



Health Service Quality with Inpatient Satisfaction

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ABSTRACT

The quality of health services is health services that can satisfy every user of health services that is in sync with the level of satisfaction of the average population and the implementation is in accordance with professional standards and ethical codes. Service quality and patient satisfaction are the two most important things in hospital services. This literature review aims to determine the relationship between the quality of health services and the satisfaction of inpatients. This type of research is literature review research, the articles used were obtained from PUBMED and Google Scholar with articles published starting from 2018-2022. The number of journal articles was 8 articles analyzed. The results showed that there was a relationship between the quality of health services (assurance, empathy, responsiveness, tangible and reliability) with inpatient satisfaction at the hospital. It can be concluded that satisfaction is a level of patient feeling that arises as a result of the service performance that is obtained after the patient compares it with what he expects. If the patient is dissatisfied with the nursing services provided, he will not seek the service or accept it, even though the service is available, practically obtainable and reachable.

Keywords: *Inpatients, Patient Satisfaction, Quality of Service*

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INTRODUCTION

Health is a basic human need, which is universally considered as an index of human development (Judge dkk., 2020; Palma dkk., 2019). The quality of health services has become a global issue that has caused the healthcare industry to undergo a

rapid transformation to meet the ever-increasing needs. Working to improve the quality and demands of its patient population (Eftekhar Ardebili dkk., 2021; Klok dkk., 2020). The quality of health services has traditionally been based on professional practice standards, patient perceptions of health services have become an important indicator for measuring the quality of health care (Abani dkk., 2021; Ahmed dkk., 2020). Patient satisfaction is defined as 'the reaction of healthcare recipients to salient aspects of the context, process, and outcomes of their service (Duan dkk., 2020; Karaca & Durna, 2019).

Experience, in order to measure patient satisfaction, it is necessary to evaluate patient perceptions and to determine whether the patient perceives medical necessity. they are fulfilled (Ramaswamy dkk., 2020; Spinner dkk., 2020). Patient satisfaction, which is the perception and attitude that consumers can have or see towards the total experience of health services, is a multidimensional aspect, which is an important key marker for the quality of health service delivery (Kuipers dkk., 2019; Yang dkk., 2023). Patient satisfaction levels respond to service-specific characteristics (length of stay and extra paid services), patient's financial condition (employment status, health insurance, and income level), and demographic factors (age, gender, race, location and level of education). We further evaluate the relationship of these factors with various important aspects of the service experience.

Furthermore, according to the level of patient satisfaction is an internationally accepted factor, which needs to be studied routinely to complement other quality assessment methods and assurance for the smooth functioning of the health care system. Various dimensions of patient satisfaction have been identified, health services ranging from admission to discharge, waiting time to receive treatment, and from medical services to interpersonal communication (Haxhihamza dkk., 2021; Sinha dkk., 2019), public facilities in terms of availability, quality, and structural design is also an identified dimension, which significantly affects the level of patient satisfaction.

In developed countries, patient-oriented outcome and patient satisfaction surveys are essential for designing and evaluating healthcare and delivery systems by reflecting service quality from a patient perspective and identifying patients who need additional attention (Conner-Spady dkk., 2020; Owusu Kwateng dkk., 2019). In developing countries, recording patient views on healthcare delivery is becoming increasingly important as these countries move away from a doctor-patient relationship to a more modern provider-client attitude (Asif dkk., 2019; Puntmann dkk., 2020).

In addition, the patient's sociodemographic and economic status and patient's expectations of care and attitudes towards the health care system are one of the dimensions identified as having a direct influence on the level of satisfaction (Driggin dkk., 2020; Wichmann dkk., 2020). In Ethiopia, health care services are limited and of poor quality, which is a direct reflection of the country's socioeconomic status, in considering the main obstacles to the health system the Ethiopian government has focused on improving the organization of health care and the quality of health service delivery to the population in recent years. In an effort to improve the quality of health

services, measuring the level of patient satisfaction is an integral part of the health system components for the process of improving service quality (Kang dkk., 2020; Popma dkk., 2019).

