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PENGARUH TANGIBLE, RELIABILITY, DAN RESPONSIVENESS TERHADAP KUALITAS PELAYANAN PADA INSTALASI RAWAT JALAN RSGMP PROF. DR. MOESTOPO (BERAGAMA)

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ABSTRACT
Health service quality is a critical factor in determining patient satisfaction in hospitals. This study aimed to analyze the effect of tangibles, reliability, and responsiveness on service quality at the Outpatient Installation of RSGMP Prof. Dr. Moestopo (Beragama) and how these dimensions influence patient satisfaction. A quantitative, correlational research design was employed, with a purposive sample of 96 returning outpatients. Data were collected using a structured questionnaire and analyzed through multiple regression, t-tests, F-tests, and the coefficient of determination (R^2) using SPSS 27.0. The results showed that tangibles, reliability, and responsiveness individually had a positive and significant effect on service quality, with responsiveness having the largest influence. Simultaneously, the three variables explained 74.6% of the variation in service quality ($R^2 = 0.746$) and significantly contributed to enhancing patient satisfaction. The findings indicate that well-maintained physical facilities, consistent and accurate services, and prompt, empathetic responses to patient needs are essential to improve overall service quality. The study recommends hospitals implement routine performance evaluations, continuous staff training, and digital systems such as online reservations, electronic queue management, and digital medical records to enhance service efficiency and patient experience. Strengthening these aspects is expected to increase patient trust, satisfaction, and loyalty, ensuring sustainable healthcare service quality.

Keywords: *Tangibles, Reliability, Responsiveness, Service Quality, Patient Satisfaction, Outpatient Services*

ABSTRAK
Kualitas layanan kesehatan merupakan faktor krusial dalam menentukan kepuasan pasien di rumah sakit. Penelitian ini bertujuan untuk menganalisis pengaruh tangibles, reliability, dan responsiveness terhadap kualitas pelayanan di Instalasi Rawat Jalan RSGMP Prof. Dr. Moestopo (Beragama) serta bagaimana dimensi tersebut memengaruhi kepuasan pasien. Penelitian ini menggunakan desain kuantitatif korelasional dengan sampel purposive sebanyak 96 pasien rawat jalan yang kembali berobat. Data dikumpulkan melalui kuesioner tertutup dan dianalisis menggunakan regresi linier berganda, uji t, uji F, dan koefisien determinasi (R^2) dengan bantuan SPSS versi 27.0. Hasil penelitian menunjukkan bahwa variabel tangibles, reliability, dan responsiveness secara parsial memiliki pengaruh positif dan signifikan terhadap kualitas pelayanan, dengan responsiveness sebagai variabel yang memberikan pengaruh paling besar. Secara simultan, ketiga variabel tersebut menjelaskan 74,6% variasi kualitas pelayanan ($R^2 = 0,746$) dan berkontribusi signifikan terhadap peningkatan kepuasan pasien. Temuan ini menegaskan bahwa fasilitas fisik yang memadai, layanan yang konsisten dan akurat, serta respons cepat dan empatik terhadap kebutuhan pasien sangat penting untuk meningkatkan kualitas pelayanan secara keseluruhan. Penelitian ini merekomendasikan rumah sakit untuk melakukan evaluasi rutin kinerja tim medis, pelatihan berkelanjutan, serta pengembangan sistem digital seperti reservasi online, antrian elektronik, dan rekam medis digital guna mempercepat pelayanan dan meningkatkan pengalaman pasien. Peningkatan ketiga aspek tersebut diharapkan dapat

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meningkatkan kepercayaan, kepuasan, dan loyalitas pasien serta menjamin kualitas layanan kesehatan yang berkelanjutan.

Kata Kunci: *Tangibles, Reliability, Responsiveness, Kualitas Pelayanan, Kepuasan Pasien, Layanan Rawat Jalan*

INTRODUCTION

Health services are essential for all members of society regardless of age, social status, or background. People seek medical care from healthcare providers such as hospitals, clinics, doctors, nurses, midwives, and other health professionals because health is a fundamental human need. Hospitals play a crucial role as institutions that deliver comprehensive healthcare services to the community. A good hospital is expected to provide high-quality services that ensure patients feel safe, comfortable, and satisfied during their treatment and recovery process. To achieve this, hospitals must comply with established service standards in order to maintain effective and efficient healthcare delivery.

