The Effect of Patient Relationship Management on Patient Loyalty in Buea, Cameroon: Mediating Role of Patient Satisfaction


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Abstract

Patient Relationship Management (PRM) has emerged as a pivotal strategy within the healthcare sector, aiming to cultivate strong patient-provider relationships and bolster patient satisfaction. This study investigates the influence of PRM on patient loyalty, with a focus on patient satisfaction as a mediating factor. The research delves into established literature and a theoretical framework to elucidate the interconnectedness between the constructs. Through convenience sampling method and data collected from patients who had received medical attention from hospitals operating in Buea, Cameroon, this study offers empirical insights into the critical determinants of patient loyalty in the healthcare industry. Data was drawn from 371 patients in the study area. PRM was found to positively impact patient loyalty. PRM had a significant effect on patient satisfaction and patient satisfaction positively impacted patient loyalty. Furthermore, patient satisfaction was found to partially mediate the relationship between PRM and patient loyalty. Understanding the nuanced relationship between PRM, patient satisfaction, and patient loyalty is vital for healthcare organizations seeking to enhance service quality and foster long-term relationships with their patients through personalised communication, targeted service delivery, and proactive patient engagement.

Keywords: Customer relationship management, healthcare quality, patient loyalty, patient relationship management, patient satisfaction.

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1. Introduction

Given the overwhelming evidence supporting patient relationship management as a substitute strategy for addressing the changes in the international marketplace, the present competitive environment threatened by the financial meltdown has only strengthened the necessity for both businesses to monitor how patients feel about their products and services (Ahammad et al., 2021). Understanding how managers may successfully create and uphold long-term, beneficial interactions with their patient have led to the development of Patient Relationship Management (PRM) (Fiwe et al., 2023). It has been stated that PRM enables businesses to successfully communicate with their patients dynamically and profitably. PRM is an information system that enables hospitals to keep track of how patients interact with them and enables staff to instantly access patient data like previous purchases, service history, unpaid invoices, and open cases. Businesses that choose to embrace PRM are believed to experience long-term improvements and advantages (Castanheira et al., 2019). PRM for healthcare is a system design method that aids in boosting patient satisfaction and lowering expenses. PRM in healthcare can support the promotion of wellness, disease prevention, and education services (Grabbe, 2020). This data may also be utilised to automate contact centre operations so that routine guidance for particular parts of care can be provided there without interfering with nurses’ or doctors’ primary care responsibilities. Patients can also benefit from a PRM programme, which enables hospital administrators to better understand patients’ wants and requirements through improved communication via follow-up frameworks (Mohiuddin, 2019). The need for doctors to observe the effectiveness of the treatment is critical. Hospitals may almost certainly move forward with more patient-driven duties. The managerial components of service delivery, including scheduling, timely and careful service completion, and enhancing interpersonal interactions as well as the communication skills of

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the doctors, nurses, and other staff, must be the primary objective of quality enhancement initiatives if private hospitals want to increase patient trust.

The concept of patient relationship management emerged from customer relationship management (Meskarpour-Amiri et al., 2021). Therefore, it is worth noting that in this study, customer relationship management is used interchangeably with patient relationship management. Patient relationship management (PRM) is key to retaining patients in hospitals, which is why it is vital in the healthcare sector (Abekah-Nkrumah et al., 2021). Hospitals have difficulty not just bringing in new patients but also maintaining their loyalty and patient satisfaction in the cutthroat healthcare environment of today. PRM techniques give hospitals a methodical way to handle patient connections throughout their healthcare experience. Hospitals need PRM for a variety of reasons. Hospitals may obtain important data on patients, such as their medical histories, preferences, and feedback, by putting good PRM practices in place (Baashar et al., 2020). Hospitals can use this information to deliver individualised care, customise treatment regimens, and personalise the patient experience. As a result, patients report higher levels of patient satisfaction because they feel appreciated, understood, and supported (Boivin et al., 2020). PRM makes it possible for hospitals to optimise and streamline their service delivery procedures. The total patient experience can be improved by tracking patient interactions, preferences, and feedback to pinpoint areas for improvement, quickly resolve any problems, and improve patient satisfaction. Patients are more satisfied and loyal when services are of high quality and efficient.

