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Analysis of The Relationship Between Patient's Satisfaction With The Quality of Nursing Service and Service In Nursing Care

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ABSTRACT

Caring is essential for a nurse during his/her nursing delivery, by which a nurse is able to provide comprehensive nursing care. The purpose of this study is to analyse the relationship between the quality of nursing service and service in *caring in nursing* towards patients' satisfaction at X hospital. It's an Analytical category study with quantitative analytical category using cross sectional design. Study population was the entire patients hospitalized at X hospital. Sample taken in this study consisted of 66 hospitalized patients at X hospital Malang, which was divided into a group of patients treated with the implementation of *caring in nursing* by the nurses who hadn't received Caring in nursing training program and a group of patients treated with the implementation of *nursing in caring* treated by the nurses who had received *Caring in nursing* training program. Each group consisted of 33 respondents. Result indicates there is a correlation between the quality of nursing service and patients' satisfaction. The value of standardize estimates is 0,240 ($p < 0.05$) showing significant correlation between nursing service quality and patients' satisfaction. The correlation between the service in *caring in nursing* and the patients' satisfaction is indicated by the value of standardized estimates 0,462 ($p < 0.05$) meaning that there's significant correlation between the service in *caring in nursing* and the patients' satisfaction. Another result shows there is a significant correlation between the quality of nursing service and the service in *caring in nursing* towards the patients' satisfaction, which is indicated by the value of standardized estimates 0.935 ($p < 0.05$). it is essential that nursing's primary commitment be maintained in order to promote the quality of nursing service and nurses' awarness of prioritizing *caring in nursing* during their nursing service.

Keywords: Quality, Service, Caring, Satisfaction

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BACKGROUND

Caring is essential for a nurse during his/her nursing care. A nurse is able to deliver comprehensive nursing care by implementing caring (Nanda, 2011). The quality of nursing care deeply affects the level of clients' satisfaction as the health service recipient. It is because a nurse is the front line in the health service. (Ariani & Aini, 2018).

Caring is an art in health service delivery by which empathy, sensitivity and concern are shown in order to meet the patients' need. This behaviour shows affection, love, comfort, empathy, interest, trust, and a willing to give a hand. (Watson, 2012).

In his *Theory of Human Care*, Watson states that the 10 Carative factors must be reflected through caring behaviours (Watson, 2012)

In many cases in customer satisfaction towards nursing care quality seems to be decreasing due to lacking sense of concern nurses should have these days. Nurses spend more of their time on documentation and social media

This is indicated in the customer satisfaction statistic June 2018 at P Hospital, showing that 59% customers were not satisfied with the nursing service at P Hospital (Nursing Ethic Committee, 2019). Some customers even chose to move to another hospital considering that the service quality of A Hospital was much better than that of B Hospital.

Study conducted by Firmansyah (2019) states that nurses' caring behaviours during their service in the wards at X Hospital is considered adequate. This was because only 43.7% nurses showed their humanistic-altruistic value and only 50% of the nurses showed their sensitivity to self and others. (Firmansyah, Noprianty, & Karana, 2019)

In order to improve customer satisfaction, it is necessary the quality of the nursing quality be improved. The improvement can be using caring implementation approach during the nursing care. The approach can be initiated by improving nurses knowledge of caring. Hence, nurses' improved capability enables them to respond to nursing performance and motivates them to give better nursing care in order to meet the patients' need and satisfaction as well as allow the patients to be involved in the nursing process so that two-way communication can be carried out properly. (Ludyanti, Rustina, & Afyanti, 2015)

METHODS

It is quantitative analytic-categorical study using cross sectional design; an epidemiological research design that studies cause-effect relationship by simultaneously observing the causes and effects in a certain period of time and the object of the study is observed only once during the research. (Budiarto in Shodiqoh, 2014). Survey research is defined as the process of collecting samples from many survey respondents to answer the same questionnaires, measuring the number of variables, constructing a hypothesis, and drawing a conclusion based on the chronological order referring to the questions on faith, opinions, experience, characteristics in the past (Kuntoro, 2011). Each respondent of the groups was given research questionnaire. Estimated time to complete the questionnaire was about 30 minutes.

