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[JUMMEC] Submission Acknowledgement

Associate Professor Dr. Lau Yee Ling <jummec@um.edu.my>
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Thu, Aug 27, 2020 at 2:36 PM

Hello,

jummec admin has submitted the manuscript, " THE EFFECT OF HOSPITAL SERVICE QUALITY ON INPATIENT SATISFACTION IN PIRU HOSPITAL" to Journal of Health and Translational Medicine.

If you have any questions, please contact me. Thank you for considering this journal as a venue for your work.

Associate Professor Dr. Lau Yee Ling

Thank You

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Revision 1-SJUMMEC Ernawaty

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Mon, Feb 17, 2020 at 2:05 PM

Dear author,

Here are the comments from the reviewer. Your paper has been recommended as a major revision.

Please make sure that you submit the amendment in two weeks time (**dateline: 29th February 2019**).

Thanks.

Reviewer's comments

Manuscript ID: SJUMMEC-Hospital Quality and Patient Satisfaction

If possible, do give elaborate *comments in order to help the author(s) to improve their manuscript*.

General Aspects

| | |
|-------------------|--|
| Title | Is it appropriate? Refer reviewed manuscript. |
| Originality | Anything new; worthwhile information on an old topic? The study gaps were not mentioned in the article to support the originality of this study. |
| Comprehensiveness | Does it meet study objectives; cover important issues on topic? The study objectives were not concisely described. The variables were poorly defined |
| Abstract | Adequate, concise, precise? The study objective was not clearly stated. Refer comments in the reviewed manuscript. |
| Readability | Comprehensibility, clarity? Moderate. Needs to be further improved. Grammar and spelling check is required. |

Scientific Merit

| | |
|----------------------------|--|
| Study Design | Appropriateness with respect to study objective(s)/hypothesis; sampling; methodology? Appropriate. |
| Study Limitations | Study limitations addressed, e.g., bias and confounding? This was not addressed. |
| Statistical Analysis | Are the methods appropriate/justified? The statistical analysis plan for this study was not clearly stated and justified. |
| Results | Relevant; credible; appropriate and clear illustrations? The results and discussion section is too long. Refer reviewed manuscript. I suggest to separate results from discussion. |
| Discussion and Conclusions | Relevant to study objectives and findings; appropriate comparisons to other studies? At times there were assumptions made. |
| References | Adequate, accurate, up-to-date? There were missing in-text citations. |

Other Comment(s):

Recommendation (Tick one only)

| | |
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| Accept | <input type="checkbox"/> |
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Best Regards,

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58K

The Effect of Hospital Service Quality on Inpatient Satisfaction

Commented [1]: include the setting - Piru Hospital

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Abstract

Background: Patient satisfaction is one of the indicators of hospital service quality. The mean value of patient satisfaction in the inpatient installation of Piru Hospital in October-December 2018 was relatively low with a value of 2.655. This study aims to develop recommendations for improving the quality of patient services in the inpatient installation of Piru Hospital through analysis of hospital service quality and patient satisfaction.

Methods: The design of this study was cross sectional. The study was conducted at Piru Hospital in December 2018-June 2019. The population was the patients who had received inpatient services. There were 104 respondents with consecutive sampling technique. Data collection was carried out using a questionnaire whose validity and reliability had been tested. The statistical test used was multiple linear regression test

Results: The results showed that the dimensions of hospital service quality that were influential were time to wait for the services during hospitalization, patient's impression of service, doctor's attitude, ambience or condition of patients' room, nurse's expertise and doctor's behavior.

Conclusion: Hospital service quality has a positive and significant effect on patient satisfaction in the inpatient installation at Piru Hospital.

Keywords: Hospital, inpatient, patient satisfaction, service quality

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Introduction

Health services in Indonesia both organized by the central and regional governments need to pay attention to the quality of services in order to meet the expectations and satisfy the public as the hospital consumers. In the perspective of total quality, it is believed that the patient is the final assessor of quality, so it can be used as one of the criteria for retaining patients in the future. Quality of service is very important in building up patient satisfaction (1).

The quality of health services is a total picture of the characteristics of a health service that is related to the ability to fulfill patient satisfaction needs (2). Brady and Cronin developed the concept of a hierarchy of quality health services consisting of: physical environment quality, interaction quality and outcome quality (3).

Patient satisfaction is one of the indicators of hospital services quality that becomes the asset to increase the number of the patients and create their loyalty. It will lead

to a repetition of the use of certain health services and allow the loyal patients to invite others to use the same health service facilities (1).

Piru Hospital is a referral hospital for 17 community health centers in West Seram District—a remote area in East Indonesia. It provides two kinds of services including outpatient and inpatient care. Inpatient services become one of the services needed since Piru Hospital is a referral hospital for community health centers. Inpatient services are parts of the service units in the hospital that provide comprehensive services to help the patients to solve their problems. They are the hospital revenue centers where the level of patient satisfaction can be used as an indicator of the service quality (4).

Based on the data of patient visits at the inpatient installation of Piru Hospital in 2018, the number of visits decreased by 8.00% from the previous year. The indicator of hospital service performance data shows the results of the efficiency of the use of beds in inpatient installations seen from the very low achievement of BOR (30.37%) and high NDR rates (31.52 %). It shows that the ability to provide safe and effective services and the ability to save patients in inpatient has not fulfilled the standard. The mean value of patient satisfaction in the inpatient installation of Piru Hospital in October-December 2018 is low with a value of 2.655.

The issues of decreasing inpatient visits, low utilization of beds, and low patient satisfaction in the inpatient installation of Piru Hospital are due to several factors related to the quality of hospital services. Therefore, this research needs to be conducted to analyze the

effect of the hospital service quality on the patient satisfaction.

Materials and Methods

This research is a quantitative research with analytic observational research method and cross sectional study design. This study was conducted at Piru Hospital, West Seram, Maluku in October 2018-June 2019. The populations of this study were the patients who had received inpatient services at the inpatient installation of Piru Regional Hospital. The sample size was calculated using the formula from Lemeshow, et al. (5). It was calculated from inpatients estimates in 2018 (1265 patients), so there were 105 people obtained from the average number of inpatients per month and the determination of the error rate by the researcher was 1% and the sample size was 104 people. The data were collected using a questionnaire method. Hospital service quality and patient satisfaction in this study were measured based on a modified questionnaire from the Brady and Cronin study (3,5). Before the questionnaire was tested, validity and reliability tests were conducted on 30 respondents who had similar characteristics to the research respondents. The test results showed that there were no invalid questions and the research instrument was declared reliable.

RESULTS AND DISCUSSION

Description of Hospital Service Quality Results at the Inpatient Installation of Piru Hospital

Hospital service quality describes the patient's assessment of inpatient services

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quality at Piru Hospital inpatient installation. In this study, hospital service quality is measured through sub-variables consisting of physical environment quality, interaction quality, and outcome quality. Physical environment quality is measured through the dimensions of ambient conditions, design and social factors.

Interaction quality is measured through the dimensions of attitude, behavior and expertise of doctors and nurses. In addition, the outcome quality is measured by the waiting time dimensions of doctors and nurses, tangibles and valence. The results of the hospital service quality assessment are shown in Table 1.

