



## Determinants of Satisfaction of Inpatients at Datu Beru Takengon Regional General Hospital

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### Abstract

The Datu Beru Takengon Hospital is the location of this research, and its purpose is to investigate the factors that influence patient satisfaction. This study is a quantitative research with a cross-sectional study design, which is a measurement of the dependent variable and the independent variable (age, treatment class, and length of treatment) with the dependent variable (physical appearance, handling, responsiveness, assurance, and empathy (SERVQUAL) and making use of the survey method. According to the findings of the research, the variable guarantee with  $Exp(B) 25,263$  has the most significant link with patient satisfaction, making it the most influential factor that determines the level of satisfaction experienced by patients. Whereas physicians and nurses who have high levels of confidence and trust are 25 times more likely to have the same level of satisfaction as their patients. In this context, "assurance" refers to the knowledge, courtesy, and capacity of corporate personnel to develop client faith in the organization, including the knowledge, abilities, politeness, and trustworthiness of the staff. It is possible to draw the conclusion from this research that insurance plays a more significant role than the other variables in determining the degree to which patients are satisfied with the care they get in the inpatient unit. It has been indicated that there is a need for assistance from the administration of the Datu Beru Takengon Hospital in order to boost patient satisfaction. Additionally, the hospital should make an effort to build patient trust in the provision of better services.

## Introduction

Patient happiness has emerged as a key indicator of the quality of medical care provided by hospitals in this age of globalization. A person's level of satisfaction influences how they feel about their own job, the work of others, their supervisor, and their working environment. One feels a feeling of pleasure either when their expectations are met or when their expectations are exceeded. The following factors can have an impact on the level of patient satisfaction achieved: the type of service that a patient receives, the demeanor of the officer who is in charge of providing health services, and the manner in which communication and services are delivered are all potential contributors to patient happiness (Indeks et al., 2015).

According to the Decree of the Minister of Health of the Republic of Indonesia No. 340/MENKES/PER/III/2019, which explains that a hospital is a health service institution that provides complete individual health services that provide inpatient, outpatient, and emergency services, a hospital is defined as a facility that provides complete individual health services. Currently, hospitals are operating in a highly competitive worldwide environment that requires

high-quality hospital services together with a transparent and goal-oriented management concept base. Without a transparent management concept, hospital growth would proceed at a snail's pace (Indonesia, 2019).

The hospital is a critical component of the overall health care system and places a strong emphasis on providing first-rate patient care as its top priority. To be able to compete (competitively) with other hospitals is one of the responsibilities of a healthcare institution. In the context of the provision of medical care to the local population, hospitals need to be organized to provide comprehensive individual services, health promotion initiatives (promotive), and preventative care (preventive). This is accomplished without ignoring efforts aimed at curative and rehabilitative treatment, as well as without ignoring the provision of inpatient, outpatient, and emergency care units. Everyone who has an illness undoubtedly has the desire to be healthy, and as a result, the hospital will play a significant part in enhancing the general state of patients' health while they are there (Andayani & Setiawati, 2020). Based on research at the Regional General Hospital, dr. H Abdul Moeloek on the quality of hospital services for BPJS participants by looking at the 5 dimensions of service quality that the results obtained from all dimensions have a relationship with the level of patient satisfaction, p-value = 0.000 ( $p < 0.05$ ). Of the 60 respondents, 38 respondents (63.3%) were satisfied and 22 respondents (36.7%) were dissatisfied. The assurance dimension is the dimension that has the highest level of satisfaction, namely 85% (Mutiara et al., 2018).

Previous research also explains about patient satisfaction that patient satisfaction has several determining factors, including tangible factors (visible physical aspects such as equipment and personnel), reliability (ability to have reliable and accurate performance), and response ability (willingness) to respond to customers. helping wants and needs, as well as fast service), assurance (employees are willing to build trust and security among customers), empathy (employees are willing to look after and look after every customer). In addition, there are several non-medical variables that also affect patient satisfaction, including: education level, socio-economic background, culture, physical environment, occupation, personality and environment. These variables are also influenced by patient characteristics, namely: age, education degree, occupation, race, socioeconomic and disease diagnosis (Ayuningrum et al., 2013). The quality of health services is assessed from 5 dimensions, namely reliability (ability to fulfill promises), responsiveness (responsiveness in providing service guarantees), assurance (ability to provide service guarantees), empathy (ability to understand customer desires), and tangibles (physical appearance of services). These five elements of the quality of health services are a measuring tool for the quality of health services (Jayanti, 2016).

