# EFFECT OF SERVICE QUALITY TOWARDS PATIENT SATISFACTION AT THE PUBLIC HEALTH CENTRE OF SITU GINTUNG SOUTH TANGERANG

by

Drs. Sunanto, APT., MM sunantoapt@gmail.com

# Faculty Member of Pamulang University

#### **ABSTRAK**

Tujuan dari penelitian ini adalah untuk mengetahui pengaruh kualitas layanan terhadap kepuasan pasien pada Puskesmas Situ Gintung Tangerang Selatan. Penelitian bersifat deskriptif kuantitatif dengan pengujian hipotesis. Populasi dalam penelitian ini adalah pasien Puskesmas Situ Gintung dan jumlah sampel berdasarkan Slovin berjumlah 100 (digenapkan), sampling dengan teknik aksidental. Metode pengumpulan data melalui kuesioner dengan skala Likert, observasi, dan studi kepustakaan. Teknik analisis data: Uji Validitas, Uji Reliabilitas, Uji Regresi Linier, Uji Koefisien Determinan, Uji Hipotesis (Uji t). Hasil Penelitian diperoleh: Terdapat pengaruh yang positif dan siginifikan antara kualitas layanan terhadap kepuasan pasien pada Puskesmas Situ Gintung Tangerang Selatan. Model regresi linier Y = 1,220 + 0,908X, nilai R=0,908 (korelasi positif sangat kuat), dan Nilai kontribusi adjusted R² sebesar 0,823 serta Nilai t hitung 21,473 (> t tabel 1,660), nilai sig. 0,000 (<0,05).

**Keywords:** Quality of Service, Patient's Satisfaction, Public Health Centre of Situ Gintung

## INTRODUCTION

Patient satisfaction, especially in Public Health Centers (*Puskesmas*), is one of the goals and the means to realize the vision and mission of the Public Health Center. With the satisfaction of patients, Public Health Centers may reflect how the quality of service that has been delivered to the people. High patient satisfaction is a reflection of the quality and service excellence. Patient satisfaction can help Public Health Center to realize the other functions in terms of promoting and preventing aspects. Patients who are satisfied can be a health ambassador for himself and for other people.

One of the critical determinant variables of patient satisfaction is the quality of service. Public Health Center of Situ Gintung, located in the Village of Serua, Ciputat, as a first-level health facilities (primary), has a good concern regarding the quality of service that is visible from the vision and mission. To improve the sustainability health of Serua, as the vision, to do with the concept of service quality as stated in its mission of serving the community in a professional manner with a vengeance. With the concept of the quality services, the Public Health Center of Situ Gintung from time to time required to always improve the quality of professional services.

In the era of National Health Insurance (*Jaminan Kesehatan Nasional*), where convenience and access for patients to health services increased, especially in Public Health Centre of, operationalization of the vision and mission of Public Health Centre of Situ Gintung-based quality of service is demanded real presence by the public Serua especially patients who went to the public health center. These conditions cause an increase in the number and frequency of patient visits, either for treatment or who simply ask for a referral doctor, which means increased demand for health care needs increased. The increasing demand or need must be addressed with services quality that more professional of the Public Health Centre of Situ Gintung as a primary public health services.

Public Health Centre of Situ Gintung has coverage which includes the Village Serua with the total population, according to data from the Village Serua 2015 that quoted from the website of the Department of Health South Tangerang City, as many as 37,954 people. Meanwhile the amount of human resources that available currently

are 4 General Practitioners and 1 dentist, and 15 other health professionals. When viewed its coverage, the amount of human resources owned is still not impartial. With the increasing number of visiting patients, its condition is potentially increasing the workload and can cause fatigue, which in turn has the potential to degrade the quality of service to patients. Potential loss of quality of service can be seen from the share indicators e.g. decreased empathy, patient waiting times are getting longer, less comprehensive information especially drug information received, the rush of service, can lead to inaccuracies in the process and/or outcome, and so forth.