There is an immense gap in the current body of research in hospital management that expressly addresses PRM in the healthcare sector. Although PRM has been thoroughly researched in many different industries, such as retail and services, it is imperative to replicate the same study in the medical sector. Therefore, studying PRM in the context of hospitals in Cameroon will help add to the body of knowledge and offer insightful information about the particular difficulties and opportunities that healthcare organizations experience when implementing PRM strategies. Although there are theoretical frameworks that link these variables, there is a dearth of actual data to substantiate these associations in the particular setting of Cameroonian hospitals.

2. Literature Review

2.1. Relationship between Patient Relationship Management and Patient Loyalty

PRM is seen as a useful tool to help organizations preserve and use vital information about the requirements, expectations, and preferences of consumers to keep them satisfied and loyal (Krishna et al., 2022). PRM is therefore anticipated to have a favourable relationship with patient loyalty. This point of view is supported by Ahmad (2019), which showed that PRM practices such as cross-selling, patient service personalization, and numerous channels had a beneficial impact on patient loyalty. Additionally, there is evidence to support the concept that PRM has a major impact on both patient satisfaction and patient loyalty (Almohaimmeed, 2019). Khan et al. (2022) claim that the main objective of PRM is to increase patient satisfaction, trust, loyalty, and retention. Thus, it is hypothesised that PRM and patient loyalty are directly and significantly related.

Hypothesis 1: There is a positive and significant impact of PRM on patient loyalty.

2.2. Relationship between Patient Relationship Management and Patient Satisfaction

Since patient satisfaction has been highlighted as a key factor in determining loyalty, service providers must take PRM seriously because it can result in a positive relationship between service providers and their patients. Additionally, it has been demonstrated that patient satisfaction is crucial to retaining patients' business. PRM appears to be favourably associated with patient satisfaction, trust, and knowledge, according to evidence from the literature that has already been published (Kumar & Misra, 2021). Although patient satisfaction with a product or service is frequently linked to loyalty, it is insufficient to act as the precursor of loyalty (Ooi et al., 2022). According to Hayati and Al Muddatstsir (2019), PRM is essential for maintaining loyalty, particularly with long-term patients. Patient involvement in PRM implementation is also thought to have a positive impact on patient satisfaction, loyalty, and trust (Mokha & Kumar, 2021). Therefore, an effective PRM will affect patient loyalty through patient satisfaction, even after taking into account other aspects that equally affect patient loyalty and patient satisfaction (Molinillo et al., 2022). Therefore, the following hypothesis is proposed:

Hypothesis 2: PRM has a positive and significant effect on patient satisfaction.
2.3. Relationship between Patient Satisfaction and Patient Loyalty

According to research by Sitio and Ali (2019), patient satisfaction has a significant impact on patient loyalty. Patient satisfaction and loyalty are the two strategic structures that need to be monitored and maintained (Balci et al., 2019). By analysing this relationship, Hamzah et al. (2021) explained how patient loyalty is directly impacted by consumer satisfaction. Patients' good behaviour will then help to establish trust, which can have a direct impact on patient loyalty (Elizar et al., 2020). Gopi and Samat (2020) suggest that service quality dimensions and patient loyalty are specifically linked. Satisfied patients are more likely to purchase and use the product or service again. In contrast, experiencing dissatisfaction enables patients to get disillusioned and quit using the product or service again (Watawala et al., 2022). Patient retention and purchase intention are influenced by patient satisfaction. Accordingly, a higher level of patient satisfaction will result in more purchases as well as referrals of goods and services to other potential patients, which will inevitably have a long-term impact on the company's anticipated sustainable profitability (Lysenko-Ryba & Zimon, 2021). This is thought to be able to boost patient loyalty. Loyalty is an optimistic mindset and a consumer's connection that centres on a sense of liking the company's products, feeling familiar with the brand, having pride in using a specific brand, and consumers buying that brand consistently, which can be seen from the consumers' commitment to keep using it. Patients who are more satisfied and loyal to a brand are more likely to be profitable and competitive. In a highly competitive and dynamic economy, building patient loyalty gives a company a sustainable competitive edge that will be very helpful. The study hypothesized based on the literature:

