

# Organizational Citizenship Behavior Effect On Patient Satisfaction And Loyalty Through Service Quality (Study On Maternity Hospitals In Indonesia)

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**Abstract:** Improved quality of services driven by organizational citizenship behavior (OCB) automatically will improve patient satisfaction and create patient loyalty. High loyalty will lead to changes in market share and profit for the company which provides service. The objective of this study is to examine the role of OCB in improving service quality, patient satisfaction and patient loyalty. Survey is carried out to women who have delivered in Maternity Hospitals in Denpasar, as many as 160 people. This study uses a quantitative approach with SEM analysis techniques. The results showed that OCB behaviors can indeed improve the service quality significantly; nevertheless OCB has not been able to directly and significantly improve patient loyalty. Other than that, service quality and patient satisfaction are perfectly capable in mediating the effect of OCB on patient loyalty. The practical implication of this study is that the Maternity Hospitals in the future should necessarily prioritize in improving the service quality and patient satisfaction to achieve patient loyalty.

**Keywords:** OCB, service quality, patient satisfaction, patient loyalty, Maternity Hospitals

## Background

Maternity Hospital is a health service business which is based on the principle of trust so that the issues of service quality, patient satisfaction and patient loyalty become the factors determining success. Service quality will be generated by the process of giving birth performed which is determined by several factors that are the doctors, midwives and nurses, technologies systems and patient engagement that are expected to contribute to the service quality created (Tjiptono, 2000). In the dimension of service quality by Parasuraman *et al.* (1988), it will be on the tangible dimension in which the dimension of service quality is a fundamental strategy in order to achieve successful and sustainable company in a tight business competition. Service quality consists of tangible, reliability, responsiveness, assurance, and empathy. The next major issue is the main focus of academics and managers in determining what strategic definition of service quality for customers and how to develop strategies to meet customer expectations (Parasuraman *et al.*, 1990). Along with the increasing service quality driven by the extra role behavior (OCB), the increase of patient satisfaction and patient loyalty is expected to be created. High loyalty will lead to changes in market share and profit for service providers.

Research on the effect of OCB on service quality have been done by Podsakoff and MacKenzei (1997), Navasivayam (2005), Djati (2008), Wallace *et al.* (2011), Stoner *et al.* (2011), and SeyedJavadin (2012). OCB behavior certainly affects service quality that can be delivered by the midwives to patients. Other than that, OCB is expected to emerge communications between patients with midwives, so it is able to increase the trust from patients and ultimately makes the patients become more satisfied, and in result they become loyal. Some previous research results or empirical studies have ever conducted by Podsakoff and MacKenzei (1997), Djati (2008), Wallace *et al.* (2011), Stoner *et al.* (2011), and SeyedJavadin (2012) showing the results turned out that OCB gives positive impact on service quality, customer satisfaction and loyalty as well as organization performance. So with the addition of OCB variable, this study will examine the relationships of OCB, service quality, patient satisfaction and continued by its implications on patient loyalty. Maternity Hospitals in Bali Province is not so many, but the Maternity Hospitals keep facing incredibly tight competition not only among maternity hospitals, but also with the health centers, hospitals both private and public as well as the Private Practice Midwives (CPM) or Independent Practice Midwife (BPM). There is 13 Maternity Hospitals, although the number of Maternity Hospital in Bali is not too big, but they also face competition from other health care service industries, especially the CPM or BPM. In consequences, to remain viable and sustainable, they should pay attention to service quality. This is consistent with the research results conducted by Hore (1994) who says that the hospital industry must constantly improve the service quality in order to maintain itself in the environment is the competition. This effort is as the way out for trying to improve the behavior of the medical and non-medical in providing services beyond the standard. Based on the description above, the Maternity Hospitals are always trying to build excellence service quality so that the service quality can be experienced by the patient. According to Sureshchandar (2002), the influence of service quality that

