THE EFFECT OF HEALTH WORKERS' COMPETENCY AND BRAND IMAGE ON OUTPATIENT PATIENTS' REVISIT INTEREST MEDIATED BY PATIENT TRUST IN RHC CLINIC

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Abstract

Quality health services are a major factor in improving community welfare. However, in the face of increasingly tight competition, RHC Clinic faces challenges in maintaining patient repeat visit interest. This study aims to analyze the effect of health worker competence and brand image on patient repeat visit interest, both directly and through the mediation variable of patient trust. The research method used is quantitative with the Structural Equation Model (SEM) approach through the WrapPLS 8.0 tool. Data were obtained from 100 respondents who were RHC Clinic patients. The results of the study showed that health worker competence and brand image had a significant positive effect on patient trust, which ultimately increased patient repeat visit interest. Patient trust proved to be a mediating variable that strengthened the relationship between health worker competence and brand image on repeat visit interest. Thus, RHC Clinic needs to improve the quality of health workers through routine training and strengthen brand image through marketing strategies and better services in order to maintain patient loyalty.

Keywords: *Competence of Health Workers, Brand Image, Patient Trust, Revisit Intention, Structural Equation Model (SEM)*

1. Introduction

Health services play an important role in improving people's welfare, along with the significant growth in the number of health facilities in Indonesia. Data from the Ministry of Health shows an increase in the number of clinics from 13,410 in 2022 to 17,261 in 2023. This growth has triggered fierce competition among health service providers, including the RHC Clinic. In facing this competition, patient repeat visit interest is a key factor in maintaining the sustainability of clinic operations. This interest reflects the level of patient satisfaction, trust, and loyalty to the services received. Low repeat visit interest can have a negative impact on the clinic's income, reputation, and sustainability.

Table 1.1 Outpatient Old Patient Visit Data 2023

Month	Actual Visits (A)	Visit Target (B)	AB Difference (%)
January	621	932	33
February	610	893	32
March	648	949	32
April	955	1274	25
May	769	1153	33
June	661	967	32
July	620	930	33
August	608	911	33

September	611	916	33
October	662	945	30
November	625	938	33
December	488	813	40

Source: RHC Clinic Data (2023)

Based on RHC Clinic data in 2023, there is a significant difference between the target of repeat visits set at 60% according to company policy and the realization of old patient visits. The difference between the target and the realization ranges from 25% to 40%, with the largest gap occurring in December, where only 488 out of 813 old patients made repeat visits. In addition, old patient visit data also shows a pattern of visits that tend to stagnate without significant increases, even decreasing in several months. These data indicate challenges in maintaining patient interest in returning for treatment.Factors that influence low interest in repeat visits include patient perceptions of the competence of health workers, clinic image (brand image), and patient trust in the services provided.

2. Theory
2.1. Competence of Health Workers

One important aspect of health worker competence is professionalism and ethics. Professionalism involves the ability to act and communicate in accordance with the norms prevailing in the medical community, high responsibility towards patients, and a commitment to continue learning and developing themselves. Health workers must also demonstrate the ability to work in accordance with professional ethical standards, including respecting patient privacy, maintaining the confidentiality of medical information, and acting with integrity in accordance with universally recognized moral values (Jabri et al., 2020; Mrayyan et al., 2023). This responsibility is very important in achieving patient-centered care, namely health services designed to meet the preferences, needs, and values of patients. Medically, the competence of doctors greatly determines the quality of ideal and effective care. This competence includes the ability to diagnose and treat patient conditions accurately, minimize medical errors, and improve treatment prognosis. In this context, the Competence-Based Medical Education (CBME) approach has become the standard to ensure that professional medical personnel can meet the needs of patients and health care facilities holistically. CBME is designed to develop the skills, attitudes, and knowledge of doctors so that they are able to face medical challenges well and consistently (Schultz et al., 2023; Day et al., 2022).

However, the competence of doctors alone is not enough. The quality of primary health care services is also an important element in building patient satisfaction. Elements such as tangibility, which includes physical facilities; reliability, or consistency in providing services; responsiveness, in the form of speed and ease of access; and the ability of facilities to provide a sense of confidence and security to patients, all play a major role in determining the patient experience. High-quality services have been shown to not only increase satisfaction but also strengthen the tendency of patients to make repeat visits, making it a key factor in the sustainability of health services (Aryono et al., 2022). In addition, commitment also has a close relationship with the level of satisfaction and work motivation. Health workers who have high commitment tend to feel satisfied with their work, so that they can improve their overall performance. In this context, high motivation not only creates a productive work environment but also contributes to the provision of optimal health services (Firman et al., 2023). In other words, high commitment from health workers is one of the key factors that support the achievement of good work performance in various clinical situations.

