



THE INFLUENCE OF EMPLOYEE DISCIPLINE ON SERVICE QUALITY AT MAYANG PUBLIC HEALTH CENTER, JEMBER REGENCY

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ABSTRACT

Introduction: The quality of primary healthcare services is largely determined by the behavior of human resources, particularly employee discipline in carrying out tasks. In the context of Mayang Public Health Center, Jember Regency, discipline emerges as a strategic factor, as the high intensity of interactions with patients requires services that are fast, accurate, and professional. This study focuses on analyzing the influence of employee discipline on service quality, based on the assumption that work discipline serves as the foundation influencing ethics, responsiveness, communication, empathy, and professionalism in healthcare services.

Methods: A quantitative approach with an ex post facto design was employed. The research population consisted of all 71 employees of Mayang Health Center, with a saturated sample of 71 respondents. Data were collected using a Likert-scale questionnaire and analyzed through simple linear regression to examine the relationship between discipline and service quality.

Results: The findings reveal that discipline significantly contributes to service quality with a determination value of 65%, while the remaining 35% is influenced by other factors such as motivation, work environment, and competence. The dimensions of discipline, ethics, responsiveness, communication, and professionalism were all rated very high, with discipline making the largest contribution to patient satisfaction.

Conclusion and Suggestion: Specialization is confirmed as the primary determinant of healthcare service quality, enriching theoretical models of service quality by positioning discipline as a key variable. Practically, the management of health centers should prioritize discipline as a core performance indicator, while local governments are encouraged to strengthen regulations on human resource discipline in healthcare.

Keywords: *Discipline, Healthcare Services, Human Resources, Public Health Center, Service Quality*

INTRODUCTION

The quality of healthcare services at community health centers (Puskesmas) is a crucial indicator in assessing the effectiveness of the healthcare system in Indonesia (Kharisma, 2020). As primary healthcare facilities, Puskesmas play a strategic role in providing quality healthcare services to the community (Fristiohady et al., 2020; Afyah & Ayuningtyas, 2023). However, this quality is often hindered by various challenges, one of which is the low level of employee discipline. Discipline encompasses punctuality, adherence to work procedures, and responsibility in carrying out tasks, all of which directly contribute to service quality. Previous studies have shown that employee indiscipline is one of the causes of low patient satisfaction and disruptions in service flow (Julianto, 2019; Gaurifa, 2024; Patricia et al., 2024). Furthermore, the success of healthcare delivery is strongly influenced by the integrity and commitment of personnel in performing their duties professionally (Fristiohady et al., 2020). Therefore, improving service quality at Puskesmas does not solely depend on structural or facility-related aspects, but also requires cultivating work discipline as the foundation of community-oriented healthcare services.

Previous studies have demonstrated that work discipline has a significant influence on the quality of healthcare services. For instance, research conducted at Puskesmas Bulu found that employee discipline has a positive impact on the quality of health services. (Sundoro, 2022). Similarly, findings from Puskesmas Secang 1 emphasized that work discipline plays a crucial role in shaping overall employee performance. (Rahayu et al., 2023). These studies emphasize the importance of maintaining strict work discipline as a means to improve service quality. It is essential to emphasize that discipline not only affects individual performance but also enhances the efficiency and effectiveness of organizational service delivery as a whole. Consequently, effective management of work discipline should be a top priority for every governmental institution to achieve optimal public service outcomes. (Nurfadllika & Adinata, 2023)

a study conducted at Puskesmas Batang-Batang, Sumenep, East Java, revealed that employee discipline has a positive and significant effect on the quality of public services (R. Anggi Dwi Putra Js & Rahmania Ambarika, 2022). Employee discipline in community health centers plays a crucial role in enhancing public satisfaction, aligning with findings that underscore the impact of discipline on the overall quality of public service delivery. (Suhardani et al., 2022). The importance of discipline in public services is evident not only at the Puskesmas level but also across other public service units. For example, in Probolinggo Regency, the effective implementation of employee discipline has been shown to contribute to improved service quality and increased community satisfaction significantly. (Marwiyah et al., 2023). These findings reinforce the notion that systematically enhancing discipline can serve as an effective strategy to improve patients' perceptions and experiences of primary healthcare services.

