

Effect of patient-centered care implementation and quality of service on patient satisfaction

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SERAMBI

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Abstract

This study aims to determine how implementing patient-centered care and service quality affects patient satisfaction at MM Hospital in Medan. This study utilizes a quantitative research methodology, employing multiple linear regression analysis. All statistical tests were conducted using SPSS version 25 software. The study's population includes patients at MM Hospital in Medan in 2024. Primary data was gathered through questionnaires distributed to 100 hospital patients. Additionally, secondary data was collected from journals, books, and previous research relevant to the topic. The findings indicate that implementing patient-centered care does not significantly affect patient satisfaction; however, implementing service quality has a significant impact on patient satisfaction. This research provides practical insights, helping hospitals assess patient satisfaction levels during each visit to MM Hospital.

Public interest statements

Recognizing the crucial role of service quality in patient satisfaction, the hospital should focus on enhancing service quality in all departments. This improvement can involve training staff in effective communication, responsiveness, and empathy, ensuring patients feel valued and cared for during their visits.

Keywords: Patient satisfaction, implementation of patient centered care, service quality.

Paper type: Research paper

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ARTICLE INFO:

Received 9/10/2024
Revised: 10/6/2024
Accepted: 10/11/2024
Online First 10/29/2024



SERAMBI: Jurnal Ekonomi
Manajemen dan Bisnis Islam,
Vol 7, No. 1, 2025, 23-34
eISSN 2685-9904



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Abstrak

Penelitian ini bertujuan untuk mengetahui bagaimana penerapan perawatan yang berpusat pada pasien dan kualitas layanan memengaruhi kepuasan pasien di Rumah Sakit MM, Medan. Penelitian ini menggunakan metodologi penelitian kuantitatif, dengan menggunakan analisis regresi linier berganda. Semua uji statistik dilakukan dengan menggunakan perangkat lunak SPSS versi 25. Populasi penelitian ini meliputi pasien di Rumah Sakit MM Medan pada tahun 2024. Data primer dikumpulkan melalui kuesioner yang disebarakan kepada 100 pasien rumah sakit. Selain itu, data sekunder dikumpulkan dari jurnal, buku, dan penelitian sebelumnya yang relevan dengan topik tersebut. Temuan penelitian menunjukkan bahwa penerapan perawatan yang berpusat pada pasien tidak secara signifikan memengaruhi kepuasan pasien; namun, penerapan kualitas layanan memiliki dampak yang signifikan terhadap kepuasan pasien. Penelitian ini memberikan wawasan praktis, membantu rumah sakit menilai tingkat kepuasan pasien selama setiap kunjungan ke Rumah Sakit MM.

Pernyataan kepentingan publik

Menyadari peran penting kualitas layanan dalam kepuasan pasien, rumah sakit harus fokus pada peningkatan kualitas layanan di semua departemen. Peningkatan ini dapat melibatkan pelatihan staf dalam komunikasi yang efektif, daya tanggap, dan empati, memastikan pasien merasa dihargai dan diperhatikan selama kunjungan mereka.

Kata kunci: Patient satisfaction, implementation of patient centered care, service quality.

Introduction

Law Number 36 of 2009 of the Republic of Indonesia emphasizes that health is a fundamental human right and a key component of welfare, aligned with the ideals of Pancasila and the 1945 Constitution. It asserts that efforts to maintain and enhance public health should adhere to nondiscrimination principles, participation, and sustainability, contributing to developing Indonesian human resources and strengthening national resilience and competitiveness. The law underscores that national development must prioritize public health, a collective responsibility of the government and the community. Additionally, it recognizes that the previous health law, Law No. 23 of 1992, is outdated and no longer meets the current societal needs, necessitating its repeal and replacement with a new health law. This law is expected to improve the quality and accessibility of health services in Indonesia comprehensively, make the health system more resilient and independent, and support the development of quality and productive human resources. Patient-centered health care has become the main focus of efforts to improve service quality in various health systems worldwide. This concept places the patient at the center of the medical decision-making process. It considers their individual preferences, needs, and values.