Following the increasing level of competition and the emphasis on consumerism, measuring patient satisfaction has become an important measurement for monitoring the health care performance of health plans. The level of patient satisfaction is a different service category (González dkk., 2023; Heerspink dkk., 2020). There are three categories of health services that assess the level of patient satisfaction on a net basis, the majority of patients are satisfied with the services under the interaction of patients and health care providers and information related to facilities.

Meanwhile, the healthcare industry is undergoing a rapid transformation to meet the needs and demands of a growing patient population. Patient satisfaction levels are an important health outcome, which is considered a critical measure of service quality. Researchers show that satisfied patients have complied with prescribed medical care, service providers, and continue to use medical services which may result in a better disease healing process, healthier patients.

RESEARCH METHODOLOGY

Search strategy

The research dissolution strategy is a systematic review which examines articles published from September 2019 to August 2020. The search method was carried out from the database (PubMed) with keywords (Mesh).

Inclusion Criteria

Articles published in English, Arabic, Polish. Free Full Text or articles that can be downloaded for free (Open Access). Articles with an observational design, the population used consisted of 398 patients, the exposure or risk factor was Quality of Service, the outcome or outcome that was measured was Inpatient Satisfaction.

Exclusion Criteria

Articles published in Mandarin, Arabic, Spanish, Spanish, Japanese, Polish and French. articles with a random cross-sectional design based on statistical test software.

Strategy for Quality Assessment and Data Synthesis

All identified studies were independently assessed by all authors for relevance based on title and abstract. Then, the full text version of all relevant possibilities, disagreements among the authors were decided through discussion forums. The filtered data is presented in flow tables according to PRISMA (Prevered Items Of Systematic Review And Meta-Analysis) items.

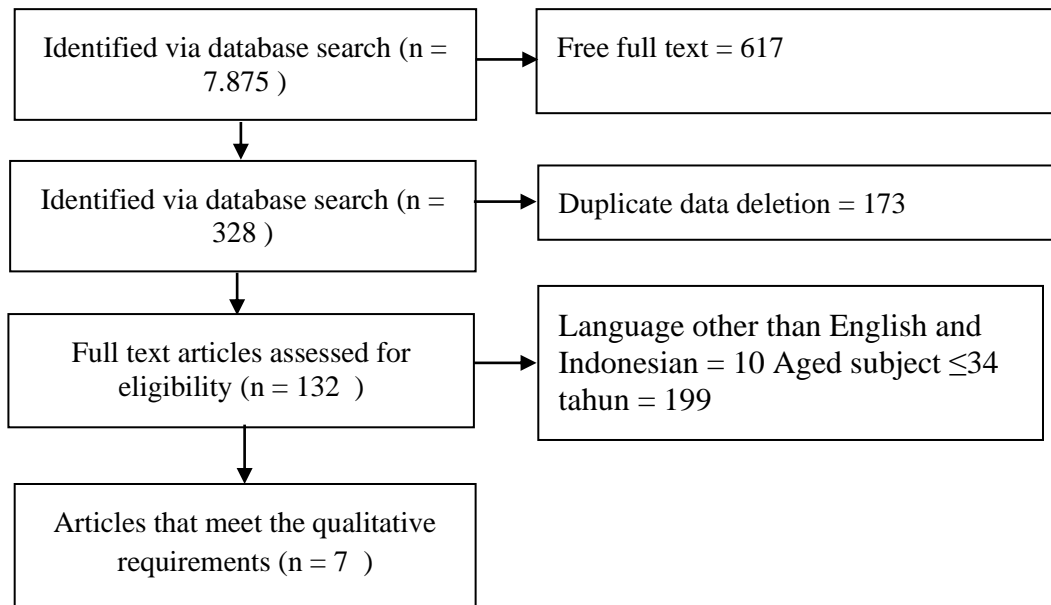


Figure 1. PRISMA flowchart for selecting articles in a systematic review

Based on the results of a Pubmed search, 7,875 articles were found, only 617 free full text, then filtering the initial data results found only 328, only 132 complete text articles in languages other than English and Indonesian 10 articles and only 7 articles fulfilling the qualitative requirements.

