Patient Satisfaction Analysis Based on Hospital Service Quality

Ayu Miarsih
Program Pascasarjana Uniiversitas Terbuka, Indonesia
Email : miarsihayu@gmail.com

ARTICLE INFO

`Research Paper`

ABSTRACT

The purpose of this study was to analyze the level of outpatient satisfaction at Sultan Imanuddin General Hospital, Pangkalan Bun. This study used a quantitative approach, with a cross-sectional design and using a Likert scale. Data collection techniques used were documentation, observation, and interview techniques. With a sample size of 132 people. Based on the results of the analysis conducted by the researcher, it can be seen that there is a significant relationship between reliability and patient satisfaction, there is a significant relationship between assurance and patient satisfaction, there is a significant relationship between empathy and patient satisfaction, there is a significant relationship between responsiveness and patient satisfaction, but there is no significant relationship between physical evidence and patient satisfaction at Sultan Imanuddin General Hospital, Pangkalan Bun. Where the most influential aspect of patient satisfaction is empathy, which includes an attitude of attention and concern for patient needs.

Keywords: Satisfaction, Patients, Outpatient, Hospital,

INTRODUCTION

Public service activities according to Law Number 25 of 2009 concerning Public Services and the decree of MENPAN No.63/KEP/MENPAN/7/2003 include Community Services, community services are services related to the nature and interests that are more emphasized on social community activities such as health services, education, employment, prisons, orphanages and others. One form of health service provided is Hospital services (Harwina, 2021, 2021; Iskamto, Karim, et al., 2020; Iskamto, Puspa Liza Ghazali, et al., 2020).

From the initial interviews (pre-survey) conducted on several informants as users of outpatient public services at Sultan Imanuddin Hospital, Pangkalan Bun, several problems can be identified that can be explained related to the level of outpatient satisfaction at Sultan Imanuddin Hospital, Pangkalan Bun. Some of these complaints are the long waiting time for services and the lack of seating facilities in the waiting room, another thing that also shows patient dissatisfaction is the high recapitulation of patient complaints who complain to the Patient Service Manager (MPP) service and based on the recapitulation of the results of 4 periods of public satisfaction surveys from 2017-2020 at the Sultan Imanuddin Hospital, Pangkalan Bun, it states that the level of patient satisfaction is still relatively low. Based on the background above, the author is interested in conducting research related to "Analysis of outpatient satisfaction at the Sultan Imanuddin Hospital, Pangkalan Bun".

LITERATURE REVIEW
Patient Satisfaction

Satisfaction is a feeling of pleasure or disappointment that occurs after comparing the perception or impression of performance and expectations (Kothler, 1999). Patient satisfaction depends on the quality of service. According to Supriyanto (2011), service is all efforts made by employees to fulfill the desires of their customers with the services that will be provided. A service is said to be good by the patient, determined by the fact whether the service provided can meet the patient's needs, using the patient's perception of the service received (satisfying or disappointing, also including the length of service time). Satisfaction begins with the acceptance of the patient from the first time they arrive, until the patient leaves the hospital. In this case, the patient acceptance procedure is the first service provided by the hospital and is an experience that is always remembered by the patient (past experience) which is one of the determinants of the patient's perception of health services in the hospital. Thus it is clear that the first contact between hospital staff and patients is a very important note for patients in assessing patient satisfaction with the services they receive (Supriyanto and Ernawaty, 2010).

Quality of Service
Services in a hospital must be supported by good service quality. Hospitals continuously improve the quality of service because this is what makes customers feel satisfied with the hospital. To assess the quality of service, according to Parasuraman et al. (1991), there are five dimensions used by customers in evaluating services that affect the quality of a service, namely:

a. Reliability is related to the reliability of the hospital's ability to provide immediate and accurate services the first time without making any mistakes and satisfying the customer.

b. Assurance includes knowledge, skills, and the ability to build patient trust. Assurance also means that it is free from danger, risk and doubt.

c. Physical evidence (tangibles), direct evidence that includes physical facilities, equipment and personnel used by the hospital and the appearance of existing employees.

d. Empathy is the patient's perception which is assessed based on the politeness and friendliness of providing individual services with full attention and understanding of the patient's needs as a customer and

act in the interests of the patient and always help the patient even if not asked.

e. Responsiveness, in relation to the willingness and ability of employees to help patients and respond to their requests promptly, as well as to provide information about services promptly.
appropriate.

