

How is the Condition of Health Services at the UPT Puskesmas Griya Antapani Bandung City?

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Abstract

The purpose of this research is to identify and identify problems, obstacles, and efforts to overcome the quality of service at UPT Puskesmas Griya Antapani. Quality measurements in this study are responsiveness, reliability, assurance, empathy, tangibles. The research method in this research is descriptive analysis. Snow ball technique. The data collection technique is done by interviews and observation. The results of the research on the quality of immunization services at the UPT Puskesmas Griya Antapani are quite good but need to be optimized because there are still deficiencies, such as additional human resources, conventional data processing that needs to be computerized. From the results of interviews with informants, they felt that the quality of immunization services was good enough. It is suggested that the quality of immunization services in terms of responsiveness, reliability, assurance, empathy, tangibles needs to be looked at again for the progress of UPT Griya Antapani Health Center in terms of more optimal service.

Keywords: Service Constraints, Service Problems, Service Quality, Troubleshooting Efforts

Introduction

Kepmenkes Regulation No. 128/Menkes/SK/II/2004 concerning Basic Policies for Community Health Centers, Puskesmas have three (3) functions, namely: a center for driving health-oriented development, a center for family and community empowerment, and a first-level health service center. In carrying out this function, the Puskesmas has several activities or programs implemented such as activities in the field of community health development, activities in the field of P3KL, activities in the field of Yankes, and activities in the field of pharmaceuticals and financing. In addition, there are counseling and outreach activities in the building. As for outside the building, posyandu activities, pusling, posbindu house visits, inspections, case tracking and counseling are held (Desimawati, 2021).

The Puskesmas as the Technical Implementation Unit of the Health Service is responsible for administering health efforts for the first level in their respective working areas in providing comprehensive, tiered and integrated health services (Hermansyah et al., 2020; Putri et al., 2022). In accordance with its function, the Puskesmas can provide quality services in order to achieve the goals of national health development, namely the realization of the highest degree of health for everyone (Anita et al., 2016; Astuti & Soliha, 2021; Sudiantini et al., 2022). With the existence of a Puskesmas,

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this health institution can reach the smallest areas, so the formation of this Puskesmas is very helpful for the survival of the community in obtaining health services not only among the areas that are affordable but also the people in the smallest areas. Because basically every individual has the right to adequate health services (Amir, 2021). Existing facilities at health institutions are in the form of providing a special room for implementing health, namely a health service room that needs to be made, so that children/toddlers are happy to come to carry out immunizations at the health institution, and in the process of health services it is made optimally in quality responsiveness, reliability, assurance, empathy and tangibles health services (Anita et al., 2016; Awadh, 2022; Fan et al., 2017).

The results of the initial observations that were carried out by researchers at the UPT Puskesmas Griya Antapani, out of the number of toddlers and children there were 1,049 people from January to December 2021 which was quite stable with the increase in the number of toddlers and children every month.

Table 1. Number of Immunization Recipients in 2021.

No	Month	Amount
1	January	80
2	February	85
3	March	88
4	April	89
5	May	90
6	June	95
7	July	92
8	August	83
9	September	89
10	October	85
11	November	86
12	December	87
Total		1.049

Source: UPT Puskesmas Griya Antapani (2022)

UPT Puskesmas Griya Antapani, January as many as 80 people, February as many as 85 people, March as many as 88 people, April as many as 89 people, May as many as 90 people, June as many as 95 people, July as many as 92 people, August as many as 83 people, September 89 people, October 85 people, November 86 people, and December 87 people. The total number of Immunization Recipients for 2021 is 1,049 people. In the following, the researcher also presents data on the coverage of the immunization program from January to December 2021, which each month has not reached the target set as follows:

Table 2. Coverage of the 2021 Immunization Program

No	Month	Hepatitis B	B C G	D P T HB Hb I	D P T HB Hb III	Po lio I	Po lio 4	MR (9- 11 Bln)	IDL	Booster DPT HB Hb	Booster MR	Target
1	January	0,22	1,30	2,81	1,95	1,08	1,95	4,11	3,90	1,31	1,64	7,92
2	February	0,22	4,55	5,84	6,71	2,38	5,84	6,93	6,71	3,28	2,41	15,83
3	March	7,14	8,44	11,04	12,34	4,33	11,04	13,85	13,64	5,25	3,50	23,75
4	April	11,69	10,61	14,94	15,80	6,06	14,50	16,67	16,45	7,00	4,05	31,67
5	May	17,53	15,45	20,13	20,56	11,04	19,48	22,51	22,29	10,50	8,64	39,58
6	June	21,00	21,43	23,59	23,59	13,42	22,51	25,97	25,76	12,47	9,74	47,50
7	July	28,14	25,97	26,41	27,71	17,10	26,41	29,22	29,00	13,57	11,82	55,42
8	August	34,20	30,52	36,58	32,47	20,78	32,25	35,93	35,71	15,21	13,24	63,33
9	September	39,18	38,74	44,16	37,01	28,14	36,80	38,74	38,53	17,29	14,66	71,25
10	October	48,05	49,35	51,08	41,34	35,50	40,48	42,21	41,99	21,55	19,58	79,17
11	November	53,25	66,67	71,86	58,87	50,00	57,58	54,33	54,11	25,06	22,65	87,06
12	December	56,05	71,65	76,62	66,45	53,90	64,07	60,39	60,17	27,35	24,84	95,00

Source: UPT Puskesmas Griya Antapani (2022)

Based on the table above, it shows that the Immunization Program Coverage at UPT Puskesmas Griya Antapani in the last 1 year has not met the target that has been set, January has not reached the target of 7.92, February has not reached the target of 15.83, March has not reached the target of 23.75, Month April has not reached the target of 31.67, May has not reached the target of 39.58, June has not reached the target of 47.50, July has not reached the target of 55.42, August has not reached the target of 63.33, September has not reached the target of 71.25, October has not yet reached the target of 79.17, November has not reached the target of 87.06, and December has not reached the target of 95.00.

In the following, the researcher also presents immunization goals and targets from 2019 to 2021 which each year have not reached the targets set as follows:

Table 3. Immunization Goals and Targets for the Last 3 Years

Year	Goal	Target	Percentage (%)
2019	421	399	95
2020	505	479	95
2021	462	438	95

Source: UPT Puskesmas Griya Antapani (2022)

Based on the table above, it shows that the Immunization Targets and Targets at UPT Puskesmas Griya Antapani for the past 3 years have not met the targets set, 2019 has not reached the target of 5%, 2020 has not reached the target of 5% and 2021 has not reached the target either by 5%. Phenomena/problems within the scope of the immunization program that occurred at UPT Puskesmas Griya Antapani, namely after a routine immunization program survey was carried out according to service standards, namely: 1. Maintenance costs are still expensive. 2. Infrastructure facilities are incomplete 3. Lack of human resources 4. Data processing is still conventional. 5. In order to achieve the fulfillment of immunization service standards that also need to be considered, namely: 1. Responsiveness (quick response to health services) 2. Reliability (on time). 3. Assurance (clarity of costs). 4. Empathy (attitude) 5. Tangibles (physical evidence), which need more attention as a determinant of the success of a quality health service organization system. The problems mentioned above are thought to be caused by the implementation of the immunization program that has not run optimally and has not touched all children and toddlers in the UPT Puskesmas Griya Antapani, Bandung City. Starting from the description above, the researcher is interested in conducting further research.

The purpose of this research is to identify and identify problems, obstacles, and efforts to overcome the quality of service at UPT Puskesmas Griya Antapani. The benefits of this research are as material for the study of Public Administration Science in relation to the concept and theory of service quality. The practical benefit for UPT Puskesmas Griya Antapani is to improve and implement optimal service quality for the community.

Methods

This study uses a qualitative descriptive approach, intended to describe, analyze and interpret the conditions that are currently happening as a whole related to the focus of the research, namely the analysis of the model for implementing service quality at UPT Puskesmas Griya Antapani in Bandung City. Determination of informants in this study is based on criteria according to the research objectives. Informants are determined based on the consideration that they are considered to know and can provide data and information on matters relating to research. The key informant is the head of UPT Puskesmas Griya Antapani. Other informants were the head of the Antapani sub-district in the city of Bandung, the head of the Yayasan UPT Puskesmas Griya Antapani, the PKK head of the Antapani sub-district, and members of the community appointed by the PKK. After conducting in-depth interviews at the time of the research, the selection of informants is likely to develop according to the directions of the main informants based on the involvement of other government agencies. To sharpen the research, in qualitative research it is necessary to determine the research focus as the research object. The focus of this research is based on the flow of thought, namely Grand Theory (Public Administration) -> Middle Range Theory (New Public Service/Public Service Management) -> Operational Theory (Quality of Service).