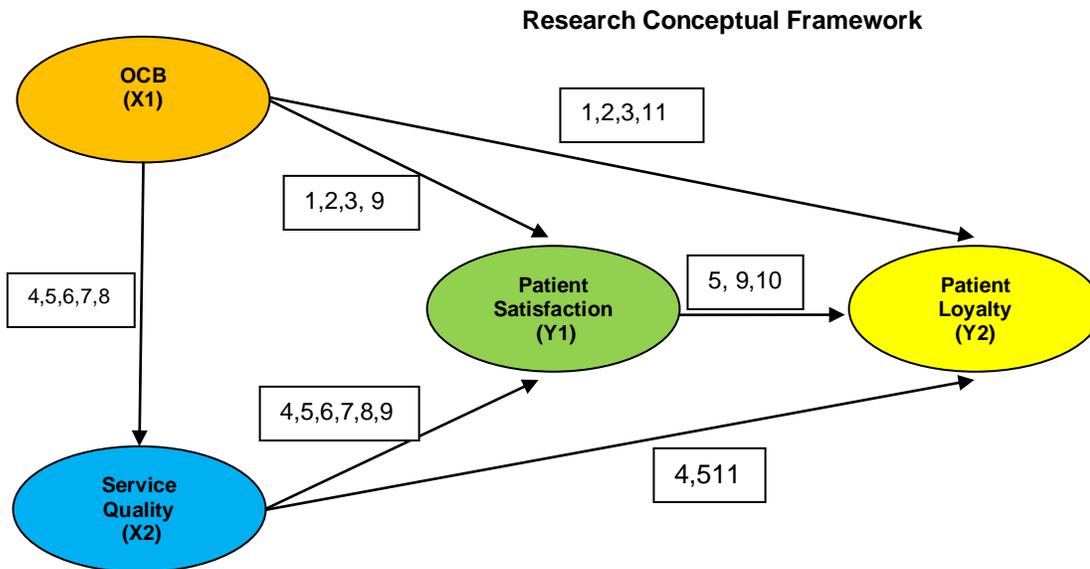
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is built by the company's management apparently shows that only service quality which is in contact with personnel which has significant influence on the service quality perceived by the patient, while the one with technology-oriented has no significant effect on service quality. This research will fill the gap from Sureshchandar study (2002) by trying to equip it with the extra role behavior of doctors and especially the midwives so that the patients feel the benefit or hope noticed. The problem background existing is then become the consideration of the research questions formulated which is what the role of OCB in improving service quality, patient satisfaction and loyalty are. Therefore, this study aims to determine the OCB role in improving the service quality, patient satisfaction and patient loyalty.

## Literature Reviews

Several studies related to OCB, service quality, customer satisfaction, and customer loyalty has ever been conducted by Turnipseed and Murkison (1996), Podsakoff and MacKenzei (1997), Sureshchandar (2002), Castro *et al.* (2004), Malhotra and Mukherjee (2004), Gonza'lez and Garazo (2006), Garg and Rastogi (2006), Leverin and Liljander (2006), Dimitriades (2007), Bellou and Andronikidis (2008), Lai *et al.* (2008), Djati (2008), Wallace *et al.* (2011), Teh and Sun (2012). Turnipseed and Murkison (1996) conducted a study where the research results show that working environment is significantly encouraging the creation of extra role behavior (OCB). This research was conducted with regression analysis and performed only on military organizations so that research results cannot be generalized. In 1997, Podsakoff and MacKenzei did the study on the relationships between OCB and service quality. The results show that complaints or customer complaints decreased with the increasing OCB on employee behavior. Furthermore, Sureshchandar (2002) conducted a study by using regression analysis in which the results show that the findings of the 60 t-values, only 11 that has changed significantly. Dimensions of Total Quality Services (TQS) which has turned into significant in predicting five service quality factors that are: human resource management, service culture, social responsibility, customer focus and employee satisfaction (with respect to core services), cultural services (in relation to the elements human services); culture of service and social responsibility (in relation to the systematization service); culture of service and social responsibility (in relation to the physical evidence of service), and top management commitment and visionary leadership (in relation to social responsibility). Furthermore, Castro *et al.* (2004) conducted a study using SEM analysis. The results show that the relationship between service quality and profitability is moderated by customer satisfaction and loyalty intentions. These results are similar to previous researches done by Soderlund (1998) and Anderson and Mittal (2000). However, it is impossible to find a significant direct relationship between service quality and loyalty intentions, as has been already concluded in previous research by Zeithaml *et al.* (1996). Finally, the relationship between loyalty intentions and profitability is negative. These results suggest that the majority of the company's customers are happy, satisfied, and having the intention to be loyal with the company. However, their habits do not produce a high profit for the

