

Assesment of Internal Service Quality Dimensions Using the TOPSIS Method to Improve Service Quality at the Outpatient Registration Sites Aisyiyah Siti Fatimah Tulangan Hospital

Siti Aisyah Lutfiyah¹, Resta Dwi Yuliani²
^{1,2} Muhammadiyah University of Sidoarjo, Indonesia



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ABSTRACT

Objective: The aim of this research is to find a solution for each alternative by using the TOPSIS (Technique for Order Preference by Similarity to Ideal Solution) method as a basis for measuring the quality of health services at the Aisyiyah Siti Fatimah Tulangan Hospital, where there are still problems with service quality and patient satisfaction due to the lack of supporting facilities in the registration waiting room. **Method:** This research uses descriptive quantitative methods with a population consisting of patients undergoing new and existing outpatient treatment at the Aisyiyah Siti Fatimah Tulangan Hospital, and the sample size determined using the Slovin formula resulted in 98 respondents. **Result:** The results of this research obtained an average tangibles score of 52.80%, reliability 64.06%, responsiveness 78.00%, empathy 64.33%, competence 76.84%, communication 78.00%, and access 65.39%; overall it is categorized as satisfied, although the tangibles dimension indicates remaining obstacles. **Novelty:** The study provides practical recommendations for additional supporting facilities in the waiting room to improve patient comfort and satisfaction, offering a focused approach to enhancing the tangible dimension of healthcare service quality.

INTRODUCTION

Hospitals are defined as health care institutions that provide comprehensive individual health care services, including inpatient care, outpatient care, and emergency care, as stipulated in Law No. 44 of 2009 [1]. Outpatient care is defined as health care services provided to patients for observation, diagnosis, treatment, rehabilitation, and other medical services that do not require the patient to be admitted to the hospital. The Outpatient Registration Desk (TPPRJ) is part of the healthcare service that receives patients, both those receiving inpatient care at the hospital and those seeking outpatient treatment. This is where patients first come into contact with the hospital [2]. Outpatient registration officers are required to be quick and accurate in collecting and recording patient data, with an information system that facilitates and speeds up services and reduces data processing errors [3]. Outpatient care is the gateway to the hospital because it is a key factor in patient satisfaction. If patients are dissatisfied with outpatient services, they will not return to the hospital for treatment.

Good service at a hospital is proof that the hospital is of high quality. The quality of health services refers to the appropriate and effective use of potential resources available at hospitals or health centers, in accordance with professional and service standards and in a safe, satisfactory, ethical, and legal manner, taking into account the limitations and

opportunities of the government and patients as consumers [4]. Something is said to be of high quality if it is considered better, faster, more innovative, and often more expensive than low-quality products and services. However, this is not entirely true because some customers understand quality medical services as services that satisfy customers [5]. Service quality is an assessment of customer expectations with performance results, attitudes, or the way employees provide satisfactory service to customers [6]. According to Charles Hollis, there are 12 dimensions related to internal service quality in the health sector (Internal Health Care Service Quality). The ideal solution for each alternative will then be selected using the TOPSIS (Technique for Order Preference by Similarity to Ideal Solution) method as a basis for measuring the quality of health services [7]. The 12 dimensions of healthcare service quality are: tangibles, responsiveness, courtesy, reliability, communication, competence, understanding, outcomes, caring, collaboration, access, and equity [8].

Satisfaction is determined by the assessment of each patient regarding the health services they have received. Satisfaction measurement is carried out as an effort to ensure the quality of health services provided [9]. In health services, patients are consumers of health services because they are related to service quality, hospital marketing, and service improvement priorities [10]. Patients feel satisfied when health services meet or exceed their expectations. This satisfaction begins when patients are welcomed from the moment they arrive until they leave the treatment facility. Negative perceptions or dissatisfaction among customers can result in them no longer being interested in using our services. That is why it is important for service providers to pay attention to quality in meeting customer expectations and satisfaction [11], whereby patient satisfaction is used as an indicator of the success of health services and a form of patient evaluation of the services provided by hospitals.

According to research by Novega (2020), who conducted a review prior to the research, found that health services at the Kelpahiang Regional General Hospital registration office still need to be improved, especially in terms of time management and hospital administration. Services to patients were not provided on time, so patients had to wait for hours to receive services. In addition, complicated administrative procedures make it difficult for patients as consumers to obtain health services. The registration desk staff are unreliable and unresponsive in serving patients. so the researchers tried to look at it from the perspective of service recipients or customers in evaluating the gap between expectations and perceptions of the quality of health services provided by the Kelpahiang Regional General Hospital outpatient facility. The gap is the difference between perceived service (perceived service) and expected service (expected service) [12].

Based on the results of a preliminary study at the Aisyiyah Siti Fatimah Tulangan Hospital in the outpatient registration section, 10 patient responses were taken. This study shows that 3 patients in the tangible quality dimension stated that they were dissatisfied with the reasons of additional facilities such as televisions, newspapers, and magazines, which were insufficient, causing patients to feel bored while waiting in line. There were 4 patients in the reliability dimension who stated that they were dissatisfied

with the timeliness of service delivery. and there were 3 patients in the responsiveness dimension who said they were quite satisfied because the outpatient registration staff tried to provide prompt and responsive service in responding to patient complaints.

One of the efforts to improve the quality of outpatient satisfaction in the tangible dimension (physical evidence) is by adding various supporting facilities in the registration waiting room [13]. In the reliability dimension the ability of officers to provide timely services as described in the Minister of Health Decree No. 129 of 2008 concerning Minimum Service Standards for Hospitals established at the Outpatient Registration Desk is a treatment time of less than 60 minutes with a of less than 10 minutes, and customer/patient satisfaction above 90% [14]. Responsiveness is seen from the speed and responsiveness of officers in providing treatment to patients, such as responding to patient problems/complaints [15]. In this case, hospitals must consider the quality of their services, including patient waiting times, because this can have an impact on the quality of services received by patients. Satisfied patients will be interested in returning for another visit [16].

