

The Relationship between the Dimensions of Quality of Health Services with Inpatient Patient Satisfaction at Mother and Child Hospital X Semarang City

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Track Record Article

Accepted: 24 March 2024 Revised: 26 January 2024 Published: 26 March 2024

How to cite:

Utomo, A. Y. S., Widjanarko, B., & Shaluhiyah, Z. (2024). The Relationship between the Dimensions of Quality of Health Services with Inpatient Patient Satisfaction at Mother and Child Hospital X Semarang City. Contagion: Scientific Periodical of Public Health and Coastal Health, 6(1), 491–503.

Abstract

Patient satisfaction greatly depends on the quality of hospital services since it can guarantee that patients receive efficient, secure, and uniform care. This study's goal was to ascertain how the mother and child hospital X in Semarang City's inpatient patient satisfaction levels relate to various aspects of health care quality. This study uses a cross-sectional research design, a quantitative technique, and analytical analysis. There were 61 inpatients in this study's group. Total sampling was the method employed for sampling in this investigation. There were 61 patients in the study's sample. The four aspects of service quality availability, responsiveness, convenience, and timeliness are the independent variables in this study, and patient satisfaction is the dependent variable. Data collection using questionnaires. Bivariate data analysis was performed using the Chi-square test which was analyzed using the help of SPSS software version 26. There is no relationship between the availability dimension and patient satisfaction (p-value=0.000), there is no relationship between the responsiveness dimension and patient satisfaction (p-value=0.000), there is no relationship between the convenience dimension and patient satisfaction (p-value=0.008) and there is no relationship between the timeliness dimension (p-value=0.016) at the mother and child hospital X Semarang City. The dominant variable that affects patient satisfaction is the perception of the availability dimension (p-value=0.000; OR=20.789; 95% CI =4.083-107.031). It is hoped that hospital management in its services is expected by doctors to be able to provide a sense of empathy to respond to complaints from patients, and doctors can inform the officers on duty regarding visite hours so that patients feel better served. And the midwife or nurse should make a small information board containing information related to the schedule of the officers' work hours.

Keywords: Dimensions, Quality of service, Patient satisfaction, Hospital

INTRODUCTION

In order to maintain and improve public health status, health services are a set of activities provided by the community or government that are integrated, integrated, and sustainable. These activities include illness prevention, health improvement, disease treatment, and health recovery (Law of the Republic of Indonesia, 2014).

One of the health services organized by both the government and the private sector is health in hospitals (Lestari, 2019). Hospital is one of the facilities that organizes comprehensive individual health services and provides health services in the form of outpatient, inpatient and emergency services (Ministry of Health Republic of Indonesia, 2009).

One way to maintain and improve the degree of public health, hospitals must be able to meet the needs required by patients, besides that, hospitals must be able to provide the best health services for patients so that they can help the government in running health programs, and provide satisfaction for patients (Suryawati, 2004). Patient satisfaction is related to the quality of health services, therefore the better the quality of health services provided by the hospital, the patient will feel satisfied, and vice versa (Matondang et al., 2019).

Patient satisfaction is a response of patient service users that arises after getting service and comparing the results of services obtained from service users (Rombon et al., 2021). Apart from being influenced by the services provided, patient satisfaction can also be determined according to one's experience and mindset, which is quite difficult to change (Ginting et al., 2021). The level of satisfaction from service quality depends on community expectations. The level of satisfaction that has been determined through the Minister of Health Decree on Minimum Hospital Service Standards is at least 80% (Ministry of Health Republic of Indonesia, 2008).

In the last three years the hospital bed occupancy rate has decreased, as follows, in 2020 the bed occupancy rate data was 32%, in 2021 it was 25.8%, and in the first 6 months of 2022 it was 19.44%. According to Ministry of Health of the Republic of Indonesia in 2009 that the national standard value or the ideal number achieved by the hospital is said to be good and efficient if the bed occupancy rate is at 60-80% (Ministry of Health Republic of Indonesia, 2009). If you look at these results, there is a decrease in the bed occupancy rate value every year, it is possible because the services provided by the X Semarang City Mother and Child Hospital have not met patient expectations and the level of patient satisfaction with hospital services is still lacking. The value of length of stay days decreased to 4 days in 2020, 3 days in 2021 and 2 days in 2022. For the indicator of turn over interval days in 2020 14 days, 2021 16 days, and 2022 19 days.

