



## PATIENT'S FAMILY PERCEPTION OF SERVICE SATISFACTION NURSING CARE IN THE COVID-19 ERA IN THE CHILDREN'S ROOM INDRAMAYU HOSPITAL IN 2021

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### ABSTRACTS

Satisfaction of the patient's family with nursing care in the hospital is very important in providing an overall picture of the quality of health services, especially in the children's room. This study aims to determine the Patient's Family Perception of the Satisfaction of Nursing Care Services in the Covid-19 Era in the Children's Room of the Indramayu Hospital. This research is a quantitative research using descriptive method. The population in the study amounted to 265, with a sample of 100 respondents. The results of the study illustrate that 10% of respondents are satisfied with the Nursing Care Service, 7% are satisfied based on the reliability dimension, 21% are satisfied based on the responsiveness dimension, 8% are satisfied based on the assurance dimension, 67% are satisfied based on the empathy dimension, and 39% are satisfied based on the tangible dimension. The results of these studies have not reached the standard according to the Decree of the Minister of Health Number 129/Menkes/SK/II/2008 concerning Minimum Service Standards for Hospitals. For this reason, hospitals can carry out regular evaluations to find out what must be improved and maintained in the services provided so that hospitals can achieve better quality standards by making continuous quality improvements every three months with one month of data collection.

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## 1. INTRODUCTION

As providers of health services, hospitals compete in providing quality health services. Hospitals that can survive in the competition are hospitals that are oriented to customer satisfaction. The quality of services provided by nurses will be seen from the nursing care that has been given to patients.

Hospitals are required to provide quality services in accordance with established standards and can reach all levels of society. Efforts to meet these standards, one of which is how nurses help patients at every age level to meet their physiological needs. The fulfillment of physiological needs is more urgent to take precedence than other needs that exist at a higher level. Physiological needs include oxygen, fluids, nutrition, elimination, rest, sleep, freedom from pain, body temperature regulation, sexual and so on.

In nursing, a child who becomes an individual (client) is a child who is defined as someone who is less than 18 (eighteen) years of age in the period of growth and development, with special needs, namely physical, psychological, social, and spiritual needs. Children are individuals who are in a range of developmental changes starting from infancy to adolescence. In the process of developing children have physical, cognitive, self-concept, coping patterns and social behavior characteristics. Physical characteristics in all children may not be the same physical growth, as well as cognitive development sometimes sooner or later.

Acceptance of services provided by the hospital, is responded to by the patient's family or community according to the stimulus received through the five senses and processed through a thought process by the brain to then form an understanding (Sarwoto, Sarlito, W., 2012). Every individual, including a child who is sick and being cared for, is an individual who is in a state of helplessness because of the illness he is experiencing. In this condition it is necessary to touch a nurse who can provide peace and comfort.

The direct involvement of the family in caring for sick children plays a very important role in determining the success of nursing care, besides the family has a very important role in protecting children and has a role in meeting the needs of children. Another role is to maintain survival for children and families, maintain child safety and prosper children to achieve a better future for children, through these interactions in realizing child welfare (Wong, 2009).

The family is the basic unit of society. This basic unit has a strong influence on the development of an individual that can determine the success or failure of the individual's life (Friedman, 1996). The family functions as a critical intervention variable, where the purpose of the family is to act as an intermediary, which is to bear all the expectations and obligations of society and to shape and change it to a certain extent so that it can meet the needs and interests of each individual member in the family. The family establishes a new "acceptance" for society and prepares children to accept roles in society. (Williams and Leaman, 1973 in Friedman 1998).

The family is very concerned about the individual in total and pays attention to all aspects of his life. The highest priority of the family is usually the welfare of its family members. Family perception is a family opinion or thought on an object that states an event to convey knowledge, feelings, attitudes, and experiences to others.

Based on a preliminary study at the Indramayu Hospital, the researcher interviewed one of the nursing staff, that an objective assessment was to use standard application methods and instruments in the Covid-19 era, which was aimed at patients and families to obtain an overview of the patient's/family's perception of the satisfaction of care services. This treatment has not yet been carried out. Researchers also received information that there has been no previous research on family perceptions of satisfaction with nursing care services

### **Measurement of Customer Satisfaction**

There are several ways to measure customer satisfaction; Complaint and suggestion system, Customer satisfaction survey, Shadow buyer and Customer loss analysis. In addition, there are several measurement techniques for satisfaction, namely rating techniques, gap measurements, and satisfaction indexes.