**Hypothesis 3:** Patient satisfaction has a positive and significant effect on patient loyalty.

2.4. The Mediating Role of Patient Satisfaction on the Relationship between PRM and Patient Loyalty

According to Arslan (2020), PRM focuses on creating, managing, and growing the relationship between a business and its consumers. In a business, PRM is a component of marketing management. From a marketing perspective, a business expects to contribute to the improvement of patient behaviour and preference, which in turn affects the depth and strength of the relationship the business has with its patients, which in turn increases the lifetime value of those patients, which, taken together, increases patient equity and the return on marketing investment (Sun et al., 2020). When performance is compared to expectations, patient satisfaction can be viewed as an evaluation. When a product or service meets or exceeds a patient's expectations, this is referred to as patient satisfaction (Eren, 2021). It is frequently seen as the essential element for a business's long-term competitiveness and success. Research has been done on the connection between marketing, patient satisfaction, and loyalty. Since satisfied patients are more likely to make repeat purchases and have greater confidence in making additional purchases, it has been discovered that effective PRM practices are associated with an increase in patient satisfaction (Suchánek & Králová, 2019). Additionally, it is believed that PRM's immediate goal is patient satisfaction, which has a big impact on the Organization’s long-term objectives of patient loyalty and retention as well as profitability (Mokha & Kumar, 2021). The maximization of patient satisfaction and the decrease in complaints are important results of excellent PRM performance, according to Weshah (2019). Therefore, the following hypothesis is proposed:

**Hypothesis 4:** Patient satisfaction significantly mediates the relationship between PRM and patient loyalty.

2.5. Theoretical Framework

The Social Exchange Theory (SET) was used to explain the relationship between the variables. Parties enter relationships with the expectation that they will provide worthwhile results. Social exchange theory is concerned with connections and processes that are beneficial to the parties involved, these are referred to as “transactions” and “exchanges” (Boateng et al., 2019). The fundamental premise of the SET is that interested parties would interact socially to accomplish the goal(s) that neither could have accomplished on their own. These conversations would end if the parties felt that their connection was no longer mutually beneficial. Abekah-Nkrumah et al. (2021) proposed that the main claims of SET are based on four general positions that are almost like laws, drawing on the works of Popper and Rudner. The SET asserts that partners in a transaction anticipate beneficial results (Voss et al., 2019). For the partnership to continue, these results must be advantageous to both parties. Social exchange theory can serve as a solid theoretical framework for elucidating the interaction between healthcare practitioners and the patients they treat, which is the focus of this essay. However, whether or not patients choose to show their loyalty to a company depends on how satisfied they are with its services or goods (Ali et al., 2021). Patient satisfaction—a rewarding outcome for the healthcare provider—is necessary for patient loyalty, which is a gratifying consequence for the patient (Dayan et al., 2022). As a result, both the patient and the healthcare provider are involved in a social exchange that is mutually beneficial, and this
exchange will continue as long as both parties’ benefit from the connection. The model proposes that patient satisfaction mediates the relationship between PRM impacts patient loyalty.

![Conceptual Model](image)

**Figure 1. Conceptual Model**

### 3. Methodology

#### 3.1. Sample and Data Collection

The sample population consisted of adults between the ages of 20 and 75 years who visited health facilities in the Buea Health District (BHD) within a year. The convenience sampling technique was employed for data collection. According to (Agborndip et al., 2020), the Buea Health District (BHD) has an estimated population of 81,478 inhabitants. The sample size was determined using the Krejcie and Morgan (1970) sample size equation (Canwat & Onakuse, 2023). A total number of 383 was obtained. The questionnaire distributed was 400, 390 responses were returned but 19 responses were deleted due to missing information. Hence, 371 was employed for the analysis.

\[
\text{Sample size} = \frac{X^2NP(1-P)}{d^2(N-1) + X^2P(1-P)}
\]

where:
- \(X^2\): This is the chi-square value corresponding to a 95% confidence level
- \(N\): This represents the given population size (19000)
- \(P\): This is the population proportion (0.5)
- \(d\): This refers to the margin of error or degree of accuracy (0.05)

Therefore, using the above formula, the required sample size is 383.