RESULT AND DISCUSSION

Table 1. Assessment of Study Quality

Criteria	Article 1 (Nebisu Asamrew et al., 2020)	Article 2 (Maruf Hasan Rumi et al., 2021)	Article 3 (Thuy Nguyen et al., 2020)	Article 4 (Francine A. van den Driessen Mareeuw et al., 2019)	Article 5 (Apostolos Geovani et al., 2018)	Article 6 (Alib Birwin et al., 2020)	Article 7 (Hartawan and Zaini, 2022)	Article 8 (Jihan Natassa and Silvia Sri Dwijayanti, 2019)
1. Does the cohort study clearly address the clinical problem?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
2. Were the subjects chosen in the right way?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
3. Is exposure measured correctly?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
4. Were outcomes measured accurately?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
5. Did the	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes

researcher identify any important confounding factors?								
6. Did the research subjects complete the research time in full?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
7. What are the main results of this study, effect report or complete analysis?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
8. Are the results reliable?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
9. Are the results applicable to the local population?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

Table 2. Summary of Study Results

Study	Subject	Location	Results
(Nebisu Asamrew et al., 2020)	Consists of 398 patients	Ethiopia	The results showed that patients were satisfied with the services they received at the hospital. Interaction of patients and health care providers and domains related to the convenience of public facilities. Good quality of service provided by hospital doctors, availability of laboratory services, radiology services and management services.
(Maruf Hasan Rumi et al., 2021)	Consists of 400 patients	Bangladesh	There are significant results between service quality and patient satisfaction, namely fast service provision (0.08), doctor attitude (0.09), nurse behavior (0.08), and friendly hospital administration.
(Thuy Nguyen et al., 2020)	A total of 1143 patients	Vietnamese	Based on the research, the observed range of overall patient satisfaction levels indicated a higher level of patient satisfaction. Because their expectations and needs are met (exceedance of complete expectancy), patients tend to be satisfied with hospital facilities and treatment costs.
(Francine A. van den Driessen Mareeuw et al., 2019)	Consists of 68 patients	Dutch	In this study, it was found that the quality of care for patient satisfaction was supported by the friendliness of doctors towards patients. For example, the doctor looks into the patient's eyes, listens to the story, and is not focused only on the diagnosis. But ask about the problem at hand.

(Apostolos Giovanis et al., 2018)	Consists of 420 patients	Spanish	Based on the fact that patients tend to rate their experience as a whole rather than evaluating each sub-process separately. In particular, the results show that the patient's perception of the quality of services provided by medical staff largely contributes to the overall perception of service quality. So it can be concluded that a quality of service provided by health staff has a positive effect on patient satisfaction.
(Birwin et al., 2020)	Consists of 200 patients	Indonesia	Based on the results of the study with the Cross Sectional Test, it was found that patient satisfaction was determined by four factors, namely hospital payments through insurance, responsiveness of health workers, tangibility of hospitals and health workers, and empathy from good hospital staff and workers.
(Hartawan and Zaini, 2022)	Consists of 97 patients	Indonesian Mataram	There is a relationship between service quality and patient satisfaction. Where it is explained that the better the quality of service, it will have a positive effect on patient satisfaction at the hospital. This is in line with research conducted by Kartikasari & Dewanto (2014) which states that the quality of services provided greatly influences patient satisfaction. The higher the quality of service provided, the higher the patient satisfaction, and vice versa.
(Jihan Natassa and Silvia Sri Dwijayanti, 2019)	Consists of 96 patients	Lampung Indonesia	Based on research, patient satisfaction is the patient's feelings caused by the performance of the health services they receive, then after the patient compares the service received with what he expected. That there is a significant relationship between reliability, assurance, empathy and response to patient satisfaction.

