

The Influence of the Role of Case Manager and Organizational Citizenship Behavior on Patient Satisfaction at Ulin Banjarmasin Regional Hospital

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Abstract

This study aims to first determine the role of Case Manager in its influence on patient satisfaction at Ulin Banjarmasin Regional Hospital, second determine the influence of Organizational Citizenship Behavior on patient satisfaction at Ulin Banjarmasin Regional Hospital, and third determine the influence of the role of Case Manager and Organizational Citizenship Behavior simultaneously on patient satisfaction at Ulin Banjarmasin Regional Hospital. Ulin Regional Hospital, Banjarmasin

The population of this study is all patients at Ulin Banjarmasin Regional Hospital who have used the facilities provided by the Case Manager during the period of 2022 to 2023, totaling 24,482 patients , so the number of samples is 24,482 respondents . This study is a quantitative study with a quantitative descriptive approach. The analysis tools used in this study include data validity and reliability tests. The hypothesis testing methods used are Kolmogorov-Smirnov, Multicollinearity Test, Autocorrelation Test and Heteroscedasticity Test, obtained in the form of conclusions obtained, namely the role of the case manager has an effect on patient satisfaction at Ulin Banjarmasin Regional Hospital , then Organizational Citizenship Behavior has an effect on patient satisfaction at Ulin Banjarmasin Regional Hospital , and the role of the case manager and Organizational Citizenship Behavior simultaneously have an effect on patient satisfaction through Organizational Citizenship Behavior . RSUD Ulin Banjarmasin . It is expected that there will be similar development research with more complete attention to other aspects as indicators of assessing factors that influence patient satisfaction. Also to use more and varied research subjects. The next research is expected to be able to increase the number of items in the questionnaire to measure more detail from each indicator, the addition of

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independent variables that are not in this study, as well as other newer and more contemporary dependent variables.

Keywords: case manager, organizational citizenship behavior , job satisfaction.

INTRODUCTION

Patient satisfaction is one of the important indicators that must be considered in health services. Patient satisfaction is the result of patient assessment of health services by comparing what is expected with the reality of health services received in a hospital health setting, Kotler (2007). The experts Sangadji and Sopiah (2013:182) stated that consumer satisfaction can create a good basis for repeat purchases and the creation of consumer loyalty; forming word of mouth recommendations that can benefit the company . Thus, patient satisfaction in the hospital depends on the service provided by the hospital. Low patient satisfaction rates will have an impact on the development of the hospital. For patients who are dissatisfied with the health services received, the patient decides to move to another hospital that can provide better services, Kotler (2007).

Patient satisfaction standards in health services are set nationally by the Ministry of Health. According to the Regulation of the Ministry of Health of the Republic of Indonesia in 2016 concerning Minimum Service Standards for patient satisfaction, it is above 95% (Ministry of Health, 2016). If a health service is found with a patient satisfaction level below 95%, then the health service provided is considered not to meet the minimum standards or is not of good quality.

In providing service satisfaction in hospitals, it is inseparable from the role of nurses and doctors as the front line in providing services to patients. The success of the hospital in achieving its goals, one of which is determined by the positive behavior of nurses and doctors who are responsible for the work done . In carrying out their duties, nurses and doctors must have full responsibility, namely to always try to encourage the emergence of extra role behavior in carrying out their duties or better known as *Organizational Citizenship Behavior* .

Organizational Citizenship Behavior (OCB) is an extra individual behavior, which is not directly or explicitly recognizable in a formal work system, and which in aggregate is able to increase the effectiveness of organizational functions (Organ, 1988). OCB has an important role for hospitals, considering that the quality of health services from nurses will determine the good or bad of the hospital. Nurses who have high OCB will create a



positive atmosphere in providing services to patients, so that they can make a positive contribution to the hospital.

