

Relationship Physical Aspect and Policy Nerve Inpatient Service with Patient Satisfaction at Cut Nyak Dhien Regional General Hospital Aceh Barat Regency

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Submitted:05/02/2022 **Revised:** 31/08/2022 **Accepted:** 27/09/2022 **Published online:** 29/10/2022

DOI: <https://doi.org/10.35308/j-kesmas.v7i2.5044> **How to cite this article:** Nurhayati, Fera, D., Marniati., Farisni, T. & Nabela, D. (2022). Relationship Physical Aspect and Policy Nerve Inpatient Service With Patient Satisfaction at Cut Nyak Dhien Regional General Hospital Aceh Barat Regency. *J-Kesmas: Jurnal Fakultas Kesehatan Masyarakat (The Indonesian Journal of Public Health)*. 9(2): 40-44.

Abstract

Patient satisfaction is one of the first indicators of hospital's standards, and a measure of service quality. The quality of health services is health services that can lead to patient satisfaction in every patient, where the procedures for implementation are in accordance with established standards and codes of ethics. The purpose of this research problem is to determine the relationship between physical and policy aspects with patient satisfaction at the Cut Nyak Dien Hospital in West Aceh. This research uses descriptive quantitative with cross sectional design. The population in this study were 855 patients or their guardians, the sampling technique used the type of accidental sampling using the Slovin formula to produce 90 respondents who had been hospitalized for 1x24 hours in June-August 2021. To analyze the data, the researcher used univariate and bivariate tests using Chi-square test, obtained p-value: 0,855 (p-value > $\alpha = 0,05$) for the physical aspect and p-value = 0,049 (p-value < $\alpha = 0,05$) for the policy. So, it can be concluded that there is no significant relationship between physical aspect with patient satisfaction, there is a significant relationship between policy and patient satisfaction, follow-up by providing intervention to socialize the implementation of health services according to standard operating procedures

Keywords: Physical Aspect; Policy; Patient Satisfaction

Introduction

Hospital provides communities with health care. According to the decision of the Indonesia Ministry of Health Number 983/MENKES/SK/XI/1992 public hospital are hospitals that provide basic health care, specialising, education, and training. Hospitals are expected to be a social-moving organization with a function to provide comprehensive services, curative, and preventive measure to communities as the WHO (World Health Organization) (Fauzi, 2013 in Tati et al, 2018).

. A patient's satisfaction is one of the first indicators of a hospital's standards and it is a measure of the quality of the service. A patient's low satisfaction will affect hospital visits, and an employee's attitude toward the patient will also affect his or her satisfaction. Where patients need from time to time will increase, so will their demand for quality of service (Noviyanti, 2020). The quality of health care is a health care that can bring satisfaction each patient, whose procedure measures measure up to established standards and codes. If you are to make an

improvement in the quality of services, you will need the patient's level of satisfaction survey (Daulay, 2015). According to Noviyanti (2020), hospitalization is patient care for observation, treatment, diagnostic, medical treatment, medical rehabilitation, and other health by keeping the bed. Hospitalizing services include doctors, nurses, waitresses, nursing facilities, and nursing surrounding, including security, cleaning service, receptionist, parking, laboratories, and rontgens.

Based on data from Global Health Index, Indonesia's health level is ranked 101 out of 149 countries in the world. This shows that the health condition of the Indonesia state is still below other countries, which means that the Indonesian state is still in a problem of health quality (Banyuwangi District Health Office, 2018). In Heilongjiang, China, 24% of patients reported that they were "dissatisfied" with the inpatient services at Heilongjiang University of Chinese Medicine (Linghan Shan et al, 2016).

In Indonesia, based on the result of the community satisfaction index survey report conducted by the



Ministry of Health of the Republic of Indonesia in 2018, it showed that the Patient Satisfaction Index of the 4 hospitals surveyed in Indonesia, namely Hasan Sadikin Hospital in Bandung, was 78,74%; Fatmawati Hospital in South Jakarta by 78,23; Marzoeeki Mahdi Hospital in Bogor by 79,95%; and Persahabatan Hospital in East Jakarta by 78,99% (Ministry of Health, 2017). Based on these data, it can be concluded that the patient satisfaction rate is still relatively low. So that patient satisfaction becomes a hospital problem, both in hospitals in Indonesia and abroad.