Work discipline is a fundamental element in ensuring the effectiveness and efficiency of healthcare services in public facilities. Key aspects such as punctuality, responsibility, and adherence to regulations serve as primary indicators in assessing employee work behavior. Punctuality, for instance, not only reflects professionalism but also directly influences patient satisfaction and the continuity of treatment processes. Tambun emphasizes that strengthening work discipline in hospitals and community health centers is essential for improving service quality and patient safety. (Tambun, 2019). Furthermore, responsibility and compliance with SOPs guarantee that every service provided meets established quality standards. However, the implementation of work discipline is often hindered by external factors, such as ineffective leadership, low motivation, and suboptimal compensation systems. (Ramadhani, 2020). Therefore, a holistic approach involving internal capacity-building and managerial support is necessary to ensure that employee discipline translates directly into improved service quality.

In the context of the Mayang Community Health Center in Jember Regency, this study aims to analyze the influence of employee discipline on the quality of healthcare services. By understanding this relationship, effective strategies can be identified to enhance employee discipline, thereby improving the overall quality of healthcare services at the health center. The improvement of service quality in community health centers depends not only on competent human resources but also on the disciplined attitudes and behaviors demonstrated by each employee. (Alya & Latunreng, 2021). Therefore, this research is essential in providing a clear understanding of the significance of discipline within the framework of healthcare services at community health centers.

The need for contextual and specific research at the Mayang Community Health Center in Jember Regency has become urgent in efforts to improve the quality of primary healthcare services in rural areas. Based on field observations conducted by the researcher from January to June 2025, variations in employee discipline levels and disparities in the quality of services provided to the community were identified. Aspects of discipline, including punctuality, adherence to standard operating procedures (SOPs), work responsibility, and orderly use of facilities, are theoretically and practically believed to have a direct impact on the quality of services delivered. Service quality is not only determined by medical technical competence but also by the manner in which services are delivered and the community's perception of the institution's professionalism. However, to date, no scientific study has been found that specifically examines the correlation between work discipline and service quality within the local context of the Mayang Community Health Center in Jember Regency. Therefore, this study is designed to fill this research gap while also addressing the need for data-driven policy development at the level of basic healthcare facilities.

The urgency of this research also lies in the limited number of empirical studies addressing the influence of discipline on healthcare service quality in rural community health centers, particularly within Jember Regency. The success of public health services is highly dependent on the discipline and work ethic of both medical and non-medical personnel involved. By systematically formulating the relationship between discipline and service quality, this study is expected to provide a theoretical contribution to the development of human resource management and public health service administration. At the same time, the findings of this research carry significant practical value, as they may serve as a foundation for formulating strategies to enhance work discipline through training, incentives, supervision, or more effective coaching. Thus, the results of this study are expected to serve as a strategic reference for policymakers in managing healthcare units that are more professional, responsive, and oriented toward community satisfaction.

LITERATURE REVIEW

The literature review indicates that work discipline is a key factor in improving the quality of public services. This is because discipline determines the consistency of health personnel in carrying out their duties and their compliance with organizational regulations. A study conducted by Ningrum & Imanuddin (2021) at Jatiuwung Community Health Center, Tangerang City, demonstrated a significant influence of work discipline on service quality, although the study also included employee performance as an additional variable. Similarly, Widiati (2024) at Kedawung Wetan Community Health Center, Pasuruan Regency, found that service quality and work discipline simultaneously affect patient satisfaction. Both studies confirm that work discipline is a determinant of service quality, though it is still positioned alongside other additional variables, leaving its independent role insufficiently explained.