Hospitals are expected to be agents of change and provide excellent service to patients. Therefore, it is very important to evaluate patient satisfaction, and the rules for measuring patient satisfaction can be guided by Ministerial Regulation No. 1. KEP / 25 / M.PAN / 2/2004. KepMenPan No. KEP / 25 / M.PAN / 2/2004 published "General Guidelines for Compiling the Public Satisfaction Index of Government Service Units", which helps to understand the weaknesses or shortcomings of various elements of government administration. Regional General Hospital (RSUD) Datu Beru Takengon is one of the public hospitals in Takengon City which is dedicated to providing the best, professional and continuously improving medical services. Therefore, hospitals must always improve their performance to increase public trust. Given that the community is the user of its services, this trust becomes very important. With increasing public trust in hospitals, it is hoped that this will have an impact on hospital revenues. Based on the initial survey of researchers, the level of satisfaction of inpatients has never been carried out by the Management of the Datu Beru Takengon Hospital, but the Management of the Datu Beru Takengon Hospital has conducted a service quality survey in 2019 and got the results of 81.31 (Good Category Service Quality), in 2020 82.31(Good Category Service Quality), in 2021 81.36(Good Category Service Quality) . Therefore, the

researchers wanted to further investigate the satisfaction of inpatients at the Datu Beru Takengon Hospital so that this study could be used for a satisfaction survey of inpatients in the future.

## **Methods**

This research is a quantitative research with a cross sectional study design, which is a measurement of the dependent variable and the independent variable (education, type of disease, treatment class and length of treatment) with the dependent variable (physical appearance, reliability, responsiveness, assurance and empathy (SERVQUAL)). and using the survey method. Quantitative research is defined as a research method based on the philosophy of positivism, used to examine certain populations or samples, collect data using research instruments, and analyze quantitative/statistical data, with the aim of testing predetermined hypotheses. Quantitative research is methods to test certain theories by examining the relationship between variables in research. The quantitative approach is the researcher's effort to collect numerical data. The data of these numbers is then processed using statistical work formulas and derived from variables that have been operationalized, with certain measuring scales such as nominal, ordinal, interval, and ratio scales (Wahidmurni, 2017). The population of this research consisted of the number of patients who were treated in the inpatient room at RSUD Datu Beru Takengon during the months of February and August 2021, for a total of 8171 inpatients. The study was conducted in 2021. The kind of sampling that was used in this investigation was known as accidental sampling. More specifically, the participants were selected for this study based on the fact that it just so happened that the Slovin formula was being used at the time of their appearance.

### **Data Collection**

There are two categories of data used in this investigation, namely primary data and secondary data. The primary data came from interviews that were conducted with the use of standardized questionnaire instructions. The researcher himself was responsible for collecting and analyzing this data. Secondary data are those that are gathered by citing from other sources that are relevant. In this research, secondary data evaluating the level of contentment experienced by inpatients at Datu Beru Takengon Hospital in 2021 were gathered from the management of that facility. The gathering of data in the course of research projects is of the utmost significance due to the fact that it is directly connected to the availability of the data required to provide solutions to issues that arise during research and ensure that the findings reached are accurate. Therefore, the techniques of data collecting that are used in research need to be carried out in an acceptable manner.

### **Validity and Reliability Test**

#### ***Validity Test***

One way to test the validity is by measuring each question or statement in the questionnaire. The technique used is by correlating each item score with a variable item score (validity interval) then the correlation results are compared with the critical value at a significant level of 0.05. An instrument is said to be valid if it can reveal data from the variables studied appropriately. If the significance of the correlation results  $<0.05$  (5%), the instrument is declared valid. On the other hand, if the significance of the correlation result is  $> 0.05$  (5%) then the instrument is declared invalid.

#### ***Reliability Test***

An instrument is said to have reliability when it is deemed suitable for use in the process of data collection on account of the instrument's existing high level of quality. The degree of precision or accuracy that an instrument has is known as its reliability. Testing for dependability may be carried out either internally or outside. Test-retesting, comparable

testing, and various combinations of the two are all valid options for doing external testing. It is possible to determine the dependability of the instrument on the inside by using certain methods to conduct an analysis of the consistency of the components that make up the instrument. In order to acquire data that is in conformity with the measurement goals, it is necessary to have instrument reliability. This may be accomplished by utilizing the Cronbach's Alpha technique, which uses a scale from 0 to 1. It is possible to observe, based on an instrument's Cronbach's Alpha value, the degree of dependability that will be employed in research. This will be the case for an instrument that will be used. When it comes to research, an instrument's usefulness increases in direct proportion to the degree to which it can be relied upon (Sujianto, 2009).

