TANALYSIS OF PATIENT SATISFACTION WITH FAMILY CENTER CARE SERVICES BASED ON IMPORTANCE PERFORMANCE ANALYSIS AND CUSTOMER SATISFACTION INDEX

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Abstract

Background : In the era of globalization, excellent service is a key element in hospitals and care units. Patient satisfaction is an indicator of the first hospital to use to measure the quality of health care. Patients and families of parents patient care determine if they can be active in care and decision-making.

Objective : Determine the "Patient Satisfaction Analysis Of Service Center Family Care (FCC) Based Importance Performance Analysis (IPA) And Customer Satisfaction Index(CSI) In The Finches RSAU Dr. Salamun Bandung " Descriptive and cross-section design.

Method : The research was conducted from 27 June 2019 to 31 June 2019 and involved a sample of 30 respondents. Data were collected by the distributing questionnaires. The data are processed using the Univariate, Importance Efficiency Analysis (IPA) and Customer Satisfaction Index (CSI).

Results : The results of this study, the 5 dimensions of service most nursing FCC is very satisfied category, namely reliability dimension (94.27 %), Assurance (94.85 %), Tangible (93.52 %)), Empathy (96.22 %), And responsiveness (94.27 %) (94.27 percent).

Conclusion : Patient satisfaction with community care centers (FCC) based on (IPA) and (CSI) in the room finches pretty good RSAU Bandung Dr. Salamun.

INTRODUCTION

In the era of globalization, excellent service is a key element in hospitals and health care units. Hospitals are required to provide health services that meet the highest standards of service. It is the responsibility of the hospital so that it can compete with other hospitals. Hospital is a form of a comprehensive health service organization covering promotional, preventive, curative and rehabilitative aspects, as well as a public health referral center. Hospital is a health facility that provides individual health services, including educational, preventive, curative and rehabilitative services that provide inpatient, outpatient and emergency services (Permenkes RI, 2008). Inpatient service is one type of hospital service that requires a quality assessment aspect, and nursing services are an integral part of hospital services. Overall, they are interconnected, run in an integrated manner and provide services to hospital users, so that nursing services are one of the main criteria for the quality of service and the image of the hospital in the eyes of the community (Permenkes RI, 2008).

Patient satisfaction is the first measure that the hospital is responsible for measuring the quality of health services. Patient satisfaction of doctor visits, while the attitude of nurses to patients will also have an impact on patient satisfaction, in which the needs of patients will be increased from time to time, as will their demands for the quality of care rendered (Heriandi, 2007).

Patient satisfaction is the key to the success of nurses in providing satisfactory or quality health services, and the right assessment of the performance of nurses in providing health services in hospitals is the satisfaction of patients (Trajkovski *et al.*, 2015). Most of the services received by patients, especially those who are hospitalized, are nursing services, because nurses most communicate with patients (Suryawati, 2004).

Patients and families in family-based patient care determine how they will participate in care and decision-making. FCC is now a standard of practice that will include high-quality services. The FCC provides care on the basis of mutual trust, collaboration or partnership that works with families, paying attention to aspects (bio, psycho, socio-spiritual) of respect of diversity and recognizing that the family is the source

of kids education (Lim and Godambe, 2017). In the era of globalization, nurses are required to be more skilled and to increase their knowledge in a variety of fields. Implementation FCC has a lot of principles: treating patients together with the families and how they better care of the patient during the healing period, e.g. during inpatient and outpatient care, improving family-centered support, and including the family in hospital management (Royal Children's Hospital, 2017). The policy of the FCC can be seen in visiting hours, the family is seen as a child's source of strength and a constant constituent and volatile health worker. The presence of a family accompanying children for 24 hours can make the child feel comfortable and will provide support to children in the provision of quality health services. Providing quality health services is one way to measure patient satisfaction at the hospital (Andriani, 2009).

Research by (Valentine Wulan Sari., NLP Dina Susanti., 2017) with a picture of the level of patient satisfaction The second class of the nursing waiter is very satisfied with the results of a largely overview of the patient satisfaction level of the nursing services class II. And from (Rostami *et al.*, 2015) study Effects of family-centered care on the satisfaction of parents of children hospitalized in the pediatric ward in Chaloos, the results show that the practice of FCC in the care of sick children can increase the satisfaction of their parents. Significant. Whereas the results of (Shields *et al.*, 2012) on family-centered care for children in hospitals show some of the benefits of family-centered care interventions for children's clinical care, parental satisfaction. Research conducted by (Novitasari, Hidayat and Kaporina, 2014) Inpatient Satisfaction of Nursing Care at Dr. Kariadi Semarang (2014). Tri Aulia Novitasari's research on the level of patient satisfaction with the quality of service conducted in the inpatient room of the Palembang Mother Hospital (2017).

