

The Relationship between Effective Communication of Nurses and the Level of Patient Satisfaction in the Inpatient Installation of Hospital

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ABSTRACT

The nursing process is never out of the process interactions that occur between nurses and patients that nurses should be aware that to communicate effectively in professional nursing practice very influential or assist the patient in the healing process or in fulfilling their basic needs during hospitalization. Service quality issues in hospitals Saber Duri still far from what is expected of society, one patient told nurses seem unfriendly, do not care about the complaints and diseases of the patient, and also like to delay in providing nursing care. This study aims to determine the relationship of effective communication nurse with patient satisfaction level at inpatient hospitals Saber Duri Year 2019 type of quantitative research with cross sectional design all nurses inpatient amounted to 108 people with a sample of 85 respondents. The sampling technique stratified random sampling. Data analysis was performed using univariate and bivariate with chi-square test ($\alpha = 0.05$). The results of the bivariate analysis of six variables there are five of them found a significant relationship between attitude ($p = 0.046 < \alpha = 0.05$), communication ($p = 0.011 < \alpha = 0.05$), perception ($p = 0.001 < \alpha = 0.05$), facilities ($p = 0.004 < \alpha = 0.05$), and environmental ($p = 0.025 < \alpha = 0.05$), while the variable no significant relationship between gender ($p = 0.239 < \alpha = 0.05$) with patient satisfaction. Then the conclusions and suggestions for hospitals Saber Duri to improve human resources such as nurses, and maintain his skill in communicating effectively with patients, as well as complementary facilities inpatient room.

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1. Introduction

Hospitals as health care providers, are required to provide the best services to the patients as users of hospital services. Hospital services is always associated with professional, technology and relationships with the services of a medical patient. Medical care is not only a service that is the attention devoted to the patient, but also to individuals, families and communities, whether healthy or sick. Hospitals are required to enhance competitiveness by trying to give satisfaction to the patient by applying a nurse with good effective communication in health care (Supriyanto, et al, 2010).

Effective communication is a process that is always done in the life of every human being, no exception nurse. In the development of effective health communication is the cornerstone of the interaction between medical staff and patient. Many of the notion that communication is easy, when errors in communication can be fatal to themselves and others. Many events that occur to nurses in communicating due to a misunderstanding between the delivered nurses who receive messages in communication (Pham, 2015).

The nurse is a profession focused on the care of individuals, families and communities so that they can achieve, maintain or restore optimal health and quality of life from birth to death (Herlambang, 2016). In practice, the nursing process is never out of the process interactions that occur between nurses and patients. This happens because nursing is based on relationships and helping to care for. This relationship is the basis of interaction that makes the client and the nursing team trying to find an understanding of client needs. Of course in this relationship good communication is needed where the nurse's role of listening, speaking and acting to negotiate changes and improved health for the client back to a healthy level.

Patient satisfaction standards in the health service are set nationally by the Ministry of Health. According to the Regulation of the Ministry of Health of the Republic of Indonesia Year 2016 on Minimum Service Standards for patient satisfaction is above 95%. If found health care with patient

satisfaction level is below 95%, it is considered that the health services provided do not meet the minimum standards or is not qualified (MoH, 2016).

Several studies show the data on patient satisfaction rates in various countries. Ndambuki patient satisfaction rate by 40.4% in 2013 stated, patient satisfaction in India Bakhtapur Twayana by 34.4%, while in Indonesia showed the 42.8% patient satisfaction. Based on these data we can conclude that the rate of patient satisfaction in Indonesia is still lower than the national standard, so that the satisfaction of hospital patients become a problem in Indonesia and outside the State (Latupono, 2014).

Satisfaction or dissatisfaction is the customer response to the evaluation of nonconformity (disconfirmation) perceived between initial expectations and actual performance is felt. Many factors cause dissatisfaction of patients in hospitals, one of which is a factor of communication of doctors and nurses. Patient satisfaction rate is highly dependent on how the abovementioned factors can fulfill the expectations. (Herlambang, 2016).

