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THE INFLUENCE OF HEALTHCARE SERVICE QUALITY ON PATIENT SATISFACTION AND REVISIT INTEREST AT GENERAL HOSPITAL ROYAL PRIMA MEDAN

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Abstract. The rapid growth of hospitals must be accompanied by a commitment to providing high-quality, professional, and accessible healthcare services. The increasing demands of the community for hospitals to ensure patient satisfaction necessitate continuous improvements in quality management. This study aims to analyze the influence of healthcare service quality on patient satisfaction and revisit intention at Royal Prima Medan Hospital. This research employs a mixed-methods approach with a cross-sectional design. The study population consists of BPJS and non-BPJS patients who received treatment at RSU Royal Prima Medan within the last three months, totaling 18,998 patients. The sample size was determined using Slovin's formula, resulting in 99 respondents. Quantitative data analysis was conducted using univariate, bivariate, and multivariate analyses, while qualitative data analysis involved data reduction, data presentation, and conclusion drawing. The findings indicate that all service quality indicators significantly influence both patient satisfaction and revisit intention, with a significance value of $p < 0.05$. These results align with qualitative research findings, where interviewees stated that the quality of healthcare services in hospitals plays a crucial role in patient satisfaction and their willingness to return for future services.

Keywords: healthcare service quality; patient satisfaction; revisit intention

I. INTRODUCTION

The WHO Constitution states that health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. Hospitals are the right institutions to handle health problems in the community, so hospitals are expected to be easily accessible to people who need health services. Health is one of the basic human needs to live a dignified and productive life, with that it is necessary to provide high-quality medical services so that it is expected to get optimal health services for patients. For that, hospitals compete competitively in meeting satisfaction and understanding the needs of each patient [1]. One of the health institutions that must be easily accessible to the public is the hospital [2].

Hospitals are an internal part of the health service system. In Indonesia, all hospitals, both public and private hospitals, have the task of carrying out effective and efficient health efforts by prioritizing curative and rehabilitative efforts without neglecting preventive and promotive efforts and implementing referral efforts [3].

Currently, more and more hospitals are being built. The increase in the number of hospitals is a step towards improvement to meet the demands and needs of the Indonesian people in the following years. The rapid growth of hospitals must still be considered to provide good, quality, professional, and acceptable health services [4].

Based on National data, in 2018 the number of hospitals in Indonesia reached 2,269 units and until now it has reached 2,831 units. It is estimated that this number will continue to grow in the future and in the future the hospitals that will be built must prioritize the quality of health services to make them at the forefront of Indonesian health development, especially in the ability to face global competition and challenges [5].

The high demands of the community towards hospitals in terms of fulfilling patient satisfaction make hospitals have to be able to develop the best quality management. Patient satisfaction in this case is the community is not enough if their illness is cured but on the other hand, patients also demand to be given the best possible service. All of that must be solved by the hospital as a service provider [6].

The quality of health services can affect the patient's intention to seek treatment or choose the available health services. People always compare or ask for recommendations from others about health services. Therefore, hospitals must always provide more professional and comprehensive services in carrying out their duties, able to maintain good relationships with patients and their families, administrators and other medical personnel. Developing effective relationships requires good communication skills, attitudes and professional ethics from medical and non-medical professionals [7]. The dimensions used to assess a person's opinion regarding the satisfaction received are the relationship between health workers and patients, ease of service, knowledge, freedom of choice and technical expertise, efficiency and reliability of service [8].

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Quality health services aim to obtain patient satisfaction. Patient satisfaction itself is one of the most important parts to measure the quality of service. Patient satisfaction due to quality health services can encourage the creation of good relationships so that it will provide a good image of the service provider. If this good image has been achieved, there will be a willingness of patients to return. The main indicator for knowing the quality of hospital services is patient satisfaction. Good service from a hospital will prove that the hospital is of good quality [3].