Based on the issues mentioned above, the researcher conducted research at the Aisyiyah Siti Fatimah Tulangan Hospital related to the quality of health services and patient satisfaction, because good service will influence patient satisfaction to use the service again and recommend the service received to others who also have the same health service needs.

RESEARCH METHOD

This study was conducted at Aisyiyah Siti Fatimah Tulangan Hospital using descriptive quantitative research. The purpose of this study was to assess the dimensions of patient satisfaction for improving service quality at Aisyiyah Siti Fatimah Tulangan Hospital. Data collection was carried out using questionnaires with purposive sampling, which is sampling based on criteria set by the researcher, namely patients who were undergoing new and long-term outpatient treatment at Aisyiyah Siti Fatimah Tulangan Hospital from March – April 2024, with a total of 98 respondents. The independent variables in this study were the dimensions of tangibles, reliability, responsiveness, empathy, competence, communication, and access. The dependent variable in this study was patient satisfaction with outpatient registration services, which was measured using the service quality dimension. The output is an assessment of the quality of outpatient services based on the Internal Service Quality dimension using the TOIPSIS model at Aisyiyah Siti Fatimah Tulangan Hospital as follows:

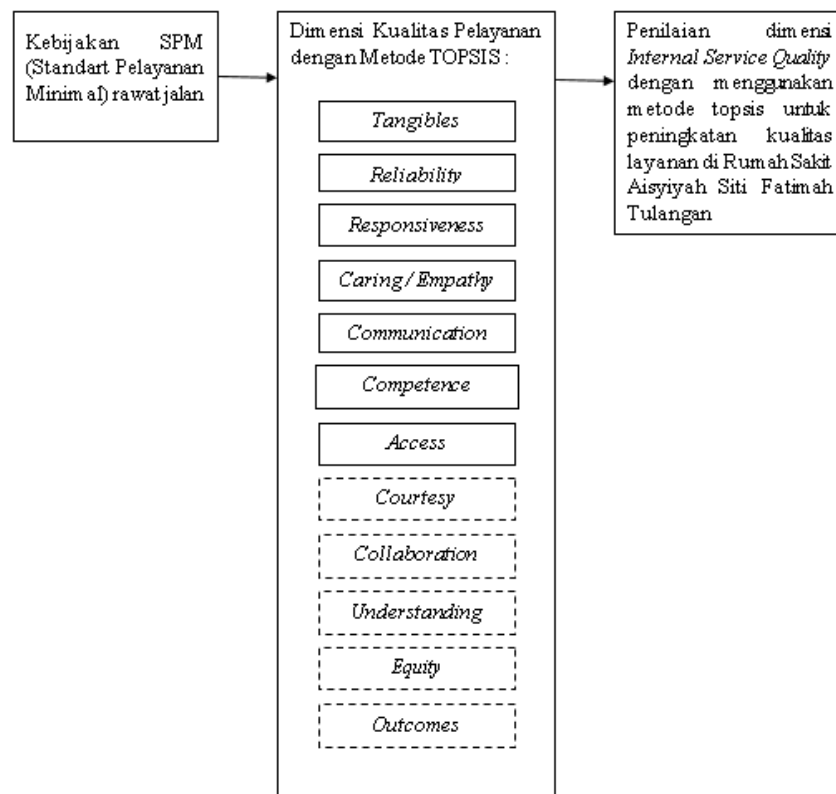


Figure 1. Theoretical Framework.

Source : Parasuraman dalam Abdul Sani (2021)

Explanation:

: Researched

: Not researched

Based on the theoretical framework above, there are twelve dimensions of service quality. However, in this study, only seven dimensions that are highly relevant were selected as dimensions and indicators. This is because the TOPSIS method concept can be applied to all types of services in various organizations. The quality of health services is assessed based on compliance with service standards. Service at outpatient registration based on service quality can be seen in the speed and duration of outpatient services, which are influenced by many factors, including the influence of physical evidence, reliability, responsiveness, empathy, communication, competence, and access.

RESULTS AND DISCUSSION

A. Respondent Characteristics

The characteristics of the respondents in this study were measured using a questionnaire, with a total of 98 respondents who received services at the Outpatient Registration Desk of the Aisyiyah Siti Fatimah Tulangan Hospital. The questionnaire covered gender, highest level of education, occupation, and insurance status. The general description of the research population can be seen in the following frequency distribution and cross-tabulation:

Table 1. Relspolndeln Rumah Sakit Aisyiyah Siti Fatimah Tulangan.

Category	Description	Frequency	Percentage (%)
Gender	Male	41	42%
	Female	57	58%
	Total	98	100%
Highest Education	No Schooling	1	1%
	Elementary School	2	2%
	Junior High School	20	20%
	Senior High School	49	50%
	D1-D3-D4	4	4%
	Bachelor's Degree	22	23%
	Total	98	100%
	Not working	4	4%
Employment	Civil servant/military/police	12	12%
	Private employee	30	31%
	Entrepreneur	22	23%
	Student	5	5%
	Housewife	19	19%
	Other	6	6%
	Total	98	100%
	General	15	15%
Insurance Status	BPJS	83	85%
	Total	98	100%

Source: Results of a survey conducted by Aisyiyah Siti Fatimah Tulangan Hospital (2024)

Based on Table 1, it can be seen that the female patients of Aisyiyah Siti Fatimah Tulangan Hospital accounted for 57 out of 98 respondents, or 58%. When compared to male patients, there were 41 out of 98 patients, with a percentage of 42%. In terms of education, 49 out of 98 respondents had a high school education, with a prevalence of 50%, which is the highest educational qualification compared to those who did not attend school, which was 1 out of 98 respondents, with a prevalence of 1%. In terms of employment, 30 of the 98 respondents worked as private employees with a response rate of 31%, compared to 4 of the 98 respondents who were unemployed with a response rate of 4%. Based on patient insurance status, the characteristics of patients with BPJS insurance status were 83 out of 98 respondents with a prevalence of 85%, and when compared to general patients, there were 15 out of 98 respondents with a prevalence of 15%.

