

Assessment and Health Service Quality Improvement Plan

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Abstract

Many Puskesmas in Indonesia have health service problems, such as a lack of health facilities and the availability and quality of health workers at Puskesmas. This study aims to examine the quality of health services and strategies for improving them in Indonesia. They were using a literature review process. The number of articles studied by the database: Google Scholar with 22 articles, Pubmed, PMC, and Proquest with 1 article each. The results of the study are (1) Quality of health services at the Indonesian Health Centers, consisting of direct evidence; reliability; responsiveness; guarantee; and empathy have been successfully carried out by many puskesmas in Indonesia, such as Sangura Health Center, Ibun Health Center, Mangasa Health Center, and Sumedang District Health Center and (2) Plans to increase the quality of Health Center health services in Indonesia in terms of health human resources, namely by taking training and education, using Health workers in a fair, coordinated and balanced manner as well as delivery of benefits, preparation of resources and support services.

Keywords: *Quality of Service; Assessment; Public Health; Puskesmas.*

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A. INTRODUCTION

Article 28H paragraph 1 of the 1945 Constitution explains that every individual has the right to live a prosperous life outwardly and mentally, have a place to live, get a healthy and safe life zone and get health services. Article 34 paragraph (3) explains that the state has the responsibility to provide health services to appropriate public institutions. As the article contains, it can be seen that the state has a responsibility to the health of citizens (Anton et al., 2021).

The community expects the management of health services to be carried out fairly, safely, efficiently, safely, comprehensively, and not intolerantly, to protect the rights of patients as beneficiaries of health services (Irmawati, 2017). Health development in the country is to obtain the right to a healthy life for each population to achieve the highest level of public health. (Raharjo, 2017)

The overall quality of health workers (names) is one of the factors that have influenced the quality of health services provided by Puskesmas. Good health care is due to the guaranteed compensation they get. Efforts to improve the quality of health services are the most important stage to increase the competitive ability of Indonesian companies in the health sector. This is not an easy thing because quality improvement is not limited to hospitals but also affects all levels of health services including Auxiliary Puskesmas and also Puskesmas in private and government agencies (Asmi & Haris, 2020a).

The quality of health services can fulfill all customer wishes by employing a continuous improvement process (Toliaso et al., 2018a). Puskesmas is a functional unit that functions as a health development center, which has a role in encouraging health aspects and is the first stage of a health center that coordinates its activities comprehensively, and sustainably in the communities living in it in each region (Asmi & Haris, 2020a)

In Permenkes No.43 of 2019 concerning Puskesmas, it is stated that Puskesmas is a health service center that carries out public health and personal health efforts in the first stage, prioritizing prevention and promotion. to achieve a high level of public health in its work area. Therefore, Puskesmas must provide good service and provide satisfaction for patients as well as service standards and can reach all levels of society. (Opianti et al., 2022a)

In general, health services provided by Puskesmas include treatment, prevention (prevention), promotion (improving health), and rehabilitation (restoring health) (Novira et al., 2020a). To provide effective health services, it must be supported by a good service system. But in achieving this, there are several obstacles in its implementation. Obstacles and problems that arise will make the given process ineffective (Raharjo, 2017)

For patients, the length of treatment time is fatal especially if plus medical staff are not available during working hours. In addition, there are many complaints from the public about the queue service and patient registration process because of the long waiting time so the community as patients feel that the performance of officers from the Puskesmas is poor (Martatilova, 2020a). In addition, there is still poor behavior of medical personnel in providing services to patients receiving medical care, such as not giving answers to questions asked by patients or providing answers to patient questions but with harsh answers so that patients do not understand the information submitted by officers. The behavior of the health workers has no explanation in Permen-PAN No.63 of 2003.regarding general guidelines for the implementation of public services, which explains that there must be discipline in providing services. Respectful and respectful, friendly and helpful and sincere. (Ramadhan et al., 2021a)

Parasuraman,et. al. explained that there are 5 dimensions of service quality, especially in the field of services: Tangibles (appearance and physical), Reliability (reliability, accuracy of performance), Responsiveness (willingness to help and speed), Assurance (politeness, competence, credibility, security), and Empathy (ease of access, understanding to customers, good communication). Service quality is a function of the disparity between desire and impression with a special quality dimension.(Novira et al., 2020a)

However, there are several service problems at the Puskesmas, namely: First, the lack of services at the Puskesmas because information about the time of first providing services, the time to complete the service, technical and organizational requirements, as well as wages, administrative and medical expenses is not notified to the public. Second, the lack of response from Puskesmas officers in serving patients

because Puskesmas officers are usually often late and cannot provide services quickly so a long time in services that include registration, examination, and drug collection (Irmawati, 2017).

Third, inadequate human resources are manifested by a lack of nutritionists, general practitioners, and health analysts so that the quantity of medical personnel is not commensurate with the quantity of population or quantity of patients. Fourth, until now the Puskesmas has not been interested in the activities of the Puskesmas with its residents, both in the form of community meetings and discussion forums to meet the needs of the community. Fifth, medical facilities and equipment to examine patients are insufficient, mobile Puskesmas equipment services are inefficient, and the number of seats in the waiting room, patients are still insufficient and in some Puskesmas there is no inpatient service where they will be sent to the hospital (Irmawati, 2017).

The impact of patient safety factors varies, one of which is a decrease in patient satisfaction that affects the quality of health services. Security services can increase patient satisfaction so that it has a positive impact on the image of a health facility (Ulumiyah, 2018a). Many Puskesmas service management systems have not been developed (Limato et al., 2019). In addition, the quality of health workers in Puskesmas is still relatively low even though in the JKN era, Puskesmas was one of the first health facilities to provide basic health services and had a role as a gatekeeper (Arsyad et al., 2022).

The purpose of this study is to examine and describe: (1) the quality of health service facilities in Indonesia and (2) strategies to improve the quality of health service facilities in Indonesia.

