



Description of service satisfaction level outpatient nursing in hospital outpatient Poly Elisabeth Medan 2022

Mestiana Br Karo¹, Vina YS Sigalingging², Hermina Siregar³

^{1,2,3} Bachelor of Nursing, STIKes Santa Elisabeth Medan, Indonesian

Article Info

Article history:

Received Mar 25, 2023

Revised Apr 14, 2023

Accepted Apr 30, 2023

Keywords:

Satisfaction;

Service;

Patient;

ABSTRACT

Satisfaction is a feeling of pleasure or disappointment that someone feels after comparing performance with what is expected, if the performance is below expectations then the customer is not satisfied, but on the contrary if it meets expectations the customer feels satisfy and if the performance exceeds expectations the customer feels very satisfied and happy. This study aims to identify a description of the level of satisfaction of outpatients at the Outpatient Polyclinic of Elisabeth Hospital Medan in 2022. The data collection method used in this study is the primary data method. become respondents who meet the criteria for a total sample of 37 respondents. The instrument used is a satisfaction questionnaire. The results shows that the reliability (reliability) in the Outpatient Clinic of Santa Elisabeth Hospital Medan is very satisfied with 33 respondents (89.2%), assurance (guarantee) very satisfied, 35 respondents (94.6%), tangibles (reality) very satisfied. as many as 37 respondents (100%), empathy (empathy) very satisfied as many as 35 respondents (94.6%), responsiveness (responsibility) very satisfied as many as 35 respondents (94.6%). Therefore, nurses can maintain the level of satisfaction of nursing services in outpatients and increase a sense of care, the responsibility of nurses to patients, nursing services in outpatients. Bibliography (2008-2022)

This is an open access article under the CC BY-NC license.



Corresponding Author:

Hermina Siregar,

Bachelor of nursing

STIKes Santa Elisabeth Medan,

Jl. Bunga Terompet No. 118, Sempakata, Kec. Medan Selayang, Kota Medan, Sumatera Utara 20131

Email: herminasiregar0301@gmail.com

1. INTRODUCTION

The service involved is a process activities carried out by nurses in meeting patient needs in maintaining the situation in terms of biology, psychology, social, and spiritual patient (Sulima., 2020). Health services are important factor in improving the degree of health and well-being of everyone people, and have the right to obtain health services from The government is responsible for the availability of all forms of health efforts quality, safe, efficient, and affordable by all levels of society (Nurfadillah et al., 2021). Merging services are one of the efforts to maintain, improve health, prevention, healing, and health restoration carried out by good nurses individual or society (Perceka,2020).

Satisfaction is a feeling happy or disappointed someone who is felt after comparing between performance with the expected, if the performance is below expectations then the customer is not satisfied, but vice versa if it meets customer expectations feel satisfied and if the performance exceeds expectations the customer feels very satisfied and like (Kotler in Soweko H, 2019).

Fufa (2019), patient satisfaction is an important phenomenon recognize the need for patients to improve the health care system. Patient response to health services is one way to obtain information about patient views regarding service quality perceived health, and to build strong patient engagement. Patients who report higher satisfaction are more likely to benefit from their treatment. Sesrianti (2019), patient satisfaction is the patient's perception that expectations have been fulfilled, optimal results are obtained for each patient and health services by taking into account the ability of patients and their families, attention to his family, attention to the needs of patients, conditions physical environment, as well as responses to patient needs so that the best possible continuity between satisfaction and results.

Widiasari (2019), patient dissatisfaction when being treated is caused by several factors. The identity error factor still often occurs, namely mistaken patient identity especially in the intensive care unit. Factor communication, the most common cause of errors from the implementation of patient safety. Losses that occur as a result of ignoring patient safety pretty much. Tateke in Asres (2020), general dissatisfaction Qualitatively describes the patient's negative reaction to the service provided done.

Nooria in Budiana (2019), influencing factors patient satisfaction, namely product characteristics including the appearance of the building, cleanliness and amenities. Price includes the more expensive the price of treatment, the patient has greater expectations. Service includes service friendliness of staff, speed and service. Amenities include amenities health facilities and infrastructure, parking areas, waiting rooms comfortable. Image includes the image, reputation, and care of nurses towards environment. And lastly communication, how are the complaints from patients quickly accepted by the nurse.

