The Influence of Service Quality on Outpatient General Satisfaction at the Regional General Hospital (RGH) Dr. H. Andi Abdurrahman Noor Tanah Bumbu District, South Kalimantan Province

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Abstract
The research aims to examine the influence of service quality on outpatient general patient satisfaction at the Regional General Hospital (RGH) dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency. A correlational study with a quantitative approach was adopted to describe the influence of service quality on general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency. The research was conducted on 97 general outpatients and was carried out for a month. It is such a long sentence that is hard to understand. Try to simplify it. My suggestions: The study shows the following results: (1) service quality (such as tangibles, reliability, responsiveness, assurance, and empathy) had a significant effect simultaneously on general outpatient patient satisfaction; (2) service quality (such as tangibles, reliability, assurance) had a partially significant effect on general outpatient patient satisfaction; (3) quality services (covering responsiveness and empathy) do not have a partially significant effect on outpatient general patient satisfaction, and; (4) assurance has a dominant effect on outpatient general patient satisfaction.

Keywords: Service Quality, Tangibles, Reliability, Responsiveness, Assurance, Empathy, Patient Satisfaction

1. Introduction
Hospitals are healthcare facilities established with the primary aim of providing medical care and medical diagnostic services, as well as medical rehabilitation efforts to meet patient needs. The recovery of patients under treatment is one of the primary objectives of patient care in hospitals. Hospitals, as one of the healthcare service facilities, also serve as referral destinations for lower-level healthcare services such as Community Health Centers (Puskesmas), private medical practices, and other hospitals. Therefore, as a primary referral destination for healthcare services, hospitals need to maintain the quality of their services to meet the needs of the public. Healthcare services are continually demanded by service users in the healthcare sector to improve and, ultimately, the organization's goal of delivering excellent and quality services can be realized.
Regional General Hospital (RGH) dr. H. Andi Abdurraham Noor Tanah Bumbu Regency is one of the government hospitals that provides health services. As a government general hospital RGH dr. H. Andi Abdurraham Noor must have complete facilities needed for all medical procedures. Apart from that, quality of service is also needed in serving each patient. RGH Dr.

H. Andi Abdurraham Noor is a class C state hospital. This hospital is able to provide limited specialist and subspecialist medical services.

Service quality is related to the expectations and needs of consumers, which means that a hospital can be said to be of quality if it is satisfied or in accordance with the patient's wishes. This can make patients more loyal to the hospitals they visit. Quality is based on the actual experience of customers or consumers with products or services which are measured based on these requirements. If the service is met according to expectations then the patient will feel satisfied and if what happens is not in accordance with the patient's expectations it will cause a decrease in the number of patients visiting. Providing the best service quality is not something that is easy for hospital managers because the services provided by hospitals involve the quality of life of their patients so that if an error occurs in a medical procedure it can have a negative impact on the patient.

In the Regulation of the Minister of Health of the Republic of Indonesia Number 4 of 2019 concerning technical standards for fulfilling the quality of basic services in the minimum service standards in the health sector, it is stated that the fulfillment of the quality of service for each type of basic service in the minimum health service standards must be 100%. This shows that the fulfillment of the quality of basic services must be really considered and strived for to the maximum by RGH dr. H. Andi Abdurraham Noor.

Service quality can be measured through several instruments. These instruments include tangibles: appearance of physical facilities, equipment, personnel and communication materials; reliability: the ability to perform promised services reliably and accurately; responsiveness: willingness to help customers and provide prompt service; assurance: employees' knowledge and courtesy and their ability to inspire trust and confidence; empathy: the caring, individualized attention a company gives to customers. In improving service quality, it is necessary to pay attention to one indicator, namely patient satisfaction.

Patient satisfaction can reflect the quality of health services. The more perfect patient satisfaction, the better the quality of health services. However, relatively good service quality does not necessarily satisfy patients. In general, patients cannot assess technical competence, but they judge the quality of service from non-technical characteristics or interpersonal relationships and patient comfort. One effort to maintain service quality is to create satisfaction in patients because satisfaction is one of the keys to the success of a business. In accepting and serving outpatients as consumers with various characteristics, hospitals must equip themselves to always listen to consumers' voices, and have the ability to respond to every desire, consumer expectation and demands of health service users. This is closely related to health workers who always accompany and serve patients as consumers.

