

The Effect of Service Quality and Operational Benevolence on Patient Satisfaction and Their Interest in Re-Hospitalization

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ABSTRACT

Enhancement of development and competitive healthcare industry, particularly in the hospital for the recent years in Banjarmasin requires the healthcare in giving their best service to retain the customers. Bed Occupancy Rate at Suaka Insan Hospital is below of Indonesian Ministry of Health standard (60-85%) and decreased over the past 3 years. The patient satisfaction with the quality and operational benevolence of officers is less than 80%. Re-hospitalized patients decrease by 13.11%. This study aims to analyze the effect of service quality and operational benevolence on patient satisfaction and their interest in re-hospitalization. This study is a quantitative research using cross-sectional approach. The sample was taken using purposive sampling with a total of 196 participants. The data was collected and analyzed using questionnaires and SmartPLS. The results indicated that Suaka Insan Hospital Banjarmasin had a high service quality (98.98%), high operational benevolence (98.98%), high satisfaction rate (98.47%), and high interest in re-hospitalization (91.33%). There was an influence of service quality to patient satisfaction (6.43), operational benevolence to patient satisfaction (4.85), and satisfaction on the interest of re-hospitalization (2.86). There was no influence of service quality on the interest of re-hospitalization (0.69) and operational benevolence on the interest of re-hospitalization (1.58).

Keywords: *Service quality, operational benevolence, patient satisfaction, interest in re-hospitalized*

INTRODUCTION

In an increasingly of the competitive health service environment, particularly in the hospital, has taken its place for the recent years. Including in Banjarmasin, this situation ensued competition for hospitals in giving their best service to the patients.^{1,2} Suaka Insan Hospital is one of the private hospitals, which finances its own operational costs to maintain its existence. A hospital's existence is obtained from the service of re-hospitalization. Bed Occupancy Rate (BOR) is now below the standard of Indonesia Ministry of Health

60-85%, and it has decreased for the last 3 years: 65% (2014), 54% (2015), and 50% (2016). This condition is due to the competition among hospitals with a target market that is more or less the same, and also due to the Health Insurance Agency (BPJS) that resulting in the distribution of the patients.^{3,4,5}

The intense competition between hospitals requires the hospitals to provide their best service to the patients in order for gaining the patient's loyalty. Loyalty can be obtained if necessary, the patient being re-hospitalizes. Their interest in re-hospitalization is a tendency to re-purchase and it is very important because it leads to the patients' loyalty. One of the decisive factors for their interest in re-purchase is by establishing their satisfaction.^{6,7,8} Re-hospitalization at Suaka Insan Hospital Banjarmasin has decreased by 13,11% compared in 2015. While the survey has proved that re-hospitalized patient satisfaction at Suaka Insan Hospital

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in 2016 showed that the index of patient satisfaction concerning the quality of service at Suaka Insan Hospital is less than 80%.³

The patient would assess the hospital’s service quality that leads to their satisfaction and eventually their loyalty. The patients’ satisfaction and loyalty can also be affected by operational benevolence and that is the amiability felt by the patient. Based on the previous research, Private Hospital Banjarmasin in 2015 indicated that in-patient satisfaction and loyalty are strongly influenced by operational benevolence.¹⁰ Based on those problems, it is important to analyze the effect of service quality and operational benevolence on patient satisfaction and their interest in re-hospitalization at Suaka Insan Hospital Banjarmasin.

MATERIALS AND METHOD

This study is a quantitative research using cross-sectional approach. The sample was taken using purposive sampling with a total of 196 participants. The independent variables are service quality and operational benevolence. The dependent variables are patient satisfaction and interest in re-hospitalization. The data was collected using questionnaires. SmartPLS version 2.0 was used in analyzing the data.

FINDINGS

Table 1. The Characteristic of Respondent

Characteristics	F	%
Age		
18 – 65 (Adult)	183	93.37%
66 – 79 (Middle Age)	10	5.10%
80 – 99 (Seniors)	3	1.53%

Cont... Table 1. The Characteristic of Respondent

>100 years old (Long-lived Seniors)	0	0.00%
Gender		
Male	80	40.82%
Female	116	59.18%
Educational Background		
Primary School	27	13.78%
Junior High School	31	15.82%
High School	55	28.06%
Post-Secondary School	64	32.65%
Others	19	9.69%
Occupations		
Civil Servants	21	10.71%
Entrepreneur	55	28.06%
Private Employees	30	15.31%
Soldiers	1	0.51%
Police	1	0.51%
Unemployed/others	88	44.90%
Health Insurance Ownership		
None	117	59.69%
Health insurance	55	28.06%
Other insurance	18	9.18%
Health insurance and other insurance	6	3.06%

