

Analysis Of Service Quality Towards Pregnant Women's Satisfaction Level At The Maternal And Child Health (Kia) Polyclinic, Pasar Masurai Community Health Center, Lembah Masurai District, Merangin Regency

Ratna Sari Dewi¹, Putri Wulandari², Sondang Selviana Silitonga³

^{1,2}Master of Public Health, Prima Indonesia University, Medan, Indonesia

³Master of Public Health, Adiwangsa Jambi University, Jambi, Indonesia

**E-mail : selvianasondang@gmail.com*

ABSTRACT

Quality service has an impact on the performance of health workers such as pregnant women who undergo examinations, for example, maternal and baby health services which are the performance of midwives. This study aims to analyze the quality of service on the level of satisfaction of pregnant women at the maternal and child health (KIA) clinic, Pasar Masurai Health Center, Lembah Masurai District, Merangin Regency. This type of research is cross-sectional. The sample in this study was the number of patient visits, namely 100 respondents. Data were analyzed using Chi-Square and Logistic Regression. The results of the research show that there is a significant relationship between tangible (physical evidence), reliability (reliability), responsiveness (responsiveness), assurance (guarantee), empathy (empathy) with the satisfaction of pregnant women at the maternal and child health polyclinic (KIA) Pasar Masurai Community Health Center Lembah Masurai District, Merangin Regency. After carrying out multiple logistic tests from 3 models, it was found that the most dominant factor influencing patient satisfaction was the tangible variable (physical evidence) with a p-value of 0.000, the reliability variable with a p-value of 0.001, and the empathy variable with p-value 0.000.

Keywords: *Patient satisfaction, service quality*

INTRODUCTION

The government is responsible for organizing health development as a crucial part of achieving national development goals. Increasing awareness, willingness, and ability to live healthily to achieve an increase in health status in citizens is the goal of development in the health sector (Ariyanto, 2020)

Indonesia has the goal of ensuring that every citizen obtains optimal health so that they can realize physical and mental health in health development. The government's efforts to realize health development are through providing practical

services that can be reached by all levels of society fairly and evenly without considering social and economic status. The Community Health Center is one of the health service places (Santoso et al., 2021)

One of the health service providers is the Community Health Center which has the responsibility to organize health efforts in a promotive, preventive, curative, and rehabilitative manner in the work environment. The Community Health Center as an organizer in health development is an integral part of national development. The implementation of health development aims for everyone to consciously, willingly, and able to live healthily to improve the level of social and economic health optimally (Ulumiyah, 2018).

Article 19 of Law No. 36 of 2009 states that everyone has the right to receive health services from the government which is responsible as a provider of facilities and infrastructure to obtain quality, safe, efficient, and affordable health for all levels of society. Increasing the availability of facilities evenly in provide basic health services is one of the efforts made by health centers (Umam et al., 2019).

Quality services have an impact on the performance of health workers such as pregnant women who undergo examinations, for example, maternal and infant health services which are the performance of midwives. Maternal and infant mortality rates can be minimized if someone experiences pregnancy, childbirth, and postpartum safely (Nisa et al., 2019).

Perfect health services have an impact on the quality of services that provide satisfaction to everyone. Patient satisfaction will increase if the services provided meet their needs. Patient satisfaction is a reaction to feelings that arise due to the service obtained by comparing what is desired (Masyarakat et al., 2020).

The difference between what is expected and what happens causes dissatisfaction when wanting to use health services. Complaints are the result of dissatisfaction experienced by patients when using health services. Inappropriate performance expectations will cause patients to be disappointed. Patient satisfaction can be measured if there is a match between performance and expectations (Luan et al., 2018).

Work, results, and speed are the benchmarks for service performance that is balanced with patient expectations, appropriately in completing work. The government has established various health agencies to fulfill the people's rights to health services throughout Indonesia (Ariyanto, 2020).

