


Analysis Of Factors Influencing The Quality Of Service On Outpatient Patient Satisfaction At The Obgyn Polyclinic Of Bahagia Hospital

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Article Info	ABSTRACT
Keywords: Service Quality, Patient Satisfaction, Hospital.	The quality of a hospital as an institution that produces health service technology products certainly also depends on the quality of medical services and nursing services provided to patients. Due to the increasingly tight and sharp competition between hospitals, each hospital is required to increase its competitiveness by trying to provide satisfaction to its patients. The purpose of this study was to analyze the factors that influence the quality of service on the satisfaction of outpatients at the Obgyn polyclinic of RSU Bahagia. This type of research is a quantitative research type, through a cross-sectional study approach. The population in this study were outpatients who had received services as seen based on data on the number of patient visits in one month, which was 67 patients. The sampling technique in this study used the Purposive Sampling technique, which was 57 respondents. The results of the statistical test analysis used the chi-square test and logistic regression test. Where the results showed that there was a significant effect with ($p < 0.05$). Accessibility variable with $p = 0.003 < 0.05$, Waiting Time variable $p = 0.000 < 0.05$, Physical Environment variable $p = 0.008 < 0.05$, Physician Consultation variable $p = 0.002 < 0.05$ have an effect on patient satisfaction. From the results of the logistic regression test, it was obtained that Waiting Time had the most effect on patient satisfaction with a t value (6.365). It is recommended that hospitals always evaluate and improve the quality of services reviewed such as waiting time, communication between health workers, and comfort of facilities so that hospital administration and management are even better.
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INTRODUCTION

Health is one of the primary needs that cannot be separated from people's lives. Improving health in general aims to improve the quality of life of an individual human being. There are several ways to improve a person's health, one of which is through seeking treatment at a health facility. (Dwi Lestari et al., 2020). According to the World Health Organization (WHO), a Hospital (RS) is an integral part of a social and health organization with the function of providing comprehensive services, curative treatment, and preventive treatment to the

community. A service that moves quickly to help the community in efforts to maintain and preserve their health. In this case, the hospital is a health service institution that provides comprehensive individual health services that provide inpatient, outpatient, and emergency services (Anisah & Nasution, 2022). A hospital is a complex organization, which uses a combination of specialized and complex scientific instruments and works with various trained and educated staff units to treat and treat modern medical problems, all united for the same purpose of recovery and maintenance. In good health. (Siregar, 2018).

The main indicator to determine the quality of hospital services is patient satisfaction. Good service from a hospital will show that the hospital also has good quality. Patient satisfaction is an evaluation of the services received by the patient (Susanti and Kusniawati, 2019). Patient satisfaction is one of the factors that plays an important role in evaluating the quality of care services in hospitals (Yunita and Hariadi, 2019). Patient satisfaction is a result of patient evaluation in the form of a feeling of pleasure and satisfaction due to the fulfillment of expectations in using and receiving health services (Maila, 2021).

Bahagia General Hospital is a type C private hospital located in Makassar City, South Sulawesi. Initially, it was only established as a maternity clinic which was established on December 12, 2012, under the Nida'ul Amin Foundation which is the family foundation of Mr. Major General (Ret.) H.M. Amin Syam as the founder, initially only intended to establish a maternity clinic to provide complete delivery services. However, over time, the founder of the foundation decided to continue to become a General Hospital and was given the name Bahagia General Hospital Makassar or abbreviated as RSUD Bahagia. Based on previous initial data in the last 3 months. The number of outpatients in one of the obgyn polyclinics at RSUD Bahagia is quite varied each month. The number of outpatients in July was 108 people, August was 105 people, and September was 110 people. Meanwhile, in October, there were 67 people. At the hospital, there were still many patient complaints submitted, namely patients complained about the punctuality of routine check-ups, nurses often ignored patients who came, and complaints submitted were also about the facility factor.

