



## INTERNATIONAL JOURNAL OF PATIENT SAFETY AND QUALITY

<https://e-journal.unair.ac.id/IJPSQ>

### Original Research

## NURSING CARE QUALITY WITH PATIENT SATISFACTION

**Dwi Yunita Haryanti <sup>ID</sup>, Dian Ratna Elmaghfuroh <sup>ID</sup>**

Faculty of Health Science, University of Muhammadiyah Jember, Jember, East Java, Indonesia

\*E-mail: [dwiunita@unmuhjember.ac.id](mailto:dwiunita@unmuhjember.ac.id)

### Abstract

#### Background

The community satisfaction index has decreased compared to the previous year, along with a decline in patient satisfaction. This reflects a growing public dissatisfaction with the services provided. The purpose of this study was to prove the effect of nursing care quality on patient satisfaction.

#### Methods

This study employed an analytic observational design with a cross-sectional approach. The research was conducted in February 2024 and involved all inpatients at four health clinics as the study population. A total of 125 respondents were selected using a cluster sampling technique. The majority of respondents were adults, predominantly female, and undergoing their first visit to the clinic. The primary variables in this study were the quality of nursing care and patient satisfaction. The Perceptions of the Quality Nursing Care Scale was used to assess nursing care quality, while the Patient Satisfaction with Nursing Care Quality Questionnaire was employed to measure patient satisfaction. The instruments demonstrated significant validity ( $p < 0.05$ ), and reliability testing using Cronbach's Alpha yielded a value of 0.89. Data were analyzed using multiple linear regression.

#### Results

The results of the regression analysis showed that the calculated F-value was 666.4, with a significance value of 0.000. This indicates a statistically significant effect of nursing care quality variables on patient satisfaction when considered simultaneously. The coefficient of determination ( $R^2$ ) was 0.901, indicating that 90% of the variation in patient satisfaction can be explained by the combined influence of the variables: interpersonal care, efficiency, comfort, information, environment, and competence. The remaining 10% is attributed to other factors not examined in this study.

#### Conclusion

The findings indicate that nursing care quality significantly influences patient satisfaction. Among the variables assessed, nurse competence emerged as the most dominant factor. This includes indicators such as cognitive abilities, clinical skills, and the capacity to communicate effectively and assertively. Enhancing patient satisfaction can be more readily achieved when the quality of nursing services is consistently maintained and patient safety is prioritized as a fundamental aspect of care delivery.

**Keywords:** Nurse Competence; Nursing care quality; Patient satisfaction

### Article Info

Received: 21 Oktober 2024

Revised: 25 January 2025

Accepted: 14 April 2025

Online: 30 April 2025



©2025. Author(s). This is an Open Access Article Distributed Under the Terms of the Creative Commons Attribution-Non Commercial-Share Alike 4.0 International Licence.

## INTRODUCTION

Patient satisfaction during hospitalization encompasses various aspects of healthcare, including the professionalism of healthcare providers, the technology utilized, the overall quality of services, and the standard of nursing care received (Padma & Bhattacharjee, 2021). Patient satisfaction during hospitalization encompasses various aspects of healthcare, including the professionalism of healthcare providers, the technology utilized, the overall quality of services, and the standard of nursing care received (Aiken et al., 2021). Patient satisfaction with nursing care is essential for maintaining trust, particularly in relation to healthcare costs. A lack of satisfaction may lead to a decline in the patient's health condition, prolonged hospital stays, and consequently, increased hospitalization expenses (Brooks et al., 2021).

The balance between patient satisfaction and the quality of nursing care provided is an important thing to consider because it has an impact on the patient's health status, safety and health in the long term (Liu et al., 2021). Increasing competition within the healthcare industry, along with rising living standards, has positively influenced the improvement of healthcare service quality. The provision of high-quality care has become a primary consideration for patients when selecting healthcare facilities (Chen et al., 2022). The most important competitive advantage for health service providers is to provide quality services (Hannawa et al., 2022). Quality of care is receiving increased attention at the international level in the context of achieving the Sustainable Development Goals (SDGs) which include universal health, including financial risk protection, access to quality essential health services, and access to quality and affordable essential medicines and vaccines for all (World Health Organization, 2018).

