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RESEARCH

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Analysis of Nurse Care Behavior and Patient Satisfaction in X Hospital

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Abstract

The service that most affects patient satisfaction is nursing services. Whether or not patients are satisfied with health services is an indicator and one of the determining factors for the good and bad quality of professional nursing care. For this reason, this study aims to analyze nurses' caring behavior and patient satisfaction at the X Hospital. This type of research is quantitative with a cross sectional approach. The sample selection technique used purposive sampling and calculations were carried out using the slovin formula so that a sample of 119 patient respondents was found, both BPJS patients and general patients. Data collection was carried out in October-December 2022. The analysis used in this study included the chi square test, as well as multivariate analysis using MANOVA. The processing of this research data uses the help of SPSS software. The results showed that the patient age was a variable that was not related to the Principles of Nursing Care Caring Behavior, Leadership and Management of Caring Behavior, and Inpatient Satisfaction of X Hospital. While the variables related to the Principles of Nursing Care Caring Behavior, Leadership and Management of Nursing Care Caring Behavior, and Inpatient Satisfaction of X Hospital are variables of patient gender, patient education level, patient payment type is expected that there will be an increase in Caring leadership attitude between nurses to improve a good work environment between nurses. For hospitals, management improvement is needed to evaluate the provision of health services to BPJS patients and general patients.

Keywords: Hospital, Nurse, Behavioral Caring, Patient Satisfaction

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1. INTRODUCTION

The importance of the hospital lies in the role of the hospital as a place of quality medical services according to the hospital class and as a place of education, and the development of science and technology in the field of medicine which is an important means in efforts to improve the quality of media services (Kementrian Kesehatan Republik Indonesia, 2022). If the role of the hospital is really implemented, criticism and criticism from various levels of society against the health service system that is less quality and unprofessional, or lack of empathy in conducting health service programs, especially in hospitals, is expected to be minimized. For this reason, understanding the needs and desires of consumers in this case patients is an important thing that affects patient satisfaction. To create patient satisfaction, a company or hospital must create and manage a system to obtain more patients and the ability to retain patients (Rahmayanti, 2019). Service in a hospital is one of the important factors, especially for hospital management because the impact of service determines the life and death of a hospital. For hospitals, the existence of good service certainly makes hospitals able to compete and remain in the minds of the community. For patients, this can be used as a factor to choose a good hospital. Satisfied patients are a valuable asset because if patients are satisfied they will continue to use the service of choice, but if they are dissatisfied they will tell others about their bad experience (Ula & Hayat., 2021).

Nursalam (2012) said the form of service that most affects patient satisfaction is nursing services. Nurses are the spearhead of health services. Whether or not patients are satisfied with health services is an indicator and one of the determining factors for the good and bad quality of nursing services. This is because nurses are health workers who have more time to interact with patients. Patient needs for increasingly complex health services will demand professional health services in overcoming health problems. One of the health services in Indonesia is nursing services. The success of hospital services is highly dependent on the performance of hospital nurses in carrying out nursing services in hospitals (Mellawani, 2017). They are patient-focused and goal-oriented, and each stage is interdependent and interconnected.

Nursing services are reflected in the implementation of professional nursing care. Professional and qualified nurses must have hard skills and soft skills, because a person's success in the world of work is influenced by soft skills (80%) and hard skills (20%) (Aisyah et al., 2022). *Soft skills* include the ability to communicate, build relationships with others, the ability to understand others, responsibility, cooperation, empathy and *caring*. The quality of nursing services is reflected in the implementation of professional nursing care. Professional is a combination of intellectual, technical and interpersonal knowledge and skills which in its implementation reflect *caring* behavior (Ariani, & Aini, 2018).

X Hospital is one of the class IV State Hospitals managed by the Tentara Nasional Indonesia Angkatan Darat (TNI AD). This hospital is a patient shelter for the Tentara Nasional Indonesia Angkatan Darat (TNI AD) and also accepts general patients and referral patients who come from puskesmas and have joined the Social Security Organizing Agency (BPJS). The expected pattern of health services is quality service to reduce morbidity and death rates and create a healthy and prosperous society (Manengal et al., 2022).

Jean Watson first put forward the theory of caring. Caring is an action used by nurses to provide health services to their patients. Caring is an attitude of caring, respect and respect for others. Watson in the Theory of Human Care, revealed that caring is needed between the giver and recipient of nursing care to improve and protect the patient, which in turn will affect the patient's ability to heal. Ten carative factors can reflect the caring behavior of a nurse. Caring behavior raised by nurses correctly will later affect patient satisfaction (Belladona et al., 2020). This will show that there is a direction in line from caring behavior to patient satisfaction, so this study aims to analyze caring behavior on patient satisfaction based on the characteristics of respondents (patients).

