Vol. 3 No. 4 Edisi Agustus - Oktober 2026 E. ISSN. 3032-2472
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DESCRIPTION OF SATISFACTION WITH FOOD SERVICE IN CLASS I AND II INPATIENT ROOMS AT JAURY JUSUF PUTERA ACADEMIC HOSPITAL

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DOI: https://doi.org/10.62567/micjo.v3i4.3323

Abstract

Food service is a crucial component of hospital care that can influence patient satisfaction during treatment. This study aimed to assess patient satisfaction with food services, including food taste, menu variety, timeliness of food distribution, cleanliness of tableware and food, and food service staff appearance, among Class I and Class II inpatients at RS Akademis Jaury Jusuf Putera. A quantitative method with a descriptive design was employed. The study involved 81 respondents selected using a total sampling technique and was conducted in the Class I and Class II inpatient wards of RS Akademis Jaury Jusuf Putera in August 2026. Data were collected via questionnaires and analyzed using univariate analysis (frequency distribution and percentages). The results showed that 82.7% of respondents rated food taste quality as “good.” 74.1% rated menu variety as “varied,” 93.8% rated food distribution timeliness as “punctual,” 87.7% rated the cleanliness of tableware and food as “clean,” and 84.0% rated the appearance of service staff as “good.” The findings showed that the highest positive rating was observed for the timeliness of food distribution, reported by 93.8% of respondents. Menu variety received the lowest rating, identifying it as an area requiring attention in efforts to enhance patient satisfaction with food services.

Keywords : Patient Satisfaction, Food Service, Inpatient Care, Hospital.

Abstrak

Penyediaan makanan merupakan komponen krusial dalam perawatan rumah sakit yang dapat memengaruhi kepuasan pasien selama masa pengobatan. Penelitian ini bertujuan untuk menilai kepuasan pasien terhadap layanan makanan mencakup cita rasa makanan, variasi menu, ketepatan

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waktu distribusi makanan, kebersihan peralatan makan dan makanan, serta penampilan staf penyaji—di kalangan pasien rawat inap Kelas I dan Kelas II di RS Akademis Jaury Jusuf Putera. Penelitian ini menggunakan metode kuantitatif dengan desain deskriptif. Sebanyak 81 responden dilibatkan melalui teknik pengambilan sampel total (total sampling) di bangsal rawat inap Kelas I dan Kelas II RS Akademis Jaury Jusuf Putera pada bulan Agustus 2026. Data dikumpulkan menggunakan kuesioner dan dianalisis dengan analisis univariat (distribusi frekuensi dan persentase). Hasil penelitian menunjukkan bahwa 82,7% responden menilai kualitas cita rasa makanan sebagai "baik." Sebanyak 74,1% menilai variasi menu sebagai "bervariasi," 93,8% menilai ketepatan waktu distribusi makanan sebagai "tepat waktu," 87,7% menilai kebersihan peralatan makan dan makanan sebagai "bersih," serta 84,0% menilai penampilan staf penyaji sebagai "baik." Temuan ini menunjukkan bahwa penilaian positif tertinggi diberikan pada aspek ketepatan waktu distribusi makanan, yang dilaporkan oleh 93,8% responden. Variasi menu memperoleh penilaian terendah, yang mengindikasikan bahwa aspek ini memerlukan perhatian lebih dalam upaya meningkatkan kepuasan pasien terhadap layanan makanan.

Kata Kunci : Kepuasan Pasien, Layanan Makanan, Perawatan Rawat Inap, Rumah Sakit.

1. INTRODUCTION

Patient satisfaction is an important indicator in evaluating the quality of health services provided by hospitals. Conceptually, patient satisfaction reflects the level of conformity between the services received and the expectations and needs of patients during the healthcare process (Rotua et al., 2025). Therefore, assessing patient satisfaction can provide information regarding patients' perceptions of the services they receive and identify aspects that may require improvement (Margareta, 2024). One component of hospital services that contributes to the patient experience is food service, which is organized through the hospital food service system (Ministry of Health of the Republic of Indonesia, 2022).

