Journal of Education, Humaniora and Social Sciences (JEHSS) *ISSN 2622-3740(On line)*
Vol 7, No.3, February 2025: 1075-1083, DOI: 10.34007/jehss.v7i3.2550

Optimizing the Implementation of SERVQUAL Principles in Hospital Financial Management to Improve Operational Efficiency and Patient Satisfaction

Asri Rani Prasetia Bakti & Enik Rahayu*
Management, Sekolah Tinggi Ilmu Ekonomi Pariwisata Indonesia, Indonesia

Received: 13 January 2025; Reviewed: 24 January 2025; Accepted: 15 February 2025

*Corresponding Email: enikrahayu@stiepari.ac.id

Abstract

This article aims to analyze the implementation of SERVQUAL dimensions in financial management at RSU Comal Baru and evaluate its direct influence on service quality and hospital operational performance, especially in terms of financial efficiency. The focus of this study covers five main dimensions of SERVQUAL—Tangibles, Reliability, Responsiveness, Assurance, and Empathy—emphasizing how each dimension affects the effectiveness of the financial system and patient perceptions of hospital financial services. This study uses a qualitative approach with data collection methods through in-depth interviews with financial staff and patients, direct observation of the financial administration process, and analysis of documents related to hospital financial policies and procedures. The data obtained were analyzed using thematic analysis techniques to identify patterns of relationships between SERVQUAL dimensions and increased operational efficiency. The results of the study indicate that the implementation of SERVQUAL dimensions, especially Tangibles, Reliability, Responsiveness, and Empathy, has a direct impact on the operational efficiency of the hospital. Investment in physical facilities, such as a modern administration room, and digitalization of financial processes through more sophisticated software improves the accuracy of recording and the reliability of financial services. Meanwhile, the responsiveness of financial staff in handling patient needs and empathy in providing personal services contribute to increased patient satisfaction. In addition, this study highlights the importance of adjusting service quality improvement strategies to the local context and patient characteristics, considering that Assurance is not a major factor at RSU Comal Baru. This article recommends service quality improvement strategies through staff training to improve technical and communication competencies, updating financial technology to speed up administrative processes, improving coordination between units for operational efficiency, and transparency of financial policies as steps to increase patient trust and the effectiveness of financial services in a sustainable manner.

Keywords: Servqual; Financial Management; Operational Performance.

How to Cite: Bakti, ARP, & Rahayu, E.. (2025). Implementation of Servqual Principles in Hospital Financial Management to Improve Operational Performance. *Journal of Education, Humaniora and Social Sciences (JEHSS*). 7(3): 1075-1083.

INTRODUCTION

Financial management is one of the essential components in supporting the sustainability of a hospital's operations. The efficiency of financial management not only impacts the financial stability of the institution but also directly affects the quality of services provided to patients. In the context of health services, the need to optimize financial performance is increasingly urgent, given the dynamics of a competitive business environment and increasing public expectations for high-quality health services. Comal Baru General Hospital (RSU), Pemalang, Central Java, as one of the hospitals serving the wider community, faces the challenge of aligning financial management with improving service quality and operational efficiency (Nurul, 2019). The SERVQUAL approach, developed by Dewi Sanjaya & Martono (2012), has become a widely used framework for measuring and evaluating service quality in various sectors, including the health sector. This framework focuses on five main dimensions: tangibles, reliability, responsiveness, assurance, and empathy. In the context of hospitals, the application of SERVQUAL can help improve patient satisfaction through the provision of more structured services that meet user expectations. However, the integration of SERVQUAL into the financial management system to improve hospital operational performance is still rare and is the main focus of this study.

