

Analysis of Outpatient Satisfaction at Sylvani Hospital: The Influence of Service Quality on the Patient Satisfaction Index

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Received: February 22, 2025

Revised: March 17, 2025

Accepted: April 25, 2025

Published: April 30, 2025

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DOI: [10.29303/jppipa.v11i4.10866](https://doi.org/10.29303/jppipa.v11i4.10866)

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Abstract: This study aims to analyze outpatient satisfaction at Sylvani Hospital by considering the factors that influence it. The research method used was a quantitative survey with a cross-sectional research design, meaning data were collected at a single point in time to capture a snapshot of patient satisfaction levels and the factors affecting them. The cross-sectional approach enabled the researchers to analyze relationships between service quality dimensions and patient satisfaction within a limited timeframe. Data were collected from 205 respondents selected using sampling techniques in a limited population. The results showed that of the five dimensions of service quality (reliability, assurance, physical evidence, empathy, and responsiveness), the dimensions of tangible and responsiveness had a significant influence on patient satisfaction. This study recommends improving physical facilities and implementing a service digitization system to increase patient satisfaction.

Keywords: Cross-sectional; Hospital; Patient satisfaction; Service quality; Sylvani hospital; Tangible evidence

Introduction

One of the institutions that plays a crucial role in the healthcare system is the hospital. As a health institution, hospitals are at the forefront of providing comprehensive healthcare services to the community. This function has been legally regulated in Law No. 44 of 2009, which states that hospitals are responsible for providing medical, nursing, and related services 24 hours a day, seven days a week.

According to the Ministry of Health No. 129 of 2008, hospitals are facilities for individual health services that include promotive, preventive, curative, and rehabilitative services. Hospitals are required to provide inpatient, outpatient, and emergency services with high-quality standards. The main function of a hospital is to provide specialist or secondary medical services, as well as sub-specialist or tertiary services. As stated by Halim et al. (2021), the quality of hospital services can be

evaluated through three main components, namely structure (physical and human resources), process (governance and service procedures), and outcome (the results of those services). These three aspects are interconnected and must be optimized to ensure patient satisfaction and support public trust in healthcare institutions.

In the hospital, service-producing units or installations play an important role in daily operations. This unit is the frontline in providing various services to patients, both outpatient and inpatient. One of the installations that interacts the most with the community is the polyclinic. The polyclinic provides outpatient services that are increasingly favored by the community, especially in services without hospitalization, commonly known as one day care. The demand for this service continues to increase in line with the changing lifestyle of society, which prioritizes time efficiency. The increasing number of visits to the polyclinic unit has

How to Cite:

Sugianto, S., Alamsyah, A., & Halim, S. (2025). Analysis of Outpatient Satisfaction at Sylvani Hospital: The Influence of Service Quality on the Patient Satisfaction Index. *Jurnal Penelitian Pendidikan IPA*, 11(4), 550–556. <https://doi.org/10.29303/jppipa.v11i4.10866>

become an important indicator, which simultaneously reflects how the quality of service at the hospital is perceived by patients.

According to Parasuraman et al. (1985), patient satisfaction is influenced by the difference between expectations and perceived reality. Patient expectations can be formed through various sources, such as information from word of mouth, personal needs, previous experiences, and external communication conducted by the hospital. When the reality of the service exceeds or at least meets patient expectations, the level of satisfaction tends to increase. Conversely, if reality does not meet expectations, patient satisfaction will decrease.

According to Azwar (2012), a hospital is a healthcare service institution that provides comprehensive health efforts, including promotive, preventive, curative, and rehabilitative efforts aimed at improving the degree of public health. On the other hand, Kotler et al. (2016) state that customer satisfaction, including that of patients, is the level of a person's feelings after comparing perceived performance or results with their expectations. This indicates that patient satisfaction is an important indicator in assessing the success of hospital services.

