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Carring behavior, discipline, and competence as predictors of service quality in the RSU Ogan Ilir

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ABSTRACT

This study aims to analyze and empirically verify the influence of caring behavior, discipline, and competence on the service quality of employees at the Ogan Ilir Regional General Hospital, both partially and simultaneously. The research employed a quantitative method with survey, confirmatory, and verificative approaches. This study is categorized as associative research, focusing on the relationships among variables. The research population consisted of 118 employees, all of whom were included as research samples using a saturated sampling technique. The types of data comprised primary and secondary data, collected through observation, questionnaire-based interviews, and documentation. The data analysis technique used was multiple linear regression with SPSS version 30. The findings indicate that caring behavior, discipline, and competence have a positive and significant effect on improving service quality, both partially and simultaneously. These three variables demonstrate a substantial (strong) relationship of 81.6% with the improvement of service quality. This research contributes to developing comprehensive human resource management science and further research in this field. Improving service quality can be done by simultaneously paying attention to aspects of caring behavior, discipline, and competence.

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1. INTRODUCTION

Previous studies have reported varying findings regarding the relationship between caring behavior and service quality. In the context of hospitals and healthcare services, caring is commonly referred to in the literature as “empathy” (Atanay et al., 2025; Gurusinga, 2022; Mohd Nasurdin et al., 2022; Widayati & Rachmania, 2025). These studies demonstrate that caring behavior significantly predicts service quality. However, other research has concluded that caring does not have a significant influence on service quality, or even identified negative impacts or trade-offs associated with caring in healthcare settings (Wang et al., 2022; Ye et al., 2017; Yunningsih, 2022). These differing conclusions create a research gap concerning caring behavior as a predictor of service quality, which this study seeks to address.

The relationship between discipline and service quality in empirical research also shows inconsistent results, forming another research gap. Several studies report that discipline has a positive and significant effect on service quality (Oktavianingrum et al., 2025; Patmasari et al., 2023; Rulianti & Nurpribadi, 2024; Wange et al., 2023). However, other studies find that discipline does not have a significant effect, particularly in organizations where standard operating procedures are inconsistently implemented or where other factors, such as motivation and competence, are more dominant (Samudra et al., 2025; Trianto, 2017).

Changes in the work environment, digitalization of services, and rising public expectations require organizations to continuously strengthen employees' competencies. Research findings on the relationship between competence and service quality are also diverse. Most studies show that competence has a significant influence on service quality (Adawiah, 2025; Emria & Nurhidayati, 2025; Sitorus et al., 2024; Stiaharti, 2022). However, some studies report weak or insignificant effects, particularly in organizations characterized by bureaucratic cultures or rigid operational standards (Fang et al., 2019; Fitriadi et al., 2025; Mustari et al., 2024; Wardeni et al., 2024; Yoe et al., 2024). These divergent findings indicate that competence is not the sole determinant of service quality, thus requiring further analysis in accordance with the organizational context.

One government organization strongly associated with caring behavior, discipline, and competence as determinants of service quality is the hospital. To analyze these aspects, this study identifies the locus of research as the Ogan Ilir Regional General Hospital (In Indonesian: RSUD Ogan Ilir). As a referral hospital for the South Sumatra region, continuous evaluation of employee performance is crucial to ensure service quality, particularly in terms of patient satisfaction and safety.

Thus, this study aims to analyze and examine the influence of caring behavior, discipline, and competence on service quality, both partially and simultaneously. This research seeks to confirm the existence of these three variables as predictors of service quality at the Ogan Ilir Regional General Hospital. This research focuses on the influence of caring behavior on service quality as hypothesis one; the influence of discipline on service quality as hypothesis two; the influence of competence on service quality as hypothesis three; the influence of caring behavior, discipline, and competence on service quality as hypothesis four.

