



DETERMINANTS RELATED TO SIM-RS USER SATISFACTION

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ABSTRACT

Based on initial observations, there are still complaints from users regarding the slow system, difficulty in data input, and the suboptimal function of SIM-RS in supporting services at Bhayangkara Level III Hospital, Banda Aceh. The purpose of this study was to determine the determinants related to SIM-RS user satisfaction at Bhayangkara Level III Hospital, Banda Aceh. Quantitative research was used with a cross-sectional study design. The sample consisted of 91 health workers using the total sampling method. Data collection used instruments. The results showed that partially there was a significant relationship between system quality ($p = 0.0001$), information quality ($p = 0.015$), and service quality ($p = 0.0001$) of SIM-RS with SIM-RS user satisfaction at Bhayangkara Level III Hospital, Banda Aceh. Logistic regression analysis showed that SIM-RS System Quality ($P = 0.0001$) and SIM-RS Service Quality ($P = 0.001$) were significant predictors related to SIM-RS user satisfaction at Bhayangkara Level III Hospital, Banda Aceh. Conclusions: The results of the study indicate that the SIM-RS System Quality factor is the most significant predictor related to satisfaction with SIM-RS use at Bhayangkara Hospital Level III Banda Aceh (OR: 39.738).

Keywords: information; quality; service; SIM-RS; system

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INTRODUCTION

One of the most important elements of the healthcare industry's digital transformation is the Hospital Management Information System (HMI-RS). Hospitals must improve patient and medical staff satisfaction, data accuracy, and efficiency in the digital age. HMI-RS assists hospital administration in service planning and evaluation by acting as both a decision support system and a documentation tool. Successful HMI-RS installation can speed up administrative procedures, reduce medical errors, and increase service transparency (Pusdikasari, 2025). One aspect of hospital infrastructure is the quality of the hospital information and communication system (MIS-RS). To support hospital operations, a hospital information and communication system is crucial. This aligns with a study by Braithwaite et al. (2018) which found that an uncertain patient information system disconnected from other hospital care departments hinders patient care. Additional research suggests that hospital information systems support the fundamental operations of healthcare services in all their complexity and offer substantial benefits to the healthcare industry (Haghighi & Torabi, 2018). However, several factors, including management support, human resources, technological maturity, and system alignment with user needs, are crucial for the successful implementation of a hospital MIS. Many hospitals in Indonesia, particularly the Bhayangkara Level III Hospital in Banda Aceh, still face challenges in effectively implementing a hospital MIS, according to previous research (Auliana, 2024).

In Indonesia, the implementation of MIS-RS still faces various challenges, such as a lack of technological infrastructure, resistance from healthcare workers, and budget constraints (Putri et al., 2025). Research by Widiyanto and Widayati (2021) revealed that only 40% of hospitals in

Indonesia have implemented an integrated MIS-RS system, while the remainder still use manual or partial systems. A lack of human resource expertise, a large number of healthcare workers untrained in digital technology, and inadequate infrastructure are some common obstacles. Inadequate hardware and unstable internet connections hamper the performance of the Hospital Management Information System (MIS-RS); and 3) corporate culture. In some healthcare facilities, there is still a strong tendency towards manual systems and resistance to change (Abbas et al., 2021). Several recent studies have shown that factors such as usability: A user-friendly interface increases user acceptance (Putra et al., 2022). Hospital leadership's commitment to supporting the implementation of a hospital management information system (MIS-RS) is highly influential (Diaz, 2025). Continuous training programs can improve user competency (Shiri et al., 2023).

Bhayangkara Hospital Level III Banda Aceh is one of the hospitals owned by the Indonesian National Police that provides health services for police officers and the general public. Along with the demands of hospital accreditation, the implementation of SIM-RS has become a necessity. However, based on initial observations, there are still complaints from users regarding slow systems, difficulties in data input, and the less than optimal function of SIM-RS in supporting services. Some of the problems identified include: 1) limited IT infrastructure: frequent server downtime disrupts the service process; 2) minimal training: many health workers do not yet understand the important features of SIM-RS and 3) lack of system evaluation: there is no structured feedback mechanism for system improvement.

