

Analysis of Patient Satisfaction in Mataram City, at the Start of the Pandemic Period, the Covid-19 Campaign

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ABSTRACT

The purpose of this study is to determine the degree of alignment between inpatient expectations and the quality of health services provided at Mataram City Regional General Hospital during the covid-19 pandemic. This study employs causal research techniques. Techniques for data collection that make use of questionnaires. The trial enrolled 82 patients. Purposive sampling was utilized in this investigation. In this study, quantitative analysis will be conducted using validity and reliability tests using Cronbach's Alpha. The t test, the f test, and the coefficient of determination are used to conduct hypothesis tests. IBM SPSS 25 computer application was used for testing. The t test revealed that the variables tangibility, reliability, responsiveness, assurance, and empathy) had a partial effect on patient satisfaction at Mataram City Regional General Hospital during the Covid-19 Pandemic. The f-test analysis revealed that the variables tangibility, reliability, responsiveness, assurance, and empathy) had a significant effect on patient satisfaction at Mataram City Regional General Hospital during the Covid-19 Pandemic. $R^2=648$ in the determinant test. This suggests that tangibility, reliability, responsiveness, assurance, and empathy had a 64.8 percent effect on patient satisfaction at Mataram City Hospital during the Covid-19 Pandemic era, while the remaining 35.2 percent is explained by other variables not included in this study.

INTRODUCTION

In this era, service quality became critical and one of the keys to competitive advantage in the field of marketing. The quality of service can be used to gauge a customer's happiness with a business. Quality establishes a solid link between the customer and the business. In the long run, this relationship enables the company to gain a thorough understanding of the customer's expectations and needs, thereby increasing customer satisfaction where the company maximizes a pleasant customer experience and minimizes or eliminates a less pleasant customer experience, as well as patient service. Improved health service quality, service quality, and patient happiness all serve as measures of service implementation success in hospitals. Because service quality is critical in meeting the requirements and wants of customers and in providing delivery that exceeds customer expectations. (Ardiansyah, et, al, 2017).

Customer satisfaction can result in a variety of benefits, including a more harmonious connection between the business and its customers. The existence of a high-quality service supplied by the business will result in client satisfaction. When a customer is satisfied with a product or service, he or she will compare the services offered. If consumers are entirely satisfied, they will return and recommend to others that they make their purchases in the same location. Thus, the corporation must begin thinking more maturely about the value of customer service through service quality, since it is increasingly recognized that service (customer satisfaction) is a critical part of business survival and competition. (Tjiptono, 2016)

Hospitals are mandated to increase the quality of their facilities, services, and independence as part of the national health system. Thus, as a competitive health service actor, the hospital must be led by individuals with an entrepreneurial spirit capable of achieving efficiency, excellence in quality and service, innovation, and superior response to patient needs. Accepting and servicing inpatients as customers with a variety of characteristics requires hospitals to provide themselves with the ability to constantly listen to the voice of consumers and to respond to their desires, expectations, and needs for health care services. This is intimately related to the fact that health care professionals are continually accompanying and serving patients as clients.

In general, unsatisfied patients will lodge a complaint with the hospital. Unresolved complaints will result in lower patient satisfaction with the capabilities of the hospital's health services. Consumer satisfaction has risen to prominence as a fundamental theme in business and management discourse. Consumers often assume that the things they consume, whether in the form of commodities or services, will be received and enjoyed with adequate or sufficient service. Consumer happiness can influence perception and help a company position its items more favorably in the eyes of its customers. In terms of consumer/patient satisfaction and service quality