2. RESEARCH METHOD

This study is delimited to the field of human resource management, focusing on employees working at Ogan Ilir Regional General Hospital. The research employs a quantitative design, utilizes SPSS version 30 for data analysis, and centers on the variables of caring behavior, discipline, and competence as factors influencing service quality. The research method applied is a survey–confirmatory–verificative approach to test associative hypotheses based on field data collection. The study population consists of 118 employees, all of whom are included as the research sample using a census (total sampling) technique. The types of data used comprise primary and secondary data collected through observation, interviews, closed-ended questionnaires (Likert scale), and documentation. The Likert scale used ranges from 1 to 5, where 1 = strongly disagree, 2 = disagree, 3 = neutral, 4 = agree, and 5 = strongly agree. The research instruments were tested for validity and reliability, while the data were analyzed using classical assumption tests (normality, multicollinearity, heteroscedasticity, and linearity) prior to conducting multiple linear regression analysis. Hypothesis testing was carried out using the t-test for partial effects and the F-test for simultaneous effects at a 5% significance level ($\alpha = 0.05$), along with the coefficient of determination (R^2) to determine the explanatory contribution of the variables. The findings of this study will determine whether caring behavior, discipline, and competence have a significant influence on service quality within the

research setting. The ethics in this research are the confidentiality of respondent data and general and specific research findings.

3. RESULTS AND DISCUSSIONS

3.1 Instrument Testing (Validity and Reliability)

The decision-making criterion for the validity test is based on the Pearson Product-Moment value, where an instrument is considered valid if the calculated r-count is greater than the r-table value at the 0.05 significance level (Opoku et al., 2022). The r-table value for 118 respondents at the 0.05 significance level is 0.444. The validity test results in Table 1 show that all Items in each research variable (care, discipline, competence, and service quality) have r-count values greater than the r-table value, indicating that the data are valid.

Table 1. Results of Validity Test

Variable	Items	r-count	r-table	Results
Caring Behavior (CB)	CB_1	0.865	0.444	Valid
	CB_2	0.934	0.444	Valid
	CB_3	0.782	0.444	Valid
	CB_4	0.854	0.444	Valid
	CB_5	0.722	0.444	Valid
	CB_6	0.803	0.444	Valid
	CB_7	0.790	0.444	Valid
Discipline (DC)	DC_1	0.752	0.444	Valid
	DC_2	0.750	0.444	Valid
	DC_3	0.722	0.444	Valid
	DC_4	0.866	0.444	Valid
Competence (CP)	CP_1	0.540	0.444	Valid
	CP_2	0.827	0.444	Valid
	CP_3	0.840	0.444	Valid
	CP_4	0.827	0.444	Valid
Quality Service (QS)	QS_1	0.842	0.444	Valid
	QS_2	0.908	0.444	Valid
	QS_3	0.864	0.444	Valid
	QS_4	0.987	0.444	Valid

Source : Output SPSS, 2025

The decision criterion for the reliability test is that the Cronbach's Alpha value of a variable must be greater than 0.60 (Opoku et al., 2022), which indicates that it is acceptable (Creswell & Cresswell, 2022) or demonstrates strong reliability (Bahri & Zamzam, 2015). The reliability test results in Table 2 show that all items in each research variable (caring behavior, discipline, competence, and service quality) have Cronbach's Alpha values greater than 0.60, indicating that the data are reliable.

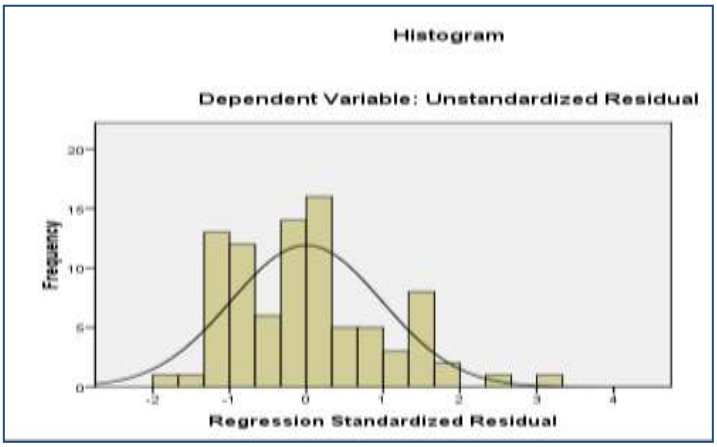
Table 2. Results of Reliability Test

Variabel	Cronbach's Alpha	Criteria	Hasil
Caring Behavior (CB)	0.932	≥ 0.60	Reliabel
Discipline (DC)	0.959	≥ 0.60	Reliabel
Competence (CP)	0.932	≥ 0.60	Reliabel
Quality Service (QS)	0.941	≥ 0.60	Reliabel