Patient Care Manager (PCM) is a collaborative process in assessment, planning, facilitation, coordination of care, evaluation and advocacy of comprehensive service alternatives, through effective communication utilizing available resources such as nurses and doctors to produce quality services at effective costs . The implementation of *Patient-Centered Care* can encourage cost effectiveness compared to usual care (Pirhonen et al. 2019). *Case Manager* or also called Patient Care Manager (PCM) where its existence in *the hospital case management system* is expected to be able to support quality control and cost control. Through optimizing the coordination of interprofessional teams led by patient care managers, it can improve outcomes and reduce costs during treatment (Arana et al. 2017). Patient Care Manager (PCM) is considered a solution to integrate services in hospitals.

Ulin Banjarmasin Regional Hospital is a type A hospital with a full KARS accreditation status and is a reference for government and private hospitals in the South Kalimantan Province in general and the city of Banjarmasin in particular, which is expected to provide quality and affordable services to the community .

RSUD Ulin Banjarmasin as the focus of research because it has a strategic value as an area that has quite high complexity in the dynamics of service delivery, especially in terms of providing the best service to patients so that patients feel satisfied with the services provided. This can certainly be seen from the services provided by the Patient Service Manager (MPP) as *Case Manager* and *Organizational Citizenship Behavior* (OCB) at RSUD Ulin Banjarmasin.

Key Performance Indicators in medical services in the last 3 years are as follows:

Table 1 **Service Indicators of Ulin Banjarmasin Regional Hospital**

No	Indicator	Realization		
		2020	2021	2022
1	Bed Occupancy Rate (BOR)	60.06	65.82	64.69
2	Bed Turn Over (BTO)	43	40	40
3	Length of Stay (LOS)	6.2	6	6
4	Turn Over Interval (TOI)	2	2	2



From Table 1. above, it can be seen that the Main Performance Indicators in medical services in general in the last three years, for example, seen from the Bed Occupancy Rate (BOR) which is the percentage of bed usage per unit time of 60.06% in 2020 then experienced a fluctuation of 5.76% increase at 65.82% in 2021 and a decrease of 1.13% at 64.69% in 2022. This shows that in the last 3 years the use of hospital facilities by the community is still in an ideal condition, while for the Bed Turn Over (BTO) indicator, namely the frequency of bed usage, it was 43 times in 2020. Then 40 times in 2021 and 2022 indicate *The bed turnover rate or frequency of bed use in the last three years at Ulin Hospital is still in an ideal state*, for the Length of Stay (LOS) indicator, namely the average length of time a patient is treated, which is 6.2 days in 2020 and 6 days in 2021 and 2022, this shows that it is also in an ideal state, and for the Turn Over Interval (TOI) indicator, namely *the bed turnover period, namely the average day when the bed is not occupied until it is filled again*, which is 2 days from 2020 to 2022, this shows that the ideal empty bed is not filled in the range of 1-3 days. The Key Performance Indicators in this medical service are closely related to the services owned by Ulin Banjarmasin Hospital as a health service industry that always relies on the facilities and infrastructure provided and also the Human Resources owned in providing the best service.

Patient satisfaction is the output of health service "outcome". Thus, patient satisfaction is one of the goals of improving the quality of health services. Patient satisfaction is a level of patient feelings that arise as a result of the performance of health services obtained after the patient compares it with what is expected (Pohan, 2013). This Patient Satisfaction certainly refers to the satisfaction of users of Hospital services who are certainly customers of a health product provided, so Customer Satisfaction According to (Kotler and Keller, 2013:194) is the level of a person's feelings which is the result of a comparison between performance assessments or final product results in relation to customer expectations.

Customer satisfaction is one of the indicators of a business's success. This has become a common belief because by satisfying consumers, organizations can increase their profits and gain a wider market share. Customer or patient satisfaction is a level of patient feeling that arises as a result of the performance of the health services they receive after the patient compares it with what they expect (Pohan, 2015). Understanding patient needs and desires is an important thing that affects patient satisfaction, satisfied patients are very valuable assets because if patients are satisfied they will continue to use the services of their choice, but if they are not satisfied they will give twice as much to others about their bad experiences.

