

Analysis Of Patients' Decision To Make Return Visits Mitra Sehat KD. Waringin Clinic in 2022

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ABSTRACT

The clinic as one of the health services that plays an important role. Every health institution must be able to prepare the right strategy to attract patient interest, the quality of service is important in influencing patient interest. Based on the quality of health services is strongly influenced by the process of providing health services by health workers. This is because clinical health services have not been able to provide the services that patients really expect. The purpose of this study was to determine the effect of service quality on return visits of outpatients at Mitra Sehat KD. Waringin Clinic 2022. This research is a type of quantitative research with analytic observational design with a cross-sectional design. The sample in this study amounted to 92 people with a purposive sampling technique. The data source in this study is primary data, namely data obtained directly from respondents through research questionnaires. Data were analyzed by chi square test and logistic regression. The results of the research were carried out using the chi-square test and logistic regression with a significance level of p (Sig) < 0.05 . The results obtained showed that the variable quality of service was related to return visits of outpatients at Mitra Sehat KD. Waringin Clinic. While the results of the logistic regression test showed that the factors of reliability, assurance and responsiveness had an effect on patient visits at Mitra Sehat KD. Waringin Clinic Year 2022. The conclusion from this study is that reliability most influences the return visit of outpatients. The suggestion in this study is to hold a training program in accordance with the needs of health workers to improve the competence and skills of workers so that effective services can be provided and provide opportunities for health workers, especially nurses, to continue their education to a higher level so that they can be more skilled in imparting their knowledge.

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1. INTRODUCTION

Clinic is a health service facility that organizes and provides basic and/or specialist medical services, organized by more than one type of health worker. A clinic requires the existence of an information system that is accurate and reliable, and sufficient enough to improve health services for patients and other related environments. Medical personnel in the clinic are at least two doctors or dentists, while in the clinic one specialist is needed for each type of service and the form of the clinic can be: outpatient, inpatient, one day care, home care and 24 hour service a day. [1].

The existence of health facilities such as clinics has a very important position and role in health development. In this position, the clinic acts as a development center, coaching center, and health service center for the community, such as medical check-up. Therefore, clinics are required to have the ability to organize or coordinate all health efforts [2]. Clinics in facing business competition in the health sector, every health service facility must be able to prepare the right strategy to attract consumers (patients) [3]. One strategy that is often used in marketing health care goods/services is the marketing mix which contains various elements. The marketing mix is a set of marketing tools used by the company (Hospital) to achieve its marketing objectives in its target market. So that products, prices, promotional distribution, places, human resources, service processes and physical buildings are interconnected where each element in them influences each other [4].

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The preliminary study was conducted by researchers at a private clinic on Jalan Rawakuda Ranggon, Karangharum, Kedungwaringin District, Bekasi Regency, namely the Mitra Sehat KD. Waringin Clinic to find out about the patient's decision to make return visits to a health facility, information was obtained that of the 20 respondents interviewed, 50.0% of respondents wanted to make return visits to get health services, while 50.0% of them did not want to make return visits. In addition to the interview data presented above, the researchers also obtained information about patient visit data at the clinic, secondary data for the last 4 months at the Mitra Sehat KD Waringin Clinical Medical Record unit. that established patient visits (had visited > 1 time) experienced a significant decrease. established patient visits in January 2022 = 513, February = 489, March = 476 and April = 451 visits. The purpose of this study was to determine the factors related to the decision of general polyclinic patients to make return visits at Mitra Sehat KD. Waringin Clinic in 2022.

Number of outpatient visits to Mitra Sehat KD. Waringin Clinic in 2020 there were 6,110 patients while in 2021 there were 5,389 patients. From the description above, it can be concluded that this study was to determine interest in return visits to outpatients because the results of observations made by researchers found that the quality of service at the clinic was unsatisfactory. From these problems, the researcher is interested in raising the issue regarding "Analysis Of Patients' Decision To Make Return Visits Mitra Sehat KD. Waringin Clinic In 2022".

2. METHOD

This research was conducted at Mitra Sehat KD. Waringin Clinic. The research was conducted from July to August 2022. The informants selected in this study were outpatients at Mitra Sehat KD. Waringin Clinic.

This research is a type of quantitative research with observational analytic design with a cross-sectional design [5]. The sample in this study amounted to 92 people with a purposive sampling technique. The data source in this study is primary data, namely data obtained directly from respondents through research questionnaires. Data analysis used the SPSS program, data were analyzed with the chi square test and the results were then followed by multivariate analysis with the logistic regression test.

3. RESULTS AND DISCUSSION

RESULTS

A. Univariate analysis

1) Physical Evidence

Tabel 1. Frequency Distribution of Physical Evidence at Mitra Sehat KD. Waringin Clinic in 2022

No	Statement	STB		TB		KB		B		SB	
		f	(%)	f	(%)	f	(%)	f	(%)	f	(%)
1	Cleanliness and tidiness of clinic staff clothing	2	2.2	36	39.1	42	45.7	11	12.0	1	1.1
2	The clinic has a clean and well-maintained building and neat staff	0	0.0	26	28.3	40	43.5	24	26.1	0	0.0
3	Availability of water in the bathroom and toilet	0	0.0	23	25.0	47	51.1	22	23.9	0	0.0
4	Cleanliness of bathroom and toilet	3	3.3	29	31.5	41	44.6	19	20.7	0	0.0
5	Cleanliness of the outpatient area	3	3.3	33	35.9	40	43.5	13	14.1	0	0.0
6	The bed has been prepared in a neat, clean and ready to use state.	2	2.2	40	43.5	27	29.3	23	25.0	0	0.0
7	Wheel chairs/trolleys are available at the reception to transport patients	0	0.0	35	38.0	42	45.7	15	16.3	0	0.0

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8	The waiting area is clean and open	0	0.0	32	34.8	43	46.7	17	18.5	0	0.0
9	The examination room is sufficiently aired	0	0.0	33	35.9	35	38.0	24	26.1	0	0.0
10	Ease of getting a parking space	1	1.1	34	37.0	38	41.3	19	20.7	0	0.0
11	There are general practitioners in the clinic according to patient needs	1	1.1	39	42.2	27	29.3	25	27.2	0	0.0
12	There is a doctor on duty 24 hours	1	1.1	34	37.0	33	35.9	24	26.1	0	0.0

From table 1 regarding the distribution of respondents' answers on the aspect of physical evidence, it can be explained that as many as 51.1% of Respondents stated the lacking of the availability of water in the bathroom and the availability of toilets. the cleanliness of the clinic area, especially the outpatient area, was assessed by 43.5% of respondents, which was still lacking. 43.5% of respondents considered outpatient beds to be less clean and Is not ready to use. and as many as 42.2% of respondents said that general practitioners were not available properly when patients needed them.