This is in accordance with complaints made by a number of patients at RGH dr. H. AndiAbdurraham, such as:

1. Tangibles, the polyclinic waiting room is not big enough, there are still many patients waiting outside the polyclinic waiting room, there are not enough places for patients to sit while waiting to take medicine.
2. Reliability, the process of registering patients for treatment is quite long, due to the lack of outpatient clinic registration officers and the lack of computers
3. Responsiveness, the patient complained that the staff did not provide clear information regarding the location of the polyclinic and hospital cashier that the patient wanted to visit, resulting in the patient getting lost elsewhere and waiting for a long time when picking up medicine at the pharmacy.
4. Assurance, patients often complain that polyclinic health workers are indifferent, sometimes they don't answer when asked, they are not friendly towards patients.
5. Empathy, health workers pay less attention to the patient queue at the polyclinic, because patients complain that patients who arrive later are served first, patients who arrive earlier feel annoyed.

Based on this background, this research tries to examine the factors that influence patient satisfaction, by taking the service quality variable as one of the factors that is felt to have an influence on patient satisfaction. The next question in this research is

1. Does service quality including tangibles, reliability, responsiveness, assurance, and empathy have a simultaneous effect on general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency, South Kalimantan Province?
2. Does service quality including tangibles, reliability, responsiveness, assurance, and empathy have a partial effect on general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency, South Kalimantan Province?
3. Service quality variables include tangibles, reliability, responsiveness, assurance, and empathy, which have the dominant influence on general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency, South Kailamtan Province?

2. Literature Review
2.1 Service quality
Service quality is the totality of characteristics of goods and services that demonstrate their ability to satisfy customer needs, both obvious and hidden. For companies operating in the service sector, providing quality service to customers is an absolute must if the company wants to achieve success. Service quality is an important factor in the utilization of health services. Assessment of good service quality is not limited to physical healing of illnesses, but also to the attitude, knowledge and skills of officers in providing services, communication, information, courtesy, punctuality, responsiveness and the availability of adequate facilities and physical environment (Farozy, 2017).

According to Az-zahroh (2017:99) quality health services are health services that are needed, in this case it will be determined by the health service profession and at the same time desired by both patients and the community and affordable by people's purchasing power, while guaranteeing the quality of health services is systematic and continuous efforts to monitor and

measure quality and carry out necessary quality improvements so that the quality of health services always conforms to agreed health service standards.

According to Sudarso (2016:55) Service is any act or performance that one party can offer to another that is essentially intangible and does not result in the ownership in anything or it can be said that service is an action or activity offered by one party to another party which is essentially intangible and does not result in ownership of anything. In reality, it turns out that it is not easy to differentiate a product as a good or service precisely, because of the complementarity between the two.

There are five categories of services that can be distinguished, namely:
a. Pure Tangible Good, the offer consists solely of physical products, without any services or services that complement them.
b. Tangible Good With Accompanying Service, This category is a physical product accompanied by one or more complementary services to increase the product's attractiveness to customers.
c. Hybrid, In this category, the offer is equal in size between goods and services.
d. Major Service With Accommodating Minor Goods And Service, the offer consists of a basic service together with additional (complementary) services or supporting goods.
e. Pure Service, Offering almost all services. Services have four distinct key characteristics as follows:
1. Intangible, This is the most basic and often cited difference between goods and services. Unlike tangible goods, services cannot be publicly seen, tasted, felt, heard or smelled before consumption. For this reason, customers often look at signs of service, for example the World of Mouth Program, reputation, accessibility, communication and physical facilities.
2. Inseparability (or Simultaneous Production and Consumption), There is a striking difference between physical goods and services in terms of sequence and consumption: that goods are first produced, then stored and finally sold and consumed, services are first sold, then produced and consumed simultaneously. simultaneously.
3. Variability (or heterogeneity), The inevitable consequence of simultaneous production and consumption is variability in service performance. The quality of service can vary depending on who provides it, as well as when and how it is provided.
4. Perishability, Services cannot be stored for further sale or use.

