

ANALYSIS QUALITY OF OUTSTANDING SERVICES PATIENT IN HOSPITALROYAL PRIMA MEDAN IN 2020

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ABSTRACT

The quality of health services can affect the health and well-being of patients because satisfied patients will come back for treatment. The purpose of this study is to analyze the quality of service in outpatient polyclinics with patient repeat visits at the Royal Prima Hospital Medan in 2020.

This study uses quantitative analytic survey research with a cross-sectional study design. The location of this research was conducted at the outpatient clinic of the Royal Prima Hospital, Medan. The study population was all patients in the outpatient ward of the Royal Prima Hospital Medan in 2020. The number of samples in this study was 61 people. The technique used is accidental sampling. The survey data were analyzed using the chi-square test and logistic regression. The results showed that there was a tangible effect (Physical Evidence) with a p-value of $0.000 < 0.05$, reliability with a p-value of $0.000 < 0.05$, responsiveness with a p-value of $0.000 < 0.05$, assurance (certainty) with a p-value of $0.001 < 0.05$ and empathy (empathy) with a p-value of $0.000 < 0.05$ with patient repeat visits at the Royal Prima Hospital Medan in 2020 and the most dominant variables related to repeat visits at the outpatient clinic. outpatient treatment at the Royal Prima Hospital in Medan in 2020 with a p-value < 0.05 , namely the empathy variable (empathy) with a significant 0.002. As for suggestions for this research, it is expected that respondents who use outpatient service facilities provide an objective assessment of the services obtained and are committed to continuing choosing the Royal Prima Hospital in Medan City as a health facility if there are families who experience health problems.

Keywords: Tangible (Physical Evidence), Reliability (reliability), responsiveness (quick response), assurance (certainty), and empathy (empathy).

INTRODUCTION.

Health is a human right and is one of the elements of welfare that must be realized by health services. This requires the intervention of health services to achieve the highest degree of public health and to realize effective and efficient health services (UU RI No. 36 of 2009). The objective of the Long-Term Development Plan in the Health Sector (RPJPK) 2005-2025 is to increase awareness, willingness, and ability to live a healthy life for everyone so that the highest level of public health can be realized through the creation of a society, nation, and the state of Indonesia which is characterized by a vibrant population. live healthily and in a healthy environment, can access quality health services fairly and equitably, and have the

highest degree of health throughout the territory of the Republic of Indonesia. Communities can get health services easily both at health centers, hospitals, maternity clinics, and organizations engaged in health services (Kepmenkes No. 52 of 2015).

According to the Law of the Republic of Indonesia Number 44 of 2009 concerning Hospitals, hospitals are health services that provide complete individual health services that provide inpatient, outpatient, and emergency services. The hospital is one of the service industries, namely health services. As a service industry, the hospital must of course carry out business functions in its managerial, one of which is how to produce a quality or quality service product.

Hospitals as a part of the health care system in general provide services to the community in the form of health services including medical services, medical support services, medical rehabilitation, and care services. These services are carried out through emergency units, outpatient units, and inpatient units. The hospital as a complete health service and as the first referral level must be able to provide good health services for the community, especially in the inpatient installation section. Hospital management is very important to maintain public trust and even improve its services to be of higher quality (Supartiningsih, 2017).

According to (Agus Wahyu Permana, 2019) in improving the quality of services, hospitals must know whether the services provided by the hospital are by the expectations of the patient or not so that the hospital can improve the quality of its services. According to Alhashem et al., (2011) in Nasharuddin (2013) improving the quality of medical care services has become a major concern for patients, and in providing better services to patients, service quality is becoming increasingly important for hospitals in satisfying and retaining patients.

Quality is a comparison of perceptions with patient expectations of a product. The dimensions of service quality in the SERVQUAL model are based on five dimensions, namely reliability, namely the ability to provide promised services immediately, accurately, and satisfactorily, then responsiveness, namely the desire of staff to help patients and provide services responsively. Assurance includes the knowledge, ability, courtesy, and trustworthiness of the staff, free from danger, risk, or doubt, while Empathy includes ease of relationship, good communication, personal attention, and understanding of needs. the patients. Furthermore, direct evidence (tangibles) includes physical facilities, equipment, employees, and means of communication (A Parasuraman, 2015).

