ANALYSIS OF PATIENT SATISFACTION LEVELS AT INPATIENT INSTALLATIONS AT BHAYANGKARA HOSPITAL KUPANG

Melissa Putri M. Napitupulu^{*a**)}, Serlie K. A. Littik^{*a*)}, Idawati Trisno^{*a*)}, Anderias Umbu Roga^{*a*)}, Muntasir^{*a*)}

^{a)} Universitas Nusa Cendana, Kupang, Indonesia

^{*)}Corresponding Author: melissaputri1994@yahoo.com

Article history: received 31 November 2023; revised 02 December 2023; accepted 04 January 2024

DOI:https://doi.org/10.33751/jhss.v8i1.9473

Abstract. Patients will feel satisfied if expectations equal or exceed the reality of hospital services. Reports of patient complaints at the inpatient installation at Bhayangkara Kupang Hospital show low patient satisfaction. This study aimed to determine patient satisfaction in terms of the five dimensions of quality. This research is a quantitative study with a cross-sectional design in which proportional sampling (PPS) uses accidental sampling techniques. A total of 62 patients were interviewed using a questionnaire. Data analysis used the importance-performance analysis (IPA) method. The results showed satisfactory service at the inpatient installation at Bhayangkara Kupang Hospital. The average performance level (x) of 4.07 is above the average score of the expectation level (y) of 2.73. Of the five dimensions assessed, the patient only felt dissatisfied with the physical evidence dimension. For this reason, the inpatient installation at Bhayangkara Kupang Hospital requires improvement in the cleanliness of bathrooms and inpatient rooms, the comfort of the waiting room, waiting time for inpatients, the time to visit patients, and the provision of suggestion boxes.

Keywords: patient satisfaction; hospital inpatient instalation; IPA; cartesian diagram

I. INTRODUCTION

A hospital is an institution that provides services in the field of health service products. Law No. 44 of 2009 concerning hospitals, states that the hospital is a health service institution that provides complete individual health services, which provides inpatient, outpatient and emergency services [1] [2]. The good and bad of a hospital is determined by the quality of quality health services and hospital service users / patients will feel satisfied if the hospital can provide good quality services [3]. Parasuraman et al. stated that there are five main dimensions of service quality, consisting of: Tangible (physical evidence), Reliability (reliability), Responsiveness (responsiveness), Assurance (assurance) and Empathy (empathy) to measure service quality in general [4]. Every service provided by the hospital affects the level of patient satisfaction [5]. If the service provided is considered unsatisfactory by the patient, then there is a possibility that the patient will look for other hospitals that are considered better [6] [7].

Bhayangkara Kupang Hospital is a type C hospital located in Kupang city, East Nusa Tenggara Province, which provides health services to the general public and members of the POLRI (National Police of the Republic of Indonesia) for emergency, outpatient or inpatient services. In addition, if there is a patient who is a prisoner who will seek outpatient or inpatient treatment, it can be referred to Bhayangkara Hospital Kupang because it has an inpatient room for separate prisoners. In carrying out the implementation of health services by Bhayangkara Hospital Kupang to the general public and members of the National Police, it is expected to provide the best, plenary and quality service, but in its implementation there are several complaints arising from inpatient participants of Bhayangkara Hospital Kupang, such as the condition of the inpatient room that is not comfortable, bathroom conditions, punctuality and speed of health services to patients, and so on.

This study, using the IPA (importance performance analysis) method to determine the level of performance and expectations desired by patients based on aspects or attributes assessed, as well as to determine the level of inpatient satisfaction based on five dimensions of service quality, by looking at the problems that exist in hospitalization at Bhayangkara Kupang Hospital, to determine strategies in improving health services to Ranap installation patients in hospitals Bhayangkara Kupang.