company. They are the customers which is "not profitable" (Reichheld, 1996), although this situation is improved by the bank through the payment of increased commission. In the same year, Malhotra and Mukherjee (2004) conducted a study and the findings suggest that organizational commitment and job satisfaction which significantly influence service quality and organizational commitment have greater influence than job satisfaction. Research on OCB was also conducted by Garg and Rastogi (2006). They conduct research on private schools and public schools in India showing that OCB on teachers in private schools is higher than public schools. This is indicated by the behavior that always develops creativity, innovation, flexibility in the school environment, open communication, and bureaucracy leadership style. Furthermore, Leverin and Liljander (2006) conducted a study by using regression analysis. The result shows that there is no significant difference in outcome between groups of consumers. Regression analysis shows the results of satisfaction turned out to be less affects customer loyalty. In the following year, Dimitriades (2007) conducted a study by using SEM analysis, in which the limitations of the research shows that it has not involved variables that are more individualistic, tasked, and organizational. Furthermore, Bellou and Andronikidis (2008) conducted a study by using regression analysis. The results find that the internal service quality significantly influences the external service quality and finally to the customer satisfaction. The different emphasis is on the dimensions of internal service quality of public banks and private banks. In the same year, Lai *et al.* (2008) conducted a study which shows that the service quality has no significant effect on satisfaction and loyalty directly, yet through the value and impression, the service quality significantly influences loyalty. In the same year, Djati (2008) conducted a study on antecedent variable of OCB and its effect on service quality. The results show that the OCB behaviors of employee that are commitment morale and motivation, affect significantly OCB which in turn affects the service quality. This study also proves that morale, commitment and motivation of employees are antecedents of OCB and OCB behaviors can support the company to provide better service quality to its customers (Djati, 2008). Furthermore, Wallace *et al.* (2011) also conducted a study using factor analysis and SEM analysis. The results show that the performance of front-line workers measured by civility, Extra Role Behavior, customer orientation, assurance & reliability, and sabotage. Apparently, Extra Role Behavior is not a measurement of front-line employees performance, but the extra role behavior is more suited to be antecedent of job performance. In 2012, Teh and Sun (2012) conducted a study using SEM analysis. The results show that OCB does not play a significant role as a mediation of the relationship of job involvement, job satisfaction, and organizational commitment to employees knowledge sharing behavior.



**Figure 1.** research conceptual framework

### Research Hypotheses

The relationships between service quality and OCB on patient loyalty mediated by patient satisfaction levels are tested. The selection of these variables to develop a previous study by Parasuramen *et al.* (1988), Castro *et al.* (2004), Sureshchandar (2002), Organ (1988), Dominici and Guzzo (2010), and Al-Rousan *et al.* (2010).

- H1 Higher OCB will raise service quality.
- H2 Higher OCB will increase patient satisfaction.
- H3 Higher OCB will increase patient loyalty.

As a service organization that has a characteristic in which the level of quality service has not been able to build patient loyalty, then the implementation of OCB and attention to the level of satisfaction will be able to eliminate the insignificant effect of this characteristic to be significant and is able to increase the service quality performance perceived by the patient.

