

THE INFLUENCE OF QUALITY OF HEALTH SERVICES ON INPATIENT SATISFACTION AT PANDERE PUBLIC HEALTH CENTER

Iwan, Idris, Ira Nuriya Santi

Email: <u>tebhoketong@gmail.com</u> Economics and Business Faculty of Tadulako University

ABSTRACT

This research aims to examine and explain the effect of service quality on patient satisfaction at the Pandere Public Health Center, Sigi District. The research method used is explanatory research. The population of this research was all patients who had been treated during 2020, while the sample was 88 respondents. The sampling technique used the Slovin technique. The data analysis method used multiple linear regression with IBM SPSS Statistics version 25 software-assisted. The results of the partial statistical test of service quality variables consisting of Reliability (X₁) and Assurance (X₃) have a significant positive effect. In comparison, the Responsiveness (X₂), Empathy (X₄), and Tangible (X₅) variables have no significant effect on patient satisfaction. Simultaneous statistical test results show that service quality has a positive and significant effect on patient satisfaction.

Keywords: Service Quality, Reliability, Responsiveness, Assurance, Empathy, Tangible, Patient Satisfaction

INTRODUCTION

Public Health Center is an essential part of public health services in Indonesia. Therefore various efforts are made to improve services by optimizing their functions towards a better direction, easily accessible by the community, with the service products offered. At this time, Public Health Centers are not accustomed to anticipating environmental changes with the community's needs in such fast development. Conservatively, Public Health Centers only provide services not oriented to the community's needs but service delivery needs. This static situation makes it difficult for Public Health Centers to follow developments that arise in the community. Many of them are not ready if the community demands better service quality. The biggest challenge faced at this time is the demand for quality services in inpatient health centres.

After using a service, patient satisfaction is an evaluation or assessment that the selected service meets expectations (Endang and Mamik, 2010). (Pohan, 2007) states that patient satisfaction is the level of patient feelings that arise from the health service work he gets after the patient compares with what he expects. Various indicators can measure patient satisfaction, including; (1) satisfaction with access to health services, (2) satisfaction with the quality of health services, (3) satisfaction with health services, including human relations, (4) satisfaction with the health care system.

The quality of health services is the level of perfection of health services carried out under the code of ethics and service standards set to create satisfaction for every patient (Muninjaya, 2016). According to (Pohan 2007), quality health service is a health service that is needed. In this case, the health care professional will determine it and at the same time desired by both the patient and the community and affordable by the people's purchasing power.

Improving service quality is the degree to provide services effectively and efficiently according to professional standards. According to patient needs, these service standards are carried out

Tadulako International Journal Of Applied Management, Volume 3. No. 2, Agustus 2021 60



thoroughly, utilizing appropriate technology and research results to develop health services to achieve optimal health degrees (Nursalam, 2014). (Mosadeghrad, 2014), quality in health care is the production of collaboration between patients and providers in a supportive environment. From some of these definitions, it can be seen that quality is a measure made by consumers of a product or service that is seen from all dimensions or characteristics to meet the demands of security needs and consumer comfort.

Kotler dan Keller (2016: 442) stated that service quality is divided into 5 determinants of SERVQUAL, namely Reliability, Responsiveness, Assurance, Empathy, Tangibles. So that in achieving patient satisfaction must pay attention to the quality of health services.

Pandere Public Health Center is a Government Health Center of Sigi District located in Gumbasa Subdistrict. Pandere Public Health Center has been designated as an inpatient health center since 2016, having 46 health workers, with the status of a B accreditation health center has a "vision" for the realization of a healthy Gumbasa Subdistrict through the implementation of optimal health efforts and "Mission".

The results of observations and interviews with one of the patients who seek treatment are that the absence of medicines at the Public Health Center often runs out of stock, as well as if the patient wants to be referred to a designated hospital, he must fill out a form and the staff is not friendly enough to provide services. The results of the pre-research that the Pandere Public Health Center still lacks doctors, complaints from inpatients sometimes do not get doctor's services for up to two days because the doctor is also the Head of this Public Health Center. The patient services are less effective because they do other work to implement their activities. The provision of services has not fully provided quality services to the needs of patients.

Based on data sources from interviews with several patients who have been treated and employees of the Pandere Public Health Center, that the health services have not described the quality expected by patients treated at the Pandere Public Health Center when viewed from the SERVQUAL Attributes (Kotler dan Keller, 2016: 442).