#### 3.2. Measures

PRM variables have 4 dimensions namely, Patient Service (PS) 5 items, Service Quality (SQ) 21 items, Communication (COM) 3 items and Information Technology (IT) 4 items adopted from (Abekah-Nkumah et al., 2021). Patient satisfaction was measured using 5 items adopted from Cham et al. (2022) while patient loyalty was measured using 3 items adopted by Abekah-Nkumah et al. (2021). All items were measured using a 5-point Likert scale ranging from 1= strongly disagree to 5= strongly agree.

#### 3.3. Data Analysis

Data analysis was carried out using SPSS (version 25). Data cleaning was done to detect missing values, coding errors, or any illogical data values. Pearson’s correlation was employed to examine the degree of correlation between
the constructs. Furthermore, regression was conducted using the Hayes Process Macro (Model 4) to evaluate the direct and indirect relationships among the constructs.

4. Result

4.1. Demographic Information of the Participants

The majority of respondents were females representing 63.3% while the male respondents represented 36.7%. Most respondents were within the age group of 31–40 representing 25.9%. As regards the educational level of the respondents, the result indicates that the majority attained secondary school 160 (43.1%) while 4% had no education. Most respondents had visited the health facility three times (40.2%) while 9.2% attended once.

Table 1. Demographic Information

<table>
<thead>
<tr>
<th>Variables</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>136</td>
<td>36.7</td>
</tr>
<tr>
<td>Female</td>
<td>235</td>
<td>63.3</td>
</tr>
<tr>
<td>Total</td>
<td>371</td>
<td>100.0</td>
</tr>
<tr>
<td>Age group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-20 years</td>
<td>27</td>
<td>7.3</td>
</tr>
<tr>
<td>21-30 years</td>
<td>63</td>
<td>17.0</td>
</tr>
<tr>
<td>31-40 years</td>
<td>96</td>
<td>25.9</td>
</tr>
<tr>
<td>41-50 years</td>
<td>53</td>
<td>14.3</td>
</tr>
<tr>
<td>51-60 years</td>
<td>92</td>
<td>24.8</td>
</tr>
<tr>
<td>Above 60 years</td>
<td>40</td>
<td>10.8</td>
</tr>
<tr>
<td>Total</td>
<td>371</td>
<td>100.0</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>None</td>
<td>15</td>
<td>4.0</td>
</tr>
<tr>
<td>Primary school</td>
<td>54</td>
<td>14.6</td>
</tr>
<tr>
<td>Secondary and high school</td>
<td>160</td>
<td>43.1</td>
</tr>
<tr>
<td>Tertiary</td>
<td>142</td>
<td>38.3</td>
</tr>
<tr>
<td>Total</td>
<td>371</td>
<td>100.0</td>
</tr>
<tr>
<td>Time of visit to a health facility</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Once</td>
<td>34</td>
<td>9.2</td>
</tr>
<tr>
<td>Twice</td>
<td>79</td>
<td>21.3</td>
</tr>
<tr>
<td>Three times</td>
<td>149</td>
<td>40.2</td>
</tr>
<tr>
<td>Four times and more</td>
<td>109</td>
<td>29.4</td>
</tr>
<tr>
<td>Total</td>
<td>371</td>
<td>100.0</td>
</tr>
</tbody>
</table>

4.2. Confirmatory Factor Analysis

Confirmatory Factor Analysis (CFA) was conducted to investigate the factorial structure of the research instrument. One item from patient service was deleted as it did not meet the required threshold ≥ 0.5 as recommended by Ogunsanya et al. (2022). Cronbach’s alpha is a measure of internal consistency that shows how closely related a set of items are as a group. Cronbach’s alpha of 0.70 and above is recommended by Ogunsanya et al. (2022). From the reliability test results, Cronbach’s alpha obtained shows that the data is reliable (Table 2).

