

## **Analysis Of BPJS Types, Access And Aspects Interpersonal On Satisfaction Patients At The Health Center Medokan Ayu Surabaya**

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### **ABSTRACT**

Patient satisfaction is one of the goals of the Surabaya City Government in the 2016 - 2021 RPJMD which has been formulated in the performance of government administration and public services with the target of increasing the capacity and competence of government officials, improving good government administration and improving the quality of public services. This type of research is cross sectional study. Analytical survey research design. The population is BPJS patients at the Medokan Ayu Surabaya Community Health Center in 2021, totaling 310 respondents in the last 3 months. The sampling technique used accidental sampling so that the sample was 75 people. Data collection uses questionnaires, and data analysis uses contingency coefficient correlation. The results of the research show that bivariate analysis with the results of the correlation hypothesis test of the contingency coefficient for each variable, obtained a BPJS type variable with a p-value of 0.002 ( $p < 0.005$ ) with a correlation coefficient value of 0.346, meaning that the level of strength of the relationship is sufficient and the value is positive so that the relationship is in the same direction. The access variable has a p-value of 0.000 ( $p < 0.005$ ) with a correlation coefficient of 0.429, meaning that the level of strength of the relationship is sufficient and the value is positive so that the relationship is in the same direction. The interpersonal aspect variable has a p-value of 0.001 ( $p < 0.005$ ) with a correlation coefficient of 0.402, meaning that the level of relationship strength is sufficient and the value is positive so that the relationship is in the same direction. Patient satisfaction is an important element in evaluating the quality of BPJS services by measuring the patient's response after receiving the service. With an assessment of these services, it is hoped that these health service facilities will continue to exist and continue to develop (Abidin, 2016). Several factors that give rise to a sense of satisfaction in patients are access, interpersonal aspects. Based on this, the researchers assume there is a relationship between BPJS Type, Access and Interpersonal Aspects on patient satisfaction at the Medokan Ayu Surabaya Community Health Center in 2021.

**Keywords:** Access, Types of BPJS, Interpersonal Aspects, Patient Satisfaction

### **INTRODUCE**

Community health centers as health service institutions that are capital and human resource intensive require a good corporate culture. The main key to the success of the Community Health Center lies in two main things, namely the effective and efficient use of resources, especially human resources, and the satisfaction of users of the Community Health Center services (patients and families) (Tores, 2015). In essence, the basis of the Community Health Center is to fulfill the needs and demands of patients who hope for healing and recovery from the pain they suffer. Patients expect services that are ready, fast, responsive and comfortable for patient complaints. In meeting the needs of these patients, excellent service is the mainstay of services at the Community Health Center (Eka Yudhyani, 2016).

One of the current health center service strategies is to take a health service quality approach that is oriented towards patient satisfaction. The strategy for assessing patient satisfaction can be determined by the health services experienced by the patient while at the Puskesmas.

Patient satisfaction can be assessed from when the patient first arrives until the patient returns home from the health center. Fulfilling patient needs will have an impact on patient satisfaction with Puskesmas health services, but health workers often do not realize that patient satisfaction is a dimension of assessing the quality of Puskesmas services.

According to 2014 Indonesian Health Service data, East Java is the province that has the second highest number of Community Health Centers after DKI Jakarta. Surabaya as the capital of East Java is the center of the city in East Java and has the most health centers in East Java. As one of the providers of health services, Community Health Centers in the City of Surabaya have experienced much progress, one of which can be seen from the increasing number of Community Health Centers (Azkiyah, 2015).

Patient satisfaction is one of the goals of the Surabaya City Government in the 2016 - 2021 RPJMD which has been formulated in the performance of government administration and public services with the target of increasing the capacity and competence of government officials, improving good government administration and improving the quality of public services (Surabaya, 2020 ). Based on the 2020 Surabaya City Government Community Satisfaction Survey Report, data on community satisfaction with community health center services is as follows:

Table 1.1 IKM Health Service Unit

Health Services Unit			SMEs (IndexCommunity Satisfaction)	Service Satisfaction	Validity
Ketabang Center	Community Health	86.54		Good	Valid
Klampis Health Center	Ngasem Community	80.49		Good	Valid
South Krembangan Health Center		79.17		Good	Valid
Public health Tongue	centerKulon	82.68		Good	Valid
Lontar Health Center		86.74		Good	Valid
Medokan Ayu Health Center		79.64		Good	Valid
Menur Pumpungan Health Center	Community	91.67		Very good	Valid
Morokrembangan Health Center	Community	85.00		Good	Valid
Peneleh Center	Community Health	85.13		Good	Valid

