



Satisfaction Index of Employees on Service Quality through Quality Leadership at Three Hospitals B-Type, Central Java Province

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Abstract

One achievement of leadership style is job satisfaction. Therefore, this research aims to analyze the effect of job satisfaction on service quality through the leadership of hospital directors at various Type B Regional General Hospitals. This was done by processing data contained in the Decree of the Minister of Administrative Reform (Kepmenpan) No. Kep/25/M.PAN/2/2004. The research had a cross sectional study design and 500 samples who were employees from both civil servants and BLUD (300 respondents from hospital B type at Semarang city, 100 from Jepara regency, and 100 from Kendal regency). A simple random sampling was the technique used to obtain the subjects. Data processing and analysis was performed using the Community Satisfaction Index of Government Agencies Service Units. The results show that employee satisfaction index, service quality and the quality leadership of hospital B type at Semarang city and at Kendal Regency is decreasing. But hospital B type at Jepara regency is increasing. Therefore, a transformational leadership style can increase employee satisfaction.

INTRODUCTION

Hospital is health service institution that organizes two types of services to the community, namely the first health service and the second administrative service. Job satisfaction is very instrumental in shaping discipline, commitment and employees performance which then affects the service quality in an effort to achieve hospitals goals (Legrain et al., 2015; Viscardi et al., 2014; Hariyati & Safril, 2018). Job satisfaction can be viewed from two sides, namely in terms of employees and hospitals. The employees side, job satisfaction will bring up pleasant feeling at work, while the hospital side, job satisfaction will increase productivity, improve employee attitudes and behavior in providing excellent service (Vis-

cardi et al., 2014; Al Maqbali, 2015; Yarbrough et al., 2017; Hariyati & Safril, 2018; Koning, 2014; Leineweber, et al., 2016; Legrain et al., 2015; Lin et al., 2015). Job satisfaction must be maintaining in order to improve hospital performance.

To optimize job satisfaction Hospital staff need to pay attention to factors that influence employee satisfaction, including leadership style. To achieve good employee satisfaction requires leadership that has the ability. With good leadership style, employee satisfaction can be increasing and will have an impact on improving Hospital performance. Effective leadership style in a work unit will affect work behavior as indicating by increasing job satisfaction.

Employment satisfaction has been an

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important topic for researchers to review. Employees deserve to be treated equally and with dignity. Employment happiness is, to some degree, a result of fair care. Job happiness can also be used as a measure of mental well-being. Managers should work on the job satisfaction of workers and employees who are unhappy are more likely to deliver inadequate services. Jobs are both a major source of income and an important part of life. Work eats up a good part of the working day and therefore adds to one's social status. Job happiness is an essential component of employee well-being (Nemmanivar & Deshpande, 2016).

Nurse satisfaction is one indicator of the quality of health services in the hospital (Rizany et al., 2019). On the contrary, nurse's dissatisfaction will affect the hospital. Hospital may lose its resources due to high turnover, absence, and sick leave (Legrain et al., 2015). In the end, the hospital will suffer losses due to poor performance. Management of health system in Netherlands is better than in any other countries, which lead to lower dissatisfaction among nurses. A study conducting in United Kingdom and Netherlands revealing lower satisfaction in patients as result of lower performances among nurses (Aiken et al., 2018).

Job satisfaction is one of achievements of leadership style. Leadership style plays an important role in influencing job satisfaction both at the leader level and subordinate level. Hospitals of varying styles and ownership status can have an effect on the management style and work satisfaction. Research result showing that nursing managers varies performance in type B government hospitals in West Java (Firmansyah et al., 2018).

Leadership of room head has an important role in implementing the quality managementsystem in the room because the room head has the responsibility in managing, planning, and controlling the performance of his staff in quality management. To overcome the problems in quality management, it can be overcome by the quality leadership of hospital directors orienting to the quality of service (Armstrong-Stassen, et al., 2015; Lin et al., 2015; Koning, 2014).

One indicator of the objectives of the Central Java Strategic Plan (*Renstra*) in 2018-2023 is to improve organizational governance so that satisfaction is achieved with the goal of increasing performance accountability as measured by the Government Institution Performance Accountability System (SAKIP) value and the target of increasing service quality as measured by satisfaction value. Good governance is the focus of promotive and preventive primary services, espe-

cially in the specialty health services of the Non-Type Type B Hospital. Based on the Regulation of the Social Health Insurance Administering Agency in Health (*BPJS-Kesehatan*) Number 7 of 2018 concerning Management of Administration of Health Facilities Claims in the Implementation of Health Insurance that that referral seek treatment through type D hospitals before going to types C, B, and A. Number of hospitals in Central Java in 2018 type A were 8 hospitals, type B were 34 hospitals, type C were 142 hospitals, and type D were 116 hospitals. Thus, the effect of the BPJS Health Director's regulation is that type C hospitals must be referred to type B hospitals to become the most referral hospitals compared to type A hospitals.