- H4 Service quality is able in mediating the OCB effect on patient satisfaction.
- H5 Service quality is able in mediating the OCB effect on patient loyalty.
- H6 Customer satisfaction is able in mediating the OCB effect on patient loyalty.
- H7 Service quality and satisfaction are able in mediating the OCB effect on patient loyalty.

### Methodology

This study is conducted in Denpasar City which consists of four districts, namely East Denpasar district, South Denpasar district, West Denpasar district and North Denpasar district. The population in this study is the patients who have given births at all of the Maternity Hospitals in Denpasar to pass their assessment or perception of OCB of the midwives, service quality, patient satisfaction and patient loyalty. This study uses the purposive sampling technique sampling which is a sampling technique with particular considerations. Criteria samples in this study are: (1) the patient has been doing deliveries in the Maternity Hospital at least 2 times in the past 10 years (the period from 2001 to 2011), and (2) the patient ages at least 20 years old where the application of life of the patient is at the minimum age 20 years. This age limitation is considered to have been able to provide assessments of the indicators in question with the assumption that in Indonesia people are permitted at the age of 17 years and the second delivery is assumed done at the age of 20 years. Based on requirements in SEM analysis, the samples taken in this study are 160 respondents to the consideration of the sample size is five times of the number of existing indicators (5 x 32 indicators = 160 respondents). This study uses two types of analysis which are descriptive statistical analysis and quantitative techniques or inferential statistical analysis of the data gathered from the field. Descriptive analysis is used to describe in more depth to each variable in this study. While quantitative techniques are used to see how deep the influences of independent variables on dependent variables, which are by analyzing the data that has been given a score according to the scale of measurement that has been determined, through statistical formulas. This form of causal relationship requires analytical tools that are able to explain the relationship, so that inferential statistical methods used in the data analysis of this study is Structural Equation Modeling (SEM).

## Results and Discussion

### Factor Analysis (CFA)

The validity and reliability testing of the research instruments based on confirmatory factor analysis in order to cross check are examined by AMOS software and displayed in Appendix 5. An indicator of a variable is valid if it has a significant loading factor (at  $\alpha = 5\%$ ). A research instrument is said to be valid if it has a value unidimensional of  $GFI > 0.90$ , and is said to be reliable if the construct reliability value is  $\rho_{\pi} > 0.70$ . Each instrument is considered to be valid with the construct reliability respectively (1) OCB = 0.775, (2) service quality = 0.735, (3) Patient Satisfaction = 0.832, and (4) Loyalty Services = 0.802.

### Weight Factors

The summary of Standardized Weight Factors Estimation Results and average indicators values of OCB variable (X1) is presented in the following table.

**Table 1.** Standardized Weight Factors Estimation Results of OCB

| Indicator | Estimation   | Average |
|-----------|--------------|---------|
| X1.1      | 0.750        | 4.56    |
| X1.2      | 0.651        | 4.49    |
| X1.3      | <b>0.780</b> | 4.37    |
| X1.4      | 0.397        | 4.86    |

The above table shows the results of Standardized Weight Factors of OCB variable (X1) and the largest weight is given to indicators of X1.3 (0.780) and the average indicators values are good (4.37) The weight factors and the average indicators values of Service Quality variable (X2) are presented as the following table.

**Table 2.** Standardized Weight Factors Estimation Results of Service Quality

| Indicator | Estimation   | Average |
|-----------|--------------|---------|
| X2.1      | 0.595        | 4.69    |
| X2.2      | 0.520        | 4.66    |
| X2.3      | 0.548        | 4.53    |
| X2.4      | 0.642        | 4.66    |
| X2.5      | <b>0.676</b> | 4.64    |

The above table shows the Standardized Weight Factors Estimation Results of Service Quality (X2) and the largest weight is given to the indicator of X2.5 and the average value of the indicator is good (4.64). The summary values of Standardized Weight Factors Estimation Results and average indicators values of Patient Satisfaction variable (Y1) is presented as the following table.