The integration of all service flows in hospitals is made possible by regulations established by the Indonesian Ministry of Health regarding the use of information systems in hospital management. These regulations serve as standards for the development of such systems. Long access times for doctors, application skills that are not yet fully understood by all doctors, and other complex issues such as information security and privacy, as well as certification, are just some of the challenges still faced in implementing hospital information systems (Igiyany, 2019). According to Athira and Sampetoding (2024) the implementation of SIM-RS has greatly helped accelerate the service process. Unfortunately, the implementation is still not good due to the lack of training and understanding of hospital health workers. The implementation of SIM-RS at Praya Regional Hospital, Central Lombok, is considered to be of low quality and not easy to use because there is still a lot of data entry that needs to be done, in addition, employees also still do not fully understand the SIM-RS system (Beny, 2019).

Based on previous research, it can be concluded that SIM-RS has been implemented in various hospitals, but its implementation is still not optimal due to the lack of understanding of health workers and the large number of data entries that need to be done. Research by Nasution, Sari et al. (2023) found that SIM-RS at General Hospitals in Aceh has been able to implement SIM-RS quite well, although it still needs to be reviewed regarding the quality and satisfaction with the use of the system. An assessment of a hospital information system must be conducted before implementation to inform future system development. The purpose of the assessment is to provide decision-makers with the data they need to base their choices on the evaluation results (Situmeang et al., 2023). Regulations regarding hospital information systems have not been implemented as effectively as they should (Ainulia & Rodiah, 2023). This study aims to determine the determinants associated with SIM-RS user satisfaction.

METHOD

This quantitative research used a cross-sectional study design. A total sampling method was used to select 91 healthcare workers. Data collection utilized an instrument developed by the researcher from available literature, which had been tested for validity and reliability. Data analysis employed descriptive statistical tests and non-parametric inferential statistical tests, including the chi-square test and binary logistic regression with the stepwise method.

RESULT

Based on Table 1, it is known that the average age is 31.43 years, the most common gender is male, namely 88 people (96.7%) and the most common educational background is diploma graduate, namely 50 people.

Table 1.
Characteristics of nurses (n = 91)

Characteristics	f	%	$\bar{x} \pm SD$
Age	-	-	31,43 tahun \pm 5,252
Gender			
Man	88	96,7	
Woman	3	3,3	
Education			
Bachelor	40	44,0	
Diploma	50	54,9	
Master	1	1,1	

Table 2.
Distribution of system quality, information quality, service quality and user satisfaction of SIM-RS (n=91)

Variables	f	%
System Quality		
Good	46	50,5
Not enough	45	49,5
Information Quality		
Good	73	80,2
Not enough	18	19,8
Quality of Service		
Good	44	48,4
Not enough	47	51,6
User Satisfaction		
Good	51	56,0
Not enough	40	44,0

Table 2, it is known that of the 91 health workers, 46 (50.5%) stated that the quality of the SIM-RS system was good. Furthermore, 73 (80.2%) stated that the quality of SIM-RS information was good. 47 (51.6%) stated that the quality of SIM-RS services was poor. Finally, 51 (56.0%) stated that they were satisfied with SIM-RS at Bhayangkara Hospital Level III Banda Aceh.

Table 3.
Analysis of the relationship between system quality, information quality and service quality with SIM-RS user satisfaction (n = 91)

Variables	Compliance				p-value
	Obedient		Not obey		
	f	%	f	%	
System Quality					
Good	43	93,5	3	6,5	0,0001
Not enough	8	17,8	37	82,2	
Information Quality					
Good	46	63,0	27	37,0	0,015
Not enough	5	27,8	13	72,2	
Quality of Service					
Good	39	88,6	5	11,4	0,0001
Not enough	12	25,5	35	74,5	

Table 3 shows a significant relationship between the quality of the SIM-RS system and the satisfaction of SIM-RS users at Bhayangkara Hospital Level III Banda Aceh ($p=0.0001$). Furthermore, there is a significant relationship between the quality of SIM-RS information and the satisfaction of SIM-RS users at Bhayangkara Hospital Level III Banda Aceh ($p=0.015$). Then, there is a significant relationship between the quality of SIM-RS services and the satisfaction of SIM-RS users at Bhayangkara Hospital Level III Banda Aceh ($p=0.0001$).

