Connection Quality Service in Part Registration Treat Road with Level Discouragement Patient at Vina Aesthetic Hospital

by Tamaralina Karona

Submission date: 20-Aug-2024 10:09AM (UTC+0700)

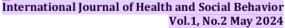
Submission ID: 2434811965

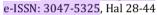
File name: Ith_and_Social_Behavior_-_VOLUME.1,_NO.2_MAY_2024_hal_28-44.docx (121.78K)

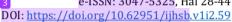
Word count: 4895

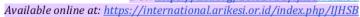
Character count: 28136











Connection Quality Service in Part Registration Treat Road with Level Discouragement Patient at Vina Aesthetic Hospital

Tamaralina Karona^{1*}, Hanry Anta esmana² ^{1,2}STIKes Lecturer Arta Kabanjahe, Indonesia

Email: karonalina986@gmail.com 1 * dokarartakb@gmail.com 2

Abstract: Hospitals play an important role in the service systemhealth and is institution service health Which own staff professional medical Which organized, facility take care road, give service medical, nursing And service related 24 O'clock per day, 7 day per Sunday And give service health complete to public, Good curative as well as preventive. The correlational descriptive design research method aims to understand the relationship between service quality in the department Outpatient registration and patient satisfaction level at Vina Estetika Hospital. Type study Which used is approach cross sectional. Research Research Results This implemented in Vina Aesthetic Hospital, with a total sample of 80 respondents, namely allpatient Which register in registration take care road. Typestudy This is Descriptive correlational using cross sectional approach with sampling techniques is accidental sampling, data done in place registration take care road Vina Aesthetic Hospital with fill in format questionnaire Which has arranged previous In study This, management data done with using SPSS (Statistical Package For Social Science) Then analyzed using statistical tests, namely tests Chi Square. Collection Deep Data study This data collected through a number of procedure. As for procedure Which will done in collection data that is need exists recommendation from party institution Arta Kabanjahe STIKes campus. Then submit application permission to party Vina Aesthetic Hospital For do study. After get research approval from Vina Estetika Hospital along with management, then done study.

Keywords: Service Quality, Satisfaction, Part Registration

1. INTRODUCTION

ACCESS

Wrong One service health Which have role very important in providing health services to society is a hospital. The existence of a hospital as Health service institutions are regulated in Law No.44 in 2009. Hospitals play an important role in the service system health And is institution service health Which own staff professional medical Which organized, facility take care road, give service medical, nursing And service related 24 O'clock per day, 7 day per Sunday And give service health complete to public, Good curative as well as preventive. Apart from that, hospitals also function as place education power health and place study. Service health Which Good give service Which effective, safe, and quality tall to they Which need it with supported by source Power Which adequate (WHO, 2014).

The actual role of hospitals for the Ministry of Health not just carrying out the mandate of the constitution and laws invite but in a way meaningful of course No refuted connection direct between status health with level productivity resident a country Service Which Good from a House Sick become Wrong One proof that House Sickare of good quality, the hospital has a variety of them type service health Which can favored For maintain loyalty patient. Wrong One type the health services available at the hospital

are outpatient services (Ministry Health RI, 2010).

This outpatient service is management's main concern hospitals, because the number of outpatients is greater compared to other treatments, outpatient services become a promising and profitable market share profit financial for House Sick. Before get outpatient treatment in the hospital, the patient must first Register at the outpatient registration counter, where is the counter Outpatient registration is one of the main gates available in the hospital, which provides the first impression for the patient and family. Impression Which positive will give flavor satisfied. Satisfaction defined as exists feeling like or satisfied that product or service Which accepted has in accordance or over hope customer (Woodruff and Gardial in supriyanto (2006:125).

