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Relationship quality of health services with satisfaction of patients in H. Hanafie Muara Bungo Hospital in 2019[☆]



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11

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KEYWORDS

Quality of service;
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Abstract Hospitals as a place of health services are required to provide quality service. One of the determinants of the level of satisfaction of health services is health workers. The purpose of this study was to determine the relationship of health service quality with patient satisfaction at H. Hanafie Muara Bungo Hospital. This research is an analytic study using a cross-sectional study approach. The population in this study were all inpatients at H. Hanafie Muara Bungo Hospital. The sampling technique used an accidental sampling of 49 people. Data collection was done using questionnaires. Analysis of the data was done by univariate and bivariate analysis. The results showed there was a significant relationship between the reliability of officers, the responsiveness of officers, employee guarantees, the attention of health workers, and physical evidence of health services with the level of patient satisfaction at H. Hanafie Muara Bungo Hospital in 2019. Based on the results of the study, it was found that officer response, officer guarantee, officer attention, and physical evidence of service in the category of not qualified and there is a significant relationship with the level of patient satisfaction at H. Hanafie Muara Bungo Hospital in 2019.

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Introduction

The hospital, as a place of health services, must provide quality services so that the hospital is required to improve the quality of service. The purpose of health services is the achievement of a degree of public health that satisfies the expectations and degrees of community needs (consumer satisfaction) through effective services by service

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providers who will also provide satisfaction in the expectations and needs of service providers (provider satisfaction) in-service institutions that are organized efficiently (institutionally satisfaction). The interaction of the three main pillars of health services that are harmonious, harmonious, and balanced is a combination of satisfaction of the three pillars, and that is satisfying health care (satisfaction health care).¹

There are six factors of customer dissatisfaction with a product, namely: not in line with expectations, the service during the process of enjoying unsatisfactory services, unsatisfactory personal behavior, unsatisfactory atmosphere, and physical environment, high cost, promotion which does not correspond to reality.² Therefore, the provider must be able to provide satisfaction to its customers, for example, by providing higher quality products, cheaper and better services. A product is said to be of quality if it can meet the needs of its customers. Therefore, knowledge of customer needs and satisfaction (customer requirements) is very important.

A survey was conducted at H. Hanafie Muara Bungo Hospital by the researchers based on interviews with 10 hospitalized patients on February 24, 2019. About 5 people expressed dissatisfaction with the procedure for admitting patients that were not fast and precise (reliability), 4 people were not satisfied with officers who are not fast in providing services (responsiveness), 1 person was dissatisfied with officers who are not dexterous in carrying out service actions (collateral), 2 people were not satisfied with officers who discriminated patients with different status (empathy), 2 people are not satisfied with the flow of services or service instructions (physical evidence).

Based on the description in this background, the researcher is interested in the quality of health services to patient satisfaction at H. Hanafie Muara Bungo Hospital in 2019.

Method

This study is an analytic study with a cross-sectional study approach that aims to see the relationship between the independent variable (service cover) with the dependent variable (patient satisfaction). The population in this study were inpatients of H. Hanafie Muara Bungo Hospital. As many as 49 respondents were selected. Measuring instruments in this study used questionnaires given directly to inpatient. Data analysis in this study was analyzed using univariate and bivariate analysis. The univariate analysis uses the frequency test to display the frequency distribution, while bivariate analysis uses quadratic analysis or Chi-Square.

Result

Univariate analysis

1. The majority (79.6%) the patients stated that the health worker's reliability is in the category of Inequality.
2. The majority (81.6%) of the patient's responsiveness is in the category of unqualified.

3. The majority (81.6%) of the patient's assurance is in a category of inequality.
4. The majority (83.7%) the patient's attention is in the category of inequality.
5. The majority (79.6%) of the patients states that the physical evidence of service is in the category of inequality.
6. Less than half (42.9%) of the patients expressed satisfaction with the services provided them were in the satisfactory quality category.

