RELATIONSHIP BETWEEN NURSE CARING BEHAVIOR WITH PATIENT SATISFACTION IN ISOLATION ROOM OF PROF. DR. H. ALOEI SABOE HOSPITAL, GORONTALO CITY

Rini Wahyu Mohamad *, Rizki Fitryasari PK **, Rr Dian Tristiana ***

*Undergraduate student of Nursing Faculty, Universitas Airlangga ** Lecture in Nursing Faculty, Universitas Airlangga ***Lecture in Nursing Faculty, Universitas Airlangga Jl. Mulyorejo Surabayaa, Campus C Universitas Airlangga Surabaya phone. 031 5913754 E-mail: anne rristy@yahoo.com

ABSTRACT

Introduction: Caring of Patients in isolation wards require different treatments with the other wards. Satisfaction related to nurses caring behavior towards Patients. This research aimed to verify the relationship between nurse caring behaviors with isolation patient's satisfaction at G4 ward of Prof. Dr. H. Aloei Saboe Hospital in Gorontalo City. Method: This research used descriptive correlative design with cross sectional approach. Sampling technique used non-probability sampling: Consecutive sampling. The population in this research were all patient isolation in isolation wards. Total sample was 29 respondents. The independent variable was the nurse caring behaviors. The dependent variable was the patient isolation. Data were collected by Parasuraman instruments and caring behavior inventory (CBI). Data were Analyzed by Spearman rho test with a significance level of α <0.05. **Result**: The results Showed that the nurse caring behaviors in isolation ward has relation with patient satisfaction (p = 0.000) and (r = 0.364). **Discussion:** The level of the relationship was low in interpretation. Improving patient's satisfaction isolation can be done by improving and maintaining nurse caring behaviors such as maintaining human values and human altruistic, trusting relationships, problem solving in decision making, always provide supportive, corrective and protective, and help meet basic human needs. Further studies should consider the characteristics used by patients in assessing the quality of hospital

Keywords: nurse caring behavior, patient satisfaction, isolation ward

INTRODUCTION

Developments in science and technology today, raises the demands of adequate health care of community services, so that hospitals manage to provide the best service to the community. The principle of improving quality care were improved the quality of service providers, revise services and meet the patients' needs. Improving quality of care is degree to provide efficient and effective services in accordance with professional standards, service standards were implemented fully in accordance with the needs of the patient, utilizing appropriate technology and research results of health/nursing care development in order to achieve optimal health status (Nursalam, 2011). Treatment of patients in isolation wards require a different treatment than the treatment in the other wards including the strict application of personal hygiene, use of Personal Protective Equipment (APD), and minimal contact with patients. Isolation is the separation of people in such a way to avoid transmission to others (Tamher, 2008). Some of the criteria in the isolation room is a separate room, restrictions on the mobility of patients, and officers wear masks at all times in contact with the patient. Satisfaction refers to the application of the code of professional conduct standards that optimal health care can be seen from the behavior, as well as the skill shown by a nurse or a medical doctor or other health care provider. Shirley (2012) study showed that 82.7% of patients were satisfied with nursing services such as respect for the patient, quiet, gentle, caring, compassion and empathy. In a preliminary study by conducting interviews in 9 patients in isolation rooms G4, 6 (six) patients said that nurses tend to be less friendly, less cooperative and less interact with each interventions delivery. It can be seen from the Bed Occupancy Rate (BOR) in 2013 was 78%. which still far from hospitals ideal target 85%. So far there has been no effort made to improve hospital nurse caring behaviors. The survey results are not in accordance with the hospital vision: referral hospital with excellent service and hospitals mission that administer health services in a comprehensive manner, develop the professionalism of the employees in a sustainable manner, improve the welfare of employees according to performance, develop a financial management system, develop a management information system based information Technology.

