

## The Effect Of Service Quality And Effective Communication On The Level Of Satisfaction Of Service Users At The Blood Transfusion Unit Of The Oku Timur Regional General Hospital In 2025

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### Abstract

The background of this research is the demand of the community in public services where hospitals must provide quality services according to the needs and desires of patients while still referring to the professional and medical code of ethics. The purpose of this study is to analyze the influence of service quality and effective communication on the level of satisfaction of blood service users at the East OKU Hospital. This study is a quantitative study with a cross sectional design. Data was collected through a questionnaire to 206 blood service users at UTD East OKU Hospital in January 2025 using accidental sampling techniques. Data analysis was carried out by linear regression test. The results showed that service quality partially had a positive and significant effect ( $t$ -Count 10,306) on service user satisfaction and effective communication partially had a positive and significant effect ( $t$ -Count 2,604) on service user satisfaction. The quality of service and effective communication simultaneously had a positive and significant effect on the satisfaction of service users ( $F$  count 108.963) where the quality of service had a greater influence on satisfaction. The conclusion of this study is that the respondents' perception good satisfaction, good service quality, and very good effective communication. Improvements are needed in the cleanliness and comfort of facilities, waiting rooms, buildings and the environment as well as the attitude and communication of officers. Inhouse Training Hospital Service Excellent, Internal/External Quality Control and evaluation of other factors such as product quality, cost and customer sentiment can be an effort to improve service and satisfaction.

**Keywords:** Service quality, effective communication, satisfaction.

### Abstrak

Latar belakang penelitian ini adalah tuntutan masyarakat dalam pelayanan publik dimana rumah sakit harus memberikan pelayanan bermutu sesuai kebutuhan dan keinginan pasien dengan tetap mengacu pada kode etik profesi dan kedokteran. Tujuan penelitian ini adalah menganalisis pengaruh kualitas pelayanan dan komunikasi efektif terhadap tingkat kepuasan pengguna layanan darah di UTD RSUD OKU Timur. Penelitian ini adalah penelitian kuantitatif dengan disain *cross sectional*. Data dikumpulkan melalui kuesioner kepada 206 pengguna layanan darah di UTD RSUD OKU Timur pada Januari 2025 dengan teknik *accidental sampling*. Analisis data dilakukan dengan uji regresi linear. Hasil penelitian menunjukkan kualitas pelayanan secara parsial berpengaruh positif dan signifikan ( $t$ -Hitung 10.306) terhadap kepuasan pengguna layanan dan komunikasi efektif secara parsial berpengaruh positif dan signifikan ( $t$ -Hitung 2.604) terhadap kepuasan pengguna layanan. Kualitas pelayanan dan komunikasi efektif secara simultan berpengaruh positif dan signifikan terhadap kepuasan pengguna layanan ( $F$  hitung 108,963) dimana kualitas pelayanan memberikan pengaruh yang lebih besar terhadap kepuasan. Kesimpulan dari penelitian ini adalah persepsi responden terhadap kepuasan baik/puas, terhadap kualitas pelayanan baik, dan terhadap komunikasi efektif sangat baik. Perlu perbaikan pada kebersihan dan kenyamanan fasilitas, ruang tunggu, bangunan dan lingkungan serta sikap dan komunikasi petugas. *Inhouse Training Hospital Service Excellent, Internal/External Quality Control* dan evaluasi faktor lain seperti kualitas dan harga produk serta emosional pelanggan dapat menjadi upaya meningkatkan pelayanan dan kepuasan.

**Kata kunci:** Kualitas pelayanan, komunikasi efektif, kepuasan.

## INTRODUCTION

With advances in technology and public demands for better services, public service providers are required to meet public expectations in terms of service delivery (1). In recent years, healthcare services, particularly hospitals, have shown a positive trend in both government and private hospitals in every region of Indonesia, making the healthcare service industry increasingly competitive (2). This has made the public increasingly critical in selecting quality healthcare services (3). Hospitals must be able to provide quality services that align with patients' needs and preferences while adhering to professional and medical ethics codes (4).

