

International Journal of Sciences: Basic and Applied Research (IJSBAR)

Sciences:
Basic and Applied
Research
ISSN 2307-4531
(Print & Online)
Published by:

ISSN 2307-4531 (Print & Online)

http://gssrr.org/index.php?journal=JournalOfBasicAndApplied

The Satisfaction Analysis of Kidney Failure Patients on the Quality of Hemodialysis Services in the National Health Guarantee Era (JKN) (Case Study in Surya Husadha General Hospital Denpasar)

Ni Nyoman Tri Pramayanti^a*, I Ketut Arnaya^b

^{a,b}Undiknas Graduate School, Bali, Indonesia ^aEmail: tripramayanti@gmail.com

Abstract

The purpose of this study was to study the effect of patient expectation variables, employee competence on HD service quality at Surya Husadha Hospital also affect patient expectation variables and employee competence on patient satisfaction with HD services at Surya Husadha Hospital, and the effect of service quality variables on patient satisfaction with HD services. The technique of collecting data using questionnaires and interviews with a sample of 55 respondents. The analysis technique used is the structural equation model (SEM), known as Partial Least Square (PLS) with the help program SmartPLS 3.0 M3. The results of this study indicate that patient expectations affect positively on service, employee competence is positively related to service quality, patient expectations affect positively significantly on patient satisfaction, employe competence significantly increases positively on patient satisfaction. Service quality is positively significant on patient satisfaction.

Keywords:	Patient	expectations;	Employee	competence;	Quality of	f service;	Patient	satisfaction;	Hemodia	lysis;
National H	ealth Ins	urance Progra	am (NHIP).							

^{*} Corresponding author.

1. Introduction

Based on Law No. 36 of 2009 the Republic of Indonesia states that health is a human right and one of the elements of well-being that must be realized by health services. Health services are needed to achieve the degree of public health in accordance with the ideals of the nation with effective, efficient and targeted services. To realize the above commitment, the government is responsible for implementing public health insurance through the National Health Insurance (JKN) program for individual health. The Government of Indonesia seeks to succeed the JKN program in an effort to achieve Universal Health Coverage (UHC) that guarantees the health of the whole community and ensures that all people receive the health services they need without having to experience financial hardship [15]. In the current era of controversial National Health Insurance (JKN), the quality of health services to JKN participants is in the broad spotlight. The community's need for quality hospital services is increasing along with the improving economy and the degree of public health. The quality of health services is strongly influenced by various factors, including the quality of physical facilities, medical personnel, medicines, medical devices and other supporting facilities. According to previous researchers, concluded that service quality had an effect on satisfaction and satisfaction customer loyalty. Reference [9] who conducted research at Private Hospital in Singaraja (Bali) with the results of the five dimensions of service quality (tangible, empathetic, reliability, responsiveness and assurance) simultaneously affected the patient loyalty (behavioral intention). Service quality is a measurement of the level of service provided or delivered in accordance with customer expectations. Currently the level of competition in hospitals is very high. In order for the Hospital to survive and develop, the Hospital must be proactive and provide quality services to consumers. According to academics, customer satisfaction is a stand-alone framework and the satisfaction that patients feel depends on their perception (perceived value) of expectations and reality in the services provided by the hospital. Customer loyalty is a manifestation and continuation of customer satisfaction in using the facilities and services provided by the company, and to remain a customer of the company. One of the regulations issued by the government, in this case is the Ministry of Health in the form of the Republic of Indonesia Minister of Health which regulates health service tariff standards in the administration of the JKN program. The tariff standard uses the Indonesian Case Base Groups tariff system (INA-CBG tariff) as the basis for claiming service tariffs by health facilities. Some tariff rates have decreased. Tariff rates and changes in magnitude have forced health facilities, including hospitals, to always apply quality control and cost control in order to remain able to carry out their operations [5]. Surva Husadha General Hospital Denpasar must be able to control its business operations, be able to adapt to JKN regulations. One of the services that produces the Surya Husadha General Hospital in Denpasar is the Hemodialysis Unit (HD) which serves patients with Chronic Kidney Failure (GGK) who are already at the terminal stage (Kidney Failure Terminal). From the latest data, almost all HD patients have become JKN participants The number of kidney failure patients receiving HD action in Indonesia has increased. Data from PERNEFRI, in 2011 in Indonesia there were 15,353 new patients undergoing HD and in 2012 there were an increase in 4,268 patients undergoing hemodialysis so that overall there were 19,621 patients newly undergoing HD. Until the end of 2012 there were 244 hemodialysis units in Indonesia and of course that number was still very poor to be able to serve all patients who needed this hemodialysis service. Hemodialysis Unit of Surya Husadha Denpasar General Hospital has 15 hemodialysis machines, which are effective as many as 14 machines, while one special machine is a backup machine for emergency conditions. Overseas studies