Bivariate analysis

Based on statistical tests with Chi-Square, there is a relationship between the reliability of the officer with the level of patient satisfaction at H. Hanafie Muara Bungo Hospital with $p=0.001$ (p -value of <0.05). There is a meaningful association between the responders with the patient satisfaction rate with $p=0.028$ (p -value <0.05). There is a meaningful relationship between the assurance officer and the satisfaction level with $p=0.028$ (p -value of <0.05). There is a meaningful relationship between the reliability of the officer and the patient satisfaction rate $p=0.015$ (p -value of <0.05). Moreover, there is a positive relationship between the reliability of the officer with the level of satisfaction of the patient with $p=0.012$ (p -value of <0.05) (Table 1).

Discussion

The quality of good health services is the expectation of service users, including reliability which is an ability to provide services immediately, accurately (and accurately), with satisfactory level, as well as responsiveness are needed, as they must be polite and must master their skills given, have attention (empathy), good communication, understand the needs, listen to patient complaints. These must be supported by attractive and fun physical facilities in providing services and carrying out activities according to a set schedule, so as to provide satisfaction to patients. Health system responsiveness has been recognized as one of the fundamental aims of health care systems.³ Responsiveness accounts to a system's capability to respond to the legitimate expectations of potential users about non health enhancing characteristics of care⁴ and it is the way in which individuals are treated and the environment in which they are treated, taking into account the experience of each individual related with the health system.⁵ The results of this study are also in accordance with research conducted by Respati in 2014⁶ about the relationship between the quality of health services and the level of satisfaction of inpatients at the Halmahera Public Health Center in Semarang, which shows a relationship between the dimensions of responsiveness and patient satisfaction, lack of clarity of information provided and the delay in providing officials service will cause dissatisfaction of the patient. Therefore, health workers must have a responsive attitude and have a willingness to help and provide services that are fast (responsive). The results of research conducted by Sri Mulyanti⁷ found a significant relationship between health care workers' guarantees with the level of patient satisfaction at UPTD West Sumatra Health Laboratory. Winardi⁸ concluded that a good guarantee is associated with increased patient satisfaction and

Table 1 Bivariate analysis of relationship quality of health services with satisfaction of patients in H. Hanafie Muara Bungo Hospital in 2019.

	Patient satisfaction level						p-value
	Satisfied		Not satisfied		Amount		
	F	%	F	%	F	%	
<i>Reliability</i>							
No quality	12	30.8	27	69.2	39	100	0.001
Have quality	9	90	1	10	10	100	
Total	21	42.9	28	57.1	49	100	
<i>Responsiveness</i>							
No quality	14	35	26	65	40	100	0.028
Have quality	7	77.8	2	22.2	9	100	
Total	21	42.9	28	57.1	49	100	
<i>Assurance</i>							
No quality	14	35	26	65	40	100	0.028
Have quality	7	77.8	2	22.2	9	100	
Total	21	42.9	28	57.1	49	100	
<i>Attention</i>							
No quality	14	34.1	27	65.9	41	100	0.015
Have quality	7	87.5	1	12.5	8	100	
Total	21	42.9	28	57.1	49	100	
<i>Physical evidence</i>							
No quality	13	33.3	26	66.7	39	100	0.012
Have quality	8	80	2	20	10	100	
Total	21	42.9	28	57.1	49	100	

patient loyalty. The results of this study are in line with the research of Puspitasari and Edris⁹ regarding patient satisfaction and concluded that the variable of attention is a very dominant influence on patient satisfaction. Physical evidence, namely the availability of physical facilities and infrastructure as well as environmental conditions act as tangible evidence of the services provided. Good physical evidence in health services is very much needed to attract customers. Manengkei¹⁰ concludes that physical evidence is significantly related to patient satisfaction.

Thus, improvements in responsiveness is necessary for the development of better health system to increase the quality of basic amenities. However, these implications are tentative and require further investigations.

Conflict of interest

The authors declare no conflict of interest.

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