



QUALITY ANALYSIS OF QUALITY SERVICE IN THE MIDWIFERY WARD OF RSUD AROUKA SOLOK DISTRICT WEST SUMATERA, INDONESIA

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ABSTRACT The basic nature of the Hospital is the fulfillment of the needs and demands of patients who expect completion of health problems at the Hospital. Patients expect services that are ready, fast, responsive and convenient to complaints of patient illness. One part of the hospital service is the service in the Midwifery Ward. The purpose of this study was to analyze the knowledge of the officers on the quality of midwifery services in the Midwifery Ward, to analyze the availability of facilities in midwifery services in the Midwifery Ward, to analyze the dimensions of the quality of midwifery services in the Midwifery ward, and to analyze the quality of midwifery services in Midwifery wards.

The type of this research is qualitative research with data collection method through in-depth interviews of 16 informants consisting of: Obstetric specialist, Head of Midwifery Room, Head of Midwifery Team, 2 midwives, cleaning service, nutrition officer, 5 patient and 4 family patient. The result of this research is information that in terms of input, that is knowledge and means have good, whereas from facet process of five dimension of satisfaction which studied, only two dimension which have fulfill patient expectation, that is from Responsiveness and empathy aspect, while others are not suitable with patient and family perceptions so as to produce the output of nine informants who are patient and family, four are satisfied and five stated less / dissatisfied with the services obtained in Arosuka District Midwifery Ward. In conclusion, in this study there are still shortcomings in terms of service dimensions in the Midwifery Ward of RSUD Arosuka. To further improve the Service in the Midwifery Ward of RSUD Arosuka it is suggested that there is an increase in human resources, so that all officers have the same skills in providing services. Also required improvement of other supporting facilities. The existence of periodic evaluations will also help maintain the quality / service quality of the Midwifery Ward.

KEYWORDS : quality analysis, quality service, midwifery ward, hospital

Introduction

The purpose of health services is the achievement of the degree of public health that satisfies the expectations and needs of the community through effective service by service providers and the needs of service providers, in service institutions organized efficiently. The interaction of the three main pillars of harmonious, harmonious and balanced health services is the guidance of three-party satisfaction, and it is a satisfactory healthy care¹. Quality of health services is the appropriate and appropriate appearance (in accordance with the standards) of a known safe intervention, which can deliver results to the communities concerned and which have the ability to impact on death, illness, disability and malnutrition¹. Quality of service can be seen from the dimensions of reliability, responsiveness, assurance, empathy, and tangibles (the physical appearance of the service) These five dimensions are called Servqual (the ability to make promises) Service Quality) which is a tool of service quality².

In several hospitals in Indonesia, patient satisfaction with nursing service becomes an interesting topic to be discussed and become research continuously, one of the research related to patient satisfaction at Central Java Province Hospital on inpatient service found 68,6% - 76,24% patient expressed satisfaction on the environmental aspects of hospitals and treatment room facilities³. One indicator of hospital service quality is Bed Occupancy Rate (BOR). BOR according to Huffman is "the ratio of patient service days to inpatient bed count days in a period under consideration" is comparison of patient care days to number of beds in the calculated period. Meanwhile, according to MOHRI, BOR is the percentage of bed usage at a certain time unit. This indicator highlights the low level of hospital bed utilization. The ideal BOR parameter value is between 60-85%⁴. Based on data from Dinas kesehatan province of West Sumatra, BOR RSUD Arosuka in 2015 as much as 17.3%. This percentage is still far compared to its competitors RSU Solok and RST Tk IV 01.07.06 Solok also serve patients from Solok regency has a BOR of 81.4% and 50.5%. One part of the hospital service is the service in the Midwifery Ward. According to Purwoastuti 2015 midwifery services are an integral part of health care and focus on women's services. To improve the quality of midwifery care is one effort to reduce maternal mortality and infant mortality rate. RSUD Arosuka has also provided health services in midwifery ward. The

number of visits / number of patients in Midwifery Arosuka Hospital in 2013 is 473, then decrease in 2014 to 335, while in 2015 amounted to 516 people. From this figure, there is a decrease in the number of Arosuka Hospital Midwifery patients from 2013 to 2014, then up again in 2015. However, the number of visits is relatively low when compared with the target number of pregnant women at risk in solok district which reached 1,364 per year.

