



THE DESCRIPTION OF THE QUALITY OF HEALTH SERVICES TO PATIENT SATISFACTION

M. Fais Satrianegara^{1*}, Azriful², Zilfadhilah Arranury³, Nur Azisah Anwar¹

¹Departement of Public Health, Hospital Administration, Faculty of Medicine and Health Sciences, UIN Alauddin Makassar, Indonesia

² Departement of Public Health, Epidemiology, Faculty of Medicine and Health Sciences, UIN Alauddin Makassar, Indonesia

³ Departement of Public Health, Health Administration and Policy, Faculty of Medicine and Health Sciences, UIN Alauddin Makassar, Indonesia

ARTICLE INFORMATION

Received : October 10th, 2020
Revised : October 29th, 2020
Available online : November 1st, 2020

CORRESPONDENCE

Phone : +628114130972
Email : faissatrianegara@uin-alauddin.ac.id,

KEYWORDS

Empathy; Reliability; Satisfaction; Health Services

ABSTRACT

Background: *Quality* health services are health services that can satisfy every service user by the average satisfaction level of the population and its implementation by the established code of ethics and service standards.

Objective: To determine the description of the quality of health services on patient satisfaction in the inpatient installation of the Makassar General Hospital of the Hajj Region in 2019.

Method: The method used is descriptive. The population in this study were patients using inpatient class III RSUD Haji Makassar in 2019 and based on data obtained in May 2019 as many as 848 patients.

Result: The satisfaction service variable shows that of the 89 samples studied, 80 respondents were satisfied (89.9%) and 9 respondents (10.1%) were dissatisfied. The reliability variable (57.3%) is categorized as good and (42.7%) is not good. The responsiveness variable (66.3%) is categorized as good and (33.7%) is not good. The guarantee variable (75.3%) is categorized as good and (24.7%) is not good. The direct evidence variable (53.9%) is categorized as good and (46.1%) is not good. The empathy variable (82.0%) is categorized as good and (18.0%) is not good.

Conclusion: It is hoped that the health workers at the General Hospital of the Hajj Makassar Region will improve performance in prime health service activities to the community, and always prioritize the interests of patients in installations, especially patients in inpatient installations.

INTRODUCTION

Quality health service is a health service that can meet needs and provide infrastructure, quality personnel, clinical service processes, administrative processes, security, trust in health services, and good access. Satisfaction arises from the suitability between the services presented and the patient's expectations (Hadiyati et al., 2017). Two important elements in efforts to improve health services are the level of patient satisfaction as service users and the fulfillment of predetermined service standards.

Hospital as an institution engaged in health services is an institution that functions socially, but with the existence of a private hospital, the hospital is more referred to as an industry engaged in health services by managing based on business entity management.

Haji Makassar Regional General Hospital, South Sulawesi province is one of the hospitals owned by the South Sulawesi provincial government which is located at Tamalate District, Makassar City. Which has a vision and mission, namely to become the most trusted, best Islamic teaching hospital in South Sulawesi in 2020.

Thus the Makassar General Hospital must provide satisfactory services and can improve the quality of service for patients/customers so that patients will feel satisfied with the services provided, especially for basic services such as

outpatient care, inpatient care, emergency care, obstetrics/gynecology, as well as providing support services and referral services.

The General Hospital of the Haji Makassar Region is a hospital that serves and accommodates referrals from the Puskesmas. Hospitals feel the same problem as other hospitals, namely intense competition. The competition that occurs is not only in terms of examination technology, but also tougher competition, namely competition in quality health services. The hospital as a service provider is required to provide better service than other hospitals to achieve patient satisfaction in the hospital. One aspect that needs to be improved is the service aspect in the field of inpatient care.

