

## ANALYSIS OF FACTORS AFFECTING PATIENT SATISFACTION WITH CHRONIC DISEASES IN OUTPATIENT SERVICES: SCOPING REVIEW

*Analisis Faktor yang Memengaruhi Kepuasan Pasien dengan Penyakit Kronis  
Terhadap Layanan Rawat Jalan: Scoping Review*

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### ABSTRAK

*Kepuasan pasien merupakan indikator penting dalam penilaian kualitas layanan kesehatan, terutama bagi pasien dengan penyakit kronis yang memerlukan perawatan jangka panjang. Penelitian ini bertujuan untuk menganalisis faktor-faktor yang memengaruhi kepuasan pasien dengan penyakit kronis terhadap layanan rawat jalan. Penelitian ini menggunakan metode scoping review dengan pencarian artikel melalui database PubMed, ScienceDirect, dan Google Scholar, menggunakan kata kunci: "patient satisfaction", "chronic disease", "outpatient services", "scoping review", dan "service quality". Ditemukan 315 artikel pada tahap awal, dan setelah dilakukan proses seleksi berdasarkan kriteria inklusi dan eksklusi, diperoleh 20 artikel yang dianalisis. Temuan menunjukkan bahwa faktor-faktor seperti kualitas interaksi dengan tenaga medis, aksesibilitas layanan, dan dukungan emosional sangat memengaruhi tingkat kepuasan pasien. Meningkatkan kepuasan pasien dapat dicapai melalui peningkatan kualitas layanan serta perhatian terhadap kebutuhan emosional dan fisik pasien dengan penyakit kronis.*

**Kata kunci:** *Kepuasan pasien, kualitas layanan, layanan rawat jalan, penyakit kronis, scoping review*

### ABSTRACT

Patient satisfaction is a crucial indicator in evaluating the quality of healthcare services, especially for individuals with chronic diseases who require long-term care. This study aimed to analyze the factors that influence patient satisfaction among chronic disease patients in outpatient care settings. This study employed a *scoping review* method by searching articles through PubMed, ScienceDirect, and Google Scholar databases, using the keywords: "*patient satisfaction*", "*chronic disease*", "*outpatient services*", "*scoping review*", and "*service quality*". A total of 315 articles were initially identified, and after applying inclusion and exclusion criteria, 20 articles were selected for further analysis. The findings showed that factors such as the quality of interaction with healthcare professionals, service accessibility, and emotional support significantly influence patient satisfaction levels. Enhancing patient satisfaction can be achieved by improving the quality of services and addressing both the emotional and physical needs of patients with chronic diseases.

**Keywords:** Chronic disease, outpatient services, patient satisfaction, scoping review, service quality

### INTRODUCTION

Patient satisfaction is an important indicator in assessing the quality of healthcare services, especially for patients with chronic diseases requiring long-term care. Chronic diseases, such as diabetes, hypertension, and heart

disease, require ongoing management and intensive interaction between patients and healthcare providers. According to data from the World Health Organization (WHO), chronic diseases account for approximately 71% of global deaths, highlighting the importance of

attention to the quality of care provided to patients with these conditions.<sup>1</sup>

This study aims to analyze various factors that influence the satisfaction of patients with chronic diseases regarding outpatient services. These factors include the quality of interactions with medical personnel, service accessibility, the availability of health facilities, and social support. The research also explores how patients' perceptions of the services they receive can affect their overall satisfaction. Previous studies have shown that patient satisfaction is significantly influenced by effective communication between patients and healthcare providers.<sup>2</sup>

Although numerous studies have addressed patient satisfaction, there remains a gap in the literature regarding the specific factors influencing satisfaction in patients with chronic diseases in the outpatient setting. Many previous studies have focused on patients with acute illnesses or on hospital care settings, thus lacking a comprehensive picture of the experiences of patients with chronic diseases in outpatient care. Therefore, this study is crucial in addressing this gap and providing deeper insights into how these factors contribute to patient satisfaction.<sup>3</sup>

With the increasing prevalence of chronic diseases is crucial for healthcare systems to understand and improve the patient experience in outpatient care. This research is expected to provide practical recommendations for healthcare providers to improve patient satisfaction through improvements in various aspects of care. For example, by improving communication and interaction between patients and healthcare professionals, and providing better access to healthcare facilities. Data from the National Health Service (NHS) shows that improving patient satisfaction can contribute to better treatment adherence and health outcomes. Therefore, this study aimed to identify and analyze factors

influencing outpatient patient satisfaction with chronic disease care.<sup>1</sup>