According to Leonard L. Barry and Parasuraman "Marketing services are competitive through quality" (New York Freepress, 1991: 16) quoted by Parasuraman and Zeithaml (2001) in Nursalam, 2014 identify five groups of characteristics used by customers in evaluating service quality, including: other; 1) Tangible (reality), namely the appearance of physical facilities, interesting communication material equipment, and others. 2) Empathy, namely the willingness of employees and employers to give personal attention to consumers. 3) Quick response, namely the willingness of employees and employers to help customers and provide services quickly and hear and resolve complaints from consumers. 4)

Reliability, namely the ability to provide services as promised, reliable and accurate and consistent. 5) Certainty, namely the ability of employees to generate confidence and trust in the promises that have been made to consumers.

The main indicators of the quality of health services in hospitals are:

1. Patient safety, which includes: the number of nosocomial infections, the incidence of patient falls/accidents, decubitus, errors in drug administration, and the level of patient satisfaction with health services.
2. Pain management and comfort
3. The level of patient satisfaction with services
4. Self care
5. Patient anxiety
6. Behavior (knowledge, attitude, skills) of the patient.

### **Nursing Care**

Optimal nursing care services will continue to be a demand for health care organizations. Nursing care services must comply with nursing intervention standards which are the scope of nursing actions to fulfill basic human needs. These include Oxygen needs, fluid and electrolyte needs, elimination needs, safety needs, physical hygiene and comfort needs, rest and sleep needs, movement and physical needs, spiritual needs, emotional needs, communication needs, needs to prevent and overcome psychological risks, needs treatment, and help the healing process, Counseling and Rehabilitation.

### **Conceptual Framework and Operational Definition**

The research concept framework is a description and visualization of the relationship or relationship between one concept to another, or between one variable and another variable from the problem under study. Concept is an abstraction formed by generalizing an understanding. A concept cannot be measured and observed directly. Concepts must be described in the form of variables so that they can be measured and observed (Notoatmodjo, 2012).

Variables can be interpreted as measures or characteristics possessed by members of a group that are different from those of other groups (Notoatmodjo, 2012). The variable to be studied is patient satisfaction and there are five sub-variables used, namely reliability,

responsiveness, assurance, empathy, and physical evidence. The conceptual framework is as follows: The variable to be studied is the perception of patient satisfaction and there are five sub-variables used, namely reliability, responsiveness, assurance, empathy, and tangible. The conceptual framework is as follows:

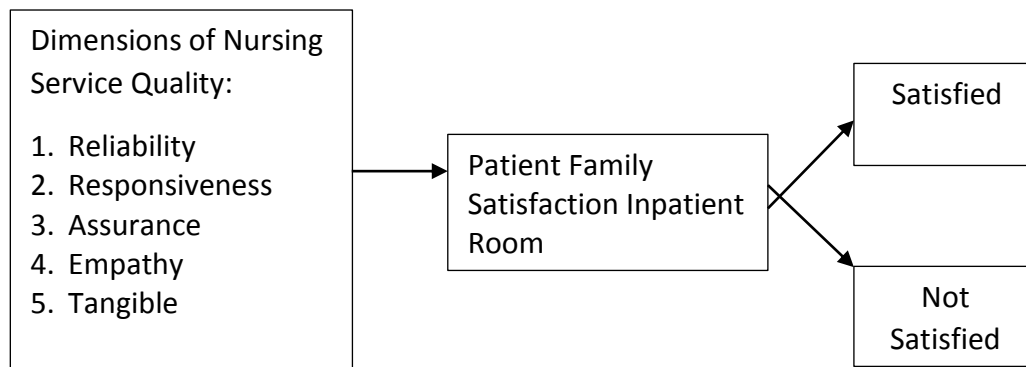


Figure 1 Conceptual Framework

Source: Parasuraman, 2001 in Nursalam, 2014

## 2. METHODS

### Research Design

This study uses a descriptive method, which is a study conducted to describe or describe a phenomenon that uses a quantitative approach, namely an approach that allows recording and data analysis using statistical calculations (Arikunto, 2013).