B. METHOD

The method in this study is a literature review, which is a comprehensive set of research implemented on a particular topic to show readers what has been understood related to the topic and what is not understood in conducting a basic search for research implementation or for other research concepts (Kartini, 2018). Various data used in this study are from the results of research published in national and international online journals with search engines: Google Scholar, Pubmed, PMC, and Proquest with the keyword "Analysis of Health Service Quality and Puskesmas Service Quality Improvement Strategy in Indonesia"

The criteria for participation in this journal are: (1) Period: Year published in the last five years, from 2018 to 2023, (2) Language: Indonesian and English, (3) Subject: People receiving treatment from Puskesmas Indonesia, (4) Type of article: Original articles are not only abstracts or books and full-text articles, and (5) The subject matter: (a) Quality of medical services in health institutions in Indonesia and (b) Plans to improve the quality of services in the health industry in Indonesia. Meanwhile, related to exclusion criteria are all articles that do not meet the inclusion criteria. The authors conducted this study during the period June 23 to June 30, 2023.

The journal search results obtained from the database are: (1) Google Scholar used keywords to obtain 132 articles and analyzed against inclusion criteria so that 22 articles were obtained, (2) Pubmed used search keywords to obtain 5 articles and evaluated based on inclusion criteria. so that 1 article is reviewed, (3) PMC uses keywords and 8 articles are obtained and as inclusion criteria are obtained as many as 1 articles is reviewed, and (4) Proquest uses keywords so that 8 articles are obtained and as inclusion criteria are made so that 1 article is obtained. Discussed.

At the topic selection stage, researchers select documents obtained from various electronic search engines using predetermined search keywords and select appropriate exclusion and inclusion criteria. As the criteria and relevance of the literature were obtained 153 articles, then 7 articles were removed because the literature was not fully accessible and paid, then 79 articles were reviewed due to lack of title suitability, and the remaining 67 articles were examined. No less than 45 articles have been carried out but not on Puskesmas in Indonesia. 22 items can be used in this quest. In choosing the source of the documents collected is with PRISMA Flowchart

The next phase is to organize the data by collecting things like keywords and themes. Then the results of the analysis according to the importance of inclusion criteria are presented in the table. The last phase is to categorize and present the results by summarizing the specified articles and presenting the results and discussion. Data analysis-related processes include data collection; data reduction; presentation of data; and concluding.

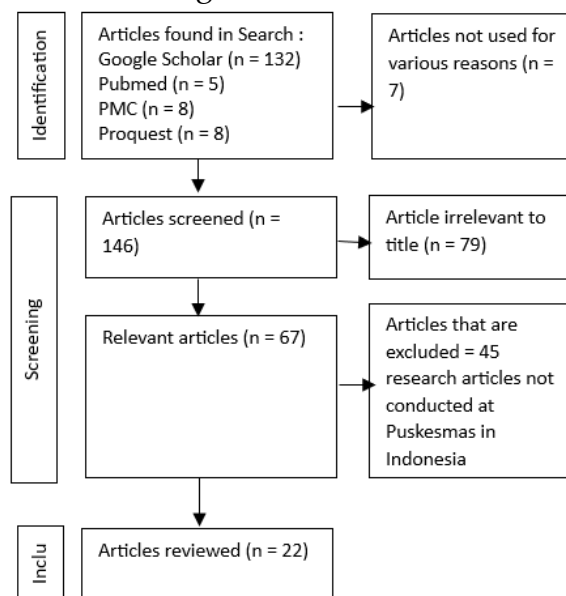


Figure 1. PRISMA FlowChart

C. RESULT AND DISCUSSION

The article search results resulted in 22 articles published in journals by applying the Google Scholar, Pubmed, PMC, and Proquest search engines with the topic "Analysis of the quality of health services and strategies for improving the quality of Puskesmas services in Indonesia" and with inclusion criteria, namely: (1) Timeline:

Published year of the last 5 years from 2018 to 2023, (2) Language: Indonesian and English, (3) Subject: People seeking treatment at Puskesmas Indonesia, (4) Type of article: Original articles are not only books and written or detailed reports, and (5) Article content topics: (a) Quality of medical services at health institutions in Indonesia and (b) Plans to improve service quality in the health industry in Indonesia. Meanwhile, regarding the exclusion criteria, namely, all articles or research that do not meet the inclusion criteria. The author searched during June 23-30, 2023. The following is a compilation of articles from 22 sources that focus on (1) Quality of health services in Puskesmas in Indonesia and (2) Plan to improve service quality in Puskesmas in Indonesia:

Table 2. Literature Review Results

1	Article	Selvia Ichwani Hidayati (2018), Jurnal of Indonesian Legal Studies, 3(1), 29-46
	Journal Source	https://journal.unnes.ac.id/sju/index.php/jils
	Heading	The Implementation of Minister of Health Regulation on Performance Improvement in Individual and Community Health Service (Study of Puskesmas Bawen, Central Java)
	Population and Sample/ Informant	Employees of Puskesmas Bawen Central Java
	Location	Puskesmas Bawen Central Java
	Findings	Minister of Health Regulation No.71 of 2013 at the Bawen Health Center has been carried out as an indicator of implementation, but there are still problems to be done. and externally, namely delays in administering drugs that interfere with childbirth services. In addition, the quality and clarity of providing information need to be improved
2	Article	Limato, Tumbelaka, Ahmed, Nasir, Syafruddin, & Ormel (2019), PLoSONE,14(12)
	Journal Source	https://doi.org/10.1371/journal.pone.0226804
	Heading	What Factors Do Make Quality Improvement Work in Primary Health Care? Experiences of Maternal Health Quality Improvement Teams in Three Puskesmas in Indonesia
	Population and Sample/ Informant	Employees at 3 Puskesmas in Cianjur Regency
	Location	3 Puskesmas in Cianjur Regency
	Findings	Key factors contributing to the quality improvement process: Leadership, including awareness and leadership practices for quality improvement processes and decision-making as well as budget allocation for quality improvement; A culture where excellence is added to accountability; and Puskesmas continued the certification process that increased Q1 value for the organization
3	Article	Arsyad, Hamsyah, Qalby, Qanitha, Westerink, Cramer, Visseren, Doevendans, & Ansariadi (2022), BMC Health Services Research
	Journal Source	https://doi.org/10.1186/s12913-022-08499-w
	Heading	The Readiness of Public Primary Health Care (PUSKESMAS) for Cardiovascular Services in Makassar City, Indonesia
	Population and Sample/ Informant	Puskesmas Employees in Makassar City