From this, it can be known which patient satisfaction and dimensions are more dominant so that the hospital can make efforts to improve the quality of service in the hospital. Based on the description above, the author is interested in conducting research with the following title: "Analysis of Factors Affecting the Quality of Service on Outpatient Satisfaction at the Obgyn Polyclinic of RSUD Bahagia". The purpose of this study is to analyze the factors that influence the quality of service on outpatient satisfaction at the OBGYN polyclinic at Bahagia Hospital.

METHODS

This type of research is a quantitative type of research, through a cross-sectional study approach which aims to determine the relationship between independent variables and dependent variables (Lambuena et al., 2023). This research location was conducted at the Obgyn Polyclinic of Bahagia Hospital from November to December 2024. The population of outpatients who have received services as seen based on data on the number of patient visits in one month, namely 67 patients and the sampling technique in this study used the Purposive

Sampling technique, namely 57 respondents. Data collection techniques are carried out using primary data and secondary data collection techniques. Data collection from questionnaires, surveys and observations, the answers from each respondent which are still in the form of "code" (numbers or letters) are entered into the SPSS application, then the data analysis uses 3, namely univariate analysis, bivariate analysis, multivariate analysis.

RESULTS AND DISCUSSION

Research Results

Based on the results of data collection using a questionnaire on outpatients at the Obgyn Polyclinic at RSU Bahagia from November to December 2024, the data was then processed using the SPSS for Windows version 20.0 program, which can be presented in the form of a table as follows:

1. Respondent Characteristics

a. Age

Table 4.1 Distribution of Respondents Based on Age Groups in Outpatients at the Obgyn Polyclinic of Bahagia Hospital

Age Group (years)	Total (n)	Persen (%)
< 35 years	48	84.2
36-40 years	5	8.8
>40 years	4	7.0
Total	57	100.0

Source: Primary Data 2024

Table 4.1 above shows that the highest number of respondents is in the age group between ≤ 35 years, namely 48 people (84.2%) and the lowest is in the age group > 40 years, namely 4 people (7.0%), while the age group 36 - 40 years is 5 people (8.8%).

b. Gender

Table 4.2 Distribution of Respondents Based on Gender in Outpatients at the Obgyn Polyclinic of Bahagia Hospital

Gender	Number (n)	Persen (%)
Female	57	100
Total	57	100.0

Source: Primary Data 2024

Table 4.2 above shows that all respondents are female, namely 57 people (100%).

c. Occupation

Table 4.3 Distribution of Respondents Based on Occupation in Outpatients at the Obgyn Polyclinic of Bahagia Hospital

Pekerjaan	Jumlah (n)	Persen (%)
PNS	11	19.3
karyawan swasta	14	24.6
IRT	32	56.1
Total	57	100.0

Source: Primary Data 2024

Table 4.3 above shows that the most dominant occupation of respondents is as housewives, namely 32 people (56.1%), private employees as many as 14 people (24.6%) and civil servants as many as 11 people (19.3%).

d. Last Education

Table 4.4 Distribution of Respondents Based on Last Education in Outpatients at the Obgyn Polyclinic of Bahagia Hospital

Last Education	Number (n)	Percent (%)
Junior High School	4	7.0
Senior High School	33	57.9
Bachelor's Degree	20	35.1
Total	57	100.0

Source: Primary Data 2024

Table 4.4 above shows that the most dominant respondents' last education was high school with 33 people (57.9%), bachelor's degree with 20 people (35.1%) and junior high school with 4 people (7.0%).

2. Univariate Analysis

a. Access (Accessibility)

Table 4.5 Distribution of Respondents Based on Access (Accessibility) in Outpatients at the Obgyn Polyclinic of Bahagia Hospital

Access (<i>Accessibility</i>)	Number (n)	Percent (%)
Good	43	75.4
Poor	14	24.6
Total	57	100.0

Source: Primary Data 2024

Table 4.5 above shows that respondents who said good access to services were more dominant, namely 43 people (75.4%). While those who said it was lacking were 14 people (24.6%).

b. Waiting Time

Table 4.6 Distribution of Respondents Based on Waiting Time for Outpatients at the Obgyn Polyclinic of Bahagia Hospital

