

Determinants of inpatient satisfaction at the wakatobi regency hospital

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ABSTRACT

Patient satisfaction is an important indicator in health services in hospitals. One of the services provided by the hospital to serve the needs of the community is inpatient services. This study aims to determine the determinants of inpatient satisfaction at RSUD Wakatobi Regency, Southeast Sulawesi in 2022. This type of research is a quantitative study using a cross sectional study method. The population in this study were all patients who were hospitalized at the Wakatobi District Hospital for the period 3 June 2022 to 12 July 2022, the sample in the study was 208 people using total sampling from the entire population. The research instrument used a questionnaire which was analyzed using the SPSS application. then a Chi-Square Statistical test was carried out to see the relationship between these variables. The results of statistical analysis show the determinants of Tangible (p-value = 0.003), Reliability (p-value = 0.003), Responsiveness (p-value = 0.004), Assurance (p-value = 0.003), and Empathy (p-value = 0.004). Because the p-value α = 0.005, the alternative hypothesis is accepted, which means there is a significant relationship. The conclusion is that there is a significant relationship between the five determinant dimensions, namely Tangible, Reliability, Responsiveness, Assurance and Empathy with inpatient satisfaction at RSUD Wakatobi Regency Southeast Sulawesi. Suggestions for improvement for RSUD Wakatobi Regency, Southeast Sulawesi, should conduct periodic satisfaction surveys, so that input from patients and all visitors can be conveyed, and this can be a consideration for improving the quality of hospital services in the future.

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INTRODUCTION

Patient satisfaction is considered as an important part of evaluating the quality of health. Over the last decade, various systems for measuring patient satisfaction have been developed gradually, with their structure and complexity depending on several aspects that have been monitored and

evaluated in terms of patient satisfaction. (Gavurova, Dvorsky, and Popesko 2021). It is generally agreed that satisfaction plays an important role in improving the strategies and tactics of healthcare providers in providing healthcare services to patients. In addition to its role in improving the quality of health services, measuring patient satisfaction plays an important role in fostering accountability among health care providers, who have an important role in developing and delivering high quality health care in hospitals. (Asamrew, Endris, and Tadesse 2020).

Based on WHO (World Health Organization) data across the United States and Europe, consumer satisfaction is playing an increasingly important role in the quality of care and health reform. Over the past 10 years, the proliferation of patient experience-focused surveys of care experiences such as waiting times, basic quality of facilities, and communication with health care providers, all of which helped identify real priorities for improving the quality of health care (Unicef, WHO, WBG 2021) The Center for Public Health Communication (Profil Kesehatan Indonesia 2016) explains that the Service Satisfaction Index shows that the Integrated Service Unit of the Ministry of Health shows a satisfaction level of 70.58%.

Several research results show data on patient satisfaction levels in various countries. The level of patient satisfaction according to Ndambuki in 2013 in Kenya stated 40.4%, patient satisfaction in Bakhtapur India according to Twayana was 34.4%, while in Indonesia it showed a patient satisfaction rate of 42.8% in Central Maluku and 44.4% in West Sumatra (Elba and Syifa 2020) Based on these data it can be concluded that the patient satisfaction rate is still relatively low, so that patient satisfaction is a problem for hospitals both in Indonesia and abroad. (Zaimah 2019).

Research from (Effendi and Junita 2019) entitled Level of Patient Satisfaction with Health Services at UPTD. Mutiara Community Health Center in 2019 obtained a level of satisfaction in the aspects of reliability 81.75%, responsiveness 81.92%, guarantee 82.01%, empathy 80.52% and tangible 77.77% with an overall satisfaction level of 80.79% included in satisfied category. Research from Yang (Li et al. 2021) entitled Effective Analysis of Inpatient Satisfaction: The Random Forest Algorithm states that overall patient satisfaction is 79.73%. The five factors that most influence on inpatient satisfaction, in this order, are: the patient's right to know, timely nursing response, satisfaction with medical staff services, medical staff integrity, and accurate diagnosis. Research from (Gavurova et al. 2021) entitled Patient Satisfaction Determinants of Inpatient Health Care states that satisfaction with medical staff is the most significant factor that has a positive effect on hospitalization satisfaction. To increase patient satisfaction, it is necessary to improve the services provided to patients by increasing the number of health facilities in hospitals, in addition to providing health services in a friendly manner, with a smile, and satisfying service. with satisfactory service will make patient satisfaction so that with increased satisfaction it will increase the number of patients for treatment.