	Location	Puskesmas in Makassar City
	Findings	The adequacy of the readiness of Puskesmas to provide quality heart disease health services in Makassar is still good. Limited diagnostic testing capacity and the availability of essential drugs for heart disease are the most important drawbacks. To improve the readiness of cardiovascular health services, the government will fill the gap by strengthening poor areas of Puskesmas by continuously monitoring the availability of adequate drugs and diagnostic tools, as well as training regular health workers in CVD and CVD management. risk at the individual and community levels. In addition, it is important to expand cardiovascular health services and appropriate rehabilitation services in Indonesian public health services
4	Article	Wiati Kartini (2018), Jurnal Publik Kartini,1 (2),146-156
	Journal Source	www.journal.uniga.ac.id
	Heading	The Effect of Policy Implementation on Puskesmas and Infrastructure Support on Health Service Management to Increase Work Productivity
	Population and Sample/ Informant	88 employees in 30 BLUD Health Centers in Garut Regency
	Location	30 BLUD Health Centers in Garut Regency
	Findings	The implementation of policies in the field of supporting health facilities and infrastructure has a significant and positive impact on health service arrangements to enable increased productivity of Puskesmas officers in Garut. The implementation of policies and public health supporting facilities and infrastructure can affect the performance of staff duties, and productivity in the health industry.
5	Article	Surasdiman, Gunawan, & Kadir (2019), YUME: Journal of Management, 2(1)
	Journal Source	https://journal.stieamkop.ac.id/index.php/yume
	Heading	Analysis of the Effect of Service Quality, Facilities, and Knowledge on Patient Satisfaction at Puskesmas Batu-Batu Soppeng Regency
	Population and Sample/ Informant	The population of all outpatients and inpatients at the Batu-Batu Health Center with a quantity of 2,329 patients in January 2018. The sample used the Slovin formula with a quantity of 341 patients
	Location	Batu-Batu Health Center
	Findings	There is an influence of quality, equipment, and knowledge on patient satisfaction at Puskesmas Batu Batu
6	Article	Andhina Martatilova (2020), DERIVATIF: Jurnal Manajemen, 14(1)(Martatilova, 2020b)
	Journal Source	https://fe.ummetro.ac.id/ejournal/index.php/JM/article/view/441/329%3B
	Heading	The Effect of Medical and Health Service Performance on the Public Service Reputation System at Metro Health Centers
	Population and Sample/ Informant	Metro Health Center employs as many as 90 people
	Location	Metro Health Center
	Findings	There is an influence on the performance of medical and health personnel in the public domain system at Puskesmas Metro.

7	Article	A.Syamsinar Asmi & Abdul Haris (2020), Jurnal Ilmiah Kesehatan Sandi Husada, 9(2), 953-959
	Journal Source	https://akper-sandikarsa.e-journal.id/IKSH
	Heading	Analysis of Health Workers' Performance on the Quality of Health Services to the Community
	Population and Sample/ Informant	The population is all staff of Puskesmas X Makassar and the sample is 49 health workers through total sampling
	Location	Puskesmas X Makassar City
	Findings	Education and resources are not related to service quality while work experience is related to service quality
8	Article,	Paiman Raharjo (2018), SPEKTRUM, 14(1)
	SumberJurnal.	https://journal.moestopo.ac.id/index.php/spektrum/article/view/747/413
	Heading	Analysis of the Health Service System at the Outpatient Unit of the Community Health Center (Puskesmas) Kembangan District, West Jakarta
	Population and Sample/ Informant	Puskesmas Employee of Kembangan District, West Jakarta
	Location	Puskesmas Kembangan District, West Jakarta
	Findings	Patients are assured of information about technical, administrative, and service requirements, as well as detailed fees and methods of depositing. However, the manual queue number withdrawal scheme cannot be implemented. The way of communication and behavior of medical staff at Puskesmas Kembangan is very good but as a service provider. Continuous communication and behavior are important to understand and meet the needs of patients, so as not just to provide services but to promote themselves as civil servants who create a better health care system. Completeness, comfort, and maintenance services can be an added value regarding health services provided at the Kembangan Health Center
9	Article	Domingos Lino Ximines Belo & Christine Diah Wahyuningsih (2021), Public Service and Governance Journal, 2(2)
	Journal Source	https://jurnal.untagsmg.ac.id/index.php/psgi/article/view/2273
	Heading	Analysis of Health Service Quality During the Covid-19 Pandemic (Case Study at Puskesmas Ngesrep Semarang City)
	Population and Sample/ Informant	Employees of Puskesmas Ngesrep Semarang
	Location	Puskesmas Ngesrep Semarang
	Findings	The quality of service at Puskesmas Ngesrep during the pandemic is available with good technical skills for health workers, the ability and ease of access to the Puskesmas, good equipment, good information provided, speed of work, and good relations between staff. Innovations continue to be carried out, including Puskesmas to increase the number of health workers available based on service needs. The existence of a computerized system makes patients do not have to wait a long time to get medical services
10	Article.	Sri Irmawati, H.Sultan M, & Nurhannis (2018), e-Jurnal Katalogis, 5(1), 188-197