Waiting Time	Total (n)	Percent (%)
Good	30	52.6
Poor	27	47.4
Total	57	100.0

Source: Primary Data 2024

Table 4.6 above shows that respondents with good Waiting Time are more dominant, namely 30 people (52.6%). While those who are lacking are 27 people (47.4%).

c. Physical Environment

Table 4.7 Distribution of Respondents Based on Physical Environment in Outpatients at the Obgyn Polyclinic of Bahagia Hospital

<i>Physical Environment</i>	Total (n)	Percent (%)
Baik	36	63.2
Kurang	21	36.8

<i>Physical Environment</i>	Total (n)	Percent (%)
Total	57	100.0

Source: Primary Data 2024

Table 4.7 above shows that respondents who said the physical environment was good were 36 people (63.2%). While those who were lacking were 21 people (36.8%).

d. Physician Consultation

Table 4.8 Distribution of Respondents Based on Physician Consultation in Outpatients at the Obgyn Polyclinic of Bahagia Hospital

Physician Consultation	Total (n)	Percent (%)
Baik	45	78.9
Kurang	12	21.1
Total	57	100.0

Source: Primary Data 2024

Table 4.8 above shows that respondents who said that Physician Consultation was good were 45 people (78.9%). While those who were lacking were 12 people (21.1%).

e. Patient Satisfaction

Table 4.9 Distribution of Respondents Based on Patient Satisfaction in Outpatients at the Obgyn Polyclinic of Bahagia Hospital

Patient Satisfaction	Total (n)	Percent (%)
Satisfied	32	56.1
Not Satisfied	25	43.9
Total	57	100.0

Source: Primary Data 2024

Table 4.8 above shows that 32 respondents (56.1%) said they were satisfied. Meanwhile, 25 people (43.9%) were not satisfied.

3. Bivariate Analysis

a) The Influence of Accessibility on the satisfaction of outpatients at the OBGYN polyclinic of RSU Bahagia.

Accessibility	Patient Satisfaction				Total	p-value	
	Satisfied		Not Satisfied				
	n	%	n	%			
Good	29	50.9%	14	24.6%	43	75.4%	0.003
Poor	3	5.3%	11	19.3%	14	24.6%	
Total	32	56.1%	25	43.9%	57	100.0%	

Source: Primary Data, 2024

The table above shows that respondents who are more dominant have good service access to patient satisfaction, namely 29 people (50.9%) and dissatisfied as many as 14 people (24.6%), while access (Accessibility) that is lacking to patient satisfaction is satisfied as many as 3 people (5.3%) and dissatisfied as many as 11 people (19.3%). The results of the statistical test obtained a p value = 0.003 < alpha value ($\alpha = 0.05$) so that H_0 was rejected with the interpretation that there was an influence of Accessibility on the satisfaction of outpatients at the obgyn polyclinic of RSU Bahagia.

b) the effect of Waiting Time on outpatient satisfaction at the obgyn polyclinic of Happy Hospital

Table 4.11 The effect of Waiting Time on outpatient satisfaction at the obgyn polyclinic of Happy Hospital

Waiting Time	patient satisfaction				Total	p-value	
	Satisfied		Not Satisfied				
	n	%	n	%			
Good	27	47.4%	3	5.3%	30	52.6%	0.000
Poor	5	8.8%	22	38.6%	27	47.4%	
Total	32	56.1%	25	43.9%	57	100.0%	

Source: Primary Data, 2024

The table above shows that the respondents who are more dominant have a good Waiting Time on patient satisfaction are satisfied, namely 27 people (47.4%) and dissatisfied as many as 3 people (5.3%) while the Waiting Time that is less than the satisfaction of satisfied patients is 5 people (8.8%) and dissatisfied is 22 people (38.6%).

