THE INFLUENCE OF SERVICE QUALITY ON PATIENT SATISFACTION AT HATI KUDUS LANGGUR HOSPITAL

Yessi Virginia Lasol[1]; Maria Widyarini[2]; Kevin Grahadian[3]
Master of Business Administration Dept[1,2]; Business Administration Dept[3];
Parahyangan Catholic University, Bandung
Email : 8082301039@student.unpar.ac.id[1]; widya@unpar.ac.id[2*];
Kevin_20170200@unpar.ac.id[3]

ABSTRACT

This study explores the relationship between the quality of healthcare services and patient satisfaction at Hati Kudus Langgur Hospital. The main aim is to assess whether service quality has a significant impact on how satisfied patients are with the hospital's services. A quantitative method is utilized, using a structured questionnaire to collect data. The research targets all patients of the hospital, with a sample size of at least 123 respondents, calculated using the Slovin formula. The analysis methods include descriptive statistics, simple linear regression, validity and reliability tests, as well as the coefficient of determination (R^2). The findings indicate: (1) Tangibility has a significant positive influence on patient satisfaction; (2) Reliability does not significantly influence satisfaction; (3) Responsiveness has a meaningful effect on satisfaction; (4) Assurance significantly contributes to satisfaction; and (5) Empathy does not show a significant impact on patient satisfaction at the hospital.

Keywords : Patient Satisfaction; Service Quality; Hati Kudus Langgur Hospital

ABSTRAK

Penelitian ini mengkaji hubungan antara kualitas layanan kesehatan dan kepuasan pasien di Rumah Sakit Hati Kudus Langgur. Tujuan utama dari studi ini adalah untuk menilai apakah kualitas layanan memiliki pengaruh yang signifikan terhadap tingkat kepuasan pasien terhadap layanan rumah sakit. Metode kuantitatif digunakan dalam penelitian ini, dengan pengumpulan data melalui kuesioner terstruktur. Penelitian ini ditujukan kepada seluruh pasien rumah sakit, dengan jumlah sampel minimal 123 responden yang dihitung menggunakan rumus Slovin. Teknik analisis yang digunakan mencakup analisis deskriptif, regresi linear sederhana, uji validitas dan reliabilitas, serta analisis koefisien determinasi (R^2). Hasil penelitian menunjukkan bahwa: (1) Bukti fisik (tangibility) berpengaruh signifikan terhadap kepuasan pasien; (2) Keandalan (reliability) tidak berpengaruh signifikan; (3) Daya tanggap (responsiveness) berpengaruh secara signifikan; (4) Jaminan (assurance) memberikan kontribusi signifikan terhadap kepuasan; dan (5) Empati tidak menunjukkan pengaruh yang signifikan terhadap kepuasan pasien di Rumah Sakit Hati Kudus Langgur.

Kata Kunci : Kepuasan Pasien; Kualitas Layanan; RS Hati Kudus Langgur

INTRODUCTION

Public service represents a fundamental function of government, demonstrating the state's ability to fulfill the essential needs of its citizens in a just and equitable way. This service includes various strategic sectors such as education, transportation, civil

administration, and especially healthcare, which is an important indicator in assessing social welfare and the effectiveness of governance (Putri, F.D.W., et al., 2023; Kaul, 1997) . As an intangible service, public service cannot be stored or owned, and it requires direct interaction between the provider and the recipient. Therefore, service quality is highly influenced by staff behavior, work systems, and applicable standard operating procedures (Wu et al., 2024; Hong et al., 2017; Liao et al., 2009).

Since the 1990s, public service reform has become a global agenda (Mattila & Kallio, 2025; Wilson et al., 2024; McCourt, 2018; Cheung, 1997) that has also been adopted by Indonesia through various strategic regulations such as Presidential Instruction No. 5 of 1984 and the Minister of State Apparatus Empowerment Decree No. 63 of 2003. These regulations emphasize the importance of effectiveness, efficiency, transparency, and accountability in delivering public services, while encouraging the development of a culture of excellent service. In the healthcare sector, public service transformation has become increasingly complex and challenging, especially with the growing public demand for more professional, fast, and patient-centered care (Basabih & Widhakuswara, 2024; Ferlie, 2017).