Machine building facilities and medical equipment is an infrastructure that can help improve the quality of service to patients. Building condition and facilities of health centers Situ Gintung despite already meet the standards but relatively limited in maximizing patient care. Other phenomena are the waiting room of patients who do not have air conditioning, patient examination rooms are relatively small, the parking is not adequate, and the room layout is not optimal for the purpose of quality services.

Based on this background, the authors want to do research or marketing research deeper into the aspects of these aspects by taking the title: "Influence of Service Quality towards Patient Satisfaction in Situ Gintung Public Health Center South Tangerang."

# Research purposes

Based on the formula above problems, the objectives of this study are:

- 1. To determine the quality of service in Public Health Center of Situ Gintung South Tangerang
- 2. To determine the patient Satisfaction in Public Health Center of Situ Gintung South Tangerang
- 3. To know the influence of the quality of service towards patient satisfaction in Public Health Center of Situ Gintung South Tangerang

## LITERATURE REVIEW

#### **Customer Satisfaction**

Kotler (2009: 164) states "In general, satisfaction is a person's feelings of pleasure or disappointment that result from Comparing a product's perceived performance (or outcome) to Reviews their expectation". According to Kotler, the Indonesian edition book translation (2009: 139), "in general, customer satisfaction is feeling happy or disappointed someone who emerged after comparing the performance of perceived product (or result) to their expectations". Based on the definition above, in the context of this research, the customer is a patient of Public Health Center of Situ Gintung, and so the term customer refers to the patient.

According to Kotler (2009: 164), if performance fails to meet expectations, customers will be dissatisfied. If performance in line with expectations, the customer will be satisfied. If performance exceeds expectations, the customer will be very satisfied. Customer expectations derived from the experience of past purchases, the advice of friends or colleagues, as well as the information and the company's promise and also a competitor. If the company raised expectations too high, buyers will be disappointed. However, if the company sets expectations too low, it will not attract enough buyers (though the company will be able to satisfy those who buy).

According to Schiffman and Kanuk(2008: 225) customer satisfaction is a sense of excitement to the performance of a product or service compared with expectations. Schiffman says there are three main dimensions used to measure customer satisfaction:

 Cognitive: knowledge and perception are obtained by a combination of direct experience with the attitude object and related information from various sources.
These aspects include awareness and knowledge

- 2. Affective: dimensions associated with emotions or how consumers feel about the object. These aspects include liking, preference, and a conviction
- 3. Conative: This dimension relates to the possibility or tends that person will perform a special act or behave in a certain way on a certain object. According to some interpretations, conative dimensions may include actual behavior itself.

# **Quality of Service**

In his book, Marketing Management, Kotler (2009: 143) states that satisfaction also depends on the quality of products or services. According to Kotler (2009: 143) quality is the totality of features and characteristics of the products or services that depend on its ability to satisfy stated or implied needs. This is the definition of customer-centered. With a customer-centered, quality is definitely the key to value and customer satisfaction.

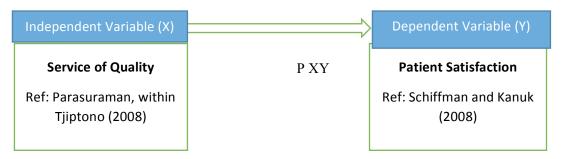
According Tjiptono (2008: 85), quality of service is an attempt to meet the needs and desires of consumers and delivery accuracy in balancing the expectations of consumers. With superior service quality can provide a variety of benefits, including the creation of a harmonious relationship between the company and its customers. According Tjiptono (2008: 54) quality of service is closely linked to customer satisfaction.

According to Parasuraman, in Tjiptono Fandy (2008: 95), the main dimensions of service quality include:

- 1. Reliability
- 2. Responsiveness
- Assurance

- 4. Empathy
- 5. Physical evidence

Figure 2.1. Framework Research



# **Research Hypothesis**

Aritonang (2007: 26) describes research hypothesis serves as a temporary answer to the problem of research. Based on the formulation of the problem and a literature review, the proposed hypothesis of the study as follows:

H0: Allegedly there is a positive and significant impact on the quality of service to patient satisfaction at Public Health Center of Situ Gintung South Tangerang.