The quality of health care, the quality of service, and patient happiness all serves as markers of a hospital's success in service delivery. Because service quality is critical in meeting the wants and wishes of consumers and in balancing customer expectations, patients will feel happy with a high level of service (service as expected). (Simamora, 2011). However, achieving a high standard of service is not enough; it must also be maintained throughout time, given the shifting demands, expectations, and wants of consumers and numerous interested parties. As a result, Mataram City Hospital, as a government-owned regional public hospital and one of the type B hospitals in Mataram city, West Nusa Tenggara, is intended to provide more consistent and high-quality services. The aim is to meet or surpass patient service quality expectations to foster client loyalty. Additionally, Mataram City Hospital serves as a referral hospital for residents of Mataram and the surrounding regions. Coronavirus or chronic obstructive pulmonary disease Coronavirus 2 (SARS-CoV-2) is a respiratory virus. Coronavirus is a novel coronavirus that infects people. This virus is contagious and can affect anyone, including the elderly, adults, children, and infants, especially pregnant women, and nursing moms. Corona virus can cause moderate respiratory system disruption, serious lung infections, or death. The coronavirus illness is known as COVID-19 (Corona Virus Disease 2019) and was initially found in late December 2019 in the Chinese city of Wuhan. The virus is very contagious and has spread to practically all countries, including Indonesia, in a matter of months, particularly in ntb province, where the first case was reported on March 24, 2020.

Mataram City Hospital serves as a model for corona management in NTB province. The Minister of Health's Decree No. HK.01.07 / MENKES / 169/2020 establishes this Emerging Infectious Disease Management Hospital (PIE). Since the pandemic of covid-19, people have been afraid to visit doctors, health centers, and hospitals. As stated by Mataram City Hospital physician Jack Dirut "Since the COVID-19 pandemic began, the number of regular special patient visits at Mataram City Hospital has reduced to 150-200 per day. Prior to COVID-19, a single day may see up to 1,000 patients." "If someone is fearful of seeking help, they will be kasian. Additionally, people with diabetes who are required to take medicine and have injections on a regular basis. If the drug can be obtained, but injections must be performed by a medical professional, "He stated. Dr. Jack, who is also the Chairman of the Association of Indonesian Hospitals (Persi) West Nusa Tenggara, asks all hospitals to give the best service possible and to educate the public so that they are not frightened to visit the hospital. (Antarnew, 9-11-2020)

One of Mataram City Hospital's strategies for increasing customer satisfaction is to separate patients, with COVID-19 patients treated in the northern building and regular patients in the southern building, to avoid the presence of regular patients exposed to COVID-19 in the presence of COVID-19 patients. Additionally, strict health regulations and a cap on the number of introductions to sick and elderly individuals are required. The method is supposed to boost customer happiness and visitation. According to (Simamora, 2011), service quality is defined as the difference between a customer's expectations prior to getting service and their experience following service. According to (Tjiptono, 2016), service quality is defined as the expected degree of perfection and the ability to control that level of excellence to match the customer's wishes. As stated in (Sunnyoto, 2012), "The quality of service is determined by the efforts made to meet the needs and desires of consumers and the accuracy with which they are delivered to balance consumer expectations, specifically the conformity of expectations with management perceptions, the conformity of consumer perceptions with employee work standards, and the conformity of employee work standards and services provided with promised stipulations. g is anticipated from the consumer."

According to Parasuraman (Zeithaml and Berry in Arianto and Nur, 2014), consumer interactions with businesses are reinforced when consumers receive appropriate service quality results and weakened when consumers receive unfavorable service quality results. The superior quality of service will result in a rise in the proclivity to purchase. The quality of service has a positive correlation with the proclivity to repurchase, the proclivity to refer products or services, loyalty, and profitability. As a result, it may be stated that service quality can improve the likelihood of repurchase.

According to (Tjiptono, 2016), service quality contributes to increased consumer satisfaction; service quality has a positive correlation with consumer satisfaction; and high service quality results in increased

consumer satisfaction. On the other hand, dissatisfaction with the quality of service can be used as an excuse for consumers to relocate or make discounted purchases. As a result, it can be argued that service quality has a beneficial effect on consumer satisfaction.

Based on the foregoing, it can be inferred that service quality is a determining element in assessing consumer satisfaction with a product or service.