A patient who is not satisfied in turn will result in attitude / behavior does not adhere to the whole procedure of nursing and medical procedures by refusing to post infusion, refusing to take medication, refused to compressed hot / cold, and others. Eventually the patient will leave the hospital and seek the services of quality services in other places. Therefore it is time for patient satisfaction become an integral part in the mission and goals of the nursing profession because of the increasing intensity of global competition and domestic, as well as changes in preferences and behavior of patients to seek care nursing services of higher quality (Adisasmito, 2009).

Communication effectiveness in improving patient satisfaction rate is highly dependent on nurses as patient as a communicator and communicant. Nurses should be aware that to communicate effectively in professional nursing practice very influential or assist the patient in the healing process or to meet their basic needs while in hospital, which in turn can result in a degree of satisfaction to the patient (Adisasmito, 2009).

In Herlambang study (2016) found that the amount of information given by the doctor to the patient an average of 18 types of information to be remembered, was only able to remember 31%. More than 60% of those interviewed after meeting with doctors and nurses have misunderstood the instructions given to them. This is caused by the failure of health professionals to provide complete information, the use of medical terms (hard to understand) and the number of instructions that must be remembered by the patient. Results of research Son (2013) stated that in terms of communication with the patient, an effective communication approach of all nurses who examined 38 patients obtained a value less than a given effective communication of nurses in service. This is because less aware of the importance of communication by nurses and nurse will lack experience theories, concepts and importance of effective communication in the delivery of nursing care. From the results of the Saelan research, it is possible that the same happens in other hospitals.

Based on research Mirnawati (2014) related to patient satisfaction, that the number of patients who chose inpatient from outpatient at the hospital, due to inpatient care of patients want to get the counter medicines are optimized not just taking medication alone, so that the in-patient inpatient makes the patient's condition became better and healthy again, whereas if outpatient just get the drugs did not get action in service. So this is related to health care hospital relationships greatly affect patient satisfaction. One government hospital in Riau region it serves and also accommodate referral services of private hospitals around it is the Regional General Hospital (Hospital) Saber Duri in Bengkalis. This hospital, including hospitals with class C classification in the province of Riau. The SPM (Minimum Service Standards) inpatient care in hospitals Saber Duri in 2018 is achieving patient satisfaction is 95%. Based on data in 2018 showed that the results of a satisfaction survey of outpatients in hospitals Saber Duri amounted to 82.47%, while the minimum standard set by Hospital Saber Duri is 95%. In this case means that the level of satisfaction of inpatients in hospitals Saber Duri still has not reached the standard value (Profile, hospitals Saber Duri, 2018). Based on data in 2018 showed that the results of a satisfaction survey of outpatients in hospitals Saber Duri amounted to 82.47%, while the minimum standard set by Hospital Saber Duri is 95%. In this case means that the level of satisfaction of inpatients in hospitals Saber Duri still has not reached the standard value (Profile, hospitals Saber Duri, 2018). Based on data in 2018 showed that the results of a satisfaction survey of outpatients in hospitals Saber Duri amounted to 82.47%,

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Hospital Saber Duri into the patient's choice for health services due to referrals from private hospitals that do not have full facilities, so that patients in referred to this hospital. Saber Duri Hospital has 8 rooms inpatient bed capacity is 282 beds, with the number of nurses 129. Based on data from hospitals profile Saber Duri number of outpatient visits totaled 8,456 in 2016, 2017 and 2018 amounted to 7127 amounted to 8987, visits from 2016 has increased the number of outpatient visits in 2018. While the number of outpatient visitsstay in Hospital Saber Duri 2016 amounted to 7986, in 2017 amounted to 9876, and in 2018 amounted to 10 888. So from the results data showed annual visit hospitalized patients has increased since the year 2018 the number of outpatient visits more become inpatients, because that Government Hospital in Duri only one hospital Hospital Saber, making patient visits annually increasing because the hospital is working with health insurance so the patient for treatment does not cost very much, other things with the dispensary or clinic that is still not cooperating with health insurance, which results when patients are treated must be paid in advance as a guarantee(Profile, hospitals Saber Duri, 2018).