Based on the results of the research analyzed, five dimensions were found that could be measured by patients in assessing the quality of hospital services, namely reliability, responsiveness, assurance, empathy, and physical evidence. Reliability is a quality dimension that takes into account work expertise so that services are provided for maximum patients. In addition, services with good response and responsiveness will certainly affect the patient's assessment of the quality of hospital services (Herbst dkk., 2020). The form of service certainty is determined by labor guarantees so as to give a sense of trust to patients. Empathy is attention and care which is also an important dimension so that patients feel comfortable with the services provided. Furthermore, the physical form of supporting services such as available facilities also supports patient assessment of service quality (Drerup dkk., 2021; Heerspink dkk., 2020).

A service that is in accordance with predetermined specifications will be said to be of quality. Therefore, service quality must be achievable and measurable. Health services are every effort that is made, both individually and in groups within an organization to be able to maintain health, heal sick people, and restore health after illness, whether individually, in families, or in community groups (Manzoor dkk., 2019;

Nidorf dkk., 2020). Hospital quality is a service benchmark that can produce output in the form of satisfaction for each service user.

Research conducted shows that there is a significant relationship between service quality and inpatient satisfaction. The quality of health services is health services that can satisfy every user of health services in accordance with the level of satisfaction of the average population and its implementation is in accordance with professional standards and codes of ethics. Service quality and patient satisfaction are the two most important things in hospital services. Patients feel dissatisfied with health services at hospitals, including nurses and doctors who do not pay attention to patient and family complaints, then doctors and nurses are not friendly, and it is difficult to interact with health workers (El-Boghdadly dkk., 2020) . According to Wykof, quality or quality of service is a level of excellence that is always well designed and control of the level of excellence is also carried out appropriately to meet customer expectations. So that it can be concluded that there are two things that affect the quality of service, namely the service received and customer expectations, if the service received by the customer is in accordance with his expectations or even exceeds his expectations, then health service services can be said to be of high quality and service users will feel satisfied (Abramson dkk., 2020; Zuo dkk., 2020).

Research conducted found that patients who were interested in returning or making repeat visits to the Haji Makassar General Hospital in terms of service quality, the assurance dimension was found to be the variable that had the most influence on the patient's intention to return to hospitalization. The better the patient's perception of company assurance, the higher the patient's interest in returning. And if the consumer's perception of the guarantee is bad, the patient's interest in returning will also be lower (Carfi dkk., 2020; Giacomelli dkk., 2020).

In line with previous research, research conducted by Roy Rocky Suprpto obtained respondents' responses regarding the assurance dimension, with the statement that midwives introduce themselves to each new patient or at a change of service, most patients feel dissatisfied and some are satisfied with midwives introducing for each new patient or at the change of service provided by the hospital. Happy Makassar, which means about the factors that are more dominant in influencing patient satisfaction, therefore the dimension of assurance service quality has a dominant influence on increasing patient satisfaction because it provides satisfactory guarantees from the midwives of Happy Makassar Hospital (Rosenberg dkk., 2020; Varatharaj dkk., 2020).

As for other research, namely research by (Rosenberg dkk., 2020) revealed different results, namely the caring variable (emphaty) has the greatest influence on inpatient satisfaction seen from the care that is carried out by officers, such as nurses and doctors who are friendly and know patients and then patients. feel satisfied with the care because the nurse pays special attention to the patient. Convenience for patients to interact and meet with health workers such as doctors or nurses.

Patient satisfaction is a reflection of the quality of health services they receive, argue that consumer satisfaction is the overall attitude shown by consumers for goods or services after they obtain and use them.

CONCLUSION

The quality of health services is an indicator of achievement in measuring the level of perfection of a health service. Services with good quality will produce output in the form of satisfaction for every user of health services in accordance with predetermined standards and a professional code of ethics. The higher the quality of service, the higher the patient satisfaction. Inpatient services are one of the factors to be taken into consideration to improve the quality of hospital services in order to create patient satisfaction. Quality of service is a form of patient to subscribe repeatedly to come again for health services. Therefore, it is important for hospitals to maintain and improve the quality of service so that patient satisfaction arises and will create a positive image for the community.

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