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Services Quality management for Outpatient Satisfaction in Indonesia

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Abstract: This study was aimed to examine whether reliability, responsiveness, assurance, empathy, and physical evidence in providing services took effect on outpatient satisfaction in private hospitals in Surakarta, Indonesia. This research instrument was in the form of a SERVQUAL instrument in the form of a questionnaire based on five quality dimensions. The SERVQUAL measuring instrument was adopted from Parasuraman which was later modified according to the nature of services available in private hospitals in Surakarta, which consists of five dimensions, namely responsiveness, tangibles, reliability, assurance, and empathy. The results of regression analysis in this study indicate that the five dimensions of service quality consisting of tangibility, reliability, responsiveness, assurance, and empathy have a significant effect on customer's (outpatient) satisfaction of private hospitals in Surakarta, both individually and collectively. This was indicated by the significance of both t-value and f-value of 0,000 which is smaller than 0.05.

Keywords: responsiveness, tangibles, reliability, assurance, and empathy.

I. INTRODUCTION

An interesting thing to observe the threat of free markets in the health sector that we are facing and will face in the global era is the opening of free markets which results in high competition in the health sector. Competition between government, private, and foreign hospitals will be even harder to seize an increasingly open free market. Also, the public demands that hospitals must be able to provide a *one-stop quality services* concept. Besides, the flow of democratization and the improvement of the rule of law with the enactment of the Consumer Protection Act require the management of hospitals to be more responsible and excellent quality by taking into account the interests of patients carefully (Ilyas, 2011).

Through the adoption of a health service quality assurance approach, patient satisfaction becomes an integral and comprehensive part of health service quality assurance activities. Patient satisfaction is particularly subjective, difficult to measure, subject to change, and there are many influential factors, as many as dimensions in human life. The subjectivity can be even reduced to be objective if enough people share the same opinion on something (Chriswardani, 2004).

The accuracy level of patient satisfaction is needed in efforts to improve the health services quality. Therefore, the measurement of the level of patient satisfaction needs to be done regularly, accurately and continuously (Pohan, 2007). Quality health services are a service that is needed (in this case it is determined by the health care profession), at the same time desired by patients/consumers or the community and also affordable by the purchasing power of the community (Pohan, 2007).According to Parasuraman in Lupiyoadi (2006), there are five dimensions of service quality known as the *Servqual* (Service Quality) model that is associated with customer satisfaction: *tangibles, reliability, responsiveness, assurance,* and *empathy*. Hospital X is a rapidly progressing and developing type B private hospital in Bandar Lampung. Based on some patient input through the suggestion box, there are inputs for pharmaceutical installations related to the waiting time for drug services which are considered to be quite long, expensive drug prices, and lack of pharmacy officers. Pre-survey data shows the high number of unserved outpatient prescriptions by the Pharmacy Installation which leads to patient dissatisfaction.

II. THEORETICAL FRAMEWORK AND HYPOTHESES

Service Quality

The definition of service quality centered on the efforts to meet the needs and desires of customers and the accuracy of delivery to balance customer expectations. Tjiptono (2005) defines service quality as "the expected level of excellence and control over the level of excellence to meet customer desires".

Christina (2011) defines service quality as "a reflection of consumers' evaluative perceptions of services received at any given time".

Based on the two definitions of service quality above it can be seen that of the two main factors that affect service quality: service expected by consumers and services received or felt (perceived service) by consumers or perceived results.

III. Dimensions of Service Quality

Parasuraman et al., (1988), as cited by Christina (2011), compiled five main dimensions; the main factors determining the quality of services' as follows:

a. *Reliability*; the ability to deliver the promised service reliably and accurately.
b. *Responsiveness;* the willingness to help consumers by providing quick and precise services.
c. *Assurance*; includes personal knowledge, ability, and politeness or kindness and personal ability to gain trust and desire.
d. *Empathy;* involves maintaining and giving an individual or personal level of attention to the needs of consumers.
e. *Tangible;* includes physical facilities, equipment, prices, and personal appearance and written material.