The results of the statistical test obtained a p value = 0.000 < alpha value ($\alpha = 0.05$) so that H_0 is rejected with the interpretation that there is an influence of Waiting Time on the satisfaction of outpatients in the obgyn polyclinic of RSU Bahagia.

c) The influence of the Physical Environment on the satisfaction of outpatients at the obgyn polyclinic of the Happy Hospital

Table 4.12 The Influence of the Physical Environment on the satisfaction of outpatients at the obgyn polyclinic of the Happy Hospital

Physical Environment	Patient satisfaction				Total	p-value	
	Puas		Tidak Puas				
	n	%	n	%			
Satisfied	25	43,9%	11	19,3%	36	63,2%	0,008
Not Satisfied	7	12,3%	14	24,6%	21	36,8%	
Total	32	56,1%	25	43,9%	57	100,0%	

Source: Primary Data, 2024

The table above shows that the respondents who are more dominant have a good Physical Environment on patient satisfaction are satisfied, namely 25 people (43.9%) and dissatisfied as many as 11 people (19.3%) while the Physical Environment that is lacking in patient satisfaction is satisfied as many as 32 people (56.1%) and dissatisfied as many as 25 people (43.9%).

The results of the statistical test obtained a p value = 0.008 < alpha value ($\alpha = 0.05$) so that H_0 is rejected with the interpretation that there is an influence of the Physical Environment on the satisfaction of outpatients in the obgyn polyclinic of RSU Bahagia.

d) The Influence of Doctor Consultation on the satisfaction of outpatients at the OBGYN polyclinic of Happy Hospital

Table 4.13 The Influence of Doctor Consultation on the satisfaction of outpatients at the OBGYN polyclinic of Happy Hospital

Physician Consultation	patient satisfaction				Total		p-value
	Satisfied		Not Satisfied		n	%	
	n	%	n	%			
Good	30	52,6%	15	26,3%	45	78,9%	0,002
Less	2	3,5%	10	17,5%	12	21,1%	
Total	32	56,1%	25	43,9%	57	100,0%	

Source: Primary Data, 2024

The table above shows that the respondents who were more dominant said that doctor consultation (Physician Consultation) was good for patient satisfaction, namely 30 people (52.6%) and dissatisfied as many as 15 people (26.3%) while the doctor's consultation (Physician Consultation) which is less than patient satisfaction is satisfied as many as 2 people (3.5%) and dissatisfied as many as 10 people (17.5%).

The results of the statistical test obtained a p value = 0.002 < alpha value ($\alpha = 0.05$) so that H_0 was rejected with the interpretation that there is an influence of doctor's consultation (Physician Consultation) on the satisfaction of outpatients in the obgyn polyclinic of RSU Bahagia.

3. Multivariate Analysis

Table 4.13 Logistic Regression Test Results

Variabel	B	S.E.	Exp(B)	t	Sig
Accessibility	.105	.108	.091	.978	.333
Waiting Time	.593	.093	.597	6.365	.000
Physical Environment	.236	.087	.229	2.709	.009
Physician Consultation	.293	.104	.241	2.805	.007
(Constant)	-.017	.064		-.264	.793

Source: Primary Data, 2024

Based on the table above, it shows that Waiting Time has the greatest influence on patient satisfaction.

Discussion

The effect of access (accessibility) on outpatient satisfaction at the Obgyn Polyclinic at RSU Bahagia.

Based on the results of the study, it shows that respondents who are more dominant have good service access (Accessibility) to patient satisfaction are satisfied, namely 29 people (50.9%) and dissatisfied as many as 14 people (24.6%) while access (Accessibility) is lacking to patient satisfaction is satisfied as many as 3 people (5.3%) and dissatisfied as many as 11 people (19.3%).

The statistical results obtained a p value = 0.003 < alpha value ($\alpha = 0.05$) so that H_0 is rejected with the interpretation that there is an effect of Access (Accessibility) on outpatient satisfaction at the Obgyn polyclinic at RSU Bahagia. Research in line with that conducted by Datuan et al. (2018), obtained an effect of affordability/access ($p = 0.039$) on patient satisfaction at the Haji Makassar Regional General Hospital (Susanti et al., 2021).

Respondents who said accessibility was in the good category because they felt the distance traveled was not too far to the hospital location, the ease of public transportation to the hospital, the strategic location of the hospital, and the language used by health workers was easy to understand. Respondents who said access was poor because the location of their residence was far from the hospital and the difficulty of transportation for those who did not have private vehicles, as well as the relatively far distance from the respondent's residence and it took a long time to get to the hospital (Susanti et al., 2021).