Patient satisfaction level according to [9]. in 2019 in Indonesia showed only 42.8%. This data is a relatively low figure, meaning that many patients are less or dissatisfied. This data shows that there are problems with the services provided in Indonesia. Research conducted [10] at Santa Elisabeth Hospital Medan on the influence of service quality on patient satisfaction levels shows that patients who are satisfied with the quality of service are 25%, the remaining 75% of patients feel dissatisfied with the quality of service provided by the hospital. Assessment of patient satisfaction with services can be seen from the comparison between patient perceptions of the services received with expectations of using service services. If expectations are met, it can be stated that the service received has good quality, and vice versa if the quality of service does not meet expectations, the quality of service is not met or is considered bad [11].

Satisfaction with health services in the world still varies, based on research by the World Health Organization (WHO) on satisfaction with health services in Spain, 10.8% of patients felt satisfied and in Australia, 70.4% were satisfied with health services and based on a survey conducted in Jordan, 65.7% of patients were satisfied with medical services while in Bangladesh, 63.2% of patients were satisfied with medical services [1]. In Indonesia, according to the Regulation of the Ministry of Health of the Republic of Indonesia in 2016 concerning the Minimum Service Standards for patient satisfaction, it is above 95%. If a health service is found with a patient satisfaction level below 95%, then it is considered a low patient satisfaction level which indicates that the health service provided does not meet the minimum standards or is of poor quality [1].

Research conducted [12] showed that patients who felt dissatisfied with hospital services and were not interested in revisiting were 35 with a percentage of 38.5% and those who were interested in revisiting were 9 with a percentage of 9.9% while patients who were satisfied with health services and were not interested in revisiting were 14 with a percentage of 15.4% and those who were interested in revisiting were 33 with a percentage of 36.3% which the results of the study showed that there was an influence of patient satisfaction on the interest in revisiting at RSU Bina Kasih Medan. The research [13] said that patients who were satisfied with the health services and were interested in making repeat visits were 49 and 34 were not interested, patients who were dissatisfied with the health services and were interested in making repeat visits were 2 and 13 were not interested.

In the context of satisfaction, there are five main things that determine patient satisfaction, namely responsiveness, reliability, assurance, empathy, and tangible, each of these five things has its own portion [14]. The interest of patients to revisit the hospital is influenced by the patient's experience based on the quality of service they have received, therefore the hospital must provide quality health services so that the hospital becomes the main choice for health service users, especially patients [15]. This has been done by RSU Royal Prima Medan, where Royal Prima Medan is the location taken in this study.Whichis one of the largest private hospitals and will become a referral center for the community, especially the city of Medan and the people of North Sumatra in general.Royal Prima Medan Hospital is a privately owned general hospital and is one of the type B hospitals located in the Medan City area, North Sumatra. This hospital provides health services supported by specialist and sub-specialist doctor services, and is supported by adequate medical facilities. In its implementation, from the results of the pre-survey conducted by researchers by interviewing several patients who visited the Royal Prima Medan Hospital, patient complaints were still found regarding the quality of service that was not as expected, resulting in patient dissatisfaction.

II. RESEARCH METHODS

This type of research is a mixed methods research (combination method) with a design *Cross Sectional*.According to [16] The combination research method is a research method that combines or merges quantitative methods and qualitative methods to be used together in a research activity, so that more comprehensive, valid, reliable and objective data is obtained.. Quantitative research is a systematic scientific study of parts and phenomena and the causality of their relationships. In this research method, researchers and statisticians use mathematical frameworks and theories related to the quantities in question [17]. Quantitative research is a type of research that uses numbers in responding to data to produce structured information.Quantitative research methods are research methods that use statistical tools to process data, therefore the data obtained and the results obtained are in the form of numbers [18].

Qualitative research according to [19] is a naturalistic inquiry process that seeks an in-depth understanding of social phenomena in their natural state. *Cross-sectional*is research that is carried out once without any continuation [16]. According to [20] Cross sectional is a study to study the dynamics between risk factors and effects, by means of an approach, observation or data collection at one time (point time approach).

