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ANALYSIS OF SERVICE QUALITY FACTORS ON PATIENT SATISFACTION IN THE PEDIATRIC DEPARTMENT RSI AT-TIN HUSADA PURBALINGGA

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Abstract

The quality of health services reflects the performance of health workers and affects community satisfaction. This study evaluates the impact of service quality on patient satisfaction at the RSI At-Tin Husada Purbalingga Children's Polyclinic. A quantitative approach using multiple linear regression analysis, examines five key service quality aspects: reliability, assurance, responsiveness, empathy, and physical evidence. Data were collected via a survey of 68 child patient companions, utilizing a tested questionnaire. Results indicate that the assurance dimension most significantly influences patient satisfaction, followed by empathy and reliability, all rated very good. While responsiveness and physical evidence also affect satisfaction, their influence is smaller. The study emphasizes the importance of a personalized approach and the need for improved facilities. Enhancing service quality across the five SERVQUAL dimensions can improve patient satisfaction, particularly in empathy and reliability. Key improvement areas include service timeliness, hospital reputation, complaint responsiveness, personalized care, standardization, and overall comfort. Recommendations include optimizing scheduling, strengthening public communication, implementing a responsive complaint system, enhancing patient recognition through training, adhering to uniform standards, and redesigning waiting areas for comfort. These insights support ongoing improvements in pediatric outpatient services and affirm the relevance of SERVQUAL in healthcare.

Keywords: Children's Polyclinic, Patient Satisfaction, Service Quality.

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Introduction

The quality of healthcare services significantly impacts patient satisfaction. As key healthcare providers, hospitals must maintain high standards in preventive, curative, and rehabilitative care (UU No. 44/2009). Service quality is reflected in healthcare workers' performance, affecting patient satisfaction. Recovery rates and staff attitude, knowledge, politeness, punctuality, facilities, and environment assess it. High patient satisfaction indicates quality healthcare services when expectations are met or exceeded (Yunika Antari & Supadmi, 2019). RSI At-Tin Husada Purbalingga, a type C hospital operating since September 2020, continues to improve its service quality. As the youngest of four hospitals in Kalimanah, Purbalingga, it has 12 specialist clinics and 15 staff members. The Pediatric Clinic is crucial in outpatient child care, emphasizing speed, empathy, and clear communication (Krismanto & Irianto, 2020).

Robbins & Coulter (2020) define management as the process of coordinating the work of others to achieve predetermined goals effectively and efficiently. In the context of hospitals, management plays a crucial role in ensuring that human and material resources are used efficiently. Burns et al. (2020) assert that hospital management is the process of managing human, financial, and operational resources in order to provide optimal healthcare services.

The Ministerial Decree (Kepmen) on the Utilization of State Apparatus Number 63 of 2003 regarding General Guidelines for Public Service Administration states that the essence of public services such as hospitals is the provision of excellent service to the community. According to WHO (2019), hospitals are an integral part of social and medical organizations that provide comprehensive health services, both curative and preventive. Hospitals are unique institutions because they provide healthcare services and involve social and emotional elements in patient interactions.

Pediatric clinics are a comprehensive approach to maintaining and improving the health of children and adolescents to ensure their health quality. According to Minister of Health Regulation number 25 of 2014, child health efforts cover the period from the fetus in the womb to the age of 18 years.

Parasuraman et al. (1988) define service quality as an attitude distinct from satisfaction, which results from comparing expectations with actual performance. Service quality is assessed over time, while satisfaction is based on specific transactions. Measuring service quality involves comparing expected and received service, whereas satisfaction compares potential and actual outcomes.

Kotler & Keller (2021) explain that patient satisfaction is the comparison between expectations and the reality of the service received by the patient. In hospital services, patient satisfaction can reflect how well the hospital performs its functions. Although technical factors such as treatment success are very important, satisfaction is also influenced by the overall patient experience,

including staff communication, waiting times, and the comfort of facilities. Patient visit data from March to September show that the Internal Medicine Clinic had the highest visits (2,741), followed by Orthopedic Surgery (2,231) and Neurology (1,945). The Pediatric Clinic recorded 1,061 visits, about 9% of the total 11,812 visits. This indicates that most patients seek treatment for chronic or general illnesses, while pediatric visits remain significant.