Patients will feel satisfied if there is a similarity between expectations and the reality of the health services obtained. The satisfaction of health service users is closely related to health service outcomes, both medically and non-medically, such as adherence to treatment, understanding of medical information, and continuity of care. (Amstrong & Kotler, 2003)

The demands of patients for quality services are one of the challenges that must be faced by the hospital because it is said to be of good quality if the perceived delivery exceeds the expectations of its users or the service is satisfactory. Patients are the main customers of the hospital who are the focus of all forms of hospital services and patients will

provide an assessment based on the services they receive and act based on their satisfaction. Patient satisfaction or dissatisfaction depends on the appearance of the services offered about their expectations.

The level of utilization of hospital beds by patients (BOR: *Bed OccupancyRate*) is one of the outcomes of the process of providing health services by the hospital, and BOR (rate of use of beds) is the percentage of bed use in a certain time unit with a BOR parameter value that is ideal is between 60-85%.

The low BOR achieved actually illustrates that the quality of service at the hospital concerned is not yet up to customer expectations. Therefore, as a consequence, if the BOR rate is low, the hospital management must improve the quality of service to patients. (Juwita et al., 2017)

Based on the description above, the description of patient satisfaction with nursing services in the inpatient hospital will be examined in the general Haji Makassar area in 2019.

METHODS

This type of research uses a quantitative research type with a descriptive design. This research was conducted to determine the satisfaction of Inpatient Haji Hospital Makassar. This research was conducted at the General Hospital of the Haji Makassar Region in 2019. The population in this study were patients who used the class III inpatient care room of RSUD Haji Makassar,

and based on data obtained in May 2019, there were 848 patients. The sample of this research is patients who are using inpatient class III RSUD Haji Makassar. The data is presented in the form of a frequency distribution table accompanied by an explanation and then analyzed descriptively.

RESULTS

This research was conducted from 29 November to 11 December 2019 at the Makassar General Hospital. Methods of data collection using questionnaires to 89 respondents. Univariate data analysis with frequency distribution tables and bivariate analysis accompanied by narration.

Characteristics of Respondents

Based on table 1, it shows that the frequency distribution of the characteristics of the Respondents from the research variables is as follows, *Genders* shows that from 89 samples it can be seen that the female gender is 59 respondents (66.3%) while the male gender is 30 respondents (33.7%). *Ages* shows that from 89 samples, it can be seen that the number of respondents is mostly found at the age of 20-39 years as many as 56 respondents (62.9%) while the lowest is respondents aged 80-99 years as many as 1 respondents (1.1%). *Education* shows that the highest respondent according to education level from 89 samples is 49 respondents (55.1%) who graduated from high school and 9 respondents (10.1%) who graduated from elementary school. *Jobs* Menunjukkan that of 89 samples the highest level of private-sector employees

working a total of 18 respondents (20.2%) and the least that farmers were 12 respondents (13.5%).

Table 1. Characteristics of respondents

| Characteristics | Amount n (89) | Percentage (%) |
|------------------|------------------|-------------------|
| Age | | |
| 20 - 39 | 56 | 62.9 |
| 40 - 59 | 28 | 31.5 |
| 60 - 79 | 4 | 4.5 |
| 80 - 99 | 1 | 1.1 |
| Gender | | |
| Male | 30 | 33.7 |
| Female | 59 | 66.3 |
| Education | | |
| S1 | 18 | 20.2 |
| Elementary | 9 | 10.1 |
| SchoolHigh | 49 | 55.1 |
| junior school | 13 | 14.6 |
| Worker | | |
| IRT | 13 | 14.6 |
| Private | 18 | 20.2 |
| Trader | 17 | 19, 1 |
| PNS | 14 | 15,7 |
| Farmer | 12 | 13,5 |
| Not Working | 15 | 16,9 |

Source: primary data, 2019

Univariate analysis

Based on table 2, shows that *Reliability* shows that of the 89 samples studied in the reliability category, 51 respondents (57.3%) said it was good and 38 respondents (42.7%) said it was not good. *Responsiveness* shows that of the 89 samples studied to the category of responsiveness are 59 respondents (66.3%) said both and 30 respondents (33.7%) said unfavorable. *Assurance* shows that of the 89 samples studied to category Warranty contained 67 respondents (75.3%) said it was good and 22 respondents (24.7%) said it was not good.

