

## Analysis of Obstetrics & Gynecology Clinic Service Quality with BPJS Patient Satisfaction Level in RAA Soewondo Hospital Pati

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### Artikel Info

History of Artikel:  
Accepted 2 March  
2018  
Approved 18 June  
2018  
Published 24 August  
2018

#### Keywords:

Service Quality,  
Satisfaction  
Level, BPJS Patient

### Abstract

The quality of health services relates to the level of perfection of health services in causing a sense of satisfaction in each patient, the more perfect the satisfaction, the better the quality of health services. There are 5 dimensions of service quality in assessing service quality including reliability, responsiveness, Assurance, Empathy and tangibles. The still high maternal mortality rate in Indonesia, especially in Pati regency, the government holds a National Health Insurance (JKN) through the Social Insurance Administration Organization (BPJS) to address the problem of mortality. This study aims to analyze the service quality of obstetrics & gynecology clinics with the level of BPJS patient satisfaction in RSUD Soewondo Pati. This type of research is qualitative with a case study approach. The research sample used purposive sampling technique that is 10 initial informants and developed by snowball sampling technique. The results of the study revealed that most of the informants aged > 20 years were 14 people (93.3%), there were 6 high school students (40%) and 11 non-PBI types of BPJS (73.3%). Interview results of Analysis of Obstetric & Gynecological Clinic Service Quality with BPJS Satisfaction Level at RSUD RAA Soewondo, from 5 dimensions of service quality obtained results of patients satisfied with service in terms of responsiveness, assurance and empathy as well as in terms of reliability and physical evidence, obtained patient results were quite satisfied with service

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p-ISSN 2528-5998

e-ISSN 2540-7945

## INTRODUCTION

The quality of health care is related to the level of perfection of health services in generating satisfaction in each patient. The more perfect the satisfaction, the better the quality of health services. Even though the notion of quality related to satisfaction has been widely accepted but its application is not as easy as expected. The main problem found is that satisfaction is subjective. In addition, it is often found that even health services are considered to have satisfied patients, but when viewed from the code of ethics and professional service standards, their performance remains unfulfilled (Satrianegara and Saleha, 2009).

The maternal mortality rate is still high and is a health problem that cannot be resolved completely. Pati Regency is one of the districts of concern in the effort to reduce MMR, according to Pati Health Profile in 2015, AKI in Pati District occurred as many as 21 people (117 per 100,000 births) consisting of the death of 7 pregnant women, 2 maternal deaths and death postpartum mothers as many as 12 people, up compared to 2014 as many as 17 people (95 per 100,000 births) which consisted of the death of 4 pregnant women, 1 maternal death and 12 postpartum mothers. Maternal deaths occur because they do not have access to quality maternal health services, especially on-time emergency services which are motivated by late recognition of danger signs and making decisions, late reaching health facilities, late getting services at health facilities. (Pati District Health Profile, 2015). Addressing the problem of Maternal Mortality The government government carries out Health Insurance National (JKN) through the Social Insurance Administration Organization (BPJS).

Dimensions of service quality include reliability, namely the ability to provide accurate services from the first time without making any mistakes and deliver services according to the agreed time. Responsiveness is the willingness of health workers to assist patients in providing health services. Assurance is how the patient's behavior or response to the services provided.

Empathy is understanding the patient's problems. Tangibles are facilities and infrastructure provided by health workers. (Endang & Elisabeth, 2015)

From the results of preliminary surveys or observations, researchers conducted interviews with 10 patients who used BPJS. It can be seen that 7 people said that patients with BPJS were still not optimal. 4 Patients said the patient's admission procedure was slow and administrative procedures for obtaining services by using a complicated BPJS and 3 patients said there were midwives who were not friendly in providing services. While the other 3 people said that the services provided by health workers in RAA Soewondo Pati Hospital were good, affordable places, economical could be used to check and seek treatment. They do not take into account the services that are important when checking or seeking treatment no more fees. From the observations that the researchers did in the obstetric & gynecological clinic room, the bed was only available 1 (regular bed) while the service in the obstetrics & gynecology clinic room contained family planning services, the washing place was located some distance away, structuring space is still not perfect, SOP is not yet available in full, medical personnel in providing services are still not optimal.

This study aims to analyze the service quality of obstetrics & gynecology clinics with the level of BPJS patient satisfaction in Soewondo Hospital.

## METHODS

This type of research is qualitative with a case study approach. The research sample used purposive sampling technique 10 initial informants and was developed with snowball sampling technique. The study was carried out in January 2018 in the Obstetrics and Gynecology Clinic at Soewondo Pati Hospital

## RESULT AND DISCUSSION

### Characteristics of Respondents

The results of the analysis of midwifery & gynecology clinic service quality with BPJS patient satisfaction level in RAA Soewondo Pati Hospital, from 15 informants, most of the informants were > 20 years old, there were 14 informants, 6 senior high school educators and 11 non-PBI BPJS.