Table 2. Frequency Distribution of Physical Evidence at Mitra Sehat KD. Waringin Clinic in 2022

No.	Physical Evidence	Frekuensi	Persentase (%)
1	Good	40	43.5
2	Not enough	52	56.5
	Total	92	100,0

Based on Table 1.1 above, it can be seen that 56.5% of patients stated that clinical physical evidence was inadequate and 43.5% of patients stated that clinical physical evidence was adequate Physical/physical evidence is the availability of facilities and infrastructure including ready-to-use tools and skills of medical and non-medical personnel. Which includes: the availability of adequate waiting rooms, comfortable treatment rooms, clean bathrooms, sophisticated and adequate equipment.

2) Reliability

The following table shows the frequency distribution of reliability answers at Mitra Sehat KD. Waringin Clinic:

Table 3. Frequency Distribution of Reliability Answers at Mitra Sehat KD. Waringin Clinic in 2022

No.	Statement	STB		TB		KB		B		SB	
		f	(%)	f	(%)	f	(%)	f	(%)	f	(%)
1	The patient admission procedure is served quickly and is not complicated.	2	2.2	36	39.1	26	28.3	19	20.7	9	9.8
2	The readiness of nurses to serve patients at any time	8	8.7	38	41.3	24	26.1	17	18.5	5	5.4
3	The pharmacist can explain the rules for taking medicine clearly	6	6.5	36	39.1	28	30.4	18	19.6	4	4.3
4	The doctor gives the right prescription to the patient	8	8.7	38	41.3	27	29.3	17	18.5	2	2.2
5	Clarity of information provided by nurses about nursing actions	8	8.7	38	41.3	25	27.2	18	19.3	3	3.3
6	The doctor explained about the disease experienced in detail	8	8.7	46	50.0	19	20.7	19	20.7	0	0.00

7	Average time doctors spend in dealing with patients complains	6	6.5	34	37.0	38	41.3	14	15.2	0	0.00
8	Registration in the administration section is not favoritism	7	7.6	32	34.8	35	38.0	17	18.5	1	1.1
9	The patient feels better after consulting a doctor	8	8.7	35	38.0	29	31.5	19	20.7	1	1.1
10	Services are endeavored to be carried out quickly and precisely	12	13.0	31	33.7	29	31.5	18	19.6	2	2.2

Based on table 2 of the distribution of respondents' answers on the reliability aspect, it can be explained that as many as 50% of doctors are still Incapable of explaining at explaining diseases in detail, Average time doctors spend in dealing with patients complains as much as 41.3% said it is still not good and as many as 15.2% of respondents said it was good . In addition, it can be seen that as many as 18.5% of respondents said that the service in the registration department was good enough, namely the officers displayed favoritism favoritism, only 38% of respondents still feel that the service in the registration department was not good because they felt the officers were favoritism towards the patients they faced.

Table 4. Reliability Frequency Distribution at Mitra Sehat KD. Waringin Clinic in 2022

No.	Reliability	Frekuensi	Persentase (%)
1	Good	38	41.3
2	Not enough	54	58.7
Total		92	100,0

Based on Table 4 above, it can be concluded that patients who stated that clinical reliability was still considered lacking, namely 58.7% and patients who stated that clinical reliability was good, namely 41.3%. Reliability is the ability to provide accurate and satisfying services. Such as: scheduled visits, good knowledge of health workers, accurate diagnoses and timely service as promised.

3) Assurance

The following table shows the frequency distribution of assurance answers at Mitra Sehat KD. Waringin Clinic:

Table 5. Frequency Distribution of Assurance Answers at Mitra Sehat KD. Waringin Clinic in 2022

No.	Statement	STB		TB		KB		B		SB	
		f	(%)	f	(%)	f	(%)	f	(%)	f	(%)
1	Nurses master and skilled in performing nursing services	8	8.7	50	54.3	30	32.6	4	4.3	0	0.0
2	Affordable treatment costs	2	2.2	47	51.1	21	22.8	21	22.8	1	1.1
3	Service is done right	0	0.0	39	42.4	24	26.1	29	31.5	0	0.0
4	Services are carried out carefully according to patient complaints	0	0.0	39	42.4	19	20.7	34	37.0	0	0.0
5	The results of the examination were explained to me as a patient and to my family	2	2.2	34	37.0	44	47.8	12	13.0	0	0.0
6	Prescribed medicines are available in hospital pharmacies	3	3.3	38	41.3	24	26.1	27	29.3	0	0.0
7	Affordable drug prices	3	3.3	35	38.0	39	42.4	15	16.3	0	0.0
8	Registration neatly follows the queue	2	2.2	46	50.0	24	26.1	20	21.7	0	0.0
9	The doctor came on time	2	2.2	39	42.4	26	28.3	25	27.2	0	0.0

10	Ease of requirements requested is not complicated in patient registration in the administration	0	0.0	42	45.7	24	26.1	26	28.3	0	0.0
11	General practitioners are always there when needed	0	0.0	44	47.8	23	25.0	25	27.2	0	0.0
12	General practitioners provide services according to patient needs	2	2.2	39	42.4	27	29.3	24	26.1	0	0.0
13	The general practitioner came on time	4	4.3	42	45.7	18	19.6	28	30.4	0	0.0

Based on table 5 regarding the distribution of the frequency of answers to the assurance aspect, it can be explained that as many as 54.3% of respondents said that nurses were less skilled in providing nursing services, while only 4.3% of respondents said that nurses had good skills in providing nursing services. As many as 42.4% of respondents stated that services were not carried out properly and 31.5% of respondents stated that the services provided were good and appropriate. 37% of respondents said that it was inadequate to explain the results of examinations to patients and their families, and only 13% of respondents stated that explanations to patients or families of patients from health workers were good. as many as 29.3% of respondents stated that the medications was well available at the clinical pharmacy. Most of the respondents stated that registration did not follow queues (50%) and the doctor's arrival took a long time (42.4%).