The patient satisfaction target based on national indicators of clinical health service quality is  $\geq 76.61$  (Regulation of Indonesian Ministry of Health No. 30, 2022). Based on data from the Jember District Health Office's Health Center Performance Assessment Report in 2022, there was a 2% decrease in the community satisfaction index from the previous year as well as a 1% decrease in the patient satisfaction index. This requires further evaluation and assessment of the causes of the decline.

Research conducted at Sina Hospital states that 80% of patients are dissatisfied with the nursing care provided. This dissatisfaction stems from poor communication between nurses and the patients receiving treatment (Lotfi et al., 2019). In a global context, where science, technology and information are within the reach of many people, professions, and especially nursing, are faced with the need to improve their work with the aim of guaranteeing quality

care. Ever-evolving health technologies are certain to increase the costs of the health sector and people's expectations of the services offered. Nevertheless, research shows that there are deficiencies in the quality of care and patient safety, which involve adverse events and greatly affect the image of healthcare organizations (Yan et al., 2022).

Despite the quality deficit, the level of patient satisfaction with the nursing care received was high. These results suggest that the institution needs to focus its objectives on a system of continuous evaluation of the quality of care, aiming to meet patient expectations (Freitas et al., 2014). Patients expressed high levels of satisfaction with the attention and care provided by nurses, with 63.9% describing the nursing care they received as 'very good' (Karaca & Durna, 2019). This presents a challenge for nurses to improve the quality of care in order to enhance patient satisfaction. Although the overall satisfaction level among hospitalized patients is relatively high, satisfaction specifically with nursing care remains comparatively low. This disparity is influenced by patients' sociodemographic factors and an inadequate nurse-to-patient ratio in healthcare facilities (Yan et al., 2022).

Increased competition in every field today also affects the healthcare industry. The most important competitive advantage of healthcare providers is to provide quality healthcare services. The need to improve quality of healthcare services has been identified through health-related information and technological developments, changing expectations and opinions about healthcare, increased involvement of individuals in their healthcare and increasing costs and competitiveness in the healthcare sector (Zhang et al., 2020).

Exploring data on patient perceptions of nursing care quality is a key approach to assessing patient satisfaction. This process enables healthcare facilities to evaluate the quality of services provided, understand patient expectations, and measure satisfaction levels. To support this, a well-designed assessment instrument that accurately captures the factors influencing patient satisfaction is essential for enhancing the quality of nursing services (Saputra, 2021).

Based on the background of the issues outlined above and findings from previous research, this study aims to examine the influence of various components of nursing care quality on patient satisfaction among hospitalized patients at Pratama Clinics in Jember Regency.

## **RESEARCH METHOD**

### **Research design**

The type of research used was analytic observational research with cross sectional

design quantitative survey.

### **Samples**

The population was all inpatients with a sample taken as many as 125 patients from 4 private clinics in Summersari sub-district, Jember district with cluster sampling technique.

### **Instruments**

The variables in this study include nursing care quality as the independent variable—comprising six components: interpersonal care, efficiency, comfort, information, environment, and competence—and patient satisfaction as the dependent variable. The instrument used to measure nursing care quality is the Perceptions of the Quality Nursing Care Scale (PQNCS), while patient satisfaction is assessed using the Patient Satisfaction with Nursing Care Quality Questionnaire (PSNCQQ). In this study, scores for each questionnaire were obtained by summing the Likert scale responses for all items, then converting the total into percentage-based categories. The PQNCS consists of 20 items rated on a 5-point Likert scale (1 = Strongly Disagree to 5 = Strongly Agree), yielding a possible score range of 20–100, categorized as follows: 81–100 = Very Good Perception, 61–80 = Good Perception, 41–60 = Moderate Perception, and <40 = Poor Perception. The PSNCQQ includes 15 items, also rated on a 5-point Likert scale (1 = Very Dissatisfied to 5 = Very Satisfied), with a total score range of 15–75, categorized as follows: 61–75 = Very Satisfied, 46–60 = Satisfied, 31–45 = Fair, and <30 = Dissatisfied.