From the results of the preliminary study, namely interviews with 10 inpatients at the Hospital. Wakatobi Regency, Southeast Sulawesi in January 2022. From the 5 aspects of the dimension of patient satisfaction, namely Tangible (real evidence), Reliability (reliability), Responsiveness (responsiveness), Assurance (guarantee) and Empathy (empathy). The results obtained were that 2 people stated that they were not satisfied with the service due to environmental problems/unclean hospital grounds and irregular parakeets, 4 people said the queue at the registration counter was long if they did not have acquaintances and the availability of drugs at the pharmacy was incomplete, 2 people said they were dissatisfied because the wards were uncomfortable and hot due to incomplete facilities such as fans, plus the classrooms had air conditioning facilities but no remote control was provided, 2 people said the equipment at the hospital was inadequate. On the other hand, many people stated that in the last 2 years the Wakatobi District General Hospital had experienced a vacancy of specialist doctors and patient visits were only made to take referrals so they could seek treatment at other nearby hospitals.

RESEARCH METHOD

The type of research used was cross sectional (Sugiyono 2015) Location This research was conducted at the Wakatobi Regency Hospital, Southeast Sulawesi. In this study, researchers used secondary data (medical records) from 2019 from January to July 2022. The population in this study were inpatients at hospitals. Wakatobi Regency, Southeast Sulawesi from June to July 2022, the total population is taken as a sample. The samples taken must meet the criteria, namely all inpatients at the Wakatobi Regency Hospital, namely as many as 208 people. Data analysis performed was univariate analysis and bivariate analysis.

RESULTS AND DISCUSSIONS

Results

Univariate Analysis

Table 1. Frequency Distribution of Respondents Based on Tangible (Real Evidence) Hospitalization Satisfaction at the Wakatobi Regency Hospital in 2022

Variable	N	%
<i>Tangible</i>		
Good	81	38.9
No Good	127	61.1
<i>Reliability</i>		
Good	155	55.3
No Good	93	44.7
<i>Responsiveness</i>		
Good	94	45.2
No Good	114	54.8
<i>Assurance</i>		
Good	105	50.5
No Good	103	49.5
<i>Emphaty</i>		
Good	97	46.6
No Good	111	53.4
<i>Satisfaction</i>		
Satisfied	29	13.9
Quite Satisfied	58	27.9
Not Satisfied	115	55.3
Very Dissatisfied	6	2.9

Based on the table above, it shows that out of 208 respondents for the tangible category (real evidence), more answered not well, namely 127 respondents (61.1%) compared to those who answered well, namely as many as 81 respondents (38.9%). The reliability category had more good answers, namely 155 respondents (55.3%) compared to those who answered not well, namely 93 respondents (44.7%). Responsiveness category (responsiveness) more who answered not well as many as 114 respondents (54.8%) compared to those who answered well as many as 94 respondents (45.2%). Assurance category (guarantee) more who answered well, namely as many as 105 respondents (50.5%) compared to those who answered not well, namely as many as 103 respondents (49.5%). In the category of empathy (concern) there were more people who answered badly, namely 111 respondents (53.4%) compared to those who answered well, namely 97 respondents (46.6%). Most said they were not satisfied as many as 115 respondents (55.3%) compared to respondents who said they were quite satisfied as many as 58 respondents (27.9%).