	SumberJurnal	https://www.neliti.com/id/publications/157122/kualitas-pelayanan-kesehatan-di-puskesmas-sangurara-kecamatan-tatanga-kota-palu
	Heading	Quality of Health Services at Sangurara Health Center, Tatanga District, Palu City
	Population and Sample/ Informant	4 officers and 16 people from the community who use Sangurara Health Center services
	Location	Sangurara Health Center
	Findings	(1) In general. The quality of service at Puskesmas Sangura Tatanga Regency has not met the expectations of the community and in the future still needs to be improved. The quality of administrative services that meet community expectations is expressed in the following areas: (a) Reliability, medical devices can provide health services pledged to the community without discrimination and as quality parameters expected by the community, (b) Responsiveness, medical devices are responsive in understanding demand. and the needs of the communities they serve and respond to those needs and desires, and (c) compassion, in which health professionals provide personal care or affection to the communities served, through the creation of an atmosphere of harmony and understanding between those who provide services and those who provide services, (2) The quality of services carried out by assessments is not the same as public expectations can be found in the areas of (a) Insurance, for which medical institutions cannot adequately insure the public. for the results of services at the Sangura Puskesmas provided to the community to obtain quality agreements and (b) Tangible evidence, while those with physical characteristics at the Sangura Health Center are unable to adequately support the implementation of health services provided by the local government
11	Article	Sarita Opianti, Razaki Persada, & Djoko Raharjo (2022), Syntax Literate: Jurnal Ilmiah Indonesia, 7(12)
	Journal Source	https://dx.doi.org/10.36418/syntax-literate.v7i12.11029
	Heading	Analysis of Health Service Quality During the Covid-19 Pandemic at Ranai Health Center, Natuna Regency
	Population and Sample/ Informant	10 patients who visited Ranai Health Center during the Pandemic
	Location	Ranai Health Center
	Findings	The quality of medical services at Puskesmas Ranai has been good, but of the 5 parts implemented to determine the quality of service, 2 parts have not gone well the response and physical appearance. Some aspects that influence the quality of services at Puskesmas Ranai are human resources, equipment, benefits, service waiting times, and service aggregates. The effect of the pandemic on services, namely medical, psychosocial services, was hampered, and the number of visits decreased. Efforts to improve health services, increase resources, and increase prevention efforts
12	Article	A. Radito (2018), JurnalIlmuManajemen,11(2)(Radito, 2018)
	Journal Source	https://journal.uny.ac.id/index.php/jim/article/view/11753

	Heading	Analysis of the Effect of Service Quality and Health Facilities on Puskesmas Patient Satisfaction
	Population and Sample/ Informant	The population of all patients of Mantrijeron Health Center. The number of samples was 150 people who had or were undergoing treatment at the Mantrijeron Health Center in the last 1 year
	Location	Mantrijeron Health Center
	Findings	The quality of services and facilities has an impact on patient satisfaction with health
13	Article	Liliana Lokan, Erwin G. Kristanto, Jimmy Posangi, & Aaltje E. Manampiring (2023), PREPOTIF :Jurnal Kesehatan Masyarakat, 7(1)
	Journal Source	https://doi.org/10.31004/prepotif.v7i1.11875
	Heading	Analysis of Service Quality Improvement Strategy at Wairoro Health Center, Central Halmahera Regency in North Maluku Province Through Health Human Resources (SDMK) Approach
	Population and Sample/ Informant	10 people including: Head of Halmahera Health Office, Regent of Central Halmahera, Head and staff of Puskesmas Wairoro
	Location	Wairoro Health Center
	Findings	The strategy to improve the quality of services at the Wairoro Health Center and the HR system is through the implementation of training to improve the skills of health workers at HRK at the Wairoro Health Center. improving the skills and knowledge of health workers in HRK to improve the current health service system. Many aspects hinder efforts to improve service quality at the Wairoro Health Center: Access to human resources and health workers is not feasible so the services provided are not optimal; Inadequate health facilities and resources, such as lack of medicines, medical devices, and BMHP; Budget for the implementation of training for health workers and human resources and health workers at the Wairoro Health Center
14	Article	Cindy Anggraeny (2018), Kebijakan dan Manajemen Publik, 1(1) (Anggraeny, 2018)
	Journal Source	https://journal.unair.ac.id/filerPDF/11%20Cindy_KMP%20V1%20N1%20Jan-April%202013.pdf
	Heading	Health Service Innovation in Improving Service Quality at Jagir Health Center Surabaya City
	Population and Sample/ Informant	Employees at Puskesmas Jagir Kota Surabaya
	Location	Jagir Health Center
	Findings	The implementation of service innovation at the Jagir Health Center is achieved with the purpose of providing Jagir Health Center services. The latest innovations brought by Puskesmas Jagir are the latest knowledge which includes various medical devices, new service innovations, and process innovations that include: one-stop payment implementation services, registration implementation services in special queue boxes for sensitive people, hotline services, and helpers
15	Article	Kholifatun Islami, Septo Pawelas Arso, & Daru Lestantyo (2018), Jurnal Kesehatan Masyarakat, 6(4)
	Journal Source	https://doi.org/10.14710/jkm.v7i1.22851

