

ANALYSIS OF THE IMPACT OF COMPETENCE AND WORK DISCIPLINE ON PATIENT SATISFACTION AT TAMAN HARAPAN BARU HOSPITAL

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ABSTRACT

This study aims to analyze the impact of competence and work discipline on patient satisfaction at Taman Harapan Baru Hospital. The research is motivated by the important role of competence and work discipline in improving patient satisfaction at this institution. A quantitative approach was employed, combining descriptive and verificative methods. Data were collected through questionnaires administered to 50 patients and analyzed using multiple linear regression. The results indicate that both competence and work discipline have a positive and significant effect on patient satisfaction at Taman Harapan Baru Hospital, both partially and simultaneously. The study concludes that enhancing competence and work discipline is essential for optimising patient satisfaction at Taman Harapan Baru Hospital.

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INTRODUCTION

Healthcare has become a fundamental need for society. As living standards rise, so do public demands for quality healthcare. This requires healthcare providers such as hospitals to improve the quality of their services, particularly in terms of facilities and the performance of healthcare staff. Services should extend beyond curative care to include preventive care aimed at improving quality of life and meeting the expectations of healthcare users.

Hospitals, as institutions in the healthcare sector, have undergone significant change. In their early development, hospitals functioned primarily as social institutions; with the emergence of private hospitals, they have increasingly come to be regarded as industries operating in healthcare delivery and managed according to business principles. Consequently, competition has intensified among hospitals—both public and private—as they seek to attract users of their services. The new paradigm of community healthcare in hospitals emphasises the

delivery of quality care that meets patient needs and expectations while adhering to professional and medical codes of ethics. In an era of rapid technological change and increasing competition, hospitals are under pressure to improve the quality of their services. Quality is central to the sustainability of any institution, and the pursuit of quality through integrated quality management has become an imperative for institutions that wish to survive and grow.

Competence is essential for healthcare staff in carrying out their duties and responsibilities. Competence can be defined as a specific combination of knowledge, task mastery, skills, and work discipline required to perform a particular activity. Two aspects need to be considered in the work of healthcare staff: technical aspects and skills. In many cases, the competence of healthcare staff does not fully match the responsibilities assigned to them, leading to services or outputs that fall short of expectations. Length of service and work experience are important determinants of nurses' mastery of their work; nurses with considerable experience in their field are generally considered more competent and better able to perform and contribute to Taman Harapan Baru Hospital.

With regard to human resources at Taman Harapan Baru Hospital, both medical and non-medical staff include a considerable number of new employees and fresh graduates who have received little or no training. Furthermore, training provided by the organisation has not been well planned, and attendance at training sessions is often poor. As a result, the competence of staff at Taman Harapan Baru Hospital has a substantial impact on the quality of service delivery.

Employees with a high level of discipline tend to apply their full capability and thus achieve optimal results at work. Good performance by an employee can increase job satisfaction. This, in turn, can raise the productivity of the organisation. However, a recurring concern is poor work discipline among employees: suboptimal effort, ineffective use of time leading to frequent missed deadlines, and non-compliance with regulations—including frequent lateness and unauthorised absence. Under regulations governing annual leave, long leave, special leave, and maternity leave for female employees, nurses who are absent without leave or without authorisation are considered to have committed absenteeism. Other issues include inadequate sense of responsibility, weak enforcement, and insufficient sanctions, which can lead employees to take their duties lightly and postpone work. This may result in: (a) excessive workload distribution; (b) poor collegial relations; (c) lack of disciplinary action against absent employees; and (d) general indiscipline. These observations are based on the researcher's direct observation of nurses at Taman Harapan Baru Hospital. Management attention to nurse absenteeism is therefore necessary, as it can delay task completion, reduce efficiency, and lower the performance of staff at Taman Harapan Baru Hospital. If left unaddressed, such issues can undermine organisational performance and reduce the number of high-performing employees, who may then fail to receive appropriate rewards and become less willing to perform their duties.