Table 1. Distribution of Hospital Quality Service Assessment in Inpatient Services at Piru Regional Hospital in 2019

| Variable | Mean |
|-------------------------------------|-------------|
| Physical Environment Quality | 2.57 |
| Ambient Condition | 2.34 |
| Design | 2.70 |
| Social Factor | 2.67 |
| Interaction Quality | 2.63 |
| Doctor's Interaction Quality | 2.60 |
| Doctor's Attitude | 2.60 |
| Doctor's Behavior | 2.55 |
| Doctor's Expertise | 2.65 |
| Nurse's Interaction Quality | 2.61 |
| Nurse's Attitude | 2.64 |
| Nurse's Behavior | 2.80 |
| Nurse's Expertise | 2.39 |
| Outcome Quality | 2.52 |
| Waiting time | 2.74 |
| Doctor's waiting time | 2.49 |
| Nurse's waiting time | 2.98 |
| Tangibles | 2.33 |
| Valence | 2.44 |
| Hospital Service Quality | 2.57 |

Based on Table 1, the overall assessment of hospital service quality is good. The customers, in this case the patient, will evaluate an intangible product that is the service. Furthermore, they will always consider several things regarding the external appearance and impression like the physical environment of the service provider (7).

The results showed that the physical environment quality received a good rating. The physical environment (servicescape) has an

important role, both positive and negative in building up the customer impressions (8). The physical environment is an important tangible component of a service that can provide guidance to customers and form their perception directly (9). Physical environment quality in this study is based on the assessment of the ambient conditions, design and social factors.

The ambient condition assessment is carried out on the cleanliness and comfort of the

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inpatient room, inpatient air circulation, aroma in the inpatient room and inpatient room noise. The results showed that the respondents gave **bad rating** towards the ambient condition as a whole.

The cleanliness and comfort of the room are also influenced by other factors. Even though hospital cleaning service officers have cleaned the floor regularly, the visitors or patients' families who are not aware of the importance of maintaining the cleanliness by throwing rubbish on the floor or the full rubbish bins which are not cleaned up immediately also affect the cleanliness and comfort, air circulation, and cause unpleasant smell. In addition, setting visiting hours and limiting visitors will also affect the hospital cleanliness and patient comfort.

The main function of the treatment room is to support the patient's recovery while being treated for illness. The bad condition of the inpatient room can affect the patient, for instance, the duration of a patient undergoing hospitalization. Furthermore, the atmosphere of the inpatient room needs to be a concern since the customers have a tendency to choose another service if they experience the environmental discomfort (10).

The results showed that the respondents gave a good assessment for the design, but gave a poor assessment for the bathroom of the inpatient rooms. From the observations, there was bathrooms in each inpatient room, but it could not be used due to non-flowing water, unavailability of water in the tub, and clogged closets. These problems forced the patient to go to the bathroom outside the room which made the patient and his family uncomfortable.

The inpatient rooms that are easily found by families or visitors get the highest score or

rating in the design aspect. It shows that the location of the room is easy to find by the families or visitors and reduce the possibility of visitors or families entering the wrong room that might interfere with other patients.

The location of the nurse's work space (nursestation) also gets a **good rating**. The nursestation is important since the patients need a lot of help from the nurses during hospitalization. It is located near the main door of the inpatient room, while the inpatient rooms are lined up facing each other, so the patients or their families have no difficulty in calling nurses when they need a help. The nursestation should not be far from the inpatient room. It is intended to give supervision to the patients that can be done more effectively and efficiently. Its location can also affect the reduction in control and communication of the nurses to patients which can have an impact on the quality of nurse services (11).

The area of the treatment room is related to the comfort of the patient during the stay. The more proportional area of the room with the number of patients treated, the better the health services perceived by patients because the provision of nursing care can take place more effectively (12).

The results showed that the respondents gave a **good assessment of social factors**, but there is an indicator that gets a bad rating for the patient feel disturbed when many visitors in the inpatient room. The number of visitors tends to make patients feel disturbed, especially during visiting hours, considering that one patient with another has an adjacent bed. The inpatient installation at Piru Hospital has implemented visiting hours at 11.00-13.00 Eastern Indonesia Time and 17.00-19.00 Eastern Indonesia Time. However, the

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Commented [22]: Which variable are you referring to?

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Commented [23]: which variable are you referring to when discussing about 'treatment room'?

Commented [26]: How was this analysed?

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Commented [24]: Is this also a qualitative study? How were the observations done? These were not described in methods.

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regulation has not been implemented well since many visitors who live far away from the hospital want to visit the patients and in the end, the officers allow them. In addition, personal factors between the visitors and the officers who already know each other well make officers less disciplined in carrying out the restrictions on the number of visitors.

Table 1 shows that the results of the interaction quality assessment are good. The quality of interactions that occur between providers and the customers is the most important part of customer assessment of the quality of the product or service as a whole. In this study, the interaction quality is measured based on the results of the assessment of the attitudes, behavior and expertise of doctors and nurses. The results showed that the nurse expertise assessment on the interaction quality indicator was still poor. The expertise of the nurses is still considered bad since according to the patients, they have not been fully able to carry out nursing actions in accordance with doctor's instructions. They sometimes do not know the answer of the patients' questions and some wait for their fellow nurses when the patients ask about the doctor's instructions that must be done. In addition, the patients also complain because the nurses do not provide a good explanation when they need some clarifications towards nursing actions.

Doctors and nurses as the main components of the health service providers to the community are expected to provide good examples in having interaction while providing medical and nursing services to the patients. They must be able to provide good services based on their competencies and expertise, speak clearly and be friendly, gentle, patient, and polite in providing the services. It will

greatly affect the process of communication and interaction during the delivery of services performed to patients. The arrogant attitude will cause the listener to be reluctant and reject the description from the communicator (13).

The results quality is identical to what the customer receives when the production process or service product ends (14-15). Overall, the respondents' assessment of the outcome quality at the inpatient facility at Piru Regional Hospital is good. The assessment of the waiting time dimension as a whole is good, but the doctor is still considered bad. Likewise, the dimensions of tangibles and valence get poor ratings.

The dimension of the doctor's waiting time is measured through the aspect of the doctor visiting the patient according to the his schedule and the speed in carrying out the medical actions when he is needed. It still gets a bad rating since the doctors frequently arrive late since they live in Ambon that is far from Piru Hospital. In another occasion, when the doctors in charge are unable to come, they sometimes do not inform the head of the medical services department or the head of the inpatient room. Moreover, there are doctors who are in a hurry to leave the hospital because they have to run the practice in another hospital in Ambon. The speed of the doctor in taking action to the patients who need him/her is still bad because the medical action schedule is not going well due to the lack of necessary medical equipment. In addition, there is only one specialist doctor in Piru Hospital, so they must serve in outpatient polyclinics and other places, for instance, the operation room. It is also known that the general practitioner is not currently regulated as a guardian in the inpatient room during normal working hours.

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The tangibles dimensions get a bad rating for bed sheets that are not immediately replaced when dirty or exposed to the patients' blood or vomit, so the patients find the room dirty and uncomfortable. Similarly, the patients and families assess that the availability of drugs in pharmacies is still poor because the drugs are not always available when they need them which causes the patients and their families to buy at the pharmacies outside the hospital. Additionally, the doctors sometimes prescribe drugs that are difficult to obtain that must be purchased in Ambon. Medication is important in healing a patient's illness. The medical laboratory and radiology investigations also get a bad rating. It is due to the patient who has to do the re-examination because the doctor feels that the laboratory results do not match the clinical condition and diagnosis of the patient. Besides, the rontgent photographs in radiological examinations are still repeatedly done since the results are not good enough and unreadable to support the certainty of the diagnosis.

The availability of the medical support facilities such as laboratories and radiology is very much needed by the doctors to make a proper diagnosis of a patient's illness. The complete facilities can build up the patients' belief that they will get the accurate diagnosis, so the doctors can provide appropriate treatment and patients recover faster.