Table 4.
Analysis of system quality, information quality and service quality as predictors of SIM-RS user satisfaction (n = 91)

Predictor	B	OR	p-value	95% CI	
				Lower	Upper
Quality of the SIM-RS System	4,115	61,273	0,0001	10,244	366,507
Quality of SIM-RS Information	1,225	0,294	0,217	0,042	2,058
SIM-RS Service Quality	2,838	17,088	0,001	3,057	95,509
Constant	-4,034	0,018	0,0001		

Table 4 shows the factors that are significant predictors of satisfaction with the use of SIM-RS at Bhayangkara Hospital Level III Banda Aceh, as shown in Table 5.10, where SIM-RS System Quality ($P = 0.0001$) and SIM-RS Service Quality ($P = 0.001$) obtained a P-Value <0.05 , thus rejecting H_0 . H_0 is accepted because SIM-RS Information Quality ($P = 0.217$) has a P-Value >0.05 , which indicates that these factors do not significantly predict how satisfied patients are with SIM-RS at Bhayangkara Hospital Level III Banda Aceh. The next stage is to retest the significant factors until no more P-Values are found >0.05 .

Table 5.
Analysis of system quality and service quality as predictors of sim-rs user satisfaction (n = 91)

Predictor	B	OR	P-Value	95% CI	
				Lower	Upper
Quality of the SIM-RS System	3,682	39.738	0,0001	8,724	181,019
SIM-RS Service Quality	2,434	11.400	0,001	2,645	49,135
Constant	-3,800	.022	0,0001		

Table 5 shows that the Quality of the SIM-RS System ($P = 0.0001$) and the Quality of SIM-RS Services ($P = 0.001$) are significant predictors related to the satisfaction of using SIM-RS at Bhayangkara Hospital Level III Banda Aceh. Based on the study findings, it is known that health workers at Bhayangkara Hospital Level III Banda Aceh who use SIM-RS feel more satisfied when the system and services are of high quality. The study findings also show that the most important predictor of satisfaction of using SIM-RS at Bhayangkara Hospital Level III Banda Aceh is the SIM-RS System Quality factor (OR: 39.738).

DISCUSSION

The Relationship between SIM-RS System Quality and SIM-RS User Satisfaction

Based on Table 2, 46 (50.5%) of the 91 healthcare workers stated that the SIM-RS system at Bhayangkara Level III Hospital in Banda Aceh was of good quality. Furthermore, the research findings shown in Table 5 provide strong evidence that the level of satisfaction of healthcare workers using the SIM-RS information system at Bhayangkara Level III Hospital in Banda Aceh is significantly correlated with the system's quality. The statistically significant relationship is demonstrated by the results of the statistical test, which has a p-value of 0.0001.

Statistically, due to the very small p-value, these results also suggest that the quality of the SIM-RS system is closely related to user satisfaction. This relationship, which in this case is significant, implies that user experience depends on individual perceptions of the system's quality. This further reinforces the previously stated position that efficient, effective, and user-oriented healthcare

services are impossible without ensuring optimal quality from the information systems that support them.

System quality is one of the six dimensions of information system success. System quality directly contributes to user satisfaction, which ultimately influences the successful adoption and sustainability of information systems within an organization. In the case of Bhayangkara Hospital Level III Banda Aceh, healthcare workers' perceptions of the quality of the Hospital Management Information System significantly influenced their satisfaction with using the system as part of their work routine. The following quality aspects are some of the critical indicators influencing user satisfaction: system reliability, (user-friendliness) or ease of navigation, speed of data access, information security, and responsiveness to technical issues. The optimal level of these aspects allows healthcare professionals to experience comfortable system use; conversely, frequent technical glitches, slow input processes, or a cumbersome system interface can cause employee discomfort and even resistance to the device (Indrayani & Wahyuni, 2024).

Furthermore, the findings of this study emphasize that hospital management plays an active role in monitoring system quality, gathering user feedback, and providing system training. Beneficial alternatives include proactive measures in system maintenance, technology updates, and providing user training. Furthermore, incorporating user insights by facilitating satisfaction surveys, discussion forums, or feedback sessions directly into system development can help the system development team improve the quality of features and services provided to meet the real needs of users (Fadilla, 2021).