Based on the preliminary survey in hospitals Saber Duri from interviews with one of the families of patients said that the quality of service in the room Cempaka is still far from what is expected of society, one of the nurses seem unfriendly, do not care about the complaints and diseases of the patient, and also Like delay in providing nursing care. Patients also admitted that if the ill and had to be treated at this hospital again will think twice about being treated in hospitals Saber Duri again because the experience during care, nursing care given is not satisfactory and does not maintain a relationship with the patient including health inquiry and also less hygiene the patient's room (profile, hospitals Saber Duri, 2018). Then from the interview in a few other patients, 4 patients in the operating room showed the persistence of the complaints and dissatisfaction with nursing services in communication and disrespectful attitude when giving care, in terms of the perception of the patients in the inpatient unit showed that 5 patients are not satisfied with the effective communication of nurses. Based on the complaints of inpatient hospital Saber Duri researchers interested in conducting research on "Effective Communication Link Nurse Patient Satisfaction at Inpatient Hospital Saber Duri 2019".

2. Results and Discussion

2.1 Research Result

a. Respondent Characteristics And (General Data Not Included in the Variables Studied)

Table 1.
General Characteristics Frequency Distribution of Respondents in the Inpatient Hospital Saber Duri 2019

characteristic	Frequency (f)	Percentage (%)
Age		
<35 years	49	51.6%
> 35 years	46	48.4%
Total	95	100%
Room		
R.VIP	5	5.3%
R. Lung	14	14.7%
R. Neorologi	11	11.6%
R. Midwifery	13	13.7%
R. Children	13	13.7%
R. Cempaka	13	13.7%
R. Surgery	10	10.5%
R. Soul	16	16.8%
Total	95	100%
old hospitalized		
1-3 days	53	55.8%
> 4 days	42	44.2%
Total	95	100%

Base on Tabel 1 above, most of the respondents aged from 95 respondents known included in the category of <35 years as many as 49 respondents (51.6%), the room most of the respondents

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included in the category of mental space as much as 16 respondents (16.8%), while the majority of respondents treated long included in the category of 1-3 days as many as 53 respondents (55.8%).

b. Univariate Analysis Results

Table 2

Respondents Frequency Distribution Based on Dependent and Independent Variables The Inpatient Hospital Saber Duri 2019

No.	variables	Frequency (f)	Percentage (%)
1.	patient satisfaction		
	1. Not Satisfied	53	55.8%
	2. Satisfied	42	44.2%
	Total	95	100%
2.	Attitude		
	1. Not Good	49	51.6%
	2. Good	46	48.4%
	Total	95	
3.	Communication		
	1. Not Good	51	53.7%
	2. Good	44	46.3%
	Total	95	100%
4.	Perception		
	1. Not Good	50	52.6%
	2. Good	45	47.4%
	Total	95	100%
5.	gender		
	1. Man	41	43.2%
	2. Women	54	56.8%
	Total	95	100%
6.	Amenities		
	1. Incomplete	40	42.1%
	2. Complete	55	57.9%
	Total	95	100%
7.	Environment		
	1. Not Clean	41	43.2%
	2. Clean	54	56.8%
	Total	95	100%

Based on Table 2 above, from 95 respondents known that the satisfaction of patients who are not satisfied as much as 53 respondents (55.8%). Variables good attitude as much as 49 respondents (51.6%), communication was not good as much as 51 respondents (53.7%), which is not a good perception of 50 respondents (52.6%), mostly female gender as much as 54 respondents (56.8%), well-equipped facilities as much as 55 respondents (57.9%), whereas a clean environment as much as 54 respondents (56.8%).

c. Bivariate Analysis Results

1) Attitudes relationship with Patient Satisfaction

Table 3

Relationship Attitudes with Patient Satisfaction The Inpatient Hospital Saber Duri 2019

Attitude	patient satisfaction				Total	P value	OR (CI95%)
	Not satisfied		Satisfied				
	n	%	N	%			
Not good	22	44.9	27	55.1	49	100	0,046 2,536 (1.101 to 5.845)
Good	31	67.4	15	32.6	46	100	
Total	53	55.8	42	44.2	95	100	

According to the table 3 above, it is known from 49 respondents attitude is not good nurse that the patient is not satisfied as much as 22 respondents (44.9%), while 46 respondents attitude good nurse that patients are satisfied as much as 15 respondents (32.6%). The results of the statistical test using chi square test obtained by value p value = 0.046 which means the value of $p < \alpha$ (0.05) (H_0 rejected) means that there is a relationship between attitudes to patient satisfaction. With the value Odds Ratio (OR) of 2.536 (1.101 to 5.845), which means the attitude of nurses is not good berisiko2 times cause dissatisfaction of patients compared to the attitude of a good nurse.