Christina (2011) has made a multi-item scale measurement model named SERVQUAL. The SERVQUAL scale was first published in 1988 and consists of twenty-two questions distributed throughout the five dimensions of service quality. Some criteria that follow the basis of consumer ratings of service quality are (Schiffman and Kanuk, 2008):

a. *Reliability*; the consistency of performance; the company provides the right service at the right time, and also means the company upholds its promises.
b. *Responsiveness*; the willingness and readiness of employees to provide services.
c. *Competence*; have skills and knowledge needed to serve.
d. *Accessibility*; includes a convenience to be contacted.
e. *Courtesy*; includes respect, politeness, and friendliness of employees.
f. *Communication*; allowing consumers to obtain the information they need, willing to listen to consumers.
g. *Credibility*; includes trust, confidence, and integrity.
h. *Security*; safety from danger, risk, or loss.
i. *Empathy*; understand the needs and desires of consumers.
j. *Physical*; includes facilities, employee appearance, and equipment used to serve consumers.

1. *Utilitarian Value*

Utilitarian shopping value is a value that reflects an instrument of the benefits of shopping, for example: obtaining certain items. Semuel (2005) stated that *utilitarian value* or extrinsic value reflects the profit instrument from the expenditure activity. Meanwhile, according to Wikipedia (2011), *utilitarianism* comes from the Latin word *utilis*, which means useful, helpful, advantageous or beneficial.

In shopping, consumers have a strong motivation to be able to obtain economic value from these shopping activities. The economic value expected by consumers in their shopping activities, among others, is to be able to obtain the same product at a relatively cheaper price. In other words, consumers can set aside or save the difference in payment for a product because they are capable to find stores that sell products at lower prices.

Another utilitarian benefit-based motivation is that consumers get better quality products than other similar products. In the process of selecting a product, consumers always compare one product with another, in terms of quality. The ability of consumers to find out which products have the best quality contributes positively to consumer purchasing decisions on the product concerned. Another benefit expected by consumers from economic factors is the ease of obtaining a product or service. The easier the product or service to be obtained, the more economic benefits will be provided for consumers, especially in terms of time.

2. *Hedonic Value*
   a. *Hedonic Motivation*
   b. Types of Hedonic Motivation

The following describes the consumer shopping motivation according to some experts:

1) Hedonic Motivation According to Arnold and Reynolds

One of the motivating factors for consumers in shopping according to Setiawan (2010) is *hedonic motivation*. Hedonic motivation reflects an instrument that directly presents the benefits of an experience in spending, such as pleasure dan discover new things. Factors or elements in hedonic motivation consist of:

a) *Adventure shopping*
b) *Social shopping*
c) *Gratification shopping*
d) *Idea shopping*
e) *Role shopping*
f) *Value shopping*

2) Hedonic Motivation According to Hopkinson and Pujari

In his research,Hopkinson and Pujari found six hedonic factors that influence consumers to pursue rafting. The six factors are *enjoyment, self-expression, community, addiction, danger,* and *competition.*

3. *Satisfaction*

Kotler (2006) definesconsumer satisfaction as the extent to which the perceived performance of the product or service meets the expectations of the buyer/consumer. If the product performance is lower than customer expectations, the customer will not be satisfied; if the performance meets or beyond customer expectations, the customer will feel satisfied. Satisfaction will be achieved when the customer's expectations match the reality he gets. While customer satisfaction will strengthen the attitude towards the brand where most likely customers will buy back the same brand.

In evaluating satisfaction with a particular product, service or company, consumers generally refer to various factors or dimensions. Factors that are often used in evaluating decisions on a manufactured product according to Tjiptono (2005) include *performance, additional features, reliability, con formance to specifications, durability, serviceability, aesthetics,* and *perceived quality*. Meanwhile, to evaluate intangibles services, consumers generally use several attributes better known as *service quality* which consists of direct evidence (*tangibles*), *reliability*, responsiveness, guarantee (*assurance*), attention (*empathy*).

a. Satisfaction Measurement

The following are four methods to measure customer satisfaction (Tjiptono, 2005):