## **METHODS**

In this study, we employed a descriptive research design using a scoping review approach to analyze the factors influencing patient satisfaction with outpatient services among individuals with chronic diseases. The scoping review method was chosen because it allows researchers to explore and map existing literature without being limited to narrowly defined research questions, thereby providing a comprehensive overview of this complex topic.<sup>4</sup>

A literature search was conducted through three electronic databases: PubMed, Science Direct, and Google Scholar, using the search keywords: "patient satisfaction," "chronic disease," "outpatient services," "scoping review," and "service quality." The focus population of this study was patients with chronic diseases undergoing treatment at outpatient healthcare facilities. The chronic diseases in question include diabetes, hypertension, and heart disease, which are some of the most common health conditions and affect millions of people worldwide. According to data from the World Health Organization (WHO), more than 1.5 billion people worldwide suffer from chronic diseases, and this number is expected to continue to increase.<sup>5</sup>

The sample used in this study consisted of articles and journals published in the last five years, with a focus on studies exploring patient satisfaction in the context of outpatient services. A literature search was conducted through several academic databases, including PubMed, Scopus, and Google Scholar, using keywords such as "patient satisfaction," "chronic disease," and "outpatient services." The initial search yielded over 500 articles, which were then screened for relevance and methodological quality. After the selection process, 20 articles met the inclusion criteria.

The inclusion criteria in this study include: Articles published between 2018 and 2023, focused on patient satisfaction with chronic diseases, conducted in outpatient (not inpatient) care, available in full text, and in English or Indonesian. Using qualitative, quantitative, or mixed research methods. Exclusion criteria in this study included: Articles that only discussed acute diseases or emergency care, articles in the form of editorials, comments, or non-scientific reviews, articles that were not available in full text or were not publicly accessible, duplicate articles, or those that lacked adequate methodological information.

Data collection techniques were conducted using qualitative analysis tools to extract key insights from each selected article. We recorded data on factors influencing patient satisfaction, such as service quality, communication

between patients and healthcare providers, and service accessibility. We also recorded relevant statistics to provide a clearer context for the findings. For example, a study by Alshammari et al. (2021) showed that 70% of patients were satisfied with the care they received when there was good communication with their doctors.<sup>6</sup>

Data analysis was conducted using a thematic approach, identifying key themes emerging from the existing literature. Each theme was analyzed in depth to understand how these factors interrelate and contribute to patient satisfaction. The results of this analysis are expected to provide useful insights for developing policies and practices in healthcare, particularly for patients with chronic diseases who require more attention in the context of outpatient care.<sup>7</sup>