Based on patient interviews, 8 patient families showed that they were satisfied with the services provided by the nurse where the wishes and needs of the patient and the family were good. Quality of service or quality of hospital services can be assessed on the basis of one of the types of hospital services available, such as inpatient services. Good inpatient services can of course, pay attention to all that patients and their

families need in the offering of bio, psycho, socio-and spiritual health services, and we can use these services in compliance with the principles of the FCC, namely care for patients through the patient's family and with the FCC. We're getting closer to the patient and family in the healing process of the patient. Patient satisfaction services are low and can affect the number of hospital visits and the necessary implementation of the FCC in the hospital. Patient satisfaction has to do with the FCC. Background has made me interested in doing research entitled " Analysis of Satisfaction Patient Of Service Family Center Care (FCC) in RSAU Dr. Greetings".

METHODS

Material and subject

This study was conducted at the Air Force Hospital, West Java, using a cross-sectional method. In this study, parents of patients in the Kutilang Bed, RSAU Dr. Salamun, has a population of 100. This research uses the Slovin formula because the sample population in this study is 100 employees, so that the percentage of leeway used is 5 per cent or 0.05 and the calculation results can be rounded up to achieve conformity, so that the sample of the respondent of this study can be adjusted to as many as 80 participants.

Instrument

In this study, the instrument used is a questionnaire, which is a measuring tool that is adjusted to the research variables, namely in the form of an answer statement, by putting a check mark on the answers that have been provided for which must be filled in by the respondent. Customer satisfaction questionnaires on patient satisfaction with family center care services using the Parasuraman Nursery questionnaire (2014) with the word "RATER". This study uses a questionnaire tool that can measure patient satisfaction with family center care (FCC) services based on the Value Performance Analysis (IPA) AND Customer Satisfaction Index (CSI). Questionnaires to measure patient satisfaction with Family Center Care (FCC) services based on Importance Performance Analysis (IPA) AND Customer Satisfaction Index (CSI) were obtained from research conducted by FCC (De Fretes, 2012). The title of the relationship between family care centers and the effect of hospitalization on children in the dahlia room at Cilasa Citarum Hospital,

Semarang. Results of the questionnaire validation test performed by respondent parents of children aged 3-6 years in the public hospital orchid room in the third city area with as many as 15 respondents. The validation test used SSS 20 for windows with a total correlation coefficient of 0.21, showing 56 items in the questionnaire statement. That family care center was also declared valid for a total of 76 question items. Reliability test results for the family center care questionnaire with the research participant.

Data collection

In this study, the primary data obtained from the distribution of the survey were defined as (initial), age, gender, and satisfaction of a patient and nurse. Data obtained from RSAU data Dr. Salamun who supports research, such as patient visit data Dr. Greetings, is secondary data in this study.

Data Analysis

Using SPSS version 23 (IBM, 2012), the data was then controlled. Descriptive statistics (mean, standard deviation, range, frequency) were used based on the level of measurement and distribution of variable data. This analysis was carried out to describe the variables studied, namely patient satisfaction and nurses based at the Family Center to Care (FCC). In fact, measuring the level of patient satisfaction using the Importance Performance Analysis (IPA) and Customer Satisfaction Index (CSI) methods. In fact, the level of overall customer satisfaction can be seen from the level of customer satisfaction criteria. These criteria are based on Hill in Nasution (2011), i.e. 76 percent-100 % very pleased, 51 percent-75 percent satisfied, 26 percent-50 % dissatisfied and 25 percent-0 % very dissatisfied.

RESULT

Analysis of patient satisfaction with family center care services (FCC)

The Importance Performance Analysis (IPA) is a table form comprising the level of expectation and the level of patient satisfaction reality from each attribute, then divided into a Cartesian diagram of four quadrants bounded by perpendicular alignment lines respectively the X-axis and the Y-axis or horizontal axis, that is to

be filled in t. The assessment of the level of expectation with reality in patients treated for at least 2 days in the RSAU Dr. Salamun Bandung, containing 25 questions, can be seen in the calculation of the average value. It is known that 2 dimensions have a conformance level of <94, 27 %, namely the Tangible dimension of 93,52 % and the responsiveness of 92,48 %.