Woodruff and Gardial (2002) theory defines satisfaction as a model of the gap between expectations (performance standards should be) with actual performance received by customers. Kotler (2004) in Nursalam (2011) defines satisfaction as a happy or disappointed feeling of someone who emerged after comparing the perception or impression of the performance or the result of a product and its expectations. Patient satisfaction towards hospital may affect the quality objectives achievement of each wards and minimum service standards, patient satisfaction, and employee satisfaction. Patient satisfaction could form perceptions and could affect the hospital quality. Patient satisfaction has a close relationship with health outcomes, both medically and non-medically as adherence to treatment, medical information understanding and continuity of care. Patients who are not satisfied will tell bad matters to others about their bad experiences and this matter can affect the medical and non-medical personnel welfare. Health care service user satisfaction measurements could be seen from the doctorpatient relationship, service convenience, service effectiveness, and tretment security. Client satisfaction is also closely related with health services quality that performed by nurses with caring behavior.

Caring behavior (Caring act) is an action done in providing support to the individual as a whole (Dwidiyanti, 2007). Patient satisfaction is a very important factor to evaluate the quality of nursing services at the hospital and nurse caring behaviors is one of the aspects to nursing care, because caring include

human relations and affect the quality of care and patient satisfaction. Nurses are members of professional who are permanently and continuously used the phrase of nursing care. Potter (2009) state, that caring was a nurse concern with heartfelt for the patients. Caring, empathy, communication gentleness and compassion of nurses to patients would establish therapeutic nurse-patient relationship. Caring behavior that could not be fulfilled will affect the nurses and patients relationship. If such a situation continues, nursing services provided could not be optimal and quality of nursing services will decline. Based on the explained phenomenon of patient satisfaction, researcher interested to conduct research about the relationship between nurse caring behaviors and patient's satisfaction in isolation ward in Prof. Dr. Aloei Saboe Hospital, Gorontalo.

METHODS

This study aimed to verify the relationship between nurse caring behaviors with patient satisfaction in isolation ward of Prof. Dr. H. Aloei Saboe Hospital, Gorontalo. The study design used was descriptive correlative study with cross sectional approach. The population in this study were all patients in isolation ward according inclusion criteria: were treated since the date of 18 November to 17 December 2014 in G4 ward of Prof. Dr. H. Aloei Saboe Hospital, Gorontalo City as much as 29 respondents. The independent variables in this study were nurses caring behavior. The dependent variable in this study is patient satisfaction in the isolation ward. Data collection used instruments in form of questionnaires. Analysis of the data used is Spearman Rank Correlation with a significance level of p < 0.05.

RESULTS

Table 1 Tabulation Results of Nurses Caring Behaviors in G4 (Isolation ward) of Prof. Dr. H. Aloei Saboe Hospital, Gorontalo.

]				
Paramete	Behaviors				-Total
r	always	Often	Someti mes	never	
Human values and altruistic	17	8	3	1	29
Build a trusting relationship	18	8	3	-	29

The use of the scientific method, problem solving in decision making	17	9	2	1	29
Supportive, corrective and protective towards mental, physical, socio-	17	8	3	1	29
cultural and spiritual Help meet basic human needs	15	10	3	1	29

The results in Table 1 based on data obtained from questionnaires of nurses caring behavior, from total 29 respondents majority (17 respondents) thought that nurse always have human values and altruistic: nurses are sensitive to the patient's condition and immediately respond when patients call or complaints. Three respondents said that nurses sometimes hope that patients recover quickly. 1 respondent said that nurse never gave special attention when patients first entered the room (get to know the environment, such as a neighbor of patients, facilities, etc.). In parameter build a trusting relationship majority of 18 respondents said the nurses would always invoke the name of the patient in accordance with the patient's name or the preferred name of the patient, 8 respondents nurses often speak well to the patient, 3 respondents rate when the patient speaks nurses sometimes listen carefully and nurses sometimes be respect for the patient and family. In addition, the parameters of the scientific method, problem solving in decision making 17 respondents said nurses always know how to provide care to patients in the event of an emergency in isolation rooms, 9 respondents nurses often trained in the use of equipment to provide action, 2 respondents nurses sometimes nimble in action given to patients, and one nurse respondents do not teach patients about caution against infectious

diseases hospital. Parameter supportive, corrective and protective of mental, physical, socio-cultural and spiritual 17 respondents said the nurses always confident when performing an action, 8 respondents said nurses often trying to motivate the patient and family caregivers often give comfort to the patient when the action is taken, and nurses also often give advice to the family when they faced a problem, immediately contact the nurse. 3 respondents nurses sometimes accompany patients during hospitalized (in the isolation ward), and 1 nurse respondents sometimes provide health education on infectious diseases in patients and families. Parameter help meet basic human needs most of the 15 respondents nurses always punctual in delivering action and medicine to patients, 3 respondents nurses sometimes provide assistance in meeting the basic needs of patients and first responder rate the nurses never appreciate the differences in each patient treated in the room.