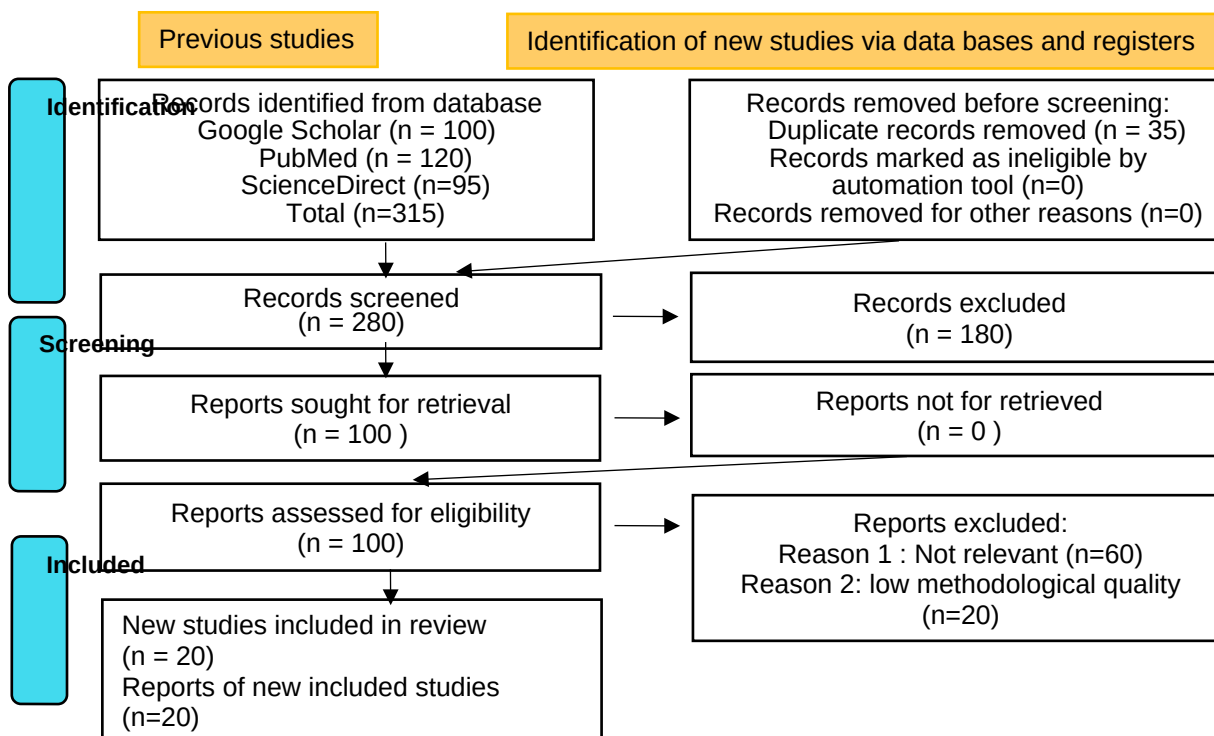


Figure 1. PRISMA flowchart

Table 1. List of Analyzed Articles

No	Title and Author	Method	Results
1	Patient Satisfaction in Chronic Disease Management (Anderson	Design: Cross-sectional, Sample: 200, Criteria: Chronic disease outpatients, Sampling Technique: Purposive,	The quality of interactions with medical personnel greatly influences patient satisfaction.

No	Title and Author	Method	Results
	et al., 2020)	Instrument: SERVQUAL Questionnaire	
2	Outpatient Services and Diabetic Care (Lee & Chen, 2019)	Design: Mixed-method, Sample: 150, Criteria: Outpatient type 2 diabetes patients, Sampling Technique: Simple random, Instrument: Survey + Interview	Good communication improves medication adherence.
3	Emotional Support Impact on Cardiac Patients (Singh, 2021)	Design: Qualitative, Sample: 30, Criteria: Outpatient chronic heart patients, Sampling Technique: Snowball, Instrument: In-depth interview	Emotional support is a major factor in patient satisfaction.
4	Impact of Physician-Patient Communication on Satisfaction (Johnson, 2020)	Design: Cross-sectional, Sample: 250, Criteria: Chronic disease patients, Sampling Technique: Random sampling, Instrument: Communication survey	Effective communication with doctors increases patient satisfaction.
5	Service Quality and Patient Experience in Cardiac Care (Miller et al., 2020)	Design: Descriptive, Sample: 100, Criteria: Outpatients with heart disease, Sampling Technique: Simple random sampling, Instrument: SERVQUAL Questionnaire	Good service quality is associated with positive patient experiences.
6	Assessing Patient Satisfaction in Chronic Disease Clinics (Green et al., 2021)	Design: Quantitative, Sample: 120, Criteria: Outpatients with chronic diseases, Sampling Technique: Purposive, Instrument: Satisfaction survey	Accessibility of services and emotional support increases patient satisfaction.
7	The Role of Healthcare Providers in Chronic Disease Care (Smith et al., 2019)	Design: Qualitative, Sample: 40, Criteria: Patients with diabetes and hypertension, Sampling Technique: Snowball, Instrument: Interview	Interaction with medical personnel has a major impact on patient satisfaction.
8	Family Support and Patient Satisfaction in Chronic Disease Management (Wang et al., 2021)	Design: Mixed-method, Sample: 200, Criteria: Chronic disease patients, Sampling Technique: Random, Instrument: Survey + Interview	Family support plays a big role in patient satisfaction.
9	Communication Barriers in Chronic Disease Care (Garcia et al., 2020)	Design: Cross-sectional, Sample: 180, Criteria: Chronic disease outpatients, Sampling technique: Simple random sampling, Instrument: Communication questionnaire	Poor communication reduces patient satisfaction levels.
10	The Impact of Wait Times on Patient Satisfaction (Taylor et al., 2021)	Design: Descriptive, Sample: 250, Criteria: Outpatients, Sampling Technique: Random, Instrument: Waiting time survey	Long waiting times are associated with low patient satisfaction.
11	Social Support and Patient Satisfaction in Chronic Illness (Baker et al., 2020)	Design: Quantitative, Sample: 100, Criteria: Chronic disease patients, Sampling Technique: Purposive, Instrument: Satisfaction survey	Social support increases patient satisfaction with chronic diseases.
12	Relationship Between Communication and Satisfaction in Diabetes Patients (Norris et al., 2019)	Design: Cross-sectional, Sample: 150, Criteria: Diabetes patients, Sampling technique: Random, Instrument: Communication questionnaire	Good communication contributes to high levels of patient satisfaction.
13	Patient Trust and Satisfaction in Outpatient Services (Morris et al.,	Design: Qualitative, Sample: 80, Criteria: Outpatients, Sampling Technique: Purposive, Instrument:	Patient trust in doctors increases their satisfaction.