As a vital healthcare institution, a hospital's service quality, particularly in outpatient units, strongly influences patients' perceptions and levels of satisfaction. RSGMP Prof. Dr. Moestopo, as a dental and oral hospital, is required not only to meet existing service standards but also to exceed them. This is necessary to ensure that every patient experiences safety, comfort, and satisfaction throughout the service process. High service quality is not only a professional obligation but also a strategic necessity to build trust and long-term relationships with patients.

Previous studies have emphasized the importance of service quality in sustaining hospital performance. Kirana (2024) stated that patient satisfaction is achieved when patients' expectations are fulfilled through the quality of services provided. Therefore, hospital service quality must be continuously evaluated and improved through effective and efficient management. Such continuous improvement will enable hospitals to maintain competitiveness and ensure long-term operational sustainability. In line with this, the 2018 Basic Health Research (Riskesdas) reported that although access to healthcare services in Indonesia has increased, there are still significant disparities in service quality across regions. This situation highlights the need for further research to understand how infrastructure, medical equipment, and the quality of healthcare personnel influence patient satisfaction.

The Ministry of Health's Annual Report (2019) also showed fluctuations in patient satisfaction levels, indicating the importance of consistent, high-quality interventions in healthcare facilities. One of the main strategies emphasized was improving communication between healthcare providers and patients. Effective communication is considered a key factor in enhancing trust, comfort, and overall satisfaction among patients.

In addition, Kismanto et al. (2023) found that service quality has a strong relationship with patient satisfaction. Good service quality can motivate patients to establish strong and lasting relationships with hospitals. Through this relationship, hospitals are better able to understand patient needs, minimize service errors, and prevent dissatisfaction. These findings reinforce the idea that service quality dimensions play a critical role in shaping patient perceptions and experiences.

Preliminary observations at RSGMP Prof. Dr. Moestopo indicate that among the dimensions of service quality, reliability has the highest score, suggesting that patients perceive the services as consistent and dependable. Responsiveness ranks second, reflecting that staff are considered relatively quick and attentive in serving patients. However, tangibles

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receive the lowest score, indicating that aspects such as room comfort, cleanliness, accessibility, and physical facilities have not been fully satisfactory. This condition suggests that there may be gaps in service quality that could affect overall patient satisfaction. Therefore, it is suspected that patient dissatisfaction may be related to tangibles, reliability, and responsiveness in the outpatient services of RSGMP Prof. Dr. Moestopo.

Based on these conditions, several problems can be identified, including complaints about limited waiting areas, long waiting times, unclear directions, and the limited ability of staff to use supporting equipment. There are also concerns regarding the availability and friendliness of staff, as well as the quality of information provided to patients. Furthermore, the responsiveness of medical personnel in terms of accuracy and speed of service delivery is still perceived as inadequate. Another important issue is that it is not yet known which dimension of service quality has the strongest influence on patient satisfaction.

Considering these issues and the limitations of time, cost, and resources, this study focuses on three main dimensions of service quality, namely tangibles, reliability, and responsiveness, and their influence on patient satisfaction through service quality as a mediating variable at RSGMP Prof. Dr. Moestopo. Patient satisfaction is a key factor in supporting the achievement of organizational goals in healthcare institutions. In service-based organizations, satisfaction is closely related to how well service quality dimensions are implemented in daily practice.

Therefore, this study aims to analyze how tangibles, reliability, and responsiveness affect patient satisfaction through service quality. It also seeks to explain how each dimension influences overall service quality and how service quality, in turn, shapes patient satisfaction. In addition, this study intends to identify which of these dimensions plays the most dominant role in influencing service quality and patient satisfaction at RSGMP Prof. Dr. Moestopo.

LITERATURE REVIEW

1. Health Services

Health services are any efforts organized by individuals or organizations to maintain and improve the level of health, prevent and treat disease, and restore the health of individuals, families, groups, and communities. Levey and Lomba in Mamik (2014) as cited from Sondakh (2022) and Asrul Aswar in Mamik (2014) as cited from Sondakh (2022) state that health services are organized efforts to maintain, improve, and restore health. Health services must be supported by health workers who have a high commitment to ethical standards and professionalism. Effective services contribute to increasing life expectancy and preventing disease through immunization, counseling, and the promotion of healthy living. In addition, fair and equitable services play a role in reducing social inequality and supporting social stability and national development. Ideal health services focus on a patient-centered approach, respecting patient values, preferences, and needs, and actively involving patients in medical decision-making.