Agritubella (2018), several dimensions of satisfaction consist of; nurse communication, nurse attention, physical comfort and satisfaction factors One of them is the ability to provide information, caring, communication, polite, responsive. Comfort is the highlight of the patient's reason choose a health service. Communication errors bogged down the process nursing and the presence of unexpected events, namely less complaints good nurse communication.

Handajani (2019), there are 3 (three) types of conditions satisfaction that can be felt by consumers related to comparison between expectations and reality, that is, if expectations or needs are equal services provided, consumers will be satisfied. If the services provided to consumers are lacking or not in accordance with the needs or expectations consumer, the consumer becomes dissatisfied. Asres et al (2020), patient satisfaction is defined as individual positive evaluation of different health care dimensions and is an important element in the evaluation of services provided. Satisfaction The patient is one measure of the success of the services provided by health institutions. Patient satisfaction is one important indicator of health management that can help improve quality services in the health care setting.

Akbulut et al (2017), patient satisfaction is a function depends on the extent to which it corresponds to the patient's expected benefits from the service he will receive, the difficulties so that the patient is free of suffering, the level of performance the patient expects from the service to be provided, and the patient's socio-cultural values in relation to it service provision (patient's individual and family culture, class and social status, personal preferences and habits, lifestyle, prejudices).

Nursalam (2015), there are several factors that influence the consumer satisfaction. Broadly speaking categorized in 5 categories viz production Quality, Service Quality, Price Emotional, Factor, and Cost of acquiring. Product quality how consumers will feel satisfied with the product used. Several dimensions that form the quality of goods products are performance, reliability, conformance, durability, features. Service quality how consumers will be satisfied with the services that have been consumed. The service quality dimension, better known as servqual includes 5 dimensions, namely responsiveness, reliability, assurance, empathy, responsiveness. Emotional factors confidence and pride in the products and services used compared to competitors. Emotional factor is measured from the perceived best score, meaning the perception of the best quality

compared to its competitors. Price of products, services used compared to competitors at the same cost issued by consumers. Price of products and services are measured by the value of the benefits compared to the costs incurred by consumers. Price is the price of medical services that must be paid by consumers. Cost of aquarin costs incurred to obtain a product or service, Muninjaya (2015), there are five groups of characteristics used by customers in evaluating the quality of services, including:

Tangible (reality) that is the quality of health services can also be felt indirectly directly by its users by providing physical facilities and adequate equipment. At capable health care providers able to work optimally according to their respective skills. For this criterion, it is necessary to include improvements to communication facilities and equipment services that do not directly provide convenience to service users such as parking lots, security, waiting room comfort.

Empathy (empathy) that is this criterion is related to a sense of care and special attention staff to each service user, understand their needs and makes it easy to call back at any time if para Service users want to get help. The role of the health staff will determine the quality of health services because they directly can meet the satisfaction of its users. Responsiveness (quick response) that is health service users' expectations of speed services tend to increase from time to time in line with technological advances used by service and information providers user's health.

Reliability (reliability) that is the ability to provide health services on time and accurate according to what is offered as stated in service. Reliability is perceived as the most important by service users health services that depend on human activity at the time interaction takes place, it will be difficult for users to demand consistent output consistent. Guarantee (guarantee) that is this criterion relates to knowledge, politeness, and character user can trust. Fulfillment of criteria This service results in service users feeling free from risk. This dimension includes limiting factors, competence, and credibility security.

2. RESEARCH METHOD

The research design is the end result of a decision stagemade by researchers relate to how a study is biased applied. The research design is a strategy to achieve the goalresearch that has been set and acts as a guide or guideresearch in the entire research process (Nursalam, 2020). The design in this study aims to find out the descriptionsatisfaction level of outpatient nursing services at the Outpatient Polyclinic Medan Eliabeth Hospital in 2022.

Population is the entire collection of cases in which a study interested in conducting this research (Polit & Beck, 2012). Population in This study included all patients who underwent treatment in October 2021 to March 2022 at the Elisabeth Medan Hospital Outpatient Poly totaling 2,929 people. The sample is part of the population elements. Sampling is the process of selecting a portion of the population to represent the entire population. Technique the sampling used in this study was purposive sampling is a sampling technique that selects a sample from a population according to the needs of the researcher so that the sample can be represent population characteristics that have been known previously (Polit & Beck, 2012).