No	Title and Author	Method	Results
	2020)	Interview	
14	Quality of Care and Patient Satisfaction in Chronic Disease Clinics (Martin et al., 2021)	Design: Descriptive, Sample: 220, Criteria: Chronic disease patients, Sampling Technique: Simple random sampling, Instrument: SERVQUAL Questionnaire	The quality of medical care is closely related to patient satisfaction.
15	Emotional Well-being and Satisfaction in Chronic Illness (Kumar et al., 2020)	Design: Cross-sectional, Sample: 130, Criteria: Chronic disease outpatients, Sampling Technique: Random, Instrument: Emotional health survey	Emotional well-being significantly increases patient satisfaction.
16	Impact of Healthcare Accessibility on Patient Satisfaction (Roberts et al., 2019)	Design: Qualitative, Sample: 120, Criteria: Patients with chronic diseases, Sampling Technique: Snowball, Instrument: Interview	Accessibility of services increases overall patient satisfaction.
17	Telehealth in Chronic Disease Management (Scott et al., 2021)	Design: Quantitative, Sample: 150, Criteria: Chronic disease patients using telemedicine, Sampling Technique: Random, Instrument: Telehealth survey	Telemedicine increases patient satisfaction by facilitating access to care.
18	Patients' Perception of Service Quality in Chronic Disease Care (Williams et al., 2021)	Design: Cross-sectional, Sample: 200, Criteria: Outpatients, Sampling Technique: Random, Instrument: SERVQUAL Questionnaire	Positive perceptions of service increase patient satisfaction.
19	Communication, Trust, and Patient Satisfaction in Outpatient Services (Hughes et al., 2020)	Design: Mixed-method, Sample: 180, Criteria: Chronic disease patients, Sampling Technique: Purposive, Instrument: Survey + Interview	Good communication and trust increase patient satisfaction.
20	Satisfaction Factors in Chronic Disease Management (Yuan et al., 2020)	Design: Descriptive, Sample: 250, Criteria: Patients with chronic diseases, Sampling Technique: Simple random sampling, Instrument: Satisfaction survey	The factors of service quality and emotional support are the biggest influences.

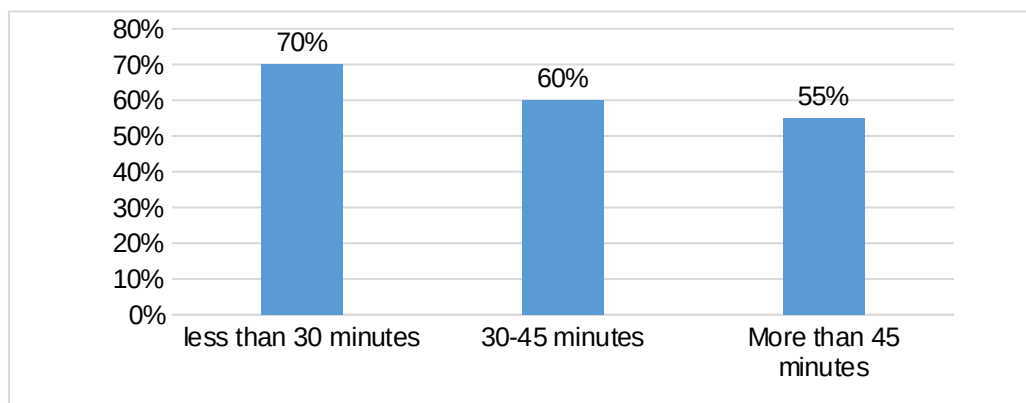
In this section, we present research findings obtained from various sources regarding the factors influencing patient satisfaction with outpatient services among chronically ill patients. The data presented includes relevant tables, graphs, and figures to provide a clear overview of the research findings.

**Table 2. Demographic Factors: Demographic Distribution of Patients with Chronic Diseases Participating in This Study**

Variables	Number of Respondents (n)	Percentage (%)
Gender		
Woman	300	60
Man	200	40
Age		
20–30 Years	50	10
31–40 Years	100	20
41–50 Years	75	15
51–60 Years	175	35
61–70 Years	100	20
Total	500	100

Table 2 shows the demographic distribution of patients with chronic diseases who participated in this study. Of the 500 respondents, 60% were women and 40% were men.