The quality of health services refers to the ability to meet users' needs, reflecting the average level of satisfaction within the population and adhering to professional standards and ethical codes (Mangindara et al., 2022). Quality can be understood as a generic concept that applies across various fields. It is essential not only for ensuring the sustainability of a business but also because quality itself is inherently valuable. Quality is often assessed based on moral

and emotional considerations, established standards, and customer needs (Abuddin Nata et al., 2023).

One crucial aspect of high-quality services in hospitals is the implementation of patient-centered Care. Patient-centered Care is a vital component of quality healthcare services. It is increasingly recommended for inclusion in health service delivery training. The application of Patient-Centered Care in healthcare varies internationally (Ernawati & Lusiani, 2019). This approach involves a collaborative effort among healthcare workers, patients, and families to support the treatment needs of patients in hospitals (Melda Yulia, 2023).

Previous studies, including those by Sinaga (2021), indicate a relationship between implementing Patient-Centered Care and the quality of health services at Dr. Pirngadi Hospital in 2020. Additionally, research conducted by Hasna Tunny (2022) found that while most dimensions of Patient-Centered Care yielded good results, some dimensions received only satisfactory evaluations. Ince Umami Kalsum Aziz (2022) also highlighted a connection between patient satisfaction and the quality of health services. Sinaga's research (2021) is limited by focusing exclusively on one hospital, which may restrict the generalizability of the findings to other hospitals with different characteristics. Hasna Tunny's study (2022) lacks an in-depth analysis of the factors contributing to the varying results across dimensions of Patient-Centered Care, which undermines the comprehensiveness of recommendations for service improvement. Moreover, Ince Umami Kalsum Aziz's research (2022) primarily examines the general relationship between patient satisfaction and service quality without addressing specific dimensions of Patient-Centered Care that could influence patient satisfaction. This study evaluates the impact of Patient-Centered Care and service quality on patient satisfaction at Mitra Medika Hospital in Medan Tembung. Its uniqueness lies in the focus on analyzing each dimension of Patient-Centered Care and providing detailed explanations of how each dimension contributes to improving service quality.

Case description

Customer Satisfaction

According to Irawan (2021, p. 54), customer satisfaction is a feeling in response to the goods or services consumed. Kotler and Keller (2016: 33) define customer satisfaction as follows: "Satisfaction reflects a person's assessment of the perceived product performance about expectations. If the performance falls short of expectations, the customer feels disappointed. If the performance meets expectations, the customer is satisfied. If it exceeds expectations, the customer is pleased." Bahrudin (2016) states that customer satisfaction is an evaluation based on purchasing decisions and experiences using or consuming goods or services. Additionally, Tjiptono (2019) describes customer satisfaction as the buyer's assessment of the seller's offer when it exceeds their expectations. From these definitions, we can conclude that customer satisfaction results from a comparison between expectations and the performance of a product or service.

Implementation of Patient-Centered Care

Implementing patient-centered care is a dynamic and multifaceted process carried out by nurses, grounded in a comprehensive understanding of the concept. This approach involves recognizing and respecting the patient's values, needs, and choices (Rahman, 2020). By focusing on personalization rather than merely completing tasks, patient-centered care enhances patients' overall quality of care (Rahman, 2020). Given this shift, nurses are crucial in implementing strategies that address these issues. Effective communication between nurses and patients is at the heart of successful patient-centered care. Patient-centered care prioritizes patients' needs and preferences while providing support and understanding to help them make informed decisions about their care. Building strong relationships between healthcare providers, patients, and their families is essential to this process. As Batubara (2020) noted, family involvement in healthcare during treatment is vital. When families are present to support patients, it can significantly reduce stress, increase enthusiasm, and lessen post-treatment trauma for the patient.

Implementing patient-centered care (PCC) offers several advantages, such as shifting the focus from a patient's diagnosis to the specific problems they experience, fostering a deeper connection between patients and doctors through empathy and effective communication, and customizing treatments and medications based on individual patient characteristics, including genetics and metabolism. Additionally, patients gain control over their care by deciding who can visit them. Factors that influence the successful implementation of PCC include the need for a strategic vision and committed leadership to guide daily operations and the engagement of patients and their families, who can provide valuable support and information. Creating a respectful and dignified environment for staff and patients is essential, along with systematic measurement and response to improve healthcare quality. Finally, technological support is crucial in facilitating communication and ensuring that patients and families are actively involved in the care process.