Tangibles shows that of the 89 samples studied in the direct evidence category, 48 respondents (53.9%) said it was good and 41 respondents (46.1%) said it was not good. *Empathy* shows that of the 89 samples studied in the empathy category, 73 respondents (82.0%) said it was good and 16 respondents (18.0%) said it was not good. *Patient Satisfaction* shows that of the 89 samples studied in the satisfaction category, 80 respondents (89.9%) said they were satisfied and 9 respondents (10.1%) said they were not satisfied.

Table 2. Distribution of respondents based on the quality of service

| Quality of Service | Number n(89) | Percentage (%) |
|------------------------|-----------------|-------------------|
| Reliability | | |
| Less Good | 38 | 42.7 |
| Good | 51 | 57.3 |
| Response | | |
| GoodLess | 30 | 33.7 |
| Good | 59 | 66.3 |
| Guarantee | | |
| Less Good | 22 | 24.7 |
| Good | 67 | 75.3 |
| direct evidence | | |
| GoodLess | 41 | 46.1 |
| Good | 48 | 53.9 |
| Empathy | | |
| Less Good | 16 | 18.0 |
| Good | 73 | 82.0 |
| Satisfaction | | |
| less good | 9 | 10.1 |
| Good | 80 | 89.9 |

Source: primary data, 2019

DISCUSSION

Description of Patient Satisfaction with Nursing Services

Based on the results of the study, 89 respondents expressed satisfaction with the nursing services provided. In this case, the nursing service in question includes five dimensions of service quality *reliability* (reliability), namely the ability of nurses to provide the promised service immediately, *responsiveness* namely the desire of nurses to provide responsive service, *assurance* namely the competence possessed so that provide a sense of security free from danger, risk or doubt and certainty which includes knowledge, politeness, and trustworthiness possessed by nurses, *tangible* (direct evidence) which includes physical facilities, equipment used, nurses and means of information/communication, and *empathy* (empathy), namely the nature of and the ability to give full attention to the patient, ease of contact, good communication, and understand the patient's individual needs.

In the dimension of reliability,

In general, respondents expressed satisfaction with the nurse's ability to handle patient care problems appropriately and professionally, the nurse clearly informed the things that were prohibited in treatment, and the timing of the nurse arriving at the room when needed. The nurse must be able to communicate well with the patient and the patient's family. There is communication that interacts between the patient and the nurse and there is a good relationship with the patient's family.

In the dimension of responsiveness (responsiveness),

in general, respondents expressed satisfaction with the attitude of the nurse in offering help when experiencing difficulties even without being asked, the nurse immediately handled the patient when he arrived at the room, and the nurse helped to carry out photos and laboratories at the hospital. A responsible attitude must be owned by nurses because this aspect includes the attitude of nurses who are honest, diligent in their duties, able to devote time and attention, sportsmanship in tasks, consistent and appropriate in their actions.

Islam encourages every service provider to have a professional attitude, namely being able to work quickly and precisely so as not to waste the mandate that is their responsibility, as Allah SWT says in QS AsSaff / 61: 2 and 3:

يَا أَيُّهَا الَّذِينَ ءَامَنُوا لِمَ تَلُمُونَنَا ۚ وَتَبِ مَقَنَّا عِنْدَ اللَّهِ أَنْ تَقُولُوا مَا لَا تَفْعَلُونَ ۚ ۃ

The translation:

O people, who believe, why do you say something that you do not do? There is so much hatred with Allah that you say what you do not do (Departemen Agama Republik Indonesia, 2010)

The verse above emphasizes the importance of commitment in carrying out duties for a nurse. There is great anger from God to nurses when their actions violate the

commitment of the nursing tasks they carry. To become a professional nurse, you must have a high commitment to providing maximum nursing services as a professional responsibility.