2) Relationship Communication with Patient Satisfaction**Table 4**

Communication Relations with Patient Satisfaction The Inpatient Hospital Saber Duri 2019

Communication	patient satisfaction						P value	OR (CI95%)
	Not satisfied		Satisfied		Total			
	N	%	n	%	n	%		
Not good	18	35.3	33	64.7	51	100	0,011	7.130 (2.811 to 18.085)
Good	35	79.5	9	20.5	44	100		
Total	53	55.8	42	44.2	95	100		

According to the table 4 above, it is known from 51 respondents nurse communication is not good that the patient is not satisfied as much as 18 respondents (35.3%), while 44 respondents nurse communication whether patients are satisfied as much as 9 respondents (20.5%). The results of the statistical test using chi square test obtained by value p value = 0.011 which means the value of $p < \alpha$ (0.05) (H_0 rejected) means that there is a relationship between nurse communication with patient satisfaction. With the value Odds Ratio (OR) of 7.130 (2.811 to 18.085), which means good nurse communication did not risk 7 times cause dissatisfaction patients than nurses good communication.

3) Perception relationship with Patient Satisfaction**Table 5**

Relationship of Perception with Patient Satisfaction The Inpatient Hospital Saber Duri 2019

Perception	patient satisfaction						P value	OR (CI95%)
	Not satisfied		Satisfied		Total			
	N	%	N	%	n	%		
Not good	19	38.0	31	62.0	50	100	0,001	5.043 (2.075 to 12.254)
Good	34	75.6	11	24.4	45	100		
Total	3	55.8	42	44.2	95	100		

According to the table 5 above, it is known from 50 respondents perception of nurses is not good that the patient is not satisfied as much as 19 respondents (38.0%), whereas 45 respondents' perception of the nurse whether patients are satisfied as much as 11 respondents (24.4%). The results of the statistical test using chi square test obtained by value p value = 0.001 which means the value of $p < \alpha$ (0.05) (H_0 rejected) means that there is a connection between the perception of nurses with patient satisfaction. With the value Odds Ratio (OR) of 5.043 (2.075 to 12.254), which means the perception of nurses is not good risk 5 times cause dissatisfaction of patients compared to the perception of a good nurse.

4) Gender relations with Nurse Performance**Table 6**

Hubungan Gender with Patient Satisfaction The Inpatient Hospital Saber Duri 2019

gender	patient satisfaction						P value	OR (CI95%)
	Not satisfied		Satisfied		Total			
	N	%	n	%	n	%		
Male	23	56.1	18	43.9	41	100	0.239	.978 (0.432 to 2.216)
woman	30	55.6	24	44.4	54	100		
Total	3	55.8	42	44.2	95	100		

According to the table 6 above, from 41 respondents gender unknown male patients are not satisfied as much as 23 respondents (56.1%), while the female gender of the 54 respondents were satisfied patients as many as 24 respondents (44.4%). The results of the statistical test using chi square test obtained by value p value = 0.239 which means the value of $p > \alpha$ (0.05) (H_0 diterima) means that there is no relationship between gender and patient's satisfaction. With the value Odds Ratio (OR) of 0.978 (0.432 to 2.216), which means gender laki men 0.2 times cause dissatisfaction risk patients than female gender.

