Analysis Of Service Quality Towards Public Satisfaction Post Accreditation At Kemantan Public Health Center, Air Hangat Timut District Kerinci Regency

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ABSTRACT

Quality of service is the most important thing to pay attention to to achieve the goals of the service-providing agency. Based on surveys conducted by patients/families, patients are not satisfied with the physical appearance of the Puskesmas, for example, the appearance of the building and waiting room, the availability of parking, cleanliness, tidiness, and comfort of the room, as well as the equipment owned by the Puskesmas, many complain that the Puskesmas toilets are less comfortable and some damaged ceiling. This study aims to analyze the quality of health services and patient satisfaction at the Kemantan Community Health Center, Air Hangat Timur District, Kerinci Regency. This type of research is crosssectional. The sample in this study was the number of patient visits, namely 100 respondents. Data were analyzed using Chi-Squere 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 patient satisfaction at the Kemantan Community Health Center, Air Hangat Timur District, Kerinci 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, tangible, assurance, empathy

INTRODUCTION

Community Health Centers or Puskesmas are health service facilities that organize public health efforts and first-level individual health efforts, prioritizing promotive and preventive efforts to achieve the highest level of public health in their working areas. The types of services provided need to be known and utilized optimally by the community, as a form of fulfilling community access to the service Needed (Regulation of the Minister of Health of the Republic of Indonesia No. 42 of 2016).

To realize better quality services for the community, all Puskesmas are required to go through an accreditation process. Puskesmas that meet the accreditation requirements will have their accreditation status granted by an independent institution that organizes accreditation as determined by the Minister of Health (Regulation of the Minister of Health of the Republic of Indonesia No. 42 of 2016). The accreditation status of Puskesmas is determined on a five-level scale: unaccredited, basic accreditation, intermediate accreditation, main accreditation, and full accreditation (Korompis and Yewen, 2018).

Professionals view accreditation positively even though it is not easy to implement, but not impossible to apply (Alaradi, Limya Khalil. 2017). In general, accreditation significantly affects performance improvement and achievement of service indicators (Al Kuwaiti, Ahmed. 2016). In addition, external monitoring also benefits the Health Office because it can identify the need for facilities and infrastructure (Nurhayati, 2017).

Health centers must provide quality health services (Ulumiyah, 2018), to produce optimal health services in health centers, good quality of service is needed, a standardized instrument needed as a quality control for the implementation of health services in health centers, one of the external instruments in maintaining the quality of health center services is health center accreditation. There are several important reasons for the need for accreditation in health centers; the quality of health services including patient safety and health workers must be guaranteed, there is continuous performance improvement, ensuring that the health services provided are by standards and as one of the credential requirements with the Social Security Administering Body/BPJS (Directorate General of Health Services, Ministry of Health of the Republic of Indonesia, 2018) this is added to the results of research on the level of satisfaction of BPJS participants, some of whom feel dissatisfied with health services (Ulumiyah, and Rustiana, 2017) so a structured monitoring tool/mechanism is needed. Accreditation is the first step in improving the quality of services including the quality of management's improvement and leadership, planning strategies, user satisfaction, strengthening coordination between stakeholders, and the capabilities of Human Resources/HR (Fadi el Jardali, 2014). The dimensions of health service quality include; efficiency, effectiveness, safety, equity, accessibility, and patient-centered (WHO, 2017). The purpose of accreditation is to provide quality services, every health service should pay attention to patient satisfaction. Patient satisfaction can be influenced by many aspects of service, including; product features, price, service, location, facilities, visual design, atmosphere, and communication. In addition, the advantages of service can be seen in

transparency, accountability, conditionality, participation, equality of human rights, and

justice in the distribution of rights and obligations (Wahyudi, 2017).

The quality of health services is closely related to patient satisfaction and is one of the measuring tools for the success of the quality of health services. Health services are said to be successful when they can provide patients satisfaction, while dissatisfaction is a problem that needs to be considered to improve the quality of health services. (Pasalli '& Patattan, 2021). Patient satisfaction is how happy someone is with the medical services they receive. Patients will be happier if the quality of health services they receive meets or exceeds their expectations. Patient satisfaction is very significant and closely related to the number of patient return visits. So it can be used to indicate the quality of health services (Ningrum et al., 2020).

