

Increased Patient Satisfaction and Loyalty in terms of Facility Aspects and Health Worker Performance

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Abstract

This research was conducted to see the perspective of hospital management in Indonesia. This study uses a quantitative approach and analysis tools for the Statistical Program for Social Sciences (SPSS). This study's design was a survey with a quantitative method of 100 patients, thus providing opportunities for patients as respondents to answer systematically. The results showed: 1) the effect of facilities on satisfaction was 0.203. 2) the impact of performance on satisfaction is 0.608. 3) the impact of the facility on satisfaction is 0.278. 4) the impact of performance on satisfaction is 0.303. 5) the effect of happiness on loyalty is 0.264. This value shows the impact of performance on satisfaction partially amounted to 30.3%.

Keywords: Improvement, Satisfaction, Patient Loyalty, Facilities, Performance of Health Workers

1. Introduction

The hospital plays an essential role in creating a quality of life and healthy environmental conditions for the community because of its role as an agency or organization engaged in the health sector. The hospital's task is to be able to carry out efforts to improve the health of the community by increasing public awareness of the importance of a healthy life, encouraging people to want and being able to live healthily in their environment, thus creating more optimal health conditions. This is because the health condition is getting better than someone, it will provide fluency for that individual in carrying out their daily activities to the fullest. The goal of the hospital today is how patients can feel satisfied and loyal to the hospital. If the customer or patient has deemed satisfaction, it will affect the patient's loyalty to use or reuse health services at this hospital at another time. To increase satisfaction and loyalty, necessary to consider the availability of adequate health facilities and professional health workers' performance (Umar, Amrin, et al.; Yusriadi, Sahid, et al.; Yusriadi, Farida, et al.).

Institutions that provide health services, inpatient, outpatient services, medical treatment, and emergency conditions, are carried out in 24 hours, namely the hospital. In this case, the hospital needs to have complete facilities because it

will impact the perception of patient satisfaction, especially in terms of health facilities in the form of infrastructure, availability of adequate parking, comfortable and clean waiting room conditions, and comfortable inpatient rooms (Awaluddin et al.; Sahid et al.; Mustafa et al.).

Overall, most health workers at Sawerigading Hospital have a favourable view of the facilities and performance of health workers. Facilities will affect health workers' high performance so that the satisfaction increases, and the quality is getting better (Usman et al.; Ahdan et al.). The increasing availability of facilities and increasing health workers' performance have a positive impact on patient satisfaction and loyalty. The level of satisfaction and performance of health workers in health and emergency services. Facilities provide the most significant influence on increasing patient decision and loyalty, followed by health workers' performance in health services at Sawerigading Hospital, Palopo Regency.

2. Literature Review

Competition between hospitals, both public and private and foreign, will be even harder to seize a market that is increasingly free. In addition, the community demands that the hospital be able to provide one stop service, meaning that all health care needs and patient-related services must be served by the hospital quickly, accurately, with quality at affordable costs for all levels of society. Meanwhile, hospital management is different from businesses in other fields because hospitals are capital-intensive, labour-intensive and technology-intensive businesses, apart from having to apply social and ethical values, they also have to take into account the economic aspects (Kuntoro, 2010).

The increasing number of hospitals, whether government, private or foreign, creates competition, not only in seizing the market or improving the quality and service of hospitals, but also competition in obtaining the best human resources. Human resources play an important role in improving the quality of service that each hospital has. Most human resources in hospitals and those who interact directly with patients are nurses, so that the quality of service carried out by nurses can be assessed as an indicator of good or bad service quality in the hospital (Aditama, 2000).

The quality of nursing service is a professional attitude of nurses that provides comfort and protection for every patient who is undergoing the recovery process. Good or bad assessments of the quality of health services are very dependent on nurses; this will be a reference for the community in the quality of service at a hospital (DepkesRI 2009). Nursing is a profession and nurses are professionals who are responsible for increasing the degree of health (Wijayana 2008). The purpose of nursing services is set to improve and maintain the quality of health services in a hospital by educating nurses to have a professional and responsible attitude towards their work (Arwani, 2006).

Currently, the hospital must adjust the development of medical technology to support the facilities in detecting various possible diseases that exist in patients (Yusriadi, Awaluddin, et al.; Tamsah et al.). This will also make it easier in terms of patient satisfaction and loyalty. General hospital products are health facilities and personnel; the hospital's types of facilities and health personnel must be comprehensive, including preventive health services, health promotion, treatment, and rehabilitation. Hospitals are also differentiated based on the level of service available, namely undergraduate services that provide essential health services, postgraduate services that offer limited specialist health services, and postgraduate health services that provide complete specialist services.