Material and Method

This type of research is qualitative research. This study aims to Analyze Qualitative Quality of Midwifery Service in Midwifery Ward of Arosuka Hospital of Solok Regency. The thing studied is how informant perception about knowledge, facilities and quality of Midwifery service in Midwifery Ward of Arosuka Hospital. Method used is phenomenology approach. According to Hasbiansyah 2008, phenomenology explains the phenomenon and its meaning for individuals by conducting interviews on a number of individuals. The phenomenological approach seeks to let reality reveal itself naturally. Through the question of inducement, the subject of research is left to tell all sorts of dimensions of his experience with regard to a phenomenon / event. The study was conducted in RSUD Arosuka Kabupaten Solok Provinsi Sumatera Barat. Social situation or social situation consisting of three elements, namely: place, actors, and activity (activity) that interact synergist⁵. The social situation to be studied is the quality of obstetric servants in Midwifery Ward conducted in RSUD Arosuka. Resources, or participants, informants, friends and teachers in the study. Determination of data source in the interviewee is done purposively, that is chosen with certain consideration and purpose. Based on the techniques of taking resource persons, participants or informants, then used in this study are, Midwifery Specialist, Head of Midwifery Room of RSUD Arosuka, Head of Midwifery Team of Arosuka Hospital, Midwife (2 persons), Cleaning Service, Nutrition Officer, Patient (5 person), and Family of patients (4 persons). In this research, the researcher uses the tools in the form of, In-depth interview guide and Smartphone as a recording tool as well as camera for documentation. Data collection is done by interviews. Triagulation data collection is defined as data collection techniques that combine from various data collection techniques and data sources that already exist.

Table 1. Indepth Matrix Interview

No	Required information	Specialist Psychian	Head of room	Head of team	Midwifery	Cleaning service	Patiens	Family
1.	Input: Knowledge Facility	√	√ √	√ √	√ √	√		

2	Process: Tangible Reliability Responsiveness Assurancy Emphaty	√ √ √ √ √	√ √ √ √ √	√ √ √ √ √	√ √ √ √ √	√ √ √ √ √	√ √ √ √ √	√ √ √ √ √
3	Output: Service quality						√	√
4	Indepth interview	√	√	√	√	√	√	√

Data processing is done as follows:

1. Data reduction (Data Reduction) Reducing data means summarizing, choosing key and important data and creating categories. Thus the data that has been reduced will provide a clearer picture and in accordance with the purpose of research and make it easier to perform further data collection.
2. Display data (data presentation) In qualitative research, the presentation of data can be done in the form of brief descriptions, charts and relationships between categories. Further suggested in

the presentation of narrative text data.

3. Conclusion drawing (drawing conclusions)

Result and Discussion

The data from the informants in this study were obtained by conducting in-depth interviews to specialist doctors on obstetrics, Head of Room, Head of Midwifery Care, 2 midwives, Cleaning service, nutrition officer, 5 patients and 4 patient families. Characteristics Informan interviews can be seen in the table below.

Table 2 Characteristics of Informant Research

No	Code	Occupation	Sex	Ages	Last education
1	Informant 1	Obstetry & ginecologist	Man	42 yrs	Specialist
2	Informant 2	Head of room	woman	41yrs	Midwife
3	Informant 3	Head of team	woman	35 yrs	Midwife
4	Informant 4	Midwife 1	woman	27 yrs	Midwife
5	Informant 5	Midwife 2	woman	30 yrs	Midwife
6	Informant 6	Cleaning service	woman	34 yrs	Senior high school
7	Informant 7	Nutitionist	man	30 yrs	PH degree
8	Informant 8	Patient 1	woman	38 yrs	Senior high school
9	Informant 9	Pasient 2	woman	31 yrs	Senior high school
10	Informant 10	Patient 3	woman	34 yrs	Junior high school
11	Informant 11	Patient 4	woman	26 yrs	Senior high school
12	Informant 12	Patient 5	woman	32 yrs	Junior high school
13	Informant 13	Patient family 1	man	57 yrs	Junior high school
14	Informant 14	Patient family 2	man	33 yrs	Senior high school
15	Informant 15	Patient family 3	man	28 yrs	Senior high school
16	Informant 16	Patient family 4	man	42 yrs	Senior high school

A. Input

1. Knowledge

From the results of the research in the know that health workers who perform midwifery services in Midwife Care RSUD Arosuka have good knowledge about midwifery services in accordance with the standards. As when the author asks questions about maternity services according to standard, the average informant can answer them correctly. Knowledge is one of the predisposing factors that determine a person's health behavior. Such knowledge can be obtained through formal education, counseling and information from the mass media. According to WHO theory knowledge is gained from one's own experience or the experience of others. If a person knows and understands something then he can take attitude and action according to what he knows⁶.