According to Ferdiansyah et al. (5), issues related to service quality have become increasingly important in explaining the performance of public service organizations. The formation of negative perceptions toward public organizations often stems from public dissatisfaction with the quality of services received. According to Pahyastrivi et al. (6), service quality has a very high influence on customer satisfaction. Rusmini et al. (7) also note that service quality has a positive impact on satisfaction and trust.

Service quality is the totality of features and characteristics of a product or service that depends on its ability to satisfy stated or implied needs. Service quality is a form of consumer assessment that must be realized by companies in order to attract new clients or retain old clients so that they do not switch to competing companies (8). There are five indicators used as benchmarks in assessing service quality (8), namely:

1. Reliability is the company's ability to provide services as promised, reliably, accurately, and consistently.
2. Responsiveness is the ability to provide services to customers quickly and to listen to and address customer complaints.

3. Assurance is the ability and politeness of employees, as well as their trustworthy nature.

4. Empathy is giving sincere and individualized attention to consumers by trying to understand their desires.

5. Tangibles are the appearance of physical facilities and the quality of equipment used to provide services to consumers.

Effective communication plays an important role in healthcare satisfaction. Effective communication is not only about providing information, but also conveying the feelings and attitudes of the recipient and provider of information (9). Chandra et al. (10) state that in healthcare, there is a strong relationship between effective communication and client satisfaction. Effective communication in healthcare services can enhance trust in healthcare providers and facilitate the therapeutic healing process. Another study (11) indicates that effective communication statistically has a significant influence on donor satisfaction.

Effective communication is a communication process where the recipient understands what has been conveyed and does what the communicator wants through the message (12). There are five principles of effective communication summarized as REACH (13), namely:

1. Respect is the attitude of valuing every individual who is the target of the message to be conveyed.
2. Empathy is the ability of a communicator to understand and put themselves in the situation or condition faced by others.
3. Audible means that it can be heard or understood clearly.
4. Clarity is the clarity of the message so that it does not lead to various different interpretations.

5. Humility is the attitude of modesty in building mutual respect.

Customer satisfaction is the feeling of joy or disappointment that arises when comparing the perceived performance of a product (or result) to their expectations. If the performance fails to meet expectations, customers will be dissatisfied; if the performance meets expectations, customers will be satisfied. Customer satisfaction indicators (8) include:

**1. Repeat purchases**

Consumers will purchase again when the company introduces new products and updates old ones.

**2. Repeat purchases of products/performance**

Based on the results of a survey conducted by hospital management and a preliminary survey by researchers, some users of the Blood Transfusion Unit (BTU) at OKU Timur Regional General Hospital complained about staff behavior, product suitability, pricing, service mechanisms and procedures, and blood product limitations. The purpose of this study is to analyze the quality of service and effective communication provided by the Blood Transfusion Unit at OKU Timur General Hospital, to analyze the contribution of each factor—both individually and simultaneously—to the level of satisfaction among blood service users, and to analyze the more dominant factors influencing the level of satisfaction among blood service users at the Blood Transfusion Unit at OKU Timur General Hospital. This study serves as an evaluation tool for the Blood Transfusion Unit of OKU Timur General Hospital to assess the quality of service, communication, and customer satisfaction, thereby enabling the identification of more specific improvement measures.

**METHOD**

This study is a quantitative study with a cross-sectional design. The population in this study

**3. Needs**

Customers feel satisfied if the product or service meets their needs, desires, or goals.

**4. Expectations**

To what extent the perceived performance of a product aligns with the buyer's expectations.

