

EFFECT OF SERVICE QUALITY, FACILITIES, AND PRICES ON PATIENT SATISFACTION IN PAVILIUN KARTIKA RSPAD JAKARTA

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Abstract - This research aims to test whether there is a influence on quality of service, facilities, and price to the satisfaction of Pasien in the Pavilion of Kartika RSPAD Jakarta.

This research uses a type of associative research quantitative approach. The data application used is SPSS 25.0. The population of this study is all patients who are hospitalized in pavilion Kartika RSPAD. Research samples for 97 respondents. The sampling techniques used are Purposive sampling techniques. Data collection techniques using the questionnaire method when hospitalized patients. Statistical analysis of the data used is the test coefficient of determination and hypothesis testing.

The results showed that the quality of service has a partial effect on patient satisfaction. Partial facilities have no effect on patient satisfaction. Prices partially affect patient satisfaction. Simultaneously there is influence on the quality of service, facilities, and price of patient satisfaction in the pavilion of Kartika RSPAD.

Keywords: Quality of service, facilities, price, and patient satisfaction

Abstrak– Penelitian ini bertujuan untuk menguji apakah terdapat pengaruh Kualitas Pelayanan, Fasilitas, dan Harga terhadap Kepuasan Pasien di Paviliun Kartika RSPAD Jakarta.

Penelitian ini menggunakan jenis penelitian asosiatif pendekatan kuantitatif. Aplikasi olah data yang digunakan adalah SPSS 25.0. Populasi penelitian ini adalah seluruh pasien yang di rawat inap di Paviliun Kartika RSPAD. Sampel penelitian sebanyak 97 Responden. Teknik pengambilan sampel yang digunakan adalah teknik *Purposive sampling*. Teknik pengumpulan data menggunakan metode kuesioner pasien rawat inap. Analisis statistik data yang digunakan adalah uji koefisien determinasi dan uji hipotesis.

Hasil penelitian menunjukan bahwa kualitas pelayanan secara parsial berpengaruh terhadap kepuasan pasien. Fasilitas secara parsial tidak berpengaruh terhadap kepuasan pasien. Harga secara parsial berpengaruh terhadap kepuasan pasien. Secara simultan terdapat pengaruh terhadap kualitas pelayanan, Fasilitas, dan Harga terhadap kepuasan pasien pada Paviliun Kartika RSPAD.

Kata kunci : Kualitas Pelayanan, Fasilitas, Harga, dan Kepuasan Pasien

I. PRELIMINARY

The hospital is the main link for health services which has a main function in healing and recovery efforts. One of the steps taken by the government to make the SKN (National Health System) program a success is to increase the quantity and quality of hospitals. As a service company, the hospital must be able to anticipate any changes in the environment so that it can compete and survive in the health service business competition, and always aim

at the spearhead of its marketing, namely customer satisfaction from all offers provided with high and adequate service levels.

The existence of the most important health facilities is a hospital. Hospitals are very important for people in an area, especially in densely populated areas. It is in these health facilities that people hope to recover and recover from their health problems. However, in terms of services, a number of hospitals, especially those managed by the government, often complain about the community. For example, Dr Pirngadi Medan Hospital has repeatedly been in the spotlight and has become the headline of a number of media because cases of poor hospital service are still happening. The government and other authorities seem to ignore and allow the naughty behavior of hospital personnel who treat some patients arbitrarily, as a result the fundamental rights of patients which are strictly regulated and protected by law continue to be neglected

Problems related to patient satisfaction that must be considered by health service providers such as the Kartika Pavilion Hospital, RSPAD. Further discussion was carried out through this study with the title: "The Effect of Service Quality, Facilities, and Prices on Patient Satisfaction at the Kartika Hospital Pavilion, RSPAD".

1.1. Formulation of the problem

Based on the descriptions that have been disclosed in the background above, it can be concluded that the main problems in this study are as follows:

1. Does service quality affect patient satisfaction at the RSPAD Kartika Pavilion?
2. Does the facility affect patient satisfaction at the RSPAD Kartika Pavilion?
3. Does price affect patient satisfaction at the RSPAD Kartika Pavilion?
4. Does the quality of service, facilities, and price affect patient satisfaction at the Kartika Pavilion RSPAD?

1.2. Research purposes

In general, the objectives of this study are:

1. To know the effect of service quality on patient satisfaction at the Kartika Pavilion RSPAD?
2. To find out the effect of facilities on patient satisfaction at the RSPAD Kartika Pavilion?
3. To find out the effect of price on patient satisfaction at the RSPAD Kartika Pavilion?
4. To find out the effect of service quality, facilities, and price on patient satisfaction at the RSPAD Kartika Pavilion?