5) Facilities relationship with Patient Satisfaction**Table 7**

Facility Relations with Patient Satisfaction The Inpatient Hospital Saber Duri 2019

Amenities	patient satisfaction						P value	OR (CI95%)
	Not satisfied		Satisfied		Total			
	n	%	n	%	n	%		
Incomplete	15	37.5	25	62.5	40	100	0,004	3.725 (1.579 to 8.790)
Complete	38	69.1	17	30.9	55	100		
Total	3	55.8	42	44.2	95	100		

According to the table 7 above, it is known from 40 respondents incomplete facilities that the patient is not satisfied as much as 15 respondents (37.5%), while 55 respondents complete facilities that patients are satisfied as much as 17 respondents (30.9%). The results of the statistical test using chi square test obtained by value p value = 0.004 which means the value of $p < \alpha$ (0.05) (H_0 rejected) means that there is a relationship between the facility and patient's satisfaction. With the value Odds Ratio (OR) of 3.725 (1.579 to 8.790), which means the facility is not complete at risk 3 times cause dissatisfaction of patients compared to facilities.

6) Environment relationship with Patient Satisfaction**Table 8**

Relationship of Perception with Patient Satisfaction The Inpatient Hospital Saber Duri 2019

Environment	patient satisfaction						P value	OR (CI95%)
	Not satisfied		Satisfied		Total			
	n	%	n	%	n	%		
Not clean	17	41.5	24	58.5	41	100	0,025	2,824 (1.219 to 6.542)
Clean	36	66.7	18	33.3	54	100		
Total	3	55.8	42	44.2	95	100		

Based on Table 8 above, it is known from 41 respondents did not clean the patient's environment is not satisfied as much as 17 respondents (41.5%), while 54 respondents were satisfied patient a clean environment as much as 18 respondents (33.3%). The results of the statistical test using chi square test obtained by value p value = 0.025 which means the value of $p < \alpha$ (0.05) (H_0 rejected) means that there is a relationship between the environment and patient satisfaction. With the value Odds Ratio (OR) of 2.824 (1.219 to 6.542), which means the environment is not clean at risk 2 times cause dissatisfaction of patients compared to a clean environment.

2.2 Discussion**a. Attitudes relationship with Patient Satisfaction at Inpatient Hospital Saber Duri 2019**

Based on the research results there is a relationship between the attitude of nurses with patient satisfaction, the attitude of the nurse respondents were not good berisiko 2 times cause dissatisfaction of patients compared to the attitude of a good nurse.

That attitude is the attitude of one's personality so that it is risky to nurse communication was not good. This personality is formed at birth and grow to adulthood. A person's personality is difficult to change because of the element of personality (ego, super-ego) is constructed from the results of how he learned when the womb to adulthood. This behavior can be changed by increasing knowledge and understanding of positive attitude in work (Wibowo, 2010).

Attitude influenced the trust, if trust is negative, negative behavior will emerge, and vice versa. From the above definition can be concluded that human behavior is an activity that posed for their needs, motivation, stimulation, attitudes and beliefs that will lead to the success of the activity or activities undertaken (Herlambang S, 2016).

The results are consistent with research Herlambang (2016) in which an No relationship with the attitude of patient satisfaction in healthcare Hospital Hassanudin Bandung with unkindness risk 2 times cause dissatisfaction of patients compared to the attitude of a good nurse.

Based on the results of the questionnaire distribution, nurses attitudes associated with patient satisfaction note of 49 respondents attitude is not good nurse that the patient is not satisfied as much as 22 respondents (44.9%), while 46 respondents attitude good nurse that patients are satisfied as much as 15 respondents (32.6%), the observation field where the attitude of nurses positively to the patient, and there are some nurses seem indifferent in its response to the patient, it is supported while working nurse on duty just a little while patients treated crowded, so the attitude of nurses can not give maximum service to the patient.

In the opinion of the researchers, nurses who have a positive attitude or it will create job baikdalam patient satisfaction as the recipient of the service. Where is the attitude good nurses will increase patient satisfaction while if the attitude is not good nurses in providing the service, will not be achieved patient satisfaction as the recipient of the service in hospitalization.

b. Relationship Communication with Patient Satisfaction at Inpatient Hospital Saber Duri 2019

Based on the results there is a relationship between nurse communication with patient satisfaction, the respondents were not good nurse communication berisiko 7 times cause dissatisfaction patients than nurses good communication.

Communication is an exchange of thoughts, feelings, opinions, and counseling that occurs between two or more people working together. Communication is also an art to be able to prepare and deliver a message in a simple way so that others can understand and accept the intent and purpose of its message (Mirnawati, 2014).