Source : Output SPSS, 2025

3.2 Classical Assumption Test: Normality Test

The decision criterion for the normality test is based on the curve (histogram). If the histogram forms a bell-shaped curve, the data are considered normally distributed; conversely, if the curve is skewed, peaked, or flat, the data are considered non-normal (Wagemaker, 2020). Figure 1 shows that the service quality data derived from the predictors of caring behavior, discipline, and competence form a bell-shaped distribution, indicating normality.



Source : Output SPSS, 2025

Figure 1. Histogram of Normality Test

3.3 Classical Assumption Test : Linearity Test

The decision-making criterion for the linearity test using the Test for Linearity at a significance level of 0.05 states that the data are considered linear if p < 0.05 (indicating a significant relationship); conversely, the data are considered non-linear if p > 0.05 (indicating a non-significant relationship). The reliability test results in Table 3 show that all Sig. *p*-values for the exogenous variables (care, discipline, and competence) in relation to the endogenous variable (service quality) are below 0.05, indicating that the data exhibit linearity.

Table 3. Results of Linearity Test

Variable	Sig. (p value)	Criteria	Results
Caring Behavior (CB)	0.000	< 0.05	Linearity
Discipline (DC)	0.000	< 0.05	Linearity
Competence (CP)	0.000	< 0.05	Linearity

Source : Output SPSS, 2025

3.4 Classical Assumption Test: Multicollinearity Test

The decision-making criteria for the multicollinearity test are a tolerance value > 0.10 and a VIF value < 10. The multicollinearity test results in Table 4 show that all exogenous variables (caring behavior, discipline, and competence) in relation to the endogenous variable (service quality) have tolerance values > 0.10 and VIF values < 10, indicating that multicollinearity does not occur.

Table 4. Results of Multicollinearity Test

Variable	Tolerance	VIF	Results
Caring Behavior (CB)	0.560	1.785	Free from Multicollinearity
Discipline (DC)	0.565	1.771	Free from Multicollinearity
Competence (CP)	0.532	1.880	Free from Multicollinearity

Source : Output SPSS, 2025

3.5 Classical Assumption Test: Heteroscedasticity Test

The decision criterion for the heteroskedasticity test using the Scatterplot method is that if the points are randomly dispersed and do not form any specific pattern, then heteroskedasticity is not present. Conversely, if the points form an expanding pattern (funnel-shaped), narrowing, curved, or wavy pattern, heteroskedasticity is indicated. Figure 2 shows that the work performance data derived from the predictors—care, discipline, and competence—forms a bell-shaped curve, indicating that the data are normally distributed.