However, from an organizational efficiency perspective, high satisfaction with the use of a Hospital Management Information System (MIS-RS) can have a positive impact on work productivity, motivation, and HR loyalty towards the institution. Alternatively, low satisfaction with the system can lead to decreased motivation, increased resistance to innovation, and can lead to additional workload due to inefficient administrative procedures. Therefore, improving the quality of the Hospital Management Information System (MIS-RS) is a strategic HR investment that needs to be planned in hospitals (Muin, 2019).

All things considered, these results support the claim that the effectiveness of MIS-RS implementation in hospitals is also significantly influenced by the quality of the information system. A key indicator of whether the current system meets user needs or needs modification is the level of user satisfaction. Besides implicitly indicating system responsiveness, user satisfaction also indicates how well the system is designed (Winarti, 2023). Therefore, in the context of this study, the relationship between user happiness and MIS-RS system quality cannot be characterized as a simple correlation; rather, it may represent a deeper causal relationship. The very large number of respondents for both variables suggests a much stronger relationship than previously anticipated, even though the study was not designed as a causal study. This is known as substantial causality. Therefore, the practical implications of this study include consideration of the physical and psychological interactions of users, in addition to how hospitals handle their technology acquisitions.

In conclusion, this study demonstrates that the SIM-RS system significantly influences user satisfaction levels at Bhayangkara Hospital Level III, Banda Aceh. Aligning technical, theoretical, and practical factors should be given higher priority in ongoing healthcare management reform efforts. Of course, this is only the first quantitative study exploring the multiple factors influencing the aforementioned relationships, encouraging healthcare institutions to pursue further research. For example, other factors that may moderate or mediate the relationship could be identified, such as training level, work experience, organizational factors, and so on. Such research, when using non-

parametric approaches or regression analysis, could significantly expand the observations obtained to test more comprehensive causal relationships

The Relationship between SIM-RS Information Quality and SIM-RS User Satisfaction

Table 2 shows that of the 91 healthcare workers, 73 (80.2%) stated that the quality of SIM-RS information at Bhayangkara Hospital Level III Banda Aceh was good. Furthermore, Table 3 shows that there is a significant relationship between the quality of SIM-RS information and SIM-RS user satisfaction at Bhayangkara Hospital Level III Banda Aceh. These data reveal an interesting pattern: higher user satisfaction correlates with higher user ratings of the material quality. The statistical test findings, which show a p-value of 0.015, further support this assertion. We can verify that there is a statistically significant correlation between the information quality variable and user satisfaction because the p-value is smaller than the $\alpha = 0.05$ significance level. Specifically, our study found that users' perceptions and experiences regarding how frequently they utilize SIM-RS as a work tool are significantly influenced by the quality of the information contained within the system.

In MIS-RS, information quality is a crucial dimension that indicates how well the system output demonstrates the qualities of quantity, timeliness, relevance, clarity, and completeness. One of the six important factors influencing how well an information system is implemented is the quality of the information itself. Users are more likely to be satisfied and continue using the system if they believe the information produced is accurate and meets their work needs (Kudrenko & Demianchuk, 2019). In the context of Bhayangkara Hospital Level III Banda Aceh, the perception that the quality of the SIM-RS information is considered good likely reflects the system's ability to present patient data quickly and accurately, support clinical decision-making, and facilitate smooth administrative and managerial reporting. Accurate information is crucial, especially in healthcare services that require quick decisions, such as in the emergency department, inpatient care, and pharmacy and laboratory services. If the system is unable to provide relevant and valid information, not only will user satisfaction decline, but the overall quality of patient care may also be impacted.

However, the 18 respondents who rated the SIM-RS information as poor quality voiced concerns or dissatisfaction with issues such as inconsistent data, slow access to information, or unclear and incomplete information. Seventy-two percent of this group expressed dissatisfaction with the system. This reinforces the understanding that an information system can fail to meet users' expectations, even if it is technically functional, if the data it provides does not fully support their tasks. Although the information quality evaluation was relatively acceptable, it is important to note that only 63% of the 73 users were satisfied, indicating a relatively low level of satisfaction. This suggests that user satisfaction is likely not solely determined by content quality. System quality, service quality, or even organizational or personal factors such as workload, training, or attitudes toward technology may all be involved. To understand the interrelationships that influence SIM-RS user satisfaction, the findings of this study can be used as a basis for additional, more comprehensive multivariate testing.