The theory of Zeithaml, Parasuraman, and Leonard (1985) illustrates that Customer Satisfaction/patient satisfaction is a much broader concept, not only about service quality but can be influenced by other factors.

Based on information on patient complaints, a complaint form can be obtained which was prepared by the Royal Prima Medan General Hospital in 2020 to find out the number of patients who expressed their dissatisfaction with hospital services. Several reasons were put forward by patients or families regarding the question of why they should seek treatment at the Royal Prima General Hospital in Medan. The answers varied, where 3 people said because the Puskesmas appointed the referral hospital to be the General Hospital of Royal Prima Medan, 2 people because it was close to their house, 7 people because of an emergency

and had previously been treated at the General Hospital of Royal Prima Medan. Of all the patients they met, they did not immediately feel satisfied with the Royal Prima Medan General Hospital, there were still complaints from patients and their families which included the outpatient room which was not comfortable because of construction, facilities and infrastructure supporting services were incomplete. , the lack of speed for service officers to respond to complaints from patients and administrative services that are not fast enough. So that 3 of the respondents said they would not come again for treatment at the hospital and would not recommend the Royal Prima General Hospital Medan to other parties.

Based on this, it shows that patients are still dissatisfied with the services provided. Complaints and experiences felt by patients after receiving services are an indicator of the quality of health services according to patients that need to be considered. Through the author's initial survey conducted in the outpatient room of the Royal Prima General Hospital, Medan to visiting patients, the health services provided by health workers have been well organized. However, the schedule of health services provided by doctors is sometimes not on time, which causes patients to wait longer. Patients also sometimes want to ask health workers but they are not available in this case at the nurse station. This is because the nurse on duty is accompanying the doctor on duty in each poly.

In connection with the above, the researcher wanted to know the relationship between the quality of service in the outpatient polyclinic and the patient's return visit at the Royal Prima General Hospital Medan in 2020.

LITERATURE REVIEW.

2.1. Health services.

Health care service is the right of every person guaranteed in the 1945 Constitution to make efforts to improve the health status of both individuals, groups, or society as a whole. The definition of health services contained in the Health Law concerning health is any effort that is carried out alone or jointly in an organization to maintain and improve health, prevent and cure disease and restore health, for individuals, families, groups, or communities. Based on Health Law Number 47 of 2016, health services generally consist of two forms of health services, namely:

a. Personal health services (medical services)

Many of these health services are carried out by individuals independently (self-care), and families (family care) or groups of community members that aim to cure disease and recover. Individual and family health. These individual service efforts are carried out at health service institutions called hospitals, maternity clinics, independent practices.

b. Public health services

Public health services are organized by groups and communities that aim to maintain and improve health which refers to promotive and preventive actions. These community service efforts are carried out at certain community health centers (Perpres, 2016).

2.2. Quality Health Services

The definition of quality health is a health service that is needed, in this case, it will be determined by the health care profession and at the same time desired by the patient/consumer or the community and affordable by the community (Pohan, 2006).

The quality of goods or services is multidimensional, as is the quality of health services. The dimensions of the quality of health services include:

1. Dimensions of technical competence

Skills, abilities, and appearance or performance of health care providers.

2. Affordability/access

Health services must be accessible to the community without being hindered by geographical, social, economic, organizational, and linguistic conditions.

3. Effectiveness

How health service standards are used appropriately, consistently, and according to local situations and is closely related to skills in following procedures contained in health services.

4. Efficiency

Can serve more patients/community.

5. Sustainability

Patients should be able to be served as needed.

6. Security

Safe from the risk of injury, infection, and side effects or dangers posed by the health service itself.

7. Convenience

Convenience can lead to patient trust in health care organizations.

8. Information

Able to provide clear information about what, who, when, where, and how health services will and have been implemented. This is important for the hospital level.