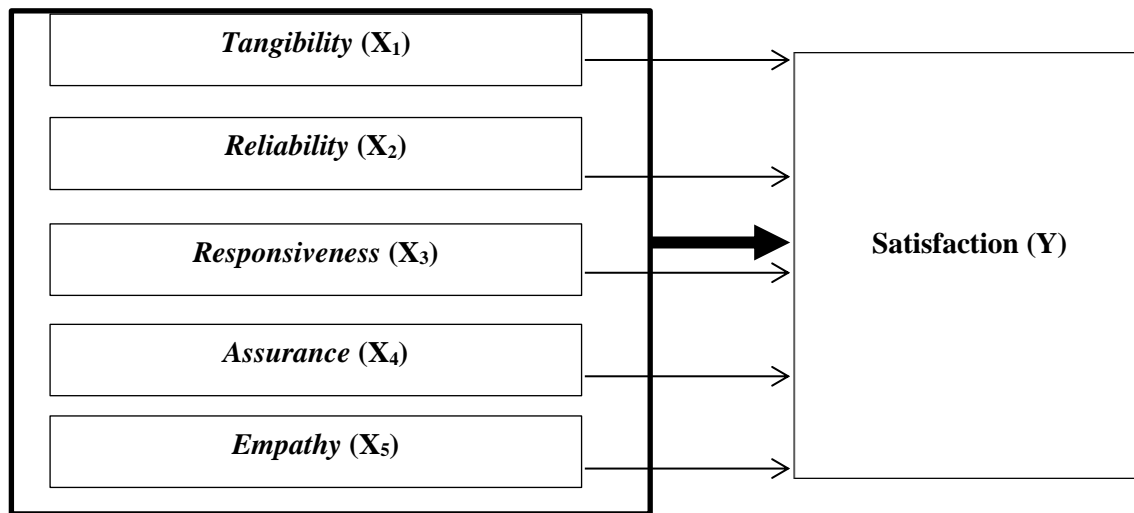


Figure 1. Relationship Between Dimensions of Service Quality to Patient Satisfaction

In accordance with the problem, this study's hypothesis is as follows: H1) Tangibility has a statistically significant effect on patient satisfaction, H2) Reliability has a statistically significant effect on patient satisfaction, H3) Responsiveness has a statistically significant effect on patient satisfaction, H4) Assurance has a statistically significant effect on patient satisfaction, and H5) Empathy has a statistically significant effect on patient satisfaction.

RESEARCH METHOD

This study makes use of causal research techniques. Questionnaires are used to collect data. The trial enrolled 82 patients. Purposive sampling was utilized in this investigation. In this study, quantitative analysis will be conducted using validity and reliability tests using Cronbach's Alpha. The t test, the f test, and the coefficient of determination are used to conduct hypothesis tests. IBM SPSS 25 computer application was used for testing.

RESULTS AND DISCUSSION

Instrument Feasibility Test, Validity test. Testing the degree of validity in this research instrument is done with a correlation technique, which compares r-count with r-table. If the r-count is greater than the r-table ($r\text{-calculate} > r\text{-table}$) then the data is considered valid.

Table 1. Validity Test Results

Variabel	Pernyataan	r-hitung	r-tabel	Kesimpulan
<i>Tangibility</i> (X_1)	1	0,532	0,2172	Valid
	2	0,359	0,2172	Valid
	3	0,634	0,2172	Valid
	4	0,620	0,2172	Valid
<i>Reliability</i> (X_2)	1	0,783	0,2172	Valid
	2	0,850	0,2172	Valid
	3	0,713	0,2172	Valid
	4	0,604	0,2172	Valid
<i>Responsiveness</i> (X_3)	1	0,542	0,2172	Valid
	2	0,77	0,2172	Valid
	3	0,658	0,2172	Valid
	4	0,705	0,2172	Valid
<i>Assurance</i> (X_4)	1	0,758	0,2172	Valid
	2	0,569	0,2172	Valid
	3	0,664	0,2172	Valid
	4	0,743	0,2172	Valid
<i>Empathy</i> (X_5)	1	0,618	0,2172	Valid
	2	0,721	0,2172	Valid
	3	0,633	0,2172	Valid
	4	0,761	0,2172	Valid
Satisfaction (Y)	1	0,755	0,2172	Valid
	2	0,716	0,2172	Valid
	3	0,593	0,2172	Valid
	4	0,688	0,2172	Valid

