



The Influence of Health Service Quality Dimensions on the Satisfaction Level of Inpatients at Cut Nyak Dhien General Hospital Langsa City

Putri Riskina^{1*}, Megawati²

¹⁻²Sekolah Tinggi Ilmu Kesehatan (STIKes) Bustanul Ulum Langsa, Indonesia

*Corresponding Author: putririskina@gmail.com

Abstract. *The dimensions of healthcare service quality are a concept for measuring service quality. This study aims to determine the effect of the dimensions of healthcare service quality on the satisfaction of inpatients at Cut Nyak Dhien General Hospital in Langsa City. This study uses a quantitative design of the Survey Analytic type with a cross-sectional approach. The population consisted of 121 inpatients with a sample size of 55 respondents using purposive sampling technique. Analysis used multiple logistic regression test ($\alpha=0.05$). The research results show that there is an influence between Responsiveness $p<0.042$ with an EXP (B) value of 11.361, Assurance $p<0.008$ with an EXP (B) value of 20.163, Empathy $p<0.018$ with an EXP (B) value of 13.547, Reliability $p<0.033$ with an EXP (B) value of 6.896 on inpatient patient satisfaction ($p<0.05$), while the Tangible variable shows no influence with $p<0.088$ and an EXP (B) value of 4.967. Among these variables, the one that significantly affects inpatient patient satisfaction is the Assurance variable with $p<0.008$ and an EXP (B) value of 20.163. It is recommended to continuously improve the quality of service comprehensively in every dimension of service quality, strengthen the competence and professionalism of healthcare personnel, enhance the speed and accuracy of service, and build good communication to improve the quality of inpatient services and maintain patient trust in the hospital.*

Keywords: *Dimensions of Healthcare; Hospital; Inpatient Care; Patient Satisfaction; Service Quality.*

1. INTRODUCTION

Based on data from the World Health Organization (WHO), it is shown that 5.7 to 8.4 million people die each year due to the low quality of healthcare services in low- and middle-income countries, representing up to 15% of total deaths in these countries. Among patients in need of healthcare, 60% of deaths occur due to poor service quality, and 40% of deaths are caused by underutilization of the healthcare system, especially in low- and middle-income countries (WHO).

The dimensions of healthcare service quality developed by Zeithaml, Parasuraman, and Berry in 1988 (in Sudirman 2023) are dimensions of healthcare service quality used to measure and assess the quality of healthcare services known as the SERVQUAL (Service Quality) theory. The five main dimensions are: Tangible, Reliability, Responsiveness, Assurance, Empathy (Sudirman, 2023). Patient satisfaction is the level of excellence in healthcare services that can meet the needs of patients provided by medical personnel, paramedics, and medical support staff.

The excellence of the healthcare services provided includes aspects of reliability, responsiveness, assurance, empathy, and tangibility. Meanwhile, satisfaction is the response or level of feeling (happy or disappointed) of the patient obtained after the patient receives the healthcare service product by comparing the perceived performance or outcome with the patient's needs and expectations (Karunia, Azizah, Rahayu, Melati, & Santoso, 2022). Based on the overview obtained from the JKN mobile review platform, Cut Nyak Dhien General Hospital (RSU) in Langsa City has a very high rating from the community. This hospital received an average rating of 4.9 from a total of 3,679 reviews, indicating a very high level of patient satisfaction with the services provided.

Based on the initial data obtained by the author through the distribution of questionnaires to 10 respondents at Cut Nyak Dhien General Hospital in Langsa City, the results are as follows: In the Tangible dimension, 6 respondents (60%) rated the service as good, while 4 respondents (40%) rated it as not good. In the Reliability dimension, 4 respondents (40%) rated the service as good, while 6 respondents (60%) rated it as not good. In the Responsiveness dimension, 5 respondents (50%) rated the service as good, and 5 respondents (50%) rated it as not good. In the Assurance dimension, 6 respondents (60%) rated the service as good, while 4 respondents (40%) rated it as not good. In the Empathy dimension, 4 respondents (40%) rated the service as good, and 6 respondents (60%) rated it as not good. Of the five dimensions of healthcare service quality, the Tangible and Assurance dimensions received the best ratings compared to the other dimensions.