2.2 Brand Image

The image of an institution or health facility is greatly influenced by brand image, which plays an important role in building relationships between consumers and the services provided. Simply put, brand image can be defined as a perception or picture formed in the minds of consumers about a particular brand or service. This perception plays a crucial role in shaping consumer trust in the quality and credibility of a brand, which will ultimately impact consumer trust and loyalty (Sitorus et al., 2022). Chairunnisa et al. (2022) emphasized that brand image has an important role as a driving factor in people's decisions to choose health facilities. The three main dimensions of brand image are: (1) Uniqueness, which creates an identity that distinguishes the brand from competitors; (2) Strength, which reflects the brand's ability to maintain positive perceptions and build strong relationships with consumers; and (3) Favorable

Association, which is a positive association that is created when consumers have a good experience or perception of the brand. In the context of health facilities, brand image is very important because it can influence public perception of the quality of services provided. Health facilities that have a positive image are more likely to attract patients, increase the number of visits, and even encourage patients to make repeat visits. Furthermore, a strong and positive image can increase patient trust in health services, thus creating a long-term, mutually beneficial relationship between health facilities and patients. Therefore, good brand image management is not only a marketing strategy, but also a key element in creating a positive and satisfying service experience for patients who are users of health care facilities (Windarti, 2023; Supangat et al., 2022).

2.4. Repeat Visit

*Brand image*positive will increase patient trust in the quality of service, thus creating trust that encourages patient visit interest (Purwanto et al., 2022). However, the factors that influence the tendency of patients to make repeat visits are not only limited to the quality of service and brand image. Demographic conditions and patient care needs also play a significant role. Demographically, components such as age, gender, and socioeconomic status can influence patient visiting behavior. Research shows that young adults and male groups have a higher tendency to make repeat visits, especially to the emergency department. This can be due to lifestyle, urgent needs, or easier accessibility than other age groups (Kim et al., 2023).

The main purpose of repeat visits to health facilities is to ensure continuity of care in cases that require a multi-visit approach or periodic evaluation. For example, conditions such as chronic diseases and infectious diseases often require repeat visits to allow for thorough evaluation and accurate diagnosis, as well as to enhance preventive efforts aimed at minimizing the severity and potential transmission of the disease (Nielsen, 2020). Integration between repeat visits and outpatient services is essential to support the quality of health services provided to patients. High-quality health services are characterized by responsiveness, empathy, and reliability. These three aspects not only provide a positive experience to patients but also encourage them to make repeat visits voluntarily (Aryono et al., 2022). Thus, responsive and friendly services are directly correlated with the level of patient trust in health facilities.

2.5. Patient Trust

The tendency of patients to seek treatment, either for the first time or repeatedly, at a health facility is greatly influenced by their level of trust in the service facility. Trust in health services can be defined as a patient's sense of security and confidence that they will receive care that is not only of high quality, but also carried out with high integrity. This trust is the basis of the relationship between patients and health care providers, because it is a determining factor in influencing patients' decisions to continue to entrust themselves to the facility, both in the context of the first visit and follow-up care. High trust in health care providers will encourage patients to feel more comfortable, safe, and confident that they are getting care that suits their medical needs. The trust that grows in this relationship is closely related to the competence, reliability, and integrity of the health care provider. In many cases, this trust is a core element in building an effective and productive doctor-patient relationship (Lagod & Suchodolska, 2021).

High trust in a health facility not only affects patient perceptions of the quality of care but also plays a major role in increasing the level of patient satisfaction with the services provided. Patient satisfaction will then act as one of the main indicators that influence patient compliance with medical advice given by medical personnel. This is in line with research conducted by Lagod & Suchodolska (2021), which shows that patient trust can influence their perceptions of the quality of services received, which leads to increased compliance with treatment and medical follow-up. Trust in health facilities plays a crucial role in shaping patient perceptions of service quality and creating a positive brand image. Research shows that patient trust in health facilities not only influences their perceptions of the services provided but also contributes to the formation of a positive brand image. This is the basis for achieving patient satisfaction, which is the main factor in creating patient loyalty (Maulana & Ayuningtyas, 2023; Sofia, 2023; Trisno & Berlianto, 2023).

Patient trust in health facilities has 3 dimensions that are used to determine the level of trust objectively, these dimensions are Ability, Honesty and Policy: Trust formed through the professionalism of health workers also has a direct influence on the formation of the brand image of health facilities. A good brand image is usually closely related