According to Fandy Tjiptono & Chandra (2016: 182), improving service quality is not as easy as turning the palm of your hand or pressing a light switch. There are many factors that need to be considered carefully, because efforts to improve service quality have a significant impact on the overall organizational culture. Among the various factors that need primary attention are the following.
a. Identifying the Main Determinants of Service Quality. Every service provider must strive to deliver the best quality service to its target customers. This effort requires a process of identifying the main determinants or factors determining service quality based on the customer/patient perspective.

b. Managing Customer Expectations, It is not uncommon for a company to try to exaggerate its communication messages to customers with the aim of attracting as many customers as possible. Things like this can "backfire" for the company. The more promises made, the greater the customer's expectations.

c. Managing Service Quality Evidence Management of service quality evidence aims to strengthen customer perceptions during and after the service is delivered.

d. Educating Customers About Services, Helping customers understand a service is a positive effort to realize the process of delivering and consuming services effectively and efficiently.

e. Developing a Quality Culture, Quality culture is an organizational value system that produces an environment that is conducive to the process of creating and continuously improving quality.

f. Creating Automating Quality, Automation has the potential to overcome the problem of variability in service quality caused by a lack of human resources in the organization.

g. Following up on services, following up on services is necessary in order to perfect or improve service aspects that are less than satisfactory and maintain aspects that are already good.

h. Developing a Service Quality Information System. A service quality information system is a system that systematically integrates various research approaches in order to collect and disseminate service quality information to support decision making.

According to Sudarso (2016:58), Service Quality Indicators state that there are five main dimensions known as Serqual (service quality) which are used by customers to assess service quality status, namely as follows:

a. Tangibles, the ability of a company to demonstrate its existence to external parties. The reliable appearance and capability of the company's physical facilities and infrastructure as well as the condition of the surrounding environment is one of the ways service companies provide quality service to customers. Can include physical facilities (buildings, books, tables and chairs, etc.), technology (equipment and equipment used), as well as employee appearance.

b. Reliability, the company's ability to provide services in accordance with what is promised accurately and reliably. Performance must be in accordance with customer expectations which is reflected in punctuality, equal service to all customers without errors, sympathetic attitude and high accuracy.

c. Responsiveness, Willingness to help customers and provide services quickly and accurately by conveying clear information. Ignoring and leaving customers waiting without a clear reason causes a negative perception of service quality.

d. Assurance, the ability of service providers to foster service users' trust in health facilities with knowledge and courtesy. Communication, credibility, security, competence and courtesy are important components of this assurance indicator.

e. Empathy, Providing sincere and individual or personal attention given to customers by trying to understand consumer desires where a company is expected to have an understanding and knowledge of customers, understand specific customer needs, and have operating times that are comfortable for customers.

According to Zeithaml et al in (Hardiyansyah, 2018), the dimensions of service quality mentioned above can be developed into ten dimensions as follows:

a. Tangible, consisting of physical facilities, equipment, personnel and communications.

b.   Reliable, consisting of the service's ability to provide the promised service correctly.

c. Responsiveness, the willingness to help consumers take responsibility for the quality of services provided.

d.   Competence, the demands they have, good knowledge and skills by the apparatus in providing services.

e. Courtesy, friendly, friendly attitude or behavior, responsive to consumer desires and willing to make personal contact or relationships.

f. Credibility, honest attitude in every effort to attract public trust.

g.   Security, the services provided must be guaranteed to be free from various dangers and risks.

h.   Access, there is ease in making contact and approaching.

i. Communication, the willingness of service providers to listen to the voices, desires or aspirations of customers, as well as the willingness to always convey new information to the public.

j. Understanding the customer, making every effort to find out customer needs

2.2 Patient Satisfaction

Patient satisfaction can be described as the feeling that arises after receiving something. Patient satisfaction is a reference in improving the quality of service. Loyalty can be obtained with quality service and can also bring in new customers. This is because satisfaction is closely related to "word of mouth". Patient satisfaction is a reflection of the quality of health services they receive. Patient satisfaction can also be interpreted as a consumer attitude, namely some degree of liking or disliking the service they have experienced. A person's interest in using hospital services again will be greatly influenced by their past experience when using the same service to receive services. (Supartiningsih, 2017).