II. LITERATURE REVIEW

2.1. Definition of Service Quality

Service quality can be defined as how far a difference is between reality and the expectations of its customers for the services they receive. The quality of service will be identified by comparing the perceptions of the customers on the service the customer has actually received. Service is an activity carried out by a person or group of people based on material factors through certain systems, procedures and methods in order to fulfill the interests of others according to their rights Moenir (2016: 26), basically every human being needs service, even in an extreme way it can be said that service cannot be separated from human life Nambela (2015: 3).

2.2. Definition of Facility

Facilities are a very supportive factor in efforts to market service products to service users. Good and complete or complete facilities are a special attraction for consumers in determining their choice of purchasing a service. And conversely, inadequate

facilities that are not adjusted to the price encourage the company's failure because consumers can discourage them from using the services offered by the company. In many cases, the provision of these facilities and facilities is necessary to spur the hospital business so that it truly becomes a business capable of serving the wider community. These facilities include air conditioning, TV, refrigerator, guest chairs, and toilets. According to Kotler (2015:

2.3. Price

According to Kotler and Gery Armstrong (2012: 268), price is an exchange rate that can be equated with money or other goods for the benefits obtained from a good or service for a person or group at a certain time and place. The term price is used to provide a currency exchange rate that shows the high and low value of a quality of goods or services. In economics, the price can be related to the selling or buying value of a good or service.

2.4. Understanding Patient Satisfaction

According to Kotler and Armstrong (2012: 108) Consumer satisfaction is the extent to which the perceived product or service work meets purchase expectations. When the performance of the product or service is lower than the customer's expectations, the buyer is dissatisfied. If the performance of the product or service exceeds expectations, then the buyer feels fast or very happy. Consumer satisfaction is a feeling of pleasure or disappointment for someone who comes from a comparison between his impression of the performance (result) of a product or service and his expectations of Kotler and Armstrong (2012: 10)

2.5. Relationship Between Variables

2.5.1. The Effect of Service Quality on Patient Satisfaction

The quality of service provided by the hospital is closely related to patient satisfaction. If the hospital provides the best quality of service shown by direct evidence (tangibles), reliable service (reliability), has responsiveness (responsiveness), has a guarantee of service (assurance), and empathy (empathy) is more, then the patient will feel satisfied. For this reason, the hospital must be able to understand patient behavior and provide the right and desired quality of service.

Hospital services will focus on the customer, in general the expectations of the customer are the customer's confidence about what they will receive when they buy a product or service, while the performance or the perceived results is the customer's perception of what is received after consuming the product or service. Which if the customer's expectations exceed what is expected, the customer will feel very satisfied. The main factor determining customer satisfaction is customer perception of service quality or service. Lupiyoadi (2013: 228). The quality of service provided by the hospital depends on its ability to satisfy the needs of the patient.

This is reinforced by research by Syah Syafrial (2018), Setyawati, Rifa'I, et al (2018), Tjintiadewi and Rahyuda (2018), Roberta S, Dana M and Sheneeta W White (2015), Kondansi and Panda (2015), Suyitno (2018), Rosalita and Purnawati (2018), Rizki W, Sudjiono, et al (2018). which concluded that service quality has a positive and significant effect on patient satisfaction.

2.5.2. Effect of Facilities on Patient Satisfaction

Facilities are, of course, one of the important supporting tools for the hospital, starting from the health facilities used to public facilities for patient or family visitors, which are considered as a means to achieve certain goals or to fulfill certain satisfaction and needs.

According to Tjiptono (2014: 24). Facilities are physical resources that must be in place before a service can be offered to consumers. Facilities can also be anything that makes it easier for consumers to get satisfaction. Because a form of service cannot be seen, cannot be smelled, and cannot be touched, the physical aspect becomes important as a measure of service. Customers will use the sense of sight to assess a quality of service, so the customer will feel satisfied. This is reinforced by research by Setyawati, Rifa'i, et al. (2018), Roberta S, Dana M and Sheneeta W White (2015), Suyitno (2018). which concluded that the facility has a positive and significant effect on patient satisfaction.

2.5.3. The Effect of Price on Patient Satisfaction

According to Philip Kotler and Gery Armstrong (2012: 268), price is an exchange rate that can be equated with money or other goods for the benefits obtained from a good or service for a person or group at a certain time and place. The term price is used to provide a currency exchange rate that shows the high and low value of a quality of goods or services. In economics, the price can be related to the selling or buying value of a good or service.

According to Kotler and Armstrong (2013: 151), price is the amount of money charged in a good and service or the amount of value or money that is exchanged by consumers for benefits, because of owning or using these products and services. Prices in the marketing mix, on the one hand, can show revenue and can show the cost of determination that must be carefully calculated, because in setting a price not only affects the sales of products or services in the market, which will ultimately have an impact on consumer satisfaction or the company's survival whole. This is confirmed by the research of Syah Syafrial (2018), Setyawati, Rifa'i, et al (2018), Tjintiadewi and Rahyuda (2018), Suyitno (2018). which concluded that price has a positive and significant effect on patient satisfaction.