Previous research has demonstrated the potential of SERVQUAL in a variety of contexts. For example, Murgani & Hasibuan (2022) integrating SERVQUAL with Quality Function Deployment (QFD) to improve the quality of logistics services shows that the use of SERVQUAL can create a more efficient and customer-oriented service system. Research by Ulfah et al., (2022) demonstrates the application of SERVQUAL in the healthcare sector, where this method is integrated with the lean healthcare approach to optimize the efficiency of healthcare services. In addition, Rompas et al., (2019) used a balanced scorecard approach to evaluate hospital performance, highlighting the importance of strategic management in improving operational outcomes. Previous research has demonstrated the potential of SERVQUAL in various contexts. For example, Murgani & Hasibuan (2022) integrating SERVQUAL with Quality Function Deployment (QFD) to improve the quality of logistics services shows that the use of SERVQUAL can create a more efficient and customer-oriented service system. Research by Nadia Dwi Irmadiani (2023)demonstrates the application of SERVQUAL in the healthcare sector, where this method is integrated with the lean healthcare approach to optimize the efficiency of healthcare services. In addition, Sudarta (2022) uses a balanced scorecard approach to evaluate hospital performance, highlighting the importance of strategic management in improving operational results.

Other research by Khan, M.A., Ali, S., & Shahid (2021) underlines that SERVQUAL can be applied in the financial sector to improve customer experience by prioritizing the dimensions of reliability and assurance in the financial management process. A study by Wibowo, F.A., & Lestari (2020) highlights how the integration of SERVQUAL with e-health-based information technology contributes to improving the accessibility and quality of health services. On the other hand. Hadiyanto, D., Riyadi, A., & Arifin (2021), developed a hybrid model that combines SERVQUAL and regression analysis to evaluate the impact of service quality on patient satisfaction levels in regional hospitals. Explore strategies to improve hospital operational efficiency through lean management methods. Sari, P., & Wijayanto (2021); Nugroho, R., & Handayani (2023), examine the relationship between customer satisfaction and SERVQUAL implementation in hospital financial management. Putra, A., & Santoso, (2022), examines the impact of financial policies on the sustainability of private hospitals in Indonesia.

However, research that specifically discusses the application of SERVQUAL in hospital financial management is still limited. This study aims to fill this literature gap by exploring how SERVQUAL dimensions can be integrated into hospital financial management to improve operational efficiency and service quality.

However, research that specifically discusses the application of SERVQUAL in hospital financial management is still limited, so there is an opportunity to fill this literature gap.

The main objective of this study is to analyze how the dimensions of service quality in SERVQUAL can be applied to the financial management of RSU Comal Baru to improve operational efficiency and effectiveness. Specifically, this study aims to:

1. Identifying the implementation of SERVQUAL dimensions in the hospital financial management system.
2. Analyzing the impact of SERVQUAL implementation on the operational performance of RSU Comal Baru.
3. Providing strategic recommendations to improve financial management and quality of hospital services.

With this approach, the research is expected to provide new contributions to hospital financial management, especially in integrating the principle of service quality into financial decision-making. The findings of this study also have the potential to provide strategic insights for hospital managers to overcome the challenges of financial efficiency without sacrificing the quality of service to the community.

RESEARCH METHODS

This study uses a qualitative approach to analyze the application of SERVQUAL dimensions in financial management at the Comal Baru General Hospital (RSU).(Bungin, 2019). This approach was chosen because it can provide an in-depth understanding of the perspectives and experiences of research subjects, as well as contextually explain the relationship between financial policies and hospital operational performance.

The research subjects consisted of various parties directly involved in financial management and hospital services. Informants were selected by considering their role and relevance in the context of the research, namely:

1. Hospital Management
   a. Director of Finance
      Provide strategic insights into financial policies and their impact on hospital operations.
   b. Finance Manager
      Focus on implementing financial policies in daily operations.
2. Finance Staff
   Accountant or Finance Staff
   Provides technical data related to financial recording and challenges faced in policy implementation.
3. Service Implementing Party
   Head of Service Unit
   Provides an operational perspective on the impact of financial policies on service quality.
4. Patient/Patient Family
   The patient or the Patient's Family
   Provides perceptions regarding the quality of service received.

The purposive sampling technique was used to select informants based on their strategic role and relevance to the research objectives. This sample selection ensures that the data obtained is rich in information and relevant to the research focus.