The study was conducted at X hospital in Malang. Data collection was from September 2019 to February 2019

The target population was all hospitalized patients at X hospital in Malang. Sample of the research consisted of hospitalized patients who were administered by a nurse who had received implementation of *caring in nursing* at X Hospital in Malang.

Minimum sample size required in this study was calculated by the use of *software sample size*. Obtained minimum sample size was 66 respondents, with the ratio of sample size of the group treated by nurses who hadn't undergone caring in nursing training program to the

one treated by nurses who had undergone caring in nursing training program was 1:1. Sample taken in this study consisted of 66 hospitalized patients at X hospital Malang, which was divided into a group of patients treated with the implementation of *caring in nursing* by the nurses who hadn't received Caring in nursing training program and a group of patients treated with the implementation of *nursing in caring* treated by the nurses who had received Caring in nursing training program. Each group consisted of 33 respondents. The data were directly collected from the respondents by using questionnaire sheet and analyzed by Structural Equation Modeling (SEM)

RESULT

Structural Equation Model (SEM) Analysis

Structural relationship was analysed on the basis of research question. Analysis was initiated by investigating the relationship between the quality of nursing service (X1), service in *caring in nursing* (X2) towards patients' satisfaction (Y).

After completing *Confirmatory Factor Analysis (CFA)*, the entire construct variables were tested. Assessment was performed to identify the effect size and the level of significance among the variables. The effect size is shown by factor loading in standardized estimates. The larger the size of correlation between the constructs, the better the effect among the variables. The significance among the variables is shown in the value of χ^2 (chi-square)/ df.

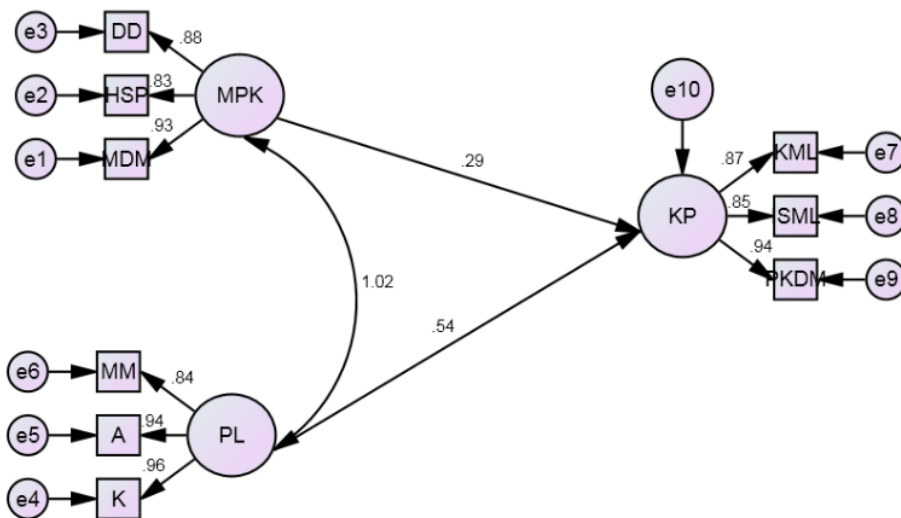


Figure 1. Goodness of fit

Table 1. Interpretation of SEM analysis

Chi-square	df	NFI	TLI	CFI	GFI
58	24	0.883	0.889	0.9276	0.996

Figure 1, *Goodness of Fit* in SEM resulting from AMOS obtained the value of χ^2 (chi-square)/df 2,416,91 less than 3 (≤ 3) among variables, meaning that the model fits. Then, the value of NFI is 0,883 (0,90-0,95); the value of TLI is 0,889 ($\geq 0,90$); the value of CFI is,

0,9276 ($\geq 0,90$), dan the relatively high value of GFI is 0,996 ($\geq 0,90$), which indicates that hypothesis model fits.

Table 2. *Structural Standardized Factor Loading Model*

indicators	constructs	Factor loading
DD		0.88
HSP	Quality of Nursing Service	0.83
MDM		0.93
MM		0.84
A	Service in <i>caring in nursing</i>	0.94
K		0.96
KML	Aspects of patients' satisfaction	0.87
SML		0.85
PKDM		0.94

Good *Factor loading* ($\geq 0,50$) is shown in table 2 in each construct. High *Factor loading* ($> 0,5$) indicates stable model formation, thus it can support the validity and reliability measurement. Reliability measurement is done by assessing *Construct Reliability* using equation formula 1.