Table 6. Assurance Frequency Distribution at Mitra Sehat KD. Waringin Clinic in 2022

No.	Assurance	Frekuensi	Persentase (%)
1	Good	35	38.0
2	Not enough	57	62.0
	Total	92	100,0

Based on Table 6, the results obtained on the assurance factor showed that as many as 38% of respondents stated that the assurance factor was good and the majority of respondents, namely 62% of respondents, stated that the assurance factor was still not good. Assurance is the skills and knowledge possessed by medical personnel so as to foster trust and confidence in patients.

4) Responsiveness

The following table shows the frequency distribution of responsiveness answers at Mitra Sehat KD. Waringin Clinic:

Table 7. Frequency Distribution of Responsive Responses at Mitra Sehat KD Clinic. Waringin in 2022

No.	Statement	STB		TB		KB		B		SB	
		f	(%)	f	(%)	f	(%)	f	(%)	f	(%)
1	Responsiveness of nurses in providing patient nursing services	5	5.4	39	42.4	30	32.6	14	15.2	4	4.3
2	The speed of nurses in responding to patient requests in nursing services	4	4.3	45	48.9	27	29.3	14	15.2	2	2.2
3	The speed of nurses in paying attention to and dealing with patient complaints	1	1.1	41	44.6	34	37.0	16	17.4	0	0.00

4	Speed of registration and administrative officers in providing services	0	0.00	41	44.6	34	37.0	16	17.4	1	1.1
5	The convenience of the requirements requested is not complicated in outpatient registration and administration	5	5.4	43	46.7	23	25.0	21	22.8	0	0.00
6	Doctors are knowledgeable and skilled in providing medical services	2	2.2	40	43.5	19	20.7	31	33.7	0	0.00
7	The speed of doctors in responding to patient requests in health services	3	3.3	39	42.4	20	21.7	30	32.6	0	0.00
8	The nurse readily accepts the patient for an initial examination	4	4.3	44	47.8	18	19.6	26	28.3	0	0.00
9	Medical and non-medical personnel provide responses according to complaints submitted	3	3.3	37	40.2	23	25.0	29	31.5	0	0.00
10	Pharmacy/drug department Explains the drugs given	3	3.3	40	43.5	20	21.7	28	30.4	1	1.1
11	Clever staff in providing services	0	0.00	43	46.7	19	20.7	29	31.5	0	0.00

Based on table 7 regarding the responsiveness aspect, it was found that in statements regarding nurse responsiveness in service, it was stated that nurses were not responsive at 32.6% and patients who stated that they were responsive were only 15.2%. the speed of nurses in responding according to patient needs is considered not good by 29.3% and by 15.2% it is considered good. In terms of the speed of registration officers and the administration section, it was 44.6%, they were still considered not good and the ease of requirements was still considered complicated by 46.7% of the respondents. Regarding the competency of doctors in carrying out treatment The respondents stated % were not competent, and % were competent Regarding the responsiveness of nurses in patient care, 40.2% rated it as not good and only 31.5% rated it as good.

Table 8 . Frequency Distribution of Responsiveness at Mitra Sehat KD. Waringin Clinic in 2022

No.	Responsiveness	Frekuensi	Persentase (%)
1	Good	41	44.6
2	Not enough	51	55.4
Total		92	100,0

Based on Table 8, it was found that the majority of respondents, namely 55.4%, stated that the service in terms of responsiveness was classified as inadequate and some others (44.6%) stated that the service was classified adequate responsiveness is the attitude of medical personnel who are attentive, fast and precise in dealing with patient questions and complaints which include: clear information, employees who are ready to help and are willing to listen to complaints and provide time to visit the patient's room.

5) Empathy

The following table shows the frequency distribution of perception of empathy at Mitra Sehat KD. Waringin Clinic:

Table 9. Frequency Distribution of Perception of Empathy at Mitra Sehat Clinic KD. Waringin in 2022

No.	Statement	STB		TB		KB		B		SB	
		f	(%)	f	(%)	f	(%)	f	(%)	f	(%)
1	Hospitality of doctors when providing medical services to patients	2	2.2	26	28.3	48	52.2	16	17.4	0	0.0
2	The doctor's attention to the patient during treatment	2	2.2	44	47.8	25	27.2	21	22.8	0	0.0
3	The attention of nurses to patients during nursing services	0	0.0	56	60.9	16	17.4	20	21.7	0	0.0
4	Hospitality of nurses when providing nursing services to patients	0	0.0	58	63.0	11	12.0	23	25.0	0	0.0
5	The friendliness of the pharmacy staff when providing drug services	1	1.1	52	56.5	19	20.7	19	20.7	1	1.1
6	The friendliness of the registration and administrative officers	0	0.0	49	53.5	19	20.7	24	26.1	0	0.0
7	Health workers always explain in a friendly manner the complaints felt by patients	0	0.0	55	59.8	21	22.8	16	17.4	0	0.0
8	The staff at the clinic smile easily	1	1.1	57	62.0	21	22.8	13	14.1	0	0.0
9	Patient and staff communication is going well	1	1.1	52	56.2	26	28.3	13	14.1	0	0.0
10	Officers treat patients regardless of patient status	0	0.0	47	51.1	20	21.7	25	27.2	0	0.0

Based on the empathy aspect of service quality, it was found that the attention of nurses to patients during the examination process was considered unfavorable by 60.9%, nurses and were also considered unfriendly by 63%, besides that the pharmacy staff were also considered unfriendly by 56.5%. In the friendliness item, the officers handling complaints were considered to be less friendly at 59.8%. In item number 9 it is assessed that the officers still lack friendliness by 62%.