The results of the service quality assessment conducted by respondents based on seven dimensions of service quality (tangibles, reliability, responsiveness, empathy, completeness, communication, and accessibility) at the Outpatient Registration Desk are as follows:

B. *Tangibles Dimension*

The tangibles dimension (tangible) is the form that can be seen directly from the service delivery, including physical appearance, facilities, equipment, facilities, information, and staff. The tangible dimension (tangible/ real) includes physical facilities, amenities, and materials used by the hospital, as well as the appearance of employees [17]. The following are the results of research on the tangible dimension at the registration desk of the Aisyiyah Siti Fatimah Tulangan Hospital:

Table 2. Assessment of service quality based on tangible dimensions.

No	<i>Tangible Indicators</i>	Percentage (%)	Category
1	Cleanliness of the outpatient registration waiting room	54,71%	Satisfactory
2	Outpatient registration staff always look neat	56,29%	Satisfactory
3	Additional facilities such as televisions, newspapers, and magazines so that patients do not get bored while waiting in line	45,86%	Satisfactory
4	Availability of information boards such as patient registration procedures	53,14%	Satisfactory
5	Availability of ready-to-use equipment such as computers, internet networks, APM machines, sound systems, LCD screens displaying queues	55,86%	Satisfactory
6	Availability of air conditioning to cool the room	53,86%	Satisfactory
7	Availability of sufficient seating in the waiting room	49,86%	Satisfactory
Total		52,80%	Satisfactory

Source: Results of a survey conducted by Aisyiyah Siti Fatimah Tulangan Hospital (2024)

Table 2 above shows that the description of patient service quality at the outpatient registration desk in terms of tangible evidence or direct evidence obtained an average patient satisfaction index of 52.80% with a rating of fairly satisfied. The first statement regarding cleanliness in the outpatient registration waiting room obtained an average score of 54.71%, which means that patients were quite satisfied. The second question regarding the appearance of outpatient registration staff, which was always neat, obtained a score of 56.29%, which means that they were quite satisfied. The third question, regarding additional facilities such as televisions, newspapers, and magazines to keep patients entertained while waiting in line, received a satisfaction rating of 45.86%, which is fairly satisfactory. The fourth question concerned the availability of information boards, such as patient registration procedures, and received a satisfaction rating of 53.14%, which is fairly satisfactory.

The fifth question item regarding the availability of ready-to-use equipment such as computers, internet networks, APM (Independent Registration Kiosks), speakers,

screens or television monitors displaying queues, the results showed a satisfaction rate of 55.86%, which means that patients were quite satisfied. The sixth question concerned the availability of air conditioning to cool the room, and the results showed a satisfaction rate of 53.86%, which means that patients were quite satisfied. The seventh question regarding the availability of sufficient seating in the waiting room received a response rate of 49.86%, which means that respondents were fairly satisfied. Therefore, one of the indicators used to measure the quality of public services is the tangible dimension. In this study, physical facilities such as buildings, waiting rooms, examination rooms, written information sources, and location distance were discussed. The tangible dimension is important as a measure of service because it is tangible evidence that can be seen and felt, thereby influencing customer expectations.

Based on Table 2, the lowest score was for additional facilities such as televisions, newspapers, and magazines to keep patients entertained while waiting in line. From the observations at the Outpatient Registration Desk of the Aisyiyah Siti Fatimah Tulangan Hospital, it is clear that the needs of patients are not being met, such as the limited number of newspapers, magazines, children's toys, and televisions, which could be better utilized as entertainment for patients while waiting in line to register. Therefore, it is hoped that the patient registration area can improve the physical/tangible evidence that currently exists. Tangible dimensions include physical facilities, equipment, and materials used by the company, as well as employee appearance. Therefore, with attributes that have been assessed as good by respondents, it is hoped that patient registration areas can improve the physical evidence that currently exists, and that facilities such as televisions can be better utilized so that patients feel more comfortable [18]. In this statement, if patients feel uncomfortable or uneasy, it can affect their physical and psychological well-being, which will then affect their recovery. a high level of patient satisfaction can increase patient satisfaction and increase interest in revisiting the hospital concerned. This physical/tangible evidence is very important for assessing the quality of the services provided to patients [19].

C. *Reliability Dimension*

The reliability dimension is the ability of an institution to provide accurate services from the outset without making any mistakes in delivering its services according to the agreed time [20]. This means that officers are able to deliver the promised services accurately. The following are the results of research on the reliability dimension at the registration desk of Aisyiyah Siti Fatimah Tulangan Hospital:

Table 3. Assessment of service quality based on the reliability dimension.

