

THE SATISFACTION OF CHILDREN 'S PATIENTS OF HOSPITAL FOOD SERVICES IN CHILDREN 'S ROOM IN ABEPURA HOSPITAL

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ABSTRACT

The organization of hospital food is a series of activities ranging from menu planning, planning of food requirements, planning of budgets, procurement of food ingredients, receipts and storage, cooking of food ingredients, distribution and recording, reporting and evaluation. The purpose of the study in general aims to determine the factors that are related to patient satisfaction in hospital food services in the child care room of Abepura Hospital.

The type of this research is observational analytic with *cross sectional* approach. The population in the study was in patients of children in Abepura Hospital. The samples in the study were totally 96 patients of children aged 6-12 years with parents as assistants / respondents during hospitalization. The sampling technique used is *porous sampling*. Patient satisfaction seen according to observations on left overs, analyzed using Comstok 6-point scale. Analysis statistics use test relationships between variables with test *Chi-Square*.

The results showed that of 96 patients, which states the presentation of food at a time when as many as 62 (64.6%), which states that served food colors attract as many as 40 (41.7%), which states the portion of the food served in accordance ebanyak 43 (44.8%), which states that served good food texture as many as 61 (63, 5%), suggesting variation varied food menu were totally 58 (60.4%), cutlery served in a clean state as much as 94 (97.9%). The results of the bivariate analysis showed no association timeliness of food distribution with patient satisfaction (p-value = 0.258), there is no relationship between food colors with patients satisfactions (p value = 0.483), there is a relationship between portions of food with gratification of n patients (p-value = 0.043), there is a correlation between food texture and patient satisfaction (p-value = 0.029), there is no relationship between food variation with food satisfaction (p-value = 0.092), there is no relationship between tool cleanliness eat with food scraps (p-value = 1,000).

Keywords: *Food Services, Patients gratifications, children patients*

1. BACKGROUND

The hospital is one of the health facilities and is the highest reference place in the effort of health services, which plays an important role in improving the health status of the community. The function of the hospital provides perfect service, in an effort to cure and recover patients. The organization of hospital food is a series of activities ranging from menu planning, planning of food requirements, planning of budgets, procurement of food ingredients, receipt and storage, cooking of food ingredients, distribution and recording, reporting and evaluation. With the aim of providing quality food according to nutritional needs, costs, safe and acceptable to consumers in order to achieve optimal nutritional status (Ministry of Health,

2013). Foods that meet the nutritional needs and is consumed consumables will accelerate healing and shorten the nurse's. To prevent the occurrence of malnutrition in the hospital, it is pursued in such a way that the patient can consume all the food given or suppress the remaining food.

Satisfaction is the level of feelings of a customer / patient after comparing the performance or perceived results (services received and felt) with those expected. Patient satisfaction can be seen from the indicator of food residue by patients (Heryawanti et al 2004). The research result Nareswara, et al (2011) at Dr Kariadi Semarang indicate that there is a relationship between leftovers patients with patient satisfaction with the appearance of the food, while research done Semedi et

al (2011) in hospitals Sunan Kalijaga showed most patients (97, 3%) were satisfied with the food service at the hospital.

Indicators that are used as a benchmark for the success of the performance of health services to the community, generally refers to the Minimum Service Standards (SPM). SPM Hospital determined by the Minister of Health of the Republic of Indonesia. No. 129 / MenKes / SK / ii / 2008, among others, the maximum remaining food consumed by patients is 20% and customer satisfaction with inpatient services is $\geq 90\%$.

A. Aim

Analyzing the relationship timeliness of food distribution, food colors, food portion, the texture of the food, menu variety, hygiene tools, with patient satisfaction in child-care spaces Abepura hospital.

$$n = \frac{z^2 \alpha^2 PQ}{d^2}$$

It was taken by 96 samples . The sampling method used was *purposive sampling*. The sample selection criteria include:

Inclusion Criteria:

1. Patients were hospitalized in the nursing room of first, second and third graders in Abepura Hospital
2. between 6-12 years old.
3. Patients who have been treated for at least 2days.
4. Patients who can consume food without aids.
5. Patients who get a regular
6. The patient is in a conscious state and can be invited to communicate
7. Patients and assistants who are willing to be sampled
8. The patient's companion is a parent or person who accompanies the patient from the beginning of being hospitalized.