**Table 3.** Standardized Weight Factors Estimation Result of Patient Satisfaction

| Indicator | Estimation   | Average     |
|-----------|--------------|-------------|
| Y1.1      | <b>0.886</b> | <b>4.63</b> |
| Y1.2      | 0.882        | 4.61        |
| Y1.3      | 0.600        | 4.59        |

The above table shows that the Standardized Weight Factors Estimation Results of Patient Satisfaction (Y1) and the largest weight is given to the indicator of Y1.1 (0.886) and the average indicators values is 4.63. The summary values of Standardized Weight Factors Estimation Results and average indicators values of Patient Loyalty variable (Y2) is presented as the following table.

**Table 4.** Standardized Weight Factors Estimation Results of Patient Loyalty

| Indicator | Estimation   | Average |
|-----------|--------------|---------|
| Y2.1      | 0.719        | 4.35    |
| Y2.2      | <b>0.789</b> | 4.31    |
| Y2.3      | 0.763        | 4.16    |

The above table shows that the Standardized Weight Factors Estimation Results of Patient Loyalty (Y2) and the largest weight is given to the indicator of Y2.2 (0.789) and the average indicators values is high quite 4.31.

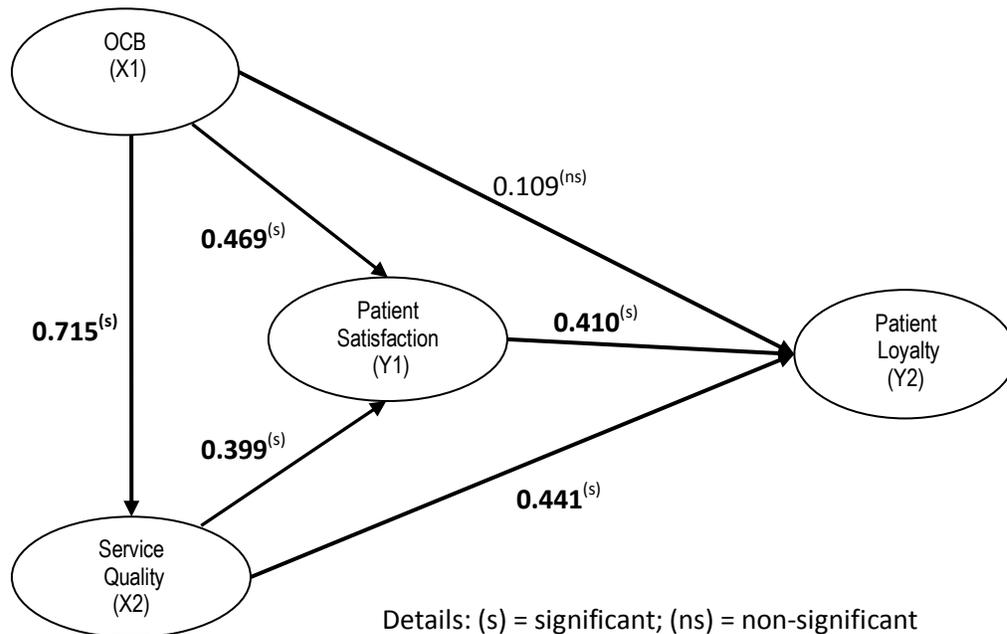
### Research Hypothesis Testing Results

Hypothesis testing is done by t-test on each direct effect path, while mediating variable hypothesis has also been tested, as described in the Methodology. The results of the full analysis, as explored in the SEM analysis results and the results of mediation variable testing can be seen in the Appendix. The summary of hypothesis testing results can be seen in the Table 5.