to patient perceptions of the quality of service and reliability of the health facility (Ackvoska et al., 2020). In this context, not only medical competence is key, but also the professionalism of health workers who play a major role in building a positive image of the facility. Professionalism that is seen in every patient interaction, from clinical skills to empathetic attitudes towards patients, helps create a strong brand image. This positive image, in turn, strengthens patient trust in the facility. A mutually reinforcing reciprocal relationship is created between competence, trust, and positive perceptions of health facilities. Based on the introduction and theoretical study above, the conceptual framework can be described in Figure 1 below with the hypothesis formulated as follows: H1 =Competence of health workers has a positive influence on patient's interest in repeat visits; H2 =*Brand image*has a positive effect on patient repeat visit interest; H3 =Competence of Health Workers has a positive influence on Patient Trust; H4 =*Brand image*has a positive effect on patient trust; H5 =Patient trust has a positive influence on patient repeat visits; H6 =The competence of health workers has a positive influence on the interest in patient repeat visits through patient trust.; H7 =*Brand image*has a positive influence on patient return visit interest through patient trust.
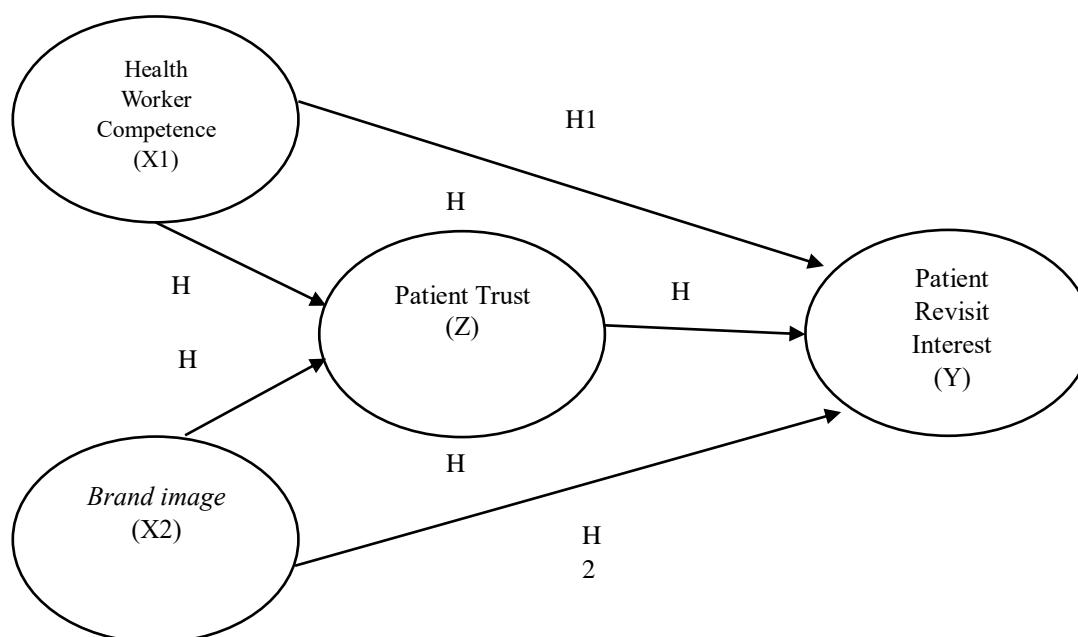

Figure 1.1 Conceptual Framework

3   Method

Based on the formulation of the problem and research objectives, the hypothesis was tested using quantitative methods. The population in this study included all patients undergoing treatment at the RHC Clinic outpatient unit, and the sampling technique used was purposive sampling, so that a sample of 100 respondents was obtained. Data were collected using a questionnaire. The Likert scale used for data measurement has a value range of 1 to 5, which indicates: 5 (strongly agree-SS), 4 (agree-S), 3 (undecided-RR), 2 (disagree-TS), and 1 (strongly disagree-STS). The collected data were then processed using the Structural Equation Model (SEM) with the help of the WrapPLS 8.0 program through two stages of measurement, namely the outer model (measurement model) and the inner model (structural model). The outer model describes the relationship between each indicator and the latent variable tested through validity testing (convergent and discriminant validity) and reliability testing. The model in shows the estimation of the relationship between latent variables based on substantive theory, which includes R2 testing, model fit, and hypothesis testing (direct and indirect) [21-23].

4 Results and Discussion

To prove the hypothesis in the study regarding the influence of organizational culture and work environment on turnover intention and work motivation as mediating variables, the collected data were analyzed using Structural Equation Model (SEM) with the WrapPLS 8.0 program through two measurements called the outer model and the inner model. The following is a further discussion of this matter.

4.1 Respondent Characteristics

The characteristics of respondents in this study based on gender were dominated by women (56%). The majority of respondents were over 55 years old (35%) and worked as housewives (40%), with most respondents being high school graduates (53%). In addition, this study also showed that 71% of respondents only made 2-3 visits, indicating low interest or commitment to make repeat visits to the RHC clinic.

4.2 Outer Model Analysis

Validity test aims to observe whether a set of indicators represents each latent variable. For convergent validity, this is based on the loading factor value of each indicator on each variable which must be more than 0.6. Thus, it can be concluded that all indicators used in this study are valid.

Table 4.1 Loading Factor Values for Each Indicator

Variables	Indicator	*Loading Factor*	Information
Health Worker Competence (KTK)	X1P1	0.737	Valid
	X1P2	0.849	Valid
	X1P3	0.962	Valid
	X1P4	0.696	Valid
Brand image(BI)	X2P1	0.785	Valid
	X2P2	0.701	Valid
	X2P3	0.693	Valid
	X2P4	0.739	Valid
Patient Confidence (KP)	Z1P1	0.623	Valid
	Z1P2	0.795	Valid
	Z1P3	0.931	Valid
	Z1P4	0.931	Valid
	Z1P5	0.743	Valid
Repeat Visit Interest (MKU)	Y1P1	0.965	Valid
	Y1P2	0.896	Valid
	Y1P3	0.981	Valid
	Y1P4	0.997	Valid
	Y1P5	0.968	Valid

Convergent validity test can be strengthened by using the Average Variance Extracted (AVE) analysis value. A variable is considered valid if the Average Variance Extracted (AVE) value is greater than 0.5. Thus, it can be concluded that all indicators used in this study are valid because they have met the required AVE criteria.

