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## THE INFLUENCE OF SERVICE QUALITY ON PATIENT SATISFACTION AT PRATAMA NUXA SKIN CLINIC IN TANGERANG CITY

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### **Abstract**

This study aims to examine the extent to which service quality influences patient satisfaction at the Pratama Nuxa Skin Clinic in Tangerang City. This study used a quantitative associative approach, involving 80 respondents determined through purposive sampling techniques. The data collection tool was a questionnaire with a Likert scale, which assesses service quality through five SERVQUAL dimensions: tangibles, reliability, responsiveness, assurance, and empathy, while also measuring patient satisfaction. Data analysis was carried out using validity and reliability tests, simple linear regression, correlation, coefficient of determination, and t-tests supported by SPSS version 27 software. The results showed that service quality had a positive and significant effect on patient satisfaction ( $t_{count} 26.817 > t_{table} 1.994$ ;  $sig. 0.000 < 0.05$ ) with a regression coefficient value of 0.957 and an  $R^2$  of 90.2%. Of the five dimensions, responsiveness and empathy were the most dominant factors influencing satisfaction. Thus, it can be concluded that increasing responsiveness of services and personal attention to patients needs to be prioritized, in addition to maintaining the quality of physical facilities and the professionalism of medical personnel.

### **Keywords:**

Service Quality, Patient Satisfaction, SERVQUAL, Aesthetic Clinic.

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## **INTRODUCTION**

The development of the healthcare industry in Indonesia is increasingly complex, driven by growing public awareness of the importance of health and appearance. The National Health Insurance (JKN) program has expanded access to healthcare services for the public, but also presents new challenges in terms of improving service quality and patient satisfaction. Amidst these conditions, the beauty clinic sector is growing rapidly in various major cities, including Tangerang. People now demand not only fast and professional service, but also personalized, comfortable service that provides a positive patient experience. This phenomenon makes service quality a key factor in maintaining patient trust and loyalty to healthcare facilities, particularly in the aesthetics sector. In a scientific context, the relationship between service quality and customer satisfaction has been widely studied using the SERVQUAL theory approach developed by (Parasuraman dkk., 1988). This model assesses service quality based on five main dimensions: tangibles, reliability, responsiveness, assurance, and empathy. Several previous studies have shown that service quality has a positive and significant influence on patient satisfaction (Kotler & Keller, 2016; Kaharudin & Anggraheni, 2024). However, the results of various studies show quite large variations, where in some studies only certain dimensions have a dominant influence, such as responsiveness and empathy (Enas, 2020); (Istiqamah dkk., 2025). These differences in results have given rise to academic debate about which dimensions play the most important role in determining patient satisfaction levels in various healthcare contexts.

This research gap arises because most previous studies have focused on public hospitals, community health centers (Puskesmas), or government healthcare facilities, while research on private aesthetic clinics remains relatively limited. This is despite the fundamental differences in the characteristics of services in beauty clinics, both in terms of patient expectations, forms of interaction, and assessments of service outcomes. Patients at beauty clinics generally demand a service experience that is not only medically effective but also enjoyable, communicative, and provides personalized attention. The lack of empirical research specifically analyzing the influence of service quality on patient satisfaction in the context of aesthetic clinics in Indonesia, particularly in satellite cities like Tangerang, raises the academic need for more in-depth and contextualized studies.

The novelty of this research lies in its effort to expand the application of the SERVQUAL model to the context of beauty clinics, a topic that has been rarely studied to date. This study combines a quantitative approach with simple linear regression analysis to measure the direct influence of service quality on patient satisfaction and identify the most dominant dimensions. Data was collected directly from active patients in the past six months, so the results reflect the actual conditions of post-pandemic services. This approach provides a new perspective on managing service quality in the aesthetics sector, where patient perceptions are influenced not only by the professionalism of medical personnel but also by emotional experiences and social interactions during the service process. Based on this background and gaps, the main objective of this study is to analyze the extent to which service quality influences patient satisfaction levels at the Nuxa Skin Clinic in Tangerang City. This study also aims to determine the dimensions of service quality that most dominantly influence patient satisfaction and provide strategic recommendations for clinic management in improving overall service quality. Academically, this study is expected to enrich the literature on health service management, particularly in the growing aesthetics sector in Indonesia, while providing practical contributions for management in developing service quality improvement strategies that focus on patient needs and perceptions.