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Table 2. Factors related to inpatient satisfaction at the Wakatobi Regency Hospital, Southeast Sulawesi in 2022

Variable	Inpatient Satisfaction								Total		p Value
	Satisfied		Quite Satisfied		Not Satisfied		Very Dissatisfied				
	n	%	n	%	n	%	n	%	n	%	
<i>Tangible</i>											
Good	10	12.3	33	40.7	34	42.0	4	4.9	81	100.0	0,003
No Good	19	15.0	25	19.7	81	63.8	2	1.6	127	100.0	
<i>Reliability</i>											
Good	18	15.7	41	35.7	51	44.3	5	4.3	115	100.0	0,003
No Good	11	11.8	17	18.3	64	68.8	1	1.1	93	100.0	
<i>Responsiveness</i>											
Good	15	16.0	34	36.2	40	42.6	5	5.3	94	100.0	0,004
No Good	14	12.3	24	21.1	75	65.8	1	0.9	114	100.0	
<i>Assurance</i>											
Good	13	12.4	36	34.3	50	47.6	6	5.7	105	100.0	0,003
No Good	16	15.5	22	21.4	65	63.1	0	0.0	103	100.0	
<i>Emphaty</i>											
Good	14	14.4	32	33.0	45	46.4	6	6.2	97	100.0	0,004
No Good	15	13.5	26	23.4	70	63.1	0	0.0	111	100.0	

The results of statistical analysis with the Chi-square test $p=0.003$. Because the p value $< \alpha = 0.005$, the alternative hypothesis is accepted. This means that there is a significant relationship between tangible (real evidence) on inpatient satisfaction. The results of statistical analysis using the Chi-square test obtained a value of $p < \alpha = 0.05$, meaning that there is a significant relationship between reliability and patient satisfaction. Results of statistical analysis $p = 0.004$. means that there is a significant relationship between responsiveness (responsiveness) to patient satisfaction. The results of statistical analysis with the Chi-square test $p = 0.003$. Because the p value $< \alpha = 0.05$ there is a significant relationship between assurance on inpatient satisfaction. The results of statistical analysis with the Chi-square test obtained $p = 0.004$. Because the p value $< \alpha = 0.05$ there is a significant relationship between empathy (caring) on patient satisfaction at the Wakatobi Regency Hospital, Southeast Sulawesi.

Discussin

Tangible Relationship (Real Evidence) with Patient Satisfaction

A small number of respondents said it was good for tangible (real evidence) with this. This is because even though the hospital already has a clean and comfortable building, it does not yet have adequate and neat parking facilities, which can accommodate all patient vehicles or visitors who come almost together. Sometimes patients or visitors do not get a parking space, and even if they do, they have to park their vehicles far from the hospital building area outside the parking area (Cahyani 2019).

Physical evidence (tangibles), regarding the attractiveness of physical facilities, equipment and facilities used by the Hospital. Wakatobi Regency, Southeast Sulawesi, as well as the appearance of health care workers in hospitals which often have a direct and significant influence on community satisfaction as service users.

The relationship between reliability and patient satisfaction

Most of the respondents said good for reliability (reliability). This is because even though the patients are satisfied with the services provided, they feel that there are some things that are uncomfortable for the patient, for example during an examination by a doctor they are only

interviewed briefly regarding the complaints they feel and then a follow-up is determined. A small number of respondents said it was not good for reliability (Hardianty, Ernawaty, and Sabrian 2018). This is because the hospital provides services that are less time efficient due to the large number of patients and complicated according to the patient because there is a path that they have to go through to the end if they do not have relatives or acquaintances either service personnel or certain officials in the hospital, this makes the patient have to waiting at several points such as registration rooms, observation or examination rooms, laboratory rooms and pharmacies, and makes most patients and visitors feel uneasy with the long service flow (Wandira 2020).

According to the theory mentioned by Meesala & Paul (dalam Rizal et al., 2021) that reliability which is divided into aspects of timely service delivery, employee care, billing accuracy, and good communication is the dimension that has the closest relationship with patient satisfaction. Hospitals should have a source of information for patients about health services to the community, such as the path that must be followed so that patients do not feel that the service is quite convoluted. Patients have the view that if doctors are able to examine patients promptly and in sufficient detail then for them that is quality service. In addition, when they were first admitted to outpatient care, nurses received them without complicated procedures, this was in line with their view that quality is the speed of service.

The relationship between responsiveness and patient satisfaction

A small number of respondents said it was good for responsiveness. This is because even though they think the officers are responsive and willing to listen to patient complaints, it still doesn't suit the patient's heart, because in one condition the nurse informs if there is a delay in the patient's examination, but for the patient this doesn't need to happen if the treating doctor comes. according to service hours (NOVA n.d.). Most of the respondents said it was not good for responsiveness. This is because the delay in service from officers (doctors/nurses) becomes a fatal negative assessment of the patient and involves life. On the other hand, for pharmacy services, sometimes pharmacists tell the process of administering the drug, which according to the patient is long enough to wait for the drug (Saprianingsih 2020).