If the five dimensions above have been fulfilled, then the personal relationship between the patient/customer and the service provider will be good and the patient will certainly feel comfortable with the service that has been given. This will give a deep impression to the patient/customer in the form of satisfaction with the service that has been given by an agenc

Public services
The word "public" is a loan word derived from the language "public". This language has been used for years by the Indonesian people who provide that this public is identified with society. The word society in the general sense states all general circles aimed at the entire people. The name public is often heard with the name behind it which confirms that the word in front of it is owned by the public. For example, we often hear the names: Public toilet, Public service, Public policy, Public transport, Public institution, and so on (Sugandi et al., 2011). Public service is all service activities carried out by public service providers as an effort to fulfill public needs and implement the provisions of public service laws and regulations (Mahmudi, 2007). According to Osborn and Plasterik, defining the services provided by the government is interpreted as an obligation, not a right, because they (bureaucrats) are appointed to serve so that the service will be responsive to the needs of the community and can design a more creative and

efficient service model (Ridwan et al., 2012: (Herman, 2022; Samsul et al., 2022; Wulansari & Pratama, 2022; Yulihardi et al., 2022))

No.63/KEP/MENPAN/7/2003 includes Community Services, community services are services related to the nature and interests that are more emphasized on social community activities such as health services, education, employment, prisons, orphanages and others.

Hospital

Organize comprehensive individual health services that provide inpatient, outpatient and emergency services (Haliman and Wulandari, 2012). A hospital is a health service institution for the community with its own characteristics that are influenced by the development of health science, technological advances and the socio-economic life of the community that must continue to be able to improve services that are of higher quality and affordable to the community in order to achieve the highest level of health (Government of the Republic of Indonesia, 2009) Hospitals as one of the individual health service facilities are part of the health resources that are very much needed in supporting the implementation of health efforts. In essence, hospitals function as places for healing diseases and restoring health. The function in question has the meaning of responsibility which should be the responsibility of the government in improving the level of community welfare. To optimize the results and positive contributions, efforts must be made to include health efforts as the main principle of the national development program (Ministry of Health of the Republic of Indonesia, 2012). Hospital services include outpatient and inpatient services, as well as conducting supporting examinations.

Definition of Hospital is an institution that provides comprehensive individual health services in the form of outpatient, inpatient, and emergency services. Emergency is a clinical condition of a patient that requires immediate medical action to save lives and prevent further disability. As an institution, a hospital has rights and obligations. Its rights include legal protection against consumer or patient actions with bad intentions.

According to Supriyanto, S. and RD Wulandari (2011), the quality of hospital services is the degree of perfection of hospital services to meet the needs of consumer society for health services that are in accordance with professional standards and professional service standards and service standards by using the potential of resources in the hospital in a reasonable, efficient and effective manner and providing benefits and satisfaction in accordance with legal norms and ethics.

Hospital Duties and Functions According to Law of the Republic of Indonesia Number 44 of 2009 concerning hospitals, hospitals have the task of providing comprehensive individual health services. Comprehensive health services are health services that include promotive, preventive, curative, and rehabilitative. Promotive health services are health service activities that prioritize health promotion activities, preventive health services are activities to prevent a health problem/disease, and curative health services are treatment activities aimed at curing diseases, reducing suffering due to disease, controlling disease, or controlling disability so that the quality of sufferers can be maintained as optimally as possible, and rehabilitative health services are activities to return former sufferers to society so that they can function again as members of society who are useful for themselves and society as much as possible according to their abilities.

Based on the Republic of Indonesia Law Number 44 of 2009, general hospitals have the following functions:

a. Provision of medical treatment and health recovery services in accordance with hospital service standards.
b. Maintaining and improving individual health through comprehensive second and third level health services according to medical needs.
c. Organizing education and training of human resources in order to improve capabilities in providing health services.
d. Conducting research and development as well as screening of health technology in order to improve health services by paying attention to the ethics of health science.

Outpatient

Outpatient services according to Murjani (2007) are one of the work units in a hospital that serves outpatients and no more than 24 hours of service, including all diagnostic and therapeutic procedures. Outpatient services are also one of the dominant ones in the hospital market and are a significant source of finance, so that efforts are always made to improve the quality of service. The purpose of outpatient services includes providing consultation to patients who need the opinion of a specialist doctor, with or without treatment. In addition, it is also to provide follow-up services for inpatients who have been allowed to go home but whose health conditions still need to be monitored.

Outpatient services or polyclinics are a place for outpatient services as the first door whether the patient is staying overnight or not, or needs to be referred to another health service. The outpatient flow that applies at Sultan Imanuddin Hospital begins when the patient first arrives, the patient must take a queue number first, then be screened, then register at the clinic in question according to the complaints felt by the patient, then go to the cashier to pay the registration fee, then the patient is examined by a doctor, given a prescription and then to the pharmacy depot to pick up medicine and pay for the medicine. This doctor's examination is divided into several polyclinics according to specifications, namely the Medical Check Up Clinic (MCU), internal medicine clinic, neurological disease clinic, pediatric disease clinic, surgical clinic, obstetrics clinic, dental clinic, ENT clinic, medical rehabilitation clinic, eye clinic, mental health clinic, skin and genitals clinic, HIV / AIDS clinic, orthopedic clinic and others depending on the type of hospital.