According Bhayangkara (2009) also revealed that communication in professional nursing practice is a key element for nurses in performing nursing care to achieve optimal results. The role of communication in health care can not be separated from each patient who is undergoing treatment at the hospital because one of the factors that influence patient satisfaction is communication, in this case also includes behavior, speech, indifference, friendliness of staff, and the ease of getting information and communication ranks high in patient satisfaction perception of the hospital. Not infrequently although the patient / family felt the outcome was in accordance with expectations, the patient / family feel quite satisfied because it is served with an attitude that respects the feelings and dignity.

Nurses as health workers in providing nursing care, especially communication with patients should be able to build together and more attention to how the characteristics of the patient faced because of individual characteristics can also affect perceptions of whether satisfied or not satisfied with the services received (Winardi, 2012).

The results are consistent with research David A. Mandala, in a hospital surgical treatment Prof. Dr. WZ Johannes Kupang in 2012 where there is a communication link with the level of patient satisfaction, with risk communication is not good nurse 3 times cause dissatisfaction patients than nurses good communication. Another result is in line with research Rorie (2014) which demonstrated an association antarapelaksanaan nurse communication with patient satisfaction diruang Inpatient Hospital Prof. Irina RD Kandau Manado. Where nurse communication is one way to provide accurate information danmembina trusting relationship with the patient so that the client will feel puasdengan nursing care received.

Based on the results of the questionnaire distribution of the field turned out to nurse communication relationship with the patient is very important of 51 respondents nurse communication is not good that the patient is not satisfied as much as 18 respondents (35.3%), while 44 respondents nurse communication whether patients are satisfied as much as 9 respondents (20.5%), If the nurse did not communicate properly then the patient will think all sorts, especially about her illness. There was even a nurse who communicates seem unfriendly, causing the patient is not satisfied in receiving the service.

In the opinion of the researchers, that nurses who have the skills to communicate effectively not only to be a relationship of trust in the patient, create relationships such as family, provide professional satisfaction in nursing services and improve the image of the nursing profession as well as the image of the hospital. where if effective communication of nurses both in the work will result in satisfaction of patients, whereas if the effective communication of nurses is not good then the patient will not get satisfaction in getting care during care treatments.

c. Perception relationship with Patient Satisfaction at Inpatient Hospital Saber Duri 2019

Based on the results there is a relationship between nurse and patient's satisfaction perception, the perception of respondents who did not nurse well berisiko 5 times cause dissatisfaction of patients compared to the perception of a good nurse ..

Perception is one's personal view of an event or events. Perception shaped by expectations or experience. Differences in perception can result in delays in communication. Perception is a treatment involving the interpretation through the process of thinking about what is seen, heard, experienced or read, so that perceptions often affect behavior, conversations and feelings. Positive perception will affect a person's sense of satisfaction in the form of attitude and behavior towards health services, and vice versa negative perception will be demonstrated through performance (Fathoni, 2009).

Perception of nurses is a process which is useful as a filter and a method for organizing the stimulus, which allows us to face our environment. The process of perception provides a mechanism through stimulus were selected and grouped in ways that means the almost automatic and works the same way for each individual, so that typically generate perceptions of different (Suari, 2013).

Nurses provide 24 hours of continuous patient making the only healthcare professionals in hospitals that provide many perceptions of health care in the patient. Nursing care provided to patients and care received by patients will try to be interpreted by the patient. Patients may respond differently when different psychological conditions, despite receiving the same quality of service. Therefore, beside requires creative services related to the product, patients also require more personal services (Suari, 2013).

The results are consistent with research Priyanto (2015) No relationship with the nurse's perception of patient satisfaction with nurse perception is not good risk 2 times cause a patient is not satisfied than the perception of a good nurse. Purwanto opinion of other researchers (2017) states that the perception of nurses through communication sangatlahpenting and useful for the patient because the perception of a good nurse dapatmemberikan understanding that the problems faced by patients on tahapperawatan can be overcome by a nurse. The ability to overcome the problem yangdihadapi by these patients will have an impact on patient satisfaction.