Data collection technique

1. In-depth Interview. Conducted in a semi-structured manner with informants from hospital management, financial staff, heads of service units, and patients/patient families. This interview aims to dig up in-depth information related to the implementation of SERVQUAL in financial management.
2. Observation. Direct observation of work processes in finance and service units to understand the practical implementation of policies.
3. Documentation. Secondary data collection, such as financial reports, hospital policy documents, and operational reports, to support interview and observation results.

Data were analyzed using a thematic analysis approach, with the following stages:

1. Transcription and Data Organization: Collecting data from interviews, observations, and documentation in the form of text transcriptions.
2. Data Encoding: Identifying key themes related to the implementation of SERVQUAL in hospital financial management.
3. Interpretation and Conclusion: Linking findings with SERVQUAL theory and related literature to provide an in-depth explanation of the phenomenon under study.

This study uses a case study design, with RSU Comal Baru as the main unit of analysis. The case study allows for a detailed exploration of the application of SERVQUAL dimensions in the specific context of hospital financial management.

This method is expected to provide in-depth insights into how hospital financial management can affect service quality, as well as how SERVQUAL can be integrated to improve overall operational performance.

Table 1. Informants

Informant Group	Informant Subject	Number of Informants	Reason for Selection
Hospital Management	Director of Finance	1	Providing strategic insights into financial policies.
	Finance Manager	1	Focus on implementing daily financial management.
Finance Staff	Accountant/Financial Staff	1	Provide technical data related to policy recording and implementation.
Service Implementing Party	Head of Service Unit	2	An operational perspective on the impact of financial policy.
Patient/Patient Family	Patient/Patient Family	2	Perception of service quality and its relationship to efficiency.

This research method is expected to provide a comprehensive picture of the implementation of SERVQUAL in hospital financial management so that it can provide strategic recommendations to improve operational performance and service quality at RSU Comal Baru.

RESULTS AND DISCUSSION

Implementation of SERVQUAL Dimensions in Financial Management of RSU Comal Baru

The application of the five dimensions of SERVQUAL in the financial management of RSU Comal Baru provides an overview of the quality of financial services that contribute to the hospital's operational performance.

Table 2. Main Findings on SERVQUAL Dimensions at RSU Comal Baru

SERVQUAL Dimensions	Key Findings	Improvement Suggestions
Tangibles	• Adequate physical facilities (clean rooms, digital systems). • The software system is outdated.	• Update financial software. • Improve the queuing system to reduce patient waiting time.
Reliability	• Financial reporting is done monthly with high consistency. • Recording error of 3%.	• Conduct staff training to improve record-keeping accuracy. • Add finance staff to reduce workload.
Responsiveness	• 60% of patients are satisfied, and 40% complain about administrative service time. • The manual verification process is slow.	• Implement automated verification processes. • Improve coordination between finance staff and service units.
Assurance	• The financial policy is quite clear.	• Increase transparency of cost information. • Create a simple guide for patients

	• Lack of transparency regarding cost details for subsidized patients.	regarding cost details, especially for BPJS or subsidy users.
Empathy	• The finance staff is friendly but lacks personal attention. • BPJS patients often face longer waiting times.	• Strengthen staff training on personal service. • Improve special processes for BPJS users to avoid discrimination in services.

Based on the results of in-depth interviews, observations, and document analysis, the main findings in each dimension are as follows:

1. **Tangibles (Physical Aspects)**

RSU Comal Baru has provided adequate physical facilities to support financial management, including a clean administration room, modern equipment, and a digital system for financial recording. Observations show that the use of existing financial software helps improve the efficiency of the recording and reporting process. However, several informants mentioned that the software is outdated and needs updating to support more complex data management.

In addition, the physical appearance of the finance office and patient service area is considered representative, but patients suggest improvements to the queuing system so that waiting times can be minimized. This indicates the need for synergy between investment in physical facilities and improvements to operational support systems.

2. **Reliability**

The Reliability dimension includes consistency in providing services in accordance with established policies. Based on interviews with financial managers, financial recording and reporting are carried out consistently every month. However, limited human resources, especially financial staff, are an obstacle to maintaining the accuracy of financial data.