show that reducing UHC rates in their countries also reduces the quality of services provided by patients. In this case, of course, the patient or community affected. Based on this the researchers felt the need to conduct research to determine and analyze the quality of service experienced by patients with renal failure JKN participants who undergo hemodialysis therapy at Surya Husadha General Hospital.

2. Hypotheses

Patients will always look for health services with service performance that can meet expectations or not disappoint patients. Performance in this case is referred to the quality of service, stated by [30] that patient expectations affect the quality of service. [31] also revealed that quality products can meet customer needs.

H1: The higher the patient's expectation, the higher the quality of service in the Hemodialysis Room of the Surya Husadha General Hospital Denpasar.

Based on [31] research, it is stated that if the knowledge variable increases, it will improve the performance of inpatients of Labuang Baji Hospital Makassar. The partial contribution of knowledge variables in explaining variations in nurse performance variables is 99.7%. Performance in this case is meant the quality of service. Employee competency is a benchmark for assessing service quality received by service users according to [27]. This is also in line with the Decree of the Minister of Administrative Reform Number 63 / KEP / M.PAN / 7/2003, namely that employees must be competent in providing services in accordance with the required skills, attitudes and behaviors.

H2: The higher the competency of employees the higher the quality of service in the Hemodialysis Room at Surya Husadha General Hospital Denpasar.

Reference [39] state that patient expectations affect the level of patient satisfaction. This is also supported by [12] study which states that patients will feel dissatisfied if not noticed, lack of emotional support, come into the room when doing something and quickly leave the room. Reference [6] states that the higher the patient's expectations, the better patient satisfaction with the health service provider.

H3: The higher the patient's expectation, the higher the patient's satisfaction in the Hemodialysis Room of the Surya Husadha General Hospital, Denpasar.

Reference [23] stated that employee competency in the aspect of communication skills significantly influences the level of satisfaction. On the contrary, in the research of [12] no positive effect was found between HR competencies on patient satisfaction at the Hemodialisa Muslimat NU Cipta Husada Clinic. There's possible indirect effect, because patients feel more directly through the quality of service satisfaction.

H4: The higher the employee competency the higher the patient satisfaction in the Hemodialysis Room of the Surya Husadha General Hospital Denpasar.

Reference [31] states that the higher the quality of service, the higher the level of patient satisfaction at Ganesha

Public Hospital. The overall service quality has a positive relationship with satisfaction. Some researchers divide the quality of service into its dimensions. Reference [40] concluded that the results of descriptive analysis showed customers (patients) Cakra Husada Public Hospital Klaten had a satisfying perception of the quality of the service it received (felt). The results of the regression analysis showed that the five dimensions of service quality consisting of tangible, reliability, responsiveness, assurance, and empathy had a significant effect on customer satisfaction (patients) at Cakra Husada Klaten General Hospital, both individually and together.

H5: The higher the quality of service the higher the patient satisfaction in the Hemodialysis room at Surya Husadha General Hospital Denpasar.

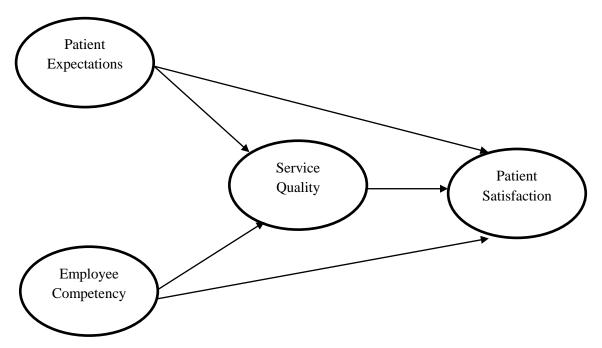


Figure 1: Conceptual Framework

3. Research Methods

This research was conducted at the Surya Husadha Denpasar General Hospital (RSU) on Jl. Serangan Island No.7, Denpasar. Surya Husadha Hospital in Denpasar is one of the Type C private hospitals in Denpasar. The study population was kidney failure patients who routinely get dialysis services at the Hemodialysis Unit at Surya Husadha Hospital in Denpasar. In this study took all populations, because the number of kidney failure patients who registered routinely perform hemodialysis at Surya Husadha Hospital Denpasar as many as 55 people. The analysis technique used is the structural equation model (Structural Equation Modeling-SEM), known as Partial Least Square (PLS) with the help of the SmartPLS 3.0 M3 program.