Table 10 Frequency Distribution of Perception of Empathy at Mitra Sehat Clinic KD. Waringin in 2022

No.	Empathy	Frekuensi	Persentase (%)
1	Sufficient	26	28.3
2	Insufficient	66	71.7
Total		92	100,0

Based on Table 10 above, it can be concluded that most of the patients felt that medical staff lacked empathy, namely 71.7% and Patients who felt the medical staff already had good empathy

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already had good empathy, amounting to 28.3%. Empathy is the ability to place yourself, feel the patient's condition through a willingness to listen to patient complaints and communication between patients and health workers.

6) Return Visit

The following is a distribution table for the frequency of return visits at Mitra Sehat KD. Waringin Clinic:

Table 11. Frequency Distribution of Return Visits at Mitra Sehat Clinic KD. Waringin in 2022

No.	Return Visit	Frekuensi	Persentase (%)
1	Not Visited	39	42.4
2	Visit	53	57.6
	Total	92	100,0

Based on Table 11 above, it can be seen that 57.6% of patients who have been treated will make a return visit for treatment if needed and 42.4% say they will not make a return visit for treatment.

B. Bivariate Analysis

Bivariate analysis was used to explain the relationship between independent variables using the chi-square test. It is said that there is a statistically significant relationship if a p value <0.05 is obtained. The relationship between the independent variables and the dependent variable can be seen with the following results:

1) The relationship between physical evidence and patient return visits at Mitra Sehat KD. Waringin Clinic 2022

Table 12. Cross-tabulation of the relationship between physical evidence and patient return visits at Mitra Sehat KD. Waringin Clinic 2022

No	Physical Evidence	Visit		Return Visit		Total		P
		f	(%)	f	(%)	f	(%)	
1	Good	28	70	12	30	40	100	0.001
2	Not enough	11	21.2	41	78.8	52	100	
	Total	39	42.4	53	57.6	92	100	

Based on the cross-tabulation results in table 12, it can be seen that out of a total of 92 respondents, there were 40 respondents who considered that the physical evidence was good, would make return visits to the KD healthy partner clinic. waringin to return for treatment as much as 70% of respondents. Meanwhile, as many as 52 respondents who stated that physical evidence was inadequate, 78.8% would not make return visits to the clinic.

Based on the statistical test results, the value of $p = 0.001$ was obtained, where $p > \alpha$ ($0.001 < 0.05$) so it can be concluded that H_0 was rejected, meaning that there is a relationship between physical evidence and patient return visits at the Mitra Sehat KD Waringin clinic in 2022.

2) Relationship of Reliability with Patient Return Visits at Mitra Sehat KD. Waringin Clinic 2022

Table 13 Cross-tabulation of the Relationship between Reliability and Patient Return visits at Mitra Sehat KD. Waringin Clinic 2022

No	Reliability	Visit		Return Visit		Total		P
		f	(%)	f	(%)	f	(%)	
1	Good	29	76.3	9	23.7	38	100	0.001

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2	Not enough	10	18.5	44	81.5	54	100
	Total	39	42.4	53	57.6	92	100

Based on the cross-tabulation results in table 8, it can be seen that out of a total of 92 respondents, there were 38 respondents who considered Considered reliable, would make a Return visit to the KD healthy partner clinic. waringin to return for treatment again by 76.3% of respondents. Meanwhile, as many as 38 respondents who stated that reliability was inadequate, 81.5% would not make return visits to the clinic.

Based on the statistical test results, the value of $p = 0.001$ was obtained, where $p > \alpha$ ($0.001 < 0.05$) so that it could be concluded that H_0 was rejected, meaning that there was a relationship between reliability and return visits at the KD healthy partner clinic. waringin in 2022.

3) Assurance Relationship with Patient Return Visits at Mitra Sehat KD. Waringin Clinic 2022

Table 14. Cross-tabulation of Collateral Relations with Patient Return visits at Mitra Sehat KD. Waringin Clinic 2022

No	Assurance	Visit		Return Visit		Total		P
		f	(%)	f	(%)	f	(%)	
1	Good	25	71.4	10	28.6	35	100	0.001
2	Not enough	14	24.6	43	75.4	57	100	
	Total	39	42.4	53	57.6	92	100	

Based on the cross-tabulation results in table 9, it can be seen that out of a total of 92 respondents, there were 35 respondents who considered that the assurance was good, would make return visits to the KD healthy partner clinic. waringin to return to treatment for 71.4% of respondents. Meanwhile, as many as 57 respondents who stated that the assurance was inadequate, 75.4% would not make a Return visits to the clinic.

Based on the statistical test results, the value of $p = 0.001$ was obtained, where $p > \alpha$ ($0.001 < 0.05$) so that it could be concluded that H_0 was rejected, meaning that there was a assurance relationship with return visits at the KD healthy partner clinic. waringin in 2022.

4) The Relationship between Responsiveness and Patient Return Visits at Mitra Sehat KD. Waringin Clinic 2022

Table 15. Cross-tabulation of the Relationship between Responsiveness and Patient Return visits at Mitra Sehat KD. Waringin Clinic 2022

No	Responsiveness	Visit		Return Visit		Total		P
		f	(%)	f	(%)	f	(%)	
1	Good	29	70.7	12	29.3	41	100	0.001
2	Not enough	10	19.6	41	80.4	51	100	
	Total	39	42.4	53	57.6	92	100	

Based on the cross-tabulation results in table 10, it can be seen that out of a total of 92 respondents, there were 51 respondents who considered that responsiveness was still inadequate, would not make return visits to the KD healthy partner clinic. waringin to return to treatment by 80.4%. Meanwhile, as many as 51 respondents who stated that responsiveness was good/adequate, 70.7% would make return visits to the clinic.