Food service for inpatients includes several aspects that can be directly experienced and assessed by patients, such as the timeliness of food distribution, menu variety, food taste, cleanliness of tableware and food, and the appearance of food service staff (Indrayani, 2023). These aspects are relevant to patient satisfaction because they represent different components of the food service received during hospitalization. Evaluation of these dimensions is therefore needed to obtain a descriptive picture of patient satisfaction with food services and to identify aspects that receive positive or less positive assessments.

At RS Akademis Jaury Jusuf Putera, food services are provided to inpatients through the hospital's nutrition installation. Internal quality reports indicate that the timeliness of food distribution was 89.47% in 2022 and increased to 90.60% in 2023. The percentage of patient food leftovers decreased from 20.2% to 19.7%, while the accuracy of diet-type distribution increased from 99.78% to 99.80%. These data describe several food service performance indicators; however, they do not directly describe patients' satisfaction with the food services received.

Previous studies have generally examined food service quality in relation to patient satisfaction or used food leftovers as an indicator of food service outcomes. However, a descriptive assessment of patient satisfaction based on specific food service dimensions, particularly the timeliness of food distribution, menu variety, food taste, cleanliness of tableware and food, and the appearance of food service staff, has not been specifically described among Class I and Class II inpatients at RS Akademis Jaury Jusuf Putera. This gap indicates the need for a study that provides a descriptive assessment of patient satisfaction based on these five dimensions.

Based on this background, this study aimed to describe patient satisfaction with food services among Class I and Class II inpatients at RS Akademis Jaury Jusuf Putera. The assessment focused on five dimensions: food taste, menu variety, timeliness of food distribution, cleanliness of tableware and

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food, and food service staff appearance. The results are expected to provide descriptive information that can be used as a reference for evaluating food services at the hospital.

2. RESEARCH METHOD

Study This use approach quantitative with design descriptive purposeful For give description in a way deep about level satisfaction patient to service food at home Sick Academic Jaury Joseph Son. Activities field data collection has implemented on month August 2026 at Academic Hospital Jaury Joseph Putera is located on Jalan General M. Jusuf, Makassar City, South Sulawesi. Population in study This covers all over patient care stay class I and class II treated at home Sick Based on the System data Information Management House Sick as of June 6, 2026, recorded amount population as many as 81 patients. Considering limited population or not enough out of 100 people, technique taking applied sample is *total sampling*, so that all over member population of 81 patients set as respondents study.

Instrument main used in survey This in the form of questionnaire structured For measure variables operational service adapted food from Rahmi (2024). Variables study This covers five aspects main measured in ordinal scale based on percentage total respondent score , namely food taste quality (category Good If score > 50%), variety of food menu (category varies If score > 50%), accuracy time distribution food (category appropriate time If score > 50%), cleanliness tool And food (category clean If score > 50%), and service And appearance officer (category Good If score > 50%). Procedure study started with stage preparations that include management licensing to Director of Academic Hospital Jaury Joseph Son, compilation form *Informed Consent*, and manufacturing instrument questionnaire. Next on stage implementation, researcher give explanation through Sheet Explanation Before Research (PSP) and request agreement written from patient before filling questionnaire done.

Data collection was carried out in a way comprehensive with involving primary data and secondary data in order to maintain accuracy information. Primary data was obtained in a way direct from results interview And filling questionnaire by respondents related evaluation they to service food provided by expert nutrition as well as waiter. Meanwhile that is secondary data obtained in a way No direct through document official System Information Academic Hospital Management Jaury Joseph Son who includes description general and recapitulation data amount patient care stay. All data collected Then processed in a way systematic through five stages data processing using device SPSS software, which begins with *editing* For inspect completeness And consistency answer questionnaire, *coding* For coding numeric, *data entry* to in database system, *cleaning* For ensure accuracy without existence data input errors, as well as *scoring* For determination categorization level satisfaction.

Stage end from methodology study This is data analysis performed in a way univariate For describe characteristics And distribution from each variables in a way independent. Through analysis univariate this, the result data processing questionnaire served in form distribution frequency, percentage, and average utility value give description objective about evaluation patient on each indicator, start from taste, menu variety, accuracy time presentation, hygiene tools, up to professionalism officer presenter. Presentation results analysis in form table distribution frequency And percentage the become base main for researchers in conclude level satisfaction patient in a way comprehensive to quality organization food in the room care stay Class I and II Academic Hospitals Jaury Joseph Son.