Table 2 Results of Tabulation in Patient Satisfaction in Isolatio ward of Prof. Dr. H. Aloei Saboe Hospital, Gorontalo.

	Isolation patients satisfaction						
Parameter	Very	antiafied	dissociation	Very			
	satisfied	sausmed	dissatisfied	dissatisfied			
Tangibles	16	9	3	1			
Reliability	18	8	2	1			
Responsiveness	15	8	4	2			
Assurance	19	9	1	-			
Empathy	18	9	2	-			

The results in Table 2 based on data obtained from isolation patient satisfaction questionnaire, the majority of the respondents, 16 respondents were very satisfied with the tangible parameters (the fact) that nurses always maintain the neatness and appearance. 9 respondents were satisfied with the nurses maintain cleanliness and readiness of medical devices that are used. 3 respondents dissatisfied that nurses gave information about the present administration, and one respondent was not satisfied with the nurse maintain cleanliness and completeness of the bathroom and toilet facilities. In parameter reliability (reliability) mostly 18 responder patients are very satisfied that nurse able to address the issue of patient care insulation appropriately and professionally, 8 respondents are satisfied that nurse told clearly about the things that must be adhered to in your treatment, two respondents were not satisfied with the nurses provide information on the facilities available, how to use and order prevailing in the hospital, timeliness nurse arrived in the room when you need. 1 respondents is very dissatisfied with the nurse told clearly about things that are forbidden in your care. In parameter (quick response) responsivenes respondents were very satisfied with the nurse immediately deal with you when he reached the ward isolation, 8 respondents were satisfied with the nurse to help you to the service implementation chest x-ray and laboratory at the hospital, in four respondents are not satisfied with nurse willing to offer assistance to you when having trouble even without being asked, and 2 respondents were very dissatisfied with the nurses provide a special time to help you walk, defecate, urinate, change sleeping position. In parameter assurance (certainty) majority of 19 respondents were very satisfied with nurse meticulous and skilled in performing nursing actions to the patient isolation, 9 respondents were satisfied with the nurses always greeting and smile when meeting with isolation patients and one respondent was not satisfied with nurse give attention to complaints from patients isolation. In parameter empathy (affinity) majority of 18 respondents were very satisfied with the nurses often look and examine your circumstances such as measuring blood pressure, temperature, pulse, respiration and intravenous fluids, 9 respondents were satisfied with the nurse informs you about all the maintenance actions that will implemented and 2 respondents were not satisfied with the services provided by nurses do not view their rank or status, but based on your condition.

Table 3 Results of Relationship Between Nurse Behavior Caring and Isolation Patient Satisfaction in G4 ward of Prof. Dr. H. Aloei Saboe Hospital Gorontalo.

Isolation Patient satisfaction		urse Beha	Total	%		
	Alwa ys	%	Often	%	Total	70
Very Satisfied	20	6 9	4	1 4	24	83
Satisfied	2	7	3	1 0	5	17
Total	22	7 6	7	2 4	29	100

Isolation Patient	Nurse Caring Behaviors				Total	%
satisfaction	Alwa ys	%	Often	%	Total	70
Spearman Rho	p=0,000					

DISCUSSION

According to the results showed that 7 respondents (24%) rate the nurses caring behavior is often administered to patients in isolation ward and 22 respondents (76%) rate the nurses caring behavior is always given to the patient in the isolation ward in Prof. Dr. H. Aloei Saboe Hospital Gorontalo. The tabulated results in Table 5.1 is based on data obtained from questionnaires the nurses caring behavior, of the 29 respondents majority of 17 respondents thought nurses have human values and altruistic: nurses are sensitive to the patient's condition and immediately respond when patients call or complaints in patients. Patients who judge sometimes as many as three respondents said that nurses the hope that patients recover quickly. 1 respondents rate the nurse never gave special attention when first entered the room (get to know the environment, such as a neighbor of patients, facilities, etc.), seen from demographic data experience hospital treated patients had never been treated before. Caring is central to nursing practice. Potter & Perry (2009) describes THAT caring is a universal phenomenon that affects the way people think, feel, and have a relationship with each other. Clients and families expect a good quality individual relationships of nurses. Conversations that occur between clients and nurses are generally very short and did not describe their relationship. In parameter build a trusting relationship majority of 18 respondents said the nurses would always invoke the name of the patient in accordance with the patient's name or the preferred name of the patient, 8 respondents nurses often speak well to the patient, 3 respondents rate when the patient speaks nurses sometimes listen carefully and nurses sometimes be respect for the patient and family, seen from demographic data of patients high school education Communication is a collection of individuals who interact with each other so that the problem of communication plays a central role. This research was supported by Sopiah (2009) that communication creates mutual understanding and to strengthen cohesion and