2.5.4. Effect of service quality, facilities, and price on patient satisfaction

The quality of service provided by the hospital is closely related to patient satisfaction. If the hospital provides the best quality of service shown by direct evidence (tangibles), reliable service (reliability), has responsiveness (responsiveness), has a guarantee of service (assurance), and empathy (empathy) is more, then the patient will feel satisfied. For this reason, the hospital must be able to understand patient behavior and provide the right and desired quality of service. Generally, high quality service will result in higher satisfaction and more frequent repeat purchases.

According to Kotler (2013: 99), service quality is a dynamic condition and is related to products, services, people, processes, and the environment that will meet expectations. Tjiptono (2013: 100) explains that if a service received or suggested is as expected, then the quality of the service is perceived as good and satisfying.

According to Tjiptono (2014: 24), facilities are resources that must exist before a service can be offered to consumers. Facilities can also be anything that makes it easier for consumers to get satisfaction. Because a form of service cannot be seen, cannot be smelled, and cannot be felt, physical aspects become important as a measure of service, customers will use their sense of sight for a quality of service.

According to Youti (2010), facilities are everything, both objects and services that accompany the services provided by companies, both service companies, trade and industry. Facilities can also be interpreted as facilities and infrastructure that are available in the environment and within the company, intended to provide maximum service so that consumers or customers feel comfortable and satisfied.

Price fixing according to Adrian Payne quoted from the book Lupiyoadi (2013), namely survival, is an attempt not to carry out actions to increase profits when the company is in unfavorable market conditions. These efforts tend to be done to survive, profit maximization, determination price aims to maximize profit within a certain period, slaes

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mazimization, pricing aims to build market share by selling at an adverse initial price, prestige the objective of pricing is to promote the company's services as an exclusive service and, Roi aims pricing is based on the achievement of the desired Return of Investment.

Kertajaya (2012: 40) states that the price assessment indicator can be seen from the suitability between a sacrifice from a consumer and the value it receives after making a purchase, and that's where the consumer will perceive the product or service. Positive perceptions are the result of a feeling of satisfaction with a purchase they make, while negative perceptions are a form of consumer dissatisfaction with the products or services they buy. If the price set by a company is not in accordance with the benefits of the product, it can reduce the level of customer satisfaction, and vice versa, if the price set by a company is in accordance with the benefits received, it will increase customer satisfaction. If the customer perceived value is higher, it will create maximum customer satisfaction. This is reinforced by research by Setyawati, Rifa'I, et al. (2018), Suyitno (2018). which concluded that service quality, facilities, and prices had a positive and significant effect on patient satisfaction.

2.6. Hypothesis Development

The effect of the research hypothesis is as follows:

- H1: Service quality affects the satisfaction of inpatients at the Kartika Pavilion, Gatot Soebroto Army Hospital.
- H2: Facilities affect the satisfaction of inpatients at the Kartika Pavilion of the Gatot Soebroto Army Hospital.
- H3: Price affects the satisfaction of inpatients at the Kartika Pavilion, Gatot Soebroto Army Hospital.
- H4: Service quality, facilities and prices affect the satisfaction of inpatients at the Kartika Pavilion, Gatot Soebroto Army Hospital.

2.7. Research Conceptual Framework

Quality of Service Facilities and Prices are the level of satisfaction of each customer, meaning that the more qualified the service facilities and the price that the patient feels good for, the patient's satisfaction will increase at the hospital

The research conceptual framework is the preparation of a research paradigm in a thesis regarding the concepts raised by the author which contains independent variables (independent). Therefore, in this study the authors raised the title "The Effect of Service Quality, Facilities, and Prices on Patient Satisfaction at the Kartika Pavilion ". The research paradigm used by the author can be explained in the following chart.

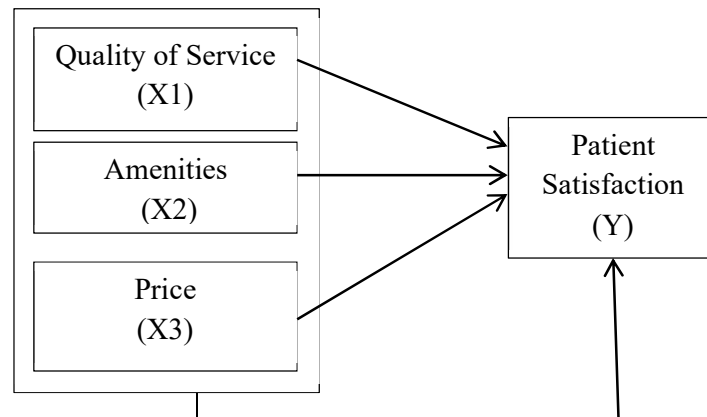


Figure 2.1 : Conceptual framework

III. RESEARCH METHOD

3.1. Research Strategy

The strategy used in this research is to use a quantitative approach, namely an associative research strategy with a questionnaire method as a data collection tool. According to Sugiyono (2016: 12) associative research is research that is used to determine the relationship of two or more independent variables to the dependent variable. This study aims to provide an explanation of how the influence of the independent variables, namely Service Quality (X1), Facilities (X2), and Price (X3) on patient satisfaction (Y) which is the dependent variable.