According to Syarifudin (2012: 16), the factors that influence patient satisfaction with health services are:

a. The staff's approach and behavior, the patient's feelings, especially when they first arrive.

b. The quality of information received, such as what to do, what to expect.

c. Agreement procedures.

d. Waiting time.

e. Public facilities available.

f. Other services such as food quality, privacy and visit arrangements.

g. Therapeutic outcome and care received.

According to Indrasari (2019:87-88) in determining the level of customer satisfaction, there are five main factors that companies must pay attention to, namely:

a. Product quality, customers will feel satisfied if their evaluation shows that the product they use is of good quality.

b. Quality of service, customers will feel satisfied if they receive good service or as expected.

c. Emotionally, customers will feel proud and believe that other people will be amazed by them, if they use certain products which tend to have a higher level of satisfaction.

d. Price, products with the same quality but a relatively low price offer greater value to customers.

e. Cost, customers who do not incur additional costs or do not need to waste time to get a product tend to be satisfied with the product.

Indicators for measuring customer satisfaction, according to Indrasari (2019:92) are:

a. Conformity to expectations, namely satisfaction is not measured directly but is concluded based on the conformity or discrepancy between customer expectations and actual company performance.

b. Intention to revisit, namely customer satisfaction is measured by asking whether the customer wants to buy or use the company's services again.

c. Willingness to recommend, namely customer satisfaction is measured by asking whether the customer would recommend the product or service to other people such as family, friends, and others.
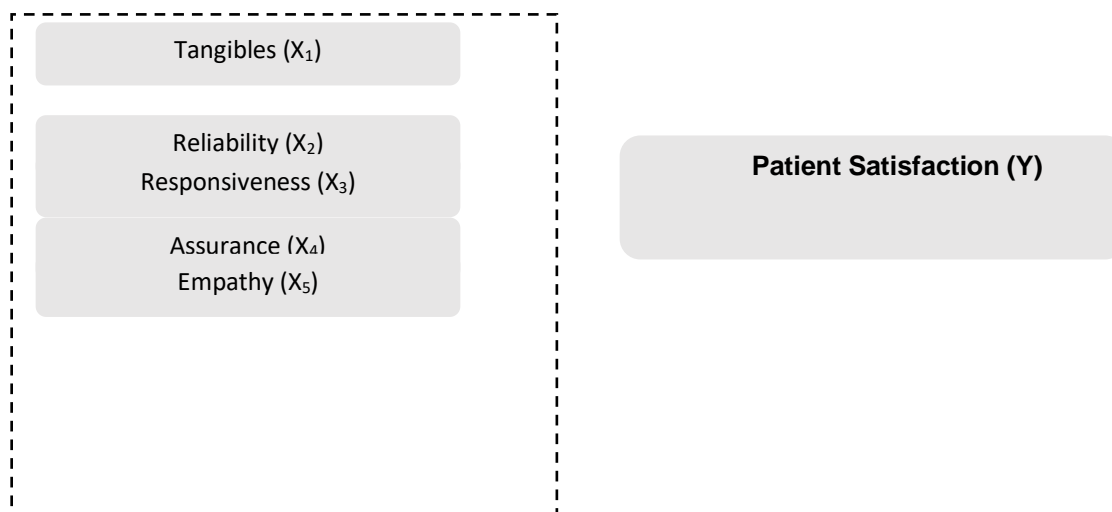
2.3 conceptual framework

Tangibles (X_1)

Reliability (X_2)
Responsiveness (X_3)

Assurance (X_4)
Empathy (X_5)

Patient Satisfaction (Y)

Figure 1 Conceptual Framework

2.4 Hypothesis

H_1 : Service quality including tangibles, reliability, responsiveness, assurance, and empathy simultaneously influence general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency, South Kalimantan Province

H_2 : Service quality including tangibles, reliability, responsiveness, assurance, and empathy have a partial effect on general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency, South Kalimantan Province

H_3 : Tangibles have a dominant influence on general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency, South Kalimtan Province.