the achievement of the objectives of the group. In addition, the parameters of the scientific method, problem solving in decision making 17 respondents nurses always know how to provide care to patients in the event of an emergency in isolation rooms, 9 respondents nurses often trained in the use of equipment to provide action, 2 respondents nurses sometimes nimble in action given to patients, and one nurse respondents do not teach the patient about the prudence of infectious diseases in the hospital, seen from patient demographic data elementary education.

Increased employee performance is followed by an increase in knowledge and skills. Training and development is an activity to increase knowledge and provide dividends to employees and the company in the form of expertise and skills which in turn will be a valuable asset for the company (Riva, 2009). Parameter supportive, corrective and protective of mental, physical, socio-cultural and spiritual 17 respondents rate the nurses are always confident when performing an action. 8 respondents nurses often trying to motivate the patient and family caregivers often give comfort to the patient when the action is taken, and nurses also often give advice to the family so that when there is a problem, immediately contact the nurse. 3 respondents nurses sometimes accompany patients hospitalized (in the treatment room isolation), and 1 respondents nurses sometimes give health education on infectious diseases in patients and families, visits from demographic data of patients coming from another tribe, from outside Gorontalo. Transcultural perception expressed Leininger (1988, in Potter & Perry, 2009) emphasized the importance of nurse understanding about cultural services. Nurses need to learn the habits of different cultures in order to identify and meet all the needs of the clients. Parameter help meet basic human needs most of the 15 respondents nurses always punctual in delivering action and medicine to patients, 3 respondents said nurses sometimes provide assistance in meeting the basic needs of patients and first responder said the nurses never appreciate the differences in each patient treated in the rooms, views of the patient's demographic data sources of financing elementary education. The results of research that supports the lack of nurses caring behavior is the research conducted by Green Halg, Vanhanen and Kyngas (1998) in Morrison &

Burnard, (2007/2009) explained that nurse is more indicative of physical caring behavior of the affective. Biological needs a major focus of nurses, so that other needs such as psychological, spiritual and social becomes less attention.

Communications made the isolation nurses and patients in need of values that may be invoked in applying the nurse caring behaviors. To get a trusting relationship with the patient, a nurse must have good communication skills therapeutic. Nurses must be able to distinguish regular communication and therapeutic communication. In building a personal caring nurse may be through the development of indicators 10 caratif caring Watson (1979) in Kaltara (2009) includes: System value a humanistic-altruistic, trusthope, sensitive to yourself and others, helprelationship of mutual trust, development and acceptance on the expression of positive and negative feelings, use of scientific methods, improved teaching and learning processes in interpersonal, supportive, corrective protective of mental, physical, sociocultural and spiritual, to help meet basic human needs. Caring behavior (Caring act) is an action taken in providing support to the individual as a whole (Dwidiyanti, 2007).

According to the research respondents were very satisfied with the behavior of caring nurse who always build a trusting relationship with the patient, it is associated with the fact that researchers found that every nurse in the room G4 interacting provide nursing care to patients always call the patient with the nickname patients patients are listed in the book. Nurses are very skilled and tireless airport complaints from patients and families. When nurses nursing action very confident and finish the job well and always communicate with patients and families about the development of the health of these patients. The interaction of nurses with patients is well established indicate mutual respect between one and another, a nurse always respect the rights of the patient and the patient also understands its obligations.