This illustrates that most patients are already satisfied with the aspects of physical facilities and service assurance provided, but there are still several other aspects that need improvement, especially in the dimensions of Empathy, Responsiveness, and Reliability of the medical staff in providing services to inpatients at the Cut Nyak Dhien General Hospital in Langsa City.

2. THEORETICAL STUDY

According to Lampus (2023) regarding the factors of patient satisfaction using the basic concept of healthcare service quality. The theory that serves as the main foundation in this research is the SERQUAL (Service Quality) theory, developed by Parasuraman, Zeithaml, and Berry. This theory identifies the main dimensions that can be considered as the primary factors of patient satisfaction by measuring the quality of service that will affect patient satisfaction. The five dimensions of patient satisfaction include: (1) Responsiveness refers to the ability and readiness of staff to assist patients quickly and efficiently.

This reflects how responsive the healthcare team is to the needs, questions, and complaints of patients. Essentially, this factor relates to how quickly and promptly the staff respond to patient requests. (2) Assurance is a factor related to the knowledge, politeness, and ability of the staff to instill confidence and assurance in patients. This includes the competence of medical staff, friendliness, and their ability to make patients feel safe and assured during treatment. (3) Physical Evidence (Tangible) is a tangible factor that serves as a real "proof" of the healthcare provider's commitment to quality. A well-designed and well-maintained environment will make patients feel more valued and safe, which ultimately increases their satisfaction levels. (4) Empathy is a factor that provides attention and care given to patients individually. This dimension emphasizes the importance of understanding the specific needs of each patient, providing personal attention, and showing care. Empathetic staff will make patients feel valued and not just seen as part of a medical procedure.

(5) Reliability is a factor that refers to the ability of healthcare providers to deliver promised services accurately and consistently. In the context of patient satisfaction, this is the foundation of trust. When patients feel that the services provided are reliable, they will feel safer and more satisfied. The factors of patient satisfaction use the five dimensions of the SERQUAL (Service Quality) model, which have a significant impact on patient satisfaction. These five dimensions significantly influence patient satisfaction, being the most dominant factors affecting it (Lampus 2023).

Quality of healthcare services

According to the World Health Organization (WHO), the quality of healthcare services is defined as the extent to which the services provided to individuals and populations increase the likelihood of desired health outcomes while being consistent with professional knowledge. It shows that the quality of service is not only measured by the completeness of facilities or the speed of service but is substantially assessed by the ability to achieve medical goals optimally, such as accurate diagnosis, targeted treatment, and comprehensive patient recovery while adhering to ethics and the latest developments in medical science.

The quality of service becomes the main indicator of the success of a healthcare institution in meeting the needs and expectations of patients comprehensively (WHO 2021). According to Permenkes No. 30 of 2022, the Quality of Health Services is the level of health services for individuals and communities that can enhance optimal health, provided according to service standards to fulfill the rights and obligations of patients.

The quality of health services is a determining factor for the success of a health service facility; therefore, the quality of health services must be continuously maintained and improved (Regulation of the Minister of Health of the Republic of Indonesia Number 30 of 2022 concerning National Indicators of the Quality of Health Services in Independent Practice Places for Doctors and Dentists, Clinics, Community Health Centers, Hospitals, Health Laboratories, 2022).

The quality of healthcare services is the level of excellence in healthcare services provided in accordance with the applied code of ethics and service standards, thereby creating satisfaction for every patient. High-quality services are essential as they are the right of every customer and can provide an opportunity to win competition with other healthcare providers (Istiqamah & Mujtahidah, 2024).

3. RESEARCH METHOD

This research method is a quantitative method, which is a research approach that uses numerical data or figures to measure variables and test hypotheses objectively. This research uses an Analytic Survey type with a cross-sectional approach aimed at understanding the relationship between one variable and other variables (Biney, Wowor, & Rumayar, 2022) This research was conducted at Cut Nyak Dhien General Hospital in Langsa City. The research was carried out from January to February 2026.