**Table 1.** The results of the analysis of midwifery & gynecology clinic service quality with BPJS patient satisfaction level in RAA Soewondo Pati Hospital

Informan Distribution	N	%
<b>Age</b>		
<20 years	1	6.7
>20 years	14	93.3
<b>Total</b>	<b>15</b>	<b>100</b>
<b>Education</b>		
Primary School	3	20
Junior High School	2	13.3
Senior High School	6	40
College	4	26.7
<b>Total</b>	<b>15</b>	<b>100</b>
<b>Type of BPJS</b>		
PBI	4	26.7
Non PBI	11	73.3
<b>Total</b>	<b>15</b>	<b>100</b>

### Indepth Interview Result

#### Dimensions of Health Service Quality

##### a. Responsiveness

Based on the results of research conducted in-depth interviews with 15 informants related to the quality of service regarding responsiveness. From the results of interviews with informants regarding responsiveness includes the response of BPJS officers in responding to patient complaints, the response of BPJS officers in providing services, response to health in responding to complaints, response of health workers in delivering the results of the examination and the response of officers in providing services.

The informants were satisfied with the services provided, the doctor and midwife's health services were in accordance with the procedure, responded to the patient's complaints properly and had submitted the results of the examination. In the service of the BPJS, the officers had provided the information needed.

Quick response is related to the ability of health workers to provide services in accordance with procedures and meet patient expectations. The better the responsiveness of health services provided to patients will increase the level of patient satisfaction. This is in accordance with the research of Defi Mernawati & Intan Zainafree (2016) which states that the better the responsiveness of health services provided to patients will increase the level of patient satisfaction.

This is in line with the research conducted by Franata Suriana Esthi et al (2017) that the quality of responsiveness influences the level of patient satisfaction. The results of the analysis with gamma test obtained that the correlation between responsiveness (response) with the level of satisfaction is meaningful with the direction of a positive relationship and the level of correlation is very strong.

Responsive is a policy to help and provide services that are fast (responsive) and appropriate to customers, by delivering clear information. Health workers who can provide clear and complete information can also help in healing the patient's health without being covered, so that the patient will feel satisfied on the performance of services provided.

##### b. Reability

Based on the results of research conducted in-depth interviews with 15 informants related to the quality of service regarding reliability. From the results of interviews with informants regarding the response to procedures in obtaining BPJS cards, the response of outpatient services provided to patients, the response of services provided by officers health (careful & careful) and response to the doctor's schedule.

The informant stated the service of the doctor and midwife during the inspection

carefully and was not rushed but the patient waited a long time at the time of the examination by the doctor, because the doctor who served that day handled 3 rooms at once. The doctor's schedule is mounted on the wall so that the patient cannot choose the doctor desired by the patient.

Reability is related to the ability of health workers to provide accurate services from the first time without making any mistakes and delivering their services in accordance with the agreed time. If a health service is not reliable or trustworthy, the patient feels less satisfied or not satisfied. This is in line with the research of Defi Mernawati & Intan Zainafree (2016) that reliability factor relates to the level of patient satisfaction and is used by customers in evaluating the quality of health services.

This is in line with the research conducted by Franata Suriana Esthi et al. (2017) that the quality factor of reliability is also known to influence the level of patient satisfaction. Analysis results with gamma test obtained that the correlation between reliability and satisfaction level is meaningful with a positive relationship and the level of correlation is very strong. The ability to provide appropriate services accurately and reliably, sympathetic and with high accuracy to patients can lead to patient trust in health workers. Unfulfilled technical competence can lead to various things, ranging from minor deviations to health service standards to fatal mistakes that can reduce the quality of health services and endanger the lives of patients. The existence of these fatal errors can reduce the quality criteria established by consumers where consumers see quality health services as humane, responsive, empathetic, friendly and communicative services

#### **c. Assurance**

Based on the results of research conducted in-depth interviews with 15 informants related to the quality of service regarding Assurance. From the results of interviews with informants include: the response of health workers to pay attention to the privacy of patients, repon health officials & administration friendly in providing services,

response to BPJS services in accordance with information in the mass media.

Assurance is related to the behavior of health workers in fostering trust in patients. The results of interviews with informants showed that in giving service, they paid attention to the privacy of patients (closing curtains, installing blankets), providing friendly service, providing information needed by patients and the information submitted. in accordance with what is shown in the mass media (newspapers, television). Information is satisfied with the services provided in terms of assurance. This is in accordance with Erni Faturrahmah & Bambang Budi Raharjo's (2017) research that assurance factors affect the satisfaction of class I BPJS patients.

This is in line with the research conducted by Franata Suriana Esthi et al (2017) that the quality factor that also influences the level of patient satisfaction is assurance (assurance). The assurance includes the knowledge, ability, politeness and trustworthiness of the staff that are free from danger, risk or doubt. Dimensions assurance relates to knowledge, politeness and the nature of officers who can be trusted by customers. Compliance with these service criteria will result in service users feeling free from risk. Quality health services must be safe from the risks, injuries, infections, side effects, or other hazards posed by the health service itself.

#### **d. Empathy**

Based on the results of research conducted in-depth interviews with 15 informants related to the quality of service regarding empathy. From the results of interviews with informants include: the response of health workers in conducting an examination, the response of health workers in following up on patient complaints, the response of health workers in understanding and assisting patients difficulties.

