
Effect Of Service Quality With Customer Satisfaction In Hospitals**Olalekan Dimeji Bamiteko**

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Abstract

The purpose of this study was to determine the relationship of service quality with patient satisfaction in Husada hospital in order to provide a draft proposal regarding the quality of service in an effort to improve customer satisfaction. The variables of this study is the quality of service (independent variable) and customer satisfaction (dependent variable). Subjects were patients at the Husada hospital totaling 100 patients were assigned to the non-probability sampling method accidental sampling. Measurements were made using a scale of Quality of Service which consists of 20 items, and Patient Satisfaction scale consisted of 12 items that are already on the validity and reliability. By using the technique of linear regression through SPSS for Windows version 21.0 was obtained in the regression $R = 0.78$ and R square = 0.609, $p = 0.000$ ($p < 0.05$) indicating that patient satisfaction positively and significantly related to the quality of service equal to 0.780 and the role of service quality variables are able to explain the variable of 60.9% patient satisfaction. The study hypothesis which states "quality of care can improve patient satisfaction in Husada hospital ", is accepted. Means the better the quality of service will be followed by increased patient satisfaction in Husada hospital .

Keywords: Service Quality, Customer Satisfaction

INTRODUCTION

In this era of globalization, companies will always be aware of the importance of factors customers. There has been a shift in the market where the previous situation manufacturers determine the products or services provided market, but current customers which determines the products or services needed and must be met by the company as a manufacturer. This is due to the increasingly critical demands of society will standardization and quality improvement. Thus, a company must always equip himself to always listen to the voice of pelang-gan, for the company

it has the ability to respond ter-face every desire and expectation customers. Company is an organization owned by an individual or group of individuals provide goods or services. While the customer is an individual or group individuals who use goods or services. In the context of this research referred to the company is hospital and referred to with customers are patients.

The hospital has a function as a provider and penye-lenggara medical services, treatment, rehabilitation, prevention, health improvement and as place pendi-dikan medical and paramedical personnel as well as a place of research and development of Science Technology in the field of Health. Hospital as a place health care must be supported completeness and comfort of Service.

Hospitals generally offer a wide diversity of health services, namely, medical care services, testing for the cause of illness and providing medicines appropriate procedures, treatments or perform surgical procedures to deal with the problem health, emergency and emergency care of accident victims / individuals who requires emergency treatment.

Today the business of private hospitals in Indonesia has grown very rapidly, in large cities to remote villages sprung various private hospitals; there individual, network hospitals, to those labeled international. Rehospital business is a social enterprise that aims to help others sick man, then developed into a socio-business-oriented business unit on profit.

Hospital should think of profit without leaving its social function to achieve the desired target. Intense competition has pushed existing hospitals inevitably mutually race to be the best, especially private hospitals in big cities.

In terms of publications, it used to be very rare to find a hospital that did promotion in the mass media. Now, major hospitals in and several hospitals other private sector in the provincial capital really memam-faatkan print media, radio and television as a means of promotion of the hospital. This is done with the aim that the House pain is better known and also to net patients. Hospital infrastructure and facilities and advances in medical science needs to be explained to the public, given competition for medical services is getting tougher.

Of the overall activities undertaken by a hospital in the end will come down to the value that will be given by the patient regarding the satisfaction felt. Customer satisfaction is one of the keys to the success of a business because every company lives off its customers. Therefore customer satisfaction must be made a priority of every company including hospitals as service providers health services. Because satisfaction is an important factor eat many studies done to measure customer satisfaction, so many definitions of satisfaction customers. Kotler (2001:188) states that satisfaction is the feeling of patients after compare perceived performance (ce) with what is expected of the product. In line with what Kotler expressed, then Pascoe (in Rommy Krisna, 2002:27) states that patient satisfaction is the difference between patient expectations of health care with performance felt. This process is known as the contrast model where when the product performance (goods/services) is much lower than the expectations of the patient will be dissatisfied. Conversely, if the performance of the product as expected, the patient will be satisfied.

According Boediarso (in Rommy Krisna 2002:28) patient satisfaction is a circumstances of partial or complete fulfillment of the desired expectations of a desired service. Lucas (2012: 363) argues that satisfaction is the main factor for many customers to remain loyal. This theory can be interpreted that patient satisfaction is the first key to making patients become loyal or loyal to continue to use the services offered by the hospital. Patient satisfaction lies to how a hospital provides maximum and differentiated services from competitors in mem-provide services or service to patients according to what expected.