Population is the entire set of objects that will be observed in a study (Sugiyono, 2016) The population in this study consists of all inpatients in September 2025, totaling 121 patients at Cut Nyak Dhien General Hospital in Langsa City. The sample is a portion of the population that must meet the criteria set by the researcher in order to fulfill or represent the research population (Fauziyah, 2019). The sampling technique used in this research is Accidental Sampling, where the researcher selects respondents who happen to be present and available at the location during the study, meeting the inclusion and exclusion criteria at the Inpatient Installation of Cut Nyak Dhien General Hospital in Langsa City. Here is the sampling using the purposive sampling technique from the population. In determining the sample size using the purposive sampling method from the population.

In determining the number of samples to be studied, the author uses the Slovin's formula as follows:

$$n = \frac{121}{1 + 121(0,1)^2}$$

$$n = \frac{121}{1 + 1,21}$$

$$n = \frac{121}{2,21}$$

$$n = 54,75 \text{ rounded to } 55.$$

rounded to Explanation :

N = Population Size

n = Sample Size

e = *Margin error* 10%

Margin of error 10% From the calculations above, the sample size in this study is 55 respondents.

4. RESULTS AND DISCUSSION

The Cut Nyak Dhien General Hospital in Langsa City, also known as the Cut Nyak Dhien General Hospital in Langsa City, is a general hospital located in Langsa, Langsa City, Aceh Province. The Cut Nyak Dhien Hospital in Langsa City was officially inaugurated in 1986. Having a vision to strive as much as possible to ensure patient satisfaction with the services. Thus, the mission is to create a hospital of choice for the community.

Cut Nyak Dhien General Hospital in Langsa City is located at T.M Bahrum Street No. 1, Langsa Baro, Gampong Jawa, Langsa City, Langsa City, Aceh. It is classified as a Class D General Hospital, with a BLU non-BLU/BLUD status, owned by a Social Organization, and directed by Dr. Yusuf, SF.,SH.,MM.,CPM.,CPL.,CPC. The hospital has a land area of 3,600 square meters and a building area of 4,800 square meters. The results of the research conducted on 55 inpatient respondents at the inpatient installation of Cut Nyak Dhien General Hospital in Langsa City.

Data obtained from the tabulation of primary data based on the respondents' questionnaire answers are as follows:

Table 1. Frequency Distribution in Inpatient Care at Cut Nyak Dhien General Hospital, Langsa City

No	Characteristics	Frequency	Percentage
1.	Gender		
	- Male	26	47.3 %
	- female	29	52.7 %
	Total	55	100 %
2.	Age		
	- 17-25 Year	2	3.6 %
	- 26-35 Year	21	38.2 %
	- 36-45 Year	3	5.5 %
	- 46-55 Year	22	40.0 %
	- 56-65 Year	7	12.7 %
	Total	55	100 %
3.	Last Education		
	- Elementary School		
	- Junior High School	14	27.3 %
	- Senior High School	9	16.4 %
	- College	17	30.9 %
		14	25.5 %
	Total	55	100 %
4.	Work		
	- PNS		
	- TNI	17	30.9 %
	- Polri	2	3.6 %
	- Buruh	1	1.8 %
	- IRT / Tidak Bekerja	13	23.6%
		22	40.0%
	Total	55	100 %
5.	Room		
	- Class 1		
	- Class 2	23	41.8 %
	- Class 3	3	5.5 %
		29	52.7 %
	Total	55	100 %
6.	Treatment Duration		
	- ≥ 3 Days	35	63.6 %
	- < 3 Days	20	36.4 %
	Total	55	100 %

From the table above, it is known that out of 55 respondents, the majority in the gender category are female, with 29 respondents (52.7%), aged 46-55 with 22 respondents (40.0%), high school graduates with 17 respondents (30.9%), housewives/unemployed with 22 respondents (40.0%), class 3 with 29 respondents (52.7%), and those who have been sick for more than 3 days with 35 respondents (63.6%).

Univariate Analysis

Patient Satisfaction

Table 2. Distribution of Patient Satisfaction Frequency in the Inpatient Installation of Cut Nyak Dhien General Hospital, Langsa City

No	Patient Satisfaction	Frequency	Percentage
1	Satisfied	37	67.3 %
2	Dissatisfied	18	32.7 %
	Total	55	100 %

Based on the table above, it shows that out of 55 respondents, the majority are satisfied with the inpatient services at the Cut Nyak Dhien General Hospital in Langsa City, with 37 respondents (67.3%).