METHOD

This study uses a quantitative approach, with a cross-sectional design and using a Likert scale. The data collection techniques used are documentation, observation, and interview techniques. With a sample size of 132 people obtained through the Stanley Lameshow formula. TechniqueData analysis consists of processingDataand Data Presentation ProcessingDataconsists of Editing, Coding, Cleaning Data, Tabulating and Data Presentation consists of percentage frequency distribution and analysis table. Data Analysis Methods in this study are Univariate Analysis, Bivariate Analysis and Multivariate.

RESULTS AND DISCUSSION

Respondent Characteristics

Respondents in this study were patients at the Children's Polyclinic who used financing through BPJS Non PBI, totaling 114 people. The characteristics of respondents in this study included age, gender, education and occupation with the following distribution:

Table 4.1 Distribution of Respondents Based on Respondent Characteristics

Respondent Characteristics	n	%
Age (Years) < 50 years	98	86
≥50 years	16	14
Male gender	46	40.4
Woman	68	59.6

Based on table 4.1, it is known that the distribution of the age of respondents in this study from 114 respondents, as many as 98 people were aged <50 years (86%). While respondents aged >50 years were 16 people (14%). Respondents aged <50 years seemed more dominant considering that age is an adult

age group, where a person generally has children aged between 0-18 years who are included in the examination category at the children's polyclinic.

Then it was found that out of 114 male respondents, there were 46 people (40.4%), while female respondents were 68 people (59.6%). Female visitors were more dominant than male visitors, this is natural considering that children tend to be closer and more comfortable when undergoing examination with their mothers or grandmothers.

Furthermore, based on the education of 114 respondents, there were 2 people (1.8%) respondents who did not go to school, those who had elementary school education were 13 people (11.4%), junior high school education were 26 people (22.8%), high school education were 60 people (52.6%), and college education (bachelor's degree) were 13 people (11.4%). From the table, it can be seen that the majority of respondents had high school education. Finally, based on the respondents' employment status, it is known that respondents who work as civil servants are 2 people (1.8%), self-employed are 38 people (33.3%), drivers are 3 people (2.6%), farmers are 2 people (1.8%), ABRI/POLRI are 3 people @,6%), housewives are 43 people (37.7%), and others are 23 people (20.2%). From the description of the table, it can be seen that the most dominant employment status for respondents is housewives.

2. Univariate Analysis

Patient Satisfaction (Servqual)
 Based on the results of processing research data, statistical calculation results were obtained regarding respondent satisfaction as presented in the following table:

Table 4.2 Distribution of Respondent Satisfaction Levels

Satisfaction Level	n	%
Not satisfied	11	9.6
Satisfied	103	90.4
Total	**114**	**100**

Table 4.2 shows that out of 114 respondents, 11 people (9.6%) stated that they were dissatisfied, while 103 people (90.4%) stated that they were satisfied with the services at Sultan Imanuddin Hospital, Pangkalan Bun in 2023. The most frequent patient dissatisfaction was related to punctuality during treatment, namely the waiting time for service that was felt to be quite long from when the patient came to register until being served by the doctor, especially for children, the long waiting time made patients fussy, restless and crying, so that parents or patient companions complained.

Reliability
Based on the results of processing research data, statistical calculation results were obtained regarding respondents' assessments of the reliability of health workers in providing services as presented in the following table:

Table 4.3 Distribution of Respondents' Reliability (Responsiveness)

Satisfaction Level	n	%
Not good	6	5.3
Good	108	94.7
Total	**114**	**100**

Table 4.3 shows that out of 114 respondents, 18 people (15.8%) considered the reliability of the officers to be poor. Conversely, 96 people (84.2%) considered the reliability of the officers to be good. Respondents who stated that it was Poor mainly complained about the provision of unclear information

when patients waited for the doctor past the service start time, there was no clear information as to why the service had not started.

Assurance
 Based on the results of processing research data, statistical calculation results were obtained regarding respondents' assessment of assurance in obtaining services as presented in the following table:

Table 4.4 Distribution of Respondents' Assurance

Satisfaction Level	n	%
Not good	4	3.5
Good	110	96.5
Total	**114**	**100**

Table 4.4 shows that out of 114 respondents, 4 people (3.5%) considered the guarantee of getting health services to be poor. On the other hand, 110 people (96.5%) considered getting health services to be good. As many as 3.5% of respondents stated that the guarantee of service was poor because they were dissatisfied and did not take long enough to consult a doctor.
d. Physical Evidence (Tangible)

Based on the results of the research data processing, the results of statistical calculations were obtained regarding respondents' assessment of the physical evidence (tangible) shown by Sultan Imanuddin Pangkalan Regional Hospital as presented in the following table;

Table 4.5 Distribution of Respondents' Physical Evidence (Tangible)

Satisfaction Level	n	%
Not good	7	6.1
Good	107	93.9
Total	**114**	**100**

Table 4.5 shows that out of 114 respondents, 7 people (5.3%) considered the physical evidence (tangible) shown by RSUD Sultan Imanuddin Pangkalan to be not good. On the other hand, 107 people (93.3%) considered the physical evidence
(tangible) shown by Sultan Imanuddin Pangkalan Regional Hospital is
good. As many as 7 respondents felt that there were not enough children's play facilities so that children who were receiving treatment could play and not get bored.

