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Relationship Quality Of Health Services With Patient Satisfaction At Lancirang Health Center

Mesyia Alfinia * 1, Zulkarnain Sulaiman 2, Khaeriyah Adri 3

- ¹ Health Administration, Faculty of Health Sciences, Universitas Muhammadiyah Sidenreng Rappang
- ² Health Administration, Faculty of Health Sciences, Universitas Muhammadiyah Sidenreng Rappang
- ³ Health Administration, Faculty of Health Sciences, Universitas Muhammadiyah Sidenreng Rappang

Author's Email Correspondence (*): alfiniamesyia04@gmail.com (085394617825)

ABSTRACT

Patient satisfaction is an important indicator in assessing the success of health services, which is not always in line with the quality of services provided. In Lancirang Health Center itself, although the quality of service is relatively good, patient satisfaction in 2023 only reached 63.3%, still below the national target of 95%. This study aims to determine the relationship between the quality of health services consisting of five dimensions (reliability, assurance, tangible evidence, empathy, and responsiveness) with patient satisfaction. This study uses the quantitative method with a cross-sectional design. The random sampling technique was used with a total of 218 respondents. Data were collected through observation, questionnaires, interviews, and documentation, then analyzed using the chi-square test. The results showed that each dimension of service quality had a significant relationship with patient satisfaction, with a p value <0.05. The reliability dimension showed that 96.2% of patients who considered the service reliable were satisfied. Likewise, in the dimensions of assurance, tangible evidence, empathy, and responsiveness, the majority of respondents who rated the service as good in each of these aspects were satisfied. These findings suggest that the service received by patients has a direct effect on their satisfaction. The authors found that there was a statistically significant correlation between health service quality and patient satisfaction at Lancirang Health Center.

Keywords: Quality of health services; patient satisfaction; health centers

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INTRODUCTION

Healthcare quality is an important pillar of the global health system. Developed countries such as Sweden and Norway record patient satisfaction rates above 90%, demonstrating the importance of responsive, high-quality care.(1) In contrast, in developing countries such as Kenya and India, patient satisfaction rates are low, reaching only 40.4% and 34.4% respectively.(2) In Southeast Asia, surveys show that only 35% of patients are satisfied with the care they receive.(3)

Similar conditions also occur in Indonesia. Despite various quality improvement efforts, the level of patient satisfaction in 2023 is still in the range of 42.8% to 70%, far from the national target of 95%.(4) One of the causes is the difference in patient perceptions of medical and non-medical services received. Aspects such as staff communication, facility comfort, and speed of service play an important role in shaping patient satisfaction.(5)

Several studies in Indonesia show that dimensions of service quality, such as reliability, assurance, tangibles, empathy, and responsiveness have a significant relationship with patient satisfaction.(6)(7) However, the results of these studies often vary between locations. For example, in the puskesmas dimension, not all aspects of service quality have a correlation with patient satisfaction.(8) In contrast, in the community health center, all dimensions have a significant influence.(9)

The Indonesian Ministry of Health has established Permenkes No. 30 of 2022 as a guideline for strengthening service quality through national indicators, including patient satisfaction indicators.(10) However, its implementation still addresses challenges, especially in regions such as South Sulawesi, where the patient satisfaction rate in 2023 only reached 58%.(11)

In Sidrap District, Puskesmas Lancirang recorded a patient satisfaction rate of 63.3% in 2023, despite generally good service quality. The discrepancy between service quality and satisfaction indicates certain problems such as aspects of staff



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communication, waiting time, and facility conditions.(12) If not addressed immediately, this could hinder the achievement of national targets and reduce public trust in health center services.

Based on this background, The objective of this study was to assess the association of health quality service with patient satisfaction in the Lancirang health center working area, using the Servqual dimension approach as the basis for quality evaluation.

METHODS

This study was a quantitative study with an analytic survey design using a cross-sectional approach. The research was conducted at Lancirang Health Center, Pitu Riawa District, Sidenreng Rappang Regency, South Sulawesi, from January to March 2025. Population was all of patients that accessed Lancirang Health Center services, with a sample size of 218 respondents obtained through random sampling techniques. Sample selection was randomized based on the odd queue number of patients during the study period.

Data collection was conducted through four techniques: direct observation, questionnaire distribution, interviews, and documentation. Primary data was obtained from the results of filling out questionnaires and also from interviews, while supporting the data was obtained from internal reports of the health center and other supporting documents. Data processing and analysis were carried out with the help of SPSS software. The univariate test was used to describe the characteristics of the respondents, while the bivariate chi-square method was used to test the relationship between the dimensions of service quality (reliability, assurance, tangible evidence, empathy, and responsiveness) and patient satisfaction. The results of the analysis are presented in the form of tables and narrative descriptions to provide an overall picture of the research findings.