H1: Allegedly there is a positive and significant impact on the quality of service to patient satisfaction at Public Health Center of Situ Gintung South Tangerang

#### RESEARCH METHODOLOGY

## The scope of research

This research was conducted in Public Health Center of Situ Gintung, Kp. RT 03/01 Serua Bulak village, Ciputat, South Tangerang. When the study was conducted in January 2017 - February 2017. This study is descriptive quantitative hypothesis testing.

# **Determination Population and Sample**

According Aritonang (2007: 95) overall elements of the research object is called the population, while the proportion of the population is called a sample. Istijanto (2009: 113) states that the sample population had a very close relationship. The population in this study was patient of Situ Gintung Public Health Center South Tangerang. The sampling technique using the technique of accidental *(accidental sampling)* or *convenience sampling*, which according Istijanto (2009: 125), is a sampling technique based on convenience, which respondents selected because of their presence at the time and place where research is being conducted. The sample size of the population by using the formula of Slovin, in Umar (2005) and e = 0.1 obtained a sample number of 98.4 or rounded to 99 respondents. In practice taken 100 respondents.

## **Data Source Research**

This study uses primary data sources and secondary data. Primary data in this study is data on the variables examined from Public Health Center of Situ Gintung through questionnaires and interviews. Secondary data sourced from Public Health Center of Situ Gintung Serua and web sites of Health Department South Tangerang City and other sources related.

## **Method of Collecting Data**

In this study data collection through observation, questionnaires, interviews, and literature study. The collection of data through questionnaires using *Likert* Scale intended to seek primary data about the quality of service and patient satisfaction. Alternative answers to the questionnaire as follows:

For variable X or Y:

Score Alternative Answers

1. Strongly Disagree (STS) or Very Satisfied (STP)

Proceedings • International Seminar 2017

2. Disagree (TS) or Dissatisfied (TP)

3. Doubt (R) or Doubt (R)

4. Agree (S) or Satisfied (P)

5. Strongly Agree (SS) or Very Satisfied (SP)

**Data Analysis Method** 

Methods of data analysis used in this research is (SPSS) as follows:

1. Validity Test

Wijaya (2011: 114): Validity demonstrated the reliability and accuracy of measuring

instruments in carrying out the measuring function. The formula used is Product

Moment Correlation Coefficient. Testing criteria:

r count  $\leq$  r table: the instrument is not valid

r count> r table: the instrument is valid

2. Reliability Test

Reliability is an index that indicates the extent to which a measuring instrument is

reliable or unreliable. Reliability tests performed using Cronbach Alpha (ac)

method. Testing criteria:

r ac count < r table: variables are not reliable

r ac count > r table: variable are reliable

3. Product Moment Correlation

Correlation test used to examine the relationship between the independent variables

and the dependent variable (Sugiyono, 2010: 213). The formula for testing the

correlation in this study using *Product Moment* Correlation.

82

Table. 3.1 Interpretation guidelines

No	Interval	Information
1	0.000 to 0.199	Very low
2	0.200 to 0.399	Low
3	0.400 to 0.599	Moderate
4	0.600 to 0.799	Strong
5	0.800 to 1.000	Very strong

Source: Sugiyono (2010: 250)

# 4. Test Coefficient of Determination

The coefficient of determination  $(R^2)$  is a test apparatus used to determine the extent of the relationship between the independent variable X and the dependent variable Y, or how much (in percentage) contribution of variable X to variable Y.

# 5. Simple Linear Regression Test

Wijaya (2011: 91) states that the regression analysis aims to analyze the influence of independent variables on the dependent variable. In the present study a simple linear regression was used to test the effect of variable X to Y. in the simple regression equation: Y = a + bX

Y = Patient satisfaction; A = intercept; b = regression coefficient; X = Quality of service

The positive effects indicate that the independent variable (X) to change the direction of the dependent variable (Y). The negative effect indicates that the independent variable (X) turned opposite to the dependent variable (Y).