II. RESEARCH METHODS

The study is a quantitative research with a crosssectional design to determine patient satisfaction using 5 (five) main dimensions of quality in service services at the inpatient installation of Bhayangkara Hospital Kupang. This measurement is associated with the patient's level of expectation of each dimension in the inpatient service he receives. Data collection through the questionnaire method to obtain patient perceptions of inpatient services seen from 5 (five) dimensions. The assessment criterion used is the Likert scale. The score will be calculated based on the answers submitted from each question. Total score is the score obtained after summing all scores obtained from all the scores of the questions asked. Primary data were obtained by conducting interviews with questionnaire guides. The data



collected includes the level of patient satisfaction and expectations, on the determining dimension of the level of patient satisfaction of inpatient installations at Bhayangkara Hospital Kupang in 2022. The secondary data used are statistical data on the number of inpatients at Bhayangkara Hospital Kupang in 2019-August 2022 obtained by the Hospital and case data on complaints of patients at the inpatient installation of Bhayangkara Hospital Kupang in 2022.

The determined population is all patients who have been treated in inpatient installations from January to August 2022 at Bhayangkara General Hospital Kupang as many as 3099 people. The study sample was determined partly from the determined population, namely inpatients at a certain period of time at the Ranap installation of Bhayangkara Hospital Kupang proportionally to size sampling to determine the size of the sample, where the number of samples taken was proportional to the number of samples in the population, in this case the number of patients in each classroom in the hospital with a total sample of 62 patients, Through accidental sampling techniques. Analysis of inpatient satisfaction at the inpatient installation of Bhayangkara Hospital Kupang was carried out through an assessment of expectations and performance scores based on respondents' answers. Research on questionnaire data, then through the science analysis method which is a quantitative descriptive method to analyze research data and answer the formulation of problems about the extent to which the level of satisfaction in terms of this research is patients on the performance of a health service.

III.RESULT AND DISCUSSION

The respondents in this study were inpatients at Bhayangkara Hospital Kupang with a total of 62 respondents with the characteristics of the treatment class consisting of the most respondents from treatment class 2 as many as 21 (twenty one) respondents or 33.87%, treatment class 1 as many as 18 (eighteen) respondents or 29.03%, class 3 as many as 17 (seventeen) respondents or 27.42%, VIP treatment class as many as 4 (four) respondents or 6.45% and at least respondents in VVIP treatment class are 2 (two) respondents or 3.23%. A total of 25 (twenty-five) question items in the questionnaire representing the attributes of the level of patient satisfaction at the level of expectation and level of performance were distributed to respondents, where the attributes asked have been tested for validity and reliability with the results of all valid and reliable questions. Based on respondents' answers to questionnaires, patient satisfaction levels were calculated. The level of patient satisfaction in each attribute and dimension is calculated based on the average score of each respondent's answer through a Likert scale with the value of each answer between 1 -5. Patient satisfaction assessment scores on performance levels and expectation levels can be seen in the score recapitulation in table 1 below.