### **Measurement Method**

The instrument used to obtain the individual characteristics of the respondents consisting of: age, gender, treatment class and length of treatment. The instrument used to measure patient satisfaction is servqual which consists of 5 categories; (1) Physical appearance consisting of 5 questions with two opinions, perceptions and expectations. Perception interprets sensory information that provides an overview and understanding of patient satisfaction. The criteria are 1 = Not Good, 2 = Not Good, 3 = Fairly Good, 4 = Good, 5 = Very Good. Expectations are opinions related to patient satisfaction. The criteria are 1 = Not Good, 2 = Not Good, 3 = Fairly Good, 4 = Good, 5 = Very Good; (2) Reliability consisting of 5 questions with two opinions, perceptions and expectations. Perception interprets sensory information that provides an overview and understanding of patient satisfaction. The criteria are 1 = Not Good, 2 = Not Good, 3 = Fairly Good, 4 = Good, 5 = Very Good. Expectations are opinions related to patient satisfaction. The criteria are 1 = Not Good, 2 = Not Good, 3 = Fairly Good, 4 = Good, 5 = Very Good; (3) Responsiveness which consists of 4 questions with two opinions, perceptions and expectations. Perception interprets sensory information that provides an overview and understanding of patient satisfaction. The criteria are 1 = Not Good, 2 = Not Good, 3 = Fairly Good, 4 = Good, 5 = Very Good. Expectations are opinions related to patient satisfaction. The criteria are 1 = Not Good, 2 = Not Good, 3 = Fairly Good, 4 = Good, 5 = Very Good; (4) Assurance consisting of 4 questions with two opinions, perceptions and expectations. Perception interprets sensory information that provides an overview and understanding of patient satisfaction. The criteria are 1 = Not Good, 2 = Not Good, 3 = Fairly Good, 4 = Good, 5 = Very Good. Expectations are opinions related to patient satisfaction. The criteria are 1 = Not Good, 2 = Not Good, 3 = Fairly Good, 4 = Good, 5 = Very Good; (5) Empathy consisting of 5 questions with two opinions, perceptions and expectations. Perception interprets sensory information that provides an overview and understanding of patient satisfaction. The criteria are 1 = Not Good, 2 = Not Good, 3 = Fairly Good, 4 = Good, 5 = Very Good. Expectations are opinions related to patient satisfaction. The criteria are 1 = Not Good, 2 = Not Good, 3 = Fairly Good, 4 = Good, 5 = Very Good.

### **Data Analysis**

Data analysis is a very important activity in a research, because through data analysis, the data will be able to have meaning or meaning that can be useful for solving research problems. The analysis used in this research is univariate, bivariate and multivariate analysis.

### **Univariate**

Univariate analysis is an analysis carried out to explain or describe the frequency distribution of the characteristics of all observed variables, both independent and dependent variables according to the type of data, which serves to simplify the data collection of measurement results. From the univariate results, the resulting data can be turned into information that can be used for further analysis. The value obtained from this univariate analysis is the value of the proportion or percentage. Univariate analysis aims to explain the frequency distribution of each

educational variable, type of disease, treatment room and length of treatment, quality of service, physical appearance, reliability, responsiveness, assurance, empathy for patient satisfaction.

### Bivariate

The purpose of this analysis is to explain the relationship between the independent variables which are strongly suspected to have a significant relationship with the dependent variable. Bivariate analysis in this study used the chi square test at the 95% confidence level, namely to analyze the relationship between the independent variables (education, type of disease, treatment room and length of treatment, quality of service, physical appearance, reliability, responsiveness, assurance, empathy) on variables dependent, namely patient satisfaction. If the results of the analysis there is a significant relationship with the value of  $<0.05$ .

### Multivariate

Multivariate analysis aims for further analysis of bivariate analysis which is intended to identify independent variables that have an influence on the dependent variable provided that the probability value of the variable in the bivariate analysis is 0.05 and the dependent variable is dichotomous (two categories).

## Results and Discussion

### Determinants of Patient Satisfaction

Table 1. Frequency Distribution Based on Determinants of Patient Satisfaction at Datu Beru Takengon Hospital (N=99)

No.	Physical appearance	Frequency (f)	Percentage (%)
1	Good	57	57,6
2	Bad	42	42,4
No.	Reliability		
1	Good	61	61,6
2	Bad	38	38,4
No.	Responsiveness		
1	Good	58	58,6
2	Bad	41	41,4
No.	Guarantee		
1	Good	48	48,5
2	Bad	51	51,5
No.	Empathy		
1	Good	50	50,5
2	Bad	49	49,5
	Total	<b>99</b>	<b>100</b>

Table 1 shows that of the 99 respondents studied, the majority of respondents in the good physical appearance category were 57.6% and the minority in the poor physical appearance category was 42.4%, the majority of respondents in the good reliability category were 61.6%. and the minority in the category of poor reliability as much as 38.4%, the majority of respondents in the category of good responsiveness as much as 58.6% and the minority in the category of responsiveness that is not good as much as 41.4%, the majority of respondents in the guarantee category who are satisfied as much as 46.5% and the minority in the bad category of assurance as much as 53.5%, the majority of respondents in the good empathy category as much as 50.5% and the minority in the bad empathy category as much as 49.5%.

