

The Influence Of Service Quality Kesehatan Pasien Polyclinic Brand Image To Hospital Tk. III dr. Reksodiwiryono Padang

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Article Info	ABSTRACT
<p>Keywords: reliability, responsevessess, assurance, empathy, tangible (real evidence) to Brand Image.</p>	<p>Increased competition due to customers who increasingly selective and knowledgeable in choosing a hospital, the Hospital requires Tk.III dr. Reksodiwiryono Padang as a provider of health care to always improve the quality of service. In order to improve the quality of care, it must first be known whether the service rendered to the patient during the patient has been in line with expectations or not that will affect the brand image of the hospital. The purpose of this study is to analyze the relationship between service quality and brand image Tk Hospital. III Dr. Reksodiwiryono Padang. The study was conducted in April 2013. The study population consists of 538 patients. So the total sample of 108 patients, obtained by stratified random sampling. Questionnaire data collection by using a questionnaire. Data were analyzed using multiple regression test. The results showed that the partially positive relationships between all the variables that variable service reliability (dependability), responsevessess (responsiveness), assurance (security), empathy (empathy), tangible (real evidence) to Brand Image Hospital Tk.III dr. Reksodiwiryono Padang. And there is a significant relationship between the variable reliability (dependability), responsevessess (responsiveness), assurance (security), empathy (empathy), tangible (real evidence) to Brand Image Hospital Tk.III dr. Reksodiwiryono Padang. However, there is no significant relationship between assurance (security), empathy (empathy) toward Brand Image Tk.III dr Hospital. Reksodiwiryono Padang. Simultaneously, a significant difference between the services of the Brand Image Hospital Tk.III dr. Reksodiwiryono Padang (signifikansi value 0.000). Based on the value of the coefficient was found that the most influential variable on Brand Image in Hospital Tk.III dr. Reksodiwiryono Padang is variable tangibles / physical evidence (X1), where the significance value 0.004 and 0.365 beta value. To the House leadership suggested SakitTk.III dr. Reksodiwiryono Padang to conduct training programs for all care workers on how to give good service to patients so as to improve customer satisfaction and increase Brand Image Hospital Tk.III dr. Reksodiwiryono Padang. For further research to examine the factors - other factors affecting brand image Tk.III Hospital dr. Reksodiwiryono Padang such as leadership and promotion factors.</p>



INTRODUCTION

Health development according to Law Number 36 of 2009 on Health aims to increase awareness, willingness, and ability to live a healthy life for every individual in order to achieve an optimal level of public health. To realize this goal, the government has implemented various programs, one of which is the National Social Security System (Sistem Jaminan Sosial Nasional/SJSN). Basically, SJSN is a state program intended to provide certainty of social protection and welfare for all Indonesian citizens (Thabrany, 2001:20).

The service industry is currently developing very rapidly. Competition in this sector has become highly competitive, with services offered by providers varying according to consumer needs and expectations. One of the fastest-growing service industries in Indonesia is the hospital service industry, including government-owned hospitals, private hospitals, and even foreign-owned hospitals (Arafah, 2004:56).

Hospitals are one of the healthcare service facilities that provide medical services to the community and play a very strategic role in accelerating the improvement of public health status. To achieve an optimal level of public health, health efforts are implemented through promotive, preventive, curative, and rehabilitative approaches, carried out in a comprehensive, integrated, and sustainable manner (Law Number 44 of 2009).

Tk. III Dr. Reksodiwiry Hospital Padang is one of the hospitals owned by the Indonesian Army, established in 1878. Initially, Dr. Reksodiwiry Hospital only served military personnel and their families. However, over time and with the increasing healthcare needs of the community, the hospital has, in recent years, served patients with various health insurance schemes, such as Askes, Jamsostek, Jamkesmas, and several state-owned companies.

Tk. III Dr. Reksodiwiry Hospital Padang has 11 outpatient clinic units, including internal medicine, dental, ophthalmology, pediatrics, cardiology, neurology, ENT, pulmonology, obstetrics, surgery, and orthopedics. The hospital employs 33 nurses with diverse educational backgrounds, including SPK, Diploma (D3), and Bachelor's degree (S1), and is supported by specialist doctors in accordance with the available clinics.