The number of samples used in this study were 97 people, with inclusion criteria are: Young adults (26 years – 35 years), old adult age (36 years – 45 years), not the same patient. Variables that affect or influence other variables. Something Stimulus activities manipulated by the researcher create an impact on the dependent variable. Independent variables are usually manipulated, observed, and considered to know or its effect on other variables (Nursalam, 2013). In this study only uses one variable, namely level patient satisfaction. Operational definition is a definition based on observed characteristics of something that is defined. Observable (measurable) characteristics that is the key to the operational definition (Nursalam, 2013).

3. RESULTS AND DISCUSSIONS

The following is the distribution of demographic data characteristics of outpatients at the outpatient polyclinic at the Santa Elisabeth Medan 2022 hospital

Tabel 1. Distribution of demographic data characteristics of outpatients at the outpatient polyclinic at Santa Elisabeth Hospital Medan in 2022.

Characteristics	Frequency (f)	Percent (%)
Umur		
26 - 35	6	16,2
36 - 45	31	83,8
Total	37	100
Gender		
Man	18	48,6
Woman	19	51,4
Total	37	100
Education		
SD	1	2,7
SMP	11	29,7
SMA	15	40,5
Diploma	3	8,1
Bachelor	7	18,9
Total	37	100

Based on table 1. of the distribution of frequencies and percentages, it was obtained that most respondent data were in the age range of 36-45 years with a total of 31 respondents (83.8%) and the least were in the age range of 26-35 years with 6 respondents (16.2%). Most of the respondents were female, 19 respondents (51.4%) and the least were male, 18 respondents (48.6%). Meanwhile, based on the level of education, there were 14 respondents (37.8%) most senior high school students, 1 respondent (2.7%) at least elementary school.

Table 2 Frequency Distribution of Satisfaction Levels of Outpatient Nursing Services at Outpatient Polyclinics at Santa Elisabeth Hospital Medan in 2022.

No.	Satisfaction level	f	%
1	Satisfied	2	5,4
2	Very satisfied	35	94,6
	Total	37	100

Based on table 2 distribution of frequency and percentage of satisfaction levels that out of 37 respondents in the outpatient polyclinic, 35 respondents (94.6%) were found in the very satisfied category while 2 respondents (5.4%) were in the satisfied category.

Table 3 Frequency Distribution of Reliability (reliability) About the Level of Outpatient Nursing Services at the Outpatient Polyclinic of Santa Elisabeth Hospital Medan in 2022.

No.	Realiability (Keandalan)	f	%
1	dissatisfied	4	10,8
2	satisfied	33	89,2
	Total	37	100

Based on table 3 the distribution and percentage of reliability (reliability) that of the 37 respondents in the outpatient polyclinic found that the majority were 33 respondents (89.2%) in the satisfied category, while the minority were 4 respondents (10.8%) in the dissatisfied category.

Table 4. Distribution of the Frequency of Assurance (guarantee) Regarding the Level of Outpatient Nursing Services at the Outpatient Polyclinic of Santa Elisabeth Hospital Medan in 2022.

No.	Assurance (Jaminan)	<i>f</i>	%
1	Dissatisfied	2	5,4
2	satisfied	35	94,6
Total		37	100

Based on table 1.4 of the distribution and percentage of assurance (guarantee) that of the 37 respondents in the outpatient polyclinic, it was found that the majority were 35 respondents (94.6%) in the satisfied category while the minority were 2 respondents (5.4%) in the dissatisfied category.

Table 5 Frequency Distribution of Tangibles (reality) Regarding the Level of Outpatient Nursing Services at Outpatient Polyclinics at Santa Elisabeth Hospital Medan in 2022.

No.	Tangibles (kenyataan)	<i>f</i>	%
1	Satisfied	37	100
Total		37	100

Based on table 5 the distribution and percentage of tangibles (facts) that out of 37 respondents in the outpatient polyclinic found 37 respondents (100%) in the satisfied category.

Table 6 Distribution of the Frequency of Empathy (empathy) regarding the Level of Outpatient Nursing Services at the Outpatient Polyclinic of Santa Elisabeth Hospital Medan in 2022.

No.	Empathy (empati)	<i>f</i>	%
1	Dissatisfied	2	5,4
2	Satisfied	35	94,6
Total		37	100

Based on table 1.6 of the distribution and percentage of empathy from 37 respondents in the outpatient polyclinic, it was found that the majority of 35 respondents (94.6%) were in the satisfied category while the minority were 2 respondents (5.4%) in the dissatisfied category.

Table 7 Frequency Distribution of Responsiveness (responsibility) Regarding the Satisfaction Level of Outpatient Nursing Services at the Outpatient Polyclinic of Santa Elisabeth Hospital Medan in 2022.