Based on experience Which happen in House Sick especially in the outpatient registration section, there are a lot of patients complained about the lack of ability of officers to provide information, speed, responsiveness And reliability officer service, Which cause patient not enough satisfied on service in House Sick the. Based on phenomena and previous research results where patients and families always expect service hospitals, especially in the department care registration services road can give service Which Good And satisfying. Facility Which Good, reliability, responsiveness, guarantee as well asempathy from registration service officers. Therefore Hospitals are required to always try to improve services to patient nor family patient, based on description and facts the researcher interested For do study For find out the relationship between service quality in the nursing registration sectionroad with the level of patient satisfaction at Vina Estetika Hospital. The aim of this research is to know connection quality service in the outpatient registration with patient satisfaction levels in Vina Aesthetic Hospital and analysis connection quality service with levelPatient satisfaction at the Outpatient Registration Department of Vina Estetika Hospital

2. LITERATURE REVIEW

Overview General Quality Service

Quality service is performance Which show on level perfection service health Which in one party can give rise to satisfaction on every patient in accordance with level satisfaction average resident, as well as sided other arrange method The implementation is in accordance with the existing professional code of ethics standards set (Department of health RI, 2006). Service is Which done by somebody, group or institutions that provide satisfaction to customers or society and in turn that satisfaction will create customer

loyalty or public to somebody, group And institution Which give service the. Service health as specifications of the public service itself according to Levey and Loomba (in Azwar, 1996:35) is "every effort Which held individually or collectively in an organization to look after And increase health And prevent".

Service health Also defined as service Which fulfil objective service health For increase degrees public health, which satisfies the expectations and needs of the degree public. According to Lukman (1999:11) service is activities Which No clear, However provide satisfaction consumer funds industrial users and are not tied to the sale of a product or other services. It is further said that service is a order activity Which happen in interaction immediately with person-person or machine directly physique And provide consumer satisfaction.

Overview General Satisfaction Patient

Understanding in a way general about satisfaction or dissatisfactionconsumer is results from exists differences between hope consumer with performance Which felt by consumer these, from various definitions of consumer satisfaction that have been researched and defined by para expert marketing, can concluded that satisfaction consumer is a response behavior consumer form evaluation full buy to a goods or service Which he felt (performance product) compared to with hope consumer. The definition of satisfaction is the consumer's response or feedback regarding fulfillment need. Satisfaction is evaluation about characteristic or privilege product or service, or product That Alone, Which provide level pleasure consumer related with fulfillment need consumption consumer.

According to Woodruff and Gardial in supriyanto (2010), satisfaction is model gap between hope (standard performance Which should) with performance actual accepted customer. Satisfaction is perception to product or service Which has fulfil hope. So satisfaction customer is results from the accumulation of consumers or customers in using products or service (Irawan, 2003). According to Oliver (in Barnes, 2003: 64) "satisfaction is a response service customers for meeting their needs," while Kotler (2000: 36) found that level satisfaction is feeling like or disappointed somebody Which appear after compare between his perception/impression of the performance (or results) of a product and his hopes. Difficult For measure level satisfaction patient, because it concerns behavior of a very nature subjective. Satisfaction a person towards an object varies from the level of very satisfied, satisfied, Enough satisfied, not enough satisfied And very No

satisfied.

Factors that influence satisfaction are categorized into 12 category that is quality product (*Production Quality*), Service, Price, emotional factors, Performance, Aesthetics, Product characteristics, Atmosphere, Communication, Location, facility, And Design Visual (Nursalam, 2015).

a. Quality product (Production Quality)

Patient will feel satisfied when they show products or service quality used. Consumer perception of product quality or services are influenced by two things, namely product quality or comfortreal service and communication in promoting the house Sick.

b. Service

Friendly service from hospital staff, speed in service. Health service institutions are considered good if they provide services more notice need patient. Satisfaction appear from impression First enter patient to service Which given. For example service Which fast, responsive And friendliness in give service.

c. Price

Price, which includes the price of the product or service. Price is aspel important, However Which most importantly in determination quality to achieve patient satisfaction. Despite this element affecting patients in terms of costs incurred, usually moreexpensive price maintenance so patient have hope Which more big.

d. Factor emotional (Emotional Factor)

The patient's emotional factor is feeling proud and confident that other peopleamazed by consumers if in this case the patient sees the hospital Which Already have view "House Sick expensive" tend own level satisfaction Which more tall.

e. Performance

The manifestations of this performance include: speed, convenience and comfort How nurse in give service treatment especially nursing on time healing Which relatively fast, ease in meeting patient needs and the comfort provided, namely with notice cleanliness, friendliness and completeness equipment House Sick.

f. Aesthetics

Aesthetics are the attractiveness of a hospital that can be captured by five senses for example: the friendliness of the nurses, complete equipment and so on.

g. Characteristics product

This product represents physical ownership, including buildings and decor.