The results of this study are in line with research conducted by Fajrin Shaleh et al. Who stated that officers have known the target policy, namely pregnant women and postpartum mothers, both referral patients and patients without reference. This makes the communication transmission process work well because the officers respond well to patients who come in hospitals in providing services.

According to the authors, if health services are to succeed well and in accordance with predetermined standards or guidelines, service providers not only know what to do and have the ability to perform the service, but they must also have the willingness to perform services in accordance with the guidelines. Health Officers in Midwife Care RSUD Arosuka already have enough knowledge and ready to do the best service that can be given.

2. Facilities

Various activities and infrastructure of health service activities that reflect the quality of the Hospital is the main determinant of patient satisfaction. Patients will provide an assessment (affection reaction) to various health care activities it receives and to health facilities and infrastructure associated with the provision of health services. Their assessment of hospital conditions (good or bad quality) is a picture of the hospital's overall quality based on the patient's subjective experience.

From the results of the study, it was found that the facilities in Midwife Care of Arosuka General Hospital according to the health officer were almost complete, while according to the patient and family still less. This is evident from the answer informants stated that the facilities are sufficient but not yet perfect, Midwifery care already has SOP as a guide for officers to carry out services in accordance with the standards. On the other hand, some things are still lacking, especially those concerning the privacy of the patient ie the barrier between patients, washbasin and bathroom.

The availability of the absolute means affects the patient's perception of the services provided. With the availability of complete facilities, it is expected to encourage the confidence of patients to get services in RSUD Arosuka. Based on the writer's observation, the tools in care of midwife of Arosuka Hospital are not yet complete, so are other supporting facilities and infrastructures. In accordance with the information provided by the informants, who are still obstacles in midwifery services are the lack of seats, frequent dead waters and often unavailable medicines.

3. Process

Tangibles are a tangible proof of the concern and care provided by service providers to consumers. The importance of this dimension tangibles will grow the image of service providers, especially for new consumers in evaluating the quality of services. Companies that do not pay attention to the physical facilities will grow confusion or even damage the company image.

From the results of the study found that according to health personnel informants in terms of tangible already implemented or in other words already appears evidence of the actual service performed. However this is inversely proportional to interviews obtained from patient informants and families of patients who most have not felt good service in terms of tangible. According to patients and families, the room is not always clean and the seats are insufficient even though most recognize that health workers are clean and neat.

When compared with Dadang Hermanto⁷ research result that there is a

significant correlation between perception of tangible and patient satisfaction, tangible midwifery service has not been enough.

From the observations that the authors do in the care of obstetric Arosuka, in terms of tangibles is constrained in terms of cleanliness of the room. Although according to the recognition of Cleaning service officers have done the task in accordance with the provisions, Just constrained by disobedience of patients and families to maintain cleanliness, the number of waiting too busy so that it spreads mat in the daytime treatment room. This is evident when the unbalanced clock makes it difficult for CS officers to clean the room. Wandering children scatter rubbish is also a constraint. The solution that can be done is consistency about patient's hours and strict rules about limiting the number of patient waiting and children should be banned from entering.

From the results of research conducted to obtain the results that in terms of reliability, services provided also not in accordance with patient expectations. This is evident from the results of interviews stating that not all officers have reliability, there are some officers who have not been able to gain the trust of patients. Information is obtained not only from the patient and family side, the officer himself admits this

Reliability or reliability is the ability of companies to carry out services in accordance with what has been promised in a timely manner. The importance of this dimension is consumer satisfaction will decrease if the services provided are not in accordance with the promised. So the component or element of dimension reliability is the ability of the company in delivering the services appropriately and charging the cost appropriately.