D. Types and how to collect data

Variabel be tested in accordance with the purpose of the study is

1. The independent variables, which include timeliness of

This type of research is observational analytic with design *cross sectional study or cross section*

B. Research places and times

The study took place at the Abepura Regional General Hospital in a child in patient room. Time of research in 2017.

C. Population and sample

The population of this study was inpatients in the childcare room in 2017 from January to April, as many as 519. The samples in this study were pediatric patients and as respondents in helping to provide information is the patient's companion, if the patient did not know the questions asked researchers such as: food distribution time, food portion size The calculation of sample size in this study was calculated based on the formula:

food distribution, food colors, food portion, the texture of the food, menu variety, hygiene tool eat. Data were collected clicking using questionnaire by interview.

2. The dependent variable is patient satisfaction, collected using interviews according to the 2008 Ministry of Health and Health guidelines. Patient satisfaction here is an expression of one's feelings for the results of a product in this case is the food served. This expression is measured by the amount of leftovers, Satisfied if the remaining food is $\leq 20\%$ while t is not satisfied, if leftovers are $> 20\%$ (Health Dept, 2008).

E. Data analysis

a . Univariate analysis

Univariate analysis was performed on each variable from the results of the study. This analysis produces a distribution and a percentage of each variable, which is then presented by describing all variables as information material using a frequency distribution table (Notoadmojo, 2005). The food scraps are used using a scale of 6 points (visual estimates) .

b . Bivariate Analysis

Bivariate analysis was performed to analyze the relationship of independent variables with dependent variables with statistical tests adjusted for the existing

data scale, namely ordinal. The statistical test used is the *ChiSquare* formula because finding the relationship between variables that have been determined using a computer formula is as follows:

$$\chi^2 = \sum \frac{(O - E)^2}{E}$$

Information:

| | |
|----------|----------------------|
| χ^2 | : Chi squared |
| fo | : frequency observed |
| fh | : frequency in hope |

2. RESULTS

a. Distribution of samples based on Age and Gender

Table 4.1. Distribution of samples based on age and sex in the Child Care Room of the Abepura Regional General Hospital.

| No. | Age (years) | n (96) | % |
|-----|--------------|--------|------|
| 1 | 6 years | 38 | 39.6 |
| 2 | 7 years | 18 | 18.8 |
| 3 | 8 years | 14 | 14.6 |
| 4 | 9 years | 7 | 7.3 |
| 5 | 10 years | 8 | 8.3 |
| 6 | 11 years old | 4 | 4.2 |
| 7 | 12 years old | 6 | 6.3 |
| 8 | 13 years old | 1 | 1.0 |

| No. | Gender | n (96) | % |
|-----|--------|--------|----|
| 1 | Man | 48 | 50 |
| 2 | Women | 48 | 50 |

Based on Table 4.1 it is known that the age distribution of the Abepura Hospital pediatric patients aged 6 ter many years of the 38 (39.6%) and the least was the age of 13 years, which one person

(1.0%). The sex distribution of child patients at Abepura General Hospital is 48 people (50%) and 48 women (50%).

b . Distribution of Diseases and Nutritional Conditions

Table 4. 2. Distribution of Diseases and Nutritional Conditions Suffered in the Child Care Room of the Abepura Regional General Hospital.

| No. | Disease | n | % |
|-------|---------------------|----|------|
| 1 | Ulcer | 5 | 5.2 |
| 2 | ARI | 11 | 11.5 |
| 3 | Malaria | 25 | 26.0 |
| 4 | Muntaber / Diarrhea | 17 | 17.7 |
| 5 | Spit / Smallpox | 9 | 9.4 |
| 6 | Fever | 9 | 9.4 |
| 7 | Thypus | 6 | 6.3 |
| 8 | Bile inflammation | 1 | 1.0 |
| 9 | Measles | 2 | 2.1 |
| 10 | Tuberculosis | 3 | 3.1 |
| 11 | Malnutrition | 1 | 1.0 |
| 12 | Etc | 7 | 7.3 |
| Total | | 96 | 100 |

Based on Table 4. 2 note that this type of disease and the nutritional condition of a patient's highest child Abepura Hospital is malaria as many as 25 people

(26%) and the lowest was less nutrition as much as 1 (1%).