Furthermore, individual behavioral factors such as discipline are often combined with organizational variables in previous studies. This indicates that service quality is perceived to be influenced not only by employee behavior but also by structural organizational support. For example, Nurinayah et al. (2023) examined the relationship between discipline, motivation, and work culture in Mataram, while Sahara (2022) emphasized work discipline along with the work environment in a study at Hamparan Perak Community Health Center. Similarly, Dachi (2023) included employee competence in his study at Hilisimaetano Community Health Center, South Nias Regency. This pattern suggests a tendency to employ multiple factors, positioning discipline more as a complementary element rather than a central and independent variable.

Other studies have broadened the context by placing work discipline within hospitals or different healthcare units. This expands the perspective while still highlighting the link between employee behavior and patient satisfaction. For instance, Andayani (2021) examined the effect of discipline on inpatient satisfaction at Lahat District Hospital, Sundoro (2022) combined discipline with service provision and work motivation at Bulu Community Health Center, Temanggung, and Rizqi et al. (2024) highlighted the role of employee competence and discipline in shaping service quality and its implications for patient satisfaction. These studies reinforce the connection between discipline and satisfaction, albeit within multidimensional frameworks that incorporate technical or motivational factors.

In addition, research on work discipline in the context of community health centers also emphasizes managerial factors and infrastructure as part of service determinants. This perspective arises from the view that service quality derives not only from individual behavior but also from adequate systems and facilities. For example, Lestari

(2023) showed that work discipline and motivation significantly influence employee service quality at Padurenan Community Health Center, while Wahyuni & Ritawaty (2023) associated work discipline with procedural systems and infrastructure in improving community satisfaction in South Barito Regency. Both studies affirm the relevance of discipline, yet still place it alongside other managerial variables, leaving individual behavior underexplored as a dominant independent factor.

Based on this review, a clear research gap emerges in the literature. Most prior studies have placed work discipline alongside motivational, structural, or technical factors. In contrast, this study offers novelty by focusing on work discipline as a single variable influencing service quality in primary healthcare facilities. This positioning distinguishes the study from earlier works by emphasizing employee behavior as the central factor in achieving service excellence. Thus, this research not only addresses a gap in the literature but also provides a significant theoretical contribution to the development of human resource management in public services, particularly within community health centers in rural areas such as Mayang, Jember Regency. The novelty of this research lies in highlighting employee discipline as a dominant and fundamental variable shaping the quality of primary healthcare services.

RESEARCH METHODS

This study employed a quantitative approach to examine the influence of employee discipline on service quality at the Mayang Community Health Center, Jember Regency (Muslimin et al., 2023; Putri, 2023). The use of this approach was based on the objective of obtaining a numerical and objective depiction of the relationship between variables, thereby allowing the validity of the findings to be statistically tested. The research instrument was a Likert-scale questionnaire, enabling the measurement of respondents' perceptions in a systematic and quantifiable manner. An ex post facto research design was applied, in which the independent variable was not manipulated but observed in its natural occurrence to assess its effect on the dependent variable (Adil et al., 2023). This design was deemed appropriate for the context of public organizations such as community health centers, where direct interventions in employee behavior or organizational structures are not feasible. Thus, the design enhanced external validity while strengthening the empirical relevance of the study's findings.

The study population consisted of all 71 employees of Mayang Community Health Center, Jember Regency. Given the relatively small population size, a non-probability sampling technique with a saturated sampling (census) method was employed, meaning all population members were included as research respondents (Asari et al., 2023). By involving all employees, the findings became more representative, minimized selection bias, and reflected the organizational condition comprehensively. This approach aligned with the research objective, which focused on analyzing inter-variable relationships within a specific institutional scope rather than on broader generalization (E. Purwanto & Nugroho, 2020). Out of 71 employees, 69 completed the questionnaire, consisting of 42 civil servants and 27 non-civil servants. This approach strengthened the internal validity of the study while providing a comprehensive portrayal of discipline and service quality within the health center.