## Patient Satisfaction

The results of the study based on patient satisfaction can be seen in table 4.3 below:

Table 2. Frequency Distribution Based on Patient Satisfaction at Datu Beru Takengon Hospital (N=99)

No.	Patient Satisfaction	f	%
1	Satisfied	64	64,5
2	Not Satisfied	35	35,4
	<b>Total</b>	<b>99</b>	<b>100</b>

Table 2 shows that of the 99 respondents studied, the majority with satisfaction of patients who feel satisfied as much as 64.5% and minority satisfaction of patients who feel dissatisfied as much as 35.4%.

## Bivariate Analysis

Following the completion of the univariate analysis of the findings, a bivariate analysis of the data was performed, namely by the use of the Chi-square test. In accordance with the statistical significance limit of p value (0.05), which was applied to the connection between the independent variable and the dependent variable, the following findings were obtained: The findings of the research, including a cross-tabulation of the effect of patient age on satisfaction, are shown in the following table:

Table 3. The Relationship between Age and Patient Satisfaction at Datu Beru Takengon Hospital 2021

Patient Satisfaction	Age				Total		P-value
	<30 years		>30 years		f	%	
	F	%	f	%			
Satisfied	44	68,8	20	31,2	64	100	0,782
Not Satisfied	25	71,4	10	28,6	35	100	
<b>Total</b>	<b>69</b>	<b>69,7</b>	<b>30</b>	<b>30,3</b>	<b>99</b>	<b>100,0</b>	

Cross tabulation between age compared with patient satisfaction showed that of the 69 respondents aged <30 years, 44 respondents (68.8%) were satisfied, while 25 respondents (71.4%) were dissatisfied. Of the 30 respondents aged >30 years, there were 20 respondents (31.2%) who were satisfied, while 10 respondents (28.6%) stated that they were not satisfied. The results of the chi square test obtained p value = 0.782 > 0.05, thus there is no relationship between age and patient satisfaction. The results of the study by cross-tabulating treatment classes with patient satisfaction can be seen in table 4 below:

Table 4. The Relationship between Treatment Class and Patient Satisfaction at Datu Beru Takengon Hospital

Patient Satisfaction	Treatment Class						Total		P-value
	Class I		Class II		Class III		f	%	
	f	%	f	%	f	%			
Satisfied	13	20,3	21	32,8	30	46,9	64	100	0,289
Not Satisfied	11	31,4	7	20,0	17	48,6	35	100	
<b>Total</b>	<b>24</b>	<b>24,2</b>	<b>28</b>	<b>28,3</b>	<b>47</b>	<b>47,5</b>	<b>99</b>	<b>100</b>	

Cross tabulation between treatment classes compared with patient satisfaction showed that of the 24 respondents in class I, 13 respondents (20.3%) were satisfied, while 11 respondents (31.4%) were dissatisfied. Of the 28 respondents in class II, there were 21 respondents (32.8%) who were satisfied, while 7 respondents (20.0%) said they were not satisfied. Of the 47

respondents in class III, there were 30 respondents (46.9%) who said they were satisfied, while 17 respondents (48.6%) said they were not satisfied. The results of the chi square test obtained  $p$  value = 0.289 > 0.05, thus there is no relationship between treatment class and patient satisfaction. The results of the study by cross-tabulating the length of treatment with patient satisfaction can be seen in table 4.6 below:

Table 5. The Relationship between Long Treatment and Patient Satisfaction at Datu Beru Takengon Hospital

Patient Satisfaction	Duration of Treatment								Total		P-value
	<3 days		3-6 days		7-15 days		> 15 days		f	%	
	f	%	f	%	f	%	f	%			
Satisfied	21	32,8	33	51,6	5	7,8	5	7,8	64	100	0,245
Not Satisfied	14	40,0	16	45,7	5	7,8	0	0,0	35	100	
<b>Total</b>	<b>35</b>	<b>35,4</b>	<b>49</b>	<b>49,5</b>	<b>10</b>	<b>10,1</b>	<b>5</b>	<b>5,1</b>	<b>99</b>	<b>100</b>	