Based on the description above, it can be concluded that patient satisfaction is a feeling of pleasure or disappointment felt by patients to service received from the hospital.

According to Griffith (in Raf Mulyadi, 1998:27) there are several aspects of feelings of satisfaction on individuals, namely: (a) the attitude of the staff approach to the patient is the attitude of staff to the patient when first came to the hospital; (b) the quality of care received by patient that is what has been done by the service provider to the patient, as far as where services provided related to the healing process of disease suffered by the patient and the continuity of patient care while in the hospital; (c) Administrative procedures relating to the administration of patients began to enter hospital, during treatment, until discharge from the hospital; (d) Time waiting is related to the time allowed to visit and to keep the family or other relatives with attention to the waiting room that meet hospital standards that have been set, among others : the waiting room comfortable, quiet, and adequate facilities; (e) other public facilities yaitua services to meet the needs of patients such as food, beverages, privacy and visits; (f) inpatient room facilities that must be treated. In-room facilities are provided based on the patient's request regarding the desired inpatient room; (g) the results treatment or treatment results related to the healing of the patient's disease either in the form of the results of medical examinations, operations, and visits by doctors and nurses. Level satisfaction between individuals is different, this happens because there is the influence of other factors

such as position, age, social position, economic level, education, gender, mental attitude and personality (Endar Sugiarto, 1995:125).

While Lele (in Yazid, 1999: 37) mention aspects of patient satisfaction, (A) the product. Products are everything either in the form of goods or services can be purchased, enjoyed and used and that can satisfy the needs. Products what patients are looking for from a hospital is what can solve the problem patients related to health, such as the results of consulting doctors, drugs, results

laboratory examination and so on; (b) process. The process is an activity that occurs during the purchase or use of a product takes place. How is the process the walk includes attitudes, actions and exercises for officers in mastering their duties, how officers communicate and interact with patients and how the officer takes care of the Patient; (c) after purchase. After purchase is an activity occurs after purchase. In this study, after-purchase is how the service support provided to patients, including: information, warranty, advice, warnings, exercise, feedback and response to complaints; (d) culture. Culture is everything from the attitude and views of employees in behavior that must be in accordance with the objectives company. In this study, culture is how management applies that patient satisfaction is the main goal is not just a promise but already reflected in the attitude of all employees in treating patients.

Furthermore, according to Tjiptono (2003:160), although there is no consensus regarding how to measure patient satisfaction, a number of studies explain that there are three things important that need to be examined in order to measure job satisfaction, namely: (a) satisfaction general or overall, the perceived satisfaction with the overall product both goods and services received by the Patient; (b) confirmation of expectations, namely level of conformity between performance and expectations; (c) comparison with the ideal situation, that is, the performance of the product compared to the ideal product according to the patient's perception. In research these aspects of patient satisfaction that is used are aspects of patient satisfaction based on the opinions expressed by Lele (in Yazid, 1999: 37) consisting of products, processes, products and culture.

According to Irawan (2004: 37) factors that can affect patient satisfaction are: (a) the quality of the product, the patient will be satisfied if after using the product or health care but apparently get the desired results; (b) The Price, for sensitive patients usually a low price is a source of patient satisfaction; (c) Quality of service, satisfaction with the quality of Service is usually difficult to imitate. Quality service is a driver who has many dimensions, one of the popular is SERVQUAL; (d) emotional factors, patients will feel satisfied because there is value emotional provided by the hospital such ease. The patient will feel the more satisfied when it gets easy, comfortable and efficient in getting health services from the hospital.

Of several factors that affect patient satisfaction as mentioned above, in this study as a factor affecting patient satisfaction is quality of Service. Quality of Service is an important factor in business hospital. Rampant prosecution of patients against alleged malpractice of doctors and homes

pain originated from patient dissatisfaction with hospital services, namely related with the quality of medical measures received by the patient.

Raf Mulyadi, (1998:12) perceive quality as a condition related with products, services, people, processes and environments that meet expectations. Meanwhile Kotler (2000:72) defines quality as a whole characteristic and the nature of a product or service that affects its ability to satisfying the implied needs. Through the above understanding seen that a hospital services are considered quality if they can meet patient expectations.

Parasuraman et al (1998:46-61) states that the quality of Service is a function of customer expectations in pre-purchase, in the process of providing quality received and on the quality of the output received. Quality should start from customer needs and ending in customer perception (Kotler, 1997). that a good quality image is not based on the point of view or perception of the hospital, but based on the point of view or perception of the patient. Service quality is influenced by two variables, namely perceived services (perceived service) and services expected (expected service). If the perceived services are smaller than expected, the patients became uninterested in the hospital concerned. Whereas if the opposite is true (perceived > expected), there the possibility of patients will use the hospital again (Rangkuti, 2002:41).