The Blood Transfusion Unit, hereinafter abbreviated as UTD, is a healthcare facility that conducts blood donation, blood supply, and blood distribution (14, 15). The Hospital Blood Transfusion Unit, in carrying out its functions as a blood service provider, must focus on service quality and a culture of quality throughout the entire service process (16).

consisted of 312 people, including patients and family members/companions of patients who directly used blood services at the Blood Transfusion Unit of OKU Timur Regional General Hospital. The sample in this study consisted of 206 blood service users at the Blood Transfusion Unit of OKU Timur Regional General Hospital in January 2025, selected using accidental sampling. Data were collected through a questionnaire developed from previous research, followed by validity and reliability testing. Data analysis was conducted using linear regression analysis.

**RESULTS AND DISCUSSION**

Based on the validity test results, the coefficient value ( $r$ -calculated) for all statement items was greater than the  $r$ -table value (0.361), indicating that all statements were valid.

Based on the reliability test results, the calculated alpha value for all statement variables was greater than the Cronbach's alpha value of 0.6, so it can be concluded that all statements are reliable.

**Table 1. Frequency Distribution of Respondents by Age**

Age	Frequency	Percentage (%)
18-24	25	12.14
25-34	59	28.64
35-44	77	37.38
45-54	39	18.93
55-64	6	2.91
Total	206	100.0

Based on the research findings, the characteristics of respondents by age indicate that the majority were in the 35–44 age group, total 77 respondents (37.38%). This suggests that most service users fall within this age range. According to the World Health Organization (WHO), individuals aged 18–40 are considered adults, and this age group may influence their mindset in making decisions. In this study, the relationship between respondents' age and

satisfaction with blood service users was not analyzed. However, a study by Ikbal (17) reported no significant correlation between age and patient satisfaction. This may be due to the fact that, fundamentally, all patients—whether young or older—seek the same level of attention, treatment, and compassion. They expect their concerns to be heard by healthcare professionals, particularly doctors and nurses.

**Table 2. Frequency Distribution of Respondents by Sex**

Sex	Frequency	Percentage (%)
Male	144	69.9
Female	62	30.1
Total	206	100.0

Based on the research findings, the characteristics of respondents by gender show that 144 respondents (69.9%) were male, while 62 respondents (30.1%) were female. This indicates that the majority of respondents were male. This may be due to the fact that men are more likely to accompany patients in hospitals; therefore, when a blood transfusion is needed, it is typically the men who visit the blood transfusion unit. In this study, the relationship

between gender and satisfaction with blood service users was not analyzed. However, in a study conducted by Ikbal (17), it was found that there was no significant relationship between gender and outpatient satisfaction. Patient satisfaction is not determined by gender, as satisfaction is a universal expectation of every patient seeking treatment, all of whom deserve quality healthcare services regardless of gender.

**Table 3. Frequency Distribution of Respondents by Education**

Education	Frequency	Percentage (%)
SD (secondary school)	15	7.3
SMP/Sederajat (junior high school)	35	17.0
SMA/Sederajat (senior high school)	101	49.0
D3 (Diploma)	17	8.3
S1 (under graduate)	38	18.4
Total	206	100.0

Based on the research findings, the characteristics of respondents by level of education show that 15 respondents (7.3%) had completed elementary school, 35 respondents (17%) had completed junior high school or equivalent, 101 respondents (49%) had completed senior high school or equivalent, 17 respondents (8.3%) held a diploma (D3), and 38 respondents (18.4%) held a bachelor's degree (S1). This indicates that the majority of respondents had completed senior high school as their highest level of education. In this study, the relationship between education level and

satisfaction with blood service users was not analyzed. However, Arifin et al. (18) stated in their research that there is a relationship between education level and patient satisfaction. According to Jacobalis (19), education level can influence a person's rational or irrational thinking patterns in making decisions, using, or utilizing healthcare services. Individuals with lower educational attainment tend to have a higher degree of perceptual inconsistency (i.e., lack of firmness in opinion) and are more easily influenced compared to those with a higher educational background.