4.3. Correlation Analysis

Table 3 shows the descriptive statistics and correlation matrix. All correlation values were positively and significantly associated (p< 0.05).
Table 2. CFA and Reliability

<table>
<thead>
<tr>
<th>Construct</th>
<th>Dimension</th>
<th>Loadings</th>
<th>Cronbach’s alpha</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRM</td>
<td>PS2-PS5</td>
<td>.873-.964</td>
<td>.886</td>
</tr>
<tr>
<td></td>
<td>SQ1-SQ21</td>
<td>.511-.899</td>
<td></td>
</tr>
<tr>
<td></td>
<td>COM1-COM3</td>
<td>.826-.864</td>
<td></td>
</tr>
<tr>
<td></td>
<td>IT1-IT4</td>
<td>.812-.901</td>
<td></td>
</tr>
<tr>
<td>PS1-PS5</td>
<td>-</td>
<td>.752-.854</td>
<td>.910</td>
</tr>
<tr>
<td>PL1-PL3</td>
<td>-</td>
<td>.709-.800</td>
<td>.789</td>
</tr>
</tbody>
</table>

Table 2. Descriptive Statistics and Correlation Analysis

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>SD</th>
<th>PL</th>
<th>PS</th>
<th>PRM</th>
</tr>
</thead>
<tbody>
<tr>
<td>PL</td>
<td>4.37</td>
<td>.53</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PS</td>
<td>3.14</td>
<td>.63</td>
<td>.401**</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>PRM</td>
<td>3.43</td>
<td>.67</td>
<td>.174**</td>
<td>.191**</td>
<td>1</td>
</tr>
</tbody>
</table>

**, Correlation is significant at the 0.01 level (2-tailed).

4.4. Regression Results

Table 4 presents the summary of the direct and indirect relationships. Hypothesis 1 predicts that there is a positive and significant impact of PRM on patient loyalty ($\beta = .128^*, p < .05$). Therefore, hypothesis 1 is supported. Hypothesis 2 suggests that PRM has a positive and significant effect on patient satisfaction ($\beta = .227^{***}, p < .001$). Thus, hypothesis 2 is supported. Hypothesis 3 suggests that patient satisfaction is positively related to patient loyalty ($\beta = .407^{****}, p < .0001$). Hence, hypothesis 3 is supported. The mediation result revealed a partial mediation effect of PS in the relationship between PRM and PL. Hence, H4 is supported.

Table 4. Hypothesis Testing Based on Regression Results

<table>
<thead>
<tr>
<th>Path</th>
<th>Direct Effect</th>
<th>Mediation Effect</th>
<th>Total Effect</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B</td>
<td>Std. error</td>
<td>T</td>
</tr>
<tr>
<td>H1</td>
<td>PRM ---&gt; PL</td>
<td>.221</td>
<td>.065</td>
</tr>
<tr>
<td>H2</td>
<td>PRM ---&gt; PS</td>
<td>.227</td>
<td>.061</td>
</tr>
<tr>
<td>H3</td>
<td>PS ---&gt; PL</td>
<td>.407</td>
<td>.051</td>
</tr>
<tr>
<td>H4</td>
<td>PRM ---&gt; PS ---&gt; PL</td>
<td>.09</td>
<td>.02</td>
</tr>
</tbody>
</table>