3. Research Method

This research design is a survey with a quantitative approach, by obtaining data in the form of numbers or qualitative data that are estimated. In this study, the population was all patients at the General Hospital of the Sawerigading District Palopo City hospitalized for at least three days. Due to the large population and researchers having limited funds, energy and time, it is necessary to determine the research sample taken from the people (A'yun et al., 2017; Tahir & Rinantanti, 2018; Nuraini et al., 2019; Umanailo, 2019). The model is truly representative or can represent the total population. Inpatient data at Sawerigading Hospital Palopo City in 2017 there were 14,448 people, and in 2018 there were 17,435 people (profile of Sawerigading Palopo Hospital, 2017,2018). In this study, the data used in calculating the sample of researchers used inpatient data in 2018, with a set error tolerance limit of 10%, so the sample in this study were 100 respondents.

4. Result and Discussion

4.1 Facilities (X1)

Data obtained from the nurses became respondents the questionnaire that had been determined, a description data about the facilities, was brought in general. The results of the analysis of the facility variable description as measured by using 8 statement items, based on the respondents' answers to the statements that have been given, show powerful indicators regarding the effect of facilities on performance.

Table 1. Frequency / Percentage of Facility Variable Indicators

Indicator	Répondent' Answer										Mean
	STS		TS		N		S		SS		
	F	%	F	%	F	%	F	%	F	%	
X1.1	2	2,0	6	6,0	7	7,0	47	47,0	38	38,0	4.13
X1.2	0	0,0	2	2,0	9	9,0	53	53,0	36	36,0	4.23
X1.3	4	4,0	1	1,0	15	15,0	47	47,0	33	33,0	4.03
MeanTotal Facilities (X1)											4.22

Source: Questionnaire Processing Results, 2019

Respondents' assessment of the facility variable in table 1 is perceived as good and positive towards the answers to statements regarding the facility, as seen from the mean value of the total physical work environment of 4.22, which is in the high category (between 3.01 - 4.00). In the first indicator (X1.1) namely the availability of facilities, the average respondent's answer to the first indicator (X1.1) is 4.13 which is included in the high category (between 3.01 - 4.00). In the second indicator (X1.2), the average respondent's answer to the second indicator (X1.2) is 4.23 which is in the high category (between 3.01 - 4.00). In the third indicator (X1.3), the average respondent's answer to the third indicator (X1.3) is 4.03 which is in the high category (between 3.01 - 4.00).

4.2 Health Worker Performance (X2)

Based on the data obtained from the performance of health workers (nurses) who became respondents through predetermined questionnaires, a description of the data regarding the facilities, in general, was obtained. The results of the analysis of the story of the performance variables of Health Workers as measured by using 10 statement items, based on the respondents' answers to the statements that have been given, show robust indicators regarding the influence of Health Worker Performance on patient satisfaction and loyalty.

Table 2. Frequency / Percentage of Health Worker Performance Variable Indicators

Indicator	Répondent' Answers										Mean
	STS		TS		N		S		SS		
	F	%	F	%	F	%	F	%	F	%	
X2.1	0	0,0	0	0,0	3	3,0	43	43,0	54	54,0	4.51
X2.2	1	1,0	2	2,0	7	7,0	52	52,0	38	38,0	4.24
X2.3	1	1,0	2	2,0	8	8,0	63	63,0	26	26,0	4.10
X2.4	1	1,0	2	2,0	11	11,0	53	53,0	33	33,0	4,14
X2.5	2	2,0	5	5,0	7	7,0	55	55,0	31	31,0	4,06
Mean Total Performance of Health Workers											4.22