Source: (Surabaya, 2020)

Based on the data above, it can be seen that the average IKM (Community Satisfaction Index) for Community Health Centers in Surabaya is good and valid. Then it can be seen that the IKM (Community Satisfaction Index) for the Medokan Ayu Health Center is good with good service satisfaction and valid validity. However, the IKM (Community Satisfaction Index) at the Medokan Ayu Community Health Center is still the second lowest compared to other community health centers with an index value that is still less than other community health centers which have reached an index value of 80 or even 90. This needs to be highlighted and reviewed in order to achieve a very good index value and equivalent to other

health centers.

Based on the background above, the problem formulation in this research is the relationship between BPJS type, access and interpersonal aspects on patient satisfaction at the Medokan Ayu Community Health Center, Surabaya.

## METHODS

The location of this research is at the Medokan Ayu Community Health Center, Surabaya. This research is quantitative using survey research methods, namely surveys or research that tries to explore how and why health phenomena occur. Then analyze the dynamics of correlation between phenomena or between risk factors, while a risk factor is a phenomenon that results in an effect (influence). The type of research uses cross-sectional studies, namely studies that take time samples, behavioral samples, event samples at a certain time only (Sumantri, 2011). (independent variable) where variable X1 is Jans BPJS, variable X2 is Access, variable X3 is Interpersonal Aspect and the dependent variable is only once at a time. Where variable Y is patient satisfaction.

The population in this study were BPJS patients at the Medokan Ayu Surabaya Health Center in 2021 with a population of 310 people in the last 3 months. Deep sample collection technique

This research uses the Accidental Sampling technique. Accidental Sampling is a technique for determining samples based on chance, that is, any patient who happens to meet the researcher can be used as a sample, if it is deemed that the person they accidentally met is suitable as a data source. So the sample used in this research was 75 people. The data collection method uses an analysis questionnaire sheet. The statistical test used is the contingency coefficient correlation analysis test.

## RESULT

### A. Univariate Analysis

#### 1. Characteristics Based on Age of Respondents.

The characteristics according to age of the respondents based on the results of research conducted at the Medokan Ayu Surabaya health center are as follows:

Table 4.1 Characteristics based on age of respondents at the Medokan Ayu Surabaya health center.

Age	Total	
	$\Sigma$	%
< 20	3	4.0
20 – 35	37	49.3
>35	35	46.7
Total	75	100.0

Based on table 4.1, it can be seen that almost half of the respondents, namely 20-35 years old, were 37 people (49.3%). From a total of 75 samples.

## 2. Characteristics Based on BPJS Type of Respondents.

Characteristics according to BPJS type of respondents with the results of research conducted at the Medokan Ayu Surabaya health center are as follows:

Table 4.2 Characteristics Based on BPJS Type of Respondents at Medokan Ayu Community Health Center, Surabaya.

BPJS type	Total	
	$\Sigma$	%
PBI	28	37.3
NON PBI	47	62.7
Total	75	100.0

Based on table 4.2, it can be seen that half of the respondents were NON PBI, 47 people (62.7%). From a total of 75 samples.

## 3. Distribution of Access Variables at the Medokan Ayu Community Health Center, Surabaya

Table 4.3 Distribution based on Access variable at Medokan Ayu Surabaya Community Health Center.

Access	Total	
	$\Sigma$	%
NO	21	28.0
YES	54	72.0
Total	75	100.0

Source: Simplified primary data in 2021

Based on the research results in table 4.3. It is known that half of the mother respondents had easy or comfortable access to the Medokan Ayu Surabaya Community Health Center who chose the yes criteria, namely 54 (72.0%) respondents.

## 4. Distribution of Interpersonal Aspect Variables at the Medokan Ayu Community Health Center, Surabaya

Table 4.4 Distribution Based on Interpersonal Aspect variables at Medokan Ayu Surabaya Community Health Center.

Aspect Interpersonal	Total	
	$\Sigma$	%
Bad Communication	23	30.7
Good Communication	52	69.3
Total	75	100.0

Source: Simplified primary data in 2021

Based on the research results in table 4.4. It is known that half of the mother respondents received interpersonal aspects with good communication at the Medokan Ayu Surabaya Community Health Center, namely 52 (69.3%) respondents.