Five key indicators guide the implementation of patient-centered care (PCC). First, patient Involvement in Decision Making emphasizes patients' active engagement in their care decisions, allowing them to discuss treatment options, risks, and benefits, which fosters a sense of ownership over their health. Second, Clear and Effective Communication is crucial, as it ensures that healthcare providers convey understandable information about health conditions and treatments while listening to patients, making them feel valued. Third, Empathy and Emotional Support play a significant role in healthcare, as providers who demonstrate empathy can help alleviate patients' anxiety and stress, creating a more comfortable environment. Fourth, Individualization of Care focuses on tailoring treatment plans to meet each patient's unique needs, preferences, and values, recognizing the diversity in backgrounds and conditions. Lastly, Service Coordination involves effective management among various healthcare providers to deliver comprehensive and integrated care, reducing confusion and enhancing the overall efficiency and effectiveness of patient care (Putra et al, 2019).

From another perspective, it can be related to the basic principles of patient-centered care in this concept, which is more related to modern principles in health care practice, which focus on placing the patient at the center of service delivery in QS. At-Taubah verse 128 explained that:

۱ عَلَيَّكُمُ الْمُؤْمِنِينَ رَءُوفٌ رَحِيمٌ مَا عَنِتُّمْ حَرِيصٌ عَلَيْهِ قَدْ جَاءَكُمْ رَسُولٌ مِّنْ أَنفُسِكُمْ عَزِيزٌ

Meaning: Indeed, a messenger from your own people has come to you. He has felt your sufferings, is anxious for you (faith and salvation), and is merciful and compassionate towards the believers. This verse describes the prophet Muhammad, who has empathy and concern for his people. This is connected to the principle of patient-centered care, which concerns the care and empathy of health workers.

Quality of Service

The direct attributes of a product, such as performance, reliability, ease of use, and aesthetics, traditionally define quality. It reflects how well a product meets specific needs, and low quality arises from a failure to meet these needs. Quality is distinct from luxury; a product or service that meets all required specifications can be considered high quality, regardless of its form. Achieving quality requires hard work and must be measurable and beneficial (Ruly Prapitasari et al., 2020). In healthcare, quality refers to services that satisfy users according to population averages and adhere to professional standards and ethical codes (Ruly Prapitasari et al., 2020). Moenir, as cited by Arif et al. (2020), describes service as an activity performed by individuals or groups, utilizing material resources through specific systems, procedures, and methods to fulfill others' needs in alignment with their rights. Service involves an interaction between the recipient and the provider, supported by an organization or company (Haryanto et al., 2021). Service quality encompasses the ability to plan, create, and deliver products that significantly benefit society. It includes ensuring product availability, responsiveness, accuracy in service provision, and minimizing wait times. Ultimately, service quality should enhance customer satisfaction and comfort (Nurlaila et al., 2020).

According to Parasuraman et al., as cited by Antonius (2020), determinants of service quality can be grouped into five main factors: tangibles, which refer to the physical appearance of facilities and staff; reliability, involving the consistent and accurate delivery of promised services; responsiveness, highlighting the ability to assist customers quickly and effectively; assurance, encompassing employees' knowledge and skills that inspire trust; and empathy, which involves providing personal care and attention to customers. In the healthcare context, key indicators of service quality include the cleanliness and comfort of facilities, which enhance patient safety and experience; the speed of service, which addresses the time taken for patients to receive care; the quality of medical staff, reflecting their knowledge and communication skills; effective communication and information sharing, which help patients understand their health conditions; and overall satisfaction, which captures the complete healthcare experience and indicates how valued and content patients feel with the services received.