Based on the statistical test results, the value of $p = 0.001$ was obtained, where $p > \alpha$ ($0.001 < 0.05$) so that it could be concluded that H_0 was rejected, meaning that there was a relationship between responsiveness and return visits at the KD healthy partner clinic. Waringin 2022

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5) Relationship of Empathy with Patient Return Visits at Mitra Sehat KD. Waringin Clinic 2022

Table 16. Cross-tabulation of the Relationship of Empathy with Patient Return visits at Mitra Sehat KD. Waringin Clinic 2022

No	Empathy	Visit		Return Visit		Total		P
		f	(%)	f	(%)	f	(%)	
1	Good	16	61.5	10	38.5	26	100	0.018
2	Not enough	23	34.8	43	65.2	66	100	
	Total	39	42.4	53	57.6	92	100	

Based on the cross-tabulation results in table 16, it can be seen that out of a total of 92 respondents, there were 66 respondents who considered that empathy was still not good, would not make return visits to the KD healthy partner clinic. waringin to return for treatment as much as 65.2% of respondents. Meanwhile, respondents who stated that the empathy factor was sufficient would make return visits to the clinic by 61.5%.

Based on the statistical test results, the value of $p = 0.001$ was obtained, where $p > \alpha$ ($0.018 < 0.05$) so that it could be concluded that H_0 was rejected, meaning that there was an empathic relationship with return visits at the KD healthy partner clinic. waringin in 2022.

C. Multivariate Analysis

After the bivariate test is carried out, the next step is the multivariate test with the condition that the p value is < 0.25 (in the bivariate table). Then it can be seen the candidate variables to be tested as follows:

Table 17. Candidate Variables for the Multivariate Test

No	Variabel	Value p
1	Physical evidence	0,001
2	reliability	0,001
3	Assurance	0,001
4	Responsiveness	0,018
5	Empathy	0,001

Based on table 17, it can be seen that all variables have a p value < 0.025 , thus it can be concluded that all variables can be further tested, namely the multivariate test.

Multivariate analysis in this study was conducted to test the hypothesis which states: the effect of the quality of health services on Return visits at the KD healthy partner clinic. waringin year 2022. The analytical method used in this study is multiple logistic regression analysis

1) Nagelkerke R square

Table 18. R Square Value

Model Summary			
Cox & Snell R			
Step	2 Log likelihood	Square	Nagelkerke R Square
1	64.724 ^a	.483	.649

In logistic regression, the Nagelkerke R square value of 0.649 means that the variability of patient visit variables can be explained by the quality of service, which is 64.9%, while the remaining 35.1% is explained by other factors outside this research model.

2) Partial Test

Table 19. Test Results for the Effect of Service Quality on Return visits at Mitra Sehat KD. Waringin Clinic 2022

Variables in the Equation							95% C.I. for EXP(B)	
		B	S.E.	Wald	df	Sig	Exp(B)	Lower Upper
Step 1 ^a	kehandalan	2.311	.615	14.136	1	.000	10.087	3.023 33.653
	jaminan	1.867	.624	8.939	1	.003	6.466	1.902 21.982
	daya tanggap	2.022	.617	10.746	1	.001	7.556	2.255 25.316
	Constant	-9.298	1.840	25.525	1	.000	.000	

a. Variable(s) entered on step 1: reliability, assurance, responsiveness.

Based on table 18, it can be seen that the variable indicator of service quality that has the most influence on return visits is reliability with an Exp(B) value of 10,087 meaning that respondents who feel that officers are less reliable in providing services are at risk of not making return visits to Mitra Sehat KD. Waringin Clinic is 10.087 times compared to customers who feel that the officers are reliable.

DISCUSSION

A. The Effect of Physical Evidence on Patient Return visits at Mitra Sehat KD. Waringin Clinic Year 2023

The results showed that the majority of respondents still stated that physical evidence was classified as inadequate. From the results of the bivariate test, it was found that with a confidence level of 95% it could be concluded that physical evidence factors were related to patient return visits at Mitra Sehat KD. Waringin Clinic 2022.

The definition of physical evidence in service quality is a form of physical actualization that can be seen or used by employees in accordance with their use and utilization which can be considered to help the service received by people who want the service, so that they are satisfied with the perceived service, which at the same time shows work performance for giving services provided. [6]

The quality of service is largely determined according to the physical condition of the service, the core of which is the ability to use work tools and equipment that can be seen physically, to be able to demonstrate physical ability in mastering various work technologies and to show performance in accordance with skills, authority and work dedication.

Research by Purnomo states that there is a significant relationship between the quality of service and the intention to reuse outpatient services with a low level of association, there is a significant relationship between the quality of registration counter services and the intention to reuse outpatient services with a low level of association, there is a relationship There is a significant relationship between the quality of payment services and the intention to reuse outpatient services with a low level of association. There is a significant relationship between the quality of polyclinic examination services and the intention to reuse outpatient services with a low level of association. There is a significant relationship between facilities and the intention to use repeated outpatient services with a low level of contact. [7]

In providing services, everyone who wants services can feel the importance of physical evidence shown by the service developer, so that the hospital services provided provide satisfaction. The form of physical evidence services is usually in the form of available service facilities and infrastructure, service technology used, service provider performance that is in accordance with the characteristics of the services provided in demonstrating work performance that can be provided in the form of physical services that can be seen. [6]

Based on the results of the researchers' observations, physical services in the KD Mitra Sehat Clinic environment. Waringin that can be improved is the use of hand-scones for medical personnel as an effort to sterilize medical devices in treating patients, although this has not been fully implemented, because in some parts there are still medical personnel who do not use hand-scones. Another thing that

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still needs improvement is the availability of seats to wait for both the patient and the patient's family who accompany the patient. In addition, physical evidence in terms of registration is an important point for improvement where additional seats can be added to wait while queuing for registration. Registration effectiveness also needs to be considered so that patients do not have to wait long. The registration section is the point where the first impression can provide a sense and separate assessment for the patient, especially when the patient is waiting for a long time, usually the patient has assessed the overall service at the clinic.