#### 5. Distribution of Patient Satisfaction Variables at the Medokan Ayu Surabaya Community Health Center

Table 4.5 Distribution based on patient satisfaction variables at the Medokan Ayu Surabaya health center.

Patient Satisfaction	Total	
	$\Sigma$	%
NOT SATISFIED	5	6,7
SATISFIED	70	93.3
Total	75	100.0

Source: Simplified primary data in 2021

Based on the research results in table 4.5. It is known that almost all of the respondents said they were satisfied at the Medokan Ayu Surabaya Community Health Center who chose the satisfaction criteria, namely 70 (93.3%) respondents.

#### B. Bivariate Analysis

Bivariate analysis is used to analyze the relationship between independent variables and dependent variables. The following are the results of bivariate analysis:

1. The Relationship between BPJS Type and Patient Satisfaction at the Medokan Ayu Surabaya Community Health Center

**Table 4.6 Relationship between BPJS Type and Patient Satisfaction at Medokan Ayu Surabaya Community Health Center in 2021**

BPJ S type	Patient Satisfaction					p-value	Correlation Coefficient
	Not satisfied		Satisfied		Total		
	%	N	%	N	%		
PBI	6.66	23	30.6	28	100	0.002	0.346 (sufficient correlation)
NON PBI	0	47	62.6	47	100		
Total	6.66	70	93.3	75	100		

Based on table 4.6. It is known that half of the respondents who had satisfaction at the Medokan Ayu Surabaya Community Health Center were respondents who used the BPJS NON PBI type, namely 47 (62.6%) while respondents who were not satisfied with the BPJS NON PBI type were 23 (30.6%) .

Respondents who said they were dissatisfied and had the BPJS NON PBI type were 0 (0%), and were dissatisfied and had the BPJS PBI type as many as 5 (6.66%).

The results of the contingency coefficient correlation hypothesis test obtained a p-value

of 0.002 ( $P < 0.05$ ), so it can be concluded that  $H_0$  is rejected, meaning there is a relationship between BPJS Type and Patient Satisfaction at the Medokan Ayu Community Health Center, Surabaya in 2021. In addition, the correlation coefficient value was obtained, amounting to 0.346, meaning that the level of strength of the relationship between the BPJS Type variable and patient satisfaction is sufficient. The correlation coefficient figure is positive so that the relationship between the two variables is unidirectional (unidirectional type of relationship), thus it can be interpreted that there is a relationship between BPJS type and patient satisfaction at the Medokan Ayu Surabaya Community Health Center in 2021 with a sufficient and unidirectional correlation.

## 2. The Relationship between Access and Patient Satisfaction at the Medokan Ayu Community Health Center, Surabaya

Table 4.7 The Relationship between Access and Patient Satisfaction at the Medokan Ayu Community Health Center, Surabaya in 2021

Community-based Survey, January to June 2015										
Patient Satisfaction							p-value	n	Correlation Coefficient	
ss	Acce	Not satisfied	Satisfied		Total					
			%	N	%	N				%
	No	6.66	16	21.3	21	100				
	Yes	0	54	72	54	100	0,000		0.429 (sufficient correlation)	
	Total	6.66	70	93.3	75	100				

Source: Simplified primary data in 2021

Based on table 4.7. It is known that half of the respondents who had satisfaction at the Medokan Ayu Surabaya Community Health Center were higher among respondents who had access, namely 54 (72%). compared to respondents who did not have access, namely 16 (21.3%). Respondents who said they were dissatisfied and had access were 0 (0%), and dissatisfied and did not have access were 5 (6.66%).

The results of the contingency coefficient correlation hypothesis test obtained a p-value of 0.000 ( $P < 0.05$ ), so it can be concluded that  $H_0$  is rejected, meaning there is a relationship between Access and Patient Satisfaction at the Medokan Ayu Community Health Center, Surabaya in 2021. In addition, a correlation coefficient value of 2021 was obtained. 0.429, meaning that the level of strength of the relationship between the access variable and patient satisfaction is sufficient. The correlation coefficient figure is positive so that the relationship between the two variables is unidirectional (type of unidirectional relationship), thus it can be interpreted that there is a relationship between access and patient satisfaction at the Medokan Ayu Surabaya Community Health Center in 2021 with a sufficient and unidirectional correlation.