Table 4.2 Average Variant Extracted (AVE) Value

Variables	AVE	Information
Competence of Health Workers	0.818	Valid
Brand image	0.731	Valid
Patient Trust	0.813	Valid
Interest in Repeat Visits	0.962	Valid

Meanwhile, the measurement of discriminant validity is based on the cross loading value, which is seen from the loading value between the indicator and the latent variable which is higher than the loading value between the indicator and other latent variables in the model. Thus, it can be concluded that all indicators have met the discriminant validity. The calculation results are shown in the following table:

Table 4.3 Cross Loading Factor Values for Each Indicator

	KTK	BI	KP	MKU
X1P1	0.737	0.185	0.202	-0.208
X1P2	0.849	0.165	-0.340	0.079
X1P3	0.962	-0.137	-0.062	0.205
X1P4	0.696	-0.209	-1,643	0.182
X2P1	-0.692	0.785	0.102	-0.795
X2P2	0.112	0.701	-0.440	0.133
X2P3	-0.887	0.693	0.623	-0.552
X2P4	0.503	0.739	-1,257	0.123
Z1P1	0.865	0.217	0.623	-0.409
Z1P2	0.755	-0.218	0.795	0.175
Z1P3	-0.324	-0.118	0.931	-0.194
Z1P4	-0.324	-0.118	0.931	-0.194
Z1P5	-0.721	0.347	0.743	-0.104
Y1P1	0.274	-0.037	0.069	0.965
Y1P2	-0.842	0.211	0.116	0.896
Y1P3	0.257	-0.094	-0.318	0.981
Y1P4	-0.009	-0.021	0.041	0.997
Y1P5	0.254	-0.040	-0.865	0.968

Reliability testing aims to measure whether the statement items in the questionnaire produce consistent answers over time. This measurement is based on the Cronbach's Alpha and Composite Reliability values (with expected values > 0.7). Based on the results of data processing using WrapPLS 8.0, all composite reliability values in this research variable are greater than 0.7 and are reinforced by the Cronbach's Alpha value which is also more than 0.7. This shows that all variables in this study can be said to be reliable.

Table 4.4 Composite Reliability and Cronbach's Alpha Values

Variables	Composite Reliability	Cronbach Alpha	Information
Competence of Health Workers	0.888	0.827	Reliable
Brand image	0.820	0.707	Reliable
Patient Trust	0.905	0.866	Reliable
Interest in Repeat Visits	0.984	0.979	Reliable

4.3 Inner Model Analysis

The structural model (inner model) consists of the R^2 value, Fit Model, and hypothesis testing (both direct and indirect). Based on the R^2 table below, it is known that the construct value for patient trust is 0.617. This shows that the influence of health worker competence and brand image on patient trust is 61.7%, while the remaining 38.3% is influenced by other factors not examined in this study. Furthermore, the construct value for repeat visit interest is 0.881. This shows that the influence of health worker competence, brand image, and patient trust on repeat visit interest is 88.1%, while the remaining 11.9% is influenced by other factors not examined in this study.

Table 4.5 R-squared value (R2)

Matrix	R-Squared (R2) Value
Competence of health workers and brand image towards patient trust	0.617
Competence of health workers, brand image, and patient trust in repeat visit interest	0.881

Based on the results of the fit model analysis, it can be concluded that the model used has a very good fit. The Average Path Coefficient (APC) value shows a significant relationship between variables, with an Average R-Squared (ARS) of 0.749 indicating that the model can explain 74.9% of the data variation. There is no multicollinearity problem with an Average block VIF (AVIF) value of 2.288, and the model has a good fit with a Tenenhaus GoF (GoF) of 0.723. In addition, the Simpson's paradox ratio (APR) and R-squared contribution ratio (RSCR) values indicate that the data is not distorted, and a Statistical suppression ratio (SSR) of 1.00 indicates that the model is well accepted. Overall, the results of this analysis indicate a very fit and reliable model.