Cross tabulation between length of stay compared to patient satisfaction showed that of the 35 respondents with treatment duration <3 days, 21 respondents (32.8%) were satisfied, while 14 respondents (40.0%) said they were not satisfied. Of the 49 respondents with 3-6 days of treatment, 33 respondents (51.6%) were satisfied, while 16 respondents (45.7%) were dissatisfied. Of the 10 respondents with 7-15 days of treatment, 5 respondents (7.8%) said they were satisfied, while 5 respondents (14.3%) said they were not satisfied. Of the 5 respondents whose length of treatment was >15 days, there were 5 respondents (7.8%) who were satisfied. The results of the chi square test obtained  $p$  value = 0.245 > 0.05, thus there is no relationship between length of treatment and patient satisfaction. The results of the study with cross tabulation Physical appearance with patient satisfaction can be seen in table 6 below:

Table 6. The Relationship between Physical Appearance and Patient Satisfaction at Datu Beru Takengon Hospital

Patient Satisfaction	Physical Appearance				Total		P-value
	Good		Bad		f	%	
	f	%	f	%			
Satisfied	37	57,8	27	42,2	64	100	0,949
Not Satisfied	20	57,1	15	42,9	35	100	
<b>Total</b>	<b>57</b>	<b>57,6</b>	<b>42</b>	<b>42,2</b>	<b>99</b>	<b>100</b>	

The cross tabulation between physical appearance compared to patient satisfaction shows that of the 64 satisfied respondents who stated that their physical appearance was good, there were 37 respondents (57.8%) who were satisfied, while from 35 respondents who stated that their physical appearance was not good, there were 27 respondents (42.2 %) who are satisfied. The results of the chi square test obtained  $p$  value = 0.949 > 0.05, thus there is no relationship between physical appearance and patient satisfaction. The results of the study with cross tabulation of reliability with patient satisfaction can be seen in table 7 below:

Table 7. The Relationship between Reliability and Patient Satisfaction at Datu Beru Takengon Hospital

Patient Satisfaction	Reliability				Total		P-value
	Good		Bad		f	%	
	f	%	f	%			
Satisfied	38	59,4	26	40,6	64	100	0,535
Not Satisfied	23	65,7	12	34,3	35	100	
<b>Total</b>	<b>61</b>	<b>61,6</b>	<b>38</b>	<b>38,4</b>	<b>99</b>	<b>100</b>	

The cross tabulation between reliability compared to patient satisfaction showed that of the 61 respondents who stated good reliability, 39 respondents (59.4%) were satisfied, while from 38 respondents stated that reliability was not good, there were 26 people (40.6%) who felt that reliability was not good. satisfied. The results of the chi square test obtained p value = 0.535 > 0.05, thus there is no relationship between reliability and patient satisfaction. The results of the study by cross tabulating responsiveness with patient satisfaction can be seen in table 4.9 below:

Table 8. Relationship between Responsiveness and Patient Satisfaction at Datu Beru Hospital Takengon

Patient Satisfaction	Responsiveness				Total		P-value
	Good		Bad		f	%	
	f	%	f	%			
Satisfied	38	59,4	26	40,6	64	100	0,000
Not Satisfied	8	22,9	27	77,1	35	100	
<b>Total</b>	<b>46</b>	<b>46,5</b>	<b>53</b>	<b>53,5</b>	<b>99</b>	<b>100</b>	

The cross tabulation between responsiveness compared to patient satisfaction shows that from 46 respondents who stated that their responsiveness was good, there were 38 respondents (59.4%) who were satisfied, while from 53 respondents who stated that their responsiveness was not good, 26 people (40.6%) were satisfied. The results of the chi square test obtained p value = 0.000 < 0.05, thus there is a relationship between responsiveness and patient satisfaction. The results of the research with cross tabulation of assurance with patient satisfaction can be seen in table 4.10 below:

Table 9. Relationship between Guarantees and Patient Satisfaction at Datu Beru Hospital Takengon

Patient Satisfaction	Guarantee				Total		P-value
	Good		Bad		f	%	
	f	%	f	%			
Satisfied	45	70,3	19	29,7	64	100	0,000
Not Satisfied	3	8,6	32	91,4	35	100	
<b>Total</b>	<b>48</b>	<b>48,5</b>	<b>51</b>	<b>51,5</b>	<b>99</b>	<b>100</b>	