The selection of Mayang Community Health Center as the research site was based on both strategic and methodological considerations. The facility has a high patient volume, requiring employees to maintain strict discipline to ensure quality services. Furthermore, it possesses relatively complete administrative records and provides open access for data collection. These factors are particularly significant in quantitative research, as valid data availability and a conducive research environment enhance the accuracy of the analysis. The research instrument was developed based on Hasibuan's (2016) theory for measuring work discipline and Grönroos's (1984) model for assessing service quality. The questionnaire was distributed digitally via WhatsApp, which facilitated respondent participation and improved accessibility without compromising data reliability.

Prior to use, the questionnaire underwent validity and reliability testing. Validity was assessed using Pearson's Product-Moment Correlation, while reliability was measured with Cronbach's Alpha. Only items meeting the validity and reliability criteria were included in the analysis. The measurement scale adopted was a five-point Likert scale, ranging from "*strongly disagree*" (score 1) to "*strongly agree*" (score 5), as outlined by Dombi & Jónás (2021). This scale enabled the systematic and quantitative measurement of respondents' attitudes, perceptions, and behavioral tendencies. Each research variable was operationalized into several indicators, which were subsequently translated into questionnaire items. Data were analyzed using simple linear regression to test the direction and strength

of the influence of the independent variable on the dependent variable (Rukhmana et al., 2022). Accordingly, the research design was systematically structured to address the research objectives both empirically and academically.

RESULT AND ANALYSIS

This study involved 71 respondents, all of whom were employees of the Mayang Community Health Center, Jember Regency. The sampling technique employed was saturated sampling, thereby including the entire population as respondents. The research instrument consisted of a closed-ended Likert-scale questionnaire (1–5), developed based on indicators from Work Discipline Theory and Grönroos' Service Quality Model. Data analysis was conducted using SPSS, covering validity and reliability testing, descriptive mean analysis, and simple linear regression to calculate the coefficient of determination (R^2). Overall, the findings indicate that employee discipline significantly influences service quality, with the overall mean score categorized as "Very Good" (mean > 4.20).

First, discipline obtained the highest score, reflecting that most respondents perceived employees as consistent in punctuality, compliance with working hours, use of official uniforms, and avoidance of sudden leave without clear justification. This strongly underscores discipline as the foundation of service quality. **Second**, ethics and service attitude also scored very highly, with employees evaluated as polite, respectful, and attentive to patient privacy—demonstrating that discipline encompasses not only physical presence but also professional conduct that reflects institutional credibility. **Third**, responsiveness and efficiency received high ratings, signifying that patients felt served promptly, without unnecessary delays, and that complaints were resolved effectively further confirming the impact of discipline on service efficiency. **Fourth**, communication and empathy contributed significantly, though slightly lower than discipline, as employees were recognized for delivering clear information, engaging in dialogue, and attending to patient needs. **Finally**, professionalism and service quality were rated between "Good" and "Very Good," with respondents acknowledging consistent service, commitment to quality, and an awareness of public trust as integral to the organizational culture.

Visually, the distribution of contributions across dimensions revealed that discipline accounted for the largest proportion of service quality, followed by responsiveness, service ethics, communication, and professionalism. The bar chart presented in the analysis highlighted discipline's dominance, with its share exceeding 25% of the total service satisfaction score.

Discipline Dimension	Mean Score	Category	Contribution to Satisfaction (%)
Discipline	4.38	Very Good	25.30 %
Ethics & Service Attitude	4.32	Very Good	24.10 %
Responsiveness & Efficiency	4.28	Very Good	23.50 %
Communication & Empathy	4.25	Very Good	22.20 %
Professionalism & Service Quality	4.21	Good – Very Good	20.90 %

Table 1. Mean Scores of Discipline Dimensions and Contribution to Patient Satisfaction