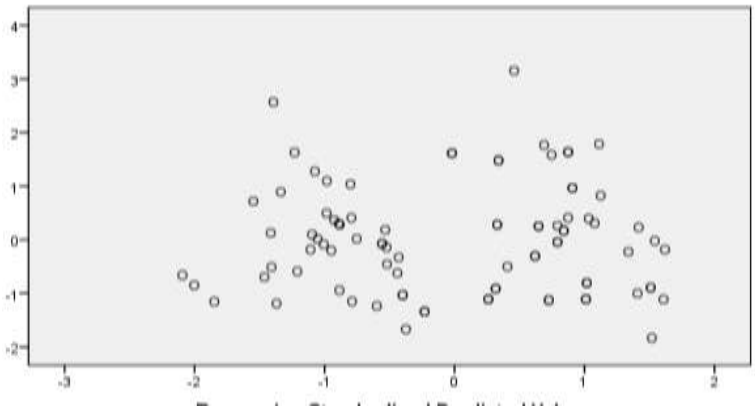


Figure 2. Scatterplot Heteroscedasticity Test
Source : Output SPSS, 2025

3.6 Hypothesis Test

Hypothesis testing was carried out through the stages of the t-test, F-test, and the coefficient of determination test. The decision-making criterion for the t-test is that the hypothesis is accepted when the value t count is greater than the t-table value and the significance value is less than α = 0.05. The t-table value in this study is 1.658 at a 5% significance level, with df = 115, k = 3, and n = 118. The results of the partial t-test in this study are presented in Table 5. Furthermore, the decision-making criterion for the F-test is that the hypothesis is accepted when the value F count is greater than the F-table value and the significance value is less than α = 0.05. The F-table value in this study is 2.68 at a 5% significance level, with df (N2) = 114, df (N1) = 3, n = 118, and k = 4. The results of the simultaneous F-test in this study are presented in Table 6.

Table 5. Result of t test (Partially)

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Results
	B	Std. Error	B			
(Constant)	18.365	3.700		5.738	0.000	Constant
Caring Behavior (CB)	0.287	0.072	0.381	5.870	0.001	Positive Significant
Discipline (DC)	0.316	0.052	0.465	6.274	0.003	Positive Significant
Competence (CP)	0.282	0.055	0.225	4.257	0.000	Positive Significant

Source : Output SPSS, 2025

The t-test results for the effect of caring behavior on service quality show a t-count value of 5.870 > 1.658 t-table and a significance value of 0.001 < α = 0.05, indicating a positive and significant effect of the caring behavior variable on service quality. The formula representing this relationship is as follows: if caring behavior increases by one unit, service quality increases by 5.870 units. Conversely, if caring behavior decreases by one unit, service quality decreases by 5.870 units.

The results of the t-test on the effect of discipline on service quality show a value of t-count of 6.274 > 1.658 t-table and a significance value of 0.003 < α = 0.05, indicating a positive and significant effect of the discipline variable on service quality. The formula for this relationship implies that if discipline increases by one unit, service quality increases by 6.274 units. Conversely, if discipline decreases by one unit, service quality decreases by 6.274 units.

The results of the t-test on the effect of competence on service quality show a t-count of 4.257 > 1.658 t-table and a significance value of 0.000 < α = 0.05, indicating a positive and significant effect of the competence variable on service quality. The formula implied by this relationship is that if competence increases by one unit, service quality increases by 4.257 units. Conversely, if competence decreases by one unit, service quality decreases by 4.257 units.

Table 6. Results of F Test (Simultaneous)

Model	Sum of Squares	df	Mean Square	F	Sig.	Hasil
Regression	3196.480	3	1392.411	115.682	0.000	Positive Significant
Residual	917.4473	115	11.009			
Total	4691.3762	118				

Source : Output SPSS, 2025

The F-test results on the simultaneous influence of caring, discipline, and competence on service quality show F-count of 115.682 > 2.68 F-table and a significance value of 0.000 < α = 0.05, indicating that caring behavior, discipline, and competence simultaneously have a positive and significant effect on service quality.

The data from the coefficient of determination analysis can be seen in Table 7. The correlation value is 0.816, indicating a very strong relationship among the variables. The R^2 value is 0.803, which suggests that the variables of caring behavior, discipline, and competence contribute 80.3% to service quality, while the remaining 19.7% is influenced by other factors.

Table 7. Determinants Coefficient

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	0.816	0.803	0.762	3.23564

Source : Output SPSS, 2025

3.7 Effect of Caring Behavior to Service Quality

The results of the hypothesis testing on the effect of caring behavior on service quality indicate that caring behavior has a positive and significant effect on service quality. The standardized beta coefficient test shows that caring behavior and service quality have a strong relationship. The formula generated in this study demonstrates that any increase in caring behavior will enhance service quality. This study has confirmed and proven that service quality is influenced by the caring behavior variable. The findings are consistent with prior research conducted by several scholars whose conclusions align with this study (Atanay et al., 2025; Gurusinga, 2022; Mohd Nasurdin et al., 2022; Widayati & Rachmania, 2025).