The cross tabulation between assurance compared to patient satisfaction shows that of the 48 respondents who stated that the guarantee was good, there were 45 respondents (70.3%) who felt satisfied, while from 51 respondents who stated that the guarantee was not good there were 19 people (29.7%) who felt that the guarantee was not good. satisfied. The results of the chi square test obtained p value = 0.000 < 0.05, thus there is a relationship between assurance and patient satisfaction. The results of the study by cross tabulating Empathy with patient satisfaction can be seen in table 10 below:

Table 10. Relationship between Empathy and Patient Satisfaction at Datu Beru Hospital Takengon

Patient Satisfaction	Guarantee				Total		P-value
	Bad		Good		f	%	
	f	%	f	%			
Good	40	62,5	10	28,6	50	50,5	0.001
Bad	24	37,5	25	71,4	49	49,5	
<b>Total</b>	<b>64</b>	<b>100</b>	<b>35</b>	<b>100</b>	<b>384</b>	<b>100</b>	

The results of a cross-tabulation comparing empathy with patient satisfaction show that out of the 50 respondents who said empathy was good, 40 respondents (or 762.5 percent) felt satisfied,



whereas out of the 49 respondents who said empathy was not good, 24 respondents (or 37.5 percent) felt that they were not satisfied. According to the findings of the chi square test, which yielded a p value of 0.001 with a significance level of 0.05 or below, there is a connection between empathy and patient satisfaction.

### Multivariate Analysis

The purpose of conducting a multivariate analysis is to simultaneously ascertain the significance of the relationship between the independent variable and the dependent variable while also identifying the factors that have the most significant impact on the degree to which inpatients are satisfied with their care. If the dependent variable had a p value of 0.05, the Enter method was used to determine the effect of the independent variable on the dependent variable. This included the variables of responsiveness, assurance, and empathy. The logistic regression test was used to determine the effect of the independent variable on the dependent variable.

The following table presents the findings that correspond with the conclusions drawn from the multivariate analysis test coupled with the logistic regression test:

#### Stage 1

Table 11. Results of Logistic Regression Test Results of Inpatient Satisfaction Determinants at Datu Beru Takengon Regional General Hospital Year 2021

No	Variable	B	S.E.	Wald	Df	Sing	Exp(B)	95%CI
1	Responsiveness	-455	0,641	0,505	1	0,477	0,634	0,181- 2,227
2	Guarantee	-2,912	0,687	17,994	1	0,000	0,054	0,014- 0,209
3	Empathy	-628	0,605	01,078	1	0,299	0,534	0,163- 1,747

#### Stage 2

Based on the logistic regression test, stage 2 to determine the dominant influence of free variables with bound variables has a p value = < 0.05, namely Guarantee and Empathy.

Table 12. Results of Logistic Regression Test Results of Inpatient Satisfaction Determinants at Datu Beru Takengon Regional General Hospital Year 2021

No.	Variable	B	S.E.	Wald	Df	Sing	Exp(B)	95%CI
2	Guarantee	-3,023	0,673	20,176	1	0,000	0,049	0,013-0,182
3	Empathy	-0,814	0,544	2,237	1	0,135	0,443	0,152- 1,288

#### Stage 3

Based on the logistic regression test, stage 3 to determine the dominant influence of the free variable with the bound variable has a value of  $p < 0.05$ , namely Guarantee.

Table 13. Results of Logistic Regression Test Analysis of Determinants of Inpatient Satisfaction at Datu Beru Takengon Regional General Hospital Year 2021

No.	Variable	B	S.E.	Wald	Df	Sing	Exp(B)	95%CI
2	Guarantee	-3,229	0,663	23,732	1	0,000	0,040	0,011- 0,145

Based on the results of multivariate analysis, it is known that the assurance variable is related to patient satisfaction. The variable that has the most significant relationship is guarantee with Exp (B) 0.040. Where doctors/nurses who have good assurance/trust are 25 times more likely to feel the satisfaction felt by the patient. Where the guarantee is the knowledge, courtesy and ability of company employees to foster customer trust in the company, including the knowledge, abilities, courtesy, and trustworthiness of the staff.

## **Respondent Characteristics**

The results showed that of the 99 respondents studied, the majority of respondents in the category <30 years old were 69.7% and the minority in the category >30 years old were 30.3%, the majority of the Nursing Class III were 47.5% and the minority class I as much as 24.2%, while the majority of the length of treatment is 3-6 days as much as 49.5% while the minority >15 days is 5.1%. The results of this study support the opinion of Mapiare (1983) in Setiawan (2009), that increasing age is followed by physical, psychological, and intellectual development. Maturity in these factors makes a person have a better ability to judge something. Hartati in Nursalam (2003) also stated the same thing, where the more old enough, the level of maturity and strength of a person will be more mature in thinking. Both of these opinions implicitly suggest that as a person ages, a person's ability to analyze things, including in this case assessing whether or not the service provided by the hospital is satisfied, will also increase. Budiman (2014) also stated the same thing, that age will affect a person's behavior patterns, where someone with a younger age tends to criticize more the basic health services provided, while older patients will ask health workers more questions. about how their health is developing so that an understanding of health will be more easily fulfilled.