Table 3. *Construct Reliability* result of SEM

Construct	(Sum of Standardized Loading) ²	Sum of Measurement Error	Construct Reliability (CR)
Quality of Nursing Service	6.65	0.77	0.90
Service in <i>caring in nursing</i>	7.17	0.61	0.92
Aspect of patients' satisfaction	13.16	0.70	0.95

Table 3 shows the excessive obtained value of CR is 0.7. The limit value used to measure the obtained level of reliability is 0.70 (A.T. Ferdinand, 2000 in Prajogo, 2012). Hence, the constructs in this structural model is considered reliable.

Hypothesis Test

Research Hypothesis testing is based on structural Model Assessment. Table 4 below shows the hypothesis conclusions based on significant p-value.

Table 4. Hypothesis Conclusions

Hypothesis	Statements	Estimates (λ)	P-Value	Conclusions
H ₁	The quality of Nursing service affects positively on the aspects of patients' satisfaction	0.240	p < 0.05	Significant
H ₂	Service in <i>caring in nursing</i> affects positively on the aspects of patients' satisfaction	0.462	p < 0.05	Significant

H ₃	The quality of nursing service and the service in <i>caring in nursing</i> affects positively on the aspects of patients' satisfaction	0.935	p < 0.05	Significant
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Table 4 shows hypothesis 1, hypothesis 2, dan hypothesis 3 are significant and can be assumed that construct variables affect positively and significantly pvalue < 0,05.

DISCUSSION

The relationship between nursing service and the aspects of patients' satisfaction

The result of hypothesis 1 from SEM analysis, *Standardize estimates* of 0,240 (p < 0.05), indicates that there is a significant correlation between the quality of nursing service and the aspects of patients' satisfaction. A good quality of nursing service will definitely have an impact on the patients and their families' satisfaction towards the nursing service they receive. This finding is supported by the previous literature studies that show the relationship between the quality of nursing service and the aspects of patients' satisfaction.

This is due to the fact that the quality of nursing service involves the professional nursing process in order to meet the biological, psychological, social, spiritual needs of the patients. (Suarly & Bachtiar, 2012). This quality refers to the 5 (five) dimensional service qualities; *Reliability, Responsiveness Assurance, Tangibels, Empathy* (Bauk et al., 2013)

The relationship between service in *caring in nursing* and the aspects of patients' satisfaction

The result of hypothesis 2 from SEM analysis, obtained *Standardize estimates* of 0,462 (p < 0.05), indicates that there is a correlation between service in *caring in nursing* and the aspects of patients' satisfaction. Based on *literature review*, caring is defined as the ability of a person to dedicate herself/himself to other people rather than to self, in accordance with Jean Watson's theory of caring stating that caring is a moral commitment to protect, to sustain, and to enhance human dignity, therefore, patients' satisfaction is obtained if optimal caring in nurse is performed.

The relationship between the quality of nursing service and service in *caring in nursing* towards the aspects of patients' satisfaction.

The result of hypothesis 3 from SEM analysis, obtained *Standardize estimates* of 0.935 (p < 0.05), indicates that there is a significant relationship between the quality of nursing service and the service in *caring in nursing* towards the aspects of patients' satisfaction. This finding is supported by previous literature study that shows the correlation between the quality of nursing service and service in *caring in nursing* towards the patients' satisfaction. According to Tailor's theory (1997), caring is the result of a collaborated culture, interpersonal relationship and experience. Caring attitude includes authentic presence, touches, listening, understanding, spiritual practice, family care. If nursing service is provided at its maximum in accordance with *caring in nursing* principles, the patient's satisfaction towards the nursing care is achieved. This is supported by Hinshaw dan Atwood in Hajinezhad (2007) stating that the aspects of patients' satisfaction includes professional service, trust, and patients' education. Nursalam (2011), also states patients' feeling towards health service they received when they had health problems. These feelings are the comparison of what they feel about the given service and their expectation of the service

CONCLUSION

There is a significant correlation between the quality of nursing service and service in *caring in nursing* towards the aspects of patients' satisfaction. Promoting the implementation of caring by nurses during their nursing care delivery is essentially required in order to maintain the quality of nursing service at its maximum and to be in favour of patients' satisfaction.

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