3.2. Population and Sample Research

In quantitative research, population is defined as an area of generalization consisting of objects / subjects that have certain qualities and characteristics that are determined by research to be studied and conclusions are drawn (Sugiyono, 2016: 80). The population in this study were inpatients using the non-insurance payment method (cash) at the RSPAD Kartika Pavilion in December 2019.

To determine the number of samples to be used in the study, the Slovin formula is used, namely:

$$n = \frac{N}{1 + Ne^2} \dots \dots \dots (3.1)$$

n = Sample Size
N = Population
e = Real level or error limit

In determining the number of samples to be selected, the author uses the Arikunto method if the object is large, it can be taken between 10%, 15%, 20%, 25% or more. At least it can be seen from the research capability in terms of time, energy, and funds. The author uses an error rate of 10% because in every study it is impossible for the result to be 100% perfect, the greater the error rate, the smaller the sample size.

$$n = \frac{620}{1 + (620 \cdot 0,01^2)} = 86.11 = 86$$

3.3. Data Analysis Methods

3.3.1. Data processing

According to Sugiyono (2017: 244), data analysis is a process of systematically searching and compiling data obtained from interviews, field notes, and other materials, so that it is easy to understand, and the findings can be shared with others. The data were

processed with the help of computers using excel and continued with the SPSS application (*Statistical Program for Social Sciences*) 25.0 and the way of presentation using tabulations.

3.3.2. Descriptive statistics

Statistics are used to analyze data by describing or describing the data that has been collected as is without intending to make general conclusions (Sugiyono, 2017: 147). Descriptive statistics itself consists of presenting demographic data of research respondents, such as gender, general education and length of experience working through tables, circle diagrams, and graphs.

3.3.3. Classic assumption test

1. Normality test

Normality test is conducted to test whether the residual variable in the regression model has a normal distribution. The causes of normality cases are generally due to:

- There is a regression model residual data with a value far from the data set so that the data distribution is not normal.
- There are natural conditions for data that are basically not normally distributed.

The data normality test was performed using the Kolmogorov, Smirnov test. The basis for the KS test is:

- a. Significance number > 0.05 , then the data is normally distributed
- b. Significance number < 0.05 , then the data are not normally distributed.

2. Multicollinearity Test

Multicollinearity test aims to test whether the regression model found a correlation between independent variables. A good regression model should not have correlation between the independent variables. If the Independent variable has a tolerance value greater than 10% (0.01) and has a Variance Inflation Factor (VIP) value of less than 10, then the regression model is free from multicollinearity problems.

3. Heteroskedastistics test

The heteroscedastical test aims to test whether the regression model has an inequality of variance and residuals from one observation to another. A good regression model is if there is no heteroscedasticity. If the significant t of the results of regressing the absolute residual value on the independent variables is more than 0.05, the regression model does not contain heteroscedastity.

3.6.4 Hypothesis test

1. Partial Hypothesis Testing (t-Test)

This t statistical test is to test the success of the regression coefficient partially. This test is conducted to determine whether the independent variable (X) individually affects the dependent variable (Y) by comparing the t value of each independent variable with the t table value with an error degree of 5% ($\alpha = 0.05$) acceptance provisions or rejection of the hypothesis is as follows:

- a. If t count is greater than t table ($t \text{ count} > t \text{ table}$) or the probability is smaller than the significant level ($\text{Sig} < 0.05$), then partially the independent variable has a significant effect on the dependent variable.
- b. If t count is smaller than t table ($t \text{ count} < t \text{ table}$) or the probability is greater than the significant level ($\text{Sig} > 0.05$), then partially the independent variable does not have a significant effect on the dependent variable.

2. Simultaneous Hypothesis Testing (Test F)

This statistical test aims to determine the effect simultaneously between independent variables on the dependent variable. This influence has a significant level at 5% alpha

- a. If F count is greater than F table ($t_{\text{count}} > t_{\text{table}}$) or the probability is smaller than the significant level ($\text{Sig} < 0.05$), then simultaneously the independent variable has a significant influence on the dependent variable
 - b. If F count is less than F table ($t_{\text{count}} < t_{\text{table}}$) or the probability is greater than the significant level ($\text{Sig} > 0.05$), then simultaneously the independent variable does not have a significant effect on the dependent variable.
3. Coefficient of Determination

The coefficient of determination (r^2) measures how far the model's ability to explain the variation in the dependent variable. The coefficient of determination is between zero and one. A small r^2 value means that the ability of the independent variables to explain the variation in the dependent variable is very limited. A value close to one means that the independent variables provide almost all the information needed to predict the independent variables (Ghozali, 2016). The test of determination is used to measure the level of the model's ability to explain the dependent variable.