Reliability is still found delays in doctors' service to critical patients, so it does not match the expectations promised by the Ppublic Health Center. Responsiveness in the service at the counter, there are still employees who are not responsive to patients who want to obtain information. Assurance where the doctor is not continuous every day, so the patient feels his right to get health services is not fulfilled according to health service standards. The empathetic attitude of some employees who have not been able to pay attention to patients, in particular, make good communication relationships and become one of the sources of information from the Public Health Center.

METHOD

This research was conducted at the Pandere Public Health Center for 4 months. The population in the research amounted to 710 patients who had been treated at the Pandere Health Center during 2020, and samples were taken through Slovin technique amounted 88 patients and then using an accidental sampling technique. According to Sugiyono (2006), the accidental sampling technique is a sampling technique based on chance, that is, anyone who meets the researcher and is deemed suitable as a data source that can be used as a sample with the criteria of people who have had Inpatient treatment at the Pandere Public Health Center during 2020 randomly from a predetermined number of samples. The sample is based on the closest person and is included in the respondent's criteria. The community is over 17 years old and is seeking treatment at the Pandere Public Health Center using the Health Insurance Card and General Patients (pay in cash).



This research was an explanatory research type. According to (Sugiyono 2010), explanatory research intends to explain the position of the variables studied and the relationship between one variable and another. The data used is quantitative with primary data sources to obtain direct answers to the questionnaires submitted to respondents with a data scale using a Likert Scale with 5 categories of assessment weights. There are 5 operational variables from the Service Quality dimension, namely Reliability (X1), Responsiveness (X2), Assurance (X3), Empathy (X4), Tangible (X5) and Patient Satisfaction (Y). The data analysis technique used descriptive statistics with multiple regression methods.

RESULTS AND DISCUSSION

Respondents' criteria were categorized into several characteristics, namely, based on gender. It was known that women were more dominant in both ordinary inpatients and childbirth. The average age of the respondents is above 52 years, where physically, the elderly are very susceptible to disease, and their psychological changes tend to affect health. The educational background is dominated by elementary school graduates, where most of them are housewives and farmers.

Based on the classical assumption test results, it is known that from the One-Sample Klomogove-Smirnov calculation, where the sig value of 0.20 is more significant than 0.05, the data is usually distributed. The results of the Multicollinearity test show that the Value Inflation Factor (VIF) is less than 10 so that there are no symptoms of multicollinearity. Based on the results of Spearman's Rho test, it is known that the sig value is more significant than 0.05. It can be concluded that the regression model does not have heteroscedasticity problems.

The analysis of Multiple Linear Regression obtained the results of research from 88 respondents as follows:

		able 1 on Coefficient		
		Unstandardized Coefficients		
	Model	В	Std.Error	
	(Constanta)	-5,647	4,713	
	Reliability	1,005	0,225	
	Responsiveness	0,162	0,172	
1	Assurance	0,802	0,202	
	Empathy	0,018	0,100	
	Tangible	0,441	0,256	
rce: of	utput SPSS 25 (2021)			

Based on the table above, the following regression equation is obtained:

$Y = -5.647 + 1.005X_1 + 0.162X_2 + 0.802X_3 + 0.018X_4 + 0.441X_5$

The constant value of -5.647 indicates that if there is no independent variable or the value of the independent variable is considered 0 then buying interest is -5.647. The regression coefficient values of Reliability, Responsiveness, Assurance, Empathy, and Tangible positively influence inpatient satisfaction at Pandere Public Health Center.

		Sir	Table nultaneo	e 2 us F Test		
	Model	Sum of squares	dſ	Mean Squares	F	Sig.
	Regression	1169.374	5	233.87	10.944	0.000
1	Residual	1752.342	82	21.37		
	Total	2921.716	87			

The analysis results on the Simultaneous Test with a significant level of 0.000 < 0.05, then H0 is confirm, and H1 is rejected. This means that the hypothesis stating that the Dimensions of Service



Quality (Reliability, Responsiveness, Assurance, Empathy and Tangible) simultaneously have a significant effect on inpatient satisfaction at Pandere Public Health Center can be accepted or proven.