No	<i>Reliability Indicator</i>	Percentage (%)	Category
1	Registration officers provide information about the patient registration process	63,83%	Satisfied

2	Registration staff provide information about BPJS/General patient registration requirements	65,33%	Satisfied
3	Outpatient registration staff provide services appropriately in accordance with minimum service standards	64,50%	Satisfied
4	The administrative process and payment process are not difficult	65,17%	Satisfied
5	The services provided are in accordance with what was communicated	65,83%	Satisfied
6	Timeliness in registering patients	59,67%	Satisfied
Total		64,06%	Satisfied

Source: Results of a questionnaire conducted by Aisyiyah Siti Fatimah Tulangan Hospital (2024)

Table 3 above shows that the description of the quality of patient services at the outpatient registration desk in terms of reliability obtained an average patient satisfaction index of 64.06% with a rating of satisfied. The first question regarding registration officers providing information about the patient registration process obtained a result of 63.83%, which means satisfied. The second question regarding registration officers providing information about BPJS/General patient registration requirements received a score of 65.33%, which indicates satisfaction. The third question, regarding outpatient registration officers providing services in accordance with minimum service standards, received a satisfaction rating of 64.50%. The fourth question item regarding the administration and payment procedures, which were not difficult, obtained a satisfaction rating of 65.17%.

The fifth question item regarding the suitability of the services provided with the information provided obtained a satisfaction score of 65.83%, which means satisfactory. The sixth question, regarding the timeliness of patient registration, received a satisfaction rating of 59.67%. The reliability dimension can be seen from trained staff, timeliness, personal attention of staff to patients, friendly staff, and a comfortable waiting room to support service quality. If customers perceive the reliability dimension of service quality to be good, then customer satisfaction will be higher, and if customers perceive the reliability dimension of service quality to be poor, then customer satisfaction will be lower. With this, it is hoped that hospitals will be able to maximize their existing resources to provide the best service.

Based on Table 3, the lowest score was on the question of punctuality in registering patients. From observations at the Outpatient Registration Desk of the Aisyiyah Siti Fatimah Tulangan Hospital, staff were not punctual in registering patients, which affected patient satisfaction levels. According to the Minister of Health Decree No. 129 of 2008 concerning Minimum Service Standards (SPM), the time required from when a patient registers until they are served by a specialist doctor is approximately 60 minutes. To minimize this problem, it is necessary to display information about outpatient services on the walls, especially in the outpatient waiting room, and to provide education about outpatient registration services through call centers or online applications to avoid

patient congestion in the event of a network overload [21]. Therefore, in terms of reliability, it is recommended that there be reliable staff, sufficient staff resources, and adequate facilities at the registration desk.

D. *Responsiveness Dimension*

The responsiveness dimension is the willingness and ability of staff to assist patients, respond, provide information on when services will be provided, and then provide services based on the quality of service provided [22]. The following are the results of the research on the responsiveness dimension at the registration desk of Aisyiyah Siti Fatimah Tulangan Hospital:

Table 4. Assessment of service quality based on the responsiveness dimension.

No	<i>Responsiveness Indicator</i>	Percentage (%)	Category
1	Outpatient registration staff serve with 5S (Greetings, Smile, Greetings, Solpan, Polite)	78,00%	Satisfied
2	Registration staff always remind patients to bring their medical cards every time they visit	78,80%	Satisfied
3	Outpatient registration officers are responsive in helping patients who arrive	76,40%	Satisfied
4	Outpatient registration officers are always ready to help patients when there are difficulties	76,60%	Satisfied
5	The ability of staff to provide the services needed by patients	80,20%	Satisfied
Total		78,00%	Satisfied

Source: Results of a questionnaire conducted by Aisyiyah Siti Fatimah Tulangan Hospital (2024)

Table 4 above shows that the description of the quality of patient services at the outpatient registration desk in terms of responsiveness obtained an average patient satisfaction index of 78.00% with a rating of satisfied. The first question regarding outpatient registration officers serving with 5S (Greetings, Smiles, Greetings, Solpan, Politeness) obtained a result of 78.00%, which means satisfied. The second question regarding registration officers always reminding patients to bring their medical cards every time they visit received a score of 78.80%, which means satisfaction. The third question item, regarding outpatient registration officers being responsive in helping patients who come in, received a satisfaction rating of 76.40%.

The fourth question asked whether outpatient registration officers were always ready to help patients when they had difficulties, with a satisfaction rate of 76.60%. The fifth question item regarding the ability of officers to provide the services needed by patients obtained a score of 80.20%, which means satisfaction. Responsiveness is defined as the ability of staff to assist patients in providing prompt service, willingness to listen, and resolving patient complaints optimally. Thus, it can be understood that providing

satisfaction to patients requires additional efforts to achieve it. These efforts are in the sense that staff seriously offer all possible responsibilities only for the benefit of patients in order to achieve patient satisfaction.

Based on Table 4, each question received a high average score. This statement shows that patients feel satisfied with the responsiveness dimension, which includes the ability of health workers to listen to customers and their readiness to serve according to procedures and meet customer expectations. Customer expectations regarding the speed of service tend to increase over time in line with advances in health information technology available to customers. This means that officers are expected to be able to maintain a responsive attitude in order to improve the quality of service at outpatient registration [23].

E. Empathy Dimension

The empathy dimension is giving sincere and individual or personal attention to patients. The empathy dimension seeks to understand patients' desire for clarity of information regarding matters of importance to them [24]. The following are the results of research on the empathy dimension at the registration desk of Aisyiyah Siti Fatimah Tulangan Hospital:

Tabel 5. Assessment of service quality based on the empathy dimension.