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RESULTS

This study was conducted on 218 respondents who were patients of Lancirang Health Center. The characteristics of the respondents showed that most were female (69.7%) and were in the age range above 50 years (27.1%). In terms of education, most respondents were elementary/junior high school graduates (52.3%) and the majority had visited the health center 1-3 times (34.4%).

Table 1
Respondent Characteristics

Respondent Characteristics					
Characteristics of Respondents	N	%			
Gender					
Male	66	30,3			
Female	152	69,7			
Ages					
< 20 years	32	14,7			
21-30 years	45	20,6			
31-40 years	47	21,6			
41-50 years	35	16,1			
> 50 years	59	27,1			
Last Education					
Elementary/Middle School	114	52,3			
High School/Vocational	91	41,7			
Diploma / Bachelor's Degree	9	4,1			
Postgraduate	3	1,4			
Others	1	0,5			
Visit to Health Center					
The First-time	34	15,6			
1 - 3 Views	75	34,4			
4 - 6 Views	47	21,6			
Over 6 Times	51	23,4			
Every Month	11	5,0			

Source: Primary Data, 2025

Univariate analysis showed that 87.2% of respondents were satisfied with the services they received. This indicates that in general, quality services at Lancirang Health Center have met the expectations of most patients. However, there were still 12.8% who



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were dissatisfied, indicating the need for improvement in certain aspects of the service as described in Table 2.

Table 2
Distribution of Patient Satisfaction at Lancirang Health Center

	N	%
Patient Satisfaction		
Not Satisfied	28	12,8
Satisfied	190	87,2
In Total	218	100

Source: Primary Data, 2025

In the service quality dimension, most respondents rated the services at Lancirang Health Center as reliable (72%), guaranteed (80.3%), adequate in terms of facilities (78%), empathetic (81.7%), and responsive (79.8%). This shows that the five dimensions of quality measured in this study have generally been implemented well. can be seen in table 3.

Table 3
Distribution of Respondents' Perceptions of Service Quality Dimensions

Quality of Service	N	%
Reliability		
Reliable	157	72,0
Not Reliable	61	28,0
Assurance		
Guaranteed	175	80,3
Not Assured	43	19,7
Tangibles		
Adequate	170	78,0
Not Adequate	48	22,0
Empathy		
Empathic	178	81,7
Not Empathic	40	18,3
Responsiveness		
Responsive	174	79,8
Not Responsive	44	20,2

Source: Primary Data, 2025



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Bivariate analysis using the chi-square test showed that there was a relationship between all dimensions of service quality and patient satisfaction (p < 0.05). Patients who rated the service as reliable had a higher level of satisfaction than those who rated the service as unreliable. Similar findings were also seen in the assurance dimension, where patients who felt assured tended to be satisfied. Similarly, physical facilities, empathy of health workers, and speed and responsiveness in providing services all showed significant positive correlations with patient satisfaction, as can be seen in Table 4.

Table 4
Relationship between Service Quality Dimensions and Patient Satisfaction

Onality	Patient's Satisfaction			р-	
Quality Dimension	Not Satisfied		Satisfied		value
	N	%	N	%	
Reliability					
Not Reliable	22	36,1	39	63,9	0,000
Reliable	6	3,8	151	96,2	
Assurance					
Not Assured	22	51,2	21	48,8	0,000
Guaranteed	6	3,4	169	96,6	
Tangibles					
Not Adequate	21	43,8	27	56,3	0,000
Adequate	7	4,1	163	95,9	
Empathy					
Not Empathic	21	52,5	19	47,5	0,000
Empathic	7	3,9	171	96,1	
Responsiveness					
Not Responsive	20	45,5	24	54,5	0,000
Responsive	8	4,6	166	95,4	

Source: Primary Data, 2025

From these results, the quality dimensions that most affect satisfaction are empathy and assurance, both of which show a large contrast between satisfaction and dissatisfaction. This shows that a friendly attitude, clear explanations, and attention from the staff are instrumental in creating satisfaction with the service. Meanwhile, the tangible dimension is also important, but there is still room for improvement, especially in the comfort of the waiting room and other physical facilities.



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The results of the study involving 218 respondents at the Lancirang Health Center revealed that 87.2% of patients were satisfied with the services received. While this indicates a generally positive perception, the remaining 12.8% who expressed dissatisfaction highlight specific gaps in service delivery. Chi-square analysis confirmed significant correlations (p < 0.05) between each of the five service quality dimensions reliability, assurance, tangibles, empathy, and responsiveness—and patient satisfaction. Specifically, patients who perceived the services as reliable (96.2% satisfaction), assured (96.6%), empathetic (96.1%), responsive (95.4%), and supported by adequate tangibles (95.9%) were significantly more satisfied. These findings reinforce the multidimensional impact of perceived quality on satisfaction, underscoring the necessity of strengthening all aspects of service delivery.