Table.4.1 Importance Performance Analysis (IPA)

No	Hope (Y)	Reality (X)	Y	X	Level of Conformity %
Tangible					
11	104	90	3,47	3,00	86,54%
12	94	90	3,13	3,00	95,74%
13	94	87	3,13	2,90	92,55%
14	96	92	3,20	3,07	95,83%
15	98	95	3,27	3,17	96,94%
Average					93,52%
Empathy					
16	105	99	3,50	3,30	94,29%
17	95	91	3,17	3,03	95,79%
18	102	95	3,40	3,17	93,14%
19	96	95	3,20	3,17	98,96%
20	92	93	3,07	3,10	98,92%
Average					96,22%
Responsiveness					
21	106	97	3,53	3,23	91,51%
22	103	93	3,43	3,10	90,29%
23	96	92	3,20	3,07	95,83%
24	95	88	3,17	2,93	92,63%
25	102	94	3,40	3,13	92,16%
Average					92,48%
Total					282,80%
Aaverage patient satisfaction			3,30	3,12	94,27%
Reliability					
1	102	99	3,40	3,30	97,06%

No	Hope (Y)	Reality (X)	Y	X	Level of Conformity %
Reliability					
1	102	99	3,40	3,30	97,06%
2	103	94	3,43	3,13	91,26%
3	102	91	3,40	3,03	89,22%
4	92	95	3,07	3,17	96,84%
5	98	95	3,27	3,17	96,94%
Average					94,27%
Assurance					
6	96	98	3,20	3,27	97,96%
7	102	96	3,40	3,20	94,12%
8	101	93	3,37	3,10	92,08%
9	102	94	3,40	3,13	92,16%
10	98	96	3,27	3,20	97,96%
Average					94,85%

It is known that there are two dimensions of a conformity level of <94.27%, namely the Tangible dimension of 93.52% and the responsiveness of 92.48%.

Analysis of patient satisfaction with family center care services (FCC) based on the Customer Satisfaction Index (CSI)

The Customer Satisfaction Index (CSI) analysis aims to determine the overall customer satisfaction with an approach that considers the importance of the attributes being measured (Johnson, Zabriskie and Hill, 2006) in Nasution, 2011). Criteria for measuring patient satisfaction with family center (FCC) care services. This has provisions, namely four categories of them. 0-25% = very disappointed, 26 %-50 % = dissatisfied, 51 %-75 % = happy, 76 % -100 % = very satisfied ((Johnson, Zabriskie and Hill, 2006) in Nasution, 2011).

Table 4.2 Customer Satisfaction Index (CSI)

No	Hope	Weight factor (WF)	Reality	Weight score
1	3,40	4,12	3,30	0,136
2	3,43	4,16	3,13	0,130
3	3,40	4,12	3,03	0,125
4	3,07	3,72	3,17	0,118
5	3,27	3,96	3,17	0,125
6	3,20	3,88	3,27	0,127
7	3,40	4,12	3,20	0,132
8	3,37	4,08	3,10	0,127
9	3,40	4,12	3,13	0,129
10	3,27	3,96	3,20	0,127
11	3,47	4,20	3,00	0,126
12	3,13	3,80	3,00	0,114
13	3,13	3,80	2,90	0,110
14	3,20	3,88	3,07	0,119
15	3,27	3,96	3,17	0,125
16	3,50	4,24	3,30	0,140
17	3,17	3,84	3,03	0,116
18	3,40	4,12	3,17	0,131
19	3,20	3,88	3,17	0,123
20	3,07	3,72	3,10	0,115
21	3,53	4,28	3,23	0,139
22	3,43	4,16	3,10	0,129
23	3,20	3,88	3,07	0,119
24	3,17	3,84	2,93	0,113
25	3,40	4,12	3,13	0,129
TOTAL	82,47	100,00	78,07	
Weight total				3,124
Satisfaction index				78,1%

Based on the results of the CSI analysis in Table (4.2), the overall percentage of patient satisfied with the service of nursing services in the RSAU area Dr. Salamun Bandung, namely 78.1%, was quite satisfied. Based on these percentages, patient satisfaction with family center care (FCC) services in the Kutilang Room at RSAU Dr. Salamun is considered to be quite acceptable.

