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Relationship Between Patient Satisfaction and Dimensions of Health Service Quality with Revisit Interest of Outpatient in Lumajang Health Center



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Abstract

High outpatient revisit interest reflects good health services that meet patient expectations. However, in Lumajang, 25 health centers experienced a decline in outpatient revisit numbers. This study aimed to examine the relationship between patient satisfaction and dimensions of service quality with outpatient revisit interest at Lumajang Health Center. Using a cross-sectional design, the study involved 386 outpatients selected through purposive sampling. Inclusion criteria included health centers with a decline of over 200 visits, patients aged 15-50 years, literate, spiritually healthy, and visiting for the first time between December 2023 and February 2024. Exclusion criteria were severe illness or mental disorders hindering questionnaire completion. Data were collected through direct questionnaires and analyzed using chi-square tests. Results showed that 90.4% of patients were satisfied with health services. Service quality dimensions scored as follows: tangibility (91.2%), reliability (60%), responsiveness (93.8%), health insurance (95.6%), and empathy (87.8%). The chi-square analysis revealed a significant relationship between responsiveness and revisit interest ($p=0.034$). However, no significant relationship was found between revisit interest and satisfaction, tangibility, reliability, health insurance, or empathy ($p>0.05$). In conclusion, while most patients expressed satisfaction with the services provided, the key factor influencing revisit interest was the responsiveness of health workers. This highlights the importance of responsive healthcare in fostering patient loyalty and improving outpatient revisit rates.

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INTRODUCTION

A Health Center is a health service facility that organizes public health efforts and first-level individual health efforts by prioritizing promotive and preventive efforts to achieve the highest level of public health in its working area ([Permenkes RI, 2019](#)). In addition, the Health Center also provides primary medical services as a curative and rehabilitative effort through outpatient, inpatient, and medical support services with an individual and family approach through treatment efforts by curing certain disease conditions ([Maslin et al., 2023](#)). Most facilities in the Health Center are prepared to provide basic health services for outpatient visits ([Dinas Kesehatan Kabupaten Lumajang, 2021](#)).

Society as consumers has several reasons to consider when choosing health services, including the quality of health services that will be received. Health centers, as health service providers, must maintain the quality of health services so that society feels satisfied with the services received ([Maslin et al., 2023](#)). The quality of health services can be categorized into five dimensions: direct evidence (tangible), reliability, responsiveness, assurance, and empathy ([Maslin et al., 2023](#)).

Satisfaction and dissatisfaction with the health service can affect how patients behave in the future. If the patient is satisfied, he will show a high possibility of returning to the service; satisfaction and dissatisfaction with a health service can affect how patients behave. If the patient is satisfied, he will show a high possibility of returning to use the service and re-utilize the use of health facilities provided either in outpatient care or in other forms of activities by patients.

Outpatient satisfaction with the health services at health centers varies in different regions and affects revisits. The research conducted by Bakri et al. (2022) in General Hospital, Labuang Baji Regional, Makassar City, showed that patients felt the quality of health services was quite good at 90.5%, so that is 91.7% of patients felt quite satisfied and were interested in making repeat visits (90.5%) ([Bakri & Reza Aril Ahri, 2022](#)). The research in Kukupang Health Center, Jouronga Islands District, South Halmahera Regency showed

different facts. The patients were not interested in revisiting because they were dissatisfied with the dimensions of service quality, including responsiveness of health workers (53.7%), reliability of health workers (55.8%), health insurance (55.8%), empathy (96.8%) and physical evidence (54.7%). With poor satisfaction dimensions, it will affect the patient's interest in revisiting ([Masdan et al., 2022](#)).