The regional Technical Implementation Unit (UPTD) in the district/city health office is a

health center that has the task and obligation to provide health development policies for the district/city government that apply and are stated in the regional Medium-Term Development Planning (RPJMD) and the five-year plan of the district/city health office.

Based on the Indonesian Health Profile (2020), the coverage of first visits (K1) in Indonesia in 2020 was 93.3%, and coverage (K4) was 84.6%. With the highest coverage (K4) in Indonesia, it is in the province of DKI Jakarta, which is (98.9%), North Kalimantan (96.7%), and Banten (96.6%). While the lowest coverage (K4) is in the province of Papua, which is (27.5%). North Sumatra is ranked in the top 10 with the lowest coverage (K4) in Indonesia (79.8%) (Ministry of Health of the Republic of Indonesia 2020). Based on the report from Basic Health Research (Riskesdas) in 2018, the proportion of Antenatal Care (ANC) service locations utilized by mothers during pregnancy in Indonesia was known that the majority of mothers chose midwife practice health facilities at 42.5%, health center/pustule health facilities at 18.4%, doctor/clinic practice health facilities at 11.3%, integrated health post health facilities at 10.9%, and hospital health facilities at 9.4% (Ministry of Health of the Republic of Indonesia, 2018). In 2021, the achievement of K1 in Jambi Province 2021 was 96.88% (67,802 pregnant women), which means that it has reached the K1 target in 2021 of 88% and K4 services in Jambi Province were 90.68% (63,464 pregnant women) which means that it has reached the target set in Jambi Province of 85%. Merangin Regency K1 coverage was 7,272 pregnant women or 101.72% and K4 coverage was 6,634 pregnant women or 92.79% (Jambi Provincial Health Office, 2022).

LITERATURE REVIEW

Based on the Indonesian dictionary, it is simply stated that quality is a measure, degree, or level of good or bad of a product or service. Deming (in Area, 2020) states that quality is based on the perspective of contextual aspects (quality becomes the identity of a product offered), customer perception (quality is the customer's response to the service obtained based on experience), and the expectations desired by consumers (quality is something that is done based on consumer expectations).

Service quality is the suitability of appearance based on standard affiliation of an intervention that will be implemented, to have an impact on the community to have the ability to avoid or prevent death, illness, malnutrition, and disability. Service quality based on several definitions is customer satisfaction with the quality of service that conformity with the average level of community satisfaction that is following professional standards with service

standards that rely on the availability of potential resources in optimal health institutions or according to expectations (Area, 2020).

Azrul Azwar (in Widyastuti 2020), states that the quality of health services can provide satisfaction to every consumer who uses health services based on the average level of satisfaction based on professional standards and codes of ethics in their implementation.

The definition of quality service in a broad sense is comprehensive, meaning the reach achieved in providing real services that are by the criteria and standards of a good and modern medical profession that has been by the needs or exceeds the targets and expectations of consumers based on optimal efficiency levels. Perception is an organized individual process in interpreting sensory impressions that have meaning or giving an assessment of the good or bad service received. For this reason, one of the approaches used as a reference in improving the quality of service is the Service Quality model which consists of reliability, responsiveness, tangibles, assurance, and empathy (Astuti, 2017).

Performance is a standard where performance standards according to the management dictionary are called work standards, which are used to compare certain behaviors with beliefs, policies, laws, customs, and other intangible asset discrepancies (Larasati & Sisilia, 2019)

Individuals or groups who carry out an activity with perfect readiness to carry out the responsibilities given to match expectations are interpreted as performance. Each employee has work results through the performance provided to assist the agency in achieving and realizing goals.

Efforts to improve performance optimally have been designed by the institution in the form of SOPs that can make it easier for someone to complete work and reduce errors in work (Ichsan et al., 2020).