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According to Jatmiko (2014), the dimensions of patient satisfaction vary widely. In general, the dimensions of satisfaction can be divided into two types, namely satisfaction that refers to the application of the code of ethics and professional service standards and satisfaction that refers to the application of all health service requirements. Dimensions of quality satisfaction According to (Hafizurrahman, 2014), the dimensions of quality satisfaction are divided into five dimensions, including Tangibles, or physical evidence including physical facilities (buildings, rooms, and others), technology (equipment and equipment used), Reliability, or reliability is the company's ability to provide services as promised accurately and reliably. Must be in accordance with customer expectations means timely performance, error-free service, sympathetic attitude and with high accuracy, Responsiveness, or responsiveness is a company's ability to help and provide fast and accurate service to customers, and with clear information delivery, Assurance, or guarantees and certainty include aspects of knowledge, politeness, and the ability of company employees to foster customer trust in the company. Consisting of components: communication, credibility, security, competence, and courtesy. And empathy is manifested in the form of sincere and individual or personal attention given to customers by trying to understand consumer desires. Patient satisfaction with health services can also be measured using the dimensions of service quality proposed by *the World Health Organization* (WHO) in 2018, namely effective, safe, people-centered, timely, equitable, integrated, and efficient.

Organizational Citizenship Behavior (OCB) is a free individual behavior, meaning that the behavior is not a requirement that must be carried out in a particular role or a particular job description, but is a personally chosen behavior (Podsakoff, , 2006). *Organizational Citizenship Behavior* (OCB) can be defined as the work behavior of employees (nurses) in organizations (hospitals). Nurses are not forced to carry out certain job descriptions, nurses are personally free to choose to do work other than the nurse's job description. Prima Jaya, F (2022) states that OCB is an individual's voluntary behavior outside the job description that is explicitly or indirectly recognized by the formal reward system, and in aggregate can increase the effectiveness function in an organization.

Robbins and Judge (2009) stated that OCB is a choice behavior that is not part of an employee's formal work obligations, but supports the effective functioning of the organization. Meanwhile, Organ (1988) defines *Organizational Citizenship Behavior* (OCB) as behavior that is an individual choice and initiative, not related to the organization's formal reward system but in aggregate increases the effectiveness of the organization. Nurses who do work other than their job descriptions can encourage

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hospitals to achieve their goals because nurses who have high OCB can increase hospital effectiveness. According to Zabihi (2017), *Organizational Citizenship Behavior* (OCB) can indirectly bind leaders and employees, so that they can build attitudes and behaviors in accordance with the company's vision, mission and strategy. Leaders can establish mechanisms to maintain, develop or change existing Organizational. *Organizational Citizenship Behavior* (OCB). The *Organizational Citizenship Behavior* (OCB) mechanism taught by a leader will then be adapted by his followers through the socialization process. The socialization process to convey the vision and mission of a leader to the organization through *Organizational Citizenship Behavior* (OCB) requires appropriate leadership, so that it can increase strong organizational citizenship behavior.

According to Nemeth and Staw (in Mansoor, 2011), OCB can help organizations improve their performance and gain competitive advantage by motivating employees to do work that goes beyond the formal job requirements needed. In the current era of globalization where the business environment is increasingly competitive, *extra-role behaviors* are highly expected by organizations. With the presence of *extra-role behavior* among employees, the effectiveness of the company will increase. Companies or managers can save some of the resources that have been previously allocated if employees can display *extra-role behavior*. Podsakoff, et al. (2009) stated that the effects of OCB are not only felt by the organization but also by individuals who reflect OCB themselves. Individuals who display OCB will tend to get better performance ratings from their leaders than employees who do not display OCB. This is because employees who display OCB will be preferred and considered more beneficial to the organization or there is another possibility such as leaders who are aware that OCB plays an important role in the success of an organization and consider OCB as a form of employee commitment, will assess the performance of employees who display OCB better than those who do not display OCB.