2. Quality of Health Services

The quality of health services describes the extent to which the services provided are able to meet or exceed patient expectations. Indrasari (2019) as cited from Najib K. (2022) states that quality is a dynamic condition related to products, people, processes, and the environment that meets or exceeds customer expectations. Wahyudiyono (2021) as cited from Najib K. (2022) explains that service quality is the value given by customers based on the overall excellence of the service. Tjiptono in Indrasari (2019) as cited from Najib K. (2022) emphasizes that service quality is an effort to fulfill consumer needs delivered in an appropriate manner. The WHO emphasizes that quality health services must be safe, effective,

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timely, efficient, and patient-centered (Khoirunnisa, 2024). In addition, Regulation of the Minister of Health of the Republic of Indonesia No. 028/MENKES/PER/I/2011 states that clinics as health facilities must provide quality services to improve the level of public health.

3. Dimensions of Service Quality (SERVQUAL)

Service quality is often measured using the SERVQUAL model developed by Parasuraman, Zeithaml, and Berry (1990) in Pasolong (2011), which includes five main dimensions, namely tangibles, reliability, responsiveness, assurance, and empathy. Sugiarto (2021) as cited from Doni, L.P. (2025) states that service quality is a critical component that influences patient experience. Fristiohady (2020) as cited from Doni, L.P. (2025) explains that reliability is related to the ability to provide accurate and timely services, responsiveness shows promptness in responding to patient needs, assurance is related to guarantees of safety and competence, empathy reflects emotional concern for patients, and tangibles are related to the condition of the physical service environment. Tumsekcali (2021) as cited from Doni, L.P. (2025) adds that the effectiveness of treatment and good communication are important elements in ensuring service quality. Hanson and Thibodeau (2019) state that SERVQUAL remains relevant, but needs adjustment to developments in technology and patient data security.

4. Factors Affecting Service Quality

The quality of health services is influenced by various factors such as technical competence, access to services, effectiveness, interpersonal relationships, continuity of care, safety, comfort, and timeliness. Lori Di Prete Brown mentions that technical competence is related to skills and compliance with service standards. Access to services includes the availability and affordability of services. Good interpersonal relationships build patient trust through effective communication. Service safety reduces the risk of injury and medical errors, thereby increasing patient peace of mind. Comfort and timeliness are also important factors in the perception of service quality (Brown in various studies on health service quality).

5. Patient Satisfaction

Patient satisfaction is a comprehensive evaluation of the patient's experience while receiving health services. Kalaja (2023) as cited from Aribowo (2024) states that satisfaction is influenced by the quality of interaction with medical staff, waiting time, and treatment outcomes. Crimson in Hasyim (2019) as cited from Dewi M.S. (2022) explains that patient satisfaction arises from the evaluation of service experiences provided by health workers. Friendly service and adherence to the code of ethics give positive value to the patient's healing process. Patient satisfaction data can also be utilized by hospital management as a basis for decision-making and performance improvement (Aribowo, 2024).

6. Factors Affecting Patient Satisfaction

Patient satisfaction is influenced by the quality of interaction with medical staff, waiting time, and treatment outcomes (Aribowo, 2024). Hodijah (2022) as cited from Pratiwi D. (2024) adds that the level of knowledge, attitudes, awareness, socio-economic conditions, value systems, understanding of service users, and the empathy of health workers also influence patient satisfaction. Patients who feel heard, respected, and receive clear information tend to be more satisfied and compliant with the treatment they undergo.

RESEARCH METHODOLOGY

This study employed a descriptive research design with a quantitative approach and a correlational study design, aiming to analyze the influence of tangibles, reliability, and responsiveness on patient satisfaction through service quality at the Outpatient Installation of RSGMP Prof. Dr. Moestopo (Beragama) during October–November 2025.

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The population of this study consisted of returning patients who received outpatient services at RSGMP Prof. Dr. Moestopo (Beragama), totaling 2,804 patients. The sample was determined using purposive sampling and the Slovin formula with a 10% margin of error, resulting in 96 respondents.

Data were collected using a closed-ended questionnaire with a five-point Likert scale (1–5). The independent variables were tangibles (X1), reliability (X2), and responsiveness (X3), the dependent variable was patient satisfaction (Y), and service quality acted as the intervening variable (Z).

Prior to analysis, the instrument was tested for validity using Pearson correlation and for reliability using Cronbach's Alpha (≥ 0.60). All analyses were conducted using SPSS version 27.0.