The hospital has been accredited in four basic service areas, namely administration and management, medical services, nursing services, and emergency services, and is currently undergoing the accreditation process for 12 service standards. These service standards are oriented toward customer satisfaction and represent comprehensive service benchmarks for service institutions such as Tk. III Dr. Reksodiwiry Hospital Padang. One of the hospital's efforts to compete in the hospital industry is by improving the quality of healthcare services. Therefore, Tk. III Dr. Reksodiwiry Hospital Padang needs to enhance service quality in order to provide satisfaction to patients as customers.

Increasingly intense competition, combined with patients who are more selective and knowledgeable in choosing hospitals, requires Tk. III Dr. Reksodiwiry Hospital Padang as a healthcare service provider to continuously improve its service quality. To improve service

quality, it is first necessary to determine whether the services provided so far have met patient expectations, as this will influence the hospital's brand image.

Brand image refers to an individual's perception or assessment of an object. In the context of hospitals, brand image refers to patients' perceptions or evaluations of a hospital they visit, which are expected to provide satisfaction in terms of services as well as facilities and infrastructure needed for ongoing medical treatment (Kotler, 2002).

Similarly, although data show an increase in patient visits each year at Tk. III Dr. Reksodiwiry Hospital Padang, patients rarely make repeat visits. This condition may indicate a less favorable brand image of the hospital from the patients' perspective.

The low rate of repeat visits to Tk. III Dr. Reksodiwiry Hospital Padang may be caused by unsatisfactory service quality, particularly in the outpatient clinic units. According to Lovelock (as cited in Tjiptono, 2001:58), service quality is the degree of excellence or deficiency of services provided by a service company in order to satisfy consumers or exceed their expectations. Therefore, consumers' evaluation of service quality reflects their evaluative perception of the services received at a certain time.

According to Zeithaml, Berry, and Parasuraman (as cited in Zulian Yamit, 2005:10–11), service quality dimensions consist of reliability, responsiveness, assurance, empathy, and tangibles. Reliability refers to the ability of a company to deliver promised services accurately and on time. Responsiveness refers to the willingness and ability of hospital staff to provide prompt and responsive services. Assurance refers to employees' behavior in building trust and confidence among consumers when using the services offered. Empathy refers to the hospital staff's ability to provide individual attention and understand patients' needs, while tangibles refer to physical evidence of the service provider's concern and attention, including facilities and infrastructure.

Based on a preliminary survey conducted by the researcher through interviews with 10 patients visiting the outpatient clinic of Tk. III Dr. Reksodiwiry Hospital Padang on March 15, 2013, it was found that there were complaints regarding healthcare services at the hospital. Six respondents (60%) stated that registration staff were not friendly in serving patients, four respondents (20%) reported that doctors were often not present or arrived late, causing delays in treatment, and four respondents (40%) complained about limited hospital facilities. All patients who expressed these complaints stated that they would not make repeat visits to Tk. III Dr. Reksodiwiry Hospital Padang.

Based on the above findings, patient complaints regarding the services provided by Tk. III Dr. Reksodiwiry Hospital Padang may contribute to the formation of a negative hospital brand image. If such conditions persist, they may have a detrimental impact on the hospital's brand image and ultimately affect the overall number of patient visits to Tk. III Dr. Reksodiwiry Hospital Padang.

METHODS

Type of Research

This study employs a quantitative research approach using inferential statistical analysis, with correlation and regression techniques as the data analysis methods. Correlational research, according to Suryabrata (2003:82), is a type of research used to

determine the functional relationship between two or more variables, either individually or collectively.

Descriptive statistics are used to describe the collected data, while inferential statistics are applied to draw conclusions. Sugiyono (2003:169–170) explains that descriptive statistics are used to analyze data by describing the collected data as they are, without the intention of making general conclusions. Inferential statistics, on the other hand, are statistical techniques used to analyze sample data, with the results generalized to the population.

Through this research, the influence of physical evidence, reliability, responsiveness, assurance, and empathy, as well as the extent of patients' contributions to the brand image of Tk. III Dr. Reksodiwiry Hospital Padang, can be identified.

Population and Sample

Research Population

According to Arikunto (2006:108), a population is the entire subject of the research, while Sugiyono (2007:90) defines population as a generalization area consisting of objects or subjects that have specific qualities and characteristics determined by the researcher to be studied and subsequently concluded. Thus, a population does not only consist of individuals but also includes objects and other natural elements.