Based on the profile data of mother and child hospital X Semarang City in 2022 that, the number of inpatients at X mother and child hospital showed a significant decrease in obstetric and gynecological cases, namely 723 inpatients in 2020, in 2021 decreased to 680 inpatients, and in 2022 from January to May to 193 inpatients. (Profil rumah sakit ibu dan anak X Kota Semarang, 2022).

The decline in the number of patients at X mother and child hospital can be caused by a lot of competition between hospitals regarding the quality of service that is sufficient to provide satisfaction for patients. The complaints experienced by patients related to services at the X mother and child hospital are such as the level of attendance and responsiveness of officers in taking unsatisfactory actions, the absence of officer readiness at the registration site, the process of registering patients or maternity mothers is still manual, the service of officers

who are less responsive or less quick to serve, the patient's bed is less comfortable, the treatment room is too narrow. The existence of this phenomenon can illustrate that there is potential for dissatisfaction with patients.

With the decrease in the number of visits, it is necessary to evaluate the quality of services related to human resources, facilities and infrastructure, and the level of patient satisfaction. Related to this, hospital management itself has made many efforts in maintaining the quality of service quality such as holding webinars, making advertisements in both electronic and non-electronic media, conducting training and simulations of excellent service for medical and non-medical staff, completing facilities and infrastructure, carrying out routine maintenance of its equipment and standardizing according to accreditation assessment guidelines.

The fundamentals of health service organisation should serve as the guidance for overcoming the various aspects of the problem. Meeting the wants and demands of health service consumers is fundamental, and if done well, it will result in a feeling of satisfaction with the way in which health services are provided (Ndruru et al., 2019).

Based on the theory and previous findings, the researcher is interested in raising the research title of "Relationship between Dimensions of Quality of Health Services with Inpatient Patient Satisfaction at Mother and Child Hospital X Semarang City". The purpose of this study was to analyze the relationship between the dimensions of health service quality and inpatient patient satisfaction at the mother and child hospital X Semarang City.

METHODS

This research is an analytic observational with a quantitative approach with a cross sectional research design, where in this study measuring both variables simultaneously (Sugiyono, 2018). The research was conducted at the mother and child hospital X Semarang City which was carried out in June to August 2022.

The population of this study were all 61 inpatients. Total sampling is a technique for selecting samples in which the researcher selects samples based on particular features that align with the goals of the study and are anticipated to address the research question. There were 61 patients in the study's sample.

Data collection in this study using a questionnaire. The questionnaire has been tested and the reliability test of all questionnaire items is declared valid, this can be shown in the pearson correlation value (r-count) greater than 0.361. And obtained the Cronchbahc's Alpha

value of a questionnaire used is greater than 0.60, this indicates that the questionnaire used can be said to be reliable or reliable.

In this study, data collection was carried out which included primary data and secondary data. The primary data source obtained in this study is by using a structured questionnaire which contains several closed questions that have been prepared by the researcher and then distributed to patients to get the results of the questionnaire questions. Secondary data was obtained from the mother and child hospital X Semarang City in the form of general data which includes hospital profiles and inpatient reports.

The independent variables in this study are the four dimensions of service quality consisting of availability, responsiveness, convenience and timeliness, while the dependent variable is patient satisfaction. The data processing of this study was processed and analyzed using statistical analysis in the form of bivariate data analysis carried out by the Chi-square test. Data were processed and analyzed using SPSS 26 and presented in tabulated form. This study has received Ethical Clearance approval from the ethics commission of the faculty of public health, Diponegoro University with number 369/EA/KEPK-FKM/2022.