Responsivness

Table 3. Frequency Distribution of Responsiveness in the Inpatient Installation of Cut Nyak Dhien General Hospital, Langsa City

No	Responsivness	Frequency	Percentage
1	Good	47	85.5 %
2	Not Good	8	14.5 %
	Total	55	100 %

Based on the table above, it shows that out of 55 respondents, the majority are satisfied with the inpatient services at the Cut Nyak Dhien General Hospital in Langsa City, with 47 respondents (85.5%).

Assurance

Table 4. Frequency Distribution of Assurance in the Inpatient Installation of Cut Nyak Dhien General Hospital, Langsa City

No	Assurance	Frequency	Percentage
1	Good	36	65.5 %
2	Not Good	19	34.5 %
	Total	55	100 %

Based on the table above, it shows that out of 55 respondents, the majority are satisfied with the inpatient services at the Cut Nyak Dhien General Hospital in Langsa City, with 36 respondents (65.5%).

Tangible

Table 5. Distribution of Frequency of Tangible Evidence in the Inpatient Installation of Cut Nyak Dhien General Hospital, Langsa City

No	Tangible	Frequency	Percentage
1	Good	34	61.8 %
2	Not Good	21	38.2 %
	Total	55	100 %

Based on the table above, it shows that out of 55 respondents, the majority are satisfied with the inpatient services at Cut Nyak Dhien General Hospital in Langsa City, with 34 respondents (61.8%)

Empathy

Table 6. Distribution of Empathy Frequency in the Inpatient Installation of Cut Nyak Dhien General Hospital, Langsa City

No	Empati (<i>Empathy</i>)	Frequency	Percentage
1	Good	26	47.3 %
2	Not Good	29	52.7 %
	Total	55	100 %

Based on the table above, it shows that out of 55 respondents, the majority are satisfied with the inpatient services at the Cut Nyak Dhien General Hospital in Langsa City, with 29 respondents (52.7%).

Reability

Table 7. Distribution of Reliability Frequency in the Inpatient Installation of Cut Nyak Dhien General Hospital, Langsa City

No	<i>Empathy</i>	Frequency	Percentage
1	Good	36	65.5%
2	Not Good	19	34.5 %
	Total	55	100 %

Based on the table above, it shows that out of 55 respondents, the majority are satisfied with the inpatient services at the Cut Nyak Dhien General Hospital in Langsa City, with 36 respondents (65.5%).

Bivariate Analysis

The Relationship Between Responsiveness and Patient Satisfaction

Table 8. The Relationship Between Responsiveness and Patient Satisfaction in the Inpatient Installation of Cut Nyak Dhien General Hospital, Langsa City

No	<i>Responsivness</i>	Patient Satisfaction				<i>P-Value</i>		
		Satisfied		Dissatisfied			Amount	
		F	%	F	%	F	%	
1	Good	35	74.5	12	25.5	47	100	0.006
2	Not Good	2	25.0	6	75.0	8	100	
	Total	37	67.3	18	32.7	55	100	

The table above shows that out of 55 respondents, 47 respondents reported good Responsiveness, with the majority being satisfied (35 respondents or 74.5%), while 8 respondents reported poor Responsiveness, with the majority being dissatisfied (6 respondents or 75.0%).

From the results of the Chi Square statistical test at a 95% confidence level ($= 0.05$), a p-value of 0.006 ($p < 0.05$) was obtained, which means H_a is rejected, so it can be concluded that there is a relationship between Responsiveness and the Level of Inpatient Satisfaction at Cut Nyak Dhien General Hospital in Langsa City.