Empathy
 Based on the results of processing research data, statistical calculation results were obtained regarding respondents' assessments of officers' empathy as presented in the following table:

Table 4.6 Distribution of Respondents' Empathy

Satisfaction Level	n	%
Not good	9	7.9

Good	105	92.1
Total	**114**	**100**

Table 4.6 shows that out of 114 respondents, 9 people (7.9%) considered the empathy of the officers to be poor. On the other hand, 105 people (92.1%) considered the empathy of the officers to be good. Complaints related to the friendliness of the officers in serving and the lack of informativeness, especially when waiting for the doctor to arrive at the polyclinic late.

Responsiveness
Based on the results of the research data processing, the results of statistical calculations were obtained regarding respondents' assessments of the responsiveness of health workers in providing services as presented in the following table:

Table 4.7 Distribution of Responsiveness

Satisfaction Level	**n**	**%**
Not good	18	15.8
Good	96	84.2
Total	**114**	**100**

Table 4.7 shows that out of 114 respondents, 18 people (15.8%) considered the responsiveness of the officers to be poor, while 96 people (84.2%) considered it good. Complaints about the long waiting time were the most complained about by patients and families, 15.8% complained about the long time the doctor served, so that the child was fussy and restless.

3. Bivariate Analysis

Relationship between Reliability and Satisfaction (Servqual)
To find out the relationship between reliability and patient satisfaction at Sultan Imanuddin Hospital, Pangkalan Bun, can be seen in the following table:

Table 4.8 Relationship between Reliability and Servqual at Sultan Imanuddin Hospital, Pangkalan Bun

Reliability	Servqual				Total		Statistical Test
	Not satisfied		Satisfied				
	n	%	n	%	n	%	
Not good	3	2.6	3	2.6	6	5.2	p = 0.001
Good	8	7.0	100	87.8	108	94.8	
Total	11	9.6	103	90.4	114	100	

Based on table 4.8, it shows that out of 114 respondents who were dissatisfied with poor reliability were 3 people (2.6%), while respondents who were dissatisfied with good reliability were 8 people (7.0%). Furthermore, respondents who were satisfied with poor reliability were 3 people (2.6%), while those who were satisfied with good reliability were 100 people (87.8%). The results of the analysis using the chi square test obtained a significant value of $p = 0.001$ with $p < 0.05$ so that H0 was rejected with Ha accepted, meaning that there is a significant relationship between reliability and satisfaction (servqual). In other words, the better the reliability provided by the officer, the more satisfied the patient feels.
b. Relationship between Assurance and Satisfaction (Servqual)

To find out the relationship between assurance and patient satisfaction in
Sultan Imanuddin Hospital Pangkalan Bun can be seen in the following table:

32

Table 4.9 Relationship between Assurance and Servqual at Sultan Imanuddin Hospital, Pangkalan Bun

Assurance	Servqual				Total		Statistical Test
	Not satisfied		Satisfied				
	n	%	n	%	n	%	
Not good	2	1.7	2	1.7	6	3.4	p = 0.005
Good	9	7.9	101	88.6	108	96.5	
Total	11	9.6	103	90.3	114	100	

Based on table 4.9, it shows that out of 114 respondents who were dissatisfied with poor guarantees were 2 people (1.7%), while respondents who were dissatisfied with good guarantees were 9 people (7.9%). Furthermore, respondents who were satisfied with poor guarantees were 2 people (1.7%), while those who were satisfied with good guarantees were 101 people (88.6%). The results of the analysis using the chi square test obtained a significant value of p = 0.005 with p <0.05 so that H0 was rejected with Ha accepted, meaning that there is a significant relationship between assurance and satisfaction (servqual). In other words, the better the guarantee provided by the Hospital, the more satisfied the patient feels.c. Relationship between Physical Evidence (Tangible) and Satisfaction (Servqual)

To determine the relationship between physical evidence and patient satisfaction in Sultan Imanuddin Hospital Pangkalan Bun can be seen in the following table:

Table 4.10 Relationship between Tangible and Servqual at Sultan Imanuddin Hospital, Pangkalan Bun

Tangible	Servqual				Total		Statistical Test
	Not satisfied		Satisfied				
	n	%	n	%	n	%	
Not good	2	1.7	5	4.4	6	6.1	p = 0.080
Good	9	7.9	98	86.0	108	93.9	
Total	11	9.6	103	90.4	114	100	