Sources of data obtained in expressing the phenomena that are used as the object of this research are primary data and secondary data. Primary data obtained from interviews and direct observation. While secondary data obtained from literature review and related documents. The data collection technique was carried out by snowball sampling. Checking the validity of the data in this study used

triangulation. Technical analysis of data (Miles and Huberman, 1992 in Hardani et al., 2020) using a qualitative descriptive model includes data reduction, data presentation, and drawing conclusions.

Results and Discussion

Public perception of public services in general played by the government bureaucracy. Public services provided by government officials in a government bureaucracy are common knowledge that the quality is still not optimal (Sulistyan et al., 2017). However, this does not make it the main reason to remain pessimistic about the changes that may occur in the service paradigm which so far places the apparatus and its bureaucracy in a position to be served, but must change to a paradigm that places service users (the public) in a higher position with revolution. The mentality of the government apparatus from the village level to the central level, as the government has announced .

The paradigm shift effort referred to above ideally should start from the goodwill of the government, through improving policies in the service sector (He et al., 2022). Therefore the service orientation must change from simply meeting the needs of service users towards services that satisfy service users accompanied by written service behavior (Demir et al., 2020; Sulistyan & Budiyanto, 2019). To be able to achieve this level of service, waiters or officials are required not only to master service techniques (IQ) but also to have emotional awareness (EQ), in order to achieve satisfying and wholehearted service in accordance with quality service standards. In this study, researchers used informants as research informants as follows:

Table 4. Research Resource Person

No	Subject	Role
1	Head of UPT	Service Responsible
2	Camat	Service Supervisor
3	Head of Posyandu	Service Coordinator
4	Head of PKK	Service Recipients
5	Community	Direct Service Recipients

Source: Research Development Results (2022)

Discussion

Problems of Service Quality at UPT Puskesmas Griya Antapani

The quality of public services in this study, as explained in the previous chapter, is analyzed using service quality aspects (Parasuraman et al., 1988) which includes tangible, reliability, responsiveness, empathy, and assurance. The results of research regarding the quality of service at UPT Puskesmas Griya Antapani, Bandung City can be described as follows:

1. Tangible

Quality of service from the tangible aspect was first analyzed through the appearance of officers/apparatuses in serving the community, especially at UPT Puskesmas Griya Antapani. The results of interviews with the Head of the Administrative and Administration Unit at the UPT Griya Antapani Health Center, Antapani District, Bandung City stated that the appearance of officers/apparatuses in serving the community, especially in immunization services at the UPT Griya Antapani Health Center, was quite good, especially officers who had used uniforms determined by the Government. Service quality in the next tangible aspect is measured using the quality of the convenience of the place in performing the service. The results of the interview stated that the place for health services at the UPT Puskesmas Griya Antapani Bandung City, especially the service section was not comfortable, it still needed restructuring. Access to the UPT Puskesmas Griya Antapani location is very strategic, easy to reach by public transportation because it is in a residential complex with the address Jl. Plered Raya No. 2 Antapani. The use of assistive devices in service at UPT Puskesmas Griya Antapani is an assessment of the last tangible aspect in this study. Tools such as computers and others are still not complete, but the existing tools are optimized in serving customers. Existing tools sometimes tend to have errors or the internet is not smooth, which in turn disrupts service.

Based on the results of the interviews above, it can be stated that the quality of health services, especially immunization services at UPT Puskesmas Griya Antapani, Antapani District, Bandung City from the tangible aspect, which consists of the appearance of officers is quite good, the comfort of the place is not good, the service process is not easy. , the discipline of officers /

apparatus is quite good and the use of assistive devices in immunization services is not sufficient and optimal. Based on this statement, researchers can develop minor propositions as follows:

"If the tangible aspects which include the appearance of the officer, the comfort of the place is not good, the service process, the discipline of the officers/apparatus is quite good and the use of assistive devices meets or is in accordance with the standards set, then the quality of health services, especially immunization services, is excellent at UPT Puskesmas Griya Antapani will be achieved."