However, this study's findings differ from those of several researchers who concluded that service quality is not influenced by caring behavior (Wang et al., 2022; Ye et al., 2017; Yunningsih, 2022). These divergent results are strongly affected by contextual factors. For instance, Wang et al. (2022) found that empathy can reduce caregivers' own assessments of service satisfaction because they "share" the patient's suffering—showing a counterintuitive effect in which caring does not always increase service evaluations. Yunningsih (2022), using SERVQUAL dimension measurements, also found that responsiveness and caring did not significantly affect patient satisfaction in certain samples, even though SERVQUAL dimensions had a simultaneous effect overall. This highlights that caring is not always a dominant determinant and strongly depends on the setting, reinforcing the argument that the influence of caring is contextual.

Similarly, differences in research findings may result from methodological variations. Ye et al. (2017), for example, reported differences based on sample type (inpatient vs. outpatient), instruments used (SERVQUAL vs. specialized caring scales), and control variables (facility quality, management factors). These discrepancies may also relate to the short-term vs. long-term trade-off argument: Ye et al. (2017), using a longitudinal design, found that the influence of caring tends to emerge in the long term (e.g., sustainable satisfaction or profitability). Consequently, cross-sectional studies—such as the present research—may "miss" such long-term effects.

3.8 Effect of Discipline to Service Quality

The hypothesis testing results regarding the influence of discipline on service quality indicate that service quality is positively and significantly affected by discipline. The standardized beta coefficient test shows a strong relationship between discipline and

service quality. The formula generated in this study demonstrates that every increase in discipline will improve service quality. This study confirms and proves that discipline is one of the variables that influence service quality. These findings are consistent with the conclusions of several previous studies stating that discipline has a positive and significant effect on service quality (Oktavianingrum et al., 2025; Patmasari et al., 2023; Rulianti & Nurpribadi, 2024; Wange et al., 2023).

However, the findings of this study differ from several other research results that indicate discipline has an insignificant effect on service quality (Samudra et al., 2025; Trianto, 2017). These discrepancies are strongly influenced by the organizational management context. Trianto (2017) study was conducted in a government organization involving athletes and coaches who consistently adhere to scheduled discipline; therefore, when discipline was used as a predictor variable, it did not significantly affect service quality because the organization's management system was inherently discipline-based. Meanwhile, Samudra et al. (2025) employed longitudinal data with variations in intervening variables, resulting in discipline not directly influencing service quality but operating through compensation and motivation. Riwu Kore et al. (2021) also asserted that discipline is strongly affected by compensation, which in turn fosters motivation to deliver high performance in service delivery.

3.9 Effect of Competence to Service Quality

The hypothesis testing results regarding the effect of competence on service quality indicate that service quality is positively and significantly influenced by competence. The standardized beta coefficient test shows that competence and service quality have a strong relationship. The model produced in this study demonstrates that every increase in competence leads to an improvement in service quality. This research confirms and provides evidence that competence is a variable that affects service quality. The findings are consistent with the conclusions of several previous studies stating that competence has a positive and significant effect on service quality (Adawiah, 2025; Emria & Nurhidayati, 2025; Sitorus et al., 2024; Stiaharti, 2022).

However, the results of this study differ from several other research findings indicating that competence has a weak and insignificant effect on service quality (Fang et al., 2019; Fitriadi et al., 2025; Mustari et al., 2024; Wardeni et al., 2024; Yoe et al., 2024). These differences are strongly influenced by contextual factors. Many studies have found competence to be insignificant in government institutions or hospital settings with issues related to facilities, systems, or administrative burdens, where non-competence factors more strongly influence user satisfaction, as reported in Wardeni et al. (2024). Outcome type is also a determinant of these divergent findings; competence may influence internal employee performance but may not directly affect user or patient satisfaction when intervening variables (such as service quality, facility conditions, or information systems) are present, as seen in Mustari et al. (2024). Longitudinal studies or SEM models that incorporate mediating or moderating variables (Fitriadi et al., 2025), have also contributed to varied results, whereas the present study does not include intervening variables.