Source: Questionnaire Processing Results, 2019

Respondents' assessment of the health worker performance variable in Table 2 is perceived as good and positive towards the answers to statements regarding the health worker performance, as seen from the mean value of the total health worker performance of 4.22, which is in the high category (between 3.01 - 4.00). In the first indicator (X2.1), the average respondent's answer to the first indicator (X2.1) is 4.51 which is included in the high category (between 3.01 - 4.00). In the second indicator (X2.2), the average respondent's answer to the second indicator (X2.2) is 4.24

which is in the high category (between 3.01 - 4.00). In the third indicator (X2.3), the average respondent's answer to the third indicator (X2.3) is 4.10 which is in the high category (between 3.01 - 4.00). In the fourth indicator (X2.4), the average respondent's answer to the fourth indicator (X2.4) is 4.14 which is included in the high category (between 3.01 - 4.00). In the fifth indicator (X2.5), the average respondent's answer to the fifth indicator (X2.5) is 4.06 which is in the high category (between 3.01 - 4.00). From the statement described above, it can be concluded that the fifth indicator (X2.5), namely health worker performance, received the highest response, with an average respondent's answer of 4.22 in the high category. These results show that the noise level in the health worker performance can still be tolerated.

4.3 Satisfaction (Y1)

A description of the data regarding general satisfaction was obtained based on data obtained from patients who became respondents through predetermined questionnaires. The results of the analysis of the definition of pleasure as measured by using 10 statement items, based on respondents' answers to the statements that have been given, show robust indicators regarding the effect of increasing satisfaction with the support of facilities and the performance of health workers.

Table 3. Frequency / Percentage of Satisfaction Variable Indicators

Indicator	Répondent' Answers										Mean
	STS		TS		N		S		SS		
	F	%	F	%	F	%	F	%	F	%	
Y1.1	0	0,0	5	5,0	6	6,0	48	48,0	42	41,0	4.25
Y1.2	1	1,0	2	2,0	11	11,0	60	60,0	26	26,0	4.08
Y1.3	2	2,0	1	1,0	17	17,0	59	59,0	21	21,0	3,96
Mean Total Satisfaction											4.01

Source: Questionnaire Processing Results, 2019

Respondents' assessment of the satisfaction variable in table 3 is perceived as good and positive towards the answers to statements regarding the satisfaction, as seen from the mean value of the total satisfaction of 4.01, which is in the high category (between 3.01 - 4.00). In the first indicator (Y1.1), the average respondent's answer to the first indicator (Y1.1) is 4.25 which is included in the high category (between 3.01 - 4.00). In the second indicator (Y1.2), the average respondent's answer to the second indicator (Y2.2) is 4.08 which is in the high category (between 3.01 - 4.00). In the third indicator (Y1.3), the average respondent's answer to the third indicator (Y1.3) is 3.96 which is in the high category (between 3.01 - 4.00). From the statement described above, it can be concluded that the third indicator (Y1.3), namely satisfaction, received the highest response, with an average respondent's answer of 4.01 in the high category. These results show that the noise level in the satisfaction can still be tolerated.

4.4 Patient Loyalty (Y2)

Based on data obtained from respondents through predetermined questionnaires, a description of the data regarding satisfaction. In general, it is accepted as a result of the analysis of the definition of patient loyalty as measured by using 10 statement items. Based on the respondent's answers to the statements given, robust indicators regarding the effect of patient loyalty continue to increase with support facilities, the performance of health workers, and satisfaction.

Table 3. Frequency / Percentage of Patient Loyalty Variable Indicators

Indicator	Répondent' Answers										Mean
	STS		TS		N		S		SS		
	F	%	F	%	F	%	F	%	F	%	
Y2.1	1	1,0	0	0,0	3	3,0	57	57,0	39	39,0	4.32
Y2.2	0	0,0	6	6,0	25	25,0	43	43,0	26	26,0	3,89
Y2.3	8	8,0	15	15,0	27	27,0	39	39,0	11	11,0	3,30
Y2.4	5	5,0	12	12,0	37	37,0	34	34,0	12	12,0	3,36

Y2.5	8	8,0	2	2,0	19	19,0	58	58,0	13	13,0	3,64
Mean Total Patient Loyalty											3.22

Source: Questionnaire Processing Results, 2019

Respondents' assessment of the patient loyalty variable in table 3 is perceived as good and positive towards the answers to statements regarding the patient loyalty, as seen from the mean value of the total patient loyalty of 3.22, which is in the high category (between 3.01 - 4.00). In the first indicator (Y2.1), the average respondent's answer to the first indicator (Y2.1) is 4.32 which is included in the high category (between 3.01 - 4.00). In the second indicator (Y2.2), the average respondent's answer to the second indicator (Y2.2) is 3.89 which is in the high category (between 3.01 - 4.00). In the third indicator (Y2.3), the average respondent's answer to the third indicator (Y2.3) is 3.30 which is in the high category (between 3.01 - 4.00). In the fourth indicator (Y2.4), the average respondent's answer to the fourth indicator (Y2.4) is 3.36 which is included in the high category (between 3.01 - 4.00). In the fifth indicator (Y2.5), the average respondent's answer to the fifth indicator (Y2.5) is 3.64 which is in the high category (between 3.01 - 4.00). From the statement described above, it can be concluded that the fifth indicator (Y2.5), namely patient loyalty, received the highest response, with an average respondent's answer of 3.22 in the high category. These results show that the noise level in the patient loyalty can still be tolerated.