# 6. Hypothesis Test (t test)

Used to test the significance of variations between variables Xn and Y, if the variable X significant effect on the dependent variable (Y).

# **Variable Operational Research**

## **Variable Dimension Statement**

Quality of Service (Variable Independent)

Tangible	Question number 1-2
Reliability	Question number 3-4
Response	Question number 5-6
Warranty	Question number 7-8
Empathy	Question number 9-10

Customer Satisfaction (Variable Dependent)

Cognitive	Question number 11-13
Affective	Question number 14-17
Connative	Question number 18-20

# **RESULTS & DISCUSSION**

# A. Research Object

This study was conducted on patients who are being treated at the Public Health Center which is located in Situ Gintung Kp. RT 03/01 Serua Bulak village, Ciputat, South Tangerang.

# **Testing Requirements Analysis**

# 1. Validity Test

With a sample of 100 respondents, 10% error rate, the importance of the r table at 0.165. Instruments of all items in the questionnaire (10 items and 10 items for X to Y) were tested using *product moment* correlations in Table 4.1 and Table 4.2. The test results of all items worth more than r table. Thus concluded the entire item statement X, and Y are valid.

Table 4.1. Item Test Result Validity of variable X

item X	1	2	3	4	5	6	7	8	9	10
T count	0679	0693	0819	0758	0520	0603	0352	0392	0819	0758
T table	0165	0165	0165	0165	0165	0165	0165	0165	0165	0165
result	valid									

Sources: Primary data processed

Table 4.2. Item Test Result Validity of variable Y

item Y	1	2	3	4	5	6	7	8	9	10
T count	0788	0731	0699	0696	0671	0.69	0534	0765	0508	0.66
T table	0165	0165	0165	0165	0165	0165	0165	0165	0165	0165
result	valid									

Sources: Primary data is processed

# 2. Reliability Test

With a sample of 100 rsponden, an error rate of 10%, then we got the *ac* r-table at 0.165. Of all the variables (X and Y) was examined by value *Chronbach's Alpha* or r- *ac* count in table 4.3. Results of testing all the variables value is greater than r- *ac* tables. Thus concluded all the variables in this study is reliable.

**Table 4.3. Reliability Test Results** 

Variable	r-ac count	r-ac table	result
variable X	0838	0165	reliable
variable Y	0868	0165	reliable

Sources: Primary data processed

# A. Test of the Coefficient Correlation and Determination

From table 4.4 below shows that the model has a correlation coefficient (r) of 0.908 with a coefficient of determination (adjusted R-square) of 0.823 or 82.3%

**Table 4.4. Model Correlation Coefficient and Determination** 

Model	R	R Square	Adjusted R Square
1	.908 <sup>a</sup>	.825	.823

a. Predictors: (Constant), Tot\_Kualitasb. Dependent Variable: Tot Kepuasan

Sources: Primary data processed

# **B.** Simple Linear Regression Model

The simple linear regression model was used to test the effect of variable X to Y. The results of the analysis in Table 4.5 shows the influence of the variable quality of service (X) on patient satisfaction (Y) with a model of the following equation: Y = 1.220 + 0.908X

**Table 4.5. Linear Regression Model** 

		standardized Coefficients	standardized Coefficients	t	Sig.
	В	Std. Error	beta	ľ	516.
(Constant)	1220	1,666		.732	.466
Tot_Kualitas	.949	.044	.908	21,473	.000

a. Dependent Variable: Total Satisfaction

Source: Primary Data Processed

# C. Hypothesis testing

**1. Hypothesis Testing** (Effect of X to Y) by t test

From the output of the data obtained the following results:

Simple Linear Regression Y = 1.220 + 0.908X

Rated R = 0.908 and adjusted R square = 0.823

T value of 21.473 with p.sig. = 0.000 and t value tables (100, 95%) = 1,660

Critical region, H = 0 is rejected if p.sig. <0,05

Because t count> t table and p.sig. <0.05 then H = 0 is rejected and  $H \neq 0$  accepted.