Table 4.6 Model Fit and Quality Indices

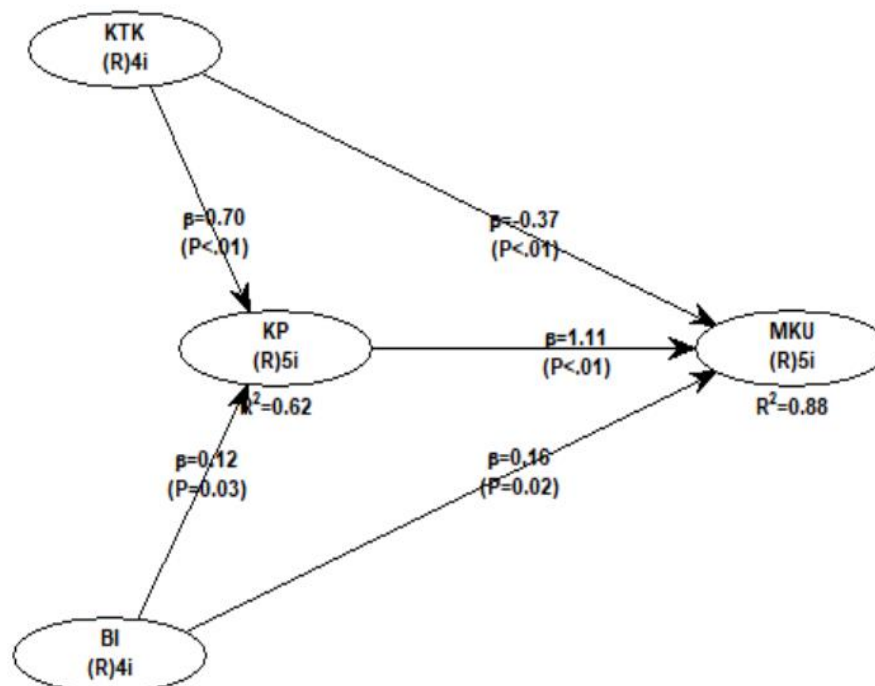| Indicator	Mark
Average Path Coefficient (APC)	0.489, p<0.001
Average R-Squared (ARS)	0.749
Average block VIF (AVIF)	2,288
GoF Tenenhaus (GoF)	0.723
Simpson's paradox ratio (APR)	0.800

4.4 Hypothesis Testing

Figure 4.1 Path Diagram

Hypothesis testing is used to test whether the hypothesis formed at the beginning of the study has a significant value based on probability (p-value <0.05).

Table 4.7 Direct Hypothesis Test Results

Influence	Coefficient	P-Value	Information
Competence of health workers→Interest in repeat visits	-0.365	<0.001	Significant
Brand image →Interest in repeat visits	0.156	0.024	Significant
Competence of health workers→Patient trust	0.702	<0.001	Significant
Brand image →Patient trust	0.115	0.031	Significant
Patient trust→Interest in repeat visits	1,108	<0.001	Significant

Based on table 4.8 which shows the mediation role for the intervening variable, it can be seen from the results of the indirect effects through the bootstrapping method.
1. The competence of health workers has a significant positive influence on the intention to return to visit which is mediated by patient trust.
2. *Brand image* has a significant positive influence on the intention to revisit which is mediated by patient trust.

Table 4.8 Results of Indirect Hypothesis Testing

Influence	Coefficient	P-Value	Information
Competence of health workers→Patient trust→Interest in repeat visits	0.778	<0.001	Significant
Brand image →Patient trust→Interest in repeat visits	0.128	0.033	Significant

4.5 Discussion

H1: Competence of Health Workers has a positive effect on Patient Revisit Interest.

The results of this study indicate that the competence of health workers has a significant positive effect on patient revisit intentions, with a p-value <0.001, which is in line with the research of Durnovo et all (2022), which emphasizes the important role of competence in building patient trust in medical services. Competent health workers, both in knowledge, skills, and professional attitudes, can increase patient satisfaction and their intention to return. This is consistent with several previous studies by Aryono et al (2022); Fitriana et al (2022); Josephine et al (2022); Alya Latunreng (2021); and Chen Xiao et al (2022), which show that patient trust in the competence of health workers influences their decision to make repeat visits.

H2: Brand image has a positive effect on patient repeat visit interest.

The results of this study indicate that brand image has a significant positive effect on patient revisit interest with a p value of 0.024. A strong brand image can increase patient trust in the quality of service and motivate them to return to use the health facility. According to Kotler and Keller (2016), brand image is formed by customer perceptions and impressions, which affect patient comfort and trust. This finding is supported by research by Fook et all (2024), which shows a positive relationship between brand image and patient revisit interest. In addition, several previous studies by Rahman & Hidayat (2020); Irhamni et al (2023); Supangat el al (2022); Trisno & Berlianto (2022); and Windarti (2022), also confirmed that brand image has an impact on patient loyalty. Therefore, to increase revisit interest, RHC clinics need to build a strong brand image, highlight uniqueness, and utilize communication channels to introduce advantages that differentiate the clinic from competitors.

H3: Competence of Health Workers has a positive effect on Patient Trust.

The results of the study showed that the competence of health workers had a significant positive effect on patient trust, with a p value <0.001. Increasing the competence of health workers, both in medical knowledge and communication skills, is directly proportional to increasing patient trust in the services provided. This is in line with the Competence-Based Trust theory explained by Martin Mulder (2017), which states that professional trust is

influenced by perceptions of competence. This finding is also supported by research by Aryono et all (2022), which shows that the quality of service influenced by the competence of health workers plays an important role in building patient trust. Therefore, for the RHC clinic, increasing the competence of health workers through ongoing training can strengthen the loyalty and reputation of the clinic, as well as ensure a trusting relationship between patients and service providers.