Hospitals, as one of the frontline institutions in healthcare delivery, play a strategic role in ensuring the public's right to receive quality medical services (Ashill et al., 2006). The quality of hospital services is determined not only by the competence of healthcare personnel and the availability of medical facilities but also by how the hospital builds a service system that is responsive to patients' needs (Komene et al., 2024; Ngatindriatun et al., 2024) . In this regard, aspects such as empathy, clarity of information, service speed, and the ability to resolve complaints are important dimensions in evaluating overall service quality (Ryandini et al., 2022; Ioannidou & Konstantikaki, 2008).

According to Nigrum in Dewi (2014), improving the quality of healthcare services must be carried out comprehensively by considering principles of efficiency, effectiveness, and the appropriate use of resources in line with ethical and professional standards. Emphasis on patient-oriented services (patient satisfaction) has become increasingly relevant in the post-COVID-19 era, where perceptions of healthcare quality have shifted. Patients now assess not only clinical outcomes but also their experience

throughout the service process, from registration to post-care (Black et al., 2016; Kotronoulas et al., 2014).

Hati Kudus Langgur Hospital, as a healthcare institution in an island region, faces unique challenges, both in terms of limited resources and the local community's expectations for fast, friendly, and professional services. Based on preliminary surveys, several patient complaints were identified, particularly regarding registration procedures, long waiting times, and communication from medical personnel. These indications underscore the need for an in-depth evaluation of the existing service system.

Against this background, this study seeks to examine how service quality impacts the satisfaction levels of inpatients at Hati Kudus Langgur Hospital. This research is not only relevant to the local context but also reflects broader issues regarding the importance of healthcare service reform in Indonesia, particularly in strengthening service quality in underdeveloped, frontier, and outermost (3T) regions.

This research is expected to enrich the scientific literature in the fields of public service management and human resource management in the healthcare sector. Focusing on service quality and patient satisfaction can provide new perspectives in developing service models based on user needs and expectations. Practically, the findings of this study are expected to serve as strategic input for the management of Hati Kudus Langgur Hospital in designing more adaptive, efficient, and patient-oriented service policies and procedures. Thus, the hospital can enhance its competitiveness amid the dynamic needs of society and competitive pressures among healthcare facilities, while also contributing to the achievement of national health development goals.

LITERATURE REVIEW AND HYPOTHESIS DEVELOPMENT

Service Quality

Service quality is a crucial element in generating customer satisfaction and loyalty. Kotler (2012) defines quality as the overall characteristics of a product or service that affect its ability to satisfy both expressed and implied customer needs. From the perspective of Total Quality Management (TQM), quality encompasses not only the final output but also the processes, environment, and human resources involved (Sopiah et al., 2020). Quality is understood as a dynamic condition oriented toward fulfilling or even exceeding customer expectations. According to Garvin, as cited in Tjiptono (2022),

there are five perspectives of quality, one of which emphasizes that quality is based on an individual's perception of a product or service. Therefore, service quality is closely linked to customer satisfaction, which fosters long-term relationships between the customer and the organization. These relationships enable organizations to better understand customer needs and continuously improve service quality.

Service quality is also defined as the degree of excellence of a service in meeting customer expectations (Tjiptono, 2022) . The two main elements in assessing service quality are customer expectations (expected service) and perceptions of the received service (perceived service). When the delivered service meets or exceeds expectations, the perceived quality is positive; otherwise, it results in a negative perception. In the context of hospitals as healthcare service institutions, service quality serves as a key benchmark that influences patient satisfaction. Hospitals are therefore required to improve the quality of their physical facilities, medical equipment, and human resource competencies holistically. Consistent, patient-oriented service quality not only fosters satisfaction but also loyalty and competitive advantage in the healthcare sector (Tjiptono, 2022).