This research will be conducted inRoyal Prima Medan Hospital, located at Jl. Ayahanda No. 68A, Sei Putih Tengah, Medan Petisah District, Medan City, North Sumatra 20118. This research has been conducted since the author conducted a preliminary survey in May 2024 which will then be continued with the preparation of a research proposal until data collection is continued with a results seminar. The following is an estimate of the time required to complete this thesis.

Population is the totality of each element to be studied that has the same characteristics, it can be an individual from a

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group, an event, or something to be studied. The population in this study were BPJS and Non BPJS patients who came for treatment to RSU Royal Prima Medan in the last 3 months, totaling 18,998 patients. According to [21] "A sample is a portion of a population taken in certain ways to measure or observe its characteristics". A sample is a portion of the number and characteristics possessed by the population.According to [17] A sample is a portion of data that is an object taken from a population.The sampling technique in this study used non-probability sampling with the techniquesAccidental sampling is a sampling technique based on chance, that is, anyone who happens to meet the researcher can be used as a sample, if the person who was met by chance is considered suitable as a data source.

The determination of the number of samples used in this study was determined using the Slovin formula as follows:

$$n = \frac{N}{1 + N e^2}$$

Information:
n : Sample size
N : Population size
e : 10% relaxation percentage

$$n = \frac{18.998}{1 + 18.998\ (0,1)^2}$$

$$n = \frac{18.998}{1 + 18.998(0,01)}$$

$$n = \frac{18.998}{1 + 189,99}$$

$$n = 99.47$$

From the calculation results using the Slovin formula, the sample size was 99.47, rounded up to 99 samples.

In sampling there are several criteria, namely as follows:
1. Non-emergency patients
2. The patient is conscious
3. If the patient is a child, then the respondents are the parents or family members who brought him to the Royal Prima Medan Hospital.
4. The patient can communicate well and can be understood by the researcher. If the patient cannot communicate well, the patient can be represented by his/her family.
5. Patients are willing to be respondents

The informants in this study for qualitative analysis were 8 patients who met the inclusion criteria.

III. RESULTS AND DISCUSSION

A. *Overview of Research Location*

Royal Prima Medan Hospital is one of the largest private hospitals and will become a referral center for the community, especially the city of Medan and the people of North Sumatra in general. A proud moment, on May 17, 2011, the Deputy Minister of National Education of the Republic of Indonesia, Prof. Dr. Fasli Jalal, PhD. laid the first stone for the construction of Royal Prima Hospital. On February 14, 2013, the Head of the North Sumatra Provincial Health Office issued a Temporary Operational Permit to Royal Prima Medan Hospital No. 440.442/1641/II/YEAR 2014. On February 16, 2014, Royal Prima Medan Hospital was inaugurated by the Deputy Governor of North Sumatra Province Ir. H. Tengku Erry Nuradi, M.Si with a Permanent Operational Permit from the North Sumatra Provincial Health Office signed by the Head of the North Sumatra Provincial Health Office, dr. Siti Hatati Surjantini, M.Kes.

B. *Frequency Distribution of Respondent Characteristics*

The following are the results of the frequency distribution of respondents in this study, which include the age, gender and education of respondents.

TABLE 1.
OVERVIEW OF FREQUENCY DISTRIBUTION OF RESPONDENT CHARACTERISTICS

Age	**n**	**%**
20-30 Years	7	7.1
31-40 Years	44	44.4
>40 Years	48	48.5
Total	**99**	**100**
Gender	**n**	**%**
Man	65	65.7
Woman	34	34.3
Total	**99**	**100**
Education	**n**	**%**
SENIOR HIGH SCHOOL	54	54.5
Diploma	11	11.1
S1	30	30.3
S2	4	4
Total	**99**	**100**

Table 1 explains the research results regarding the frequency distribution of respondent characteristics based on age, gender and education of respondents. In this study, there were 7 (7.1%) respondents aged 20-30 years, 44 (44.4%) respondents aged 31-40 years, and 48 (48.5%) respondents aged >40 years Respondents in this study were 65 (65.7%) male and 34 (34.3%) female. The respondents in this study who had a high school education were 54 (54.5%), Diploma 11 (11.1%), Bachelor's degree 30 (30.3%), Master's degree 4 (4%).