On the valence dimension, indicators that get a bad rating are the experience of the results of services in inpatient facilities, the experience of the availability and quality of drugs at the pharmacy, and the experience of the results of laboratory support services and radiology. The bad patient experience is closely

related to the quality of the patient care environment, especially the atmosphere and conditions of the inpatient room which is indeed poor, as well as the experience of drugs and poor medical examinations because the quality of these aspects in the inpatient installation at Piru Hospital is not good.

The patients' experience in the hospital industry is important because hospitals provide service products that have intangible properties, so the services are mostly delivered as a performance and experience (16). If there are still respondents who give negative evaluations, it leads to two possibilities which are the delivery of the health services that have not been maximized or the differences in perceptions between people with one another.

The patients' considerations in determining whether they get a good experience is influenced by the experience of encountering with the health service provider which can then develop into the basis for determining patient satisfaction (17). This experience is certainly related to the process of providing the service itself, where the quality of service can be felt as long as the service is provided. One of them is at the time of interaction between consumers and service providers (16).

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Description of Patient Satisfaction Results at the Inpatient Installation of Piru Hospital

Patient satisfaction is the feeling of pleasure or disappointment which the patients get from comparing the performance or perceived service results with expectations (18). The results of the patient satisfaction assessment are shown in Table 2.

Table 2. Distribution of Patient Satisfaction Assessment in Inpatient Services at Piru Hospital in 2019

| Variables | Mean |
|---|-------------|
| Patient satisfaction with Physical Environment Quality | 2.60 |
| Ambient Condition Satisfaction | 2.37 |
| Design Satisfaction | 2.71 |
| Social Factors Satisfaction | 2.70 |
| Patient satisfaction for Doctor's Interaction Quality | 2.62 |
| Doctor's Attitude Satisfaction | 2.65 |
| Doctor's Behavior Satisfaction | 2.62 |
| Doctor's Expertise Satisfaction | 2.59 |
| Patient satisfaction for Nurse Interaction Quality | 2.68 |
| Nurse's Attitude Satisfaction | 2.70 |
| Nurse's Behavior Satisfaction | 2.88 |
| Nurse's Expertise Satisfaction | 2.45 |
| Outcome Quality Satisfaction | 2.50 |
| Doctor's Waiting Time Satisfaction | 2.58 |
| Nurse' Waiting Time Satisfaction | 2.82 |
| Tangibles Satisfaction | 2.13 |
| Valence Satisfaction | 2.46 |
| Patient Satisfaction | 2.60 |

Table 2 shows that the overall assessment of patient satisfaction at the inpatient facility at Piru Hospital is good. The patient satisfaction is measured through four aspects: physical environment quality satisfaction, physician interaction quality, nurse interaction quality, and outcome quality. From those four aspects, the highest value is in the aspect of nurse interaction quality. These results are in line with the research by Nurcahyanti and Setiawan (19) who explain that the interaction quality that occurs during the process of delivering health services has the greatest influence on the service quality perceptions.

The aspect with the lowest score is the satisfaction with outcome quality. It needs to be considered since based on Ariani's research (20), it is mentioned that the outcome quality has a positive effect on the patient satisfaction.

Physical environmental quality satisfaction consists of three aspects including ambient

condition satisfaction, design satisfaction, and social factor satisfaction. The aspect with the highest value is the aspect of design satisfaction. It shows that the arrangement of the room both functionally and aesthetically has met the needs of the patients, one of which is the location of the nurse station that has provided the feeling of pleasure, so they are satisfied with the design aspects of inpatient services at Piru Hospital. The aspect with the lowest value is the ambient condition aspect. It covers visual and nonvisual aspects, such as light, air circulation, temperature, music, and aroma.

Interaction quality refers to the patient's perception towards the services provided by the health workers (21). The doctor satisfaction interaction quality consists of doctor attitude satisfaction aspects, doctor attitude behavior satisfaction, and doctor expertise satisfaction. The highest value is in the aspect of the doctor's

Commented [31]: Again, please work on the definitions and scoring. Otherwise the reader is unable to appreciate the results.

attitude. It is supported by the research of Tacoh et al. (22) which explains that the aspects of speed in providing the services needed and the doctors' patience in receiving patient complaints are important aspects in the quality of patient services. The highest score or value is obtained by the satisfaction aspect of the doctor's expertise. This result is in accordance with the study of Tacoh et al. (22) who explains that the doctors' expertise needs to be improved because the lack of service can cause the patients dissatisfied.

The nurse interaction quality gets the highest value on the nurse behavior satisfaction indicator. This result is clarified by the research of Juwariyah and Joyo (23) which shows that the patient satisfaction is an indicator of quality hospital services. The caring behavior is an integrated aspect with nurses in providing nursing care. The lowest value is found in the aspect of nurse expertise satisfaction. It is different from the results of the Agritubella study (24) which affirms that the majority of the patients are comfortable with the nursing services.

The outcome quality is the patient satisfaction with the quality of service outcomes felt during hospitalization. In this study, the dimension of satisfaction with the highest value is found in the nurse waiting time satisfaction. This result is in line with Ismail's research (25) which elaborates that the nurses' waiting time that is still quite long in the process of transferring patients to inpatient units affects patient satisfaction. The lowest score is the tangibles satisfaction. This result is different from the study of Conscience (26) which explains that the most dominant dimension of service quality in patient satisfaction is tangibles.

The Analysis of the Influence of Hospital Service Quality on Patient Satisfaction

The influence test in this study was conducted on the variable of hospital service quality on patient satisfaction. Test results are shown in Table 3.

Table 3. Test Results of the Influence of Hospital Service Quality on Patient Satisfaction in Inpatient Installation at Piru Hospital 2019

| Variable | b | P | Category |
|-------------------------------------|-------|-------|-----------------|
| Hospital Service Quality | 0.635 | 0.000 | Significant |
| Physical Environment Quality | | | |
| Ambient Condition | 0.160 | 0.001 | Significant |
| Design | 0.052 | 0.416 | Not Significant |
| Social Factor | 0.080 | 0.169 | Not Significant |
| Interaction Quality | | | |
| Doctor's Attitude | 0.237 | 0.000 | Significant |
| Doctor's Behavior | 0.115 | 0.045 | Significant |
| Doctor's Expertise | 0.056 | 0.257 | Not Significant |
| Nurse's Attitude | 0.094 | 0.192 | Not Significant |
| Nurse's Behavior | 0.027 | 0.620 | Not Significant |

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| Variable | b | P | Category |
|-------------------------|-------|-------|-----------------|
| Nurse Expertise | 0.134 | 0.015 | Significant |
| Outcomes Quality | | | |
| Waiting Time Doctor | 0.285 | 0.000 | Significant |
| Nurse Waiting Time | 0.094 | 0.190 | Not significant |
| Tangibles | 0.079 | 0.379 | Not significant |
| Valence | 0.257 | 0.000 | Significant |

Based on the Table 3, the overall hospital service quality has a significant and strong influence on the patient satisfaction ($p = 0,000$, $b = 0.635$). It means that good quality hospital services can increase patient satisfaction in the inpatient installation of Piru Hospital. In the results of physical environment quality sub-variables, there is one dimension that affects patient satisfaction, that is the ambient condition with the b value of 0.160. A positive regression coefficient means that there is a direct relationship between the ambient condition and patient satisfaction. The better the quality of the ambient condition of the patient's inpatient room, the better the patient's satisfaction in the inpatient installation of Piru Hospital.