Patient satisfaction is a crucial aspect in assessing the success of healthcare services. The outpatient patient satisfaction index provides a comprehensive overview of how patients assess the services they receive, in terms of administration, facilities, and interactions with medical staff. However, based on initial data and brief survey results, there are several complaints regarding wait times, limited facilities, and ineffective communication between patients and medical staff.

Pinem et al. (2019) in their study titled *The Impact of Service Quality on Customer Satisfaction and Loyalty in the Health Sector* also showed that service quality has a significant impact on customer satisfaction, which contributes to the increase in patient loyalty. They found that hospitals providing high-quality services tend to have higher satisfaction levels, which in turn improves the hospital's image and attracts more patients. This research shows that RSUD Sylvani can benefit from analyzing the impact of service quality on patient satisfaction.

This study aims to analyze outpatient satisfaction at RSUD Sylvani by considering various aspects of service. By understanding the factors that influence patient satisfaction, RSUD Sylvani is expected to take strategic steps to improve the quality of its services. Based on the background description above, the author believes that a more in-depth study is necessary regarding "Analysis of Outpatient Satisfaction at RSUD Sylvani: The Influence of Service Quality on Patient Satisfaction Index."

Problem Statement

Based on the Introduction outlined above, the problem formulation obtained in this research is: How is the level of outpatient satisfaction at RSUD Sylvani based on overall service indicators? What factors influence the satisfaction of outpatient patients at RSUD Sylvani? What strategic steps can RSUD Sylvani take to improve the outpatient patient satisfaction index?

Method

The type of research used in this study is a quantitative survey research with a cross-sectional design. The purpose of the cross-sectional design research is to identify the relationships between variables at a specific point in time. This research is both descriptive and analytical and is generally used to describe the prevalence, distribution, and relationships between variables without intervention or manipulation of variables. This type of research is also designed to study the dynamics of the correlation between independent variables and dependent variables using a model approach or observation simultaneously at one point in time, or point time approach.

In this study, an Ethical Clearance was also conducted at Universitas Prima Indonesia with the number: 016/KEPK/UNPRI/I/2025 on January 11, 2025, and was declared ethically acceptable according to the 7 (seven) WHO 2011 standards.

The data obtained were then processed and analyzed using the Statistical Package for the Social Sciences (SPSS) software. SPSS was utilized to perform descriptive statistics, bivariate analysis, and multivariate analysis to identify patterns, relationships, and the influence between service quality dimensions and outpatient satisfaction.

Calculation of Questionnaire Respondent Samples

Based on medical record data, the number of outpatient visits at RSUD Sylvani Hospital was recorded as 421 people during a certain period. Next, to determine the sample size, the sample size formula for a finite population is used (Sugiyono, 2019):

$$n = \frac{N}{1 + N \times e^2} \quad (1)$$

Calculation steps: (a) Enter $N = 421$ and $e = 0.05$; (b) Calculate e^2 | $(0.05)^2 = 0.0025$; (c) Calculate $N \times e^2$ | $421 \times 0.0025 = 1.0525$; (d) Calculate the denominator | $1 + 1.0525 = 2.0525$; (e) Calculate n | $n = \frac{421}{2.0525} \approx 205$. Based on the calculations above, the sample size in this study is 205 people.

Validity and Reliability Test

The validity test shows the extent to which a measuring instrument can measure what it is supposed to measure. The data reliability test is an instrument test used to determine the level of trustworthiness of the instrument so that it can be used as a data collection tool. The calculation is performed using the product moment correlation formula, then comparing the calculated correlation value of the research variable with the *r* table.

Table 1. Validity Test Results

| Service Quality | Valid Question | Invalid Question |
|----------------------|----------------|------------------|
| Realibility | 6 | 0 |
| Guarantee | 4 | 2 |
| Physical Evidence | 5 | 1 |
| Empathy | 5 | 1 |
| Response Capacity | 5 | 1 |
| Patient Satisfaction | 10 | 2 |

Carrying the motto "Serving with Love and Care" the hospital is committed to providing quality medical services and education for patients and families in accordance with the policies established since its inception.