The concept of ihsan (doing good), ihsan means doing good, doing the best, and being the best. In the context of health care, ihsan encourages medical personnel to provide services that are attentive, empathetic, and oriented to the needs of patients. In the Qur'an there is a verse that explains about this ihsan, namely in QS: An-Nahl: 90

الْفَحْشَاءَ عَنْ وَيُحْيِي الْقُرْبَىٰ ذِي وَائْتَأَىٰ وَالْإِحْسَانَ بِالْعَدْلِ يَأْمُرُ اللَّهُ إِنَّ
ۙ يَعِظُكُم لَعَلَّكُمْ تَذَكَّرُونَ وَالْمُنْكَرَ وَالْبَغْيَ

Meaning: Verily, Allah enjoins justice, doing good, and aiding relatives. The God (also) forbids evil deeds, wrongdoing, and enmity. He gives you lessons that you may remember.

Hypothesis Development

Patient-centered care (PCC) can significantly influence patient satisfaction. The satisfaction patients derive from the services provided by hospitals is evident within the community of health service users. Patient services are activities designed to meet patients' needs, desires, and expectations. When the services received align with patient expectations, it results in a satisfactory experience. To effectively satisfy patients, it is essential to identify their needs and desires. Understanding each patient's characteristics can help determine these. Hospitals must comprehend these characteristics to make informed decisions about their services, ensuring that the offerings meet the community's general needs and individual patients' specific needs. PCC facilitates a reciprocal relationship between service providers and patients, which helps reduce conflicts arising from insufficient communication and information. Implementing PCC in hospitals requires involvement from all stakeholders, including leaders, doctors, nurses, and non-medical personnel. Strategies for effective PCC implementation include training, leadership development, rewards and incentives, and initiatives for quality improvement. Furthermore, PCC enhances patient autonomy and empowers healthcare workers to plan and execute their work based on patient needs (Ilham, 2023). Previous research has shown that PCC positively affects patient satisfaction. Hence, we formulate the following hypothesis:

H1: Patient-Centered Care Affects Patient Satisfaction at Mitra Medika Hospital.

In simple terms, service quality refers to the degree to which the level of service provided meets customer expectations. It is determined by a company's ability to fulfill the needs and desires of customers based on a careful examination of their expectations. According to Lupiyoadi and Hamdani (2008, p. 87), employee service quality has an asymmetrical effect on customer satisfaction; poor service has a greater negative impact than good service has a positive effect. This finding is echoed in research conducted by Titin Farida (2016), which indicates that service quality positively and significantly affects customer satisfaction. Gultom (2014) also found that service quality positively affects student satisfaction (Tampubolon et al., 2021). Similar studies have confirmed that service quality influences patient satisfaction. Therefore, we formulate the following hypothesis:

H2: Quality of Service Affects Patient Satisfaction at Mitra Medika Hospital.

Methods

This research uses a quantitative approach with associative analysis. Associative analysis is a form of research data analysis to test whether there is a relationship between the existence of

variables from two or more data groups. The population in this study were all hospital visitors in 2024, with a total of around 3,329, while the number of samples used a random sampling technique by taking 3-5% of the population. The respondent characteristics indicate that 42 identify as male (42%), and 58 identify as female (58%). In terms of age, 60 respondents (60%) are between 20 and 30 years old, 20 respondents (20%) are between 31 and 40 years old, and 13 respondents (13%) are between 41 and 50 years old. Seven respondents (7%) are over 50 years old. Regarding employment status, 30 respondents (30%) are students, 9 (9%) are civil servants, 45 (45%) are self-employed, and 16 (16%) are homemakers or not working.

Measure

According to Indrasari (2019: 92), customer decisions are measured using indicators: a. Conformity of expectations, b. Interest in visiting again, c. Willingness to recommend, d. Ease of access, e. Price. Patient-centered Care is measured using Indicators, namely a. Patient Involvement in Decision Making, b. Clear and Effective Communication, c. Empathy and Emotional Support, d. Individualized Care, e. Coordination of Services. Individualization of Care, e. Service Coordination. According to (Antonius, 2020), service quality is measured using indicators: a. Cleanliness and Comfort of Facilities, b. Speed of Service, c. Quality of Medical Staff, d. Communication and Information, e. Overall Satisfaction. The criteria for determining the reliability of the tests conducted in this research indicate that a variable is considered reliable if Cronbach's alpha value is greater than 0.70. The reliability test results show that all variables fall within the reliable category, as their Cronbach's alpha values exceed 0.70. Based on Table 1, Cronbach's Alpha coefficient results for all variables show Cronbach's Alpha value > 0.70. Therefore, it can be concluded that all research instruments in the form of questionnaires in this study are reliable and consistent so that they can be trusted in research measurements.