RESULTS

Table 1. Characteristics of Respondents

| Characteristics | Frequency | % | | |
|--------------------------------|-----------|-------|--|--|
| Age | | | | |
| Late adolescence (17-25 years) | 11 | 18.0 | | |
| Early adulthood (26-35 years) | 37 | 60.7 | | |
| Late adults (36-45 years) | 10 | 16.4 | | |
| Early elderly (46-55 years) | 3 | 4.9 | | |
| Education level | | | | |
| Senior high school | 23 | 37.7 | | |
| Bachelor's degree | 38 | 62.8 | | |
| Work | | | | |
| Housewife | 18 | 29.5 | | |
| Private employee | 32 | 52.5 | | |
| Government employee | 11 | 18.0 | | |
| Treatment Class | | | | |
| Class III | 20 | 32.8 | | |
| Class II | 11 | 18.0 | | |
| Class I | 23 | 37.7 | | |
| VVIP | 7 | 11.5 | | |
| Total | 61 | 100.0 | | |

Table 1. shows that the respondents in this study were 61 inpatients at the mother and child hospital X Semarang City. The characteristics of the respondents can be observed in table 4.3. More than half of the respondents (60.7%) were in the early adult age group (26-35 years). The majority of respondents were college graduates (62.8%) and worked as private employees (52.5%). Most respondents were in Class III (32.8%) and Class I (37.7%) treatment classes.

Table 2. Distribution and Frequency of Health Service Quality Dimensions with Inpatient Patient Satisfaction at Mother and Child Hospital X Semarang City

| Dimensions | Frequency | % | | |
|----------------------|-----------|------|--|--|
| Availability | - | | | |
| Not Good | 31 | 50.8 | | |
| Good | 30 | 49.2 | | |
| Responsiveness | | | | |
| Less Responsive | 31 | 50.8 | | |
| Responsive | 30 | 49.2 | | |
| Convenience | | | | |
| Less Convenience | 33 | 54.1 | | |
| Convenience | 28 | 45.9 | | |
| Timely | | | | |
| Not timely enough | 36 | 59.0 | | |
| Timely | 25 | 41.0 | | |
| Patient satisfaction | | | | |
| No Satisfaction | 32 | 52.5 | | |
| Satisfaction | 29 | 47.5 | | |

Table 2. shows the respondents' assessment of the quality of health services at Mother and Child Hospital X Semarang City based on the availability dimension with a poor percentage value of 50.8%, the responsiveness dimension with a poor percentage value of 50.8%, the Convenience dimension with a poor percentage value of 54.1%, the Timeliness dimension with a poor percentage value of 59.0%. And the distribution of patient satisfaction results at the Mother and Child Hospital X Semarang City X Semarang City with a percentage value of 47.5% and assessing patient satisfaction is less good by 59.0%.

Table 3. Relationship between Health Service Quality Dimensions and Inpatient Satisfaction at Mother and Child Hospital X Semarang City

| | Patient Satisfaction | | | | Total | | | |
|-------------------|-----------------------------|-----------------|----|---------|-------|-----|---------|--|
| Dimensions | No Sat | No Satisfaction | | faction | Total | | p-value | |
| | n | % | n | % | n | % | | |
| Availability | | | | | | | | |
| Not Good | 25 | 80,6 | 6 | 19,4 | 31 | 100 | 0.000 | |
| Good | 7 | 23,3 | 23 | 76,7 | 30 | 100 | 0.000 | |
| Responsiveness | | | | | | | | |
| Less Responsive | 24 | 77,4 | 7 | 22,6 | 31 | 100 | 0.000 | |
| Responsive | 8 | 26,7 | 22 | 73,3 | 30 | 100 | 0.000 | |
| Convenience | | | | | | | | |
| Less Convenience | 23 | 69,7 | 10 | 30,3 | 33 | 100 | 0.008 | |
| Convenience | 9 | 32,1 | 19 | 67,9 | 28 | 100 | 0.008 | |
| Timely | | | | | | | | |
| Not timely enough | 24 | 66,7 | 12 | 33,3 | 36 | 100 | 0.016 | |
| Timely | 8 | 32,0 | 17 | 68,0 | 25 | 100 | 0.016 | |

Based on Table 3. The results showed that there was a significant relationship between the perception of the availability dimension and inpatient satisfaction (p-value = 0.000), respondents who decided to be dissatisfied had a perception of poor availability (80.6%) the proportion was greater than respondents who perceived good availability (23.3%).

