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 Jogorogo Community Health Center, Ngawi, Indonesia Subagyo1(CA)
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 (Corresponding Author) ABSTRACT Community health centers are
 expected to be able to provide quality health services that meet the needs
 of the community. Thus, community health centers need to improve
 services in order to be able to compete, develop, and grow. This survey
 research describe the satisfaction of the community as customers for
 services provided by Jogorogo Community Health Center, Ngawi Regency.,
 Indonesia. The population were all people who used health services at the
 Jogorogo Community Health Center in 2016. The samples were community
 that utilized health services at the Jogorogo Community Health Center in
 2016, selected by quota sampling technique. Each service unit were a
 patient registration center, general clinic, dental clinic, MCH clinic,
 medicine room, and inpatient room, each given a quota of 20 customers,
 while specifically for community health centers assistants were quota of 10
 customers, with consideration that the average customer visit at a
 community health center assistant is lower. The variable was the level of
 satisfaction with health services provided by community health centers.
 Data was collected through filling out questionnaires, then analyzed
 descriptively and presented in the form of spiderweb diagram. Keywords:
 Community health center, Service quality INTRODUCTION Government
 organizations have produced public services with the community as
 targets, which in this case, services are expected to be useful to meet the
 needs of the community. In the Law of the Republic of Indonesia Number
 25 of 2009 concerning Public Services, it has been explained that public
 service is an activity or series of activities in order to fulfill service needs in
 accordance with legislation for every citizen and resident of goods,
 services and or services administrative services provided by public service
 providers. In the explanation section it has been described that what is
 meant by public service providers is institutions and corporations that are
 authorized to provide public services using the state budget.(1).
 Community health centers as health service units that are at the forefront
 of basic health services are expected to be able to provide quality health
 services that meet the needs of the community. Thus, community health
 centers need to improve services in order to be able to compete, develop,
 and grow. Jogorogo Community Health Center, is one of the health service

units in the Health Office of Ngawi regency which is responsible for organizing health development in its working area.(2) As an institution in charge of providing services to the community, community health centers must always improve and maintain the quality of health services. In this regard, Nugroho (2011) explains that there are many ways to measure the quality of service to customers, but the most important quality indicator is the level of customer satisfaction. In this case, many experts stated that in measuring the quality of service products or goods, the most important thing is quality according to customer perceptions, which are measured in the form of satisfaction levels.(3) Referring to the explanation above, it is necessary to conduct a community satisfaction survey (CSS) on basic health services provided by the Jogorogo community health center, to see the extent of the quality of health services according to the perception of the community as customers. Basically, the government has regulated the procedures for implementing CSS through the Minister of 'Utilization of State Apparatus' and 'Bureaucratic Reform' Regulations, Number 16 of 2014 concerning "Guidelines for Community Satisfaction Survey on the Implementation of Public Services". In addition to functioning to measure the quality of health services to the community, CSS activities are also intended to see current service conditions, as a reference for the development and improvement of continuous service quality so that good corporate governance can be realized.(4) Based on the description above, then in 2016, CSS for Jogorogo Community Health Center services really became a very important requirement, so it must be held and followed by a follow-up plan based on the survey results obtained. METHODS This activity is classified as survey research because it only aims to describe the existing conditions in the field as is, namely the satisfaction of the community as customers for services provided by community health centers. This community satisfaction survey was conducted in 2016, at the Jogorogo Community Health Center, Ngawi Regency, Indonesia. The population involved in this study were all people who used health services at the Jogorogo Community Health Center in 2016. The samples used in this survey were a portion of the community that utilized health services at the Jogorogo Community Health Center in 2016, which was selected by quota sampling technique. Each service unit at the Jogorogo Community Health Center were a patient registration center, general clinic, dental clinic, MCH clinic, medicine room, and inpatient room, each given a quota of 20 customers, while specifically for community health centers assistants were quota of 10 customers, with consideration that the average customer visit at a community health center assistant is lower. The only variable examined in this survey is the level of satisfaction with health services provided by community health centers. Operationally, the level of satisfaction is defined as the result of filling out a questionnaire about the level of satisfaction with health services provided by the public health center, which covers 9 aspects: requirements, procedures, service times, fees / tariffs, product specifications, service competencies, officer behavior, notices of service, and handling complaints, suggestions and input. Data on community satisfaction with health services provided by community health centers was collected through filling out questionnaires by customers, which were guided directly by designated data collection personnel. The steps taken in this process include: 1. Preparatory meetings involving the Ngawi District Health Office and the Health Scientific Forum as survey implementers 2. Preparation of data collection instruments in the form of a questionnaire developed based on Minister of Administrative Reform and Bureaucratic Reform Regulation No. 16 of 2014 concerning "Guidelines for Community Satisfaction Survey on the Implementation of Public Services". In this case the questionnaire has covered 9 aspects of the service that have been determined, namely: requirements, procedures, service time, fees / tariffs, product specifications, service competencies, officer behavior, service announcements, and handling complaints, suggestions and input. The