In line with Anjarini's study of interviews⁸, the ability to be the primary means of nurses, although not imposed, must be in accordance with the capacity of the nurse. Basically the nurse must issue all the competence to be able to impress the patient's problem, so the patient is confident with the services provided by the nurse and the impact the patient will give a positive assessment in accordance with what he felt. A statement from the nurse conveying the recruitment standard is important, not permitted by KKN but based on competence and training for a limited time.

In the presence of a procedure which stipulates that the health worker should explain the illness suffered by the patient well / clearly, telling how to care as well as skilled in the service can provide a satisfaction for the patient. As already explained before, the unequal ability of officers become obstacles in fulfilling the dimension of patient satisfaction in terms of reliability. This requires a special study of hospital management, especially to improve the quality of human resources of health personnel by providing training, not only technical health / nursing but also effective communication techniques with patients and families.

Different from other dimensions, in terms of responsiveness, health workers in care of Midwifery Arosuka have performed a fast and responsive service. Evident from interviews with health workers and patients, the average informant gave the same answer.

Responsiveness or responsiveness is a company's ability made by direct employees to provide services quickly and responsive. Responsiveness can foster a positive perception of the quality of services provided. Included in the event of failure or delay in the delivery of services, the service providers seek to improve or minimize consumer losses immediately. This dimension emphasizes the attention and speed of the employees involved in responding to consumer requests, inquiries, and complaints. So the components or elements of this dimension consist of the readiness of employees in serving customers, the speed of employees in serving customers, and handling customer complaints.

This is in line with research conducted by Dadang Hermanto⁷ which says there is a very significant relationship between the perception of the quality of the responsiveness of midwifery services with patient satisfaction. The less good perception of the respondents on the quality of responsiveness of midwifery services, the more unsatisfied respondents to midwifery services.

Based on the observations that the authors do, health workers have

provided good service in terms of responsiveness. Most officers already know what they should do in providing services to patients in accordance with established procedures. The obstacles that are still faced is in terms of patient administration BPJS. Lots of letters to be photocopied and patient back and forth to take care of service guarantee. In the future the Hospital should clean up in the member ease in terms of administration so that service can run well.

Assurance is the knowledge and behavior of the employee to build trust and confidence in the consumer in consuming the services offered. This dimension is very important because it involves the consumer's perception of the high risk of uncertainty over the ability of service providers. The company builds trust and loyalty of consumers through employees who are directly involved in dealing with consumers. So the components of this dimension consist of the competence of the work includes the skills, knowledge of the employees to perform services and credibility of the company that includes matters relating to consumer confidence to companies such as, corporate reputation, achievements and others.

In Maternity Care of RSUD Arosuka, in terms of assurance has not fulfilled the wishes of patients, because of the results of interviews on patients and family services has not been satisfactory in terms of ability to make a diagnosis of disease and has not created the atmosphere of kinship with patients and families.

In line with research conducted by Dadang Hermanto⁷ who found no significant relationship between the perception of quality of midwifery service guidance with patient satisfaction. The less good the respondent's perception on the quality of midwifery service guarantee, the more unsatisfied respondents to midwifery services.

In this case, good communication between officers and patients is very important to be improved. Because not all patients understand that doctors, midwives and other personnel have authority and responsibility respectively. Such diagnosis and treatment is the authority of specialist doctors, while midwives perform collaborative midwifery care and carry out penkes to patients and families. Based on the results of research, in terms of empathy, officers also have tried to provide the best service. And responses from patients and families have been good. Only in terms of the same service given to the patient are some patients and families feel differentiated.

Empathy is a company's ability made directly by employees to give attention to individual consumers, as well as sensitivity to the needs of consumers. So the components of this dimension is a combination of access (access) that is easy to take advantage of services offered by the company, communication is the ability to do to convey information to consumers or obtain input from consumers and understanding is an attempt to know and understand the needs and desires of consumers.

This is in line with the research conducted by Anjarin⁸ which mentions, from the results of their triangulation states that the empathy aspect is the inherent nature of the nurse, The form of empathy towards the patient is reflected in the behavior of the nurse, the capital as the nurse actually lies in friendliness and patience, because each patient is considered as buyer and buyer is king, so the patient deserves to be respected and appreciated.

According to the author's observation, the officer has shown empathy attitude. This is in accordance with the statement of the patient saying the officer is friendly and always say hello before giving service. Indeed there are some who feel service is somewhat differentiated, but according to observations that researchers do this is not very visible. All patients are treated equally.