LITERATURE REVIEW

Public health services are the most advanced health services, which are first needed by the community when experiencing health problems or accidents. Services with efforts carried out independently or together in an organization to maintain and improve health, prevent and cure diseases, and restore the health of individuals, families, groups, or communities (Nugraheni, 2018). With another definition, public health services are important to guarantee aspects of health needs or health services that are truly needed by citizens (Swarjana, 2017) The government is obliged to provide access to quality health services for all levels of society. The health services provided should have clear quality and standards so that the services received by the community are safe and appropriate according to their respective health conditions (Nopiani, et al., 2019).

Patient satisfaction is the patient's response to the discrepancy between the level of prior importance and the actual performance they feel after use. Patient satisfaction is one of the most effective approaches to maintaining the quality of service in hospitals. The more perfect the satisfaction, the better the service and quality of food provided. (Silviyana et al. 2020). According to (Kotler in Deibi 2018) defines that patient satisfaction is the level of a person's feelings after comparing the performance (or results) they feel to their expectations. Quality is often used both in academic circles and in everyday life, which means that in general it can be felt and experienced by anyone, but the word quality is not widely understood by people and the meaning of quality is not the same for everyone. Everyone tends to interpret quality according to their opinion of their needs. Quality must be understood before it can be managed even though people face it every day there is no conclusive definition of quality, just as the beauty of quality is in the eyes of the beholder,

for example for manufacturers, quality products are those that are by design specifications, have no defects, and performance is by customer expectations. Quality is an attribute of a product or service, the perspective of the person who has evaluated the product or service that has influenced the value of its attributes.

Quality is the core of survival in an institution. The quality revolution movement through an integrated management approach is a demand that cannot be ignored if an institution wants to develop because increasingly tight competition demands an institution in providing services to always prioritize consumers by providing the best service. Quality has also been viewed widely, not only in terms of the results aspect but also in the process, environment, and humans. Service quality is a service that we have provided to every consumer or patient, there is no quality product if it does not have quality service, customers will be disappointed if an institution has poor service, and vice versa, patients who receive extraordinary service will be useless if it is not balanced with quality products and prices that match customer expectations (Rangkuti, 2013).

Services are invisible products that involve human efforts and use equipment, services are invisible activities or series that occur due to interactions between consumers and employees or other things provided by companies that provide services intended to solve consumer/customer problems. Health services are any efforts carried out individually or in groups in an organization to maintain and improve health, prevent and cure diseases, and restore the health of individuals, families, and/or communities (Gurning, 2018).

Health services are all activities that directly or indirectly strive to produce health services needed or demanded by the community to overcome their health problems. Health services are also a place or facility to obtain health services facilitated by the local.

government which aims to serve the community who need health services that contain 4 main service elements consisting of preventive, promotive, curative, and representative health service elements. Based on the four basic health services that are comprehensive and at the same time are the leading health service facilities at the village level, namely the health center (community health center) (Gurning, 2018). The importance of providing quality services can be caused by service, not just delivering or serving. Service means understanding, comprehending, and feeling so that the delivery will also affect the consumer/patient heatshare which ultimately strengthens the position in the consumer mind share (Alfisyahrin, 2017).

METHODS

This research is an analytical study using a cross-sectional approach. This research was conducted at the Kemantan Health Center, Air Hangat Timur District, Kerinci Regency in October-December 2023. The population in this study were the persons in charge of the UKP and UKM programs along with their staff and the community as users of health services at the Kemantan Health Center, Air Hangat Timur District, Kerinci Regency. The sample in this study was the person in charge of the UKP and UKM programs along with their staff and the community as users of health services at the Kemantan Health Center, Air Hangat Timur District, Kerinci Regency, totaling 100 people.