3.10 Effects of Caring Behavior, Discipline, and Competence to Service Quality

The results of the simultaneous test in this study indicate a positive and significant simultaneous effect of the variables caring, discipline, and competence on service quality. This demonstrates that the regression model incorporating caring, discipline, and competence simultaneously is able to explain the variation in changes in service quality. Thus, it can be stated that these three variables collectively make a significant contribution to improving service quality. These findings align with the Human Resource Management theory of the Resource-Based View (Jay Barney, 1991) which explains that a combination of behaviors (caring and discipline) and capabilities (competence) contributes to a service advantage that is difficult to imitate. Caring

enhances the emotional aspect of service, discipline ensures consistency in service processes, and competence secures accuracy and professional service delivery. Wirtz & Lovelock (2022) similarly assert that service quality improves significantly when employees simultaneously demonstrate empathy, adhere to procedures, and possess adequate competencies.

The combination of caring, discipline, and competence contributes significantly to the improvement of service quality, accounting for 80.3% compared to other variables such as organizational commitment, leadership style, work–life balance, individual characteristics, and others. The relationship among these exogenous variables is identified as strong, with a coefficient of determination of 0.816. According to Chin (1998), R value greater than 0.67 indicates a substantial (strong) relationship.

Overall, the findings affirm that enhancing service quality can only be achieved through an integrated human resource management approach, namely by strengthening caring, improving discipline, and periodically upgrading employee competence. The simultaneous implementation of these three aspects is the key to building a productive, healthy, and sustainable organization.

Theoretically, this study contributes to the development of human resource management and public service management literature by strengthening empirical evidence that caring, discipline, and competence are key determinants of hospital service quality. The findings enrich existing literature by demonstrating that service quality is influenced not only by technical and procedural factors, but also by employees' behavioral and attitudinal aspects that are psychosocial in nature. These results support and extend organizational behavior theory and service quality theory, which emphasize the critical role of human resources as the main actors in service delivery, particularly in the healthcare sector where services are oriented toward public interest and humanitarian values.

Practically, the findings of this study provide an empirical basis for hospital management in formulating policies and strategies to improve service quality through effective human resource management. The results may serve as a reference for designing programs aimed at strengthening employees' caring attitudes, enforcing work discipline, and continuously developing professional competence. Furthermore, this study implies that efforts to improve hospital service quality should be implemented in an integrated and systematic manner by incorporating attitudinal, behavioral, and professional capability aspects into performance evaluation systems and organizational culture. Therefore, the findings are expected to assist hospital management in enhancing patient satisfaction, public trust, and the overall institutional image of healthcare services in a sustainable manner.

4. CONCLUSION

This study successfully demonstrates that caring, discipline, and competence have a significantly positive effect on improving employee service quality, both partially and simultaneously. These three variables exhibit a substantial (strong) relationship of 81.6% with the improvement of service quality. The findings suggest that service quality can be improved through an integrated human resource management approach that strengthens caring behavior, discipline, and competence. Future studies should employ longitudinal or advanced analytical methods and include mediating variables to better capture long-term and contextual effects.

REFERENCES

Adawiah, R. (2025). The Influence of Competence and Patient Satisfaction to the Employee Performance through Service Quality at Community Health Center in Ternate City. *Jurnal Manajemen Dan Bisnis Ekonomi*, *3*(2), 45–67. https://doi.org/10.54066/jmbe-itb.v3i2.3061

Atanay, R. S., Dwidiyanti, M., & Dwiantoro, L. (2025). The Impact of Nurse Empathy in Hospitals Nursing Services. *Media Ilmu Kesehatan*, *12*(3), 305–312. https://doi.org/10.30989/mik.v12i3.1201

Bahri, S., & Zamzam, F. (2015). *Model penelitian kuantitatif berbasis SEM AMOS*. Deepublish Press.