Based on data from Lumajang Regency Health Office in 2021, the number of outpatient visits to health centers decreased and increased in the period 2017-2022 (SIRS online, 2021). In 2019, there was an increase of 57% due to the Covid-19 pandemic. In 2020, there was a decrease of 12%. In 2021, there was a decrease of 12%. In 2022, there was a decrease of 15% (SIRS online, 2021). Based on patient visit data in twenty-five Lumajang Health Centers, outpatient visits decreased in 2023. The decrease in the number of outpatient visits in the second quarter was 9%. In the third quarter, there was an increase in the number of outpatient visits by 4%. The number of outpatient visits in January-September 2023 each month experienced a decrease in the number of outpatient visits by an average of 1.9%. The decrease in the number of outpatient visits occurred the most in five health centers, they are Labruk Kidul Health Center, Pasirian Health Center, Tempeh Health Center, Kunir Health Center, Kedungjajang Health Center ([Dinas Kesehatan Kabupaten Lumajang, 2023](#)). Based on the description above, there was a decrease in the number of outpatients visits every month, so the researcher aims to determine the relationship between patient satisfaction and dimensions of health service quality with the interest in outpatient visits in Lumajang Health Centers.

METHODS

This study is used descriptive study, a type is quantitative study using cross-sectional study design. The location of the study is based on the regional coordinators in Lumajang Health Center. Each regional coordinator took one health center which was used as a study location based on the inclusion criteria, namely a decrease in the number

of outpatient visits by 54.2%. Five health centers meet the inclusion criteria, they are Pasirian Health Center, Tempeh Health Center, Kunir Health Center, Labruk Kidul Health Center, and Kedungjajang Health Center. The study was conducted from December 2023 to April 2024. The study population consisted is 14,683 outpatient patients, with sample size is 386 outpatient patients who visited five health centers.

The sampling technique used purposive sampling with inclusion criteria and exclusion criteria. The inclusion criteria for this study were (1) community health centers that experienced a decrease in the number of outpatient visits of more than two hundred patients (56.3%), (2) outpatients at five community health centers on their first visit from December 2023 to February 2024, (3) respondents aged 15-50 years, (4) were not

illiterate, (5) read fluently, and (6) respondents had good spiritual health and were fit to fill out the questionnaire. The exclusion criteria for this study were respondents suffering from severe diseases and mental disorders that prevented them from completing the research questionnaire themselves. Data collection was conducted by having outpatients fill out questionnaires directly. The independent variables are patient satisfaction and dimensions of health service quality. The dependent variable is the interest in revisiting. The data processing using editing, coding, entry, tabulation, and processing. The data analysis of this study uses the chi-square statistical test. This study has obtained ethical clearance from the Health Research Ethics Commission (KEPK) of the Faculty of Dentistry, University of Jember with number 2317/UN25.8/KEPK/DL/2023.

RESULTS

Characteristics of Respondents.

Table 1. The characteristics of respondents in this study include gender, age, and last education, as in the diagram below.

Characteristics of respondent	Health Center Name											
	Tempeh Health Center		Kedungjajang Health Center		Kunir Health Center		Labruk Kidul Health Center		Pasirian Health Center		Total	
Gender	N	%	N	%	N	%	N	%	N	%	N	%
Man	28	31.1	15	20.8	24	43.6	36	41.4	33	40.2	136	35.2
Woman	62	68.9	57	79.2	31	56.4	51	58.6	49	59.8	250	64.8
Age												
15-20 year	10	11.1	18	25.0	5	9.1	4	4.6	10	12.2	47	12.2
21-35 year	53	58.9	38	52.8	31	56.4	54	62.1	60	73.2	236	61.1
36-50 year	27	30.0	16	22.2	19	34.5	29	33.3	12	14.6	103	26.7
Education												
Elementary school	19	21.1	23	31.9	15	27.3	7	8.0	4	4.9	68	17.6
Junior high school	23	25.6	18	25.0	20	36.4	18	20.7	11	13.4	90	23.3
High school/vocational high school	46	51.1	28	38.9	16	29.0	44	50.6	50	61.0	184	47.7
Diploma /bachelor	2	2.2	3	4.2	4	7.3	18	20.7	17	20.7	44	11.4

Based on [Table 1](#) above, it shows that the majority of respondents are female, as many as 250 respondents (64.8%). The largest number of female respondents was found in Tempeh Health Center,

which was 62%. The age of respondents is mostly 21-35 years old, amounting to 236 respondents (61.1%). The number of respondents aged 21-35 years is the largest in Pasirian Health Center,

amounting to (60%). Most respondents have a high school/vocational high school education of 47.7%. Pasirian Health Center has the largest number of respondents with a high school/vocational high school education, which is (50%).