Result and Discussion

Description of the Research Location

Sylvani Hospital began construction on March 25, 2012, in Binjai, North Sumatra, and was inaugurated on June 17, 2013, under the ownership of the Sylvani Foundation. Initially developed from the clinic of Dr. Sugianto, Sp. OG, this hospital later transformed into a General Hospital under PT. Rumah Sakit Umum Sylvani with Dr. Dovi Camela Sitepu, M.Kes as the director.

This hospital obtained its legal status on March 2, 2015, and successfully received its first-star accreditation (Perdana) in 2016. With a capacity of 124 beds, this hospital provides medical services such as general clinics, specialist clinics, an Emergency Room, various classes of inpatient care, as well as laboratory, pharmacy, anesthesia, and surgical facilities.

Carrying the motto "Serving with Love and Care," the hospital is committed to providing quality medical services and education for patients and families in accordance with the policies established since its inception.

Univariate Analysis

Based on Table 2, it is known that out of 205 respondents, the majority of respondents are aged between 36-55 years, totaling 112 respondents (54.4%). In the education category, it was found that the majority of respondents had basic to intermediate education, with 91 respondents (44.4%). In the employment category, the

majority of respondents work as private employees, with 77 respondents (37.6%), and the most common income level is below the minimum wage, with 113 respondents (55.1%).

Table 2. Respondent Characteristics

| Characteristic | Variable | Majority Value | |
|----------------|------------------------|----------------|------|
| | | f | % |
| Age Level | 36-55 | 102 | 55 |
| Education | SD/SMP/SMA | 91 | 44.4 |
| Work | Private Employee | 77 | 37.6 |
| Income | Below the minimum wage | 138 | 55.1 |

Based on the table 3, it is known that Reliability received 126 (61.5%) satisfied responses and 79 (38.5%) dissatisfied responses. Assurance 148 (72.2%) Satisfied 57 (27.8%) Not Satisfied. Physical Evidence 127 (62%) Satisfied 78 (38%) Not satisfied. Empathy 144 (70.2%) Satisfied, 61 (29.8%) Not Satisfied. Responsiveness 133 (64.9%) Satisfied 72 (35.1%) Not Satisfied and Patient Satisfaction 122 (59.5%) Satisfied 83 (40.5%) Not Satisfied.

Table 3. Distribution of Univariate Analysis on Service Quality and Patient Satisfaction Variable

| Variable | Satisfied | | Not Satisfied | |
|----------------------|-----------|------|---------------|------|
| | f | % | f | % |
| Realibility | 126 | 61.5 | 79 | 38.5 |
| Assurance | 148 | 72.2 | 57 | 27.8 |
| Tangible | 127 | 62 | 78 | 38 |
| Empathy | 144 | 70.2 | 61 | 29.8 |
| Responsivennes | 133 | 64.9 | 72 | 35.1 |
| Patient Satisfaction | 122 | 59.5 | 83 | 40.5 |

Bivariate Analysis

Based on the table above, it can be explained that out of 122 respondents (59.5%) who stated they were satisfied with patient satisfaction, 78 respondents (38%) expressed satisfaction and 44 respondents (36.1%) expressed dissatisfaction with reliability. Meanwhile, out of 83 respondents (40.5%) who stated they were dissatisfied with patient satisfaction, 48 respondents (23.4%) expressed satisfaction and 35 respondents (17.1%) expressed dissatisfaction with reliability. The obtained p-value was 0.863.