9. Punctuality

To be successful, health services must be delivered at the right time and in the right way, by the right service provider, using the right equipment and drugs, and in a cost-efficient manner.

10. Human relations

It is an interaction between health care providers and patients, health care providers. These human rights will give credibility by respecting each other, keeping secrets, respecting each other, being responsive to paying attention.

2.3. Dimensions of Health Service Quality

Quality of service is the action of a person to another party through the presentation of a product or service by the tastes, expectations, and needs of the patient. Hospitals can provide services that are by the wishes of patients, so the quality of hospital services is good. This good service will encourage patients to make repeat visits to the hospital. There are several expert opinions about the dimensions of service quality, as for these opinions, namely:

According to Pohan, to evaluate patient satisfaction in the service sector, identify it in several dimensions, including:

- a. Dimensions of technical competence (skills, abilities, and appearance or performance of health care providers).
- b. Affordability or access (health services must be accessible to the community without being hindered by geographical, social, economic, organizational, and linguistic conditions).
- c. Effectiveness (how health service standards are used appropriately, consistently, and according to local situations) and is closely related to skills in following procedures contained in health services.
- d. Efficiency (can serve more patients or society).
- e. Continuity (patients must be able to be served as needed).
- f. Safety (safe from the risk of injury, infection, and side effects or dangers posed by the health service itself)
- g. Convenience (convenience can lead to patient trust in health care organizations).
- h. Information (able to provide clear information about what, who, when, where, and how health services will and have been implemented. This is important for puskesmas and hospital levels).
- i. Timeliness (to be successful, health services must be delivered in the right time and manner, by the right service provider, using the right equipment and drugs, and being cost-efficient).
- j. Human relations (an interaction between health care providers and patients, among health care providers. These human rights will give credibility by respecting each other, keeping secrets, respecting each other, being responsive to paying attention (Pohan, 2006).

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2.4. Service Quality Aspects

Azwar (2010) states that service quality is multi-dimensional, namely:

- a. In terms of service users, service quality is primarily related to the responsiveness and ability of health workers to meet market needs and patient communication, including friendliness and sincerity.
- b. From the service provider, in this case, the hospital, the quality of service is related to usage by the development of science and technology.

The basic aspects of service quality include:

a. Acceptance aspect

This aspect includes the attitude of health workers who are always friendly, cheerful, always smiling, greeting all patients. Health workers need to have an interest in other people, accept patients regardless of class, rank, socio-economic background, the culture so that the person is intact. To be able to provide services according to the acceptance aspect, health workers must have an interest in others and have broad insight.

b. Attention aspect

This aspect includes the attitude of health workers in providing health services that need to be patient, generous in the sense of being willing to provide assistance and assistance to patients voluntarily without expecting anything in return, having sensitivity and sensitivity to any changes in patients, willing to understand the patient's anxieties and fears.

c. Communication aspect

This aspect includes the attitude of health workers who must be able to communicate well with patients and their families. There is communication that interacts between patients and health workers, there is a good relationship with the patient's family.

d. Cooperation aspect

This aspect includes the attitude of health workers must be able to do good cooperation with patients and their families.

e. Aspects of responsibility

This aspect includes the attitude of health workers who are honest, diligent in their duties, able to devote time and attention, sportsmanship in their duties, consistent and precise in their actions.

METHODS RESEARCH.

3.1. Type Of Research

The type of research used in this study is an analytic survey with a cross sectional study design which aims to analyze the relationship between the quality of health services and patient repeat visits at the outpatient polyclinic of the Royal Prima General Hospital Medan in 2020.

The sample selection in this study consisted of two criteria, namely:

a. Inclusion criteria, namely the general characteristics of the research subjects in the target population and the affordable population to be studied. The inclusion criteria include:

- 1) Outpatient at least 2 visits
- 2) Adult patient 18 years (WHO)
- 3) The patient is able to read and write
- 4) The patient is able to communicate well
- 5) Patients are willing to be respondents
- 6) Patients who are physically and mentally healthy.

b. Exclusion criteria are criteria to eliminate/exclude subjects who do not meet the inclusion criteria for various reasons. The exclusion criteria include:

- 1) Patients aged < 17 years
- 2) Patients who can not read and write
- 3) Patients who have mental disorders.