C. *Quantitative Research Results*

Validity Test

The following are the results of the validity test for the questionnaire questions in this study.

TABLE 2.
TEST RESULTS

Y1	**r count**	**r table**	**Information**
P1	0.728	0.361	Valid
P2	0.781	0.361	Valid
P3	0.519	0.361	Valid
P4	0.612	0.361	Valid
P5	0.769	0.361	Valid
P6	0.573	0.361	Valid
P7	0.574	0.361	Valid

P8	0.502	0.361	Valid
P9	0.771	0.361	Valid
P10	0.713	0.361	Valid
Y2	**r count**	**r table**	**Information**
P1	0.455	0.361	Valid
P2	0.588	0.361	Valid
P3	0.790	0.361	Valid
P4	0.739	0.361	Valid
P5	0.761	0.361	Valid
P6	0.640	0.361	Valid
P7	0.555	0.361	Valid
P8	0.748	0.361	Valid
P9	0.707	0.361	Valid
P10	0.456	0.361	Valid
X1	**r count**	**r table**	**Information**
P1	0.755	0.361	Valid
P2	0.650	0.361	Valid
P3	0.593	0.361	Valid
P4	0.643	0.361	Valid
P5	0.710	0.361	Valid
P6	0.586	0.361	Valid
P7	0.558	0.361	Valid
P8	0.473	0.361	Valid
P9	0.497	0.361	Valid
P10	0.398	0.361	Valid
X2	**r count**	**r table**	**Information**
P1	0.667	0.361	Valid
P2	0.631	0.361	Valid
P3	0.580	0.361	Valid
P4	0.438	0.361	Valid
P5	0.570	0.361	Valid
P6	0.595	0.361	Valid
P7	0.598	0.361	Valid
P8	0.747	0.361	Valid
P9	0.501	0.361	Valid
P10	0.792	0.361	Valid
X3	**r count**	**r table**	**Information**
P1	0.743	0.361	Valid
P2	0.674	0.361	Valid
P3	0.644	0.361	Valid
P4	0.789	0.361	Valid
P5	0.420	0.361	Valid
P6	0.614	0.361	Valid
P7	0.685	0.361	Valid
P8	0.662	0.361	Valid
P9	0.522	0.361	Valid
P10	0.673	0.361	Valid
X4	**r count**	**r table**	**Information**
P1	0.579	0.361	Valid
P2	0.682	0.361	Valid
P3	0.460	0.361	Valid
P4	0.660	0.361	Valid
P5	0.499	0.361	Valid
P6	0.402	0.361	Valid
P7	0.627	0.361	Valid
P8	0.527	0.361	Valid
P9	0.636	0.361	Valid
P10	0.578	0.361	Valid
X5	**r count**	**r table**	**Information**
P1	0.414	0.361	Valid
P2	0.445	0.361	Valid
P3	0.490	0.361	Valid
P4	0.570	0.361	Valid
P5	0.662	0.361	Valid
P6	0.407	0.361	Valid
P7	0.560	0.361	Valid
P8	0.453	0.361	Valid
P9	0.494	0.361	Valid
P10	0.585	0.361	Valid

Table 2 explains the results of the validity test for each questionnaire question in this study. From the results it can be seen that all calculated r values are > r table, which means that all questions in each variable in this study are valid.

Reliability Test

The following are the results of the reliability test in this study.

TABLE 3.
RELIABILITY TEST RESULTS

Variables	*Cronbach's Alpha*	Information
Y1	0.853	Relib
Y2	0.842	Relib
X1	0.748	Relib
X2	0.787	Relib
X3	0.800	Relib
X4	0.764	Relib
X5	0.667	Relib

Table 3 explains the results of the reliability test where the research results show that all variable questions in this study have a Cronbach Alpha value > 0.60, which means that all questions in this study are reliable.

Tangible

The following are the results of univariate analysis for tangible indicators based on respondents' answers.