Characteristics product covers appearance building, cleanliness and type class room

Which provided along completeness.

h. Communication

Communication is the procedure for providing information by service providers and complaints from patient. How complaint-complaint from patient fast accepted by provider service especially nurse in give help to complaint patient.

Location

Location, including the location of the room and its environment. One aspect that determine considerations in choosing a health service institution. Generally the more near location with center urban or Which easy to reach, easy transportation and a good environment the more become choice for patient.

j. Facility

Completeness facility join in determine evaluation satisfaction patient, for example, health facilities including facilities and infrastructure, parking lots, comfortable waiting room and inpatient room. Despite this No viral determine evaluation satisfaction patient, However institution Health services need to pay attention to internal facilities preparation strategic For interesting consumer.

k. Atmosphere

Atmosphere, covers security and familiarity. Atmosphere Which calm, comfortable, cool and beautiful will greatly influence patient satisfaction in the healing process. Besides that, it's not just for patients who enjoy it but others who visit will really happy and give a positive opinion so that you will be impressed for visitors institution service health the.

1. Design visual

Visual design, including room decoration, buildings and street designnot complicated. Spatial layout and decoration also determine comfort. (clinical, 2007).

3. METHOD

This research uses a correlational descriptive design aims to understand the relationship between service quality in the department Outpatient registration and patient satisfaction level at Vina Estetika Hospital. Type study Which used is approach *cross sectional* Which aim Forprove the relationship between independent variables and variables defenden where both variables are observed at once in time Which The same.

Population in study This is all over patient Whichtreatment road in Vina Aesthetic Hospital Which amount 100 patient in months November. Technique taking sample done with method *accidental sampling* that is is Which in taking the sample No set more formerly However direct collect data from the sampling units they encounter, afterthe amount sufficient collection the data stopped take and respondents who are willing to do so study. Amount sample calculated use formula Yamane.

A research instrument is a tool used by researchers to collect data. Instruments to be used in This research uses a standard questionnaire sheet modification (Priyoto, 2018) And form survey satisfaction patient health center indrajaya form list question Which arranged in a way written Which used For obtain data or information about quality service registration And satisfaction patient.

A questionnaire/questionnaire is a measuring tool that contains several questions, this measuring instrument is used when the number of respondents is largeAnd No blind letter. *checklist* or list check Which is list of statements to be observed and respondents provide answer with give a check $(\sqrt{})$ according to the results Which desired or the researcher puts a check mark $(\sqrt{})$ according to the results observation.

In collecting data, respondents were given the opportunity For fill in sheet questionnaire Which given And If There is the thing that not enough clear respondents given chance For askto researcher.

There is a number of ethics Which must noticed in study that is:

a. Informed consent

Represents form study with give sheetconsent to the respondent. *Informed consent* was given before research done with give sheet consent, to become a respondent. The goal is to the subject understands the aims and objectives of the research. If the respondent willing so they must sign sheetagreement. And if the respondent is not willing then the researcher No will force and still honor rights patient.

b. Anomy (without Name)

For guard confidentiality, so researcher No include the respondent's name on the questionnaire sheet but only write initials and give code.

c. Confidentially

Confidentiality of results study which contain information respondents guaranteed by the researcher and only the group certain data that reported as results study.

Collection data in study This done two method that is:

- Primary data, namely data obtained directly from respondents who become sample study.
- 2. Secondary data, namely data obtained from hospitals. Stella Maris Makassar.