This is according to research conducted by Laili (2009) good nurse caring behaviors can form a good satisfaction also for the patient's mother. Professional attitude of nurses such as responsiveness in serving patients and providing nursing care as required by the patient will cause the confidence and

trust of patients to nurses isolation. Nurses are maintaining professional attitude providing nursing care and always keep a good relationship with the patient and family. And always pay attention to the needs of the patient. However, from the results tabulation 1 respondents also found that nurse never gave supportive, corrective and protective of mental, physical, sociocultural and spiritual among other external variables of this factor is physical security, safety and the environment. Internal variables include mental, spiritual and cultural activities. This is consistent with data obtained in the questionnaire a low of nurses in providing health education on infectious diseases in patients and families it is still lacking

According to the results showed that the five respondents (17%) rate the isolation of patients were satisfied and 24 respondents (83%) rate the isolation of patients were very satisfied with the nurse caring behaviors in room G4 G4 Hospital Hospital In Space Prof. Dr. H. Aloei Saboe Gorontalo. The tabulated results in Table 5.2 is based on data obtained from a patient satisfaction questionnaire isolation, the majority of the 29 respondents 16 respondents were very satisfied with the tangible parameters (the fact) that nurses always maintain the neatness and appearance. 9 respondents were satisfied with the nurses maintain cleanliness and readiness of medical devices that are used. 3 respondents are not satisfied with the nurses gave information about the present administration, and one respondent was not satisfied with the nurse maintain cleanliness and completeness of the shower and toilet facilities, seen from demographic data of patients admitted to a treatment duration of 3-7 days. In parameter reliability (reliability) mostly 18 responder patients are very satisfied with the nurse is able to address the issue of patient care insulation appropriately and professionally, 8 respondents are satisfied with the nurse told clearly about the things that must be adhered to in your treatment, two respondents were not satisfied with the nurses provide information on the facilities available, how to use and order prevailing in the hospital, timeliness nurse arrived in the room when you need. 1 respondents are very dissatisfied with the nurse less informed clearly about things that are forbidden in patient care isolation, seen from demographic data of patients aged 17-25 years old. In parameter responsivenes (quick

response) of 15 respondents were very satisfied with the nurse immediately deal with you when he reached the ward isolation, 8 respondents were satisfied with the nurse to help you to the service implementation chest x-ray and laboratory at the hospital, in four respondents are not satisfied with nurse willing to offer assistance to you when having trouble even without being asked, and 2 respondents were very dissatisfied with the nurses provide a special time to help you walk, defecate, urinate, sleeping position, seen demographic data education level of patients SD and spare patients from outside Gorontalo. In parameter assurance (certainty) majority of 19 respondents were very satisfied with nurse meticulous and skilled in performing nursing actions to the patient isolation, 9 respondents were satisfied with the nurses always greeting and smile when meeting with patients isolation and one respondent was not satisfied with nurse give less attention to complaints from patients seen isolation from demographic data of patients aged 26-35 and financing sources BPJS. In parameter empathy (affinity) majority of 18 respondents were very satisfied with the and examine your nurses often look circumstances such as measuring blood pressure, temperature, pulse, respiration and intravenous fluids, 9 respondents were satisfied with the nurse informs you about all the maintenance actions that will implemented and 2 respondents were not satisfied with the services provided by nurses do not view their rank or status, but based on your condition, judging from the experience demographic data of patients admitted to the hospital previously been treated with the same disease.

isolation Patient has unique properties that suffer from communicable disease transmission through the sample air and contact with the patient, the patient has a low body resistance, patients in need of assistance in the fulfillment of basic human needs and patient isolation is more sensitive than other patients. According Muninjaya (2004) in Krishna (2005)factors affecting user satisfaction of healthcare services or the patient is: an understanding of service users about the types of services that will be received, empathy (caring attitude) shown by health officials, the cost (cost), physical appearance or neatness officers, the hygiene conditions of the room and comfort of the room (tangibility), security demonstrated by health workers in providing care (assurance), constraints and skills of health workers in providing care (reliability), the speed of the officer responding to patient complaints (responsiveness). Characteristics of patient satisfaction if the patient is expected to correspond to reality. Attention to the patient's condition was also very influential in patient satisfaction in the nursing care given by nurses. This concurs with research conducted Lestari (2011) which says determinants of patient satisfaction rates for inpatient care from the most important is the reliability, assurance, accessibility, responsiveness, tangible and empathy. In addition the results of research conducted by Wijono 2008 also said the level of patient satisfaction is a function of the difference between the appearance of health services received, and that should be accepted.