Out of 122 respondents (59.5%) who stated they were satisfied with patient satisfaction, 86 respondents (42%) expressed satisfaction and 36 respondents (17.6%) expressed dissatisfaction with physical evidence. Meanwhile, out of 83 respondents (40.5%) who stated they were dissatisfied with patient satisfaction, 41 respondents (20%) expressed satisfaction and 42 respondents (20.5%) expressed dissatisfaction with physical evidence. The obtained p-value was 0.009. Out of 122 respondents (59.5%) who stated they were satisfied with patient satisfaction, 88 respondents

(42.9%) expressed satisfaction and 34 respondents (16.6%) expressed dissatisfaction with assurance. Meanwhile, out of 83 respondents (40.5%) who stated they were dissatisfied with patient satisfaction, 60 respondents (29.3%) expressed satisfaction and 23 respondents (11.2%) expressed dissatisfaction with assurance. The obtained p-value was 0.435.

Table 4. Table of the Relationship between Service Quality and Patient Satisfaction

| No | | Patient Satisfaction | | | | p-value |
|----------------|---------------|----------------------|------|---------------|------|---------|
| | | Satisfied | | Not Satisfied | | |
| | | f | % | f | % | |
| Reliability | | | | | | |
| 1 | Satisfied | 78 | 38.0 | 48 | 23.4 | 0.863 |
| 2 | Not Satisfied | 44 | 36.1 | 35 | 17.1 | |
| Tangible | | | | | | |
| 1 | Satisfied | 86 | 42.0 | 41 | 20.0 | 0.009 |
| 2 | Not Satisfied | 36 | 17.6 | 42 | 20.5 | |
| Assurance | | | | | | |
| 1 | Satisfied | 88 | 42.9 | 60 | 29.3 | 0.435 |
| 2 | Not Satisfied | 34 | 16.6 | 23 | 11.2 | |
| Empathy | | | | | | |
| 1 | Satisfied | 89 | 43.4 | 44 | 45.9 | 0.543 |
| 2 | Not Satisfied | 33 | 16.1 | 28 | 13.7 | |
| Responsiveness | | | | | | |
| 1 | Satisfied | 102 | 49.8 | 31 | 15.1 | 0.000 |
| 2 | Not Satisfied | 50 | 9.8 | 52 | 25.4 | |

Out of 122 respondents (59.5%) who stated they were satisfied with patient satisfaction, 89 respondents (43.4%) expressed satisfaction and 33 respondents (16.1%) expressed dissatisfaction with responsiveness. Meanwhile, out of 83 respondents (40.5%) who stated they were dissatisfied with patient satisfaction, 44 respondents (45.9%) expressed satisfaction and 28 respondents (13.7%) expressed dissatisfaction with responsiveness. The obtained p-value was 0.543. Out of 122 respondents (59.5%) who stated they were satisfied with patient satisfaction, 102 respondents (49.8%) expressed satisfaction and 50 respondents (9.8%) expressed dissatisfaction with empathy. Meanwhile, out of 83 respondents (40.5%) who stated they were dissatisfied with patient satisfaction, 31 respondents (15.1%) expressed satisfaction and 52 respondents (25.4%) expressed dissatisfaction with empathy. The obtained p-value was 0.000.

Multivariate Analysis

Based on the results of the bivariate analysis by comparing the results of the univariate analysis of Service Quality with Patient Satisfaction, candidate results for multivariate analysis were obtained.

Based on the table 5, this study uses $\alpha = 0.05$, the independent variable that has a significant influence on the dependent variable is as follows: (a) If $\text{Sig} < \alpha$ (0.05),

then there is a significant effect of the independent variable on the dependent variable. (b) If $\text{Sig} > \alpha$ (0.05), then there is no significant influence between the independent variable and the dependent variable. In the relationship of each independent variable.