Sample Distribution Based on Timeliness of Food Distribution, Food Color, Food Portion, Food Texture, Food Variation, Meal Hygiene, Patient

Satisfaction in the Abepura General Hospital childcare room.

Table 4. 3 . Distribution of samples Based on Responses Regarding Timeliness of Food Distribution, Food Color, Food Portion, Food Texture, Food Variation, Meal Hygiene, and Patient Satisfaction in the Child Care Room of Abepura Hospital.

| Variable | n (96) | % |
|---------------------------------|--------|------|
| Timeliness of Food Distribution | | |
| On time | 62 | 64.6 |
| Not on time | 34 | 35.4 |
| Food Color | | |
| Interesting | 40 | 41.7 |
| Not attractive | 56 | 58.3 |
| Food portion | | |
| Corresponding | 43 | 44.8 |
| It is not in accordance with | 53 | 55.2 |
| Food Texture | | |

| | | |
|----------------------|----|------|
| Satisfy | 61 | 63.5 |
| Not satisfactory | 35 | 36.5 |
| Menu Variations | | |
| Varies | 58 | 60.4 |
| Does not vary | 36 | 39.5 |
| Dish hygiene | | |
| Clean | 94 | 97.9 |
| Not clean | 2 | 2.1 |
| Patient Satisfaction | | |
| Satisfied | 31 | 32.3 |
| Not satisfied | 65 | 67.7 |

Based on Table 4. 3, it is known that in the variables of timeliness of food distribution the number of samples who answered on time 62 people (64.6%) and not on time 34samples (35.4%). Food color variables the number of samples that answered attracted 40 samples (41.7%) and did not draw 56 samples (58.3%). The variable portion of food is the number of samples that answered according to 43 samples (44.8%) and did not match 53 samples (55.3%). Food texture variables the number of samples that answered satisfactorily

61samples (63.5%) and did not satisfy 35 samples (36.5%). Variation of food variation the number of respondents who answered varied 58 samples (60.4%) and the answers did not vary 38 samples (39.6%). Meal hygiene variables the number of samples that answered net 94 samples (97.9%) and did not match 2 samples (2.1%). Variable patient satisfaction, 31 samples (32.3%) satisfied and 65 samples (67.7%) were not satisfied with the service.

The relationship of the timeliness of food distribution with the satisfaction of pediatric patients.

Table 4. 4 . The Relationship of the Timeliness of Hospital Food Distribution with Children's Patient Satisfaction in the Child Care Room of Abepura Hospital.

| Timeliness of food distribution | Satisfaction | | Total | | <i>p-value</i> |
|---------------------------------|--------------|-----|-------|------|----------------|
| | Satisfied | Not | n | % | |
| | | | | | |
| Right | 23 | 39 | 62 | 64.6 | 0.258 |
| Not exactly | 8 | 26 | 34 | 35.4 | |
| Total | 31 | 65 | 96 | | |

Based on table 4. 4 it is known that from 62 samples (64.6%) who answered food distributed on time, there were 23 samples (37.1%) who were satisfied with service and 39 samples (62.9%) were not satisfied with food

service presented. Of 34 samples (35, 4%), who answered food distribution not on time as many as 8 samples (23.5%) felt satisfied and not satisfied as many as 26 samples (76.5%).

Based on the analysis using the *Chi-Square* statistical test, the *P-value* = 0.258 shows that there is no relationship in the timeliness of food

distribution with patient satisfaction with hospital food services.

The relationship between food color and child patient satisfaction.

Table 4. 5 Relationship between Food Color and Satisfaction of Child Patients in the Child Care Room at Abepura Hospital.

| Food color | Satisfaction | | Total | | <i>p-value</i> |
|----------------|--------------|-----|-------|------|----------------|
| | Satisfied | Not | n | % | |
| | | | | | |
| Interesting | 15 | 25 | 40 | 41.7 | 0.483 |
| Not attractive | 16 | 40 | 56 | 58.3 | |
| Total | 31 | 65 | 96 | | |

(Source: Primary Data, 2017)

Based on Table 4 .5 note that of the 40 samples (41.7%) who answered the color of the food served attractively there were 15 samples (37.5%) were satisfied and 25 samples(62.8%) are dissatisfied with the service of the food served. Of the 56 samples (58, 3 %) who answered the color of the food served was not as

attractive as there were 16 samples (28.6%) who felt satisfied and not satisfied as many as 40 samples (71.4%).