Kanina (2020) Service quality is commonly assessed through five key dimensions: (1) Tangibles, which include physical facilities, equipment, and staff appearance; (2) Reliability, referring to the consistent and accurate delivery of promised services; (3) Responsiveness, reflecting the promptness and willingness of personnel to assist customers; (4) Assurance, encompassing the competence, courtesy, and trustworthiness of staff; and (5) Empathy, characterized by personalized and compassionate attention to individual customer needs. These dimensions serve as the foundation for evaluating service delivery, including in the context of public and healthcare services. In healthcare, service quality is multidimensional, reflecting the perceptions of patients and their families as well as those of healthcare providers such as doctors, nurses, and administrative staff.

Factors affecting healthcare service quality include staff competence, the quality and quantity of equipment, and organizational culture. Competence is influenced by education, work experience, and training. Meanwhile, the use of modern technology can enhance efficiency and service outcomes. Therefore, hospital service quality is the result of a systemic interaction of various components, ideally fulfilling principles of

affordability, relevance to patient needs, professional standards, safety, and patient satisfaction. Improving service quality requires a comprehensive strategic approach. Dewi (2016) , proposes eight key strategies: (1) managing customer expectations through education on roles, rights, and responsibilities; (2) relationship marketing and management to build long-term stakeholder relationships; (3) aftermarketing to retain existing customers and reduce costs; (4) customer retention through understanding reasons for customer defection; (5) superior customer service exceeding competitor standards; (6) leveraging technology to improve service experiences; (7) effective complaint handling, involving empathy, responsiveness, fairness, and ease of access; and (8) service recovery strategies for corrective and continuous improvement. Additionally, the 7P marketing mix strategy—process, product, price, place, promotion, physical evidence, and participant—outlined by Hasan in Dewi (2016) is also relevant in improving service quality. Implementing these strategies not only enhances internal service quality but also strengthens organizational competitiveness in responding to evolving customer needs.

Patient Satisfaction

Patient satisfaction is a vital aspect in evaluating healthcare service quality. According to (Kotler & Keller, 2014), Satisfaction refers to a psychological response, either positive or negative, that emerges from comparing the perceived performance of a service with prior expectations. When the service meets or surpasses these expectations, satisfaction occurs; conversely, when it falls short, dissatisfaction arises. Multiple elements influence satisfaction, including the quality of service, pricing strategies, and the ease of accessing services (Windasuri, 2017; Bailia et al., 2014). Patient satisfaction can also be understood as an affective response to the received service, reflecting attitudes toward the service experience (Ashworth & Bourassa, 2020) . Satisfied customers are more likely to reuse services, recommend them to others, and show long-term loyalty (Kotler & Keller, 2014).

Tjiptono (2022) outlines several indicators for measuring customer satisfaction, such as: (1) overall satisfaction, (2) satisfaction based on service dimensions, (3) confirmation of expectations, (4) repurchase intentions, and (5) willingness to recommend to others. Dewi (2016) identifies factors influencing satisfaction, including service reliability, staff responsiveness, assurance and trust in the provider, empathy

toward patients, and the appearance of facilities and communication media. In the hospital context, Fauziah & Nugraheni (2024) identifies four main aspects of patient satisfaction: (1) comfort, including cleanliness, layout, and physical facilities; (2) patient-staff relationships, such as friendliness, communication, and responsiveness of medical staff; (3) technical competence, including service speed and staff expertise; and (4) cost, in terms of fairness, transparency, and accessibility for all social groups. Hence, patient satisfaction serves as an essential performance indicator for healthcare institutions and supports competitiveness through continuous service quality improvement.

RS Hati Kudus Langgur

RS Hati Kudus Langgur is a faith-based private hospital located in Southeast Maluku Regency. It was established in 1927 on Jalan Jenderal Sudirman, Langgur. This hospital is categorized as Type D and has been accredited by the Hospital Accreditation Commission (KARS) since 2014, achieving full accreditation status most recently in 2023. RS Hati Kudus Langgur provides a wide range of medical services, including emergency care, specialist outpatient clinics, general practice, medical check-ups (MCU), VCT clinics, and physiotherapy. For inpatient care, it offers Class 3, 2, 1, VIP rooms, an HCU unit, and an operating room. Diagnostic support services such as laboratories, radiology, and a pharmacy are also available.