Performance assessment involves the development of objects that are the subject of research. According to (Hariandja in Nasrullah 2017), the organization assesses each employee. The abilities possessed will affect the evaluation of personal performance, behavior, and work results. Achieving targets with guarantees is the goal of performance evaluation in the company to determine the conditions and level of achievement, especially if there is a gap in work to be addressed immediately in achieving a goal. The process of

Assessing and carrying out tasks becomes a method of evaluating individual and group performance in a company by determining previously agreed performance standards. Rewards for work results can be done fairly through performance evaluation (Nursalam, 2017).

Health services to pregnant women by health workers are called Antenatal Care, the implementation of which is by the service standards set by the Midwifery Service Standards/SPK. Obstetrician and gynecologist specialists, midwives, nurses, and general practitioners are included as health workers (Nurmawati & Indrawati, 2018).

Antenatal care (ANC) is a service and action provided to pregnant women so that their pregnancy is healthy until delivery, maternal and infant mortality rates can be reduced through these efforts. Supervision of pregnant women is provided to prepare conditions physically and mentally, to save mothers and babies during pregnancy, childbirth, and postpartum (Lenna Maydianasari, 2019).

Antenatal care is provided during pregnancy at least 4 times by midwives. Anamnesis and monitoring of the mother and fetus are provided carefully by assessing the level of normal development in the service. High-risk events with complaints such as anemia, malnutrition, hypertension, sexually transmitted diseases (STDs), and HIV/AIDS infection must be identified by midwives through immunization, counseling, and health education. Accurate data recording at each visit by the midwife. A midwife is required to be able to take action if an abnormality is identified and to immediately make a referral (Mufdlilah, 2017). The risk of pregnancy or childbirth can be detected early through routine examinations for both the mother and the fetus. Pregnant women must undergo examinations once a month until the 4th month, twice a month from the 4th month to the 9th month, and once a week in the last month (Armaya, 2018).

Patient satisfaction has a close relationship to the quality of service which is the benchmark for consumer satisfaction. The conformity between expectations and reality felt by consumers regarding the services received is the reason for the emergence of satisfaction.

METHODS

This research design is descriptive and analytical. The method used is cross-sectional. The location of the study was conducted at the Pasar Masurai Health Center, Merangin Regency, conducted in October-December 2023. The population in this study were all pregnant women who visited the Pasar Masurai Health Center. The sample in this study were mothers who

had given birth at the Pelompek Health Center. In determining the sample size in this study using the Lameshow formula, the result was 96.04, so in this study, 96 respondents were needed and to prevent dropout, the number of respondents was rounded up to 100 respondents.

RESULTS

Table 1. Characteristics of Research Informants

No	Health Service Quality	Total	Percentage
I. Tangible (physical evidence)			
1.	Satisfied	54	54,0
2.	Less satisfied	46	46,0
II. Reliability			
1.	Satisfied	44	44,0
2.	Less satisfied	56	56,0
III. Responsiveness			
1.	Satisfied	53	53,0
2.	Less satisfied	47	47,0
IV Assurance			
1.	Good	52	52,0
2.	Less good	48	48,0
V Empathy			
1.	Good	44	44,0
2.	Less good	56	56,0
Total		100	54

The results of the study on 100 respondents, most respondents were satisfied with the Tangible (Physical Evidence) of the quality of service at the Maternal and Child Health Polyclinic (KIA) of the Pasar Masurai Health Center, Lembah Masurai District, Merangin Regency, as many as 54 respondents (54.0%). Feeling less satisfied with the Reliability (reliability) of the quality of service at the Maternal and Child Health Polyclinic (KIA) of the Pasar Masurai Health Center, Lembah Masurai District, Merangin Regency, as many as 44 respondents (44.0%). Feeling satisfied with the Responsiveness (responsiveness) of the quality of service at the Maternal and Child Health Polyclinic (KIA) of the Pasar Masurai

Health Center, Lembah Masurai District, Merangin Regency, as many as 53 respondents (53.0%). Most respondents stated that they were satisfied in terms of assurance (guarantee) of the quality of service at the Maternal and Child Health Polyclinic (KIA) of the Pasar Masurai Health Center, Lembah Masurai District, Merangin Regency, as many as 52 respondents (52.0%). Most respondents stated that they were dissatisfied with the empathy for the quality of services at the Maternal and Child Health (KIA) Polyclinic, Pasar Masurai Health Center, Lembah Masurai District, Merangin Regency, as many as 56 respondents (56.0%).