Data analysis techniques included descriptive statistics, multiple regression analysis, t-tests, F-tests, and the coefficient of determination (R^2). Hypothesis testing was performed at a 5% significance level ($\alpha = 0.05$) to examine the partial and simultaneous effects of the independent variables on patient satisfaction through service quality.

RESULTS AND DISCUSSION

Result

a. Validity Test

Table 1. Validity Test Result

Variable	Questionnaire	R_{count}	R_{table}	Description
Tangibles	Butir 1	.741**	0,2006	Valid
	Butir 2	.799**	0,2006	Valid
	Butir 3	.729**	0,2006	Valid
	Butir 4	.588**	0,2006	Valid
	Butir 5	.789**	0,2006	Valid
Reliability	Butir 1	.816**	0,2006	Valid
	Butir 2	.835**	0,2006	Valid
	Butir 3	.844**	0,2006	Valid
	Butir 4	.838**	0,2006	Valid
	Butir 5	.846**	0,2006	Valid
Responsiveness	Butir 1	.842**	0,2006	Valid
	Butir 2	.830**	0,2006	Valid
	Butir 3	.817**	0,2006	Valid
	Butir 4	.817**	0,2006	Valid
	Butir 5	.697**	0,2006	Valid
Service Quality	Butir 1	.882**	0,2006	Valid
	Butir 2	.845**	0,2006	Valid
	Butir 3	.893**	0,2006	Valid
	Butir 4	.860**	0,2006	Valid
	Butir 5	.855**	0,2006	Valid
	Butir 5	.862**	0,2006	Valid

Based on the validity test of the instrument using SPSS version 27.0 on 96 respondents, all questionnaire items were declared valid. The validity criterion was determined by comparing the calculated r values with the r table value of 0.2006 at a degree of freedom (df = 94). The analysis results showed that all items for the variables of tangibles, reliability, responsiveness, and service quality had calculated r values greater than the r table value. Therefore, all indicators of each variable were considered able to accurately measure the research constructs and were suitable for use in the subsequent analysis stage.

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b. Reliability Test

Table 2. Reliability Test Result

Cronbach's Alpha	N of Items
0,776	5
0,891	5
0,837	5
0,917	5

Based on the reliability test of the research instrument using Cronbach's Alpha method, as stated by Ghozali (2021), all variables in this study were declared reliable. The reliability criterion was set at a Cronbach's Alpha value greater than 0.60. The test results showed that the tangibles variable had a Cronbach's Alpha of 0.776, the reliability variable 0.891, the responsiveness variable 0.837, and the service quality variable 0.917. All values exceeded the minimum threshold, indicating that all questionnaire items for each variable were consistent and stable in measuring the research constructs. Therefore, the research instrument can be considered highly reliable and suitable for further analysis.

c. Multiple Linear Regression Analysis Test

Table 3. Multiple Linear Regression Analysis Test Result

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	1.969	1.137		1.732	.087
	Tangibles	.256	.054	.320	4.749	<.001
	Reliability	.282	.087	.291	3.256	.002
	Responsiveness	.376	.092	.369	4.071	<.001

Multiple linear regression analysis was conducted to examine the effect of tangibles (X1), reliability (X2), and responsiveness (X3) on service quality (Y) at the Outpatient Installation of RSGMP Prof. Dr. Moestopo (Beragama). The results showed that the resulting regression equation was Y = 1.969 + 0.256X1 + 0.282X2 + 0.376X3. The constant value of 1.969 indicates that if all independent variables are zero, the service quality would be at this value. Partially, the tangibles variable has a positive and significant effect on service quality ($\beta = 0.256$; $p < 0.001$), the reliability variable also has a positive and significant effect ($\beta = 0.282$; $p = 0.002$), and the responsiveness variable has the largest positive and significant effect ($\beta = 0.376$; $p < 0.001$). Thus, it can be concluded that tangibles, reliability, and responsiveness simultaneously have a positive and significant effect on service quality.

d. Simultaneous Significance Test (F-Test)

Table 4. F-Test Reseult

ANOVA[a]

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	1732.073	3	577.358	219.015	<.001[b]
	Residual	305.794	116	2.636		
	Total	2037.867	119			

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A simultaneous hypothesis test was conducted to examine the effect of tangibles, reliability, and responsiveness on service quality at the Outpatient Installation of RSGMP Prof. Dr. Moestopo (Beragama). The F-test results showed an F-value of 219.015 with a significance level of 0.000 (< 0.05). This value is also greater than the F-table value of 2.704, leading to the rejection of H0 and acceptance of H1. Therefore, it can be concluded that tangibles, reliability, and responsiveness simultaneously have a significant effect on service quality. These results indicate that the regression model meets the significance criteria and is suitable for explaining the relationship between the independent and dependent variables, further supported by the coefficient of determination analysis.

