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Analysis Service Quality and Promotion on Patient Satisfaction with Quality Function Deployment (QFD) as Intervening

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Abstract: Quality health services are still far from the expectations of the community, so Law of the Republic of Indonesia No. 23 of 1992 concerning health emphasizes the importance of efforts to improve the quality of health services, especially at the health center level. This study aims to determine and analyze the effect of service quality and promotion on patient satisfaction, both directly and indirectly through Quality Function Deployment. This study uses a quantitative descriptive research type. The population in this study were all patients who visited the Health Centers throughout Jember Regency in 2023 amounting to 2,691 and the number of samples was determined to be 160 respondents. Sampling used proportional samples and accidental random sampling. The data analysis technique used was Partial Least Square (PLS) using the WarpPLS 7.0 application. The results of the study showed that there was a significant effect of service quality on patient satisfaction, but the effect of service quality on quality function deployment was not significant. There was a significant effect of promotion both directly and indirectly through quality function deployment. There was a significant effect of quality function deployment on patient satisfaction.

Keywords: service quality; promotion; quality function deployment; and patient satisfaction

INTRODUCTION

Health centers are the organizers of first-level health efforts in their respective work areas. Health centers are currently increasingly being abandoned by the community and are not the main choice for obtaining health services. Quality health services are still far from the expectations of the community, so Law of the Republic of Indonesia No. 23 of 1992 concerning health emphasizes the importance of efforts to improve the quality of health services, especially at the health center level. This is also explained in Law of the Republic of Indonesia No. 36 of 2009 Chapter 4 Article 54 states that the provision of health services is carried out responsibly, safely, with quality, and evenly and non-discriminatory. According to Pasalli', et al (2021) the quality of health services is closely related to patient satisfaction and is one of the measuring tools used to assess the fulfillment of patient needs and expectations in receiving health services in hospitals so that patient satisfaction depends on the quality of service provided in hospitals.

Patient satisfaction is the result of patient assessment of the services received based on the truth and reality that exists and then compared with their expectations (Sholikha, et al., 2020). The level of patient satisfaction shows the level of success of a health service in improving the quality of its services. Patient satisfaction as a service user is one indicator in assessing the quality of health services. Patients who do not find

satisfaction with the quality of service provided tend to make the decision not to make repeat visits to the health service (Álvarez-García, 2019).

The achievement of patient satisfaction levels in the last 3 (three) years in Jember Regency can be explained in Table 1 below.

Table 1
Percentage of Patient Satisfaction Level Achievement in 2021-2023 in Jember Regency

Nic	Voors Dowied	Patient Satisfaction Level		
No	Years Period	Target	Achievement	
1	2021	91%	85,03%	
2	2022	91%	85,12%	
3	2023	91%	85,67%	

Source: Report of Health Center Performance Assessment Health Office Jember, 2024

Based on the results of the health center performance assessment in Table 1, it explains that the level of patient satisfaction in Jember Regency in 2021-2023 for the patient satisfaction variable is still in the sufficient category, namely 85.03%, 85.12% and 85.67% respectively from the target of 91% (Jember Health Office, 2024). In addition, the achievement of the primary health care program in 2021-2023 in Jember Regency is also included in the sufficient category, namely 86.78%, 87.62% and 87.79% respectively from the target with a good category of 91%.

According to Lupiyoadi (2019) in evaluating patient satisfaction with the health services received, it refers to several factors, including product/service quality, service quality, emotional factors, price and cost. According to Tjiptono, et al. (2016) stated that the dimensions of service quality are divided into 5 to measure health services known as the SERVQUAL (Service Quality) model. Kottler (2016) defines quality as the overall features and characteristics of a product or service that support the ability to satisfy needs.

In Nursaid's research (2024), it is explained that service quality has an impact on public satisfaction at the village office. Fauziah et al. (2019) showed results that service quality has an effect on outpatient satisfaction. Mahmud et al.'s research, (2022) showed results that the service quality dimension has a dominant effect on patient satisfaction at the Hospital. Syarkani et al.'s research. (2023) showed results that all service quality dimensions simultaneously affect patient satisfaction directly. Meanwhile, according to Iskandar, et. al's research (2021), the majority of service quality dimensions do not have a significant effect on patient satisfaction at the Hospital except for the empathy dimension. Rafliansyah's research (2021), the majority of service quality dimensions do not have a significant effect on patient satisfaction at the Health Center except for the responsiveness and assurance dimensions.