Based on the analysis using the *Chi-Square* statistical test, the *P-value* = 0.483 showed that there was no correlation between food color and patient satisfaction with hospital food services.

c. The relationship between food portions and child patient satisfaction.

Table 4. 6 . The Relationship of Food Portions to Children's Patient Satisfaction in the Child Care Room of AbepuraHospital .

| Food portion | Satisfaction | | Total | | <i>p-value</i> |
|------------------------------|--------------|-----|-------|------|----------------|
| | Satisfied | Not | n | % | |
| | | | | | |
| Corresponding | 19 | 24 | 43 | 44.8 | 0.043 |
| It is not in accordance with | 12 | 41 | 53 | 55.2 | |
| Total | 31 | 65 | 96 | | |

(Source: Primary Data, 2017)

Based on table 4. 6 of 43 samples (44.8%) who answered the portion of food served accordingly, there were 19 samples (44.2%) who were satisfied and 24 samples (55.8%) who were dissatisfied with the

food service served. Whereas from 3 samples (55.2%) who answered the portion of food served was not appropriate, there were 12 samples (22.6%) stated that they were satisfied and not satisfied as many as 41 samples (77.4%).

The results of the *Chi-Square* statistical test obtained a *P-value* = 0.043 indicating that there is a relationship between the portion of food served with patient satisfaction with hospital food services.

d. Relationship of food texture with satisfaction of child patients.

Table 4. 7 Relationship of Food Texture with Satisfaction of Child Patients in the Child Care Room of Abepura Hospital.

| Food texture | Satisfaction | | Total | | <i>p-value</i> |
|---------------|--------------|-----|-------|------|----------------|
| | Satisfied | Not | n | % | |
| | | | | | |
| Corresponding | 25 | 36 | 61 | 63.5 | 0.029 |
| Not | 6 | 29 | 35 | 36.5 | |
| Total | 31 | 65 | 96 | 100 | |

(Source: Primary Data, 2017)

Based on table 4. 7 of 61 samples (63.8%) were answering the texture of food is well presented , as many as 25 samples (41%) were satisfied and 36 samples (59%) were not satisfied with the food service served. Of the 35 samples (36 , 5 %) who responded to the texture of food that was not served accordingly there were 6 samples (17.1%) who were satisfied with food service and those who were not satisfied as many as 29 samples (82.9%).

05 indicates that there is a relationship between the texture of food served by patient satisfaction on the hospital food service.

The results of the *Chi-Square* statistical test obtained *P-value* = 0.029 and the value of $\alpha = 0$,

Relationship between hospital food menu variations and child patient satisfaction.

Table 4. 8 . Relationship of Food Menu Variation with Children's Patient Satisfaction in the Child Care Room of Abepura Hospital.

| Menu variations | Satisfaction | | Total | | <i>p-value</i> |
|-----------------|--------------|-----|-------|------|----------------|
| | Satisfied | Not | n | % | |
| | | | | | |
| Varies | 23 | 35 | 58 | 60.4 | 0.092 |
| Does not vary | 8 | 30 | 38 | 39.6 | |
| Total | 31 | 65 | 96 | | |

Table 4. 8 shows that of 58 samples (60.4%) presented right answer ma menu is varied, there are 23 samples (39.7%) were satisfied and 35 samples (60.3%) are not satisfied. While from 38 samples (39.6%) who answered the food menu that was served did not vary

as much as 8 samples (21.1%) felt satisfied and not satisfied as many as 30 samples (78.9%) towards the food service served .

Chi-Square analysis obtained a *P-value* = 0.092 indicating that there was no relationship to the

variation of the food menu presented with patient satisfaction with hospital food services.

f. Relationship between hospital cutlery hygiene and child patient satisfaction.

Table 4. 9 Relationship between Hospital Hygiene Equipment and Children's Patient Satisfaction in the Child Care Room at Abepura Hospital.

| Cutlery cleanliness | Satisfaction | | Total | | <i>p-value</i> |
|---------------------|--------------|-----|-------|------|----------------|
| | Satisfied | Not | n | % | |
| Clean | 31 | 63 | 94 | 97.9 | 1,000 |
| Not clean | 0 | 2 | 2 | 2.1 | |
| Total | 31 | 65 | 96 | | |

(Source: Primary Data, 2017)

Based on table 4. 9 of the 94 samples (97.9%) who responded to eating utensils in a clean state there were 31 samples (33%) who were satisfied and 63 samples (67%) were dissatisfied with the food services served. While the sample that answered the cutlery was presented as unclean as many as 2 samples (2.1%) and all were not satisfied with the hospital food service.