This shows that respondents are satisfied because they can easily reach the hospital by public transportation. The easier the access/affordability, the higher the patient satisfaction. Patients will feel more satisfied if access to the hospital is faster. Conversely, if patients feel that the accessibility aspect is not good, their satisfaction will also decrease. According to Jones (2021) Access to health services is the ability of each individual to seek the health services they need. Access to medical health services can be measured in terms of the availability of resources and the number of people who have insurance to pay for the use of resources (Susanti et al., 2021).

So researchers can assume that access (accessibility) to health services has a direct influence on patient satisfaction. The easier, faster, and more affordable the service is, the more likely patients are to feel satisfied. Therefore, improving accessibility is a strategic step in improving the quality of health services.

The Effect of Waiting Time on the Satisfaction of Outpatients in the Obgyn Polyclinic of Happy Hospital

Waiting time is a problem that often causes complaints from patients in several health institutions. The length of patient waiting time reflects how the Hospital manages components that are adjusted to the situation and expectations of the patient. Long registration waiting time is caused by long queues. Queues arise because the need for services exceeds the ability (capacity) of services or service facilities, so that users of facilities who come cannot immediately get services due to busy services. Queues often occur because the availability of officers in the registration section is lacking and the time between patient arrivals is faster than the service time (Maulana et al., 2019).

Based on the results of the study, it showed that respondents who were more dominant had a good Waiting Time for patient satisfaction, namely 27 people (47.4%) and were dissatisfied as many as 3 people (5.3%), while the Waiting Time that was less for patient satisfaction was satisfied as many as 5 people (8.8%) and were dissatisfied as many as 22 people (38.6%). The results of the statistical test obtained a p value = 0.000 <alpha value (α = 0.05) so that H_0 was rejected with the interpretation that there was an effect of Waiting Time on the satisfaction of outpatients at the obgyn polyclinic at RSU Bahagia.

This study is also in line with the study conducted by Yuni Sara "The Relationship between the Length of Waiting Time for Services and Patient Satisfaction at the Internal Medicine Polyclinic at Dr. Muhammad Zein Painan Hospital in 2019" data was analyzed using the chi square test. The results of the analysis were more than half (59.7%) of respondents who perceived the length of patient waiting time was not in accordance with the standard.

Furthermore, more than half (62.9%) of respondents were dissatisfied with the services provided. The results of the statistical test obtained a p value of 0.000 (Sulisna et al., 2023).

Observations and recording of the length of waiting time for patients at the Obgyn polyclinic were carried out by recording the registration time of each patient, the start time of the specialist doctor's examination and the end time of the doctor's examination. The calculation of waiting time is carried out on the waiting time from when the patient is examined at the nurse station until the patient enters the Obgyn polyclinic. The Polyclinic Waiting Time is the time spent by the patient to obtain Obgyn polyclinic services from when the patient arrives at the registration section or nurse station until the patient enters the Obgyn polyclinic room for examination.

Sinaga (2006) stated that the waiting time for service is directly proportional to the patient's willingness to make a repeat visit. If patient satisfaction with the repeat visit time is better, repeat visits will increase, and if satisfaction is worse, repeat visits will decrease (Zayanthy et al., 2018).

Based on the results of the study, it was found that the waiting time (Waiting Time) was good for patient satisfaction, namely 27 people (47.4%). Seeing these data illustrates the quality of Obgyn polyclinic services which are quite good in maintaining patients to continue their health checks at RSU Bahagia. In addition, the price given to patients is very affordable so that many patients make repeat visits to RSU Bahagia. This is in accordance with the Journal of Julita Herdardini et al., with the title "Differences in waiting time for costs and quality of service" in their research states that Cost is an important factor in health services. The number of old patients who are more than new patients illustrates that the burden on registration officers and medical record officers will be slightly heavier, therefore it can be used as input for management to place registration and medical record officers who are more skilled and agile in serving patients (Zayanthy et al., 2018). Meanwhile, the results of the study stated that the Waiting Time was lacking and dissatisfied as many as 22 people (38.6%), this is because patients who come quickly usually wait longer to take a queue number because the registration officer has not arrived while registration opens at 8.30, so patients who come at 8.00 - 9.00 do not need to wait to take a queue number because the officer has arrived, patients who come can immediately take a queue number and wait to be called to the registration counter and patients who come > 9.00 usually wait a short or long time to be called to the registration counter depending on the number of patients with the queue time, if there are many patients, the queue will definitely be long. But usually on Monday, Tuesday and Thursday there are many patients so the queue is definitely long. Different on Friday and Saturday, usually only 30 patients come less than on other days (Maulana et al., 2019).