4. Output

Of the nine informants who were patients and families who received services in Midwife Care of RSUD Arosuka, four people expressed satisfaction and five stated less / dissatisfied with the services obtained in Midwife Care of RSUD Arosuka.

According to Gerson, satisfaction is a form of feeling someone after getting experience terhadap service performance that has met expectations. While according to Kotler satisfaction is a feeling of pleasure or disappointment that emerged after comparing the perception of the performance or the outcome of a product or service and expectations⁹.

As disclosed in the definition of quality of health services according to the patient or society that the quality is empathy, appreciate, responsive, as needed and friendly. Similarly, according to Nursalam states that nursing service is not just a process of giving and receiving (take and give) but a nurse (officer) is required to be able to behave a "care", meaning that in providing nursing service someone is required to provide a friendly, polite service, appreciate and empathize with what the patient feels.

In line with research conducted by Sutyarningsih that factors that affect patient satisfaction one of them is the facilities provided by the hospital. Facility is a very important factor for the formation of a person's satisfaction. It also agrees with the results of Zeithmal and Binner's research that a good appearance is an attractive appearance, and definitely supported by facilities owned in hospitals and health institutions, with a neat, clean impression, and it can be improved through uniform and completeness as a mirror acceptance is good, for the patient to fit the desired expectations of the patient.

Midwifery Ward should be cleaned up in service so that have quality service quality, professional officer and have adequate facilities so that together with other health facilities also support the achievement of vision of RSUD Arosuka to become the hospital of choice for society of Solok Regency.

Conclusions

Based on the results of research, health officers already have good knowledge about midwifery in the Hospital. Because most informants can answer questions according to the standard of midwifery care that must be owned by the officer.

The facilities available in the Arosuka Hospital Midwifery Ward are not perfect. There are some shortcomings that are still felt by the patient, such as; the absence of curtains, sink and bathroom was damaged and the seating was lacking. While the perceived shortage of officers is a supporting facility that is not enough.

Of the five dimensions of satisfaction studied, only two dimensions have met the expectations of patients, namely in terms of Responsiveness and empathy, while others have not been in accordance with the perception of patients and families.

a. Tangibles / Direct evidence

From the results of the study found that according to health personnel informants in terms of tangible already implemented or in other words already appears evidence of the actual service performed. However this is inversely proportional to interviews obtained from patient informants and families of patients who most have not felt good service in terms of tangible.

b. Reliability

From the results of research conducted to obtain the results that in terms of reliability, services provided also not in accordance with patient expectations. This is evident from the results of interviews stating that not all officers have reliability, there are some officers who have not been able to gain the trust of patients. Information is obtained not only from the patient and family side, the officer himself admits this.

c. Responsiveness / Responsiveness

Different from other dimensions, in terms of responsiveness, health workers in care of Midwifery Arosuka have performed a fast and responsive service. Evident from interviews with health workers and patients, the average informant gave the same answer.

d. Assurance

In the Midwifery Room of RSUD Arosuka, in terms of assurance has not fulfilled the wishes of patients, because of the results of interviews on patients and family services has not been satisfactory in terms of ability to make a diagnosis of the disease and the creation of family atmosphere with the patient and family.

e. Emphaty / Empathy

Based on the results of research, in terms of empathy, officers also have tried to provide the best service. And responses from patients and families have been good. Only in terms of the same service given to the patient are some patients and families feel differentiated.

Suggestions

a. For management

Policy support is needed especially in improving human resources in Midwifery Ward, such as excellent service training and so forth. In terms of facilities that need to be added is patient waiting room, waiting seat, bathroom repair, barrier between patients and others. Furthermore, it is also advisable to be more reliable medication problems and ease in the administrative process so that patients do not feel its affairs convoluted.

b. For Health Officers

To improve the quality of services in the Midwife Hospital of Arosuka Hospital, it is recommended that all officers provide services in accordance with established procedures. Then, improving interpersonal communication with patients and families and explaining the rights and obligations of patients. Because of interviews with one of the informants who have high expectations, for example; changing patients' duks with total care is the responsibility of the patient and family, but the patient and family have not been educated on this matter so they consider that the duty of the midwife. For that required health education to patients and families in accordance with the criteria of each - each patient so that patient satisfaction can be more achieved.

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