Case Manager is part of the Patient Service Manager (MPP), the definition is a professional in the hospital who carries out patient service management. *Case Manager* is responsible for providing health services to patients effectively and efficiently. *Case Manager* plays an active role as a liaison between patients and doctors or other health workers needed in getting treatment. The very complex task of the *Case Manager* requires the *Case Manager* to be able to collaborate with other health service teams. Thus, a *Case Manager* has an important role in implementing interdisciplinary collaboration in health services provided to patients. (Sutoto nd, 2016)



The definition according to the American *Case Manager* Association (AMCA), reads as follows, namely a collaborative practice model between interdisciplinary services that include doctors, nurses, patients, social workers, and other health workers, communities and service providers. The management of this *Case Manager* includes communication between interdisciplinary services and facilitating services into one part or one container through more effective and efficient resource coordination. The purpose of this *Case Manager management* includes achieving optimal health levels in patients, as well as access to health services, and also the utilization of appropriate and competent resources, balanced by always paying attention to the rights of patients to determine their own choices and fate. (Powers et al., 2015)

Case Manager has several roles and these roles include:

1. *Case Managers* can play a role in coordinating the health care services that patients will receive.
2. role of the *Case Manager* is to facilitate communication between members of the health care team and patients.
3. *Case Manager* plays a role in supervising the follow-up of health care for patients who have been in the hospital for a long time.
4. *Case Managers* can anticipate and prevent follow-up of patient health care that exceeds the time specified in the treatment.
5. *Case Managers* can prevent duplication of interventions in providing care to patients.
6. *Case Manager* ensures implementation of the care plan and subsequent care follow-up.
- 7.

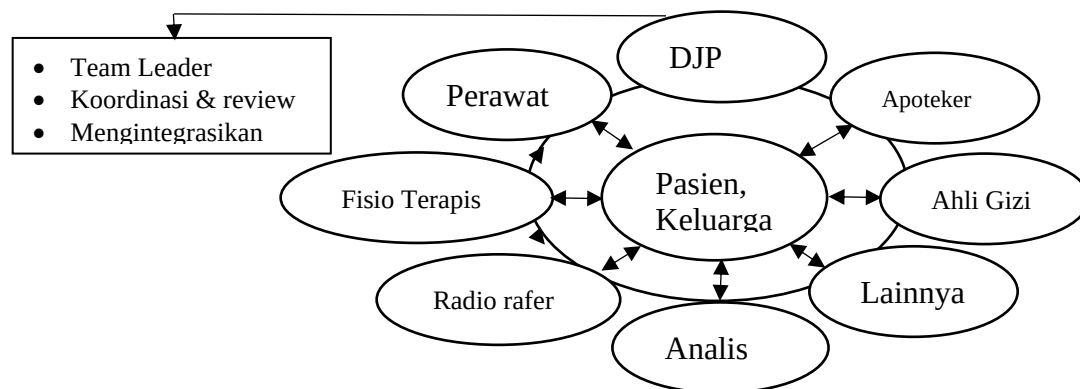


Figure 1 Diagram of Coordination, Integration, Continuity of Services in the Interdisciplinary Care Team

Based on the description above, the researcher is interested in examining the influence of the role of *Case Manager* and *Organizational Citizenship Behavior* (OCB) on Patient Satisfaction at the Ulin Banjarmasin Regional General Hospital (RSUD).

Objective

Based on the Background and Formulation of Research Problems, the objectives of this research are:

- i. To find out the role of *Case Manager* in influencing patient satisfaction at Ulin Banjarmasin Regional Hospital
- ii. To find out whether *Organizational Citizenship Behavior* influences patient satisfaction at Ulin Banjarmasin Regional Hospital.
- iii. To find out the role of *Case Manager* and *Organizational Citizenship Behavior* simultaneously influencing patient satisfaction. Ulin Regional Hospital, Banjarmasin.