After questionnaire collected, furthermore done management data with procedures data management that is:

a. Editing (inspection data)

Editing is an effort to re-check the correctness of the dataearned or collected. Editing can be done on stage collection data, continuity data, And check uniformity data. Editing done with check each sheet of the questionnaire one by one so that can confirmed data Already Correct or No.

b. *Coding* (*giving* code)

Coding done after checked completeness data (editing), assigning a code/symbol to each answer so that makes it easier inside management data furthermore.

c. Entry data that is data entered And processed withuse computer program.

d. Tabulation (tabulation)

After do giving symbol so processed in form table that is distribution connection between variable independent and variable dependent. Serving data Which used is in the form of table.

The collected data was analyzed analytically and interpretively with use method statistics that is method computer spss. Analysis data Which used in study This is analysis data univariate and data bivariate.

a. Analysis data univariate

Used to get an overview of the frequency distribution from variable independent and variable dependent so that known variations from each variable.

b. Analysis data bivariate

Analysis This used on each variable Which researched, scale Which used in measurement variable is a categorical scale and has the order 2x2 so the test is used statistics nonparametric that is *chi square* with level significance α =5% or 0.05 to determine the quality relationship service registration with satisfaction patient, with use system computerization Windows SPSS 21.His interpretation with use mark p that is:

If the p value < 0.05 means there is a relationship between the variables indent and variable dependent.

If mark $p \ge 0.05$ It means No There is connection between variables independent and variable dependent.

In a decision process, consumers, namely patients, do not will stop until the service acceptance process. The patient will evaluate service Which accepted the, results from process evaluation That will produce feeling satisfied or not satisfied (Pohan, 2010).

For reach satisfaction patient, House Sick must can improve service (service quality) customer satisfaction can be created through improving service quality quality service among them communication, speed And skills Which owned by every staff House Sick. choice Community service makes hospitals not only think about health services only, but hospitals must also think about the health services that are most needed as well ways of providing the service can given as good as possible possible, taking into account desires, needs and values mark Which felt by patient. Factor satisfaction patient is matter Which important noticed party House Sick, because hospital service users are very critical, because they do not want to take the services provided for granted party House Sick.

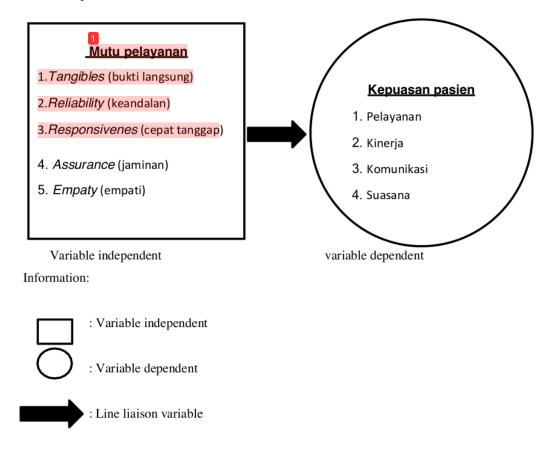
The Indonesian Ministry of Health provides an understanding of service quality health Which covers performance Which show level perfection service health, No just Which can generate satisfaction for patients in accordance with the average satisfaction average population but also in accordance with standards and codes of ethics profession Which has set. Quality service can seen from five dimensions that is(Nursalam, 2011):

- 1. Proof physique (*tangible*), facility and equipment physique as well as appearance employee Which professional.
- Reliability, the ability to provide what is requiredhas been promised to be reliably accurate and satisfying.
- 3. Power responsive (*responsiveness*), officer always offerhelp to patient Which seen confusion, officerAlways listen carefully to complaints from patients and staff give

information with clear and complete on patient.

- 4. Guarantee (assurance), Capable give satisfaction in service that is, each employee will provide services which is fast, precise, easy, smooth and high quality and capable Shows high work commitment in accordance with the application from vision, mission a organization in give service.
- Empathy (empathy), Officer always give regards to patients who come and the
 officers are always friendly inside serve patient And Officer capable do behave Be
 patient in give explanation or information on patient.