		Table 3 Test (t-Test)	
	Model	t	Sig.
	(Constanta)	-1.198	0.234
1	Reliability	4.467	0.000
	Responsiveness	0.941	0.350
	Assurance	3.977	0.000
	Empathy	0.182	0.856
	Tangible	1.724	0.089

Source: output SPSS 25 (2021)

Table 3 shows that Reliability and Assurance have a significant level of 0.000 < 0.05. These two results mean that the significant value is smaller than the significant level. The Responsiveness, Empathy, and Tangible dimensions show numbers greater than the significant level so that the three dimensions do not have a significant relationship.

	Correlatio		Fable 4 and Determina	tion Coefficient
Model	R	R Square	Adjusted R Square	Std. Error of the estimate
1	0.633	0.400	0,364	4.623
Source: outpi	01000	01100	0,364	4.623

The value of the correlation coefficient (R) generated in model 1 is 0.633. This shows that the Dimensions of Service Quality (Reliability, Responsiveness, Assurance, Empathy and Tangible) simultaneously have a close relationship to patient satisfaction. The value of the coefficient of determination generated in model 1 is 0.364. This shows that the contribution of the independent variables, namely Reliability, Responsiveness, Assurance, Empathy and Tangible, to patient satisfaction, is 36.4%, and the rest is influenced by other variables not examined in this research.

Based on the simultaneous test results, the dimensions of Service Quality, which include (Reliability, Responsiveness, Assurance, Empathy and Tangible), simultaneously have a positive and significant effect on Patient Satisfaction at Pandere Public Health Center. Similar research results were presented by Afriadi and Sitohang (2016); Az-zahroh (2017); Sharif et al. (2017); Meliala (2018); Tarjo (2020). Because patient satisfaction at the Pandere Health Center should be accepted, the patient must be expected to recover when seeking treatment at the Pandere Health Center. Therefore, if a thorough discussion is carried out, it appears that the service quality of the Pandere Health Center has been running so far but has not been of good quality, so it still needs to be optimized. Patient satisfaction at the Pandere Public Health Center is essential in assessing the quality of health services, namely the expected service and perceived service. If expectations are exceeded, then the service is perceived as ideal and very satisfying service quality.

Reliability has a significant positive effect on patient satisfaction at the Pandere Health Center. The results of this research are in line with the research conducted by Syarif et al. (2017). The reliability provided by the Pandere Public Health Center is still not good because the procedure for receiving patients is not served quickly. Doctors who act in care are fast in treating; besides, nurses report any complaints related to changes in the patient's condition during visits because it is indeed in a pandemic condition so that health workers pay attention to the condition of the patients being treated.



Responsiveness has a positive but not significant effect on patient satisfaction at the Pandere Health Center. This research is in line with the research of Aliman dan Mohamad (2016); Meliala (2018), and Tarjo (2020), where medical officers at the Public Health Center in carrying out their duties are not responsive to patients, clarity of information needed and willingness to help are not felt by patients.

Assurance has a positive and significant effect on patient satisfaction at the Pandere Health Center. This research is supported by the research of Syarif et al. (2017) based on research results that patients agree with the behaviour of doctors who provide a sense of security to patients every time they visit, as well as health workers in terms of skills in being able to provide and handle patients well, but health workers do not feel safe for patients and do not feel safe. However, if the guarantee provided by the Pandere Health Center is increased, namely through the guarantee of a sense of security provided by doctors, fostering trust in patients, the way nurses are skilled in handling patients and guaranteeing a sense of security will give satisfaction to patients.

Empathy has a positive but not significant effect on patient satisfaction at the Pandere Public Health Center. Lack of attention from the Public Health Center to patients causes a lack of comfort or not meeting patient expectations for the quality of services provided by health workers, such as communication between officers and patients. This lack of communication causes patients to feel like they are ignored. In other words, health workers are less skilled to recognize and understanding what patients need in dealing with patient health complaints. This study is in line with the opinion expressed by Tarjo (2020), where health workers lack empathy or concern for patients and do not understand well what the patient needs, and there is rarely medical staff who are absent on the spot.

Tangible has a positive but not significant effect on patient satisfaction at the Pandere Health Center. This is in line with the research of Ab Latiff (2013), and Tarjo (2020), when viewed directly, the service to patients does not match expectations. Service quality can be seen from the physical appearance (tangibles), including physical facilities, equipment, employees, and means of communication. If physical facilities such as machines and other medical support equipment can function properly without any damage that hinders the treatment process, patients will feel that their desire for physical evidence of service will be good.