The Relationship Between Assurance and Patient Satisfaction

Table 9. The Relationship Between Assurance and Patient Satisfaction in the Inpatient Installation of Cut Nyak Dhien General Hospital, Langsa City

No	Jaminan (Assurance)	Patient Satisfaction						0.004
		Satisfied		Satisfied		Satisfied		
		F	%	F	%	F	%	
1	Good	29	80.6	7	19.4	36	100	0.004
2	Not Good	8	42.1	11	57.9	19	100	
Total		37	67.3	18	32.7	55	100	

The table above shows that out of 55 respondents, 36 respondents indicated good Assurance with the majority being satisfied, totaling 29 respondents (80.6%), while 19 respondents indicated poor Assurance with the majority being dissatisfied, totaling 11 respondents (57.9%). From the results of the Chi Square statistical test at a 95% confidence level ($= 0.05$), a p-value of 0.004 ($p < 0.05$) was obtained, which means H_a is rejected, so it can be concluded that there is a relationship between Assurance and the Level of Satisfaction of Inpatient Patients at Cut Nyak Dhien General Hospital in Langsa City.

The Relationship Between Tangible Evidence and Patient Satisfaction

Table 10. The Relationship Between Tangible Evidence and Patient Satisfaction in the Inpatient Installation of Cut Nyak Dhien General Hospital, Langsa City

No	Bukti Fisik (Tangible)	Patient Satisfaction						0.015
		Satisfied		Satisfied		Satisfied		
		F	%	F	%	F	%	
1	Good	27	79.4	7	21.6	34	100	0.015
2	Not Good	10	47.6	11	52.4	21	100	
Total		37	67.0	18	33.0	55	100	

The table above shows that out of 55 respondents, 34 respondents indicated that the Tangible Evidence was good, with the majority being satisfied (27 respondents or 79.4%), while 21 respondents stated that the Tangible Evidence was not good, with the majority being dissatisfied (11 respondents or 52.4%).

From the results of the Chi Square statistical test at a 95% confidence level ($= 0.05$), a p-value of 0.015 ($p < 0.05$) was obtained, which means H_a is rejected, thus it can be concluded that there is a relationship between Tangible Evidence and the Satisfaction Level of Inpatient Patients at Cut Nyak Dhien General Hospital, Langsa City.

The Relationship Between Empathy and Patient Satisfaction

Table 11. The Relationship Between Empathy and Patient Satisfaction in the Inpatient Installation of Cut Nyak Dhien General Hospital, Langsa City

No	Empati (Empathy)	Patient Satisfaction						
		Satisfied		Satisfied		Satisfied		
		F	%	F	%	F	%	
1	Good	21	80.8	5	19.2	26	100	0.043
2	Not Good	16	55.2	13	44.8	29	100	
Total		37	67.3	18	32.7	55	100	

The table above shows that out of 55 respondents, 26 respondents indicated good Empathy, with the majority being satisfied, totaling 21 respondents (80.8%), while the remaining respondents indicated poor Empathy, with the majority being dissatisfied, totaling 13 respondents (44.8%).

From the results of the Chi Square statistical test at a 95% confidence level (= 0.05), a p-value of 0.043 (p<0.05) was obtained, which means Ha is rejected, so it can be concluded that there is a relationship between Empathy and the Level of Satisfaction of Inpatient Patients at Cut Nyak Dhien General Hospital in Langsa City.

The Relationship Between Reliability and Satisfaction

Table 12. The Relationship Between Reliability and Patient Satisfaction in the Inpatient Installation of Cut Nyak Dhien General Hospital, Langsa City

No	Keandalan (Reliability)	Patient Satisfaction						
		Satisfied		Satisfied		Satisfied		
		F	%	F	%	F	%	
1	Good	28	77.8	8	22.2	36	100	0,022
2	Not Good	9	47.4	10	52.6	19	100	
Total		37	67.3	18	32.7	55	100	

The table above shows that out of 55 respondents, 36 respondents reported good Reliability with the majority being satisfied, amounting to 28 respondents (77.8%), while 19 respondents reported poor Reliability with the majority being dissatisfied, amounting to 10 respondents (52.6%). From the results of the Chi Square statistical test at a 95% confidence level (= 0.05), a p-value of 0.022 (p<0.05) was obtained, which means Ha is rejected, so it can be concluded that there is a relationship between Reliability and the Level of Inpatient Satisfaction at Cut Nyak Dhien General Hospital in Langsa City.