4. Result and Discussion

Discriminant validity testing is a way to assess the validity of variables from the value of average variance

extracted (AVE). The model is said to be good if the AVE of each variable's value is greater than 0.50.

Table 1: The Calculation Results of Cross Loading

	Patient Expectations	Employee Competence	Service	Quality	Patient	Satisfaction
	(X_1)	(X2)	(Y1)		(Y2)	
AVE	0,682	0,672	0,691		0,669	

The output results in Table 1. shows that the AVE value of all variables is greater than 0.50 so the model can be said to be good.

Table 2: Results of Instrument Reliability Research

Variables	Composite Reliability	Cronbachs Alpha	Explanation
Patient Expectations (X ₁)	0,914	0,882	Reliable
Employee Competence (X ₂)	0,891	0,840	Reliable
Service Quality (Y ₁)	0,918	0,887	Reliable
Patient Satisfaction (Y ₂)	0,923	0,899	Reliable

The results of composite reliability and Cronbach's alpha output variables are patient expectations, employee competence, service quality, and patient satisfaction are all above 0.70. Thus, it can be explained that all variables have good reliability.

Table 3: Determination Coefficient Values

Variables	R-square	R-square Adjusted
Service Quality (Y1)	0,720	0,709
Patient Satisfaction (Y2)	0,896	0,889

Based on Table 3. The model of the influence of patient expectations and employee competence on service quality gives an R-square value of 0.720 which can be interpreted that the variability of service quality variables can be explained by the variability of patient expectations and employee competency variables by 72 percent, while 28 percent is explained by other variables beyond what was studied. Furthermore, the influence of patient expectations, employee competence, and service quality on patient satisfaction gives an R-square value of 0.896 which can be interpreted that the variability of patient satisfaction variables can be explained by the variability of patient expectation variables, employee competency, and service quality by 89.6 percent, while The remaining 10.4 percent is explained by other variables outside the study. To measure how well the observational values generated by the model and also the estimated parameters, it is necessary to calculate the following Q-square (Q2):

$$Q2 = 1-(1-R12)(1-R22)$$

- = 1-(1-0.720)(1-0.889)
- = 1-(0,280) (0,111)
- = 1-0,031
- = 0,969

Q2 value has a value with a range of 0 <Q2 <1, where the closer to 1 means the better the model. The results of these calculations obtained a Q2 value of 0.969, so it can be concluded that the model has a very good predictive relevance. Thus, it can be explained that 96.9 percent of variations in patient satisfaction are influenced by patient expectations, employee competencies, and service quality, while the remaining 3.1 percent are influenced by other variables not explained in the research model. Testing the direct effect between variables can also be seen from the results of the path coefficient validation test on each path that can be seen in Table 4.

Table 4: Path Coefficients

Path Coefficient Among	Path Coefficient	t Statistics	Divolue	Evalenation
Variable	ratii Coemcient	t Statistics	P value	Explanation
Patient Expectations				
$(X_1) \rightarrow \text{ Service Quality}$	0,595	5,829	0,000	Significant
(Y_1)				
Employee Competence				
$(X_2) \rightarrow \text{Service Quality}$	0,325	2,946	0,003	Significant
(Y_1)				
Patient Expectations				
$(X_1) \rightarrow Patient$	0,392	4,388	0,000	Significant
Satisfaction (Y ₂)				
Employee Competence				
$(X_2) \rightarrow Patient$	0,257	2,540	0,011	Significant
Satisfaction (Y ₂)				
Service Quality $(Y_1) \rightarrow$	0.297	4 400	0.000	C::£:
Patient Satisfaction (Y ₂)	0,387	4,499	0,000	Significant

Based on the results of the path coefficients in Table 4. the hypothesis testing results can be determined which are described in the following description:

Hypothesis testing on the effect of patient expectations on service quality produces a correlation coefficient of 0.595. The value of t Statistics is 5.829 (> t-critical 1.96), so the influence of patient expectations on service quality is significant. Thus, hypothesis 1 (H1) states that patient expectations have a positive effect on service quality. This means that the higher the patient's expectations, the higher the quality of service in the Hemodialysis Room of the Surya Husadha General Hospital in Denpasar, so that Hypothesis 1 is accepted.