No	Empathy Indicator	Percentage (%)	Category
1	Staff assist patients when they have difficulty completing BPJS / General requirements	62,17%	Satisfied
2	Outpatient registration staff always communicate well with patients	65,83%	Satisfied
3	Outpatient registration staff provide clear information about services to patients	65,67%	Satisfied
4	Outpatient registration staff are always fair and do not discriminate between BPJS and general patients	65,33%	Satisfied
5	Registration staff understand patients' needs/feelings	61,50%	Satisfied
6	Registration staff are friendly and helpful in providing services at the registration desk	65,50%	Satisfied
Total		64,33%	Satisfied

Source: Results of a survey conducted by Aisyiyah Siti Fatimah Tulangan Hospital (2024)

Table 5 above shows that the description of the quality of patient services at the outpatient registration desk in terms of empathy obtained an average patient satisfaction index of 64.33% with a rating of satisfied. The first question item regarding staff assisting patients when they have difficulty completing BPJS/General requirements obtained a result of 62.17%, which means satisfied. The second question, regarding outpatient

registration staff always communicating well with patients, received a score of 65.83%, which indicates satisfaction. The third question item regarding outpatient registration officers providing clear service information to patients obtained a satisfaction rating of 65.67%.

The fourth question, regarding whether outpatient registration staff always treated BPJS patients and general patients fairly without discrimination, received a satisfaction rating of 65.33%. The fifth question regarding the staff's understanding of the needs/feelings of patients received a satisfaction rating of 61.50%. And in the sixth question regarding the friendliness and helpfulness of staff in providing services at the registration desk, the results showed a satisfaction rate of 65.50%. One factor that can influence patient satisfaction is empathy, because there is a relationship between the quality of health services and patient satisfaction. All health workers are expected to pay attention to patient feelings so that they can provide quality services that satisfy patients. Efforts to provide quality services are accompanied by the understanding of officers, including the ease of providing information about services to patients.

Based on Table 5, each question received a high average score. This statement shows that patients feel satisfied with the empathy dimension to develop and carry out service activities in accordance with the level of understanding and comprehension of each party. The party providing the service must feel like the party being served and understand their problems. The parties being served must also understand the limitations and capabilities of the people being served, so that both parties have the same feelings. This means that empathy in a hospital is very important in providing quality service [25].

F. Competence Dimension

The competence dimension is the ability to provide good service based on high competence or skills so as to be able to foster patient trust in the hospital [26]. Each employee must have the knowledge, skills, and good behavior that constitute competence in their profession. The following are the results of research on the competence dimension at the registration desk of the Aisyiyah Siti Fatimah Tulangan Hospital:

Table 6. Assessment of service quality based on competence dimensions.

No	Competence Indicator	Percentage (%)	Category
1	Outpatient registration staff are able to respond to patient questions related to their complaints	74,20%	Satisfied
2	Speed of staff in handling patient complaints and providing solutions	75,40%	Satisfied
3	Ability of staff to register patients accurately	76,20%	Satisfied
4	Staff provide clear explanations/instructions	76,80%	Satisfied
5	Staff are able to operate computers well	81,60%	Very satisfied
Total		76,84%	Satisfied

Source: Results of a survey conducted by Aisyiyah Siti Fatimah Tulangan Hospital (2024)

Table 6 above shows that the description of the quality of patient services at the outpatient registration desk in terms of completeness or completeness obtained an average patient satisfaction index of 76.84% with a rating of satisfied. The first question regarding the ability of outpatient registration officers to respond to patient questions related to their complaints obtained an average score of 74.20%, which means satisfied. The second question regarding the speed of staff in handling patient complaints and providing solutions received a score of 75.40%, which indicates satisfaction. The third question item regarding the ability of staff to register patients accurately obtained a satisfaction rating of 76.20%.

The fourth question item regarding the staff's ability to provide clear explanations/instructions obtained a satisfaction rate of 76.80%. And on the fifth question item regarding the staff's ability to operate computers well, the results showed a satisfaction rate of 81.60%, which means very satisfied. In the context of competence, competence is defined as the knowledge, skills, and behavior that must be possessed by a health worker to carry out their duties in various health service structures. The importance of mastering this competence for professionals working in registration is related to the quality of their work and their career path, so that human resources are needed who meet the competence requirements in carrying out their work at the registration office.

Based on Table 6, each question received a high average score. In the dimension of competence, this relates to the ability, skills, and performance of health service providers. The competence dimension covers health service providers who follow agreed-upon health service standards, such as accuracy, compliance, fairness, and consistency. If one of the competencies is not fulfilled, it can result in minor deviations in service delivery or even fatal errors that can reduce the quality of health services [27].

G. Communication Dimension

The communication dimension is the ability to provide good service based on good communication skills with the parties being served [28]. This dimension is very important for registration officers to implement in order to achieve patient satisfaction. The following are the results of research on the communication dimension at the registration desk of the Aisyiyah Siti Fatimah Tulangan Hospital:

Table 7. Assessment of service quality based on the communication dimension.

No	Communication Indicator	Percentage (%)	Category
1	Officials are able to use language that is easily understood by patients	80,80%	Satisfied
2	Staff are able to explain clearly the questions asked by patients	79,00%	Satisfied

3	Staff give patients the opportunity to ask questions	74,20%	Satisfied
4	Staff serve patients in a friendly and helpful manner	79,20%	Satisfied
5	Staff ask for permission before registering patients	76,80%	Satisfied
Total		78,00%	Satisfied

Source: Results of a questionnaire conducted by Aisyiyah Siti Fatimah Tulangan Hospital (2024)

Table 7 above shows that the description of the quality of patient service at the outpatient registration desk in terms of communication obtained an average patient satisfaction index of 78.00% with a rating of satisfied. The first question regarding the ability of staff to use language that is easily understood by patients obtained an average score of 80.80%, which means satisfied. The second question item regarding the ability of staff to explain clearly the questions asked by patients obtained a score of 79.00%, which means satisfactory. The third question item, regarding the staff's ability to provide opportunities for patients to ask questions, received a satisfaction rating of 74.20%. The fourth question item regarding staff serving patients in a friendly and helpful manner obtained a satisfaction rate of 79.20%. And on the fifth question item regarding staff asking for permission before registering patients, the results showed a satisfaction rate of 76.80%. In the field of health services, communication between health workers is the most important aspect. Lack of communication can lead to mistakes in handling patients and delays in service. Ineffective communication can also indicate poor coordination among health workers. Sometimes, communication consists only of orders and confirmations without discussion or exchange of knowledge. There is a possibility of overlapping services, conflicts between professionals, and delays in patient registration due to the large number of services available at the hospital.