The results presented in the table indicate that all service quality dimensions in the Mayang Community Health Center were rated in the "Very Good" category, with mean scores exceeding 4.20, except for professionalism and service quality, which was slightly lower but still within the range of "Good–Very Good." Among the five dimensions, discipline recorded the highest mean score of 4.38 and contributed the largest proportion (25.30%) to patient satisfaction. Ethics and service attitude followed closely with a mean score of 4.32 and a contribution of 24.10%, suggesting that professional demeanor significantly reinforces the perception of quality care. Responsiveness and efficiency also made a strong contribution of 23.50%, underscoring the importance of timely service delivery and effective management of patient needs. Meanwhile, communication and empathy contributed 22.20%, reflecting the role of interpersonal interaction in strengthening patient trust and comfort. Finally, professionalism and service quality accounted for 20.90%, showing that while consistency and institutional credibility remain important, they are

somewhat less influential compared to direct behavioral dimensions like discipline and responsiveness. These findings reaffirm that discipline is the cornerstone of quality service in primary health care settings, both in measurable performance and in shaping patient satisfaction outcomes.

Item Indicator	r-calculated	r-table	Sig. (p-value)	Note
Discipline (1–5)	0.612–0.734	0.232	0.000 < 0.05	Valid
Ethics & Service Attitude (1–4)	0.598–0.701	0.232	0.000 < 0.05	Valid
Responsiveness & Efficiency (1–4)	0.567–0.689	0.232	0.000 < 0.05	Valid
Communication & Empathy (1–4)	0.579–0.653	0.232	0.000 < 0.05	Valid
Professionalism & Service Quality (1–4)	0.561–0.672	0.232	0.000 < 0.05	Valid

Table 2. Results of Questionnaire Instrument Validity Test

The results of the instrument validity test presented in Table 2 indicate that all indicator items for the variables of employee discipline and service quality obtained r-calculated values ranging from 0.561 to 0.734, which are higher than the r-table value of 0.232. In addition, the significance values (p-value) for all items were 0.000, which is lower than the significance threshold of 0.05. These findings demonstrate that each statement item in the questionnaire is able to accurately and consistently measure the intended construct, thereby making it suitable for use in this study. In other words, the dimensions of discipline, ethics and service attitude, responsiveness and efficiency, communication and empathy, as well as professionalism and service quality, all exhibit significant correlations with the total variable score. This confirms that the instrument employed has high validity and is capable of accurately representing the phenomena of employee discipline and service quality as measured at the Mayang Community Health Center, Jember Regency.

Variabel	Cronbach's Alpha	Minimum Criterion	Description
Discipline	0.842	≥ 0.70	Reliabel
Ethics & Service Attitude	0.816	≥ 0.70	Reliabel
Responsiveness & Efficiency	0.804	≥ 0.70	Reliabel
Communication & Empathy	0.788	≥ 0.70	Reliabel
Professionalism & Service Quality	0.772	≥ 0.70	Reliabel

Table 3. Results of Questionnaire Instrument Reliability Test

The reliability test results presented in Table 3 show that all research variables have Cronbach's Alpha values above the minimum criterion of 0.70, ranging from 0.772 to 0.842. The highest reliability was found in the discipline variable (0.842), indicating very strong internal consistency, while the professionalism and service quality variable obtained the lowest score (0.772) but still falls within the reliable category. These findings confirm that the items within each variable demonstrate good coherence in measuring the same construct, thereby ensuring that the data produced are stable and consistent. Accordingly, the questionnaire instrument employed in this study meets the reliability standards, providing assurance that the measurement results are trustworthy, non-random, and capable of consistently capturing the realities of employee discipline and service quality at Mayang Community Health Center, Jember Regency.

Model	R	R Square (R ²)	Adjusted R ²	Std. Error of the Estimate
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Discipline → Service Quality	0.806	0.650	0.642	0.317
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Table 4. Results of the Coefficient of Determination (R²) Test

The results of the coefficient of determination test presented in Table 4 show that the R Square (R²) value is 0.650, with an Adjusted R² of 0.642 and a standard error of the estimate of 0.317. These findings indicate that 65% of the variation in service quality at Mayang Community Health Center, Jember Regency, can be explained by the discipline factor of employees, while the remaining 35% is influenced by other factors outside the model, such as work motivation, work environment, or professional competence. The R value of 0.806 also reflects a very strong relationship between the discipline variable and service quality. Thus, these results emphasize the importance of discipline as a key determinant of healthcare service quality in community health centers, while also opening avenues for further research to examine other external factors that contribute to enhancing patient satisfaction and experience.