The hospital's vision is to deliver high-quality, nationally standardized, affordable, and inclusive healthcare services for all segments of society, guided by a spirit of compassion. Its mission includes improving service quality according to accreditation standards, developing strategic partnerships, providing standardized medical infrastructure, delivering efficient and effective services, and fostering a safe and communicative work environment. The hospital's motto, "Your Recovery is Our Happiness," reflects its commitment to patient-centered care focused on safety and comfort.

Service Quality and Customer Satisfaction

(Kotler & Keller, 2014) emphasize that one of the most important factors in maintaining a relationship between a business and its customers is customer happiness. They further state that customer satisfaction is a key driver of long-term company-customer relationships. In the context of hospital services, (Mogi et al., 2024) found that

service quality and trust significantly affect overall patient satisfaction. (Lambe et al., 2025) reaffirm that improving service quality is critical to enhancing patient satisfaction in hospitals. Palupi and Brabo (2025) said that, it is important to recognize that hospital service quality is shaped by a combination of interconnected factors. Evaluations of service quality extend beyond clinical treatment to encompass the overall experience of both patients and their families. The presence of complete medical facilities and the use of advanced technology are essential for supporting accurate diagnoses and effective treatments. Equally important are the competence and professional qualifications of healthcare staff throughout the continuum of care.

Fulgara (2020) concluded that service quality significantly influences patient satisfaction, suggest that service quality determines patient satisfaction levels. (Sumaedi et al., 2016) assert that service quality, healthcare personnel, medical facilities, customer value, perceived sacrifice, and hospital image are all factors influencing customer satisfaction. Based on this literature and objective of this research, the following hypotheses are proposed:

H_0: Independent variable does not have a significant influence on customer satisfaction.

H_1: Tangibility has a significant influence on customer satisfaction.

H_2: Reliability has a significant influence on customer satisfaction.

H_3: Responsiveness has a significant influence on customer satisfaction.

H_4: Assurance has a significant influence on customer satisfaction.

H_5: Empathy has a significant influence on customer satisfaction.

RESEARCH METHODOLOGY

This study aims to examine the effect of service quality on patient satisfaction at Hati Kudus Langgur Hospital. The measurement involves six variables: reliability, ease of use, empathy, assurance, and environmental conditions as independent variables, and patient satisfaction as the dependent variable. The research model is illustrated in Figure 1.

The object of this research is Hati Kudus Langgur Hospital. According to Marczyk et al. (2005), a population refers to all individuals or entities relevant to the research interest. In this study, the population comprises all inpatients at Hati Kudus Langgur Hospital. However, data collection was conducted on a sample of inpatients rather than the entire population. The sampling technique employed is purposive

sampling, as the research specifically targets inpatients only (Etikan et al., 2016; Thomas, 2022) . To determine the required sample size, Slovin's formula was used (Anugraheni et al., 2023; Ramadhani & Aldyandi, 2024) . Based on this formula, the required sample size is 123 respondents, with a margin of error of 5%.

This research adopts a quantitative approach. Data analysis is conducted in several stages, starting with descriptive statistics and followed by inferential analysis. The descriptive stage presents the distribution of collected data, while the inferential stage involves statistical testing using linear regression to identify which independent variables significantly influence the dependent variable. The use of linear regression analysis in assessing patient satisfaction has also been implemented in previous studies (Lambe et al., 2025; Santoso et al., 2025; Susilawati et al., 2024).

Notably, this study uses a significance level (alpha) of 10%, which differs from the conventional 5% threshold commonly adopted in similar studies. Nonetheless, a 10% significance level is widely accepted in exploratory research, particularly in the social sciences domain, and is supported by prior studies in this area (Schumm et al., 2013).

RESULT AND DISCUSSION

First, descriptive statistics from the survey results for each dimension studied are presented. These results can be seen in Table 1. Based on Table 1, it can be observed that the average rating from inpatients is quite satisfactory, with the average for all dimensions—including the satisfaction dimension—around 4.3. With the minimum value around 3-3,4 and maximum value of 5. From this data, it can be concluded that patients currently feel satisfied with the services offered by RS Hati Kudus Langgur.

