
THE MODEL OF PATIENT SATISFACTION : SERVICE QUALITY, COMMITMENT, AND DOCTOR'S OCB IN MILITARY HOSPITAL

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Abstract. This study aims to determine the direct effect of service quality, commitment, and organizational citizenship behavior on patient satisfaction at the military hospital. This research uses quantitative methods and survey methods. Through Slovin, according to the stratified random sampling formula, a total population of 200 patients and a sample of 125 patients were obtained. Use a Likert scale questionnaire of 1 to 5 for data collection. Analysis equipment for path analysis using Excell and SPSS 25. The results showed: 1) Service quality has a positive and significant direct effect on patient satisfaction of 26.7%; 2) Doctor's commitment has no direct effect on patient satisfaction; 3) Doctor's organizational citizenship behavior has a positive and significant direct effect on patient satisfaction of 43.3%; 4) Service quality has a positive and significant direct effect on doctor's organizational citizenship behavior of 54.7%; 5) Doctor's commitment has a positive and significant direct effect on doctor's organizational citizenship behavior of 41.2%, and 6) Service quality has a positive and significant direct effect on doctor's commitment of 92.1%.

Keywords: service quality, commitment, organizational citizenship behavior, satisfaction.

INTRODUCTION

The increasing number and social status of Jakarta residents require hospitals to improve the quality of health services. Service quality focuses on efforts to meet the needs and desires of consumers based on the accuracy of delivery to balance consumer expectations (Tjiptono, 2014). Every patient wants good and fair health services. However, the fact is that health services in Jakarta often differentiate the social status of patients. The results of (Efyu, 2011) study found that excellent service quality is only given to rich patients, and not to poor patients. As a result, the patient feels dissatisfied. Patient satisfaction is the level of a person's feelings after comparing the performance or results he feels compared to his expectations (Kotler, 2011). Research by (Romaji and Nasihah, 2018), and (Antia, 2016)

found that service quality has a significant effect on patient satisfaction of social security administrator participants. The government issues a policy on national health insurance which is administered by the social security administration. The military hospital in Jakarta as one of the social security administrators contributes to receiving social security administrator participant patients. The problem faced by the hospital is that it has not been able to provide the health services that patients expect. In the hospital industry, doctors are the core employees in health care for patients. Doctors play an important role in the success of the hospital in providing quality service. If doctors can improve the quality of health services and patients feel satisfied, the hospital will achieve success. The success of the hospital in achieving goals is determined by the behavior of doctors in carrying out tasks outside of their job descriptions (extra-role behavior) or organizational citizenship behavior. (Schermerhorn, John R. Jr., James G. Hunt, Ricahard N. Osborn, 2010) suggest "organization citizenship behavior as" go beyond the call of duty "or" the extras people do to go the extra mile in one's work". (Lestari, Endah Rahayu, and Nur Kholifatul Fithriyah Ghaby, 2018) the research found that organizational citizenship behavior has a positive and significant effect on job satisfaction. Good service quality is shown by the doctor's commitment, namely the feeling of involvement in duties and loyalty to the organization (Gibson, James L., John M. Ivancevich, James H. Donelly. Jr. and Robert Konopaske,2012).For military doctors who are bound by an oath, a committed soldier is willing to work outside the job description.(Yadav,Mohit, and S. Rangnekar, 2015) found service quality has a positive and significant effect on organizational citizenship behavior (OCB).As a unique employee behavior, OCB doctors with high commitment play an important role in shaping the hospital service quality in increasing patient satisfaction.

METHOD

This study uses a quantitative methods and survey methods. Through stratified random sampling, 180 patients and 125 samples were collected, which were obtained according to Slovin formula. Use the Likert scale (1 to 5) to collect data to reveal their attitudes towards work. The attitude scale contains positive statements that have been tested for validity and reliability. Use Excel and SSPS 25 to analyze the data using path analysis.

RESULTS AND DISCUSSION

Table 1 Summary of the Results of Significance Test and Regression Linearity Test.

