression indicated 71.6%. Service quality in terms of responsiveness, assurance, empathy, and tangibility positively affects customer satisfaction in nursing care at a rate of 0.05 (69.8%). Responsiveness and empathy boost nursing service quality and customer satisfaction at 0.05. Five key nursing principles are: 1) nursing is caring; 2) nursing services take into account humans as physiological, psychological, and sociological organisms; 3) nursing promotes individual, family, community, and national health goals to the best of its ability; 4) activities involve knowledge and sensitivity to what matters and is important to clients; and 5) nursing care focuses on helping clients develop new attitudes, feelings, and behaviors. The study concluded that nursing care work qualities were modest in all dimensions. Service quality and customer satisfaction were moderate across all dimensions. Job qualities and service quality were also substantially associated with healthcare consumer satisfaction across all dimensions.



Figure 5.1 Five key nursing principles Source: by Researcher

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