The data that has been collected from the questionnaire results can be determined by its tangible interval. Determining the overall tangible level is based on the scale used for data processing, namely:

Max Ik = 10 x 99 x 5 = 4950

Ik Min = 10 x 99 x 1 = 990

Interval = (4950 – 990)/5 = 792

The tangible scale is based on the data used for data processing as shown in the following description:

TABLE 4.
TANGIBLE LEVEL SCALE

Scale	Category
990 – 1,782	Very Bad
1,783 – 2,575	Not good
2,576 – 3,368	Pretty good
3,369 – 4,161	Good
4.162 – 4.950	Very well

the results of univariate analysis on respondents' assessment of the quality of health services based on tangible indicators at General Hospital Royal Prima Medan. The results of the study showed that respondents who said tangible at General Hospital Royal Prima Medan was good were 73 (73.7%) and those who said tangible at General Hospital Royal Prima Medan was not good were 26 (26.3%).

Reliability

The following are the results of univariate analysis for reliability indicators based on respondents' answers.

The data that has been collected from the questionnaire results can be determined the reliability interval. Determining the overall level of reliability is based on the scale used for data processing, namely:

Max Ik = 10 x 99 x 5 = 4950

Ik Min = 10 x 99 x 1 = 990
Interval = (4950 – 990)/5 = 792

The reliability scale is based on the data used for data processing as shown in the following description:

TABLE 5.
RELIABILITY LEVEL SCALE

Scale	Category
990 – 1,782	Very Bad
1,783 – 2,575	Not good
2,576 – 3,368	Pretty good
3,369 – 4,161	Good
4.162 – 4.950	Very well

Based on the reliability level scale above, the reliability category levels are described in table 6 below.

Interest Returns

The following are the results of the univariate test on patient return interest at RSU Royal Prima Medan.

The data that has been collected from the questionnaire results can be determined the interval of interest in returning. Determining the overall level of interest in returning is based on the scale used for data processing, namely:
Max Ik = 10 x 99 x 5 = 4950
Ik Min = 10 x 99 x 1 = 990
Interval = (4950 – 990)/5 = 792

The scale of interest is based on the data used for data processing as shown in the following description:

TABLE 6.
RETURN INTEREST LEVEL SCALE

Scale	Category
990 – 1,782	Not interested
1,783 – 2,575	Less Interested
2,576 – 3,368	Just normal
3,369 – 4,161	Interested
4.162 – 4.950	Very Interested

TABLE 7.
RETURN OF INTEREST

Interest Returns	n	%
Interested	73	73.7
Less Interested	26	26.3
Total	**99**	**100**

Table 7 explains the results of univariate analysis on respondents' interest in returning to general hospital Royal Prima Medan. The results of the study showed that respondents who were interested in returning to general hospital Royal Prima Medan were 73 (73.7%) and those who were less interested were 26 (26.3%).

Results of Multivariate Analysis of Return Interest Variables

The following are the results of variable selection for the multivariate analysis of the return interest variable which can be seen in table 10 below.

TABLE 8
SELECTION OF VARIABLES FOR MULTIVARIATE ANALYSIS OF RETURN INTEREST

Variables	P-Value	Candidate
Tangible(X1)	0,000	Yes
Reliability(X2)	0,000	Yes
Responsiveness(X3)	0,000	Yes
Assurance(X4)	0.001	Yes
Empathy(X5)	0,000	Yes

From table 8 it can be seen that all independent variables in this study have a p value <0.05. From these results, all independent variables in this study enter the multivariate interest test model again in table 10:

TABLE 9
RESULTS OF MULTIVARIATE ANALYSIS OF RETURN INTEREST

Variables	*Sig*
Tangible(X1)	
Reliability(X2)	
Responsiveness(X3)	0,000
Assurance(X4)	
Empathy(X5)	

Table 9 explains the results of the multivariate analysis on the variablesquality of health services based on indicators*tangible*, *reliability*, *responsiveness*, *assurance*and empathy towards the interest of patients to return to RSU Royal Prima Medan, from the table it can be seen that the significance value is 0.000 < 0.05 which means that the independent variablet quality of health services based on indicators*tangible, reliability*, *responsiveness*, *assurance*and empathy in this study together or simultaneously have an influence on the dependent variable, namely on the patient's interest in returning to RSU Royal Prima Medan.