In addition to service quality, promotion can also effect patient satisfaction because promotion is one of the important aspects in marketing management and is often said to be a continuous process. This is because promotion can cause a series of subsequent activities in the company [3]. Promotion is the delivery of information from the seller to the buyer to effect attitudes and behavior in order to create an exchange, so that the goal of increasing sales quantity is expected to be realized. Promotion can be said to be a communication activity where all the needs to move a product, message or idea about distribution [4]. Promotion has an important role in communicating the existence and value of the product to potential customers. In designing a marketing strategy, companies/supermarkets must always be customer-oriented starting from finding the

products desired by customers, motives and buying habits and determining prices according to customer purchasing power, determining distribution channels and finally determining promotional programs in the company's ability efforts [4].

Health promotion that applies the paradigm model is very effective in marketing the service products offered, besides being efficient, it can also answer the main problems that occur in consumers with organizational promotion can explain in detail the right solution to overcome problems that occur in consumers. Based on research by Yanuar et al. (2017) shows the results that promotion has an effect on customer satisfaction. Research by Sabilah & Daonil (2023) shows the results that effective sales promotion strategies and improving the quality of service that is tailored to customer needs can affect patient satisfaction. Research by Windreis (2021) shows the results that promotion has an effect on satisfaction in hospitals. Research by Anshory, et al. (2023) explains that promotion has an effect on patient satisfaction in pharmacies. Meanwhile, research by Yuliani (2023) explains that promotion has a negative effect on customer satisfaction of PLN application users. Siregar (2022), explains that promotion has a negative and significant effect on consumer satisfaction.

Meanwhile, in the research of Bilatula et al. (2024), the method used to help translate patient desires is called the Quality Function Deployment (QFD) method. The QFD method has the advantage of being able to translate customer needs into technical responses. Quality Function Deployment (QFD) is a process for determining customer needs (customer "wants") and translating them into attributes (how) that can be carried out as a necessary corrective action in providing services. QFD is used to help what will satisfy customers and where to make quality improvement efforts (Heizer and Render, 2017).

Based on research by Sukma et al. (2022) shows that QFD can improve service and create customer satisfaction. Research by Bilatula, et al., (2024) in the concept of Quality Function Deployment (QFD) in gap analysis and service quality needs can affect patient satisfaction. Susila, et al (2015) explained that by using Quality Function Deployment (QFD), the satisfaction attributes desired by patients are obtained and translated into technical parameters in the House of Quality (HOQ). Research by Sa-bilah & Daonil (2023) wanted to find out the relationship between sales promotion and service quality in the context of a business. The method used in this study is Quality Function Deployment (QFD). By using QFD, companies can determine the right priority actions to meet customer needs and increase customer satisfaction.

This study aims to determine and analyze the effect of Service Quality and promotion on patient satisfaction both directly and indirectly through Quality Function Deployment.

METHOD

This study uses a quantitative descriptive research type. The population in this study were all patients who visited the Health Centers in Jember Regency in 2023 amounting to 2,691 and the number of samples was determined to be 160 respondents. Sampling used proportional samples and accidental random sampling. The data analysis technique used was Partial Least Square (PLS) using the WarpPLS 7.0 application. This study involved three variables, namely exogenous variables (Service Quality and promotion), intervening variables (Quality Function Deployment), and endogenous variables (patient satisfaction). The operational measurement of the variables can be seen in Table 2.

Table 2
Identification of Research Variable Measurement

No	Variable	Indicators
1	Service Quality (X ₁)	a. Tangible
		b. Reliability
		c. Responsiveness
		d. Empathy
		e. Assurance
2	Promotion (X_2)	a. Promotional message
		b. Promotional media
		c. Promotion time
		d. Promotion frequency
3	Quality Function Deployment (Z)	a. Customer focus
		b. Time efficiency
		c. Teamwork-oriented
		d. Documentation orientation
4	Patient Satisfaction (Y)	a. Conformity to expectations
		b. Interest in revisiting
		c. Availability to recommend

RESULTS AND DISCUSSION

Karakteristik Demografi Responden

Responden penelitian ini adalah pasien yang berkunjung ke Puskesmas Se Kabupaten Jember yang berjumlah 160 responden. Berikut deskripsi karakteristik demografi responden berdasarkan jenis kelamin.