H4: Brand image has a positive effect on patient trust.

The results of the study showed that brand image had a significant positive effect on patient trust, with a p value of 0.031, indicating that a positive brand image strengthens patient trust in health facilities. This finding supports the Customer-Based Brand Equity theory proposed by Keller (2016), which states that a brand image formed from a positive experience can increase patient trust. Fook et al.'s (2024) research also strengthens this finding, showing that a positive brand image can improve perceptions of service quality and build patient trust. A good brand image strengthens patient loyalty and the reputation of health facilities, which is important for RHC clinics to ensure quality of service and effective communication to build a positive image.

H5: Patient trust has a positive influence on Patient Revisit Intention.

The results of the study showed that the level of patient trust had a significant positive effect on the intention to revisit, with a p value <0.001, which means that the higher the patient's trust in medical personnel and health facilities, the more likely they are to return. This finding supports the theory of Customer Satisfaction and Loyalty put forward by Oliver (2015), which states that trust plays an important role in building loyalty, including the intention to revisit. Research by Sudirman and Rahman et all (2020), also supports this finding, which shows that trust built through positive experiences increases patient interest in returning. RHC clinics need to ensure quality care, effective communication, and positive patient experiences to maintain trust and encourage repeat visits.

H6: Competence of Health Workers has a positive influence on Patient Revisit Interest through Patient Trust.

The results showed that the competence of health workers has a positive impact on patient interest in making repeat visits, which is mediated by the level of patient trust (p < 0.001). The competence of health workers, which includes clinical skills, medical knowledge, and effective communication, can increase patient trust, which in turn encourages them to return to using health services. Research by Akhtar et all (2024) and Sha Liu et all (2021), supports this finding, highlighting that trust is a mediator connecting the competence of health workers with patient loyalty. RHC clinics need to ensure that health workers continue to update their skills and provide professional services so that patient trust is maintained, encouraging them to make repeat visits.

H7: Brand image has a positive influence on Patient Revisit Intention through Patient Trust.

The results of the study showed that brand image had a positive effect on patient revisit interest through patient trust, with a p-value of 0.033. A strong brand image not only builds patient trust but also increases their likelihood of returning to health services. Research by Christi Hira et all (2023) and Rahman & Hidayat (2020), supports this finding, which reveals that trust functions as a mediator between brand image and patient loyalty. Therefore, RHC clinics need to build a strong brand image by providing quality services and utilizing social media to introduce the clinic's values and advantages, in order to increase patient trust and revisit interest.

5   Conclusion and Suggestions

Competence of health workers and brand image have a significant positive effect on patient revisit intention, both directly and through patient trust. Patient trust is proven to be a mediator connecting competence of health workers and brand image to patient revisit intention. This study shows that increasing competence of health workers and positive brand image not only increases patient trust, but also encourages them to return to use the same health services in the future. High patient trust strengthens the relationship between patients and health facilities, and increases the likelihood of patients choosing services they trust again. Based on the findings and conclusions of this study, several suggestions can be given to RHC Clinic and future research as follows:

1. RHC Clinic needs to improve the competence of health workers which can be done by organizing regular training programs that focus on clinical skills and interpersonal communication skills. Periodic evaluation of health worker competence, through patient surveys and management supervision, is important to ensure that the quality of service remains optimal. In addition, improving effective communication skills can help make patients feel more confident and comfortable in interacting with medical personnel. Implementing a strict attendance system and providing incentives for health workers with good attendance levels will support discipline and the sustainability of quality services.

2. To strengthen the RHC Clinic brand image, it is important to ensure that the clinic's image is in line with patient expectations through marketing strategies that focus on patient satisfaction. Optimizing social media and websites can be used to convey the latest information and positive reviews from patients. In addition, creating a clean, comfortable atmosphere equipped with modern facilities will increase patients' positive views of the clinic and increase their trust.

3. To increase patient trust, it is important to increase transparency in conveying information about medical procedures and service costs. Providing fast, friendly, and professional service also plays an important role in strengthening the relationship between patients and medical personnel. In addition, encouraging patient participation in medical decision-making gives them a sense of control over the care they receive. Post-examination consultation services, either face-to-face or via telemedicine, can ensure that patients receive adequate information and feel more confident with the services provided.

4. To increase patient return visits, clinics can run loyalty programs by providing discounts for routine check-ups. Providing automatic reminder services for patient control schedules is also important to increase compliance. In addition, utilizing patient data to provide appropriate service recommendations can increase satisfaction. Effective communication through post-treatment consultations helps ensure patient readiness for return visits, while improving service quality based on patient feedback will support continuous improvement.