CONCLUSION

Based on the results of the study, it can be concluded that:

- 1. Reliability dimension has a significant positive effect on Patient Satisfaction at Pandere Public Health Center.
- 2. Responsiveness dimension has no significant effect on Patient Satisfaction at Pandere Public Health Center.
- 3. Assurance dimension has a significant positive effect on Patient Satisfaction at Pandere Public Health Center.
- 4. Empathy dimension has no significant effect on Patient Satisfaction at Pandere Public Health Center.
- 5. Tangibles dimension has no significant effect on Patient Satisfaction at Pandere Public Health Center.



REFERENCE

- Ab Latiff, D. S., Yunus, N. M., Din, S. C., dan Ma'on, S. N. (2013). Patient Satisfaction and Service Quality with Access to Malaysia Clinic. *Management*, *3*(2), 69-73.
- Afriadi, Y., dan Sitohang, S. (2016). Pengaruh kualitas layanan, harga, dan fasilitas terhadap kepuasan pasien rawat inap. *Jurnal Ilmu Dan Riset Manajemen (JIRM)*, 5(6).
- Aliman, N. K., dan Mohamad, W. N. (2016). Linking service quality, patients' satisfaction and behavioral intentions: an investigation on private healthcare in Malaysia. *Procedia-Social and Behavioral Sciences*, 224, 141-148.
- Az-Zahroh, T. N. (2017). Pengaruh Mutu Pelayanan Kesehatan Terhadap Tingkat Kepuasan Pasien Rawat Inap di Ruang Dewasa Umum Rumah Sakit X Kabupaten Gresik. *PSIKOSAINS (Jurnal Penelitian Dan Pemikiran Psikologi)*, 12(2), 99–111.
- Bustami, M. S. (2011). *Penjaminan Mutu Pelayanan Kesehatan dan Akseptabilitasnya*. Yaysan Gapura (Lembaga Penelitian dan Penerbitan).
- Ismanto Setyabudy Daryanto. (2014). Konsumen dan Pelayanan Prima. Yogyakarta. Gaya Media.
- Kotler Philip, dan Keller, Kevin Lane. (2016). Marketing Management. Global Edition. Harlow, England. Pearson.
- Meliala, S. A. (2018). Analisis Pengaruh Mutu Pelayanan Terhadap Kepuasan Pasien Rawat Inap di RSU Mitra Sejati Medan. *Jurnal Rekam Medic*, 1(1), 23–29.
- Mosadeghrad, A. M. (2014). Factors influencing healthcare service quality. *International Journal of Health Policy and Management*, 3(2), 77.
- Mubarak, W. I., dan Chayatin, N. (2009). Ilmu kesehatan masyarakat: teori dan aplikasi.
- Mulyadi, D., Fadli, U. M., dan Ningsih, F. C. K. (2013). Analisis Manajemen Mutu Pelayanan Kesehatan pada Rumah Sakit Islam Karawang. *Jurnal Manajemen*, *10*(3), 1203–1219.
- Muninjaya, A. A. G. (2011). Manajemen mutu pelayanan kesehatan.
- Nursalam, D. (2014). *Manajemen Keperawatan'' Aplikasi dalam Praktik Keperawatan Profesional*. Salemba Medika.
- Peraturan Menteri Kesehatan Republik Indonesia Nomor 27 Tahun 2019 tentang Perubahan Kedua atas Peraturan Mentri kesehatan Nomor 46 Tahun 2015 tentang Akreditasi Puskesmas, Klinik Pratama, Tempat Praktek mandiri Dokter, dan tempat Praktek Dokter Gigi.
- Pohan, I. S. (2007). Jaminan mutu layanan kesehatan: dasar-dasar pengertian dan penerapan.
- Sugiyono, M. P. P., dan Kuantitatif, P. (2009). Kualitatif, dan RdanD, Bandung: Alfabeta.



- Syarif, M., Wahono, B., dan ABS, M. K. (2017). Pengaruh Mutu Pelayanan Terhadap Tingkat Kepuasan Pasien (Studi Kasus Puskesmas Kecamatan Pragaan Sumenep Jawa Timur). Jurnal Ilmiah Riset Manajemen, 6(05).
- Tarjo, T. (2020). The Effect of Service Quality and Facilities on Patient Satisfaction (Study at the Tanah Sepenggal Health Center in Bungo District). International Journal of Human Resource Studies, 10(3), 190205.