### Population and Sample

The population in this study were all patients in the last three months of 2020 who were under treatment in the Children's Room, which amounted to 265, while the sample used was 100.

### Sampling Techniques

The sampling technique in this study uses Non-Random (non-Probability) sampling, where sampling is not based on calculated possibilities, but solely based on practical aspects (Notoatmodjo, 2010). The sampling method is accidental, that is, anyone who coincidentally meets a researcher can be used as a sample, if it is deemed that the person who happened to be met is suitable as a data source (Setiadi, 2013).

The sampling technique in this study was by considering the inclusion and exclusion criteria. The inclusion criteria in this study are as follows:

1. Parents accompanying their biological children who are being cared for.

2. Parents accompanying adopted children who are being cared for.
3. Family members who live together in one household and accompany children who are being cared for.
4. Patients/children who have received treatment for more than 24 hours in an inpatient room.
5. Parents/Family Patients are willing to become respondents with evidence of filling out a statement sheet that is willing to be a respondent in the study.

The exclusion criteria in this study are:

1. Neighbors from families whose children are being cared for
2. Visitors
3. Families refuse to be respondents.
4. Families whose children are cared for in a coma

### **Research Ethics**

Ethics in research refers to ethical principles applied in research activities (Notoatmodjo, 2012). So, the ethics that must be considered are as follows:

1. Right of self-determination.
2. Right to privacy and dignity
3. Right to anonymity and confidentiality.
4. Right to fair treatment.
5. Right to protection from discomfort and harm

### **Data Collection Tools**

In this study using a questionnaire instrument as a measuring tool. A questionnaire is a type of written question that is used to obtain information from the respondent in the sense of a report about his personality or things he knows (Arikunto, 2012).

The data collection tool or instrument used in this study was a questionnaire using a checklist type of questionnaire to determine the Patient's Family Perception of the Satisfaction of Nursing Care Services in the Covid-19 Era in the Children's Room of the Indramayu Hospital in 2021. The questionnaire can be in the form of closed or open

questions, can be given to respondents directly or sent by post, or the internet (Sugiyono, 2017).

### **Validity and Reliability Test**

A valid instrument means that the instrument can be used to measure what should be measured (Sugiyono, 2010). The general requirements of the research instrument are declared valid, namely if the correlation result ( $r_{count}$ ) is greater than the value of  $t$  at a significance level of 5%, using a 95% level of significance then:

If  $r_{count} \geq r_{table}$ , 0.361 means valid

If  $r_{count} < r_{table}$ , 0.361 means invalid

The instrument in this study is a standard instrument issued by the ministry of health and has been retested. The result is that all questionnaires score  $> 0.361$ . While the value of Cronbach's alpha is 0.909.

### **Data collection procedure**

Data collection is a summary of research activities that include data collected to answer research problems, data collection methods, and data collection tools (Sudibyo, 2013). Data was collected by distributing questionnaires to respondents at the Indramayu District Hospital according to the inclusion criteria, then explaining how to fill them out.

### **Data processing**

After the data has been collected, then what is done is data processing. The data processing stages are Editing, Coding, Processing, Tabulation and Cleaning

### **Data analysis**

Data analysis was used to describe the magnitude and distribution of events related to research variables presented in the form of frequency and percentage distributions. Data analysis in this study includes Univariate Analysis. According to Notoatmodjo (2014), univariate analysis aims to explain or describe the characteristics of research variables carried out in stages for each variable from the results of the study. In general, this analysis only produces the distribution and percentage of each variable.

The form of univariate analysis depends on the type of data. This study describes the family's perception of satisfaction with nursing care services with five sub-variables, namely reliability, responsiveness, assurance, empathy, tangible. Researchers used a Likert scale in this study. According to Sugiyono (2012) the Likert scale is used to measure the attitudes, opinions and perceptions of a person or group of events or social phenomena.

The results of all the questions on the questionnaire are calculated as a whole and if the final calculation result of the respondent is 90% then the quality of nursing services provided is satisfied but if the result of the calculation is <90% the quality of nursing services provided is not satisfactory.