Validity was tested using Pearson Product Moment Correlation between item score and total score (item-total correlation). An item is considered valid if  $r > 0.30$  and  $p < 0.05$ . PQNCS: All 20 items were valid with  $r$  values ranging from 0.421 to 0.782, all  $p$ -values  $< 0.001$ . PSNCQQ: All 15 items were valid with  $r$  values ranging from 0.398 to 0.765, all  $p$ -values  $< 0.001$ .

Reliability was tested using Cronbach's Alpha to assess internal consistency. A value  $> 0.70$  indicates acceptable reliability. PQNCS: Cronbach's Alpha = 0.894, indicating very high reliability. PSNCQQ: Cronbach's Alpha = 0.912, indicating excellent reliability.

### **Procedures**

The procedures carried out in this study are preparing the instrument, taking care of research permits from educational institutions and health care facilities (clinics), apply for and obtain ethical approval from the Health Research Ethics Committee, prepare an informed consent sheet and explain the purpose and rights of participants to respondents before filling out the questionnaire, data collection, data processing and analysis.

## Statistics

Statistical analyses included descriptive analysis to determine the frequency distribution of demographic data and multiple linear regression analysis to test the research hypothesis.

## Ethical considerations

This research has received ethical clearance through ethical review with number 0030/KEPK/FIKES/XII/2024.

## RESULT

The characteristics of respondents mostly came from the adult age group (26-35 years) as many as 66 people (52.8%) and a small portion aged 5-11 years as many as 3 people (2.4%). Gender characteristics were dominated by 86 women (68.8%) and 39 men (31.2%). The number of visits showed that most of them were the first visit as many as 76 people (60.8%), the second visit as many as 33 people (26.4%), the third visit as many as 9 people (7.2%) and those who were  $\geq 4$  visits were 7 people (5.6%), as shown in the following table:

Table 1: Characteristics of Respondents

| Characteristics   | Number | Percentage (%) |
|-------------------|--------|----------------|
| <b>Gender</b>     |        |                |
| Male              | 39     | 31.2           |
| Female            | 86     | 68.8           |
| <b>Age</b>        |        |                |
| 5-11              | 2.4    | 3              |
| 12-25             | 24     | 30             |
| 26-35             | 52.8   | 66             |
| 46-65             | 20.8   | 26             |
| <b>Occupation</b> |        |                |
| Farm laborer      | 4      | 3.2            |
| Teacher           | 1      | 0.8            |
| House wife        | 68     | 54.4           |
| Student           | 12     | 9.6            |
| Civil servant     | 4      | 3.2            |
| Retired           | 1      | 0.8            |
| Self employed     | 28     | 22.4           |
| Nurse             | 2      | 1.6            |
| Farmer            | 5      | 4              |
| <b>Visit to</b>   |        |                |
| 1                 | 76     | 60.8           |
| 2                 | 33     | 26.4           |
| 3                 | 9      | 7.2            |
| 4                 | 2      | 1.6            |
| 5                 | 2      | 1.6            |
| 7                 | 1      | 0.8            |

|    |   |     |
|----|---|-----|
| 10 | 1 | 0.8 |
| 11 | 1 | 0.8 |

Table 2. Summary of Regression Analysis

| Variables          | Coefisien | t     | Sig   | Conclusion  |
|--------------------|-----------|-------|-------|-------------|
| Interpersonal care | 0.393     | 17.96 | 0.000 | Significant |
| Efficiency         | 0.136     | 4.71  | 0.003 | Significant |
| Amenity            | 0.189     | 6.59  | 0.004 | Significant |
| Information        | 0.208     | 9.95  | 0.001 | Significant |
| Environment        | 0.168     | 8.22  | 0.002 | Significant |
| Competence         | 0.153     | 7.51  | 0.000 | Significant |
| F                  | 666.4     |       |       |             |
| Sig                | 0.000     |       |       |             |
| R                  | 97.1      |       |       |             |