The Description of Health Service Quality Dimensions in Lumajang Health Centers. The

description of the dimensions of health service quality in this study consisting of tangible dimensions, reliability dimensions, responsiveness dimensions, health insurance dimensions, and empathy dimensions can be seen in [Table 2](#) as follows:

Table 2. Description dimensions of health service quality in Lumajang Health Center.

Dimensions of health service quality		Health Center Name						
		Tempeh Health Center	Kedung jajang Health Center	Kunir Health Center	Labruk Kidul Health Center	Pasiri an Health Center	Total	
Tangible Dimension	Not <i>tangible</i>	N	6	2	10	5	11	34
		%	6,7	2,8	18,2	5,7	13,4	8,8
	<i>Tangible</i>	N	84	70	45	82	71	352
		%	93,3	97,2	81,8	94,3	86,6	91,2
Dimensions of reliability	Not reliability	N	37	37	25	29	26	154
		%	41,1	51,4	45,5	33,3	31,7	40
	Reliability	N	53	35	30	58	56	232
		%	58,9	48,6	54,5	66,7	68,3	60
Dimensions of responsiveness	Not responsive	N	6	1	7	4	6	24
		%	6,7	1,4	12,7	4,6	7,3	6,2
	Responsive	N	84	71	48	83	76	362
		%	93,3	98,6	87,3	95,4	92,7	93,8
Dimensions of health insurance	Unbelieve	N	2	1	5	4	5	17
		%	2,2	1,4	9,1	4,6	6,1	4,4
	Believe	N	88	71	50	83	77	369
		%	97,8	98,6	90,9	95,4	93,9	95,6
Dimension of empathy	Not empathy	N	8	2	10	12	15	47
		%	8,9	2,8	18,2	13,8	18,3	12,2
	Empathy	N	82	70	45	75	67	339
		%	91,1	97,2	81,8	86,2	81,7	87,8

Based on [Table 2](#) above, the tangible dimension shows that the majority of respondents rated the health center as tangible at 352 respondents (91.2%). The reliability dimension shows that the majority of respondents rated health workers at community health centers in the reliable category, amounting to 232 respondents (60%). The responsiveness dimension shows that 362 respondents (93.8%) said health workers were responsive. The health insurance dimension shows

that 369 respondents (95.6%) believe in community health centers. The empathy dimension shows that 339 respondents (87.8%) said that health workers were empathetic at the Lumajang Regency Health Center.

Description of Patient Satisfaction in Lumajang Health Center. The description of respondent satisfaction in Lumajang Health Center can be seen in [Table 3](#) as follows:

Table 3. Description of patient satisfaction and Interest in revisits in Lumajang Health Center.

Health Center Name	Patient Satisfaction						Interest in revisits					
	Not Satisfied		Satisfied		Total		No interest		Interest		Total	
	N	%	N	%	N	%	N	%	N	%	N	%
Tempeh Health Center	11	12.2	79	87.8	90	100	3	3.3	87	96.7	90	100
Kedungjajang Health Center	5	7.0	67	93.0	72	100	2	2.8	70	97.2	72	100
Kunir Health Center	12	21.8	43	7.2	55	100	1	1.8	54	98.2	55	100
Labruk Kidul Health Center	4	4.6	83	95.4	87	100	4	4.6	83	95.4	87	100
Pasirian Health Center	5	6.1	77	93.9	82	100	6	7.3	76	92.7	82	100
Total	37	9.6	349	90.4	386	100	16	4.1	370	95.9	386	100

Based on [Table 3](#) above, it shows that the respondents who feel satisfied are greater than the respondents who feel dissatisfied, that is 349 respondents (90.4%). The respondents who are interested in revisits are greater than those who are not interested, that is 370 respondents (95.9%).

Relationship between Patient Satisfaction and Interest in Revisits to Lumajang Health Center. The relationship between patient satisfaction and interest in revisits of outpatients in Lumajang Health Center can be seen in [Table 4](#) as follows:

Table 4. Relationship between patient satisfaction and intention to revisit in Lumajang Health Center.