**Table 1. Data on Mismatch of Patient Expectations regarding Clinical Services**

No	Aspects of Clinical Services	Patient Expectations	Reality in the Clinic	Forms of Nonconformity
1	Service waiting time	Fast, < 15 minutes	Waiting time can be > 30 minutes	Patients feel the service is slow
2	Attitude of medical staff	Friendly, communicative	Some medical staff lack communication	Patients feel less respected
3	Waiting room facilities	Comfortable, clean, with AC & TV available	Limited facilities, small rooms	Expectations of comfort are not met
4	Availability of medicines	Complete according to prescription	Sometimes medicines are unavailable	Patients have to look for medicines outside the clinic
5	Service costs	In accordance with initial tariff, transparent	Additional costs are not explained	Patients feel burdened
6	Registration administration	Fast, systematic	Manual process, sometimes repetitive	Patients feel inconvenienced
7	Confidentiality of medical information	Fully maintained	Some information can be overheard in the room	Patients worry about their privacy

Source: Klinik Pratama Nuxa Skin Clinic, Tangerang City (2025)

Based on supporting data from the clinic, a discrepancy was found between patient expectations and the actual service provided. Patients generally expect fast, friendly service, comfortable facilities, and transparent pricing. However, conditions on the ground still show several weaknesses, such as long waiting times, ineffective communication between medical staff, limited waiting room facilities, and the emergence of additional fees that are not fully explained. This discrepancy has resulted in decreased satisfaction levels, with patients feeling that the service is suboptimal, receiving insufficient personal attention, and some even experiencing difficulty obtaining medications that should be available at the clinic.

**Table 2. Unstable Patient Visit Rate Data**

No	Month (2025)	Number of Patient Visits	Clinic Expectations	Reality in the Field	Impact
1	January	120	Stable/increasing	Visits were relatively high after early-year promotions	Clinic optimistic about improving services
2	February	95	Stable	Decrease due to long holidays & weather factors	Decline in monthly revenue
3	March	110	Increasing	Increase after discount programs	New patients begin to grow
4	April	85	Stable	Decrease as many patients return home for Eid holidays	Drastic drop in visits
5	May	105	Stable	Visits increase again after holidays	Clinic begins to recover
6	June	90	Stable	Fluctuations due to competition with other clinics	Patient loyalty declines

Source: Klinik Pratama Nuxa Skin Clinic, Tangerang City (2025)

Based on supporting data from the clinic, it is known that patient visitation rates continue to fluctuate significantly each month. During certain periods, patient visits increase, for example, following promotions or service discounts. However, during other months, patient numbers actually decrease, particularly when external factors such as the holiday season, weather, or competition from new clinics in the surrounding area occur.

**Table 3. Unknown Data on the Most Dominant Dimensions of Service Quality**

No	Service Quality Dimension (SERVQUAL)	Patient Expectations	Actual Condition at the Clinic	Problems / Gaps
1	Tangibles (Physical Evidence)	Modern, clean, and comfortable facilities.	The clinic already has a waiting room and fairly good equipment, but the capacity is limited.	Patients still feel that the waiting room is not comfortable enough.
2	Reliability	Services delivered as promised and on time.	Schedules are sometimes delayed due to doctor lateness.	This reduces patient trust.
3	Responsiveness	Fast service and responsive to complaints.	Some staff respond slowly to queues or patient questions.	Patients feel ignored.
4	Assurance	Competent and friendly doctors who create a sense of safety.	Some medical staff are already licensed, but communication and interaction are still not very effective.	Patients feel less confident in the service.
5	Empathy	Personal attention and concern for patient needs.	Staff tend to focus on standard procedures with limited personalization.	Patients feel less cared for.

Source: Klinik Pratama Nuxa Skin Clinic, Tangerang City (2025)

Based on supporting data from the clinic, it is known that the services provided encompass various dimensions of quality, such as tangibles, reliability, responsiveness, assurance, and empathy. Patients generally expect modern and comfortable facilities, consistent and timely service, prompt responses to complaints, guaranteed medical safety, and personalized attention from healthcare professionals. However, actual conditions indicate that gaps persist in each dimension. For example, limited patient waiting rooms, medical staff delays in scheduled appointments, slow responses to complaints, and interactions between medical staff that are not fully communicative and empathetic.

