

Redefining Patient Satisfaction: Satisfaction Driven Innovation of Dental Care Facility from Patient and Healthcare Workers Perspective

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ABSTRACT

The health care industry in Indonesia continues to grow, but the health industry has a low level of resilience. This study aims to explore the factors that are related to patient satisfaction at health care facilities (fasyankes) specifically for teeth and mouth in Indonesia. This study uses a qualitative approach by using triangulation, so that it involves three respondents, namely patients, doctors, and nurses in dental and oral health facilities, with a total of 37 informants. Data was collected by means of semi-structured interviews. The results revealed that in previous studies clinical atmosphere, quality, cost, and communication were frequently used to assess patient satisfaction. Meanwhile, this study offers another perspective and provides evidence that safety, speed, up-to-date, credibility, and ease of processing are important factors that can also promote patient satisfaction. Novelty is obtained by analyzing patient satisfaction in health facilities specifically for teeth and mouth in Indonesia as a unit of research analysis that has never been done in previous studies.

Keywords: patient satisfaction, innovation, dental, healthcare

1. Introduction

The health sector is an important thing which is the main need of the community which is currently experiencing significant growth. Based on data from the Central Statistics Agency (2020) it is stated that the health industry growth rate is 15.3%, the highest growth compared to other sectors. This shows that the health sector is a potential sector to be developed.

In the midst of rapid growth, there are challenges for the healthcare industry to maintain its sustainability. This is a concern because based on data from the US Bureau of Labor (2016), the health sector continues to experience a decline in the level of resilience. Various things can cause this low level of resilience, one of which is customer satisfaction (Vargas et al, 2019; Otto et al, 2020), patients are customers who receive services from health care facilities (fasyankes).

Patient satisfaction is an important thing that needs to be achieved and identified to improve quality. Donabedian (1980) identified the importance of patient satisfaction and provided much of the basis for quality assurance research in medicine. In addition, satisfaction can also describe values and expectations about care (Linder-Pelz, 1982). Assessment of satisfaction is a multidimensional assessment that has not been defined strictly, this review is a complex model that has not been clearly defined (Hawthorne, 2006).

Patient satisfaction problems occur in various parts of the world, including in Indonesia. Based on research in 32 countries, it shows that patient

satisfaction in world countries is still relatively low, at 34% (Statista, 2020). While in Indonesia, patient satisfaction is at 34% to 43% (Asia Pacific Observatory on Health Systems and Policies, 2017). This is exacerbated by the imbalance in the ratio of health workers in Indonesia. Based on a comparison of data from the Ministry of Health of the Republic of Indonesia (Kemenkes) in 2018 and the World Health Organization (WHO), there is an imbalance in the ratio of dentists to the Indonesian population. The disparity in the ratio of dentists in special dental and oral health facilities (oral dental facilities) has the potential to reduce the level of patient satisfaction. Various efforts have been made by dental health facilities to increase patient satisfaction, one of which is by innovating. Many innovations have been made in the health sector but have not had an impact on the progress of the company, even causing the company to lose billions of dollars (Herzlinger, 2006). Often the innovations made by oral dental health facilities cannot meet the patient's needs. CB Insight (2020) argues that the main cause of company failure is often the product or service produced is not needed by the market.

Based on the phenomena that have been described, this study defines and identifies the factors that make up patient satisfaction at dental health facilities in Indonesia. In previous studies, no one has defined patient satisfaction in special dental and oral health facilities by conducting research in Indonesia. Meanwhile, this research contributes to a better understanding of patient satisfaction from the point of view of health workers and patients in Indonesia. This research consists of several parts. The first

section is a review of the relevant literature and the development of a theoretical framework and hypotheses. Second, explanation of methodology and data collection. Third, data analysis and discussion. The last section is the conclusion and implications of this research.

2. Literature Review

Patient Satisfaction

Patient satisfaction is the result of a comparison of performance or something the company produces compared to what is expected by customers, resulting in feelings of pleasure or disappointment (Kotler and Keller, 2009). According to Bowen and Chen

(2015), in service companies, there is a relationship between customer satisfaction and organizational performance. Customer satisfaction is related to innovations such as telemedicine that can increase the efficiency of health services (Kruse et al, 2017).

Some researchers state that customer satisfaction can be increased by increasing efficiency, employee performance and service quality (Chen, 2012). According to another study conducted by Leiter et al (1998), patient satisfaction can be influenced by nurse performance, doctor performance, and information. Another study by Andaleeb (2001) showed that patient satisfaction in health organizations can be seen from several factors, such as responsiveness, security, communication and discipline.