Type B Hospitals in Kendal, Semarang and Jepara are General Hospitals owned by Regency/City Governments with type B. In 2009 they were Regional Hospitals in Central Java that have been declared Regional Public Service Agency (*BLUD*). The average number of nurses hospitalized in 2019 is 393, consisting of 173 civil servants and 220 contract employees. This number has decreased in the last 3 years due to outgoing transfers / transfers of nurses since 2016.

The achievement of the average BOR (Bed Occupancy Rate) over the last three years is still approaching the lower limit of the BOR standard by the Indonesian Ministry of Health (60-85%), were 66% (2016), 69.06% (2017) and 69.21% (2018). Based on medical record data, visits in the last three years have increased. Meanwhile, the ratio of the number of nurses to beds is 8:10. This does not meet the provisions of the Minister of Health Regulation (*PMK*) No. 30 in 2019 that the ratio of the number of nurses to beds in type B hospitals is 1:1. This shortage of personnel will cause high workloads carried by nurses. The high workload will affect the job satisfaction of nurses.

Then the data on the list of complaints in the hospital's Customer Service section found that the nursing and infrastructure section ranked first per section in December 2019. Meanwhile, the hospital staffing attendance recap of nurses in April-May 2019 decreased were 12% and May-June 2019 were 15%. Judging from the number of hospital nurse Human Resources (SDM) from the last 3 years from 2016 to 2019, it has decreased with the outgoing/transfer of nurses.

Based on the description, the purpose of this study is to analyze the satisfaction index of Type B Hospital employees in Semarang City, Kendal Regency, and Jepara Regency on service quality through quality leadership by processing the data containing in the Decree of the Minis-

Table 1. NRR and IKM Interpretation

| NRR | IKM | Service Quality | Service Unit Performance |
|-----------|--------------|-----------------|--------------------------|
| 1,00–1,75 | 25–43,75 | D | Not Good |
| 1,76–2,50 | 43,76–62,50 | C | Deficient |
| 2,51–3,25 | 62,51–81,25 | B | Good |
| 3,26–4,00 | 81,26–100,00 | A | Very Good |

ter of Administrative Reform (Kepmenpan) No. Kep/25/M.PAN/2/2004. The results of this study are expecting to be using as evaluation material for the Director of Type B Hospital in Semarang City, Kendal Regency, and Jepara Regency to improve employees satisfaction with service quality through quality leadership providing.

METHOD

This type of quantitative research is analytic survey method. The study design is cross sectional, namely observing the measuring variables carrying out and observing at the same time. Population are all employees working in Type B Hospital Semarang City, Jepara Regency, and Kendal Regency. Based on the Regulation of the Social Health Insurance Administering Agency (BPJS) Health Number 7 of 2018 concerning Management of Administration of Health Facilities Claims in the Implementation of Health Insurance that that referral seek treatment through type D hospitals before going to types C, B, and A. Number of hospitals in Central Java in 2018 type A were 8 hospitals, type B were 34 hospitals, type C were 142 hospitals, and type D were 116 hospitals. Thus, the effect of the BPJS Health

Director's regulation is that type C hospitals must be referred to type B hospitals to become the most referral hospitals compared to type A hospitals. Sample are 500 employees from both civil servants and BLUD (hospital B type at Semarang city are 300 respondents, Jepara regency are 100 respondents, and Kendal regency are 100 respondents). The sampling technique using simple random sampling. The research instrument using questionnaire consisting of organizational integrity (indicators are organizational culture and anti-corruption systems, human resource management, budget execution, and compliance with superiors' orders with rules and norms) and job satisfaction (indicators are leadership, compensation, work environment, opportunity promotion, and supervision).