Multivariate Analysis

At the multivariate analysis stage, the variables of Responsiveness, Assurance, Tangible, Empathy, and Reliability are analyzed in relation to Inpatient Satisfaction. The multiple logistic regression test aims to identify the most dominant factor influencing Inpatient Satisfaction at Cut Nyak Dhien General Hospital in Langsa City.

Table 13. Test Results multivariate Variables in the Equation

Variabel	B	S.E	Wald	df	Sig.	EXP (B)	95.0 % C.I.for	
							EXP (B)	
							Lower	Upper
Responsivness	2.430	1.249	3.783	1	0.042	11.361	0.982	131.502
Assurance	3.004	1.141	6.926	1	0.008	20.163	2.153	188.861
Tangible	1.603	0.940	2.907	1	0.088	4.967	0.787	31.349
Empathy	2.606	1.102	5.590	1	0.018	13.547	1.562	117.516
Reability	1.931	0.907	4.528	1	0.033	6.896	1.165	40.835
Constant	-17.019	4.963	11.760	1	0.001	0.000		

The table shows that after conducting a multivariate analysis using multiple logistic regression, it was found that the variable with the largest EXP (B) value and the smallest p (sig) value is the Assurance variable with an EXP (B) value of 20.163 and the smallest p (sig) value of 0.008, which means this variable has the most dominant influence on the Inpatient Satisfaction at Cut Nyak Dhien General Hospital in Langsa City.

Responsiveness Affects Inpatient Satisfaction at Cut Nyak Dhien General Hospital Langsa City

The results of this study are in line with the SERVQUAL theory proposed by A. Parasuraman, Valarie A. Zeithaml, and Leonard L. Berry in 1988, which states that responsiveness is one of the five main dimensions of service quality. Responsiveness describes the willingness and ability of healthcare personnel to assist patients quickly, accurately, and promptly when they need service. In healthcare services, a responsive attitude is very important because patients usually need immediate assistance, whether in the form of medical treatment or the provision of clear information.

Healthcare workers who quickly respond to patient complaints, provide immediate assistance, and are able to answer patient questions well will make patients feel cared for and valued. This condition can enhance the comfort, trust, and satisfaction of patients with the services provided by the hospital. Therefore, the better the responsiveness of healthcare workers in providing services, the greater the likelihood that patients will feel satisfied with the healthcare services they receive. Researcher Assumption: Responsiveness describes the ability of healthcare workers and hospital staff to provide services quickly, promptly, and be ready to assist patients when needed. The research results show that the majority of patients are satisfied with the services provided because the staff are considered to be quite quick in responding to patients' needs, providing assistance, and giving the necessary information during the treatment period.

The Most Dominant Assurance Influencing Inpatient Satisfaction at Cut Nyak Dhien General Hospital Langsa City

The results of this study are in line with the research conducted by Rahmatia et al., 2025, titled "Service Quality in Inpatient Care at Hospitals: A SERVQUAL Model Approach." The study shows that the assurance dimension is the most influential factor in determining inpatient patient satisfaction. This indicates that patients will feel more satisfied when they perceive a good service guaranty from healthcare professionals, such as polite attitudes, professional competence, and services that instill a sense of safety and trust. This demonstrates that patients who perceive a good service guaranty in the nursing care provided (Rahmatia, et al.).

Research Assumption This shows that the attitude of healthcare workers who can provide a sense of safety, trust, and confidence to patients plays a significant role in shaping the level of patient satisfaction during treatment. When patients feel that healthcare workers have good knowledge, are polite, friendly, and able to explain services clearly, they will have more trust in the services provided by the hospital. This sense of trust and safety makes patients feel cared for and valued, thus making their experience during treatment more positive.

Tangible Evidence Does Not Affect Inpatient Satisfaction at Cut Nyak Dhien General Hospital Langsa City

This reinforces the SERVQUAL theory that patient satisfaction is the result of a comprehensive evaluation of various aspects of service, so improving service quality should not only focus on facilities and infrastructure but also on enhancing service reliability, healthcare workers' empathy, interpersonal communication, and consistency in providing services according to standard operating procedures. With the improvement of patient satisfaction, it must be carried out comprehensively while prioritizing the most dominant dimensions that influence the healthcare service context (Ispandiyah & Afigah, 2025).