Service conditions at the hospital where every person who comes for treatment registers at the registration locker then is directed to the seven polyclinics, then the patient will be directed to the laboratory or radiology if a supporting examination is needed, but if not then the patient will be directed to the pharmacy counter to take the next drug to the department. administration if the patient is general status (Esfandiari 2017) On the other hand, emergency patients have a special flow which generally goes directly to the Emergency Unit where there are family representatives who are directed to take care of patient administration at the registration counter. But it is common knowledge, especially government-owned hospitals, sometimes service can be faster than usual, if you have family, closeness or there are acquaintances of officers or officials in the hospital who can help take care of the smooth administration of patient services and so on. Or the patient is a family of one of the leaders or high-ranking officials in the government structure of a region.

Relationship assurance (guarantee) with patient satisfaction

Most of the respondents said it was good for assurance. This is because even though the patient feels secure with the services provided, what makes the patient uncomfortable is when the patient's family or visits are limited. Sometimes the officer has a high pitched tone at the patient or family who does not understand what the officer has explained (Wandira 2020). A small number of respondents said it was not good for assurance. This is because respondents feel that sometimes the information provided about their condition is only conveyed to their families, sometimes the information conveyed is lacking so that it does not make the client better understand what is being asked because it uses language that is difficult for patients to understand. In addition, according to some patients, the condition of the hospital environment was unsafe, especially the elevator preparation door on the top floor which was open and had no signs warning of danger as well as

the environment in the obstetric delivery area where patients and babies often get interference from astral beings which can only be interpreted with trust. local customs (Effendi and Junita 2019).

This research is in line with the theory put forward by Zeithmal Zeithmal (Li et al. 2021) that the dimension of service guarantee is a dimension of service quality in the form of a guarantee that includes knowledge and skills of officers, courtesy and friendliness of officers, ability of officers to communicate, trustworthiness and there is a security guarantee. This research is in line with research conducted by (Nur'aeni, Simanjorang, and . 2020) entitled Effects of Service Quality on Inpatient Satisfaction at Izza Karawang Hospital with p-value = 0.000

Relationship of Empathy (Concern) with Patient Satisfaction

A small number of respondents said it was good for empathy (concern). This is because in a service situation, even though the officer has taken action, then he no longer reassesses the patient's condition, after the patient has been examined and given a prescription the patient is no longer observed. Most of the respondents said it was not good for empathy (concern) (Wulandari 2017) This is because even though the patient is a patient with repeat visits, officers rarely ask how the patient is after the previous treatment, do not always remember the patient's previous problems/complaints (Lindawati 2018).

The attitude of empathy that is built by officers in caring for their clients has a very positive impact on client satisfaction because the feeling of care and attention given by nurses will give satisfied suggestions to clients. Customer (patient) satisfaction is influenced by perceptions of service quality which can be seen from the empathy dimension which includes ease of making relationships, good communication, personal attention, and understanding the needs of patients.

CONCLUSION

There is a relationship between tangibles, reliability, responsiveness, assurance, empathy and patient satisfaction in the Wakatobi Regency Hospital, Southeast Sulawesi in 2022