Hypothesis testing on the effect of employee competence on service quality produces a correlation coefficient of 0.325. The value of t Statistics is 2,946 (> t-critical 1,96), so the effect of employee competence on service quality is significant. Thus, hypothesis 2 (H2) states that employee competence has a positive effect on service quality. This means that the higher the competency of employees the higher the quality of service in the Hemodialysis Room of the Surya Husadha General Hospital in Denpasar so that Hypothesis 2 is accepted. Hypothesis testing on the effect of patient expectations on patient satisfaction results in a correlation coefficient of 0.392. The value of t Statistics is 4.388 (> t-critical 1.96), so the influence of patient expectations on patient satisfaction is significant. Thus, hypothesis 3 (H3) states that patient expectations have a positive effect on patient satisfaction. This means that the higher the patient's expectations, the higher the patient's satisfaction in the Hemodialysis Room of the Surya Husadha General Hospital in Denpasar, so that Hypothesis 3 is accepted. Hypothesis testing on the effect of employee competence on patient satisfaction produces a correlation coefficient of 0.257. T Statistics value obtained 2,540 (> t-critical 1.96), then the effect of employee competence on patient satisfaction is significant. Thus, hypothesis 4 (H4) states that employee competence has a positive effect on patient satisfaction. This means that the higher the employee competency, the higher the patient satisfaction in the Hemodialysis Room of the Surya Husadha General Hospital in Denpasar, so that Hypothesis 4 is accepted. Hypothesis testing on the effect of service quality on patient satisfaction produces a correlation coefficient of 0.387. The value of t Statistics obtained 4.499 (> t-critical 1.96), then the influence of service quality on patient satisfaction is significant. Thus, hypothesis 5 (H5) states that service quality has a positive effect on patient satisfaction. This means that the higher the quality of service the higher patient satisfaction in the Hemodialysis Room of the Surya Husadha General Hospital in Denpasar, so that Hypothesis 5 is accepted.

4.1. The Effect of Patient Expectations on Service Quality

Based on the results of the analysis through the structural equation model, it can be seen that patient expectations have a positive and significant influence on service quality, with a t-statistic value of 5.829 (> t-critical 1.96), which means that the influence of patient expectations on service quality is significant. The results of this study are in line with the results of research conducted by [23] which states that the higher the patient's expectations, the higher the quality of service at the Dental Clinic at Tk.II Udayana Hospital Next it is also discussed in qualitative research [30] that the existence of individual expectations and daily life that is the hope to return to live a normal life, while the expectations of information, service providers and clinical care are part of the expectations of clinical services received. In this case the clinical service in question is the quality of service. Patient expectations affect the quality of service. Patients will always look for health services with service performance that can meet expectations or not disappoint patients.

4.2. The Effect of Employee Competence on Service Quality

Based on the results of the analysis through the structural equation model, it can be seen that the effect of employee competence on service quality produces a t Statistics score of 2.946 (> t-critical 1.96), which means that [12] where there was a positive influence between HR competencies on the quality of service of Muslimat NU Cipta Husada hemodialysis clinic, from 108 respondents found on HR competency variable, 12 out of 17 statements answered, respondents said very competent. Likewise [27] stated that employee competency is a

benchmark for assessing the quality of service received by service users. So employee competence determines the quality rather than service, especially services in the field of services. This is also reinforced by the issuance of the Decree of the Minister of Administrative Reform Number 63 / KEP / M.PAN / 7/2003 which states that employees must be competent in providing services in accordance with the required skills, attitudes and behaviors.

4.3. The Effect of Patient Expectations on Patient Satisfaction

Based on the results of the analysis through the structural equation model, it can be seen that the effect of patient expectations on patient satisfaction yields a t Statistics value of 4.388 (> t-critical 1.96), which means that the influence of patient expectations on patient satisfaction is significant. This is in line with [23] which states that the higher the patient's expectations, the higher the patient satisfaction at the Dental Polyclinic at Tk.II Udayana Hospital with a total of 100 respondents. Reference [39] with the title "Patient Expectations in Nurse Caring Behavior Satisfaction at Deli Serdang Lubukpakam District Hospital" shows that patient expectations influence the level of patient satisfaction. Reference [6] states that the higher the patient's expectations, the better satisfaction will be patients against these health care providers.