A study by Nisrina Destanul Aulia and Lita Andayani (2020) found that effective marketing and quality service increase patient preference for pediatric clinics. They concluded that service quality and access to information influence healthcare choices. However, at RSI At-Tin Husada, patient visit fluctuations cannot be explained solely by these factors, making further analysis essential. Yuliadi (2020) identified issues in outpatient satisfaction at RSUD Mukomuko, with 26% of respondents rating service quality as poor and 42% feeling dissatisfied. Common complaints included referral system inefficiencies, healthcare staff behavior, waiting times, and facility conditions, highlighting gaps between patient expectations and actual service. Initial observations at RSI At-Tin Husada's Pediatric Clinic revealed long wait times, limited waiting room facilities, staff shortages, lack of friendliness, and inconsistent doctor schedules, affecting patient satisfaction. Addressing these issues is crucial to improving visits and service quality.

From initial observations, several issues have been identified at the Pediatric Clinic of RSI At-Tin Husada, including long waiting times, limited waiting area facilities, a shortage of healthcare personnel, a lack of friendliness among clinic staff, and discrepancies between doctors' scheduled practice hours and actual availability. These factors contribute to low patient satisfaction and must be addressed promptly to improve future patient visits and overall satisfaction. Patient satisfaction is strongly influenced by five service quality dimensions: reliability, assurance, responsiveness, empathy, and tangibles. Each of these dimensions significantly shapes patients' perceptions of service quality. For instance, reliability reflects the hospital's ability to provide consistent and timely services, while responsiveness refers to how quickly and accurately healthcare providers address patient needs. Moreover, empathy is particularly crucial in pediatric care, where personalized attention and understanding are essential. Given these conditions, this study aims to evaluate the service quality factors that affect patient satisfaction at the Pediatric Clinic of RSI At-Tin Husada Purbalingga. The research will analyze the five service quality dimensions and is expected to provide strategic recommendations to enhance service quality, ultimately increasing patient visits and improving the hospital's reputation.

Methods

This research uses a quantitative approach based on positivist philosophy. According to Sugiyono (2020), the quantitative approach generates numerical data that can be statistically analyzed, allowing researchers to identify patterns or cause-and-effect relationships. According to Kothari and Garg (2019), primary data is information researchers collect to answer specific research questions. This study refers to patient satisfaction data gathered via questionnaires to assess service quality at the RSI At-Tin Husada Children's Clinic in Purbalingga, Central Java. Determining the sample size involves the Slovin formula with a margin of error (e) of 10%, resulting in a sample size of 59 people. A 10% margin of error is used in this study to maintain time efficiency while ensuring a representative analysis with a smaller sample size. This approach simplifies data collection without compromising validity, especially when sampling a population with predictable variability. Studies using Slovin's sampling technique with a 10% margin of error include Wahyuni (2022), who examined patient satisfaction in primary healthcare. Due to time constraints, this margin was chosen to obtain representative data with a smaller sample. Similarly, Pratama (2023) cited time efficiency and resource limitations as reasons for using this margin in a limited population. Sugiyono (2020) added that a 10% margin is acceptable in social research focused on efficiency and reasonable accuracy, especially when absolute precision is not required.

Based on these results, a representative sample of 100 respondents will be taken in this study, and it is hoped that this research will obtain accurate results.

Table 1. Operational Definition of Variables

No	Variable	Variable Concept	Indicator	Scale	No. Quesionnaire
1	*Reliability*	The dimension of reliability is the ability of a company to provide accurate services without errors and deliver those services on time (Parasuraman, Zeithaml, and Berry in Tjiptono & Chandra 2016, p.137). attributes of the reliability dimension according to Parasuraman, et al. (in Tjiptono & Chandra 2016, p.162) are as follows: Providing services as promised, Reliable in handling customer service issues, Delivering services	Timeliness of service	Ordinal	1-2
			The same service for all patients.	Ordinal	3
			Speed Level	Ordinal	4-5