## **METHODS**

This study uses a quantitative approach with an associative approach, which aims to determine the relationship and influence between two or more variables. The quantitative approach was chosen because it provides an objective and measurable picture of the relationship between service quality and patient satisfaction at the Nuxa Skin Clinic in Tangerang City. This approach also allows researchers to statistically test hypotheses based on numerical data obtained from respondents. The types of data used in this study include primary and secondary data

(Ardiyani dkk., 2023). Primary data was obtained directly from respondents through questionnaires distributed to active patients at the Nuxa Skin Clinic. The questionnaire was structured using a five-point Likert scale, ranging from 1 (strongly disagree) to 5 (strongly agree), to measure patient perceptions of service quality and their level of satisfaction. Meanwhile, secondary data was collected from various sources, such as internal clinic documents, patient visit reports, academic literature, and relevant previous research. This combination of primary and secondary data is expected to provide a comprehensive understanding of the phenomenon under study.

The population in this study was all patients at the Nuxa Skin Clinic, totaling approximately 100. From this number, the researcher determined a sample size of 80 respondents using the Slovin formula with a 5 percent margin of error. The sampling technique used was purposive sampling, which selects respondents based on specific criteria aligned with the research objectives (Amin dkk., 2023). The criteria in question are patients who have used clinic services in the past six months and are willing to provide honest and complete answers when filling out the questionnaire. The research instrument used was a questionnaire compiled based on the SERVQUAL model developed by Parasuraman, Zeithaml, and Berry (1988). Service quality variables were measured through five dimensions: tangibles, reliability, responsiveness, assurance, and empathy. The tangible dimension covers facilities, room comfort, and clinic cleanliness; the reliability dimension measures the consistency of service as promised; the responsiveness dimension assesses the speed and alertness of staff in assisting patients; the assurance dimension focuses on the competence of medical personnel and the patient's sense of security; and the empathy dimension measures the extent to which staff demonstrate personal attention and concern for patients. Meanwhile, patient satisfaction variables were measured through indicators of conformity to expectations, intention to revisit, willingness to recommend, perceptions of cost, and assessment of overall service quality (Apriani & Nurcahyo, 2021).

The collected data were then analyzed using Statistical Package for the Social Sciences (SPSS) version 27 software. The analysis stages included validity and reliability tests to ensure the accuracy and consistency of the research instruments, followed by a simple linear regression analysis to determine the effect of service quality on patient satisfaction. In addition, a correlation coefficient test was also conducted to see the strength of the relationship between variables, a determination coefficient test ( $R^2$ ) to measure how much the independent variable contributes to the dependent variable, and a t-test to test the significance of the variable's influence partially at a 5 percent significance level (Arya dkk., 2020). All analysis results were interpreted descriptively and linked to theory and previous research findings to achieve in-depth and academically relevant understanding. Through this approach, the research is expected to provide empirical evidence regarding the influence of service quality on patient satisfaction, while also providing a basis for the management of the Pratama Nuxa Skin Clinic to continuously improve service quality.

## **RESULT AND DISCUSSION**

This research was conducted at the Pratama Nuxa Skin Clinic, one of the business units of PT Nusa Indoderma Medika, which is a legal entity and operates in the field of skin care and beauty services. This company is not a political institution or non-governmental organization, so it is suitable to be used as a research object.

### Picture Organizational structure



The organizational structure of the Nuxa Skin Clinic Tangerang City Branch was established to create an efficient and coordinated work system. The President Director is responsible for all operations, vision, and mission of the clinic. Under him, the Operations and Finance Manager manages operational activities, human resources, and finances, as well as ensuring service quality. This structure is divided into two main divisions: the Medical Division and the Non-Medical Division. The Medical Division consists of doctors, who handle diagnoses, medical procedures, and patient education, and beauticians or beauty nurses, who assist with the treatment process and ensure patient comfort. Meanwhile, the Non-Medical Division includes administration, who manages patient data and schedules; receptionists, who welcome and serve patients; marketing & digital, who promote the clinic's services through various media; and office support staff, who maintain cleanliness and assist with technical needs in the work environment.

#### Characteristics Based on Gender

Based on the results of a study conducted on 80 respondents using a questionnaire, the following characteristics were obtained:

**Tabel Distribusi Frekuensi Karakteristik Jenis Kelamin**

Category	Amount	Percentage (%)
Man	30	37,5
Woman	50	62,5
<b>Jumlah</b>	<b>80</b>	<b>100</b>

Source: Primary Data, 2025

The table shows that the majority of respondents were female, comprising 50 respondents, or 62.5% of the total. Meanwhile, 30 respondents were male, or 37.5%. This indicates that the majority of users of Nuxa Skin Clinic's services are female, who tend to be more concerned with skincare and beauty.