**Table 5.** Path Coefficient Testing by Involving Mediating Variables

| Independent Variable | Dependent Variable   | Direct Effect Coefficient |         |                 | Indirect Effect Coefficient              |              |             |
|----------------------|----------------------|---------------------------|---------|-----------------|------------------------------------------|--------------|-------------|
|                      |                      | Standardized              | P-value | Details         | Mediating Variable                       | Standardized | Details     |
| OCB                  | Service Quality      | 0.715                     | <0.001  | Significant     |                                          |              |             |
| OCB                  | Patient Satisfaction | 0.469                     | <0.001  | Significant     | Service Quality                          | 0.285        | Significant |
| OCB                  | Patient Loyalty      | 0.109                     | 0.430   | Non-significant | Service Quality and Patient Satisfaction | 0.625        | Significant |
| Service Quality      | Patient Satisfaction | 0.399                     | 0.003   | Significant     |                                          |              |             |
| Service Quality      | Patient Loyalty      | 0.441                     | 0.005   | Significant     | Patient Satisfaction                     | 0.164        | Significant |
| Patient Satisfaction | Patient Loyalty      | 0.410                     | 0.003   | Significant     |                                          |              |             |

The analysis result as shown in the tables can also be seen in the figure in a path diagram as follows.



**Figure 2.** Model Involving Mediating Variables

Based on the table above, the results obtained from hypothesis testing are:

The hypothesis showing that OCB has significant direct effect on service quality of Maternity Hospitals in Denpasar City is accepted. The standardized direct effect path coefficient is 0.715 with p-value = <0.001, so that it is decided as significant. This indicates that there is a significant and positive effect of OCB on service quality

directly, that is higher OCB will raise service quality in Maternity Hospitals in Denpasar City. The hypothesis showing that OCB has significant direct effect on patient satisfaction of Maternity Hospitals in Denpasar City is accepted. The standardized direct effect path coefficient is 0.469 with p-value = <0.001, so that it is decided as significant. This indicates that there is a significant and positive effect of OCB on patient satisfaction in Maternity

Hospitals in Denpasar City. The hypothesis showing that OCB has significant direct effect on patient loyalty of Maternity Hospitals in Denpasar City is rejected. The direct effect path coefficient is 0.109 with p-value = 0.430 and it is decided as insignificant. This indicates that there is positive effect of OCB on patient loyalty directly, even though it is not real. The hypothesis showing that service quality has the role in mediating OCB on patient satisfaction is accepted. This result can be demonstrated as : (1) Hypothesis 2 (H2) has shown that the direct effect of OCB on patient satisfaction of Maternity Hospitals in Denpasar City is significant; (2) Hypothesis 1 (H1) has shown that the direct influence of OCB on service quality of Maternity Hospitals in Denpasar City is also significant.; (3) While the direct effect of service quality on patient satisfaction of Maternity Hospitals in Denpasar City also results significant, because it has the standardized direct effect path coefficient of 0.399 with p-value = 0.003; (4) Standardized direct effect path coefficient of OCB on patient satisfaction by involving service quality as mediating variable, which is  $a_m = 0.469$ . Standardized direct effect path coefficient of OCB on patient satisfaction without involving service quality as mediating variable, which is  $a = 0.755$ . So  $a_m < a$ , thus it can be concluded that service quality is able in mediating the part of OCB effect on patient satisfaction. The hypothesis showing that service quality is able in mediating OCB effect on patient loyalty is accepted. This result can be demonstrated as: (1) Hypothesis 3 (H3) has shown that the direct effect of OCB on patient loyalty of Maternity Hospitals in Denpasar City is not significant; (2) Hypothesis 1 (H1) has shown that the direct effect of OCB on service quality of Maternity Hospitals in Denpasar City is significant; (3) While the direct effect of service quality on patient loyalty of Maternity Hospital in Denpasar City also reaches significant, because it has standardized direct effect path coefficient of 0.441 with p-value = 0.005. It can be concluded that service quality is able to be the complete mediation (perfect mediation) of OCB effect on patient loyalty. The hypothesis showing that patient satisfaction as mediating variable of OCB effect on patient loyalty is accepted. This result can be demonstrated as: (1) Hypothesis 3 (H3) has shown that the direct effect of OCB on patient loyalty of Maternity Hospitals in Denpasar City is not significant; (2) Hypothesis 2 (H2) has shown that the direct effect of OCB on patient satisfaction of Maternity Hospitals in Denpasar City is significant; (3) While the direct effect of patient satisfaction on patient loyalty of Maternity Hospitals in Denpasar City also reaches significant, because it has standardized direct effect path coefficient of 0.410 with p-value = 0.003; (4) Therefore, it can be concluded that patient satisfaction is able to be the complete mediation (perfect mediation) of OCB effect on patient loyalty. The hypothesis showing that service quality and patient satisfaction are as mediations of OCB effect on patient loyalty is accepted. This result can be demonstrated as below; (1) Hypothesis 3 (H3) has shown that the direct effect of OCB on patient loyalty of Maternity Hospital in Denpasar City is insignificant; (2) Hypothesis 1 (H1) has shown that the direct effect of OCB on service quality of Maternity Hospitals Denpasar City is significant, while direct effect of service quality patient loyalty of Maternity Hospital in Denpasar City is also determined significant; (3) Hypothesis 2 (H2) has shown that the direct effect of OCB

