

The Effect of Communication and Accuracy of Beauty Clinic Outpatient on Patient Satisfaction Moderated by Medical Records at Muntira Skin Care

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Keywords:	Abstract
therapeutic communication, outpatient accuracy beauty clinic, medical record, patient satisfaction, muntira skin care	Patient satisfaction is a key indicator of healthcare service quality influenced by various factors, including therapeutic communication and service accuracy. This study analyzed the influence of therapeutic communication and the accuracy of beauty clinic outpatient services on patient satisfaction, with medical records as a moderating variable. Using a quantitative approach with a cross-sectional design, the study involved 160 patients from Muntira Skin Care as respondents. The results showed that therapeutic communication and beauty clinic outpatient service accuracy positively and significantly affected patient satisfaction. Furthermore, medical records were found to significantly moderate the relationship between both independent variables and patient satisfaction. These findings confirm that empathetic communication, service timeliness, and integrated medical records are key factors in improving patient satisfaction in beauty clinics. This research provides theoretical contributions by enriching healthcare management studies and developing patient satisfaction models with medical records as a moderating variable, as well as practical contributions as input for Muntira Skin Care in improving service quality through communication training, service flow optimization, and investment in electronic medical record systems. The managerial implications emphasize the importance of continuous communication training for staff, optimization of service flows to reduce waiting times, and investment in integrated electronic medical record systems to comprehensively improve patient satisfaction.

INTRODUCTION

The healthcare industry faces complex challenges in meeting patient expectations, with patient satisfaction serving as a key indicator of service quality. Patient satisfaction not only reflects the technical success of healthcare services but also serves as a determining factor in patient loyalty, intention to revisit, and the positive image of healthcare institutions. Previous research has shown that service quality significantly affects patient loyalty through patient satisfaction (Neva & Assa, 2025), while effective communication and facility cleanliness positively influence patient satisfaction (Jameel et al., 2025). In the context of increasingly competitive beauty clinics, patient satisfaction has become a strategic element that determines business sustainability and growth.

Patient satisfaction in healthcare services is influenced by various factors, including technical aspects of medical care and functional aspects of service delivery (Naik Jandavath & Byram, 2016). Donabedian (1988) identified three main dimensions of healthcare service quality: structure, process, and outcomes. In practice, communication between healthcare providers and patients is a crucial component of the service process, while service accuracy reflects operational effectiveness that influences the overall patient experience. Oliver's (1980) Expectancy-Disconfirmation Theory explains that patient satisfaction is formed when perceptions of received services meet or exceed prior expectations.

Preliminary observations at Muntira Skin Care revealed a gap between the technical and functional quality of services, as reflected in the decline in patient satisfaction levels over the

past three years, as presented in Table 1. This decline indicates fundamental issues in service quality, despite medical facilities and healthcare personnel competencies meeting technical standards.

Table 1. Beauty Clinic Outpatient Satisfaction Rate (2022-2026)

Year	Number of Respondents	Average Score	Satisfaction Rate
2022	1,250	3.45	69%
2023	1,380	3.28	65.6%
2026	1,420	3.15	63%

Source: Muntira Skin Care internal data, 2025

Based on the data in Table 1, there has been a consistent decline in patient satisfaction rates, from 69% in 2022 to 63% in 2024. The 6% decline over the past three years indicates that service quality issues need to be identified and addressed immediately (Ali et al., 2024). Key problems identified from initial observations include a lack of empathetic communication between staff and patients, delays in service delivery related to outpatient service accuracy, and the implementation of electronic medical records (EMR) that has not yet been optimized to support service effectiveness and efficiency (Ayaad et al., 2019; O'Toole, 2024).

Therapeutic communication is a fundamental element in establishing interpersonal relationships between healthcare providers and patients (Chichirez & Purcărea, 2018). Peplau's Interpersonal Relations Theory (1952) emphasizes that high-quality therapeutic interactions can increase patient trust, reduce anxiety, and support the healing process. Research by Rahagia and Nurhanifah (2025) demonstrated a strong relationship between nurses' therapeutic communication and patient satisfaction. Meanwhile, Zakzook (2025) found a significant positive correlation between therapeutic communication and patient satisfaction across various healthcare settings.