The interaction quality sub-variable that influences patient satisfaction is the dimension of the doctor's attitude, doctor's behavior and nurse's expertise. A doctor's attitude with a value of b of 0.237 means that the better the attitude of the doctor in checking the patient, the better the patient satisfaction at the inpatient installation. The doctor's behavior with a b value of 0.115 indicates that the better the doctor's behavior in providing services to patients, the more the patient feel satisfied. Last but not least, the expertise of nurses with a value of b is 0.134 which means that the better the expertise of nurses in performing nursing care to the patients, the better the patient

satisfaction in the inpatient installation of Piru Hospital.

The outcome sub-variable that influences the patient satisfaction is the waiting time dimensions of doctors and valence. The doctor's waiting time with the b value of 0.285 means that the more appropriate the doctor's waiting time in examining and performing medical treatment to patients, the more the patient feels satisfied. The valence with the b value of 0.257 means that the better the valence felt by the patient, the better the patient satisfaction at the inpatient installation at Piru Hospital.

Hospital service quality refers to the ability of the hospitals to provide services in accordance with the standards of the health profession and can be accepted by their patients (27). The results of this study indicate that a good hospital service quality will increase patient satisfaction in the inpatient installation of Piru Hospital. It is in line the with previous study that the patient satisfaction is directly affected by the service quality ($r = 0.699$) (28). Similar research also states that 74.9% of the patient satisfaction is explained by the service quality variables (29).

The results showed that the physical environment quality subvariable which measures the quality of the environment around the patient care room has an ambient condition aspect that is the atmosphere and conditions

around the patient care room which have a positive and significant effect on the patient satisfaction. This result is supported by the previous research which states that the physical environment condition of the inpatient room or comfort of the inpatient room is described in three aspects: comfort of the air temperature in the inpatient room, noise intensity, and intensity of lighting in the inpatient room affect the satisfaction of the patients (30). The relationship between inpatient room cleanliness and patient satisfaction is also in line with the results of the previous study which states that there is a relationship between room sanitation, bathroom sanitation, corridor sanitation and inpatient sanitation with patient satisfaction (31).

The results showed that the interaction quality subvariable on the aspects of doctor's attitude, doctor's behavior and nurse's expertise are proved to have a positive and significant effect on the patient satisfaction. The quality of interaction is the most important part of a customer's experience. If the interaction goes well, it will not only make the customer satisfied but also happy. On the other hand, if the interaction takes place poorly, it will lead to frustration (32). It is in accordance with the previous study that the quality of physician services influences inpatient satisfaction (22). This is also supported by a research on the nurses' knowledge, attitudes and skills that influence inpatient satisfaction (33).

The assessment of the nurse expertise shows that the indicators that get a bad rating are the nurses ability to carry out actions to the patients according to the doctor's instructions, the nurses ability to explain and perform well the nursing actions taken to the patients, and

the nurses actions that are expected to help the patients recover.

Lack of collaboration between doctors and nurses in taking care of the patients, the doctor's instructions that are not clearly readable in the patient's medical record status and the nurses shift to take care of patients that is not implemented properly are some of the causes of poor respondents' assessment of nurses' ability to carry out doctor's instructions. Lack of functional nursing training and effective communication training have never been done causing the process of communication between nurses and patients going poorly which results in a poor assessment of the nurse's ability to explain and perform nursing actions that are expected to accelerate the patient's recovery. This is in line with the previous research which explains that there is an influence of the expertise of health workers on the patient satisfaction (34). The expertise aspect consists of two main elements: the ability of the health service provider as promised and the accuracy of the services provided to minimize or prevent errors in the service process.

The results showed that outcome quality subvariable in the waiting time aspects of doctors and valence affect the patient satisfaction. The doctor waiting time is the length of time waiting for the patients to get services by doctors. The test results showed the waiting time of the doctor had a positive and significant effect on the patient satisfaction. This result is in line with the previous research conducted by Triwahyuni (35) which states that doctor's services affect patient satisfaction. The results of the study are also in accordance with the previous study which states that the length of the waiting time affects patient satisfaction (36). In addition, the result of this study is

strengthened by the previous research which states that the speed and responsiveness of doctors in treating patients is very important because it affects patient satisfaction (37).

The valence dimension is still considered poor in terms of experience with care room facilities, quality and availability of drugs, and medical support examinations. Poor experience towards the quality and availability of drugs because they have to buy at a pharmacy outside the hospital and doctors prescribe drugs that are not in the pharmacy. The supporting services are still poor with some delays because there are still damaged equipment and no reagents. This result is in line with the previous study that assessment with supporting services affects the patient satisfaction (35).

Conclusion

Hospital service quality has a positive and significant effect on patient satisfaction in the inpatient installation at Piru Hospital.

Acknowledgment

The authors would like to acknowledge Director of Piru Hospital, West Seram, Maluku, Indonesia for their help and support.

Competing interests

The authors declare that they have no competing interests.

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The Effect of Hospital Service Quality on Inpatient Satisfaction in Piru Hospital

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Abstract

Background: Patient satisfaction is one of the indicators of hospital service quality. The mean value of patient satisfaction in the inpatient installation of Piru Hospital in October 2018 - December 2018 was relatively low with a value of 2.655. This study aims to develop recommendations for improving the quality of patient services in the inpatient installation of Piru Hospital through analysis of hospital service quality and patient satisfaction analyse the effect of the hospital service quality on patient satisfaction.

Methods: The design of this study was cross sectional. The study was conducted at Piru Hospital between in December 2018-June 2019. The population was the patients who had received inpatient services. There were 104 respondents selected via with the consecutive sampling technique. Data collection was carried out using a questionnaire whose validity and reliability had been tested. The statistical test used was the multiple linear regression test

Results: The results showed that the dimensions of hospital service quality that were influential were time to wait for the services during hospitalization, patient's impression of service, doctor's attitude, ambience or condition of patients' room, nurse's expertise and doctor's behaviour.

Conclusion: Hospital service quality has a positive and significant effect on patient satisfaction in the inpatient installation at Piru Hospital.

Keywords: Hospital, inpatient, patient satisfaction, service quality

Introduction

Health services in Indonesia both organized by the central and regional governments need to pay attention to the quality of services in order to meet the expectations and satisfy the public as the hospital consumers. In the perspective of total quality, it is believed that the patient is the final assessor of quality, so it can be used as one of the criteria for retaining patients in the future.

Quality of service is very important in building up patient satisfaction (1).

The quality of health services is a total picture of the characteristics of a health service that is related to the ability to fulfill patient satisfaction needs (1,2). Brady and Cronin developed the concept of a hierarchy of quality health services consisting of: physical environment quality, interaction quality and outcome quality (2,3).

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Patient satisfaction is one of the indicators of hospital services quality that becomes the asset to increase the number of the patients and create their loyalty. It will lead to a repetition of the use of certain health services and allow the loyal patients to invite others to use the same health service facilities (14).

Piru Hospital is a referral hospital for 17 community health centers in West Seram District a remote area in East Indonesia. It

provides two kinds of services including outpatient and inpatient care. Inpatient services become one of the services needed since Piru Hospital is a referral hospital for community health centers. Inpatient services are parts of the service units in the hospital that provide comprehensive services to help the patients to solve their problems. They are the hospital revenue centers where the level of patient satisfaction can be used as an indicator of the service quality (4).