4.5 Path Analysis, Direct and Indirect Effect

From the data above, it is found that the direct effect of facilities on patient loyalty is 0.278. So it can be seen that the indirect impact of facilities on patient loyalty through patient satisfaction is the multiplication of the facility's beta value on pleasure and the beta value of patient satisfaction on patient loyalty ($0.203 \times 0.264 = 0.054$). The effect given by the facility on patient loyalty is the direct effect + the indirect effect ($0.203 + 0.054 = 0.257$). Based on the calculations above, it is found that the value of the indirect effect is smaller than the direct impact; these results indicate that indirectly the facility through patient satisfaction does not have a significant effect on patient satisfaction.

The direct effect of performance on patient loyalty is 0.257. In contrast, the indirect effect is obtained from the multiplication of the beta value of the impact of performance on satisfaction multiplied by the beta value of happiness on patient loyalty ($0.608 \times 0.264 = 0.178$). Then the total impact of performance on patient loyalty is $0.608 + 0.178 = 0.786$. Based on the results of the calculations above, it is found that the value of the indirect effect is smaller than the direct impact. These results indicate that performance through patient satisfaction does not have a significant impact on patient satisfaction.

From the above discussion, the following model can be obtained:



One of the efforts to increase patient satisfaction and loyalty, with facilities and high performance of health workers, is to improve and add facilities and improve health workers' performance (Hasbi, Sukimi, et al.; Gani et al.; Sahabuddin et al.). The addition of facilities aims to improve patient service needs and improve performance through incentives and salaries will increase the work productivity of health workers (Sawitri et al.; Hasbi, Tang, et al.; Rahawarin et al.).

5. Discussion

All patients are happy if they get and use the facilities and good health workers' performance, health workers who are competent and skilled towards patient services who can provide assistance and are completed properly (Ansar et

al.; Umar, Hasbi, et al.). In addition to facilities and High performance of health workers is expected to be more, it also requires support and encouragement from their leaders to continue to develop services by improving knowledge and skills by attending technical guidance and continuing studies at a higher level, with support from the leadership. Health workers will be motivated to continue to develop themselves, especially if the administration gives promotions for health workers who have a higher education level, thus motivating health workers to continue their education (Rijal et al.).

The effect of facility, health worker, satisfaction, patient loyalty variables on performance is positive. This means that an increase will follow an increase in the quality of the performance in health worker, if other factors that affect the quality of the facility are considered constant. This study shows a positive and significant effect of the facility, health worker, satisfaction, patient loyalty variables on performance. This can be seen from the direct influence path analysis; the results of the patient satisfaction have a positive and significant effect on loyalty.

The results of this study are in line with the statement of Sutrisno (2009: 118), revealing that a good work environment will motivate employees to do their jobs well. However, if the work environment is terrible, it will weaken employee motivation. Furthermore, according to Sunyoto (2012:11), motivation encourages a person's morale to work by optimally providing his abilities and expertise to achieve organizational goals. The results of this study also support the results of previous research from Umi Kultsum (2017); the conclusion that it can obtain is the influence of the physical work environment on employee work motivation.

6. Conclusion

Based on the findings of the researchers, it is obtained. First, health workers' facilities and performance have a positive and significant effect on patient satisfaction at Sawerigading Palopo Hospital. The value of the correlation coefficient shows the strength of the relationship between facilities and health workers' performance on patient satisfaction. Second, partially there is a positive and significant influence on the facility and performance variables of health workers on satisfaction and loyalty, meaning that if health workers' facilities and performance are good, customer satisfaction and loyalty will also increase, and vice versa. Third, in the second test, partially, there is a positive and insignificant effect of facility and performance variables on satisfaction and loyalty. If the facilities and performance are good, customer satisfaction and loyalty will also increase, and vice versa but not significantly.

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