number of items for each aspect is varied, according to the characteristics of each aspect. 3. Enumerator training, so that the data collection process can be carried out in accordance with the expected standards, as well as the realization of the same standards for each enumerator. 4. The process of collecting data in the field, namely filling out questionnaires by customers that are guided directly by the enumerator, with the supervision of the supervisor. 5. Data processing includes: 1) editing of data that is ensuring that the data obtained is correct and complete, 2) coding of qualitative data into numbers, in accordance with the coding guidelines listed in the questionnaire, 3) tabulation, which is entering the code -code into tables that are available, using digital software. This data processing stage is carried out by the eumerator, with the supervision of the supervisor. 6. The process of data analysis is to analyze the data using descriptive statistical methods both numerically in the form of indexes, as well as categorical which is a description of the level of quality. The method of calculating the community satisfaction index is as follows: 1. Calculating the average value of each element of service 2. Calculate the weighted average value for each service element using the following formula: $\text{Weighted average value} = \frac{\sum \text{weigh} \sum \text{element}}{\sum \text{element}}$ 3. Calculate the community satisfaction index $\text{CSI} = \frac{\sum (\text{average value of each service element} \times \text{weighted average value})}{25}$ Furthermore, the community satisfaction index is converted into a quality level category as presented in Table 1. Table 1. The level of service quality of the community health center No CSI score Service quality Category 1 25 - 43.75 2 43.76 - 62.50 3 62.51 - 81.25 4 81.26 - 100.00 D Not good C Poor B Good A Very good The data were analyzed descriptively and presented in the form of spiderweb diagram. RESULTS The following is presented about the results of data analysis on community satisfaction with health services provided by the Jogorogo Community Health Center, Ngawi. Table 2. Community satisfaction with health services at the Jogorogo Community Health Center Unit Target Achievement Note Patient registration center General clinic Dental clinic MCH clinic Medicine room Inpatient room CHCA "Kletakan" CHCA "Soco" CHCA "Ngrayudan" 62.51 78.44 62.51 78.98 62.51 78.67 62.51 78.13 62.51 78.28 62.51 78.13 62.51 76.25 62.51 78.75 62.51 77.34 B (Good) B (Good) B (Good) B (Good) B (Good) B (Good) B (Good) B (Good) B (Good) B (Good) Figure 1. Community satisfaction with health services at the Jogorogo Community Health Center Table 2 and Figure 1 show that service quality in all Jogorogo Community Health Center service units, Ngawi is in a good category and has exceeded the minimum quality target. The quality value of each service unit is almost the same. DISCUSSION Measuring the quality of service at the Jogorogo Community Health Center as described above shows that the level of community satisfaction has been successfully carried out in all health service units. The results of measuring the quality of health services provided by the Jogorogo Community Health Center indicate that all health service units have exceeded the target or minimum standards of quality services, namely with an index of not less than 62.51 which is a minimum number for good categories. This shows that the basic health services provided by the Jogorogo Community Health Center as an institution in charge of providing public services, have succeeded in meeting the expectations of the government, as stated in Law Number 25 of 2009 concerning Public Services, that public services are activities the framework of fulfilling service needs in accordance with the laws and regulations for every citizen and resident for administrative goods, services and or services provided by public service providers. In this case, the Jogorogo Community Health Center has succeeded in providing services in the form of services to the community, both in the form of health services and related administrative services. The Jogorogo Community Health Center has surpassed the minimum quality targets that have been set, but these achievements are still in the "good" category, or have not been able to reach the excellent category, even though the achievement of the "good" category has shown

