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Service Quality Factors Affecting Interest in Repeat Outpatient Patients

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Abstract

Patient satisfaction levels are a good sign of how well a hospital provides services. The likelihood that a patient will return increases if they are satisfied with the hospital's services, which obviously benefits the facility. In this study, Royal Prima Medan outpatients' intentions to return to RSU were examined in relation to several service quality metrics. A cross-sectional design was used for this analytical survey research study. The study's population consisted of 4,011 average outpatients at the Pulmonary and Cardiac Polyclinic from July to August 2022. A sample of 98 respondents using an unintended sampling strategy was drawn from this cohort. Methods for univariate, bivariate, and multivariate data analysis were used in this study. The findings showed that the intention to return to the hospitalized patients road was influenced by the variable quality of infrastructure (sig-p = 0.004 0.05), the variable quality of human resources (sig-p = $0.025 \ 0.05$), and the variable quality of security (sig-p = $0.015 \ 0.05$), whereas the personal quality variables (sig-p = 0.054 > 0.05, gender = 0.253 > 0.05, education = 0.322 > 0.05, and occupation) were not.. According to the study's conclusions, it is thought that providing health staff training, reducing patient costs for less fortunate patients, and creating an organizational structure focused n duties and education will all enhance the hospital.

Introduction

Hospital services are an important part of the service industry. Patient satisfaction with hospital services is the most important indication of hospital standards. A hospital's good service will demonstrate that it is of high quality. This is demonstrated by health staff' quick, precise, and courteous treatment of patients. According to the World Health Organization (WHO), population coverage for health services is still below than the goal coverage of 75%. This is found in just 73.2% of individuals who get health care. Furthermore, the services supplied to patients are still far from adequate or sufficient, as evidenced by 73.2% of patients being dissatisfied with the health care provided.

Every nation has a fundamental need for high-quality healthcare, and both developed and developing nations give it top priority. Patients in Malaysia, Thailand, Singapore, and Brunei, among other emerging nations, are satisfied with the treatments they receive there.3 This is demonstrated by the fact that 80% of patients are satisfied with the services received, despite a target of 75% coverage of health care in medical institutions. It has been shown that the main locations for Indonesian treatment are Malaysia and Singapore. America, Japan, England, and France are comparable. The patient satisfaction rate for developed country health systems is 82.7%.²

In 2017, Indonesia has a total of 2,831 hospitals, including 2,267 general hospitals and 564 specialized hospitals. In Indonesia, the private sector manages 64% of hospitals, the Regional Government manages 27%, and the Central Government manages 9%.4 The number of hospitals in North Sumatra Province has grown year after year. In 2019, there are 29 Regency/City Government Hospital Units, 6 TNI/Polri Hospital Units, 95 Private/Foundation/PT Hospital Units, 1 Provincial Government Hospital Unit, 7 BUMN Hospital Units, and 2 Individual Hospital Units in North Sumatra.5

The hospital, according to Republic of Indonesia Law No. 44 of 2009, is a health service that arranges entire individual health services such as inpatient, outpatient, and emergency services.⁶ The

hospital, as a health facility that delivers health services to the community, plays a critical role in driving public health improvement. As a result, hospitals must provide excellent services that adhere to set criteria and may reach all sectors of society.⁷

The implementation of health services carried out by hospitals as health care facilities would seek to generate patient satisfaction by offering the finest service for each patient. This will subsequently influence the patient's desire to return to the hospital. Return interest is defined as satisfaction, appraisal, or assessment after utilizing a service, indicating that the chosen service meets or surpasses expectations.⁸ The Republic of Indonesia's Ministry of Health states that a patient would consider a service to be excellent if it can fulfill their needs, as judged by their opinion of the service they received (satisfied or disappointed, including the amount of time of treatment). If they are patient, they will be able to survive in the face of rising competition on a worldwide scale.⁹

Patients will examine the quality of medical services, location, and economical rates while selecting a service. Hospitals must maintain quality and give a positive perception for patients in order to generate contentment, desire in repeat visits, and patient trust. If the service quality is good, i.e. reliable, sophisticated, modern, complete, and quick in responding to patients, and locations are easily and strategically accessible, the patient will choose to use the health services offered and a satisfied attitude will emerge.¹⁰

To be able to reuse health services, customers' expectations must be met by the services provided by the hospital. As a result, it is critical to pay attention to and continuously evaluate customer satisfaction and expectations, which must be followed by service improvements and effective and efficient management. make the hospital resilient and competitive in order to ensure the hospital's continuity. According to Parasuraman, five major aspects may be used to measure service quality. Reliability, assurance, tangible, empathy, and responsiveness are the five primary elements of service quality mentioned. Parasuraman and responsiveness are the five primary elements of service quality mentioned.