### Characteristics by Age

**Table of Age Characteristics Frequency Distribution**

No	Category	Amount	Percentage%
1	≤20	8	10
2	20-30	43	53,8
3	31-40	25	31,3
4	40 ≥	4	5
<b>Amount</b>		<b>80</b>	<b>100</b>

Source: Primary Data, 2025

The table shows that respondents aged 20–30 years dominated, accounting for 43 (53.8%). This was followed by respondents aged 31–40 years, with 25 (31.3%). Eight (10%) were under 20, and four (5%) were over 40. This indicates that the productive age group and young adults constitute the primary patient segment at this clinic.

### Characteristics Based on Occupation

**Frequency Distribution Of Job Characteristics**

No	Category	Amount	Percentage%
1	Students	10	12,5
2	Self-employed	19	23,8
3	Private employees	38	47,5
4	Housewife	13	16,3
<b>Amount</b>		<b>80</b>	<b>100</b>

Source: Primary Data, 2025

The table shows that the majority of respondents were private employees (38 people) (47.5%), followed by self-employed (19 people) (23.8%), students (10 people) (12.5%), and housewives (13 people) (16.3%). From this data, it can be concluded that the majority of respondents have jobs that financially enable them to undergo regular beauty treatments.

### Characteristics Based on Frequency of Visits

**Table Of Frequency Distribution of Visit Purpose Characteristics**

No	Category	Amount	Percentage%
1	Skin Consultation	32	40
2	Facial Care	36	62,5
3	Product Purchases	4	7,5
4	Body Care	5	8,8
5	<i>Body Massage</i>	3	7,5
<b>Amount</b>		<b>80</b>	<b>100</b>

Source: Primary Data, 2025

Based on the data in the table, it is known that the primary purpose of patient visits to the Nuxa Skin Clinic was for facial treatments, with 36 patients (62.5%). Furthermore, 32 patients (40%) sought skin consultations, 4 (7.5%) purchased skincare products, 5 (8.8%) sought body treatments, and 3 (7.5%) received body massages. These results indicate that facial treatments are the most popular service, making them the primary focus of service activities at the Nuxa Skin Clinic.

### Characteristics Based on Length of Patient Experience

**Table Of Frequency Distribution of Characteristics of Length of Patient Experience**

No	Category	Amount	Percentage%
1	≤ 3 months	15	18,8
2	3-6 months	50	62,5
3	≥ 6 months	15	18,8
<b>Amount</b>		<b>80</b>	<b>100</b>

Source: Primary Data, 2025

The table shows that the majority of respondents (50 respondents, or 62.5%) have been patients at the Nuxa Skin Clinic for 3 to 6 months. Furthermore, 15 respondents (18.8%) have been patients for less than or equal to 3 months. Meanwhile, 15 respondents (18.8%) have been patients for more than 6 months. This indicates that most patients have sufficient experience receiving services from the clinic to provide an objective assessment of the quality of care they receive.

### Data Testing

#### 1. Validity Test

**Table Results of Validity Test of Variable X (Service Quality)**

		Correlations										
		X1	X2	X3	X4	X5	X6	X7	X8	X9	X10	Kualitas
X1	Pearson Correlation	1	,620**	,777**	,769**	,670**	,712**	,678**	,715**	,504**	,651**	,856**
	Sig. (2-tailed)		,000	,000	,000	,000	,000	,000	,000	,000	,000	,000
	N	80	80	80	80	80	80	80	80	80	80	80
X2	Pearson Correlation	,620**	1	,654**	,619**	,692**	,607**	,706**	,711**	,577**	,553**	,823**
	Sig. (2-tailed)	,000		,000	,000	,000	,000	,000	,000	,000	,000	,000
	N	80	80	80	80	80	80	80	80	80	80	80
X3	Pearson Correlation	,777**	,654**	1	,722**	,688**	,731**	,725**	,792**	,634**	,592**	,883**
	Sig. (2-tailed)	,000	,000		,000	,000	,000	,000	,000	,000	,000	,000
	N	80	80	80	80	80	80	80	80	80	80	80
X4	Pearson Correlation	,769**	,619**	,722**	1	,633**	,677**	,632**	,724**	,630**	,559**	,840**
	Sig. (2-tailed)	,000	,000	,000		,000	,000	,000	,000	,000	,000	,000
	N	80	80	80	80	80	80	80	80	80	80	80
X5	Pearson Correlation	,670**	,692**	,688**	,633**	1	,648**	,668**	,695**	,544**	,615**	,831**
	Sig. (2-tailed)	,000	,000	,000	,000		,000	,000	,000	,000	,000	,000
	N	80	80	80	80	80	80	80	80	80	80	80
X6	Pearson Correlation	,712**	,607**	,731**	,677**	,648**	1	,663**	,654**	,533**	,567**	,823**
	Sig. (2-tailed)	,000	,000	,000	,000	,000		,000	,000	,000	,000	,000