Based on the data obtained, the researcher assumes that waiting time is one of the key factors that influence patient satisfaction in hospitals. Good waiting time management, supported by transparent communication and adequate facilities, can improve the overall patient experience. Conversely, long waiting times without mitigation can damage patient perceptions of service quality, even though the medical services provided are of high quality.

Therefore, waiting time management should be a priority in improving patient satisfaction in hospitals.

The Influence of Physical Environment on the satisfaction of outpatients in the obgyn polyclinic of RSU Bahagia

The physical environment is formed by five indicators, namely Air Temperature, Lighting, Sound (noise), Room Cleanliness, Room Ventilation, the physical environment variable indicator that received the most good responses was the lighting indicator and followed by the air temperature indicator, room cleanliness indicator, sound indicator and room ventilation.

Based on the results of the study, it showed that respondents who were more dominant had a good Physical Environment on patient satisfaction, namely 25 people (43.9%) were satisfied and 11 people were dissatisfied (19.3%) while the Physical Environment that was less on patient satisfaction was satisfied as many as 32 people (56.1%) and 25 people were dissatisfied (43.9%).

The statistical test results obtained a p value = 0.008 < alpha value ($\alpha = 0.05$) so that H_0 was rejected with the interpretation that there is an influence of the Physical Environment on the satisfaction of outpatients at the obgyn polyclinic of RSU Bahagia. This study is in line with that conducted at the Tgk Chik Di Tiro Sigli Hospital, which showed that the p-value was 0.022 < 0.05, which means that there is a relationship between air quality and the satisfaction of inpatients at the Tgk Chik Di Toro Sigli Hospital in 2021. This study is in accordance with research conducted by Like (2015) which stated that physical evidence of the hospital is related to the level of patient satisfaction at the Internal Medicine Polyclinic of Prof. Dr. R.D Kondou Manado Hospital (Mumu, 2015). The results of this study are also supported by Setyawati's 2020 study which stated that the physical environment and services simultaneously affect patient satisfaction (Aji, Setyawati and Rahab, 2020). The construction of ventilation in hospitals needs to be considered, namely it is used as an exchange of air in and out of the room. There is a difference in temperature and ambient air as a medium for air exchange, where the process of fresh air entering from outside and pollutants exiting from inside the room. Air exchange will result in an air exchange process, so that pollutant air in the room can be neutralized. Meanwhile, good air temperature affects patient satisfaction and vice versa, where if the air temperature is uncomfortable, it will reduce patient satisfaction. The ventilation system in hospitals needs to be considered because it is related to the comfort of the body felt by humans. A room temperature that is conducive to the body makes the body's energy not run out quickly and will not be drained to adapt to differences in room temperature, not only that, ventilation is also important for the body's breathing and metabolism (Rakhman et al., 2022).

The facilities built to provide referral health services are hospitals. The services provided include patient services, providing medicine, examinations, and others, so that the physical environment of the hospital supports each of these services (Garda, 2017). The physical building area is all physical conditions that are close to the workplace that can affect employees directly or indirectly, while all conditions related to activity ties, both ties with leaders or coworkers, or relationships with subordinates or relationships with patients or even

ties with sufferers (Sedarmayanti, 2018). Proper spatial planning can limit clutter, and floor materials that reduce slipperiness and unevenness will help prevent patients from falling. While noise is caused by conversation or activity. These results are the same as previous studies that noise from human activities in hospitals often exceeds the threshold (Rakhman et al., 2022).