There is a significant relationship between the responsiveness dimension and inpatient satisfaction (p-value = 0.000), respondents who decide to be dissatisfied have a perception of poor responsiveness (77.4%), the proportion is greater than respondents who perceive good availability (22.6%).

There is a significant relationship between the perception of the convenience dimension and patient satisfaction (p-value = 0.008), respondents who decide to be dissatisfied have a perception of poor convenience (69.7%), the proportion is greater than respondents who perceive good convenience (32.1%).

There is a significant relationship between the perception of the timeliness dimension and inpatient satisfaction (p-value=0.016), respondents who consider themselves satisfied have a perception of poor timeliness (33.3%), the proportion is less than respondents who perceive good convenience (68.0%).

Tabel 4. Table 4. Regression Analysis Effect of Health Service Quality Dimensions on Hospitalized Patient Satisfaction

| Variables | D | SE | Wald | df | Sig | Exp(β) | 95% C.I Exp(β) | |
|----------------|--------|-------|--------|----|-------|--------|----------------|---------|
| | В | | | | | | Lower | Upper |
| Availability | 3.034 | 0.836 | 13.172 | 1 | 0.000 | 20.789 | 4.038 | 107.031 |
| Responsiveness | 2.699 | 0.836 | 10.428 | 1 | 0.001 | 14.862 | 2.889 | 76.468 |
| Convenience | .500 | 0.821 | 0.371 | 1 | 0.542 | 1.649 | 0.330 | 8.241 |
| Timeliness | -446 | 0.960 | 0.216 | 1 | 0.642 | 0.640 | 0.097 | 4.201 |
| Constant | -8.734 | 2.230 | 15.347 | 1 | 0.000 | 0.000 | | |

Based on Table 4. it is known that there are two independent variables that jointly affect patient satisfaction at Mother and Child Hospital X Semarang City, namely availability and responsiveness affect patient satisfaction. The results of the analysis concluded that the most dominant dimension of health service quality affecting patient satisfaction is availability with a p-value = 0.000 and OR value = 20.789, meaning that the perception of a good availability dimension can affect high inpatient patient satisfaction 20 times compared to the perception of a low availability dimension on inpatient patient satisfaction at Mother and Child Hospital X Semarang City.

DISCUSSION

Relationship Between Availability Dimension and Inpatient Satisfaction

Availability shows how patients can get in touch with officers when they need it. In hospital services, officers are the ones who get the most attention, because they greatly affect patient satisfaction, especially doctors and nurses (Nasution et al., 2023). Even the presence and touch of the nurse's service has the largest proportion of services in the hospital, so without

ignoring the services of other officers, the services of doctors and nurses are of course services that should get greater attention for hospital management (Manzoor et al., 2019).

Patients also prefer doctors or nurses who speak well and are friendly, willing to listen, willing to answer questions, explain to patients in simple language about their health conditions, and include patients in decision-making about treatment, as well as the ease of meeting doctors or nurses. All of these are factors that improve relationships with patients so that they can increase satisfaction with the services provided (Nugraha et al., 2021)

The results showed that most respondents gave an unfavorable assessment of the availability aspect such as the assessment of doctors and midwives or nurses who are always there to help patients compared to the assessment of administrative staff. This happens because there are still patients who complain about slow doctor examinations, some patients in the inpatient hospital of Mother and Child Hospital X Semarang City do not know when the doctor who will come to treat them is in place or not. In addition, some midwives or nurses do double work such as, sometimes midwives or nurses help with polyclinic services, then the ratio of midwives or nurses to patients is not balanced, where one shift of nurses or midwives who standby in the room is only 1 or 2 people.