Based on table 4.9, it shows that out of 114 respondents who were dissatisfied with poor physical evidence were 2 people (1.7%), while respondents who were dissatisfied with good physical evidence were 9 people (7.9%). Furthermore, respondents who were satisfied with poor physical evidence were 5 people (4.4%), while those who were satisfied with good physical evidence were 98 people (86.0%). The results of the analysis using the chi square test obtained a significant value of p = 0.080 with p> 0.05 so that H0 was accepted with Ha rejected, meaning that there was no significant relationship between physical evidence (tangible) and satisfaction (servqual). d. Relationship between Empathy and Satisfaction (Servqual)

To find out the relationship between empathy and patient satisfaction at Sultan Imanuddin Hospital, Pangkalan Bun, see the following table:

Table 4.11 Relationship between Empathy and Servqual at Sultan Imanuddin Hospital, Pangkalan Bun

Empathy	Servqual				Total		Statistical Test
	Not satisfied		Satisfied				
	n	%	n	%	n	%	

Not good	6	5.3	3	2.6	9	7.9	p = 0.000
Good	5	4.4	100	87.7	105	92.1	
Total	11	9.6	103	90.4	114	100	

Based on table 4.11, it shows that out of 114 respondents who were dissatisfied with bad empathy were 6 people (5.3%), while respondents who were dissatisfied with good empathy were 5 people (4.4%). Furthermore, respondents who were satisfied with bad empathy were 3 people (2.6%), while those who were satisfied with good empathy were 100 people (87.7%). The results of the analysis using the chi square test obtained a significant value of p = 0.000 with p> 0.05 so that H0 was rejected with Ha accepted, meaning that there is a significant relationship between empathy and satisfaction (servqual). In other words, the better the empathy given by the Hospital, the more satisfied the patient feels.

Relationship between Responsiveness and Satisfaction
To find out the relationship between responsiveness and patient satisfaction at Sultan Imanuddin Hospital, Pangkalan Bun, please see the following table:

Table 4.12 Responsiveness Relationship

Responsiveness	Servqual				Total		Statistical Test
	Not satisfied		Satisfied				
	n	%	n	%	n	%	
Not good	3	2.6	3	2.6	9	7.9	p = 0.001
Good	8	7.0	100	87.7	105	92.1	
Total	11	9.6	103	90.3	114	100	

Based on table 4.12, it shows that out of 114 respondents who were dissatisfied with poor responsiveness were 3 people (2.6%), while respondents who were dissatisfied with good responsiveness were 8 people (7.0%). Furthermore, respondents who were satisfied with poor responsiveness were 3 people (2.6%), while those who were satisfied with good responsiveness were 100 people (87.7%). The results of the analysis using the chi square test obtained a significant value of p = 0.001 with p> 0.05 so that H0 was rejected with Ha accepted, meaning that there is a significant relationship between responsiveness (empathy) and satisfaction (servqual). In other words, the better the responsiveness provided by the Hospital, the more satisfied the patient feels.
4. Multivariate Analysis

Multivariate analysis with logistic regression test obtained the influence of independent variables simultaneously on the dependent variable. It was obtained that there were four variables that met the requirements to be continued to multivariate analysis. The variables that met the requirements to be continued in the multivariate test are as follows:

Table 4.13 Variables that Meet the Requirements for Multivariate Tests

Variables	Test Results (p Value)
Reliability	0.001
Assurance	0.006
Tangible	0.080
Empathy	0,000
Responsiveness	0.001

The results of the final model of the logistic regression equation to determine the variables that most influence patient satisfaction at Sultan Imanuddin Hospital, Pangkalan Bun in 2022. The results of the logistic regression can be directly interpreted from the coefficient values as follows:

Table 4.14 Variables that Meet the Requirements for Multivariate Tests

	B	SE	Wald	df	Sig.	Exp(B)
Reliability	-.814	2.214	.135	1	.713	.443
Assurance	2,871	2,091	1,886	1	.170	17,658
Tangible	.777	1,545	.253	1	.615	2.175
Empathy	3,796	1,454	6,813	1	.009	44,523
Responsiveness	-1.908	1,527	1,562	1	.211	.148

In table 4.15 it can be seen that the empathy variable (p = 0.009) has a p value

< 0.05 which indicates that the variables have a simultaneous influence on patient satisfaction at Sultan Imanuddin Hospital, Pangkalan Bun. While the variables reliability (p = 0.173), assurance (p = 0.170), tangible (p = 0.615), and responsiveness (p = 0.211) do not have a simultaneous influence on patient satisfaction at Sultan Imanuddin Hospital, Pangkalan Bun. Based on the results above, it can be seen that the final model of the logistic regression equation to determine the variables that greatly influence patient satisfaction at Sultan Imanuddin Hospital, Pangkalan is by looking at the highest Exp(B) value. Based on the results of the logistic regression analysis above, the empathy variable has the highest Exp(B) value, which is 44.523 times more influential on patient satisfaction at Sultan Imanuddin Regional Hospital.Pangkalan Bun with a p value = 0.009.