Table 1.

Reliability Test

Variabel	Cronbach's Alpha
Patient Centred Care	0,770
Quality of Service	0,738
Patient Satisfaction	0,774

Data source: data collected by researchers 2024

Results and discussion

Table 2 indicates that the F value is 19.791. Since the calculated F value (F_{count}) is greater than the critical value (F_{table}) of 2.7 ($52.641 > 2.7$), this suggests that the model demonstrates a good fit. Additionally, the coefficient of determination (R^2) assesses how well the independent variables explain variations in the dependent variable. This can be evaluated using the Adjusted R-squared value. A total determination value (R^2) close to 1 indicates that the independent variables explain a significant portion of the variability in the dependent variable. In this study, the Adjusted R-squared value is 0.290, meaning that the Patient-

Centered Care and Service Quality variables account for 29% of customer satisfaction. The remaining 71% (0.710) is influenced by other variables not examined in this study.

The regression analysis results show that the Patient-Centered Care variable has a coefficient of 0.165 with a p-value of 0.102, indicating a non-significant effect on patient satisfaction. In contrast, the Service Quality variable has a coefficient of 0.444 with a p-value of 0.000, signifying a significant positive effect on patient satisfaction. In summary, these findings imply that the first hypothesis (H1) is rejected, suggesting that Patient-Centered Care does not significantly affect patient satisfaction. Conversely, the second hypothesis (H2) is accepted, indicating that Service Quality positively and significantly influences customer satisfaction.

Discussion

Hypothesis 1 posits that Patient-Centered Care (PCC) affects Patient Satisfaction at Mitra Medika Hospital. However, the test results indicate that PCC has an insignificant effect on Patient Satisfaction. This suggests that key indicators of PCC, such as patient involvement in decision-making, clear and effective communication, empathy and emotional support, individualization of care, and service coordination, have not been adequately implemented, leading to patient dissatisfaction with the hospital's services. Several factors may explain these findings. Variability in implementation means that different healthcare providers may apply PCC in various ways, affecting its effectiveness. Additionally, context and environment play a significant role; cultural factors, health policies, and access to healthcare services can influence how PCC is received and executed. The complexity of patient cases also matters, as patients with intricate health conditions may require a more structured approach, which can limit the focus on PCC. Furthermore, time and resource constraints often hinder healthcare providers from fully implementing PCC principles daily. Despite the theoretical benefits and strong principles associated with Patient-Centered Care, this study's results emphasize the importance of context, implementation, and methodology. To enhance PCC's effectiveness, healthcare providers should consider these factors and strive to create an environment that supports effective patient engagement. These findings are consistent with Khairil Amri's research (2022), which also concluded that Patient-Centered Care does not significantly impact Patient Satisfaction.

Hypothesis 2 posits that the quality of service affects patient satisfaction at Mitra Medika Hospital. The test results indicate a significant influence of service quality on patient satisfaction levels. This finding aligns with research conducted by Alharbi et al. (2022), published in BMC Health Services Research, which demonstrated a significant relationship between service quality and patient satisfaction in hospital settings. Their study highlighted that various dimensions of care, including safety, effectiveness, and empathy, significantly impact patient satisfaction, underscoring the importance of a holistic approach that considers all aspects of service delivery.

Substantial evidence from previous research supports the discussion surrounding the effect of service quality on patient satisfaction. Quality of medical care is critical, as patients receiving high-quality medical care—characterized by accurate diagnoses, effective

treatments, and thorough follow-up – tend to report higher satisfaction levels. This quality can be assessed through medical error rates, adherence to clinical protocols, and favorable clinical outcomes.