2. RESEARCH METHOD

This type of research is quantitative with a correlation study design and a *cross sectional* approach. The population of this study was all inpatients at the X Hospital amounting to 459 patients. The calculation of the sample size in this study used the slovin formula with a confidence level of 5% so that 119 patient respondents obtained the number of samples, both BPJS patients and general patients. Inclusion criteria in this study include: 1) Patients who have been treated for at least 3 days, 2) Patients who are able to communicate, 3) Patients who are willing to be respondents. Moderate Exclusion criteria in this study were inpatients in the VIP room. Data collection was carried out in October-December 2022 at the X Hospital. The dependent variables in this study were the principles of nursing care in caring behavior, leadership and management in nurse caring behavior, and inpatient satisfaction at X Hospital. The independent variables in the study were age, sex, education level, Patient Payment Type (BPJS patients and general patients). Data collection was carried out by distributing questionnaires that had been tested for validity and reliability. Validity and reliability tests were carried out on patients at Hospital X with a total of 30 samples. The validity test assessment uses the Pearson product moment formula, then the interpretation is seen from the calculated *r* value compared to the *r* table. Meanwhile, the reliability test uses the Cronbach Alpha (α) test, where the Cronbach's Alpha value is accepted if the α calculation is >0.60 . The test results show that 25 statements in the Caring behavior variable and 19 statements in the patient satisfaction variable are valid and reliable. The stages of data analysis include *editing, coding, processing, cleaning, and tabulating*. The analysis used in this research includes univariate analysis to determine the characteristics of respondents, bivariate analysis using the chi square test to test the relationship between variables (If the Sig value. or significance < 0.05 then the relationship between variables is related (significant)), and multivariate analysis using the MANOVA test to determine the variables that have the most influence on the dependent variable (If the Sig value. or significance < 0.05 , then the relationship between variables is related (significant) and the lower the relationship test value, the independent variable has the most influence on the dependent variable). The processing of this research data uses the help of SPSS software. The analyzed data is presented in the form of narrated tables. This research has received ethical approval from the KEPK Faculty of Public Health, Diponegoro University with No: 385/EA/KEPK-FKM/2022

3. RESULTS AND DISCUSSION

Table 1. General description of respondent characteristics

Characteristics of Respondents	Number of Respondents	
	f	%
Age		
≤36	35	42,7
>36	47	57,3
Gender		
Man	39	47,6
Woman	43	52,4
Education Level		
Low	37	45,1
High	45	54,9
Work		
Wiraswasta	19	23,2

Characteristics of Respondents	Number of Respondents	
	f	%
Civil Servants (PNS)	8	9,8
Farmer	11	13,4
Ibu Household	20	24,4
Teacher	6	7,3
Student	10	12,2
Private Employees	8	9,8
Types of Patient Payments		
General	19	23,2
BPJS	63	76,8
Treatment Room		
Anggrek	12	14,6
Aster	11	13,4
Cempaka	8	9,8
Dahlia	11	13,4
Flamboyant	12	14,6
Mawar	9	11,0
Melati	13	15,9
Teratai	6	7,3
Caring Behavior of Nurses		
Bad	55	67,1
Good	27	32,9
Patient Satisfaction		
Bad	54	65,9
Good	28	34,1

Table 1 shows that the majority of respondents have an age range of >36 years, this is shown by a percentage value of 57.3%. Male respondents have a percentage value of 47.6% with a total of 39 respondents, the majority of respondents have a high level of education with a percentage value of 54.9%, the majority of respondents work as entrepreneurs with a percentage value of 23.2%, the majority of respondents are BPJS patients with a percentage value of 76.8%, the majority of respondents are in Melati treatment room with a percentage value of 15.9%, the majority of respondents have poor Nursing Care Principles in caring behavior, this is shown by a percentage value of 67.1%. The majority of respondents have poor patient satisfaction, this is shown by a percentage value of 65.9%. Patient satisfaction with health services varies and is influenced by culture, socio-economic status, and patient characteristics. Patients or customers have different characteristics. These differences in characteristics will result in different perceptions regarding the assessment of health services, thus ultimately providing different levels of satisfaction (Lestari et al., 2019), (Aulia et al., 2022).