Table 5. Multivariate Logistic Regression Test

| Variable | B | Sig. | Exp (B) |
|----------------|--------|-------|---------|
| Reliability | -0.059 | 0.863 | 0.943 |
| Assurance | 0.301 | 0.435 | 1.352 |
| Tangible | -0.887 | 0.009 | 0.412 |
| Empathy | -0.220 | 0.543 | 0.802 |
| Responsiveness | -2.176 | 0.000 | 0.113 |

Reliability has a sig-p value of $0.863 > 0.05$, meaning that reliability does not have a significant effect on patient satisfaction. Assurance has a sig-p value of $0.435 > 0.05$, meaning assurance does not have a significant effect on patient satisfaction. Physical evidence has a sig-p value of $0.009 < 0.05$, meaning physical evidence has a significant influence on patient satisfaction. Empathy has a sig-p value of $0.543 > 0.05$, meaning empathy does not have a significant effect on patient satisfaction. Responsiveness has a sig-p value of $0.000 < 0.05$, meaning that responsiveness does not have a significant influence on patient satisfaction.

The results of this test show that the responsiveness and physical evidence factors have a significant impact on patient satisfaction, while the reliability, assurance, and empathy factors do not have an impact on outpatient satisfaction at RSU Sylvani.

Odds Ratio

The magnitude of the influence is shown by the Exp (B) value, also known as the Odds Ratio (OR), and can be seen in Table 4. The OR value for the responsiveness variable is shown with an OR value of 2.176. This means that a lack of responsiveness tends to have a twofold influence on patient dissatisfaction. Because the value of B is positive, responsiveness has a positive influence on patient satisfaction.

Discussion

The results of this study indicate that out of the five dimensions of service quality (reliability, assurance, physical evidence, empathy, and responsiveness), the dimensions of physical evidence and responsiveness significantly influence patient satisfaction at RSU Sylvani. The dimension of physical evidence, which includes hospital facilities, cleanliness, and the availability of medical equipment, has a positive influence with an Odds Ratio (OR) value of 2.176. This means that patients are twice as likely to be satisfied with good service in terms of physical evidence.

On the contrary, the dimensions of reliability, assurance, and empathy do not have a significant impact on patient satisfaction. Nevertheless, the cross-tabulation results show that more than 60% of respondents expressed satisfaction with the services provided in these aspects. This indicates that although these factors do not have a significant direct influence, they still play an important role in shaping the overall perception of patients regarding the quality of service at RSU Sylvani.

Influence of Reliability on Patient Satisfaction

The research results show that reliability does not have a significant impact on patient satisfaction ($p\text{-value} = 0.863$). Reliability in service includes the consistency and punctuality of medical staff in providing services according to schedule. Nevertheless, 60.5% of respondents rated reliability in the satisfied category.

Yulianti's (2021) research at a private hospital in Jakarta supports this finding, where reliability does not have a direct impact on patient satisfaction. However, research by Wicaksono et al. (2022) at a Government Hospital in Surabaya found a significant influence of reliability on patient satisfaction. This indicates that differences in the types of hospitals and patient characteristics can influence perceptions of reliability.

Influence of Assurance on Patient Satisfaction

The results of this study indicate that Assurance does not have a significant impact on patient satisfaction ($p\text{-value} = 0.435$). Guarantee includes the sense of security and confidence of patients in the competence of medical staff. Although 56.1% of respondents rated assurance in the dissatisfied category, this did not significantly affect the overall satisfaction level.

Pratama et al. (2020) at RSUD Bandung found that assurance has a positive effect on patient satisfaction, which contradicts these findings. Factors contributing to this difference are the quality of communication and the skills of medical staff in instilling confidence in patients.

Influence of Physical Evidence on Patient Satisfaction

The results of this study indicate that the dimension of physical evidence has a significant impact on patient satisfaction ($p\text{-value} = 0.009$). Physical facilities such as cleanliness, comfort of the waiting room, lighting, air ventilation, interior design, and the completeness of medical equipment are the main factors in increasing patient satisfaction. In addition, the availability of adequate parking, accessibility for disabled patients, as well as the quality of beds and inpatient rooms also positively contribute to patient perception.