3. RESULT AND DISCCUSSION

Study This carried out at the Academic Hospital Jaury Joseph Son of Makassar City, South Sulawesi, a facility service health that provides service care stay complete with organization food patient as part from support medical services food covers the entire provision process until distribution food in accordance with need nutrition and diet of patients treated in the ward care stay Class I (Orchid) and Class II (Melati). Evaluation quality service food on study This covers dimensions accuracy time

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distribution, menu variety, taste, cleanliness tool And food, as well as service And appearance officer presenter. Based on primary data collected of 81 respondents, analysis univariate related demographics show that majority patient dominated by group age young people 16–25 years old as many as 40 respondents (49.4%) and various sex Woman as many as 55 respondents (67.9%). Most of them big respondents undergo in- room care Class I (Orchid) namely as many as 49 respondents (60.5%), while 32 respondents (39.5%) were in Class II (Melati).

Seen from characteristics maintenance And condition nutrition patient, duration care stay most respondents is at on span of 3–5 days, namely reached 47 respondents (58.0%), followed by 6–8 days span as many as 28 respondents (34.6%), 9–11 days as many as 4 respondents (4.9%), and duration longest 12–14 days as many as 2 respondents (2.5%). About provision nutrition, the majority respondents that is as many as 76 patients (93.8%) were patient with category food general without special dietary restrictions. While that, some small the rest get prescription of a special diet, which consists of from a low-calorie diet salt as many as 3 respondents (3.7%), as well as low protein diets and low protein diets purines, each of which represented by 1 respondent (1.2%). Description demographic And clinical This become context important in understand diversity background behind respondents moment give perception And qualification to aspects service the food they eat accept during the treatment period.

Evaluation empirical against five indicators main service food show very good results positive from corner view perception patient. On aspect food taste, as many as 67 respondents (82.7%) stated the taste of food is at in category well, though Still There were 14 respondents (17.3%) who thought so not enough good. In matter diversity dishes, as many as 60 respondents (74.1%) assessed the menu served Already varies, while 21 respondents (25.9%) consider it No varies. Indicators efficiency operational show performance best, where accuracy time distribution food assessed appropriate time by 76 respondents (93.8%) and only 5 respondents (6.2%) complained inaccuracy time. This is prove that management time distribution food at the Academic Hospital Jaury Joseph Son Already walk with very discipline And structured.

On indicator sanitation as well as professionalism source Power humans, the majority patient give very good assessment satisfying. Cleanliness level tool Eat And hygiene serving food categorized clean by 71 respondents (87.7%), while 10 respondents (12.3%) considered Still not enough clean. Performance officer presenter food Also get appreciation positive, where service And appearance officer assessed Good by 68 respondents (84.0%), although there were 13 respondents (16.0%) who rated it not enough good. In terms of overall, results analysis univariate This conclude that service food in the room care stay Class I and II Academic Hospitals Jaury Joseph Son has fulfil expectation majority patient on all over dimensions assessment, although percentage minority on perception negative still become notes important For repair quality in a way sustainable

Discussion

Respondent characteristics in this study included age, gender, treatment room, length of stay, and diet type. Based on data collection, the respondents were predominantly young adults (16–25 years old) at 49.4%, with the majority being female at 67.9%. The distribution of treatment rooms showed that 60.5% of respondents were treated in Class I (Anggrek), with the majority having a relatively short length of stay of 3–5 days (58.0%). From a clinical nutrition perspective, 93.8% of respondents were general patients without special dietary restrictions. This diversity of characteristics significantly influences patients' perceptions, expectations, and acceptance of food services (Mangunsong & Junadi, 2023). Patients without dietary restrictions tend to have higher taste expectations than patients with special diets. Therefore, a thorough understanding of these demographic and clinical profiles is an important foundation for hospital management in interpreting satisfaction measurement results accurately and proportionally.