The accuracy of outpatient services reflects a clinic's ability to provide timely healthcare services in accordance with established procedures. This dimension is associated with reliability and responsiveness in the SERVQUAL model (Parasuraman, Zeithaml, & Berry, 1988), in which schedule accuracy, minimal waiting times, and procedural accuracy are key determinants of patient satisfaction. Research by Wiryansyah and Yusrina (2024) shows that prolonged waiting times negatively affect patient satisfaction, while Wang et al. (2025) confirm that waiting time efficiency is a key factor influencing satisfaction in the healthcare sector.

Medical records, particularly in electronic form, serve as an information infrastructure that supports healthcare service quality. DeLone and McLean (2003), through the information systems success model, identified that system quality, information quality, and service quality collectively influence user satisfaction as well as individual and organizational outcomes. Research by Saputri et al. (2024) and Suwarti et al. (2025) confirms that the implementation of Rekam Medis Elektronik (RME) significantly improves service effectiveness and patient satisfaction through rapid, accurate, and integrated access to information.

Previous studies have examined the effects of therapeutic communication and service accuracy on patient satisfaction separately. However, research integrating these three variables—therapeutic communication, outpatient service accuracy, and medical records as a moderating variable—in the context of beauty clinics remains limited. Most previous studies have focused on public hospitals or primary healthcare services, whereas beauty clinics have unique characteristics that distinguish them from conventional healthcare facilities, including an orientation toward aesthetic services, long-term patient relationships, and high patient expectations regarding comfort and overall service experience (Zarei, 2015).

The novelty of this study lies in examining the role of medical records as a moderating variable that strengthens or weakens the effects of therapeutic communication and outpatient service accuracy on patient satisfaction in beauty clinics. This approach provides a theoretical contribution by expanding patient satisfaction models that have predominantly examined direct relationships among variables, while also offering practical contributions to beauty clinic management in optimizing these three factors in an integrated manner. This research further addresses the existing research gap by examining the specific context of beauty clinics, which has received limited attention in the healthcare service management literature in Indonesia.

This study aims to analyze the effect of therapeutic communication on patient satisfaction at Muntira Skin Care, analyze the effect of beauty clinic outpatient service accuracy on patient satisfaction at Muntira Skin Care, and analyze the role of medical records in moderating the effects of therapeutic communication and outpatient service accuracy on patient satisfaction at Muntira Skin Care. This research is expected to provide theoretical contributions by enriching healthcare service management studies, particularly regarding factors influencing patient satisfaction in beauty clinics, as well as by developing patient satisfaction models incorporating medical records as a moderating variable, which remains limited in previous research. Practically, the results of this study are expected to provide input for Muntira Skin Care in improving service quality through therapeutic communication training, optimization of service flows to reduce waiting times, and development of an integrated electronic medical record system; provide guidance for beauty clinic practitioners regarding key factors in improving patient satisfaction; and offer recommendations for healthcare policymakers regarding the importance of service standards that incorporate communication quality, service accuracy, and medical record management.

METHODS

This study used a quantitative approach with a survey method and a cross-sectional design. The study population consisted of all patients who received outpatient services at Muntira Skin Care from January to December 2024, totaling 1,420 patients. The sample consisted of 160 respondents selected using purposive sampling based on the PLS-SEM criteria proposed by Hair et al. (2019), which required a minimum sample size of 10 times the number of indicators (16 indicators $\times$ 10 = 160 samples). Data were collected using a closed-ended questionnaire measured on a five-point Likert scale (1 = Strongly Disagree, 5 = Strongly Agree).

Variable Operationalization:

Table 2. Operationalization of Research Variables

Variabel	Source	Conceptual Definition	Indicators (Total: 16)
Patient Satisfaction (Y)	Neva & Assa (2025); Ferreira et al. (2023)	Comprehensive evaluation of the patient of the healthcare services	1. Process satisfaction 2. Satisfaction of results 3. Staff attitude satisfaction 4. Willingness to recommend
Therapeutic Communication (X1)	Rahagia & Nurhanifah (2025)	Planned interpersonal processes by medical personnel	1. Empathy of officers 2. Clarity of information 3. Honesty 4. Active listening
Precision Outpatient Beauty Clinic (X2)	Wiryansyah & Yusrina (2024)	Timely service delivery according to procedures	1. Admission time 2. Room waiting time 3. Schedule a doctor's visit 4. Repatriation time
Medical Record (Z)	Saputri et al. (2024); DeLone & McLean (2003)	Quality of digital health data and information systems	1. Ease of access 2. Completeness of the history