In the dimension of assurance (assurance),

in general, respondents expressed satisfaction with the nurse's attention to complaints that the patient felt, the nurse could answer questions about the treatment given to the patient, the nurse always greeted and smiled when meeting the patient, and the nurse was thorough and skilled in carrying out nursing actions to the patient. This aspect needs to be possessed by nurses because these aspects include the ability of nurses to provide services, for example, knowledge of medical handling, skills, and sincerity in serving patients and their families so that they can generate trust and confidence including politeness and respect for patients and their families.

In the tangible dimension (direct evidence),

in general, respondents said they were satisfied with the information about the applicable administration for patients that was conveyed by the nurse, the nurse maintained the cleanliness and readiness of the medical equipment used, and the nurse always maintained its neatness and appearance. This aspect needs to be owned by nurses because the appearance of direct evidence and delivery of good and clear information/communication will affect the

patient's perception of the nursing service provided.

Regarding this empathy attitude, Rasulullah SAW:

المؤمن للمؤمن كالبنيان يشد بعضه بعضاً Said

Meaning:

"From Abu Hurairah, he said: Rasulullah saw, said, 'the believers are part of one building. (Al-Bukhari & Ismail, 2011)

The above hadith indirectly teaches us to be able to feel what other believers feel. When he is sick, we feel sick too. When he is happy we feel happy too. Allah Almighty tells mankind to empathize with each other. Caring for and helping others in need. Allah SWT is very angry with people who are selfish and arrogant.

In the dimension of empathy (empathy)

In general, respondents expressed satisfaction with the attitude of nurses who often visited and examined patient complaints such as measuring blood pressure, temperature, pulse, breathing, intravenous fluids, services provided by nurses did not look at the rank/status but based on the patient's condition and the nurse's attention and gave moral support. to the state of the patient. This aspect needs to be possessed because nurses in providing nursing services need to be patient, generous in the sense that they are willing to voluntarily provide assistance and assistance to patients without expecting anything in return, have sensitivity and are sensitive to any changes in the patient,

are willing to understand the patient's anxiety and fear.

Satisfaction is after a person compares the perceived performance/results with his wishes. According to Azrul (1994) patient satisfaction is a reflection of the quality of health services they receive (Supartiningsih, 2017). Patients feel satisfied when their hopes are fulfilled or will be very satisfied if their expectations are exceeded, as Allah SWT says in QS Ibrahim / 14: 7 which means:

Dan (remember also), when your Lord announces; "Indeed, if you are grateful, surely we will add (favors) to you, and if you deny (My favors), then, in fact, My punishment is very painful" (Departemen Agama Republik Indonesia, 2010)

A nurse's personal approach to patients with a friendly and communicative attitude. will satisfy the inner feelings of a patient so that a patient does not prioritize or pay too much attention to the services of a hospital administratively through the existing service provision approach. A patient according to the research results craves a family approach because they feel part of the hospital care system.

Another factor is also caused by the fact that nurses prioritize the needs of patients or their families, as well as their attention to complaints from patients. In line with the theory put forward by Tamsuri (2005) that nurses must also actively assist clients and provide opportunities for clients and families to get as much information as possible about

plans of care and hospitalization carried out on clients. Nursing services get more value than doctor services because there are more patient interactions with nurses than doctors so that the influence of nurses on the level of patient satisfaction is very large. And it is also said that one form of service provided by nurses that can provide satisfaction to patients is the nurse's response to patient complaints. Based on the quality of service from the five variables, there were 9 respondents (10.1%) expressed dissatisfaction with nursing services. According to researchers, when service is not good it will result in dissatisfaction. It is very clear that if the nursing service is not good, it will have an impact on patient satisfaction. In general, patients state that what is still considered lacking is the dimension *tangibles* (reality), namely the problem of nurses maintaining the cleanliness and tidiness of the room the respondent occupies and maintaining cleanliness and completeness of bathroom facilities. and toilets, as well as the dimension *responsiveness* (responsiveness) in terms of assistance in obtaining drugs, because based on research, this is done by the patient's family, not by the nurse.