Regression	Regression Equations	Significance			Linearity Test		
		F	F _{tabel}		F	F _{tabel}	
			0,05	0,01		0,05	0,01
Y over X ₁	$\hat{Y} = 6,775 + 0,658X_1$	319,056 **	3,92	6,85	1,105 ^{ns}	1,52	1,81
Y over X ₂	$\hat{Y} = 10,659 + 0,752X_2$	293,632 **	3,92	6,85	2,525***	1,52	1,81
Y over X ₃	$\hat{Y} = 6,172 + 0,804X_3$	351,693 **	3,92	6,85	1,056 ^{ns}	1,52	1,81
X ₃ over X ₁	$\hat{X}_3 = 6,629 + 0,768X_1$	741,698 **	3,92	6,85	1,034 ^{ns}	1,52	1,81
X ₃ over X ₂	$\hat{X}_3 = 11,133 + 0,877X_2$	636,686 **	3,92	6,85	1,575***	1,52	1,81
X ₂ over X ₁	$\hat{X}_2 = 4,009 + 0,797X_1$	687,321 **	3,92	6,85	1,556***	1,52	1,81

Information:

** : Very Significant ($F > F_{table}$)

***: Significant (regression is not linear)

ns: Non-significant (linear regression): ($F < F_{table}$)

Significance and Linearity Test of Satisfaction Regression (Y) on Service Quality (X1)

From the regression equation $\hat{Y} = 6.775 + 0.658 X_1$, because the Fscore (319.056) > Ftable score (3.92), it is concluded that the satisfaction regression equation (Y) on service quality (X1) is significant. Linearity test obtained of Fscore (1.105) < Ftable score (1.52) at error level α (0.05), it is concluded that the regression equation for satisfaction (Y) on service quality (X1) is linear.

Significance and Linearity Test of Satisfaction Regression (Y) on Commitment (X2)

From the regression equation $\hat{Y} = 10.659 + 0.752 X_2$, because the Fscore (293.632) > Ftable score (3.92), it is concluded that the satisfaction regression equation (Y) on commitment (X2) is significant. Linearity test obtained of Fscore (2.525) > Ftable score (1.52) at error level α (0.05), it is concluded that the regression equation on satisfaction (Y) on commitment (X2) is not-linear.

Significance and Linearity Test of Satisfaction Regression (Y) on OCB (X3)

From the regression equation $\hat{Y} = 6.172 + 0.804 X_3$, because the F score (351.693) > the Ftable score (3.92), it is concluded that the satisfaction regression equation (Y) on OCB (X3) is significant. The linearity test obtained of F score (1.056) < Ftable score (1.52) at an error level of α (0.05), it is concluded that the regression equation for satisfaction (Y) on OCB (X3) is linear.

Significance and Linearity Test of OCB Regression (X3) on Service Quality (X1)

From the regression equation = $6.629 + 0.768 X_1$, because the F score (741,698) > Ftable score (3.92), it is concluded that the OCB regression equation (X3) for service quality (X1) is significant. The linearity test obtained of F score (1.034) < Ftable score (1.52) at an error level of α (0.05), it is concluded that the OCB regression equation (X3) on service quality (X1) is linear.

Significance and Linearity Test of OCB Regression (X3) on Commitment (X2)

From the regression equation = $11.133 + 0.877 X_2$, because F (636.686) > Ftable (3.92), it is concluded that the OCB regression equation (X3) on commitment (X2) is significant. The linearity test obtained of F score (1.575) > Ftable score (1.52) at an error level of α (0.05), it is concluded that the OCB regression equation (X3) on commitment (X2) is not-linear.

Significance and Linearity Test of Commitment Regression (X2) on Service Quality (X1)

From the regression equation = $4.009 + 0.797 X_1$, because the F score is 687.321 > Ftable score (3.92), it is concluded that the commitment regression equation (X2) for service quality (X1) is significant. The linearity test obtained of F score (1.556) > Ftable score (1.52) at an

error level of α (0.05), it is concluded that the commitment variable regression equation (X2) for the service quality variable (X1) is not-linear.

Hypothesis Test

Table 2 Results Path Analysis Substructural First Model

Model		Coefficients ^a		Standardized Coefficients	t	Sig.
		Unstandardized Coefficients				
		B	Std. Error			
1	(Constant)	3,384	4,098		,826	,411
	Service Quality (X1)	,207	,103	,267	1,999	,048
	Commitment (X2)	,177	,112	,198	1,583	,116
	OCB (X3)	,404	,121	,433	3,352	,001

a. Dependent Variable: Satisfaction (Y)

Based on the results of data analysis, the path coefficient (β_1) = 0.267, t score (1.999) > ttable score (1.98) at α (0.05), it means that H0 is rejected and H1 is accepted. That is, the path coefficient of β_1 is significant, with a contribution of 26,7%. It is interpreted that service quality (X1) has a positive direct effect on satisfaction (Y).

