



The Relationship Between Health Service Quality and Patient Satisfaction Level at the Old Tonsea Community Health Center in 2025.

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ABSTRACT

Background: Patient satisfaction is the main indicator in measuring the success of health service delivery. Based on initial observations at the Tonsea Lama Health Center, even though it has been fully accredited, there are still complaints related to waiting time and comfort. This study aims to determine the relationship between the quality of health services and the level of patient satisfaction at the Tonsea Lama Health Center in 2025.

Objective: To find out the relationship between the quality of health services and the level of patient satisfaction at the Tonsea Lama Health Center.

Methods: This study used a quantitative method with a cross sectional design. The study population was outpatients at the Tonsea Lama Health Center with a sample of 73 respondents taken using consecutive sampling techniques. The research instrument uses a questionnaire that has been tested for validity and reliability. Data analysis was carried out univariately, bivariate using the Chi-Square test, and the Pearson correlation test.

Results: The results of the univariate analysis showed that the majority of respondents were female (69.9%), aged 55-65 years (32.9%), high school education (72.6%), and worked as IRTs (52.1%). As many as 63.0% of respondents rated the quality of service in the good category and 63.0% of respondents were satisfied. The results of the Chi Square test showed a p-value = 0.000 (< 0.05), which means that there is a significant relationship between the quality of health care and the level of patient satisfaction. The Pearson correlation test showed a value of $r = 0.824$, which indicated a very strong and positive relationship.

Conclusion: There is a significant and very strong relationship between the quality of health services and the level of patient satisfaction at the Tonsea Lama Health Center. The better the perception of the quality of the service provided, the higher the level of patient satisfaction.

INTRODUCTION

Health is a person's state of health, both physically, mentally, and socially and not just being free from disease to allow him to live a productive life (President of the Republic of Indonesia, 2023). According to WHO, health is a state of physical, physical, mental, and social integrity and not just a state that is free from disease, disability and weakness. Meanwhile, health is a state of physical, mental and social health.

Public Health Centers, hereinafter referred to as Puskesmas, are health service facilities that organize public health efforts and first-level individual health efforts, by prioritizing promotive and preventive efforts in their work areas (Regulation of the Minister of Health of the Republic of Indonesia Number 19 of 2024).

Patient satisfaction is defined as a customer's response to a mismatch between the previous level of interest and the actual performance he or she feels after use. Patient satisfaction is related to the quality of health services. If a health institution, one of which is a health center, will make efforts to improve the quality of health services, the measurement of patient satisfaction must be carried out. Through these measurements, it can be known to what extent the dimensions of the quality of health services that have been implemented can meet the wishes of patients Anzar, M., Sudirman, S., & Saputra, A. D. (2022). The relationship between service quality and the level of satisfaction of BPJS health patients at the Mabelopura Health Center, Palu City. *Collaborative Journal of Science*, 5(6), 297–303.

The patient satisfaction factor greatly affects the number of patient visits. Therefore, improving the quality of service is needed to provide satisfaction to patients. Patient visits are one of the indicators to determine whether or not a health service is necessary, especially a health center, to be able to improve the quality of service (Sanjaya, 2023).

The quality of health services is the level of perfection of the health services that are carried out which on the one hand can satisfy the users of the service and the other party the procedures for its implementation in accordance with the code of ethics and standards that have been set. Good service quality is currently important to improve service quality and patient satisfaction. So that satisfied customers will share their satisfaction with the manufacturer or service provider. Even satisfied customers will share their tastes and experiences with other customers. The five dimensions of service quality for a health service according to Parasuraman related to patient satisfaction are: Tangibles (physical evidence), Reliability (reliability), Responsiveness (responsiveness), Assurance (Guarantee), Empathy (empathy), namely the attention given by the company to customers individually (Sari et al., 2023).

In 2023, the number of health centers in Indonesia will be recorded at 10,180, consisting of 4,210 inpatient health centers and 5,970 non-inpatient health centers. This number decreased compared to 2022, which was recorded at 10,374 health centers, with 4,302 of which were inpatient and 6,072 non-inpatient health centers. This decline was caused by the elimination of several Puskesmas, which occurred due to the change in the status of Puskesmas to Primary Hospital type D, organizational restructuring, and the merger of several Puskesmas (Regulation of the Minister of Health of the Republic of Indonesia No. 43 of 2019).