Based on the research conducted by the researcher, it can be concluded that tangible evidence does not influence the level of satisfaction of inpatients at Cut Nyak Dhien General Hospital in Langsa City. **Research Assumption:** Tangible evidence in healthcare services includes the condition of hospital facilities, such as room cleanliness, availability of equipment, bed comfort, as well as the appearance of healthcare personnel and the general hospital environment. Although these elements are important in supporting services, the results of this study indicate that the presence or condition of tangible evidence does not necessarily become the main factor determining patient satisfaction.

Empathy Affects Inpatient Satisfaction at Cut Nyak Dhien General Hospital, Langsa City

The results of this study are in line with the research conducted by Nura et al. in 2020 titled "The Influence of Service Quality on Inpatient Satisfaction at Izza Hospital Karawang," which states that the empathy dimension has an impact on patient satisfaction. Empathy in healthcare illustrates the attitude of healthcare workers who show attention, care, and friendliness to patients during the care process. When healthcare workers are able to understand the conditions, needs, and complaints of patients well, patients will feel valued.

This finding reinforces the results of the research conducted by the researcher, where the aspect of service quality has been proven to significantly contribute to patient satisfaction. This result is also in line with the service quality concept (SERVQUAL) proposed by A. Parasuraman, which states that patients' perceptions of service quality will affect the level of satisfaction experienced. The alignment of these research results indicates that a comprehensive improvement in service quality is an important strategy for enhancing patient satisfaction and maintaining public trust in healthcare institutions (Nura & Simanjong, 2020).

Researcher's Assumption This shows that the attitude of care, concern, and the ability of healthcare workers to understand the feelings and needs of patients play a significant role in shaping patient satisfaction during treatment. When healthcare workers are able to provide services with a friendly attitude, listen to patients' complaints well, and give sincere attention, patients will feel valued, cared for, and treated humanely. These conditions can foster a sense of comfort, safety, and increase patients' trust in the services provided by the hospital.

Conversely, if patients feel they are not receiving enough attention or are not treated with care, it can decrease their satisfaction with the services received. Therefore, empathy is one of the important aspects of the quality of healthcare services, as a good relationship between healthcare providers and patients can create a more positive service experience and ultimately increase patient satisfaction during their hospital care.

Reliability Affects Inpatient Satisfaction at Cut Nyak Dhien General Hospital in Langsa City

The research conducted by Harokan et al. in 2024, titled "Analysis of Service Quality on Inpatient Satisfaction at Regional General Hospitals in 2024," shows that the dimension of reliability has an impact on inpatient satisfaction. This can be explained by the fact that reliability in healthcare services is related to the ability of healthcare personnel and the hospital to provide services that are accurate, consistent, and in accordance with established promises or procedures.

When patients receive clear, prompt service without errors in the care or administrative processes, they will feel more trust and confidence in the quality of the service provided. Reliability also reflects the professionalism of healthcare workers in handling patients, such as the accuracy of actions taken, the timeliness of service schedules, and the ability to provide correct information. These conditions make patients feel that their health needs are well met, resulting in satisfaction with the hospital's services (Harokan, Priyatno, & Wahyudi, 2024).

From the results of the questionnaire that has been researched, the majority of patients rated the service provided as good, so they felt satisfied with the service received during their treatment. This indicates that the better the reliability of the service provided by the hospital, the higher the level of satisfaction felt by the patients. Therefore, reliability becomes one of the important factors that need to be continuously maintained and improved by the hospital so that the quality of service remains preserved and patient satisfaction can continue to increase.

5. CONCLUSION AND RECOMEMENDATIONS

Conclusion

(1) There is an influence of Responsiveness on the level of inpatient satisfaction at Cut Nyak Dhien General Hospital, Langsa City; (2) there is an influence of Assurance on the level of inpatient satisfaction at Cut Nyak Dhien General Hospital, Langsa City; (3) there is no influence of Tangibles on the level of inpatient satisfaction at Cut Nyak Dhien General Hospital, Langsa City; (4) there is an influence of Empathy on the level of inpatient satisfaction at Cut Nyak Dhien General Hospital, Langsa City; (5) there is an influence of Reliability on the level of inpatient satisfaction at Cut Nyak Dhien General Hospital, Langsa City; and (6) there is a significant influence of Assurance on the level of inpatient satisfaction at Cut Nyak Dhien General Hospital, Langsa City.