Table 2. Frequency Distribution of Respondents based on Independent Variables and Bivariate Analysis Results

Independent Variable	Dependent Variable Principles of Nursing Care in Caring Behavior		Bivariate Analysis p-Value	Independent Variable	Dependent Variable Patient Satisfaction		Bivariate Analysis p-Value
	Bad	Good			Bad	Good	
Age				Age			
≤36	32 (50,8)	31 (49,2)	0,481	≤36	28 (44,4)	35 (55,6)	0,074

Independent Variable	Dependent Variable Principles of Nursing Care in Caring Behavior		Bivariate Analysis p-Value	Independent Variable	Dependent Variable Patient Satisfaction		Bivariate Analysis p-Value
	Bad	Good			Bad	Good	
>36	33 (58,9)	23 (41,1)		>36	35 (62,5)	21 (37,5)	
Gender				Gender			
Male	31 (55,4)	25 (44,6)	0,045	Male	36 (30,3)	20 (16,8)	0,031
Female	34 (54,0)	29 (46,0)		Female	27 (22,7)	36 (30,3)	
Education				Education			
Low	26 (65,0)	14 (35,0)	0,015	Low	29 (24,4)	11 (9,2)	0,004
High	39 (49,4)	40 (50,6)		High	34 (28,6)	45 (37,8)	
Patient Payment Type				Patient Payment Type			0,008
General	13 (36,1)	23 (63,9)	0,013	General	6 (5,0)	17 (14,3)	
BPJS	52 (62,7)	31 (37,3)		BPJS	57 (47,9)	39 (32,8)	
Independent Variable	Dependent Variable Leadership and Management in Caring Behavior		Bivariate Analysis p-Value	Independent Variable	Dependent Variable Patient Satisfaction		Bivariate Analysis p-Value
	Bad	Good			Bad	Good	
Age				Age			
≤36	31 (49,2)	32 (50,8)	0,134	≤36	28 (44,4)	35 (55,6)	0,074
>36	33 (58,9)	23 (41,1)		>36	35 (62,5)	21 (37,5)	
Gender				Gender			
Male	33 (58,9)	23 (41,1)	0,038	Male	36 (30,3)	20 (16,8)	0,031
Female	31 (49,2)	32 (50,8)		Female	27 (22,7)	36 (30,3)	
Education				Education			
Low	24 (69,0)	16 (40,0)	0,043	Low	29 (24,4)	11 (9,2)	0,004
High	40 (50,6)	39 (49,4)		High	34 (28,6)	45 (37,8)	
Patient Payment Type				Patient Payment Type			0,008
General	13 (56,5)	10 (43,5)	0,011	General	6 (5,0)	17 (14,3)	
BPJS	51 (53,1)	45 (46,9)		BPJS	57 (47,9)	39 (32,8)	

Table 2 shows that the patient's age variablesignificance with the principle of nursing care caring behavior ($0.481 > 0.050$), with leadership and management of caring behavior ($0.134 > 0.05$), with patient satisfaction ($0.074 > 0.050$). This shows that the significance value between the Age Variable and Patient Satisfaction is greater than 0.05 so that it can be concluded that "There is no significant relationship between Age and Nursing Care Principles, Caring Behavior, Leadership and Management of Caring Behavior, and Patient Satisfaction at X Hospital". The results of the study support Mapiare's content, that increasing age is followed by physical, psychological, and intellectual development. Maturity in these factors makes a person have a better ability to judge things (Setiawan, 2007). The older a person gets, the ability of a person to analyze something, including in this case assessing the satisfaction or absence of services provided by the hospital will also increase (Nursalam, 2016). The results of Alrubaiee's research showed that age affects patient satisfaction (Alrubaiee & Alkaa'ida, 2011). Patient age was found to be the most frequent predictor of satisfaction of all socio-demographic factors considered (Muzer, 2020). Older patients tend to have higher satisfaction ratings than younger patients. The study conducted by Naidu also proves, that age shows a positive relationship with patient satisfaction (Naidu, 2009).

Based on table 2, it can be seen that the significance value of sex with the principle of nursing care caring behavior ($0.045 < 0.050$), with leadership and management of caring

behavior ($0.038 > 0.05$), with patient satisfaction ($0.031 < 0.050$). This shows that the significance value between the Sex Variable and Patient Satisfaction is smaller than 0.05 so that it can be concluded that "There is a significant relationship between patient gender and the principles of nursing care, caring behavior, leadership and management of caring behavior and patient satisfaction at Pematangsiantar Regional Hospital". This is related to the results of research previously conducted at the Sukanto Central Police Hospital and Sialolo Research whose results are in line with the results of this study (Setiawan et al., 2021). The results of Kotler and Keller's theory state that consumer satisfaction with a product of goods and services is strongly influenced by the characteristics of the consumers themselves. One of the characteristics in question is gender that the male gender tends to feel quickly satisfied with a product or service compared to women (Kotler & Keller, 2012). The difference between men and women lies in the nature of secularity, emotionality, activity of psychological functions and the nature of women being more emotional than men. Women are more dissatisfied because they use their emotional feelings to assess their level of satisfaction. It can be concluded that viewing patients as human beings who are disturbed by their health so that they need the help of nurses is appropriate. Providing nursing services paying attention to the gender of the patient in order to achieve satisfaction (Setiawan et al., 2021).