### 3. The Relationship between Interpersonal Aspects and Patient Satisfaction at the Medokan Ayu Community Health Center, Surabaya

Table 4.8 The Relationship between Interpersonal Aspects and Patient Satisfaction at the Medokan Ayu Surabaya Community Health Center in 2021

Patient Satisfaction						p-value	n	Correlation Coefficient
Aspect	Not satisfied	Satisfied		Total				
		%	N	%	N			
Bad Communication	6.66	18	24	23	100	0.001	0.402 (sufficient correlation)	
Good Communication	0	52	69.3	52	100			
Total	6.66	70	93.3	75	100			

Source: Simplified primary data in 2021

Based on table 4.8. It is known that the majority of respondents who had satisfaction at the Medokan Ayu Surabaya Community Health Center was higher among respondents who received good communication, namely 52 (69.3%) compared to respondents who received bad communication, namely 18 (24%). Respondents who said they were dissatisfied and received good communication were 0 (0%), and dissatisfied and received bad communication were 5 (6.66%).

The results of the contingency coefficient correlation hypothesis test obtained a p-value of 0.001 ( $P < 0.05$ ), so it can be concluded that  $H_0$  is rejected, meaning there is a relationship between interpersonal aspects and patient satisfaction at the Medokan Ayu Health Center, Surabaya in 2021. In addition, the correlation coefficient value was obtained. of 0.402, meaning that the level of strength of the relationship between interpersonal aspect variables and patient satisfaction is sufficient. The correlation coefficient figure is positive so that the relationship between the two variables is unidirectional (type of unidirectional relationship), thus it can be interpreted that there is a relationship between interpersonal aspects and patient satisfaction at the Medokan Ayu Health Center, Surabaya in 2021 with sufficient and unidirectional correlation.

## DISCUSSION

### A. Relationship between BPJS Type and Patient Satisfaction at Medokan Ayu Community Health Center, Surabaya.

Non-PBI BPJS participants are BPJS Health participants who pay contributions independently. BPJS Non PBI patient satisfaction has a higher level of satisfaction because according to respondents, the service is better than BPJS PBI. According to Ikram, (2013) BPJS patients usually queue longer because there are many letters or permits that must be approved. PBI in paying BPJS contributions is subsidized by the government, this makes Non-PBI feel like they have more rights because they pay contributions at an adjusted price. In fact, in services at the Medokan Ayu Surabaya Community Health Center, BPJS participants are not differentiated in their services. This is what makes the satisfaction level of PBI BPJS patients more satisfied than non-PBI patients.

In fact, according to (Nurhuda, 2019), BPJS Health participants have rights that need to be protected and respected as consumers of health services. Regarding the rights and

obligations of BPJS Health participants, we can see this in the provisions of Article 24 to Article 26 of the Health Social Security Administering Body Regulation Number 1 of 2014 concerning Health Provider Guarantees. All BPJS participants receive health services by providing easy access to health services, improving standardized health services for participants, and transparent and accountable financial management.

The quality of nursing services should be sufficient so that the health service is able to carry out its responsibilities but cannot differentiate nursing services to patients who are not recipients of contribution assistance from patients who are recipients of contribution assistance. So that non-recipients of contribution assistance do not feel satisfied with the services at the Medokan Ayu Surabaya Community Health Center. According to research conducted by Jon (2010) regarding the analysis of the level of satisfaction of general patients and Jamkesmas patients with the quality of inpatient services at the Medokan Ayu Community Health Center, Surabaya. West Pasaman stated that the quality of class II inpatient services was better than the quality of class III inpatient services. Patient satisfaction is closely related to the marketing of health service establishments. Satisfied patients will recommend friends, family and neighbors, satisfied patients will come back for control or require other services. Satisfactory service will get more customers (Hayaza, 2013).

The research results showed that of the 75 patient respondents at the Medokan Ayu Surabaya Community Health Center, 28 patients used the BPJS PBI type and 47 patients used the NON PBI BPJS type. Meanwhile, data on respondents' choices in the Patient Satisfaction questionnaire stated that respondents who had satisfaction at the Medokan Ayu Surabaya Community Health Center of respondents who used the NON PBI BPJS type were 47 (62.6%) while respondents who were not satisfied with the NON PBI BPJS type were 23 (30.6%). Respondents who said they were dissatisfied and had the BPJS NON PBI type were 0 (0%), and were dissatisfied and had the BPJS PBI type as many as 5 (6.66%).