No.	Responsiveness (Tanggung Jawab)	<i>F</i>	%
1	Dissatisfied	2	5,4
2	Satisfied	35	94,6
Total		37	100

Based on table 1.7 the distribution and percentage of responsiveness (responsibility) of 37 respondents in the outpatient polyclinic found that the majority were 35 respondents (94.6%) in the satisfied category while the minority were 2 respondents (5.4%) in the dissatisfied category.

The frequency distribution of satisfaction levels conducted at Santa Elisabeth Hospital Medan from 37 respondents shows the majority of satisfaction levels of nursing services in general as many as 35 respondents (94.6%) in the very satisfied category and a minority of 2 respondents (5.4%) with the satisfied category. Researchers assume that nurses are able to handle care problems appropriately and professionally, nurses arrive in the room on time when patients need them, patients say that nurses pay attention to perceived complaints, answer questions about treatment actions given to patients, and nurses are always honest in providing information about the patient's condition to the family and to the patient. The nurse provides information about the administration that applies to the patient. Nurses always maintain the cleanliness and tidiness of the room they

occupy. The nurse maintains the cleanliness and loneliness of the medical devices used. Nurses always maintain the cleanliness and readiness of the medical devices used, provide information about administration that applies to patients, and nurses always maintain their tidiness and appearance. The nurse provides information about the actions to be taken, and if the nurse arrives at the room the nurse will measure the patient's blood pressure, temperature and weight and the services provided regardless of rank or social status of the patient, the nurse is willing to provide free time to re-explain the drugs given by the doctor, and deliver and help patients to the restroom.

The statement above is supported by Detty (2020), stating that in guarantees the nurse pays attention to the complaints that are felt and the nurse can answer questions about the treatment measures given to the patient. The nurse provides information about the administration that applies to the patient, the nurse provides information to the patient about all treatment measures to be carried out. The nurse provides information about the administration that applies to the patient. Nurses always maintain the cleanliness and tidiness of the room they will occupy. The nurse maintains the cleanliness and readiness of the medical devices used. The researcher's assumptions are supported by Ayuningtiyas (2015), stating that nurses in communicating with patients are expected to meet the needs of patients in the hospital. The level of patient satisfaction is very dependent on being able to meet expectations. Communication, namely providing information to customers in a language they can understand, and always listening to patient suggestions and complaints.

Reliability frequency distribution conducted at Santa Elisabeth Hospital Medan from 37 respondents in the outpatient polyclinic found that the majority of the reliability were 33 respondents (89.2%) in the satisfied category while the minority were 4 respondents (10.8 %) with dissatisfied category.

The researcher assumes that the reliability of nurses is able to handle care problems appropriately and professionally, has the punctuality of nurses arriving in the room when patients need them. In terms of reliability, there are several points where nurse services are still lacking, namely in providing information about available facilities, how to use them and the rules that apply, clearly informing about things that are obeyed or prohibited in treatment. Researchers argue that when the patient arrives in the room, the nurse immediately approaches the patient and asks the patient's complaints. The researchers' assumptions are supported by Lufiantin (2020), in the Teratai Room at Sunan Kalijaga Demak Hospital, which states that reliability is the ability to provide promised services promptly, accurately, and satisfactorily. The relationship between reliability and patient satisfaction is that reliability has a positive and significant effect on patient satisfaction. . The better the patient's perception of reliability, the higher patient satisfaction. And if the patient's perception of reliability is low, patient satisfaction will be even lower. According to Detty (2020), states that there are some things that can indeed be explained by nurses and there are things that are not allowed where it has to be doctors who directly provide explanations while patients feel that all health workers who are responsible for them must know and be able to provide all information related to his treatment.

The frequency distribution of assurance (guarantee) carried out at Santa Elisabeth Hospital Medan from 37 respondents found that the majority of assurance (guarantee) was 35 respondents (94.6%) in the satisfied category while the minority were 2 respondents (5.4%) in the unsatisfied category. satisfied. Researchers assume that there is a guarantee that includes knowledge and skills of nurses, courtesy and friendliness of nurses, the ability of nurses to communicate, trustworthiness and security guarantees. The patient said that the nurse pays attention to the complaints that are felt. In guarantees, there are several patients who say they are not satisfied with the care service, namely when the patient asks about the treatment given to them and the patient is unable to answer the patient's questions. Researchers argue that if a patient passes from the front of the room and the nurse smiles at the patient, and the nurse asks how the patient is today. When nurses provide nursing actions to patients, nurses must be thorough and skilled. Nurses are conscientious and skilled because of this