Barney, J. (1991). Firm Resources and sustained competitive advantage. *Journal of Management*, *17*(1), 99–120. https://doi.org/10.1177/014920639101700108

Chin, W. W. (1998). The Partial Least Squares Aproach to Structural Equation Modeling. In G. A. Marcoulides (Ed.), *Modern methods for business research* (pp. 295–336). Lawrence Erlbaum Associates Publishers.

Creswell, J. W., & Cresswell, J. D. (2022). *Research design: Qualitative, quantitative, and mixed methods approaches* (5th Ed). Sage Publications, Inc.

Emria, H., & Nurhidayati. (2025). The Role of Human Resources (HR) Competence and Organizational Culture on Service Quality in Improving Employee Performance at Pertamina Central Hospital, Jakarta. *SAMaJ: Sultan Agung Management Journal*, *2*(3), 206–219. https://jurnal.unissula.ac.id/index.php/samaj/article/view/47388

Fang, J., Liu, L., & Fang, P. (2019). What is the most important factor affecting patient satisfaction – a study based on gamma coefficient. *Patient Prefer Adherence*, *10*(13), 515–525. https://doi.org/10.2147/PPA.S197015

Fitriadi, A. R. A., Herlambang, T., Sanosra, A., Nursaid, Qomariah, N., & Ridwan, W. (2025). The Impact of Work Culture, Service, and Employee Competence on Satisfaction with E-Government Systems as Intervening Variables. *Ilomata International Journal of Management*, *6*(3), 975–991. https://doi.org/10.61194/ijjm.v6i3.1653

Gurusinga, R. (2022). Nurse Caring Behavior on Patient Satisfaction in Hospitals. *Jurnal Aisyah : Jurnal Ilmu Kesehatan*, *5*(1), 129–134. https://doi.org/10.30604/jika.v5i1.826

Mohd Nasurdin, A., Tan, C. L., & Naseer Khan, S. (2022). Empathy and Competency as Predictors of Nurses' Job Performance : An Empirical Evidence from Malaysian Public Hospitals. *Malaysian Journal of Public Health Medicine*, *22*(1), 173–181. https://doi.org/10.37268/mjphm/vol.22/no.1/art.1320

Mustari, M. S., Amrin, E., Wahab, R. A., & Primadona, I. A. L. (2024). The Influence of Service Quality and Personnel Competency On Customer Loyalty Through Customer Satisfaction. *The 1st ICBENS : International Conference of Business, Education, Health, and Scien-Tech*, *1*(1), 652–662. https://journal.conference.umpalopo.ac.id/index.php/icbens/article/view/73

Oktavianingrum, I., Hapsari, Y. T., & Wardhani, R. A. N. (2025). The Influence of Employee Discipline On Service Quality at Mayang Public Health Center, Jember Regency. *JURNAL MANEKSI (Management Ekonomi Dan Akuntansi)*, *14*(4), 1776–1787. https://doi.org/10.31959/jm.v14i4.3485

Opoku, A., Olanipekun, A., Sutrisna, M., & Ahmed, V. (2022). *Validity and reliability in built environment research: A selection of case studies*. CRC Press.

Patmasari, E., Musiafir, S., & Sulhayati. (2023). Pengaruh disiplin kerja terhadap kualitas pelayanan aparat pada Kantor Desa Tonralipue Kecamatan Tanasitolo Kabupaten Wajo. *Jurnal Ilmu Administrasi Negara*, *20*(1), 49–67. https://doi.org/10.59050/jian.v20i1.201

Riwu Kore, J. R., Susanto, Y., Pilkandis, J., & Haba Ora, F. (2021). Analysis of employee performance in the Department of Education and Culture, Lubuklinggau City. *Asia Pacific Journal of Management and Education*, *4*(2), 95–109. https://doi.org/10.32535/apjme.v4i2.1149