Table 1. Recapitulation of Patient Satisfaction Attribute Scores

No	Attributes / Questions	Perfor	Hope		
		mance			
		x	у		
	ical Evidence	1.2.5	2.50		
1	Neat doctor/nurse appearance	4.26	2.58		
2	The condition of the bathroom in the inpetient room is clean and filled with water	3.68	3.47		
3	inpatient room is clean and filled with water Clean inpatient room room condition	3.92	3.06		
4	Comfort of inpatient waiting place	3.60	3.27		
5	Completeness of medical equipment in	4.06	2.98		
5	hospitals	4.00	2.90		
	Average	3.90	3.07		
Relia	bility				
6	Punctuality of doctors in examining and	4.08	2.98		
	providing services to patients				
7	Regularity of nurses in conducting vital signs	4.65	2.97		
	checks				
	patient (tension, temperature, breathing,				
0	pulse, oxygen saturation)	4.40	0.5.5		
8	Ease of administration procedures for	4.42	2.56		
9	admission of inpatients Ease of administration procedures for	4.19	2.45		
"	Ease of administration procedures for admission of inpatients	4.19	2.43		
10	The patient does not wait long to enter the	3.81	2.77		
10	inpatient room	5.01	2.11		
	Average	4.23	2.75		
Resp	onsiveness				
11	Respond quickly to doctors / nurses in	4.24	2.77		
	serving patients				
12	Laboratory personnel are quick and	4.34	2.85		
	responsive in blood draw time				
13	Administration personnel are ready to assist	4.27	2.76		
	patients at any time				
14	Dispensary staff who are fast and responsive	3.84	2.42		
	in preparing medicines needed by patients				
15	when they go home Timeliness of feeding by hospital nutrition	4.47	2.61		
15	staff	4.47	2.01		
	Average	4.23	2.68		
Guai	antee	0			
16	Friendliness and courtesy of administrative	4.34	2.73		
	officers and cashiers				
17	Courtesy of doctors / nurses in serving	4.52	2.32		
	patients				
18	The nurse's ability to communicate with	4.24	2.42		
	patients				
19	Patient confidence in the ability of doctors /	4.44	2.39		
	nurses in providing health services				
20	The efficacy of drugs administered by the	4.18	2.63		
	doctor	1 24	2 50		
F	Average	4.34	2.50		
Emp 21		4.37	2.48		
41	Administrative personnel treat every patient regardless of social status	4.37	2.40		
22	Doctors/nurses treat every patient regardless	4.55	2.50		
الله الله	of social status	т.55	2.50		
23	The security guard pays attention to the	3.32	2.56		
-	patient's visiting hours, so that other patients				
	are not disturbed				
24	The doctor/nurse understands the specific	3.21	2.40		
	needs of the patient				
25	There is a suggestion box or online form to	2.79	3.26		
	submit complaints felt during hospitalization				
	Average	3.65	2.64		
	Average Patient Satisfaction	4.07	2.73		

OPENOACCESS

Table 1 shows the satisfaction level and performance scores for each dimension, where the average performance level (\bar{x}) is 4.07 and the average expectation score (\bar{y}) is 2.73. These average values are used to determine the origin point (0,0) on the Cartesian coordinate diagram. In the physical evidence dimension, the average score (-x) is 3.90, and the expectation score (-y) is 3.07, placing it in quadrant A, indicating a top priority for improvement by RS Bhayangkara Kupang's inpatient facility. In the reliability dimension, with an average score (x) of 4.23 and an expectation score (-y) of 2.75, the point lies above the origin and falls into quadrant B, signifying satisfactory quality maintenance. For the responsiveness dimension, the average score (^{-}x) is 4.23, and the expectation score (^{-}y) is 2.68, while for the assurance dimension, the average score (x) is 4.34, and the expectation score (⁻y) is 2.50. Both dimensions are placed in quadrant C, indicating lower priority areas. Lastly, in the empathy dimension, with an average score (-x) of 3.65 and an expectation score (⁻y) of 2.64, it falls into quadrant D, signifying that it is less important to patients, but RS Bhayangkara Kupang's implementation of this dimension may be excessive. The average score for each attribute is then plotted into a cartesian chart that represents the performance level value as the X axis (horizontal) and the expectation level value as the Y axis (vertical). The IPA method uses 4 (four) quadrants used in calculating the level of patient satisfaction in inpatient installations. The division of quadrants into four quadrants was carried out to find out which services are the main concerns that must be considered and improved which are the focus of this study. The determination of x and y points is based on the average score as in table 1 above, namely x as the level of performance and y as the level of expectation. The plotting results obtained a cartesian diagram as shown in figure 1 below.

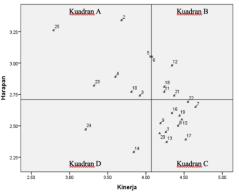


Figure 1. Cartesian Diagram of Inpatient Satisfaction

The variables determining patient satisfaction are 25 attributes according to the number of questions plotted into four quadrants in the cartesian diagram as shown in figure 1 above. The cartesian diagram showing the locations in the quadrant is shown in table 2 below.