Based on the results of data analysis, the path coefficient (β_2) = 0.198, t score (1.583), < ttable score (1.98) at α (0.05). it means that H0 is accepted and H1 is rejected. That is, the β_2 path coefficient is not significant, with the contribution of 0.198. It is interpreted that commitment (X2) does not have a positive direct effect on satisfaction (Y).

Based on the results of data analysis, the path coefficient (β_3) = 0.433, t score (3.352), > ttable score (1.98) at $\alpha = 0.05$. it means that H0 is rejected and H1 is accepted. That is, the β_3 path coefficient is significant with a contribution of 0.433. It is interpreted that OCB (X3) had a positive direct effect on satisfaction (Y).

Table 3 Results Path Analysis Substructural Second Model

Model		Coefficients ^a		Standardized Coefficients	t	Sig.
		Unstandardized Coefficients				
		B	Std. Error			
2	(Constant)	5,047	3,041		1,660	,100
	Service Quality (X1)	,454	,066	,547	6,895	,000
	ComMitmenT (X2)	,395	,076	,412	5,192	,000

a. Dependent Variable: OCB (X3)

Based on the analysis data obtained, the path coefficient (β_1) = 0.547, with t score (6.895) > ttable score (1.98) at $\alpha = 0.05$. it means that H0 is rejected and H1 accepted. That is, the

path coefficient p31 is significant with a contribution of 0.547. These findings interpreted that service quality (X1) had a positive direct effect on OCB (X3).

Based on the results of data analysis, the path coefficient (p32) = 0.412, with t score (5.192), > t table score (1.98) at $\alpha = 0.05$. it means that H0 is rejected and H1 accepted. That is, the path coefficient p32 is significant with a contribution of 0.412. These findings interpreted that commitment (X2) had a positive direct effect on OCB (X3).

Table 4 Results Path Analysis of Substructural Third Model

		Coefficients^a				
		Coefficients Unstandardized		Standardized Coefficients		
Model		B	Std. Error	Beta	t	Sig.
3	(Constant)	4,009	3,589		1,117	,266
	Service Quality (X1)	,797	,030	,921	26,217	,000

Based on the analysis of data obtained path coefficient (p21) = 0.921, with t score (26.217) > the score t table (1.98) at $\alpha = 0.05$. it means that H0 is rejected and H1 accepted. That is the p21 pathways significant coefficient with a contribution of 0.921. This finding interpreted that the service quality of the assignment (X1) has a positive direct effect on commitment (X2).

Table 5 Path Coefficient Testing Summary

No.	Lane	Coeffisient Lane	df	t	t _{table}	
					$\alpha = 0,05$	$\alpha = 0,01$
1.	p _{y1}	0,267	121	1,999 *	1,98	2,62
2.	p _{y2}	0,198	121	1,583 ^{ns}	1,98	2,62
3.	p _{y3}	0,433	121	3,352 **	1,98	2,62
4.	p ₃₁	0,547	122	6,895 **	1,98	2,62
5.	p ₃₂	0,412	122	5,192 **	1,98	2,62
6.	p ₂₁	0,921	123	26,217 **	1,98	2,62

Note:

- * = significant (t > t table at $\alpha = 0.05$)
- ** = very significant (t > t table at $\alpha = 0.01$)
- ns = non significant (t < t table)