3.2. Validity and Reliability Test

Before the research instrument is given to the respondents to be studied, the instrument is tested first by testing the validity and reliability.

3.2.1 Validity Test

For this study, validity is a measure taken to determine the degree of accuracy of the research instrument in the form of a questionnaire. To find out whether the questionnaire can measure what it wants to measure (valid). A validity test aims to determine a measure or value that indicates the level of reliability or validity of a measuring instrument by measuring the correlation between variables and items. A test is said to have validity if the results are by the criteria, in the sense of having parallels between the test results and the criteria. The technique used to determine the parallelism is the product-moment correlation technique. The magnitude of r is calculated in the r table with a significant limit of 5%.

In this study, the research instrument used was 50 questions, and the validity test will be carried out at RSU Dr. Pirngadi Medan. The questionnaire that has been prepared in advance will be tested to determine the validity and reliability of the measuring instrument.

3.2.2. Reliability Test

Data reliability is related to trust issues. A test can be said to have a high level of confidence if the test can give constant results. To determine the level of confidence in the questionnaire in this study, the researchers used the Cronbach method, which is a measurement method to analyze the reliability of the questionnaire from one measurement. The results of the reliability test using Cronbach are declared reliable if they have a value > 0.600 . This study uses 50 items, so the comparison is a r table.

3.3. Data Processing Method

After all the data is collected, the data analysis is carried out again by checking all the checklist sheets whether the answers are complete and correct, the collected data is processed by computerization with the following steps:

1) Collecting

Collect data from checklist sheets

2) Checking

This is done by checking the completeness of filling out the checklist sheet with the aim that the data is processed correctly so that data processing gives valid and reliable results, and avoids bias.

3) Coding

In this step the authors coded the variables studied, the respondent's name was changed to a number.

4) Entering

Data entry, namely the answers from each respondent which are still in code form, are entered into the computer program used by the researcher, namely SPSS.

5) Data Processing

All data that has been inputted into a computer application will be processed as needed. After processing the data as described above, the next step is to perform data analysis.

ANALYZE AND RESULTS.

Royal Prima General Hospital Medan is one of the largest private hospitals in North Sumatra and is one of the referral hospitals in Medan. The Royal Prima General Hospital Medan was established on May 17, 2011 where the Deputy Minister of National Education of the Republic of Indonesia, Prof. Dr. Fasli Jalal, PhD laid the first stone in the construction of the Royal Prima General Hospital in Medan.

On February 14, 2013, the Head of the North Sumatra Provincial Health Office issued a Temporary Operational Permit to the Royal Prima Hospital Medan No. 440.442/1641/II/YEAR 2014.

On February 16, 2014, the Royal Prima General Hospital Medan was inaugurated by the Governor of North Sumatra, Bpk. Ir. H. Tengku Erry Nuradi, M.Si. Royal Prima Medan General Hospital is located at Ayahanda Street No. 68A Sei Putih Medan Petisah, North Sumatra. Royal Prima General Hospital Medan holds the title of type B hospital.

4.1. Distribution of Respondents

Characteristics Based on Age, Gender, Education, Occupation in Outpatient Polyclinic, Royal Prima General Hospital Medan in 2020. The distribution of respondent characteristics based on age, gender, education, and occupation in the outpatient polyclinic of the Royal Prima General Hospital Medan in 2020 can be seen in the table image below:

Table 1. Distribution of Characteristics of Respondents by Age, Gender, Education, Occupation in Outpatient Polyclinic, Royal Prima General Hospital Medan in 2020

Ages	n	%
21-25 Years	11	18,03
26-35 Years	18	29,51
36-45 Years	12	19,67
46-55 Years	13	21,31
56-65 Years	7	11,48
Genders	n	%
A Man	26	42,62
A Woman	35	57,38
Education	n	%
Junior High School	10	19,39
Senior High School	24	39,34
University	27	44,26
Job	n	%
Trader	12	19,67
entrepreneur	21	34,43
PNS	18	29,51
Lain-lainnya	10	16,39
Totals	61	100