The t test results show that the interpersonal care variable has a significance value of less than 0.05 (0.000) and the calculated t value is greater than the t table 1.980 ( $17.96 > 1.980$ ) so it can be concluded that there is an influence of the interpersonal care variable on patient satisfaction. The efficiency variable has a significance value of less than 0.05 (0.003) and the calculated t value is greater than the t table 1.980 ( $4.71 > 1.980$ ) so it can be concluded that there is an effect of the efficiency variable on patient satisfaction. The Amenity variable has a significance value of less than 0.05 (0.004) and the calculated t value is greater than the t table 1.980 ( $6.59 > 1.980$ ) so it can be concluded that there is an influence of the comfort variable on patient satisfaction. The information variable has a significance value of less than 0.05 (0.001) and the calculated t value is greater than the t table 1.980 ( $9.95 > 1.980$ ) so it can be concluded that there is an influence of the information variable on patient satisfaction. The environmental variable has a significance value of less than 0.05 (0.002) and the calculated t value is greater than t table 1.980 ( $8.22 > 1.980$ ) so it can be concluded that there is an effect of environmental variables on patient satisfaction. The competency variable has a significance value of less than 0.05 (0.000) and the calculated t value is greater than t table 1.980 ( $7.51 > 1.980$ ) so it can be concluded that there is an effect of interpersonal care variables on patient satisfaction.

Based on the results of regression analysis, it can be concluded that the calculated F value is 666.4 and a significance value of 0.000. So it can be concluded that there is an effect of nursing care quality variables on patient satisfaction simultaneously (together). The coefficient of determination (R Square) of nursing care quality variables on patient satisfaction is 0.901, which means that the influence of interpersonal care, efficiency, comfort, information, environment and competence variables simultaneously on patient satisfaction variables is 90%, the remaining 10% is influenced by other variables not examined in this study.

## DISCUSSION

The results prove that interpersonal care has a significant and positive effect on patient satisfaction. This assessment or perception arises as feedback and patient response to the nurse's attitude and behavior, including how the nurse first communicates with the patient. Some things related to interpersonal care such as how nurses welcome patients and communicate for the first time when entering hospitalization, provide complete information before taking action, respect and maintain patient privacy, have good manners, show willingness when asked for help, respect patients when patients express concerns related to their health conditions and involve patients and families in carrying out nursing care.

This finding aligns with previous research indicating that patient satisfaction increases in correlation with higher scores in nurses' caring behaviors. Therefore, nurses should continuously seek strategies to assess and enhance patient satisfaction, while also articulating the impact of their care on inpatients' overall hospital experiences. Given the growing emphasis on patient satisfaction as a key performance indicator in today's competitive healthcare environment, it is essential to recognize and reinforce the role of compassionate, patient-centered nursing care (Kibret et al., 2022). The formation of patient satisfaction begins when the patient interacts with the nurse following the way the nurse provides nursing care (Purwiningsih et al., 2023).

According to the author, interpersonal care serves as a fundamental component of nursing services, encompassing not only technical skills but also emotional and humanistic aspects. In clinical practice, the quality of the nurse–patient relationship is a key determinant in building trust, ensuring a sense of security, and fostering patient acceptance of nursing interventions. Therefore, strengthening nurses' interpersonal competence should be prioritized in both training and professional development programs to sustainably improve patient satisfaction.

The study results indicate that nursing care efficiency has a significant effect on patient satisfaction. This finding is based on patients' perceptions of effective coordination among nurses in delivering care, adherence to timeliness, prompt responses to patient complaints, and the accuracy of documentation related to changes in the patient's health status. These elements contribute to the overall perception of efficient and reliable nursing care, which in turn enhances patient satisfaction.

This is in line with research which states that the performance and way nurses work together in a team increases patient satisfaction (Chen et al., 2022). A study conducted in a



health care facility showed that patients' experience of nurse coordination in providing nursing care, emotional support, continuity and patient safety was meaningful enough for patients to provide care recommendations to others (Kannan et al., 2020).

In the author's view, efficiency in nursing care not only reflects technical aspects such as speed and accuracy, but also demonstrates the professionalism and responsiveness of the nursing team. Efficient care delivery creates a sense of trust, reduces patient anxiety, and enhances the perception of safety and reliability in health services. Therefore, improving workflow systems, strengthening teamwork, and enhancing clinical decision-making processes among nurses are strategic efforts that should be continuously pursued to optimize patient satisfaction.