1) Complaints and suggestions system
2) Ghost shopping
3) Lost customer analysis
4) Consumer satisfaction survey

b. Customer Satisfaction Measurement Techniques

The customer satisfaction survey method can use measurement in the following ways:

1) Measurements can be done directly by asking questions such as "Please express how satisfied you are with our company services" on the following scale: very dissatisfied, dissatisfied, quite satisfied, satisfied, and very satisfied.
2) Respondents are given questions about how much they expect a certain attribute and how much they feel (*derived dissatisfaction*).
3) Respondents asked to write down the problems they face relating to the offer from the company and asked to write down the improvements they suggest (*problem analysis*).
4) Respondents can be asked to rank various elements (attributes) of the offer based on the degree of importance of each element and how well the company's performance in each element *(importance/performance ratings*).

IV. RESEARCH METHOD

Research Design

This study uses a descriptive research design with a type of case study research in Private Hospitals in Surakarta.

Population and Samples

Based on calculations using Slovin formula with a 95% confidence level using an accessible population, the sample used in this study were patients at the Private Hospital in Surakarta, which (the payment method used by the patients)consisted of *cash*, *other health insurance*, *BPJS*, and *parent company insurance*. Sampling at each service point: *insurance counters* and *cash counters*. Sampling was done by taking proportional sampling based on the ratio of the number of patients.

In this study, the sampling method used by researchers is *no probability sampling* with quota sampling. The technique was chosen because it is a practical, easy and suitable method to be implemented and economically inexpensive.

ANALYSIS TOOL

The analytical tool used in this study is the SERVQUAL instrument in the form of a questionnaire based on five quality dimensions. The SERVQUAL measuring instrument was adopted from Parasuraman et al (1988) which was later modified according to the nature of services available in private hospitals in Surakarta, which consists of five dimensions, namely *responsiveness, tangibles, reliability, assurance,* and *empathy*. A validity test was done to obtain the relevant question items to be analyzed, as seen from the *corrected item-total correlation* (r) (Sugiyono, 2012). The data were analyzed using descriptive statistics with SPSS version 20 for Windows. This test is used to describe a summary of research data such as the *mean* (average). Questionnaire data was then recapitulated and given a score determined by the Likert scale. Service quality assessment was done using the SERVQUAL method, which was done by calculating the difference between the average score of the expected value and the average score of the performance value in each dimension of the question. Mapping expectations and perceptions of patients consisting of dimensions of service quality and attributes in it were done on the Cartesian Diagram / Importance and Performance Matrix.

V. RESEARCH RESULTS AND DISCUSSIONS

Descriptive Analysis

a. Characteristics of Respondents

Table 1.1 Characteristics of Respondents

Characteristic	Quantity
1. Age group	
a. Under 20 y.o.	2
b. 20 up to 29 y.o.	23
c. 30 up to 39 y.o.	10
d. 40 up to49 y.o.	18
e. 50 up to59 y.o.	13
f. Above 60 y.o.	11
2. Sex	
a. Woman	47
b. Man	30
3. Visitor destination	
a. General clinic	13
b. Cardiology clinic	12
c. Dental clinic	16
d. Obstetricclinic	10
e. Internal Disease clinic	9
f. Ophthalmology Clinic	4
g. Neurology Clinic	6
h. Pulmonology Clinic	5
i. Pediatry Clinic	1
TOTAL	77

Based on table 1 above, the age of the patients for the majority of respondents was 20 to 29 years as many as 23 people. Besides that, seen from the sex, the majority are women.