Demographic Characteristics of Respondents

The respondents of this study were patients who visited the Health Centers in Jember Regency, totaling 160 respondents. The following is a description of the demographic characteristics of respondents based on gender.

Table 3
Respondents Characteristics Based on Gender

Gender	Respondent (people)	Percentage (%)
Male	73	45,6
Female	87	54,4
Total	160	100,0

Source: Data processed 2024

Based on Table 3, it is known that from the total respondents of 160 people, 45.6% or 73 respondents were male and 54.4% or 87 respondents were female. From the data, it shows that these patients who visited the Health Centers in Jember Regency who became research respondents were dominated by female patients.

The following is a description of the demographic characteristics of respondents based on their work background.

Table 4
Respondents Characteristics Based on Work Profession

Work Profession	Respondent (people)	Percentage (%)
Civil Servant/Army/Police	37	23,1
Private Employees	41	25,6
Self-employed	30	18,8
Student/Scholar	20	12,5
Other Job	32	20,0
Total	160	100,0

Source: Data processed 2024

Based on Table 4, it is known that out of 160 total respondents, 23.1% or 37 respondents work as civil servants/military/police, 25.6% or 41 respondents work as private employees, 18.8% or 30 respondents work as entrepreneurs, 12.5% or 20 respondents are students, and 20.0% or 32 respondents have other work backgrounds (such as farmers, housewives, and others). From these data, it shows that patients who visit the Health Centers in Jember Regency who are respondents to the study are dominated by patients who work as private employees.

The following is a description of the demographic characteristics of respondents based on age

Tabel 5
Respondents Characteristics Based on Age

Age	Respondent (people)	Percentage (%)
Under 31 years	35	21,9
31 - 40 years	42	26,3
41 - 50 years	34	21,3
Over 50 years	49	30,6
Total	160	100,0

Source: Data processed 2024

Based on Table 5, it is known that out of 160 total respondents, 21.9% or 35 respondents were under 31 years old, 26.3% or 42 respondents were between 31-40 years old, 21.3% or 34 respondents were between 41-50 years old, and 30.6% or 49 respondents were over 50 years old. From these data, it is shown that patients who visited the Health Centers in Jember Regency who became research respondents were dominated by patients over 50 years old

Structural Model

The results of the data analysis obtained a structural equation which can be seen in Figure 1 as follows.

 $\begin{array}{c} \chi 1 \\ (R)10i \\ \\ \beta=0.09 \\ (P=0.12) \\ (P<.01) \\ \\ R^2=0.70 \\ \\ R^2=0.70 \\ \\ R^2=0.78 \\ \\ (P<.01) \\ \end{array}$

Figure 1 Full Model PLS

Source: Data processed 2024

The analysis and testing of the study hypothesis used PLS with WarpPLS software. The testing was intended to test the effect of service quality variables (X1) and promotion (X2) as independent variables, quality function deployment (Z) as an intervening variable, and patient satisfaction (Y) as a dependent variable.

Results of Direct Effect Testing

The results of the path coefficient values in this study can be seen in Table 6 as follows:

Table 6
Direct Effect Path Coefficient Value

No	Variables	Path Coefficient	SE	P value	Result
1	$X1 \rightarrow Z$	0,093	0,077	0,115	H4 rejected
2	$X2 \rightarrow Z$	0,752	0,067	< 0,001	H5 accepted
3	$X1 \rightarrow Y$	0,354	0,073	< 0,001	H1 accepted
4	$X2 \rightarrow Y$	0,360	0,073	< 0,001	H2 accepted
5	$Z \rightarrow Y$	0,200	0,076	0,004	H3 accepted

Source: Data processed 2024

Based on Table 6, it shows that service quality has a positive and significant effect on patient satisfaction. The positive path coefficient illustrates that the better the service quality, the better the patient satisfaction.

Thus, the hypothesis stating that there is an effect of service quality on patient satisfaction at the Community Health Center in Jember Regency is proven true or H1 is accepted.

Promotion has a positive and significant effect on patient satisfaction. The positive path coefficient illustrates that the better the promotion, the better the patient satisfaction. Thus, the hypothesis stating that there is an effect of promotion on patient satisfaction at the Community Health Center in Jember Regency is proven true or H2 is accepted.

Quality function deployment has a positive and significant effect on patient satisfaction. The positive path coefficient illustrates that the better the quality function deployment, the better the patient satisfaction will be. Thus, the hypothesis stating that there is an effect of quality function deployment on patient satisfaction at the Jember Regency Health Center is proven true or H3 is accepted.