Several studies show that several factors of patient satisfaction affect the quality of health services (Anzar et al., 2022). Patients who complain about the length of the queue so that many patients wait for a long time, and there are some officers who are not neat in the appearance of health workers and lack communication between health workers and patients so that they are less effective and efficient in services at the Mabelopura health center and patients are reluctant to return to the health center.

Lack of communication between staff and patients is one of the reasons for common complaints of patients in hospitals. Patients are often dissatisfied with the quality and quantity of information received from healthcare workers. Thirty-five to forty percent of patients are not satisfied with communicating with doctors and staff, the most dissatisfied aspect is the amount and type of information received and the way of communication carried out by health workers (Tamara et al., 2021).

In addition, the results of the study (Eliya Astutik, 2020) based on the results of research on the relationship between service quality and outpatient BPJS patient satisfaction at the Bangsalsari Jember Health Center show that there is a significant relationship between the quality of health services and the satisfaction of patients participating in outpatient BPJS, where the better the quality of health services, the more patient satisfaction also increases.

The Tonsea Lama Health Center is the only health facility and place for treatment provided by the nearest government at an affordable cost. The Tonsea Lama Health Center has a fairly important role in maintaining and treating public health in North Tondano District, Minahasa Regency. In this quite important role, the Puskesmas is required to provide good service.

The number of patient visits in 2022 to 2024 at the Tonsea Lama Health Center in 2022 is 6,150 people, the number of patient visits in 2023 is 7,586 people, and the number of patient visits in 2024 is 8. 284 people. It can be seen that from 2022 to 2024 there will be a number of patient visits at the Tonsea Lama Health Center, North Tondano District (2024 Health Center).

The urgency of the problem is based on the results of observations made on several patients by interviewing 8 patients, 3 patients complained about the length of the queue so that many people waited long and were not optimal in providing the health services needed due to the slow service, 3 patients said the attitude and communication of the officers were not friendly which caused patients to be dissatisfied with the services provided, 2 people said they were satisfied with the service provided. Although the Tonsea Lama Health Center has achieved Plenary accreditation status, the challenge in maintaining consistency of service quality remains. The phenomenon found in the field shows that there are fluctuations in patient satisfaction triggered by dynamic service waiting times and the effectiveness of officer communication during peak hours. This is an urgency to be researched to ensure that accreditation status is in line with the subjective experience felt by service users on an ongoing basis. According

to personal experience that there are some patients who complain about the long queue so that many patients wait for a long time. Even though the Tonsea Lama Health Center has been fully accredited, there are still patient complaints related to queue times, and the attitude of the officers. This shows that there is a potential mismatch between quality standards and patient perceptions.

RESEARCH METHODS

Research Methods

This study is a quantitative research with a correlational analytical design with a cross sectional method. Quantitative Research according to Sugiono (2022) is a method based on the philosophy of positivism aimed at describing and testing the hypothesis that the researcher has. Quantitative research contains many numbers ranging from collection, processing, and results that are dominated by numbers, as well as results Correlation Design is research that aims to find out the relationship between two or more variables. Cross sectional study is a type of research design in which researchers collect data from many different individuals at one time. In a cross-sectional study, the researcher observed variables without affecting them which aimed to determine the relationship between the quality of health services and patient satisfaction simultaneously.

Research Location and Time

The location of this research was carried out at the Tonsea Lama Health Center, North Tondano District, Minahasa Regency, North Sulawesi. The time for this research will be carried out in October 2025.

Population and Sample

Population is a generalized area consisting of: objects/subjects that have certain qualities and characteristics that are determined by the researcher to be studied and then drawn conclusions. In this study, there were 895 patients at the Tonsea Lama Health Center which was taken from the number of patient visits in one month, namely month 8 of 2025. Samples are part of the number and characteristics possessed by the population (Sugiyono, 2021). With a total of 895 patient visits in the last 1 month, namely month 8, it was researched formulated with the following Slovin Formula, this study was 73 patient respondents who received services at the Tonsea Lama health center.