Based on previous research at the Zainoel Abidin Hospital, the level of patient satisfaction in 2018 was in the “satisfied” category with an IKM value of 80,83% (Ismail et al, 2018). Based on the Cut Nyak Dhien General Hospital in 2020 measured by the Servqual dimension, it was concluded that patient satisfaction with Tangible was in the “good” category of 5,4% and “bad” 21,4%. This shows that the level of patient satisfaction in these hospitals has not met the standard values set by the government, because according to the Regulation of the Minister of Health of the Republic of Indonesia number 129/Menkes/SK/II/2008 the standard of patient satisfaction is >90%. Seeing this reality, the problem of health quality in Indonesia requires more serious attention and handling from all parties, both from the government and the Indonesian people as a whole.

Based on the description above, the researcher is interested in conducting research entitled “Relationship Physical Aspect And Policy Nerve Inpatient Service With Patient Satisfaction At Cut Nyak Dhien Regional General Hospital Aceh Barat

Regency”. This study aims to determine the relationship between physical aspect and policy factors with neuroinpatient satisfaction at Cut Nyak Dhien Regional General Hospital West Aceh Regency.

Methods

The type of research used is descriptive with a quatitative approach and uses a cross sectional design. This research was conducted in the neuroinpatient ward of the Cut Nyak Dhien Regional General Hospital West Aceh Regency from June-August 2021. The population in this study was 855 patients or their guardians who had been hospitalized for 1x24 hours, the sample technique used was accidental sampling, samples were taken as many as 90 patients or patient guardians. Data collection techniques using questionnaires and observation. The data analysis technique used univariate and bivariate tests using Chi-square.

Results

After conducting research on the Relationship Physical Aspect And Policy Nerve Inpatient Service With Patient Satisfaction At Cut Nyak Dhien Regional General Hospital Aceh Barat Regency, the following resultswereobtained:

Relationship of Physical Aspect With Patient Satisfaction

Table 1. Relationship of Physical Aspect with Patient Satisfaction in the Nerve Inpatient Room of the Cut Nyak Dhien Regional General Hospital West Aceh Regency in 2021

Physical Aspect	Patient Satisfaction				Total N	Pvalue	PR
	Less Satisfied		Satisfied				
	n	%	n	%			
Not Good	25	55,3	22	44,7	47	100	
Good	23	51,2	20	48,8	43	100	0,855 0,994

Primary data, 2021

Relationship of Policy with Patient Satisfaction

Table 2. Relationship of Policy with Patient Satisfaction in the Nerve Inpatient Room of the Cut Nyak Dhien Regional General Hospital West Aceh Regency in 2021

Policy	Patient Satisfaction				Total N	Pvalue	PR
	Less Satisfied		Satisfied				
	n	%	n	%			
Not Good	22	65,9	19	34,1	41	100	
Good	26	42,9	23	57,1	49	100	0,049 1

Primary data, 2021

Based on table 1, it shows that of the 47 respondents who think less well feel less satisfied



(55,3%) more than those who feel less satisfied (44,7%). Meanwhile, 43 respondents who have a good opinion feel less satisfied (51,2%) more than those who feel satisfied (48,8%). With the Chi-square test results obtained $pvalue = 0,885$ ($pvalue > \alpha=0,05$), so it can be described that there is no significant relationship between physical aspect and patient satisfaction in the neuroinpatient ward of the Cut Nyak Dhien Regional General Hospital West Aceh Regency. The prevalence ratio is 0,994 (PR value < 1), so it can be concluded that the physical aspect has opportunity to cause patient dissatisfaction in the nervous inpatient ward of the Cut Nyak Dhien Regional General Hospital West Aceh Regency if not addressed immediately.

Based on table 2, it shows that of the 41 respondents who think less well feel less satisfied (65,9%) more than those who feel satisfied (34,1%). Meanwhile, 49 respondents who had a good opinion felt less satisfied (42,9%) than those who felt satisfied (57,1%). With the result of the Chi-square test, $pvalue = 0,049$ ($pvalue < \alpha=0,05$), so it can be described that there is a significant relationship between policy and patient satisfaction in the neuroinpatient ward of Cut Nyak Dhien Regional General Hospital West Aceh Regency. The prevalence ratio is 1 (PR value = 1), so it can be concluded that the policy is not a risk factor for the emergence of patient dissatisfaction in the neuroinpatient ward Cut Nyak Dhien Regional General Hospital West Aceh Regency.