So in service health, quality service very important Which will influence level satisfaction patient, like on table under This:



4. RESULTS AND DISCUSSION

Study This implemented in Vina Aesthetic Hospital, with a total sample of 80 respondents, namely all patient Which register in registration take care road. Typestudy This is Descriptive correlational using *cross sectional* approach with sampling techniques is *accidental sampling*, data done in place registration take care road Vina Aesthetic Hospital with fill in format questionnaire Which has arranged previously. In study This, management data done with using SPSS (*Statistical Package For Social Science*) version 21. Then analyzed using statistical tests, namely test *Chi Square*.

Characteristics General Respondent

a. Based on Type Sex

 Table 1. Frequency Distribution of Respondents Based on Gender

in Room Registration Vina Aesthetic Hospital

Type Sex	Amount	Presentation (%)
Woman	48	60.0
Man	32	40.0
Total	80	100

Source: Data processed by the author, 2024

Based on table in on, obtained Type sex WomanThere were 48 (60.0%) respondents, and there were 32 men (40.0%) respondents In Room Registration Vina Aesthetic Hospital.

b. Based on Group Age

Table 2. Age Group

Age	Frequency	Presentation (%)
22-28	11	13.8
29-35	13	16.3
36-42	15	18.8
43-49	14	17.5
50-56	15	18.8
57-63	6	7.5
64-70	6	7.5
Total	80	100

Source: Data processed by the author, 2024

On table in on obtained age average on respondents age 17-25 And 56-65 (10.0%) each there is 8 respondent, on age 26-35 and 36-45 (26.3%) there is 21 respondents. Age 46-55 (21.3%) there are 17 respondents. And age \geq 65 (6.3%) there are 5 respondents.

c. Based on Work

Table 3. Frequency Distribution of Respondents Based on

Occupation in Room Registration Vina Aesthetic Hospital

Work	Amount	Presentation (%)
Work	38	47.5
No work	42	52.2
Total	80	100

Source: Data processed by the author, 2024

Based on table in on obtained respondents Which There were 38 (47.5%) employed and respondents who did not workas much 42 (52.2%).

Results Analysis Variable Study.

a. Analysis Univariate

Quality Service

Table 4. Frequency Distribution of Respondents Based on QualityIn-room Services

Vina Aesthetic Hospital Registration

Quality Service	Amount	Presentation %
Quality	65	81.3%
No Quality	15	18.8%
Total	80	100

Source: Data processed by the author, 2024

Based on table in on in get that from 80 respondents There were 65 (81.2%) respondents who assessed the quality of service at Vina Estetika Hospital as high quality and 15 (18.8%) respondents Which say service No quality

1. Satisfaction Patient

 Table 5. Frequency Distribution of Respondents Based on Patient Satisfaction in the Room

 Registration Vina Aesthetic Hospital

	Stasfaction	Jumlah	Presentase(%)
В	Good	66	82.5%
в e	Not Good	14	17.5%
r		80	100
d	Total		

Sumber: Data diolah oleh penulis, 2024

Based on table in on obtained from 80 respondents Those who were satisfied with the service in the Vina Estetika Hospital registration room were 66 (82.5%) respondents. Whereas Which feel Enough satisfied as much 14 (17.5%) respondents.

Analysis Bivariate

Table 6.

Relationship between Service Quality in the Nursing Registration DepartmentThe Path to

Patient Satisfaction Levels at Vina Estetika Hospital

Quality Service			Satis	fied			Value
	F	%	f	%	n	%	
Quality	65	81.2	0	0.0	65	81.2	0,000
No Quality	1	1.3	14	17.5	15	18.8	
Total	66	82.5	14	17.5	80	100	

Source: Data processed by the author, 2024

From results statistics use test statistics *chi square* with meaningful value a=0.05 obtained p value = 0,000 (*Continuity correction*) this shows that the p value < a, This means that there is a relationship between service quality in the registration section take care road with level satisfaction in House Sick Stella Maris Macassar.