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References

- Asamrew, Nebsu, Abduilhafiz A. Endris, And Musse Tadesse. 2020. "Level Of Patient Satisfaction With Inpatient Services And Its Determinants: A Study Of A Specialized Hospital In Ethiopia." *Journal Of Environmental And Public Health* 2020. Doi: 10.1155/2020/2473469.
- Cahyani, Nanda Yuni. 2019. "Pengaruh Service Quality Terhadap Kepuasan Pasien Pada Upt Puskesmas Panceng."
- Effendi, Kevin, And Stella Junita. 2019. "Tingkat Kepuasan Pasien Terhadap Pelayanan Kesehatan Di Uptd Puskesmas Mutiara Tahun 2019." *Excellent Midwifery Journal Kedokteran* 3(2):82-90.
- Elba, Fardilla, And Gita Noor Syifa. 2020. "Hubungan Tingkat Kepuasan Ibu Hamil Dengan Pemeriksaan Kehamilan Di Puskesmas Jatinangor." *Jurnal Sehat Masada* 14(2):98-106.
- Esfandiari, Reza. 2017. "Faktor-Faktor Yang Mempengaruhi Kepuasan Pasien Terhadap Kualitas Pelayanan Makanan (Kasus Di Rumah Sakit Angkatan Darat Brawijaya, Surabaya)." *Jurnal Tata Boga* 6(2).
- Gavurova, Beata, Jan Dvorsky, And Boris Popesko. 2021. "Patient Satisfaction Determinants Of Inpatient Healthcare." *International Journal Of Environmental Research And Public Health* 18(21). Doi: 10.3390/Ijerp182111337.
- Hardianty, Yetty, Juniar Ernawaty, And Febriana Sabrian. 2018. "Hubungan Profesionalisme Perawat Terhadap Kepuasan Pasien Di Ruang Rawat Inap Utama." *Jurnal Online Mahasiswa (Jom) Bidang Ilmu Keperawatan* 5:484-92.
- Li, Chengcheng, Conghui Liao, Xuehui Meng, Honghua Chen, Weiling Chen, Bo Wei, And Pinghua Zhu.

2021. "Effective Analysis Of Inpatient Satisfaction: The Random Forest Algorithm." *Patient Preference And Adherence* 15:691-703. Doi: 10.2147/Ppa.S294402.
- Lindawati, Sofiatun Hasana. 2018. "Hubungan Peran Perawat Sebagai Care Provider Dengan Tingkat Kepuasan Pasien Di Ruang Rawat Inap Kelas Iii Paviliun Bougenville Rsu Dr. H. Koesnadi Bondowoso."
- Nova, Rahadi Fitra. N.D. "Pengaruh Kualitas Pelayanan Terhadap Kepuasan Pasien Rawat Inap Pada Rumah Sakit."
- Nur'aeni, Rahmawati, Asyiah Simanjorang, And . Jamaluddin. 2020. "Pengaruh Mutu Pelayanan Terhadap Kepuasan Pasien Rawat Inap Di Rumah Sakit Izza Karawang." *Journal Of Healthcare Technology And Medicine* 6(2):1097. Doi: 10.33143/Jhtm.V6i2.1152.
- Profil Kesehatan Indonesia. 2016. *Profil Kesehatan Ri 2015*.
- Rizal, Fahmi, Tri Ani Marwati, And Solikhah Solikhah. 2021. "Dimensi Kualitas Pelayanan Dan Dampaknya Terhadap Tingkat Kepuasan Pasien: Studi Di Unit Fisioterapi." *Jurnal Kesmas (Kesehatan Masyarakat) Khatulistiwa* 8(2):54. Doi: 10.29406/Jkkm.V8i2.2624.
- Saprianingsih, Almi. 2020. "Hubungan Komunikasi Terapeutik Perawat Dengan Kepuasan Pasien Di Ruang Rawat Inap Vip." *Hubungan Komunikasi Terapeutik Perawat Dengan Kepuasan Pasien Di Ruang Rawat Inap Vip*.
- Sugiyono. 2015. *Metode Penelitian Pendidikan Pendekatan Kuantitatif, Kualitatif, Dan R&D*. Bandung: Alfabeta.
- Unicef, Who, Wbg, Un. 2021. "Development Coordination Disorder." Ii:15-30.
- Wandira, Adenia Dwi Ayu. 2020. "Hubungan Komunikasi Perawat Dengan Kepuasan Pasien Pada Pelayanan Anestesi."
- Wulandari, Wulandari. 2017. "Pengaruh Kualitas Pelayanan Terhadap Kepuasan Pasien Di Instalasi Farmasi Rumah Sakit Paru Dungus Madiun."
- Zaimah, Zaimah. 2019. "Analisis Faktor-Faktor Kualitas Pelayanan Terhadap Kepuasan Pasien Poliklinik Spesialis Rsud Kh Daud Arif Kuala Tungkal Tahun 2018." *Scientia Journal* 8(1):355-68. Doi: 10.35141/Scj.V8i1.529.