The researchers' assumptions are supported by Sesrianty (2017), stating that patients feel safe and comfortable in receiving nursing services and consider nurses to be capable of providing nursing services. The nurse pays attention to every complaint, can answer every question about the actions taken, is honest in conveying information about the patient's condition, always greets and smiles and is thorough and skilled in action. Patients will feel satisfied if the performance of the health services they receive equals or exceeds their expectations and vice versa, patient dissatisfaction or feelings of disappointment will arise if the performance of the health services they receive does not match their expectations. Other research is supported by Susanti (2017), stating that every form of service requires certainty for the services provided. The form of certainty of a service is largely determined by guarantees from nurses who provide services, so that people who receive services feel satisfied and believe that all forms of service affairs carried out will be complete and in accordance with the speed, accuracy, ease, smoothness and quality of the services provided. The guarantee referred to is that nurses are able to provide satisfaction in service, that is, each nurse will provide fast, precise, easy, smooth and quality service, and this becomes a concrete form that satisfies the person receiving the service.

The frequency distribution of tangibles (reality) conducted at Santa Elisabeth Hospital Medan from 37 respondents found that tangibles (reality) as many as 37 respondents (100%) were in the very satisfied category. Researchers assume that nurses maintain the cleanliness and readiness of medical devices to be used, in the morning nurses always check the tools that will be used that day, and nurses make sure whether the tools to be used are still sterile. If there is a tool that is not sterile, the nurse will deliver the tool to the CSSD (central sterilization installation). And nurses always maintain the cleanliness and tidiness of the room, nurses maintain the tidiness of their appearance. The researcher's statement is supported by Kurniawan (2017), stating that the more complete and better the quality of the facilities/tools owned, the patient is more likely to choose these services compared to health services that have simple facilities/tools. And research supported by Gultom (2022) states that the availability of sophisticated equipment, a safe atmosphere in the hospital environment, the appearance of doctors and nurses when meeting patients who are being treated, the provision of food according to needs, and adequate parking space .

Empathy frequency distribution (empathy) conducted at Santa Elisabeth Hospital Medan from 37 respondents found that the majority were 35 respondents (94.59%) in the satisfied category while the minority were 2 respondents (5.41%) in the dissatisfied category. Researchers assume that nurses provide information to patients about all treatment measures to be carried out, nurses in providing services to patients are full of friendliness and dexterity in carrying out tasks in diagnosing diseases, nurses who are always friendly in providing services, and nurses in carrying out their duties do not discriminate patient's social status. The nurse provides information about the actions to be taken, and if it arrives in the room the nurse will measure the patient's blood pressure, temperature and weight and the services provided do not look at the rank or social status of the patient. In empathy there are some patients who say they are dissatisfied with nursing services, namely nurses are difficult to find and contact when patients need them, nurses rarely see and check on the patient's condition.

The researcher's opinion is supported by Gultom (2022), stating that patient perceptions are assessed based on politeness and friendliness of providing individual services with full attention and understanding of patient needs as customers and acting in the interests of patients and always helping patients even when not asked, empathy when caring about complaints patients, concern for the needs and desires of patients, not selective in providing services to all patients and the sympathy of doctors and staff towards patients. Whereas Gunawan (2018), states that patients will feel more valuable if a person can have a closer and positive relationship, patients will feel more confident and can support morally for their recovery, besides that patients also expect nurses to be able to meet their needs. According to Chairunnisa (2017) that some officers feel they do not have enough time to talk with their patients, so patients only ask what is necessary.

Frequency distribution of data obtained based on the results of research conducted at Santa Elisabeth Hospital Medan, namely from 37 respondents in the outpatient polyclinic it was found that the majority were 35 respondents (94.59%) in the satisfied category while the minority were 2 respondents (5.41%) dissatisfied category. Researchers assume that nurses are willing to help get medicine, and help carry out photo and laboratory services. Nurses are willing to provide free time to explain again the drugs given by the doctor, and accompany and help patients to the restroom. However, in responsiveness nursing services there are several points that say patients are not satisfied, namely nurses are not willing to offer assistance to patients when experiencing difficulties and nurses are not willing to provide special time to help patients.