IV. RESULTS AND DISCUSSION

4.1. Description of Research Object

RSPAD Gatot Soebroto Puskesmas is a Dutch army hospital, known as the Welterveden Groot Militaire Hospital. Then on March 8, 1942, the Gator Soebroto Army Hospital was once a Japanese Army military hospital and was named rikugun byoin. Since independence on 17 August 1945 controlled by the KNIL army and its name was changed to militaire geneeskundige dienst known as "leger hospital Batavia".

On July 26, 1950 it was handed over to the Army Health Bureau to become a central army hospital. This historic moment is then commemorated as the anniversary of the Gatot Soebroto Army Hospital. Given the services of Lieutenant General Gatot Soebroto who gave everything to the Army Hospital to become the pride of soldiers and efforts to improve the welfare of army soldiers, the name Gatot Soebroto was used behind the name of the Army Hospital to date.

The Gatot Seobroto Army Hospital itself has a special unit for general public services called the Yanmasum Pavilion of the Gatot Soebroto Army Hospital. Yanmasum Pavilion consists of the Kartika Pavilion and the Dr. Pavilion. R. Darmawan PS who has the task of providing health services to the general public. In 1964, on the initiative of the Menpangad General TNI Ahmad Yani, the building "Pavilion A" (now Pavilion Dr. R. Darmawan PS) was built, with a land area of $\pm 980,488$. Originally the Pavilion A building was used for the treatment of high-ranking officers, and at that time the first President of the Republic of Indonesia, Ir. Soekarno.

4.2. Respondent Description

4.2.1. Respondent Description

The research data were obtained from filling out questionnaires by inpatients at the Pavillion Kartika Hospital, RSPAD as many as 97 respondents. Descriptions of respondents based on age, gender, guaranteed costs, and occupation.

4.2.2. Respondent Data Based on Gender

Characteristics of Respondents based on the types of patients hospitalized at the RSPAD Kartika Pavilion can be seen in the table:

Table 4.1 Results of Gender Frequency Distribution

Gender	Frequency	Presentation
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Male	26	26.80%
Women	71	73.20%
Total	97	100%

Source: Primary data processed, 2019.

The table above shows that the number of female respondents has a percentage of 73.20%, while male respondents have a percentage of 26.80%. The reason is because some obstetricians and beauty specialists are well known among women. So it can be concluded that most of the respondents are female.

4.2.2 Respondent data by age

Characteristics of respondents based on the age of patients hospitalized at the RSPAD Kartika Pavilion can be seen in the table:

Table 4.2 Results of Age Frequency Distribution

Gender	Frequency	Presentation
15-30	77	79.38%
30-40	14	14.43%
> 40	6	6.19%
Total	97	100%

Source: Primary data processed, 2019.

Based on the data obtained, from a total of 97 respondents, there are 77 respondents aged 15-30 years with a percentage 79.38%, 14 people aged 30-40 years with a percentage 14.43%, and 6 other people aged > 40 years with a percentage it can be concluded that the respondents were dominated by patients at the Kartika Pavilion Hospital aged 15-30 because the facilities and doctors were well known to young people. Characteristics of respondents based on age.

4.2.3 Respondent data based on Cost Guarantee

Characteristics of Respondents based on the guaranteed cost of patients hospitalized at the RSPAD Kartika Pavilion can be seen in the table:

Table 4.3 Result of Cost Guarantee Frequency Distribution

Cost Guarantee	Frequency	Presentation
Cash	49	50.52%
Guarantee / Insurance	48	49.48%
Total	97	100%

Source: Primary data processed, 2019.

Based on the data obtained, from a total of 97 respondents, 49 respondents used cash guarantees with a percentage of 50.52% while 48 respondents who used collateral / insurance with a percentage of 49.48%, it can be concluded that most respondents who use cash collateral have The percentage is 50.52% higher, patients prefer to use cash because it is faster for administrative services than using guarantees / insurance.

4.2.4 Respondent data by occupation

Characteristics of Respondents based on the occupation of patients hospitalized at the RSPAD Kartika Pavilion can be seen in the table:

Table 4.4 Work Frequency Distribution Results

Profession	Frequency	Presentation
Student / Student	24	24.74%
PNS / BUMN	8	8.25%
General employees	51	52.58%
TNI	4	4.12%
Etc	10	10.31
Total	97	100%

Source: Primary data processed, 2019.