Table 1. The dimensions used to assess patient satisfaction are sorted by year (adapted from Nair et al., 2018)

Year	Dimension
Perera and Usgadaarachchi (2009)	Clinical setting, treatment process, treatment outcomes, and costs
Imanaka et al (2007)	Treatment, communication, clinic, facilities and appearance
Chaffin et al (2007)	Beliefs about caring and atmosphere
Reifel et al (1997)	Atmosphere access, communication and quality
Stewart and Spencer (1996)	Communication, services received, treatment outcomes, staff, waiting times, clinic location, appointments, professional dental care, affordability, and conceptually unrelated items
Stewart and Spencer (1995)	Communication, services received, treatment outcomes, staff, waiting times, clinic location, appointments, and conceptually unrelated items
Chapko et al (1985)	Dentist-patient relationship, technical quality of care, access, waiting time, cost, clinic, availability, continuity, pain, staff performing extended duties, staff-patient relationship, technical quality of staff and facilities, clinical setting
Corah et al (1984)	Communication, understanding-acceptance, technical competence
Davies and Ware (1981)	Access, availability, pain, cost, quality, and conceptually unrelated items
Hengst and Roghmann (1978)	Latent hostility and general glorification
Murray and Weise (1975)	Cost, convenience and quality
Koslowsky et al (1974)	Personality, technical ability, clinic and cost

3. Innovation

Innovation is often associated with change. According to Drucker (1985), innovation is a change that is seen as an opportunity to transform a business so that it can produce a different product or service. Innovation is also defined as a change in an organization in response to a changing environment (Damanpour, 1996). Innovation is a change in business output that aims to improve business processes and structures in the hope of producing better products and services (Du Plessis, 2007).

Companies continue to make changes and innovations to survive and survive in a competitive environment (MerxChermin & Nijhof, 2005). According to Danarahmanto (2020), innovation is an important thing that has a positive impact on the sustainability of the company. Rademakers (2005) asserts that innovation can occur in products, processes, organizations and companies. Innovation can also emerge through organizational, marketing, process, and product changes (Gunday et al., 2011).

The Relationship Between Patient Satisfaction and Innovation

This study identifies patient satisfaction in Indonesia that will be achieved through the use of innovation. According to Brown and Swartz (1989), patient satisfaction is related to the patient's experience during treatment. Gilmore and Pine (2002) found that people who want to offer new experiences are perceived as more innovative. In addition, innovation has a significant impact on customer experience (Su, 2011).

According to previous research, customer satisfaction is directly influenced by innovation. According to Omachonu and Einspruch (2010), customer satisfaction is something that can be measured against innovation in health services, with innovation can increase the creation of customer satisfaction. This research is supported by Snide and Nylon (2013) who say that various innovations can be made in health

services, these innovations can be useful for increasing patient satisfaction.

4. Methodology

This type of research is an explanatory research with a qualitative approach. The sampling technique used is purposive sampling. This technique is used to determine the research sample with certain considerations so that the data obtained can later be representative (Sugiyono, 2017).

In this study, the validity test was carried out using triangulation of sources, so that it involved three respondents, namely patients, doctors, and nurses in dental and oral health facilities. The research informants were 37 people from several different fields, this was done to represent several points of view in this study. The details of the sample selected in this study were 19 patients, 6 nurses, and 12 dentists.

Data was collected through in-depth interviews using semi-structured interviews. The purpose of in-depth interviews allows a focused focus on the topic (Basuki, 2006). Through semi-structured interviews, authors can use open-ended questions and allow for additional information (Miles & Huberman, 1994).

5. Results

Description of Informants

In this study, the respondents involved were patients (51%), doctors (32%), and nurses (16%). The

determination of patients as the majority of respondents is done because patients are the main party who gives an assessment of service satisfaction of health care facilities. The majority of informants were women (73.6%) between the ages of 17 and 35 years. This shows that women are more concerned with dental and oral health. Patients who were used as respondents were patients who had more than 4 times and routinely checked their oral health at dental and oral health facilities in Indonesia. In addition to patients, interviews were also conducted with doctors and nurses who have at least 3 years of experience working in dental and oral health facilities in Indonesia.

6. Interview result

Interviews in this study were carried out in the period from July to November 2021, carried out using in-depth interview techniques. During this period, Indonesia was facing the Covid-19 pandemic which was still endemic. So the results of this study show changes in patient satisfaction indicators during the Covid-19 pandemic period and after. Excavation of satisfaction is carried out through semi-structured interview techniques, which are carried out by making the main questions and then developed following the flow of conversations with informants at the time of the interview.