## D. Discussion

 Quality of services provided by the Public Health Center to the patient Situ Gintung

Table 4.6 Respondents answer on the Quality of Service

Quality of Service	Average Strongly Agree	Average Agree	Total
tangible	16.5%	42.5%	59.0%
reliability	14.5%	41.5%	56.0%
responsiveness	18.0%	49.0%	67.0%
security	16.0%	48.5%	62.5%
empathy	14.5%	41.5%	56.0%

a. **Tangible**: Respondents stated strongly agree and agree the total average of 59.0%, and the remaining 41.0% undecided and did not agree. When viewed from the scale Sugiyono, tangible indicators

- *(tangible)* by respondents included in the interval with a moderate interpretation.
- b. **Reliability**: Respondents stated strongly agree and agree the total average of 56.0%, and the remaining 44.0% undecided and did not agree. When viewed from the scale Sugiyono, indicators of reliability *(reliability)* by respondents included in the interval with a moderate interpretation.
- c. **Responsiveness**: Respondents stated strongly agree and agree the total average of 67.0%, and the remaining 33.0% undecided and did not agree. When viewed from the scale Sugiyono, indicator responsiveness *(responsiveness)* by respondents included in the interval with either interpretation.
- d. **Assurance**: Respondents stated strongly agree and agree the total average of 62.5%, and the remaining 37.5% undecided and did not agree. When viewed from the scale Sugiyono, indicators Assurance (Assurance) based on respondents' answers included in the interval with either interpretation.
- e. **Empathy**: Respondents stated strongly agree and agree the total average of 56.0%, and the remaining 44.0% undecided and did not agree. When viewed from the scale Sugiyono, indicator responsiveness (responsiveness) by respondents included in the interval with the interpretation is quite good.
- f. Variable Quality of Service: Respondents stated strongly agree and agree the total average of 60.1%, and the remaining 39.9% undecided and did not agree. When viewed from the scale Sugiyono, variable quality of service overall by respondents included in the interval with either interpretation.

2. Patient satisfaction over the quality of services provided by Public Health Centers Situ Gintung:

Table 4.6 Respondents answer on the Quality of Service

Patient Satisfaction	Very Average Satisfied	Average Satisfied	Total
cognitive	10.3%	43.7%	54.0%
Affective	13.5%	48.5%	62.0%
conative	10.7%	51.0%	61.7%

- a. **Cognitive:** Respondents stated very satisfied and satisfied the total average of 54.0%, and the remaining 56.0% undecided, dissatisfied and very dissatisfied. When viewed from the scale Sugiyono, an indicator of overall cognitive by respondents included in the int erval interpretations are quite satisfied.
- b. **Affective:** Respondents stated very satisfied and satisfied the total average of 62.0%, and the remaining 38.0% undecided, dissatisfied and very dissatisfied. When viewed from the scale Sugiyono, affective indicators overall by respondents included in the int erval with interpretation satisfied
- c. **Conative:** Respondents expressed very satisfied and satisfied the total average of 61.7%, and the remaining 38.3% undecided, dissatisfied and very dissatisfied. When viewed from the scale Sugiyono, indicators conative overall by respondents included within the interval with interpretation satisfied
- d. **Variable Patient Satisfaction:** Respondents stated very satisfied and satisfied the total average of 59.5%, and the remaining 40.5% undecided, dissatisfied and very dissatisfied. When viewed from the

scale Sugiyono, variable overall patient satisfaction by respondents included in the interval interpretations are quite satisfied.

3. Impact Quality service towards satisfaction of patients in Public Health Center of Situ Gintung.

The correlation value (R) quality of service (X) and customer satisfaction (Y) of 0.908 classified as very strong positive correlation. The coefficient of determination shows the contribution of 0.823, or 82.3% of customer satisfaction. From these data demonstrated that there is a very strong positive relationship between the variables of service quality (X) to variable customer satisfaction (Y). With the value of t-test (21.473) is greater than t-table (1.660) and p.sig.0,000 or <0.05 indicates significant effect of the independent variable X and dependent variable Y. Based on the above hypothesis can be proven that there are significant a positive and significant correlation between the quality of service to client satisfaction in Public Health Center of Situ Gintung.