### 3. RESULTS AND DISCUSSION

Characteristics of respondents in this study include the latest education, type of work and length of hospitalization, which will be presented in the form of a frequency table.

Table 1 Distribution of Respondents Based on Education, type of work and length of stay in the Children's Room of Indramayu Hospital

Variabel	Kategori	Frekuensi	Valid Percentage	Kumulatif Percentage
<b>Education</b>	Did not pass school	2	2.0	2.0
	Elementary school	30	30.0	32.0
	Junior high school	28	28.0	60.0
	Senior High School	37	37.0	97.0
	Diploma 3	1	1.0	98.0
	Bachelor 1	2	2.0	100.0
	Total	100	100.0	
<b>Profession</b>	government employees	1	1.0	1.0
	private employees	32	32.0	33.0
	Other	67	67.0	100.0
	Total	100.0	100.0	
<b>Long Child Care</b>	One day	1	1.0	1.0
	2 days	42	42.0	43.0
	3 days	30	30.0	73.0
	4 days	15	15.0	88.0
	5 days	5	5.0	93.0
	6 days	5	5.0	98.0
	7 days	2	2.0	100.0
	Total	83	100,0	

The research data shown in table 1 shows that many respondents have high school education, namely 37%, while the second place is with elementary school education, which



is 30%. On the work variable, 67% of respondents chose others, which included housewives, farmers, and traders, while for the variable length of time the child was cared for, the highest was the child who was being treated for two days, namely 42% and the second order was three days in a year. treatment is 30%.

### **Perception of the patient's family on the satisfaction of nursing care services**

The Patient's Family Perception of the Satisfaction of Nursing Care Services in the Covid-19 Era in the Children's Room of the Indramayu Hospital is shown in the table below.

Table 2 Frequency distribution of patient's family perception of satisfaction with nursing care services in the children's room at the Indramayu Hospital

Number	Category	Frequency	Percent (%)
1.	Satisfied	10	10
2.	Not Satisfied	90	90
	Total	100	100

Based on the results of the study, it was found that the perception of the patient's family on the satisfaction of nursing care services in the Children's Room at the Indramayu Hospital, as many as 90% percent of respondents said they were not satisfied with the services provided by the hospital. These results are not in line with the decision of the Minister of Health of the Republic of Indonesia Number: 129/Menkes/SK/II/2008 concerning Minimum Service Standards for Hospitals, where the standard customer satisfaction indicator is 90%.

The results of this study indicate that nurses have not been able to provide satisfactory service to the patient's family, for example, not all nurses have introduced themselves to patients and families when changing duties, not all nurses who handle these patients ask / pay attention to the usual amount of food and drink. child spend.

Regarding children who are not able to feed themselves, as many as 79%, respondents stated that they were not satisfied, and nurses had not implemented it to feed their children. To provide nursing care to children, there are differences compared to adults, it must be adjusted to the child's age and growth and development, because if the treatment is not optimal it will not have a physiological or psychological impact on the child himself.

According to Irawan in Nursalam (2014) satisfaction is the perception of a product or service that has met its expectations. So, customer satisfaction is the result of the accumulation of consumers or customers in using products or services. Good service is a service that focuses on the needs of the patient. First impressions in service delivery can affect the satisfaction of service recipients. For example: fast, responsive, and friendly service in providing nursing services (Nursalam, 2014).

Providing nursing care to children, it is necessary to involve parents in caring for children, when their children are sick and being cared for. Because children cannot be far from their parents and parents have resources that can help children heal, it is very important for families to be involved in care, where the term is family centered care.

Family Centered Care is defined as a philosophy of family-centered care, recognizing the family as a constant in a child's life. Family Centered Care believes in individual support, respecting, encouraging and enhancing the strengths and competencies of families.

Nursing interventions using a family centered care approach emphasize that policy making, planning care programs, designing health facilities, and day-to-day interactions between clients and health workers must involve the family. Families are given the authority to be involved in the care of clients, which means that families with family backgrounds, expertise and competencies provide positive benefits in child care. Giving authority to the family means opening the way for the family to know the strength, ability of the family in caring for children.

**Perception of the patient's family on the satisfaction of nursing care services in the Covid-19 Era in the Children's Room at the Indramayu Hospital based on the reliability dimension.**

The results of the study on the satisfaction of nursing care services based on the reliability dimension can be seen in table 3.