on patient satisfaction of Maternity Hospital in Denpasar City is significant, while direct effect of patient satisfaction on patient loyalty of Maternity Hospitals in Denpasar City is also decided significant. Hence, it can be concluded that service quality and patient satisfaction are able to be complete mediations (perfect mediations) of OCB effect on patient loyalty. In addition to the closed questions with the results described above, this study questionnaire is also equipped with open-ended questions. Broadly, the answers to the open question obtained from patients obtained are:

1. Patients' perceptions about their experiences during being a patient in Maternity Hospitals are fun, satisfying, getting good and fast service, familial, gaining knowledge on how to care for the baby, feeling safe, comfortable, quiet, and clean.
2. Patients' perceptions of extra behavior performed by the midwives at Maternity Hospital are nice, friendly, fun, being professional in work, patient, attentive, and responsive.
3. Patients' perceptions of their feelings during being a patient in Maternity Hospital are fun, safe, comfortable, quiet, contented, and being attended.
4. Patient's perceptions of the level of their loyalty on Maternity Hospitals are high. These results are indicated by several examination, treatment or confinement in the same place, recommending it to family, friends and others to conduct the examination, treatment or confinement in the same place.
5. Patients' perceptions about the reasons of being loyalty is the excellent, fast and satisfying service with friendly, kind, pleasant, patient, courteous, and attentive midwives. Also the atmosphere is safe, comfortable, clean, and having adequate infrastructures.

## Discussion

As mentioned in the research analysis and discussion that theoretically this study is able to find the relationship of OCB latent variables on service quality, patient satisfaction and patient loyalty. This study develops a model of Djati (2008) and Wallace *et al.* (2011) which build a model of the relationship between OCB and patient loyalty directly or indirectly through improving service quality and patient satisfaction. The indirect relationship is by using improved service quality and patient satisfaction. This study develops the relationship of OCB as antecedent of service quality, patient satisfaction and patient loyalty (customers). The findings of a causal variables relationship are OCB has positive and significant effect on service quality, service quality has a positive and significant effect on patient satisfaction, and patient satisfaction has positive and significant effect on patient loyalty. This research can contribute to the development of science of behavior management and marketing management field, and in particular on OCB, service quality, customer satisfaction, and customer loyalty. OCB is the behavior that is very suitable to be developed in an organization because it is able to improve the service quality and increase customer satisfaction, which in turn it positively affects the creation of customer loyalty. This research can contribute to the management board of Maternity Hospital. The contribution is that OCB gives positive impact on service quality, so it is