DISCUSSION

Based on the results of the study and data analysis, this study is included in the category of causal research . Causal research is research that identifies causal relationships between various variables. The method used is *the Explanatory survey method* (a survey research method that aims to test hypotheses). The population in this study is all patients at Ulin Banjarmasin Hospital who have used the facilities provided by *the Case Manager* during 2022. The total number of Patients at Ulin Banjarmasin Hospital as Recipients of *Case Manager* Services in 2023, namely the test which is an inpatient patient and uses BPJS facilities at Ulin Banjarmasin Hospital. The unit of analysis of Recipients of *Case Manager* Services in 2023 was used in this study, therefore the size of the population of this study is all Patients Recipients of *Case Manager* Services at Ulin Banjarmasin Hospital in 2023, which is 24,482 patients , and if the population is known, then the basis for determining the number of samples in order to provide accurate results, one of which uses the Slovin formulation (Prima Jaya F, 2023). Based on the calculation results using the Slovin formula, it can be seen that the sample size of the *Case Manager* Service Recipients at Ulin Banjarmasin Regional Hospital in 2023 is at least 99.59 respondents or rounded up to 100 respondents , to obtain the distribution of each respondent sample spread across the service program and type of service proportionally.

As for the process to obtain the research results that will be used, the author needs data and information that supports this research. The data collection process used is quantitative data research. This research is intended to obtain primary data using a

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questionnaire filled out by respondents, namely patients or families of patients at Ulin Banjarmasin Hospital, then the Hospital database is used to find out and describe Ulin Banjarmasin Hospital as a whole. Then library research is conducted to obtain secondary data by studying scientific literature and other reading sources related to this research and can be accounted for. The data is used as a consideration by the author in discussing this research in order to draw substantive conclusions. The type of data used in this study is secondary data which is obtained from reading books, scientific literature and other sources that are considered relevant and in accordance with the things being studied. While in this study is quantitative descriptive data where the data is measured with a numerical scale that represents the value of the variable. The data used in this study is the Performance Report of Ulin Banjarmasin Hospital which presents Performance and Service data periodically. This study aims to test and analyze the causal relationship between the independent variables and the dependent variables, as well as examine the validity and reliability of the research instrument as a whole. Therefore, the multiple linear regression analysis technique is used using SPSS software version 19.

Based on the calculation results using SPSS Version 26 software, the reliability of the statement items that form the variable constructs of *Case Manager* (X_1) , *Organizational Citizenship Behavior* (X_2) and Patient Satisfaction (Y) is presented as shown in the following table.

Table 2 Reliability Test Results

Variables	α	Minimum Limit	Information
<i>Case Manager</i> (X_1)	0.947	0.60	Reliable
<i>Organizational Citizenship Behavior</i> (X_2)	0.937	0.60	Reliable
Patient Satisfaction (Y)	0.989	0.60	Reliable

From table 2 above, it is known that the statement items that form the construct of the *Case Manager* variable (X_1) with a *Cronbach alpha* value of $0.947 > \text{Minimum limit } 0.60$ can be stated as Reliable, and *Organizational Citizenship Behavior* (X_2) with a *Cronbach alpha* value of $0.937 > \text{Minimum limit } 0.60$ can be stated as Reliable, and Patient Satisfaction (Y) with a *Cronbach alpha* value of $0.989 > \text{Minimum limit } 0.60$ can



be stated as Reliable, thus it can be stated that all statement items from the questionnaire or statement items are Reliable.

Hypothesis testing

Hypothesis testing aims to identify whether there is a clear and reliable influence between the independent variables (leadership style, organizational culture, and job satisfaction) on the dependent variable (employee loyalty).