The service approach based on the mechanism of the nursing system in the hospital according to the standards of nursing services can satisfy the nurse, but on the other hand, the patient does not feel psychologically satisfied even though it can be said to be cured of his illness. Other factors can also be

caused due to patient characteristics based on age and patient education, the frequency of age 27-36 years is the most and most patients have high school education and Higher Education.

The possibility of the maximum service provided by the nurse is not well received by the patient because the demands are too many and they know the various maximal service arrangements. This shows that patients who are hospitalized are of a productive age or adult age. This is in line with the theory *Hurlock* that in middle adulthood people are productive, so the demands of patients are usually too high. (Amalia et al., 2018)

According to Imbalo in Tamsuri (2005) that efforts to obtain the information needed to measure the level of patient satisfaction will be faced with a cultural constraint, namely a tendency for people to be reluctant or unwilling to express criticism or what is called a normative effect. This is supported by Tamsuri (2005), in accepting new clients, nurses must actively help clients get facilities both administratively and procedurally. The nurse helps the client to go to the ward, put him in the ward as well as check the completeness of the equipment needed by the client in the ward. Furthermore, the nurse introduces herself, submits various information about hospital regulations, orientates the client to the ward and the equipment in it, and provides other information about hospital policies.

This research is supported by the research results of Sofiyana & Yusuf (2017). The study stated that there was a relationship between the quality of nurse services and the satisfaction of inpatients. Good service quality will result in a high level of patient satisfaction. In its implementation as a private hospital in the field of health services which is very important for the community, the accuracy and speed of time in providing nursing services is the key to success in providing patient satisfaction.

According to Purnomo (2004), nursing services have a strategic position in determining the quality of health services in hospitals because the number of nurses is the largest and the most contact with patients. Nurses provide services for 24 hours continuously to patients so that they are the only health profession in the hospital that gives a lot of perceptions of health services to patients.

According to Amstrong & Kotler (2003), patient satisfaction will be achieved if optimal results are obtained for each patient and health services pay attention to the ability of patients or their families, attention to complaints, physical environmental conditions, and responsiveness or prioritizing patient needs.

Meanwhile, several studies suggest to hospitals to improve patient satisfaction by improving the quality of service which consists of reliability, responsiveness, assurance, empathy and physical appearance.

Empathy is the most influential factor in increasing patient satisfaction. The Empathy attitude of nurses towards patients greatly impacts patient satisfaction where the patient's needs will increase from time to time, as well as the demands of the patient's needs for the quality of service provided. Good or bad behavior of service providers determines the success of a job done. (Hastuti et al., 2017; Ramli, 2018; Sitompul, 2018; Soekiyono, 2017; Suryati et al., 2017)

So that researchers assume that the hospital is considered good if in providing services more attention to the needs of patients and other people who visit the hospital. Satisfaction arises from the patient's first impression of the nursing services provided, for example, fast, responsive, and friendly nurse services in providing nursing services.

The results of this study are supported by research conducted by Purwanti et al. (2017) which states that there is a significant relationship between nurse services and outpatient satisfaction at Puskesmas Wisata Dau Malang. Service quality has a close relationship with patient satisfaction, where quality provides an encouragement for patients to form strong ties with parties at the Puskesmas Wisata Dau Malang. Quality of service is any activity or benefit provided by health services to patients which basically saves lives and accelerates the healing of all illnesses suffered by patients. Patient

satisfaction is one of the success actions of nurses in fostering good relationships with patients through good techniques and attitudes while providing nursing care to patients. The better the nurse's service is related to the ability of nurses to provide explanations about matters related to medical action, as well as the ability to provide a sense of security and a polite attitude in providing services to patients, the more satisfied patients are as service recipients.