Table 2. Bivariate Analysis

No	Variable	Health Service Quality						<i>p-value</i>
		Satisfied		Less satisfied		N	%	
		N	%	N	%			
I	Tangible							
1	Satisfied	50	92,6	4	7,4	54	100	0,000
2	Less satisfied	3	6,5	43	93,5	46	100	
II	Reliability							
1.	Satisfied	41	93,2	3	6,8	44	100	0,000
2.	Less satisfied	12	21,4	44	78,6	56	100	
III	Responsiveness							
1.	Satisfied	47	88,7	6	11,3	53	100	0,000
2.	Less satisfied	6	12,8	41	87,2	47	100	
IV	Assurance							
1.	Satisfied	47	90,4	5	9,6	52	100	0,000
2.	Less satisfied	6	12,5	42	87,5	48	100	
V	Empathy							
1.	Satisfied	43	97,7	1	2,3	44	100	0,000
2.	Less satisfied	10	17,9	46	82,1	56	100	
	Total	53	53,0	57	47,0	100	100	

DISCUSSION

Based on the results of the study, show that out of 46 respondents who stated that they were dissatisfied with the quality of service based on tangible (physical evidence), 43 respondents

(93.5%) stated that they were dissatisfied with the service provided. The results of the statistical test showed a $p\text{-value} = 0.000$ ($p < 0.05$) in other words there is a significant influence between tangible (physical evidence) on the satisfaction of pregnant women at the Maternal and Child Health Polyclinic (KIA) of the Pasar Masurai Health Center, Lembah Masurai District, Merangin Regency.

In terms of Tangible (physical evidence), patients/patients' families feel dissatisfied with the physical appearance of the Health Center, for example, the appearance of the building, and waiting room, availability of parking, cleanliness, tidiness, and comfort of the room, as well as equipment owned by the Health Center, many complained about the uncomfortable Health Center toilets and some damaged ceilings. Of course, in undergoing treatment, patients need the necessary physical facilities.

The quality of service in the Tangible dimension (physical evidence) is in the form of physical things such as employee equipment and communication facilities, comfort of the place where the service is carried out, ease of the service process, and the use of assistive devices in health services (Gurning, 2018).

Based on the results of the study, shows that out of 56 respondents who stated that they were dissatisfied with the reliability of the health center, 44 respondents (78.6%) stated that they were dissatisfied with the services provided. The results of the statistical test showed a $p\text{-value} = 0.000$ ($p < 0.05$) in other words there is a significant influence between reliability on the satisfaction of pregnant women at the Maternal and Child Health Polyclinic (KIA) of the Pasar Masurai Health Center, Lembah Masurai District, Merangin Regency.

Reliability is the ability of an agency/company to provide services according to what is promised accurately and reliably, performance must be to customer expectations which means punctuality, the same service for all customers without errors, and high accuracy (Gurning, 2018)

The aspect of reliability has a significant effect on patient satisfaction, Reliability is the ability to provide services immediately, accurately, and satisfactorily. As stated in previous research by Sapmaya Wulan (2018), the speed and accuracy of patient admission procedures, the speed of examination, and treatment services for satisfactory patients will make patients satisfied with the reliability of the Health Center.

Based on the results of the study, show that out of 47 respondents who stated that they were dissatisfied with the responsiveness given by officers to patients, 41 respondents (87.2%) stated that they were dissatisfied with the services provided by the health center. The results

of the statistical test showed a p-value = 0.000 ($p < 0.05$) in other words there is a significant influence between the reliability and satisfaction of pregnant women at the Maternal and Child Health Polyclinic (KIA) of the Pasar Masurai Health Center, Lembah Masurai District, Merangin Regency.