e. Partial T-Test

Table 5. Partial T-Test

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	1.969	1.137		1.732	.087
	Tangibles	.256	.054	.320	4.749	<.001
	Reliability	.282	.087	.291	3.256	.002
	Responsiveness	.376	.092	.369	4.071	<.001

A partial hypothesis test was conducted to examine the effect of each variable—tangibles (X1), reliability (X2), and responsiveness (X3)—on service quality (Y) at the Outpatient Installation of RSGMP Prof. Dr. Moestopo (Beragama). Based on the t-test results at a 5% significance level (t-table = 1.981; df = 92), all independent variables showed a significant effect. The tangibles variable had a t-value of 4.749 with a significance of < 0.001, the reliability variable had a t-value of 3.256 with a significance of 0.002, and the responsiveness variable had a t-value of 4.071 with a significance of < 0.001. All t-values were greater than the t-table value and all significance values were less than 0.05, leading to the rejection of H0 for each test. Therefore, it can be concluded that tangibles, reliability, and responsiveness partially have a positive and significant effect on service quality.

f. R-Square Test

Table 6. R-Square Test Result

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.868[a]	.754	.746	1.213

Based on the regression analysis, the R Square (R^2) value of 0.746 indicates that tangibles (X1), reliability (X2), and responsiveness (X3) together explain 74.6% of the variation in service quality (Y) at the Outpatient Installation of RSGMP Prof. Dr. Moestopo (Beragama). The remaining 25.4% is explained by other factors outside the research model. These results confirm that the independent variables have a dominant influence on service quality.

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Discussion

1. Tangibles Affect Service Quality at the Outpatient Installation of RSGMP Prof. Dr. Moestopo (Beragama)

The results of the study indicate that the tangibles variable has a positive and significant effect on service quality at the Outpatient Installation of RSGMP Prof. Dr. Moestopo (Beragama), as evidenced by a significance value of 0.000 (< 0.05). This means that the better the physical aspects or direct evidence (tangibles), the higher the patients' perception of the service quality received. The tangibles dimension includes the condition of facilities, cleanliness, room comfort, and the professional appearance of healthcare staff (Parasuraman et al., 1990; Kirana, 2024). A clean, safe, and comfortable physical environment enhances patient safety, trust, and overall service experience (KARS, 2022; Sugiarto, 2021).

These findings are consistent with previous research, such as Tampubolon, Silalahi, & Siddiq (2021), which found a positive influence of tangibles on service quality at RS Mitra Medika Amlas Medan, particularly regarding cleanliness and facility comfort. Patients can directly perceive service quality through well-organized and clean facilities. However, this result differs from Kirana (2024), who reported that tangibles did not have a significant effect on patient satisfaction at the outpatient installation of RSKGMP Prof. Dr. Moestopo (Beragama). Based on these findings, improvements in tangibles can be made through better management of waiting areas and facilities, the implementation of online registration and queue systems, and the provision of digital information media such as information screens, mobile applications, or automated messages to help patients understand the location and schedule of services. These measures are expected to significantly enhance service quality by strengthening the physical elements directly perceived by patients.

2. Reliability Affects Service Quality at the Outpatient Installation of RSGMP Prof. Dr. Moestopo (Beragama)

The results of the study indicate that the reliability variable has a positive and significant effect on service quality at the Outpatient Installation of RSGMP Prof. Dr. Moestopo (Beragama), as evidenced by a significance value of 0.002 (< 0.05). This shows that the higher the reliability of the service, the better the service quality perceived by patients. Reliability reflects the hospital's ability to provide consistent, accurate, and standardized services, including procedural accuracy, patient safety, and timely service delivery (Koampa et al., 2023; KARS, 2022).

These findings are in line with the research of Tampubolon, Silalahi, & Siddiq (2021), which found a positive effect of reliability on service quality at RS Mitra Medika Amlas Medan, where the accuracy and trustworthiness of nurses played a crucial role in patient experience. However, these results differ from Kirana (2024), who reported that reliability did not have a significant effect at the outpatient installation of RSKGMP Prof. Dr. Moestopo (Beragama), due to limitations in facilities and staff competence.