The analysis results show that patient satisfaction is significantly influenced by the comfort experienced during treatment. This comfort is reflected in several key aspects, including the nurse's attention to protecting patient privacy during procedures, the cleanliness of the bed, room, and surrounding environment, as well as the overall sense of calm felt by the patient throughout hospitalization. These findings are supported by previous research indicating that the quality of the indoor environment contributes to fulfilling patients' psychological needs and expectations, thereby fostering a general sense of satisfaction with the healing environment.

Findings from patient and medical staff surveys indicate three important factors in creating a healing environment, namely (1) Interior appearance, (2) Privacy, and (3) Comfort and control (Mahmood & Abdullah, 2020). The same thing is conveyed that the humanity of care and the comfort of the environment where patients are treated have a significant effect on patient satisfaction (Viotti et al., 2020). Comfortable facilities are one of the aspects that support patient satisfaction, this can reduce patient anxiety while being treated and waiting for information related to their health progress.

According to the author, the comfort aspect of nursing care extends beyond the physical condition of the environment and reflects the sensitivity and empathy of healthcare providers toward the emotional needs of patients. When the care setting is designed to foster a sense of security, calm, and protection, the healing process can occur more effectively. Therefore, enhancing patient satisfaction requires not only the provision of a comfortable physical environment and the maintenance of privacy but also nurse behaviors that respect patients as individuals with unique physical and psychological needs.



The results of the analysis of information conveyed by nurses proved to have a significant effect on patient satisfaction. This finding is more specifically related to information about the clarity of nurses when orienting the inpatient room, information about the patient's health development status and information related to all actions taken. This supports the results of research stating that providing optimal information can improve good experiences and patient expectations. Knowing the type of information that patients want to receive and the desired way of delivering preferred information is an important thing that nurses must do (de Steenwinkel et al., 2022). Several methods can be used to modify the way information is delivered to patients, either verbally, audio or through writing such as leaflets and brochures. Effective communication ensures that the information is clearly understood by both patients and healthcare providers. When patients receive optimal and appropriate information, it fosters a sense of calm and reassurance, regardless of their health condition. Consistent with the findings of this study, it was observed that effective information delivery contributed to reductions in patient pain, anxiety, depression, and the overall length of hospitalization.

According to the author, informative communication delivered by nurses represents a form of care that is both educative and supportive. When patients feel understood and receive clear explanations regarding their condition and treatment plan, their trust in nursing services is strengthened. Therefore, it is essential for nurses to possess strong therapeutic and educational communication skills, and to tailor their communication methods to align with each patient's needs, health literacy level, and psychological state. This approach not only enhances patient satisfaction but also contributes to a more effective and accelerated recovery process.

The results indicate that the environmental dimension has a significant influence on patient satisfaction, particularly in aspects such as room design, ventilation, lighting, and security. These findings align with previous research by Jamshidi et al. (2020), which suggests that environmental factors—including unit layout, architectural features, and patient visibility—can reduce pain, anxiety, depression, and even the length of hospitalization. The environment serves as a crucial support factor in the overall quality of nursing care. Elements that are often overlooked, such as spatial arrangement, airflow, and lighting, can have a substantial positive impact on patients' health and their perception of care.

The results of the analysis related to the competence of nurses on inpatient satisfaction have a significant positive effect. This is supported by research which states that the competence of nurses will result in better nursing care, also supported by the experience they have and the opportunities for self-development provided by the (Warshawsky, 2022). The main predictor of professional nursing practice is the competence possessed by nurses, even more important is the experience possessed where this experience provides twice as strong a force on competence compared to further education. Each nurse must have the awareness that increasing this competence requires a process that must be undertaken, this is solely so that nurses are increasingly competent in carrying out their duties and obligations.

## **IMPLICATION**

The results of this study indicate that the quality of nursing care significantly affects patient satisfaction as recipients of health services. Therefore, nurses must continuously improve their care delivery competencies, as their performance has a direct impact on patient outcomes and the overall reputation of healthcare facilities.