The amount of patient satisfaction is an indicator of the hospital's service quality. The increased degree of patient satisfaction suggests that the hospital's service quality is improving. If a patient is happy with the services offered by the hospital, he or she is more likely to return, which benefits the hospital. Interest in repeat visits is a response to things that suggest a customer's intention to make a repeat purchase. Repeat visits may also be understood as part of the consumer loyalty phases; various elements impact patient loyalty, including customer satisfaction, service quality, image, and switching obstacles. In the consumer loyalty image, and switching obstacles.

According to Helmawati's 2017 study, responsiveness and empathy are the aspects of service quality that have the greatest impact on patient satisfaction, while physical evidence (tangible), reliability, and assurance have no bearing on patient satisfaction. The study was conducted at Rumah Zakat Clinic in Yogyakarta. Service quality (reliability, responsiveness, assurance, empathy, and tangible) and patient repeat hospital visits are related, according to Istiqomah's 2016 study on the relationship between the two at Community Health Center II Tambak, Banyumas Regency.

RSU Royal Prima Medan is one of the largest private hospitals in the country and will serve as a referral center for the community, particularly the inhabitants of Medan and North Sumatra in general. RSU Royal Prima is entrusted with providing health services to persons who want to seek treatment in a fair, quality, and economical manner. There are now numerous hospitals that are excellent health service providers, as well as many hospitals that offer a variety of services. As one of the hospitals in North Sumatra, RSU Royal Prima must enhance the quality of services provided to the public in order to compete in current globalization era.

The results of monitoring quality indicators for outpatient treatment at RSU Royal Prima Medan in 2021 reveal that customer happiness has fallen every month, with a severe decrease in patient satisfaction in December, namely 55.66%, according to data from RSU Royal Prima Medan. However, the service standard should be higher than 90%. This shows that hospital administration has not optimally delivered health services in accordance with patients' preferences, as many patients are unsatisfied and will not return to use health services.

According to the findings of 20 outpatient room interviews, four persons (20%) claimed that there were doctors who did not visit, doctors who were less sensitive to patient concerns, and doctors who did not provide clear information about their conditions. 5 persons (25%) indicated that the ward outpatient treatment is less pleasant, that the facilities are subpar, that registration is time-consuming, and that visit periods are limited. 5 persons (25%) claimed that nurses were not on time when patients needed them, that they paid little attention to patient complaints of pain, that they seemed hesitant to help patients, and that the nurse's therapeutic communication was not as successful as the patient's requests. 3 individuals (15%) were dissatisfied with the service and declined to return, and three persons (15%) stated that they would not recommend the facility to relatives or friends. The researcher is interested in investigating "Factor Analysis of Service Quality on Interest in Visiting Outpatient Patients at RSU Royal Prima Medan in 2022" based on the description of the problem above.

Methods

This study is an analytic survey research using a cross-sectional design. From July to August 2022, the population in this study was an average outpatient at the Pulmonary and Cardiac Polyclinic of 4,011 persons, with a sample of 98 responders utilizing an unintentional sampling approach. This study included univariate, bivariate, and multivariate data analysis methods.

Results

According to Table 1, there were 54 respondents (55.1%) aged 18-35 years and 44 respondents (44.9%) > 35 years old among the 98 respondents. In terms of gender, 50 (51.0%) of respondents were female, while 48 (49.0%) were male. In terms of educational qualities, 20 (20.4%) had a low education, 67 (68.4%) had a medium education, and 11 (11.2%) had a high education. Furthermore, 45 respondents (45.9%) did not work, whereas 53 respondents (54.1%) did

Table 1. Frequency Distribution of Respondents Based on Respondent Characteristics

Characteristics	f	%	
Age			
18-35	54	55,1	
>35	44	44,9	
Total	98	100	
Gender			
Female	50	51,0	
Male	48	49,0	
Total	98	100	
Education			
Low (No School-Elementary School)	20	20,4	
Middle (Junior High School-Senior High School)	67	68,4	
High (College)	11	11,2	
Total	98	100	
Job			
Unemployment	45	45,9	
Employee	53	54,1	
Total	98	100	•

Table 2 reveals that the chi-square test results demonstrate that age has a sig-p value of = 0.000 and education has a sig-p value of = 0.000. This demonstrates that there is a relationship between age and education and the desire to return to outpatients, whereas gender has a sig-p value of 0.517 and occupation has a sig-p value of 0.492, indicating that there is no relationship between gender and occupation and the desire to return to outpatients. RSU Royal Prima Medan is a university in Medan, Indonesia. The variable quality of infrastructure, service/administration, human resources, and security has a sig-p value of 0.000, indicating that there is a link with the interest in visiting RSU Royal Prima Medan outpatients.