5. Theoretical suggestions for this study include expanding the scope of the region or type of health facility so that the findings are more general. In addition, further studies need to consider other factors that may affect patient trust and revisit intentions, such as the quality of medical technology and previous patient experiences. Testing the research model can also be done by adding new variables or using different analysis methods to gain a deeper understanding of the relationship between these factors.

REFERENCES

1. Aryono, A.C. *et al.* (2022) "Hubungan Kualitas Pelayanan terhadap Kunjungan Ulang Pasien di Poliklinik Gigi dan Mulut Rumah Sakit Umum Puri Husadatama Kabupaten Mesuji," *Malahayati Nursing Journal*, 4(12), pp. 3178–3192. Available at: https://doi.org/10.33024/mnj.v4i12.7410.
2. Muhamad Choirul Anam (2023) "Analysis of Health Service Quality and Patient Satisfaction on Patient Loyalty in the Outpatient Installation of Aulia Blitar General Hospital," *STRADA Jurnal Ilmiah Kesehatan*, 12(1), pp. 35–40. Available at: https://doi.org/10.30994/sjik.v12i1.1013.
3. Siti, F.C. *et al*. (2022). "Pengaruh *brand image* terhadap keputusan menggunakan pelayanan rawat jalan RSUD Haji Makassar," *Hasanuddin Journal of Public Health*, 3(12), pp. 179-190. Available at: http://dx.doi.org/10.30597/hjph.v3i2.21914.
4. Sitorus, S. *et al.* (2022) *Brand Marketing: The Art of Branding*.
5. Windarti, S. (2022) "Hubungan Brand Image dengan Keputusan Penggunaan Layanan di Instalasi Rawat Jalan RSIA Sitti Khadijah 1 Makassar," *Jurnal INFOKES*, 6(2).
6. Supangat, D.W., Noor, N.B. and Thamrin, Y. (2022) "The Effect of Brand Image and Patient Satisfaction on Patient Loyalty in Outstanding Installations Dr. Tadjuddin Chalid Makassar," *Journal of Asian Multicultural Research for Medical and Health Science Study*, 3(3), pp. 1–9. Available at: https://doi.org/10.47616/jamrmhss.v3i3.300.

7. Irhamni, E., Yaniawati, R. and Mulyani, K. (2023) "Pengaruh Brand Image, Perceived of Service Quality dan Trust terhadap Kunjungan Pasien Rawat Jalan di UPT Puskesmas Sale Rembang Jawa Tengah," *Journal of Economics and Business UBS*, 12(6).

8. Yaqoob Mohammed Al Jabri, F. *et al.* (2021) "A systematic review of healthcare professionals' core competency instruments," *Nursing and Health Sciences*. Blackwell Publishing, pp. 87–102. Available at: https://doi.org/10.1111/nhs.12804.

9. Skrinda, I., Kokina, I. and Iliško, D. (2022) "*Assessment of a Professional Competence of Healthcare Personnel*," in, pp. 230–237. Available at: https://doi.org/10.22616/REEP.2022.15.028.

10. Abdullah, M.F. *et al.* (2021) "Healthcare Provider Competencies: A Systematic Literature Review," *International Journal of Academic Research in Business and Social Sciences*, 11(2). Available at: https://doi.org/10.6007/ijarbss/v11-i2/8883.

11. Chu, S.Y., Wen, C.C. and Lin, C.W. (2020) "A qualitative study of clinical narrative competence of medical personnel," *BMC Medical Education*, 20(1). Available at: https://doi.org/10.1186/s12909-020-02336-6.

12. Tenenbaum, J. (2024) "Competence or Experience: The Missing Voice in Pediatric Decision-Making," *VOICES IN BIOETHICS*, 10. Available at: https://doi.org/10.52214/vib.v10i.12502.

13. Tambunan, R.A., Hernawan, S. and Victoria, O.A. (2024) "Foreign Medical Personnel Policy for Improving the Health Services Quality," *Journal of Sustainable Development and Regulatory Issues (JSDERI)*, 2(2), pp. 108–131. Available at: https://doi.org/10.53955/jsderi.v2i2.36.

14. Hammad, T. (2023) "Healthcare Workers' Job Satisfaction," *Journal of Research Administration*, 5(2). Available at: https://www.researchgate.net/publication/379989006.

15. Kusmiati, M., Prawiradilaga, R.S. and Tursina, A. (2023) "The most influence factor of the medical competence achievement regarding patient management ability on medical school graduates," *Korean Journal of Medical Education*, 35(2), pp. 143–152. Available at: https://doi.org/10.3946/kjme.2023.255.

16. Josephine, O., Winoto Tj, H. and Fushen. (2023) *Enrichment: Journal of Management The effect of E-Digital services and the competence of health workers on the patient's interest in repeat visits mediated by the level of trust*, *Enrichment: Journal of Management*.

17. Pavithran, D., Shibu, C. and Madathiparambil, S. (2024) "Enhancing Trust between Patient and Hospital using Blockchain based architecture with IoMT," *International Journal of Computing and Digital Systems*, 16(1), pp. 295–303. Available at: https://doi.org/10.12785/ijcds/160123.