The basis of decision making in the rehabilitation test is as follows: a) If the value of *Cronbach's Alpha* > 0.60 then the questionnaire or questionnaire is declared realibel or consistent and b) Meanwhile, if the value of *Cronbach's Alpha* < 0.60 then the questionnaire or questionnaire is declared realibel or inconsistent.

Table 2. Reliability test results

No	Variabel	Nilai <i>Cronbach's Alpha</i>	Kesimpulan
1	<i>Tangibility</i>	0,832	Realibel
2	<i>Reability</i>	0,937	Realibel
3	<i>Responsiveness</i>	0,854	Realibel
4	<i>Assurance</i>	0,802	Realibel
5	<i>Emphaty</i>	0,878	Realibel
6	Kepuasan	0,865	Realibel

According to the table above, Cronbach's Alpha values for Tangibility, Reliability, Responsiveness, Assurance, Empathy, and Satisfaction are greater than 0.60, indicating that all statement items are proclaimed true or consistent.

The following stage involves doing the Classical Assumption test with the normality test, heteroscedasticity test, and multicollinearity test. a) The normality test with histogram chart testing produces the following results:

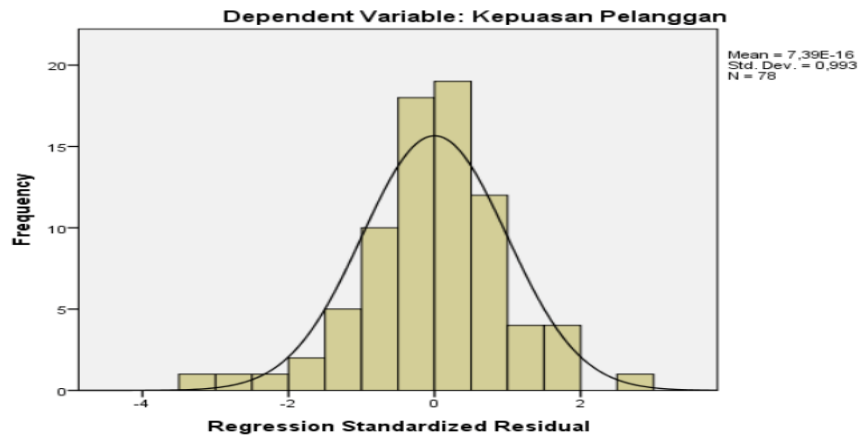


Figure 2. Histogram Graph

Additionally, the Multicollinearity Test can be used to determine multicollinearity by examining the VIF value of each independent variable; if the VIF value is greater than 10, it can be assumed that the data are devoid of multicollinearity symptoms.

Table 3. Multicollinearity Test
Coefficients^a

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Collinearity Statistics	
	B	Std. Error	Beta			Tolerance	VIF
1 (Constant)	7,234	4,128		1,628	,103		
tangibility	,094	,086	,087	2,104	,023	,881	1,225
reliability	,411	,108	,474	3,752	,000	,332	2,843
responsiveness	,132	,125	,225	2,188	,031	,315	3,659
assurance	,243	,136	,237	2,873	,025	,367	2,604
empathy	,113	,092	,124	2,144	,046	,487	2,768

As can be seen from the table above, all variables have a tolerance value greater than 0.1 and a VIF value less than 10, indicating that the regression model used in this study does not exhibit multicollinearity. The following stage of the Heteroskedasticity Test determines whether there is heteroskedasticity when there is no discernible pattern and the points spread above and below the Y axis zero. 139–143 (Ghozali, 2011).