These findings have important practical implications for hospital administration. Hospitals must ensure that their MIS-RS generates information that meets user needs, in addition to implementing the system, if they want to improve user satisfaction. Regular data audits, improved data integration across units, customization of system features to enable visualization, and training in accessing and interpreting data appropriate to the MIS-RS can be part of this comprehensive effort. These actions can also help users better understand the available information (Indrawati, 2024). There is a moral component to the quality of information within the healthcare system in the Aceh region, which places a high priority on Islamic public service. For example, the concept of amanah emphasizes the importance of providing honest, accountable, and accurate information. An information system that supports these values will enhance healthcare workers' sense of responsibility to provide the best possible care. On the other hand, receiving inaccurate or incomplete information can be interpreted

as carelessness or dishonesty, which contradicts the Islamic teaching of *ihsan*, or striving to do one's best.

Furthermore, these findings indicate that improving information quality increases work efficiency and fosters trust between hospital management and healthcare workers. Healthcare workers feel more valued and engaged in decision-making when system information is clear and reliable. This aligns with the principles of good governance, which encourage participation, transparency, and accountability in public services. Hospital management should collaborate with information system providers on a technical level to establish measurable, reliable, and relevant information quality standards for users. Technical indicators such as the accuracy of service schedules, medical record accuracy, and the speed of patient data updates should be evaluated regularly. To ensure the resulting data is not general and inapplicable, the system must be flexible to meet the needs of various work units (Sutherland et al., 2022).

Overall, this discussion confirms that the quality of MIS-RS information is a critical component in creating an organizationally and spiritually useful information system. In developing MIS-RS, improving information quality should be a top priority in both budgeting policies and HR training. Considering these findings, hospital management should take a participatory approach in MIS-RS evaluation. This means that healthcare workers should be direct users of the system to assess and improve data quality. This method will not only improve system performance but will also create a flexible organizational culture focused on user satisfaction.

The Relationship between SIM-RS Service Quality and SIM-RS User Satisfaction

Table 2 shows that out of 91 healthcare workers, 47 (51.6%) stated that the quality of SIM-RS services at Bhayangkara Hospital Level III Banda Aceh was inadequate. Furthermore, Table 3 shows that there is a significant relationship between SIM-RS service quality and SIM-RS user satisfaction at Bhayangkara Hospital Level III Banda Aceh. A p-value of 0.0001 indicates statistical support for these results. There is a highly statistically significant relationship between system service quality and user satisfaction, as this value is well below the significance threshold ($\alpha = 0.05$). Therefore, healthcare workers' satisfaction with the system is positively correlated with their perceptions of the services associated with the implementation of the SIM-RS.

These results align with the theoretical model of information system success. Service quality is one of three key quality factors contributing to user satisfaction in the model. Along with system quality and information quality, service quality is also a quality factor. The extent to which the system management team assists users with technical and non-technical support is defined as service quality. This includes prompt response to issues, the ability of technicians to resolve technical issues, the friendly behavior of IT staff, and the availability of easily accessible help desks (Umaroh & Barmawi, 2020). The high satisfaction rate (88%) of those who rated the SIM-RS service as good at Bhayangkara Hospital in Banda Aceh indicates that service elements are crucial to the acceptance and utilization of the system by healthcare workers. Healthcare workers who are trained, receive prompt assistance when facing problems, and feel their input into the system is valued tend to be more satisfied and comfortable working with SIM-RS. This also increases trust in the system and its administrators.