Data Analysis Techniques

Univariate Analysis

Univariate analysis is an analysis carried out to analyze each independent and dependent variable and the results of the research presented in the form of a narrated frequency distribution. Univariate analysis describes the characteristics of each variable, including general data, namely age, gender, education and occupation of the respondents as well as data from the respondents of the dependent variables. All the results of the data obtained will be grouped based on the same answer then the results will be presented in the form of a frequency and percentage distribution table. Univariate analysis was carried out to determine the distribution and frequency of each variable that was studied, both dependent and independent variables (Sugiyono, 2021).

Bivariate Analysis

Bivariate analysis uses the Spearman correlation test to determine the relationship between the quality of health services and the level of patient satisfaction, because the data are ordinal and not distributed normally. The bivariate analysis technique used in this study is the chi square test to determine the correlation between the quality of health services and the level of patient satisfaction. The chi square test is used because both variables are included in the nominal data scale. The purpose of the chi square test is to test the relationship or influence of two nominal variables and measure the strength of the relationship between one variable and another nominal variable ($C =$ Coefficient of contingency) (Sugiyono, 2021). The general requirements for the Chi Square test are:

There is no cell with a real frequency value or also called an Actual Count (F_0) of 0 (Zero).

If the contingency table is 2×2 , then there should not be only 1 cell that has an expected frequency or also called an expected count (" F_h ") of less than 5.

If the shape of the table is more than 2×2 , for example 2×3 , then the number of cells with the expected frequency

RESULTS

Univariate Results

Patient Distribution Based on Health Service Quality

The distribution of respondents based on the work in this study can be seen in table 1 as follows:

Table 1. Distribution of Patients Based on the Quality of Health Services at the Tonsea Lama Health Center, North Sulawesi

Quality of Health Services	Frequency (n)	Percentage (%)
Good	46	63,0
Not Good	27	37,0
Total	73	100,0

Source: Primary Data, 2025

Based on the distribution table of the frequency of health service quality, it can be seen that of the 73 respondents, the majority, namely 46 respondents (63.0%) assessed the quality of health services received as well as the good category. Meanwhile, the remaining 27 respondents (37.0%) gave a poor assessment of the quality of the service.

Frequency Distribution of Health Service Quality Indicators

Table 2. Frequency Distribution of Service Policy Assessment

Service Policy	Frequency (n)	Percentage (%)
Good	44	60,3
Not Good	29	39,7
Total	73	100,0

Source: Primary Data, 2025

The results of the analysis showed that most respondents assessed that the service policy was in the good category, which was 60.3% (44 respondents). Meanwhile, 39.7% (29 respondents) considered that the service policy was still not good.

Table 3. Frequency Distribution of Human Resources (HR) Professionalism Assessment

HR Professionalism	Frequency (n)	Percentage (%)
Good	43	58,9
Not Good	30	41,1
Total	73	100,0

Source: Primary Data, 2025

Most of the respondents considered that the professionalism of human resources was relatively good, which was 58.9% (43 respondents). However, as many as 41.1% (30 respondents) stated that the professionalism of human resources is still not good.

Table 4. Frequency Distribution of Public Service Information System Assessment

Public Service Information System	Frequency (n)	Percentage (%)
Good	36	49,3
Not Good	37	50,7
Total	73	100,0

Source: Primary Data, 2025

In this indicator, the assessment of respondents tended to be more who stated that it was not good, namely 50.7% (37 respondents), compared to those who rated it as good at 49.3% (36 respondents). This thin difference shows that the public service information system still does not fully meet public expectations, especially related to access to information, clarity of service flows, availability of information media, and speed of information delivery

Patient Distribution Based on Patient Satisfaction Level

The distribution of respondents based on the work in this study can be seen in table 5 as follows:

Table 5 Distribution of Patients Based on the Quality of Health Services at the Tonsea Lama Health Center, North Sulawesi.

Patient Satisfaction Rate	Frequency (n)	Percentage (%)
Satisfied	46	63,0
Dissatisfied	27	37,0
Total	73	100.0

Source: Primary Data, 2025

A total of 46 respondents (63%) expressed satisfaction with the services received. Meanwhile, 27 respondents (37%) stated that they were not satisfied. This proportion of satisfaction is in line with the findings of service quality, where the largest group rates the service as good.