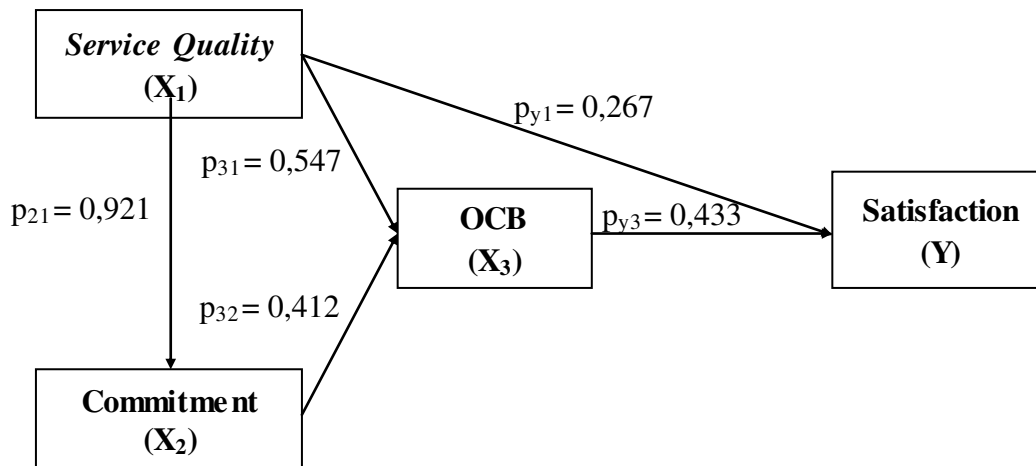


Figure 4. Structural Relationship Between Empirical Model Variables
Based on Path Analysis Calculation Results

The results showed that: (1) Service Quality has a direct, positive, and important impact on patient satisfaction; (2) Commitment will not have a positive and significant direct impact on patient satisfaction; (3) OCB has a direct positive impact on patient satisfaction; (4) Service Quality has a direct positive and very significant impact on doctors' OCB; (5) Commitment to have a direct positive and significant impact on doctors' OCB; (6) Service Quality has a direct impact on patient commitment.

Discussion

Effect of Service Quality on Satisfaction

The first hypothesis analysis proves that service quality (X₁) has a positive and significant direct effect on satisfaction (Y) of 26.7%. Service quality-forming construct of that the most dominant influences on patient satisfaction are the quality of health services. The quality of health services can satisfy every health service user according to the average level of satisfaction (Pohan, 2015). Patient satisfaction is the level of a person's feelings after comparing the performance or results he feels compared to his expectations (Kotler, 2011). Patients will feel satisfied after receiving excellent service quality from the hospital. While customer service is any activity aimed at providing satisfaction to customers through services that can meet customer wants and needs (Kasmir, 2011). Quality has a direct impact on product performance and customer satisfaction (Setiawan, 2011). (Antia, 2016) and (Zarei Ehsan, Abbas Daneshkohan, Behrouz Pouragha, Sima Marzban, Mohammad Arab, 2015) the study found service quality had a positive and significant impact on patient satisfaction. Based on these findings, service quality has a positive and significant direct impact on patient satisfaction.

The Effect of Commitment on Satisfaction

The second hypothesis analysis proves that commitment (X₂) does not affect satisfaction (Y). Commitment-forming constructs that the most dominant influence on satisfaction is psychological and physical attachments. Attachment to the organization will be built on each

member of the organization because personal and organizational goals will be achieved if members of the organization have a high attachment to the organization (Noe Raymond A., John R. Hollenbeck, Barry Gerhart, and Patrick M. Wright, 2011). Patient satisfaction is the level of a person's feelings after comparing the performance or perceived results compared to expectations (Kotler, 2011). Meanwhile, the commitment of military doctors is only intended for the benefit of health service quality for the military hospital where he works. The attitude and life principles of military doctors as soldiers are full of risks, consequences and high sacrifices are a strong commitment because 1) Soldiers realize that the Soldier's Oath is a spirit of devotion and a warrior code of ethics that must be carried out; 2) Soldiers no longer see risk as a burden, but sacrifice their interests for the sake of their unit, nation, and state (Headquarters, 2006). But the commitment of military doctors was not aimed at patient satisfaction. Based on these findings, the commitment of military doctors does not affect patient satisfaction.