## **Determinants of Patient Satisfaction**

shows that of the 99 respondents studied, the majority of respondents in the category of physical appearance who feel satisfied are 57.6% and the minority in the category of physical appearance who are not satisfied as much as 42.4%, the majority of respondents in the category of reliability who are satisfied are 61.6 % and minorities in the reliability category who were dissatisfied as much as 38.4%, the majority of respondents in the responsiveness category who were satisfied as much as 58.6% and minorities in the responsiveness category who were not satisfied as much as 41.4%, the majority of respondents in the category guarantees who feel satisfied are 46.5% and the minority in the category of guarantees who are not satisfied are 53.5%, the majority of respondents in the empathy category who are satisfied are 50.5% and the minority in the empathy category who are not satisfied are 49.5 %.

## **Patient Satisfaction**

From the results of the study showed that of the 99 respondents studied, the majority with satisfaction of patients who were satisfied as much as 64.5% and minority satisfaction of patients who were not satisfied as much as 35.4%. According to the Indonesian Ministry of Health in 2005 (in Nursalam; 2011) also states that patient satisfaction is related to the quality of hospital services. By knowing the level of patient satisfaction, hospital management can improve the quality of service. Providing satisfaction to patients can only be obtained if the company pays attention to what the patient wants. Paying attention to what the patient wants means that the quality of service produced is determined by the patient. All efforts made by the company are directed at creating and increasing customer satisfaction (Yamit; 2002). Satisfaction or dissatisfaction according to Oliver (in Tjiptono; 2007) results from experience in service quality interactions and compares these interactions with what is expected, so that consumer satisfaction depends on the comparison between consumer expectations before purchase and perceptions of product or service performance.

## **Bivariate Analysis**

The Relationship between Age and Patient Satisfaction at Datu Beru Takengon Hospital 2021

The results of the chi square test showed that the p value was more than 0.05, which indicates that there is no correlation between patient age and satisfaction levels. According to the findings of the study that was conducted by Alrubaiee (2011), there is a correlation between age and patient satisfaction. This discovery is in line with the findings of a prior research that was carried out by Clary and MacNeil (1988). In that study, it was discovered that the patient's

age was the most common predictor of satisfaction of all the socio-demographic parameters that were taken into consideration. Those who are older tend to report greater levels of satisfaction than patients who are younger.

### **Relationship between Nursing Class and Patient Satisfaction at Datu Beru Hospital Takengon**

The results of the chi square test showed that the p value was more than 0.05, indicating that there is no connection between the kind of therapy and the level of patient satisfaction. The findings of the study conducted by Rosi (2012) indicate that patients are more likely to feel satisfied with the services provided if health workers demonstrate equality toward them. On the other hand, patients are more likely to feel dissatisfied with the services provided if health workers do not demonstrate equality. The findings of the study conducted by Hutagaol (2014) demonstrate that there is still a lack of equitable communication between health professionals and patients. As a consequence, patients have a sense of dissatisfaction with the quality of the health services offered by health workers.

### **The Relationship between Length of Care and Patient Satisfaction at Datu Beru Takengon Hospital in 2021**

The results of the chi square test obtained p value =  $0.245 > 0.05$ , thus there is no relationship between length of treatment and patient satisfaction. In this case, the aspect of length of treatment affects the satisfaction of the given patient, the results of the interview say that nurses usually will know more patients with long treatment times than patients with short periods, so that patients feel they are "closer" to nurses than those who have never been in a hospital. at all, and this will also allow nurses to be "more attentive" to patients with long lengths of treatment compared to patients with "short" lengths of treatment. And the length of treatment is determined by the medical team not only nurses, but doctors and nurses as a medical team by looking at the patient's physical condition, type of disease, and the stability of the patient in receiving treatment and care from the hospital.