Bivariate Results

Table 6 Relationship between Health Service Quality and Patient Satisfaction Level at Tonsea Lama Health Center, North Sulawesi

Quality of Health Services	Patient Satisfaction				Quantity		p-value
	Satisfied		Dissatisfied		n	%	
	N	%	N	%			
Good	43	58,9%	3	4,1%	46	63,0%	0,000
Not Good	3	4,1%	24	32,9%	27	37,0%	
Total	46	63,0%	27	37,0%	73	100,0%	

Source: Primary Data, 2025

Of the 46 respondents who assessed the quality of service as good, as many as 43 respondents (58.9% of the total) stated satisfaction. Only 3 people (4.1% of the total) were dissatisfied despite rating the service good. Meanwhile, of the 27 respondents who rated the service as poor, as many as 24 people (32.9%) were dissatisfied. This pattern shows a strong tendency that the perception of good service quality is followed by a high level of satisfaction. This percentage shows that 58.9% of the total respondents gave an assessment of good service quality and positive patient satisfaction level, which means that service quality plays an important role in determining patient satisfaction. On the other hand, poor service quality was predominantly related to patient dissatisfaction by 32.9%.

By Value *Pearson Chi-Square* = 49.526, with *p-value* = 0.000 (< 0.05). So there is a significant relationship between the quality of health services and the level of patient satisfaction. The better the quality of service, the higher the patient satisfaction

DISCUSSION

Patient Satisfaction Rate

Regarding the satisfaction variable, as many as 46 respondents (63.0%) stated Satisfied and 27 respondents (37.0%) stated Dissatisfied. This level of satisfaction is directly proportional to the perception of service quality. Satisfied patients generally get fast, friendly, and informative service.

Patient satisfaction is essentially the result of the process of comparing expectations with the service experience received. When the services provided meet or even exceed the patient's expectations, satisfaction will be created. On the other hand, if the service received is not according to expectations, it will cause dissatisfaction. In this study, the group of dissatisfied patients of 37.0% described a mismatch between expectations and service reality, especially in aspects that were widely complained about such as long waiting times, irregular service schedules, and some less than optimal communication experiences from officers.

The results of this study are in line with the findings of Anzar et al. (2022) which states that the level of patient satisfaction is greatly influenced by the compatibility between patient expectations and the real performance of health workers. When the services received are considered inconsistent, untimely, or unresponsive, patient satisfaction decreases even if other aspects of the service are considered good. This shows that patient satisfaction is multidimensional and very sensitive to the hands-on experience they experience while receiving services.

In addition, the high level of satisfaction in this study also reflects that most patients feel an improvement in the quality of service in line with the improvement efforts made by the health center. However, the existence of a group of patients who are not satisfied still requires serious attention. Puskesmas need to evaluate the factors that cause this dissatisfaction, especially related to service time management, queue processes, and communication between officers and patients.

Overall, the level of patient satisfaction in this study shows that the health center has provided relatively good service, but still needs improvement to provide a consistent service experience and meet the expectations of all service users. By making improvements to the most frequently complained aspects, it is hoped that the level of patient satisfaction can increase sustainably in the future.

The Relationship between Service Quality and Patient Satisfaction

The results of the study showed a strong relationship between the quality of health services and the level of patient satisfaction at the Tonsea Lama Health Center. Based on crosstabulation analysis, it can be seen that most of the patients who rated the quality of service as good also stated that they were satisfied with the service received. On the other hand, the majority of patients who rated the quality of service as poor stated that they were not satisfied. This pattern shows consistency between quality perception and patient satisfaction, where the better the quality of service that the patient feels, the more likely the patient is to feel satisfied.

The Chi-Square statistical test corroborates the findings by showing a p-value of 0.000, which is well below the significance limit of 0.05. This means that the relationships found do not occur by chance, but have real statistical significance. Thus, hypotheses that state that there is a significant relationship between service quality and patient satisfaction are acceptable. These results confirm that the quality of service plays an important role in shaping patient satisfaction at the Tonsea Lama Health Center. This is in line with research (Selfanay et al., 2021) which explains that the p value = 0.000 or the p value is lower or smaller than the α value of 0.05 so that H0 is rejected which means that there is a relationship between service quality and the fulfillment of inpatient satisfaction at Cenderawasih Dobo Hospital.