		correctly from the very beginning, Delivering services as promised. Keeping records/documents without errors.			
2	*Assurance*	The staff are able to instill trust in patients towards the hospital, and the hospital can create a sense of safety for the patients. (Tjiptono, 2014)	Knowledge	Ordinal	6
			Skilss	Ordinal	7
			Trust	Ordinal	8
			Reputation	Ordinal	9
3	*Responsiveness*	The responsiveness dimension refers to the willingness and ability to address customer requests, inform service timing, and deliver services promptly (Parasuraman, Zeithaml, & Berry in Tjiptono & Chandra, 2016, p.137). It includes informing service timing, providing fast service, assisting customers, and responding promptly.	The skills of paramedics in responding to patient complaints.	Ordinal	10-11
			The vigilance of medical personnel regarding patient complaints.	Ordinal	12
			The readiness of medical personnel to handle complaints quickly	Ordinal	13
4	*Empathy*	Empathy is related to the knowledge that the company possesses regarding the actual needs and desires of customers (Kenyon & Sen 2015, pp. 218-219). According to Parasuraman, Zeithaml, and Berry (in Tjiptono & Chandra 2016, p.137), Empathy reflects a company's understanding of customer issues, willingness to prioritize their interests, and provision of personal attention and convenient hours. Zeithaml et al. (in Tjiptono & Chandra, 2016, p.163) identify its indicators as individual attention, attentive	Getting to know the patient well	Ordinal	14
			Considering the patient's issue	Ordinal	15
			A good listener.	Ordinal	16

		employees, customer-focused service, understanding customer needs, and convenient operating hours.			
5	*Tangible*	The look of facilities is one aspect of physical evidence, equipment, people, and visible tools (Malau 2017, p.68). The indicators of physical evidence according to Parasuraman, et al. (in Tjiptono & Chandra 2016, p.163) indicators of the tangible dimension are: Modern equipment, visually appealing facilities, neatly and professionally dressed employees, visually appealing service-related materials.	Physical facilities	Ordinal	17
			A neat and comfortable room	Ordinal	18
			Health officers wearing uniforms neatly.	Ordinal	19
6	Patient Satisfaction	Patient satisfaction is an emotional response that arises from the fulfillment of patients' expectations and needs regarding the services received at healthcare facilities. This satisfaction reflects the patient's experience, which includes various aspects of service, such as technical quality, interpersonal interactions, time efficiency, and facility comfort. An essential metric for evaluating the success of a project is patient happiness of services, as it is related to patient loyalty and the sustainability of services in hospitals (Kotler & Keller, 2021; Silviyana et al., 2020). Satisfaction assessment can be conducted through patients' perceptions of	Quality of Service	Ordinal	20-21
			Comfort and Efficiency	Ordinal	22-25
			Loyalty and Recommendation	Ordinal	26-27

	service quality, expectation fulfillment, comfort during the service process, and the tendency to recommend the service to others.

Based on the Operational Definition of Variables, the framework in this study is as follows:

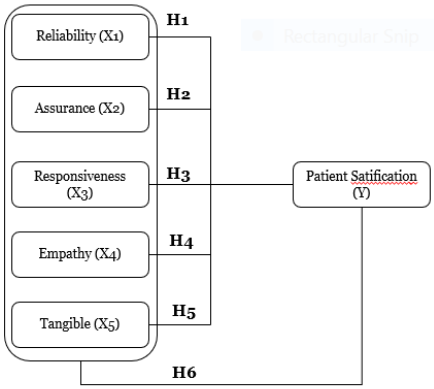

Figure 1. Research Model

It can be seen from the research framework in Figure 1 that the formulation of the research hypothesis used is as follows:

H: Based on the SERVQUAL service quality theory, the reliability dimension significantly impacts patient satisfaction at RSI At-Tin Husada Purbalingga.

H2: Following the assurance concept in SERVQUAL, the guarantees provided by medical personnel and healthcare facilities significantly affect patient satisfaction at RSI At-Tin Husada Purbalingga.

H3: Based on customer satisfaction theory, the responsiveness dimension of medical personnel and healthcare staff significantly contributes to patient satisfaction at RSI At-Tin Husada Purbalingga.

H4: The theory of empathy in service indicates that the empathy dimension of healthcare providers significantly influences patient satisfaction at RSI At-Tin Husada Purbalingga.

H5: In line with customer experience theory, the tangibles dimension, including hospital facilities and environment, has a significant impact on patient satisfaction at RSI At-Tin Husada Purbalingga.

H6: Referring to the SERVQUAL model, the five dimensions of service quality (reliability, assurance, responsiveness, empathy, and tangibles) collectively have a significant impact on patient satisfaction at RSI At-Tin Husada Purbalingga.