Table 2 presents the results of the linear regression analysis conducted to evaluate the influence of service quality dimensions on inpatient satisfaction at RS Hati Kudus Langgur. The regression model includes five core SERVQUAL dimensions: tangibles, reliability, responsiveness, assurance, and empathy as independent variables, with patient satisfaction as the dependent variable.

Based on the results, assurance, tangibles, and responsiveness are identified as statistically significant predictors of inpatient satisfaction. These three variables not only pass the significance threshold ($p < 0.10$), but also exhibit positive coefficients,

indicating that an increase in the perceived quality in these areas is associated with an increase in overall patient satisfaction.

The significance of assurance implies that patients place high value on the professionalism, competence, and credibility of medical staff. In a hospital setting, assurance is particularly critical because patients are often in vulnerable physical and emotional states. Their trust in doctors, nurses, and administrative staff heavily influences their perception of care quality.

Tangibles, which refer to the physical aspects of service delivery such as the cleanliness of facilities, the appearance of medical staff, and the availability of medical equipment, also show a significant positive impact. This result reflects how first impressions and environmental cues contribute to patients' evaluations, especially in inpatient settings where individuals interact with the hospital environment for extended periods. In under-resourced or remote hospitals like RS Hati Kudus Langgur, visible investments in facility upkeep can signal commitment to quality and influence patient perceptions significantly.

The importance of responsiveness, or the willingness of staff to help patients and provide prompt service, indicates that timely attention to patient needs is a key determinant of satisfaction. Delays in response to requests or treatments may cause dissatisfaction, even if clinical outcomes are positive. In practice, this suggests that operational efficiency, staffing adequacy, and internal coordination play crucial roles in shaping patient experiences.

The regression model shows that the remaining two dimensions—reliability and empathy—do not have a statistically significant effect on patient satisfaction at the 10% error level. Reliability, defined as the ability to perform the promised service dependably and accurately, may not appear significant possibly due to baseline expectations already being met across patients, leading to less variation in perception. Another possibility is that patients may have difficulty assessing technical reliability of medical procedures, relying instead on observable factors like staff demeanor or the clarity of information provided.

Meanwhile, the non-significance of empathy, which involves the provision of caring and individualized attention, might suggest a perceived lack of personal connection or that patients prioritize functional service delivery over affective

components. This could also reflect cultural or situational factors where patients value efficiency over warmth, especially in time-constrained or overburdened hospital environments.

Taken together, these findings highlight that not all service quality dimensions equally influence patient satisfaction. For RS Hati Kudus Langgur, strategic improvements should focus primarily on enhancing staff professionalism (assurance), maintaining and upgrading physical infrastructure (tangibles), and streamlining processes to ensure timely responses (responsiveness). While reliability and empathy remain essential components of quality care, they may require different measurement approaches or deeper investigation through qualitative methods to understand why their effects appear muted in this context.

These insights are important not only for hospital management but also for policymakers aiming to improve patient-centered care in regional healthcare systems. By aligning service improvement strategies with the dimensions most valued by patients, hospitals can achieve more targeted and effective quality interventions.

CONCLUSION

This study aimed to analyze the influence of service quality dimensions on inpatient satisfaction at RS Hati Kudus Langgur, using the SERVQUAL framework. The results of the linear regression analysis indicate that among the five dimensions of service quality, only assurance, tangibles, and responsiveness have a significant and positive effect on patient satisfaction. In contrast, reliability and empathy do not show a statistically significant influence at the 10% error level.

These findings suggest that inpatients at RS Hati Kudus Langgur place greater emphasis on the professionalism and competence of medical staff (assurance), the physical condition of facilities and equipment (tangibles), and the promptness and attentiveness of service providers (responsiveness). In other words, patient satisfaction is more strongly influenced by observable and immediate factors that contribute to comfort and a sense of safety during hospitalization.