DISCUSSION

The results of this study indicate that the quality of health services has a significant relationship with the level of patient satisfaction at Lancirang Health Center. The five dimensions described reliability, assurance, tangible evidence, empathy, and responsiveness contribute significantly in shaping patient perceptions of service quality. This finding strengthens the Servqual theory which states that service quality is measured based on the conformity between expectations and reality received by service users.(13)

The dimension of reliability or clarity is one of the important aspects that contribute greatly to patient satisfaction. Timeliness, accuracy of diagnosis, and consistency in service delivery are the main indicators in this dimension. This finding is in accordance with a research from Putri et all. (2022), who said that reliable and timely services increase patient trust and comfort in health care facilities. When patients feel that medical personnel are able to provide services professionally and according to procedures, they tend to feel more satisfied.(14)



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In the guarantee dimension, the competence of health workers, good communication skills, and courtesy are key factors in shaping satisfaction. Patients who get clear information and feel safe while undergoing services tend to give positive assessments. This is supported by the results of research by Devy Febrianti et al. (2023) which states that patient trust increases along with the quality of communication and professionalism of medical personnel.(15)

Tangible dimensions or physical evidence such as the condition of the waiting room, neatness of facilities, and completeness of medical equipment also show a significant influence on patient satisfaction. Comfortable and clean environmental services not only give a good impression, but also increase patient perceptions of overall service quality. Arif et al. (2024) also noted that good physical facilities are an important determinant in the formation of the patient's first impression of the services provided.(16)

The empathy dimension, which emphasizes the empathy that healthcare workers are capable of, which includes the care, concern, and sensitivity of healthcare workers to the patient's condition, was found to strongly influence satisfaction levels. When healthcare workers demonstrate an empathic attitude, patients feel valued and listened to, which results in a more positive service experience. These results are consistent with Adri et al.'s (2020) study, which emphasized that medical personnel empathy can improve patient adherence to treatment and strengthen the relationship between patients and providers.(17)

Meanwhile, the responsiveness dimension also proved to have a significant effect. The speed of response to patient needs and the readiness of officers to handle complaints are important indicators of responsive service. When patients feel served quickly and without delay, this creates a high sense of satisfaction. Research by Saharani et al. (2024) supports this finding, where speed of service is considered as one of the main determinants in assessing the quality of service in primary health facilities.(18)

Overall, the conclusions of this research confirm that perceptions of perceived service quality play an important role in shaping patient satisfaction levels. The



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dimensions of empathy and assurance are the most prominent aspects of influence at Lancirang Health Center. This suggests that the interpersonal and communication aspects of health workers are still key in building a good service experience at the primary care level. In addition, the alignment between good quality and suboptimal satisfaction indicates the need for further evaluation of technical details and humanistic approaches in service delivery.

This study confirms that patient satisfaction is heavily influenced by how well health services meet expectations in terms of communication, professionalism, and facility readiness. The empathy and assurance dimensions emerged as the strongest contributors to satisfaction, indicating that patients highly value emotional support and clear, respectful interaction with healthcare staff. However, despite generally high ratings in these areas, dissatisfaction persisted in 12.8% of respondents. This signals underlying issues, such as delays in service delivery, limited attention to patient complaints, or discomfort in the physical environment particularly in waiting areas. These issues may not have been fully captured by broad satisfaction metrics, highlighting the need for qualitative feedback mechanisms. The results also suggest that although service quality is perceived as good, patient expectations may continue to rise, especially in regions where healthcare access is improving.

CONCLUSIONS AND RECOMMENDATIONS

This study produces findings that show that the quality of health services has a close relationship with the patient level of patient at the Lancirang Health Center. The five dimensions of quality measured reliability, assurance, tangible evidence, empathy, and responsiveness were all shown to contribute to the formation of positive patient perceptions of the services they received. The dimensions of empathy and assurance appeared to be the most dominant aspects in influencing satisfaction, emphasizing the importance of caring interactions and professional communication between health



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workers and patients. Although services were generally rated as good, the fact that there are still patients who are dissatisfied indicates the need for continuous evaluation and improvement in certain aspects, especially physical facilities and waiting time for services Based on the discussion of findings, several strategic recommendations are proposed to address the specific service quality issues identified in this study. First, improving the comfort, cleanliness, and accessibility of waiting room facilities is essential, as tangible aspects of the service were among those rated lower by respondents. Second, regular training programs focused on empathetic communication and active listening should be implemented to strengthen the positive impact of the empathy and assurance dimensions. Third, the health center is encouraged to develop a real-time feedback system at service points to enable timely identification and resolution of patient dissatisfaction. Furthermore, reducing waiting times through more efficient registration procedures and improved patient flow management is crucial to enhancing overall satisfaction. Lastly, integrating patient satisfaction metrics into routine operational audits is recommended to ensure that perceived service quality remains aligned with actual improvements. These measures should be prioritized according to their relevance to the key issues highlighted in this research, promoting targeted, evidence based enhancements to primary healthcare service delivery.

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