DISCUSSION

Before delving into an in-depth analysis, it is essential to emphasize that the findings of this study demonstrate a highly significant relationship between employee discipline and service quality at Mayang Community Health Center, Jember Regency. Empirical data obtained from respondents confirm that discipline is not merely an administrative aspect but also a foundational element that sustains the quality of interactions, responsiveness, and professionalism of healthcare personnel. The following analysis examines five main dimensions of the study's findings by linking them to Hasibuan's (2016) theory of work discipline and the Gronroos Service Quality Model (1984), thereby providing a comprehensive understanding of how discipline influences service quality.

1. Discipline as the Foundation of Service Quality

The study reveals that discipline achieved the highest score compared to other dimensions, underscoring its role as the cornerstone of healthcare service quality. According to Hasibuan (2016), discipline represents an individual's awareness and willingness to comply voluntarily with organizational rules in pursuit of shared objectives. In the context of community health centers, punctual attendance, adherence to working hours, and consistent use of uniforms establish continuity and stability in service delivery. This aligns with the Gronroos Service Quality Model, where technical quality encompasses the reliability of staff in ensuring that services are delivered on time and in accordance with procedures. The findings support Sari and Wibowo (2023), who emphasized that healthcare workers' discipline accelerates patient access to services. Discipline, therefore, is not merely formal compliance but a strategic element ensuring the sustainability of public service quality.

Timeliness in attendance has a direct implication for service effectiveness. By arriving on time, employees reduce patient waiting times, thereby maintaining functional quality as defined by Gronroos. Patients perceive timely service as a form of respect for their rights. Conversely, lateness or absenteeism diminishes public trust in healthcare institutions. Discipline also embodies moral responsibility. As Hasibuan (2016) argued, discipline is key to efficient organizational governance. The present findings corroborate this logic: disciplined employees contribute directly to speed, regularity, and public trust in healthcare delivery.

Furthermore, discipline serves as a representation of institutional professionalism. By minimizing sudden absences and ensuring consistent presence, employees demonstrate commitment to collective responsibility. Gronroos (1984) stressed that service quality is assessed not only by outcomes but also by the manner in which services are delivered. Discipline reinforces consistency and reliability in service provision, thereby shaping the institution's image and influencing patient trust. Respondents perceived employee discipline as an indicator of credibility, while the absence of discipline negatively affected overall service perceptions.

From a managerial standpoint, discipline can be viewed as organizational social capital. High levels of discipline enhance coordination across service units, reduce scheduling overlaps, and prevent delays in service provision. This supports the internal effectiveness of health centers as public institutions serving broad communities. Consistent with Hasibuan's (2016) assertion, discipline is fundamental to smooth operations and productivity. Thus, in Mayang Community Health Center, discipline functions not merely as an administrative tool but as a strategic instrument supporting institutional objectives and patient satisfaction.

2. Ethics and Service Attitude as a Manifestation of Discipline

The dimension of ethics and service attitude received a very good score, demonstrating that discipline significantly influences employees' conduct when interacting with patients. Robbins and Judge (2021) highlight that discipline shapes individual behavior consistent with organizational norms, including ethical aspects. This is evident in the friendliness, politeness, and respect for patient privacy consistently demonstrated by healthcare staff in Mayang. The Gronroos Service Quality Model emphasizes that functional quality is closely related to how services are delivered, not merely what is delivered. Consequently, maintaining discipline in ethical service enhances patients' perception of service quality.