3. DISCUSSION

The relationship of the timeliness of food distribution with the satisfaction of pediatric patients

Humans are scientifically hungry after 3-4 hours of eating, so after that time you have to get food, whether in light or heavy food. The right time for distribution of food is delivered 30 minutes before mealtime (Suryawati, 2006). In this study, there is no relationship between the timeliness of hospital food distribution and the satisfaction of pediatric patients, although food distribution in Abepura Hospital is quite good, the operational standard of food distribution in Abepura Hospital is: morning at 06:00 to 07:00, afternoon 12:00 to 13:00, and for the evening food is distributed from 17:30 to 18:30.

Patient satisfaction is an expression of one's feelings for the performance or results of a product in this case is the food served, measured by the amount of leftovers. The remaining food that is not consumed by the patient is a maximum of 20%. In this study

Based on the analysis using the *Chi-Square* statistical test, the *P-value* = 1,000 showed that there was no relationship between the cleanliness of the cutlery served with patient satisfaction.

observations of leftovers were carried out for 1 full day (breakfast, lunch, dinner) for each patient. The remaining food was observed using the *comstock* method on a 6 point scale. If the amount of leftover food is less or equal to 20%, the patient is satisfied with the food service provided by the hospital, but if the amount of leftover food is more than 20% then the patient is classified as dissatisfied.

The results of this study are in line with the research conducted by Widosari and Widiyaningsih (2017) stating that there is a relationship between the accuracy of meal hours and patient satisfaction and there is no relationship between food consumption from outside the hospital and patient satisfaction at RSUP dr. Soeradji Tirtonegoro. This is because the patient's eating schedule is not in accordance with the time schedule for serving the food where the patient sometimes does not directly eat the food served because of the condition of the illness or is still lazy to

eat the food served even though the time is on time on schedule.

2. The relationship between the color of food served by the hospital and the satisfaction of pediatric patients

Food color plays a major role in food appearance. Because if the color is not attractive it will reduce the taste of people who eat it. From the results of research conducted in the child care room at Abepura General Hospital there was no relationship between the color of food served with patient satisfaction (as measured by the patient's leftovers). The color of the food served is in accordance with an attractive color combination, but it is possible for the research respondents not to be concerned with the color of the food served because of the sick condition.

The results of research conducted by Mustafa, et al. (2012) state that the description of the level of satisfaction of class 1,2,3 inpatients at RSUD Mamuju on food appearance attributes is the form, color of food presentation is at a median of 2.0 (morning, afternoon, evening), there are at the level of dissatisfaction (<3) because the form of food served is not attractive, the color of the main food in the vegetable changes because the heating process is too long.

3. Relationship between hospital food portions and child patient satisfaction

From the results of research conducted in the child care room at Abepura General Hospital there is a relationship between the portion of food served with patient satisfaction (as measured by the patient's leftovers). As many as 65 samples revealed that they were not satisfied with the portion of food served by the hospital, because the sample studied was the age of the children, the portion of food served was too much, not in accordance with the patient's ability to consume the food, making a lot of food wasted. This happened because the Abepura General Hospital did not have a specific standard for child patients so that the portion of food received was the same as the portion of food received by adult patients. Apart from other factors, if the food is served according to the standard portion of the child, then the food that is left is only a little because the portion of the dish given is according to the patient's needs.

The results of research conducted by Damayanti (2013) in Cengkareng Hospital showed a significant correlation between large portions of animal side dishes and animal side dishes, large portions of animal

side dishes and remaining vegetable side dishes, large portions of vegetables and leftover vegetables and large portions of vegetables and satisfaction, but there is no significant relationship between the portion of staple food and the remainder of staple food. The results of this study are in line with the research conducted by Sukadi and Wahyuningsih (2015) in inpatients at the Sunan Kudus Islamic Hospital, namely that the majority of research subjects satisfied in nutrition services based on food portions served were strengthened by the reason that portions were right, standard portions the portion has been adjusted to the sick person, but a small number of respondents are not satisfied because sometimes the portion is excessive and patients who eat using the aluminum plate are lacking.