In this study, the physical evidence factor had no effect on patient return visits because physically as a private clinic it was good enough, such as waiting rooms and outpatient areas that were clean enough, although there were drawbacks such as long registration times, doctors sometimes not available when needed and general practitioners. It is still limited where there are only certain days for general practitioner services but as a private clinic, this clinic is still the target of the community in carrying out treatment.

B. The Effect of Reliability on Patient Return visits at Mitra Sehat KD. Waringin Clinic 2023

The results of the univariate analysis showed that 58.7% of respondents stated the reliability of services at KD's Mitra Sehat Clinic. Waringin is still inadequate. From the results of the regression test, it was found that with a 95% confidence level it could be concluded that the reliability factor affected outpatient satisfaction at Mitra Sehat KD. Waringin Clinic 2022.

Service reliability means that every employee has reliable abilities, knows about the ins and outs of work procedures, work mechanisms, corrects various deficiencies or deviations that are not in accordance with work procedures and is able to show, direct and provide correct direction to any form of service that is not yet understood by the community. , so be The positive impact on this service is that employees understand, master, are independent and professional about the job description they are engaged in. [6]

The demand for employee reliability in providing fast, precise, easy and smooth services is a requirement for the assessment of the person served in showing the actualization of employee work in understanding the scope and description of work that is the concern and focus of every employee in providing his services. In reliable health services, it means accuracy in diagnosing disease, services that are in accordance with minimum service standards, speed of registration services in the medical records and medicine department.

In this study, the more reliable health workers are in treating their patients, the more loyal the patients will be and the more they will make return visits if the patient requires medical treatment. Reliable includes a fast service process, the main service attitude and instills trust.

Reliability is the most influential variable in this study, efforts to increase the reliability of medical personnel and non-medical personnel so that patients visiting the hospital feel good service reliability will be able to increase patient visits. Thus to increase patient loyalty, the reliability factor can be an effort to be improved through: Reliability of an employee who excels, can be seen from:

1. Reliability in providing services in accordance with the level of knowledge of the job description.
2. Reliability in providing skilled services in accordance with the level of work skills possessed in carrying out service activities efficiently and effectively.
3. Reliability in providing services in accordance with the work experience they have, so that mastery of job descriptions can be carried out quickly, precisely, easily and with quality according to experience.
4. Reliability in applying mastery of technology to obtain accurate and satisfying services according to the output results of the use of technology shown. [8]

Based on the description above, it can be understood that service quality from reliability can be demonstrated by service behavior in accordance with the wishes and competencies possessed by these employees, especially nurses and doctors as well as the pharmacy department. because an employee can be reliable if the level of knowledge is used properly in providing reliable services, the skills possessed are applied in accordance with the mastery of knowledge, work experience supports each employee to carry out his work activities reliably and the use of technology is a requirement for every

reliable employee to perform various forms of work creativity to solve various work problems they face reliably.

Improving the skills and knowledge and competence of nurses is one of the efforts to improve services that can be done through training, workshops, and all health workers are given regular opportunities to improve their abilities and skills. Learning assignments can also support to provide opportunities for improving abilities and skills.

Reliability issues at Mitra Sehat KD. Waringin Clinic, based on the results of researchers and observations, shows:

1. There are still many officers who lack work experience where the nurses who are accepted to work are more nurses who have just graduated from college (young graduates).
2. Many health workers work not in accordance with their competence (for example, midwives work as nurses).
3. The opportunity to attend training is not in accordance with the job

Thus, to increase patient loyalty, the reliability factor can be used as an effort to be improved through providing training to nurses according to their field of knowledge and duties and assignments to continue their education to a higher level.

C. The effect of assurances on patient return visits at Mitra Sehat KD. Waringin Clinic 2023

The results of the descriptive analysis show that 62% of patients feel that assurances at the clinic are still inadequate and 38% of respondents feel that assurances are sufficient. Based on the results of the regression test, it was found that with a confidence level of 95%, it can be concluded that the insurance factor influences outpatient satisfaction at Mitra Sehat KD. Waringin Clinic in 2022. Based on the results of research on the assurance factor, the results show that the assurance factor is still not good.

Assurance is the ability of health workers to provide services that have a level of accuracy, ease, fluency so that people who receive services are satisfied with the quality of services provided. Assurance Measured by indicators of the patient's sense of security and assurance when carrying out treatment or care, can foster a sense of trust for the patient to recover quickly, experience safe and trained in carrying out treatment and able to quickly deal with complaints about the patient's health condition. [6]

The characteristics of an organization that assurances and gives trust are:

1. Being able to provide satisfaction in service, that is, every employee will provide fast, precise, easy, smooth and quality service, and this becomes a concrete form that satisfies the person who gets the service.
2. Able to demonstrate high work commitment in accordance with the forms of work integrity, work ethic and work culture in accordance with the application of the vision and mission of an organization in providing services.
3. Able to provide certainty for services in accordance with the behavior shown, so that people who receive services are sure according to the behavior they see.