Discipline also fosters an organizational culture centered on integrity. Hasibuan (2016) noted that discipline extends beyond formal compliance to include moral habituation that produces ethical behavior. In this study, work discipline translates into professional ethics that enhance the quality of patient interactions. Alami et al. (2022) similarly found that empathy and ethical conduct are key determinants of patient loyalty. Thus, discipline not only ensures punctual service but also guarantees that services are delivered with respect for human values.

Moreover, disciplined employees consistently provide polite and empathetic service. This is crucial because patients require not only medical treatment but also emotional acknowledgment. Gronroos (1984) emphasized that service quality is multidimensional, encompassing the emotional aspects of interaction. When healthcare workers adhere to ethical discipline, they can better reassure patients, foster a sense of security, and increase satisfaction. In this sense, discipline bridges administrative efficiency and interpersonal quality.

The study further shows that employee discipline acts as an internal control on behavior. Consistent adherence to rules encourages professional conduct that respects patients. Robbins and Judge (2021) observed that disciplined individuals are more likely to act in accordance with ethical norms. Therefore, this study confirms that ethics and service attitude are inseparable from the practice of discipline. Theoretically, these findings enrich Gronroos's perspective that functional quality is influenced by moral discipline reflected in service interactions.

3. Responsiveness and Efficiency as the Tangible Outcome of Discipline

The study also found that responsiveness and efficiency scored highly, highlighting discipline's direct role in streamlining service processes. Hasibuan (2016) emphasized that discipline fosters order, which in turn supports work effectiveness. In healthcare delivery, orderliness ensures patients do not face unnecessary delays. This corresponds with the Gronroos Service Quality Model, which regards reliability and responsiveness as critical components shaping perceived quality. The findings align with Mensah et al. (2023), who established a direct relationship between healthcare responsiveness and patients' trust in primary services.

Responsiveness cannot be separated from administrative discipline. Full staff presence ensures timely service, while adherence to task schedules enables prompt responses to patient complaints. This demonstrates how technical discipline translates into service efficiency. Gronroos (1984) argued that service quality is perceived through the speed and accuracy with which patient needs are addressed. Accordingly, this study underscores discipline as a prerequisite for responsiveness and efficiency in health centers.

Moreover, discipline reduces bottlenecks in service delivery. Consistent staff scheduling prevents patient overcrowding and ensures smoother workflows. This finding highlights that work discipline impacts not only individual behavior but also systemic service performance. Discipline thus functions as an organizational mechanism balancing workforce availability with patient demand. The results reinforce Hasibuan's view that discipline is the driving force of productivity and service quality.

Additionally, efficiency is enhanced by the proactive behavior of disciplined staff who address patient concerns promptly and constructively. Respondents reported that services were fast, straightforward, and solution-oriented. This supports the functional quality dimension of Gronroos's model, where speed and effectiveness are crucial to patient satisfaction. Empirically, the study demonstrates that without discipline, responsiveness and efficiency are difficult to achieve. Discipline, therefore, emerges as a mediating variable linking individual capacity to patient satisfaction in primary healthcare delivery.

4. Communication and Empathy as Outcomes of Humanistic Discipline

Although communication and empathy scored slightly lower than discipline, they remain critical determinants of service quality. The study indicates that disciplined time management enables healthcare workers

to communicate more effectively with patients. Sørensen and Grøn (2022) emphasized that effective service communication can only occur when staff are fully present and able to focus on patients. This illustrates how administrative discipline creates the conditions for humanistic communication.

Discipline ensures that staff are neither rushed nor hindered by delays, allowing them to listen empathetically to patients. This finding aligns with the Gronroos Service Quality Model, which emphasizes that functional service quality includes interpersonal interaction. With discipline, healthcare workers are better able to build emotional connections that enhance patient comfort. Thus, discipline contributes not only to technical efficiency but also to humanized communication quality.