Table 4.4 above shows that the number of respondents based on the occupation of private employees has a greater percentage, namely 51 people (52.58%), compared to 21 students (24.74%). So it can be concluded that most of the respondents are private employees, mostly Kartika pavilion patients are patients with cash guarantees and more dominant patients who are brobat in the Kartika pavilion work as private employees, visiting patients assess for treatment with cash guarantees because the service is fast and does not interfere with their working time.

4.3 Test Instrument Data

The data instrument test aims to determine whether a question posed is valid or appropriate to be used for hypothesis testing.

4.3.1 Validity Test Results

The validity test is used to compare r-count with r-table (r pearson product moment), with the criteria if the r-count > r-table test then the measuring instrument is declared valid, and vice versa if r-count < r-table, the measuring instrument is declared invalid. For the validity test with 97 respondents used, the significance value is 0.200, and the following are the results of the calculation of the validity test using SPSS Version 25.

a. Variable X1

Table 4.5 Result of Validity Test of Variable X1

Statement	R-Table value	The value of r-Count	Information
1	0.200	0.779	VALID
2	0.200	0.797	VALID
3	0.200	0.763	VALID
4	0.200	0.703	VALID
5	0.200	0.684	VALID
6	0.200	0.780	VALID
7	0.200	0.746	VALID
8	0.200	0.600	VALID
9	0.200	0.565	VALID

Source: SPSS version 25.0, data processed in 2019.

Based on the data above, it shows that all rcount values presented in the Corrected Item-Total Correlation column calculated using SPSS 25, that all instruments from the product quality variable (X1) are valid from 97 respondents as the validity test is greater than 0.200 so that the rcount value > r table is fulfilled.

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b. Variable X2

Table 4.6 Result of Validity Test of X2 Variable

Statement	R-Table value	The value of r-Count	Information
1	0.200	0.770	VALID
2	0.200	0.815	VALID
3	0.200	0.726	VALID
4	0.200	0.825	VALID
5	0.200	0.779	VALID
6	0.200	0.584	VALID

Source: SPSS version 25.0, data processed in 2019.

Based on table 4.6 which is presented in the Corrected Item-Total Correlation column, the results of calculations using SPSS 25, that all instruments from the Facility variable (X2) are valid because the $r_{count} > r_{table}$ is fulfilled.

c. Variable X3

Table 4.7 Result of Validity Test of X3 Variable

Statement	R-Table value	The value of r-Count	Information
1	0.200	0.851	VALID
2	0.200	0.770	VALID
3	0.200	0.812	VALID
4	0.200	0.813	VALID

Source: SPSS version 25.0, data processed in 2019.

Based on table 4.7 which is presented in the Corrected Item-Total Correlation column, the calculation results using SPSS 25, that all instruments of the Price variable (X3) are valid because the value $r_{count} > r_{table}$ is fulfilled.

d. Variable Y

Table 4.8 Result of the Validity Test of Variable Y

Statement	R-Table value	The value of r-Count	Information
1	0.200	0.831	VALID
2	0.200	0.798	VALID
3	0.200	0.768	VALID
4	0.200	0.848	VALID
5	0.200	0.788	VALID

Source: SPSS version 25.0, data processed in 2019.

Based on table 4.8 which is presented in the Corrected Item-Total Correlation column, the results of calculations using SPSS 25 show that all instruments of the Satisfaction variable (Y) are valid because the value $r_{count} > r_{table}$ is fulfilled.

4.3.2 Reliability Test Results

The reliability test aims to see the extent to which a measuring instrument can be trusted or relied upon if the measuring device is used repeatedly to measure the same

symptoms. A questionnaire is said to be reliable or reliable if a person's answers to the questions submitted are consistent from time to time. It is said to be reliable (reliable) if it has a reliability coefficient or Cronbach's alpha of 0.60 or more.

Table 4.9 Reliability Test Results

No.	Variable	Alpha r value	r critical	Information
1	Quality of Service (X1)	0, 879	0, 60	Reliable
2	Facilities (X2)	0, 842	0, 60	Reliable
3	Price (X3)	0, 824	0, 60	Reliable
4	Satisfaction (Y)	0, 866	0, 60	Reliable

Source: SPSS version 25.0, data processed in 2019.

The data above shows that all the Cronbach Alpha values listed in the Reability Statistic table are calculated using SPSS 25, for each variable greater than 0.60 so it can be said that all of the research instruments are reliable (reliable).

4.4 Classic assumption test

The classic assumption test is used to find out whether the data obtained can be tested or not

4.4.1 Normality Test Results

The normality test uses the One Sample Kolmogorov Smirnov test method and the normal PP Plot of regression standardized residual graphs, with the aim of determining the statistical method to be used in the analysis. The criteria for testing the P-Plot of regression standardized residual graphs are normally distributed if the points spread around the line and follow the diagonal line. The results of the data normality test are presented in graph 4. As follows.