Table 2. Relationship between Personal Quality, Infrastructure, Services/Administration, Human Resources, and Safety with Interest in Visiting Outpatients at RSU Royal Prima Medan

		Return Interest				Total	
Variable	Available		Not available		— Total		Sig-p
	f	%	f	%	F	%	_
Age							
18-35	48	88,9	6	11,1	54	100	0,000
> 35	9	20,5	35	79,5	44	100	
Gender							
Female	27	54,0	23	46,0	50	100	0,517
Male	30	62,5	18	37,5	48	100	
Education							
Low (No School-Elementary School)	3	15,0	17	85,0	20	100	0,000
Middle (Junior High School-Senior High	47	70,1	20	29,9	67	100	
School)						100	
High (College)	7	63,6	4	36,4	11	100	
Job							
Unemployment	24	53,3	21	46,7	45	100	0,492
Employee	33	62,3	20	37,7	53	100	
Quality of Infrastructure							
Good	45	93,8	3	6,2	48	100	0,000
Bad	12	24,0	38	76,0	50	100	
Dau	12	21,0	50	70,0	30	100	

Quality of Service/ Administration							
Good	45	88,2	6	11,8	51	100	0,000
Bad	12	25,5	35	74,5	47	100	
Quality of Human Resources							
Good	48	92,3	4	7,7	52	100	0,000
Bad	9	19,6	37	80,4	46	100	
Safety Quality							
Good	44	93,6	3	6,4	47	100	0,000
Bad	13	25,5	38	74,5	51	100	
Total	57	58,2	41	41,8	98	100	

Personal quality parameters such as age have a sig-p value of = 0.054 > 0.05, gender has a sig-p value of = 0.253 > 0.05, education has a sig-p value of 0.322 > 0.05, and work has a sig-p value of -p = 0.501 > 0.05, according to Table 3. Furthermore, the infrastructure quality factor has a sig-p value of 0.040, whereas the service/administration quality factor has a sig-p value of 0.568 > 0.05. Human resource quality has a sig-p value of 0.0250.05, while safety quality has a sig-p value of 0.0150.05. This means that the quality of infrastructure, human resources, and security influence the intention to revisit outpatients because they have a sig-p value of 0.05, whereas personal quality factors (age, gender, education, work) and service quality /administration do not because they have a sig-p value greater than 0.05.

Based on the logistic regression test findings, the variable quality of infrastructure facilities receives an Exp (B) or an Odds Ratio (OR) value of 54.924. This means that the variable quality of infrastructure facilities has a 55-fold influence on the intention to return for outpatient visits, making it the variable with the greatest influence on the intention to return for outpatient visits because it has the highest Exp (B) value.

Table 3. Logistic Regression Multivariate Test Results

Variable		Sig-p	Exp(B)	
Kualitas Personal	Umur	0,054	0,015	
	Jenis Kelamin	0,253	0,125	
	Pendidikan	0,322	0,228	
	Pekerjaan	0,501	2,689	
Kualitas Sarana Prasarana		0,004	54,924	
Kualitas Layanan/Administrasi		0,568	2,364	
Kualitas Sumber Daya Manusia		0,025	24,191	
Kualitas Keamanan		0,015	51,279	

The Influence of Personal Qualities (Age, Gender, Education and Occupation) on Intention to Repeat Outpatient Patients

According to the study's findings, personal quality characteristics related to age had a sig-p value of 0.054 > 0.05, gender had a sig-p value of 0.253 > 0.05, education had a sig-p value of 0.322 > 0.05, and employment had a sig-p value of 0.501 > 0.05. This indicates that personal characteristics (age, gender, education, and employment) have little impact on the decision to return to RSU Royal Prima Medan as an outpatient.