Conversely, there is a clear correlation between unsatisfactory service and user experience with SIM-RS, as demonstrated by the finding that 74% of those who rated the service as poor were also dissatisfied with SIM-RS. Poor service quality can be caused by poor reporting and problem-solving systems, a lack of ongoing training, or a lack of user involvement in system improvements. As a result, users feel neglected and disappointed, which impacts their overall satisfaction (Rainer et al., 2020). These results indicate that service is not always technical. Interpersonal factors within the service, such as empathy, effective communication, and the responsibility of system administrators,

significantly influence how users perceive the service as a whole. Service aspects have a strong moral and spiritual dimension in Aceh, which has strong Islamic values. In information service practices, the concepts of *khidmat* (sincere devotion) and *amanah* (honestly carried out responsibility) are crucial. When customers feel well-served and want help, they are more willing to accept technical shortcomings because they trust in human service (Umaroh & Barmawi, 2020).

An organization's readiness to manage technological change is directly correlated with the quality of its MIS-RS services. Numerous studies have shown that digital transformation encompasses more than just software and hardware; it also encompasses the readiness of human resources and organizational structures to accept and support the implementation of information technology. Hospital management is crucial here. Proactively offering reliable technical services, adequate training, and professional and emotional support to system users will improve the work environment for information system acceptance (Rainer et al., 2020).

Furthermore, these findings demonstrate that successful implementation of a MIS-RS requires a holistic approach that simultaneously encompasses both data technology and user services. In many situations, even highly technically sophisticated systems can fail without adequate support. Therefore, hospitals should prioritize improving service features such as mobile technician help centers, ticketing systems, and user discussion forums (Sutherland et al., 2022). The data also shows that approximately 25 percent of healthcare workers are still satisfied with the SIM-RS service, although some consider it poor. This suggests that other factors may influence satisfaction levels, such as the system's suitability for work needs, users' personal experiences, or support from colleagues in implementing the system. These results allow for further research into moderating or mediating factors in the relationship between service quality and user satisfaction (Indrawati, 2024).

The results indicate that strengthening the technical service structure of the SIM-RS is a strategic recommendation for hospital management. This can be achieved by ensuring that each work unit has IT support staff who provide regular training tailored to the unit's needs and implementing a service evaluation system that directly involves users. Periodic SIM-RS service satisfaction surveys can also help identify critical service issues and provide a baseline for decision-making. A sense of ownership of the system will be enhanced through a participatory approach that involves users as partners in improving SIM-RS services. This aligns with the human-centered design approach in information technology development, which emphasizes the importance of user input and experience as central to system design and implementation (Winarti, 2023).

In conclusion, the quality of the Hospital Information System (MIS-RS) service is a crucial component that significantly influences user satisfaction. If hospitals want to improve the effectiveness of information system use, the service aspect cannot be ignored, according to significant statistical findings. Information system support services must be designed in an inclusive, professional manner and based on Islamic service ethics within a healthcare context that focuses on employee value and satisfaction. The SIM-RS is not merely an administrative tool if the system operates technically but is also managed in a sincere and responsible manner. This is a crucial part of efforts to improve the overall quality of healthcare services.

Determinants as Predictors of SIM-RS User Satisfaction

Table 3 shows that the Quality of the SIM-RS System ($P = 0.0001$) and the Quality of SIM-RS Services ($P = 0.001$) are significant predictors related to the satisfaction of using SIM-RS at Bhayangkara Hospital Level III Banda Aceh. Based on the results of this study, it is known that the better the Quality of the SIM-RS System and the Quality of SIM-RS Services, the better the satisfaction of health workers at Bhayangkara Hospital Level III Banda Aceh using SIM-RS. The results of this study also provide the conclusion that the Quality of the SIM-RS System factor is the

most significant predictor related to the satisfaction of using SIM-RS at Bhayangkara Hospital Level III Banda Aceh (OR: 39.738).

According to the significance value, both variables, user perception and experience of SIM-RS are significantly influenced by system and service quality. However, SIM-RS system quality has the greatest impact of the two. With an Odds Ratio (OR) value of 39.738, healthcare workers who rate system quality as good are 40 times more likely to be satisfied with using SIM-RS compared to healthcare workers who rate system quality as poor. This very high figure indicates that system quality is a major factor in determining user satisfaction. Various technical attributes of MIS-RS software are referred to as system qualities. These include ease of use, system response speed, functional reliability, data security, and adaptability to user needs. A well-designed system that is responsive to healthcare workers' workflows will significantly assist patient care administration, clinical decision-making, and medical documentation (Shaikh et al., 2022).