Result And Discussion

Validity Test

This exam uses the Pearson Product Moment correlation to evaluate each statement item's validity in measuring its associated variable. If an item's correlation coefficient is greater than the crucial value 0.3, it is deemed legitimate. The following table displays the findings of the questionnaire validity test for the variables under study.

Table 2. Result Validity Test

	Statement Item	R-Value	Description
Patient Satisfaction (Y)	I am satisfied with the quality of service provided by the medical staff at the children's clinic	0.767	Valid
	The service I received met my expectation	0.838	Valid
	I felt comfortable while serving in the pediatric outpatient clinic	0.818	Valid
	The waiting time for services at the children's clinic is quite adequate and not excessive	0.648	Valid
	The service provided by the procedures carried out by the staff at the children's clinic	0.755	Valid
	I feel safe with the medical procedures carried out by the staff at the children's clinic	0.789	Valid
	I will recommend the children's clinic at RSI AT-Tin Husada to family services	0.872	Valid
	The overall facilities support comfort during the receipt of medical service	0.864	Valid
Reliability (X1)	Service is proided on time according to the specified schedule	0.752	Valid
	The queue system is running well	0.793	Valid
	Medical personnel work professionally and accurately	0.864	Valid
		0.804	Valid
		0.826	Valid

	The number of medical staff is according to need		
	Medical staff are meticulous in providing services		
Assurance (X2)	Doctors and staff have extensive knowledge and can answer question	0.916	Valid
	Medical services increase patient's trust	0.911	Valid
	Patient privacy is maintained during the examination	0.916	Valid
	The hospital has a good reputation and is accredited	0.757	Valid
Responsiveness (X3)	The patient admission procedure is carried out quickly	0.736	Valid
	The staff are always ready to help when needed	0.785	Valid
	The waiting time for service is no more than 1 hour	0.792	Valid
	The staff responded quickly in resolving the patient's complaint	0.752	Valid
Empathy (X4)	The staff pay attention to the patient's needs on a personal level	0.792	Valid
	The staff are friendly and respectful to every patient	0.850	Valid
	The hospital's operating hours are according to the needs of the patients	0.789	Valid
Tangible (X5)	The hospital's physical facilities look clean and comfortable	0.793	Valid
	The children's service room is clean and tidy	0.850	Valid
	The medical staff appear neat and professional	0.789	Valid

The results of the instrument validity test on the study variable can be ascertained from the tables above. According to the findings, every statement item has a correlation coefficient higher than the crucial value of 0.3, indicating that it is appropriate for use as a measurement tool in the study and for additional analysis.

Reliability Test

The equipment is tested once for reliability, and the Alpha-Cronbach method is used for analysis. If a questionnaire's reliability coefficient is positive and higher than 0.7, it is considered reliable. The reliability test yielded the following findings.

Table 3. Reliability Test

Variable	Reliability Index	Description
Reliability	0.859	Reliable
Assurence	0.897	Reliable
Responsiveness	0.741	Reliable
Emphaty	0.734	Reliable
Tangible	0.820	Reliable
Patient Satisfaction	0.912	Reliable

Normally Test

Using the SPSS version 25.0 program application, the following output results of the normality test calculations were obtained:

Table 4. Normally Test

One-Sample Kolmogorov-Smirnov Test

		Unstandardized Residual
N		68
Normal Parameters[a,b]	Mean	.0000000
	Std. Deviation	2.15097011
Most Extreme Differences	Absolute	.100
	Positive	.080
	Negative	-.100
Test Statistic		.100
Asymp. Sig. (2-tailed)		.090[c]

a. Test distribution is Normal.
b. Calculated from data.
c. Lilliefors Significance Correction.

According to the preceding table, the SPSS output yielded a Sig. Value of 0.090 for the Kolmogorov-Smirnov method of the normality test. The residual data is considered to be normally distributed since the p-value is higher than the alpha (0.090 > 0.05).

Multicollinearity Test

The purpose of the multicollinearity test is to determine whether the independent variables in the model are correlated. The independent variables in a good model shouldn't be correlated. The following are the output VIF values for each independent variable using the SPSS version 25.0 program.

Table 5. Multicollinearity Test

Coefficients[a]

Model		Collinearity Statistics Tolerance	VIF
1	Reliability	.315	3.171
	Assurance	.413	2.424
	Responsiveness	.176	5.669
	Empathy	.241	4.153
	Tangible	.322	3.106

a. Dependent Variable: Kepuasan Pasien

Based on table 5, it is known that the VIF values of each independent variable are below 10. Based on these results, it can be concluded that there is no multicollinearity among the independent variables in the model.