Assurances for services provided by employees are largely determined by performance or service performance, so it is believed that these employees are able to provide reliable, independent and professional services that have an impact on the satisfaction of the services received. Apart from this performance, the assurance of a service is also determined by the existence of a strong organizational commitment, which recommends that every employee provide services seriously and earnestly to satisfy the people served [9]. Another form of assurance is assurances for employees who have good personality behavior in providing services, of course it will be different for employees who have bad character or character and who are not good at providing services. [10]

In line with the research conducted by Adiyoga and Astuti with the title the effect of service quality on inpatient satisfaction at the Bringin Health Center, Ngawi Regency. The results showed that the majority of respondents stated that as many as 28 respondents (56%) stated that the quality of service was sufficient. The majority of respondents as many as 34 respondents (70%) stated that patients were satisfied with the quality of service. There is a reliability effect on inpatient satisfaction at the Bringin Public Health Center, Ngawi Regency. There is a reliability effect on inpatient satisfaction at the Bringin

Public Health Center, Ngawi Regency. There is an effect of responsiveness on inpatient satisfaction at the Bringin Public Health Center, Ngawi Regency. There is an effect of assurance on inpatient satisfaction at the Bringin Public Health Center, Ngawi Regency. There is an influence of empathy on inpatient satisfaction at the Bringin Public Health Center, Ngawi Regency. The results showed that the factors of physical evidence, reliability, responsiveness, empathy and insurance were shown by the calculated F value of 56,624 with a p value of $0.000 < 0.05$ so that there was an effect of service quality on inpatient satisfaction at the Bringin Health Center, Ngawi Regency. [11]

Assurances related to services in this case include patient confidence in the abilities and skills possessed by medical personnel, patient safety and services perceived by patients in accordance with service standards. If the patient gets satisfactory service where the patient feels that the medical staff is capable of treating him and showing recovery, the patient will feel that the medical staff is skilled and able to treat the patient well.

Findings at Mitra Sehat KD. Waringin Clinic is a assurance that is still inadequate, where general practitioners are not always available when needed (only on a certain schedule), sometimes critical patients are not treated quickly, and do not comply with minimum service standards. Assurances affect patient return visits, thus medical personnel, especially doctors, are endeavored to show their best abilities to create conditions for patients to feel secure when carrying out treatment at Mitra Sehat KD. Waringin Clinic.

D. The Effect of Responsiveness to Patient Return visits at Mitra Sehat KD. Waringin Clinic 2023

An overview of responsiveness at Mitra Sehat KD. Waringin Clinic is still inadequate at 55.4%. Based on the results of the regression test, it was found that with a confidence level of 95% it could be concluded that the responsiveness factor affected outpatient satisfaction at Mitra Sehat KD. Waringin Clinic.

In principle, the essence of the form of service that is applied in an agency or work service activity is to provide services according to the level of responsiveness to the problems of the services provided. This lack of responsiveness from people who receive services, because this form of service is being faced for the first time, so that it requires a lot of information regarding terms and procedures for services that are fast, easy and smooth, so that the employee or service provider should guide the person being served according to the explanations which is detailed, brief and clear which does not raise any questions or matters which cause complaints from the person receiving the p service. If this is done well, it means that the employee has the ability to be responsive to the services provided which is the cause of optimal service in accordance with the level of speed, ease and smoothness of a service handled by employees. [12]

In line with this opinion, the results of previous research on the analysis of factors that influence patient satisfaction at the eye polyclinic at the outpatient installation at the RSUD. Dr. Tengku mansyur city of tanjung balai. The results of research on the responsiveness variable show that the responsiveness level of Human Resources is 99.6%. For the variable assurance obtained 98.0%. For the reliability variable obtained 98.0%. For the variable empathy obtained 93.7%. For tangible variables obtained 90.5%. Based on research conducted on all variables, the service results are very good with a satisfaction level of 88.9%. There is no relationship between the doctor's interpersonal relationship with the interest in return visits . The results of the joint influence analysis found that perceptions of the promptness of arrival and medical technical skills had an effect on interest in return visits . [13]

The influence of responsiveness at Mitra Sehat KD. Waringin Clinic about patient return visits can be increased through services in a fast form in providing action, prioritizing patient recovery in the shortest time. In fact, responsiveness is still inadequate because there are still problems with a number of things, such as doctors who are rather difficult to find, help that is sometimes not immediately given when patients need it where health workers are less alert. These things have an impact on patient loyalty for the services provided. The responsiveness factor influencing patient visits is in line with the theory put forward by Parasuraman which says that responsiveness requires wise, detailed explanations, coaching, directing and persuading to respond to all forms of work procedures and mechanisms that apply in an organization, so that the form of service received a positive response. [12]

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E. The Effect of Empathy on Outpatient Satisfaction at Mitra Sehat KD. Waringin Clinic Year 2023

From the results of the regression test, it was found that with a confidence level of 95% it could be concluded that the empathy factor did not affect patient satisfaction at Mitra Sehat KD. Waringin Clinic 2022. The empathy factor does not affect patient satisfaction in line with research conducted by (Amalia et al., 2017) [14], entitled Responsiveness, Assurance, Physical Evidence, Empathy, Reliability, and Patient Satisfaction. The results of the analysis of this study using SPSS 21 show that the variables of assurance, physical evidence, and reliability have a significant effect on patient satisfaction, but the variables of responsiveness and empathy have no significant effect on patient satisfaction.

Empathy in a service is the existence of a concern, seriousness, sympathy, understanding and involvement of parties who have an interest in the service to develop and carry out service activities in accordance with the level of understanding and understanding of each of these parties. The party providing the service must have empathy to understand the problems of the party who wants to be served. The party being served should understand the limitations and abilities of the person serving, so that the integration between the party serving and receiving the service has the same feelings. [15]

According to (Margaretha, 2013) [15] the form of service quality from the empathy of those who provide services to those who get services must be realized in five ways, namely:

1. Able to pay attention to various forms of services provided, so that those served feel they are important people.
2. Able to give seriousness to the work activities of the services provided, so that those served have the impression that the service provider is responding to the desired service.
3. Able to show sympathy for the services provided, so that those served feel they have authority over the services performed.
4. Able to show a deep understanding of the various things that are expressed, so that those served are relieved in facing the forms of service that are felt.
5. Able to show involvement in providing services for various things that are done, so that those served are helped to face various forms of service difficulties.