Based on table 1. it was known that 98.47% patients who assessed the high quality of service had a high level of satisfaction. Based on the statistical test using SmartPLS version 2.0. the t score can be obtained as follows:

Table 2. The Hypothesis Test’ Results Based On The Output of T Statistic Inner Model

	Service Quality (X1)	Operational Benevolence (X2)	Satisfaction (Y1)	Interest in Re-hospitalization (Y2)
Service Quality (X1)			6.429857	0.689406
Operational Benevolence (X2)			4.848031	1.584408
Satisfaction (Y1)				2.860595
Interest in Re-hospitalization (Y2)				

Table 3. The frequency of Operational Benevolence, Service Quality, and Satisfactory Affecting Patient Satisfaction and Re-Hospitalized Interest

Operational Benevolence	Satisfaction				Total	
	High		Low			
	F	%	F	%	F	%
High	192	97.96%	2	1.02%	194	98.98%
Low	1	0.51%	1	0.51%	2	1.02%
Service Quality	Re-Hospitalized Interest					
High	179	91.33%	15	7.65%	194	98.98%
Low	0	0.00%	2	1.02%	2	1.02%
Operational Benevolence	Re-Hospitalized Interest					
High	179	91.33%	15	7.65%	194	98.98%
Low	0	0.00%	2	1.02%	2	1.02%
Satisfactory	Re-Hospitalized Interest					
High	179	91.33%	14	7.14%	193	98.47%
Low	0	0.00%	3	1.53%	3	1.53%

Table 4. R Square Value on SmartPLS Test Output

	R Square
Satisfaction (Y1)	0.832685
Service Quality (X1)	
Re-Hospitalization Interest (Y2)	0.430386
Operational Benevolence (X2)	

F test was done by using formula $F_0 = \frac{R^2 (n-k-1)R^2 (n-k-1)}{k(1-R^2) k(1-R^2)}$

Note:

R = R Square value

n = Total sample

k = Total variable (independent and dependent)

The F Score value (114.711) > F Table (3.04) which means that quality service and operational benevolence influence patients' satisfaction altogether. The amount of the influence could be seen on R Square value (Table 4) which according to Chin (1998). R Square scored 0.67 is strong. Scored 0.33 is moderate and scored 0.19 is weak. Based on the result of the statistical test, quality service and operational benevolence had strong influence altogether (0.832685) or 83.26% towards

the patients' satisfaction. Meanwhile, quality service, operational benevolence, and patients' satisfaction had moderate influence (0.430386) or 43.05% towards re-hospitalization interest.

DISCUSSION

The results of the test (Table 2) showed that t statistic (6.43) > t-table (1.97) which meant significant, and indicated that service quality had an effect on the patient satisfaction. This was in accordance with the research that was conducted by Nugraha (2017) that explained there was a significant effect between service quality and the patient satisfaction at Fatimah Maternity Hospital in Bandung.¹¹

Quality is the key factor that affected the patient satisfaction. When patients assess the quality of service,

they compare it with an internal standard before and after the service. The internal standard in assessing that quality is the expectation of the patient. After using the service, the patient will compare it with the expectant quality and with what they have received. A discontent patient happened because of the gap between their expectation and their reality.⁸

Operational Benevolence Affecting Patient Satisfaction

Based on the result showed on Table 3. 97.96% of the respondents thought that high service quality had high satisfaction. The result of t statistic (4.85) > t-table (1.97) which means that it was significant and operational benevolence was influential to the hospitalized patients' satisfaction in Suaka Insan Hospital Banjarmasin (Table 3)

The result of this study was in accordance with a research done by Djohan (2015) that benevolence gave positive influence and very significant to the patients' satisfaction. It was three times bigger than other variables which were reputation and skill on private hospital in Banjarmasin.¹⁰

According to Bovee Houston (1995) in Djohan (2015) that service was a cooperation or participation of the customer during the service conveying, moral, staff motivation in serving the customer and company workload. The findings that there was a correlation between benevolence with the satisfaction means that staff's skills in therapy, interpersonal communication, kindness, politeness, and patience could give essential meaning to the patient who an unappreciated person. According to Djohan (2015), operational benevolence had the biggest influence to the satisfaction or credibility of patients. This statement was supported by a research done by Lesmanawati (2017) who stated that if patients' evaluation to the operational benevolence attribute including prioritizing patients, honesty, sincerity, and care was getting higher, the satisfaction of the patients also would go higher.^{10,12}

Service Quality Affecting Re-Hospitalization Interest

Based on the result showed on Table 3. 91.33% of the respondents who thought that high service quality had high re-hospitalization interest. However, some respondents who thought that high service quality had

low re-hospitalization interest as 7.65% (Table 3) which is bigger than the inequality percentage of tabulation result around 0.51% - 7.14%.