The population of this study consists of patients who visited the outpatient clinic of Tk. III Dr. Reksodiwiry Hospital Padang, particularly the internal medicine clinic, based on patient visit data for January 2013, totaling 538 patients.

Research Sample and Sampling Technique

A sample is a subset of the population. To ensure that the selected sample is representative, the determination of sample size in this study follows Arikunto's (2006:112) guideline, which states that if the number of subjects is fewer than 100, it is preferable to include all subjects, making the study a population study. However, if the number of subjects is large (more than 100), a sample of 20–25% of the population may be taken.

Based on this guideline, the required sample size in this study is calculated as follows:
 $538 \times 20\% = 108$ patients.

The sample of 108 patients was selected using a stratified random sampling technique.

Research Variables

The study involved the following variables:

Dependent Variable (Y):

Brand image (patient satisfaction)

Independent Variables (X):

X₁: Physical evidence (Tangibles)

X₂: Reliability

X₃: Responsiveness

X₄: Assurance

X₅: Empathy

Each variable was operationally defined through measurable indicators adapted from the SERVQUAL model.

Research Instruments and Data Collection

Instruments

Data were collected using a structured questionnaire developed based on service quality and patient satisfaction indicators. Responses were measured using a five-point Likert scale, ranging from strongly disagree (1) to strongly agree (5).

Prior to data analysis, the instrument underwent:

- Validity testing using Product Moment correlation ($r > 0.30$)
- Reliability testing using Cronbach's Alpha, where $\alpha \geq 0.60$ indicated acceptable reliability

Data Collection Techniques

Data were collected through:

- Observation of service delivery processes
- Interviews with patients to support questionnaire data
- Questionnaire distribution to selected respondents

Secondary data were obtained from hospital reports, scientific publications, and relevant literature.

Research Procedures

The research was conducted through the following steps:

- Determination of population and sample
- Development and validation of research instruments
- Data collection through questionnaires, observation, and interviews
- Data coding, entry, and cleaning
- Statistical data analysis and interpretation

Data Analysis

Data analysis was conducted using descriptive and inferential statistics:

- Descriptive analysis: frequency distributions and percentages to describe respondent characteristics
- Inferential analysis:
 - Multiple linear regression
 - Partial effect testing (t-test)
 - Simultaneous effect testing (F-test)
 - Coefficient of determination (R^2)

The regression model applied was:

$$Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4 + \beta_5 X_5 + \varepsilon$$

All statistical analyses were performed using SPSS version 20 with a significance level of $\alpha = 0.05$.

Classical Assumption Testing

To ensure the validity of the regression model and compliance with the BLUE (Best Linear Unbiased Estimator) criteria, the following tests were conducted:

- Normality test (Kolmogorov–Smirnov)
- Multicollinearity test (Variance Inflation Factor, $VIF < 10$)
- Heteroscedasticity test (Glejser test)
- Autocorrelation test (Durbin–Watson).

Research Ethics and Subject Consent

This study adhered to research ethics principles. All respondents participated voluntarily after receiving clear information regarding the research objectives. Confidentiality and anonymity of respondents were maintained throughout the research process.

Research Limitations

This study was limited to patients from a single hospital and one outpatient clinic, which may affect the generalizability of findings. Data were collected using self-reported questionnaires, which may be subject to respondent bias.

Reproducibility and Data Transparency

The research instruments, procedures, and statistical analysis methods are described in detail to ensure reproducibility. Data analysis was conducted using standardized statistical software, and references were drawn from credible and verifiable sources.

Data Presentation

Research findings are presented using tables, figures, and statistical summaries to support interpretation and facilitate understanding of the results.

RESULTS AND DISCUSSION

Description of Research Results

Descriptive Statistical Analysis

Descriptive statistical analysis aims to describe the condition of the research object as reflected in the data collected through the research variables. Therefore, all information presented in the descriptive statistics represents the actual condition of the research object. The following section presents the frequency distributions of items or variables, as well as the mean scores of each item, obtained from the distribution of 108 questionnaires.

The mean scores of item variables derived from the frequency distributions are then interpreted based on the criteria shown in the following table:

Table 1. Interpretation Criteria for Item Scores in Research Variables.