4.4. The Effect of Employee Competence on Patient Satisfaction

Based on the results of the analysis through the structural equation model, it can be seen that the effect of employee competence on patient satisfaction produces a t Statistics score of 2.540 (> t-critical 1.96), which means that the effect of employee competence on patient satisfaction is significant. This is in line with research [31] which states that the higher the knowledge of nurses, in this case means the competence of employees, the higher the level of patient satisfaction at Ganesha General Hospital.

4.5. The Effect of Service Quality on Patient Satisfaction

Based on the results of the analysis through the structural equation model, it can be seen that the effect of service quality on patient satisfaction yields a t Statistics score of 4.499 (> t-critical 1.96), which means that the effect of service quality on patient satisfaction is significant. In line with [31] states that the higher the quality of service, the higher the level of outpatient satisfaction at Ganesha General Hospital. A similar study was also conducted by [23] in the Dental Polyclinic of Udayana Tk.II Hospital with the results of service quality having a significant effect on patient satisfaction. Reference [3] also examined hospital service quality and its effect on patient satisfaction in a number of private and government hospitals in Malaysia. The findings obtained from this study are the higher the service quality, the higher the patient satisfaction. The same thing was done by [2] in Malaysia in the same year, resulting in a research conclusion that good service quality would increase patient satisfaction.

5. Conclusion and Recommendation

Patient expectations has a positive and significant effect on the quality of service. This shows that the higher the patient's expectations, the better the quality of service in the Hemodialysis Room of the Surya Husadha General

Hospital Denpasar. Employee competence has a positive and significant effect on service quality. This shows that the higher the competency of employees, the higher the quality of service in the Hemodialysis Room of the Surya Husadha General Hospital Denpasar. Patient expectations has a positive and significant effect on patient satisfaction. This shows that the higher the patient's expectations, the higher the patient satisfaction in the Hemodialysis room at Surya Husadha General Hospital Denpasar. Employee competence has a positive and significant effect on patient satisfaction. This shows that the higher the employee competency, the higher the patient satisfaction in the Hemodialysis Room of the Surya Husadha General Hospital Denpasar. Service quality has a positive and significant effect on patient satisfaction. This shows that the higher the quality of service the higher the patient satisfaction in the Hemodialysis room at Surya Husadha General Hospital Denpasar. This study certainly has limitations, in terms of analyzing patient satisfaction JKN participants, there are so many factors that influence, one of them is the level of patient confidence in certain health facilities that have not been included in this study. The system of JKN that still has many changes can also provide a different analysis of patient satisfaction. So in the future research is still very much needed on JKN participant patients either in their specific hemodialysis unit or in other units.

References

- [1] Ajarmah, B.S. and Hashem, T.N. (2015). Patient satisfaction evaluation onhospitals; Comparison study between accredited hospitals in Jordan, European Scientific Journal, Vol. 11, No. 32, pp. 298 and non-accredited 314.
- [2] Aliman, N.K. and Mohamad, W.N. (2013). Perceptions of service quality and behavioral intentions: A mediation effect of patient satisfaction in the private health care in Malaysia, International Journal of Marketing Studies, Vol. 5, No. 4, pp. 15-29.
- [3] Amin, M. and Nasharuddin, S.Z. (2013). Hospital service quality and its effects on patient satisfaction and behavioral intention. Clinical Governance: An International Journal, Vol. 18, No. 3, pp. 238-254.
- [4] Aryani dan Rosinta. (2010). Pengaruh Kualitas Layanan Terhadap Kepuasan Pelanggan Dalam Membentuk Loyalitas Pelanggan. Jurnal Ilmu Administrasi dan Organisasi: 114-126. Jakarta: Universitas Indonesia.
- [5] BPJS Kesehatan. (2014). Perubahan Tarif INA-CBG's Membuat Biaya Kesehatan Lebih Efektif. Buletin info BPJS Kesehatan Edisi VIII, Penerbit BPJS Kesehatan. Jakarta.
- [6] Choi, K.S., Cho, W.H., Lee, S., Lee, H. and Kim, C. (2004). The relationship among quality, value, satisfaction and behavioral intention in health care provider choice: A South Korean study. Journal of Business Research, Vol. 57, pp. 913-921.
- [7] Ferdinand, Augusty. (2014). Metode Penelitian Manajemen. Semarang: BP Universitas Diponegoro.
- [8] Ghozali, Imam. & Hengky, Latan. (2012). Partial Least Square: Konsep, Teknik dan Aplikasi Menggunakan Program Smart PLS 2.0 M3.. Semarang: Universitas Diponegoro.
- [9] Gunawan, K. and Djati, S.P. (2011). Kualitas Layanan dan Loyalitas Pasien(Studi Pada Rumah Sakit Swasta di Kota Singaraja Bali. Jurnal Manajemen dan Kewirausahaan, Vol. 13, No. 1, pp. 32-39.
- [10] Hadioetomo. (2009). Analisis Kualitas Layanan Yang Mempengaruhi Kepuasan Pelanggan Serta Dampaknya Terhadap Behavioral Intentions, Karisma, Vol. 3, No. 2, pp. 113-122
- [11] Haryani. (2014). Analisis Biaya Rawat Jalan Hemodialisis Peritoneal dan Peritoneal Dialisis Mandiri