2. Reliability

Reliability, which is measured through the accuracy of the officers in serving customers, is not good, because there is only 1 automatic service for a long time. It's different if there are 2 doctors, and 2 nurses, the service will run smoothly. Have clear service standards Even though the SOP already exists, if there is a lack of human resources, the service will take a long time. Previously, there were 3 Doctors, now only 1 person. The ability of officers/apparatuses to use assistive devices in the service process is quite good. The obstacle is sometimes there are internet disturbances or the computer sometimes has errors. The expertise of officers in using assistive devices in the service process is quite good. Service officers have used the SIKDA application

3. Responsiveness

Responsiveness is measured by responding to every customer/applicant who wants to get service. Always responds, even when someone is dissatisfied with the service at the UPT Griya Antapani Health Center, it is always recorded for later evaluation in monthly workshop meetings or weekly meetings every Monday. Officers/apparatus perform services quickly. Less fast, because human resources are lacking. Just at the registration there should have been 3 people now only 1 person. 1 person early retirement, 1 person on maternity leave. How can it be fast if the human resources are lacking. Not to mention that the doctor is only 1 person, automatically serving for a long time. If there are 2 doctors and 2 nurses, the service will run smoothly. The officer/apparatus performs the service correctly Inaccurately, because human resources are lacking. At registration there should have been 3 people now only 1 person. 1 person retired early, 1 person on maternity leave how can it be fast if the human resources are lacking. Not to mention that the doctor is only 1 person automatically long service. If there are 2 doctors and 2 nurses, the service will run smoothly. All customer complaints are responded to by officers and are always recorded in the complaint book for evaluation and finding solutions to always provide better service.

4. Empathy

With benchmarks from officers providing guarantees on time in service it cannot be predicted because there is only 1 doctor. Officers guarantee fees for services. Services for treatment for BPJS participants are free of charge, but customers who do not have BPJS pay a levy of Rp. 3,000 have received medicine. The fee guarantee for services has been decreed by DKK. Retribution income is deposited every day to Bank BRI. Officers provide guarantees of legality in services according to SOP

5. Assurance

Empathy is measured by prioritizing the interests of the applicant/customer. Officers always prioritize patient service, serve in a friendly manner, serve with courtesy, serve in a non-discriminatory manner, do not discriminate in service except in emergencies where there are accidents and others, serve and respect every customer who comes.

Constraints on Quality of Service at UPT Puskesmas Griya Antapani

The thing that has become an obstacle so far regarding HR has been added, namely receptionists and doctors. In data processing it is still conventional, namely still entering data using the manual, normally it is normal by following the generally accepted data entry method. The thing that has been an obstacle so far is the addition of a receptionist to enter data on computerized not only manually. The thing that has become an obstacle so far has been the responsibility of doctors to be precise and routine at UPT.

Efforts to Overcome Service Quality Problems at UPT Puskesmas Griya Antapani

The infrastructure owned is incomplete so that dental treatment still requires referral to a hospital which takes time, is more expensive so additional facilities are needed, such as medical equipment, chairs and others to speed up action in the immunization process. Human resources are one of the

most important factors that cannot even be separated from an organization, both institutions, institutions and companies where sufficient human resources are needed to move the wheels of a company's and institution's business, and accelerate the rotation of the wheels of progress so that development and development are obtained and progress of an institution. In the UPT Puskesmas Griya Antapani which requires an increase in the number of receptionists, nurses and doctors to speed up the action process. In data processing it is still conventional, namely still entering data using the manual, normally it is normal by following the generally accepted data entry method. In conventional data processing, it would be better to add computerization to record data and make it easier to edit and organize data.

Conclusion

The conclusion from this study is that the problem with the quality of service at the UPT Puskesmas Griya Antapani is that it has not been maximized according to the expectations of the community as service users, especially in terms of service policy information that has not yet been realized to the public. Quality of service at UPT Puskesmas Griya Antapani from the five dimensions of service aspects shows that in general it is relatively adequate even though it is not optimal, but there are still some dimensions that need to be improved or added in order to improve the quality of service to the community to the maximum. Because based on the researcher's analysis that not all dimensions can be applied to the activity process at UPT Puskesmas Griya Antapani. Aspects of assessing service quality in modern service organizations, so there are several dimensions that cannot be used as a reference, such as the reliability dimension. Then in the Assurance dimension, the aspect of guaranteed protection against service impact is less relevant, because the service is still an administrative service that does not require guarantees for service impact protection.

Suggestions for the institution is to organize and complete the facilities and infrastructure supporting services so that services to the community can be improved. Judging from the ability of officers, it is better for the recruitment of officers to pay attention to the level of education and skills possessed by officers so that they can improve services to the community. Must have professional officers and to increase the professionalism of officers through training in skills that can improve service quality. Following the increasingly rapid flow of information, the use of a computerized system by opening a website that is always updated and which can be accessed directly by the public must be developed, in addition to accelerating the process of public services, especially in conveying the policies made. Suggestions for further research are to analyze the concept of service quality with a broader subject.

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