Patient Satisfaction	Interest in revisits				p-value
	Not Interest		Interest		
	N	%	N	%	
Not Satisfied	2	0.5	35	9.1	0.903
Satisfied	14	3.6	335	86.8	
Total	16	4.0	370	96	

Based on [Table 4](#) above, it shows that the results of the Chi-Square test obtained a p-value = 0.903, so it can be concluded that there is no relationship between patient satisfaction and interest in revisits to Lumajang Health Center.

Relationship between Dimensions of Health Service Quality and Interest in Revisits to Lumajang Health Centers. The relationship between

dimensions of health service quality consists of tangible dimensions, reliability dimensions, responsiveness dimensions, health insurance dimensions, and empathy dimensions with patient revisit. The Chi-Square test shows that only the responsiveness dimension has a relationship ([Table 5](#)).

Table 5. Relationship between tangible dimensions and revisit interest to Lumajang Health Center.

Table 3: Relationship between tangible dimensions and revisit interest to Lamajang Health Center.					
Tangible Dimension	Interest in Revisits				p-value
	No Interest		Interest		
	N	%	N	%	
Not tangible	1	0.3	33	8.5	0.712
Tangible	15	3.9	337	87.3	
Total	16	4.2	370	95.8	

[Table 5](#) above shows that the results of the Chi-Square test obtained a $p\text{-value} = 0.712$, so it can be concluded that there is no relationship between the tangible dimension and the interest in revisits to Lumajang Health Center.

Table 6. Relationship between reliability dimensions and intention to revisit in Lumajang Health Center.

Reliability Dimensions	Interest in Revisits				p-value
	No Interest		Interest		
	N	%	N	%	
Not Reliable	6	1.6	148	38.3	0.842
Reliable	10	2.6	222	57.5	
Total	16	4.2	370	95.8	

Based on [Table 6](#) above, it shows that the results of the Chi-Square test obtained a $p\text{-value} = 0.842$, so it can be concluded that there is no relationship between the reliability dimension and the interest in revisits to Lumajang Health Center.

Table 7. Relationship between responsiveness dimensions and revisit interest in Lumajang Health Center

Responsiveness Dimensions	Interest in Revisits				p-value
	No Interest		Interest		
	N	%	N	%	
Not Responsive	3	0.8	21	5.4	0.034
Responsive	13	3.4	349	90.4	
Total	16	4.2	370	95.8	

Based on [Table 7](#) above, it shows that the results of the Chi-Square test obtained a $p\text{-value} = 0.034$, so it can be concluded that there is a relationship between the responsiveness dimension and the interest in revisits to Lumajang Health Center.

Table 8. Relationship between dimensions of health insurance and intention to revisit in Lumajang Health Center

Dimensions of Health Insurance	Interest in Revisits				p-value
	No Interest		Interest		
	N	%	N	%	
Unbelieve	1	0.3	16	4.1	0.915
Believe	15	3.9	354	91.7	
Total	16	4.2	370	95.8	

Based on [Table 8](#) above, it shows that the Chi-Square test results obtained a $p\text{-value} = 0.915$, so it can be concluded that there is no relationship between the dimensions of health insurance and the interest in revisits to Lumajang Health Center.

Table 9. Relationship between empathy dimensions and revisit interest to Lumajang Health Center.

Empathy Dimension	Interest in Revisits				p-value
	No Interest		Interest		
	N	%	N	%	
Not Empathy	3	0.8	44	11.4	0.411
Empathy	13	3.4	326	84.4	
Total	16	4.2	370	95.8	

Based on [Table 9](#) above, it shows that the Chi-Square test results obtained a $p\text{-value} = 0.411$, so it can be concluded that there is no relationship between the empathy dimension and the interest in revisits to the Lumajang Health Center.

DISCUSSION

Characteristics of Respondents.