The results of this study are also in line with research conducted by Mailani & Fitri, (2017) which states that there is a significant relationship between nurse caring behavior and satisfaction levels in BPJS patients (p value = 0.002). It can be concluded that the better the caring behavior of nurses in providing nursing services to patients, the better the level of patient satisfaction with nursing services. It is recommended for RSUD dr. Rasidin Padang to improve nurse caring behavior by holding training or seminars on nurse caring behavior so that nurses can apply caring behavior to patients.

In a study conducted by Sitompul (2018) in the emergency department at Pabatu Hospital PTPN IV, it was stated that the variable most related to patient satisfaction is empathy. Other variables studied are Tangible, Reliability, Responsiveness, Assurance. The empathy for services in the hospital is shown by the willingness of nurses who always remind security to save the

patient's and their families' valuables, nurses who take the time to consult with the patient's family, nurses who encourage patients to recover quickly and pray for them, nurses take special time to communicating with patients, nurses who try to calm the patient's anxiety about their illness, and nurses who are friendly in providing services.

CONCLUSION

Patient satisfaction in the inpatient installation of the Makassar Hajj Regional General Hospital in 2019 which is a combination of the five patient satisfaction service variables (reliability, direct evidence, responsiveness, assurance, and empathy) shows that of the 89 samples studied there were respondents who were satisfied with 80 respondents (89.0%) and dissatisfied categories of patient satisfaction were 9 respondents (10.1%). 1) Patient satisfaction in the inpatient installation of the Makassar General Hospital of the Makassar Hajj Region in 2019 from the reliability variable of 57.3% is categorized as good and 42.7% is not good. 2) Patient satisfaction in the inpatient installation of the Makassar General Hospital of the Makassar Hajj Region in 2019 from the responsiveness variable of 66.3% is categorized as good and 33.7% is not good. 3) Patient satisfaction at the inpatient installation of the Makassar General Hospital of the Makassar Hajj Region in 2019 from the guarantee variable of 75.3% is categorized as good and 24.7% is not good. 4) Patient satisfaction at the inpatient installation of the

Makassar General Hospital of the Makassar Hajj Region in 2019 from the direct evidence variable, 53.9%, is categorized as good and 46.1% is not good. 5) Patient satisfaction at the inpatient installation of the Makassar General Hospital for the Hajj Region in 2019 from the variable empathy 82.0% are categorized as good and bad 18.0%.

SUGGESTION

The health workers of the Makassar Hajj Regional General Hospital are expected to improve performance in prime health service activities to the community, and always prioritizing the interests of patients in the installation, especially patients in inpatient installations. 1) The General Hospital of the Hajj Makassar Region is expected to be able to maintain and improve the quality of the existing human resources at the Makassar General Hospital. 2) The Makassar City Health Office is expected to be able to assist in a policy related to improving services in the scope of health personnel both medical and non-medical in all hospitals in South Sulawesi to increase patient satisfaction with services in the hospital. 3) The next researcher is expected to use a variable that is different from the variables in this study, to get a comparison.

REFERENCES

- Al-Bukhari, A. A. M. bin, & Ismail, E. H. (2011). *Ensiklopedia Hadits; Shahih al-Bukhari 1, Terjemahan Masyhar dan Muhammad Suhadi*. In *Alhamira*. Almahiracet I.