Based on table 2, it can be seen that the significance value of the level of education with the principle of nursing care caring behavior ($0.015 < 0.050$), with leadership and management of caring behavior ($0.043 > 0.05$), with patient satisfaction ($0.004 < 0.050$). This shows that the significance value between the Education Level Variable and Patient Satisfaction is smaller than 0.05 so that it can be concluded that "There is a significant relationship between Patient Education Level and Nursing Care Principles Behavioral Caring, Leadership and Management, and Patient Satisfaction at X Hospital". The results of this study are also in line with Sihaloho and Herliana's research saying there is a relationship between the level of education and patient satisfaction (Sihaloho & Herliana, 2017). The level of education is one of the factors that influence patients' expectations and perceptions of health services. A person who is knowledgeable and less educated, requires more special attention to medical services. A person with low education thinks things that are beyond his reasoning power, while people with higher education tend to meet their needs according to the power of reason they have because of the influence of the level or type of education so that people with higher education are more quickly satisfied than those with low education. Someone who has high knowledge and education has various desires for goods and services, so they try to fulfill according to the knowledge they have in achieving satisfaction (Sihaloho & Herliana, 2017).

Librianty (2018) found that there is a meaningful relationship between nurses' competence in providing nursing services with BPJS patient satisfaction in the inpatient room of Bangkinang Hospital. Based on the researcher's assumption that the competence of nurses in providing nursing services will underlie a person in getting a sense of satisfaction with hospital services, especially nursing. Nurse competence related to the ability to take action with the ability to provide nursing services to patients who need care is a very important domain. In this study, nurse competence is very important, because with the competence of nurses in providing nursing services to patients, it will certainly provide a sense of satisfaction for patients (Librianty, 2018). The competence possessed by nurses can also be described in the Assurance given by nurses to patients. Assurance is a competency possessed by service personnel that makes a sense of security and free of risk or danger, certainty that includes broad knowledge, attitudes and polite behavior towards patients so as to foster patient trust and confidence (Triwardani, 2017). The results showed 33.6% of respondents said they were rarely given guarantees regarding clinical procedures by nurses. Please note that a good guarantee will increase patient satisfaction with hospital services, thus making patients tend to trust the services carried out by the hospital (Mahmud, 2022).

Based on table 2, it can be seen that the significance value of the type of patient with the principle of caring behavior nursing care ($0.013 < 0.050$), with leadership and management of caring behavior ($0.011 > 0.05$), with patient satisfaction ($0.008 < 0.050$). This shows that the significance value between the Education Level Variable and Patient Satisfaction is smaller than 0.05 so that it can be concluded that "There is a significant relationship between Patient Payment Type and Nursing Care Principles Caring Behavior, Leadership and Management of C Caring Behavior, and Patient Satisfaction in X Hospital". The results of this study are in line with Hakim & Suryawati (2019) who said that there is a meaningful relationship between BPJS membership status and satisfaction. There are several reasons that cause differences in patient satisfaction between general Patient Payment Types and BPJS (Hakim & Suryawati, 2019). Romaji and Nasihah's (2018) research which states that the reason for BPJS patient satisfaction is different is patients who feel that BPJS patients sometimes seem long in certain services, for example the surgery schedule for BPJS patients is often postponed so that it gives the impression that BPJS patients are often made long, in contrast to Non-BPJS patients who are always on time (Romaji & Nasihah, 2018). This result is in contrast to Hadiati's research, which shows that the insurer is dissatisfied than the insured and this is because the insurer has an obligation to pay and tends to demand better service (Hakim & Suryawati, 2019).