Responsiveness is a form of staff behavior to help customers and provide responsive services by responding quickly to every customer who wants to get service, Officers provide services quickly, accurately, and carefully, and accept all complaints from each customer/patient (Gurning, 2018).

Responsiveness has a significant effect. Responsiveness is the alertness of employees in helping and providing fast and responsive services. According to Bunga Riski Hartiningtia (2017), the alertness of the medical team in assisting patients, clear service information that is easy to understand, the speed of employees in serving each transaction, the understanding of the medical team regarding patient complaints that are carried out quickly and responsively will make customers (patients) feel cared for and appreciated so that they will be satisfied with the services provided by the Health Center.

Based on the results of the study, shows that out of 48 respondents who stated that they were dissatisfied with the service guarantee, 42 respondents (87.5%) stated that they were dissatisfied with the service guarantee provided by the health center. The results of the statistical test showed a p-value = 0.000 ($p < 0.05$) in other words there is a significant influence between assurance on the satisfaction of pregnant women at the Maternal and Child Health Polyclinic (KIA) of the Pasar Masurai Health Center, Lembah Masurai District, Merangin Regency.

Assurance is the scope of knowledge, ability, and politeness of employees in convincing customer trust by providing a guarantee of timely service, Officers provide a guarantee of legality in service, and Officers provide certainty of costs in service (Gurning, 2018).

Assurance has a significant influence on patient satisfaction. Assurance is the scope of knowledge, ability, politeness, and trustworthiness possessed by employees free from danger and risk of doubt. The existence of guarantees provided by the Health Center such as the knowledge and ability of the medical team to determine the diagnosis of the disease, and the ability of the medical team to instill trust in patients. As stated by Sapmaya Wulan (2018) providing services makes patients and their families believe in the ability of the Health Center in treating and serving patients so that they will feel satisfied with the services provided by the Health Center.

Based on the results of the study, shows that out of 56 respondents who stated that they were less satisfied with the empathy given by the officers, 46 respondents (82.1%) stated that they were satisfied with the services provided. The results of the statistical test showed a p-value = 0.000 ($p < 0.05$) in other words, there is a significant influence between empathy and the satisfaction of pregnant women at the Maternal and Child Health Polyclinic (KIA) Pasar Masurai Health Center, Lembah Masurai District, Merangin Regency. Empathy is the ease of establishing good relationships and communication, personal attention, and understanding the needs of customers, which include prioritizing customer interests, serving customers with a friendly attitude with politeness, officers serving without discriminating (discriminating) between one customer and another, and officers serving and respecting each customer (Gurning, 2018).

CONCLUSION

There is a relationship between tangible, reliability, responsiveness, assurance, empathy, and patient satisfaction at Masurai Market Public Health Center, Masurai Valley District, Merangin Regency with a p-value = 0.000 ($p < 0.05$)

ACKNOWLEDGEMENT

The author would like to express gratitude to all their colleagues for their assistance in finishing this article.

REFERENCES

Area, U. M. 2020. *Pasien Di Instalasi Rawat Jalan Rumah Sakit Umum Daerah (Rsud) Porsea Skripsi Diajukan Untuk Memenuhi Sebagai Persyaratan Dalam Memperoleh Gelar Sarjana Psikologi Universitas Medan Area Fakultas Psikologi Universitas Medan Area Medan.*

