

The Effect of Service Quality

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Submission date: 09-Mar-2023 11:15AM (UTC+0700)

Submission ID: 2032701269

File name: The_Effect_of_Service_Quality.pdf (1.16M)

Word count: 4512

Character count: 25490

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THE EFFECT OF SERVICE QUALITY AND NURSE THERAPY COMMUNICATION ON COMPLAINTS HANDLING TOWARDS PATIENT LOYALTY WITH INTERVENING BY PATIENT FAMILY SATISFACTION

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Abstract— Hospital services are an industry based on practical economic principles, efficiency, effectiveness, indicators of patient service quality lie in five dimensions, namely Reliability, Tangibles, Responsivness, Assurance and Empathy. The behavior of using health services in hospitals solely concerns users of the same hospital health services repeatedly. The purpose of this study was to see the direct and indirect relationship between service quality and therapeutic communication in handling complaints against patient loyalty with patient family satisfaction as an intervening variable. This study uses quantitative methods, an analysis using path analysis, Smart PLS software, and the bootstrapping method (random doubling). The technique used is non-probability sampling with a purposive sampling approach. The results showed that (52%) nurses used therapeutic communication well, and (45%) less well. From the results of the hypothesis test, the t-statistical value of 2.265 > 1.98 with a p-value of 0.024 < 0.05 showed that the effect of nurse therapeutic communication on handling complaints on patient family satisfaction was significant. and the t-statistic value was 2.653 > 1.98 with a p-value of 0.008 < 0.05, indicating the effect of nurse therapeutic communication on handling complaints on patient loyalty was significant. and the t-statistic value of 2.347 > 1.98 with a p-value of 0.019 < 0.05, indicating that the indirect effect of nurse therapeutic communication on handling complaints on patient loyalty through patient family satisfaction is significant.

Keywords— Service Quality, Patient Family Satisfaction, Nurse Therapeutic Communication, Patient Loyalty.

1. Introduction

Hospital services are an industry based on practical economic principles, based on ethics and morals, and are required to pay attention to the principles of equity, efficiency, effectiveness and service quality, and customer satisfaction both internally and externally. According to Pasuraman (2002), indicators of patient service quality lie in five dimensions, namely Reliability, Tangibles, Responsiveness, Assurance, and Empathy. There is Therapeutic Communication, namely the ability of health workers to provide communication to accelerate the healing of patients. According to Kotler (2003), service orientation to customers will work well if the company shifts its marketing paradigm by building relationships.

The concept of this relationship is needed where a hospital is supported. Even though it has been supported by quite sophisticated medical equipment, the phenomenon of patient and family complaints still occurs in several hospitals; the obstacle is usually because there are still hospitals that forget the importance of the presence of human resources (Source). Human Resources) who must have the ability or competence in communication for both patients and their families.

The lack of good communication between health workers and patient carriers will result in complaints and dissatisfaction of the patient's family and even lead to prosecution in the Emergency Room. Become their responsibility, as patients and families complain of slow and often neglected services. Patients who enter the emergency department cannot predict their condition, number, and time. The perceived quality of service is lacking from the complaints of patients and their families who need treatment, which often gets unsatisfactory service so that routine checks of all patients are not carried out correctly.

Thus the importance of communication is needed communication that is oriented towards accelerating the patient's recovery, as stated by Abdul Haris (2007), which is called therapeutic communication. If therapeutic communication is achieved, it is expected that patient satisfaction will arise with the quality of services provided in the emergency department.

Wahyoedi and Winoto (2018) explain that good service quality is a service that can meet customer expectations, which will later be able to create customer loyalty. This is because it can hold customers to commit to buying goods and services in the future. The quality of services provided to patients and their families in the Emergency Room reflects a picture of the quality of the hospital, and loyalty to hospital services describes the psychological commitment of the patient and the introduction of patients using ER services. As well as, the behavior of using health services in hospitals solely concerns users of the same hospital health services repeatedly.

2. Research Method

This study uses quantitative methods to determine the effect of service quality and therapeutic communication on complaint handling patient family satisfaction and patient loyalty in the ER with patient satisfaction as an intervening. Partial Least Square (PLS) analysis technique is used. PLS is a Structural Equation Modeling (SEM) equation model with a variance approach or component-based structural equation modeling with the bootstrapping method (random doubling). Ghozali & Latan (2015).

3. Result and Discussion

Characteristics of Respondents

Table 1.