Recomemendations

Based on the research results on the Influence of Health Service Quality Dimensions on the Satisfaction Level of Inpatient Patients at Cut Nyak Dhien General Hospital, Langsa City. The researcher suggests that the results of this study are expected to provide the latest information, particularly about inpatient satisfaction. It is hoped that it can enhance the facilities by providing complete medical equipment, seating areas, spacious parking, and larger signboards to make it easier for patients to find their intended rooms.

REFERENCE LIST

- Afrioza, S., & Baidillah, I. (2022). Hubungan mutu pelayanan kesehatan dengan kepuasan pasien rawat jalan di Puskesmas Perawatan D6 Ketahun Kabupaten Bengkulu Utara. *Jurnal Kesehatan*, 1(2), 169–180.
- Ahmad, H., & Napitupulu, M. (2021). Hubungan mutu pelayanan kesehatan terhadap tingkat kepuasan pasien rawat jalan di Puskesmas Mangasa Kota Makassar. *Jurnal Kesehatan Ilmiah Indonesia (Indonesian Health Scientific Journal)*, 6(2), 193–204.
- Biney, I., Wowor, R., & Rumayar, A. (2022). Hubungan Antara Pengetahuan dan Sikap Dengan Tindakan Pencegahan COVID-19 di Kelurahan Sagerat Kecamatan Matuari Kota Bitung. *KESMAS: Jurnal Kesehatan Masyarakat Universitas Sam Ratulangi*.
- Fauziyah. (2019). *Metode Penelitian Kesehatan*.
- Hartawan, I. M. P. S., & Zaini. (2022). Pengaruh mutu pelayanan terhadap kepuasan pasien BPJS rawat jalan di Rumah Sakit Umum Daerah Kota Mataram tahun 2022. *Nusadaya Journal of Multidisciplinary Studies*, 1(2), 22–26.
- Harokan, A., Priyatno, A., & Wahyudi, A. (2024). Analisis Mutu Pelayanan Terhadap Kepuasan Pasien Rawat Jalan Rumah Sakit Umum Daerah Tahun 2024. *Cendekia Medika: Jurnal STIKes Al-Ma'arif Baturaja*, 135-144, 9(1).
- Ispandiyah, W., & Afigah, M. (2025). Kualitas Pelayanan Kesehatan Terhadap Kepuasan Pasien di Puskesmas Mantrijeron Kota Yogyakarta. *Jurnal Mitra*, 4(2).
- Karunia, Azizah, N., Rahayu, O., Melati, P., & Santoso, A. (2022). Mutu dan Kepuasan Terhadap Pasien. *Journal of Complementary in Health*, 2(1), 63-66.
- Muhammad Al Rajab, S. A. (2023). Pengaruh mutu pelayanan terhadap tingkat kepuasan pasien rawat jalan. *Jurnal Ilmiah Kesehatan*, 18(1), 73–86.
- Nura, R., & Simanjorang, A. (2020). Pengaruh Mutu Pelayanan Terhadap Kepuasan Pasien Rawat Inap di Rumah Sakit Izza Karawang. *Journal Of Healthcare Technology and Medicine*, 1097-1111, 6(2).
- Pengaruh mutu pelayanan terhadap kepuasan pasien unit rawat jalan di rumah sakit: Literatur review. (2024). *Healthy Tadulako Journal (Jurnal Kesehatan Tadulako)*, 10(4), 547–555.
- Rahmatia, S., Basri, M., Ismail, I., Adi, S., Nasrullah, N., & Ahmad, A. (t.thn.). Service Quality in Hospital Inpatient Care.
- Sudirman. (2023). *Manajemen Mutu Pelayanan Kesehatan*. Ara Digital Mandiri.
- Sugiyono. (2016). *Metode Penelitian Kuantitatif, Kualitatif dan R&D*. PT Alfabet.
- WHO. (t.thn.). 2020.