	Heading	Analysis of the Implementation of the Patient Safety Program at Puskesmas Mangkang, Semarang City
	Population and Sample/ Informant	1 staff in each clinical unit: dental, MCH, MTBS, pharmacy, simple laboratory which includes: PMKP team member, Quality Team Leader, and Head of Mangkang Health Center
	Location	Puskesmas Mangkang, Semarang City
	Findings	(1) There is no specific patient safety initiator for each health office at Puskesmas Mangkang. There has been no special training related to patient safety for Puskesmas officers, only in the form of awareness, (2) Mangkang Puskesmas members do not have clear roles, standards and duties, (3) Clinical and Patient Quality Improvement Safety Group (PMKP) has a limited role in the Health industry group because all complaints are made to the health industry group, (4) There are no certain funds spent to improve patient safety, (5) There is no specific document with guidelines for the technical implementation of patient safety implementation, especially seven patient safety measures, (6) Efforts by Puskesmas Mangkang to raise awareness of patient safety benefits include requirements for all Puskesmas staff to report incidents and implement first-hand safety measures when performing patient safety duties, (7) Efforts to build commitment and focus on patient safety, among others, with the visit of the Head of Puskesmas to each department to check the performance of officers, but this has not always been done and the PMKP team has been formed, but the main role and responsibility of staff. The PMKP team itself has not been identified because all reports related to patient safety are currently handled by the team at Puskesmas Mangkang, (8) Puskesmas Mangkang does not have a patient safety initiator for each health office at Puskesmas, (9) Puskesmas Mangkang does not have a clear risk management role, (10) Safety reporting does not use patient safety incident report book and formular of patient safety incident reports as formatted from Permenkes No.11 of 2017, (11) Reporting patient safety incidents is only an internal report and has never implemented patient safety incident reporting to the National Committee for Patient Safety, (12) Puskesmas Mangkang does not have rules/policies/instructions for transparent communication with patients and their families about incidents, (13) Mangkang Health Center staff communicate well about the education provided by staff and the medical care their staff will provide, (14) Learning and experience were gained by participating in Puskesmas Mangkang through patient safety discussions in care staff meetings after patient safety. What happened, (15) Puskesmas Mangkang did not conduct RCA because RCA worked through the work of Puskesmas without involving other personnel, (16) Patient safety does not depend on the implementation of patient safety. According to Permenkes No.11 of 2017
16	Article	Fhirman Ramadhan, Didin Muhafidin, & Darto Miradhia (2021), JANE:Jurnal Administrasi,12(2)(Ramadhan et al., 2021b)
	Journal Source	https://doi.org/10.24198./jane.v12i2.28684 .
	Heading	Quality of Health Services at Puskesmas Ibum Kabupaten Bandung

	Population and Sample/ Informant	The total population of patients per day in a year is 134 people with a sample of 58 people
	Location	The total population of patients per day in a year is 134 people with a sample of 58 people
	Findings	The quality of service at Puskesmas Ibun has been effective. The friendliness, respect, and quality of service of puskesmas officers can make improvements in terms of public confidence in the Phc and can promise quality and standard services.
17	Article	Nurul Hidayatul Ulumiyah (2018), Jurnal Administrasi Kesehatan Indonesia, 6(2) (Ulumiyah, 2018b)
	Journal Source	Doi.:10.20473./jaki.v6i2.2018.149-155.
	Heading	Improving the Quality of Health Services by Implementing Patient Safety Measures in Puskesmas
	Population and Sample/ Informant	Tim Mutu dan Keselamatan Pasien Puskesmas X Kota Surabaya
	Location	Puskesmas X Surabaya City
	Findings	The implementation of the patient safety system at the Surabaya City Health Center still has gap problems related to the completion of patient safety standards in the puskesmas accreditation application, which occurs in 2 out of 4 patient safety standards. So it must be improved to achieve the goals that have been set to improve the quality of health services
18	Article	Lisna Maulina, T.Abdul Madjid, & Indira Chotimah (2019), PROMOTOR: Jurnal Mahasiswa Kesehatan Masyarakat, 2(2) (Maulina et al., 2019)
	Journal Source	.https://ejournal.uika-bogor.ac.id/index.php/PROMOTOR/article/view/1798.
	Heading	The Relationship between Health Service Quality and Patient Satisfaction of BPJS Participants in the Inpatient Unit of Cibungbulang Health Center, Bogor Regency in 2018
	Populasi dan Sampel/ Information	The population of 1,864 patients and a sample of 50 patients in the Inpatient Installation of Cibung-bulang Health Center
	Location	Cibungbulang Health Center, Bogor Regency
	Findings	Assurance, reliability, and tangible factors have nothing to do with patient satisfaction at Puskesmas Cibungbulang. On the other hand, empathy and responsiveness are related to patient satisfaction at the Cibungbulang Health Center
19	Article	Haslinah Ahmad, Adi Antoni, Mastiur Napitupulu, & Nayodi Permayasa (2021), Jurnal Kesehatan Ilmiah Indonesia, 6(2) (Ahmad et al., 2021)
	Journal Source	.https://repository.unar.ac.id/jspui/handle/123456789/4332.
	Heading	The Relationship of Health Service Quality to Outpatient Satisfaction Level at Mangasa Health Center Makassar City
	Population and Sample/ Informant	Outpatients available June-July 2021
	Location	Mangasa Health Center Makassar City
	Findings	There is a relationship between reliability, tangibility, assurance, responsiveness and empathy on outpatient satisfaction

20	Article	Cynthia Sisilia Toliaso, Chreisy K.F.Mandagi, & Febi K. Kolibu (2018), JurnalKESMAS, 7(4)(Toliaso et al., 2018b)
	Journal Source	. https://ejournal.unsrat.ac.id/index.php/kesmas/article/view/23156 .
	Heading	The Relationship between Health Service Quality and Patient Satisfaction at Puskesmas Bahu Kota Manado
	Population and Sample/ Informant	Samples of 258 patients who have met the inclusion criteria at the Puskesmas Bahu Kota Manado
	Location	Puskesmas Bahu
	Findings	There is a correlation between service quality and patient satisfaction at Puskesmas Bahu
21	Article	Alikha Novira, Ramdani Priatna, & Hafid Aditya Pradesa (2020), JEMAP:JurnalEkonomi, Manajemen,Akuntansi,danPerpajakan,3(2)(Novira et al., 2020a)
	Journal Source	. https://journal.unika.ac.id .
	Heading	The Effect of Service Quality Dimensions on User Satisfaction of Puskesmas Health Services in Sumedang Regency in 2019
	Population and Sample/ Informant	The population is all patients at the Puskesmas in Sumedang which includes the South Sumedang Health Center and Kotakaler. Samples of 77 patients
	Location	Puskesmas in Sumedang Regency
	Findings	All aspects of the quality of medical services at the Sumedang Health Center in the opinion of patients are at a good level, and the assurance aspect is considered the highest but the low-level aspect is physical evidence. In general, patients are satisfied with the services delivered by the Puskesmas in Sumedang, and the value is perceived as high. Friendliness and empathy were found to have no significant effect on patient satisfaction levels. Meanwhile, the acceptance aspect of health care quality was found to play an important role in patient satisfaction.
22	Article	Mujiarto, Djoko Susanto, & Rizki Yudha Bramantyo (2019), Mediasosian: Jurnal Ilmu Sosial dan Ilm Administrasi Negara, 3(1)
	Journal Source	https://doi.org/10.30737/mediasosian.v3i1.572
	Heading	Health Service Strategy for Patient Satisfaction at UPT Puskesmas Pandean, Dongko District, Trenggalek Regency
	Population and Sample/ Informant	Staff, nurses, doctors at UPT Puskesmas Pandean and patients who receive direct services at Puskesmas
	Location	Pandean Health Center
	Findings	The health service system in order to achieve patient satisfaction at UPT Puskesmas Pandean by applying the assumption of a positive image, capability, patient satisfaction, service quality control as in Permenkes No. 1 of 2019. Regarding health services, patients have been satisfied because health workers who cover the health services and administration, nurses, doctors have implemented their main responsibilities and duties well