In this study, most respondents were female (64.8%). This aligns with research at the Outpatient Unit of Persahabatan Hospital, showing that female respondents were greater than male respondents by 65.2% ([Amri et al., 2024](#)). In line with Sari et al. (2023), female respondents were greater than male respondents by 64.8%. Women are more careful in assessing behavior and can express their assessments in evaluating the services received compared to men, who are more satisfied with the services received ([Widiasari et al., 2019](#)). Women do a lot of household activities, take care of children, cook for the family, and work to help with family finances so that their rest time is reduced. Women's energy is not as great as men's energy so women get tired quickly, and get sick easily, but women are more careful in choosing good and quality health service places.

The age of the most researched study is 21-35 years (64.8%). Age is considered an adult; the role and responsibility will certainly increase. This condition makes a person think realistically to appreciate the health services provided more ([Muzer, 2020](#)). Age 21-35 is a productive and adult age, so the pattern of thinking, acting, making decisions, and behaving is more careful and responsible for what they do. Age is very important in determining whether a person can assess the health services received as expected or not.

The last education of this study was mostly high school/vocational high school (47.7%). The level of education can influence thinking, decision-making, and utilizing a health service; patient knowledge and expectations of services will increase when the patient's level of education is higher, so the level of satisfaction will decrease if expectations do not match reality ([Bunet et al., 2020](#)).

The Description of Health Service Quality Dimensions in Five Health Centers in Lumajang Regency.

In this study, respondents said that the tangible health center was 91.2%. This aligns with

previous research in Bakunase Health Center, Kota Raja Subdistrict, which stated that the tangible health center was 67% ([Djuwa et al., 2020](#)). In-line research in Lowu-Lowu Health Center noted that the tangible health center was 90.6% ([Amiruddin et al., 2021](#)). Factors that influence tangible are the cleanliness of the waiting room, the examination room, the availability of equipment, permanent buildings, the equipment of medical technology, and the appearance of health workers ([Mualifah et al., 2019](#)).

This study showed that the reliability of health workers was 59.4%. This is in line with previous research in Bakunase Health Center, Kota Raja Subdistrict, which stated that health workers were reliable by 84.9% ([Djuwa et al., 2020](#)). In line with research by Tangerang General Hospital Agency, it was noted that health workers were reliable by 61% ([Rahmiati & Temesveri, 2020](#)). The reliability of officers is the ability to provide promised health services appropriately and appropriately to be trusted, especially providing services appropriately in the same way according to existing regulations and without making mistakes ([Lestari et al., 2021](#)). Factors influencing responsive officers are timeliness of service, sympathetic attitude, and high accuracy ([Nursalam & Pariani, 2016](#)). Reliable health workers will make patients feel safe with the health services provided. The reliability of health workers is very important in providing appropriate, thorough health services and making the right decisions.

In this study, outpatients stated that health workers were responsive by 93%. This is in line with research at Tangerang General Hospital Health Center, which indicated that health workers were responsive by 59% ([Rahmiati & Temesveri, 2020](#)). Responsiveness is the desire of staff and employees to help patients by providing health services responsively, quickly, and accurately, conveying clear information, and allowing patients to assess the health services provided as good or bad ([Nursalam & Pariani, 2016](#)). Health workers who are responsive to patients will create harmony, good relationships, and feelings of comfort for patients with the health services we provide. The

responsiveness of health workers is very important in providing health services and creating good health services.

This study shows that health insurance is 93.5%. This aligns with research in Poasia Health Center stating that health insurance is 95.5% ([Maslin et al., 2023](#)). In line with research in Grandmed Lubuk Pakam Hospital stating that health insurance is 97.7% ([Syahputra et al., 2022](#)). Assurance includes knowledge, ability, politeness, and trustworthiness of staff, free from danger and risk. Knowledge, politeness, and ability of employees and health service facilities foster patient trust. Health insurance consists of communication, credibility, security, competence, and courtesy ([Nursalam & Pariani, 2016](#)). The feeling of trust that arises in patients will improve good health services and create good relationships between patients and health workers. High trust will make patients come back to receive the health services we provide.