3. Research Methodology

The population in this study is the number of general outpatients in 2022, namely 3,441 people. General patients are paid outpatients who do not use insurance. Determining the sample size used the Slovin formula, with a population of 3,441 patients and with a standard error of 10%, a sample of 97 patients was obtained. This type of correlational research uses a quantitative approach, collecting data or information obtained from direct observation, questionnaires and documentation studies. The data analysis techniques used in this research are instrument validity and reliability testing, classical assumption testing and hypothesis testing. Next, the data was analyzed using multiple regression analysis with the following regression equation: $Y = b_0 + b_1X_1 + b_2X_2 + b_3X_3 + b_4X_4 + b_5X_5 + e$

3.1 Operational Definition of Research Variables

Service quality (X), is the totality of characteristics of goods and services that demonstrate their ability to satisfy customer needs, both obvious and hidden. Service quality is measured through the following indicators:

1. Tangibles (X_1), the ability of a company to demonstrate its existence to external parties. The reliable appearance and capability of the company's physical facilities and infrastructure as well as the condition of the surrounding environment is one of the ways service companies provide quality service to customers. Can include physical facilities (buildings, books, tables and chairs, etc.), technology (equipment and equipment used), as well as employee appearance.

2. Reliability (X_2), the company's ability to provide services in accordance with what is promised accurately and reliably. Performance must be in accordance with customer expectations which is reflected in punctuality, equal service to all customers without errors, sympathetic attitude and high accuracy.

3. Responsiveness (X_3), Willingness to help customers and provide services quickly and precisely by conveying clear information. Ignoring and leaving customers waiting without a clear reason causes a negative perception of service quality.

4. Assurance (X_4), the ability of service providers to foster service users' trust in health facilities with knowledge and politeness. Communication, credibility, security, competence and courtesy are important components of this assurance indicator.

5. Empathy (X_5), Providing sincere and individual or personal attention given to customers by trying to understand consumer desires where a company is expected to have an understanding and knowledge of customers, understand specific customer needs, and have operating hours that are comfortable for them. customer.

Patient Satisfaction (Y), can be described as the feeling that arises after receiving something. Patient satisfaction is a reference in improving the quality of service. Patient satisfaction is measured through the following indicators:

1. Conformity to expectations. Satisfaction is not measured directly but is concluded based on the conformity or discrepancy between customer expectations and actual company performance.

2. Intention to revisit. Customer satisfaction is measured by asking whether the customer wants to buy or use the company's services again.

3. Willingness to recommend, customer satisfaction is measured by asking whether the customer would recommend the product or service to other people such as family, friends, and others.

4. Research Results

4.1 Validity test

Interpretation of the validity test results is carried out by looking at the correlation value between the item scores and the total score. If the calculated r value > r table then it can be concluded that the item is valid. Conversely, if the calculated r value < r table then it is concluded that the item is invalid. The R table is obtained from looking at the values in the r distribution table with N = 97 at a significance of 5%, namely 0.1996.

Table 1
Validity Test Results

No	Statement	r-count	r-table	Description
1	P_1	0,396	0,1996	Valid
2	P_2	0,689	0,1996	Valid
3	P_3	0,375	0,1996	Valid
4	P_4	0,833	0,1996	Valid
5	P_5	0,833	0,1996	Valid
6	P_6	0,720	0,1996	Valid
7	P_7	0,809	0,1996	Valid
8	P_8	0,859	0,1996	Valid
9	P_9	0,667	0,1996	Valid
10	P_{10}	0,626	0,1996	Valid
11	P_{11}	0,677	0,1996	Valid
12	P_{12}	0,835	0,1996	Valid
13	P_{13}	0,709	0,1996	Valid
14	P_{14}	0,899	0,1996	Valid
15	P_{15}	0,769	0,1996	Valid
16	P_{16}	0,899	0,1996	Valid

Source: SPSS data output 2023

From table 1, the calculated r value for each questionnaire item is greater than the r table, so it can be concluded that each questionnaire item is valid.