- Berkesinambungan Pada Peserta Askes di PT Askes (Persero) Divisi Regional VI, Jurnal Manajemen Pelayanan Kesehatan, Vol.17 No.01 Maret. Hal 45-50.
- [12] Haryanto, F. K. dan Rina Anindita. (2018). Peranan Kompetensi SDM Terhadap Kualitas Pelayanan Dan Kepuasan Pasien Di Klinik Hemodialisa NU Cipta Husada. Jurnal Hospitalia Vol.I No. I, Februari 2018
- [13] Hendhana, S. (2017). Service Quality Rumah Sakit dan Efeknya Terhadap Patient Satisfaction, Perceived Value, dan Bahavioral Intention, Tesis Magister Manajemen, Pascasarjana Undiknas, Denpasar.
- [14] Kalnadi, D. (2013). Pengukuran Penerimaan dan Penggunaan Teknologi Pada UMKM dengan Menggunakan Metode UTAUT. Jurusan Adm. Bisnis, Fakultas ISIP, Universitas Lampung. (unpublish)
- [15] Kementrian Kesehatan Republik Indonesia. (2014), Buku Pegangan Sosialisasi Jaminan Kesehatan Nasional (JKN) Dalam Sistem Jaminan Sosial Nasional, Kementrian Kesehatan RI, Jakarta.
- [16] Kementrian Kesehatan Republik Indonesia. (2014), Peraturan Menteri Kesehatan Nomor 59 Tahun 2014 Tentang Standar Tarif Pelayanan Kesehatan Dalam Penyelenggaraan Program Jaminan Kesehatan, Kementrian Kesehatan RI, Jakarta.
- [17] Kementrian Kesehatan Republik Indonesia. (2015). Peraturan Menteri Kesehatan Nomor 85 Tahun 2015 Tentang Pola Tarif Nasional Rumah Sakit, Kementrian Kesehatan RI, Jakarta.
- [18] Kementrian Kesehatan Republik Indonesia. (2016). Peraturan Menteri Kesehatan Nomor 64 Tahun 2016 Tentang Standar Tarif Pelayanan Kesehatan Dalam Penyelenggaraan Program Jaminan Kesehatan Perubahan Atas Peraturan Menteri Kesehatan Nomor 52 Tahun 2016 Tentang Standar Tarif Pelayanan Kesehatan Dalam Penyelenggaraan Program Jaminan Kesehatan, Kementrian Kesehatan RI, Jakarta.
- [19] Kementrian Kesehatan Republik Indonesia. (2016). Peraturan Menteri Kesehatan Nomor 76 Tahun 2016 Tentang Pedoman Indonesian Case Base Groups (INA-CBG) Dalam Pelaksanaan Jaminan Kesehatan Nasional, Kementrian Kesehatan RI, Jakarta.
- [20] Kotler, P. and Armstrong, G. (2012). Principles of Marketing. 14th ed., Prentice Hall, New Jersey.
- [21] Kotler, P. and Keller, K. (2012). Marketing Management, 14th ed., Prentice Hall, New Jersey.
- [22] Menkes RI (Dirjen Yanmed). (2014). Pedoman Pelaksanaan jaminan kesehatan masyarakat (Jamkesmas) tahun 2005. Jakarta: Departemen Kesehatan RI.
- [23] Noviana, L. (2018). Harapan Pasien, Kompetensi Pegawai, Kualitas Pelayanan, dan Kepuasan Pasien, Tesis Magister Manajemen, Pascasarjana Undiknas, Denpasar.
- [24] Parasuraman, A., Zeithaml, V.A. and Berry, L.L. (1985). A Conceptual Model Of Service Quality MarketingAnd Its Implications For Future Research. The Journal of Marketing, Vol. 49, No. 4, pp. 41-50.
- [25] Parasuraman, A., Zeithaml, V.A. and Berry, L.L. (1988). SERVQUAL:Multiple-Item Scale For Measuring Consumer Nerceptions Of Service Quality, Journal of Retailing, Vol. 64, No. 1, pp. 12-40.
- [26] Parasuraman, A., Zeithaml, V.A. and Berry, L.L. (1991). Refinement And Reassessment Of The SERVQUAL Scale.Journal of Retailing, Vol. 67, No. 4, pp. 420-450.
- [27] Parasuraman, A., Zeithaml, V.A. and Berry, L.L. (1993). The Nature And Determinants Of Customer