Table 4.10 Normality Test Results

No.	Variable	Statistics	Df	Sig
1	Quality of Service (X1)	116	97	0.002
2	Facilities (X2)	131	97	0.000
3	Price (X3)	123	97	0.001
4	Satisfaction (Y)	109	97	0.006

4.4.2 Multicollinearity Test Results

Multicollinearity test aims to test whether the regression model is found with a tolerance value of more than 10% (0.10) and has a Variance Inflation Factor (VIF) of less than 10, so the regression model is free from multicollinearity problems.

Table 4.11 Multicollinearity Test Results

Source: SPSS version 25.0, data processed in 2019.

No.	Variable	Tollerance	VIF	Information
1	Product Quality (X1)	0.465	2,149	Multicollinearity does not occur
2	Price (X2)	0.390	2,566	Multicollinearity does not occur
3	Promotion (X3)	0.472	2,117	Multicollinearity does not occur

4.4.3 Heteroscedasticity Test Results

The heteroscedasticity test is used to determine whether or not the variance and residuals are inequality in the regression model used. Assumptions on Heteroscedasticity is

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when the variation in confounding factors is the same as in the observed data with other observer data, if this is fulfilled, the disturbing variation in the data group is homoscedastic, and otherwise it is homoscedastic. The results of this test can be seen by knowing the significance value, if it is smaller than 0.05, it can be concluded that it will not happen heteroscedasticity, following the results of the heteroscedastic test table.

Table 4:12 Heteroscedasticity Test Results

No.	Variable	Beta	T	Sig
1	Quality of Service (X1)	-	2,255	0.026
2	Facilities (X2)	0.014	0.092	0.927
3	Price (X3)	0.096	.0596	0.552
4	Satisfaction (Y)	-0.298	-2,030	0.045

Source: SPSS version 25.0, data processed in 2019.

Based on table 4:12, it can be seen that the variables of service quality, facilities, and prices have a significance value above 0.05, so it can be concluded that all variables in this study do not contain heteroscedasticity.

4.5 Hypothesis test

Hypothesis testing is used to determine the significance of the influence of the independent variables on the dependent variable partially or simultaneously. In testing the effect of the independent and partially dependent variables, it was seen from the significance t compared to the real level α ($5\% = 0.05$). The test criteria:

1. H_0 is rejected, if the significance $t \leq 0.05$ and
2. H_0 is accepted, if the significance $t \geq 0.05$

4.5.1 Partial Test Results (t-test)

Table 4.13 T test results

No.	Variable	Beta	T	Sig
1	Quality of Service (X1)	-	1,416	0.160
2	Facilities (X2)	0.346	3,709	0,000
3	Price (X3)	0.155	1,515	0.133
4	Satisfaction (Y)	0.387	4,180	0,000

Source: SPSS version 25.0, data processed in 2019.

a. Effect of X1 on Y

Based on the results of data processing using SPSS Version 25, a significance t of 0.000 was obtained, so that H_0 was rejected and H_a was accepted because the significance value of t was smaller than the real level α (5%) or $0.000 < 0.05$. This shows that the effect of service quality on patient satisfaction is partially significant. The results of this test can be interpreted that the quality of service is taken into consideration for inpatient services at the Kartika Pavilion RSPAD.

b. Effect of X2 on Y

Based on the results of data processing using SPSS Version 25, a significance t of 0.133 was obtained, so that H_0 was accepted and H_a was rejected because the significance value of t was smaller than the real level α (5%) or $0.133 < 0.05$. This shows that there is no effect of facilities on patient satisfaction which is partially said to be insignificant. The results of this test can be interpreted that the facilities are taken into consideration for inpatient services at the Kartika Pavilion, RSPAD.

c. Effect of X3 on Y

Based on the results of data processing using SPSS Version 25, a significance t of 0.000 was obtained, so that H_0 was rejected and H_a was accepted because the significance value of t was smaller than the real level α (5%) or 0.000 < 0.05. This shows that the effect of price on patient satisfaction is partially significant. The results of this test can be interpreted that the price is a consideration for inpatient services at the Kartika Pavilion, RSPAD.

4.5.2 Simultaneous Testing Results (Test-F)

Table 4.14 Simultaneous Hypothesis Testing

ANOVA^a

Model	Sum of Squares	df	Mean Square	F	Sig.
1 Regression	479,254	3	159,751	51,132	,000b
Residual	290,560	93	3,124		
Total	769,814	96			

a. Dependent Variable: Customer Satisfaction

b. Predictors: (Constant), Price, Quality of Service, Facilities

Source: SPSS version 25.0, data processed in 2019.