According to the researchers' assumptions, from these results it can be seen that the level of satisfaction of BPJS patients who do not receive contributions are more satisfied than PBI patients because patients who receive contribution assistance feel more limited in choosing health facilities, just as Non-PBI participants are entitled to class 1 facilities, class 2 and class 3 BPJS while PBI participants are only entitled to class 3 facilities. Non-PBI participants can choose health facilities that have been determined and collaborate with BPJS according to their domicile, while PBI participants can only seek treatment at level I health facilities at sub-district or village health centers. However, every month, non-PBI and PBI BPJS participants receive the same health services. So it can be concluded that BPJS patients who receive contribution assistance (PBI) feel less satisfied than patients who are non-PBI BPJS participants. So it can be concluded that patient satisfaction is the patient's subjective value of the services provided after comparing the results of the services provided with their expectations. Patients will feel satisfied if the services provided meet the patient's expectations or even exceed what the patient expected.

## **B. The Relationship between Service Access and Patient Satisfaction at the Medokan Ayu Community Health Center, Surabaya.**

Access to health services as a basic right must be realized fairly for all user groups without sacrificing customer satisfaction because it can encourage interest in repeat visits and patient loyalty in a health service facility. Access to health services affects patient satisfaction, this is in accordance with theory by (Whitty, 2018), the purpose of access is the actualization of health service utilization. Emphasis is clearly placed on considering user characteristics and health service characteristics in access evaluations. The idea is to identify the suitability between users and health services and the satisfaction felt by consumers.



Gulliford et al outlined the idea of measuring the accessibility of health services based on utilization, which depends on affordability, physical accessibility, and services received, not just on the issue of adequacy of supply. Available health services must be relevant and effective if the aim is to “gain access to satisfactory health outcomes”. The availability of services (supply) and barriers to access must be considered in the context of different perspectives, the need for health services and health supplies (demand), as well as the cultural suitability of various groups in society. Gulliford believes that equal access can be measured in terms of availability (supply), utilization or service results (demand). So it can be concluded that there are 3 (three) things that really play a role in influencing the accessibility of health services. These three things are supply (availability), barriers (obstacles), and demand (utilization).

Increasing access and at the same time equal distribution can be an accelerated step towards achieving equity in the performance of the health system. Harkin stated that achieving equitable health service equity has a number of dimensions. Access to health services should be determined by actual demand for health services rather than simply ability to pay or geographic location.

Access is a factor in patient satisfaction at the Medokan Ayu Community Health Center, Surabaya. As the theory by (Hafizurrachman, 2009), patient satisfaction with health services provided by service providers is greatly influenced by several factors including: reliability (consistency and reliability), responsiveness (willingness, readiness an accuracytime), competence (ease of contact and approach), communication (listening and maintaining understanding relationships), credibility (the value of trust and honesty), assurance of a sense of security (from risks and doubts), understanding (efforts to understand the patient's complaints and desires), form perceived service. Meanwhile, Jones (2012) in (Laksono, 2016) indicators for access to services in achieving patient satisfaction are Supply including the number of general practitioners, number of specialist doctors and number of service facilities. Barriers include: First, physical barriers (transportation, ability to move). Second, economic barriers (ability to pay, ownership of health insurance).

Third, geographical barriers (location or proximity to available health facilities). Demand includes the number of health service facility visits, population, inpatient utilization and emergency unit utilization.

The results of the research showed that 54 patient respondents at the Medokan Ayu Surabaya Community Health Center had easy or comfortable access, while the remaining 21 patient respondents at the Medokan Ayu Surabaya Community Health Center received access that was not easy or uncomfortable. Meanwhile, respondent data on the Access to Services variable stated that there were 54 (72%) compared to respondents who did not have access to services, namely 16 (21.3%). Respondents who said they were dissatisfied and had access to services were 0 (0%), and dissatisfied and did not have access to services were 5 (6.66%).

According to researchers' assumptions, the level of accessibility of health services is measured using several variables based on demand factors and supply factors. Demand factors include the number of visits to health service facilities, population, inpatient utilization, and emergency unit utilization. Supply factors include the number of general practitioners, the number of specialist doctors, and the number of service facilities. If this access is achieved, patients will feel satisfied themselves, and satisfied patients are a very valuable asset because if patients feel satisfied they will continue to use the service of their choice, but if patients feel dissatisfied they will tell other people twice as much. about his bad experience.