Discussion

Relationship of Physical Aspect with Patient Satisfaction

Respondents who think less well feel less satisfied (55,3%) more than respondents who think good feel less satisfied (51,2%) with physical aspect. This because respondents assessed several physical aspect such as the choice of window sticker, color, comfort, a place to rest for their patient's guardian, a bathroom or toilet that said to be suitable for use has a broken door, the corner of the bathroom or toilet ceiling is sometimes filled with cobwebs and sometimes smells of urine, slippery floors, and dim lights. The bed is decent enough to use, but has no bed linen and sometimes smells. It has air conditioning (AC) but it doesn't work properly, and the garbage disposal schedule in the room is still not good.

The result of this study are in line with research conducted by Suryati (2017) which states that there is no relationship between physical aspect and patient satisfaction at Panti Wilasa Citarum Hospital Semarang, this is because when patients come to the hospital they pay less attention to hospital facilities

and infrastructure. When they come to the hospital, they only hope to get well soon from all the diseases they suffer. The result of this study are also in line with the research of Muhammad Rezanda AF (2019) which states that the physical aspect is not related to patient satisfaction. This is because patients understand the limitations of physical facilities and funding sources for Dustira Hospital which is a military hospital so that they receive services according to the existing situation and conditions.

So, the researcher assumes that respondents who feel dissatisfied with physical aspect are due to the lack of quality facilities. For example: AC (Air Conditioner) that does not turn on but does not provide a fan as a replacement, noisy AC sound, AC leaks causing water to stagnate in the inpatient room and has an impact on the patient's guardian who has no place to rest; Sockets that are not attached to the wall with the socket wires slightly protruding, creating a fear of electrocution; The cleaning service that came too quickly to clean the nervous inpatient room, thus disrupting the guardian of the patient who was on guard at night while resting; The bathroom was dirty and smelly because it was used by more than 10 people, the bathroom door was broken and it took more than 3 days for repairs; The bathroom lights and nervous inpatient room are too dim; A decent enough bed, but no bed line and sometimes smelly; There is no rest room for the patient's guardian, but the patient's guardian does not mind it, as long as the patient is comfortable in the healing process.

Relationship of Policy with Patient Satisfaction

Respondents who have a bad opinion feel less satisfied (65,9%) more than respondents who have a good opinion feel less satisfied (42,9%) with policy factors. This was because the administrative procedures were too difficult and unclear, and the visiting hours were not confirmed by the health workers in the nervous inpatient room at the Cut Nyak Dhien Regional General Hospital. Doctor's visit hours are not scheduled properly, and rates when redeeming drugs outside the Cut Nyak Dhien Regional General Hospital pharmacy are very draining for patients.

The result of this study are in line with research conducted by Alfi Febriana Rahmawati (2013) which states that there is a relationship between policy and patient satisfaction in Bojonegoro Regional General Hospital. He revealed that the policy that must be prioritized is the clarity of procedures, because many patients have used BPJS so that administrative arrangements have to go through certain procedures and requirements, patients find it difficult because of the many files that must be prepared and the flow of management is complex. The result of this study are

also in line with research conducted by Ummah and Supriyanto (2014) which states that one way of managing health facilities to satisfy customers is with easy and uncomplicated service procedures.

So, the researcher assumes that respondents who are dissatisfied with the policy because the doctor's visiting hours are not in accordance with the schedule, administrative management must pass certain procedures and requirements so that it makes the patient or patient's guardian feel difficult because of the large number of files that must be prepared and complex management tools, and chaotic visiting hours. Visiting hours are schedule from 10 am to 10 pm, but there are still many families of patients who visit patients not according to the visiting hours schedule and family members enter the nervous inpatient room through the back door which is not guarded by health workers who are on a night watch schedule, as well as the number of patients that make the room feel stuffy because of the many occupants.

Conclusion

It can be concluded that there is no significant relationship between the physical aspect and patient satisfaction, but the physical aspect can be opportunity factor that causes patient dissatisfaction in the nervous inpatient ward of Cut Nyak Dhien Regional General Hospital if not addressed immediately. While the policy has a significant relationship with patient satisfaction relationship with patient satisfaction in the neuroinpatient ward of Cut Nyak Dhien Regional General Hospital, but it is not a risk factor for the emergence of patient dissatisfaction in receiving health services.

Acknowledgment

This research can be carried out well thanks to the help of various parties. Thank you to the Cut Nyak Dhien Regional General Hospital West Aceh Regency, in particular the patients and their guardians as well as the staff in the neurological inpatient room at the Cut Nyak Dhien Regional General Hospital West Aceh Regency.

Author Contribution and Competing Interest

The author's contribution to this research is collecting respondents' data through questionnaires, conducting observation and short interviews, analyzing result, and compiling manuscripts.

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