RESULTS

Table 1. Characteristics of Respondents at the Siulak Mukai Health Center, Siulak Mukai District, Kerinci Regency

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No	Description	Number (n)	Percentage (%)					
I.	Gender							
1.	Male	41	41,0					
2.	Female	59	59,0					
II	Age							
1.	Teneegers (12-25 years)	18	18,0					
2.	Adults (25-59 years)	54	54,0					
3.	Elderly (>60 years)	28	28,0					
Ш	Education							
1.	No school	10	10,0					
2.	Elementary school	23	23,0					
3.	Junior high school	29	29,0					
4.	High school	32	32,0					
5.	Collage	6	6,0					
IV	Occupation							
1.	Not working	42	42,0					
2.	Housewife	17	17,0					
3.	ASN	6	6,0					
4.	Trader/ self-employed	25	25,0					

5.	Private employee	10	10,0	
	Total	100	100	

Based on Table 1, it can be seen that the characteristics of the respondents are mostly female 59 respondents (59%), most age is adults (25-59 years) as many as 54 respondents (54%). The most education is junior high school as many as 29 respondents (29%) and the most occupation is unemployed as many as 42 people (42%).

Table 2. Frequency Distribution Based on Quality of Health Services

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	100.0

The results of the study on 100 respondents, most respondents were satisfied with the Tangible (Physical Evidence) of the quality of service at the Siulak Mukai Health Center, Siulak Mukai District, Kerinci Regency, as many as 54 respondents (54.0%). Feeling less satisfied with the Reliability (reliability) of the quality of service at the Siulak Mukai Health Center, Siulak Mukai District, Kerinci Regency, as many as 44 respondents (44.0%). Feeling satisfied with the Responsiveness (responsiveness) of the quality of service at the Siulak

Mukai Health Center, Siulak Mukai District, Kerinci 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 Siulak Mukai Health Center, Siulak Mukai District, Kerinci Regency, as many as 52 respondents (52.0%). Most respondents stated that they were less satisfied in terms of empathy (empathy) of the quality of service at the Siulak Mukai Health Center, Siulak Mukai District, Kerinci Regency, as many as 56 respondents (56.0%).

Table 2. Bivariate Analysis

No	Variable	Health Service Qt							
			Satisfied	led Less satisfied		N %		p- value	
		N	%	N	%	11	, 0	,	
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		
Ш	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							0,000	
1.	Satisfied	43	97,7	1	2,3	44	100	- ,	

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-value = 0.000 (p <0.05) in other words there is a significant influence between tangible (physical evidence) on patient satisfaction at the Kemantan Health Center, East Air Hangat District, Kerinci 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 patient care, the necessary physical facilities are needed.

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

This has also been previously studied by Sapmaya Wulan (2018) who said that physical appearance (Tangible) influences patient satisfaction, the level of satisfaction with the facilities provided to patients varies greatly depending on the patient's habits regarding the physical facilities that have been experienced.

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-value = 0.000 (p <0.05) in other words there is a significant influence between reliability and patient satisfaction at the Kemantan Health Center, Air Hangat Timur District, Kerinci Regency.

Reliability is the ability of an agency/company to provide services according to what is promised accurately and reliably, performance must be under 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 reliability and patient satisfaction at the Kemantan Health Center, Air Hangat Timur District, Kerinci 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 patient satisfaction at the Kemantan Health Center, Air Hangat Timur District, Kerinci 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 guarantee 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 Community Health Center to treat and serve patients so that they will feel satisfied with the services provided by the Community 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 patient satisfaction at the Kemantan Health Center, East Air Hangat District, Kerinci 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).

Empathy has a significant influence on patient satisfaction. Empathy is individual attention given by the Health Center to patients, such as the ease of using the services offered, the ability to communicate to convey information, and so on. According to Bunga Riski Hartiningtia (2017) basically, people who are undergoing treatment or people who need other people to recover need attention from the people they need. Therefore, attention from Puskesmas employees, both medical and non-medical, is very necessary to make customers (patients) satisfied.

CONCLUSION

There is a relationship between tangible, reliability, responsiveness, assurance, empathy, and patient satisfaction at Kemantan Health Center, East Warm Water District, Kerinci Regency with a p-value = 0.000 (p < 0.05)

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