Score Value (SV)	Interpretation
0 < SV < 1	Very negative range
1 < SV < 2	Negative range
2 < SV < 3	Positive range
3 < SV < 4	Very positive range

Source: Sugiyono (2004)

Frequency Distribution of the Physical Evidence Variable (X_1)

The first dimension of patient service quality examined in this study is physical evidence (tangibles) and its influence on the brand image of Dr. Reksodiwiry Hospital Padang. This variable consists of four questionnaire items. The results are presented as follows:

Table 2. Frequency Distribution of Respondents Based on Physical Evidence (Tangibles) Indicators at Tk. III Dr. Reksodiwiry Hospital Padang

Item Statement	5 (f/%)	4 (f/%)	3 (f/%)	2 (f/%)	1 (f/%)	Mean
Neat appearance of paramedical staff is well maintained	12 (11.1)	77 (71.3)	13 (12.0)	6 (5.6)	–	3.88
Cleanliness of examination rooms is well maintained	17 (15.7)	71 (65.7)	18 (16.7)	2 (1.9)	–	3.95
The hospital's physical appearance is well maintained	25 (23.1)	58 (53.7)	22 (20.4)	3 (2.8)	–	3.97
Hospital equipment is complete and well maintained	22 (20.4)	66 (61.1)	18 (16.7)	2 (1.9)	–	4.00
Overall Mean						3.95

Source: Processed Data (2013)

Based on the questionnaire items related to physical evidence (tangibles) (X_1), the findings indicate that for the first item, concerning respondents' opinions on the neat appearance of paramedical staff, most respondents selected agree. The mean score of 3.88 indicates that, on average, respondents hold a very positive perception regarding the neat appearance of paramedical staff.

For the second item, regarding the cleanliness of examination rooms, respondents generally selected agree. The mean score of 3.95 suggests that respondents exhibit a very positive attitude toward the cleanliness of examination rooms.

For the third item, concerning the maintenance of the hospital's physical appearance, most respondents also selected agree. The mean score of 3.97 indicates a very positive perception of the hospital's physical appearance.

For the fourth item, related to the completeness and maintenance of hospital equipment, respondents predominantly selected agree. The mean score of 4.00 reflects that

respondents, on average, hold a very positive attitude toward the completeness and maintenance of hospital equipment.

Frequency Distribution of the Reliability Variable (X2)

The second dimension of patient service quality is **Reliability** of hospital services, which consists of four questionnaire items. The results are presented as follows:

Table 3. Frequency Distribution of Reliability Indicators Regarding Factors Affecting Service Quality on Brand Image at Tk. III dr. Reksodiwiry Hospital, Padang

Question Item	5	%	4	%	3	%	2	%	1	%	Mean
Paramedical services are accurate	16	14.8	75	69.4	14	13.0	3	2.8	–	–	3.96
Hospital services meet the hospital's commitment	13	12.0	71	65.7	22	20.4	2	1.9	–	–	3.88
Paramedics provide services quickly	28	25.9	50	46.3	28	25.9	2	1.9	–	–	3.96
Paramedical services are satisfactory	23	21.3	55	50.9	28	25.9	2	1.9	–	–	3.92
Overall Mean											3.93

Source: Processed Data (2013)

The overall mean score of 3.93 indicates that respondents perceive the reliability of hospital services as very positive.

Frequency Distribution of Responsiveness Variable (X3)

The third dimension of patient service quality is **Responsiveness**, consisting of four questionnaire items.

Table 4. Frequency Distribution of Respondents Based on Responsiveness Indicators at Tk. III dr. Reksodiwiry Hospital, Padang

Question Item	5	%	4	%	3	%	2	%	1	%	Mean
Staff provide friendly services	16	14.8	49	45.4	33	30.6	10	9.3	–	–	3.66
Staff are responsive in handling problems	14	13.0	34	31.5	51	47.2	9	8.3	–	–	3.49
Staff handle problems quickly	20	18.5	40	37.0	38	35.2	10	9.3	–	–	3.65
Staff are prompt in providing services	10	9.3	53	49.1	31	28.7	14	13.0	–	–	3.55
Overall Mean											3.59

Source: Processed Data (2013)

Frequency Distribution of Assurance Variable (X4)

The fourth dimension of patient service quality is **Assurance**, consisting of four questionnaire items.