1. Quality of health services at Puskesmas, Indonesia

a. Tangibles

According to Zeithaml. Berry, & Parasuraman, tangibles (direct evidence) cover physical facilities, equipment, personnel, and sarpras communications [26]. At

Puskesmas Sangura Tatanga District, direct evidence in terms of health services can be seen from the facilities in the Puskesmas which include the cleanliness and comfort of the waiting room, the quantity of staff, and the neatness or physical performance of staff who provide services to the community. The quality of health services at Sangura Health Center can be seen from the physical evidence that has not been implemented properly as expected by the community. Physical evidence has not been able to support the implementation of health services provided by health workers to the community (Irmawati, 2017).

At Puskesmas Ranai physical facilities are not feasible which include: old and outdated buildings, space to wait and places to park vehicles and support areas are still limited. During the Covid-19 outbreak affecting the Ranai Health Center facilities, the existence of policies to implement health protocols caused an inadequate number of seats, so patients did not feel comfortable because they did not have seats. Patients are not satisfied due to the lack of quantity of seats along with the increasing number of patients visiting the Puskesmas. Based on the physical appearance of health workers, they do not wear full and neat uniforms when providing services to patients. Such poor physical appearance and hygiene can reduce patient confidence in staff. Where portraying the image of employees who do not function properly, and the employee's lack of attention to their image influences the patient's feelings of dissatisfaction with the employee's professional identity. (Opianti et al., 2022b)

At Puskesmas Ibun, service quality implements the SERVQUAL concept (Ramadhan et al., 2021b). Related to visible or physical evidence of health service quality, some of the indicators studied include service complaint facilities, comfortable waiting rooms, building capacity, and public facilities such as parking lots and toilets. The Ibun Puskesmas service center can support work and capacity in a full room and provide complete public facilities. The existence of unused buildings is not a big problem for the community, so it does not affect the community's assessment to assess the quality of services (Ramadhan et al., 2021a).

In Puskesmas Cibungbulang Bogor Regency there is no real relationship of patient satisfaction caused by physical resources such as patient rooms and equipment applied. The Puskesmas room is not well arranged, causing problems for patients, besides that the equipment is insufficient, so patients use other medical facilities that have sufficient equipment.[24].

At Puskesmas Mangasa Kota Makassar, many aspects of direct evidence are visible: good equipment and service facilities, good looking and professional staff. There is a significant relationship between direct evidence and patient satisfaction. Patients are satisfied with the physical facilities, equipment, and professional performance of the medical staff in the outpatient facility. But in the appearance of a comfortable bedroom bed, many do not feel satisfied. In addition, there is a problem with patient satisfaction, especially in the waiting room comfort index (Anton et al., 2021).

At Puskesmas Bahu Kota Manado, assessment of the quality dimension of health services is a way to analyze health service quality problems that are being experienced

by the community and find solutions needed to overcome them. In the event of patient dissatisfaction, an analysis is carried out on what aspects of health service quality are not met, the right way to solve problems will be determined, then an analysis will be applied to the health service standards used. The crucial function of each system is to ensure the quality of service provided. With the increase in attention to improving the quality of service, knowledge of healthcare assurance methods has become increasingly important. Regarding the physical evidence section, there are still patients who complain about the inability of the Puskesmas building such as the quantity of seats or the condition of the waiting room at the Bahu Health Center which is still not under the quantity of daily patients. In addition to the many complaints submitted by patients, there are many positive responses to the Puskesmas Bahu, such as clean and well-maintained facilities, as well as the appearance of medical personnel, nurses, doctors, and administrative personnel who look neat and maintain cleanliness. Based on the positive response, most patients feel comfortable at Puskesmas Bahu Kota Manado (Toliaso et al., 2018a)

In the Puskesmas in Sumedang Regency, the direct evidence section of health services makes Puskesmas officers more visible: The health facilities and equipment are new and efficient; Clean and comfortable place with good directional symbols; Puskesmas staff are professional and attractive-looking; There are letters about health services; and confidentiality for patients during treatment (Novira et al., 2020b)

b. Reliability

According to Zeithmal, Berry, and Parasuraman, reliability is the ability to provide pledged service quickly and satisfactorily (Islami et al., 2018). At Puskesmas Sangura, trust in the status of health services is the ability of staff at Puskesmas Sangura to provide health services that are allowed to the community fairly and legally. Good quality standards that are endorsed and expected by the community. This aspect can be observed through several indicators: the readiness and honesty of health staff in providing services, the availability of health staff to provide fast services to each community provided with medical services, the accuracy of the medical system in providing services to each community and the need for services at the Sangura Health Center, the process of service socialization and the extent of the process and type of services requested by the community. The quality of service at the Sangura Health Center, in terms of reliability, has been carried out as expected by the community, namely, health workers can provide health services that are pledged to the community correctly and to quality standards that have been approved and expected by the community (Irmawati, 2017).