Service quality has a positive but insignificant effect on quality function deployment. Thus, the hypothesis stating that there is service quality on quality function deployment at the Jember Regency Health Center is not proven true or H4 is rejected.

Promotion has a positive and significant effect on quality function deployment. The positive path coefficient illustrates that the better the promotion, the better the quality function deployment will be. Thus, the hypothesis stating that there is an effect of promotion on quality function deployment at the Jember Regency Health Center is proven true or H5 is accepted.

Results of Indirect Effect Testing

A summary of the indirect effects of these variables can be seen in Table 7.

Tabel 7
Indirect Effect Path Coefficient Value

No	Variables	Path Coefficient	SE	P value	Result
1	$X1 \rightarrow Z \rightarrow Y$	0,019	0,056	0,369	H6 rejected
2	$X2 \rightarrow Z \rightarrow Y$	0,151	0,054	0,003	H7 accepted

Source: Data processed 2024

The results in Table 7 show that service quality has a positive but insignificant effect on patient satisfaction with the mediation of quality function deployment. The results of the study prove that quality function deployment does not play an intervening role in the effect of service quality on patient satisfaction. Thus, the hypothesis stating that there is an effect of service quality on patient satisfaction at the Health Center in Jember Regency through quality function deployment as an intervening variable is not proven true or H6 is rejected.

Promotion has a positive and significant effect on patient satisfaction with the mediation of quality function deployment. The results of the study prove that quality function deployment plays an intervening role in the effect of promotion on patient satisfaction. Thus, the hypothesis stating that there is an effect of promotion on patient satisfaction at the Health Center in Jember Regency through Quality Function Deployment as an intervening variable is proven true or H7 is accepted.

R-Square (Determination Coefficient)

The results of the R-square value test in this study are shown in Table 8 as follows:

Table 8
R-Square (R2) Result

Variable	R-Square (R ²)
Quality function deployment (Z)	0,704
Patient satisfaction (Y)	0,777

Source: Data processed 2024

Based on Table 8 shows the R-Square value of the quality function deployment variable of 0.704, this means that the effect of quality function deployment explained by the service quality and promotion variables is 70.4%, while the remaining 29.6% is explained by other variables outside this research model. While the R-Square value of the patient satisfaction variable is 0.777, this means that the effect of patient satisfaction explained by the service quality, promotion, and quality function deployment variables is 77.7%, while the remaining 22.3% is explained by other variables outside this research model

Recapitulation of Hypothesis Test Results

In this study, 7 (seven) alternative hypotheses were proposed to be tested and after going through the data analysis stage, the results were obtained which can be summarized in Table 9.

Tabel 9 Hypothesis Test Results

No	Hypothesis Research	Result
1	There is an effect of service quality on patient satisfaction at the Health	H ₁ accepted
	Center in Jember Regency	
2	There is an effect of promotion on patient satisfaction at the Health	H ₂ accepted
	Center in Jember Regency	
3	There is an effect of Quality Function Deployment on Quality Function	H ₃ accepted
	Deployment at the Health Center in Jember Regency	
4	There is an effect of service quality on patient satisfaction at the Health	H ₄ rejected
	Center in Jember Regency	
5	There is an effect of promotion on Quality Function Deployment at the	H ₅ accepted
	Health Center in Jember Regency	
6	There is an effect of service quality on patient satisfaction at the Health	H ₆ rejected
	Center in Jember Regency through Quality Function Deployment as an	
	intervening variable	
7	There is an effect of promotion on patient satisfaction at the Health Center	H ₇ accepted
	in Jember Regency through Quality Function Deployment as an	
	intervening variable	

Source: Data processed 2024

Discussions

The Effect of Service Quality on Patient Satisfaction

The results of the study show that service quality has a significant effect on patient satisfaction. This means that if service quality is better, it will increase patient satisfaction at the Health Center in Jember Regency.

Lewis and Booms are experts who first defined service quality as a measure of how well the level of service provided is able to match customer expectations. Based on this definition, service quality can be realized through fulfilling customer needs and desires and the accuracy of its delivery to match customer expectations. Thus, there are two main factors that influence service quality, expected service and felt or perceived service. Quality (service quality) is the overall characteristics of goods/services that show their ability to satisfy consumer needs, both stated and implied needs.