Based on Table 7, each question received a high average score. In the dimension of communication, this refers to the ability to provide information to patients in a language they can understand. This can meet the need for information that has been provided by staff very clearly, starting from information about the services that will be received by patients [29].

H. Access Dimension

The access dimension is the ease with which the health services offered can be accessed by the community, unhindered by geographical, social, economic, and language barriers [30]. This dimension of access can fulfill the service needs of patients. The following are the results of research on the dimension of access at the registration desk of the Aisyiyah Siti Fatimah Tulangan Hospital:

Table 8. Assessment of service quality based on the dimension of access.

No	Access Indicator	Percentage (%)	Category
1	Staff are knowledgeable about the types of services available at the hospital	65,50%	Satisfied
2	Ease of obtaining clear information, such as doctor schedules	66,17%	Satisfied
3	Staff are familiar with the location of the polyclinic that patients will visit	67,17%	Satisfied
4	The road leading to the hospital is accessible without any obstacles	65,17%	Satisfied
5	The hospital has a partnership with other insurance companies	67,33%	Satisfied
6	Hospital facilities are easy to use	61,00%	Satisfied
Total		65,39%	Satisfied

Source: Results of a survey conducted by Aisyiyah Siti Fatimah Tulangan Hospital (2024)

Table 8 above shows that the description of the quality of patient services at the outpatient registration desk in terms of access or accessibility obtained an average patient satisfaction index of 65.39% with a rating of satisfied. The first question regarding whether staff are knowledgeable about the types of services available at the hospital obtained a result of 65.50%, which means satisfied. The second question, regarding the ease of obtaining clear information such as the doctor's schedule, received a response rate of 66.17%, which indicates satisfaction. The third question, regarding staff knowledge of the location of the polyclinic that patients are going to, received a satisfaction rating of 67.17%. The fourth question, regarding whether the road to the hospital was accessible without any obstacles, received a satisfaction rating of 65.17%. The fifth question, regarding whether the hospital has cooperation agreements with other insurance companies, received a satisfaction rating of 67.33%. The sixth question, regarding the ease of using hospital facilities, received a satisfaction rating of 61.00%.

In terms of access, public access to health services is often viewed only from the perspective of service providers. The Ministry of Health is increasing public access to high-quality health services in order to improve the health conditions of the community. However, it must be acknowledged that health development still faces many challenges. Some of these challenges include the emergence of new health problems or recurring infectious diseases, differences in social and economic status between regions, and disparities in the health status of the community. Therefore, it is the responsibility of the Ministry of Health and hospitals to provide uniform health facilities throughout Indonesia so that everyone can receive medical treatment at a lower cost and closer to their homes.

Based on Table 8, each question received a high average score. Geographic access is measured by distance, travel time, type of transportation, and/or other physical barriers that may prevent people from accessing health services. Economic access relates to the ability to pay for health services. Social or cultural access relates to whether or not health services are acceptable in terms of social or cultural values, beliefs, and behavior. Organizational access is the extent to which health services are measured to provide convenience to patients [31].

CONCLUSION

Fundamental Finding : Based on the results of the assessment of the dimensions for improving service quality at the Aisyiyah Siti Fatimah Tulangan Hospital using the Technique for Order Preference by Similarity to Ideal Solution (TOPSIS) model, there are seven dimensions of service quality with respective scores: tangible 52.80% (fairly satisfied), reliability 64.06% (satisfied), responsiveness 78.00% (satisfied), empathy 64.33% (satisfied), competence 76.84% (satisfied), communication 78.00% (satisfied), and accessibility 65.39% (satisfied). This study concludes that all dimensions of service quality are satisfactory, except the tangible dimension, which has the lowest score and is only considered moderately satisfactory. **Implication :** These findings imply that the hospital must prioritize improvements in physical evidence, such as enhancing facilities to increase patient comfort and satisfaction during service interactions. **Limitation :** The study focuses only on measuring patient satisfaction levels based on the seven dimensions of service quality without considering external factors that may influence patients' perceptions, such as waiting time or staff workload. **Future Research :** Future studies are recommended to include broader variables and methods, such as SERVQUAL-Six Sigma integration or comparative analysis across multiple hospitals, to obtain more comprehensive insights into improving healthcare service quality.

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REFERENCES

- [1] J. I. Putri, "Evaluasi Kepuasan Pasien Terhadap Mutu Pelayanan Kesehatan Di Ruang Rawat Inap Rsud Labuang Baji," Jun 2022.
- [2] V. Indriyani dan L. Herfiyanti, "Pengaruh Kepuasan Pasien Terhadap Mutu Pelayanan Rekam Medis di Bagian Pendaftaran Rawat Jalan RSUD Bina Sehat," *Cerdika J. Ilm. Indones.*, vol. 1, no. 7, hlm. 882–892, Jul 2021, doi: 10.59141/cerdika.v1i7.139.