IV. CONCLUSIONS

The following are the conclusions of this study: The quality of health services based on tangible indicators towards patient satisfaction at Royal Prima Medan Hospital, shows that if the quality of health services based on tangible indicators at Royal Prima Medan Hospital is good, then 70 (70.7%) patients are satisfied and 3 (3%) patients are dissatisfied, if the quality of health services based on tangible indicators at Royal Prima Medan Hospital is not good, then 5 (5.1%) patients are satisfied and 21 (21.2%) patients are dissatisfied. From the results of the chi square test, a significance value of 0.000 <0.05 was obtained, which means that there is an influence of the quality of health services based on tangible indicators on patient satisfaction at Royal Prima Medan Hospital. The quality of health services based on reliability indicators on patient satisfaction at Royal Prima Medan Hospital, shows that if the quality of health services based on reliability indicators at Royal Prima Medan Hospital is good, then 69 (69.7%) patients are satisfied and 5 (5.1%) patients are dissatisfied, if the quality of health services based on reliability indicators at Royal Prima Medan Hospital is not good, then 6 (6.1%) patients are satisfied and 19 (19.2%) patients are dissatisfied. From the results of the chi square test, a significance value of 0.001 <0.05 was obtained, which means that there is an influence of the quality of health services based on reliability indicators on patient satisfaction at Royal Prima Medan Hospital. The quality of health services based on the responsiveness indicator towards patient satisfaction at Royal Prima Medan Hospital, shows that if the quality of health services based on the responsiveness indicator at Royal Prima Medan Hospital is good, then 68