Pearson Product Moment Correlation Analysis

Pearson Product Moment correlation analysis examines relationships and tests hypotheses between two or more variables with interval or ratio data from the same source (Sugiyono: 228). Using SPSS 25, the correlation coefficient results are as follows:

Table 6. Correlation Analysis

Model Summary[b]

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.917[a]	.841	.828	2.23602

a. Predictors: (Constant), Tangible, Reliability, Assurance, Empathy, Responsiveness
b. Dependent Variable: Kepuasan Pasien

Based on Table 6, it is known that the correlation coefficient (R) is 0.917. The value is then interpreted based on Guilford's criteria. According to the table and the correlation coefficient interpretation, a correlation value of 0.917 suggests that the independent and dependent variables have a powerful link.

Heteroscedasticity Test

The Heteroscedasticity Test aims to determine whether the variance of residuals in the regression model varies from one observation to the next. A homoscedastic or non-heteroscedastic regression model is considered good. Examining the plot graph between the predicted values of the dependent variable, ZPRED, and its residuals, SRESID, is one way to determine whether heteroscedasticity exists.

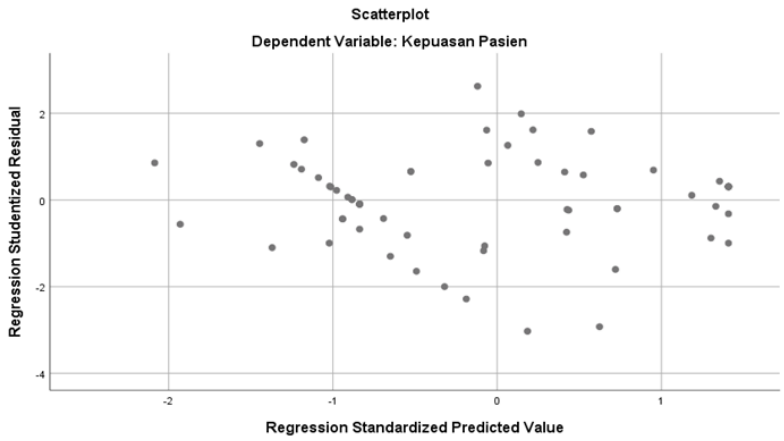

Figure 2. Heteroscedasticity Test

It is evident from the preceding graphic that the dots are dispersed haphazardly and do not form any pattern. Additionally, the spots are dispersed above and below the Y-axis zero point. The regression model is appropriate for additional study since it can be determined that there is no heteroscedasticity.

Hypothesis Test

Simultaneous test (F test)

Simultaneous hypothesis testing is a hypothesis test aimed at determining whether, collectively, the variables on the independent variable significantly affect or do not significantly affect the dependent variable.

Table 7. Result Simultan Test (F-Test)

ANOVA[a]

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	1641.407	5	328.281	65.659	.000[b]
	Residual	309.987	62	5.000		
	Total	1951.394	67			

a. Dependent Variable: Kepuasan Pasien
b. Predictors: (Constant), Tangible, Reliability, Assurance, Empathy, Responsiveness

Based on the table, the computed F value is 65.659, and the p-value (sig) is 0.000. The Ftabel is 2.363 with $\alpha = 0.05$, degrees of freedom k = 5, and v = (n-(k+1)) = 68 – (5+1) = 62. H0 is rejected, and H1 is acceptable since the calculated F value is> table F (65.659 > 2.363). This indicates that the characteristics of reliability, assurance, responsiveness, empathy, and tangibleness all significantly and favorably affect patient satisfaction.

Partial Test (T-Test)

Based on the calculations, the Reliability variable has a t-value of 2.091, exceeding the t-table value of 1.668, leading to the rejection of H0 and acceptance of H1, indicating a significant positive impact on Patient Satisfaction.