At the Poncol Health Center in Semarang City, Aminatuzzahroh, S., did an analysis of the relationship between patient perceptions of health service quality and the re-utilization of outpatient services in 2014. According to the findings, there was no association between technical proficiency (p=0.796), cost (p=0.187), or the effectiveness of continuity of service (p=0.275), but there was one between convenience (p=0.012) and information availability (p=0.012). 17

Additionally, research conducted in 2017 by Irmawati, S. on the effectiveness of health services at the Sangurara Health Center, Tatanga District, Palu City, shows that empathy is related to the care or individual attention provided to the people served by health officials at the Sangurara Health Center, Tatanga District, in order to promote harmony and mutual understanding. Examples of the empathy component include the friendliness of the employees providing health care and the ease with which the general public may contact those providing such services. Personal qualities include the ease with which communication interactions are carried out, attention to relationships, and understanding the requirements of clients or patients. Furthermore, the reduced quality characteristics are utilized to create tools for assessing the quality of health care. Personal quality of health care.

The requirements for a health service are described as quality services that can satisfy service recipients, including an evaluation of patient satisfaction with regard to the accessibility of health services (available), appropriateness of health services (appropriate), continuity of health services (continue),

acceptance of health services (acceptable), affordability of health services (affordable), and efficacy of health services (effic).

The study's findings indicate that personal characteristics like age, gender, education level, and career have little impact on a person's desire to continue receiving outpatient care. This is due to the fact that in this study, patients' interest in seeing outpatients is not dependent on their individual characteristics. Customer satisfaction is based on criteria relating to the service quality that they perceive, not on characteristics of the customer as a whole. Patients who are happy with the medical care they receive are more likely to want to return. The services anticipated of the patient include promptness in receiving care, politeness of medical personnel, and promises of recovery made by the hospital. These findings demonstrate that personal quality is not a factor affecting the inclination to return to RSU Royal Prima Medan's outpatient services.

The Influence of Quality of Infrastructure on Interest in Repeat Visits for Outpatients

According to the study's findings, the variable quality of infrastructure has a sig-p value of 0.004 0.05. This suggests that the quality of infrastructure impacts people's desire to attend RSU Royal Prima Medan's outpatient department. Furthermore, the variable quality of infrastructure has a 55-fold influence on the intention to return for outpatient visits, making it the variable with the greatest influence on the intention to return for outpatient visits because it has the highest Exp (B) value.

The results of a 2018 Jacobis, R. research titled Factors of Service Quality Influence on Inpatient Satisfaction of Jamkesmas Participants at BLU Prof. Dr. R.D. Kandou Manado. According to the study, dependability, responsiveness, and empathy had an impact on inpatient satisfaction but assurances and physical amenities did not. To increase patient satisfaction, the hospital should prioritize improving patient care, providing the best caliber of service, and fostering patient trust.20

A multiple linear regression equation was discovered through research done in 2016 by Dewi, M. The study, Effect of Service Quality on Patient Satisfaction with BPJS Users at the East Aceh District Medical Rehabilitation Hospital, revealed the results. KP = 2.47 + 0.26 BF + 0.11 K + 0.37 DT + 0.22 J + 0.122 E In the Medical Rehabilitation Hospital, it can be said that the factors of physical evidence, dependability, responsiveness, assurance, and empathy have a favorable impact on patient satisfaction while employing BPJS. The Medical Rehabilitation Hospital's use of the BPJS yielded a coefficient of determination of 0.589, or 58.9%, indicating that the variables reliability, responsiveness, assurance, and empathy had an impact on patient satisfaction.²¹

Physical quality refers to the state of physical amenities, such as the cleanliness of the exam room, the equipment's cleanliness, the toilets' cleanliness, the illumination, and the officers' presentable look. When customers use health services, the physical quality is everything that can be immediately sensed and appreciated by them through their sense of sight. The older age tends to utilize health services more than the younger age, which supports Chunlaka's claim that they will be better able to see the actual condition so that it might result in positive or negative impressions.²²

The research findings indicate that the infrastructure quality in this study has an impact on outpatients' intentions to return. Respondents reported that there were still infrastructure facilities at the hospital that were unsatisfactory for patients, including the fact that the waiting area was still unclean and uncomfortable for patients, that patients were still perplexed by the directions to the outpatient rooms, and that there were still unclean and unkempt outpatient rooms. Most patients are not happy with the hospital's level of care due to some of these issues. The hospital must work to consistently maintain the cleanliness and tidiness of every room, offer a welcoming waiting area, place trash cans around the hospital, and always maintain the cleanliness and tidiness of all medical staff working there in order to improve the quality of infrastructure facilities.