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(68.7%) patients are satisfied and 9 (9.1%) patients are dissatisfied, if the quality of health services based on the responsiveness indicator at Royal Prima Medan Hospital is not good, then 7 (7.1%) patients are satisfied and 15 (15.2%) patients are dissatisfied. From the results of the chi square test, a significance value of 0.002 <0.05 was obtained, which means that there is an influence of the quality of health services based on the responsiveness indicator on patient satisfaction at Royal Prima Medan Hospital. The quality of health services based on assurance indicators for patient satisfaction at Royal Prima Medan Hospital, shows that if the quality of health services based on assurance indicators at Royal Prima Medan Hospital is good, then 68 (68.7%) patients are satisfied and 7 (7.1%) patients are dissatisfied. If the quality of health services based on assurance indicators at Royal Prima Medan Hospital is not good, then 7 (7.1%) patients are satisfied and 17 (17.2%) patients are dissatisfied. The results of the chi square test obtained a significance value of 0.000 <0.05, which means that there is an influence of the quality of health services based on assurance indicators on patient satisfaction at Royal Prima Medan Hospital. The quality of health services based on empathy indicators towards patient satisfaction at Royal Prima Medan Hospital, shows that if the quality of health services based on empathy indicators at Royal Prima Medan Hospital is good, then 65 (65.7%) patients are satisfied and 6 (6.1%) patients are dissatisfied, if the quality of health services based on empathy indicators at Royal Prima Medan Hospital is not good, then 10 (10.1%) patients are satisfied and 18 (18.2%) patients are dissatisfied. From the results of the chi square test, a significance value of 0.000 <0.05 was obtained, which means that there is an influence of the quality of health services based on empathy indicators on patient satisfaction at Royal Prima Medan Hospital. The quality of health services based on tangible indicators on the interest of patients returning to Royal Prima Medan Hospital, shows that if the quality of health services based on tangible indicators at Royal Prima Medan Hospital is good, then patients who are interested in returning to Royal Prima Medan Hospital are 65 (65.7%) and patients who feel less interested are 8 (8.1%), if the quality of health services based on tangible indicators at Royal Prima Medan Hospital is not good, then patients who are interested in returning to Royal Prima Medan Hospital are 8 (8.1%) and patients who feel less interested are 18 (18.2%). From the results of the chi square test, a significance value of 0.000 <0.05 was obtained, which means that there is an influence of the quality of health services based on tangible indicators on the interest of patients returning to Royal Prima Medan Hospital. The quality of health services based on the reliability indicator on the interest of patients returning to RSU Royal Prima Medan. shows that if the quality of health services based on the responsiveness indicator at RSU Royal Prima Medan is good, then patients who are interested in returning to RSU Royal Prima Medan are 64 (64.6%) and patients who feel less interested are 13 (13.1%), if the quality of health services based on the responsiveness indicator at RSU Royal Prima Medan is not good, then patients who are interested in returning to RSU Royal Prima Medan are 9 (9.1%) and patients who feel less interested are 13 (13.1%). From the results of the chi square test, a significance value of 0.000 <0.05 was obtained, which means that there is an influence of the quality of health services based on the responsiveness indicator on the interest of patients returning to RSU Royal Prima Medan. The quality of health services based on the responsiveness indicator towards the interest of patients returning to RSU Royal Prima Medan. shows that if the quality of health services based on the responsiveness indicator at RSU Royal Prima Medan is good, then patients who are interested in returning to RSU Royal Prima Medan are 64 (64.6%) and patients who feel less interested are 13 (13.1%), if the quality of health services based on the responsiveness indicator at RSU Royal Prima Medan is not good, then patients who are interested in returning to RSU Royal Prima Medan are 9 (9.1%) and patients who feel less interested are 13 (13.1%). From the results of the chi square test, a significance value of 0.000 <0.05 was obtained, which means that there is an influence of the quality of health services based on the responsiveness indicator on the interest of patients returning to RSU Royal Prima Medan. The quality of health services based on assurance indicators on the interest of patients returning to Royal Prima Medan Hospital, shows that if the quality of health services based on assurance indicators at Royal Prima Medan Hospital is good, then patients who are interested in returning to Royal Prima Medan Hospital are 63 (63.6%) and patients who feel less interested are 12 (12.1%), if the quality of health services based on assurance indicators at Royal Prima Medan Hospital is not good, then patients who are interested in returning to Royal Prima Medan Hospital are 10 (10.1%) and patients who feel less interested are 14 (14.1%). From the results of the chi square test, a significance value of 0.001 <0.05 was obtained, which means that there is an influence of the quality of health services based on assurance indicators on the interest of patients returning to Royal Prima Medan Hospital. The quality of health services based on empathy indicators towards patient interest in returning to Royal Prima Medan Hospital, shows that if the quality of health services based on empathy indicators at Royal Prima Medan Hospital is good, then patients who are interested in returning to Royal Prima Medan Hospital are 61 (61.6%) and patients who feel less interested are 10 (10.1%), if the quality of health services based on empathy indicators at Royal Prima Medan Hospital is not good, then patients who are interested in returning to Royal Prima Medan Hospital are 12 (12.1%) and patients who feel less interested are 16 (16.2%). From the results of the chi square test, a significance value of 0.000 <0.05 was obtained, which means that there is an influence of the quality of health services based on empathy indicators on patient interest in returning to Royal Prima Medan Hospital. Based on the indicator variables of the quality of health services that have the most influence on patient satisfaction at RSU Royal Prima Medan is tangible (X1), where the highest odds ratio value is found in the tangible variable (X1), which is 4.523.*Reliability* (X2) 3.102, Responsiveness (X3) 0.434, Assurance (X4) 1.312, Empathy (X5) 1.243,From these results, it can be concluded that the independent variable that is most related to the dependent variable in this study is the tangible variable (X1). Based on the indicator variables of the quality of health services that have the most influence on the interest of

patients to return to RSU Royal Prima Medan is tangible (X1), where the highest odds ratio value is found in the tangible variable (X1), which is 3.184, tangible (X1) which is ,*Reliability*(X2) 0.334, Responsiveness (X3) 0.220, Assurance (X4) 0.008, Empathy (X5) 0.898, From these results, it can be concluded that the independent variable that is most related to the dependent variable in this study is the tangible variable (X1).

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