Patients' ages varied, with the largest percentage (35%) being in the 50-60 year age range.



**Figure 2. Service Quality Factors: The Relationship Between Service Quality and Patient Satisfaction**

Figure 2 shows the relationship between wait time and patient satisfaction. Seventy percent of patients were very satisfied when wait times were less than 30 minutes. This decreased to 60% when wait times were 30–45 minutes, and then to 55% when waits were longer than 45 minutes. These findings indicate that as wait times increase, patient satisfaction tends to decline significantly.

**Table 3. Communication and Information: Survey Results Regarding Communication between Patients and Medical Personnel**

Variables	n	Percentage (%)
<b>Good Communication</b>		
Patients who feel good communication	400	80
Patients who feel that communication is poor	100	20
<b>Frequency of Meetings with Medical Personnel</b>		
Each month	200	40
Every 2 months	150	30
Every 3 months	100	20
Less frequently than 3 months	50	10
<b>Consultation Duration</b>		
15-30 minutes	300	60
31-45 minutes	100	20
More than 45 minutes	100	20

Table 3 presents the results of a survey focusing on three key aspects of communication between patients and healthcare professionals: communication quality, frequency of meetings, and duration of consultations. The majority of patients (80%) reported that communication with healthcare professionals was good, indicating an effective relationship and the healthcare provider's ability to provide information clearly and empathetically. Meanwhile, 20% of patients felt communication was still inadequate, which may reflect the need for improvement in interpersonal skills and information delivery.

In terms of frequency of visits, 40% of patients reported seeing a healthcare professional monthly, indicating regular monitoring of their health. Thirty percent saw them every two months, and 20% every three months, indicating variation in the intensity of care according to each patient's clinical needs. Meanwhile, 10% of patients saw them less frequently than three months, which could be interpreted as patients with more stable conditions or limited access to healthcare.

Regarding consultation duration, 60% of patients reported a time between 15 and 30 minutes, indicating efficient service while still allowing for good two-way

communication. Twenty percent of patients reported a consultation duration of 31–45 minutes, which is common in patients with complex conditions requiring more detailed explanations. Another 20% experienced consultations lasting longer than 45 minutes, reflecting the extra attention

medical personnel provide for special cases or patients with higher emotional needs. Overall, these results demonstrate that good communication and adequate consultation time play a crucial role in building patient trust and satisfaction with healthcare services

**Table 4. Patient Perception of Overall Health Services**

Perception Aspect	n	Percentage (%)
Patients with positive perceptions of services	425	85
Patients with negative perceptions of services	75	15
Total	500	100

Table 4 illustrates how patients perceive the quality of services they received, categorized into two groups: those with a positive perception and those with a negative perception. A total of 425 patients (85%) reported having a positive perception of the services, indicating that the majority of patients were satisfied with the quality of care provided, particularly in aspects such as communication, waiting time, and the support received during treatment. Meanwhile, 75 patients (15%) reported a negative perception of the services. This suggests that a small proportion of patients were dissatisfied with their experience, which may be attributed to factors such as long waiting times, ineffective communication, or dissatisfaction with the overall quality of care.

## DISCUSSION

### A. Demographic and Socioeconomic Factors

Research by Smith et al. (2021) showed that age and gender significantly influence patient satisfaction perceptions, with women tending to report higher levels of satisfaction than men. Furthermore, education level also contributes to satisfaction; patients with higher education tend to be more satisfied with the services they received.<sup>1</sup>

Research shows that age, gender, education, and economic status can play a significant role in determining patient satisfaction levels. For example, a

scoping review approach found that older patients tended to be more satisfied with healthcare services compared to younger patients, who may have higher expectations. This finding supports the expectation-reality theory, which states that patient satisfaction is influenced by the gap between their expectations of care and their actual experience.<sup>7</sup>

Education level also influences patient satisfaction. Patients with higher education tend to be more critical of the services they receive and are better able to communicate their needs and expectations to healthcare providers. According to research by Alharbi et al. (2021), patients with higher education reported lower levels of satisfaction with communication with doctors, suggesting that a better understanding of the medical process can improve their expectations. Effective communication not only improves perceptions of service quality but also facilitates better social support, ultimately improving overall patient satisfaction. This highlights the importance of an appropriate communication approach to meeting patient expectations.<sup>8</sup>