Based on these findings, improvements in reliability can be made through the development of doctors' and medical staff competencies via continuous training, consistent implementation of SOPs, utilization of electronic medical records, digital scheduling systems, and regular performance evaluations with feedback. These measures are expected to ensure services are accurate, safe, consistent, and standard-compliant, thereby increasing service reliability and patient satisfaction.

3. Responsiveness Affects Service Quality at the Outpatient Installation of RSGMP Prof. Dr. Moestopo (Beragama)

The results of the study indicate that responsiveness has a positive and significant effect on service quality at the Outpatient Installation of RSGMP Prof. Dr. Moestopo (Beragama), as

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evidenced by a significance value of 0.000 (< 0.05). This shows that the faster, more accurate, and empathetic the hospital responds to patient needs, the higher the patients' perception of the service quality received. Responsiveness includes the speed of handling complaints, providing clear information, and giving attention to patients, which can reduce frustration, enhance patients' sense of being valued, and strengthen their trust (Fristiohady, 2020; Sugiarto, 2021; KARS, 2022).

These findings are in line with the research of Tampubolon, Silalahi, & Siddiq (2021), which found a positive effect of responsiveness on patient satisfaction at RS Mitra Medika Amlas Medan. Conversely, the study by Napa et al. (2025) at Puskesmas Kota Kecamatan Enrekang found a non-significant effect, possibly because other factors, such as friendliness or service comfort, also influenced patient satisfaction.

Based on these findings, improvements in responsiveness can be achieved through strengthening human resource competencies and leveraging technology, such as digital information screens (digital signage) to display service flow, estimated waiting times, and health education. These measures are expected to reduce delays, minimize complaints, enhance patient satisfaction and trust, and overall, continuously improve service quality.

4. Tangibles, Reliability, and Responsiveness Simultaneously Affect Service Quality at the Outpatient Installation of RSGMP Prof. Dr. Moestopo (Beragama)

The study results indicate that tangibles, reliability, and responsiveness simultaneously have a positive and significant effect on service quality at the Outpatient Installation of RSGMP Prof. Dr. Moestopo (Beragama). Among the three variables, responsiveness is the dominant factor with a coefficient of 0.376 and significance < 0.001, indicating that the speed and accuracy in responding to patient needs play a crucial role in shaping perceptions of service quality. Reliability also contributes significantly (coefficient 0.282; p = 0.002), highlighting the importance of consistent and accurate service in building patient trust. Meanwhile, tangibles have a positive but smaller effect (coefficient 0.256; p < 0.001), confirming that physical facilities remain important in supporting the patient experience.

These findings are consistent with Kirana (2024), which emphasizes the dominance of responsiveness in determining patient satisfaction at the outpatient installation of RSGMP, but differ from the study by Napa et al. (2025) at Puskesmas Kota Kecamatan Enrekang, which found that responsiveness was not dominant because patient satisfaction was also influenced by other factors, such as staff friendliness or the smoothness of procedures.

To optimally improve service quality, the hospital needs to strengthen all three aspects in a balanced manner. Strategic measures include implementing digital queue systems and online reservation applications to speed up service, using a Patient Management System to record and follow up on patient complaints in real time, and a performance monitoring dashboard to continuously track tangibles, reliability, and responsiveness. Additionally, training in communication skills, improving service SOPs, stress management programs, and enhancing physical facilities, such as comfortable waiting rooms and adequate medical equipment, are expected to increase patient satisfaction and sustainably improve service quality.

CONCLUSION

Based on the results of the study on the influence of tangibles, reliability, and responsiveness on service quality at the Outpatient Installation of RSGMP Prof. Dr. Moestopo (Beragama), it can be concluded that all three variables have a positive and significant effect on service quality. Tangibles play a role in creating comfort through adequate physical facilities, reliability reflects consistent and effective service, while responsiveness is the dominant factor, characterized by fast, accurate, and responsive service to patient needs and complaints.

The simultaneous improvement of these three aspects positively impacts patient perception, trust, and satisfaction with the services received.

Based on these findings, the recommendations are as follows: 1) conduct routine evaluations of the medical team's performance according to hospital operational standards to maintain service quality; 2) provide clinical, communication, and quality management training to strengthen the reliability and professionalism of the medical team; 3) develop digital systems such as online reservation applications, electronic queue systems, and electronic medical records to expedite service, minimize errors, and enhance the patient experience; 4) provide attention and recognition to the medical team to increase motivation and performance in supporting sustainable service quality.

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