**Table 4. Frequency Distribution of Respondents by Occupation**

Occupation	Frequency	Percentage (%)
ASN/government employee	14	6.8
Karyawan Swasta/private employee	17	8.3
Wirausaha/businessman	60	29.1
Pelajar/Mahasiswa/student	7	3.4
Other	108	52.4
Total	206	100.0

Based on the research findings, the characteristics of respondents by occupation show that 14 respondents (6.8%) were civil servants, 17 respondents (8.3%) were private sector employees, 7 respondents (3.4%) were students, and 108 respondents (52.4%) were categorized under other occupations. This indicates that the majority of respondents were engaged in various other types of employment. East OKU Regency is known for its extensive agricultural and plantation areas, as well as a fairly large trade sector. These conditions contribute to the diversity of employment types in the region. In this study, the relationship between occupation and service user satisfaction was not analyzed.

The classical assumption test results show that the Kolmogorov-Smirnov normality test produced a significance value greater than 0.05, indicating that the data are normally distributed. The multicollinearity test results showed a Variance Inflation Factor (VIF) value of 1.511 (< 10) and a tolerance value of 0.662 (> 0.1), indicating no multicollinearity among variables in the regression model. Furthermore, the Glejser test showed significance values of 0.533 for service quality and 0.224 for effective communication (both > 0.05), suggesting that the regression model did not exhibit symptoms of heteroscedasticity.

**Table 5. t-Test Result (partial test)**

Variabel	t-count	Significantcy
Service Quality	10.306	0.000
Effective communication	2.604	0.010

Based on the results of the t-test (partial test) analysis, the t-count value for service

quality was 10.306, which is greater than the t-table value of 1.972, with a significance level of

0.000 ( $< 0.05$ ). Therefore, it can be concluded that H1 is accepted, indicating that service quality (X1) has a positive and significant effect on the satisfaction of blood service users (Y). This finding is consistent with the study by Pahyastrivi et al. (6), which concluded that service quality has a very strong influence on customer satisfaction. Similarly, the study conducted by Pangestika et al. (20) reported that service quality has a significant effect on donor satisfaction at the Indonesian Red Cross Blood Donor Unit in Surakarta. This is also in line with the findings of Rusmini et al. (7), which showed that service quality positively affects both satisfaction and trust. According to Kotler and Keller (8), in determining customer satisfaction levels, there are five key factors that must be considered by organizations, one of which is service quality. Customers will feel satisfied if they receive good service or service that meets their expectations.

The results of the t-test (partial test) also showed that the t-count value for effective communication was 2.604, which is greater than the t-table value of 1.972, with a significance level of 0.010 ( $< 0.05$ ). Therefore, it can be concluded that H2 is accepted, meaning that effective communication (X2) has a positive and significant effect on the satisfaction of blood service users (Y). From the analysis results, it was

found that the t-count (10.306) and significance value (0.000) for the service quality variable were greater than the t-count (2.604) and significance value (0.010) for the effective communication variable. Thus, it can be concluded that service quality (X1) has a greater positive and significant influence on the satisfaction of blood service users (Y) compared to effective communication (X2).

This is consistent with the study by Khairani et al. (21), which found a positive and significant relationship between nurse–patient effective communication and patient satisfaction. Similarly, Subroto et al. (22) concluded that effective communication significantly influences patient satisfaction. In the same vein, Soemaryo et al. (23) stated that communication has a positive and significant effect on patient satisfaction. The better the communication, the higher the level of patient satisfaction, and vice versa. The role of communication in healthcare services is inseparable from every patient receiving hospital care, as communication is one of the key factors influencing patient satisfaction. This includes not only verbal communication but also healthcare staff behavior, tone of voice, attentiveness, friendliness, as well as the ease of accessing information—elements of communication that rank highly in patients' satisfaction perceptions.