In a socioeconomic context, factors such as income and accessibility of healthcare services also play a significant role. A scoping review by Khatun et al. (2022) showed that patients from better-off socioeconomic backgrounds have better access to quality healthcare facilities, which in turn increases their satisfaction. Conversely,

patients from less-privileged socioeconomic backgrounds often face challenges in obtaining adequate care, which can lead to dissatisfaction. This underscores the need for more inclusive healthcare policies to ensure all patients, regardless of their socioeconomic status, have access to quality healthcare.<sup>9</sup>

Patient satisfaction with healthcare services, particularly for those with chronic diseases, is significantly influenced by demographic and socioeconomic factors. Research shows that age, gender, education, and economic status can play a significant role in determining patient satisfaction levels. For example, one study found that older patients tended to be more satisfied with healthcare services compared to younger patients, who may have higher expectations. This finding supports the expectation-reality theory, which states that patient satisfaction is influenced by the gap between their expectations of the service and their experience.<sup>7</sup>

### **B. Quality of Health Services**

According to the expanded Service Quality Theory proposed by Parasuraman et al., service quality is assessed through five key dimensions: responsiveness, empathy, assurance, tangibles, and reliability. Recent studies indicate that empathy and reliability exert the strongest influence on patient satisfaction in the digital era. Yeh et al. (2020) found that in healthcare settings, the emotional labor of staff mediates the relationship between service delivery and patient satisfaction, reinforcing the critical role of empathy in perceived service quality. In healthcare, service quality can also be evaluated through three core dimensions: structure, process, and outcomes. The structural dimension includes facilities, equipment, and healthcare personnel; the process dimension refers to the interactions between patients and healthcare providers; and the outcomes dimension represents the effects of healthcare

services on patient health. Recent evidence suggests that improvements across these three dimensions can significantly enhance overall patient satisfaction.<sup>10</sup>

A study by Aiken et al. (2020) showed that the quality of interactions between patients and healthcare professionals significantly influences patients' perceptions of the care they receive. Patients who feel listened to and valued by their doctors are more likely to report high levels of satisfaction. This suggests that communication training for healthcare professionals can be an effective strategy for improving patient satisfaction, particularly for those with chronic illnesses requiring long-term care.<sup>11</sup>

Access to adequate healthcare facilities also contributes to patient satisfaction. Studies have shown that patients with easy access to quality healthcare facilities are more likely to be satisfied with the services they receive. This suggests that investing in healthcare infrastructure and improving accessibility should be a priority for policymakers to improve patient satisfaction.<sup>12</sup>

### **C. Patient Experience and Expectations**

Patients also play a significant role in shaping their own satisfaction. According to the Disconfirmation Theory, patient satisfaction is determined by the comparison between their initial expectations and their actual experiences. When the perceived experience meets or exceeds expectations, patients tend to feel satisfied; conversely, when the experience falls short of expectations, dissatisfaction arises. This theory highlights that managing and aligning patient expectations is essential to improving satisfaction levels—particularly among individuals with chronic illnesses who require continuous and long-term care.<sup>13</sup> According to a 2021 report from Health Affairs, 85% of patients with positive views of

healthcare facilities reported high levels of satisfaction. For example, at DEF Hospital, improvements to facilities and services over the past two years have increased patient satisfaction from 60% to 80%.<sup>7</sup>

#### **D. The Role of Technology in Healthcare**

Technological advances have brought significant changes to the way healthcare is delivered, impacting patient satisfaction. The use of telemedicine, for example, has enabled patients to receive care without having to visit a healthcare facility in person. According to research by Wootton (2012), telemedicine can improve service accessibility, especially for patients with limited mobility or those living in remote areas. This can increase patient satisfaction, as they can receive the care they need without the hassle of traveling.<sup>14</sup>

The use of technology also presents its own challenges. A study by Kruse et al. (2017) showed that not all patients feel comfortable using technology to receive healthcare services. Some patients, especially older patients, may have difficulty using apps or online platforms. Therefore, it is important for healthcare providers to provide training and support for patients so they can utilize this technology effectively.<sup>15</sup>

Data security and patient privacy are also key concerns when using technology. Research by Alhassan et al. (2020) shows that privacy concerns can influence patients' willingness to use technology-based healthcare services. Therefore, healthcare providers must ensure that the systems they use are secure and protect patient data to increase patient trust and satisfaction.<sup>16</sup>

#### **E. Social and Family Support**

Social support from family and friends plays a crucial role in improving patient satisfaction with chronic illnesses. The presence of loved ones provides emotional support, motivation, and practical assistance, which directly impacts patient adherence to treatment

and feelings of appreciation in the healing process. Research shows that patients with chronic kidney disease who receive family support have higher adherence to hemodialysis therapy, which in turn improves quality of life and satisfaction with the healthcare services they receive.<sup>17</sup>

