

CHAPTER VI

CONCLUSIONS

This chapter consists of explanations drawn from the research conducted and recommendations for future research.

6.1 Conclusions

The conclusions based on the research conducted are as follows.

1. Based on the research that has been conducted, the level of satisfaction of patients and healthcare workers regarding the service quality at dr. Sadikin District General Hospital is known. The level of satisfaction based on the perception of patients for the tangible dimension has an average value of 4.08 (Satisfied), the reliability dimension has an average score of 3.96 (Moderately Satisfied), the responsiveness dimension has an average score of 4.06 (Satisfied), the assurance dimension has an average score of 4.17 (Satisfied), and the empathy dimension has an average score of 4.23 (Satisfied). Meanwhile, the level of satisfaction based on the perceptions of healthcare workers for the tangible dimension had an average score of 3.33 (Moderately Satisfied), the reliability dimension had an average score of 3.22 (Moderately Satisfied), the responsiveness has an average score of 3.23 (Moderately Satisfied), assurance dimension 2.92 (Dissatisfied), and empathy dimension has an average score of 3.10 (Moderately Satisfied)
2. Based on the research conducted, the quality of service at dr. Sadikin District General Hospital in Pariaman City was measured using the SERVQUAL method. Based on the calculations that have been carried out, the results obtained from the patient side show that all gaps between the perception and expectation of services obtained at dr. Sadikin District General Hospital are negative. Meanwhile, from the healthcare worker side, there are only two attributes that are not negative. Based on the research that has been conducted, priority attributes were determined using the Importan-

-ce Performance Analysis (IPA) method. These improvement attributes only focus on Quadrant I, which consists of attributes that have a high level of importance, but customer perception or experience of these attributes is still low or in the unsatisfactory category. From the patient's perspective, the priority attributes for improvement included in quadrant I include the directional signs in the hospital are easy to understand, making it easy to find services (T4), the administrative processes are handled quickly (V3), and the waiting room looks clean (T1). Meanwhile, from the healthcare staff perspective, the priority attributes included in quadrant I are the medical equipment is fully available (T2) and requests for materials/equipment are processed within a reasonable time frame (V2).

3. Based on the research that has been conducted, the proposed improvements were designed using the Quality Function Deployment (QFD) method. There are eight proposed improvements from the patient's perspective, including provide main directional signs (such as large bulletin boards) from the main entrance, improve the design to make it clearer and more conspicuous, Increase the font size, color contrast, and use symbols that are easy to understand, add additional computer units in the registration area (minimum 1 unit), improve internet network stability in administrative areas, develop clear SOPs for waiting room cleanliness, assign 1 dedicated cleaning staff per shift for the waiting room area, and implement a cleaning checklist for each day. Meanwhile, from the healthcare worker's side, there are four proposed improvements, including labeling and identification of critical equipment in the work unit, daily/shift equipment readiness, standardized and easy to complete request form, and optimization of human resources and hospital facilities.

6.2 Suggestion

The suggestion obtained based on the research conducted are as follows.

1. It is expected that future research will include more detailed attributes within each dimension to better visualize the needs of patients and healthcare workers in the related hospital.
2. It is expected that future research will be conducted up to the implementation stage of the proposed service quality improvement plans in the related hospital.
3. It is expected that the hospital will conduct evaluations based on the results of the implemented service quality improvement proposals.