1. In this study, data normality testing uses the Kolmogorov-Smirnov test by looking at the significance of the residuals produced and the normal probability plot graphic approach. Detect normality by looking at the distribution of data (points) on the diagonal axis of the graph. The results of the data normality test from the residuals obtained are as follows:

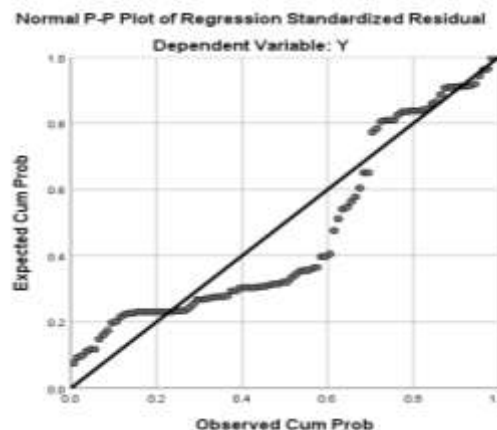


Figure 2 Normality Test Results

2. Multicollinearity Test, this test is intended to see whether there are two or more independent variables that are linearly correlated. To detect the presence of symptoms of Multicollinearity in the research model can be seen from the tolerance value or the *Variance Inflation Factor* (VIF) value. The tolerance limit is >0.10 and the VIF limit is <10.00 , so it can be concluded that there is no Multicollinearity among the independent variables. The results of the multicollinearity test in this study can be seen as follows:

Table 3 Multicollinearity Test Results

Model		Collinearity Statistics	
		Tolerance	VIF
	(Constant)		
	X1	.751	1,331
	X2	.751	1,331

From the results of the multicollinearity test in table 5.8 above, it can be seen that the tolerance value of *the Case Manager variable* (X1) and *Organizational Citizenship Behavior* (x₂) is 0.751 > Tolerance limit of 0.10 and the VIF value of *the Case Manager variable* (X1) and *Organizational Citizenship Behavior* (X2) is 1.331 < 10.00 so it can be concluded that *the Case Manager variable* (X1) and *Organizational Citizenship Behavior* (X2) do not have multicollinearity among the independent variables.

3. The results of the autocorrelation test in this study can be shown in the table below as follows:

Table 4

Autocorrelation Table Test Results

Model	Durbin-Watson
1	1,913
a. Predictors: (Constant), X1, X2	
b. Dependent Variable: Y	

Based on the table above, the DW value can be known as 1.913, this value will be compared with the significance table value of 5%, with a sample size of 100 (n) and the number of independent variables 2 (k = 2), then the dU value is obtained as 1.6377 < DW value of 1.913 < 4, it can be concluded that there is no autocorrelation, meaning that this regression model is good.

- 4 The Heteroscedasticity Test aims to test whether in the regression model there is inequality of *variance* from the residual of one observation to another. Good regression is regression that is in a homoscedasticity position and not a heteroscedasticity condition. A variable is stated to be in a position where there is no heteroscedasticity



if the spread of observer points above and/or below zero on the Y axis leads to an unclear pattern.

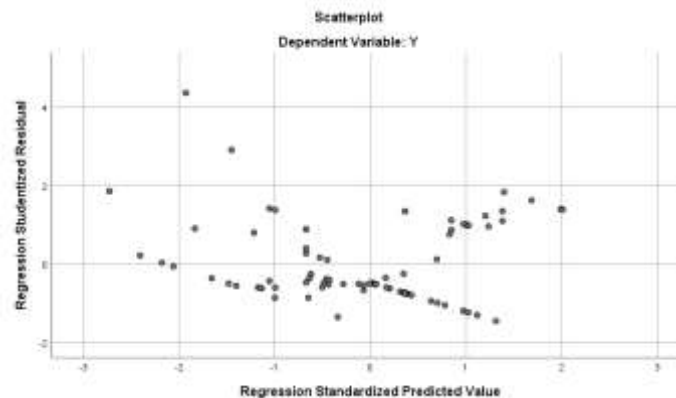


Figure 3 Heteroscedasticity Test Results

CONCLUSION

Based on the research that has been conducted and previous discussions, the conclusions obtained are:

1. The role of *case managers* influences patient satisfaction at Ulin Banjarmasin Regional Hospital
2. *Organizational Citizenship Behavior* influences patient satisfaction at Ulin Banjarmasin Regional Hospital
3. The role of *case managers* and *organizational citizenship behavior* simultaneously influence patient satisfaction through *organizational citizenship behavior* . Ulin Regional Hospital, Banjarmasin

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