No.	Ord er	Attributes / Questions	Quadra nt	Dimension
1	2	The condition of the bathroom in the	А	Physical
		inpatient room is clean and filled with water	•	Evidence
2	3	Clean inpatient room room condition	А	Physical
2	4		•	Evidence
3	4	Comfort of inpatient waiting place	А	Physical Evidence
4	5	Completeness of medical equipment in	А	Physical
		hospitals		Evidence
5	10	The patient does not wait long to enter the inpatient room	А	Reliability
6	23	The security guard pays attention to the patient's visiting hours, so that other patients are not disturbed	A	Empathy
7	25	There is a suggestion box or online form to submit complaints felt during hospitalization	Α	Empathy
8	6	Punctuality of doctors in examining and providing services to patients	В	Reliability
9	11	Respond quickly to doctors / nurses in serving patient	В	Responsivene ss
10	12	Laboratory personnel are quick and responsive in blood draw time	В	Responsivene ss
11	18	The nurse's ability to communicate with patients	В	Guarantee
12	21	Administrative personnel treat every patient regardless of social status	В	Empathy
13	1	Neat doctor/nurse appearance	С	Physical Evidence
14	7	The regularity of nurses in checking the patient's vital signs (tension, temperature, breathing, pulse, oxygen saturation)	С	Reliability
15	8	Ease of administration procedures for admission of inpatients	С	Reliability
16	9	The patient understands the doctor's explanation of the action to be taken	С	Reliability
17		Administration personnel are ready to assist patients at any time	C	Responsivene ss
18		Timeliness of feeding by hospital nutrition staff	C	Responsivene ss
19		Friendliness and courtesy of administrative officers and cashiers	C	Guarantee
20		Courtesy of doctors / nurses in serving patients	C	Guarantee
21	19	Patient confidence in the ability of doctors / nurses in providing health services	С	Guarantee
22	20	The efficacy of drugs administered by the doctor	С	Guarantee
23	22	Doctors/nurses treat every patient regardless of social status	s C	Empathy
24	14	Dispensary staff who are fast and responsive in preparing medicines needed by patients when they go home	D	Responsivene ss
25	24	The doctor/nurse understands the specific needs of the patient	D	Empathy

Table 2 above shows the attributes that must be immediately corrected (Quadrant A), retained (Quadrant B), subtracted (Quadrant C), considered or reduced because they

OPEN

are considered excessive (Quadrant D). The division of variables in the cartesian diagram above can be seen in table 1 below.

- 1. The attributes in questions 2, 3, 4, 5, 10, 23, and 25 are in quadrant A indicating that the existing factors of these attributes need to be improved and affect patient satisfaction in the inpatient installation, but Bhayangkara Hospital Kupang has not carried out as expected by patients, so patients feel dissatisfied;
- 2. The attributes in questions 6, 11, 12, 18, and 21 located in quadrant B indicate that these factors or attributes have been successfully implemented by the inpatient installation of Bhayangkara Hospital Kupang and must be maintained. Factors or attributes are important factors but are felt satisfied by the patient;
- 3. The attributes in questions 1, 7, 8, 9, 13, 15, 16, 17, 19, 20, and 22 in quadrant C indicate that these factors or attributes are considered less important in their influence on patients, and also their implementation by the inpatient installation of Bhayangkara Hospital is less important for improvement and so that unsatisfactory perception is considered not a problem;
- 4. The attributes in questions 14 and 24 in quadrant D indicate that these factors or attributes are considered less important for patients, but in their implementation in the inpatient installation of Bhayangkara Hospital Kupang is excessive. These factors or attributes are considered less needed, but patients feel very satisfied.

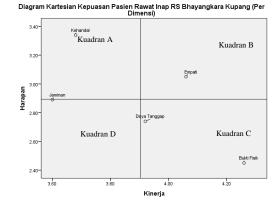
[8] Tangible, Reliability, Responsiveness, Assurance and Empathy in accordance with [9]. The satisfaction assessment score obtained in addition to being calculated based on the score of each attribute also needs to be further carried out for five dimensions of service / service quality. This is done to see which dimensions patients feel most dissatisfied with and what the level of expectation on those dimensions is. The results of calculating the scores on each dimension are shown in Table 3 below.[4]

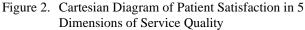
 Table 3
 Recapitulation of Patient Satisfaction Dimension