The lack of significant influence from reliability and empathy may be due to the fulfillment of basic service expectations across the board, leading to minimal variance in patient perceptions. Alternatively, it may reflect a context in which patients prioritize speed and efficiency over personal attention and emotional support.

Overall, this study provides valuable insights for healthcare service management, particularly in remote areas such as the Kei Islands. The results highlight the need for RS Hati Kudus Langgur to prioritize strategic improvements in staff professionalism, facility quality, and operational responsiveness. These efforts are expected to directly enhance patient satisfaction and strengthen the hospital's competitiveness in the long term.

BIBILIOGRAPHY

Anugraheni, T. D., Izzah, L., & Hadi, M. S. (2023). Increasing the students' speaking ability through role-playing with Slovin's Formula Sample Size. *Jurnal Studi Guru Dan Pembelajaran*, *6*(3), 262–272.

Ashill, N. J., Carruthers, J., & Krisjanous, J. (2006). The effect of management commitment to service quality on frontline employees' affective and performance outcomes: An empirical investigation of the New Zealand public healthcare sector. *International Journal of Nonprofit and Voluntary Sector Marketing*, *11*(4), 271–287.

Ashworth, L., & Bourassa, M. A. (2020). Inferred respect: a critical ingredient in customer satisfaction. *European Journal of Marketing*, *54*(10), 2447–2476.

Bailia, J. F. T., Soegoto, A. S., & Loindong, S. S. R. (2014). Pengaruh kualitas produk, harga dan lokasi terhadap kepuasan konsumen pada warung-warung makan lamongan di kota Manado. *Jurnal EMBA: Jurnal Riset Ekonomi, Manajemen, Bisnis Dan Akuntansi*, *2*(3).

Basabih, M., & Widhakuswara, I. (2024). Opportunities and Challenges in Implementing Regional Public Service Agency Policy in Regional Hospitals: Systematic Review. *Jurnal Ilmu Kesehatan Masyarakat*, *15*(1), 1–20.

Black, N., Burke, L., Forrest, C. B., Ravens Sieberer, U. H., Ahmed, S., Valderas, J. M., Bartlett, S. J., & Alonso, J. (2016). Patient-reported outcomes: pathways to better health, better services, and better societies. *Quality of Life Research*, *25*, 1103–1112.

Cheung, A. B. L. (1997). Understanding public-sector reforms: global trends and diverse agendas. *International Review of Administrative Sciences*, *63*(4), 435–457.

dewi, mutia. (2016). Pengaruh Kualitas Pelayanan terhadap Kepuasan Pasien Pengguna BPJS pada Rumah Sakit Rehabilitasi Medik Kabupaten Aceh Timur. *Jurnal Manajemen Dan Keuangan*, *5*(2). https://ejurnalunsam.id/index.php/jmk/article/view/79

Etikan, I., Musa, S. A., & Alkassim, R. S. (2016). Comparison of convenience sampling and purposive sampling. *American Journal of Theoretical and Applied Statistics*, *5*(1), 1–4.

Fatiya Diana Wulandari Putri, Angella Yunita Azarah, & Rahmasari Dwi Agustina. (2023). Peran Perangkat Desa dalam Menjaga Stabilitas Sosial dan Memberikan Pelayanan Publik di Desa Jubung. *Khatulistiwa: Jurnal Pendidikan Dan Sosial Humaniora*, *3*(4), 230–247. https://doi.org/10.55606/khatulistiwa.v3i4.2436

Fauziah, N. F., & Nugraheni, A. Y. (2024). Evaluation of the Quality of Pharmaceutical Services in Private Hospitals in Sukoharjo in 2023. *Gaster*, *22*(1), 39–56.

Ferlie, E. (2017). Exploring 30 years of UK public services management reform–the case of health care. *International Journal of Public Sector Management*, *30*(6–7), 615–625.

Fulgara, N., Wijayanto, G., & Jahrizal, J. (n.d.). Pengaruh Kualitas Pelayanan Dan Kepercayaan Terhadap Kepuasan Pasien Peserta Bpjs Kesehatan Di Teluk Kuantan Kabupaten Kuantan Singingi. *Jurnal Tepak Manajemen Bisnis*, *12*(3), 532–546.