The above statement is supported by Uktutias (2018), stating that the willingness and ability of nurses to help customers and respond to their requests, as well as inform when services are provided. Hospitals are said to have responsiveness if staff are always available to help patients, provide clear information to patients, service systems are straightforward and responsive to patient complaints. The researcher's assumptions are supported by Gunawan (2021), stating that an ability to help and provide appropriate services to patients, by conveying clear information, does not let patients wait without a reason that causes negative perceptions of service quality. Whereas Butarbutar (2016), states that every nurse in providing forms of service, prioritizing aspects of service greatly influences the behavior of people who receive services, so responsiveness skills are needed from employees to serve patients according to the level of absorption, meaning which is difficult to know. , if the quality of nursing services is provided according to patient needs, then the higher the level of patient satisfaction with the quality of services owned by the hospital and if the quality of nursing services provided is not in accordance with patient needs, the lower the level of patient satisfaction with the nursing services received. This requires a wise, detailed, nurturing, directing the users of nursing services.

4. CONCLUSION

Based on the results of the study with a sample of 37 respondents regarding the Description of Outpatient Nursing Service Satisfaction Levels in the Outpatient Polyclinic at Elisabeth Hospital Medan, it can be concluded

The satisfaction level of reliability (reliability) based on the satisfied category was 33 respondents (89.2%) in the outpatient polyclinic. The satisfaction level of assurance (guarantee) based on the satisfied category was 35 respondents (94.6%) in the outpatient polyclinic. The level of satisfaction of tangibles (reality) based on the very satisfied category was 37 respondents (100%) in the outpatient clinic. The level of empathy satisfaction (empathy) based on the very satisfied category was 35 respondents (94.6%) in the outpatient polyclinic. The level of responsiveness satisfaction (responsibility) based on the very satisfied category was 35 respondents (94.6%) in the outpatient clinic. The level of satisfaction of nursing services in general was very satisfied as many as 35 respondents (94.6%) in outpatient poly. For further research, namely examining the factors that influence outpatient satisfaction in outpatient polyclinics and inpatient rooms

ACKNOWLEDGEMENTS

Thank you to my respondents who have given me the opportunity to ask questions related to my health in order to support the completion of the research that I am doing.

REFERENCES

- Agritubella, S. M. (2018). Kenyamanan dan kepuasan pasien dalam proses interaksi pelayanan Keperawatan di RSUD Petala Bumi. *Jurnal Endurance: Kajian Ilmiah Problema Kesehatan*, 3(1), 42-54.
- Akbulut, G., Kant, E., Ozmen, S., & Akpınar, R. B. (2017). Determining patients' satisfaction with the nursing services provided in an oncology clinic of Eastern Turkey. *International Journal of Caring Sciences*, 10(3), 1276-1285