Based on the results of the distribution of respondents' answers, it can be seen that 26.1% of respondents said they were rarely told by nurses that care services were continued by other nurses on duty. Handover activities in caring services show the existence of *caring leadership* activities between nurses (Wati, Ardani, & Dwiantoro, 2018). Results from research conducted by Solbakken *et al.*, (2018) show that caring in nursing leadership means nurturing and cultivating relationships to maintain the best care (Solbakken *et al.*, 2018). Good cooperation will certainly produce optimal performance regardless of the type of work it does. Cooperation can arise if there is good management from the leader. The leader's concern for nurses who carry out their duties is the basis for creating a conducive work atmosphere. The responsibility of nurses will also be done well if the leader is able to apply *caring leadership* to nurses. The optimal implementation of responsibilities must primarily be shown at the time of handover, because the records and events that occur in the space must be explained so that they are well understood by the officer who will be on duty next (Anggoro *et al.*, 2019), (Mirayani *et al.*, 2021). *Caring leadership* affects the burnout of implementing nurses as much as 66.17% (Indrayanti *et al.*, 2022). *Caring leadership* in nurse management produces maximum nurse performance and nurses will be more calm, focused on work (Dewi, 2022).

Table 3. Results of Simultaneous (Multivariate) MANOVA Comparison Test Analysis of Research Variables at X Hospital

Independent Variable	Dependent Variable	Sum of Square	Mean Square	F	Sig.
Gender	Principles of Nursing Care	16,238	16,238	1,275	0,026
	Leadership and Management	403,347	403,347	3,158	0,007
	Patient Satisfaction	1087,150	1087,150	8,351	0,005
Education	Principles of Nursing Care	56,320	56,320	4,546	0,035
	Leadership and Management	623,572	623,572	4,955	0,028
	Patient Satisfaction	789,655	789,655	5,949	0,016
Patient Payment Type	Principles of Nursing Care	82,069	82,069	6,744	0,011
	Leadership and Management	197,874	197,874	1,528	0,021
	Patient Satisfaction	1435,811	1435,811	11,287	0,001

Table 3 shows that the significance value of Gender to the Principle of Nursing Care = 0.026 (< 0.050), the significance value of Gender to Leadership and Management of Caring Behavior = 0.007 (< 0.050), the significance value of Gender to Patient Satisfaction = 0.005

(<0.050); significance value of Education Level to Nursing Care Principles = 0.035 (<0.050), significance value of Education Level to Leadership and Management of Caring Behavior = 0.028 (<0.050), significance value of Education Level to Patient Satisfaction = 0.016 (<0.050); significance value of Patient Payment Type to Nursing Care Principles = 0.035 (<0.050), significance value of Patient Payment Type to Leadership and Management of Caring Behavior = 0.028 (<0.050), significance value of Patient Patient Payment Types Satisfaction = 0.016 (<0.050). Based on table 3, it can be seen that there are three independent variables that simultaneously affect the three dependent variables in the X Hospital, namely the variables Gender, Patient Payment Types, Caring Behavior.

There are various studies that show factors that influence the caring behavior of nurses. Characteristics of age, gender, length of service, education, training, work stress, nurse reward have no effect on nurses' caring behavior. In addition, employment status and motivation influence nurses' caring behavior. Nurse employment status is a determinant factor that influences nurses' caring behavior (Aly et al., 2020). A person's psychology at work will affect the physical aspect of the person. A nurse who works with pressure from superiors will tire more easily and have an impact on the performance she produces. Therefore, the psychological atmosphere that supports nurses' performance must be conditioned by leaders through *caring leadership*. Through leaders who show concern for nurses, it will create a psychological atmosphere that supports nurses at work, so that the nurse's physical and stamina will be maintained, which will further have an impact on optimal performance consistently. How to organize work through *caring leadership* by paying attention to important factors that contribute to the nurse's personality, namely needs, organization, and leadership will produce the best care for patients (Solbakken et al., 2018). Research by Octavia et al., (2022) suggests research on nurse burnout by using various variables such as mental workload on nurses, hospital physical environment, distance of residence, and marital or family status to support the performance of hospital nurses (Octavia et al., 2022).

4. CONCLUSION

The patient age variable is variables that are not related to the Principles of Nursing Care Caring Behavior, Leadership and Management, and Inpatient Satisfaction of X Hospital. While the variables related to the Principles of Nursing Care Caring Behavior, Leadership and Management, and Inpatient Satisfaction of X Hospital are variables of patient gender, patient education level, patient payment type. It is expected for the nurses of the X Hospital to be more responsive to communicate and offer assistance to patients, as well as the need for an increase in caring leadership attitudes between nurses to improve a good work environment between nurses. In this study, there were limitations in the characteristics of the respondents who did not provide information on the type of disease for each research respondent. Suggestions for future researchers are to conduct research using more complete instruments of caring behavior and patient satisfaction, besides that the characteristics of respondents can also be more varied. For X Hospital, there is a need for management improvements in evaluating the provision of health services to BPJS patients and general patients as well as the need for regular improvement and evaluation of patient satisfaction using instruments that can be sharpened on caring behavior.

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