Hong, Y., Jiang, Y., Liao, H., & Sturman, M. C. (2017). High performance work systems for service quality: Boundary conditions and influence processes. *Human Resource Management*, *56*(5), 747–767.

Ioannidou, F., & Konstantikaki, V. (2008). Empathy and emotional intelligence: What is it really about? *International Journal of Caring Sciences*, *1*(3), 118.

Kanina, A. S. (2020). *Saudi Car Dealerships' Service Quality, Customer Satisfaction, and Behavioral Intentions: A Quantitative Correlational Study*. University of Phoenix.

Kaul, M. (1997). The new public administration: management innovations in government. *Public Administration and Development: The International Journal of Management Research and Practice*, *17*(1), 13–26.

Komene, E., Pene, B., Gerard, D., Parr, J., Aspinall, C., & Wilson, D. (2024). Whakawhanaungatanga—Building trust and connections: A qualitative study indigenous Māori patients and whānau (extended family network) hospital experiences. *Journal of Advanced Nursing*, *80*(4), 1545–1558.

Kotler, P. (2012). *Kotler on marketing*. Simon and Schuster.

Kotler, P., & Keller, K. L. (2014). *Philip Kotler*. Astromax Entertainment.

Kotronoulas, G., Kearney, N., Maguire, R., Harrow, A., Di Domenico, D., Croy, S., & MacGillivray, S. (2014). What is the value of the routine use of patient-reported outcome measures toward improvement of patient outcomes, processes of care, and health service outcomes in cancer care? A systematic review of controlled trials. *Journal of Clinical Oncology*, *32*(14), 1480–1501.

Lambe, H. G., Widyarini, M., & Grahadian, K. (2025). PENGARUH SISTEM REGISTRASI ONLINE (MOBILE JKN) TERHADAP KEPUASAN PASIEN PADA MANAJEMEN SISTEM JANJI TEMU. *Jurnal Ilmiah Manajemen, Ekonomi, & Akuntansi (MEA)*, *9*(1), 1041–1056.

Liao, H., Toya, K., Lepak, D. P., & Hong, Y. (2009). Do they see eye to eye? Management and employee perspectives of high-performance work systems and influence processes on service quality. *Journal of Applied Psychology*, *94*(2), 371.

Mattila, E., & Kallio, T. J. (2025). Towards the best public administration in the world: a case of health and social services reform in Finland from the perspective of children's and families' services. In *Future Public Governance and Global Crises* (pp. 12–24). Edward Elgar Publishing.

McCourt, W. (2018). New directions for public service reform in developing countries. *Public Administration and Development*, *38*(3), 120–129.

Mogi, M. G. P., Widyarini, M., & Grahadian, K. (2024). HOSPITAL SERVICE QUALITY AND CUSTOMER TRUST TOWARDS PATIENT SATISFACTION IN GENERATION MZ. *Jurnal Ilmiah Manajemen, Ekonomi, & Akuntansi (MEA)*, *8*(3), 1244–1259.

Ngatindriatun, N., Alfarizi, M., & Arifian, R. (2024). Green hospital practices on patient's satisfaction in Indonesian hospital: medical specialist department case investigation. *Journal of Modelling in Management*, *19*(3), 899–924.

Palupi, H. S. N., & Brabo, N. A. (2025). The Influence Of Trust And Service Quality On Patient Loyalty With Satisfaction As A Mediating Variable: A Case Study Of Patients At Bogor Senior Hospital (BSH). *Jurnal Ilmiah Multidisiplin*, *4*(03), 1–13.

Ramadhani, H. K., & Aldyandi, D. (2024). The Relationship Between The Level Of Knowledge Of Kiasu Culture And The Way Of View Of High School/Vocational School Students In The City Of Surabaya To Achieve Golden Indonesia. *Medical Technology and Public Health Journal*, *8*(1), 55–61.