The Influence of Quality of Service/Administration on Intention to Repeat Outpatient Patients

The service/administration quality measure has a sig-p value = 0.568 > 0.05, according to the study's findings. This demonstrates that RSU Royal Prima Medan's outpatients' intentions are unaffected by the quality of care or management.in keeping with Sari's 2017 study on the impact of service excellence on patient satisfaction at "X" Hospital. According to the study's findings, the factors of trustworthiness, responsiveness, confidence, tangibles, and empathy collectively have a favorable and significant impact on patient satisfaction at hospital "X". 23

According to research done by Rizki in 2018 on the subject of "The Effect of Service Quality on Inpatient Satisfaction at the Kediri Leprosy Hospital," it is further demonstrated that all service quality factors positively impact inpatient satisfaction at the Kediri Leprosy Hospital.²⁴ The capacity to deliver promised services promptly and competently, for instance, quickly and on schedule, is referred to as service quality or administration. Customers will obtain the entire service they require without having to repeat pointless diagnostic and treatment procedures, according to continuity of service. A reference for specialized assistance must be available to the client in this situation as well.²⁵

A healthy nurse-patient connection is part of the level of satisfaction that people anticipate from their healthcare providers. Because it may aid in the effective treatment of the patient's illness and in improving their health, this is crucial. The idea that guides the interaction between healthcare professionals and patients is one of mutual trust, empathy, and care. Patients frequently voice their displeasure with officers' attitudes and behaviors, particularly when such officers engage patients in less open communication and provide less information. The amount of free time that health professionals have to talk to patients and their families is crucial for the empathy dimension since it helps to ensure that patients are happy with the care they get.²⁵

Patients demand satisfaction, which includes a well-maintained nurse-patient connection. This is critical since it can aid in the effective healing and enhancement of the patient's health. A reciprocal trust, empathy, and caring relationship underpins the interaction between health personnel and patients. Patients frequently express displeasure with the attitude and actions of police and officers who are less conversational and informed with patients. The spare time for health personnel to speak with patients and their families is critical in the empathy dimension so that patients are happy with the treatments offered.²⁴

The Effect of Quality of Human Resources on Interest in Repeat Visits for Outpatients

The study's findings show that human resource variability has a sig-p value of 0.025 0.05. This implies that a person's decision to seek outpatient care at RSU Royal Prima Medan again is influenced by the quality of the human resources available. Direct evidence, dependability, and responsiveness had a significant impact on customer satisfaction, while assurance and empathy had a negligible impact, according to a 2013 study by Putra, B on the Effect of Public Service Quality on Patient Satisfaction Levels at Community Health Centers in the Boyolali Regional Government.²⁶

The results of a 2018 study by Pratiwi, Y on the Effects of Service Quality on Community Satisfaction as Patients at the Frequent Health Center in Medan Tembung District show that physical evidence, assurance, responsiveness, and reliability all have a positive and significant impact on community satisfaction as a patient. Dependability and assurance have a positive and significant influence on patient satisfaction in the community, in part. As for patients, responsiveness, focus, and tangible proof all contribute favorably but insignificantly to community satisfaction.²⁷

The desire of employees/officers to provide services to patients with replies, such as replying to patient complaints and assisting in the resolution of patient problems, is referred to as human resource quality. Human resource quality is defined as the capacity to offer adequate and trustworthy services. Service that is trusted is constant and professional. Assessment of human resource quality is part of the dependability component, which includes the capacity to offer correct and on-time services. According to the findings of the study, the quality of human resources impacts the inclination to return for outpatient appointments. Every hospital must motivate health workers to improve response time in serving patients so that the services provided are more effective and efficient, with response referring to the speed of service from the time the patient enters the administrative department as well as the speed of

The study's findings also revealed that some patients expressed their dissatisfaction with the length of time it took for nurses to respond to their complaints, leading them to believe that their care was ineffective and inefficient. Patients also complained about the length of waiting time and the fact that it wasn't made clear how long they should expect to wait for an explanation of the findings of their medical examination.

examinations from doctors, nurses, laboratories, radiologists, and other staff.

Conclusion

According to the findings of this study, personal quality factors such as age, gender, education, and employment as well as service/administration quality variables do not affect interest in visiting RSU Royal Prima Medan's outpatient clinics. However, infrastructure quality, human resource quality, and security quality variables do influence the intention to return for outpatient visits.

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