Table 8. Result Partial Test (T-Test)

Coefficients[a]

Model		Unstandardized Coefficients B	Unstandardized Coefficients Std. Error	Standardized Coefficients Beta	t	Sig.
1	(Constant)	.672	1.376		.488	.627
	Reliability	.281	.134	.188	2.091	.041
	Assurance	.317	.144	.173	2.193	.032
	Responsiveness	.247	.241	.123	1.021	.311
	Empathy	1.261	.263	.494	4.786	.000
	Tangible	.072	.226	.028	.319	.751

a. Dependent Variable: Kepuasan Pasien

The Assurance variable, with a t-value of 2.193 > 1.668, also shows a significant positive effect. In contrast, the Responsiveness variable has a t-value of 1.021, which is lower than the t-table value (1.668), resulting in H0 being accepted and H1 rejected, meaning no significant effect is observed. The Empathy variable, with a t-value of 4.786 > 1.668, significantly influences Patient Satisfaction. Meanwhile, the Tangible variable, with a t-value of 0.319 < 1.668, does not have a significant effect, as H0 is accepted.

Test Coefficient of Determination (R^2)

Determining the impact of one variable on another is accomplished through the analysis of the coefficient of determination. The correlation coefficient squared is the coefficient of determination (Sugiyono:231). The following formula can be used to determine the coefficient of determination after the R-value of 0.917 is known:

Table 9. Test Coefficient of Determination

Model Summary[b]

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.917[a]	.841	.828	2.23602

a. Predictors: (Constant), Tangible, Reliability, Assurance, Empathy, Responsiveness

b. Dependent Variable: Kepuasan Pasien

Thus, based on the coefficient of determination, Patient Satisfaction is influenced by Reliability, Assurance, Responsiveness, Empathy, and Tangible by 84.1%, while the remaining 15.9% is affected by other unexamined factors.

Discussion

The Influence of the Reliability Dimension on Patient Satisfaction at RSI At-Tin Husada Purbalingga

Hypothesis 1 in this study is accepted, indicating that the Reliability (X1) variable positively and significantly affects Patient Satisfaction (Y). In other words, the greater the reliability of the services provided by RSI At-Tin Husada Purbalingga, the more satisfaction patients experience when visiting the pediatric clinic.

This finding implies that improving reliability in healthcare services, such as consistency in service delivery and timeliness, can directly enhance patient satisfaction. This study's results are consistent with the findings of Syahputra (2019), Yoon and Lee (2021), Al-Amin and Makarem (2020), Hassali et al. (2022), Meesala and Paul (2018), Ahmad et al. (2023), Chen et al. (2021), and Zhang et al. (2022), who also found that service reliability plays a crucial role in increasing patient satisfaction. However, some studies may report different results, which could be attributed to differences in healthcare systems, patient culture, or research methodologies.

The Influence of the Assurance Dimension on Patient Satisfaction at RSI At-Tin Husada Purbalingga

Hypothesis 2 in this study is accepted, indicating that the Assurance (X2) variable positively and significantly affects Patient Satisfaction (Y). In other words, the higher the assurance RSI At-Tin Husada Purbalingga provides, the more likely patients are to feel satisfied with the services received at the pediatric clinic.

This finding implies that improving assurance factors in healthcare services, such as the competence of medical personnel, staff friendliness, and the sense of security provided to patients, can directly enhance patient satisfaction. This study's results align with the findings of Aziz et al. (2021), Bhatt et al. (2023), Pekkaya et al. (2019), Zhang and Wang (2020), Johnson et al. (2022), Khamis et al. (2021), and Wang and Lee (2023), who also found that assurance in healthcare services contributes to increased patient satisfaction. However, some other studies may report different results, which could be due to variations in service assurance standards, patient expectations, or research methodologies used.

The Influence of the Responsiveness Dimension on Patient Satisfaction at RSI At-Tin Husada Purbalingga

Hypothesis 3 in this study is accepted, indicating that the variable Responsiveness (X3) positively and significantly affects Patient Satisfaction (Y) at the Pediatric Polyclinic of RSI At-Tin Husada Purbalingga. In other words, as the quality of service responsiveness increases, patients are more likely to feel satisfied with the services they receive.

These findings imply that improving the responsiveness of medical personnel and staff, such as the speed in responding to patient needs, readiness to assist, and politeness in communication, can directly enhance patient satisfaction. The results of this study are in line with the findings of Rayhan Layli (2022), Baan et al. (2020), Meutia and Andiny (2019), Sumarwan (2019), Putri et al. (2022), and Alvi et al. (2020), who also found that the responsiveness of healthcare services plays a vital role in increasing patient satisfaction. However, some other studies may find different results, which could be due to differences in patient expectations, healthcare service culture, or the research methods used.