So the researcher assumes that aspects concerning the physical, mental and social satisfaction of patients with the hospital environment, cleanliness, comfort, speed of service, attention, costs required and so on. Other sources say that this aspect includes those related to comfort, friendliness and speed of service.

The Influence of Doctor Consultation on outpatient satisfaction at the obgyn polyclinic of Happy Hospital.

Based on the results of the study, it was shown that respondents who were more dominant said that doctor consultation (Physician Consultation) was good for patient satisfaction, namely 30 people (52.6%) and dissatisfied as many as 15 people (26.3%) while doctor consultation (Physician Consultation) that was less than satisfactory for patient satisfaction was 2 people (3.5%) and dissatisfied as many as 10 people (17.5%). The results of the statistical test obtained a p value = 0.002 < alpha value ($\alpha = 0.05$) so that H_0 was rejected with the interpretation that there was an influence of doctor consultation (Physician Consultation) on outpatient satisfaction at the obgyn polyclinic of Happy Hospital.

The results of the study showed that doctor consultation (Physician Consultation) that was less than satisfactory and dissatisfied as many as 10 people (17.5%). This delay in the doctor's arrival time in providing services affects patient satisfaction in the hospital's outpatient installation. If the doctor is late in providing services, patient satisfaction will decrease, but on the contrary, if the doctor arrives on time, patient satisfaction will increase. This is in accordance with research conducted by Kapustiak that concern for waiting time is very important for health service providers. by redistributing consultation time not during peak hours, educating patients about the importance of setting consultation times and making realistic consultation schedules (David et al., 2014).

The results of the study showed that doctor consultation (Physician Consultation) was good for patient satisfaction, namely 30 people (52.6%). A good doctor is a doctor who can communicate with patients and show a caring attitude, can explain medical or technical procedures in a way that is easy to understand, listen and take the time to ask or answer questions. The success of doctor-patient communication has a positive impact on patients (Arianto, 2013). The affective quality of doctor and patient communication is the main determinant of patient satisfaction and compliance with treatment and care. Specifically, the interpersonal relationship between doctors and patients will be good if the doctor shows a friendly attitude, polite behavior, can have social conversations, has encouraging and empathetic behavior, can build partnerships and show expressions of empathy during consultations (Sahara, 2016).

So the researcher assumes that doctor consultation is a key factor in patient satisfaction, where the quality of doctor consultation, which includes communication, empathy, and

competence, has a direct influence on the level of patient satisfaction. The better the quality of consultation, the higher the patient satisfaction.

Analysis of the most influential factors on patient satisfaction

Based on the table above, it shows that waiting time has the greatest influence on patient satisfaction with the highest partial t value obtained among all variables, namely 6.365. Waiting time is one of the important factors that influence outpatient satisfaction. In health services, long waiting times are often a source of dissatisfaction for patients, especially if they feel that the time is not used efficiently or is not accompanied by adequate communication. Factors that influence Waiting Time include: Slow administration, registration and document processing processes are often the main causes of long waiting times. Availability of Medical Personnel, If the number of doctors or nurses is insufficient, patients have to wait longer to get service. Accuracy of Service Schedule, Mismatch between the doctor's schedule and patient needs can also extend the waiting time. Facilities and Infrastructure, Limited or uncomfortable waiting rooms can make waiting times feel longer. If this happens, the impact of waiting time on patient satisfaction will be a decrease in the perception of service quality, where patients tend to rate the quality of service low if the waiting time is too long, even though other aspects are adequate. Stress and discomfort, long waiting times, especially without clear information, can increase patient stress and dissatisfaction. Willingness to return, dissatisfied patients tend to be reluctant to return to the health facility. So researchers assume that by managing waiting times effectively, health facilities can increase patient satisfaction and build a good reputation.

CONCLUSION

The conclusion of the study is that there is an influence between Accessibility, Waiting Time, Physical Environment, and Doctor Consultation. And the factor that most influences the quality of service on outpatient satisfaction at the Obyn Polyclinic at RSU Bahagia is Waiting Time.

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