Based on the results of the questionnaire 29 patients were very satisfied with the service quality assurance (certainty) in the form of nurses ability to generate confidence and trust in the promise that has been presented to the patient associated with the results of the questionnaire items highest is 18th ie nurses honest in giving information about the state of the patient isolation, according to information provided by a physician or other medical personnel without reducing or adding the actual information that can cause the patient to nurse confidence. Nurses often look and pay attention to the patient such as measuring blood pressure, temperature, pulse, respiration and intravenous fluids, any time shift and when the patient will receive medical treatment and nursing actions. In addition Asmuji (2013) states that the guarantee (assurance) that is to say, knowledge, attitude and ability of the hospital staff to foster the confidence of patients in the form of nurses educated and able to serve patients, maintain patient confidentiality, and increase patient confidence and helps in the healing process of patients.

CONCLUSION-

Conduct nurse caring behavior in G4 (isolation) ward of Prof. Dr. H. Aloei Saboe Hospital Gorontalo mostly always behave caring nurse, this is because nurses are always build a trusting relationship with the patient. Patient satisfaction in G4 (isolation) ward Prof. Dr. H. Aloei Saboe Hospital Gorontalo mostly very satisfied because the nurse's ability to generate confidence and trust in the promise

that has been presented to the patient. The more often caring behavior given by nurses in G4 (isolation) ward Prof. Dr. H. Aloei Saboe Gorontalo, then more level of patient satisfaction isolation increase.

For the hospital to educate the importance of nursing caring behavior in a structured and continuous, especially about the satisfaction of nursing services and inputs for hospital managers to evaluate the performance of nurse visits of implementation caring behavior. For caregivers as study materials to improve the nurse caring behavior for patients. In addition nurses need to improve non-verbal communication and verbal communication, health education on infectious diseases in patients and families. Nurses also need to provide a special time to help meet basic human needs in patients with insulation such as walking, defecate, urinate, change sleeping position. For further research could be basic research to examine the behavior of caring nurse and patient satisfaction, especially in the isolation room, so it can add insight in improving the knowledge gained in an institution.

REFERENCES

- Abdul, 2013, Hubungan Perilaku Caring Perawat dengan Tingkat Kepuasan Pasien Rawat Inap Rumah Sakit, Skripsi Sarjana, Universitas Hasanuddin, Makasar.
- Anna, M. 2007, A Case Study of Caring in Nursing Education. Unpublished Dissertation for the Degree Doctor of Philosophy in the Graduate. School of The Ohio State University. www.ohiolink.edu/etd/send-pdf.cgi/w. Diakses tanggal 10 September 2014. Jam 15.00.
- Crewsell, 2010, *Pendekatan Kualitatif, Kuantitatif, dan Mixed*, Cetakan 1, Pustaka Pelajar, Yogyakarta.
- Dahlan, M. S. 2009, Besar sampel dan cara pengambilan sampel: Dalam penelitian kedokteran dan kesehatan, Salemba Medika, Jakarta.
- Damayanti, N. 2001, Kontribusi Kinerja Perawat dan Harapan Pasien dalam Dimensi Non Teknik Keperawatan terhadap Kepuasan Pasien Rawat Inap Kasus Kronis, Disertasi Program Doktor Tidak Dipublikasikan Surabaya.