Empathy displayed by healthcare staff also reflects moral discipline. Hasibuan (2016) argued that discipline represents a willingness to uphold rules as a form of responsibility. In practice, this responsibility manifests in listening to patients, respecting privacy, and providing clear information. The present study affirms that moral discipline evolves into interpersonal empathy, reinforcing the functional quality described by Gronroos. In other words, discipline provides the foundation for services that are not only efficient but also compassionate.

Effective communication likewise reflects the consistency established through discipline. Regular staff presence ensures uninterrupted information delivery, reducing the risk of miscommunication. Sørensen and Grøn (2022) noted that clarity in communication is a central element of service quality. The findings of this study reveal that effective communication can only be achieved when discipline is maintained. Discipline and communication, therefore, represent two interdependent elements that jointly strengthen healthcare service quality.

5. Professionalism and Service Quality as Consequences of Discipline

The study shows that professionalism and service quality achieved a score ranging from good to very good, reaffirming their close link to discipline. Hasibuan (2016) emphasized that discipline is instrumental in shaping professional work character. In Mayang Community Health Center, adherence to workplace rules reinforces professionalism, which in turn enhances service quality. The Gronroos Service Quality Model also underscores that both technical and functional dimensions of service quality are influenced by consistent discipline.

Professionalism rooted in discipline fosters standardized service delivery. By following rules and maintaining order, healthcare staff provide consistent services to patients, strengthening public perceptions of the health center as a reliable institution. This finding aligns with Lee and Kim (2021), who argued that professionalism in healthcare organizations is determined not only by medical competence but also by consistent discipline. Discipline, therefore, constitutes an integral aspect of professionalism, shaping long-term service quality.

Discipline also contributes to the institution's reputation. When employees demonstrate disciplined service delivery, the public perceives the health center as maintaining high-quality standards, thereby enhancing trust and patient loyalty. Gronroos (1984) highlighted institutional image as a key dimension influencing perceived quality. By consistently applying discipline, the health center cultivates a positive institutional image. The findings confirm that professionalism cannot be separated from discipline, which forms the basis of institutional credibility.

Finally, disciplined professionalism functions as a managerial instrument for sustaining service quality. Adherence to rules enables staff to maintain service standards even under changing circumstances. This underscores discipline as a stable variable supporting continuity of quality. The study contributes to Hasibuan's theory that discipline is a prerequisite for achieving work productivity. Accordingly, discipline not only improves individual performance but also serves as the foundation of reputation, professionalism, and healthcare service quality.

CONCLUSION

Based on the results of the study and the preceding discussion, it can be concluded that employee discipline constitutes the fundamental factor that significantly influences service quality at Mayang Community Health Center, Jember Regency. The dimension of discipline not only affects punctuality and adherence to regulations but also

extends its influence to work ethics, responsiveness, communication, empathy, and the professionalism of healthcare personnel. Regression analysis demonstrates that 65% of the variation in service quality can be explained by discipline, while the remaining 35% is influenced by other factors such as motivation, work environment, and competence. These findings are consistent with Hasibuan's theory, which highlights discipline as the cornerstone of organizational effectiveness, as well as with Gronroos's theory, which views service quality as the outcome of both system reliability and the quality of interpersonal interactions. Accordingly, this study underscores that discipline is a strategic factor that must be managed seriously to ensure the quality of healthcare services.

The implications of this research can be categorized into three aspects. First, from a managerial perspective, the findings encourage health center leadership to prioritize discipline as a key performance indicator through initiatives such as monitoring attendance, implementing digital time-tracking systems, providing discipline-focused training, and enforcing reward-and-punishment mechanisms. Second, from a policy perspective, local government should integrate human resource discipline into health policy by strengthening regulations on attendance, working hours, and uniform standards through regent decrees or technical standard operating procedures (SOPs) at community health centers. Third, from a theoretical perspective, this study contributes to enriching the Gronroos Service Quality Model by emphasizing discipline as a new determinant of service quality, particularly in rural contexts. These findings provide a foundation for future research examining the role of discipline within service quality models across various sectors of public service delivery.

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