4.2 Reliability Test

A questionnaire is said to be reliable or reliable if a person's answers to questions are consistent or stable over time. A construct or variable is said to be reliable if it provides a Cronbach Alpha value > 0.60.

Table2
Reliability Test Results

No	Statement	Cronbach's Alpha	Comparison	Description
1	P_1	0.944	0.60	Reliable
2	P_2	0.936	0.60	Reliable
3	P_3	0.944	0.60	Reliable
4	P_4	0.931	0.60	Reliable
5	P_5	0.931	0.60	Reliable
6	P_6	0.934	0.60	Reliable
7	P_7	0.932	0.60	Reliable
8	P_8	0.931	0.60	Reliable
9	P_9	0.936	0.60	Reliable
10	P_{10}	0.937	0.60	Reliable
11	P_{11}	0.935	0.60	Reliable
12	P_{12}	0.931	0.60	Reliable
13	P_{13}	0.935	0.60	Reliable
14	P_{14}	0.930	0.60	Reliable
15	P_{15}	0.933	0.60	Reliable
16	P_{16}	0.930	0.60	Reliable

Source: SPSS data output 2023

From Table 2, the Cronbach's Alpha value of each questionnaire is greater than 0.60, so it can be concluded that each questionnaire item is reliable.

4.3 Multiple Linear Regression Analysis

Table 3
Multiple Linear Regression Test Results

Model	Unstandardized Coefficients		Standardized Coefficients		
	B	Std. Error	Beta	t	Sig.
1 (Constant)	,115	,937		,122	,903
Tangibles (X_1)	,610	,108	,249	5,624	,000
Reliability (X_2)	,702	,209	,213	3,365	,001
Responsiveness (X_3)	,012	,212	,004	,058	,954
Assurance (X_4)	1,839	,141	,730	13,059	,000
Empathy (X_5)	-,229	,155	-,073	-1,478	,143

Source: SPSS data output 2023

Based on the results of multiple linear regression analysis in Table 3, the mathematical multiple linear regression equation is: $Y = 0{,}115 + 0{,}610X_1 + 0{,}702X_2 + 0{,}012X_3 + 1{,}839X_4 - 0{,}229X_5 + e$

1. a = 0.115 This means that if all independent variables have a value of zero (0) then the value of the dependent variable satisfaction is 0.115.

2. b_1 = 0.610 for every one unit increase in reliability, the satisfaction variable will increase by 0.610 with the assumption that the other independent variables from the regression model are constant.

3. b_2 = 0.702 for every one unit increase in reliability, the satisfaction variable will increase by 0.702 with the assumption that the other independent variables from the regression model are fixed.

4. b_3 = 0.012 for every one unit increase in reliability, the satisfaction variable will increase by 0.012 with the assumption that the other independent variables from the regression model are fixed.

5. b_4 = 1.839 for every one unit increase in reliability, the satisfaction variable will increase by 1.839 with the assumption that the other independent variables from the regression model are constant.

6. b_5 = -0.229. This value shows a negative influence (in the opposite direction) between the empty and satisfaction variables, meaning that for every one unit increase in the empty variable, the satisfaction variable decreases by -0.229 with the assumption that the other independent variables from the regression model are fixed.

4.4 Hypothesis test
Hypothesis Test I
The first hypothesis (H_1) is that service quality including tangibles, reliability, responsiveness, assurance, and empathy simultaneously influence general patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency.

Table 4
Simultaneous F Test Results

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	430,852	5	86,170	129,593	,000[b]
	Residual	60,509	91	,665		
	Total	491,361	96			

Source: SPSS data output 2023

Based on the SPSS output results in Table 4, the calculated F value is greater than the F table value (129.593> 2.31) with a significance level below 0.05, namely 0.000. Based on the method of making simultaneous test decisions in regression analysis, it can be concluded that the first hypothesis (H_1) can be accepted.