In terms of food taste quality, the study results indicated that 82.7% of respondents rated the taste of dishes at the Jaury Jusuf Putera Academic Hospital as good. This assessment demonstrates that food preparation generally meets patients' organoleptic expectations, including the deliciousness

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of spices, the fragrance of aromas, the softness of textures, and the appropriate serving temperature. This positive assessment aligns with the findings of Hernawati (2023), who emphasized that the physical and organoleptic characteristics of food play a direct role in increasing food acceptability and stimulating the appetite of inpatients. Based on SERVQUAL theory, food taste quality acts as a core product quality that supports customer satisfaction (Oktavia & Prayoga, 2023). However, 17.3% of respondents rated the food taste as poor. This is driven by variations in individual tastes, daily eating habits, and spice restrictions in patients on specific dietary prescriptions. Nutritional management still needs to maintain taste consistency without ignoring the patient's clinical medical limitations.

The menu variety aspect also received a very positive perception, with 74.1% of respondents categorizing the menu as varied. A varied menu cycle has been shown to be effective in preventing boredom in patients who must consume hospital meals repeatedly every day. Conceptually, the diversity of food ingredient combinations and processing techniques is crucial for successful nutrition delivery (Rahman & Dewi, 2024). Within the SERVQUAL Theory framework, menu variety represents a dimension of reliability because it reflects the hospital's consistency in developing structured and high-quality diet plans (Oktavia & Prayoga, 2023). Complaints from the 25.9% of respondents who considered the menu insufficiently varied generally came from patients with longer hospital stays or those on special diets with limited food choices. Therefore, regular evaluation of menu cycle rotation and variation in raw material processing is key to maintaining patient satisfaction across all levels.

Regarding the timeliness of food distribution, 93.8% of respondents confirmed that the scheduling of morning, lunch, and dinner meals was carried out on time. Accurate meal schedules not only maintain patients' energy and nutritional needs but are also crucial in supporting the schedule for administering medical medications (Pratiwi & Sari, 2023). This smooth distribution flow reflects efficiency and good coordination throughout the food chain, from planning and procurement to processing in the nutrition kitchen, and delivery to the wards (Ardana, 2024). From a SERVQUAL perspective, timeliness reflects the reliability and responsiveness of a hospital's medical support service system (Oktavia & Prayoga, 2023). The small percentage of untimely assessments (6.2%) serve as an evaluation signal for technical obstacles in the field, such as food transportation issues or adjustments to patient medical treatment times, which need to be continuously minimized through stronger coordination between staff.

The hygiene aspect of cutlery and food received a satisfactory rating, with 87.7% of respondents categorizing it as clean. Strict application of hygiene and sanitation principles throughout the nutrition workflow is vital to prevent cross-contamination and nosocomial infections in the care environment (Kurniawan et al., 2024; Margareta, 2024). The use of hygienic cutlery and covered food presentation provides a sense of security and psychological comfort for patients when consuming dishes. Based on SERVQUAL Theory, the cleanliness of cutlery and food represents the tangible dimension (physical evidence) because it can be directly observed visually, while also strengthening the assurance dimension of food safety provided (Oktavia & Prayoga, 2023). The 12.3% rating of less than clean indicates the need for increased supervision of the washing, drying, and storage of cutlery so that sterile hygiene standards can be consistently maintained throughout each service shift.

The appearance and service dimensions of food service staff received high appreciation, with 84.0% of respondents rating them as good. Neat uniforms, personal hygiene, and the friendly, polite, and communicative attitude of waiters when serving food convey a deep professional impression to patients. A neat physical appearance reflects the tangible dimension, while empathy, friendliness, and readiness to help respond to patient needs reflect the empathy and responsiveness dimensions in SERVQUAL Theory (Oktavia & Prayoga, 2023). These findings align with research by Hernawati (2023) which states that positive interpersonal interactions between staff and patients can increase comfort and positive perceptions of the overall quality of hospital services. Nevertheless, training in service excellence and monitoring compliance with the use of personal protective equipment (such as masks and gloves) must continue to be encouraged for all service staff.