These results are also in accordance with previous studies, Supratikno (2014), which states that the quality of service is positive and significant impact on patient satisfaction.

# **CONCLUSIONS AND RECOMMENDATIONS**

# Conclusion

1. Quality of Service provided by Public Health Center of Situ Gintung to the patients included in both intervals. This is evidenced from the patient answers (respondents) stated strongly agree 15.9% and 44.2% agreed, so that in total 60.1%. Based on the interpretation of the scale Sugiyono, the score were including intervals with either interpretation.

- 2. Patient satisfaction over the quality of services provided by Public Health Centers included in the interval Situ Gintung satisfied. This is evidenced from the patient answers (respondents) stated strongly agree 11.7% and 47.8% agreed, so that in total reached 59.5%. Based on the interpretation of the scale Sugiyono, including the interval with the score interpretations are quite satisfied.
- 3. There is a positive influence and significantly between quality of service to satisfaction of patients in Public Health Center of Situ Gintung South Tangerang. This is evidenced by the results of Linear Regression Y = 1,220 + 0,908X. From the regression equation can be proven to have a correlation coefficient of 0.9 R 08 (very strong positive correlation). Coefficient determination of 0.828 or service quality has 82.3% contribution to customer satisfaction. Seen from the significance test t use values by 21, 473 with psig. = 0.000 and t value tables (100, 95%) = 1,660. Because t count> t table and psig. <0:05 H = 0 is rejected and H ≠ 0 accepted.

# Suggestion

- 1. In the aspect of quality of service, should Public Health Center of Situ Gintung more attention to the tangible dimension and the dimension of empathy. Tangible dimension can be in the form of a more comfortable waiting room or facilities better service. Dimensions of empathy should also be in the form of improved understanding to better patient complaints.
- 2. In the aspect of patient satisfaction, should Public Health Center of Situ Gintung more attention to the cognitive dimension. Because this dimension concerns the awareness and knowledge of the patient, then these dimensions needs to be improved for example by better dissemination of the information about the improvement of facilities and services that are owned Public Health Center.
- 3. For further research, need to put another dimension that can affect patient satisfaction. The other dimensions e.g. cultural factors of patients.

## **REFERENCES**

- Arita, Lerbin. R. 2007. *Marketing Research. Theory and Practice*. Bogor: Ghalia Indonesia
- Djarwanto. 2000. Research Methods. Jakarta: Ghalia Indonesia
- Istijanto. 2009. *Practical Application of Marketing Research*. Jakarta: Gramedia Pustaka Utama.
- Kotler, Philip, and Keller KL 2009. *Marketing Management.* 13 <sup>th</sup> Edition. New Jersey: Pearson Prentice Hall.
- Kotler, Philip, and Keller KL 2009. *Marketing Management. Translation, thirteenth edition. Volume 1.* Jakarta: Erland.
- ----- 2009. Marketing Management. Translation, thirteenth edition. Volume 2. Jakarta: Erland.
- Schiffman, LG, & Kanuk, Leslie. L. 2008. *Consumer Behavior*. Translation, Seventh Edition. Jakarta: Gramedia Group Index
- Sugiyono. 2012. *Qualitative and Quantitative Research Methods R & D.* Bandung: Alfabeta
- Umar, Hussein. 2010. The Marketing Research and Consumer Behaviour. Jakarta: Í
- Tjiptono, Fandy. 2008. Service Management, Delivering Excellent Service. Yogyakarta: Andi Offset.
- ----- 2014. Service Marketing, Principles, Application and Research. Yogyakarta: Andi Offset.
- Widjaja, T. 2011. Rapid Mastering SPSS-19. Jakarta: Light Atma.
- www. Dinkes.tangerangselatankota.go.id. December 30, 2016