Hypothesis Test II

The second hypothesis (H_2) is that service quality including tangibles, reliability, responsiveness, assurance, and empathy have a partial effect on the satisfaction of general outpatient patients at RGH Dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency.

Table 5
Partial T Test Results

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	,115	,937		,122	,903
Tangibles (X_1)	,610	,108	,249	5,624	,000
Reliability (X_2)	,702	,209	,213	3,365	,001
1 Responsiveness (X_3)	,012	,212	,004	,058	,954
Assurance (X_4)	1,839	,141	,730	13,059	,000
Empathy (X_5)	-,229	,155	-,073	-1,478	,143

Source: SPSS data output 2023

From Table 5, the calculated t and t table values and the significance value of each variable are as follows:

1. The tangibles variable X_1 obtained a calculated t value of $5.624 > $ t table value of 1.990 and a significant value of $0.000 < 0.05$. This means that tangibles have a positive effect on patient satisfaction

2. The Reliability variable X_2 obtained a calculated t value of $3.365 > $ t table value of 1.990 and a significant value of $0.001 < 0.05$. This means that reliability has a positive influence on patient satisfaction.

3. The Responsiveness variable X_3 obtained a calculated t value of $0.058 < $ t table value of 1.990 and a significant value of $0.954 > 0.05$. This means that Responsiveness has no influence on patient satisfaction.

4. The Assurance X_4 variable obtained a calculated t value of $13.059 > $ t table value of 1.990 and a significant value of $0.000 < 0.05$. This means that Assurance has a positive influence on patient satisfaction.

5. The variable Empathy X_5 obtained a calculated t value of $-1.478 < $ t table value of 1.990 and a significant value of $0.143 > 0.05$. This means that empathy has no influence on patient satisfaction.

Based on the method of making partial test decisions in regression analysis, it can be concluded that the second hypothesis (H_2) is rejected.

Hypothesis Test III

The third hypothesis (H_3) is that tangibles have a dominant influence on general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency. The dominant test is carried out to find out which independent variable has the most influence on the dependent variable, when compared with several other independent variables. To find out this dominant variable, you can find out by looking at the beta coefficient value and the largest calculated t value. From table 5, the beta coefficient value of the assurance variable is the largest, namely 0.730 and the calculated t value of the leadership style variable is also the largest, namely 13.059. Based on the dominant test decision making method in regression analysis, it can be concluded that the third hypothesis (H_3) can be rejected.

5. Discussion

Service quality including tangibles, reliability, responsiveness, assurance, and empathy simultaneously influence general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency

Based on the results of the hypothesis test carried out above using the F test (simultaneous), it was found that the calculated F value was greater than the F table value and the significant value was much smaller than 0.05, which means the first hypothesis (H_1) stated that service quality includes tangibles, reliability, responsiveness, assurance, and empathy simultaneously influence general outpatient satisfaction at RGH dr. H. Andi Abdurrahman Noor Tanah Bumbu Regency was accepted. Thus, the simultaneous hypothesis in this research is in line with the results of research conducted by Nerys L Tarigan based on a research sample taken of 100 respondents, with the results of the simultaneous F test stating that the calculated F value is greater than F table and the significant value is smaller than from 0.05.

From these results it can be concluded that the quality of service at RGH dr. H. Andi Abdurrahman Noor is quite satisfactory. All aspects, namely, tangible, empathy, reliability, responsiveness and assurance are quite good and need to be improved further. There is a need to train health workers to be able to provide maximum service. RGH has an important role in providing health services, so various efforts to improve the quality of services should be a priority in developing good health services. This is worth pursuing so that all people can enjoy health services that are affordable and served equally. Because the quality of health services greatly influences the satisfaction of patients who come for treatment at RGH Dr. H. Andi Abdurhaman Noor. This is in accordance with the theory put forward by Muninjaya (2004) that satisfaction is the conclusion of the interaction between expectations and experience after using the services or services provided.