According to the Indonesian Ministry of Health (2012), the quality of health services includes performance that shows the level of perfection of health services, not only which can create satisfaction for patients in accordance with the average satisfaction of the population but also in accordance with the standards and codes of ethics of the profession that have been set. The findings of this study are in line with the findings of studies [1], [7], Mahmud et al., (2022), [2], and [8] which show that there is a relationship between service quality and patient satisfaction.

The Effect of Promotion on Patient Satisfaction

The results of the study show that promotion has a significant effect on patient satisfaction. This means that if promotion is better, it will increase patient satisfaction at the Health Center in Jember Regency. Health promotion that applies the paradigm model is very effective in marketing the service products offered, besides being efficient, it can also answer the main problems that occur in consumers with organizational promotion can describe in detail the right solution to overcome problems that occur in consumers. This technique can also influence consumer behavior, such as changing consumer understanding in the direction that is in accordance with what the organization and consumers expect and are confident with the products marketed by the organization [9].

The results of this study support the findings of research [10] showing that promotion has an effect on inpatient satisfaction. Research [5] shows that effective sales promotion strategies and improving the quality of service that is adjusted to customer needs can affect patient satisfaction. Research [4] shows that promotion has an effect on satisfaction at the Hospital.

The Effect of Quality Function Deployment on Patient Satisfaction

The results of the study show that quality function deployment has a significant effect on patient satisfaction. This means that if the quality function deployment is better, it will increase patient satisfaction at the Health Center in Jember Regency. Quality Function Deployment (QFD) is a process to determine customer needs (customer "wants") and translate them into attributes (how) that can be done as an improvement action needed in providing services. QFD is used to help what will satisfy customers and where to make quality improvement efforts (Heizer and Render, 2017).

The results of this study are consistent with the findings of research [11] showing that QFD can improve service and create customer satisfaction. Research by Bilatula, et al., (2024) in the concept of Quality Function Deployment (QFD) in the analysis of gaps and service quality needs can affect patient satisfaction. Based on research by Sukma et al. (2022) shows that QFD can improve service and create customer satisfaction. Susila, et al (2014) explained that by using Quality Function Deployment (QFD), the satisfaction attributes desired by patients were obtained and translated into technical parameters in the House of Quality (HOQ). Sabilah & Daonil's (2023) research wanted to find out the relationship between sales promotion and service quality in the context of a business. The method used in this study is Quality Function Deployment (QFD). By

using QFD, companies can determine the right priority actions to meet customer needs and increase customer satisfaction.

The Influence of Service Quality on Quality Function Deployment

The results of the study showed that service quality have a insignificant effect on quality function deployment. This means that the existence of service quality factors in Health Centers in Jember Regency is not considered a factor that determines the quality of function deployment in Health Centers in Jember Regency. Service quality that is not significant to quality function deployment is caused by the situation where many Health Centers in Jember Regency only focus on meeting service standards. When faced with the demands of patient desires for quality of service in the health sector, there is often a gap or disparity between expectations and the actual performance provided.

Heizer & Render (2017) stated that Quality is the ability of a product or service to meet needs. According to Kotler (2016), Service is a variety of actions or performance offered by one party to another that are basically invisible and do not result in ownership rights to something. The product can be related to a physical product or not. While Quality Function Deployment (QFD) is a process to determine customer needs (customer "wants") and translate them into attributes (how) that can be done as a necessary improvement action in providing services. QFD is used to help what will satisfy customers and where to make quality improvement efforts (Heizer and Render, 2017).

The findings of this study are inconsistent with the research of Bilatula, et al., 2024, the results of the study showed that the highest need variables were Empathy, Reliability and Responsiveness and after that were assurance and tangible. The results of the study by Hasibuan et al., 2019 showed that of the 21 variables used to improve the quality of general hospitals, there were 9 need variables as the main priority that needed to be improved, namely the knowledge/expertise of doctors in determining drugs, the skills/skills of doctors, appropriate treatment measures, effective and efficient medical measures.

The Effect of Promotion on Quality Function Deployment

This means that if promotion is higher, it will increase the quality function deployment at the Health Center in Jember Regency. Health promotion that applies the paradigm model is very effective in marketing the service products offered, besides being efficient, it can also answer the main problems that occur in consumers with organizational promotion can describe in detail the right solution to overcome problems that occur in consumers. This technique can also influence consumer behavior, such as changing consumer understanding in the direction that is in accordance with what the organization expects and consumers and are confident in the products marketed by the organization (Nasirin, 2015).