Effect of OCB on Satisfaction

The third hypothesis analysis proves that OCB (X3) has a direct, positive, and significant effect on satisfaction (Y) of 43.3%. The OCB-forming construct that the most dominant effect on satisfaction is conscientiousness. Doctors are willing to work beyond the specified time and give satisfaction to patients. Health services can satisfy every user of health services according to the average level of satisfaction (Pohan, 2015). Quality health services involve the willingness of employees to work beyond the specified time (Titisari, 2014). OCB is defined as "go beyond the call of duty" or "the extras people do to go the extra mile in one's work" (Schermerhorn, John R. Jr., James G. Hunt, Richard N. Osborn, Mary Uhl-Bien, 2010). This result research relevant to (Lestari, Endah Rahayu, and Nur Kholifatul Fithriyah Ghaby, 2018) research which concluded OCB has a positive and significant effect on patient satisfaction. Based on these findings, concluded OCB has a direct positive and significant effect on patient satisfaction.

Effect of Service Quality on OCB

The fourth hypothesis analysis proves that service quality (X1) has a positive and significant direct effect on OCB (X3) of 54.7%. Service quality-forming construct that the most dominant influence on OCB is assurance. The guarantee given by the doctor can give the patient confidence to always go to the hospital. OCB is defined as "go beyond the call of duty" or "the extras people do to go the extra mile in one's work" (Schermerhorn John R. Jr., James G. Hunt, Richard N. Osborn, Mary Uhl-Bien, 2010). High OCB doctors will have a positive impact on hospital health services, including assurance that includes knowledge, competence, courtesy, and trustworthiness of staff, free from danger, risk, or doubt (Tjiptono, 2014). (Yadav, Mohit and S. Rangnekar, 2015) the research found that service quality in terms of role clarity has a positive and significant effect on OCB. Based on these findings, service quality has a positive and significant direct effect on the OCB of military doctors.

Effect of Commitment on OCB

The fifth hypothesis analysis proves that commitment (X2) has a positive and significant direct effect on OCB (X3) of 41.2%. Commitment-forming constructs that the most dominant influence on OCB is loyalty. Doctors who have a high attitude of loyalty and attachment to the organization will be willing to work beyond the specified time (Titisari, 2014). OCB is beyond the call of duty made by someone to work extra in their work (Schermerhorn John R. Jr., James G. Hunt, Richard N. Osborn, Mary Uhl-Bien, 2010). Military doctors as soldiers, no longer see risk as a burden but sacrifice their interests for the sake of the unit, nation, and state (Headquarters, 2006). Military doctors must be loyal and committed to the Soldier Oath as a spirit of service and a soldiering code of ethics that must be practiced. Organizational commitment is an attitude of loyalty and the high attachment for an employee to the organization (Noe, Raymond A., John R. Hollenbeck, Barry Gerhart, and Patrick M. Wright, 2011). As a military doctor, he is required to have a high commitment and OCB to achieve the goals of the military hospital organization. (Rahayu, 2017) the research found that organizational commitment has a positive and significant effect on OCB. Based on these findings, commitment has a positive and significant direct effect on the OCB of military doctors.

Effect of Service Quality on Commitment

The sixth hypothesis analysis shows that service quality (X1) has a positive and significant direct effect on commitment (X2) of 92.1%. The service quality-forming construct that has the most dominant influence on commitment is empathy. Service will be of quality if every party with an interest in service has a sense of empathy or has the same commitment to service (Parasuraman, 2011). Organizational commitment is an attitude of loyalty and the high attachment for an employee to the organization (Noe, Raymond A., John R. Hollenbeck, Barry Gerhart, and Patrick M. Wright, 2011). Military doctors as soldiers, no longer see risk as a burden but sacrifice their interests for the sake of the unit, nation, and state (Headquarters, 2006). Military doctors must be loyal and committed to the Soldier Oath as a spirit of service and a soldiering code of ethics that must be practiced. While customer service is any activity aimed at providing satisfaction to customers through services that can meet customer wants and needs (Kasmir, 2011). Afifah's (2012) research found that service quality has a significant effect on commitment. Base on these findings, service quality has a positive and significant direct effect on the commitment of military doctors.

CONCLUSION

1. Service quality has a positive and significant direct impact on patient satisfaction, reaching 26.7%.
2. The Doctor's commitment will not directly effect on patient satisfaction.
3. The Doctor's OCB has a positive and significant direct impact on patient satisfaction reaching 43.3%.
4. Service quality has a 54.7% positive and significant direct impact on doctor's OCB.

5. The Doctor's commitment has a 41.2% positive and significant direct impact on doctor's OCB.
6. Service quality has a positive and significant direct impact on 92.1% of doctor's commitments.

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