Table 1. Socio-demographic Data of the Study Participants

| Characteristics | Value | n | % |
|-------------------------------|--------------------------------------|----|------|
| <u>Age</u> | ≤14 | 25 | 24.0 |
| ▲ | >14 – ≤24 | 8 | 7.7 |
| ▲ | >24 – ≤44 | 39 | 37.5 |
| ▲ | >44 – ≤64 | 19 | 18.3 |
| ▲ | >64 | 13 | 12.5 |
| <u>Gender</u> | Male | 43 | 41.3 |
| ▲ | Female | 61 | 58.7 |
| <u>Education</u> | No education | 12 | 11.5 |
| ▲ | Elementary | 33 | 31.7 |
| ▲ | Junior high | 2 | 1.9 |
| ▲ | Senior high | 41 | 39.4 |
| ▲ | College | 16 | 15.4 |
| <u>Occupation</u> | Unemployed | 26 | 25.0 |
| ▲ | Housewife | 22 | 21.2 |
| ▲ | Student | 18 | 17.3 |
| ▲ | Employed | 38 | 36.5 |
| <u>Distance from hospital</u> | ≤5 km | 60 | 57.7 |
| ▲ | >5 km | 44 | 42.3 |
| <u>Payment scheme</u> | Out-of-pocket payment | 12 | 11.5 |
| ▲ | Self-funded national insurance | 41 | 39.4 |
| ▲ | Government-funded national insurance | 51 | 49.0 |
| <u>Length of stay</u> | 2 days | 18 | 17.3 |
| ▲ | 3 days | 40 | 38.5 |
| ▲ | ≥4 days | 46 | 44.2 |

Based on the data of the patient visits at the inpatient installation of Piru Hospital in 2018, the number of visits decreased by 8.00% from the previous year. The indicator of hospital service performance data shows the results of the efficiency of the use of beds in inpatient

installations seen from the very low achievement of Bed Occupancy Rate (BOR) (3) (30.37%) and high Nett Death Rate (NDR) (4) rates (31.52 %). It shows that the ability to provide safe and effective services and the ability to save patients in inpatient has not

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fulfilled the standard. The mean value of patient satisfaction in the inpatient installation of Piru Hospital ~~between in~~ October 2018 -December 2018 is low with a value of 2.655.

The issues of decreasing inpatient visits, low utilization of beds, and low patient satisfaction in the inpatient installation of Piru Hospital are due to several factors related to the quality of hospital services. Therefore, this research needs to be conducted to analyze the effect of the hospital service quality on the patient satisfaction.

Materials and Methods

This research is a quantitative research with ~~analytic observational research method and cross sectional study design~~. This study was conducted at Piru Hospital, West Seram, Maluku-Moluccas ~~between in~~ October 2018-June 2019. Piru hospital is the only hospital in the district. Not having a competitor does not mean that this hospital can provide services as they wish, they must provide the best service for the most remote people who depend on it. Because of this, ~~the~~ research on quality and satisfaction is done here. The populations of this study were the patients who had received inpatient services at the inpatient installation of Piru Regional Hospital. The sample size was calculated using the formula from Lemeshow, et al. (5). It was calculated from ~~The inpatients population estimateds~~ from the average number of inpatients per month in 2018 which is (1265 patients). The sample size was calculated using the formula from Lemeshow, et al. (5). ~~so there were 1054 people-patients obtained from the average number of inpatients per month and with the determination of the an error rate by the researcher was of 1% and the sample size was 104 people.~~ Face-to-face

interview was carried out using a structured questionnaire which was pre-tested prior to the study. Independent variables (6) were 1) physical environment quality, 2) interaction quality and 3) outcome quality.

Physical environment quality consisted of ambient condition, design and social factors. Interaction quality measured attitude, behaviour and expertise of either nurses or doctors. Outcome quality comprised of waiting time for nurses or doctors, tangibles and valence.

~~The data were collected using a questionnaire method.~~ Hospital service quality and patient satisfaction in this study were measured based on a ~~The study used patient satisfaction modified questionnaire with from the Brady and Cronin satisfaction dimension study (32,5).~~ There were four dimensions i.e. satisfaction for physical environment quality, satisfaction for physician interaction quality, satisfaction for nurse interaction quality, and satisfaction for outcome quality.

Ethical approval from the Universitas Airlangga and permission from the director of Piru Hospital were obtained prior to the study. Written inform consent from the patients were obtained also. ~~†The information was kept confidential.~~

The data was analyzed using the Statistical Package for Social Sciences (SPSS) version 23. Descriptive analyses was performed for physical environment quality, interaction quality and outcome quality. Variables with mean ≤ 2.50 were categorized as poor and variables with mean >2.50 were categorized as good. Multiple linear regression was used to determine the independent variables that affect patient satisfaction. Before the questionnaire was tested, validity and reliability tests were conducted on 30

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respondents who had similar characteristics to the research respondents. The test results showed that there were no invalid questions and the research instrument was declared reliable.

RESULTS AND DISCUSSION

Description of Hospital Service Quality Results at the Inpatient Installation of Piru Hospital

Hospital service quality describes the patient's assessment of inpatient services

quality at Piru Hospital inpatient installation. In this study, hospital service quality is measured through the sub-variables consisting of physical environment quality, interaction quality, and outcome quality. Physical environment quality is measured through the dimensions of ambient conditions, design and social factors. Interaction quality is measured through the dimensions of attitude, behavior and expertise of doctors and nurses. In addition, the outcome quality is measured by the waiting time dimensions of doctors and nurses, tangibles and valence. The results of the hospital service quality assessment are shown in Table 24.

Table 24. Distribution of Hospital Service Quality Service Assessment on Inpatient Services at Piru Regional Hospital in 2019

| Variable | Mean |
|-------------------------------------|-------------|
| Physical Environment Quality | 2.57 |
| Ambient Condition | 2.34 |
| Design | 2.70 |
| Social Factor | 2.67 |
| Interaction Quality | 2.63 |
| Doctor's Interaction Quality | 2.60 |
| Doctor's Attitude | 2.60 |
| Doctor's Behavior | 2.55 |
| Doctor's Expertise | 2.65 |
| Nurse's Interaction Quality | 2.61 |
| Nurse's Attitude | 2.64 |
| Nurse's Behavior | 2.80 |
| Nurse's Expertise | 2.39 |
| Outcome Quality | 2.52 |
| Waiting time | 2.74 |
| Doctor's waiting time | 2.49 |
| Nurse's waiting time | 2.98 |
| Tangibles | 2.33 |
| Valence | 2.44 |
| Hospital Service Quality | 2.57 |

Based on Table 24, the overall assessment of hospital service quality is good (mean= 2.57). The customers, in this case, the patients, will evaluate an intangible product that

is the service. Furthermore, they will always consider several things regarding the external appearance and impression like the physical environment of the service provider (Z7).

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The results showed that the physical environment quality received a good rating (mean=2.57). The physical environment (servicescape) has an important role, both positive and negative in building up the customer impressions (88). The physical environment is an important tangible component of a service that can provide guidance to customers and form their perception directly (99). Physical environment quality in this study is based on the assessment of the ambient conditions, design and social factors, out based on the cleanliness, and comfort of the inpatient room, inpatient air circulation, aroma and noise in the inpatient rooms and inpatient room noise. The results showed that the respondents gave a badpoor rating (mean=2.34) towards the ambient condition as a whole.

The ambient condition assessment was is carried out based on the cleanliness, and comfort of the inpatient room, inpatient air circulation, aroma and noise in the inpatient rooms and inpatient room noise. The results showed that the respondents gave a badpoor rating (mean=2.34) towards the ambient condition as a whole.

The cleanliness and comfort of the room are also influenced by other factors. Even though hospital cleaning service officers have cleaned the floor regularly, the visitors or patients' families who are not aware of the importance of maintaining the cleanliness by throwing rubbish on the floor or the full rubbish bins which are not cleaned up immediately also affect the cleanliness and comfort, air circulation, and cause unpleasant smell. In addition, setting visiting hours and limiting visitors will also affect the hospital cleanliness and patient comfort.