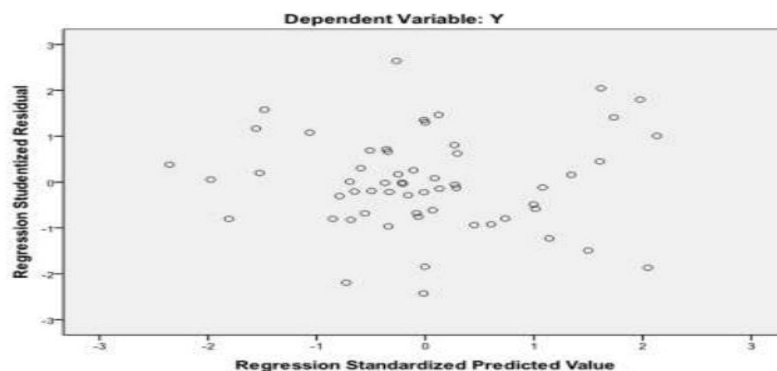


Figure 3. Heteroskedasticity Test

The figure above shows the dots spreading randomly, not forming an orderly pattern, and spread in all directions, both above and below the number 0. Thus, there is no problem of hydroelasticity, until a good and ideal regression model can be fulfilled.

Further stages of double linear regression analysis in this study using the help of *SPSS Statistics software application version 25*. The forms of the equation are: $Y = \alpha + \beta X_1 + \beta X_2 + \beta X_3 + \beta X_4 + \beta X_5 + \epsilon$. Thus, the following multiple linear regression equations can be presented based on the findings of the SPSS analysis:

Tabel 4. Analisis Regresi Linear Berganda
Coefficients^a

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
1	(Constant)	7,234		1,628	,103
	tangibility	,094	,087	2,104	,023
	reliability	,411	,474	3,752	,000
	responsiveness	,132	,225	2,188	,031
	assurance	,243	,237	2,873	,025
	empathy	,113	,124	2,144	,046

$$Y = 7,234 + 0,094X_1 + 0,411X_2 + 0,132X_3 + 0,243X_4 + 0,113X_5 + \epsilon$$

It can be explained as follows using the equation: 1) The constant coefficient of 7.234 indicates that in the absence of tangibility, reliability, responsiveness, assurance, and empathy factors, patient satisfaction will decrease by 7,234 points. 2) The regression coefficient for tangibility variables is 0.094 positive, which means that for every point increase in the quality of tangibility (physical evidence), patient satisfaction increases by 0.094 points. 3) The regression coefficient for reliability variables is 0.411 in the positive direction, which means that if reliability quality (reliability) improves by one point and other variables remain constant, patient satisfaction increases by 0.411 in the positive direction. will increase by 0.405 points, 4) The responsiveness variable has a positive regression coefficient of 0.132, which implies that for every point increase in responsiveness (power quality) response, patient satisfaction will increase by 0.132 points. 5) The assurance variable has a positive regression coefficient of 0.243, indicating that for every point rise in quality (assurance), patient satisfaction increases by 0.243 points. and 6) the regression coefficient for empathy variables is 0.113 in the positive direction, indicating that for every point rise in empathy (worry), patient satisfaction increases by 0.113. The statistical test t is used to determine the extent to which independently free variables contribute to the explanation of the fluctuation of bound variables. If the t-count value is more than the t-table value, the free variable has a positive effect on the bound variable, or if the significance value t 0.05 is greater than 0.05, the free variable has a significant effect on the bound variable. The following will be explained using the SPSS Statistics version 25 software application:

Table 5. Test Results t

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
1	(Constant)	7,234		1,628	,103
	tangibility	,094	,087	2,104	,023
	reliability	,411	,474	3,752	,000
	responsiveness	,132	,225	2,188	,031
	assurance	,243	,237	2,873	,025
	empathy	,113	,124	2,144	,046