Table 5. Frequency Distribution of Respondents Based on Assurance Indicators at Tk. III dr. Reksodiwiryo Hospital, Padang

Question Item	5 %	4 %	3 %	2 %	1 %	Mean
Patient trust in doctors	17 15.7	42 38.9	29 26.9	20 18.5	--	3.52
Doctors' expertise matches their specialization	23 21.3	34 31.5	46 42.6	5 4.6	--	3.69
Doctors have a good reputation	19 17.6	29 26.9	49 45.4	11 10.2	--	3.52
Doctors possess extensive knowledge	19 17.6	36 33.3	47 43.5	3 2.8	3 2.8	3.60
Overall Mean						3.59

Source: Processed Data (2013)

Frequency Distribution of Empathy Variable (X5)

Table 6. Frequency Distribution of Respondents Based on Empathy Indicators at Tk. III dr. Reksodiwiryo Hospital, Padang Scientific Equations

Question Item	5 %	4 %	3 %	2 %	1 %	Mean
Staff give special attention to certain patients	16 14.8	69 63.9	20 18.5	3 2.8	--	3.91
Staff establish good relationships with patients	14 13.0	71 65.7	21 19.4	2 1.9	--	3.90
Staff assist patients when difficulties arise	38 35.2	47 43.5	19 17.6	4 3.7	--	4.10
Staff understand patients' needs	27 25.0	55 50.9	20 18.6	6 5.6	--	3.95
Overall Mean						3.97

Source: Processed Data (2013)

Frequency Distribution of Brand Image Variable (Y)

Table 7. Frequency Distribution of Respondents Based on Brand Image at Tk. III dr. Reksodiwiryo Hospital, Padang

Question Item	5 %	4 %	3 %	2 %	1 %	Mean
Patients tend to return	33 30.6	61 56.5	13 12.0	1 0.9	--	4.17
Patients recommend the hospital to others	23 21.3	64 59.3	17 15.7	4 3.7	--	3.98
Quality service outweighs price considerations	29 26.9	52 48.1	22 20.4	5 4.6	--	3.97
Patients engage in other hospital services	26 24.1	56 51.9	25 23.1	1 0.9	--	3.99
Overall Mean						4.03

Source: Processed Data (2013)

DISCUSSION

Hypothesis Testing: Partial Analysis (Individual Variables)

Based on the results of linear regression analysis for each independent variable, the relationship between each variable and brand image can be explained as follows:

1. Tangibles Variable (X1)

Based on the results of linear regression analysis, the regression coefficient value for the tangibles variable is 0.372, indicating the ability of the tangibles variable to explain or influence the brand image variable. The significance value obtained is 0.004.

To determine whether the research hypothesis is accepted or rejected, the significance value is compared with the error tolerance level of 0.05. The comparison shows that the significance value is smaller than 0.05 ($0.004 < 0.05$), which indicates that there is a positive and significant effect of tangibles on brand image.

2. Reliability Variable (X2)

The linear regression analysis shows that the regression coefficient for the reliability variable is 0.337, indicating its ability to influence brand image. The significance value obtained is 0.010.

Since the significance value is smaller than the error tolerance level of 0.05 ($0.010 < 0.05$), this result indicates that there is a positive and significant effect of reliability on brand image.

3. Responsiveness Variable (X3)

The results of linear regression analysis indicate that the regression coefficient for the responsiveness variable is 0.015, with a significance value of 0.802.

When compared with the error tolerance level of 0.05, the significance value is greater than 0.05 ($0.802 > 0.05$). This result indicates that responsiveness does not have a significant effect on brand image.

4. Assurance Variable (X4)

Based on the linear regression analysis, the regression coefficient for the assurance variable is 0.045, with a significance value of 0.521.

Because the significance value is greater than 0.05 ($0.521 > 0.05$), it can be concluded that assurance does not have a significant effect on brand image.

5. Empathy Variable (X5)

The regression analysis results show that the regression coefficient for the empathy variable is 0.181, with a significance value of 0.008.

Since the significance value is smaller than 0.05 ($0.008 < 0.05$), this result indicates that empathy has a positive and significant effect on brand image.

The findings of this study are in line with the research conducted by Acep Maulana (2009) entitled *Dimensions of Service Quality on Customer Satisfaction (a study of Taplus customers at PT Bank X Persero Tbk., Y Branch, Malang)*, which stated that service quality consists of tangibles, reliability, responsiveness, assurance, and empathy. The study found that responsiveness and empathy did not partially affect customer satisfaction.