- Asres, A. W., Hunegnaw, W. A., Ferede, A. G., & Deneke, H. T. (2020). Assessment of patient satisfaction and associated factors in an outpatient department at Dangila primary hospital, Awi zone, Northwest Ethiopia, 2018. *Global Security: Health, Science and Policy*, 5(1), 57-64.
- Attiq, S., Ali, M., Shah, M., & Nawaz, N. (2018). Real-time patient satisfaction survey in a tertiary care hospital. *PAFMJ*, 68(4), 1042-49.
- Ayuningtiyas, K. R., & Mustayah, T. N. (2015). Tingkat kepuasan pasien pada pelayanan keperawatan di rumah sakit. *Jurnal Pendidikan Kesehatan*, 4(2), 83-90.
- Budiana, I., & Londa, I. K. (2019). Level of Patient Satisfaction in Nursing Services in the Inpatient Room of Ende Regional Hospital. *Jurnal Kesehatan Primer*, 4(2), 92-100.
- Butar-Butar, J., & Simamora, R. H. (2016). Hubungan Mutu Pelayanan Keperawatan dengan Tingkat Kepuasan Pasien Rawat Inap di RSUD Pandan Kabupaten Tapanuli Tengah. *Jurnal Ners Indonesia*, 6(1), 50-63.
- Chairunnisa, C., & Puspita, M. (2017). Gambaran kepuasan pasien rawat jalan terhadap pelayanan di Rumah Sakit Islam Jakarta Sukapura (RSIJS) tahun 2015. *Jurnal Kedokteran dan Kesehatan*, 13(1), 9-27.
- Detty, A. U. (2020). Gambaran tingkat kepuasan pasien pada pelayanan rawat jalan, rawat inap dan ruang operasi di rumah sakit pertamina bintang amin bandar lampung tahun 2018. *Jurnal Ilmu Kedokteran dan Kesehatan*, 7(1).
- Einurkhatyun, B., Suryoputro, A., & Fatmasari, E. Y. (2017). Analisis tingkat kepuasan pasien terhadap kualitas pelayanan rawat jalan di Puskesmas Duren dan Puskesmas Bergas Kabupaten Semarang tahun 2017. *Jurnal Kesehatan Masyarakat (Undip)*, 5(4), 33-42.
- Erpurini, W., & Saleh, F. D. (2021). Analisa Kualitas Pelayanan Pasien Pada Klinik Umum Pratama Kasih Bunda Yanti Rajamandala. *Jurnal Sains Manajemen Volume*.
- Febrianan, D.V (2021). Konsep Dasar Keperawatan. *Yogyakarta: Healthy*.
- Fufa, B. D., & Negao, E. B. (2019). Satisfaction of outpatient service consumers and associated factors towards the health service given at Jimma Medical Center, South West Ethiopia. *Patient related outcome measures*, 10, 347.
- Gultom, R. J., Nababan, D., Sipayung, R., Hakim, L., & Tarigan, F. L. (2022). Hubungan Kualitas Pelayanan Rawat Jalan Dengan Kepuasan Pasien Bpjs Di Rumah Sakit Bhayangkara Tk Iii Tebing Tinggi. *Journal Of Healthcare Technology And Medicine*, 7(2), 1281-1298.
- Gunawan, S., Keni, K., & Risnawaty, W. (2019). Pengukuran Kepuasan Pasien Rawat-Inap Rumah Sakit Umum Daerah Tarakan Jakarta. *Jurnal Bakti Masyarakat Indonesia*, 1(1).
- Handajani, D. O., & Furi, F. E. (2019). Pengaruh kualitas pelayanan kesehatan terhadap kepuasan pasien rawat jalan rumah sakit ibu dan anak kirana sepanjang sidoarjo. *Warta bhakti husada mulia: Jurnal Kesehatan*, 6(2).
- He, X., Li, L., & Bian, Y. (2018). Satisfaction survey among primary health care outpatients in the backward region: an empirical study from rural Western China. *Patient preference and adherence*, 12, 1989.
- Jannah, M. (2019). Pengaruh kualitas pelayanan dan fasilitas klinik terhadap kepuasan pasien (Studi Pada Pasien Di Klinik Pratama Tri Cipto Waluyo Jombang). *Jurnal Pendidikan Tata Niaga (JPTN)*, 7(3).
- Karo, M. B., Ginting, A., & Harefa, I. (2021). Perilaku Caring Berhubungan dengan Tingkat Kepuasan Pasien Rawat Jalan. *Jurnal Ilmiah Permas: Jurnal Ilmiah STIKES Kendal*, 11(4), 917-926.
- Kawoco, S. B., Kusuma, F. H. D., & Widiani, E. (2018). Hubungan Pelayanan Keperawatan Dengan Kepuasan Pasien Di Rawat Inap Puskesmas Bantur. *Nursing News: Jurnal Ilmiah Keperawatan*, 3(1).
- Kurniawan, A. (2017). Hubungan Mutu Pelayanan Kesehatan Dengan Kepuasan Pasien Rawat Jalan Di Rumah Sakit Tingkat Iv Slamet Riyadi Surakarta. *Infokes: Jurnal Ilmiah Rekam Medis dan Informatika Kesehatan*, 7(1).
- Lasa, I. (2021). Pengaruh kualitas pelayanan keperawatan terhadap kepuasan pasien baru di ruang instalasi gawat darurat rsud kefamenanu. *Chmk nursing scientific journal*, 5(1), 6-17.
- Lestari, Y., & Nurcahyanto, H. (2017). Analisis tingkat kepuasan pasien rawat jalan (Studi kasus pada pasien rawat jalan di RSUD Dr. M. Ashari Kabupaten Pemalang). *Journal of Public Policy and Management Review*, 6(2), 441-454.
- Lufianti, A., Widayati, C. N., & Miyarti, M. (2020). Hubungan Antara Keandalan Dan Cepat Tanggap Perawat Terhadap Kepuasan Pasien Di Ruang Teratai Rsud Sunan Kalijaga Demak. *The Shine Cahaya Dunia Ners*, 5(1).
- Maghrobi, A. D., & Verawati, M. (2019). Tingkat Kepuasan Pasien BPJS tentang Mutu Pelayanan Keperawatan di Ruang Rawat Inap Mawar RSUD Dr. Hardjono Ponorogo. *Health Sciences Journal*, 3(1), 89-100.
- Menkes, R. I. (2008). Peraturan Menteri Kesehatan Republik Indonesia Nomor: 269/Menkes. *Per/Iii/2008 Tentang Rekam Medis, Jakarta*.
- Muninjaya, G. (2015). Manajemen Mutu Pelayanan Kesehatan Edisi 2. *Jakarta: EGC*.