Table 3 Patient's Family Perception of Nursing Care Services Based on Reliability Dimensions in the Children's Room at Indramayu Hospital

Number	Category	Frequency	Percent (%)
1.	Satisfied	7	7
2.	Not Satisfied	93	93
	Total	100	100

Based on the results of the study, it was found that the patient's family perception of the satisfaction of nursing care services based on the reliability dimension showed that 93 respondents (93%) stated that they were not satisfied, not in accordance with the decision of the Minister of Health of the Republic of Indonesia Number: 129/Menkes/SK/II/2008 concerning Service Standards. Minimum Hospital, where the standard customer satisfaction indicator is 90%.

Some of the provisions included in reliability in this study are, nurses have the ability in knowledge, expertise, independence, mastery and high work professionalism, so that the work activities carried out produce a satisfactory form of service. Nurses must have reliable abilities, know about the ins and outs of work procedures, work mechanisms, correct various deficiencies or deviations that are not in accordance with work procedures, and nurses must be able to provide skilled services according to their level of work skills in carrying out efficient service activities. and effective.

The demand for employee reliability in providing fast, precise, easy and smooth service is a condition of assessment for respondents who are served in showing the actualization of employee work in understanding the scope and job descriptions that are the attention and focus of every employee in providing their services (Nursalam, 2014).

#### **Perception of the patient's family on the satisfaction of nursing care services in the Covid-19 Era in the Children's Room at the Indramayu Hospital based on the dimension of responsiveness.**

The results of the study on the satisfaction of nursing care services based on the dimensions of responsiveness can be seen in table 4.

Table 4 Patient's Family Perception of Nursing Care Services Based on Responsiveness

Dimensions in the Children's Room of Indramayu Hospital			
Number	Category	Frequency	Percent (%)
1.	Satisfied	21	21
2.	Not Satisfied	79	79
Total		100	100

The results showed that the patient's family perception of nursing care services based on the responsiveness dimension as many as 79 respondents (79%) were dissatisfied. Referring to the Decree of the Minister of Health Number 129/Menkes/SK/II/2008

concerning Minimum Service Standards for Hospitals which standardize 90% of customer satisfaction indicators must be met.

The dimensions of responsiveness in this study include how nurses check intravenous fluids/drops in children who have infusions and the area around the infusion needle, the nurse's responsiveness when having difficulty defecating, by recommending eating fruits, vegetables, drinking enough, and moving a lot. In addition, nurses are also responsive in helping children when defecating or urinating, whether nurses put curtains/blankets, close doors/windows, let visitors out of the room, and nurses must be responsive to the cleanliness of the room.

**Perception of the patient's family on the satisfaction of nursing care services in the Covid-19 Era in the Children's Room at the Indramayu Hospital based on the assurance dimension.**

The results of the study on the satisfaction of nursing care services based on the assurance dimension can be seen in table 5.

Table 5 Patient's Family Perception of Nursing Care Services Based on Assurance Dimensions in the Children's Room at Indramayu Hospital

Number	Category	Frequency	Percent (%)
1.	Satisfied	8	8
2.	Not Satisfied	92	92
	Total	100	100

Based on the results of the study, it was found that the patient's family perception of the satisfaction of nursing care services based on the assurance dimension showed that 92 respondents (92%) stated that they were not satisfied, not in accordance with the decision of the Minister of Health of the Republic of Indonesia Number: 129/Menkes/SK/II/2008 regarding Hospital Minimum Service Standards, where the standard customer satisfaction indicator is 90%.

In this dimension there are several components as a guarantee of satisfaction for the patient's family, the first is the hospital guarantees that the room is not slippery, the bathroom is always clean, odorless, and bright enough. The two nurses help bathe the child, as long as they are not able to bathe themselves, the three nurses help in personal hygiene,

the cleanliness of the bed is always clean and the nurse is able to explain the consequences of: lack of movement, lying too long.

**Perception of the patient's family on the satisfaction of nursing care services in the Covid-19 Era in the Children's Room at the Indramayu Hospital based on the empathy dimension.**

The results of research on satisfaction with nursing care services based on the dimensions of empathy can be seen in table 6.