The result of the statistical test showed that t-statistic score (0.68) < t-table (1.97) which means that it was insignificant and the service quality was not influential to re-hospitalization interest on a hospitalized patient in Suaka Insan Hospital Banjarmasin. The result of this study is not in accordance with a research done by Yulistia (2017) who stated that there was positive and significant influence directly between the service quality towards re-hospitalized interest on patients in Hospitalization Service of Daerah Haji Public Hospital Makassar.¹³

Purchasing service decision on this matter is that hospital service done based on balance evaluation of cost, value, and quality. Patients decided to use the service which they needed based on their needs, and component considering component cost, the additional value of components and components quality.¹⁴

Based on a study done by Suhendro (2014), there were many variables which influenced the interest of purchasing or re-hospitalization on patients. They are the satisfaction of the patient himself, service quality, cost and hospital's image. Patients' perceptions of the cost were related to the re-hospitalization interest. The decline of patients visits showed that the hospital's marketing strategy did not go really well so re-hospitalization interest became low. Although in this study the re-hospitalization interest in Suaka Insan Hospital Banjarmasin was still high, the loyalty remained unseen.¹⁵

Re-hospitalization interest was influenced by many factors which were product quality, cost, promotion, human resources, place, and process. Therefore, although the service quality of Suaka Insan Hospital Banjarmasin was high, it remained unsure that re-hospitalization interest on hospitalized patients who needed re-hospitalization and the reality would be parallel because there were other factors that might influence patients internally and externally. The factors from the hospital were workforce, examination cost, physical building condition, and service quality. Meanwhile, other external factors were that other health facilities kept appearing so it was caused a strict competition. This matter was also stated by Kotler that the consumers' or patients' decision

to re-hospitalize was influenced by the perception of patients to the cost spent.^{8,13,15}

Operational Benevolence Affecting Re-Hospitalization Interest

Based on the result showed on Table 3. although 91.33% of the respondents who thought that high operational benevolence had high re-hospitalization interest and although there were respondents who thought that high operational benevolence had low re-hospitalization interest as 7.65% (Table 3). It was bigger than the percentage of inequality in the result which was about 0.51% - 7.14%. The statistical test result showed that $t\text{-statistic} (1.58) < t\text{-table} (1.97)$ which means that it was insignificant and operational benevolence did not give any influence to re-hospitalization interest on hospitalized patients in Suaka Insan Hospital Banjarmasin.

Gymnastiar in Djohan (2015) stated that people would look for an honest and trustworthy partner. The honesty here was the part of operational benevolence. Besides, the kindness of the staff showed on sincerity, care, and prioritizing patients surely became a special value to the patients. Nowadays, the value had already changed. The main value was a spiritual value which led to patients' satisfaction. It also happened with operational benevolence in spiritual-dimension-health service. It would increase patients' satisfaction which was the same as the result of this study. However, the direct influence between operational benevolence to the interest of re-hospitalization was not approved in this study. It could be caused by another internal and external factor which gave influence to the interest of re-hospitalization on hospitalized patients in Suaka Insan Hospital Banjarmasin.¹⁰

Patient Satisfaction Affecting Re-Hospitalization Interest

Based on the result shown in Table 3. 91.33% of the respondents with high satisfaction also had the high interest of re-hospitalization and 1.53% of the respondents with low satisfaction had the low interest of re-hospitalization. The result of statistic test showed $t\text{-statistic} (2.86) > t\text{-table} (1.97)$ which was significant. It showed that satisfaction gave influence to the interest of re-hospitalization on hospitalized patients in Suaka Insan Banjarmasin Hospital. The result of the study was in accordance with a research done by Kusniati

(2016) which the patients' satisfaction gave positive and significant influence to the interest of re-hospitalization in Islam Sunan Kudus Hospital Semarang.¹⁶

CONCLUSION

Service quality is influential to the patients' satisfaction on hospitalized patients in Suaka Insan Hospital Banjarmasin.

Operational benevolence is influential to the patients' satisfaction on hospitalized patients in Suaka Insan Hospital Banjarmasin.

Service quality is not influential to the re-hospitalization interest on hospitalized patients in Suaka Insan Hospital Banjarmasin.

Operational benevolence is not influential to the re-hospitalization interest on hospitalized patients in Suaka Insan Hospital Banjarmasin.

Satisfaction is influential to the re-hospitalization interest on hospitalized patients in Suaka Insan Hospital Banjarmasin.

Ethical Clearance: Before conducting the data retrieval, the researchers conducted a decent test of ethics conducted at the Faculty of Medicine, Lambung Mangkurat University to determine that this study has met the feasibility. Information on an ethical test that the study is eligible to continue. The feasibility of the research was conducted in an effort to protect the human rights and security of research subjects.

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Conflict of Interest: The authors declare that they have no conflict interests.

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