The main function of the treatment inpatient room is to support the patient's recovery while being treated for illness. The badpoor condition of the inpatient room can affect the patient, for instance, the duration of a patient undergoing hospitalization. Furthermore, the atmosphere of the inpatient room needs to be a concern since the customers have a tendency to choose another service if they experience the environmental discomfort (109).

The results showed that the respondents gave a good assessment for the design (mean=2.70). The assessment showed the ease with which visitors can access the rooms. Patients considered that the bathroom was accessible, the room spacious and the nurse station near.

, but gave a poor assessment for the bathroom of the inpatient rooms. From the observations, there was a bathrooms in each inpatient room, but it could not be used due to the non-flowing water, unavailability of water in the tub, and clogged closets. These problems forced the patient to go to the bathroom outside the room which made the patient and his family uncomfortable.

The inpatient rooms that are easily found by families or visitors get the highest score or rating in the design aspect. It shows that the location of the room is easy to find by the families or visitors and reduce the possibility of visitors or families entering the wrong room that might interfere with other patients.

The location of the nurse's work space (nursestation) also gets a good rating. The nurse station is important since the patients need a lot of help from the nurses during hospitalization. It is located near the main door of the inpatient room, while the inpatient rooms

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are lined up facing each other, so the patients or their families have no difficulty in calling nurses when they need a help. The nurse station should not be far from the inpatient room. It is intended to give supervision to the patients that can be done more effectively and efficiently. Its location can also affect the reduction in control and communication of the nurses to patients which can have an impact on the quality of nurse services (114).

The area of the treatment inpatient room is related to the comfort of the patient during the stay. The more proportional area of the room with the number of patients treated, the better the health services perceived by the patients because the provision of nursing care can take place more effectively (122).

The results showed that the respondents gave a good assessment of social factors (, but the mean=2.67). The assessment meant the patients responded positively to the interpersonal aspects of the service provided as well as the communications skill of the staffs. is an indicator that gets a bad rating for the patient feel disturbed when many visitors in the inpatient room. The number of visitors tends to make patients feel disturbed, especially during visiting hours, considering that one patient with another has an adjacent bed. The inpatient installation at Piru Hospital has implemented visiting hours at 11.00-13.00 Eastern Indonesia Time and 17.00-19.00 Eastern Indonesia Time. However, the regulation has not been implemented well since many visitors who live far away from the hospital want to visit the patients and in the end, the officers allow them. In addition, personal factors between the visitors and the officers who already know each other well make officers less disciplined in

carrying out the restrictions on the number of visitors.

Table 24 shows showed that the results of the interaction quality assessment are was good (mean=2.63). However, the results showed that the nurse expertise assessment on the interaction quality indicator was poor (mean=2.39). The quality of interactions that occur between the providers and the customers is the most important part of the customer assessment of the quality of the product or service as a whole. In this study, the interaction quality is measured based on the results of the assessment of the attitudes, behaviour and expertise of doctors and nurses. The results showed that the nurse expertise assessment on the interaction quality indicator was still poor. The expertise of the nurses. The nurse expertise was was still considered bad since according to the patients assumed, they the nurses did not have not been fully able to carry out the nursing actions in accordance with according to the doctors's instructions. Also, They nurses were not n't able sometimes do not know the to explain some procedures which patients had questions about. answer of the patients' questions and some wait for their fellow nurses when the patients ask about the doctor's instructions that must be done. In addition, the patients also complain because the nurses do not provide a good explanation when they need some clarifications towards nursing actions.

Doctors and nurses as the main components of the health service providers to the community are expected to provide good examples in having interae, have a good interaction in while providing quality medical

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and nursing services to the patients. They must be able to provide good services based on their competencies and expertise, speak clearly and be friendly, gentle, patient, and polite in providing the services. It will greatly affect the process of communication and interaction during the delivery of services performed to patients. The arrogant attitude will cause the listener to be reluctant and reject the description from the communicator (13).

The results quality is identical to what the customer receives when the production process or service product ends (14-15). Overall, the respondents' assessment of the outcome quality at the inpatient facility at Piru Regional Hospital is good (mean=2.52). However, the assessment of the waiting time of dimension as a whole is good, but the doctors was still considered bad (mean=2.49). Likewise, the dimensions of tangibles (mean=2.33) and valence (mean=2.44) get poor ratings. The overall outcome quality was good due to the highly positive response of the waiting time of the nurses (mean=2.98).

The dimension of the doctor's waiting time is measured through the aspect of the doctor visiting the patient according to his schedule and by the speed/responsiveness in carrying out with which the medical actions were delivered when he is needed. Patients considered the doctors to be not punctual and the delivery services being done in a rushed manner.

It still gets a bad rating since the doctors frequently arrive late since they live in Ambon that is far from Piru Hospital. In another occasion, when the doctors in charge are unable to come, they sometimes do not inform the head of the medical services department or

the head of the inpatient room. Moreover, there are doctors who are in a hurry to leave the hospital because they have to run the practice in another hospital in Ambon. The speed of the doctor in taking action to the patients who need him/her is still bad because the medical action schedule is not going well due to the lack of necessary medical equipment. In addition, there is only one specialist doctor in Piru Hospital, so they must serve in outpatient polyclinics and other places, for instance, the operation room. It is also known that the general practitioner is not currently regulated as a guardian in the inpatient room during normal working hours.

The tangibles dimensions get a bad rating (mean=2.33). Patients found the facility to be in an improper condition, including the bed sheets, the pharmacy and the laboratories

for bed sheets that are not immediately replaced when dirty or exposed to the patients' blood or vomit, so the patients find the room dirty and uncomfortable. Similarly, the patients and families assess that the availability of drugs in pharmacies is still poor because the drugs are not always available when they need them which causes the patients and their families to buy at the pharmacies outside the hospital. Additionally, the doctors sometimes prescribe drugs that are difficult to obtain that must be purchased in Ambon. Medication is important in healing a patient's illness. The medical laboratory and radiology investigations also get a bad rating. It is due to the patient who has to do the re-examination because the doctor feels that the laboratory results do not match the clinical condition and diagnosis of the patient. Besides, the x-ray photographs in radiological examinations are still repeatedly

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done since the results are not good enough and unreadable to support the certainty of the diagnosis.

The availability of the medical support facilities such as laboratories and radiology is very much needed by the doctors to make a proper diagnosis of a patient's illness. The complete facilities can build up the patients' belief that they will get the accurate diagnosis, so the doctors can provide appropriate treatment and patients recover faster.

The valence dimension achieved a poor rating (mean=2.44). The rating was because the patients reported a bad experience with indicators that get a bad rating are the experience of the results of services room in inpatient facilities, the experience of the availability and quality of drugs at the pharmacy services, and the experience of the results of laboratory support services, and radiology.

The patient experience is important because the hospital is a service provider, so most of it is conveyed as performance and experience. The quality of service can be felt simultaneously when the service is provided, i.e. at the time of interaction between the consumers and the service providers. The bad patient experience is closely related to the quality of the patient care environment, especially the atmosphere and conditions of the inpatient room which is indeed poor, as well as the experience of drugs and poor medical examinations because the quality of these

aspects in the inpatient installation at Piru Hospital is not good.

The patients' experience in the hospital industry is important because hospitals provide service products that have intangible properties, so the services are mostly delivered as a performance and experience (146). If there are still respondents who give negative evaluations, it leads to two possibilities which are the delivery of the health services that have not been maximized or the differences in perceptions between people with one another.

The patients' considerations in determining whether they get a good experience is influenced by the experience of encountering with the health service provider which can then develop into the basis for determining patient satisfaction (15,167). This experience is certainly related to the process of providing the service itself, where the quality of service can be felt as long as the service is provided. One of them is at the time of interaction between the consumers and the service providers (16).