Distribution of gender, age, marital status, education, income, and respondents' use of services			
No	Gender	Total Respondent	%
1	Female	67	58,3%
2	Male	48	41,7%
Total		115	100%

No	Age	Total Respondent	%
1	<20 years	6	5,2%
2	20-30 years	35	30,4%
3	31-40 years	33	28,7%
4	>40 years	41	35,7%
Total		115	100%

No	Marital Status	Total Respondent	%
1	Married	98	85,2%
2	Single	17	14,8%
Total		115	100%

No	Education Level	Total Respondent	%
1	Primary school	7	6,1%
2	Junior high school	23	20,0%
3	Senior High School	65	56,5%
4	Diploma	5	4,3%
5	Undergraduate	15	13,0%
Total		115	100%

No	Income / Month	Total Respondent	%
1	<500.000	15	13,1%
2	500.000 – 1.000.000	24	20,9%
3	1.000.000 – 2.000.000	25	21,7%
4	>2.000.000	51	44,3%
Total		115	100%

No	Use of Tangerang City Hospital Services	Total Respondent	%
1	1 time	53	46,1%
2	2 times	20	17,4%
3	3 times	15	13,0%
4	Etc	27	23,5%
Total		115	100%

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Source: Primary Data (2021)

In Table 1 above, from the grouping results, it can be seen that there are more female respondents, namely, at 58.3%, the average waiting age for patients is over 21 years, and is married, with an average high school education of 85%. On average, they have more income. from Rp. 2,000,000, - around 51%, the average patient waits for treatment at the Tangerang City Hospital > from 2x, namely 53.9%. From the table here, we can see that the patient's family has started to feel the quality of service at the Tangerang City Hospital, with the value of returning for treatment to the Tangerang City Hospital > from 2x, indicating that many patients are satisfied, so they try to come back for treatment and even take their families.

Table 2.

Grouping of opinions according to respondents about service quality			
No	Service Quality	Total Respondent	%
1	Good	18	16%
2	Moderate	69	60%
3	Low	28	24%
Total		115	100%

Source: Primary Data (2021)

In table 2 above, of the 115 respondents who participated in this study, 69 respondents thought that the quality of service in the IGD of the Tangerang City Hospital was entirely good or occupied a portion of 60%, and 16% occupied a good portion. The remaining 24% are not good.

Table 3.

Grouping of respondents' opinions about nurses' therapeutic communication in handling complaints in the IGD of Tangerang City Hospital

No	Nurse Therapeutic Communication	Total Respondent	%
1	Good	63	55%
2	Low	52	45%
Total		115	100%

Source: Primary Data (2021)

In table 3 above, of the 115 respondents who participated in this study, there are 55% of respondents think that nurses' therapeutic communication in handling complaints in the Emergency Room RSUD Kota Tangerang is still lacking, and 45% of respondents think that nurses' therapeutic communication in handling complaints in the ER, Tangerang City Hospital, it is good.

Table 4.

Grouping of respondents' opinions about patient's family satisfaction in the IGD of Tangerang City Hospital

No	Patient Family Satisfaction	Total Respondent	%
1	Satisfied	68	59%
2	Unsatisfied	47	41%
Total		115	100%

Source: Primary Data (2021)

In table 4. above, of the 115 respondents who participated in this study, there were 59% of respondents said they were satisfied with the services at the Tangerang City Hospital Emergency Room, and 41% of respondents said they were not satisfied with the services at the Tangerang City Hospital Emergency Room.

Table 5.

Grouping of respondents' opinions about patient's family satisfaction in the IGD of Tangerang City Hospital

No	Patient Loyalty	Total Respondent	%
1	Good	60	52%
2	Low	55	48%
Total		115	100%

Source: Primary Data (2021)

In table 5 above, of the 115 respondents who participated in this study, there were 52% of respondents who stated that they were loyal to the services at the ER at the Tangerang City Hospital and 48% of the respondents who stated that they were less loyal to the services at the ER at the City Hospital.

Hypothesis Test Results

A hypothesis test can be analyzed based on the value of t-statistics and the value of probability or significance (p-value); these values can be seen from bootstrapping results. Hypothesis testing will be carried out by analyzing direct and indirect effects (mediation). Figure 1 below is the construction of the results using the bootstrapping method.

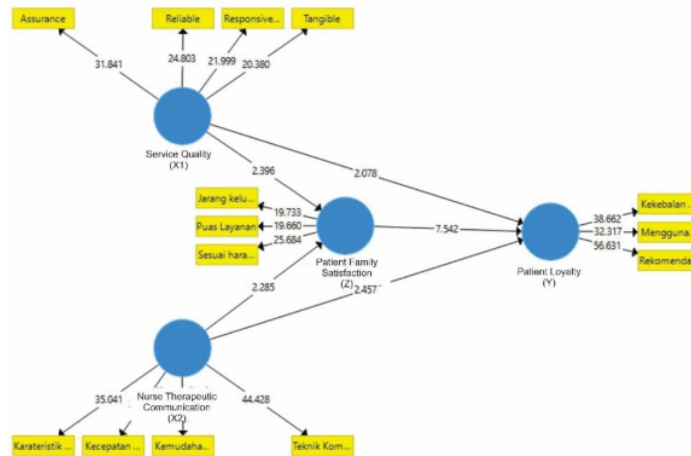


Figure 1. Construct Model
Source: SmartPLS (2021)

Direct Effect

The hypothesis will be accepted if the t-statistic value is > 1.98 or the p-value significance level is < 0.05 (5%) with a positive coefficient. The following is the value of the direct effect of bootstrapping results.