DISCUSSION

Analysis of Patient Satisfaction with Family Center Care (FCC) Services Based on Importance Performance Analysis (IPA) Responsiveness Dimensions

On the results of the table (4.1), it can be seen from 5 questions that state patient satisfaction with the nursing services in the RSAU Finch Room Dr. Salamun Bandung, on the tangible dimensions (92, 48 %) the dimensions that have the conformity level are lower than the average value (94.27 %). The responsiveness dimension is the response or alacrity and the ability to help customers and speed up service. This dimension can also indicate the ability of workers to serve customers.

Based on the IPA analysis, each attribute in the responsiveness dimension obtained attributes 21,22,24 and 25, the level of suitability of patient expectations and reality is still below average patient satisfaction, namely 91,51 %, 90,29 %, 92,63 % and 92,16 %. However on the ground of the Cartesian diagram, Attribute 21 is that the nurse is responsive to family complaints and Attribute 25 that the nurse responds quickly to family complaints is included in Quadrant B, namely the category of maintaining of achievement, with a high level of importance and a high level of performance. This shows that the patient's perception of these attributes is considered a priority, and nurses provide optimal service to all these attributes.

Attribute 22, that is to say, the nurse asks for the family's response and the child, after giving nursing action, is included in quadrant A, namely the priority category, where the importance is high and the level of performance is low. This shows that the patient's perception of these attributes is not a priority, and nurses provide optimal service to these attributes.

In fact, attribute 24, namely nurses involved in the development of measures for child care in the hospital, is included in the C quadrant, i.e. a low level of importance and a low level of performance. This shows that the patient's perception of these attributes is not a priority and that their service is not satisfactory.

Good support can help to reduce the stress experienced by the family due to the imbalance here between needs of the conditions and the availability of family-owned

staff when accompanying children to the hospital. Nurses must therefore be critical in assessing the needs of the family so that support can be provided in an appropriate manner, And analysis of policies that support the support that will be provided to the family, both in the hospital and in the environment (De Fretes, 2012).

Attribute number 23 has a health score of >94, 27%. This means that the expectations of the patient are in line with the services provided by the nurse. However on the basis of the Cartesian diagram, Attribute 23, that is, the nurse immediately says goodbye to the child and the family after conclusion of the nursing action, falls into the C quadrant, namely low importance and low performance. This shows that the patient's perception of these attributes is not a priority and that their service is not satisfactory.

Nurses or other professionals make it easier to families to get help from other families who also have the same problems for their children. Support between these families is structured to provide support and build friendly relationships (De Fretes, 2012)).

Analysis of patient satisfaction with family center care (FCC) services based on customers Satisfaction Index (CSI) dimensions of responsiveness

The Customer Satisfaction Index (CSI) is used to determine the satisfaction index of a product. It is really important to assess the level of patient satisfaction in order to find out how much expectations the service provider can meet, in this case, is RSAU Dr. Salamun Bandung. The CSI analysis is related to the IPA method, supported by the attributes in quadrants II and IV that are maintained so that the CSI value may not decrease. The CSI value was also not 100 % due to the fact that there are attribute factors in quadrant I and quadrant III that need to be fixed and improved. According to Lodhita, the CSI value can be increased by improving the performance of the parameters of the IPA results (Lodhita, Santoso and Anggarini, 2014). In this study, the results obtained from CSI did not reach 100 per cent, even though we accumulated to 78.1 %. The value of the CSI can still be increased by improving the performance attribute of the results (IPA) expected to improve the value (CSI) (Uktutias, 2018).

The limitation is a problem in the inclusion of respondents because it uses patients that are in the

RSAU Finch Room, Dr. Salamun Bandung, in the sense that the respondents to this research are patients who are waiting for a healthy/sick patient, but must respond to the statements to be examined with the consent of the patient. Some respondents were also confused when filling out the questionnaire to be filled out. The next problem is the lack of an in-depth analysis of the Customer Satisfaction Index (CSI) theory. Research can however, analyze data using CSI as predictably as possible according to existing theories.