The variables used in this study are the variables of *pharmaceutical management* and *customer satisfaction*. Each customer satisfaction variable includes the dimensions of *reliability, responsiveness, assurance, empathy,* and *tangibles*. The results of the average value of *pharmaceutical management* variables from each variable based on the five dimensions can be seen in the table below

Table 2. Pharmaceutical Management on service satisfaction

Customer Satisfaction	Mean
Reliability	4,0125
Responsiveness	4,1244
Assurance	4,0636
Empathy	4,0408
Tangibles	4,0014

The table above is the average values of pharmaceutical management from each dimension of the variable based on data obtained from the results of descriptive analysis. The table shows that:

a. *Tangible* has an average value of 4.0014; therefore, it can be concluded that patients experience high service satisfaction with physical facilities, equipment, staff, and communication facilities.
b. *Responsiveness* has an average value of 4.1244; this shows that patients are satisfied with the service quality including the staff's encouragement to help patients and provide services responsively.
c. *Assurance* has an average value of 4.0636; this shows that the patient is satisfied with the service quality as seen from the ability, knowledge, courtesy, and trustworthiness of the staff, free from doubt.
d. *Empathy* has an average value of 4.0408; this shows that patients are satisfied with the service quality that can be seen from the ease in establishing relationships, good communication, personal attention, and understanding the needs of patients.

e. *Reliability* has an average value of 4.0125; this shows that the patient is satisfied with the quality of service as seen from the reliability dimension which includes the ability to provide the promised service immediately, accurately and satisfactorily.

The explanation above shows that the services provided by private hospitals to patients viewed from each dimension are considered very satisfying because the average value of satisfaction is more than four (> 4.00). This shows that the services provided by private hospitals in Surakarta to patients are considered satisfactory because the average value of customer satisfaction is greater than four (> 4.00).

4. Quantitative Analysis

Results of Multiple Linear Regression Analysis

Model	Unstandardized Coefficients		Standardized Coefficients	T	Sig.
	B	Std. Error	Beta		
(Constant)	1,887	1,005		1,879	,054
X1	-,080	,074	-,191	-1,087	,028
X2	,034	,065	,095	,522	,013
X3	-,037	,056	-,109	-,658	,050
X4	,092	,049	,290	1,871	,006
X5	-,036	,062	-,097	-,577	,043

a. Dependent Variable: ABS

Based on the above data, the equation of the formulation of multiple linear regression is written as follows:

Y= 1,887- 0,080X1 + 0,034X2- 0,037X3 + 0,092X4 - 0,036X5

5. Classic assumption test

To obtain good test results, all the data needed in research must be tested first so that it does not violate the classical assumptions that exist, be able to obtain the appropriate and accountable results of hypotheses testing and produce a significant and representative regression model. The classic assumptions tested are *Normality, Multicollinearity, Multicollinearity,* and *Autocorrelation.*

Data Normality Test Results (*One-Sample Kolmogorov-Smirnov Test*) *Unstandardized Residual*		
N	70	
Normal Parametersa,b	*Mean*	0.0000000
Std. Deviation	.0278976	
Most Extreme Differences	*Absolute*	.102
Positive	.102	
Negative	-.045	
Kolmogorov-Smirnov Z	1.316	
Asymp. Sig. (2-tailed)	.067	
a. Test distribution is Normal.		
b. Calculated from data.		

Based on the table above, it can be concluded that each independent variable used in this study has a significance value greater than 0.05; it can be concluded that there is no heteroscedasticity in this regression model. Thus, there was no heteroscedasticity problem so that it was appropriate to be used in the regression model.

Model	*R*	*R Square*	*Adjusted R Square*	*Std. Error of the Estimate*	*Durbin-Watson*
1	,249a	,872	-,004	,94868	1.974

Based on the table above, it can be seen the value of *Durbin-Watson* (d) in this study is 1.974. This study used a total sample of 70 (n = 70) with independent variables of 5 (k = 5) with a significance level of 0.05, the value of du (inner limit) = 1.7581 and dl (outer limit) = 1.7431. The limit on du value for this study is 1.7581 so 4-du is 2.2419. Thus, it can be concluded that the d value of 1.974 lies between du and 4-du

(1.7581<1.974<2.2419) so it can be concluded that there is no autocorrelation problem in the regression model used in this study.