Patient satisfaction is the feeling of pleasure or disappointment experienced by a patient after comparing the service received with their expectations. Patient satisfaction is one of the key indicators of healthcare quality. It is an important aspect, and research has shown a strong relationship between the conduct of healthcare staff and patient satisfaction. Previous studies

have reported patient satisfaction levels of 40.4% in Kenya, 34.4% in India, and 42.8% in Indonesia (Nur and Simanjorang 2020). According to Indonesian Ministry of Health data for 2018, approximately 60% of hospitals in Indonesia do not yet meet the need for efficient service delivery or apply service standards that are acceptable and accessible to all. Anfal (2020) notes that the image of healthcare in Indonesia has declined, as indicated by the growing tendency of the public to seek treatment abroad, for example in Malaysia and Singapore. This tendency is generally driven by factors such as the completeness of facilities and the quality of care that meets patient expectations (Anfal 2020).

Patient satisfaction in healthcare is important to monitor because it reflects the quality of care at a given facility. High patient satisfaction is associated with high-quality care; poor quality of care means that patient expectations are unlikely to be met (Kismanto and Murtopo 2023). When patients are dissatisfied with the service received, this affects the reputation of the provider, including hospitals. With advances in technology, criticism and feedback are no longer confined to suggestion boxes or word of mouth; digital reviews on social media and the web now provide information about hospitals. Today, patients often search for the best hospital for themselves or their family by consulting websites, search engines, and other online sources (Pujaswari, Fadila, and Febiana 2021).

Dissatisfied patients commonly lodge complaints with the hospital. Complaints that are not promptly addressed can reduce patient satisfaction with the capability of the hospital to deliver healthcare (Soumokil, Syafar, and Yusuf 2021). Patient dissatisfaction can stem from several factors, including: physical facilities (e.g. dirty or inadequate buildings, incomplete medical equipment, unprofessional appearance or attire of staff, and ineffective communication); slow or inappropriate service and poor staff responsiveness to patient needs; lack of trust and sympathy between patients and nurses; and failure to build effective communication between staff and patients (Nurhasma, Rijal, and Azis 2021).

At Taman Harapan Baru Hospital, according to the quality report for June 2024, the level of patient satisfaction has not yet reached the target. The target was 80%; however, the reported figures were 67.06% in January, 62.26% in February, 66.87% in March, 72.75% in April, 74.45% in May, and 73.25% in June. In addition, digital reviews of Taman Harapan Baru Hospital on social media and the web average 3.5/5, and many reviews express dissatisfaction with waiting times and queues, facilities, and the quality of care provided by the hospital. Based on the above, the author is interested in conducting a thesis entitled “Analysis of the Impact of Competence and Work Discipline on Patient Satisfaction at Taman Harapan Baru Hospital.”

THEORETICAL REVIEW

According to Aisyah et al. (2021), competence is the ability required to perform a given task. Competence may encompass knowledge, skills, attitudes, and aptitude. Arief and Nisak (2022) define competence as a guideline that organisations can use to direct employees towards appropriate work.

According to Sutrisno (2013), discipline reflects the willingness of an individual to comply with the norms and regulations that apply in their environment. Hasibuan (2016:193) defines

discipline as the awareness and willingness of an individual to comply with all organisational rules and prevailing social norms.

According to Tjiptono (2018:79), patient satisfaction is the level of feeling experienced by a patient after comparing the performance of the healthcare service received with their expectations. Patient satisfaction is a reflection of the quality of healthcare delivery.

RESEARCH HYPOTHESES

Based on the research problem set out in Chapter I and the theoretical framework supporting this study (presented in Chapter II), the following hypotheses are proposed as tentative answers to the research questions:

- H1: Competence is expected to have an effect on patient satisfaction at Taman Harapan Baru Hospital.
- H2: Work discipline is expected to have an effect on patient satisfaction at Taman Harapan Baru Hospital.
- H3: Competence and work discipline are expected to have a joint effect on patient satisfaction at Taman Harapan Baru Hospital.