Table 2. Satisfaction Interview Results According to Patient, Doctor, and Nurse Perspective

Rating	Satisfaction Indicator	Frequency Answer	Information
1	Doctor-patient relationship	68%	Old indicator
2	Staff-patient relationship	65%	Old indicator
3	Clinical atmosphere	65%	Old indicator
4	Convenience	62%	Old indicator
5	Professional dental care	41%	Old indicator
6	Accepted service	35%	Old indicator
7	Communication	32%	Old indicator
8	Security	32%	New indicator
9	Waiting time	24%	Old indicator
10	Availability	22%	Old indicator
11	Clinic location	16%	Old indicator
12	Speed	16%	New indicator
13	Cost	11%	Old indicator
14	Appearance	11%	Old indicator
15	Caring / empathy	11%	New indicator
16	Recent	11%	New indicator
17	Availability of a doctor's companion	11%	New indicator
18	Access	8%	Old indicator
19	Staff	5%	Old indicator
20	Ease of process	5%	New indicator
21	Ready and responsive	5%	New indicator
22	Appointment	3%	Old indicator
23	Legality	3%	New indicator
24	Work relationship	3%	New indicator
25	Air	3%	New indicator
26	Credibility	3%	New indicator
27	Promo	3%	New indicator

Interviews were conducted to confirm the satisfaction of dental and oral patients in Indonesia to be compared with satisfaction that had been defined in previous studies. In previous studies there were 28 indicators that could describe patient

satisfaction, namely clinical atmosphere, quality, cost, communication, treatment outcomes, access, staff, waiting time, conceptually unrelated items, services received, location of clinic appointments, availability, pain, treatment process, care,

appearance, beliefs about caring/empathy, dental care, professional, dentist-patient relationship, affordability, continuity of staff-patient relationship, understanding-acceptance, technical competence, latent hostility, general esteem, comfort, and personality .

Based on the results of the interview, from the 28 aspects it was revealed that several indicators of satisfaction from previous studies were no longer a measure of satisfaction according to respondents at this time. There are 14 indicators that are not stated and are the determinants of respondents' satisfaction at this time. The fourteen indicators, including quality, treatment outcomes, conceptually unrelated items, pain, treatment process, care, affordability, continuity, understanding-acceptance, technical competence, latent hostility, general glorification, and personality.

In addition, this study also aims to capture the meaning of patient satisfaction from the perspective of patients and health workers in health facilities. Based on the results of the interview found 11 additional indicators that are different from previous studies as a determinant of patient satisfaction. The eleven indicators include security, up-to-date, fast, ease of process, law, work relations, air quality, credibility, promos, doctor assistants, and ready to respond. The results of interviews about patient satisfaction related to the old indicators found in previous studies and indicators that have just been revealed in this study can be seen in Table 3, as follows.

7. Discussion and Result

This study shows that patient satisfaction can be created from various factors. One of the factors that encourage the creation of satisfaction is the relationship between doctors and health facilities staff with patients. Communication is one of the things that play a significant role in the relationship. These results reinforce the results of previous studies which state that the relationship with the patient (Chapko et al, 1985) and good communication (Stewart and Spencer, 1996; Steart and Spencer, 1995); Corah et al, 1984) can promote the creation of patient satisfaction. Fasyankes is an institution that offers services to patients, so how to communicate to be able to catch complaints and explain solutions to patients, both at the beginning of the visit, during the examination, and after the visit is the most important thing for the patient. relationship, communication, and good empathy is also reflected in friendliness to patients. Friendly health workers and staff bring peace to patients who are in need of health solutions. This can create trust and satisfaction with a health facility.

Patient satisfaction also needs to be supported by the presence of a qualified health facility physical atmosphere and in easily accessible and strategic locations. This study shows that the clinical atmosphere, appearance, and comfort in health

facilities are important factors for patients because physical conditions are the first things that patients can enjoy even before patients receive treatment from doctors. In addition, the ease of access to health facilities is a determining factor in the patient's desire to visit (Davies and Ware, 1981); Chapko et al, 1985). This study strengthens the research of Perera and Usgadaarachchi (2009), Reifel et al (1997), and Chapko et al (1985) on the role of the clinical atmosphere, as well as the research of Murray and Weise (1975) which discusses the relationship between comfort and patient satisfaction.

Professional care and services provided to patients are also important factors in creating patient satisfaction. Professional services can increase the patient's confidence to be handled properly at the health facility. These results strengthen the research of Stewart and Spencer (1995, 1996) which states that the professionalism of health facilities is an important factor to achieve patient satisfaction. Professional services need to be supported by the availability of tools and materials used to serve patients, also need to be supported by staff who are able to provide services according to patient needs. The study showed significant differences with previous studies. Several previous studies (Davies and Ware, 1981; Chapko et al; 1985; Murray and Weise, 1975; Koslowsky et al, 1974; Perera and Usgadaarachchi, 2009) often place cost as an important factor to achieve patient satisfaction. Meanwhile, the results of this study reveal that promos and treatment costs are not important factors to achieve patient satisfaction. At this time patients prefer to get good health services even though they are more expensive than cheap services but are not served well.