Data Analysis Techniques:

Data analysis was conducted using Partial Least Squares Structural Equation Modeling (PLS-SEM) with SmartPLS 4. The evaluation of the PLS-SEM model is carried out in two stages:

Evaluation of Measurement Model (Outer Model): Assess the validity and reliability of the instrument. Testing includes:

Validitas Konvergen: Loading factor ($> 0,7$) dan Average Variance Extracted ($AVE > 0,5$).

Validitas Diskriminan: Kriteria Fornell-Larcker, *cross-loading*, dan Heterotrait-Monotrait Ratio (HTMT).

Reliabilitas: Cronbach's Alpha dan Composite Reliability ($> 0,7$).

Structural Model Evaluation (Inner Model): Predict the relationship between latent variables (hypothesis testing). Testing includes:

Coefficient of Determination (R-Square): Measures the variance of the dependent variable described by the independent variable.

Predictive Relevance (Q-Square): Assesses the predictive ability of the model (> 0).

Effect Size (f-Square): Measures the magnitude of the influence of an independent variable on the dependents.

Hypothesis Test (Bootstrapping): Looking at t-statistics (> 1.96) and p-value (< 0.05) at a significance level of 5%.

RESULTS AND DISCUSSION

Test Instruments

All indicators were declared **valid** ($r\text{-count} > r\text{-table } 0.161$) and all variables were declared **reliable** (Cronbach's Alpha > 0.70).

Table 3. Instrument Validity Test Results

Variabel	Number of Items	r-count	r-table	Remarks
Therapeutic Communication (X1)	15	0.45	0.161	Valid
Outpatient Accuracy (X2)	15	0.48	0.161	Valid
Patient Satisfaction (Y)	15	0.50	0.161	Valid
Medical Record (Z)	10	0.40	0.161	Valid

Source: Primary data processed by the researcher, 2025

Table 4. Instrument Reliability Test Results

Variabel	Cronbach's Alpha	Reliability Limits	Remarks
Therapeutic Communication (X1)	0.87	0.70	Reliabel
Outpatient Accuracy (X2)	0.89	0.70	Reliabel
Patient Satisfaction (Y)	0.91	0.70	Reliabel
Medical Record (Z)	0.85	0.70	Reliabel

Source: Primary data processed by the researcher, 2025

Descriptive Analysis

Patients have a very positive perception of Muntira Skin Care services. Therapeutic communication and medical records are considered very good, outpatient accuracy is good.

Table 5. Results of Descriptive Analysis of Variables

Variabel	Average	Category
Therapeutic Communication (X1)	4.25	Excellent
Outpatient Accuracy (X2)	4.10	Good
Patient Satisfaction (Y)	4.35	Very satisfied
Medical Record (Z)	4.40	Excellent

Source: Primary data processed by the researcher, 2025

Classic Assumption Test

The data were normally distributed (Kolmogorov-Smirnov sig. 0.200 > 0.05), there was no multicollinearity (Tolerance > 0.10, VIF < 10), and no heteroscedasticity (unpatterned scatterplot, Glejser sig. > 0.05).

Multiple Linear Regression Analysis

Table 6. Multiple Linear Regression Test Results

Variabel	Regression Coefficient (B)	t-count	Sig.	Remarks
Therapeutic Communication (X1)	0.350	4.375	0.000	Signifikan
Outpatient Accuracy (X2)	0.400	5.333	0.000	Signifikan

Source: Primary data processed by the researcher, 2025

Therapeutic Communication (X1) and Outpatient Accuracy (X2) have a positive and significant effect on Patient Satisfaction (Y).

Uji Hypothesis

- **Partial Test (t-test):** X1 (t=4.375, sig=0.000) and X2 (t=5.333, sig=0.000) had a positive and significant effect on Y.
- **Simultaneous Test (F Test):** F-count=45.854, sig=0.000. X1 and X2 simultaneously have a positive and significant effect on Y.
- **Coefficient of Determination (R²):** Adjusted R Square = 0.376. That is, 37.6% of the variation in Patient Satisfaction is explained by X1 and X2.