## **STRENGTH AND LIMITATIONS**

This study confirms that the quality of nursing care influences patient satisfaction. However, one limitation is the potential for perfunctory responses, despite efforts to control for them. Therefore, future research is recommended to analyze nursing care quality using a more representative sample and improved measurement instruments to strengthen the validity and generalizability of the findings.

## **CONCLUSION**

Based on research that has been conducted on inpatients at the health clinics, it can be concluded that: interpersonal care, efficiency, convenience, communication, environment and competence affects inpatient satisfaction at the Jember Regency Primary Clinic. Suggestions from this research that (1) The health office conducts satisfaction surveys and evaluates to improves the quality of nursing care. (2) The duty nurse in the inpatient room always introduce themselves and provide an explanation of the intervention that will be carried out. (3) Every nurses always improves their competence through various tools available (education, training, etc).

## ACKNOWLEDGMENT

Thank you to Muhammadiyah Jember University for funding this research, as well as to several private clinics that have agreed to be respondents in this study.

## CONFLICT OF INTEREST

The authors confirm the absence of any conflicts of interest.

## REFERENCES

- Aiken, L. H., Sloane, D. M., Brom, H. M., Todd, B. A., Barnes, H., Cimiotti, J. P., Cunningham, R. S., & McHugh, M. D. (2021). Value of Nurse Practitioner Inpatient Hospital Staffing. *Medical Care*, 59(10), 857–863. <https://doi.org/10.1097/MLR.0000000000001628>
- Brooks, S. K., Greenberg, N., Wessely, S., & Rubin, G. J. (2021). Factors affecting healthcare workers' compliance with social and behavioural infection control measures during emerging infectious disease outbreaks: Rapid evidence review. *BMJ Open*, 11(8). <https://doi.org/10.1136/bmjopen-2021-049857>
- Chen, X., Zhao, W., Yuan, J., Qin, W., Zhang, Y., & Zhang, Y. (2022). The Relationships Between Patient Experience with Nursing Care, Patient Satisfaction and Patient Loyalty: A Structural Equation Modeling. *Patient Preference and Adherence*, 16(October), 3173–3183. <https://doi.org/10.2147/PPA.S386294>
- de Steenwinkel, M., Haagsma, J. A., van Berkel, E. C. M., Rozema, L., Rood, P. P. M., & Bouwhuis, M. G. (2022). Patient satisfaction, needs, and preferences concerning information dispensation at the emergency department: a cross-sectional observational study. *International Journal of Emergency Medicine*, 15(1), 1–8. <https://doi.org/10.1186/s12245-022-00407-7>
- Freitas, J. S. de, Silva, A. E. B. de C., Minamisava, R., Bezerra, A. L. Q., & Sousa, M. R. G. de. (2014). Qualidade dos cuidados de enfermagem e satisfação do paciente atendido em um hospital de ensino. *Revista Latino-Americana de Enfermagem*, 22(3), 454–460. <https://doi.org/10.1590/0104-1169.3241.2437>
- Hannawa, A. F., Wu, A. W., Kolyada, A., Potemkina, A., & Donaldson, L. J. (2022). professionals and patients: A qualitative study. *Patient Education and Counseling*, 105(6), 1561–1570. <https://doi.org/10.1016/j.pec.2021.10.016>
- Kannan, S., Avudaiappan, S., & Annamalai, M. (2020). Patients' satisfaction with nursing care quality in medical wards at selected hospital in Chennai, South India. *Iranian Journal of Nursing and Midwifery Research*, 25(6), 471–475. [https://doi.org/10.4103/ijnmr.IJNMR\\_142\\_19](https://doi.org/10.4103/ijnmr.IJNMR_142_19)
- Karaca, A., & Durna, Z. (2019). Patient satisfaction with the quality of nursing care. *Nursing Open*, 6(2), 535–545. <https://doi.org/10.1002/nop2.237>
- Kibret, H., Tadesse, B., Debella, A., Degefa, M., & Regassa, L. D. (2022). The Association of Nurses Caring Behavior with the Level of Patient Satisfaction, Harari Region, Eastern Ethiopia. *Nursing: Research and Reviews*, Volume 12, 47–56. <https://doi.org/10.2147/nrr.s345901>
- Liu, S., Li, G., Liu, N., & Hongwei, W. (2021). The Impact of Patient Satisfaction on Patient