N	80	80	80	80	80	80	80	80	80	80	80
X7 Pearson Correlation	,678**	,706**	,725**	,632**	,668**	,663**	1	,716**	,585**	,587**	,846**
Sig. (2-tailed)	,000	,000	,000	,000	,000	,000		,000	,000	,000	,000
N	80	80	80	80	80	80	80	80	80	80	80
X8 Pearson Correlation	,715**	,711**	,792**	,724**	,695**	,654**	,716**	1	,591**	,538**	,865**
Sig. (2-tailed)	,000	,000	,000	,000	,000	,000	,000		,000	,000	,000
N	80	80	80	80	80	80	80	80	80	80	80
X9 Pearson Correlation	,504**	,577**	,634**	,630**	,544**	,533**	,585**	,591**	1	,567**	,743**
Sig. (2-tailed)	,000	,000	,000	,000	,000	,000	,000	,000		,000	,000
N	80	80	80	80	80	80	80	80	80	80	80
X10 Pearson Correlation	,651**	,553**	,592**	,559**	,615**	,567**	,587**	,538**	,567**	1	,751**
Sig. (2-tailed)	,000	,000	,000	,000	,000	,000	,000	,000	,000		,000
N	80	80	80	80	80	80	80	80	80	80	80
Kualitas Pearson Correlation	,856**	,823**	,883**	,840**	,831**	,823**	,846**	,865**	,743**	,751**	1
Sig. (2-tailed)	,000	,000	,000	,000	,000	,000	,000	,000	,000	,000	
N	80	80	80	80	80	80	80	80	80	80	80

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

Source: Data processed with SPSS 27

### Table Results of the Validity Test of the Research Instrument Variable (X)

Source: Primary Data, 2025

No.	Pertanyaan ke	R Hitung	R Table	Sig	Keterangan
1	1	0,856	0,219	<.000	Valid / Signifikan
2	2	0,823	0,219	<.000	Valid / Signifikan
3	3	0,883	0,219	<.000	Valid / Signifikan
4	4	0,840	0,219	<.000	Valid / Signifikan
5	5	0,831	0,219	<.000	Valid / Signifikan
6	6	0,823	0,219	<.000	Valid / Signifikan
7	7	0,846	0,219	<.000	Valid / Signifikan
8	8	0,865	0,219	<.000	Valid / Signifikan
9	9	0,743	0,219	<.000	Valid / Signifikan
10	10	0,751	0,219	<.000	Valid / Signifikan

In testing the validity of the Service Quality variable (X), each statement item was correlated with the total score of the variable (item-total correction). Based on the results of the analysis using Pearson Correlation, all items, namely X1 to X10, had a correlation value greater than the r table, namely 0.219 (for N = 40 and a significance level of 5%). The highest correlation value was found

in item X8 at 0.865, while the lowest was 0.743, which still exceeded the validity limit. All significance values were also below 0.05, indicating that the relationship between the items and the total score was significant. Thus, it can be concluded that all items in the patient quality variable were declared valid and can be used in further research.