Table 6.
Direct Effect Results

Construct	Coefficient	t-statistics	p-value
Service Quality – Patient Family Satisfaction	0,398	2,355	0,019
Nurse's therapeutic communication – Patient Family Satisfaction.	0,404	2,265	0,024
Quality of Service – Patient Loyalty	0,174	2,212	0,027
Nurse therapeutic communication – Patient Loyalty	0,232	2,653	0,008
Patient Family Satisfaction – Patient Loyalty	0,577	7,410	0,000

Source: SmartPLS (2021)

There are 5 direct influence hypotheses tested in this study, namely:

- First Hypothesis: Service Quality has a positive effect on Patient Family Satisfaction.
In table 6. above, the coefficient value for service quality on patient family satisfaction is 0.398, indicating that there is a positive effect of service quality on patient family satisfaction, and the t-statistic value is $2.355 > 1.98$ with a p-value of $0.019 < 0.05$ indicating the effect of service quality on patient family satisfaction is significant, so there is sufficient evidence to state service quality is significant and positive on patient family satisfaction. Thus the first hypothesis in this study can be accepted.
- Second Hypothesis: A nurse's therapeutic communication in handling complaints positively affects Patient Family Satisfaction.
In table 6. above, the magnitude of the coefficient value for service quality on patient family satisfaction is 0.404, indicating a positive effect of nurse therapeutic communication on handling complaints on patient family satisfaction. The t-statistic value is $2.265 > 1.98$ with a p-value of $0.024 < 0.05$ shows the effect of nurse therapeutic communication on handling complaints on patient family satisfaction is significant, so there is sufficient evidence to state that nurse therapeutic communication on complaint handling is significant and positive on patient family satisfaction. Thus the second hypothesis in this study can be accepted.

- c. Third Hypothesis: Service Quality has a positive effect on Patient Loyalty.
 In table 6. above, the magnitude of the coefficient value for Service Quality on patient loyalty is 0.174, indicating that there is a positive effect of service quality on patient loyalty, and the t-statistic value is $2.212 > 1.98$ with a p-value of $0.027 < 0.05$ indicating the effect of quality service to patient loyalty is significant, so there is sufficient evidence to state service quality is significant and positive on patient loyalty. Thus the third hypothesis in this study can be accepted.
- d. Fourth Hypothesis: A nurse's therapeutic communication in handling complaints positively affects patient loyalty.
 In table 6. above, the coefficient value for nurse therapeutic communication in handling complaints on patient loyalty is 0.232, indicating an effect of nurse therapeutic communication in handling complain on patient loyalty. The t-statistic value is $2.653 > 1.98$ with a p-value of $0.008 < 0.05$ indicates the effect of nurse therapeutic communication on handling complaints on patient loyalty is significant, so there is sufficient evidence to state that nurse therapeutic communication on complaint handling has a significant and positive effect on patient loyalty. Thus the fourth hypothesis in this study can be accepted.
- e. Fifth hypothesis: Patient's family satisfaction has a positive effect on patient loyalty
 In table 6. above, the coefficient value for Patient Family Satisfaction on patient loyalty is 0.577 indicating a positive effect of Patient Family Satisfaction on patient loyalty, and the t-statistic value is $7.410 > 1.98$ with a p-value of $0.000 < 0.05$ indicating the effect of satisfaction The patient's family on patient loyalty is significant, so there is sufficient evidence to state that patient's family satisfaction has a significant and positive effect on patient loyalty. Thus the fifth hypothesis in this study can be accepted.

Indirect Effect

The role of the mediator can also be seen from the significance of the indirect effect; the following is the value of the indirect effect of bootstrapping results.

Table 7.
 Indirect Effect Results

Construct	Coefficient	t-statistics	p-value
Service Quality → Patient Family Satisfaction → Patient Loyalty	0.230	2.186	0.029
Nurse's therapeutic communication → Patient Family Satisfaction → Patient Loyalty	0.233	2.347	0.019

Source: SmartPLS (2021)

There are two indirect influence hypotheses tested in this study, namely:

- a. Sixth hypothesis: Service quality positively affects patient loyalty with patient family satisfaction as an intervening.
 In table 7. above, the coefficient value for Service Quality on patient loyalty through patient family satisfaction is 0.230, indicating a positive indirect effect on service quality on patient loyalty through patient family satisfaction. The t-statistic value is $2.186 > 1.98$ with a p-value -value $0.029 < 0.05$ indicates that the indirect effect of service quality on patient loyalty through patient family satisfaction is significant, so there is sufficient evidence to state that patient family satisfaction mediates a significant and positive relationship between service quality and patient loyalty. Thus the sixth hypothesis in this study can be accepted.
- b. The seventh hypothesis: Therapeutic communication of nurses in handling complaints positively affects patient loyalty with patient family satisfaction as an intervening.