 Scores
 Scores

1) Dimension	2) Performance (x)	3) Hope (y)	
Physical Evidence	5) 3.90	6) 3.07	
7) Reliability	8) 4.23	9) 2.75	
10) Responsiveness	11) 4.23	12) 2.68	
13) Guarantee	14) 4.34	15) 2.50	
16) Empathy	17) 3.65	18) 2.64	

The score values for each dimension are then plotted into a cartesian diagram that represents the performance level value as the X axis (horizontal) and the expectation level value as the Y axis (vertical). The quadrant division is the same as in the cartesian diargam divided into four used to find out which services are the main concerns that must be considered and improved. The cartesian diagram for dimensions is shown as shown in figure 2 below.





Based on the location of the dimensions in each quadrant in the cartesian diagram as in figure 2 above, it can be explained as follows:

- 1. The empathy dimension located in quadrant A indicates that the empathy dimension needs improvement because it affects patient satisfaction in the inpatient installation. Bhayangkara Hospital Kupang has not implemented the empathy dimension as expected by patients, so patients feel dissatisfied.
- 2. The reliability dimension located in quadrant B indicates that the factor or attribute has been successfully implemented by the inpatient installation of Bhayangkara Hospital Kupang and must be maintained. The reliability dimension of hospital services is important and satisfied by patients;
- 3. The assurance dimension shows that these factors or attributes are considered less important in their influence on patients, and also their implementation by the inpatient installation of Bhayangkara Hospital is less important for improvement. Unsatisfactory perception of the assurance dimension is not considered a problem;

The dimensions of responsiveness and physical evidence in quadrant D show that these two dimensions are dimesi that the patient feels satisfied with, but this dimension is a dimension that is not important to the patient. This dimension is considered to have been overdone.

Research to see the level of patient satisfaction is seen from 5 (five) dimensions of service quality quality, namely Tangible (physical evidence), Reliability (reliability), Responsiveness (responsiveness), Assurance (assurance) and Empathy (empathy) and attributes of patient satisfaction as a description of each dimension determining satisfaction. The results showed that the average score of the performance level was higher than the expectation level score. Patients feel that the level of inpatient services at Bhayangkara Hospital Kupang is above the level of patient expectations. When viewed based on dimensions, the average satisfaction score of performance level (x) on all attributes in the overall dimension of 4.07 is above the average score of expectation level (y) of 2.73. It can be interpreted in general that patients are satisfied with the services at the inpatient installation of Bhayangkara Hospital Kupang. The results of this study are

OPEN

in line with the theory that states that the quality of service to the community is highly dependent on individual actors and the system used [10], [11] [12].

A significant difference between the average satisfaction score of the performance level and the average satisfaction score of the expectation level indicates that the patient's satisfaction has caused the patient will not expect more or demand improvement. When consumers are satisfied, consumers will use the same goods or services, and when consumers are dissatisfied, consumers will demand improvements or complaints against the company [13]. However, when viewed at each attribute in the physical evidence dimension, it is expressed as the dimension with the lowest average performance score (x) of 3.09 compared to the average score of other performance dimension attributes and with the highest average expectation (y) score of 3.07 compared to the average expectation attribute on the dimension. This suggests that patients will tend to demand improvements that are perceived as dissatisfied.

Increasing patient satisfaction if you want to improve again must look into each attribute in the determining dimensions of patient satisfaction. Every service provided by the hospital affects the level of patient satisfaction [5]. In terms of dimensions, inpatients at Bhayangkara Hospital Kupang have been satisfied with the reliability dimension, namely when viewed from the attributes, attributes of the speed of response of doctors / nurses in serving patients, attributes of speed and responsiveness of laboratory officers, and attributes of the ability of nurses to communicate with patients, and attributes of the attitude of administrative officers to treat each patient regardless of social status have succeeded in taking a role in patient satisfaction. Satisfaction on this dimension can still be increased even though it has been above the level of patient expectations. Reliability is the ability to provide promised service promptly, accurately and satisfactorily [14], [15]. In line with Mustika and Sari's research using bivariate analysis, it was found that the reliability dimension had a significant effect on patient satisfaction [16], [17], [18].