Description of Patient Satisfaction Results at the Inpatient Installation of Piru Hospital

Patient satisfaction is the feeling of pleasure or disappointment which the patients get from comparing the performance or perceived services results with expectations (1748). The results of the patient satisfaction assessment are shown in Table 32.

Table 32. Distribution of Patient Satisfaction Assessment on Inpatient Services at Piru Hospital in 2019

| Variables | Mean |
|--|------|
| Patient satisfaction with Physical Environment Quality | 2.60 |

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| Ambient Condition Satisfaction | 2.37 |
| Design Satisfaction | 2.71 |
| Social Factors Satisfaction | 2.70 |
| Patient satisfaction for Doctor's Interaction Quality | 2.62 |
| Doctor's Attitude Satisfaction | 2.65 |
| Doctor's Behavior Satisfaction | 2.62 |
| Doctor's Expertise Satisfaction | 2.59 |
| Patient satisfaction for Nurse Interaction Quality | 2.68 |
| Nurse's Attitude Satisfaction | 2.70 |
| Nurse's Behavior Satisfaction | 2.88 |
| Nurse's Expertise Satisfaction | 2.45 |
| Outcome Quality Satisfaction | 2.50 |
| Doctor's Waiting Time Satisfaction | 2.58 |
| Nurse' Waiting Time Satisfaction | 2.82 |
| Tangibles Satisfaction | 2.13 |
| Valence Satisfaction | 2.46 |
| Patient Satisfaction | 2.60 |

Table 32 shows that the overall assessment of patient satisfaction at the inpatient facility at Piru Hospital is good (mean=2.60). The patient satisfaction is measured through four aspects: physical environment quality satisfaction, physician interaction quality, nurse interaction quality, and outcome quality. From these four measurement aspects, the highest value is in the aspect of nurse interaction quality (mean=2.68). Interaction quality refers to the patient's perception towards the services provided by the health workers (18). Of all the sub-aspects of nurse interaction quality, the patients responded most poorly to nurse's expertise satisfaction (mean=2.45). These results are in line with the research by Nurcahyanti and Setiawan (19) who explain that the interaction quality that occurs during the process of delivering health services has the greatest influence on the service quality perceptions.

The aspect with the lowest score is the satisfaction with for outcome quality

(mean=2.50). The outcome quality is the patient satisfaction with the quality of service outcomes felt during the hospitalization (19). The sub-aspects of outcome quality which returned the poorest response from patients are tangibles' satisfaction (mean=2.13) and valence satisfaction (mean=2.46). It needs to be considered since based on Ariani's research (20), it is mentioned that the outcome quality has a positive effect on the patient satisfaction.

Physical environmental quality satisfaction consists of three aspects including ambient condition satisfaction, design satisfaction, and social factor satisfaction. The aspect with the highest value is the aspect of design satisfaction. It shows that the arrangement of the room both functionally and aesthetically has met the needs of the patients, one of which is the location of the nurse's station that has provided the feeling of pleasure, so they are satisfied with the design aspects of inpatient services at Piru Hospital. The aspect with the lowest value is the ambient condition aspect. It covers visual and non-visual aspects, such as

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light, air circulation, temperature, music, and aroma.

Interaction quality refers to the patient's perception towards the services provided by the health workers (21). The doctor satisfaction interaction quality consists of ~~the doctor's~~ attitude satisfaction aspects, ~~doctor's~~ attitude behavior satisfaction, and ~~doctor's~~ expertise satisfaction. The highest value is in the aspect of the doctor's attitude. It is supported by the research of Tacoh et al. (22) which explains that the aspects of speed in providing the services needed and the doctors' patience ~~is~~ receiving patient complaints are important aspects in the quality of patient services. The highest score or value is obtained by the satisfaction aspect of the doctor's expertise. This result is in accordance with the study of Tacoh et al. (22) who explains that the doctors' expertise needs to be improved because the lack of service can cause the patients dissatisfied.

The nurse interaction quality gets the highest value on the nurse behavior satisfaction indicator. This result is clarified by the research of Juwariyah and Joyo (23) which shows that the patient satisfaction is an indicator of quality hospital services. The caring behavior is an integrated aspect with nurses in providing nursing care. The lowest value is found in the

aspect of nurse expertise satisfaction. It is different from the results of the Agritubella study (24) which affirms that the majority of the patients are comfortable with the nursing services.

The outcome quality is the patient satisfaction with the quality of service outcomes felt during hospitalization. In this study, the dimension of satisfaction with the highest value is found in the nurse's waiting time satisfaction. This result is in line with Ismail's research (25) which elaborates that the nurses' waiting time that is still quite long in the process of transferring patients to ~~the~~ inpatient units affects a patient's satisfaction. The lowest score is the tangibles satisfaction. This result is different from the study of Conscience (26) which explains that the most dominant dimension of service quality in patient satisfaction is ~~the~~ tangibles.

The Analysis of the InfluenceEffect of Hospital Service Quality on Inpatient Satisfaction

Multiple linear regressionThe influence test in this study was conducted to test the effect on the variable of hospital service quality on inpatient satisfaction. Test results are shown in Table 43.

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Table 43. Test Results of the Influence of Hospital Service Quality on Inpatient Satisfaction in Inpatient Installation at Piru Hospital 2019

| Variable | b | pP |
|-------------------------------------|-------|-------|
| Hospital Service Quality | 0.635 | 0.000 |
| Physical Environment Quality | | |
| Ambient Condition | 0.160 | 0.001 |
| Design | 0.052 | 0.416 |
| Social Factor | 0.080 | 0.169 |
| Interaction Quality | | |

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| Variable | b | pP |
|-------------------------|-------|-------|
| Doctor's Attitude | 0.237 | 0.000 |
| Doctor's Behavior | 0.115 | 0.045 |
| Doctor's Expertise | 0.056 | 0.257 |
| Nurse's Attitude | 0.094 | 0.192 |
| Nurse's Behavior | 0.027 | 0.620 |
| Nurse Expertise | 0.134 | 0.015 |
| Outcomes Quality | | |
| Doctor Waiting Time | 0.285 | 0.000 |
| Nurse Waiting Time | 0.094 | 0.190 |
| Tangibles | 0.079 | 0.379 |
| Valence | 0.257 | 0.000 |

Based on the Table 34, the overall hospital service quality had a significant and strong influence on the patient satisfaction ($p = 0.000$, $b = 0.635$). It means that good quality hospital services could increase patient satisfaction in the inpatient installation of Piru Hospital. It is in line with previous studies y, which found that the patient satisfaction is directly affected by the service quality (19). Similar research also states that 74.9% of the patient satisfaction is explained by the service quality variables (20).

In the results of the physical environment quality sub-variables, there ~~was was~~ one dimension that affects patient satisfaction, ~~which that was~~ the ambient condition with the b value of 0.160. This result is supported by the previous research which states that the physical environment condition of the inpatient room affects the satisfaction of the patients (21).

The interaction quality sub-variables that influenced patient satisfaction were the dimension of the doctor's attitude ($b=0.237$), doctor's behaviour ($b=0.115$) and nurse's expertise ($b=0.134$). This result is in line with the previous research conducted by Triwahyuni

(22) which states that doctor's services affect patient satisfaction. On the other hand, if the interaction takes place poorly, it will lead to frustration (23).

The results on the nurses expertise is also supported by a research showing that nurses skills influence inpatient satisfaction (24, 25).

The outcome quality sub-variables that influenced the patient's satisfaction were the waiting time dimension of doctors ($b=0.285$) and valence ($b=0.257$). It needs to be considered since based on Ariani (26), it is mentioned that the outcome quality has a positive effect on the patient's satisfaction.