This research is not in line with what was done by Asamrew et al., (2020), that the dimension of availability or presence has a significant relationship to patient availability. That the dimension of availability or presence has a significant relationship to patient satisfaction, these results are overcome by providing routine evaluations of the presence of doctors and midwives or nurses to be able to help patients when needed, by improving schedules and penalizing delays.

In research Maarif et al., (2023) that the drug availability variable has a significant relationship with patient satisfaction. terms of improvement and evaluation of service quality so that patients are satisfied with services in dimensions that must be improved drug availability, room cleanliness, friendliness and courtesy and fast response services, especially for patient complaints.

Relationship Between Responsiveness Dimension and Patient Satisfaction

Responsiveness is a policy to help and provide fast service when patients need it. In services, the ability to immediately overcome problems in a professional manner can provide a positive perception for customer satisfaction. Responsiveness in hospital services, namely the desire of health workers to help patients and provide services with responsiveness, the attitude of the medical and non-medical teams in responding to complaints and problems faced by patients such as easier access to nurses, not long waiting, and willing to hear patient complaints.

Letting patients wait without a clear reason causes a negative perception in the quality of hospital services (Simbolon et al., 2022).

Based on interviews, some patients stated that the doctor during the patient's visit seemed to be in a hurry, so the explanation regarding the progress of the patient's condition was not clear enough. In the dimension of responsiveness, the most dominant patient complaint is complaining about the slowness of nurses in handling complaints such as when the intravenous fluid runs out immediately, when the patient's family asks for a new one, the nurse often comes late to replace it without clear information, which confuses the patient's family and has an impact on the patient's negative perception of health workers.

This research is not in line with that conducted by Mongdong et al., (2021) that the dimension of responsiveness has a relationship with patient satisfaction. This research is also not in line with what was done by Hastuti et al., (2017) that there is a relationship between tangibility, reliability, responsiveness, assurance, empathy with patient satisfaction. This study is also not in line with research Natassa et al., (2019), that the reliability dimension has a significant relationship to patient satisfaction.

This research is in line with that conducted by Anggia et al., (2020), Satisfaction of Healthcare and Social Security Agency patients on the quality of two dental health services with the results obtained is that there is no relationship between the dimensions of responsiveness to the satisfaction of patients of the Health Social Security Organizing Agency at the Zamrud Pratama clinic.

Relationship Between Convenience Dimension and Patient Satisfaction

The aspect of comfort felt by patients while in the hospital environment during the treatment period, personal attention and understanding the needs of patients as customers and acting in the interests of patients. Health workers are expected to understand the difficulties of each patient and help them get out of their difficulties so that they can provide comfort to patients (Mahmud, 2020).

Comfort is a medical service that has no direct bearing on clinical operations, but it can improve patient happiness and encourage them to visit the hospital again for more treatments. The physical design of medical facilities, staff, and non-medical equipment all affect patient comfort. The attention of health workers, which can be seen from their concern for every complaint of patients and their families, can provide comfort to patients and their families and will be responded well by patients.

The results showed that most respondents considered that the convenience dimension was good, but there were still perceptions that expressed dissatisfaction because the food served during treatment was not hygienic, the distribution of answers was (4.9%), this was reflected in that every food was always given a wrap, so that the food was covered. Respondents felt that the food served during treatment was not tasty (3.3%), this happened, giving food to each patient is different according to what is recommended by a nutrition specialist at the hospital.

This is in line with the findings Samsudi et al., (2023), that the appearance of food served in hospitals affects patient satisfaction. There are many factors that cause patients to be unhappy with hospital food. In addition, it is known that health care for pregnant women due to nausea and vomiting during early pregnancy or morning sickness. The mother also loses her appetite for food, so she may find food unpleasant. Most women find that they no longer want the foods that were once their favorites during the first trimester because they are afraid of regurgitating them.