Table 6 Patient's Family Perception of Nursing Care Services Based on Empathy Dimensions in the Children's Room at Indramayu Hospital

Number	Category	Frequency	Percent (%)
1.	Satisfied	67	67
2.	Not Satisfied	33	33
	Total	100	100

Based on the results of the study, it was found that the patient's family perception of the satisfaction of nursing care services based on the empathy dimension showed that 67 respondents (67%) were satisfied, not in accordance with the decision of the Minister of Health of the Republic of Indonesia Number: 129/Menkes/SK/II/2008 concerning Minimum Service Standards. Hospital, where the standard customer satisfaction indicator is 90%.

In this dimension of empathy, there is a concern, seriousness, sympathy, understanding and involvement of parties with an interest in the service. There are several components related to the dimension of empathy, among others, firstly, the nurse provides an explanation of the available facilities and how to use them, the rules / regulations that apply in the hospital starting from the beginning of hospital admission. Second, the nurse always calls the child's name correctly according to the patient's pleasure. Third, the nurse always supervises the child's condition regularly in the morning, afternoon and evening. Fourth, nurses immediately provide assistance when needed by patients, and fifth, nurses are always polite and friendly.

Perception of the patient's family on the satisfaction of nursing care services in the Covid-19 Era in the Children's Room at the Indramayu Hospital based on the tangible dimension.

The results of the study on the satisfaction of nursing care services based on the tangible dimensions can be seen in table 7

Table 7 Patient's Family Perception of Nursing Care Services Based on Tangible Dimensions in the Children's Room at Indramayu Hospital

Number	Category	Frequency	Percent (%)
1.	Satisfied	39	39
2.	Not Satisfied	61	61
	Total	100	100

Based on the results of the study, it was found that the patient's family perception of the satisfaction of nursing care services based on the tangible dimension showed as many as 61 respondents (61%) stated that they were not satisfied, not in accordance with the decision of the Minister of Health of the Republic of Indonesia Number: 129/Menkes/SK/II/2008 concerning Service Standards. Minimum Hospital, where the standard customer satisfaction indicator is 90%.

In this tangible dimension, service recipients can feel the physical evidence shown by the service developer, so that the services provided provide satisfaction. Services in the physical evidence dimension can usually be in the form of available service facilities and infrastructure, service technology used, service provider performance accordance with the characteristics of the service determined by the service provider.

The components related to the tangible dimension are; First, the patient's family must know the nurse who is responsible for each change of service. Second, the nurse always gives an explanation before taking the action of the nurse/treatment. Third, nurses are always willing to listen and pay attention to every complaint from the patient's family. Fourth, nurses must help prepare medicines, and nurses must be able to provide explanations to the patient's family, regarding follow-up care / treatment / examination after the patient is allowed to go home.

#### 4. CONCLUSION

Based on the results of research and discussion on the Patient's Family Perception on the Satisfaction of Nursing Care Services in the Covid-19 Era in the Children's Room of the Indramayu Hospital in 2021, it can be concluded as follows:

- a. Patients' Families Perceptions of Satisfaction with Nursing Care Services During the Covid-19 Era in the Children's Room at the Indramayu Hospital, 10% of respondents said they were satisfied.
- b. Perception of the patient's family on the satisfaction of nursing care services. In the Covid-19 Era in the Children's Room at the Indramayu Hospital based on the reliability dimension, 7% of respondents said they were satisfied.
- c. The patient's family perception of the satisfaction of nursing care services In the Covid-19 Era in the Children's Room at the Indramayu Hospital based on the responsiveness dimension, 21% of respondents said they were satisfied.
- d. Perception of the patient's family on the satisfaction of nursing care services In the Covid-19 Era in the Children's Room at the Indramayu Hospital based on the assurance dimension, 8% of respondents said they were satisfied.
- e. The patient's family perception of the satisfaction of nursing care services In the Covid-19 Era in the Children's Room at the Indramayu Hospital based on the empathy dimension, 67% of respondents stated they were satisfied.
- f. The patient's family perception of the satisfaction of nursing care services In the Covid-19 Era in the Children's Room of the Indramayu Hospital based on the tangible dimension, 39% of respondents said they were satisfied.

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