**Table 6. Test Results (simultaneous test)**

Model	df	Mean Square	F	Sig
Regres-sion	2	62.782	108.963	0.00
Residual	203	0.576		
Total	205			

Based on the results of the F-test (simultaneous test), the calculated F-value was 108.963, which is greater than the F-table value of 3.04. Therefore, it can be concluded that H3 is accepted, indicating that service quality (X1) and effective communication (X2) simultaneously have a positive and significant effect on the satisfaction of blood service users (Y). This finding is consistent with the study conducted by Tanumiharja et al. (24), which concluded that good service quality contributes significantly to patient satisfaction levels. Effective

communication also plays an important role in enhancing patient satisfaction.

According to Kotler and Keller (8), one of the key factors in determining customer satisfaction that must be considered by organizations is service quality. Customers tend to feel satisfied when they receive good service or service that meets their expectations. Moreover, a study by Song et al. (25) found that poor communication between medical staff and patients can lead to misunderstandings, dissatisfaction, and even a decline in patients' trust in healthcare services.

Conversely, effective communication increases satisfaction and loyalty toward the hospital.

**Table 7. Results of the Coefficient of Determination (R<sup>2</sup>) Test**

R	R Square	Adjusted R Square
0.720	0.518	0.513

Based on the results of the coefficient of determination ( $R^2$ ) analysis, the  $R^2$  value was found to be 0.518. This indicates that the variables of service quality (X1) and effective communication (X2) explain 51.8% of the variance in the dependent variable, blood service user satisfaction (Y), while the remaining 48.2% is explained by other variables. According to Kotler and Keller (8), there are five main factors that organizations must consider in determining customer satisfaction: product quality, service quality, emotional factors, price, and cost. In their study, Tanumiharja et al. (24) noted that other unexamined factors—such as patients' prior experiences with healthcare services, their emotional state during treatment, and environmental influences—can also contribute to patient satisfaction. Therefore, a more holistic approach is needed to understand and improve patient satisfaction by considering

various factors that may influence their perceptions of service quality.

Based on the analysis results, the satisfaction perception score was 3.88, indicating that respondents' perception of satisfaction is good/satisfactory. The perception score for service quality was 4.06, suggesting that respondents rated service quality as good. The perception score for effective communication was 4.25, indicating that respondents perceived the quality of communication as very good. These findings suggest that the current service quality and effective communication at the Blood Transfusion Unit (UTD) of East OKU Regional General Hospital (RSUD OKU Timur) are considered good, and users of blood services are generally satisfied with the services provided. However, greater efforts are needed by the UTD to maintain or even enhance the service experience received by users.

**Table 8. Distribution of Respondents' Answers for Each Variable**

Variabel	Percentage Answers by score (%)				
	5	4	3	2	1
satisfaction	9.39	69.26	21.35	0.0	0.0
Service quality	19.57	67.59	11.99	0.65	0.2
Effective communication	27.78	69.92	2.30	0.0	0.0

Based on the analysis results, 78.65% of respondents reported feeling satisfied, while

21.35% expressed a neutral stance. A total of 87.16% of respondents had a positive perception of service quality at the Blood Transfusion Unit

(UTD) of RSUD OKU Timur, 11.99% were neutral, and 0.85% had not yet expressed a positive perception. Additionally, 97.7% of respondents had a positive perception of effective communication, while 2.3% were neutral.

A more in-depth evaluation is needed for the percentage of respondents who reported a

neutral perception or had not yet expressed a positive perception regarding the variables of service quality and effective communication. This will allow for the collection of more specific data and help identify areas for improvement in both communication practices and overall service delivery.