This study showed that the empathy of health workers was 87.6%. This is in line with research at the Grandmed Lubuk Pakam Hospital which stated that the empathy of health workers was 93.2% ([Syahputra et al., 2022](#)). In line with research at the Poasia Health Center which stated that the empathy of health workers was 95.2% ([Maslin et al., 2023](#)). Empathy is the ease of establishing relationships, good communication, personal attention, and understanding the needs and desires of patients. Health services must have knowledge and understanding of patients specifically and have a comfortable health service time for patients ([Nursalam & Pariani, 2016](#)). Empathy is related to providing attention and concern to patients including personal attention from officers, understanding of patient needs, and the appropriateness of service time with patient needs. The indicators of questions such as officers' attention to individual patients, registration officers providing services with full attention, and Pharmacy officers providing services with full attention, during the examination, the officers pay attention and show sympathy ([Habibi et al., 2019](#)). Empathy is a measure of how much a healthcare facility can understand the problems and needs of its patients.

Such as giving attention, showing seriousness during treatment, showing sympathy in service, acting according to patient needs, and giving personal attention to patients. In addition, a relationship of mutual understanding between patients and service providers is also needed to create a good relationship in the service ([Tjiptono & Chandra, 2016](#)).

Description of Revisit Interest in Lumajang Health Center.

In this study, most respondents were interested in revisiting the health center (95.9%). Satisfaction with previous services underlies someone to return to use a service or product in the future ([Rasyid & Indah K, 2019](#)). The results of this study are in line with research conducted by Armada and freinds., (2020) in Air Hitam Laut Health Center, 69.8% were interested in revisiting and 30.2% did not intend to revisit ([Armada et al., 2020](#)). The decision to revisit is a behavior that appears as a response to an object that shows the customer's desire to make a repeat purchase. In line with the results of research conducted by Satriangera et al., (2020) showed that as many as 52 people (60.5%) expressed interest in revisiting. The interest in revisiting is the final result of the health services provided, causing feelings in the recipient of health services to feel satisfied or dissatisfied ([Satrianegara et al., 2020](#)). High patient satisfaction will increase the interest of patients to revisit health services. So that patients will quickly come to health services if they need it or are in an unhealthy condition. This behavior can change people's mindset about healthy living and preventive measures.

The relationship between patient satisfaction and dimensions of health service quality with interest in repeat visits at the Lumajang District Health Center.

In this study, the Chi-Square test results showed no relationship between patient satisfaction and dimensions of health service quality with interest in repeat visits by outpatients at the Lumajang District Health Center (p-value > 0.05). This research is in line with research conducted by

Sangkot et al, (2022) at Hospital In line with research conducted by Harun and Rina (2022) at RIS Hospital, it was stated that there was no relationship between service quality and interest in re-visiting outpatients (p-value > 0.05) ([Harun S, H & Rina, 2022](#)). In line with research by Syaputra et al, (2022) in the internal medicine clinic at Grandmed Lubuk Pakam Hospital, it was stated that there was no relationship between service quality and outpatient interest in repeat visits (p-value > 0.05) ([Syahputra et al., 2022](#)). In line with research by Masdan et al, (2022) at the Kukupang District Health Center. Jouronga Islands, South Halmahera Regency stated that there was no relationship between the dimensions of health service quality and interest in repeat visits (p-value > 0.05) ([Masdan et al., 2022](#)). Good service quality dimensions will increase patient satisfaction with the health services provided. Patient satisfaction is the result of the health services received by each patient and greatly influences health status. Patient satisfaction is always used as a basis for supporting changes to the health service system of each existing health facility to make it even better. The quality of health services and good patient satisfaction will increase the patient's interest in repeat visits to use the health services provided.

CONCLUSION

Most outpatients in the District Health Center are satisfied with the services of health workers and are interested in returning. Patient satisfaction is mainly related to the responsiveness of health workers at the Health Center in providing health services.

SUGGESTION

The decrease in outpatient visits in several Lumajang Regency health centers is unrelated to satisfaction and dimensions of service quality of outpatients. Therefore, other factors that can affect the interest of outpatient visits need to be studied.

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CONFLICTS OF INTEREST

There are no interest conflicts in this article.

AUTHOR CONTRIBUTIONS

Mirawati conducted the research and drafted the article. Yunita Armianti drafted the research concept and contributed to the article writing. Anisah Ardiana contributed to the article writing and editing.

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