### **C. The Relationship between Interpersonal Aspects and Patient Satisfaction at the Medokan Ayu Community Health Center, Surabaya**

The interpersonal aspect is communication between two people, where direct contact occurs in the form of a two-way or reciprocal conversation. This type of communication takes place face to face or can be done through a medium as an intermediary, in the process of which messages are sent and received with several effects and instant feedback, which is said to be effective in changing other people's behavior. Interpersonal communication carried out by nurses in the application of communication to patient satisfaction through openness, namely the willingness of a nurse to respond happily to information received or conveyed by the patient so that good interpersonal relationships are established in the application of interpersonal communication.

Interpersonal aspects influence patient satisfaction, according to (Kila, Pangemanan and Tangkere, 2019). Generally, patients evaluate the quality of health services based on their interactions. This interaction can build patient trust in their doctors and nurses. The relationship between a patient and a doctor or nurse is very important because the patient can have a certain sense of comfort related to the results of the services provided to the patient. Interpersonal communication through openness is intended so that nurses and patients can become communicators and communicators, expressing ideas or ideas and even problems freely (not hidden) and openly without fear or shame. Both understand and understand each other. In this case, the nurse is the communicator and the patient is the communicant, and it is hoped that the nurse and patient must be open to each other in order to achieve good interpersonal communication. Another indicator in interpersonal communication, namely through similarities, is intended so that both parties, both nurses and patients, respect each other, are useful and have something important thing to donate. Communication will become more intimate and personal ties will become stronger if you have certain similarities, such as similar views, attitudes, similar ages and ideologies, and so on.

Results research revealed that as many as 52 mother respondents received interpersonal aspects with good communication at the Medokan Ayu Surabaya Health Center and the remaining 23 mother respondents received interpersonal aspects with poor communication at the Medokan Ayu Surabaya Community Health Center. Meanwhile, respondent data on the Interpersonal Aspect variable stated that there were 54 (72%) compared to respondents who did not have access to services, namely 16 (21.3%). For respondents who said they were dissatisfied and had access to services as many as 0 (0%), and dissatisfied and did not have access to services as many as 5 (6.66%). According to researchers' assumptions, an attitude of openness is a very important attitude carried out by a doctor in carry out interpersonal communication with patients. The principle of openness will make patients feel comfortable with the doctor who examines them when they are sick in the hospital. A supportive attitude is to be descriptive, spontaneous and proportional. A descriptive atmosphere will create a supportive attitude compared to an evaluative one. Provisional means having a thinking, open attitude, a willingness to hear different views and being willing to accept other people's opinions, if their opinions are wrong. According to researchers, a positive attitude is very important in implementing interpersonal communication, because a positive attitude can have an impact on the patient's mindset towards their illness. The positive attitude adopted by the doctor will have an impact on the patient's confidence in recovering from their illness. Equality is an attitude of considering each individual to be equal in every situation. One of them might be smarter. Richer, more handsome or beautiful, or more athletic than others. There are never two people who are truly equal in everything. Despite this inequality, interpersonal communication will be more effective when the atmosphere is equal. This means that there must be a tacit recognition that both parties are equally worthy and valuable, and that each party has something important to

contribute.

## CONCLUSION

1. There is a positive relationship between BPJS Type and patient satisfaction at the Medokan Ayu Surabaya Community Health Center in 2021. In addition, a correlation coefficient value of 0.346 was obtained, meaning that the level of strength of the relationship between the BPJS Type variable and patient satisfaction is sufficient. The correlation coefficient number is positive so that the relationship between the two variables is unidirectional (unidirectional type of relationship).
2. There is a positive relationship between access and patient satisfaction at the Medokan Ayu Surabaya Community Health Center in 2021. In addition, a correlation coefficient value of 0.429 was obtained, meaning that the level of strength of the relationship between the access variable and patient satisfaction is sufficient. The correlation coefficient number is positive so that the relationship between the two variables is unidirectional (unidirectional type of relationship).
3. There is a positive relationship between interpersonal aspects and patient satisfaction at the Medokan Ayu Surabaya Community Health Center in 2021. In addition, a correlation coefficient value of 0.402 was obtained, meaning that the level of strength of the relationship between interpersonal aspect variables and patient satisfaction is sufficient. The correlation coefficient number is positive so that the relationship between the two variables is unidirectional (unidirectional type of relationship).

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