Discussion
Patient Satisfaction with Services at Sultan Imanuddin Hospital, Pangkalan Bun
Based on the results of the study, it was found that patients were satisfied with the services at Sultan Imanuddin Hospital Pangkalan Bun because when providing services they showed a sympathetic or caring attitude towards patients and were quick to serve patients when patients wanted something, the communication relationship between officers and patients was also well established. In fact, good interpersonal relationships will have a major role in effective communication and poor interpersonal relationships will reduce the effectiveness of the technical competence of health services. When patients are treated well, they tend to follow the advice and suggestions of health workers and some officers when providing services show a friendly attitude. As many as 90.4% of respondents who stated that they were satisfied with the services provided by nurses at Sultan Imanuddin Hospital Pangkalan Bun, as many as 9.4% stated that they were dissatisfied with the services received by patients. This supports research conducted by Dahlan (2012) that if the service received exceeds customer expectations, then the service quality is perceived as ideal quality. Conversely, if the service received is lower than expected, then the service quality is perceived as poor. Thus, the quality of service depends on the ability of the service provider to consistently meet customer expectations.

As stated by Mc Gregor (1989) that humans are creatures who continuously have immediate desires, if certain needs are met then other needs arise. Humans continuously make efforts to satisfy their needs. So that these needs will affect the behavior of patients who are consumers of health services. Satisfaction for patients is if the officer is willing to smile, friendly, skilled and fast in handling, so that patients feel comfortable and calm. That way, patients are directly involved in obtaining and using goods or services, including in the decision-making process for the preparation and determination of an activity/action. Patient satisfaction is not enough by improving physical environmental facilities, but in an effort to provide satisfaction to customers/patients is mainly in the process of interaction between officers and patients in health services. The interaction between officers and patients is a very important thing for patients to feel when receiving services, especially when they really need help. This interaction process is influenced by the behavior of officers in carrying out services, namely friendliness, skill, responsiveness, attention, communication, speed of service and others (Wijono,

2015).

The growing competition between hospitals is getting tighter and sharper, so every hospital is required to increase its competitiveness by trying to provide satisfaction to all its patients. For that, it must be known what factors influence the level of patient satisfaction. And it is very important for us to know what our patients need to fulfill their satisfaction with the services we provide (Wijayanti, 2008)

Patient Satisfaction based on Reliability

The aspect of accurate service capability is related to the reliability of officers in providing immediate, accurate service since the first time the patient arrives, without making any mistakes, and satisfying the patient so that the patient is truly confident in the ability of officers who seem good, skilled, responsible and always inform the service actions that will be carried out on the patient, for example by explaining the function of the action to the patient. Basically, officers are required with performance results that must be in accordance with patient expectations, which means punctuality, the same service for all patients without error, a sympathetic attitude, and with high accuracy so that it will eventually give rise to a sense of satisfaction in the patient himself. The better the patient's perception of reliability, the higher the patient's satisfaction will be. And if the patient's perception of reliability is bad, the lower the patient's satisfaction will be.

In line with the results of research conducted by St. Nurul Aliah Alwy (2018) stated that the reliability variable has a positive effect on patient satisfaction. The results of research conducted at Sultan Imanuddin Pangkalan Hospital showed that reliability in providing services to patients was 94.8% good, and 6.2% bad. In its implementation, this dimension contains two main elements, namely the ability of the institution to provide services as promised and the accuracy of the services provided or how far the officers are able to minimize/prevent errors in the service process provided. There are several things that the Hospital must do to realize reliable services, including providing continuous education and training to officers. In a hospital service setting, reliable service means service that is free from errors in assessment, diagnosis, or treatment, and service that provides a guarantee of improving the condition of patients undergoing treatment at the Hospital.

Patient Satisfaction based on Assurance

The assurance aspect is a guarantee of the ability that includes knowledge, skills of officers and facilities in providing health services to patients. In this case, the Hospital provides a guarantee that patients will receive the appropriate service, by fostering patient trust that they will receive it appropriately according to the patient's needs.

The results of this study indicate that 96.5% of respondents stated that the guarantee provided by RSUD Sultan Imanuddin Pangkalan Bun was good. The guarantees they received included the knowledge and skills of doctors and nurses in carrying out diagnoses/actions, and the availability of adequate medical equipment.

This is in accordance with Fadlan's opinion (2014), assurance and certainty are the ability to provide information to customers in a language they can understand, safe from danger, risk or doubt, have the skills and knowledge needed to provide certain services. In the service setting in a Hospital, the ability of officers (doctors and nurses) to provide information about the disease suffered and provide appropriate action for patients will create trust in the service in the Hospital.