**Table Results of the Validity Test of Variable Y (Patient Satisfaction)**

		Correlations										
		Y1	Y2	Y3	Y4	Y5	Y6	Y7	Y8	Y9	Y10	Kepuasa
Y1	Pearson Correlation	1	,649**	,692**	,670**	,613**	,716**	,576**	,595**	,534**	,478**	,616**
	Sig. (2-tailed)		,000	,000	,000	,000	,000	,000	,000	,000	,000	,000
	N	80	80	80	80	80	80	80	80	80	80	80
Y2	Pearson Correlation	,649**	1	,611**	,527**	,531**	,641**	,719**	,681**	,519**	,627**	,597**
	Sig. (2-tailed)	,000		,000	,000	,000	,000	,000	,000	,000	,000	,000
	N	80	80	80	80	80	80	80	80	80	80	80
Y3	Pearson Correlation	,692**	,611**	1	,620**	,532**	,582**	,576**	,655**	,416**	,467**	,587**
	Sig. (2-tailed)	,000	,000		,000	,000	,000	,000	,000	,000	,000	,000
	N	80	80	80	80	80	80	80	80	80	80	80
Y4	Pearson Correlation	,670**	,527**	,620**	1	,638**	,633**	,518**	,615**	,574**	,415**	,560**
	Sig. (2-tailed)	,000	,000	,000		,000	,000	,000	,000	,000	,000	,000
	N	80	80	80	80	80	80	80	80	80	80	80
Y5	Pearson Correlation	,613**	,531**	,532**	,638**	1	,557**	,520**	,557**	,568**	,501**	,616**
	Sig. (2-tailed)	,000	,000	,000	,000		,000	,000	,000	,000	,000	,000
	N	80	80	80	80	80	80	80	80	80	80	80
Y6	Pearson Correlation	,716**	,641**	,582**	,633**	,557**	1	,577**	,621**	,541**	,479**	,626**
	Sig. (2-tailed)	,000	,000	,000	,000	,000		,000	,000	,000	,000	,000
	N	80	80	80	80	80	80	80	80	80	80	80
Y7	Pearson Correlation	,576**	,719**	,576**	,518**	,520**	,577**	1	,595**	,520**	,562**	,522**
	Sig. (2-tailed)	,000	,000	,000	,000	,000	,000		,000	,000	,000	,000
	N	80	80	80	80	80	80	80	80	80	80	80
Y8	Pearson Correlation	,595**	,681**	,655**	,615**	,557**	,621**	,595**	1	,667**	,659**	,723**
	Sig. (2-tailed)	,000	,000	,000	,000	,000	,000	,000		,000	,000	,000
	N	80	80	80	80	80	80	80	80	80	80	80
Y9	Pearson Correlation	,534**	,519**	,416**	,574**	,568**	,541**	,520**	,667**	1	,572**	,600**
	Sig. (2-tailed)	,000	,000	,000	,000	,000	,000	,000	,000		,000	,000
	N	80	80	80	80	80	80	80	80	80	80	80
Y10	Pearson Correlation	,478**	,627**	,467**	,415**	,501**	,479**	,562**	,659**	,572**	1	,719**
	Sig. (2-tailed)	,000	,000	,000	,000	,000	,000	,000	,000	,000		,000
	N	80	80	80	80	80	80	80	80	80	80	80
Kepuasan	Pearson Correlation	,616**	,597**	,587**	,560**	,616**	,626**	,522**	,723**	,600**	,719**	1
	Sig. (2-tailed)	,000	,000	,000	,000	,000	,000	,000	,000	,000	,000	
	N	80	80	80	80	80	80	80	80	80	80	80

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

Source: Data processed with SPSS 27

**Table Results of the Validity Test of the Research Instrument Variable (Y)**

No.	Question to	R Count	R Table	Sig	Information
1	1	0,616	0,219	<.000	Valid / Signifikan
2	2	0,597	0,219	<.000	Valid / Signifikan
3	3	0,587	0,219	<.000	Valid / Signifikan
4	4	0,560	0,219	<.000	Valid / Signifikan
5	5	0,616	0,219	<.000	Valid / Signifikan
6	6	0,626	0,219	<.000	Valid / Signifikan
7	7	0,522	0,219	<.000	Valid / Signifikan
8	8	0,723	0,219	<.000	Valid / Signifikan
9	9	0,600	0,219	<.000	Valid / Signifikan
10	10	0,719	0,219	<.000	Valid / Signifikan

Source: Primary Data, 2025

Based on the data processing results, for the Patient Satisfaction variable (Y), validity testing was conducted on five items (Y1–Y5). The analysis results showed that all items had correlation values exceeding the r table of 0.219, with the highest correlation value of 0.719 (Y10) and the lowest of 0.522 (Y7). In addition, all significance values also showed significant results ( $p < 0.05$ ), which means that each item has a strong relationship with the total satisfaction score. Therefore, all statements in this variable can be declared valid, and are worthy of proceeding to the next stage of reliability testing and inferential analysis.

## 2. Reability Test

**Table Results of Validity and Reliability Test of Variable X (Service Quality)**

Reliability Statistics		
	Cronbach's Alpha	N of Items
Cas	,948	10
Excluded		0
Total		80

a. Listwise deletion based on all variables in the procedure.

Source: Data processed with SPSS 27

Based on the data processing results, it was found that the Service Quality variable (X) had a Cronbach's Alpha value of 0.948. This value indicates that the instrument used to measure service quality is reliable, as it is above the established minimum threshold.

**Table Results of Validity and Reliability Test of Variable Y (Patient Satisfaction)**

**Case Processing Summary**

		N	%
Cases	Valid	80	100,0
	Excluded <sup>a</sup>	0	,0
	Total	80	100,0

a. Listwise deletion based on all variables in the procedure.