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The predominantly positive assessment across all indicators from taste and menu variety to punctuality and cleanliness to staff appearance indicates that the management of the Nutrition Department at Jaury Jusuf Putera Academic Hospital has implemented a well-planned and quality-oriented food service system. Hospital food service is not simply a routine activity of providing physical nourishment, but rather an integral part of medical therapy that directly impacts the speed of patient recovery (Ministry of Health of the Republic of Indonesia, 2022). The harmonious synergy between product quality (tasty, nutritious, and clean food) and service quality (timely, friendly, and reliable service) is the key formula for creating a positive care experience. This has been proven to reduce the percentage of patient food waste and increase public trust in the hospital institution.

As a strategic step forward, this success in achieving patient satisfaction must be maintained and improved through continuous quality improvement mechanisms. Notes from the minority of patients who provide unfavorable ratings on several dimensions should be used as material for correction and constructive feedback. Hospital management is advised to continue to conduct regular monitoring of the menu cycle, tighten hygiene and sanitation audits in the kitchen and distribution areas, and conduct regular training for waiters on therapeutic communication. By consistently integrating the principles of SERVQUAL Theory into the Nutrition Installation operations, Jaury Jusuf Putera Academic Hospital will be able to provide food services that not only meet clinical nutritional adequacy standards but also consistently exceed the expectations and satisfaction of inpatients.

Based on overall results research, satisfaction patient to service food in the room care stay Class I and II Academic Hospitals Jaury Joseph Son in a way general is at on very category good. Overview positive This formed from integration of five indicators main, namely quality delicious taste of dishes, diversity daily menu variety, accuracy time distribution food, cleanliness tool Eat And hygiene dishes, as well as professionalism And neatness officer presenter. Food served No only capable accepted from aspect organoleptic taste, but Also supported by channel regular distribution And appropriate time in accordance timetable Eat patients. Besides that, guarantee cleanliness equipment Eat And serving dish give comfort psychological and a sense of security for patient during consume intake nutrition House sick. Experience positive This the more strengthened by interpersonal interactions of the waiters who appear neat, behave polite, friendly, and communicative moment deliver food to ward care. Dominant assessment satisfying on all over variables This prove that level satisfaction patient No just determined by physical taste food only, but is accumulation comprehensive from combination quality product dish And quality of service process support nutrition received patient in a way simultaneous during the treatment period stay overnight.

If reviewed based on SERVQUAL theory, overview comprehensive from service food This has succeed reflect fifth dimensions quality service in a way Integrated (Oktavia & Prayoga, 2023). Quality taste, cleanliness tool eat, and neatness uniform officer in a way direct fulfil tangible dimensions (evidence) physical) which can observed visually and felt by patient, while cleanliness dish participate give assurance dimension (guarantee) security food. Accuracy time distribution food morning, afternoon, and Evening reflect reliability dimension (reliability) above consistency timetable House sick, whereas readiness officer in serve need patient strengthen responsiveness dimension (power responsive). The empathy dimension also come true real through attitude friendly, polite, and the waiters ' concern moment interact with patients. Although in a way general evaluation patient has is at on category good , research This give implications important for Academic Hospital Management Jaury Joseph Son For still do evaluation And monitoring quality in a way sustainable development rotation menu variations are necessary Keep going updated use prevent saturation patient , while supervision strict to standard hygiene sanitation as well as training communication therapeutic for officer presenter must maintained so that the quality service nutrition can Keep going beyond hope patient in a way sustainable

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4. CONCLUSION

Based on the results, patient satisfaction with food services among Class I and Class II inpatients at Jaury Jusuf Putera Academic Hospital was generally positive across the assessed dimensions, namely the timeliness of meal distribution, menu variety, food taste, cleanliness of eating utensils and food, and service and appearance of food service staff. The highest positive assessment was observed for the timeliness of meal distribution, while menu variety received a relatively lower assessment compared with the other dimensions.

These findings indicate that menu variety is an aspect that may require further attention in the evaluation of food services. Efforts to review and diversify the menu may be considered based on patients' preferences and the food service standards applied by the hospital. The findings provide descriptive information that can serve as a reference for the hospital's nutrition installation in evaluating food services.

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