Patient Satisfaction Based on Physical Evidence (Tangible)

The physical evidence aspect is direct evidence that includes facilities, the appearance of officers and cleanliness when patients receive services at the Hospital. Physical facilities in the Hospital include the availability of comfortable and clean waiting chairs, waiting rooms and toilets. In addition, the neat and clean appearance of officers will be an important point in providing service satisfaction felt by patients.

The results of this study indicate that 93.9% of respondents stated that the physical evidence displayed by RSUD Sultan Imanuddin Pangkalan Bun was good. This shows that the facilities, cleanliness and physical appearance shown in providing services are good. The better the patient's perception of

physical evidence, the higher the patient's satisfaction.

Patient Satisfaction Based on Empathy
The empathy aspect is the officer's concern and attention to the patient's needs and acting in the interests of the patient and always helping the patient voluntarily. Officers can understand the conditions and difficulties of each patient and help find a way out of the difficulties experienced by the patient.

The results of this study indicate that 92.1% of respondents considered the empathy shown by the officers to be good, so that patients felt satisfied. This shows that empathy shown by officers in the form of a caring attitude greatly affects patient satisfaction.

From Wijaksono's research (2013) it states that psychological touch that can be delivered by nurses and other medical teams to patients will reduce the stress they experience during illness, and it turns out that psychological fatigue contributes to the patient's illness getting worse. Motivation from the medical team can reduce anxiety by providing emotional support in the form of patience, attention, motivation so that patients will recover faster.

Patient Satisfaction based on Responsiveness
The responsiveness aspect is related to the ability of officers to provide responsive services to patient needs. This responsiveness is related to the speed in providing services. In addition, it is also related to the response given by officers to patient suggestions, complaints and requests.

The results of this study indicate that 92.1% of respondents stated that with good responsiveness, patients were satisfied with the services provided by RSUD Sultan Imanuddin Pangkalan Bun. This means that the better the responsiveness shown by officers in providing services, the higher the patient satisfaction.

CONCLUSION AND SUGGESTIONS
The conclusion of this study is that there is a significant relationship between reliability and patient satisfaction, there is a significant relationship between assurance and patient satisfaction, there is a significant relationship between empathy and patient satisfaction, there is a significant relationship between responsiveness and patient satisfaction, but there is no significant relationship between physical evidence and patient satisfaction at RSUD Sultan Imanuddin Pangkalan Bun. Where the most influential aspect of patient satisfaction is empathy, which includes an attitude of attention and concern for patient needs. The suggestion that can be conveyed is that all elements of the Hospital must be able to maintain and make continuous improvements in the process of providing services and improve the quality of health services by increasing the quantity and quality of human resources and infrastructure, as well as increasing the capacity of staff competencies, and the most important thing is to continuously improve attitudes that are oriented towards service, for example, attitudes of care and attention, friendliness and politeness of staff,

REFERENCE
Aiken, L.H., et al. (2017). "Patient satisfaction with hospital care anrl nurses in England: an observational study." BMJ open 8(1): e019189.
Analysis of BPJS Outpatient Satisfaction Level at Imelda Indonesian Workers General Hospital Medan in 2019
Ashrafun, L. and M. J. Uddin (2011). "Factors determining inpatient satisfaction with hospital care in Bangladesh." Asian social science 7(6): 15.
Azwar, A. (1996). Intermediary Health Administration. Ciputat- Tanggerang 2010, Binarupa Aksara Publisher, third edition.
Borie, HM A & Damanhouri, AMS (2013). Patients' satisfaction of service quality in Saudi hospitals:

a SERVQUAL analysis. International Journal of Health Care Quality Assurance.

Chairunnisa, C. and M. Puspita (2017). "Description of Outpatient Satisfaction with Services at the Jakarta Sukapura Islamic Hospital (RSIJS) in 2015." Journal of Medicine and Health 13(1): 9-27.

Creswell, JW 2012. Research Design; "Qualitative, Quantitative, and Mixed Methods Approaches (Third Edition). Translated by Achmad Fawaid Fari Original Title "Research Design: Qualitative, Quantitative, and Mixed Methods"

Government of the Republic of Indonesia. Law of the Republic of Indonesia No. 24 of 2011. Concerning the Social Security Agency Jakarta. 2011;1–68.

Harwina, Y. (2021). The Effect of Service Quality on Consumer Satisfaction: A Case Study of the Hospitality Industry in Pekanbaru Indonesia. ADPEBI International Journal of Business and Social Science, 1(1), Article 1. https://doi.org/10.54099/aijbs.v1i1.36

Herman, H. (2022). Impact of Service Quality on Customer Satisfaction: A Case Study in Educational Institutions. ADPEBI International Journal of Business and Social Science, 2(1), Article 1. https://doi.org/10.54099/aijbs.v2i1.104

Hospital Profile Sultan Imanuddin Regional General Hospital Pangkalan Bun

Iskamto, D., Karim, K., Sukono, & Bon, T. (2020). Impact of Employee Satisfaction on Work Discipline in Government Office in Indonesia. The International Conference on Industrial Engineering and Operations Management, 13.