18. Nwosu, L.C., Edo, G.I. and Jalloh, A.A. (2023) "Mediating role of patient trust in the impact of perceived physician communication on treatment adherence and its implication in healthcare industry," *Science, Engineering and Health Studies*, 17. Available at: https://li01.tci-thaijo.org/index.php/sehs.

19. Liu, S. *et al.* (2021) "The Impact of Patient Satisfaction on Patient Loyalty with the Mediating Effect of Patient Trust," *Inquiry (United States)*, 58. Available at: https://doi.org/10.1177/00469580211007221.

20. Trisno, A.O. and Berlianto, M.P. (2023) *The Effect of Perceived Value, Brand Image, Satisfaction, Trust, and Commitment on Loyalty at XYZ Hospitals, Tangerang*.

21. Ghozali, I., & Latan, H. (2015) *Konsep, Teknik, Aplikasi Menggunakan Smart PLS 3.0 Untuk Penelitian Empiris*. Semarang: Badan Penerbit UNDIP.

22. Ghozali, I. (2021) *Aplikasi Analisis Multivariate Dengan Program IBM SPSS 26, Edisi 10*. Semarang: Badan Penerbit Universitas Diponegoro.

23. Carrión, G.C., Nitzl, C. and Roldán, J.L. (2017) "Mediation analyses in partial least squares structural equation modeling: Guidelines and empirical examples," in *Partial Least Squares Path Modeling: Basic Concepts, Methodological Issues and Applications*. Springer International Publishing, pp. 173–195. Available at: https://doi.org/10.1007/978-3-319-64069-3_8.

24. Durnovo, E.A. *et al.* (2022) "Trust–Based Relationship between Patient and Doctor as Guaranty of Successful Management of Dental Implantation Complications," *NAUKA MOLODYKH (ERUDITIO JUVENIUM)*, 10(1), pp. 91–100. Available at: https://doi.org/10.23888/HMJ202210191-100.

25. Indah Faradiba Fitriana, Reza Aril Ahri, & Muchlis, N. (2022). "Pengaruh Kompetensi, Motivasi dan Kualitas Pelayanan Kesehatan terhadap Minat Kembali Pasien di RSUD Labuang Baji Makassar," *Journal of Muslim Community Health*, *3*(3), 29-37. Available at: https://doi.org/10.52103/jmch.v3i3.983

26. Alya, Noor, Lantunreng, Wahyuddin. (2021) "Analisis Pengaruh Kompetensi dan Kedisiplinan Tenaga Kesehatan terhadap Kepuasan Pasien Rawat Inap Puskesmas Jasinga Kabupaten Bogor Jawa Barat," *Jurnal Ilmiah Ilmu Administrasi*, 4(1), pp. 70-84. Available at: https://doi.org/10.31334/transparansi.v4i1.1608.

27. Chen, Xiao. *et al.* (2022) "The Relationships Between Patient Experiencewith Nursing Care, Patient Satisfaction and PatientLoyalty: A Structural Equation Modeling," *Patient Preference and Adherence,* 16, pp. 3173–3183. Available at: https://doi.org/10.2147/PPA.S386294.

28. Fook, T.N., Peng, L.M. and Mun, Y.W. (2024) "Hospital brand image and trust leading towards patient satisfaction: medical tourists' behavioural intention in Malaysia," *Healthcare in Low-Resource Settings*, 12(1). Available at: https://doi.org/10.4081/hls.2024.12276.

29. Moh.Abd.Rahman & Anas Hidayat. (2020) "Investigating the Impact of Brand Awareness, Customer Satisfaction and Trust on Revisit Intention toward Beauty Care Clinic in Indonesia," *The International Journal of Business & Management* 8(6). Available at: https://doi.org/10.24940/theijbm/2020/v8/i6/BM2006-013.

30. Mulder, Martin. (2017) *Competence-based vocational and professional education: bridging the worlds of work and education*. Springer Verlag.

31. Sudirman, T.A. (2022) *The Effect Brand Image, Trust and Satisfaction on Patient Loyalty in The Outpatient Installation of Haji Hospital South Sulawesi Province in 2022*.

32. Akthar, N., Nayak, S. and Pai P, Y. (2023) "A cross-sectional study on exploring the antecedents of patient's revisit intention: Mediating role of trust in the hospital among patients in India," *F1000Research*, 12, p. 75. Available at: https://doi.org/10.12688/f1000research.128220.1.

33. Sha Liu et al. (2021) "The Impact of Patient Satisfaction on Patient Loyalty with the Mediating Effect of Patient Trust," *The Journal of Health Care*, 58: 1-11. Available at: https://doi.org/10.1177/00469580211007221.

34. Chishti, Hira. *et al.* (2023) "The Impact of Hospital Brand Image on Patient Loyalty and Patient Behavioral Intention: The Mediating Role Of Patient Satisfaction," *Journal of Namibian Studies: History Politics Culture*, *33*, 886-912. Available at: https://doi.org/10.59670/yx55ze78.