This research is not in line with that conducted by Gao et al., (2022), The aspects of comfort and patient satisfaction are significantly correlated. This research is also not in line with what was done by Ariyanti et al., (2022) there is a significant correlation between comfort factors and patient satisfaction. This research is in line with Marampa et al., (2022) showed the Batua Health Centre in Makassar City's outpatients' comfort levels and patient satisfaction do not significantly correlate.

Relationship Between Timely Dimension and Patient Satisfaction

This timeliness approach refers to the time frame in which the organization's role is needed to respond or handle customer complaints. The system's promptness in delivering the information users require is measured by the Timeliness dimension, which gauges user satisfaction (Handayani et al., 2019).

According to Hermawan et al., (2018) According to his book, timeliness is defined as decision makers using information before it becomes useless for making decisions. Timeliness for information users is very important because it will trigger a feeling of comfort to customers and a feeling of getting good service. Therefore, timeliness for customers can increase their satisfaction with the services provided.

The results showed that most respondents already felt the timeliness of the services provided. However, there are still those who are dissatisfied with the officers delivering drugs and food not on time according to their schedule. This is because hospital management conducts training in the form of "Application of the Six Precise Principles in Drug Administration", increasing aspects of supervision and supervision, completing basic facilities

for drug administration, and making standard operating procedures regarding drug administration procedures and medical errors. From the statement related to the doctor's visite according to the promised time, respondents who felt that the doctor's visite was in accordance with the promised time, this was because the doctor on duty did not only practice in one hospital, then the doctor at the hospital could also get a surgery schedule that had to be done immediately so that the doctor's visite hours were not as promised.

This is because the nurses and midwives on duty Some respondents responded dissatisfied with the timeliness of nurses and midwives when patients needed 4.9% due to, among others, the fluctuating number of chemotherapy inpatients, patients with total care treatment so that nurses need a long time to be in the patient's room and the actions taken by doctors are also very occupying the attention of nurses. The nurses' mobility is also heavy, as they take patients for regular antenatal check-up. Respondents responded dissatisfied with the nurses and midwives who did not clearly inform them about the things that must be obeyed in patient care.

This study differs from that carried out by Ariyanti et al., (2022) shows the perception of patient pleasure and timeliness are significantly correlated, things that need to be considered are timeliness, discipline of officer work time, arrival and departure of health workers, and doctor check in time into consideration. This research is also not in line with that conducted by Lubis et al., (2020) revealed the Sei Mencirim Health Centre in Medan's outpatients' degree of satisfaction is significantly correlated with the timeliness component.

Factors Influencing Dimensions of Health Service Quality on Hospitalized Patient Satisfaction

The results of the study can be concluded, patient satisfaction or dissatisfaction is not very influential with the availability and responsiveness provided by health workers can be felt directly by patients from the beginning of service to the end of service. Every patient wants to be treated as well as possible, thus the dimensions of availability and responsiveness, officers in providing health services are the main thing in meeting patient expectations, so that patient satisfaction with health services provided by the hospital is realized.

According to Kotler et al., (2012), satisfaction is the level received by someone who is the result of the product or service received. Patient satisfaction from health services is obtained after the patient compares what he expects to receive.

CONCLUSIONS

The conclusion of this study is that there is a positive and significant relationship between the variables of Health Service Quality Dimensions, namely availability, responsiveness, convenience and timeliness and inpatient satisfaction at Mother and Child Hospital X Semarang City. The dominant variable that affects patient satisfaction is the perception of the availability dimension, high inpatient satisfaction 20 times compared to the perception of the availability dimension that is low in the satisfaction of inpatients at Mother and Child Hospital X Semarang City.

It is recommended for hospitals to make the implementation of service standards by setting clear and measurable service standards for every aspect of patient care, from waiting times to medical examination procedures. Ensure staff understand and follow these standards consistently. To the hospital to provide regular training programs for medical and non-medical staff to improve skills in communication, empathy, and friendly service. This training should include how to deal with difficult situations, active listening, and handling patient complaints effectively. and utilize information technology and hospital management systems to improve efficiency and quality of care. This could include the use of electronic medical records, online queuing systems, or mobile applications to provide information to patients.

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