The need for increased patient satisfaction at Bhayangkara Hospital Kupang must be carried out on both dimensions and attributes that have a high level of expectation with low satisfaction. The patient is said to be satisfied if he feels happy, satisfied because between expectations and reality in using and the services provided are fulfilled, or even the services provided exceed his expectations [19]. When viewed in each attribute of the most dissatisfied patient in the variable, the security guard pays attention to the patient's visiting hours, so that other patients are not disturbed and need a suggestion box or online form to submit complaints felt during hospitalization. This is clearly identified in order to later determine corrective steps to eliminate the dissatisfaction [20]. Based on the results of the study, the empathy dimension located in quadrant A shows that in this dimension patients feel unsatisfied and to increase patient satisfaction so that improvements need to be made. In line with Soedargo's research which shows that the emphaty dimension (Empathy) with a score of 4.13 or is a very

important dimension for hospital officials because it will make patients feel comfortable in undergoing the treatment process so that it can help speed up the healing process.

IV.CONCLUSION

Patient satisfaction at Hazardngkara Hospital Kupang is seen from five dimensions of service quality Tangible evidence), Reliability, Responsiveness (physical (responsiveness), Assurance (assurance) and Empathy (empathy) as a whole that patients have felt satisfied as shown from the performance level score above the expectation level score. For each dimension, the Reliability dimension of Bhayangkara Hospital Kupang has succeeded in achieving patient satisfaction and must be maintained. Bhayangkara Hospital Kupang has not implemented the empathy dimension as expected by patients, so patients feel dissatisfied so that improvements need to be made because it affects patient satisfaction in inpatient installations. The improvement of Bhayangkara Hospital services, especially for inpatients, must be focused on dimensions that have not been satisfied by patients. Improving the physical condition of the inpatient installation at Bhayangkara Hospital Kupang for the better, such as the cleanliness of inpatient rooms and bathrooms with water that is always available, medical equipment that needs to be improved, as well as the comfort of patient waiting places, increasing reliability in terms of patients not waiting long to be able to enter the inpatient room and increasing empathy including security guards who pay attention to the patient's visiting hours so that other patients are not disturbed and also Provision of suggestion boxes or online forms to submit complaints felt during hospitalization. Improvements must be delivered consistently, both from the highest to the lowest ranks. Improvement should start from attributes that are considered unsatisfactory to the patient but have a high level of expectation to attributes with low expectations. In addition, Bhayangkara Hospital Kupang is currently in the process of hospital accreditation and also rebuilding the hospital to become a type B or A hospital so that increasing patient satisfaction can be an effort that can be done by the hospital to improve its services and existence in providing patient needs.

REFERENCES

- [1] D. Marcozzi, B. Carr, A. Liferidge, N. Baehr, and B. Browne, "Trends in the contribution of emergency departments to the provision of hospital-associated health care in the USA," *International Journal of Health Services*, vol. 48, no. 2, pp. 267–288, 2018.
- [2] W. Vivid Izziyana, A. Yuli Rimbawan, M. Eri Safira, A. Budiono, and D. Iriani, "Legal Protection for Hospitals in Providing Health Services for Patients and Their Family," 2020.
- [3] A. Shabbir, S. A. Malik, and S. A. Malik, "Measuring patients' healthcare service quality perceptions, satisfaction, and loyalty in public and private sector



hospitals in Pakistan," International Journal of Quality & Reliability Management, vol. 33, no. 5, 2016.