Service quality including tangibles, reliability, responsiveness, assurance, and empathy partially influence general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency

From the results of the hypothesis test above, it shows that the calculated t value of tangibles (X_1) is greater than the t table value, while the significant value is smaller than 0.05, meaning that there is a positive and significant influence between tangibles on patient satisfaction. Furthermore, the calculated t value for reliability X_2 is greater than the t table value, while the

significant value is smaller than 0.05, meaning that reliability has a positive and significant effect on patient satisfaction. Furthermore, the calculated t value of Responsiveness Furthermore, the calculated t value of Assurance Furthermore, the calculated t value of Empathy X_5 is smaller than the t table value and the significant value is greater than 0.05, meaning that Empathy has no significant effect on patient satisfaction.

It can be concluded that the quality of tangible services, reliability and assurance have a significant effect on general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency. This research is in line with Adelia Syahputri's research with a sample of 44 respondents stating that the service quality variable has a positive and significant influence on the satisfaction of inpatients at the Madani General Hospital in Medan.

This means that service quality influences patient satisfaction. So if the quality of service provided by RGH Dr. H. Andi Abdurrahman Noor increases, patient satisfaction will also increase. Likewise, if the quality of the service provided decreases, patient satisfaction will also decrease or the patient will not feel satisfied with the service provided. This is in accordance with what was stated by Pohan that patient satisfaction is a level of patient feelings that arise as a result of the health service performance they receive after the patient compares it with what they expected. Allows patients to feel satisfied or dissatisfied with the health services they receive.

Meanwhile, the quality of service, responsiveness and empathy, do not have a partially significant effect on general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency. This is in line with research conducted by Hariani Ritonga with a sample of 32 respondents who said that service quality variables had no effect on General Inpatient Patient Satisfaction at the Rantauprapat Regional General Hospital.

Respondents' responses to the quality of service, responsiveness and empathy, were considered quite good but did not affect the satisfaction of patients who received treatment at RGH dr. H. Andi Abdurrahman Noor. It is possible that in this case patients do not really pay attention to the quality of service, responsiveness and empathy in terms of their satisfaction with the quality of service provided by officers/employees at RGH dr. H. Andi Abdurrahman Noor.

The variable that has the dominant influence on general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency

Hypothesis H_3 is that tangibles have a dominant influence on general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency, Tangible is an aspect that can be directly seen by the patient which has a visual impact. This aspect includes facilities, equipment, employee appearance. Good tangibles will improve the patient's perception, which will influence patient satisfaction.

From the results of the research hypothesis test above, it can be seen that service quality variables include tangibles, reliability, responsiveness, assurance and empathy, which shows that the highest beta coefficient value is assurance, this means that assurance has a more dominant influence on patient satisfaction. Assurance includes the knowledge, skills, friendliness of RGH employees and their ability to inspire trust and confidence, courtesy and trustworthiness in employees, free from danger, risk or doubt. How important it is to pay attention to assurance in an agency or hospital whose function is to foster a sense of trust in the services offered so as to

create the expected quality of service, which ultimately results in patients feeling satisfied with the services provided.

So it can be concluded that hypothesis H_3 tangibles has a dominant influence on general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor Tanah Bumbu Regency was not accepted or not proven.

6. Conclusion

Based on the analysis and discussion presented, the conclusions of this research are as follows:

1. From the research results, it was concluded that service quality including tangibles, reliability, responsiveness, assurance, and empathy simultaneously had a significant effect on general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency, South Kalimantan Province.
2. From the research results, it was concluded that service quality including tangibles, reliability and assurance had a partially significant effect on general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency, while the quality of service including responsiveness and empathy does not have a partially significant effect on general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency, South Kalimantan Province.
3. From the research results, it was concluded that assurance had a dominant influence on general outpatient patient satisfaction at RGH dr. H. Andi Abdurrahman Noor, Tanah Bumbu Regency, South Kalimantan Province.

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