Empathy is related to health workers understanding patients and acting in the interests of patients and providing convenience to be contacted at any time if the patient wants to get help. The informant stated that in

conducting doctors and midwives 'checks, they did not rush, followed up on patients' complaints, understood and helped all the difficulties of the patients and there were no differences in providing services between general patients and BPJS. The informant stated that he was satisfied with the quality of service in terms of empathy. This is in line with the research of Defi Mernawati & Intan Zainafree (2016) that empathy factor is related to the level of satisfaction of outpatients at Lamper Tengah Health Center, where they assume that the services provided by doctors or medical personnel can calm patients' anxiety, be able to handle complaints patients well and give advice or encouragement to patients, and take the time to be able to consult personally about the disease.

This is in line with the research conducted by Franata Suriana Esthi et al (2017) that the correlation between empathy and level satisfaction is meaningful with the direction of positive relationships and the level of correlation is very strong. This means that Empathy affects the level of patient satisfaction. Empathy is giving sincere and individual or personal attention given to consumers by trying to understand their desires. The ability of the Hospital to give sincere attention to all patients, this criterion is related to a sense of care and special attention of the staff to each service user, understanding their needs and providing convenience to be contacted at any time if the service users want to get help

#### **e. Tangibles**

Based on the results of research conducted in-depth interviews with 15 informants related to the quality of service regarding physical evidence (tangibles). From the results of interviews with informants include: health service security response, response to the place of service, health staff appearance response, response to service waiting room conditions, response use of medical devices. From the results of the research, it was found that the safety of health services fulfilled, the place of service was comfortable and the lighting was adequate, the

appearance of health workers was neat, the tools used by health workers in providing services were sophisticated but the waiting room of the patients was less comfortable, less clean and less chairs, there were still many patients those who do not sit while waiting for the queue. So that the patient is still not comfortable in the waiting room of the patient. The informant states that they are still not satisfied with the patient waiting room facilities that have been provided. This is consistent with the research of Defi Mernawati & Intan Zainafree (2016) that tangible factors are directly related to the level of patient satisfaction, where they assume that the examination room and waiting room are clean, neat, and comfortable, have a fairly complete medical instrument, appearance clean doctors and nurses are positively related to the level of satisfaction of outpatients in Lamper Tengah Health Center. So that the better the direct evidence of health care providers seen by patients or the customer will get better the level of satisfaction felt by the patient.

This is in line with the research conducted by Franata Suriana Esthi et al (2017) that the tangibles quality factors influence the level of patient satisfaction. The results of the analysis with the gamma test showed that the correlation between tangibles and satisfaction is meaningful with a positive direction and a very strong level of correlation. The appearance and capability of the company's physical facilities and infrastructure that can be relied on in the circumstances of the surrounding environment are tangible physical evidence of services provided by service providers, this includes physical facilities. Comfort is also related to the physical appearance of health services, service providers, medical and non-medical equipment. Comfort influences patient/consumer satisfaction, thus encouraging patients to come for treatment back to the place

### **Standards in Maintaining Service Quality**

#### **a. Standard Input or structure**

In the obstetrics & gynecology clinic, both human resources, medical devices, policies are good so that they support services. According to

Endang Purwoastuti & Elisabeth (2015) the relationship between the structure and quality of service is important in planning, designing and implementing the desired system to provide health services. The arrangement of structural characteristics used has a tendency to influence the service process so that it will make the quality decrease or increase.

**b. Process Standards**

In the service in the obstetrics & gynecology clinic room is in accordance with the service process including: history taking, physical examination, medical supporting examination, drug prescription and health counseling.

**c. Standard Output / outcome**

The quality of service in the obstetrics and gynecology clinic is expected to increase patient satisfaction, level recovery of patients, level of patient compliance and declining mortality rate.

**Indicator of Service Quality**

**a. Minimal Requirements Indicator**

Minimum requirements indicators include: indicators of input, environment and process. From the input indicators of human resources, facilities and tools available and funds meet. Facilities in the waiting room of patients are still lacking. Environmental indicators include policies, procedures and existing organizations / management, services already carried out in accordance with SOP. Process indicators are in accordance with process standards.

**b. Minimal Appearance Indicator**

Minimal appearance indicator is a benchmark related to the output of a health service. This result is shown from the level of patient satisfaction during service.

**CONCLUSIONS AND SUGGESTIONS**

The results of the study revealed that most of the informants aged > 20 years were 14 people (93.3%), there were 6 high school students (40%) and 11 non-PBI types of BPJS (73.3%). Interview results of Analysis of Obstetric & Gynecological Clinic Service

Quality with BPJS Satisfaction Level at RAA Soewondo Hospital, from 5 dimensions of service quality obtained results of patients satisfied with service in terms of responsiveness, assurance and empathy as well as in terms of reliability and physical evidence, obtained patient results were quite.

In increasing patient satisfaction, officers are expected to pay attention to reliability & responsiveness in providing services.

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