6. Hypothesis testing

The hypothesis in this study is the quality of service which consists of five dimensions, namely *tangibles, reliability, responsiveness, assurance,* and *empathy* affects the service satisfaction of private hospitals in Surakarta. The hypothesis will be tested using a *two-tailed test* at a significance level of 95% or p 0.05. This implies that if the significance probability *t* and *f* are less than 0.05, the proposed hypothesis is accepted. The results of hypothesis testing show that:

1. *Tangibles*: the results of the regression analysis show that variable X1 (*tangibles*) has a significant effect on customer satisfaction. This is indicated by the significance value of t of 0.028 which is smaller than 0.05. This means that patient satisfaction is influenced by variable X1 (*tangibles*) which includes physical facilities, equipment, employees and communication facilities.
2. *Reliability*: the results of the regression analysis showed that the variable X2 (*reliability*) had a significant effect on patient satisfaction because the probability value of significance t of 0.013 was smaller than 0.05. This means that patient satisfaction is influenced by variable X2 (*reliability*) in the form of the ability to provide the promised service immediately, accurately, and satisfactorily.
3. *Responsiveness*: the results of the regression analysis show that the variable X3 *(responsiveness*) has a significant effect on customer satisfaction. This is indicated by the significant probability value t of 0.005 smaller than 0.05. This means that patient customer satisfaction is influenced by variable X3 (*responsiveness*) which includes the staff's encouragement to help patients and provide services responsively.
4. Assurance: the results of the regression analysis show that the variable X4 (assurance) has a significant effect on customer satisfaction. This is indicated by the significant probability value t of 0.006 smaller than 0.05. This shows that patient satisfaction is influenced by variable X4 (assurance) which includes the ability, knowledge, politeness, and trustworthiness of the staff, free from risk and doubt.
5. *Empathy*: The results of the regression analysis showed that the variable X5 (*empathy*) had a significant effect on patient satisfaction. This is indicated by the significant probability value t of 0.043 which is smaller than 0.05. This shows that patient satisfaction is influenced by variable X5 (*empathy*) which includes ease in establishing relationships, good communication, personal attention, and understanding the needs of patients.

7. R Square results

Model Summary[b]

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	,249[a]	,872	-,004	,94868

a. Predictors: (Constant), TOTALE, TOTALK, TOTALB, TOTALJ, TOTALKT

b. Dependent Variable: ABS

In the table above, it can be seen the R square value of 0.872. This means that 87.2% of the variation in patient satisfaction in private hospitals in Surakarta is explained by the perception of service quality which includes *tangibles, reliability, responsiveness, assurance,* and *empathy*. While the remaining 12.8% is influenced by other dimensions besides the five dimensions of service quality. The results of multiple linear regression analysis also showed that pharmaceutical management and the five variables simultaneously had a significant effect on patient satisfaction in private hospitals in Surakarta because the significance probability value of 0,000 was smaller than 0.05. The *t* and *f* test results show that the satisfaction of patients in private hospitals in Surakarta and influenced simultaneously and individually by the perception of service quality which consists of five dimensions, namely *tangibles, reliability, responsiveness, assurance,* and *empathy*.

Based on the multiple linear regression analysis, it is also known that from the five dimensions of service quality, it turns out that *assurance* has the most influence on patient satisfaction. This is indicated by its beta value (X4) of 0.290 which is the biggest among the other dimension beta values.

This shows that the patients' satisfaction with private hospitals in Surakarta is mostly influenced by the perception of the quality of patient services from the *assurance* dimension which includes the ability, knowledge, courtesy, and trustworthiness of the staff, free from risk and doubt. Private hospitals in Surakarta in providing the promised services immediately, accurately and satisfactorily.

VI. CONCLUSIONS AND SUGGESTION

1. Conclusion

a. The results of the descriptive analysis showed that private hospital patients in Surakarta had very satisfying perceptions of the quality of the services they received which included *tangible, reliability, responsiveness, assurance,* and *empathy*.

b. Regression analysis results show that the five dimensions of service quality consisting of *tangible, reliability, responsiveness, assurance,* and *empathy* have a significant effect on patient satisfaction in private hospitals in Surakarta; either individually or together. This is indicated by the significance value of t and f of 0,000; smaller than 0.05.

2. Suggestion

Private hospitals in Surakarta need to emphasize and maintain their attention to these five dimensions because it is important to better support pharmaceutical management for the better and gain the trust and satisfaction of patients.

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