- Amalia, D., Rachmawati, D. A., & Hairrudin, H. (2018). Hubungan Indeks Kepuasan Pasien tentang Mutu Pelayanan Dimensi Keandalan dengan Minat Berobat Kembali di RSD Kalisat Kabupaten Jember (Correlation between Patient Satisfaction Index in Reliability of Service Quality and Utility at RSD Kalisat Jember). *Pustaka Kesehatan*, 6(2), 278–284.
- Amstrong, & Kotler, P. (2003). *Manajemen Pemasaran*. PT. Indeks Gramedia.
- Departemen Agama Republik Indonesia. (2010). *Al-Qur'an Al-Karim dan Terjemahannya*. Halim.
- Hadiyati, I., Sekarwana, N., Sunjaya, D. K., & Setiawati, E. P. (2017). Konsep Kualitas Pelayanan Kesehatan berdasar atas Ekspektasi Peserta Jaminan Kesehatan Nasional. *Majalah Kedokteran Bandung*, 49(2), 102–109.
- Hastuti, S. K. W., Mudayana, A. A., Nurdhila, A. P., & Hadiyatama, D. (2017). Hubungan Mutu Pelayanan dengan Kepuasan Pasien Peserta BPJS di Rumah Sakit Umum Daerah Yogyakarta. *Kes Mas: Jurnal Fakultas Kesehatan Masyarakat*, 11(2), 161–168.
- Juwita, G. S., Marlinae, L., & Rahman, F. (2017). Hubungan Mutu Pelayanan Dengan Kepuasan Pasien Rawat Inap Di Rumah Sakit Umum Daerah Tamiang Layang. *Jurnal Publikasi Kesehatan Masyarakat Indonesia*, 4(2).
- Mailani, F., & Fitri, N. (2017). Hubungan perilaku caring perawat dengan tingkat kepuasan pasien bpjs di ruang rawat inap rsud dr. Rasidin padang. *Jurnal Endurance: Kajian Ilmiah Problema Kesehatan*, 2(2), 203–208.
- Purwanti, S., Prastiwi, S., & Rosdiana, Y. (2017). Hubungan pelayanan perawat dengan kepuasan pasien rawat jalan di Puskesmas Wisata Dau Malang. *Nursing News: Jurnal Ilmiah Keperawatan*, 2(2).
- Ramli, R. (2018). Analisis Faktor-Faktor yang Berhubungan dengan Kepuasan Pasien pada Pelayanan Kesehatan di Puskesmas Teppo Kabupaten Pinrang. *Hibualamo: Seri Ilmu-Ilmu Alam Dan Kesehatan*, 2(2), 69–77.
- Sitompul, N. S. M. (2018). Faktor-Faktor yang Mempengaruhi Kepuasan Pasien IGD di Rumah Sakit Pabatu PTPN IV Tahun 2017. *Jurnal Ilmiah Maksitek*, 3(3).
- Soekiyono, S. (2017). Analisis faktor yang memperanguruhi kepuasan pasien badan pelayanan jaminan sosial (BPJS) kesehatan pada rumah sakit jabodetang. *Derivatif: Jurnal Manajemen*, 11(1).
- Sofiyana, D. A., & Yusuf, E. (2017). Hubungan Kualitas Pelayanan Perawat dengan Kepuasan Klien di Ruang Rawat Inap Marwah Rumah Sakit Islam Muhammadiyah Sumberrejo Bojonegoro. *Jurnal Hospital Science*, 1(1).
- Supartiningsih, S. (2017). Kualitas pelayanan kepuasan pasien rumah sakit: kasus pada pasien rawat jalan. *Jurnal Medicoeticolegal Dan Manajemen Rumah Sakit*, 6(1), 9–15.
- Suryati, S., Widjanarko, B., & Istiarti, V. G. T. (2017). Faktor-Faktor yang Berhubungan dengan Kepuasan Pasien BPJS terhadap Pelayanan Rawat Jalan di Rumah Sakit Panti Wilasa Citarum Semarang. *Jurnal Kesehatan Masyarakat (e-Journal)*, 5(5), 1102–1112.
- Tamsuri, A. (2005). *Komunikasi dalam Keperawatan*. Penerbit Buku Kedokteran EGC.