The case of Bhayangkara Hospital Level III in Banda Aceh demonstrates that the SIM-RS system has a level of functionality that is generally accepted and appreciated by users. However, system quality remains a key factor in determining user satisfaction. A smooth, fast, and easy-to-understand experience will increase user trust in SIM-RS. Conversely, failure to meet daily work requirements will immediately negatively impact the entire system. These results are based on the theoretical foundations of DeLone and McLean. System quality is one of the primary factors directly influencing user satisfaction in their information system success model. A good system will encourage user engagement, increase perceived utility, and encourage users to continue using the system (Winarti, 2023). When experiencing technical difficulties, healthcare workers who feel they are being served will develop a positive emotional connection with the system, even though the system may not be functionally perfect. Here, service quality serves as a psychological mediator in the technology acceptance process. This is especially important in the busy hospital environment where speed and efficiency are crucial (Chenhui, 2019).

In the Acehnese work culture, which highly values Islamic values in professional life, the quality of systems and services is also evaluated from the perspective of amanah (responsibility), ittqan (competence), and ihsan (exceeding obligations). SIM-RS functions well in terms of technology and supports fair, fast, and accurate health services as part of professional devotion. Humanistic, friendly, and responsible technical services are considered a representation of moral and professional values. Therefore, improving service quality is not only a technical issue but also reflects Islamic service ethics that consider user comfort and satisfaction as part of the public good. In the Acehnese work culture, which highly values Islamic values in professional life, the quality of systems and services is also evaluated from the perspective of amanah (responsibility), ittqan (competence), and ihsan (exceeding obligations).

SIM-RS functions well in terms of technology and supports fair, fast, and accurate healthcare services as part of professional service. Humanistic, friendly, and responsible technical services are considered a reflection of moral and professional values. Therefore, improving service quality is not merely a technical issue; it also reflects Islamic service ethics that consider user comfort and satisfaction as part of the public good (Nurwito, 2024). The results of this study indicate that the management of Bhayangkara Hospital Level III Banda Aceh places system quality as a top priority in the future development of the Hospital-Managing System (MIS-RS). A comprehensive evaluation of the technical performance of the system integration between service units, completeness of features and ease of navigation is necessary. To avoid additional administrative tasks that actually complicate users, the system must also be adjusted to the hospital's workflow. The results of this study indicate that the management of Bhayangkara Hospital Level III Banda Aceh places system quality as a top priority in the future development of the Hospital-Managing System (MIS-RS). A comprehensive evaluation of the technical performance of the system

integration between service units, completeness of features and ease of navigation and integration between service units is necessary. To avoid additional administrative tasks that actually complicate users, the system must also be adjusted to the hospital's workflow.

Meanwhile, from a service perspective, routine training and a two-way communication forum between users and the SIM-RS management team should be standardized. The relationship between the technology system and its users will be strengthened by a supportive and open service culture. These results allow for further research into the influence of other variables such as user skills, management support, and user-friendly user interface (UI) design. Furthermore, the causal and moderating relationships between more complex components contributing to SIM-RS success can be analyzed using structural modeling methods such as Structural Equation Modeling (SEM).

Overall, this study shows that the level of user satisfaction of SIM-RS at Bhayangkara Hospital Level III Banda Aceh is significantly influenced by the quality of the SIM-RS system and its accompanying services. System quality is proven to be a predictor with the highest odds ratio between the two, indicating how important it is for the system to operate reliably and according to the needs of healthcare workers. Hospitals can encourage inclusive, adaptive, and meaningful digital transformation by strengthening these two elements synergistically and contextually.

CONCLUSION

System quality and service quality of the SIM-RS significantly influence user satisfaction at Bhayangkara Hospital Level III Banda Aceh, with system quality being the most dominant predictor. This emphasizes the importance of improving the technical aspects of the system and increasing the quality of supporting services so that SIM-RS can optimally support the performance of healthcare workers. For future researchers, it is recommended to conduct a broader study by considering other variables such as management support, work experience, user training, and organizational factors that can moderate or mediate the relationship between SIM-RS quality and user satisfaction, so that a more comprehensive understanding of the determinants of satisfaction with SIM-RS is obtained.

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