success. This needs to be noted as an agenda for improving the quality of services in the coming fiscal year, because improving quality must be sustainable. It should be borne in mind that in this study, service quality was measured based on people's perceptions as customers. Whatever the reality, if the customer is satisfied or very satisfied, then the service can be said to be of high quality, and vice versa if the customer claims to be dissatisfied or very dissatisfied then the service can be said to be of low quality. Thus, the characteristics of the community as customers of the community health center must always be followed by its development. If social status, economic status, community education level increase, this will affect the level of their expectations of health services provided by community health centers. Providing the same service this year can be perceived differently by the community for the coming year as a result of improving education, knowledge and experience of the community. This happens because basically community satisfaction with health services is the result of community assessments of the services they receive, referring to the standards they have previously determined.(3) The explanation above results in the consequence that to improve and maintain the quality of health services in public health centers, all services provided must refer to the most important standard, namely expected quality, namely the level of service quality expected by the community. In the information age like now, the flow of information is so heavy, and this will affect the level of expected quality from the community. The community no longer only hopes for quality (the higher quality of services that are already available), but also to expect quantity (more types of services). For this reason, additional studies need to be carried out such as surveying community needs or expectations for community health center services. The results of this survey can be used as a reference to determine the development of community expectations for community health center services, so that everything needed by the community can be well anticipated. In this way, the community health center as the spearhead of health services in the community always carries out quality improvement in accordance with what is expected by the community as service users. The important thing to note is that public health centers provide services in the form of services, and according to Nugroho (2011), the quality of services is more difficult to measure compared to service provision of goods, which are generally tangible or can be seen directly clearly, such as shapes, colors, texture, size and so on. When utilizing public health center services, only a few dimensions are tangible, such as physical facilities and service personnel themselves. The rest are intangible dimensions which are relatively more difficult to measure. The characteristics that exist in services make it difficult for researchers to determine what determines the quality of health services by public health centers. Therefore, the measurement of the quality of public health center services must be carried out carefully, referring to the methodology for measuring the quality of appropriate services.(3) CONCLUSION Based on the results of the study, it can be concluded that the Jogorogopus Community Health Center, Ngawi has achieved the quality of basic health services above the minimum quality standard, which is in the good category.

REFERENCES 1. Republik Indonesia. Law of the Republic of Indonesia Number 25 of 2009 concerning Public Services (Undang-Undang Nomor 25 Tahun 2009 tentang Pelayanan Publik). Jakarta: Republik Indonesia; 2009. 2. Haksama S, et al. The Report of Community Satisfaction Index Survey on Community Health Center Services in Ngawi District in 2015 (Laporan Survei Indeks Kepuasan Masyarakat terhadap Pelayanan Pusat Kesehatan Masyarakat di Kabupaten Ngawi Tahun 2015). Surabaya: Pusat Studi Jaminan Sosial, Universitas Airlangga; 2015. 3. Nugroho HSW. Quality of Health Services According to Consumer Perception (Kualitas Layanan Kesehatan Menurut Persepsi Konsumen). Ponorogo: Forum Ilmiah Kesehatan (Forikes); 2011. 4. Kementerian PAN & RB. Regulation of the Minister of Administrative Reform and Bureaucratic

Reform, Number 16 of 2014 concerning "Guidelines for the Community Satisfaction Survey on the Implementation of Public Services". Jakarta: Kementerian Pendayagunaan Aparatur Negara dan Reformasi Birokrasi; 2014. [Health Notions, Volume 1 Number 3 \(July-September 2017\) ISSN 2580-4936](#) [Health Notions, Volume 1 Number 3 \(July-September 2017\) ISSN 2580-4936](#) [Health Notions, Volume 1 Number 3 \(July-September 2017\) ISSN 2580-4936](#) [Health Notions, Volume 1 Number 3 \(July-September 2017\) ISSN 2580-4936](#) [Health Notions, Volume 1 Number 3 \(July-September 2017\) ISSN 2580-4936](#) 283 | [Publisher: Humanistic Network for Science and Technology](#). 284 | [Publisher: Humanistic Network for Science and Technology](#). 285 | [Publisher: Humanistic Network for Science and Technology](#). 286 | [Publisher: Humanistic Network for Science and Technology](#). 287 | Publisher: Humanistic Network for Science and Technology