Data processing and data analysis uses method adopting from Kepmenpan No. Kep/25/M.PAN/2/2004 concerning General Guidelines for the Preparation of Community Satisfaction Indexes for Government Institution Service Units. The stages of data processing are as follows:

Calculate each indicator Average Value (NRR) use following formula:

Calculate the weight value or weight that

Table 2. Service Quality of Type B Hospital Semarang Semarang in 2018-2019

| Indicators | Average Value (NRR) | | Information |
|--|----------------------|----------------------|------------------|
| | 2018 | 2019 | |
| Organizational Integrity | | | |
| Organizational culture and anti-corruption system | 4,28 | 3,67 | Decreased |
| Human resource Management (SDM) | 4,23 | 3,59 | Decreased |
| Budget implementation | 4,24 | 3,58 | Decreased |
| Conformity of superior orders with rules and norms | 4,28 | 3,66 | Decreased |
| Job satisfaction | | | |
| Leadership | 4,19 | 3,64 | Decreased |
| Compensation | 3,92 | 3,46 | Decreased |
| Work environment | 3,98 | 3,55 | Decreased |
| Promotion opportunities | 3,82 | 3,42 | Decreased |
| Supervision by direct supervisor | 3,90 | 3,52 | Decreased |
| Total NRR | 36,84 | 32,09 | Decreased |
| Total NRR weighted | 4,09 | 3,55 | Decreased |
| Community Satisfaction Index (IKM) | 102,23 | 89,05 | Decreased |
| Service Quality | A (Very Good) | A (Very Good) | |

Table 3 Service Quality of Type B Hospital Kendal Regency in 2018-2019

| Indicators | Average Value (NRR) | | Information |
|--|---------------------|---------------|------------------|
| | 2018 | 2019 | |
| Organizational Integrity | | | |
| Organizational culture and anti-corruption system | 3,98 | 4,06 | Increased |
| Human resource Management (SDM) | 3,98 | 3,93 | Decreased |
| Budget implementation | 4,00 | 3,93 | Decreased |
| Conformity of superior orders with rules and norms | 4,10 | 4,07 | Decreased |
| Job satisfaction | | | |
| Leadership | 4,07 | 4,08 | Increased |
| Compensation | 3,86 | 3,62 | Decreased |
| Work environment | 4,02 | 3,95 | Decreased |
| Promotion opportunities | 3,87 | 3,80 | Decreased |
| Supervision by direct supervisor | 3,84 | 3,78 | Decreased |
| Total NRR | 35,72 | 35,22 | Decreased |
| Total NRR weighted | 3,96 | 3,91 | Decreased |
| Community Satisfaction Index (IKM) | 99,12 | 97,74 | Decreased |
| Service Quality | A (Very Good) | A (Very Good) | |

will be use for all indicators with the following formula:

Value of Community Satisfaction Index (IKM), calculating use the Average Value (NRR), then third step is to calculate NRR Weighting use the following formula:

Weighted NRR = NRR X Weighting Value

IKM service units are obtaining from sum of Weighting NRR for each indicator to make it easier to interpret. Converting with base value is 25.

IKM Service Unit = \sum Weighted NRR

each indicator X 25

After knowing NRR and IKM value is to interpret results of NRR and IKM.

Table 1 represented NRR and IKM values based on *Kepmenpan* No. Kep/25/M. PAN/2/2004 concerning General Guidelines for Preparation of Community Satisfaction Indexes for Government Institution Service Units (Hazfiarini & Ernowaty, 2016).

Furthermore, IKM of each public hospital is comparing between 2018 and 2019, to further examine the increase and decrease in order to

Table 4. Service Quality of Type B Hospital Jepara Regency in 2018-2019

| Indicators | Average Value (NRR) | | Information |
|--|---------------------|----------------------|------------------|
| | 2018 | 2019 | |
| Organizational Integrity | | | |
| Organizational culture and anti-corruption system | 2,68 | 3,91 | Increased |
| Human resource Management (SDM) | 2,67 | 3,91 | Increased |
| Budget implementation | 2,89 | 3,78 | Increased |
| Conformity of superior orders with rules and norms | 2,86 | 3,95 | Increased |
| Job satisfaction | | | |
| Leadership | 2,47 | 3,95 | Increased |
| Compensation | 2,33 | 3,70 | Increased |
| Work environment | 2,66 | 3,85 | Increased |
| Promotion opportunities | 2,75 | 3,59 | Increased |
| Supervision by direct supervisor | 2,81 | 3,64 | Increased |
| Total NRR | 24,12 | 34,28 | Increased |
| Total NRR weighted | 2,68 | 3,81 | Increased |
| Community Satisfaction Index (IKM) | 66,93 | 95,13 | Increased |
| Service Quality | A (Good) | A (Very Good) | |

improve service quality of Type B hospitals in Semarang City, Kendal Regency, and Jepara Regency.