Based on the results of calculations using SPSS version 25, the value of significance F is obtained 0,000, the conclusion H_0 is rejected so that H_a is accepted because of value *significance F* smaller than the real level α (5%) or 0.000 < 0.05 means that simultaneously the $KD123$ value can be used to explain the effect of changes in the variable quality of service, facilities and price on patient satisfaction. The results of this test can be interpreted that simultaneously the increase and decrease in service quality, facilities and patient satisfaction will have a significant impact on improving services.

4.5.3 Results of Determination Coefficient Testing

The coefficient of determination (r^2) measures how far the model's ability to explain the variation in the dependent variable.

Table 4.15 Determination Coefficient Test Results

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics				
					R Square Change	F Change	df1	df2	Sig. F Change
1	,789a	,623	,610	1.76757	,623	51,132	3	93	,000

Source: SPSS version 25.0, data processed in 2019.

In this study, the r square value in the table above is 0.623, this shows that the proportion of the influence of service quality, facilities, and price on patient satisfaction at Gatot Subroto Regional Hospital is 62%. This means that the quality of service, facilities, and prices on patient satisfaction at RSPAD Gatot Subroto has an influence proportion of 62%, while the remaining 38% (100% - 62%) is influenced by other variables not examined in this study. Based on results; Linear regression testing above, the following equation can be made:

$$\text{Patient Satisfaction} = 2.239 + 0.219 X_1 + 0.136 X_2 + 0.436 X_3 + e$$

4.6 Research Findings

Based on the results of hypothesis testing, it shows that:

- a. Based on the results of simultaneous hypothesis testing, it was found that there was a positive influence on the variable quality of service (X1) on patient satisfaction at the Pavillion Kartika Hospital, RSPAD. In accordance with the services provided by nurses and doctors to patients during the treatment period at the Kartika Pavilion Hospital, RSPAD.
- b. Based on the results of simultaneous hypothesis testing, it was found that there was a significant influence on the facility variable (X2) on patient satisfaction at the Pavillion Kartika Hospital, RSPAD. In accordance with the research conducted by Suyitno (2018) that the facility variable has a significant effect on inpatient satisfaction.
- c. Based on the results of testing the hypothesis simultaneously found that there was a positive influence on the price variable (X3) on patient satisfaction at the Pavillion Kartika Hospital, RSPAD..
- d. Based on the results of simultaneous hypothesis testing, it was found that there was a significant influence on the variable service quality (X1), facilities (X2), and price (X3) on patient satisfaction at the Pavillion Kartika Hospital RSPAD. In accordance with the research conducted by Setyawati (2018) that the variables of service quality, facilities, and prices have a significant effect on inpatient satisfaction.

V. CONCLUSIONS AND SUGGESTIONS

Conclusion

Based on the research results that have been described in the previous chapter, what can be concluded in this study are as follows:

1. The effect of service quality on patient satisfaction at the Kartika Pavilion RSPAD was 28.88%. The results of partial hypothesis testing, service quality (X1) to patient satisfaction (Y) with a significant t value of $0.000 < 0.05$ so that H_0 is rejected H_a accepted, because it is smaller than the real level $\alpha = 5\%$. This proves that partially there is an influence between the quality of service on patient satisfaction.
2. The effect of facilities on patient satisfaction is 24.03%. The results of partial hypothesis testing, Facility (X2) on patient satisfaction (Y) with a significant t value of $0.133 < 0.05$ so that H_0 is accepted H_a rejected, because it is greater than the real level $\alpha = 5\%$. This proves that partially there is no effect between facilities on patient satisfaction.
3. The effect of price on patient satisfaction is 58.40%. The results of partial hypothesis testing, price (X3) on patient satisfaction (Y) with a significant value of $0.000 < 0.05$ so that H_0 is rejected H_a accepted, because it is smaller than the real level $\alpha = 5\%$. This proves that partially there is an influence between price on patient satisfaction.

The effect of service quality, facilities, and price on consumer patient satisfaction is 62.3%. The significant results of the variable service quality (X1), facilities (X2), and price (X3) on patient satisfaction (Y) are $0.000 < 0.05$. So that H_0 is rejected, H_a is accepted, because it is smaller than the real level $\alpha = 5\%$, it is believed to be influential.

5.2. Suggestion

Based on the above conclusions, the researchers propose several suggestions for the company, namely as follows:

1. For service quality variables, which have a positive and significant impact on patient satisfaction, the Kartika Pavilion of RSPAD should improve the quality of service as much as possible.
2. For the facility perception variable, there is no positive and significant influence on patient satisfaction, the Kartika Pavilion RSPAD should pay attention to hospital facilities and hospital physical facilities, including cleanliness and supporting services to provide comfort for customers to further increase patient satisfaction.
3. For the price variable, which has a positive and significant effect on patient satisfaction, the Kartika Pavilion of RSPAD should still pay attention to setting the hospital fee rates because there are still many other hospital competitors.

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