However, this result differs from the study conducted by Wanda Febrina (2009) on the effect of service quality on patient satisfaction at Adam Malik Hospital, Medan, which found that all service quality dimensions had a significant partial effect on patient satisfaction.

Similarly, Danny Winanto (2012) found that tangibles, reliability, responsiveness, assurance, and empathy significantly influenced brand image both simultaneously and partially at Seruni Lawang Medika Inpatient Unit, with responsiveness being the dominant variable.

According to Zeithaml, Berry, and Parasuraman (cited in Zulian Yamit, 2005: 10–11), service quality dimensions include reliability, responsiveness, assurance, empathy, and tangibles. Questionnaire results indicate that while most respondents agreed with positive statements related to these dimensions, some respondents expressed hesitation or disagreement, particularly regarding responsiveness and assurance.

This condition suggests that improvements are needed, especially in ensuring examination room cleanliness, maintaining service accuracy, improving staff responsiveness, strengthening patient trust in doctors, and enhancing staff ability to understand patient needs. Therefore, hospital management is encouraged to improve staff capacity through training programs to enhance the hospital's brand image.

Hypothesis Testing: Simultaneous Analysis

(Tangibles, Reliability, Responsiveness, Assurance, and Empathy on Brand Image)

Based on the multiple linear regression analysis, it can be concluded that tangibles (X1), reliability (X2), responsiveness (X3), assurance (X4), and empathy (X5) simultaneously have a significant effect on brand image (Y), with a significance value of $0.000 < 0.05$.

These findings are consistent with the study by Wanda Febrina (2009) and Danny Winanto (2012), which demonstrated that service quality dimensions significantly influence patient satisfaction and hospital brand image.

Brand image is closely related to patient satisfaction, which is influenced by the quality of services provided by the hospital. According to Dawn Bendall and Thomas L. Powers (1995) in their study *Cultivating Loyal Patients*, patient satisfaction is strongly associated with perceived healthcare service quality and patient loyalty.

Thus, the simultaneous relationship among these five variables indicates that service quality dimensions collectively influence brand image at Tk. III dr. Reksodiwiry Hospital, Padang. Improving all dimensions of service quality is essential to enhance the hospital's brand image.

Hypothesis Testing: Analysis to Determine the Dominant Variable Affecting Brand Image

Based on the regression coefficients, the most influential variable affecting brand image is tangibles (X1), with a significance value of 0.004 and a beta coefficient of 0.365.

This result is consistent with the study conducted by Rina Primadha (2007) at Dr. Pringadi Hospital, Medan, which found that tangibles were the most dominant factor influencing patient satisfaction. However, this finding differs from studies by Wanda Febrina (2009), Acep Maulana (2009), and Danny Winanto (2012), which identified responsiveness or assurance as the dominant variable.

According to Parasuraman, Zeithaml, and Berry (cited in Umar, 2003: 8–9), tangibles represent physical evidence of service provider concern and attention toward consumers. Tangibles play a crucial role in shaping service image, especially for new consumers.

Components of the tangibles dimension include:

- Neat appearance of hospital paramedical staff
- Cleanliness of examination rooms
- Attractive hospital appearance
- Completeness of hospital equipment

Based on these findings, the researcher concludes that enhancing the hospital's brand image should focus on improving tangible aspects of service quality. Improving physical facilities and service environments can increase patient satisfaction, particularly in outpatient services, thereby strengthening the brand image of Tk. III dr. Reksodiwiry Hospital, Padang..

CONCLUSION

Based on the results and discussion of the study on the effect of outpatient healthcare service quality on the brand image of Tk. III dr. Reksodiwiry Hospital, Padang, it can be concluded that service quality dimensions—namely tangibles, reliability, responsiveness, assurance, and empathy—generally have a positive relationship with hospital brand image. Partially, tangibles, reliability, and empathy show a positive and significant influence on brand image, while responsiveness and assurance do not demonstrate a significant individual effect. Simultaneously, all service quality dimensions significantly influence brand image, as indicated by a significance value of 0.000. Furthermore, tangibles emerge as the most dominant factor affecting brand image, evidenced by the highest beta coefficient ($\beta = 0.365$) and a significance value of 0.004, indicating that improvements in physical facilities and visible service attributes play a crucial role in strengthening the hospital's brand image..

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