In the health sector, forms of empathy include knowing patients well, remembering problems (illnesses and other complaints) and being a good listener. In this study, empathy had no effect because it was the patient's priority when visiting Mitra Sehat KD. Waringin Clinic is another factor such as the diagnosis, the doctor's presence and the nurse's alertness, and recovery. In addition, outpatients are not interact a lot with doctors, nurses or other non-medical personnel, they only make short medical visits with also short communication and communication is only limited to complaints and treatment while outpatients need more communication and empathetic attitude of medical personnel considering the services obtained are more than 24 hours. hourly and continuously.

4. CONCLUSION

There is an effect of physical evidence on return visits of outpatients at KD's Mitra Sehat Clinic. Waringin 2022. There is an effect of reliability on the return visit of outpatients at Mitra Sehat KD. Waringin Clinic 2022. There is a assured effect on repeat outpatient visits at Mitra Sehat KD. Waringin Clinic 2022. There is an effect on responsiveness to repeat outpatient visits at Mitra Sehat KD. Waringin Clinic 2022. There was no effect of empathy on the return visits of outpatients at Mitra Sehat KD. Waringin Clinic 2022

REFERENCES

- [1] Permenkes RI, "Peraturan Menteri Kesehatan Republik Indonesia Nomor 9 Tahun 2014 tentang Klinik," 2014, Accessed: Nov. 03, 2022. [Online]. Available: <https://peraturan.bpk.go.id/Home/Details/117304/permenkes-no-9-tahun-2014>
- [2] D. Hendrawan, C. Nurcahyo, and A. Afdal, "Pelayanan Primer yang Berkualitas: Sebuah Tinjauan Literatur," *Jurnal Jaminan Kesehatan Nasional*, vol. 1, no. 1, pp. 1–14, Jul. 2021, doi: 10.53756/jjkn.v1i1.13.

- [3] F. M. Kalijogo, "ANALISIS KUALITAS PELAYANAN PASIEN KLINIK PRATAMA DENGAN METODE SERVQUAL DAN IMPORTANCE PERFORMANCE ANALYSIS," *Jurnal Ekonomi, Bisnis, dan Akuntansi*, vol. 21, no. 3, 2019, doi: 10.32424/jeba.v21i3.1366.
- [4] S. Retnaningtyas, E. Woro Utami, and M. Hasyim, "Persepsi Pasien terhadap Bauran Pemasaran Rumah Sakit dan Pilihan Rumah Sakit," *Jurnal Kedokteran Brawijaya*, vol. 29, no. 3, 2016, doi: 10.21776/ub.jkb.2016.029.03.12.
- [5] Sugiyono, *Sugiyono. 2013. Statistika Untuk Penelitian. Bandung: Alfabeta*. 2018.
- [6] S. Basri, "Metode Analisis Kualitas Pelayanan Parasuraman Zeithaml Berry," *Diakses tanggal*, vol. 9, 2021.
- [7] I. Purnomo, "Hubungan Kualitas Pelayanan dengan Minat Menggunakan Ulang Jasa Pelayanan Kesehatan Rawat Jalan di RSUD Benda Kota Pekalongan," *Pena Medika Jurnal Kesehatan*, vol. 3, no. 1, 2011.
- [8] N. Nopriwan, S. P. Arso, and N. Nurjazuli, "Analisis Pengaruh Persepsi Pasien Tentang Mutu Pelayanan Terhadap Kepuasan Pasien Rawat Jalan Unit Kedokteran Nuklir Instalasi Radiologi RSUP Dr. Kariadi Semarang," *Jurnal Manajemen Kesehatan Indonesia*, vol. 10, no. 2, pp. 115–124, 2022.
- [9] T. N. Natasya, H. Karamoy, and R. Lambey, "Pengaruh Komitmen Organisasi Dan Pengendalian Internal Terhadap Resiko Terjadinya Kecurangan (Fraud) Dalam Pelaksanaan Jaminan Kesehatan Di Rumah Sakit Bhayangkara Tk. Iv Polda Sulut," *Going Concern: Jurnal Riset Akuntansi*, vol. 12, no. 2, 2017.
- [10] D. Aryani and F. Rosinta, "Pengaruh kualitas layanan terhadap kepuasan pelanggan dalam membentuk loyalitas pelanggan," *BISNIS & BIROKRASI: Jurnal Ilmu Administrasi dan Organisasi*, vol. 17, no. 2, p. 3, 2011.
- [11] I. D. Adiyoga and F. B. Astuti, "PENGARUH KUALITAS PELAYANAN TERHADAP KEPUASAN PASIEN RAWAT INAP DI PUSKESMAS BRINGIN KABUPATEN NGAWI," *Jurnal Ilmu Keperawatan Indonesia (JIKI)*, vol. 13, no. 2, pp. 17–27, 2020.
- [12] M. Solichin, R. Rasyidi, and S. Halimatusa'diah, "Pengaruh Kualitas Pelayanan (Reliability, Assurance, Tangible, Empathy, Dan Responsiveness) terhadap Kepuasan Nasabah pada Bank Kalteng Cabang Muara Teweh," *Jurnal Bisnis dan Pembangunan*, vol. 8, no. 2, pp. 38–47, 2019.
- [13] B. Bin Purba, A. Prima, and A. Simanjuntak, "ANALISIS FAKTOR-FAKTOR YANG MEMPENGARUHI KEPUASAN PASIEN POLIKLINIK MATA PADA INSTALASI RAWAT JALAN RSUD. dr. TENGKU MANSYUR KOTA TANJUNG BALAI," *Jurnal Penelitian Kesmas*, vol. 4, no. 1, pp. 74–85, 2021.
- [14] A. Amalia, H. Tua, and Z. Rusli, "Daya Tanggap, Jaminan, Bukti Fisik, Empati, Kehandalan, Dan Kepuasan Pasien," *Jiana, Jurnal Ilmu Administrasi Negara*, vol. 14, no. 3, 2017.
- [15] F. Margaretha, "Kualitas Pelayanan: Teori dan Praktik," *Jakarta: PT. Gramedia Pustaka*, 2007.