Conclusion

Based on the results of patient satisfaction research on nursing services in RSAU Dr. Salamun Bandung in 2019, it can be concluded that in general (78.1%) patients expressed satisfaction with nursing services provided by nurses (CSI). Following are the results of the 5-dimensional Patient Satisfaction Research on Family Care Center Care (FCC) with (IPA): (94.27%) The level of conformity has reached the average satisfaction of the patient with dimension of reliability. (94 , 85 %)> (94.27%) The dimension of assurance is the higher level of conformity (assurance). (93 , 52 %) <(94.27%) The lower level of conformity is the tangible dimension (direct evidence). (96 , 22 %) > (94.27%) There had been a higher level of conformity in the compassion dimension (empathy). (92 , 48 %) < (94.27%) The level of suitability is smaller, namely the responsiveness dimension (responsiveness).

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Conflict of interest

The author has no conflict of interest to declare.

REFERENCE

Andriani, S. (2009) 'Sunarto.(2009). Hubungan Kualitas Pelayanan Kesehatan Dengan Kepuasan Pasien Rawat Inap di Badan Pelayanan Kesehatan Rumah Sakit Umum Daerah Kabupaten Magelang', *Jurnal Kesehatan*, 2(1), p. 76.

De Fretes, F. (2012) 'Hubungan Family-Centered

Caredengan efek hospitalisasi pada anak di Ruang Dahlian Rumah Sakit Panti Wilasa Citarum Semarang', *Artikel Fakultas Kesehatan Universitas Kristen Satya Wacana*.

Heriandi, H. (2007) 'Faktor-faktor yang Berhubungan dengan Tingkat Kepuasan Pasien di Instalasi Rawat Jalan RSOB Tahun 2005'.

Johnson, H. A., Zabriskie, R. B. and Hill, B. (2006) 'The contribution of couple leisure involvement, leisure time, and leisure satisfaction to marital satisfaction', *Marriage & Family Review*, 40(1), pp. 69–91.

Lim, Y. and Godambe, S. (2017) 'Prevention and management of procedural pain in the neonate: an update, American Academy of Pediatrics, 2016', *Archives of Disease in Childhood-Education and Practice*, 102(5), pp. 254–256.

Lodhita, H. E., Santoso, I. and Anggarini, S. (2014) 'Analisis pengaruh kualitas pelayanan terhadap kepuasan konsumen menggunakan metode ipa (Importance Performance Analysis) dan CSI (Customer Satisfaction Index) Studi Kasus Pada Toko Oen, Malang', *Jurnal UB*.

Novitasari, A., Hidayat, M. and Kaporina, A. (2014) 'Kepuasan pasien rawat inap terhadap pelayanan keperawatan di RSUP Dr. Kariadi Semarang', *Jurnal Kedokteran Muhammadiyah*, 3(1).

Rostami, F. *et al.* (2015) 'Effects of family-centered care on the satisfaction of parents of children hospitalized in pediatric wards in a pediatric ward in Chaloos in 2012', *Electronic physician*, 7, pp. 1078–1084. doi: 10.14661/2015.1078-1084.

Shields, L. *et al.* (2012) 'Family-centred care for hospitalised children aged 0-12 years', *Cochrane database of systematic reviews (Online)*, 10, p. CD004811. doi: 10.1002/14651858. CD004811.pub3.

Suryawati, C. (2004) 'Kepuasan pasien rumah sakit (tinjauan teoritis dan penerapannya pada penelitian)', *Jurnal Manajemen Pelayanan Kesehatan*, 7(04).

Trajkovski, S. *et al.* (2015) 'Using appreciative inquiry to bring neonatal nurses and parents together to enhance family-centred care: A collaborative workshop', *Journal of Child Health Care*, 19(2), pp. 239–253. doi: 10.1177/1367493513508059.

Uktutias, S. A. M. (2018) 'Analisis Tingkat Kepuasaan Pasien Rawat Jalan RSIA NUN Surabaya', *Jurnal Manajemen Kesehatan Yayasan RS.Dr. Soetomo*, 4(1), p. 14. doi: 10.29241/jmk.v4i1.97.

Valentine Wulan Sari., NLP Dina Susanti., I. A. W. (2017) 'Gambaran Tingkat Kepuasan Pasien Rawat Inap Kelas II Terhadap Pelayanan Keperawatan', *Sekolah Tinggi Ilmu Kesehatan Bali*, 1(1), pp. 37–44.