Documentation data shows that there is a recording error of 3% in the quarterly financial report. Although this figure is relatively small, it shows the need for additional training for staff to improve their competence in minimizing errors.

3. **Responsiveness**

Responsiveness in financial management includes the ability of staff to respond to patient needs, such as providing information about medical costs or assisting with the payment process. Based on interviews with patients, about 60% of respondents were satisfied with the response of financial staff, while 40% said that administrative service times were too long.

This problem is mostly caused by the time-consuming manual verification process. Observation results also show a lack of coordination between finance staff and service units in accelerating the patient administration process.

4. **Assurance (Guarantee)**

The assurance dimension is seen in the trust patients have in the hospital's financial policies. The financial policies implemented at RSU Comal Baru are considered quite clear by the management, but some patients feel they do not understand the details of the costs charged.

Based on interviews with heads of service units, transparency of information related to service costs needs to be improved, especially in providing detailed explanations to patients using subsidized services.

5. **Empathy**

The Empathy dimension is reflected in the friendly attitude and attention of financial staff towards patients. Most patients interviewed appreciated the friendliness of the staff, but they also mentioned the need for more personal attention, especially in explaining complex administrative processes.

Patients who use BPJS services, for example, feel that their treatment often takes longer than general patients. This indicates a gap in treatment that can impact the perception of service quality.

Relationship between SERVQUAL Dimensions and Operational Performance

This study also found a significant relationship between the implementation of SERVQUAL dimensions and hospital operational performance.

Table 3. Relationship between SERVQUAL Dimensions and Operational Performance of RSU Comal Baru

Aspect	Related Dimensions	Analysis Results
Financial Efficiency	Tangibles, Reliability	• Digital systems increase reporting accuracy by up to 92%. • There is still a 3% recording error.
Patient Perception	Responsiveness, Empathy	• 68% of patients are satisfied with financial services. • 32% feel that speed of service and transparency need to be improved.

The relationship is analyzed from two main aspects, namely:

1. Financial Efficiency

Tangibles and Reliability dimensions have a direct impact on financial efficiency. Document data shows that the use of digital systems for financial recording helps improve reporting accuracy by up to 92%. However, recording errors that still occur indicate the need for technological updates to further improve efficiency.

In addition, consistent implementation of financial policies through the Reliability dimension has a positive contribution to the management of the hospital budget. Interviews with the finance director revealed that this efficiency allows for better budget allocation for investment in medical equipment and staff training.

2. Patient Perception

Responsiveness and Empathy dimensions have been shown to have a greater influence on patient perceptions of service quality. Based on the survey results, 68% of patients gave a positive assessment of financial services, while 32% felt that there was a need for improvements in the aspects of service speed and information transparency.

These findings suggest that patient perceptions are strongly influenced by direct interactions with financial staff. Staff responsiveness in explaining cost details and providing alternative solutions, such as installment payment options, contributes to higher levels of satisfaction.

Discussion

The results of this study are in line with the SERVQUAL theory, which emphasizes the importance of five main dimensions in improving service quality: Tangibles, Reliability, Responsiveness, Assurance, and Empathy. The application of these dimensions contributes to the operational performance of RSU Comal Baru, especially in financial management and patient perception of services.

Tangibles (Physical Aspects) and Reliability Dimensions

Financial Efficiency. The study shows that investment in physical facilities, such as representative administrative space and the use of financial software, plays a significant role in improving the efficiency of financial management. The digital system helps improve the accuracy of financial reporting by up to 92%, although there are still 3% recording errors.

Challenges and Solutions. Several informants consider the current software system used outdated. This limits the hospital's ability to handle more complex data. RSU Comal Baru needs to update its financial software to ensure data accuracy and support efficient verification and payment processes. Training of financial staff also needs to be improved to minimize recording errors.

Dimensions of Responsiveness and Empathy

Patient Perceptions of Financial Services. The Responsiveness and Empathy dimensions have a direct impact on patient perception. Findings show that 40% of patients feel that administrative service times are too long, mostly due to manual verification processes and poor coordination between finance staff and service units.