Theoretically, the results of this study are in line with the theory of Service Quality (SERVQUAL) which states that service quality is the main determinant of customer satisfaction. Patients will feel satisfied when the service received meets or exceeds their expectations. When the quality of service is considered not to meet expectations, for example in terms of waiting time, accuracy of service, or the attitude of officers, the tendency to dissatisfaction will increase. These findings reinforce the understanding that patient satisfaction is not only influenced by clinical factors, but also non-medical aspects such as comfort, communication, and the attitude of health workers (Al-Balas et al., 2024).

The findings of this study are also consistent with several previous studies. Raetasya et al. (2023) found that the quality of health services has a significant relationship with patient satisfaction, especially related to professionalism and service comfort. Likewise, Husna's (2022) research shows that service quality is the dominant variable that affects patient satisfaction, especially through the reliability and empathy of officers. The similarity of these results shows that service quality is a universal factor that affects patient satisfaction, both in urban and rural health centers.

The strong relationship between service quality and patient satisfaction in this study also shows that patients at the Tonsea Lama Health Center have a critical perception of service quality. Patients will only feel satisfied if the service received is up to standard, responsive, and provides a sense of security. The mismatch between expectations and service experience, especially in the aspect of waiting time and schedule accuracy, is the main cause of dissatisfaction in the respondent group who assess the quality as poor.

Overall, this study emphasizes that improving service quality is a strategic step to increase patient satisfaction. Improvements in service flow, improved officer communication, waiting time management, and improved facility comfort are efforts that can directly strengthen the quality of service and significantly increase patient satisfaction. By maintaining the quality of service that is already good and improving aspects that are still weak, the Tonsea Lama Health Center can create more optimal health services and in accordance with the needs of the community.

CONCLUSION

Characteristics The majority of respondents are female, in the age group of 55–65 years, have a high school education, and work as a housewife. This characteristic shows that the elderly group is more dominant in utilizing health services at the Tonsea Lama Health Center.

Most of the respondents assessed the quality of health services at the Tonsea Lama Health Center to be in the good category (63.0%). This shows that the service has run quite optimally, although there are still some patients who consider the service to be not good.

Most patients are satisfied with the service received (63.0%). This level of satisfaction reflects that the services provided are largely able to meet patient expectations, although there are still about a third of patients who feel dissatisfied.

There is a significant relationship between the quality of health services and the level of patient satisfaction, as evidenced by the $p\text{-value} = 0.000 (< 0.05)$. Patients who rated the quality of service as good were mostly satisfied, while patients who rated the quality of service as poor tended to be dissatisfied. Thus, the better the quality of service received by patients, the higher the level of satisfaction felt.

SUGGESTIONS

For the Old Tonsea Health Center

Improve service time management, especially in reducing patient waiting time. Optimizing the queue system, accurate schedules, and adding officers during peak hours can be solutions.

Improving the quality of communication of health workers by providing service excellence training so that health workers can provide more friendly, clear, and informative explanations to patients.

Conduct regular evaluations of the quality of service, especially on aspects that are still considered deficient by patients, through periodic satisfaction surveys and feedback forums.

Improving physical facilities, such as waiting rooms, toilet cleanliness, and other service areas, so that patient comfort is more optimal.

Prioritizing an empathetic approach in service, considering that some patients still complain about the lack of attention and friendliness of the officers.

For the Community/Patients

It is hoped that the community can provide honest and constructive feedback through suggestion boxes or Community Satisfaction Survey (SKM) activities, so that the health center has a strong foundation in improving the quality of service.

The public is advised to use service time appropriately and follow the flow and procedures of services to help the smooth health service process.

For the Next Researcher

It is recommended to research other variables that have the potential to affect patient satisfaction, such as cost factors, accessibility, the image of the health center, or previous experience in receiving health services.

Further research can use mixed methods to dig deeper into patient experiences related to service quality, resulting in a more comprehensive analysis.

It is necessary to conduct similar research in different locations or health facilities to see the comparison of service quality between health centers and determine the dominant factors that affect patient satisfaction.

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