able to increase patient satisfaction and ultimately achieve patient loyalty. Implications for management of Maternity Hospital to further develop OCB behaviors, in the conditions where OCB is growing, the management should intensify the development of OCB behaviors, especially in improving the midwives' competences in order to always provide assistance to other midwife or doctor in providing delivery service. Besides to improve the competence of midwives, there are still some things that can be done by the Maternity Hospitals to improve OCB behaviors that evolved among others which are providing motivation to the midwife, creating leadership that provides comfortable working environment, and OCB behavior in the future can be linked to the performance appraisal process of the midwives. Midwives who have OCB behaviors get rewards evenly, whether it can be higher job position, or better honorariums. Implications for the Indonesian Midwife Association (IBI) are that the IBI can take OCB behavior policy development on all midwives, and make it as the requirement of competency standard to be held in the acquirement of certified midwives. Various limitations are also found in this study is mainly due to the following reasons: (1) This study uses only patient respondents of Maternity Hospitals and did not use midwives as respondents. This means that the OCB data are only assessed by external users, in which according to the theory mentioning that OCB should be assessed by internal users, the midwives as well; (2) This study does not analyze the antecedent of OCB as variable, so that the practical implication of OCB behavior cultural development cannot be done comprehensively. For the further study, the relationships of OCB as antecedent (as leadership, job satisfaction, job environment, job motivation) on service quality, customer satisfaction, and customer loyalty are suggested.

### Conclusion and Future Direction

Based on the research result, discussion, and interpretations that have been described in the previous chapter with referring to some theories and the results of previous studies, the conclusions to be drawn that increasing OCB may cause better service quality in Maternity Hospitals. Better OCB will support the delivery of services which is increasingly touching the patients, so it can improve its service quality. Increasing also OCB may lead to the improvement of patient satisfaction. This is because the OCB behavior can create the comfortable feelings for the patients at the Maternity Hospitals. These conditions surely increase patient satisfaction. Moreover, increasing OCB may lead to the increase of patient loyalty. This is because the behavior can make the patients feel fun. Pleasured patients in Maternity Hospital can improve patient loyalty. Increasing service quality may cause the patient to feel satisfied. On the other side of the OCB is the antecedent of service quality, so that it is able to cause service quality to become mediation of OCB relationship on patient satisfaction. Improving service quality can also increase patient loyalty. This is because the better service quality certainly makes the patient to do repeated visit if they need the delivering services. On the other hand, the quality of service may also be influenced by OCB behavior. This is what causes the service quality is able to mediate the relationship between OCB and patient loyalty. Improving patient satisfaction is making the patient

becomes more loyal. The positive influence of increasing patient satisfaction on patient loyalty is supported by the sense of happy patients, compliance expectations with perceived performance, so that the patients show behavior to do repeat visit and use the RB as the place of giving birth. Besides that, patient satisfaction is also influenced by OCB behavior, so that the patients are able to mediate the relationship of OCB on patient loyalty. OCB role also to improve service quality and patient satisfaction and ultimately giving a positive impact on patient loyalty is leading to service quality and patient satisfaction are able to mediate completely and perfectly the OCB relationship on patient loyalty. By considering the results of this study showing that that the OCB effect on service quality, patient satisfaction and loyalty, so that the four variables should be viewed as a mutual linked system. With several empirical evidences giving perspective that OCB has positive effect on service quality, patient satisfaction and also can increase patient, then the Maternity Hospital should always develop leadership of OCB behavior of the midwives, not only through various training programs but also from the examples given. The empirical evidence showing that service quality and patient satisfaction are perfectly able to mediate OCB relationship on patient loyalty, then the management of the Maternity Hospitals should prioritize programs that can improve service quality and patient satisfaction. Based on the weaknesses of this research, the next researchers can do some suggestions from the following matters: (1) In a subsequent study, to extend the survey respondents which are not only limited to patients but also the midwives who perform OCB behaviors; (2) The researchers continue to examine the effect of OCB on service quality satisfaction and patient loyalty by adding leadership roles since this is a variable that determine the developing culture of OCB behavior in an organization.

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