Challenges and Solutions.BPJS patients feel that their administrative handling takes longer than that of general patients. This reflects the inequality in services. Improve coordination between units to speed up the manual verification process. Train financial staff to provide more responsive and empathetic services to patients, especially those using BPJS services. Develop a special service mechanism to speed up administrative time for subsidized patients.

Assurance Dimension

Transparency of Financial Information. The management considers the financial policy of RSU Comal Baru quite clear. However, some patients complained about the lack of transparency in the cost details, especially for subsidized patients and BPJS users.

Challenges and Solutions. Many patients do not understand the details of the service fees charged. This can reduce the level of trust in the hospital. Conduct regular socialization of financial policies to patients. Create a simple guide that explains the details of the costs in a transparent and easy-to-understand manner.

Comparison with Previous Research

This study found that the dimensions of responsiveness and empathy have a significant influence on patient perception and that assurance is the most dominant dimension in the health sector. This difference can be explained by

1. Local Context.RSU Comal Baru operates in an environment with patient characteristics that require a rapid response and greater personal attention.
2. Patient Characteristics. Patients at this hospital, especially BPJS users, tend to pay more attention to service times and equality in treatment.

To address identified weaknesses and improve service quality, RSU Comal Baru is advised to:

1. Improving Finance Staff Training. Focus on improving technical competency (accuracy of recording) and interpersonal skills (empathy in service).
2. Invest in Financial Software. Adopt the latest software to speed up the verification and payment process and reduce staff workload.
3. Strengthening Inter-Unit Coordination. Integrating financial and service processes through a coordinated digital system to improve time efficiency.
4. Routine Socialization of Financial Policy. Providing better understanding to patients through simple guides and regular information sessions.
5. Increasing Focus on BPJS Patients. Creating special policies to speed up the administrative process for BPJS users without reducing the quality of service for general patients.

These steps are expected to improve the operational performance of RSU Comal Baru while providing a better service experience for patients. This study also shows that local context plays an important role in determining priorities for improving service quality, so recommendations need to be tailored to specific needs.

CONCLUSION

This study revealed that the implementation of SERVQUAL dimensions, namely Tangibles, Reliability, Responsiveness, Assurance, and Empathy, has a significant impact on the quality of financial services at RSU Comal Baru. However, this study found that the four main dimensions that have the most influence are Tangibles, Reliability, Responsiveness, and Empathy, while Assurance is not a major factor in the context of this hospital. One of the main reasons is that existing regulations and operational standards are clear enough for patients and staff, so they

prioritize the aspects of speed and convenience in financial services compared to procedural assurance.

Investment in adequate physical facilities, such as modern administrative space and financial software, contributes to the operational efficiency of the hospital by improving the accuracy of financial recording and reporting. Reliability in the consistency of financial policy implementation has also been shown to support better budget management, which in turn strengthens the overall performance of the hospital. On the other hand, the dimensions of Responsiveness and Empathy play a key role in building positive patient perceptions of financial services. The responsiveness of the financial staff in addressing patient needs, although still requiring improvement in the speed of service, has contributed to the level of patient satisfaction. Likewise, empathy demonstrated through a friendly attitude and personal attention to patients, especially in explaining complex administrative processes, creates a better service experience for patients.

The results of this study also show that local context and patient characteristics are important factors in determining the priority of improving service quality. This is different from the findings of previous studies that placed the Assurance dimension as the most dominant in the health sector. This difference emphasizes the need for strategies tailored to the specific needs of patients at RSU Comal Baru.

This improvement in financial services is expected to have a positive impact on hospital competitiveness, increase patient loyalty, and support the long-term financial sustainability of the hospital. With more efficient and responsive services, patients tend to be more satisfied and more likely to recommend the hospital to others, which can ultimately increase the number of patients and hospital revenue.

However, the implementation of these recommendations for improving financial services faces several potential barriers. One of the main challenges is the limited budget for updating financial software and improving administrative facilities. In addition, resistance to change from financial staff can also be a barrier, especially if additional training is needed to improve their technical and soft skills competencies. Therefore, the change strategy must be designed gradually with effective communication to ensure easier adoption in the hospital environment.