Ryandini, T. P., Safa'ah, N., & Pitaloka, D. (2022). THE EFFECT OF "REACH" COMMUNICATION (RESPECT, EMPATHY, AUDIBLE, CLARITY, HUMILITY) TOWARD THE CARING BEHAVIOR OF NURSES IN TUBAN. *Lux Mensana: Journal of Scientific Health*, 296–306.

Santoso, M., Widyarini, M., & Grahadian, K. (2025). THE INFLUENCE OF BRAND IMAGE AND PRICE ON PATIENTS'DECISIONS TO USE OUTPATIENT SERVICES AT GREEN HOSPITAL X. *JAMBURA: Jurnal Ilmiah Manajemen Dan Bisnis*, *7*(3), 1455–1465.

Schumm, W. R., Pratt, K. K., Hartenstein, J. L., Jenkins, B. A., & Johnson, G. A. (2013). Determining statistical significance (alpha) and reporting statistical trends: Controversies, issues, and facts. *Comprehensive Psychology*, *2*, 03-CP.

Sopiah, S., Kurniawan, D. T., Nora, E., & Narmaditya, B. S. (2020). Does talent management affect employee performance?: The moderating role of work engagement. *The Journal of Asian Finance, Economics and Business*, *7*(7), 335–341.

Sumaedi, S., Yuda Bakti, I. G. M., Rakhmawati, T., Astrini, N. J., Widianti, T., & Yarmen, M. (2016). Indonesian public healthcare service institution's patient satisfaction barometer (IPHSI-PSB) A new public healthcare patient satisfaction index. *International Journal of Productivity and Performance Management*, *65*(1), 25–41.

Susilawati, Y., Widyarini, M., & Grahadian, K. (2024). Kompetensi Komunikasi dalam Hubungan antara Profesionalisme dan Kepuasan Kerja pada Perawat Milenial dan Generasi Z. *Prospek: Jurnal Manajemen Dan Bisnis*, *6*(2).

Thomas, F. B. (2022). The role of purposive sampling technique as a tool for informal choices in a social Sciences in research methods. *Just Agriculture*, *2*(5), 1–8.

Tjiptono, F. (2022). *Service Management: Mewujudkan layanan prima edisi 4*. Penerbit Andi.

Wilson, R., French, M., Hesselgreaves, H., Lowe, T., & Smith, M. (2024). New development: Relational public services—reform and research agenda. *Public Money & Management*, *44*(6), 553–558.

Windasuri, H. (2017). *Excellent Service*. Gramedia Pustaka Utama.

Wu, T.-J., Zhang, R.-X., & Li, J.-M. (2024). How does emotional labor influence restaurant employees' service quality during COVID-19? The roles of work fatigue and supervisor–subordinate Guanxi. *International Journal of Contemporary Hospitality Management*, *36*(1), 136–154.

PICTURE AND TABLE
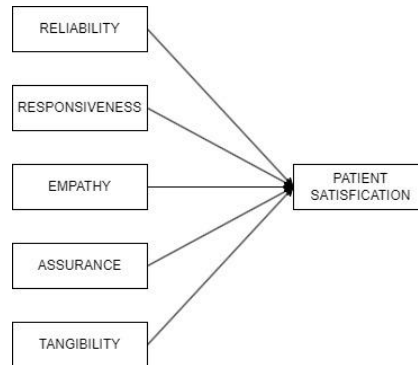
Picture 1. Research Framework

Table 1. Statistical Descriptives for each Dimensions

Dimension	Minimum	Maximum	Mean	Std. Deviation
Tangible	3.429	5	4.293	0.475
Reliability	3.333	5	4.247	0.482
Responsiveness	3.200	5	4.299	0.489
Empathy	3.000	5	4.379	0.504
Assurance	3.250	5	4.325	0.502
Satisfaction	3.333	5	4.332	0.491

Table 2. Linear Regression Analysis

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	0.370	0.229	-	1.616	0.109
Tangibility	0.164	0.097	0.159	1.700	0.092
Reliability	0.091	0.111	0.089	0.817	0.415
Responsiveness	0.234	0.126	0.234	1.859	0.066
Empathy	0.066	0.107	0.068	0.614	0.541
Assurance	0.364	0.098	0.372	3.703	0.000