**Reliability Statistics**

Cronbach's Alpha	N of Items
,933	10

Source: Data processed with SPSS 27

Based on the data processing results, it was found that the Patient Satisfaction variable (Y) had a Cronbach's Alpha value of 0.933. This value also indicates that the patient satisfaction instrument has good internal consistency and can therefore be categorized as reliable.

**3. Simple Linear Regression Test**

**Table Simple Linear Regression Test Results**

**Model Summary**

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	,950 <sup>a</sup>	,902	,901	3,075

a. Predictors: (Constant), Kualitas Pelayanan

**Coefficients<sup>a</sup>**

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	,449	,889		,505	,615
	Kualitas Pelayanan	,957	,036	,950	26,817	<,001

a. Dependent Variable: Kepuasan Pasien

The data analysis results showed a correlation value (R) of 0.950. This resulted in a coefficient of determination (R<sup>2</sup>) of 0.902. This means that the independent variable, service quality, contributed 90.2% to the dependent variable, patient satisfaction.

#### 4. Correlation Coefficient Test

**Table Correlation Coefficient Test Results**

		Kualitas Pelayanan	Kepuasan Pasien
Kualitas Pelayanan	Pearson Correlation	1	,950**
	Sig. (2-tailed)		<,001
	N	80	80
Kepuasan Pasien	Pearson Correlation	,950**	1
	Sig. (2-tailed)	<,001	
	N	80	80

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

Sumber :

Source: Data processed with SPSS 27

The data processing results show that the correlation coefficient for the Service Quality variable is 0.950. Based on correlation interpretation guidelines, this value is in the range of 0.80–1.00, thus indicating a very strong relationship between Service Quality and Patient Satisfaction.

#### 5. Coefficient of Determination Test (Partial)

**Table Simple Linear Regression Test Results**

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	,950 <sup>a</sup>	,902	,901	3,07546

a. Predictors: (Constant), Kualitas Pelayanan

Source: Data processed with SPSS 27

Based on the results of data processing, it is known that the R Square value is 0.902 or 90.2%, which means that variable X (Service Quality) has a strong influence on Patient Satisfaction (Y) of 0.902 or 90.2%.

#### 6. Hypothesis Test (T-Test)

**Table Hypothesis Test Results (T-Test)**

Coefficients <sup>a</sup>						
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	,449	,889		,505	,615
	Kualitas Pelayanan	,957	,036	,950	26,817	<,001

a. Dependent Variable: Kepuasan Pasien

Source: Data processed with SPSS 27

Based on the results of the partial t-test, it was obtained that the significance value of the influence of service quality (X) on patient satisfaction (Y) was 0.001, which is smaller than 0.05. In addition, the calculated t value of 26.817 is greater than the t table of 1.994. This indicates that Ho is rejected and Ha is accepted, so it can be concluded that service quality has a significant effect on patient satisfaction.

## 7. Simultaneous Test (F TEST)

**Table Simultaneous Test Results (F Test)**

**ANOVA<sup>a</sup>**

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	6801,793	1	6801,793	719,125	<,001 <sup>b</sup>
	Residual	737,757	78	9,458		
	Total	7539,550	79			

a. Dependent Variable: Kepuasan Pasien

b. Predictors: (Constant), Kualitas Pelayanan

Source: Data processed with SPSS 27

The F-test showed a significance value of less than 0.05, indicating that the independent variables simultaneously had a significant effect on the dependent variable. The data processing results showed a calculated F-value of 719.125, greater than the F-table value of 3.96. Therefore, Ho was rejected and Ha was accepted. Therefore, it can be concluded that service quality significantly influences patient satisfaction.

The main results of this study indicate that service quality has a positive and significant effect on patient satisfaction at the Pratama Nuxa Skin Clinic in Tangerang City. Based on the results of a simple linear regression test, the calculated t-value was 26.817, greater than the t-table value of 1.994, with a significance level of  $0.000 < 0.05$ . The regression coefficient of 0.957 and the coefficient of determination ( $R^2$ ) of 90.2% indicate that almost all variation in patient satisfaction can be explained by the service quality variable. This finding confirms that the better the quality of service provided by the clinic, the higher the level of patient satisfaction (Adawia dkk., 2020). Empirically, the results of this study show that responsiveness and empathy are the two most dominant aspects in shaping patient satisfaction. Patients highly rate the staff's speed in responding to inquiries, handling complaints, and the friendliness and personal attention provided during the service process. This indicates that patients assess service quality not only from the technical aspects or physical facilities alone, but also from the emotional and interpersonal aspects experienced during the service. Meanwhile, tangibles, reliability, and assurance continue to contribute positively, although their influence is relatively smaller compared to the other two dimensions (Suhadi dkk., 2022).