RESEARCH METHODOLOGY

This study employs a quantitative design with descriptive and verificative approaches. According to Solimun, Armanu, and Fernandes (2018) in Santoso and Madiistriyatno (2021:4), the quantitative method is the science and art of data collection, data analysis, and interpretation of analytical results to obtain information for drawing conclusions and making decisions. According to Purba et al. (2021), descriptive research involves the collection of data to test hypotheses or answer questions about the current status of the research subjects; it is a factual research method concerning the status of a group of people, an object, a condition, a system of thought, or an event at a given point in time. Verificative research, according to Suharsimi in Aziz (2018:34), is research aimed at verifying the validity of findings from other studies.

According to Sugiyono (2013:148), a population is the generalisation domain consisting of objects or subjects that possess certain characteristics defined by the researcher for study, from which conclusions are then drawn. In this study, the population comprises patients of Taman Harapan Baru Hospital, numbering 50 patients. According to Sugiyono (2006:91), a sample is a part of the population that reflects its size and characteristics. Sample size refers to the number of units drawn for the study. In this research, the entire population was taken as the sample using a census (saturated sampling) technique, yielding 50 patients from Taman Harapan Baru Hospital.

Data were collected through field study and questionnaire distribution.

Data analysis was conducted using the Statistical Package for the Social Sciences (SPSS) for Windows Release 25. Data quality was assessed through validity and reliability tests. The

analytical techniques used include multiple linear regression, correlation analysis, and the coefficient of determination.

RESEARCH RESULTS AND DISCUSSION: VALIDITY AND RELIABILITY TESTS

1. Validity Tests

Table 1 Validity Test for the Competence Variable (X1)

Correlations					
No	Item	Pearson Correlation	Sig. (2-tailed)	N	Validity
1	Has awareness of the condition and concerns of patients	0.357*	0.011	50	Not Valid
2	Understands and complies with hospital standards to provide comfort, safety, and patient satisfaction	0.738**	0.000	50	Valid
3	Possesses knowledge from formal education that supports the process of serving patients	0.731**	0.000	50	Valid
4	Has a responsible attitude and is responsive in serving patients	0.735**	0.000	50	Valid
5	Has the desire to always provide the best to patients	0.491**	0.000	50	Valid
6	Competence	1	—	50	Valid

*Correlation is significant at the 0.05 level (2-tailed)

**Correlation is significant at the 0.01 level (2-tailed).

The table above shows that, based on the total Pearson correlation column, all indicators of the Competence variable have a significance value < 0.05. It can be concluded that four indicators are valid and one indicator is not valid: “Has awareness of the condition and concerns of patients.”

Table 2 Validity Test for the Discipline Variable (X2)

Correlations					
No	Item	Pearson Correlation	Sig. (2-tailed)	N	Validity
1	Nurses always arrive on time for work	0.669**	0.000	50	Valid
2	Nurses use facilities properly in accordance with institutional	0.781**	0.000	50	Valid

Correlations					
No	Item	Pearson Correlation	Sig. (2-tailed)	N	Validity
	regulations				
3	I have a high sense of responsibility	0.809**	0.000	50	Valid
4	I comply with existing rules	0.592**	0.000	50	Valid
5	Discipline	1	—	50	Valid

*Correlation is significant at the 0.05 level (2-tailed)

**Correlation is significant at the 0.01 level (2-tailed).

The table above shows that all indicators of the Discipline variable have a significance value < 0.05 based on the total Pearson correlation column. It can be concluded that all four indicators are valid.

Table 3 Validity Test for the Patient Satisfaction Variable (Y)

Correlations					
No	Item	Pearson Correlation	Sig. (2-tailed)	N	Validity
1	Has a strategic location	0.671**	0.000	50	Valid
2	The facilities provided are very adequate	0.832**	0.000	50	Valid
3	Ensures customer comfort	0.669**	0.000	50	Valid
4	Level of staff ability in serving customers	0.538**	0.000	50	Valid
5	Satisfaction	1	—	50	—

*Correlation is significant at the 0.05 level (2-tailed).

**Correlation is significant at the 0.01 level (2-tailed).

The table above shows that all indicators of the Satisfaction variable have a significance value < 0.05 based on the total Pearson correlation column. It can be concluded that all four indicators are valid.