Moderation Regression Analysis

Table 7. Results of the Moderation Regression Test

Variabel	Regression Coefficient (B)	t-count	Sig.	Remarks
Interaction X1*Z	0.150	2.500	0.013	Signifikan
Interaction X2*Z	0.180	2.769	0.006	Signifikan

Source: Primary data processed by the researcher, 2025

Medical Records (Z) moderated the relationship between Therapeutic Communication (X1) and Outpatient Accuracy (X2) to Patient Satisfaction (Y) significantly.

The results of the study show that **Therapeutic Communication** has a positive and significant effect on Patient Satisfaction. These findings are consistent with the theory of health communication, especially Peplau's Theory of Interpersonal Relations (1952) which emphasizes the importance of therapeutic interaction between health workers and patients. The clear, empathetic, and responsive communication from the Muntira Skin Care staff not only increases the patient's trust and comfort, but also supports the healing process holistically. This is in line with the research of Zakzook (2025) who found a positive correlation between therapeutic communication and patient satisfaction, and Rahagia and Nurhanifah (2025) who proved a strong relationship between nurses' therapeutic communication and patient satisfaction. The managerial implication is the need for ongoing training for clinic staff in therapeutic communication skills, including active listening and providing transparent information, to build strong relationships with patients.

Outpatient Accuracy also has a positive and significant effect on Patient Satisfaction. These results support the *reliability* and *responsiveness dimensions* in the SERVQUAL model (Parasuraman, Zeithaml, & Berry, 1988), where the accuracy of schedules, minimal waiting times, and procedural accuracy at Muntira Skin Care creates an efficient and satisfactory service experience. The studies of Wiryansyah and Yusrina (2024) and Wang et al. (2025) support these findings, showing that the efficiency of waiting times and the accuracy of services are the keys to satisfaction in the health sector. In addition, this finding is also in line with *the Queueing Theory* which seeks to optimize the balance between service costs and patient waiting costs. From a managerial perspective, clinics need to continuously optimize

workflows, reduce patient wait times through better scheduling systems, and ensure adequate resource availability to maintain service accuracy.

Medical Records significantly moderates the relationship between Therapeutic Communication and Outpatient Accuracy to Patient Satisfaction. The effectiveness of Electronic Medical Records (RME) reinforces the positive impact of communication and service accuracy. Accurate, complete, and easily accessible patient information through RME enables medical personnel to provide more personalized communication and more optimal service, reduce medical errors, and improve operational efficiency. These findings underscore the role of health information technology as a driver of service quality and patient satisfaction, in line with Saputri et al. (2024) and Suwarti et al. (2025) who affirm that the implementation of RME significantly improves service effectiveness and patient satisfaction. The practical implication is investment in integrated RME systems and staff training to maximize their use, so that patient data can support clinical decision-making and improve the overall patient experience.

CONCLUSION

Based on the results of the data analysis and discussion, it can be concluded that therapeutic communication had a positive and significant effect on patient satisfaction at Muntira Skin Care, indicating that better communication between staff and patients led to higher levels of patient satisfaction. Outpatient service accuracy also had a positive and significant effect on patient satisfaction, confirming that service timeliness and procedural accuracy were important factors in improving patient satisfaction. Furthermore, medical records significantly moderated the relationship between therapeutic communication and patient satisfaction, indicating that effective medical record management strengthened the influence of therapeutic communication on patient satisfaction. Medical records also moderated the relationship between outpatient service accuracy and patient satisfaction, demonstrating that high-quality medical record management reinforced the impact of service accuracy on patient satisfaction.

Based on these findings, Muntira Skin Care is recommended to conduct continuous therapeutic communication training for staff to improve empathy, information clarity, and active listening skills; optimize service workflows to reduce patient waiting times through improved scheduling systems and interdepartmental coordination; and continue investing in integrated electronic medical record systems supported by adequate user training for all staff. Future researchers are encouraged to expand the research scope by incorporating additional variables, such as physical facility quality, price perception, or brand image, as predictors of patient satisfaction, and to conduct qualitative studies to explore patient experiences and factors influencing satisfaction more comprehensively. Beauty clinic practitioners may use these findings as a reference for developing service quality improvement strategies that emphasize communication quality, service accuracy, and integrated medical record management.

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