Matter This supported by sell Which research that services in the registration room at Vina Estetika Hospital, 65 patients (81.2 %) of respondents were satisfied. As well as the quality of service in the poor category of patient satisfaction quite satisfied category as many as 14 (17.5%) respondents, and 15 respondents (18.8%) No quality, Results other

in study this is quality category services No quality satisfaction patientcategory satisfied as much 1 (1.3%) respondents.

Discussion

research is in the service quality category of poor quality Patient satisfaction in the satisfied category was 1 (1.3%) respondent. Matter This in accordance with opinion Martinus (2017) Which saythat service Which has given very influential on patient satisfaction, which service personnel in provide services correctly and well, the patient will feel satisfied. This research is in line with research conducted by Febri (2014) shows that there is a relationship between quality health services with the level of patient satisfaction. Where from 340 respondents obtained that 187 respondents (55%) said the quality of service at the Community Health Center was good and there were 153 respondents (45%) said the quality of health services was poor Good. Temporary results study to level satisfaction Patients during their visit to the health center obtained 183 results respondents (53%) state satisfied to service health in Health Center And as much 157 respondents (46%) say not enough satisfied results test statistics obtained results p=0.000 Which show p<0.05 It means there is connection between quality service health with level satisfaction during visit in Health Center. Study This Also doneby Nurul (2015) where 81 respondents stated that service quality health Which highest in category Good that is 73 (90 .1 %) respondent, in the quite good category namely 5 (6.2%) respondents and in the very good category, namely 3 (3.7%) respondents. From test The statistical result obtained is p=0.000 < 0.05 which means Ho is rejected and Ha received shows that there is a relationship between service quality health with satisfaction patient take care stay in Vina Aesthetic Hospital.

Research conducted by Hendri (2012), where researchshow that respondents who were satisfied and rated quality service registration in category Good as much 22 respondents (48.1%), respondents Which feel satisfied And evaluate The quality of registration services in the category is sufficient 26 respondents (48.1%), respondents who felt dissatisfied and assessedservice quality registration in good category 1 respondents (1.9%), respondents who felt dissatisfied and assessed quality service There are quite a lot of registrations in the category 3 respondents (5.5%), respondents who felt dissatisfied and assessed the quality of registration services in the poor category is 2 respondents (3.7%), in House Sick PKU Muhammadiyah Karanganyar.

Nursalam (2011) state that quality service form condition physique is form quality service real things that provide appreciation and form image positive for every individual Which served And become a evaluation in determine ability from developer service the utilise all his abilities For seen in a way physique, Good in use tool And equipment service, ability to innovate and adopt technology as well as show a *performance* appearance Which capable, dignified and has high integrity as an entity from the work performance shown to the person who gets it service. Quality service House Sick is degrees perfection House Sick For fulfil request consumer will service health Which in accordance with standard profession And standard service with use resources available at the hospital in a reasonable, efficient manner and effective and administered safely and satisfactorily with norm, ethics, law, And socio culture with notice limitations And ability.

Besides That there is five determinant characteristics Which used by customers in evaluating service quality (Nursalam, 2015):

1. Reliability (reliability)

Every service need form service Which reliable, meaning in providing services, every employee expected own ability in knowledge skill,

- 2. Power responsive (responsiveness)
 - Every employee in give forms service prioritize aspect, service Which very influence the behavior of people who receive services, sorequired ability Power responsive from supervisor For serve public in accordance with level absorption, understanding.
- 3. Guarantee (assurance)

Every form service need exists certainty on service Which given.

4. Empathy (empathy)

Every activity or activity service need exists understanding And understanding in togetherness assumption or interest in a related matter with service.

5. Proof physique (tangible)

Physical evidence of service quality is a form of actualization can be physically seen or used by officers according to its intended use and utilization felt help service Which accepted by person Which desire service.

There is factor- factor Which influence satisfaction, (Nursalam, 2015).