The results of this study support the findings of research [5] which wants to know the relationship between sales promotion and service quality in the context of a business. The method used in this study is Quality Function Deployment (QFD). The results of the study show that the priority of development and improvement in terms of sales promotion and service quality that needs to be done by the company. By using QFD, companies can determine the right priority of action to meet customer needs and increase customer satisfaction.

The Influence of Service Quality on Patient Satisfaction with Quality Function Deployment as an Intervening Variable

The results of the study showed that service quality have a insignificant effect on patient satisfaction through quality function deployment as an intervening variable. This provides an illustration that quality function deployment does not act as an intervening variable in the influence of service quality on patient satisfaction. Kottler (2016) defines quality as the overall features and characteristics of a product or service that support the ability to satisfy needs. This definition emphasizes customer focus. Lewis and Booms were the first experts to define service quality as a measure of how well the level of service provided is able to meet customer expectations. A process to determine customer needs (customer "wants") and translate them into attributes (how) that can be done as an improvement action needed in providing services, namely Quality Function Deployment (QFD). QFD is used to help what will satisfy customers and where to make quality improvement efforts (Heizer and Render, 2017).

The results of this study do not support the results of the study [11] showing that QFD can improve service and create customer satisfaction. Research by Bilatula, et al., (2024) in the concept of Quality Function Deployment (QFD) in the analysis of gaps and service quality needs can affect patient satisfaction. Based on research by Sukma et al. (2022) shows that QFD can improve service and create customer satisfaction. Susila, et al (2014) explained that by using Quality Function Deployment (QFD), the satisfaction attributes desired by patients are obtained and translated into technical parameters in the House of Quality (HOQ). The research by Sabilah & Daonil (2023) wanted to find out the relationship between sales promotion and service quality in the context of a business. The method used in this study is Quality Function Deployment (QFD).

The Effect of Promotion on Patient Satisfaction with Quality Function Deployment as an Intervening Variable

The results of the study showed that promotion had a significant effect on patient satisfaction through quality function deployment as an intervening variable. The positive path coefficient value illustrates that the better the promotion, the better the quality function deployment and ultimately will encourage better patient satisfaction. This provides an illustration that quality function deployment plays a role as an intervening variable in the effect of promotion on patient satisfaction. Health promotion that applies the paradigm model is very effective in marketing the service products offered, besides being efficient, it can also answer the main problems that occur in consumers with organizational promotion can describe in detail the right solution to overcome problems that occur in consumers. This technique can also influence consumer behavior, such as changing consumer understanding in the direction that is in accordance with what the organization expects and consumers are confident in the products marketed by the organization [9]. A process to determine customer needs (customer "wants") and translate them into attributes (how) that can be carried out as an improvement action needed in providing services, namely Quality Function Deployment (QFD). QFD is used to help what will satisfy customers and where to make quality improvement efforts (Heizer and Render, 2017).

The results of this study are in accordance with the results of the study by Sabilah & Daonil (2023) which showed that the priority of development and improvement in terms of sales promotion and service quality that needs to be done by the company. By using QFD, companies can determine the right priority of action to meet customer needs and increase customer satisfaction. This study provides an important contribution to companies in planning effective sales promotion strategies and improving service quality that is tailored to customer needs.

CONCLUSION

The study concluded that service quality has a significant effect on patient satisfaction. Promotion has a significant effect on patient satisfaction. Quality function deployment has a significant effect on patient satisfaction. Service quality does not have a significant effect on quality function deployment. Promotion has a significant effect on quality function deployment. Service quality does not have a significant effect on patient satisfaction through intervening quality function deployment. Promotion has a significant effect on patient satisfaction through intervening quality function deployment

The practical implications of this study are that the Health Centers in Jember Regency always pay attention to things related to service quality, aspects that are considered weak and need to be improved are the availability of information boards. Related to promotion, aspects that are considered weak and need to be improved are that the Health Center has additional service activities (innovation). Related to quality function deployment, aspects that are considered weak and need to be improved are patient service time. Related to patient satisfaction, aspects that are considered weak and need to be improved are standard service procedures. As for the agenda for further research, it is advisable to add other variables such as customer relationship marketing, patient trust, Healthcare perceived value, and others. So that better findings are obtained in explaining quality function deployment and patient satisfaction.

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