- Expectations Of Service. Journal of the Academy of Marketing Science, Vol. 21, No. 1, pp. 1-12.
- [28] Parasuraman, A., Zeithaml, V.A and Berry, L.L. (1994). Reassessment Of Expectations As A Comparison Standard In Measuring SQ: Implications For Future Research, Journal of Marketing, Vol. 58, pp. 111-124.
- [29] Ratnawati. (2014). Efektivitas Dialiser Proses Ulang (DPU) Pada Penderita Gagal Ginjal Kronik (Hemodialisis). Jurnal Ilmiah Widya Vol.2 No.1. Hal 48-52.
- [30] Raziansyah, Widyawati, Adi Utarini. (2012). Pengalaman Dan kul Pasien Yang Menjalani Hemodialisis Di RSUD Ratu Zalecha Martapura. Jurnal Manajeman Pelayanan Kesehatan, Vol. 15, No.2 Juni 2012.
- [31] Romansyah, D. E. (2018). Analisis, Sikap, Perilaku Dan kadiritas Pelayanan Perawat Terhadap Tingkat Pasien. Tesis Magister Manajemen, Pascasarjana Undiknas, Denpasar.
- [32] Sekaran, U. (2003). Research Methods for Business, 4th ed., John Wiley & Sons, Inc., New York
- [33] Sugiono. (2011). Metode Penelitian Kuantitatif, Kualitatif dan R&D. Bandung: Alfabeta.
- [34] ______, (2015). Statistik Untuk Penelitian. Bandung: CV. Alfabeta
- [35] Steffi Mongkaren. (2013). Fasilitas Dan Kualitas Pelayanan PengaruhnyaTerhadap Kepuasan Pengguna Jasa Rumah Sakit Advent Manado, JurnalEMBA, 1 (4): 493-503. Universitas Sam Ratulangi Manado.
- [36] Suryawati, C. (2004). Kepuasan Pasien Rumah Sakit (Tinjauan Teoritis DanPenerapannya Pada Penelitian), JMPK 07 (04), Semarang, Jawa TengahUniversitas Diponegoro.
- [37] Setyaningsih, I. (2013). Analisis Kualitas Pelayanan Rumah Sakit TerhadapPasien Menggunakan Pendekatan Lean Servperf (Lean Service Dan Performance), Spektrum Industri, 11 (2): 117-242. UIN Sunan Kalijaga.
- [38] Syamsiah, N. (2009). Analisis Faktor-Faktor yang Mempengaruhi Nilai yang Dirasakan Pelanggan untuk Menciptakan Kepuasan Pelanggan di RSUP Dokter Karyadi Semarang. Tesis: Unversitas Diponogoro.
- [39] Tanjung, S.N (2012). Harapan Pasien Dalam Kepuasan Perilaku Caring Perawat Di RSUD Deli Serdang Lubukpakam, Jurnal Universitas Sumatera Utara.
- [40] Utama, A. (2003). Analisis Pengaruh Persepsi Kualitas Pelayanan TerhadapKepuasan Pelanggan Rumah Sakit Umum Cakra Husada Klaten, Opsi, 1(2): 96-110. Yogyakarta: UPN Veteran.
- [41] Yohana. A. (2009). Analisis Harapan dan Kepuasan Pasien Rawat InapPenyakit Dalam terhadap Mutu Pelayanan Dokter Spesialis di RSI SunanKudus, Tesis. Semarang: Universitas Diponegoro.