- Ariyanto, D. 2020. *Pengaruh kinerja pegawai dan mutu pelayanan kesehatan terhadap tingkat kepuasan pasien di puskesmas pasar muara bungo*. 4(1), 92–102.
- Astuti, D. 2017. *Persepsi Pasien Tentang Mutu Pelayanan Dengan Tingkat Kepuasan Pasien Rawat Inap Puskesmas*. Nigeria Journal of Public Health Research and Development, 1(1), 51–57.
- Gurning, Pramita, F. 2018. *Dasar Administrasi Dan Kebijakan Kesehatan Masyarakat*. Yogyakarta ; K-Media
- Hartiningtiya, Bunga. 2017. *Analisis Kepuasan Pasien Terhadap Kualitas Pelayanan Jasa Kesehatan di RS. MH. Thamrin Purwakarta. Strata 1 Fakultas Ekonomi dan Bisnis. Universitas Telkom Purwakarta*. <http://repository.telkomuniversity.ac.id>
- Ichsan, R. N., Surianta, E., & Nasution, L. 2020. *Pengaruh Disiplin Kerja Terhadap Kinerja Pegawai Negeri Sipil (Pns) Di Lingkungan Ajudan Jenderal Daerah Militer (Ajendam) - I Bukitbarisan Medan*. Jurnal Darma Agung, 28(2), 187. <https://doi.org/10.46930/ojsuda.v28i2.625>
- Larasati, P., & Sisilia, K. 2019. *Pengukuran Kualitas Pelayanan Terhadap Kepuasan Konsumen Menggunakan Metode Servqual Pada Osiris Coffee Di Kota Bandung*. EProceedings ..., 6(2), 4556–4564. <https://openlibrarypublications.telkomuniversity.ac.id/index.php/management/article/view/9648>
- Luan, M. G., Prayogi, A. S., Murwani, A., Keperawatan, P., Surya, S., Yogyakarta, G., Keperawatan, J., & Kemenkes, P. 2018. *Ruang Rawat Inap RS Tk. III 04.06.03 Dr. Soetarto Yogyakarta. Hubungan Kinerja Perawat Dengan Kepuasan Pasien Di Ruang Rawat Inap RS Tk. III 04.06.03 Dr. Soetarto Yogyakarta*, 1(2), 9–28.
- Nisa, K., Serudji, J., & Sulastri, D. 2019. *Analisis Faktor yang Berhubungan dengan Kinerja Bidan dalam Memberikan Pelayanan Antenatal Berkualitas Diwilayah Kerja Puskesmas Kota Bukittinggi Tahun 2018*. Jurnal Ilmiah Universitas Batanghari Jambi, 19(1), 53. <https://doi.org/10.33087/jiubj.v19i1.545>
- Santoso, T. T., Fikri, Z., & Jiwantoro, Y. A. 2021. *Analisis Mutu Pelayanan Terhadap Tingkat Kepuasan Pasien di Laboratorium Rumah Sakit Umum Daerah Kota Mataram*. 8(1), 13–16.
- Ulumiyah, N. H. 2018. *Meningkatkan Mutu Pelayanan Kesehatan Dengan Penerapan*

Upaya Keselamatan Pasien Di Puskesmas. Jurnal Administrasi Kesehatan Indonesia, 6(2), 149. <https://doi.org/10.20473/jaki.v6i2.2018.149-155>

Umam, C., Muchlisoh, L., & Maryati, H. 2019. *Analisis Kepuasan Pasien Terhadap Mutu Pelayanan Kesehatan Rawat Jalan Dengan Metode Ipa (Importance Perfomance Analysis) Di Puskesmas Bogor Tengah Kota Bogor Tahun 2018*. Promotor, 2(1), 7. <https://doi.org/10.32832/pro.v2i1.1784>

Wulandatika, D. 2017. Faktor-Faktor Yang Berhubungan Dengan Kepatuhan Ibu Dalam Melakukan *Kunjungan Antenatal Care Di Wilayah Kerja Puskesmas Gambut Kabupaten Banjar, Kalimantan Selatan Tahun 2013*. Jurnal Ilmu Keperawatan Dan Kebidanan, 8(2), 8. <https://doi.org/10.26751/jikk.v8i2.269>