Table 7 above shows the coefficient value for nurse therapeutic communication in handling complaints on patient loyalty through patient family satisfaction is 0.233. The t-statistic value is $2.347 > 1.98$ with a p-value of $0.019 < 0.05$, indicating the indirect effect of therapeutic communication nurses in handling complaints on patient loyalty through patient family satisfaction is significant, so there is sufficient evidence to state that patient family satisfaction mediates significantly and positively the relationship of nurse therapeutic communication in handling complaints on patient loyalty. Thus the seventh hypothesis in this study can be accepted.

4. Conclusion

Based on data analysis and findings, the following conclusions can be drawn:

- a. Service quality has a significant and positive effect on patient family satisfaction, meaning that if the service quality improves, the patient's family satisfaction will increase. Service quality plays an



- essential role in nursing care services in hospitals; consumer expectations are what is received according to their wishes and expectations. If the quality of service is not by the wishes and expectations, it will impact reducing the level of satisfaction. ⁹
- b. Therapeutic communication of nurses in handling complaints has a significant and positive effect on patient family satisfaction, meaning that therapeutic communication has a calming effect for patients and families, meaning that a nurse must be able to carry out therapeutic communication because therapeutic communication is one way to provide accurate information, foster mutual trust, and calm so that the client is satisfied with the service received. ²⁵ poor therapeutic communication will result in the number of family complaints increasing so that it will have an impact on the level of patient and family satisfaction will decrease due to the service they receive does not match their expectations ⁶ and expectations
 - c. Service quality has a significant and positive effect on patient loyalty, meaning that if the service quality is getting better, then patient loyalty will increase. The loyalty shown is loyalty to hospitals that use health services repeatedly at the hospital, then wish to recommend their services to others. If the quality of service decreases, it can impact reducing patient loyalty.
 - d. Therapeutic communication of nurses in handling complaints has a significant and positive effect on patient loyalty, meaning that if the therapeutic communication of nurses is good, especially when receiving complaints from patients or their families, patient loyalty will increase. Complaints can reflect service with active feedback, one of the handling is by conducting therapeutic communication to patients and their families to create patient loyalty. If therapeutic communication is terrible, it can ⁷ impact reducing patient loyalty.
 - e. Patient family satisfaction has a significant and positive effect on patient loyalty, meaning that if the patient's family satisfaction increases, then patient loyalty will increase. It can be seen from the results of the examination of respondents' characteristics regarding the distribution of service use more than once, covering approximately 53 percent, this shows the meaning of satisfaction patient is high enough. ¹⁶ This means that the services provided at the IGD of the Tangerang City Hospital have been able to meet their needs and desires or can provide satisfaction, then in the future, there will be repetition, even further, satisfied patients will convey their sense of satisfaction to others, both in the form of stories. Of mouth), or provide recommendations. Furthermore, vice versa, if satisfaction is ⁹ not achieved, it can impact reducing patient loyalty. ⁸
 - f. Service quality has a significant and positive effect on patient loyalty mediated by patient family satisfaction, meaning that satisfaction plays a vital role in service quality in influencing patient loyalty. They will convey the satisfaction from the quality of service they feel in the ER to the patient, so that loyalty will be formed for the patient and their family in the form of not turning to go to another hospital, even recommending it to their friends or neighbors. Conversely, if the quality of service decreases, it will decrease patient loyalty through decreased satisfaction. ⁸
 - g. Therapeutic communication in handling complaints has a significant and positive effect on patient loyalty mediated by patient family satisfaction, meaning that satisfaction plays a vital role in nurse therapeutic communication in handling complaints and influencing patient loyalty. With good communication quality, any information provided by nurses will be well received by patients and families so that patients can feel satisfied and return to the hospital to use health services. Conversely, if the nurse's therapeutic communication in handling complaints is terrible, it will decrease patient loyalty through decreased satisfaction.
 - h. For further research interested in developing this research, it is recommended to develop other variables related to patient loyalty which can have direct implications for choosing a place to get health services at the hospital. This is because around the Tangerang ²⁸ Hospital and several competing private hospitals can be an alternative for patients if they are not satisfied with the ⁷ services provided by health workers at Tangerang City Hospital.
 - a. The population of this study ¹⁰ the general public who come to visit the emergency room of the Tangerang City Hospital; it is hoped that further research can expand the coverage area in population collection, and it is also recommended to increase the number of samples in the study so that it can better represent the actual situation.

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