The results of this study are in line with Handayani et al. (2022) research, which shows that adequate and modern physical facilities enhance patient comfort and

trust. A similar study by Jonson et al. (2023), Rauf et al. (2024), and Fadda (2019) also confirms that aesthetic factors, toilet cleanliness, and entertainment facilities in the waiting area have a positive correlation with patient satisfaction levels.

Influence of Empathy on Patient Satisfaction

The results of this study indicate that empathy in healthcare services does not have a significant impact on patient satisfaction ($p\text{-value} = 0.543$). Empathy includes the attention of medical staff to patient complaints and the ability to listen well. As many as 54.1% of respondents expressed empathy in the dissatisfied category.

Lestari et al. (2022) at a Private Hospital in Yogyakarta supports this finding, where patients prioritize the accuracy of diagnosis over the empathy of medical staff. However, research by Andriani et al. (2021), Yu et al. (2022), Nembhard et al. (2023), and Decety (2020) in small hospital shows that empathy plays a significant role due to the higher intensity of interaction between patients and medical staff.

Influence of Responsiveness on Patient Satisfaction

The results of this study indicate that responsiveness does not have a significant impact on patient satisfaction ($p\text{-value} = 0.000$). Responsiveness includes the responsibility of medical staff in handling patient complaints and needs. However, 53.2% of respondents stated that the responsiveness was in the dissatisfied category.

Rahmawati et al. (2023) found similar results where response speed does not always significantly affect patient satisfaction. However, Setiawan et al. (2025) research shows that responsiveness is very important in the emergency unit (UGD) where response speed plays a significant role in patient satisfaction.

Conclusion

This study aims to analyze the outpatient satisfaction index at RSU Sylvani by utilizing the five dimensions of service quality, namely reliability, assurance, physical evidence, empathy, and responsiveness. Based on the results of data analysis and discussion, several conclusions can be drawn. Firstly, the level of outpatient service quality at RSU Sylvani can be comprehensively assessed through the five dimensions of service quality: reliability, assurance, physical evidence, empathy, and responsiveness. These dimensions provide a structured framework to evaluate patient perceptions of the services received. Secondly, the analysis revealed that among the five dimensions, physical evidence and responsiveness are the most significant factors influencing the patient satisfaction

index. Enhancements in these two areas are expected to have a substantial impact on improving overall patient satisfaction levels. Thirdly, strategic recommendations are proposed based on the study findings to enhance service quality and patient satisfaction. These recommendations include: (1) conducting training programs for staff with a focus on strengthening interpersonal communication skills to foster greater empathy towards patients; (2) implementing a digitalization initiative through the development of a digital queuing system aimed at minimizing patient waiting times and streamlining the registration process; and (3) investing in facility improvements, specifically in enhancing the cleanliness and comfort of waiting areas as well as modernizing medical equipment to support the provision of high-quality healthcare services..

Acknowledgments

I would like to thank Dr. Alamsyah, M. Pd, MM, MBA, and Dr. drg. Susanna Halim, Sert. KGI, FISID, FICD, AIFO-K, AIFO-P, AIFMO-U, M. BIOMED (AAAM), MKM (MARS), as my supervising lecturers who have provided guidance, direction, and support during the writing of this article.

Author Contributions

The composition of this written work is facilitated by the guidance of two supervisors, namely Dr. Alamsyah, M. Pd, MM, MBA, and Dr. drg. Susanna Halim, Sert. KGI, FISID, FICD, AIFO-K, AIFO-P, AIFMO-U, M. BIOMED (AAAM), MKM (MARS), for data validation and data analysis.

Funding

This research did not receive external funding.

Conflicts of Interest

The authors hereby declare that there are no conflicts of interest associated with the research and its publication. No financial, personal, or professional relationships have influenced the content or findings of this study. The authors have disclosed all relevant information and affirm that the research was conducted with integrity and impartiality, free from any external influences that could potentially compromise its objectivity.

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