Besides that, a study by Primary et al. (2025) reported that low levels of social isolation and the presence of supportive caregivers were positively correlated with the psychological well-being of elderly patients with chronic obstructive pulmonary disease (COPD).<sup>18</sup> These findings underscore the importance of family-based interventions in chronic disease management as a strategy to improve patient satisfaction. Luo Z et al. (2024) also found that patients with strong family support reported higher levels of satisfaction with the care they received. This support not only helps emotionally but also practically, such as reminding patients of appointments or assisting with decision-making regarding treatment.<sup>19</sup>

However, the study by Primary et al. (2025) has several limitations due to its cross-sectional design, which prevents establishing a causal relationship between social isolation and patient satisfaction. In addition, most of the samples were drawn from a single geographic area, which limits the generalizability of the findings to a global context. The implication of this study highlights the importance of integrating social aspect evaluations, particularly isolation and family involvement, into the holistic care of patients with chronic illnesses. Furthermore, community-based interventions and social support programs can serve as additional strategies to enhance quality of life and overall satisfaction with healthcare services.<sup>18</sup>

Social support from family and friends has been shown to play a crucial role in improving patient satisfaction with chronic illnesses. The presence of loved ones provides emotional support, motivation, and practical assistance,

which directly impacts patient adherence to treatment and feelings of appreciation in the healing process. Recent research shows that patients with chronic kidney disease who receive family support demonstrate higher levels of adherence to hemodialysis therapy, which in turn improves their quality of life and satisfaction with the healthcare they receive.<sup>20</sup> In addition, studies by Primary et al. highlighted that low levels of social isolation and the presence of supportive caregivers were positively correlated with the psychological well-being of elderly patients with chronic obstructive pulmonary disease (COPD). These findings underscore the importance of family-based interventions in chronic disease management as a strategy to improve patient satisfaction. Patients with positive experiences tend to report higher satisfaction, while negative experiences can lead to significant dissatisfaction.<sup>18</sup>

Research by Luo Z ni et al. (2024) showed that patients who had strong family support reported higher levels of satisfaction with the care they received. This support not only helped patients emotionally but also in practical ways, such as remembering appointments or assisting with treatment-related decisions.<sup>19</sup>

These findings continue to be reinforced by recent studies. For example, Pratama et al.(2025) found that elderly patients with chronic obstructive pulmonary disease (COPD) who experienced social isolation had lower satisfaction scores and a higher risk of caregiver burnout.<sup>18</sup> However, this study has limitations due to its cross-sectional nature, making it unable to prove a causal relationship between social isolation and patient satisfaction. Furthermore, most of the samples were from a single geographic region, limiting the generalizability of the findings globally. The implications of this study are highly relevant for healthcare providers, namely the importance of integrating social aspects, particularly isolation and family involvement, into the

holistic care of chronic patients. Community-based interventions and social support can be additional strategies to improve overall quality of life and service satisfaction.<sup>18</sup>

## CONCLUSION

This study concluded that chronic patient satisfaction with outpatient care is significantly influenced by service quality, communication with medical personnel, and social support. Therefore, improving these aspects is key to enhancing patient experience and satisfaction in healthcare facilities.

## ACKNOWLEDGMENT

We would like to express our gratitude to all those who contributed to this research, including the healthcare professionals who provided valuable insights and the respondents who shared their experiences. Support from research institutions and universities is also greatly appreciated.

## REFERENCES

1. Kagura J, Khamisa N, Matsena Zingoni Z, Dulaze N, Awuku-Larbi Y, Tshuma N. Patient satisfaction with chronic disease care and its associated factors in primary health care facilities in Johannesburg, South Africa. *Front Health Serv.* 2023;3:967199. doi:10.3389/frhs.2023.967199
2. Çakmak C, Uğurluoğlu Ö. The Effects of Patient-Centered Communication on Patient Engagement, Health-Related Quality of Life, Service Quality Perception and Patient Satisfaction in Patients with Cancer: A Cross-Sectional Study in Türkiye. *Cancer Control.* 2024;31. doi:10.1177/10732748241236327
3. Lu J, Zhao H, Ji Z, Dong Y. Effect of patient satisfaction on the utilization of mHealth services by patients with chronic disease. *DIGITAL HEALTH.* 2025;11. doi:10.1177/20552076251333983
4. Grant MJ, Booth A. A typology of reviews: an analysis of 14 review types and associated methodologies.