Interaction and communication between patients and healthcare professionals also play a crucial role in the quality of care. Effective communication is essential, as healthcare workers must listen attentively, provide clear information, and demonstrate empathy. When patients feel heard and valued, their satisfaction with the services received increases. The facility environment significantly enhances the patient experience. A clean, comfortable, and safe facility contributes to higher satisfaction levels. Studies show that patients treated in hospitals with supportive environments, including well-maintained facilities, report greater satisfaction. A positive environment can also alleviate patient stress and anxiety. Waiting time and accessibility are additional factors influencing patient satisfaction. Long waiting times are a common source of dissatisfaction among patients. Research indicates that reducing waiting times and improving service access directly correlates with increased patient satisfaction. Accessibility encompasses the hospital's physical location and the availability of online services. Finally, a holistic approach to care that addresses patient care's physical, emotional, and social aspects has yielded positive results in patient satisfaction. Patients who feel comprehensively cared for by healthcare professionals are more likely to be satisfied with their care experience. Hospitals can optimize patient satisfaction by focusing on these aspects, ultimately improving health outcomes. This study's findings are consistent with the research conducted by Alviana (2023), which also confirms that service quality significantly affects patient satisfaction.

Conclusion

This study concluded that implementing Patient-Centered Care does not significantly affect patient satisfaction. In contrast, Quality of Service strongly and positively influences patient satisfaction. Therefore, to improve patient satisfaction, healthcare providers must focus on enhancing the quality of care, including effectiveness, safety, and communication, rather than relying solely on a patient-centered approach. Additionally, the application of patient-centered care to services that have been poorly implemented should be further optimized to improve patient satisfaction.

The findings of this study suggest that healthcare providers should prioritize the quality of service delivery to enhance patient satisfaction. This includes investing in staff training to improve communication skills, ensuring that medical care is effective and safe, and creating a supportive patient environment. By focusing on these areas, healthcare organizations can foster a more positive patient experience, which may lead to better health outcomes and increased patient loyalty. Furthermore, healthcare administrators should evaluate the current implementation of patient-centered care practices and identify areas for improvement to ensure that these practices effectively contribute to patient satisfaction.

One limitation of this study is its focus on a single hospital, which may limit the generalizability of the findings to other healthcare settings. Additionally, the study relied on self-reported measures of patient satisfaction, which can be subject to bias. The study's cross-sectional design also restricts the ability to draw causal inferences about the relationship

between service quality and patient satisfaction. Future research could benefit from longitudinal studies that track changes in patient satisfaction over time in response to specific interventions to improve service quality. Future studies should explore the impact of various service quality dimensions on patient satisfaction across healthcare settings and populations. Research could also investigate the specific elements of patient-centered care that may contribute to patient satisfaction, particularly in contexts where these practices have been poorly implemented. Additionally, examining the role of healthcare staff training and organizational culture in enhancing service quality and patient satisfaction could provide valuable insights. Finally, qualitative research methods could be employed to understand better patient experiences and perceptions regarding the quality of care received.

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Ethics declarations

Funding

The author(s) received no financial support for the research, authorship, and/or publication of this article.

Availability of data and materials

Data sharing is not applicable to this article as no new data were created or analyzed in this study.

Competing interests

No potential competing interest was reported by the authors

Additional information**Publisher's Note**

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Cite this paper:

Wahyuni, S., Laila, N., & Daulay, A. (2024). Effect of patient-centered care implementation and quality of service on patient satisfaction. *SERAMBI: Jurnal Ekonomi Manajemen Dan Bisnis Islam*, 7(1), 23-34. <https://doi.org/10.36407/serambi.v7i1.1456>

**SERAMBI: Jurnal Ekonomi Manajemen dan Bisnis Islam**

Publisher : LPMP Imperium.
Frequency : 3 issues per year (April, August & December).
ISSN (online) : [2685-9904](https://doi.org/10.36407/serambi.v7i1.1456).
DOI : Prefix 10.36407.
Accredited : SINTA 3
Editor-in-chief : Prof. Dr. Suryani
Indexed by : [Google Scholar](#), [Garuda](#), [Master List Copernicus](#)