- [4] J. Dawson, A. Findlay, and L. Sparks, *The Retailing Reader*, 1st ed. Milton Park, Abingdon, Oxon, England: Routledge, 2008.
- [5] R. Purwaningrum, "Analisis Mutu Pelayanan Terhadap Kepuasan Pasien di Rumah Sakit Pertamina Bintang Amin Bandar Lampung Tahun 2018," *Jurnal Ilmu Kedokteran dan Kesehatan*, vol. 07, no. 01, pp. 357– 367, Jan. 2020.
- [6] W. Zhang, Z. Deng, Z. Hong, R. Evans, J. Ma, and H. Zhang, "Unhappy patients are not alike: content analysis of the negative comments from China's good doctor website," *J Med Internet Res*, vol. 20, no. 1, p. e35, 2018.
- [7] Nurhasma, A. S. Rijal, and R. Azis, "Hubungan Dimensi Kualitas Pelayanan Dengan Kepuasan Pasien Rawat Inap Pada RSUP DR. Tadjuddin Chalid Makassar," *Jurnal Kesehatan Masyarakat*, vol. 07, no. 02, pp. 90–100, Nov. 2021.
- [8] O. Prentkovskis, Ž. Erceg, Ž. Stević, I. Tanackov, M. Vasiljević, and M. Gavranović, "A new methodology for improving service quality measurement: Delphi-FUCOM-SERVQUAL model," *Symmetry (Basel)*, vol. 10, no. 12, p. 757, 2018.
- [9] I. Fatima, A. Humayun, U. Iqbal, and M. Shafiq, "Dimensions of service quality in healthcare: a systematic review of literature," *International Journal* for Quality in Health Care, vol. 31, no. 1, pp. 11–29, 2019.
- [10] M. Mujiarto, D. Susanto, and R. Y. Bramantyo, "Strategi Pelayanan Kesehatan Untuk Kepuasan Pasien Di UPT Puskesmas Pandean Kecamatan Dongko Kabupaten Trenggalek," Jurnal Mediasosian: Jurnal Ilmu Sosial Dan Administrasi Negara, vol. 3, no. 1, 2019.
- [11] N. Suparman, "Kualitas pelayanan izin mendirikan bangunan (IMB) pada badan pelayanan perizinan terpadu dan penanaman modal (BPPTPM) kabupaten

cianjur provinsi jawa barat," *Jurnal Borneo Administrator*, vol. 13, no. 1, pp. 41–56, 2017.

- [12] S. Mukhtar, "Pengaruh Kualitas Pelayanan Terhadap Kepuasan Pasien Rawat Inap Pada Puskesmas Maiwa Kabupaten Enrekang," *Decision: Jurnal Ekonomi dan Bisnis*, vol. 01, pp. 91–102, Nov. 2020.
- [13] W. L. Wilkie, *Consumer Behavior*, vol. 04. New York: Wiley Publisher, 1994.
- [14] F. Tjiptono, Service Management, Mewujudkan Layanan Prima, 1st ed., vol. 1. Yogyakarta: ANDI Yogyakarta, 2022.
- [15] T. Nefianto, "The Role of One's Education and Training on the Quality of Public Services," *Journal Research of Social, Science, Economics, and Management*, vol. 1, no. 8, pp. 1151–1159, 2022.
- [16] D. Mustika and K. Sari, "Kepuasan Pasien Terhadap Pelayanan Rawat Inap RSUD Jagakarsa Tahun 2017/2018," ARSI, vol. 5, no. 3, pp. 147–152, Jun. 2019.
- [17] N. Yuniar and A. Tawai, "The relationship of the quality of health services emphaty dimension with patient satisfaction in the health services of the Lepo-Lepo health center, Kendari city, Indonesia," World Journal of Biology Pharmacy and Health Sciences, vol. 11, no. 3, pp. 132–138, 2022.
- [18] D. Fitria, C. S. Salmira, and A. Sulisna, "Relationship Of Insurance And Hospital Empathy With Satisfaction Of Return Interest In Outcoming Patients At Sundari Hospital," *International Archives of Medical Sciences* and Public Health, vol. 3, no. 1, pp. 109–115, 2022.
- R. R. S. Baan, "Analisis Pengaruh Kualitas Pelayanan Terhadap Kepuasan Pasien Rawat Inap Pada RS. Bahagia Makassar," *Jurnal Ekonomi, Keuangan dan Bisnis*, vol. 05, no. 01, pp. 45–52, Jun. 2020.
- [20] I. N. Laksono, "Analisis Kepuasan dan Hubungannya dengan Loyalitas Pasien Rawat di Rumah Sakit Dedi Jaya Kabupaten Brebes," Universitas Diponegoro, Semarang, 2008.

OPEN