### **The Relationship between Physical Appearance and Patient Satisfaction at Datu Beru Takengon Hospital in 2021**

The results of the chi square test showed that the p value was greater than 0.05, indicating that there is no correlation between a person's outward look and their level of satisfaction as a patient. In accordance with the findings of the study that was carried out in 2013 by Jacobis, R on the subject of the Factors of Service Quality and Their Influence on Satisfaction of Inpatients of Jamkesmas Participants at BLU RSUP Prof.Dr. R.D. Kandou Manado, it was found that the factors of reliability, responsiveness, and empathy had the greatest impact on inpatient satisfaction, while the factors of guarantees and physical facilities had no impact at all. The hospital need to pay attention in the form of enhancing services to patients in the sense of delivering the greatest amount of service and giving patients confidence in order to enhance the level of patient satisfaction.

### **The Relationship between Reliability and Patient Satisfaction at Datu Beru Takengon Hospital in 2021**

According to the findings of the chi square test, which found that the p value was more than 0.05 but less than 0.535, there is no correlation between patient satisfaction and dependability. The capacity of the firm to reliably and precisely provide the services as promised constitutes the company's reliability. Reliability in service is measured by how quickly and accurately patients are admitted, how well service processes do not annoy patients, how quickly and on time service is delivered, and how well officers avoid making mistakes in their work.

## **The Relationship between Responsiveness and Patient Satisfaction at Datu Beru Takengon Hospital in 2021**

The results of the chi square test obtained  $p$  value = 0.000 < 0.05, thus there is a relationship between responsiveness and patient satisfaction. The results of this study are supported by the results of Ariadi's research (2005), which revealed that the majority of respondents (81%) had the perception that the quality of outpatient services at RSI Sunan Kudus was not as expected. That is, 81% of patients find things disappointing in the outpatient doctor's service. This can be seen from the 4 quality dimension factors that were asked to respondents/patients, and only very few gave a good assessment of the service quality dimensions. This assessment is significantly correlated with perceptions of service quality.

## **The Relationship between Guarantees and Patient Satisfaction at the Datu Beru Takengon Hospital in 2021**

According to the findings of the chi square test, the  $p$  value was found to be between 0.000 and 0.05, indicating that there is a connection between assurance and patient pleasure. The findings of this research are consistent with the findings of research carried out by Irawati (2005), who came to the conclusion that there was a connection between the abilities of nurses and the level of patient satisfaction that could be achieved. In addition, this provides evidence, as explained by Philip Kotler (1997), that the knowledge, ability, and courtesy of service providers to generate trust and confidence in the form of: the knowledge and ability of health workers to determine problematic patients, staff skills at work, courteous and friendly service, as well as service security guarantees and trust in services, will have an impact on the level of patient satisfaction.

## **Relationship between Empathy and Patient Satisfaction at Datu Beru Takengon Hospital in 2021**

The results of the chi square test obtained  $p$  value = 0.001 < 0.05, thus there is a relationship between empathy and patient satisfaction. This is in line with Saragih's research (2010) at Bunda Thamrin General Hospital Medan that the effect of service quality in the dimension of empathy (attention) has a significant effect on inpatient satisfaction at Bunda Thamrin General Hospital Medan with  $p$  value = 0.000 < 0.05 which discusses doctors who provide attention when patients express complaints about illness, doctors treat patients with hospitality, nurses in providing services to patients are full of friendliness and agility in carrying out their duties in diagnosing diseases, nurses who are always friendly in providing services, and nurses in carrying out their duties do not differentiate status. patient social.

## **Multivariate Analysis**

Assurance variable (significantly positive effect on patient satisfaction. The results of the evidence have been carried out through overall data analysis, the results of which are presented in the appendix. From table 1, it is explained that the direct influence between patient perceptions at Datu Beru Takengon Hospital regarding the assurance variable on patient satisfaction variable is  $p = 0.000 < 0.05$  and 95% CI = 14.06-427.268. This shows that there is a significant positive relationship between insurance and patient satisfaction. This means that the better the patient's perception of the insurance, the higher the level of patient satisfaction.

## **Conclusion**

The results showed that there was a relationship between responsiveness and satisfaction of inpatients. Responsiveness is a willingness to help and provide fast and appropriate service to customers through the delivery of clear information. Letting consumers wait without a clear reason causes a negative perception of service quality. The results show that there is a relationship between assurance and satisfaction of inpatients. . A bad guarantee will reduce patient satisfaction with the quality of services provided, so that patients will not want to visit

the Puskesmas again because there is no guarantee of healing for the health problems that the patient complains about. The results showed that empathy had a relationship with inpatient satisfaction. Empathy that is given is very influential on patient satisfaction. Attention is a sense of caring to give individual attention to customers, understand customer needs, and ease of contact. The results showed that of the nine variables studied there were six variables that had no influence, including age, treatment class, length of treatment, physical appearance and This reliability is because what is given to patients is in a good category so that the quality of health services produced is also better.

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