In the context of services, customer satisfaction is often associated with quality factors services such as convenience, competitiveness and location provided service providers. Customer satisfaction often depends on product quality or services offered, (Sasono, 2006:305-320). From the description above then it can be concluded that the quality of Service is the extent to which the ability of Service the company can meet customer expectations.

One approach to quality of Service is very popular and until now many used as a reference in marketing research is a model of Service Quality presented by Parasuraman, Zeithaml and Berry (1996). Parasuraman identify five aspects of service quality, namely: (a) direct evidence (Tangibles), namely includes the appearance of physical facilities such as buildings and front office space, availability of parking, cleanliness, neatness and comfort of the room, completeness communication equipment and appearance of employees; (b) reliability (Reliability), namely ability to provide appropriate service promise offered accurate and reliable; (c) responsiveness (Responsiveness), IE response or alertness employees or staff in helping patients and provide fast service and response; (d) Guarantee (Assurance), which includes the ability of employees to knowledge to the product accurately, hospitality, attention and courtesy in provide services, skills in providing information, ability in provide security in utilizing the services offered and capabilities in instilling patient confidence in the hospital; (e) empathy (empathy), namely the individual attention given to the hospital patient such as ease to contact the hospital, the ability of employees to communicate to patients and efforts by the hospital to understand the desire requirements and needs of the patient.

Other opinions on aspects of service quality expressed by Sunarto (2003:244), which identifies seven basic aspects of service quality, namely: (a) Performance, namely the absolute level of performance of goods or services on key attributes identified by the Patient; (b) employee interaction, such as friendliness, respectful attitude, empathy shown by the individual delivering the goods or services; (c) reliability, namely the consistency of the performance of goods, services and stores; (d) durability, namely vulnerable life products and general strength; (e) timeliness and convenience, that is, how quickly products delivered or repaired, how quickly information products or services are provided; (f) aesthetic, IE more on the physical appearance of goods or hospitals and attractiveness presentation of services; (g) brand awareness, i.e. additional positive or negative impact on visible quality, which recognizes the brand or name of the hospital for patient evaluation.

In this study, the aspects of service quality used are ASP pelayananan quality according to the theory Parasuraman, Zeithaml and Berry (1998), namely: Tangibles, Reliability, Responsiveness, Assurance, and empathy.

Vision of hospital (RSHJ) is to become a hospital reliable and always there in the heart and its mission is to provide services professionals with all humanity, Mem-provide excellent service with dynamic young spirit, honest and sincere, harmonious cooperation,

useful and a pride for all parties concerned. Vision and mission of RSHJ this is clearly oriented to the quality of service that can create patient satisfaction. RSHJ is basically the same as other companies that expect to can continue to increase income earned from selling health services for patients, so it is very important for the hospital to continue to improve loyalty of patients to want to seek treatment again even better if the patient can be a free promotion for the hospital by telling the quality of Service received to others. The increase in the number of patients can be interpreted as increased income for the hospital. But so far the results achieved are still not in accordance with what is expected by the hospital.

Based on empirical data obtained from RSHJ before the study it is known that the growth of the number of patients in outpatient treatment RSHJ unstable where from 2012 to 2013 there was an increase of 12.97%. While in 2014 it decreased by 2.51 % from 2013 as seen in Table 1 below.

Table 1. Outpatient Data RSHJ 2012 s/d 2014

MONTH / YEAR	2012	2013	2014
January	2150	2234	2428
February	1900	2468	2572
March	2006	2662	2209
April	1967	2238	1917
May	3641	2505	2036
June	1887	2298	2004
July	1782	1962	2392
August	1602	2037	2089
September	1718	2259	1869
October	1740	2214	1878
November	1734	2218	2334
December	1953	2109	2793
TOTAL	24080	27204	26521
Average/month	2007	2267	2210
Increase/year		12.97%	-2.51%

Other information obtained is that the average usage of the room for inpatients are 40% of the maximum room provided by RSHJ. Data inpatients obtained showed a very large increase in 2013 compared to 2012 amounted to 76.35 % but in 2014 there was a decrease of 12.58% as seen in Table 2 below.