- [3] P. I. Listyorini dan L. Rosella, "Pengaruh Mutu Pelayanan Pendaftaran Rawat Jalan Dengan Kepuasan Pasien Jaminan Kesehatan Nasional (Jkn) Di Puskesmas Gajahan Surakarta," *SMIKNAS*, hlm. 1-11, Mar 2019.
- [4] J. Natassa dan S. S. Dwijayanti, "Hubungan Mutu Pelayanan Dengan Kepuasan Pasien BPJS Kesehatan Di Unit Rawat Inap RSUD Tengku Rafi'an Kabupaten Siak," *Health CARE J. Kesehat.*, vol. 8, no. 2, Art. no. 2, Des 2019.
- [5] I. B. R. Jaya, "Hubungan Mutu Pelayanan Kesehatan Dengan Kepuasan Pasien Rawat Jalan Penyakit Tidak Menular Di Uptd Puskesmas Tosora Kabupaten Wajo," Universitas Hasanuddin, 2022.
- [6] P. A. R. J. Putri, S. A. Handoko, N. M. S. Nopiyani, N. W. A. Utami, dan N. K. F. R. Pertiwi, "Tingkat kepuasan pasien jaminan kesehatan nasional terhadap mutu pelayanan kesehatan gigi dan mulut di Poliklinik Gigi dan Mulut RSUD Badung Mangusada," *Bali Dent. J.*, vol. 3, no. 2, hlm. 103-113, 2019.
- [7] A. Sani, "Analisis Kualitas Pelayanan Rsud Bangka Tengah," *BESTARI*, vol. 1, no. 2, Art. no. 2, Mar 2021.
- [8] Murdani, A. S. Sembiring, dan T. S. Alasi, "Penyedia Layanan Konsultasi Kesehatan dengan Metode TOPSIS," *J. Armada Inform.*, vol. 7, no. 1, Art. no. 1, Jul 2023, Diakses: 13 November 2023. [Daring]. Tersedia pada: <https://jurnal.stmikmethodistbinjai.ac.id/jai/article/view/67>
- [9] K. Sari, Megawati, dan H. Ahmad, "Faktor yang Mempengaruhi Mutu Pelayanan Kesehatan Terhadap Kepuasan Pasien BPJS di Poliklinik Penyakit dalam Rumah Sakit Umum Daerah Kota Padang Sidempuan," *Media Publ. Promosi Kesehat. Indones. MPPKI*, vol. 6, no. 5, Art. no. 5, Mei 2023, doi: 10.56338/mparki.v6i5.3470.
- [10] H. Mhk, "Kajian Literatur Faktor-Faktor Yang Berhubungan Dengan Kepuasan Pasien Di Tempat Pendaftaran Rumah Sakit," *J. Manaj. Inf. Dan Adm. Kesehat.*, vol. 4, no. 1, Art. no. 1, Jun 2021, doi: 10.32585/jmiak.v4i1.1322.
- [11] S. M. Dewi, W. Sando, dan A. S. Efendi, "Analysis of Factors of Service Quality on Patient Satisfaction in the Outpatient Clinic of Bhayangkara TK Hospital. III Pekanbaru, Riau Police: Analisis Faktor-Faktor Kualitas Pelayanan Terhadap Kepuasan Pasien Di Poli Rawat Jalan Rumah Sakit Bhayangkara TK. III Pekanbaru Polda Riau," *J. Olahraga Dan Kesehat. ORKES*, vol. 1, no. 3, Art. no. 3, 2022, doi: 10.56466/orkes/Vol1.Iss3.74.
- [12] N. Novega, "Kualitas Pelayanan : Realibility, Responsiveness Dengan Kepuasan Pasien Di Loker Pendaftaran Rsud Kabupaten Kepahiang," *Mitra Rafflesia J. Health Sci.*, vol. 12, no. 1, Art. no. 1, Jun 2020, doi: 10.51712/mitrarafflesia.v12i1.28.
- [13] F. Agiwahyunto dan F. Noegroho, "Mutu Pelayanan Standar Pelayanan Minimal (Spm) Pendaftaran Pasien Di Tempat Pendaftaran Pasien Rawat Jalan (Tpprj) Puskesmas Ngaliyan Kota Semarang," *Media Ilmu Kesehat.*, vol. 8, hlm. 210-216, Jul 2020, doi: 10.30989/mik.v8i3.330.
- [14] "Menteri Kesehatan Republik Indonesia Nomor: 129/Menkes/Sk/Ii/2008 Tentang Standar Pelayanan Minimal Rumah Sakit." Diakses: 17 Januari 2024. [Daring]. Tersedia pada: <https://www.regulasip.id/book/9233/read>
- [15] D. Oktaria, F. Fajrini, N. Latifah, dan N. Romdhona, "Gambaran Tingkat Kepuasan Pasien Rawat Jalan Terhadap Pelayanan Kefarmasian di Instalasi Farmasi Rumah Sakit Umum Kota Tangerang Selatan Tahun 202," vol. 2, 2021.