5. Discussion

This study makes three significant contributions to the literature on management and marketing. First, the healthcare sector has not given PRM significant empirical consideration as a strategy for patient retention. Additionally, there is a dearth of empirical data on the connections between PRM and patient loyalty (Ekakitie-Emonena & Alagba, 2021). Second, this study evaluates these connections using patient data from Buea, Cameroon. Since Cameroon has a subpar medical system that influences the overall quality of care, the country appears to be one of the best places to study these relationships. Thirdly, this study examined patient satisfaction's role as a mediator between PRM and loyalty.
The results suggest that the PRM influences patient loyalty. Organizations may strengthen patient connections through PRM techniques such as personalised communication, targeted service delivery, and proactive patient engagement. This builds consumer trust, contentment, and loyalty, which influence their purchase decisions. These may include a thorough patient database, analysis of consumer behaviour and preferences, loyalty programmes, and personalised experiences. Organizations may strategically allocate resources to optimise PRM initiatives and maximise patient loyalty by understanding these significant elements. Therefore, organizations must adapt their PRM strategies to changing patient preferences. This adaptability keeps the company relevant and responsive to patient needs, enhancing its relationship with loyal consumers. This result is consistent with Ekakitie-Emomena and Alagba, (2021) who found that the effective practice of PRM has a significant effect on the loyalty of patients. Furthermore, Fahira (2018) state that PRM has a favourable and significant impact on patient satisfaction. Patient loyalty is another area where PRM has a major impact (Suharto & Yuliansyah, 2023). PRM is a marketing strategy that seeks a positive relationship between the business and its patients to readily discover information about patients’ needs and optimise that to raise patient satisfaction, which will eventually have an impact on patient loyalty. These PRM aspects can help companies build patient loyalty and long-term partnerships. Prompt and personalised responses to patient questions, successful complaint resolution, and proactive follow-up may increase patient loyalty.

The findings revealed that PRM has a significant and positive effect on patient satisfaction which is in line with the findings of Alshurideh (2022). Organizations may satisfy patients by adopting PRM practices that prioritise personalised interactions, efficient communication, and attentive patient care (Low et al., 2020). PRM enables companies to grasp patients’ preferences, wants, and expectations. Organizations may personalise experiences, address individual needs, and give proactive support in improving patient satisfaction (Buhalis & Sinarta, 2019). Focusing on this strategy, organizations can fine-tune their PRM initiatives to meet their consumer expectations. PRM is centred on long-term and lasting connections that can have a positive impact on patient satisfaction.

A significant association was also obtained between patient satisfaction and patient loyalty. Patients who are satisfied with a product, service, or overall patient experience are more loyal to the company (Voss et al., 2019). Patients who trust and recommend a company are more likely to buy from them again. To satisfy and retain patients, the study emphasises exceeding expectations. Patients are more satisfied when companies keep their promises, provide consistent quality, and meet their needs. This Patient satisfaction increases loyalty, repurchases, engagement, and favourable word-of-mouth referrals. This finding is consistent with previous studies, which postulate that many factors affect patient satisfaction and loyalty. These variables may include product or service quality, patient assistance responsiveness, problem resolution effectiveness, personalised attention, and the overall patient experience (Nasir et al., 2021). The findings of Liu et al. (2021) supported the asymmetric and nonlinear connection between patient loyalty and patient satisfaction. Purchase loyalty increased strongly when patient satisfaction increased beyond a threshold, and it decreased just as promptly when patient satisfaction decreased below a threshold. According to Alshurideh (2019), satisfied patients are more likely to make repeat purchases and even develop a sense of loyalty. Ajao et al. (2012) discovered significant connections between loyalty and patient satisfaction. Cakici et al. (2019) claimed that the relationship between loyalty and patient satisfaction evolves. However, it is anticipated that the nature of the goods and services will have an impact on the relationship between patient satisfaction and loyalty. Organizations can strategically focus on improving these major patient satisfaction drivers to maximise patient satisfaction and loyalty.

The finding that patient satisfaction partially mediates the relationship between PRM and patient loyalty is consistent with the findings of Khan et al. (2022) which found that PRM techniques affect patient satisfaction and loyalty. Similarly, effective PRM practices have been proven to be associated with an increase in patient satisfaction. This is because satisfied consumers are more likely to make repeat purchases and feel confident about buying additional items (Fang et al., 2011). According to Santouridis and Veraki (2017), patient retention and loyalty are considered mid-term PRM goals that have a substantial impact on patient satisfaction. These mid-term goals, in turn, have an impact on organizational profitability and performance. Additionally, Khan et al. (2022) discovered that the relationship between PRM and patient loyalty is significantly mediated by patient satisfaction. Hence, organizations should emphasize personalised encounters, effective communication, and proactive patient engagement to boost patient satisfaction (Bolton et al., 2018). The study found that patient satisfaction mediates the association between PRM practices and patient loyalty (Khan et al., 2022). These findings emphasise the importance of prioritising and investing in PRM practices that improve patient satisfaction. Organizations can boost patient satisfaction by personalising PRM initiatives, responding quickly, and proactively resolving consumer complaints. Thus, increased patient satisfaction leads to loyalty, repeat business, and favourable word-of-mouth referrals.
5.1. Managerial implications