4. Relationship of hospital food texture with satisfaction of pediatric patients

From the results of research conducted in the child care room at Abepura General Hospital it is known that food texture affects patient satisfaction (as measured by leftovers). This happens because the condition of his body is not healthy or sick where the texture of the food eaten is not in accordance with his preferences. For some patients with certain symptoms having difficulty swallowing while the texture of soft food served by the hospital is only staple food or porridge, for side dishes and vegetables are processed as usual. As observed by researchers, gravy fish dishes using yellow-tailed fish are cut into pieces, cooked with spices and then served to patients without being processed or modified so that the texture is easier for the patient to swallow. The results of research conducted by Wahyunani, et al. (2017) in VIP patients at Panti Rapih Hospital in Yogyakarta showed 12% of patients said they were not satisfied with the aroma of food and 10% of patients said they were not satisfied with the maturity level, especially for rice that was judged hard by patients. The basic observation and evaluation, hard rice on the top can be caused by the length of the waiting time when the rice begins to be printed and arranged on a plate and can also be caused by heating from the heating trolley.

5. The relationship between variations of the hospital food menu with the satisfaction of pediatric patients

Food variations are the dosage arrangement of food contained in one dish in each presentation, with indicators of variations in food ingredients used, variations in the food menu and menu cycle

(perputara menu) that are served during treatment (PGRS, 2013). Menu variation is the arrangement of foodstuffs contained in one different dish at each serving. Cuisine must vary, a type of cuisine served many times in a short period of time will bore consumers (Moehyi, 1992)

The samples studied were children with ages 6-13 years who were able to choose food. Sometimes parents prefer to offer whatever food they like, so the child wants to eat. Duration of treatment affects the variety of menus received by patients, so patients who are treated more than 5 days usually get bored with the food served (Wiboworini B, 2000).

The use of a 10 + 1 day menu cycle is expected to avoid the occurrence of food boredom that is repeated over time. Menu with siklus 10 days also make it easier to regulate the cost of food in order to efficiently research conducted Mas'ud, et al (2015) in two hospitals showed biaya food available for Rp.36.000, has a simple menu that are already achieving energy value 2100 kilocalories per day. This illustrates that the small cost will result in a simple and limited menu in choosing food ingredients so that the variation is also limited, which causes patients not to consume the food served in both hospitals. This limitation can be revealed by respondents as disliking vegetable dishes, and cooked fish, maybe the types of fish are limited.

From the results of research conducted in the nursery room of Abepura Hospital, it was found that there was no relationship between the variation of food served by the hospital and patient satisfaction (as measured by leftovers). Food variations in Abepura General Hospital are classified as good and have varied according to respondents who have been treated for 3 days on average or the possibility of patients being treated does not care about the variety of food menus served.

6. Relationship between hospital cutlery hygiene and child patient satisfaction

Hygiene of eating utensils is the condition of eating utensils free of impurities that can be seen and felt; like oil, food spills that stick to the food equipment that the hospital presents. From the results of research conducted in the child care room at Abepura General Hospital, there was no correlation between the cleanliness of cutlery served with patient

satisfaction. As many as 94 respondents said the cutlery that was served was clean, because the cutlery was always replaced and washed when it would be used to serve food and the patient had trusted the hospital or nutrition services to clean the utensils used.

The results of the research conducted by Sukadi and Wahyuningsih (2015) in the inpatients of the Sunan Kudus Islamic Hospital stated that most patients were satisfied with the cleanliness of the eating utensils but still lacked a few of the fishy-smelling cutlery because they were not properly washed.

4. CONCLUSION

There is no relationship between the timeliness of food distribution, the color of food served, the portion of food served, the texture of food served, variations in food menus, hygiene of cutlery served with patient satisfaction with hospital food services in the child care room at Abepura Hospital

Suggestion

For the Abepura Regional General Hospital, it is necessary to control or evaluate food delivery activities from menu planning to serve food to patients. It is hoped that the Abepura Regional Hospital will evaluate the standard of serving, especially for pediatric patients so as to minimize the amount of leftover food in accordance with the needs of pediatric patients, and consider the texture of food for each patient with certain complaints such as difficulty in swallowing soft food provided not just food staple (porridge) but also side dishes and vegetables.

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