The results of the study are also in accordance with the previous study which states that the length of the waiting time affects patient satisfaction (27). In addition, the result of this study is strengthened by the previous research which states that the responsiveness of doctors in treating patients is very important because it affects patient satisfaction (28).

The result on valence is in line with the the previous research which showed that valence is strongly influential to satisfaction. (29)

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A positive regression coefficient means that there is a direct relationship between the ambient condition and patient satisfaction. The better the quality of the ambient condition of the patient's inpatient room, the better the patient's satisfaction in the inpatient installation of Piru Hospital.

The interaction quality sub-variable that influences patient satisfaction is the dimension of the doctor's attitude, doctor's behavior and nurse's expertise. All of those sub-variables returned a positive regression coefficient which showed a direct relationships between each of those sub-variables with patient satisfaction.

Referring to Table 2, four of those mentioned sub-variables showing direct relationship were considered to show poor quality in Piru Hospital. Those sub-variables were 1) ambient condition, 2) nurse expertise, 3) doctor waiting time and 4) valence. Four of them should be addressed by the hospital administration in order to enhance patient satisfaction.

A doctor's attitude with a value of b of 0.237 means that the better the attitude of the doctor in checking the patient, the better the patient satisfaction at the inpatient installation. The doctor's behavior with a b value of 0.115 indicates that the better the doctor's behavior in providing services to patients, the more the patient feel satisfied. Last but not least, the expertise of nurses with a value of b is 0.134 which means that the better the expertise of nurses in performing nursing care to the patients, the better the patient satisfaction in the inpatient installation of Piru Hospital.

The outcome sub-variable that influences the patient satisfaction is the waiting time dimensions of doctors and valence. The

doctor's waiting time with the b value of 0.285 means that the more appropriate the doctor's waiting time in examining and performing medical treatment to patients, the more the patient feels satisfied. The valence with the b value of 0.257 means that the better the valence felt by the patient, the better the patient satisfaction at the inpatient installation at Piru Hospital.

Hospital service quality refers to the ability of the hospitals to provide services in accordance with the standards of the health profession and can be accepted by their patients (27). The results of this study indicate that a good hospital service quality will increase patient satisfaction in the inpatient installation of Piru Hospital. It is in line the with previous study that the patient satisfaction is directly affected by the service quality ($r = 0.699$) (28). Similar research also states that 74.9% of the patient satisfaction is explained by the service quality variables (29).

The results showed that the physical environment quality subvariable which measures the quality of the environment around the patient care room has an ambient condition aspect that is the atmosphere and conditions around the patient's care room which have a positive and significant effect on the patient satisfaction. This result is supported by the previous research which states that the physical environment condition of the inpatient room or comfort of the inpatient room is described in three aspects: comfort of the air temperature in the inpatient room, noise intensity, and intensity of lighting in the inpatient room affects the satisfaction of the patients (30). The relationship between inpatient room cleanliness and patient satisfaction is also in line with the results of the previous study which

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~~at least five or six) for all inpatient patients.~~
 The results showed that the interaction quality subvariable on the aspects of doctor's attitude, doctor's behaviour and nurse's expertise are proved to have a positive and significant effect on the patient satisfaction. The quality of interaction is the most important part of a customer's experience. If the interaction goes well, it will not only make the customer satisfied but also happy. On the other hand, if the interaction takes place poorly, it will lead to frustration (32). It is in accordance with the previous study that the quality of physician services influences inpatient satisfaction (22). This is also supported by a research on the nurses' knowledge, attitudes and skills that influence inpatient satisfaction (33).

The assessment of the nurse expertise shows that the indicators that get a bad rating are the nurses ability to carry out actions to the patients according to the doctor's instructions, the nurses ability to explain and perform well the nursing actions taken to the patients, and the nurses actions that are expected to help the patients recover.

Lack of collaboration between doctors and nurses in taking care of the patients, the doctor's instructions that are not clearly readable in the patient's medical record status and the nurses shift to take care of patients that is not implemented properly are some of the causes of poor respondents' assessment of nurses' ability to carry out doctor's instructions. Lack of functional nursing training and effective communication training have never been done causing the process of communication between nurses and patients going poorly which results in a poor assessment of the nurse's ability to explain and perform nursing actions that are expected to accelerate the patient's recovery.

This is in line with the previous research which explains that there is an influence of the expertise of health workers on the patient satisfaction (34). The expertise aspect consists of two main elements: the ability of the health service provider as promised and the accuracy of the services provided to minimize or prevent errors in the service process.

The results showed that outcome quality subvariable in the waiting time aspects of doctors and valence affect the patient satisfaction. The doctor's waiting time is the length of time waiting for the patients to get services by doctors. The test results showed the waiting time of the doctor had a positive and significant effect on the patient satisfaction. This result is in line with the previous research conducted by Triwahyuni (35) which states that doctor's services affect patient satisfaction. The results of the study are also in accordance with the previous study which states that the length of the waiting time affects patient satisfaction (36). In addition, the result of this study is strengthened by the previous research which states that the speed and responsiveness of doctors in treating patients is very important because it affects patient satisfaction (37).

The valence dimension is still considered poor in terms of experience with care room facilities, quality and availability of drugs, and medical support examinations. Poor experience towards the quality and availability of drugs because they have to buy at a pharmacy outside the hospital and doctors prescribe drugs that are not in the pharmacy. The supporting services are still poor with some delays because there are still damaged equipment and no reagents. This result is in line with the previous study that assessment with

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supporting services affects the patient satisfaction (35).

Conclusion

Hospital service quality has a positive and significant effect on patient satisfaction in the inpatient installation at Piru Hospital. As the only hospital in the district, and with limited resources, it is a challenge for Piru hospitals to provide the best service to meet the needs of these remote areas. Even without competitors, hospitals must pay attention to patient satisfaction, while continuing to improve the improvement of its resources for the sake of improving public health.

The limitation of this study was that the sample was only taken from the inpatient unit.

Acknowledgment

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Competing interests

The authors declare that they have no competing interests.

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Revision after the English Proofreading

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To: "APACPHKL ADMIN ." <apacphkl@um.edu.my>

Tue, Apr 14, 2020 at 2:39 AM

dear chief editor
thankyou and best regards

Dr. Ernawaty
Department of Health Policy and Administration
Faculty of Public Health
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Indonesia

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Letter of Acceptance - JUMMEC

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To: ernawaty ernawaty <ernawaty@fkm.unair.ac.id>

Wed, Jun 3, 2020 at 9:52 AM

Dear author,

Congratulations! Your papers have been accepted and soon will be published in the Supplementary Journal of Health and Translational Medicine (JUMMEC). Here attached together the Letter of Acceptance for your perusal. All the authors will be sent the softcopy of the supplementary once it is published expected this June 2020.

Thanks for all of your contributions in this supplementary and all the best.

Best Regards,

*c/o Prof Dr Low Wah Yun
Guest Editor,
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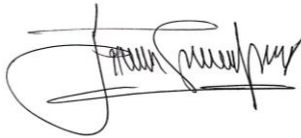
Dear Ernawaty,



It is a pleasure to accept your revised manuscript entitled “The Effect of Hospital Service Quality on Inpatient Satisfaction in Piru Hospital” in its current form for publication in the Journal of Health and Translational Medicine.

Thank you for your fine contribution. Would you have any queries, please do not hesitate to write to the Editorial Assistant, Mrs. Nur Asyikin Yakub by email at apacphkl@um.edu.my or direct line: 03-7967 7513.

Sincerely Yours,



Prof Wah-Yun Low, PhD

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