RESULT AND DISCUSSION

Based on the results of data processing and questionnaire analysis data from 500 respondents Type B Hospital at Semarang City, Kendal Regency, and Jepara Regency, below are service quality through quality leadership is based on calculations adopting from *Kepmenpan* No. Kep/25/M.PAN/2/2004 can be seen in tables 2, 3, and 4.

From Table 2, the employees satisfaction index on organizational integrity, Type B Hospital Semarang city in 2018 and 2019, all indicators are decreasing. Job satisfaction index with all indicators are decreasing. There is decreasing in IKM from 2018 to 2019 amounting to 13.18 and service quality is still A (Very Good).

From Table 3 employees satisfaction index on organizational integrity of type B Hospital Kendal Regency in 2018 and 2019, indicators that increased is organizational culture and anti-corruption system while other indicators are decreased. Job satisfaction index, an indicator that is increased is leadership while other indicators are decreased. There is decreasing in IKM from 2018 to 2019 of 1.38 and service quality is still A (Very Good).

From Table 4 employees satisfaction index on organizational integrity and job satisfaction of type B Hospital Jepara Regency in 2018 and 2019, all indicators have increased. The increasing of IKM from 2018 to 2019 is 28.2 and service quality from B (Good) to A (Very Good).

Experts have causes that influence the happiness of nurses. Satisfaction of nurses impacted wages, job arrangements, working conditions, benefits, assistance and carrier opportunities and scheduling (Viscardi et al., 2014; Chang et al. 2017). Another research found that job satisfaction was influenced by career ladder, room form, community and social factors in the working environment (Yarbrough et al., 2017). Educational standard is a nurse's degree in education to work in a health care facility. The educational standard of nursing in Indonesia ranges from vocational, bachelor, professional and doctoral standard. Title Bachelor of Nursing in Indonesia, we call Ners with abbreviation Ns, however, some nurses had just qualified or qualified. Career ladder shows the level of ability of nurses to conduct nursing procedures by considering their professional experience or years of service. Career ladder strategy in Indonesia is laid down in Health Ministry Regu-

lation No. 40 Year 2014 on career ladder. Career nursing ladders start from PK I to PK V. Nurses who have recently begun their nursing career are known as pre-clinical before they have served in a hospital for at least 6 months. Scheduling is a crucial factor in improving workplace satisfaction (Koning, 2014; Leineweber et al., 2016).

Scheduling management is a method of arranging, coordinating, staffing, acting and managing nurses working hours (Armstrong-Stassen et al, 2015; Lin et al., 2015). Centralization, decentralization and self-scheduling are a form of scheduling mechanism. A nurse manager can add one of these three forms to the organization of the schedule. Each form has particular strength and weakness (Koning, 2014). Nurse managers should consider the competencies of staff, number of staff, versatility, balance and skill combination in the management of the schedule (Rizany et al., 2019).

Scheduling controls and allocates time to carry out preparation activities (Legrain et al., 2015; Lin et al., 2015). As such, scheduling management refers to a method that includes planning to monitor the management role undertaken by the boss in the management and distribution of the nurse's job shift to provide nursing care to ensure patient safety. Scheduling is classified into three groups, namely centralisation, decentralization and self-scheduling. Shift management for nurses can be centralized by the nursing boss. Centralizing schedules will increase the satisfaction of nurses with shift work by up to 34% and decrease costs by up to 1%, as well as make it easier to mobilize nurses to the understaffed unit. The timetable for nurses can even be decentralised by the head nurse. Head nurses are responsible for planning changes and attendance based on the individual attributes of nurses, which promote decision-making and improve direct patient treatment. In addition, nurses can carry out self-scheduling without the process of centralization and decentralization. The self-scheduling process is carried out by presenting a job schedule to a lower-level manager and the manager will settle on the scheduling according to the criteria and needs of the unit, thereby ensuring consistency in deciding the shift schedule (Koning, 2014). Self-scheduling is rarely carried out in Indonesia, however, since nurses usually work full-time (Rizany et al., 2019).

The analysis showed a low level of happiness felt by workers. The low degree of satisfaction can be due to a number of reasons. In this analysis, employees are considered to have a lower level of satisfaction with salary and carrier

growth. Employees are unhappy with their wages and unhappy with their prospects for growth. Previous research reported that an acceptable wage was correlated with the degree of happiness of workers (Al Maqbali, 2015). Other study has reported the effect of carrier growth on the happiness of employees (Salem et al., 2016). This research showed the introduction of scheduled nurse supervision and the happiness of nurses. Previous research have confirmed this finding (Viscardi et al., 2014; Al Maqbali, 2015); a well-planned process was associated with improved nurse satisfaction. The nurse scheduled process helped nurses to have a balance between their professional and personal lives. Nurse administrators have played a crucial role in the scheduled nurse control process (Hariyati & Safril, 2018; Rizany et al., 2017).