Based on the results kusioner distribution of the field, that the perception of nurses are needed by patients 50 respondents perception of nurses is not good that the patient is not satisfied as much as 19 respondents (38.0%), whereas 45 respondents' perception of the nurse whether patients are satisfied as much as 11 respondents (24.4%), Due to the patient during care want to get the maximum service to quickly snap back. Where most perceptions of nurses do not provide information to patients about the disease and only provide information on the patient's family, because of fear of the patient becomes the back drop for in-patient. So if the patient already knows about the pain they experienced, it causes the patient to feel neglected during treatment, and cause the patient is not satisfied in getting service. Though nurse doing this for the sake of the patient's recovery and continue to provide encouragement to the patient.

In the opinion of the researchers, that perception of nurses on patient satisfaction is influenced by expectations of the patient's desired service. These expectations are formed by what patients hear from other patients through word of mouth, the patient needs, past experience and influence effective communication submitted nurses. A service is considered satisfactory if the service can meet the needs and expectations of patients. Patient satisfaction is determined by the perception or performance to meet the expectations of patients, the patients were satisfied if their expectations are met or will be very satisfied if expectations are met in getting the patient during care services.

d. Gender relations with Patient Satisfaction at Inpatient Hospital Saber Duri 2019

Based on the results of the study there was no relationship between the gender of nurses with patient satisfaction. Diamana nurse patient does not distinguish gender in getting services in inpatient.

The term gender is a difference in behavior between men and women apart from biological structures, most of it formed through social and cultural processes. Gender in the social sciences is defined as a pattern of male and female relations that are based on social characteristics of each (Wardani et al, 2018).

According to Nurhasanah (2009) stated that gender affects the patient's perceptions and expectations to meet needs including health services. Basically a woman more happy to establish communication with peers and aims to build unity, while men prefer the group to gain independence. Meanwhile, according to Budiman (2010) stated that the demographic factors associated with patient satisfaction is sex where the male gender is expressed more easily satisfied is different from the female gender are not easily satisfied.

One cause of patient dissatisfaction caused by the existence of gender discrimination in health care. That a lot of examples of the roles of men and women whose gender bias in the health service. Patient satisfaction in service to not distinguish between the roles of men and women in providing care services, gender in order to apply the nursing staff to communicate well (Wardani, 2018).

Based on the results of the questionnaire distribution of the field, that patients do not distinguish gender in getting care nurses, as for patients during care only want to quickly snap back. Patient satisfaction causing no relation to gender nurse.

Munurut opinion of researchers, basically patient does not distinguish gender in establishing communication for patients aims to build unity only by a good nurse communication only, then the patient will feel observed during care so that the patient's satisfaction.

e. Relations with Patient Satisfaction facilities in the Inpatient Hospital Saber Duri 2019

According to the research there is a relationship between the facility and patient's satisfaction, the facilities were incomplete respondents berisiko 3 times cause dissatisfaction of patients compared to facilities.

The facilities are everything that is considered as a means to achieve certain goals or to fulfill specific needs. Aan Surachlan Damyati, the facilities are everything that deliberately provided for use or used and enjoyed by the public and in use it does not have to pay (Herlambang S, 2016).

According to the Son A (2013) is a facility providing physical paraphernalia to provide convenience to consumers to carry out activities so that customer needs can be met. So health facilities are all forms of facilities owned by the Hospital to meet and support the needs of patients in accordance with what is expected. Inadequate facilities for example such as patient examination rooms, laboratory facilities, toilets, buildings, waiting rooms and places of worship that makes people reluctant to linger if they are in place.

The results are consistent with research Khayani (2012), where there is a significant relationship between health facilities with patient satisfaction in inpatient facilities is incomplete risk 4 times compared with full facilities.

Based on the results of the questionnaire distribution field 40 respondents did not complete facility that a patient is not satisfied as much as 15 respondents (37.5%), while 55 respondents complete facilities that patients are satisfied as much as 17 respondents (30.9%), visits of facilities in the inpatient room in accordance with the categories of class, as if class I, the facilities in the room is complete, as the beds were good and worthy life, the bathrooms were clean, but the views from the third class there is even a bed patient whose wheels are already off one, so that the patient's bed into a bouncy cause patient discomfort, and also in the patient waiting room was hot because there was no fan. In this case the facility in the patient's room is seen from the patient during the class was treated to reflect the indoor facilities associated with patient satisfaction.