The table above summarizes the findings of partial hypothesis testing, indicating that: 1) The significance of the tangibility variable is 0.023 0.05, indicating that H_a is accepted and H_0 is rejected. Thus, evaluating this hypothesis revealed that tangibility (physical evidence) significantly impacts patient satisfaction at Mataram City Regional General Hospital during the Covid-19 Pandemic. 2) A significance value of 0.000 0.05 for the reliability variable indicates that H_a is accepted and H_0 is rejected. Thus, evaluating this hypothesis revealed that reliability had a major impact on patient satisfaction at Mataram City Regional General Hospital during the Covid-19 Pandemic. 3) A significant level of 0.031 0.05 for the

responsiveness variable, indicating that H_a was accepted and H_0 was rejected. Thus, evaluating this hypothesis revealed that responsiveness had a substantial effect on patient satisfaction at Mataram City Regional General Hospital during the Covid-19 Pandemic Period. 4) The significance level of the Assurance variable is 0.025 0.05, indicating that H_a was accepted, and H_0 was refused. Thus, testing this hypothesis revealed that Assurance (assurance) has a statistically significant effect on patient satisfaction at Mataram City Regional General Hospital during the Covid-19 Pandemic, 5) Empathy variable significance value of 0.046 0.05, indicating that H_a is accepted and H_0 is rejected. Thus, evaluating this hypothesis revealed that Assurance (assurance) had a substantial effect on Mataram City Regional General Hospital's patient satisfaction during the Covid-19 Pandemic.

The following stage involves performing a statistical test f to determine the combined effect of free variables in explaining the variation of bound variables. If the value $f_{\text{calculates}}$ of the table, then the free variable has a considerable effect on the bound variable concurrently. The following are the results of the f test performed with the SPSS 25 program and the value $F_{\text{calculates}} = 20.134$ with a probability level of (0.000 0.05). F_{table} $k;n-k$, 5;77 has a value of 2.33. Given that the value of $F_{\text{calculates}}$ 20.134 is bigger than that of F_{table} 2.33, it can be argued that the free variables reliability, responsiveness, assurance, and empathy all influence the bound variable patient satisfaction (Y).

Table 6. Test Results f ANOVA^a

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	826,559	5	165,254	20,134	,000 ^b
	Residual	729,051	78	8,148		
	Total	1489,533	81			

The final stage of the data process is to explain $R^2 = 0.648$ which means explaining the magnitude of the influence of *tangibility*, *reliability*, *responsiveness*, *assurance*, and *empathy* on patient satisfaction is 64.8% and the remaining 25.2% explained other variables that are not in this study.

Table 6. Determinant Coefficient Test Results (R^2) Model Summary^b

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	,947 ^a	,648	,630	3,42022

Customer satisfaction was found to have a favorable and significant effect on customer satisfaction. According to Tjiptono's (2016: 33) theory, service quality contributes to increased consumer satisfaction, service quality has a positive relationship with consumer happiness, and high service quality results in increased consumer satisfaction as well. On the other hand, dissatisfaction with the quality of service can be used as an excuse for consumers to relocate or make discounted purchases.

The findings of this study corroborate those of Salhuteru (2017), Adriansyah et al. (2017), and Nursanah et al. (2020), who found that service quality has a favorable and substantial effect on satisfaction.

SUGGESTION

Based on the research conducted, the author makes the following recommendations: should the Mataram City Hospital maintain and pay increased attention to elements that contribute to patient satisfaction at the Mataram City Hospital.

Some conclusions can be derived from the study's findings. Tangibility (physical evidence), Reliability (reliability), Responsiveness (responsiveness), Assurance (assurance), and Empathy (assurance) all have a substantial effect on Mataram City Regional General Hospital's patient satisfaction during the Covid-19 Pandemic Period.

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