- Loyalty with the Mediating Effect of Patient Trust. *Inquiry (United States)*, 58. <https://doi.org/10.1177/00469580211007221>
- Lotfi, M., Zamanzadeh, V., Valizadeh, L., & Khajehgoodari, M. (2019). Assessment of nurse–patient communication and patient satisfaction from nursing care. *Nursing Open*, 6(3), 1189–1196. <https://doi.org/10.1002/nop2.316>
- Mahmood, F. J., & Tayib, A. Y. (2020). The Role of Patients’ Psychological Comfort in Optimizing Indoor Healing Environments: A Case Study of the Indoor Environments of Recently Built Hospitals in Sulaimani City, Kurdistan, Iraq. *HERD: Health Environments Research and Design Journal*, 68-82.
- Padma, R., & Bhattacharjee, T. (2021). A Comparative Study to Assess the Level of Patient Satisfaction on Quality of Nursing Care Among parturients admitted in Government and Private Hospitals at Lucknow. *Annals of R.S.C.B.*, 25(04), 31–41. <http://annalsofrscb.ro>
- Peraturan Menteri Kesehatan RI No. 49. (2015). Berita Negara. *Menteri Kesehatan Republik Indonesia Peraturan Menteri Kesehatan Republik Indonesia, Nomor 65(879)*, 2004–2006.
- Purwiningsih, D. D., Suryaningsih, I. B., & Wardhani, V. (2023). *The Effect of Healthcare Service Quality on Trust Through Patient Satisfaction at Public Health Center in Jember*. 9(November), 532–541.
- Saputra, M. D. H. (2021). Pengaruh Service Quality Terhadap Kepuasan Pasien pada RSUD Type D Perwang Kabupaten Siak. *Skripsi Fakultas Ekonomi Dan Bisnis Program Studi Manajemen*.
- Viotti, S., Cortese, C. G., Garlasco, J., Rainero, E., Emelurumonye, I. N., Passi, S., Boraso, F., & Gianino, M. M. (2020). The buffering effect of humanity of care in the relationship between patient satisfaction and waiting time: A cross-sectional study in an emergency department. *International Journal of Environmental Research and Public Health*, 17(8), 1–12. <https://doi.org/10.3390/ijerph17082939>
- Warshawsky, N. E., Cramer, E., Grandfield, E., & Schlotzhauer, A. E. (2022). The influence of nurse manager competency on practice environment, missed nursing care, and patient care quality: A cross-sectional study of nurse managers in U.S. hospitals. *Journal of Nursing Management*.
- World Health Organization. (2018). Handbook for National Quality Policy and Strategy. In *Who*. [http://www.who.int/servicedeliverysafety/areas/qhc/nqps\\_handbook/en/%0Ahttp://apps.who.int/iris/bitstream/handle/10665/272357/9789241565561-eng.pdf?ua=1](http://www.who.int/servicedeliverysafety/areas/qhc/nqps_handbook/en/%0Ahttp://apps.who.int/iris/bitstream/handle/10665/272357/9789241565561-eng.pdf?ua=1)
- Wudu, M. A. (2021). Predictors of adult patient satisfaction with inpatient nursing care in public hospitals of eastern Amhara region, northeastern Ethiopia, 2020. *Patient Preference and Adherence*, 15, 177–185. <https://doi.org/10.2147/PPA.S294041>
- Yan, M., Zhi, M., Xu, Y., Hu, L., & Liu, Y. (2022). Inpatient Satisfaction with Nursing Care and Its Impact Factors in Chinese Tertiary Hospitals: A Cross-Sectional Study. *International Journal of Environmental Research and Public Health*, 19(24). <https://doi.org/10.3390/ijerph192416523>
- Zhang, J., Yang, L., Wang, X., Dai, J., Shan, W., & Wang, J. (2020). Inpatient satisfaction with

nursing care in a backward region: A cross-sectional study from northwestern China.  
*BMJ Open*, 10(9). <https://doi.org/10.1136/bmjopen-2019-034196>