- 1. Service
- 2. Performance
- 3. Communication

4. Atmosphere

According to researchers' assumptions, the importance of service quality given to patient so will give rise to flavor satisfaction with the service received, this will also impact on quality House Sick Which will seen that the hospital has good quality give service. Based on data questionnaire resultsstudy that so far This service Which given Already good and correct, such as the officer's communication in providing service as well as appearance neat. Quality service veryinfluential to satisfaction patient service Which patient.

By Because That will seen comparison between patient expectations and satisfaction, some patients said dissatisfied with the service received such as a lack of friendliness officer on moment give service as well as lack facility like place Sit down Which not enoughsufficient. The service provided is a factor role as base For patient utilise service hospitals, quality of service is important and Very competitive, appearance, reliability and home guarantee pain in providing services to patients is The main factor in the impression of satisfaction that the patient will feel during take advantage of the services provided by the home Sick with so patient will evaluate quality service Which given.

5. CONCLUSIONS AND RECOMMENDATIONS

Conclusion

From research carried out in the registration section Vina Aesthetic Hospital. Can be concluded that:

- a. Quality service in room part registration Vina Aesthetic Hospital part big is at on categoryquality.
- b. Level satisfaction patient to quality service in roompart registration Vina Aesthetic
 Hospital part big is at on category satisfied.
- c. There is a relationship between service quality and patient satisfaction room part registration Vina Aesthetic Hospital.

Suggestion

To party management Vina Aesthetic Hospital

a. It is necessary to evaluate the level of patient satisfaction Because level satisfaction patient Which accurate very needed in effort increase quality service health, by because That measurement level satisfaction patient need done in a way

- periodically, orderly, accurate And sustainable.
- b. Quality of service is prioritized, maintained, and more improved in period coming.
- c. Unsatisfactory service needs to be improved, that is system management need repaired, officer given knowledge and skills periodically with follow training, training, seminar and refreshing.

BIBLIOGRAPHY

Andriani. (2017). Hubungan mutu pelayanan dengan kepuasan pasien. ejournal.kopertis10.or.id. Retrieved January 12, 2019, from https://ejournal.kopertis10.or.id

Azwar, A. (2010). *Pengantar administrasi kesehatan* (3rd ed.). Binarupa Aksara Publisher.

DepKes RI. (2014). *Pedoman pengelolaan rekam medis rumah sakit di Indonesia* (Revisi II). Direktorat Jenderal Pelayanan Medik.

Fuanasari, A., et al. (2014). Form survey kepuasan pasien. Retrieved November 1, 2018, from https://media.teliti.com

Kotler, P. (2013). Manajemen pemasaran (2nd ed.). Indeks.

Kuntoro, W., et al. (2017). Kepuasan pasien terhadap kualitas pelayanan di tempat pendaftaran pasien rawat jalan Puskesmas Kretek Bantul Yogyakarta. *Jurnal*. Retrieved September 20, 2018, from https://jurnal.ugm.ac.id

Liliweri, A., et al. (2013). Komunikasi kesehatan. Pustaka Belajar.

Mininjaya, G., et al. (2012). Manajemen mutu pelayanan kesehatan. EGC.

Nofiana, H., et al. (2012). Hubungan mutu pelayanan pendaftaran dengan kepuasan pasien rawat jalan di Rumah Sakit PKU Muhammadiyah Karanganyar. *Jurnal*. Retrieved September 23, 2018, from http://apikes.ac.id

Nurfadani. (2018). Hubungan mutu pelayanan dengan kepuasan pasien. *E-Jurnal UNDIP*. Retrieved January 23, 2019, from https://ejournal3.undip.ac.id

Nursalam. (2011). Manajemen keperawatan (3rd ed.). Salemba Medika.

Pamungkas, A. R., & Usman, M. A. (2017). Metodologi riset keperawatan. Trans Info Medika.

Pohan, I. S. (2010). Jaminan mutu kesehatan: Dasar-dasar pengertian dan penerapan. ECG.

Priyato. (2018). Teori sikap dan perilaku dalam kesehatan (2nd ed.). Nuha Medika.