Table 2. Inpatient data RSHJ 2012 s/d 2014

MONTH / YEAR	2012	2013	2014
January	86	137	176
February	78	132	162
March	76	160	163
April	82	160	124
May	81	158	168
June	86	128	134
July	77	126	92
August	75	121	84
September	73	138	92
October	75	142	80
November	68	135	108
December	103	156	97
TOTAL	960	1693	1480
Average/Month	80	141	123
Increase/Year		76.35%	-12.58%

RSHJ patient Data from January to May 2015 also showed unstable growth and tends to decrease the number of patients such as which is shown in Table 3 below.

Table 3. RSHJ patient Data for January to May 2015

Month	outpatient	Improvement	inpatient	Improvement
January	3010	-	126	-
February	3107	3.22%	206	63.49%
March	2623	15.58%	191	-7.28%
April	2294	12.54%	190	-0.52%
May	2119	-7.63%	199	4.74%

RSHJ desire to realize its vision and mission and raise the level of accreditation of the House pain should be followed by the growth of patients who continue to increase, but until now it is still not as expected. View existing patient conditions and data, then the author was interested in analyzing the quality of service in relationship with patient satisfaction in RSHJ in order to be a reference for RSHJ management in making policies for the development of the hospital.

RESEARCH METHODS

Population and sample. Subjects in this study were patients Husada Hospital is treated in polyclinics and is an unlimited population because the overall number of patients is not fixed. Number of samples used in the study this is as many as 100 people.

Data collection techniques and instrument development. Data retrieval techniques the technique used is accidental sampling. In this research method used is the scale method. The scale used in this study is the scale service quality and patient satisfaction scale. First. Service quality scale constructed itself by the author with reference to the model of Service Quality presented by Parasuraman, Zeithaml and Berry (1996). Parasuraman five aspects of service quality, namely: direct evidence (tangibles), reliability (reliability), Responsiveness, assurance, empathy. This scale a total of 20 items consisting of 10 favorable items and 10 unfavorable items. Second. Patient satisfaction scale used in this study was constructed by author by using the Likert scale model with reference to aspects patient satisfaction expressed by Lele (in Yazid, 1999:37), namely: product, process, after-purchase and culture. This scale amounted to 16 items consisting of 8 items favorite and 8 unfavorable items.

Validity. Technically this analysis is done by using SPSS program (Statistics Program for Scale Science) version 21.0 for windows. The results of the test items on the scale quality consisting of 20 items indicates that all of these items valid. The results of the item test on the patient satisfaction scale consisting of 16 items showed 4 fall items and 12 valid items.

Reliability. In this study using computer engineering SPSS version 21.0 for windows uses cronbach's alpha formula to perform reliability tests. Reliability test results on the scale of service quality obtained by alpha 0.921 it can be said that the scale is reliable. Reliability test results on

patient satisfaction scale obtained by 0.900 alpha so it can be said that the scale is reliable.

Data Analysis Techniques. Data analysis techniques used are Regression Analysis Linear to determine whether or not the influence of service quality on satisfaction patients. To facilitate

the calculation then used the program SPSS (Statistics Program for Scale Science) for windows version 21.0.

RESULTS AND DISCUSSION

The sample of this study were patients hospital which amounted to 100 people. The general description of the research sample is as below.

Table 4. Overview Of Respondents By Type Of Care

No	Types Of Rawat	Amount	Persentase
1	Outpatient	87	87 %
2	Inpatient	13	13 %

The table above shows that the majority of patients at hospital are outpatient.

Table 5. Description Of Respondents By Gender

No	Gender	Amount	Persentase
1	Men	36	36%
2	Girls	64	64%

The table above shows that the percentage of patients with female gender more than male patients, this may be due to women are more concerned about their health than men.

Table 6. Description Of Respondents By Age

No	Age	Amount	Percentage
1	17-30	34	34%
2	>30-40	29	29%
3	>40-50	18	18%
4	>50-60	15	15%
5	>60	4	4%

The table above shows that the percentage of patients by age looks pursued, where the older the age of fewer patients who seek treatment in Husada Hospital .

Table 7. Description Of Respondents By Occupation

No	Jobs	Amount	Percentage
1	Student	0	0%
2	Private Employees	43	43%
3	Self-employed	20	20%
4	PNS	10	10%
5	TNI/POLRI	2	2%
6	BUMN	4	4%
7	Does Not Work	21	21%

The table above shows that patients who seek treatment have an occupational background which varies with the most work is as a private employee, namely as many as 43%, then patients who do not have a job as much as 21%. Based on results of interviews with several patients, most patients who seek treatment using insurance or because of a referral from the company where the patient works.