This result is in line with the SERVQUAL theory put forward by Parasuraman, Zeithaml, dan Berry (1988), which states that service quality can be measured through five main dimensions, and improvements in one or more of these dimensions will have a direct impact on customer satisfaction. In the context of this study, the dimensions of responsiveness and empathy proved to be the most determining factors because the characteristics of aesthetic services require high levels of direct interaction between medical personnel and patients. This finding is also in line with

the results of research conducted by Kaharudin & Anggraheni, (2024) which found that empathy is the factor that most influences patient satisfaction in health clinics, as well as research Enas, (2020) which shows that responsiveness significantly contributes to patient satisfaction perceptions in primary care facilities.

Furthermore, the results of this study reinforce the findings of Kotler & Keller, (2016) which explains that customer satisfaction occurs when service performance meets or exceeds customer expectations. In the case of the Nuxa Skin Clinic, patient satisfaction increased because patients experienced fast, communicative, and attentive service. However, the results of this study also confirm that physical aspects such as waiting room comfort and the availability of medical facilities remain important supporting factors, as they can influence patients' overall perceptions of clinic professionalism. When compared with previous studies in the public service and hospital sectors, the results of this study have a higher level of influence, namely  $R^2$  of 90.2%. For example, research by Athiyah & Pane, (2021) at Medan Medical Center showed an influence of 27.9%, and Febriani, (2020) A study at the Badas Community Health Center in Kediri reported an 84% effect. This difference indicates that satisfaction levels in aesthetic services are more sensitive to the quality of interactions and personalization of service. This can be explained by the fact that patients at beauty clinics evaluate not only the medical outcome but also the emotional experience during the service.

From a theoretical perspective, these results reinforce the view that service quality is a primary determinant of patient satisfaction (Parasuraman dkk., 1988).; Tjiptono, (2022). Good service quality reflects a healthcare institution's ability to understand patient needs, tailor services to their expectations, and provide a consistent and valuable experience. In the context of Nuxa Skin Clinic, these findings emphasize the importance of focusing on improving staff responsiveness, speed of service, and strengthening interpersonal communication between medical personnel and patients as strategies to maintain patient satisfaction and loyalty. Practically, the results of this study provide implications for clinic management in developing more targeted service quality improvement strategies. Responsiveness and empathy should be prioritized in staff training and the design of service operational standards. Furthermore, improvements to physical facilities, administrative efficiency, and cost transparency must also be maintained to maintain high patient trust. Thus, improving service quality not only impacts short-term satisfaction but also builds long-term patient loyalty and strengthens the clinic's reputation amidst increasingly competitive aesthetics industry.

## CONCLUSION

Based on the research results, it can be concluded that service quality has a positive and significant influence on patient satisfaction at the Pratama Nuxa Skin Clinic in Tangerang City. The regression analysis showed a calculated t-value of 26.817, greater than the t-table of 1.994, with a significance level of  $0.000 < 0.05$ , indicating that the research hypothesis was accepted. The coefficient of determination of 90.2% indicates that the majority of the variation in patient satisfaction can be explained by service quality. This finding demonstrates that the better the service provided, the higher the patient's perceived satisfaction with the services received at the clinic.

Empirically, this study also demonstrated that responsiveness and empathy were the most dominant factors influencing patient satisfaction. This suggests that in the context of aesthetic services, direct interaction between staff and patients, friendly attitudes, personalized attention, and the staff's ability to provide prompt and solution-oriented service are crucial aspects in creating

a satisfying service experience. In addition, the dimensions of physical evidence, reliability, and assurance continue to play an important role as support, especially in creating a perception of professionalism and a sense of security for patients while receiving services (Aro, 2025). Thus, this study successfully answered its primary objective, which was to demonstrate a strong correlation between service quality and patient satisfaction, and to identify the dimensions that most contribute to this satisfaction.

Based on the results of this study, several recommendations can be put forward for the management of the Pratama Nuxa Skin Clinic. First, the clinic needs to continuously improve staff responsiveness and empathy through training in customer service, interpersonal communication, and patient complaint management. Second, improving the comfort of the physical facilities and improving the service administration system are also necessary to optimize time efficiency and patient comfort. Third, management is advised to implement a regular evaluation program for service quality to maintain consistent service standards and adapt to evolving patient needs and expectations (Aep Saefullah, 2022). From a policy perspective, this research provides a basis for clinic managers and local health authorities to make service quality a key indicator in improving the quality of private healthcare services, particularly in the increasingly competitive aesthetics sector.

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