Supriyanto, S., & Wulandari, R. D. (2010). Manajemen mutu pelayanan kesehatan. Health Advocacy: Pohon Cahaya.



Undang-Undang Republik Indonesia No. 44 Tahun 2012 tentang rumah sakit. Retrieved September 20, 2018, from http://www.hukumonline.com/

World Health Organization. (n.d.). Hospitals. Retrieved September 20, 2018, from https://www.who.int/topics/hospitals/en/

Zainafree. (2016). Hubungan mutu pelayanan kesehatan. *Publikasi.dinus.ac.id*. Retrieved January 15, 2019, from https://publikasi.dinus.ac.id/article/view/

Connection Quality Service in Part Registration Treat Road with Level Discouragement Patient at Vina Aesthetic Hospital

ORIGINA	ALITY REPORT			·
	6% ARITY INDEX	16% INTERNET SOURCES	5% PUBLICATIONS	3% STUDENT PAPERS
PRIMAR	Y SOURCES			
1	reposito	ory.stikstellamar	ismks.ac.id	3%
2	jiemar.o Internet Sour			3%
3	internat Internet Sour	ional.arikesi.or.i	d	3%
4	jurnal.ui Internet Sour	ntag-sby.ac.id		1 %
5	Submitt Student Pape	ed to Eastern Ir	stitute of Tech	nnology 1 %
6	greenpu Internet Sour			1 %
7	lp2m.sti	kesayani.ac.id		1 %
8	ners.un			<1%
9	Submitt Student Pape	ed to Universita	ıs Sebelas Mar	ret <1 %

10	ejournal.ipinternasional.com Internet Source	<1%
11	ejournal.seaninstitute.or.id Internet Source	<1%
12	Submitted to Management & Science University Student Paper	<1%
13	Submitted to Sim University Student Paper	<1%
14	Ismail, Mohd Isham. "Ky (Kiken Yochi=Predict Hazard) in Working Habit; Assessment of Its Implementation Way and Effectiveness in Manufacturing Factory", University of Malaya (Malaysia), 2023 Publication	<1%
15	Tika Evi, Endang Indarini. "Meta Analisis Efektivitas Model Problem Based Learning dan Problem Solving Terhadap Kemampuan Berpikir Kritis Mata Pelajaran Matematika Siswa Sekolah Dasar", EDUKATIF: JURNAL ILMU PENDIDIKAN, 2021 Publication	<1%
16	doaj.org Internet Source	<1%
17	Edi Siswanto, Ani Margawati, Antono Suryoputro. "FAKTOR-FAKTOR YANG	<1%

MEMENGARUHI PENOLAKAN IMUNISASI BAYI DAN BALITA PADA MASYARAKAT SEDULUR SIKEP (SAMIN)", Jurnal Litbang: Media Informasi Penelitian, Pengembangan dan IPTEK, 2020

Publication

18	Ahmad Zacky Anwary. "HUBUNGAN KUALITAS PELAYANAN DENGAN KEPUASAN PASIEN DI PUSKESMAS DURIAN GANTANG KABUPATEN HULU SUNGAI TENGAH", DINAMIKA KESEHATAN: JURNAL KEBIDANAN DAN KEPERAWATAN, 2020 Publication	<1%
19	etd.repository.ugm.ac.id Internet Source	<1%
20	journal.widyakarya.ac.id Internet Source	<1%
21	repository.unair.ac.id Internet Source	<1%
22	Nancy Lidya Sampouw. "HUBUNGAN KUALITAS PELAYANAN ANTENATAL CARE DENGAN KEPUASAAN IBU HAMIL", Jurnal Skolastik Keperawatan, 2019 Publication	<1%
23	journal2.unusa.ac.id Internet Source	<1%

27	biblio.ugent.be Internet Source	<1%
21	Internet Source	\ \ \ \ \ \ \

28	jurnal.umla.ac.id	/1 ~/
20	Internet Source	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

Exclude quotes Off
Exclude bibliography Off

Exclude matches

Off