Table 8. Description Of Respondents By Education

No	Education	Amount	Percentage
1	SD	1	1%
2	SMP	8	8%
3	SMA	39	39%
4	AKADEMI	13	13%
5	S1	35	35%
6	S2	4	4%

The table above shows that patients who seek treatment have a background high school and S1 education has a high percentage of 39% High School and 35% S1. Based on interviews with several patients, this is because most patients who perform the examination was referred by the company or the patient's school in cooperation with Husada Hospital and most of the employees referred to the education is high school and S1.

Table 9. Respondents Based On The Number Of Visits

No	Number Of Visits	Amount	Percentage
1	First time	1	1%
2	Second time	8	8%
3	Third time	39	39%
4	More than three times	13	13%

The table above shows that the number of patients based on the number of attendance has the percentage varies and almost evenly. Based on the results of simple linear regression analysis obtained R of 0.780. Results this hypothesis test shows that service quality is positively related and

significantly with patient satisfaction of 0.780. R square value of 0.609 means role or contribution of service quality variables are able to explain the variable satisfaction patients by 60.9%. This is supported by a probability value of 0.000 ($p < 0.05$), this means that the hypothesis is accepted. This means that the better the quality of service then will be followed by increased patient satisfaction at Husada Hospital . So also vice versa, namely, the lower the quality of service will be followed by low patient satisfaction at Husada Hospital .

Based on the categorization, the results obtained are as follows: (1) quality Service. Respondent Score category is more directed to the medium category. It is noticeable that 5% of respondents score is in the low category, 65% in the medium category and 30 % is in the high category. Comparison results show that the average empirical (66,31) is higher than the hypothetical average (60). This shows the quality positive value service.Comparison results empirical standard deviation (12.86974) more lower than the hypothetical standard deviation (13), meaning that respondents ' answers about the quality of service varies less. (2) Patient Satisfaction. More subject Score categories leads to the medium category. It is seen that 7% of the subject's score was on low category, 47% in the medium category and 46% are in the high category. Results comparison of the average shows that the empirical average (41.09) is higher than the average hypothetical (36). This indicates positive patient satisfaction. Comparison results empirical standard deviation (8.37275) is lower than the hypothetical standard deviation (6) which this means that respondents ' answers regarding patient satisfaction vary widely. As for percentage contribution aspects of service quality and patient satisfaction aspects can be seen in Table 10 and Table 11 below:

Table 10. Contribution to service quality

Quality Aspects Services	Contribution to quality services
<i>Tangible</i>	19%
<i>Reliability</i>	21%
<i>Responsiveness</i>	21%
<i>Assurance</i>	19%
<i>Emphaty</i>	20%
Total	100%

Results table 10 shows that aspects of service quality has a contribution which is almost evenly the percentage where there are no really low aspects or aspects that are really high, it's just that aspects of tangible and assurance has the lowest percentage when compared to other aspects is 19%. It is shows respondents ' assessment of aspects of tangible and assurance is not good when compared to other aspects.

Table. 11. Contribution to patient satisfaction

Aspects Of Patient Satisfaction	Contribution to patient satisfaction
Products	21,6 %
<i>Process</i>	26,2 %
<i>After purchase</i>	25,5 %
<i>Culture</i>	27,2 %
Total	100%

The table above shows that aspects of patient satisfaction has a contribution almost evenly percentage where there is no aspect that is really low or aspect is really high, it's just that the product aspect has the most percentage low when compared to other aspects of 21.6%. This shows the assessment respondents to the product aspect is less good when compared with other aspects.

Based on the categorization, the following results were obtained: (a) service quality. Respondent Score category is more directed to the medium category. It is seen that 5% respondents score is in the low category, 65% in the medium category and 30% are in the high category. Comparison results showed that the empirical average (66.31) higher than the hypothetical average (60). This indicates a high quality of Service (positive). Comparison results empirical standard deviation (12.86974) is lower than hypothetical standard deviation (13). (b) patient satisfaction. Subject Score category is more directed in the medium category. It is seen that 7% of the subjects ' scores were in the low category, 47% are in the medium category and 46% are in the high category. Average comparison results shows that the empirical average (41.09) is higher than the hypothetical average (36). It is shows high patient satisfaction (positive). Empirical standard deviation comparison results (8.37275) is lower than the hypothetical standard deviation (6).

CONCLUSION

As a conclusion in this study are as follows: (1) quality service has a positive and significant relationship with patient satisfaction in Husada Hospital . This means that if the

quality of Service is good then patient satisfaction will increase; (2) in this study the quality of Service and satisfaction patients are in the middle category.

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