PRM is a crucial and strategic tool for providers of health care services, according to the research. PRM gives healthcare management a means of creating and successfully delivering services that consistently satisfy patient expectations. The results of this study have significant ramifications for Buea, Cameroon's healthcare institutions' ability to effectively manage their patients. PRM is a prerequisite for both patient loyalty and patient satisfaction. Service quality, patient service, communication, and information technology were considered when developing PRM. Healthcare administrators must make sure that the services provided by their facilities are of a high standard to satisfy the needs of all patients who come to the institution for PRM to be effective. Similarly, healthcare service providers must effectively connect with patients and meet their demands to design and deliver services that consistently live up to patients' expectations. The purchase and implementation of cutting-edge technology are also essential for the effective operation of PRM systems in healthcare facilities. Additionally, the system should be managed by skilled and motivated employees to achieve the desired outcomes. Utilising cutting-edge technology efficiently and consistently to support the provision of high-quality services and patient service would not only increase patient satisfaction but also win over patients' loyalty. Implementing PRM will significantly improve the quality of service, healthcare outcomes, and subsequently patient loyalty to healthcare facilities in Cameroon, where both the private and public health sectors emphasise the issue of service quality and patient-centeredness as core values. The implementation of PRM will be crucial in achieving the twin objectives of service quality and patient-centeredness and, as a result, improved results to stay ahead of the competitors in the sector, particularly in the private sector where rivalry is fierce. Despite the current findings, it is crucial to note that PRM has been conceptualised using factors like trust and commitment, which have been recognised in the mainstream marketing literature as critical components.

5.2. Limitations and Future Research Directions

The findings of this study may have limited generalizability due to the specific focus on Buea, Cameroon. The findings might not be transferable to different geographic or cultural settings. To evaluate patient loyalty, patient satisfaction, and the effects of PRM, the study used self-reported metrics, such as survey responses. These measurements are susceptible to respondent biases, such as social desirability or problems with memory recall, which could skew the results. The study only employed quantitative data, overlooking any potential revelations that qualitative methods (such as focus groups or interviews) might have offered. It is possible that a mixed method would have provided a more thorough grasp of the research issue. Patient satisfaction was chosen as the mediating variable between PRM and patient loyalty in the study. However, other factors like perceived value or trust may also play mediating roles in the relationship. As a result, the findings might not consider all possible mediating factors. The cultural and contextual aspects of the study area were not thoroughly explored. As a result, the potential impact on the constructs cannot be accounted for. The study relied heavily on cross-sectional data. Hence, it is difficult to track changes or variations in PRM, patient satisfaction, and loyalty over time. It would be more suitable to present these factors and their interactions using longitudinal data.

6. Conclusion

The study revealed that PRM has an impact on patient loyalty in the healthcare industry. In this study, it was discovered that all dimensions of PRM had a significant impact on promoting satisfaction and patient loyalty in hospital settings. Therefore, healthcare facilities can improve patient satisfaction and foster lasting relationships among their patient base by establishing a specific focus on service quality, patient service, communication, and information technology. The degree to which a healthcare facility successfully implements a PRM strategy has a favourable impact on how satisfied patients are with the services offered. This implies that implementing PRM practices can improve patient satisfaction. This study emphasises the critical role that PRM plays in fostering patient loyalty in the healthcare industry. It emphasises how crucial communication, information technology, and patient service are in fostering patient loyalty. It emphasises the significance of patient satisfaction as a mediating factor, demonstrating its beneficial effects on the connection between PRM and patient loyalty.

References