Based on table 1 above, it is known that of the 61 respondents, most of the respondents were 26-35 years old, namely 18 (29.51%) respondents, while other respondents aged 21-25 years were 1 (18.03%) respondents, age 36-45 years as many as 12 (19.67), age 46-55 years as many as 13 (21.31%), age 56-65 years 7 (11.48%) respondents. Of the 61 respondents, it is known that most of the respondents are female, as many as 35 (57.38%) respondents while the respondents who are male are 26 (42.62%) respondents.

Of the 61 respondents, it is known that most of the respondents are university graduates, namely 27 (44.26%) respondents, 10 junior high school graduates (19.62%) high school graduates as many as 24 (39.34%) respondents. Of the 61 respondents, it is known that most of the respondents have self-employed jobs, namely 21 (34.43%) respondents, 12 traders (19.67%), civil servants as many as 18 (29.51%) respondents, and 10 others (16.39%).

The frequency distribution of respondents based on tangibles (physical evidence) in the outpatient polyclinic of the Royal Prima General Hospital Medan in 2020 can be seen in the table below:

Tables 2. Distribution of Respondents' Characteristics Based on Tangible (Physical Evidence) in the Outpatient Polyclinic of Royal Prima General Hospital Medan in 2020.

<i>Tangible</i>	n	%
Not satisfied	25	40,98
Satisfied	36	59,02
Values	61	100

Based on tables 2 above, it is known that of the 61 respondents, most of the respondents said they were satisfied with the physical evidence provided by health workers, namely 36 (59.02%) respondents, while other respondents said they were not satisfied with the physical evidence provided by health workers, namely as many as 25 (40.98%).

4.2. Frequency Distribution of Respondents Based on Reliability (Reliability) at the Outpatient Outpatient Clinic of the Royal Prima General Hospital Medan in 2020

The distribution based on the frequency of reliability (reliability) in the outpatient polyclinic of the Royal Prima General Hospital Medan in 2020 can be seen in the table image below:

Tables 3. Frequency Distribution of Respondents Based on Reliability (Reliability) in the Outpatient Clinic of the Royal Prima General Hospital Medan in 2020.

<i>Reliability</i>	N	%
Not satisfied	26	42,62
Satisfied	35	57,38
Values	61	100

Based on tables 3 above, it is known that of the 61 respondents, most of the respondents said they were satisfied with the reliability provided by health workers, namely 35 (57.38%) respondents, while other respondents said they were not satisfied with the reliability provided by health workers, as many as 26 (42.62%) respondents.

4.3. Research Limitations.

This research has been attempted and carried out by scientific procedures, however, it still has limitations, namely: the limitations of research using questionnaire sheets, namely sometimes the answers given by respondents do not show the real situation. In addition, the education level of respondents is different so that researchers must be able to provide

explanations with an understanding that is easily understood by respondents, especially for respondents with basic education. In distributing the questionnaires to the respondents, the researchers were assisted by health workers so that the explanation and understanding of the research questionnaires were different.

4.4. Implication

The results of this study indicate that 5 variables affect patient satisfaction at the Royal Prima Hospital, Medan City, namely tangible, reliability, responsiveness, assurance, empathy. This implies that in the future health workers in outpatient polyclinics can pay attention to factors that can affect patient satisfaction by improving the quality of health services by improving facilities and infrastructure, the friendliness of officers, increasing the ability to handle patients by the development of science and technology, quick in responding to patient complaints, and providing motivation and understanding of patient needs. Carry out planning for the fulfillment of facilities and infrastructure from medical devices in hospitals and propose plans that have been prepared to the City Health Office, based on service needs in hospitals and refer to the standards stated in Law 44 of 2009 concerning Hospitals.

CONCLUSION

Based on the results of the research that has been carried out, it can be concluded that the empathy variable is the variable most related to repeat visits at the outpatient polyclinic of the Royal Prima General Hospital Medan in 2020 with a p value of 0.002.

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