Five management roles (planning, coordinating, staffing, working and controlling) in the nurse scheduling process often indicate a strong correlation with the level of happiness of the nurse. The planning role offered guidelines for the future investment strategy (Viscardi et al., 2014; Armstrong-Stassen et al., 2015). In this position, the nurse manager develops policies to improve the degree of satisfaction of nurses. Organizing the role of assigning nurses to work by compliance with their job description, order and structure, which can result in the impression of satisfaction with their work (Viscardi et al., 2014; Al Maqbali, 2015). In the staffing role, nurse managers have organized and supervised nurses to work in compliance with their competencies, which can give them a feeling of satisfaction with their work. Acting by inspiration and contact is correlated with the happiness of the nurse. Finally, the monitoring function performed by nurse managers can continue to complete the management function by constant supervision, which will increase the productivity of nurses and alleviate job tension.

Alameddine et al. (2017) study revealed that paradoxical relationship exist between job satisfaction and job sickness among German nurses. Trend analysis from 1990 to 2013 was done in study. Trend showed that nurses with higher satisfaction had higher stickiness rate. Guarnaccia et al. (2018) study described association of job satisfaction and occupational self –efficacy on health of employees that resulted in their overall performance. Lee et al. (2018) studied and tested a model on employee experiences of workplace could deliver resulted in overall satisfaction of life.

Aloisio et al. (2018) study suggested that employee level and organization level variable

were responsible for job satisfaction in health care professionals and that leads to better quality of care. This study was done in elder care setting (Long term care setting). Ghareeb et al., (2018) study revealed that employees worked in health setting considered accreditation as a positive aspect for the organization and this specific staff perception positively correlated with the quality of care in health care organization. It directly showed attitude of employees directly linked with quality of care in health care organization.

Effective leadership styles such as transformational and transactional leadership styles have significant positive relationship with patient satisfaction level. In contrast to laissez faire where leader is declaring to fail to be leader. In addition, several studies have emphasizing importance of leadership style for the quality of health services in hospitals (Sfantou et al., 2017). Type of hospital and organizational culter plays an important role in stimulating the human work spirit. Place of service (public hospital and private hospital) had significant different on satisfaction of health insurance (Listiyana & Rustiana, 2017). Organizational culture has a positive and significant effect on staff performance (the coefficient of determination of 0.644) (Atmojo et al., 2018).

Other studies in identifying hospitals in Italy show that most room heads adopt transactional leadership style, but transformational leadership style remains dominantly emulating by room head in the world (Morsiani et al., 2016). Research conducted in Jordan shows that room head at Hospital has adopted transformational leadership style and had an impact on job satisfaction of implemented nurses (Abdelhafiz et al., 2015). Research conducted by Abdelhafiz et al. (2016) identified that transformational leadership styles can contribute to increasing nurse retention. Interview analysis results showed that participants described that transformational leadership is very effective to be applied (Saleh et al., 2018). Effective leadership styles such as transformational and transactional leadership styles had significant positive relationship with employees satisfaction. In contrast to laissez faire where leader is declared to fail to be leader. In addition, several studies had emphasized importance of leadership style for health quality services in hospitals (Sfantou et al., 2017).

There were some limitations in this study. The thesis set out some shortcomings and clears the way for future studies. Second, the highest is the limited sample size (500) relative to the overall population employed in the respective public hospital of Type B Hospital Semarang City, Jepara

Regency and Kendal Regency. Second, the study considered just a public hospital, thus confirming the potential for distinction between private and public sector hospitals for other researchers, eager to widen and contribute their studies on the employee satisfaction index of standard of service by quality leadership or with a particular (yet unexplored) target group in the hospital. Third, additionally, subjective measures of employee satisfaction were used instead of objective measures. However, this study shows that satisfaction index of employees is inherently interwoven with organizational commitment. Since organizational commitment has a direct impact on employee retention, performance, and organizational behavior, it is essential to meet the required conditions for its existence.

CONCLUSION

Transformational leadership style is leadership style that can increase employees satisfaction. This research result are employees satisfaction index of service quality through quality leadership of type B hospital Semarang City and Kendal Regency is decreased and type B hospital Jepara Regency is increased. It is recommended for hospitals to increase employees satisfaction with service quality through quality leadership. Hospitals should implement more quality management system in service quality and implement quality management system, so the role of quality leadership is needed by hospital director.

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