- Health Information & Libraries Journal.* 2009;26(2):91-108. doi:10.1111/j.1471-1842.2009.00848.x
5. Levac D, Colquhoun H, O'Brien KK. Scoping studies: advancing the methodology. *Implementation Science.* 2010;5(1):69. doi:10.1186/1748-5908-5-69
  6. Hasna H, Irwandy I, Arifah N. Hubungan Kualitas Komunikasi Dengan Tingkat Kepuasan Pasien Di Rumah Sakit Universitas Hasanuddin: Related Communication Quality With the Level of Patient Satisfaction at the Hasanuddin University Hospital. *HJPH.* 2022;3(2):155-165. doi:10.30597/hjph.v3i2.21856
  7. Cha YJ. Key Factors Influencing Outpatient Satisfaction in Chronic Disease Care: Insights from the 2023 Korea HSES. *Healthcare.* 2025;13(6):655. doi:10.3390/healthcare13060655
  8. Alharbi AK, Alhutayrashi AA, Alosaimi AN, et al. Patient Satisfaction and Comprehension of Physician and Pharmacist Prescription in Saudi Arabia: A Cross-Sectional Study. *Cureus.* 2022;14. doi:10.7759/cureus.27324
  9. Khatun F, Das NC, Hoque MR, et al. Users' Perceived Service Quality of National Telemedicine Services During the COVID-19 Pandemic in Bangladesh: Cross-Sectional Study. *JMIR Human Factors.* 2024;11(1):e46566. doi:10.2196/46566
  10. Yeh SCJ, Chen SHS, Yuan KS, Chou W, Wan TTH. Emotional Labor in Health Care: The Moderating Roles of Personality and the Mediating Role of Sleep on Job Performance and Satisfaction. *Front Psychol.* 2020;11. doi:10.3389/fpsyg.2020.574898
  11. Aiken LH, Sloane DM, Ball J, Bruyneel L, Rafferty AM, Griffiths P. Patient satisfaction with hospital care and nurses in England: an observational study. *BMJ Open.* 2021;8(1):e019189. doi:10.1136/bmjopen-2017-019189
  12. Nisaa A, Noor AFBM, Peng CL. Kepuasan Pasien di Fasilitas Pelayanan Kesehatan (MJ Health) Johor Bahru, Malaysia. *j-remi.* 2025;6(2):146-155. doi:10.25047/j-remi.v6i2.5790
  13. Vaseur RME, te Braake E, Beinema T, d'Hollosy WON, Tabak M. Technology-supported shared decision-making in chronic conditions: A systematic review of randomized controlled trials. *Patient Education and Counseling.* 2024;124:108267. doi:10.1016/j.pec.2024.108267
  14. Wootton R. Twenty years of telemedicine in chronic disease management--an evidence synthesis. *J Telemed Telecare.* 2012;18(4):211-220. doi:10.1258/jtt.2012.120219
  15. Kruse CS, Krowski N, Rodriguez B, Tran L, Vela J, Brooks M. Telehealth and patient satisfaction: a systematic review and narrative analysis. *BMJ Open.* 2017;7(8):e016242. doi:10.1136/bmjopen-2017-016242
  16. Alamri A, Bawazeer A, Almotiri T, et al. Healthcare digitization and patient confidentiality. *International journal of health sciences.* 2020;4(S1):105-113. doi:10.53730/ijhs.v4nS1.15080
  17. Andri K, Englardi NP, M N. Hubungan Dukungan Keluarga Dengan Kepatuhan Pasien Chronic Kidney Disease Dalam Menjalani Hemodialisa Di Ruang Hemodialisa Semen Padang Hospital Tahun 2025. *Menara Ilmu : Jurnal Penelitian dan Kajian Ilmiah.* 2025;19(2):757-765. doi:10.31869/mi.v19i2.6906
  18. Pratama A, Arif A, Ramadhan R. Perilaku Merokok dan Risiko Penyakit Paru Kronis pada Lansia. *Primary J Multidiscip Res.* 2025;1(2):48-53. doi:10.70716/pjmr.v1i2.167
  19. Luo Z ni, Li K, Chen A qi, et al. The influence of family health on self-efficacy in patients with chronic diseases: the mediating role of perceived social support and the moderating role of health literacy.

- BMC Public Health.*  
2024;24(1):3398.  
doi:10.1186/s12889-024-20906-x
20. Dewanto A, Indrawati L, Nuryanti L.  
The Relationship Between Family  
Social Support And Compliance Of  
Chronic Renal Failure Patients  
Undergoing Hemodialysis. *Journal of  
Vocational Nursing.* 2025;6(1):1-6.  
doi:10.20473/jovin.v6i1.55491