In addition, there are differences in the factors driving the creation of patient satisfaction in the pandemic and non-pandemic eras, one of which is the need related to safety. Safety is something that is very considered by patients in choosing health facilities. Security is realized by implementing health protocols that comply with the rules, adjusting inspection procedures, and equipping health facilities with qualified sterilizers to ensure that the environment and air are free from viruses. In addition, security can be realized by speeding up the service process and setting up a queue mechanism to shorten waiting times. Providing patients with a good experience while waiting is important for achieving patient satisfaction (Stewart and Spencer, 1996; Steart and Spencer, 1995; Chapko et al, 1985). At this time there is a change in the assessment of patient satisfaction in health facilities. These changes were caused by the occurrence of a pandemic, changes in satisfaction ratings were caused by a shift in active market share to carry out examinations at dental and oral health facilities. The current generation is more critical of the situation and condition of health facilities that encourage the emergence of new factors that lead to satisfaction. This critical attitude is reflected in the importance of

alertness and speed of service, as well as the legality and credibility of health facilities to create a sense of security for patients. Patients are also more concerned about the sophistication and up-to-date of existing facilities in health facilities.

Therefore, various innovations that need to be carried out by health facilities are needed to be able to continue to survive. Health facilities need to innovate service procedures that can make patients feel a different experience when receiving services from health facilities. Innovations related to the atmosphere and comfort of health facilities also need to be carried out by offering a pleasant service atmosphere by providing comfortable decorations and layouts, as well as offering various conveniences for patients to interact both before receiving services, when receiving services, and after receiving services from health facilities.

Important innovations that also need to be carried out are innovations related to patient safety, such as by providing various tools that can protect patients and health facilities staff from various types of disease risks. It is also necessary to carry out technological innovations such as the use of telemedicine that offers convenience and security for patients who wish to consult a doctor. The presence of telemedicine can provide easy access to services for patients, so that patients are easier, more comfortable, and safer when they want to receive health services.

By mapping the new factors that drive the creation of patient satisfaction, health facilities can make the right innovations to increase patient satisfaction. Various innovations can be made, such as product innovation, process, organization, and marketing (Danarahmanto, 2020), so it is not limited to product innovation only. Mapping of patient satisfaction conducted in this study is useful so that health facilities can make targeted innovations according to the needs of patients in Indonesia.

8. Implications and Limitations

The results of this study can be used as a reference for assessing patient satisfaction at dental health facilities, especially in Indonesia. Currently, no research has been found that reviews patient satisfaction in dental and oral health facilities in Indonesia. Therefore, this research will certainly provide new theoretical insights regarding patient satisfaction and innovations that need to be carried out by dental health facilities in Indonesia.

The findings in this study can be utilized by oral dental health facilities in Indonesia to achieve patient satisfaction so that they can survive in the midst of today's competition in the health care industry. Based on the findings of this study, it is known that the relationship with patients, the situation of health facilities, services, communication, security, and speed are important things that need to be fulfilled by health facilities to achieve patient satisfaction.

There are several limitations to this study. First, this study examines health facilities specifically for teeth

and mouth in Indonesia, so that there may be differences in the interpretation of research results for companies outside Indonesia, so further research is needed. Second, this study does not describe the relationship between indicators and dimensions in depth. Third, the study involved special dental and oral health care facilities, so that there could be differences in results for health care facilities other than teeth and mouth.

Many aspects affect the creation of patient satisfaction that encourage the sustainability of a health institution, one of which is the quality of health services. According to Shabbir et al (2016) there is a positive relationship between the quality of health services and patient satisfaction. Therefore, further research is expected to explore the determinants of the quality of health services, especially dental and oral services as a support to create patient satisfaction.

9. Conclusion

Previous scientific discussions have argued that clinical setting, quality, cost, and communication are frequently used to assess patient satisfaction. Meanwhile, this study offers another perspective and provides evidence that safety, speed, up-to-date, credibility, and ease of processing are important factors that can also promote patient satisfaction. On the other hand, this study provides an overview of innovations that are in accordance with patient needs and need to be carried out to increase patient satisfaction. Therefore, it is highly recommended for dental and oral health facilities to carry out various innovations according to the priority factors driving patient satisfaction.

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