- [16] J. Simbolon dan S. D. Sipayung, "Analisis Kualitas Pengelolaan Mutu Pelayanan Pendaftaran Pasien di Instalasi Rawat Inap Rumah Sakit Santa Elisabeth Medan," *SEHATMAS J. Ilm. Kesehat. Masy.*, vol. 1, no. 4, Art. no. 4, Okt 2022, doi: 10.55123/sehatmas.v1i4.937.
- [17] A. Virgi Trisyalela, "Gambaran Tingkat Kepuasan Pasien Bpjs Terhadap Kualitas Pelayanan Rekam Medis Di Rsau Dr. Efram Harsana Lanud Iswahjudi Magetan.," diploma, STIKES Bhakti Husada Mulia, 2021. Diakses: 12 November 2023. [Daring]. Tersedia pada: <http://repository.stikes-bhm.ac.id/1167/>
- [18] K. Nisa dan N. W. K. W. Wati, "Tinjauan Kualitas Sistem, Kualitas Informasi Dan Kualitas Layanan Pendaftaran Rawat Jalan Dari Perspektif Admisi Di Puskesmas Guntung Manggis," *J. Manaj. Inf. Kesehat. Indones.*, vol. 12, no. 1, Art. no. 1, Mar 2024, doi: 10.33560/jmiki.v12i1.554.
- [19] A. Febrianil, M. Surip, dan E. Gunawan, "Analisa Kepuasan Pasien Ditinjau dari Aspek Mutu Pelayanan Dibagian TPPRJ di Rumah Sakit Ibu dan Anak dr. Djoko Pramono Karawang," *Health Inf. J. Penelit.*, vol. 15, no. 1, Art. no. 1, Agu 2023.
- [20] F. Reu, "Tingkat Kepuasan Pasien terhadap Pelayanan Rawat Jalan Poli Penyakit Dalam pada Rsup Dr. Sitanala Tangerang," *Sehat Rakyat J. Kesehat. Masy.*, vol. 3, no. 1, Art. no. 1, Feb 2024, doi: 10.54259/sehatrakyat.v3i1.2446.
- [21] S. Arifin, G. T. Setyoaji, N. A. Anisa, dan Siswohadi, "AnalisisOperasional Pelayanan Terhadap Pendaftaran Pasien Di Rumah Sakit Umum Dr.Wahidin Sudiro Husodo," *Al-Muttaqin J. Studi Sos. Dan Ekon.*, vol. 2, no. 1, Art. no. 1, Jan 2021.
- [22] A. Setiawati, W. Arumsari, dan S. Rahayu, "Gambaran Persepsi Mutu Pelayanan Kesehatan pada Pasien Pengguna JKN di Puskesmas Karangmoncol," *Indones. J. Health Community*, vol. 4, no. 2, Art. no. 2, Des 2023, doi: 10.31331/ijheco.v4i2.3021.
- [23] S. Octaviasuni dan W. R. Wulan, "Kualitas Pelayanan Tempat Pendaftaran Pasien Rawat Jalan Terhadap Kepuasan Pasien Di Rumah Sakit Provinsi Jawa Barat : Literature Review," *VISIQUES J. Kesehat. Masy.*, vol. 20, no. 2, Art. no. 2, Mar 2022, Diakses: 29 April 2024. [Daring]. Tersedia pada: <https://publikasi.dinus.ac.id/index.php/visiques/article/view/5827>
- [24] E. Widianawati, "Literatur Review Determinan Kualitas Pelayanan Pendaftaran Terhadap Kepuasan Pasien TPPRJ Di Puskesmas Indonesia," *Indones. J. Health Inf. Manag.*, vol. 3, no. 1, Art. no. 1, Feb 2023, doi: 10.54877/ijhim.v3i1.100.
- [25] Y. Soumokil, M. Syafar, dan A. Yusuf, "Analisis Kepuasan Pasien Di Rumah Sakit Umum Daerah Piru," *J. Ilm. Kesehat. Sandi Husada*, vol. 10, no. 2, Art. no. 2, Des 2021, doi: 10.35816/jiskh.v10i2.645.
- [26] U. Khasanah, A. Santoso, dan C. N. Fatiha, "Evaluation of BPJS and Non BPJS Outpatient Satisfaction for the Quality of Service in the Pharmacy Installation of Tugurejo Regional Hospital of Central Java Province," *Sultan Agung Fundam. Res. J.*, vol. 1, no. 1, Art. no. 1, Jan 2020.
- [27] M. Halid, U. Hasanah, Ikhwan, dan R. P. A. Putra, "Gambaran Kompetensi Petugas Rekam Medis pada Kualitas Pelayanan Kesehatan di Rumah Sakit Khusus X Tahun 2021," *J. Penelit. Dan Kaji. Ilm. Kesehat. Politek. Medica Farma Husada Mataram*, vol. 8, no. 2, Art. no. 2, Okt 2022, doi: 10.33651/jpkik.v8i2.433.

- [28] I. A. Imron dan S. Rejeki, "Analisis Pengelolaan Mutu Pelayanan Loker Pendaftaran Pasien Rawat Jalan di Puskesmas Bulakamba," *J. Ris. Ilmu Kesehat. Umum Dan Farm. JRIKUF*, vol. 2, no. 2, Art. no. 2, Apr 2024, doi: 10.57213/jrikuf.v2i2.248.
- [29] K. I. L. Dewi, N. N. Yulianthini, dan N. L. W. S. Telagawathi, "Pengaruh Dimensi Kualitas Pelayanan Terhadap Kepuasan Pelanggan Pengguna Bpjs Kesehatan Di Kota Singaraja," *Bisma J. Manaj.*, vol. 5, no. 2, Art. no. 2, Nov 2020, doi: 10.23887/bjm.v5i2.22011.
- [30] M. Fanny, L. O. A. I. Ahmad, dan R. D. Liaran, "Studi Kualitas Pelayanan Kesehatan Terhadap Kepuasan Pasien Rawat Jalan di Rumah Sakit Umum Daerah Kota Kendari," *J. Kesehat. Masy. Celebes*, vol. 1, no. 02, Art. no. 02, 2020.
- [31] R. F. Maulany, R. S. Dianingati, dan E. Annisaa', "Faktor-Faktor yang Mempengaruhi Akses Kesehatan," *Indones. J. Pharm. Nat. Prod.*, vol. 4, no. 2, Art. no. 2, Des 2021, doi: 10.35473/ijpnp.v4i2.1161.

Siti Aisyah Lutfiyah

Muhammadiyah University of Sidoarjo, Indonesia

***Resta Dwi Yuliani (Corresponding Author)**

Muhammadiyah University of Sidoarjo, Indonesia

Email: restadwiyluliani@umsida.ac.id