- Nurfadillah, A., & Setiatin, S. (2021). Pengaruh Waktu Tunggu Pasien Rawat Jalan Terhadap Kepuasan Pelayanan Pendaftaran di Klinik X Kota Bandung. *Cerdika: Jurnal Ilmiah Indonesia*, 1(9), 1133-1139.
- Nursalam. (2016). Manajemen keperawatan edisi 5. Jakarta: Salemba Medika.
- Nursalam. (2020). *Metodologi Penelitian Ilmu Keperawatan edisi 4*. Jakarta: Salemba Medika
- Oini, O., Komalasari, R., & Hasibuan, S. Y. (2019). Tingkat Kepuasan Pasien Terhadap Pelayanan Keperawatan Di Unit Rawat Inap [Level Of Patient Satisfaction With Service Nursing In The Institution Unit]. *Nursing Current: Jurnal Keperawatan*, 5(2), 50-60.
- Proyoto. (2014). Teori Sikap Dan Perilaku Dalam Kesehatan. Yogyakarta: Nuha Medika.
- Rosdahl, Kowalski. (2014). Buku Ajar Keperawatan Dasar Vol. 1 Edisi 10. Jakarta : EGC.
- Rasouli, O., & Zarei, M. H. (2016). Monitoring and reducing patient dissatisfaction: a case study of an Iranian public hospital. *Total Quality Management & Business Excellence*, 27(5-6), 531-559.
- Sesrianty, V., Machmud, R., & Yeni, F. (2019). Analisa kepuasan pasien terhadap mutu pelayanan keperawatan. *Jurnal kesehatan perintis (Perintis's Health Journal)*, 6(2), 116-126.
- Son, N. M., & Anindita, P. R. (2021). Analisis Tingkat Kepuasan Pasien Rawat Inap BPJS (Badan Penyelenggara Jaminan Sosial) Terhadap Pelayanan Kefarmasian Di Rs X Sidoarjo. *Parapemikir: Jurnal Ilmiah Farmasi*, 10(1), 51-59.
- Sulima, S. (2020). Kualitas Pelayanan Keperawatan di Rumah Sakit Umum Daerah (RSUD) Kota Baubau. *Jurnal Kesehatan Manarang*, 6(1), 20-27.
- Sundari, N. S. (2022). Pengaruh Kualitas Pelayanan Terhadap Kepuasan Pasien Klinik Khitanan Paramedika Bandung (Studi Pada Klinik Khitan Paramedika). *Jurnal Pemasaran Kompetitif*, 5(2), 136-146.
- Susanti, N. L. P. D., & Wulandari, I. A. (2017). Gambaran tingkat kepuasan pasien rawat inap kelas ii terhadap pelayanan keperawatan di RSUD Sanjiwani Gianyar tahun 2015. *Jurnal Riset Kesehatan Nasional*, 1(1), 35-41.
- Suweko, H., & Warsito, B. E. (2019). Hubungan Perilaku Caring Perawat Dengan Kepuasan Pasien Diruang Rawat Inap: Literatur Review. *Jurnal Ilmu Keperawatan dan Kebidanan*, 10(1), 243-247.
- Uktutias, S. A. M. (2018). Analisis Tingkat Kepuasan Pasien Rawat Jalan RSIA NUN Surabaya. *Jurnal Manajemen Kesehatan Yayasan RS. Dr. Soetomo*, 4(1), 14-23.
- Widiasari, W., Handiyani, H., & Novieastari, E. (2019). Kepuasan Pasien Terhadap Penerapan Keselamatan Pasien di Rumah Sakit. *Jurnal Keperawatan Indonesia*, 22(1), 43-52.
- Zhou, F., Xu, C., Sun, Y., & Meng, X. (2021). Influencing Factors of Outpatients' Satisfaction in China a Cross-Sectional Study of 16 Public Tertiary Hospitals. *Patient preference and adherence*, 15, 1243.