At Puskesmas Ranai, the reliability of health workers works as a principle based on the main job as well as their respective jobs. To provide quality services, service providers are required to have standard operating procedures for those services. The service process is the path that customers need to follow to obtain the desired service. During the Covid-19 outbreak, Puskesmas Ngesrep has provided services for each of its parts. Puskesmas Ngesrep has medical personnel with good technical skills so the medical personnel who treat patients are qualified and good (Opianti et al., 2022a).

In Puskesmas Ibun, reliability shows that officers at Puskesmas Ibun work according to standards with working hours difficult to understand, it is not a conclusion that in general employees are not able to provide information correctly. In general, clear information, work procedures, and work standards have been well established, so the quality of service at Puskesmas Ibun can be said to be good (Ramadhan et al., 2021a). In Puskesmas Cibungbulang there is no correlation between reliability and patient satisfaction. Due to the ability of officers to provide commensurate services correctly and reliably, sympathetic attitudes with high truth to patients can be measured through correct service behavior by medical personnel, providing friendly and good services and friendly in carrying out care and treatment, providing services in a non-discriminatory and appropriate manner as established procedures[24]

At Puskesmas Mangasa Kota Makassar, there is a significant correlation between reliability and patient satisfaction. The majority of patients are satisfied with the reliability of the medical staff. Judging from the indicators that show: timely and accurate patient admission process (84.5%), the majority are satisfied with accurate and fast service, examination, treatment, treatment (77.6%), which shows fast and correct service, diagnosis, treatment and treatment, the majority are satisfied with the service schedule, accuracy of time, treatment, examination, treatment (81.0%), reliability of medical personnel regarding responsibility for all pledged most of them are satisfied (72, 4%). Summarized in reliability, patients are satisfied with 2 indicators, namely: examination, service, treatment, treatment that is accurate and within a short time, as well as the accuracy of service schedule hours, treatment, examination, and treatment. Patients are satisfied with two other indicators the process of patient acceptance and the reliability of medical personnel who are responsible for everything pledged (Anton et al., 2021).

At Puskesmas Bahu Kota Manado, reliability is very satisfying for patients because many patients who visit Puskesmas Bahu to obtain treatment are satisfied with the services provided. Many patients state that every time they get services, medical officers or nurses always share exposure about ongoing treatment, including things that must be followed during patient treatment, giving action by nurses as well as diseases suffered by patients. But besides that, some patients explain that they do not immediately get services once they arrive at the Puskesmas. It seems that Puskesmas health workers are not in a short and convoluted time while providing treatment. Because during the treatment the medical staff chatted with his friends in the room so often, the patient did not feel comfortable in the room(Toliaso et al., 2018a).

At the Sumedang Health Center, regarding reliability, services are provided within a predetermined time. Service work well done: Professionalism and competence demonstrated by employees; There are no mistakes in quickly retrieving medical service-related documents; and Consistent health care costs(Novira et al., 2020b)

2. Puskesmas Service Quality Improvement Strategy in Indonesia

a. Efforts to Improve Quality with the HR System

New service/product innovations implemented by the Jagir Health Center include medical device innovations and new service innovations. Hotline service for Puskesmas Jagir service users. Information can be conveyed about service procedures at the Jagir Health Center with a service hotline number installed in every corner of the room and with the existence of a hotline service, complaints and suggestions or criticisms can be responded to and distributed in a short time (Anggraeny, 2018)

The background of Jagir Health Center is to carry out innovation, namely for the satisfaction of its service users. Innovation has a primary characteristic that is novelty for an organization. The characteristic of novelty is the hallmark of innovation to replace outdated ways, knowledge, technology that is no longer effective for handling surrounding problems in the Puskesmas area, including the Jagir Health Center. For Rogers, innovation has an essential characteristic. These characteristics are suitability, relative advantage, possibility of trial, complexity, and ease (Ulumiyah, 2018b).

b. Improving the Quality of Health Services by Implementing Patient Safety Measures in Phc

Quality is all particularity and representation of services or goods that demonstrate their ability to provide satisfaction to customer needs. So it can be said that quality is something that is applied to assure the expected goals and quality must always accompany the development of professional knowledge today to provide satisfaction to customers (Maulina et al., 2019).

The quality of health services is the level of perfection of health services held as well as the standard of service used. The quality of health services has a multi-dimensional nature because the quality of health services can be measured from three aspects: service users, service implementers, and recipients of quality funds. Under Permenkes No.46 of 2015, health development held by Puskesmas has a vision, namely the achievement of Healthy Districts to realize a Healthy Indonesia. To achieve Healthy Districts, specific health services, Puskesmas must have the capability to provide health services that have quality, safe, and can provide answers to the needs of the community (Ahmad et al., 2021). Improving quality is a process to measure the level of perfection of health services compared to principles or standards with systemized and continuous improvement handling to achieve maximum or excellent service quality as well as science and technology standards and available HR capabilities (Maulina et al., 2019).

There are many management systems implemented to improve service quality as needed and capabilities at Puskesmas X Surabaya City. One of the management systems applied to improve service quality is risk management. This is commensurate with Permenkes No.11 of 2017 concerning Patient Safety that patient safety has the aim of improving the quality or quality of health services with the implementation of risk management in all areas of health services in these health services (Ulumiyah, 2018a).

The standard implementation of patient safety efforts in Puskesmas is planning, monitoring, evaluating patient safety efforts to be the responsibility of staff working in clinical services. At Puskesmas X Surabaya City, planning, monitoring, and evaluation

of patient safety efforts have been implemented as well as the policies and guidelines used. There are planning documents, monitoring results, and evaluation of the implementation of patient safety efforts at Puskesmas X Surabaya City. This shows that the patient safety group has carried out its duties in the implementation of patient safety efforts. The implementation of patient safety efforts cannot be carried out only by patient safety groups or medical officers with related patients and technology that provides support, but must also include all aspects of the Puskesmas, namely in the form of good management support and cooperation between officers.