The Influence of the Empathy Dimension on Patient Satisfaction at RSI At-Tin Husada Purbalingga

Hypothesis 4 in this study is accepted, demonstrating that the Empathy variable (X4) has a positive and significant effect on Patient Satisfaction (Y) at the Children's Polyclinic of RSI At-Tin Husada Purbalingga. In other words, the higher the level of empathy provided by medical personnel and staff, the more likely patients are to feel satisfied with the services they receive.

These findings suggest that enhancing empathy in healthcare services, such as individual attention to patients, understanding their needs, and friendly and caring communication, can directly improve patient satisfaction. The results of this study are in line with the findings of Mulyono et al. (2020), Fatimah and Rahman (2021), and Supriyanto et al. (2023), and Li et al. (2019), who also found that empathy in healthcare services plays a vital role in increasing patient satisfaction. However, some other studies may show different results, which could be caused by differences in patient culture, expectations of healthcare services, or the research methods used.

The Influence of the Tangible Dimension on Patient Satisfaction at RSI At-Tin Husada Purbalingga

Hypothesis 5 in this study is accepted, indicating that the variable Physical Evidence (Tangibles) (X5) has a positive and significant effect on Patient Satisfaction (Y) at the Children's Polyclinic of RSI At-Tin Husada Purbalingga. In other words, higher quality physical evidence—such as facilities, cleanliness, comfort of the waiting area, and the availability of medical equipment—significantly increases the likelihood that patients will be satisfied with the services provided.

These findings imply that improving the physical evidence aspect of healthcare services can directly contribute to a positive patient experience. Factors such as facility design, environmental cleanliness, and the availability of supporting medical equipment play a crucial role in shaping patients' perceptions of the quality of the services received. The results of this study are in line with the findings of Sulo (2019), Herudiansyah (2020), Anjayati (2021), Kurniawan et al. (2021), Rahman

and Sukmawati (2020), as well as Tan et al. (2022), also found that the quality of physical evidence in healthcare facilities significantly impacts patient satisfaction. However, some other studies may show different results, possibly caused by differences in facility standards, patient expectations, or research methods.

Conclusion

Based on the results of the analysis and discussion conducted in the previous chapter, it can be concluded that The guarantee provided by RSI At-tin Husada Purbalingga in the pediatric clinic is generally excellent based on the average questionnaire score. However, the "reputation" indicator has the lowest average score among all indicators, though it still falls within the excellent category. The responsiveness of RSI At-Tin Husada Purbalingga in the pediatric clinic is generally excellent based on the average questionnaire score. However, the "medical staff's promptness in handling complaints" indicator has the lowest score but remains in the good category. The empathy of RSI At-Tin Husada Purbalingga's pediatric clinic is generally excellent based on the average questionnaire score. However, the "knowing patients well" indicator has the lowest score but remains in the good category. The physical evidence at RSI At-Tin Husada Purbalingga's pediatric clinic is generally excellent based on the average questionnaire score. However, the "health workers wearing neat uniforms" indicator has the lowest score but remains in the excellent category. Based on the average questionnaire score, patient satisfaction at RSI At-Tin Husada Purbalingga's pediatric clinic is generally excellent. However, the "comfort and efficiency" indicator has the lowest score but remains in the good category.

Recommendation

This research helps understand how the SERVQUAL dimensions (reliability, assurance, responsiveness, empathy, and tangibles) impact patient satisfaction in healthcare. The study confirms the SERVQUAL theory's relevance in Indonesian hospitals, especially in pediatric outpatient clinics. These findings can inform future quality improvement in healthcare services. Service reliability is high, but timeliness is low. The hospital can boost efficiency by optimizing schedules and implementing a tech-based queue system to cut patient wait times. The assurance dimension scores lowest in reputation; hospitals should enhance patient trust through better public communication about achievements, accreditations, and testimonials. Staff responsiveness to patient complaints is lacking; a digital system for complaints or training staff to be more attentive could help. Empathy can improve with better recognition of patients, necessitating a personal approach, including thorough patient history documentation and communication training. The lowest score for physical evidence relates to healthcare workers' uniforms. Therefore, management

should ensure uniform consistency to create a professional impression and build patient trust. Improving patient satisfaction includes enhancing service comfort and efficiency, such as remodeling waiting areas, improving queue management, and adding entertainment or educational resources in waiting spaces area.

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