Iskamto, D., Puspa Liza Ghazali, Aftanoorhan, A., & Narti, S. (2020). Effect of Occupational Safety And Health on Performance: An Empirical Investigation. International Journal of Islamic Studies and Social Sciences, 1(3), 20.

Kotler, Philip and Keller, Kevin L., 2007, "Marketing Management," 12th Edition, Index; Jakarta

Minimum Service Standards, 2021, Sultan Imanuddin Regional General Hospital, Pangkalan Bun

Ministry of Health of the Republic of Indonesia. (2014). Indonesia: Classification and Licensing of Hospitals. Jakarta: Ministry of Health of the Republic of Indonesia.

Moenir, Drs, H, A, S. 2006. "Public Service Management in Indonesia". Jakarta; Bumi Aksara

Mumu, LJ, Kandou, GD, Doda, DV (2015). Analysis of Factors Related to Patient Satisfaction in the Internal Medicine Polyclinic of Prof. Dr. RD Kandou Manado Hospital

Pasolong, H. (2013). Public Administration Research Methods.. Bandung, Alfabeta.

Pohan, IS (2012). "Quality Assurance of Health Services, Basics of Understanding and Implementation." Jakarta, EGC medical book.

Pouragha, B. & Zarei, E. (2016). The Effect Of Outpatient Service Quality On Patient Satisfaction In Teaching Hospitals In Iran. Journal Of The Academy Of Medical Sciences In Bosnia And Herzegovina

Public Satisfaction Survey, 2021, Sultan Imanuddin Regional General Hospital, Pangkalan Bun

Rambat, Lupiyoadi, and A. Hamdani. 2006. "Service Marketing Management" Second Edition Jakarta; Salemba Empat.

Republic of Indonesia Law No. 44 of 2009 Concerning Hospitals

RevelationKuntoro Wahyudi Istiono, 2017, Patient Satisfaction with the Quality of Service at the Outpatient Registration Center of the Kretek Bantul Health Center, Yogyakarta

Samsul, S., Fikriyah, D., & Umar, H. (2022). Mobile Banking Service Quality on Customer Satisfaction Between Bank Muamalat and Bank Syariah Indonesia. Adpebi International Journal of Multidisciplinary Sciences, 1(1), Article 1. https://doi.org/10.54099/aijms.v1i1.279

Shan, L. et al. (2016). Patient Satisfaction with Hospital Inpatient Care: Effects of Trust, Medical Insurance and Perceived Quality of Care.*http://journals.plos*.org.

SolichahSupartiningsih, 2017, Quality of Hospital Patient Satisfaction Service: Case of Outpatients

Sugiyono. (2014). Qualitative Quantitative Research Methods and R&D. Bandung: Alfabeta Publisher.

Sugiyono. 2004. "Business Research Methods" Bandung; CV. Alfabeta.

Sugiyono. 2012. "Educational Research Methods - Quantitative, Qualitative, and R&D Approaches, Bandung; Alfabeta

Supartiningsih, S. (2017). Quality of Service and Patient Satisfaction in Hospitals: Case Study of Outpatients. Journal of Medicoeticolegal and Hospital Management, 6 (1): 9-15

Supriyanto & Ernawaty (2010). "Marketing of the Health Services Industry." Yogyakarta, Andi.

Supriyanto, S. & RD Wulandari (2011). "Health Service Quality Management." Surabaya, Health Advocacy: Tree of Light.

WHO (World Health Organization) Official Website. (*www.who.int*)*www.who.int/topics/hospitals/en/*(Accessed on 10-25-2021).

Woldeyohanes, TR, et al. (2015). "Perceived patient satisfaction with inpatient services at Jimma University Specialized Hospital, Southwest Ethiopia." BMC research notes 8(1): 285.

Wulansari, R., & Pratama, M. S. R. (2022). The Influence of Services Quality and Facilities on Patient Satisfaction at Wijaya Kusuma Hospital Lumajang, East Java. Adpebi International Journal of Multidisciplinary Sciences, 1(1), Article 1. https://doi.org/10.54099/aijms.v1i1.254

Xesfingi, S., et al. (2017). "Patient Satisfaction at Tertiary Level Healthcare Services in Greece: Inpatient vs Outpatient Healthcare Services Assessment." International Journal of Health Economics and Policy 2(3): 125.

Yulihardi, Y., Yenni Del Rosa, & Darman. (2022). Servant Leadership, Self Efficacy and Job Satisfaction, on the Performance of Managers of Alahan Panjang Tourism Object, Solok Regency. Asean International Journal of Business, 1(1), 10–23. https://doi.org/10.54099/aijb.v1i1.64

Zeuthaml, Bitner and Gremler. 2007."Service Marketing". Fourth Edition. Prentice Hall; exclusive right by Me Graw-Hill.