Good group work is necessary to create effective relationships to achieve organizational goals. Patient safety efforts must be well understood by all stakeholders involved so that the implementation of patient safety efforts can take place properly and achieve the expected goals. One of the objectives of patient safety efforts stated in the Terms of Reference document of Puskesmas X Surabaya City is to improve service quality and satisfaction for patients. (Toliaso et al., 2018b)

Measurement of patient safety targets at Puskesmas X Surabaya is implemented in each poly and work unit. Then the results of the measurement are collected and evaluated at the risk management meeting to create suggestions and plans to follow up. The results of the evaluation of patient safety efforts will be implemented as material to improve and improve the quality of services at Puskesmas X Surabaya City which is connected to all fields in health services prepared by Puskesmas X Surabaya City. Evaluation of results to improve patient safety efforts has the aim of observing whether after the improvement of patient safety problems has been resolved or not. If it still cannot be addressed, the patient safety group must provide recommendations for other alternative follow-up actions to deal with the problem. (Hidayati, 2018)

Six patient safety indicators are used as an evaluation in improving quality at Puskesmas X are the absence of patient identification errors in providing quality improvement medical treatment at Puskesmas X, namely the absence of patient identification errors in administering medical actions, the absence of errors in administering drugs to patients, the absence of errors in medical and nursing handling procedures, reduction of the risk of infection in the Puskesmas, absence of fallen patients, and effectiveness in communication. (Hidayati, 2018)

A schedule for measuring, collecting and reviewing patient safety goals is implemented by the patient safety group each month. But sometimes the implementation does not fit the schedule. The form of communication of the results of improving patient safety efforts at Puskesmas X Surabaya City to visitors and patients of the Puskesmas is to use the information board displayed in the waiting room of the Puskesmas where the results of improving and evaluating it will be posted on the information board and updated every period (Hidayati, 2018)

c. Health Service Strategy for Patient Satisfaction at UPT Puskesmas Pandean.

UPT Puskesmas Pandean prepares all existing facilities and is supported by capable and reliable human resources as well as their professions and fields so that UPT has the capability and reliability in not only preparing services but more than that, namely providing maximal, correct, and appropriate services so that people who use

health services feel affection, given assistance, serviced. Real comfort and satisfaction are obtained at UPT Puskesmas Pandean (Mujiarto et al., 2019).

Puskesmas has the authority, namely: (1) Implementing plans such as analyzing public health problems and analyzing service needs, (2) Implementing advocacy and socialization of health policies, (3) Implementing communication, information, education and empowerment for the community in health aspects, (4) Memo-bilization of the community to identify and deal with health problems at each level of development of working communities together with other related sectors, (5) Fostering technically on a network of health services and businesses on a community basis, (6) Improving the human resource capabilities of Puskesmas, (7) Reviewing the implementation of development to have health insights, (8) Recording, reporting, and evaluating the quality, access, and scope of health services, and (9) Sharing advice on public health problems, including support for early awareness systems and pathological response. These 9 authorities have been implemented at the UPT Puskesmas Pandean in an orderly, good, procedural, continuous, and continuous manner. With these efforts and various steps, we certainly have expectations to further increase the capacity, quality, and capability of health services so that they will experience more improvement, especially in providing inpatient facilities and services so that patients do not have to go far to the city for hospitalization. In this case, the context of implementing health service functions is appropriate (Mujiarto et al., 2019).

Based on Permenkes No.75 of 2014, some basic and important things implemented by the Pandean Health Center are primary health services, family planning services, immunization services. UPT Puskesmas Pandean also implements eradication and prevention of disease as well as improving nutrition for the community. The operations of the Pandean Health Center are conducting public health efforts at the basic level and individual health efforts at the basic level (Mujiarto et al., 2019)

Puskesmas Pandean as an implementor of government services in Dongko District always strives to create a positive image, especially in providing the best service for the surrounding community. Therefore, the strategy implemented is to encourage to improve the quality of human resources and administrative personnel to be more proactive and have empathy for what patients complain about treatment. Treatment of patients suffering from the disease is not only sufficient to diagnose and then give drugs, but also requires manners and behavior of service personnel. Health, non-medical, and administrative workers if they are patient and friendly and willing to listen to the complaints of their patients, the impact will be that patients will feel affection and get help as expected. If this becomes a work culture and organizational culture, it will support the existence of the Puskesmas in contributing to creating and building a quality of life for the community that is spiritually, physically, and feels prosperous outwardly and mentally. Pandean Puskesmas patients value that the services provided by all health devices at Pandean Health Center are quite good, responsive along with a friendly attitude so that patients feel affectionate and feel happy. (Mujiarto et al., 2019)

Regarding quality control, Puskesmas Pandean monitors the quality of services that are implemented routinely and consequently. With efforts to improve, it is hoped

that the Puskesmas service will be appreciated by the community as patients. Puskesmas can also provide a role for improving public health from various dimensions. Services at the Pandean Health Center do not take a long time, patients are given friendly service, drugs are given quite well as standard at basic health facilities, doctors advise to re-control when the medicine has run out or if you need to get further treatment it will be given a referral to do treatment at Trenggalek City Hospital. (Mujiarto et al., 2019).

D. CONCLUSION

Based on the results of the review, it can be observed that the quality of Puskesmas health services in Indonesia which includes direct evidence, responsiveness, reliability, empathy, and assurance has been well implemented by Puskesmas in Indonesia such as Sangura Health Center, Ibun Health Center, Mangasa Health Center and Sumedang Regency Health Center. The Indonesian Puskesmas plan to improve the quality of services in terms of health human resources includes improving the skills of Puskesmas health workers with more develop and empower health workers employing training (education and training) that is implemented evenly, harmoniously, and commensurately, as well as providing benefits, providing sarpras, and providing career facilities for Puskesmas health workers. Training of health workers Puskesmas in Indonesia is an effort to procure health workers as the quantity, criteria, and types that have been planned and improve capabilities as needed for health development

The advice that the author can convey to improve the quality of Puskesmas services in Indonesia is that it needs to be improved in terms of education and training or training. The implementation of training for health workers varies in each Puskesmas health institution, because it is held under the program at the Puskesmas health institution.

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