2. Reliability Tests

Table 4 Reliability of the Competence Variable (X1)

Reliability Statistics	
Cronbach's Alpha	N of Items
.654	4

Based on the reliability test results for the competence variable, the four indicator items have a Cronbach's alpha value of 0.654, which is greater than 0.6. According to the criteria applied in this study, the indicators are therefore considered reliable.

Table 5 Reliability of the Discipline Variable (X2)

Reliability Statistics	
Cronbach's Alpha	N of Items
.679	4

Based on the reliability test results for the discipline variable, the four indicator items have a Cronbach's alpha value of 0.679, which is greater than 0.6. According to the criteria applied in this study, the indicators are therefore considered reliable.

Table 6 Reliability of the Patient Satisfaction Variable (Y)

Reliability Statistics	
Cronbach's Alpha	N of Items
.610	4

Based on the reliability test results for the satisfaction variable, the four indicator items have a Cronbach's alpha value of 0.610, which is greater than 0.6. According to the criteria applied in this study, the indicators are therefore considered reliable.

Table 7 Results of Multiple Linear Regression Analysis: Competence (X1) and Discipline (X2) on Patient Satisfaction (Y) (Simultaneous)

Coefficients^a					
Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		

1	(Constant)	10.785	2.661		4.053	.000
	Competence	.306	.166	.318	2.842	.000
	Discipline	.261	.160	.366	2.383	.000
a. Dependent Variable: Patient Satisfaction						

Regression equation: $y = a + bx_1 + cx_2$

Where:

y = Patient Satisfaction (dependent variable)

a = Constant

b = Regression coefficient for x_1

x_1 = Competence variable

c = Regression coefficient for x_2

x_2 = Discipline variable

The resulting equation is: $y = 10.785 + 0.306x_1 + 0.261x_2$. Thus, for every increase or decrease of 1 unit in competence, together with every increase or decrease of 1 unit in discipline, the satisfaction score changes by $10.785 + 0.306 + 0.261 = 11.355$.

Table 8 Coefficient of Determination: Competence and Discipline on Patient Satisfaction

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.284 ^a	.681	.042	1.879
a. Predictors: (Constant), Discipline, Competence				

The simultaneous explanatory power (R^2) is 68.1%. The remaining 31.9% is explained by other factors not included in this study.

Table 9 F-Test Results (ANOVA)

ANOVA ^a						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	2.625	1	2.625	5.708	.000 ^b
	Residual	177.875	48	3.706		

Total	180.50	49			
	0				
a. Dependent Variable: Satisfaction					
b. Predictors: (Constant), Discipline					

Based on the ANOVA table, the significance value is 0.000, which is less than the alpha level of 0.05 (5%). Thus, the hypothesis that competence and discipline jointly affect satisfaction is accepted; that is, competence and discipline have a significant joint effect on satisfaction, with an R^2 of 68.1%.

CONCLUSION AND RECOMMENDATIONS

Conclusion

Based on the research conducted to examine the impact of competence and work discipline on patient satisfaction at Taman Harapan Baru Hospital, the following conclusions are drawn:

1. Competence has an effect on patient satisfaction at Taman Harapan Baru Hospital, with an explanatory contribution of 78.2%.
2. Work discipline has an effect on patient satisfaction at Taman Harapan Baru Hospital, with an explanatory contribution of 61.5%.
3. Competence and work discipline together have a significant effect on patient satisfaction at Taman Harapan Baru Hospital, with a combined explanatory power of 68.1%.

Recommendations

Based on the conclusions above, the following recommendations are offered:

1. Taman Harapan Baru Hospital should pay greater attention to training for all employees, taking into account experience, capability, skills, and other relevant factors.
2. Taman Harapan Baru Hospital should strengthen work discipline, including compliance with assigned tasks and punctuality, so that staff can perform effectively and contribute to higher patient satisfaction in service delivery.
3. Future research could incorporate additional variables such as education, work experience, and compensation to obtain a more comprehensive understanding of the factors influencing patient satisfaction.

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