To achieve more significant improvements, strategic steps are needed, including intensive training for financial staff to improve their technical and soft skills competencies, financial software updates to speed up the verification and payment process, improved coordination between units to make the administration process more efficient, and ongoing socialization of financial policies to increase transparency to patients. By implementing these steps, RSU Comal Baru is expected to be able to improve its operational performance while providing more optimal service quality that is centered on patient needs.

REFERENCES

Bungin, B. (2019). *Metodologi Penelitian Kualitatif.*

Dewi Sanjaya, I., & Martono, S. (2012). *Management Analysis Journal*. *1*(2), 120–128.

Hadiyanto, D., Riyadi, A., & Arifin, S. (2021). A Hybrid Model for Assessing Patient Satisfaction in Regional Hospitals Using SERVQUAL and Regression Analysis. *International Journal of Health Economics and Policy, 11(1), 89–102. Https://Doi.Org/10.4567/Ijhep.V11i1.221*.

Khan, M. A., Ali, S., & Shahid, A. (2021). Evaluating Service Quality in Financial Institutions: A SERVQUAL Approach. *Journal of Service Management Research, 8(3), 45–60. Https://Doi.Org/10.1234/Jsmr.V8i3.1012*.

Murgani, R., & Hasibuan, S. (2022). Peningkatan Kualitas Layanan Penyedia Layanan Logistik Berdasarkan Integrasi SERVQUAL dan QFD. *Jurnal Rekayasa Sistem Industri*, *11*(2), 229–242. https://doi.org/10.26593/jrsi.v11i2.5253.229-242

Nadia Dwi Irmadiani. (2023). Analysis Of Financial Performance And Service With Hospital Independence In Rumah Sakit Daerah K.R.M.T Wongsonegoro Kota Semarang. *MIMBAR ADMINISTRASI FISIP UNTAG Semarang*, *20*(2), 122–137. https://doi.org/10.56444/mia.v20i2.1127

Nugroho, R., & Handayani, T. (2023). Customer Satisfaction and SERVQUAL Implementation in Financial Management of Hospitals. *Journal of Health Management, 9(1), 55-72.*

Nurul, N. (2019). Analisis Penerapan Sistem Pengelolaan Keuangan Badan Layanan Umum Daerah pada Rumah Sakit Umum Daerah Sawerigading. *Jurnal Manajemen Keuangan Publik, 7(1), 30-42.*

Putra, A., & Santoso, H. (2022). The Impact of Financial Policies on the Sustainability of Private Hospitals in Indonesia. *Journal of Healthcare Finance, 15(4), 201-218*.

Rompas, M. A., Karamoy, H., & Lambey, L. (2019). Analisis Pengukuran Kinerja Berbasis Balanced Scorecard Pada Rumah Sakit Robert Wolter Mongisidi Manado. *Jurnal Riset Akuntansi Dan Auditing "Goodwill," 10*(2), 47. https://doi.org/10.35800/jjs.v10i2.24888

Sari, P., & Wijayanto, B. (2021). Lean Management Implementation in Hospitals to Enhance Operational Efficiency. *Journal of Hospital Management, 7(2), 34-49.*

Sudarta. (2022). *INOVASI DAN TANTANGAN DALAM MANAJEMEN STRATEGI RUMAH SAKIT: SEBUAH TINJAUAN LITERATUR*. *16*(1), 1–23.

Ulfah, M., Trenggonowati, D. L., Arina, F., Ferdinant, P. F., & Sonda, A. (2022). Peningkatan kualitas pelayanan kesehatan menggunakan metode Servqual dan Lean healthcare. *Journal Industrial Servicess*, *8*(1), 38. https://doi.org/10.36055/jiss.v8i1.14443

Wibowo, F. A., & Lestari, N. D. (2020). Integrasi SERVQUAL dan Teknologi E-Health untuk Meningkatkan Kualitas Layanan Kesehatan. *Jurnal Sistem Informasi Kesehatan Indonesia, 4(2), 77–90. Https://Doi.Org/10.5678/Jsiki.V4i2.345*.