Rulianti, E., & Nurpribadi, G. (2024). The Effect of Public Service Quality, Work Discipline, and Organizational Culture on Community Satisfaction. *Ilomata International Journal of Social Science*, *5*(1), 60–74. https://doi.org/10.52728/ijss.v5i1.1059

Samudra, Y. B., Mulyono, S., & Hendrakusuma, B. (2025). The effect of work discipline and work competence on service performance mediated by work motivation. *International Journal of Social Science and Human Research*, *8*(11), 8767–8776. https://doi.org/10.47191/ijsshr/v8-i11-30

Sitorus, D. R. H., Agustian, D., & Anggraini, T. (2024). Kompetensi pegawai dalam meningkatkan kualitas pelayanan. *ALIGMENT : Journal of Administration and Educational Management*, *7*(1), 240–250. https://doi.org/10.31539/alignment.v7i1.9901

Stiaharti, R. (2022). Pengaruh kompetensi dan loyalitas pegawai terhadap kualitas pelayanan di Dinas Pendidikan Kota Sukabumi. *Mimbar Administrasi Mandiri*, *18*(2), 1–18. https://doi.org/10.37949/mimbar18212

Trianto, O. (2017). Pengaruh disiplin kerja dan motivasi kerja terhadap kualitas pelayanan pada Pusat Pemberdayaan Pemuda dan Olahraga Nasional (PP-PON) Kementerian Pemuda dan

Olahraga Tahun 2015. *Kenegaraan*, *2*(1), 1–29. https://journal.unas.ac.id/kenegaraan/article/view/229

Wagemaker, H. (2020). *Reliability and validity of international large-scale assessment : Understanding IEA's comparative studies of student achievement*. Springer International Publishing.

Wang, X., Wang, R., Sheng, F., & Chen, L. (2022). The effects of empathy by caregivers on healthcare service satisfaction. *Frontiers in Psychology*, *13*, 912076. https://doi.org/10.3389/fpsyg.2022.912076

Wange, S. F., Tohopi, R., & Nani, Y. N. (2023). Pengaruh disiplin kerja pegawai terhadap kualitas pelayanan publik Pemerintah Desa di Kecamatan Bongomeme Kabupaten Gorontalo. *Journal of Education, Humaniora and Social Sciences (JEHSS)*, *6*(1), 458–465. https://doi.org/10.34007/jehss.v6i1.1891

Wardeni, I., Satriawan, B., & Khaddafi, M. (2024). The Influence of Information System Quality, Facilities, and Competence on Inpatient Satisfaction With Service Quality as an Intervening Variable at Raja Ahmad Thabib Hospital, Riau Islands Province. *International Journal of Economics and Management Sciences*, *1*(4), 104–118. https://doi.org/10.61132/ijems.v1i4.225

Widayati, D., & Rachmania, D. (2025). Nurse Responsiveness and Empathy as Predictors of Patient Loyalty: A Cross-Sectional Study in Hospital Care Settings. *Fundamental and Management Nursing Journal*, *8*(2), 101–111. https://doi.org/10.20473/fmnj.v8i2.77252

Wirtz, J., & Lovelock, C. (2022). *Services Marketing: People, Technology, Strategy* (9th ed.). World Scientific.

Ye, J., Dong, B., & Lee, J.-Y. (2017). The long-term impact of service empathy and responsiveness on customer satisfaction and profitability: a longitudinal investigation in a healthcare context. *Marketing Letters*, *28*(1), 551–564. https://doi.org/10.1007/s11002-017-9429-2

Yoe, P., Bastiaan, N. E., & Wiyono, A. E. (2024). The Impact of Service Quality, Employee Competency, and Digitalization on Patient Satisfaction at X Clinic. *Indonesian Marketing Journal*, *4*(2), 119–129. https://doi.org/10.19166/imj.v4i2.9763

Yunningsih, Y. (2022). Physical Evidence, Reliability, Responsiveness, Assurance and Empathy of Service Quality On Inpatient Patient Satisfaction : Study A Regional General Hospitals. *Journal of Resource Management, Economics and Business*, *1*(2), 15–30. https://doi.org/10.58468/remics.v1i2.40