- Dharma, 2011, Metodologi Penelitian Keperawatan: Panduan Melaksanakan dan Menerapkan Hasil Penelitian, CV. Trans Info Media, Jakarta.
- Dwidiyanti, M. 2007, Caring kunci sukses perawat mengamalkan ilmu, Hasani, Semarang.
- Hidayat, 2009, *Metode Penelitian Keperawatan dan Teknik Analisis Data*, Salemba Medika, Jakarta.
- Kotler, P. 2008, *Manajemen Pemasaran*, Edisi 13, Penerbit Erlangga, Jakarta.
- Krisna, 2005, Hubungan Kinerja Perawat dan Ketersediaan Fasilitas dengan Kepuasan Pasien, Skripsi Sarjana, Universitas Airlangga, Surabaya.
- Laili, D. 2009, Hubungan Perilaku Caring Perawat terhadap Kepuasan Ibu Pasien Pada Pelayanan Asuhan Keperawatan Di IRNAAnak RSUD Dr. Soetomo, Skripsi Sarjana, Universitas Airlangga, Surabaya.
- Morrison, 2008, Caring and communicating: hubungan interpersonal dalam keperawatan, Edisi kedua, EGC, Jakarta.
- Muninjaya, 2011, *Manajemen Mutu Pelayanan Kesehatan*, EGC, Jakarta.
- Notoatmodjo, S. 2010, *Metodologi penelitian kesehatan*, Rineke Cipta, Jakarta.
- Nursalam, 2008, Konsep dan Penerapan Metodologi Penelitian Ilmu Keperawatan, Salemba Medika, Jakarta.
 , 2011, Manajemen Keperawatan Aplikasi Dalam Praktik Keperawatan Profesional, Salemba Medika, Jakarta.
 , 2013, Metodologi Penelitian Ilmu Keperawatan, Salemba medika, Jakarta.
 , 2014, Manajemen Keperawatan; Aplikasi Dalam Praktik Keperawatan
- Oskouie, F. 2006, *Major Determinants of Caring Behaviour*, Journal of Iranian Scientific Nursing Association. Vol. 7, No. 1. www.hcs.harvard.edu/hhrp/publications/previous/06s/Oskouie _et_al.pdf. Diakses tanggal 7 September 2014. Jam 16.00 WIB.

Profesional. Jakarta: Salemba Medika.

- Potter & Perry, 2009, Fundamental of Nursing Fundamental keperawatan, Buku Edisi 7, Editor Dripa sjabana, Salemba Medika, Jakarta.
- RSAS Kota Gorontalo, 2013, Profil dan data *medical record*, Gorontalo.
- Shirley Teng KY & Norazliah, 2012, Surgical Patients, Satisfaction of Nursing Care at

- the Orthopedic Wards in hospital Universiti Sains Malaysia, *Health and the Environment Journal*, 2012, vol. 3 No. 1
- Sugiono, 2010, *Statistika untuk Penelitian*, CV. Alfabeta, Bandung.
- Supranto, 2006, *Pengukuran Tingkat Kepuasan Pelanggan Untuk Menaikkan Pangasa Pasar*, Edisi 3, Rineka Cipta, Jakarta.
- Supriyanto & Ernawaty, 2010, 'Pemasaran Industri Jasa Kesehatan, ANDI, Yogyakarta.
- Susihar, 2011, Pengaruh Pelatihan Perilaku Caring terhadap Motivasi Perawat dan Kepuasan Pasien di Instalasi Rawat Inap Rumah Sakit
- Royal Progress Jakarta, Tesis, Universitas Indonesia, Depok.
- Tamber, 2008, Flu Burung: Aspek Klinis dan Epidemiologis, Salemba Medika, Jakarta.
- Watson, J. 2008, Nursing The philosophy and Science of Caring. New York: The University Press of Colorado.
 - , J. 2009, Assessing and Measuring Caring in Nursing and Health Science. Edisi 2. New York: Springer Publishing Company.
- Widhianarti, 2009, Hubungan perilaku caring perawat dengan kepuasan klien dalam pelayanan keperawatan di instalasi rawat inap Rumah Sakit Bhayangkara Semarang, Skripsi Sarjana, Universitas Diponegoro.
- Wijono, 2007, Evaluasi Program Kesehatan dan Rumah Sakit, Salemba Medika, Surabaya.
- Wolf Z. R, Patricia A. M, Megan D. 2003, Relationship Between Nurse Caring and Patient Satisfaction in Patients Undergoing Invasive Cardiac Nursing. www.findarticles.com/p/articles/mi_mO FS/is_6_12/ai_n18616793/pg_7. Diakses pada tanggal 10 September
 - Diakses pada tanggal 10 September 2014. Pukul 15.00 WIB.
- Woodruff & Gardial, 2002, *Practical-People Oriented Prespective*. Kanada: Mc. Grawhil Publiser Company.
- Yosep, 2010, Spirit & Softskill of Nursing Enterpreneur, Edisi 1, Refika Aditama, Bandung.