**Table 9. Distribution of Respondents' Answers on Physical Evidence Indicators (Service Quality)**

No	Statement	Percentage (%)		
		Agree	Neutral	Not Agree
1	Clean Building	76.73	15.05	7.77
2	Comfortable waiting room	76.73	15.05	7.77
3	Modern facility	86.89	13.11	0.00
4	Clean Facility	84.95	10.68	4.37
5	comfortable environment	77.67	18.45	3.88
6	Suggestion box available	78.16	21.84	0.00

**Table 10. Distribution of Respondents' Answers on the Empathy Indicator (Service Quality)**

No	Statement	Percentage (%)		
		Agree	Neutral	Not Agree
1	Officers respect	78.64	21.36	0.00
2	Officers are patient	81.55	16.02	2.43
3	Officers respond to complaints	89.32	10.68	0.00
4	Officers respond to criticism	93.20	6.80	0.00
5	Opening hours are on time	90.88	9.22	0.00

**Table 11. Distribution of Respondents' Answers on the Empathy Indicator (Effective Communication)**

No	Statement	Percentage (%)		
		Agree	Neutral	Not Agree
1	Officers listen to complaints	97.57	2.43	0.00
2	Convenient communication	94.66	2.91	2.43
3	The officer did not act irritated	96.12	3.88	0.00
4	The officers understand	98.06	1.94	0.00
5	Officers provide input	99.03	0.97	0.00

Based on the analysis results, responses to statements under the indicators of service quality, effective communication, and satisfaction are as follows:

1. On the physical evidence indicator of the service quality variable, some respondents disagreed with the statement that the building is clean and well-maintained (16 respondents or 7.77%), that the blood transfusion unit (UTD) has a clean and comfortable waiting room (16 respondents or 7.77%), that the facilities are clean and in good condition (9 respondents or

4.37%), and that the environment is comfortable (8 respondents or 3.88%). These findings indicate that some respondents still perceive the building, waiting area, and overall environment of UTD RSUD OKU Timur as not clean or comfortable. In addition, current facilities are considered by some respondents to be in suboptimal condition.

2. On the empathy indicator of the service quality variable, some respondents disagreed with the statement that the staff are patient in delivering services (5 respondents or 2.43%). This suggests that a number of respondents felt

that staff were not sufficiently patient in providing care.

3. On the empathy indicator of the effective communication variable, some respondents disagreed with the statement that staff always create a comfortable communication environment (5 respondents or 2.43%). This indicates that a portion of respondents felt that staff were not yet able to establish a communicative atmosphere that was conducive and reassuring for blood service users.

A study by Tanumiharja et al. (24) stated that service quality is a crucial factor influencing the overall performance and outcomes of healthcare services. High-quality services directly impact patient satisfaction and trust toward healthcare institutions. Timely services, adequate facilities, and professional attitudes of healthcare personnel significantly contribute to increasing satisfaction levels. Moreover, improving communication between healthcare providers and patients can enhance patients' overall perception of the hospital, increase satisfaction, and reduce the risk of misunderstanding.

Therefore, hospitals need to continuously invest in upgrading their facilities, training healthcare personnel, and developing a transparent and responsive communication system to deliver comprehensive and sustainable patient care. It is essential that hospitals provide communication skills training to healthcare workers, ensure that information conveyed to patients is easy to understand, and create an environment where patients feel heard and understood.

Based on these findings, priority improvements should focus on cleanliness of the facilities, buildings, and surroundings, as well as the comfort of the waiting room. Additionally, training programs are needed to enhance staff attitudes and communication skills in engaging with blood service users.

## **CONCLUSION AND RECOMMENDATIONS**

The conclusion of this study is that respondents' perceptions regarding satisfaction were good/satisfactory, perceptions of service quality were good, and perceptions of effective communication were very good. However, improvements are needed in the cleanliness and

comfort of facilities, waiting areas, buildings, and the surrounding environment, as well as in the attitudes and communication skills of staff. Initiatives such as in-house training on Hospital Service Excellence, internal/external quality control, and evaluations of other factors—such as product quality, pricing, and customer emotional response—can serve as strategies to enhance service delivery and user satisfaction.

Future researchers are encouraged to adopt alternative approaches, such as mixed methods, to obtain deeper insights. Expanding the scope of the study to include additional variables would allow for a more comprehensive understanding of user satisfaction. According to the researcher, product quality is one of the key variables that merits further investigation.

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