Munurut opinion of researchers, room facilities is good but there are still some beds of patients unfit for use, but this led to uncomfortable patients in health facilities. It can be concluded that the lack of comprehensive facilities will get the satisfaction of patients during care and vice versa if the facilities are not complete, the patient will feel unsatisfied in getting services for inpatient care.

f. Environment relationship with Patient Satisfaction at Inpatient Hospital Saber Duri 2019

Based on the results there is a relationship between the environment and patient satisfaction, the respondents were not clean environment berisiko 2 times cause dissatisfaction of patients compared to a clean environment.

Environmental hygiene is basically having a high role in improving patient satisfaction. A clean environment should be maintained, even had to be improved to better. Patients who get service with a clean environment can help to cure the disease is interrupted treatment, which can lead to optimal patient satisfaction for hospitals (Lumbanraja, 2009). Environment interactions will affect

the effective communication. Noisy, no privacy right would cause confusion, tension and discomfort. For that health professionals need to prepare a proper and comfortable environment before initiating interaction with patients (Herlambang S, 2016)

The results are consistent with research Sujadi (2012), where there is a significant association between the environment and the satisfaction pasiendi inpatient unit, where the environment is not clean at risk 2 times cause patients dissatisfied than a clean environment cause the patient to be satisfied.

Based on the results of the questionnaire distribution field, of 41 respondents do not clean environment that the patient is not satisfied as much as 17 respondents (41.5%), while 54 respondents were satisfied patient a clean environment as much as 18 respondents (33.3%). Whereas in the hospital environment less conducive as old patient food places were picked up, causing the flies to come, as well as a common bathroom in the hospital is also limited and cause queued if families want the patient to the bathroom. Another thing in the hospital environment neat building, only in facilities in the neighborhood still missing, causing the patient to feel less satisfied.

In the opinion of researchers, based on the findings that the cleanliness of the environment is still very good, so with a good environment around the patient that may affect him in the hospital during treatment. Environmental hygiene have received less attention would adversely impact and lower the patient's level of fitness in the fight against the disease, due to the patients in the treatment failure, thus lacking the spirit and devote less energy and thoughts during treatment. It can be concluded that the existence of good environmental hygiene it will produce a good patient satisfaction, otherwise if unfavorable environmental hygiene will result in poor patient satisfaction as well.

3. Conclusion

Based on the research that has been done, it can be concluded as follows:

- a. The proportion of patient satisfaction are not satisfied as much as 53 respondents (55.8%) were satisfied 42 respondents (44.2%).
- b. There is a relationship attitude with patient satisfaction in inpatient hospitals variables obtained Saber Duri good attitude as much as 49 respondents (51.6%) and good by 46 respondents (48.4%), with p value = 0.046.
- c. There hubungankomunikasi with patient satisfaction in inpatient hospitals variables obtained Saber Duri not good communication as much as 51 respondents (53.7%) and good by 44 respondents (46.3%), with p value = 0.011.
- d. There hubunganpersepsi with patient satisfaction in inpatient hospitals variables obtained Saber Duri not a good perception of 50 respondents (52.6%) and good by 45 respondents (47.4%) with p value = 0,001
- e. There hubunganfasilitas with patient satisfaction in inpatient hospitals variables obtained Saber Duri complete facilities by 55 respondents (57.9%) and incomplete sebanyak40 respondents (42.1%) with p value = 0.004.
- f. There hubunganlingkungan with patient satisfaction in inpatient hospitals variables obtained Saber Duri a clean environment as much as 54 respondents (56.8%) and were not clean as much as 41 respondents (43.2%), with p value = 0.025.
- g. No hubungan gender with patient satisfaction in inpatient hospitals variables obtained Saber Duri mostly female gender as much as 54 respondents (56.8%) and the males were 41 respondents (43.2%), with p value = 0.239.
- h. Nurse communication variables are not good-risk 7 times cause dissatisfaction patients than nurses good communication

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