

Analysis Of The Quality Of Health Services After The Covid-19 Pandemic At The Kutamendala Health Center, Brebes Regency

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ABSTRACT

Background: The Covid-19 pandemic has occurred since the end of 2019 in Wuhan, China and almost all countries have contracted the virus, including Indonesia. Identification of covid-19 cases in Brebes Regency dated August 7, 2022, with a total of 15,896 confirmed cases, confirmed recoveries of 2,680 cases, and deaths recorded 1,741 cases (Covid Task Force, 2022). The Covid-19 pandemic has not only had a bad impact on the global economy, but also on health systems in many countries, and has an impact on the health service system both in First Level Health Facilities and in Advanced Health Facilities. This study examines the analysis of health services during the COVID-19 pandemic at the First Level Health Facility, in this case in the selection of the Kutamendala Health Center, Brebes Regency which was carried out 2 years after the Covid-19 pandemic. **Method:** The method used in this study is qualitative with a descriptive approach and SWOT Analysis, the instrument in this study with an in-depth interview method was carried out to the management of puskesmas, direct observation and also evidence of searching standard operating procedures documents during the Covid-19 pandemic. **Research Objectives:** to determine the quality of health services and the flow of services in the Kutamendala Health Center, Regency after the Covid-19 pandemic. **Results:** Research results obtained from the SWOT analysis and seen from quality indicators, namely Tangible, Reliability, Responsiveness, Assurance and also empathy at the Kutamendala Health Center have been carried out properly and in accordance with Standard Operating Procedures **Conclusion:** There is an improvement in the quality of service after the pandemic while still prioritizing health protocols. **Suggestion:** it is hoped that the Kutamendala Health Center will continue to improve the quality of services after the pandemic and again become the first choice for the community to carry out health services.

Keywords: Health Services, Kutamendala Health Center, Covid-19 Pandemic

1. Introduction

The Covid-19 pandemic has not only impacted the global economy but also impacted almost all medical facilities around the world. All Health Service Facilities during the pandemic must be prepared with an increase in the number of patients, adequate facilities, this begins with changes in the existing health service system such as service flows that have changed during the pandemic, medical equipment and medical staff who must be ready during the Covid-19 pandemic.

Service is an activity that aims to provide services to other people or the community, which are commercial or non-commercial in nature. Commercial activities are usually managed by the private and non-commercial sectors, for example, public services that are oriented towards service, one of which is health services at puskesmas. The quality of health services influences people to choose good facilities, where quality is the quality of service as a picture of the satisfaction of services desired by the community. Quality is the extent to which a product or service meets customer needs and in health services quality is assessed from the quality of service.

Some Definitions of Quality according to some experts, this includes all facilities and characteristics of the product or service, both express and implied. Tjiptono (2007) defines quality as a fit for use material. A company that emphasizes meeting customer expectations is a company that is committed to meeting customer needs and expectations. This can be done through good customer service, accurate information, and timely delivery. Kadir (2001) said that it is not easy to achieve the appropriate quality of service, because consumer expectations will always change. As new standards are developed, consumers will quickly want the latest and best versions to stay ahead of the curve and get the best service. In this perspective, the quality of health care is neither a static nor a fixed goal, but a continuous process that improves over time. Suwithi defines quality as the quality of service provided to customers, both internally and externally based on service procedures (Anwar, 2022). Meanwhile, according to Kotler (2002) the definition of quality as a characteristic of the kusus and the general characteristics of a product or service in the field of services. According to Parasuraman the quality of services can be defined as how far the difference between reality and customer expectations for the service they receive, if reality exceeds what was expected then the service can be said to be quality and vice versa.

Fitzman explained that service quality is a complex that will assess a quality of service with 5 dimensions, namely Reliability is the ability to provide appropriately and correctly the type of service that has been promised to customers, Responsiveness is awareness or desire to act quickly to provide timely service, Certainty / assurance (Assurance) is knowledge and politeness and trust to the employees in providing services, Empathy (Empathy) is the meaning of giving individual attention in providing services to guests / customers / patients, and the last is Real (Tangibles) is something that looks and is real which is seen from the appearance of employees, physical facilities, equipment that supports services.

Puskesmas is a First Level Health Facility that is expected by the community to have good quality service standards. Good service standards are the purpose of health service functions and duties, one of which is by relying on the Standard Operating Procedures contained in Health Service Facilities and is obliged to adjust conditions during the Covid-19 pandemic (Ministry of Health, 2021).

According to Tuswoyo (2017) Factors that affect the analysis of public services in Puskesmas and can be implemented properly are seen from the appearance of the place of service and employees, ease in the service process, accuracy of doctors in diagnosing patients, response to patient arrivals, prioritizing the interests of patients, friendliness and no discrimination.

The role of Puskesmas during the Covid-19 pandemic must be the same as before the pandemic, including preventive, curative, promotive and rehabilitative services. The function of puskesmas is also related to Public Health Efforts (UKM) and Individual Health Efforts (UKP), these two functions are puskesmas programs in achieving public health goals in the puskesmas work area.

Standard Operating Procedures which are guidelines and references in carrying out all activities in Health Facilities must be adjusted to conditions during a pandemic and it is necessary to update the Standard Operating Precedents from before the pandemic was changed and adjusted to conditions during the pandemic and guided by the Ministry of Health in 2020 concerning guidelines and control of Coronavirus Disease (Covid-19). SOP or standard operating procedure is a document that is required to be contained in a Health Service Facility to record the procedures carried out chronologically in carrying out a job with the aim of obtaining effective, efficient work results and appropriate and successful services.

Identification of covid-19 cases in Brebes Regency dated August 7, 2022 with a total of 15,896 confirmed cases, confirmed recoveries of 2,680 cases, and death cases recorded at 1,741 (Covid Task Force of Brebes Regency, 2022).

Kutamendala Health Center is located in the southern Brebes area. The puskesmas has 50 health workers consisting of doctors, dentists, nurses, midwives, pharmacists, analysts, and several employees such as administrative staff, cleaning services and ambulances. The existence of new Operational Standards during the Covid-19 pandemic, one of which is the use of Personal Protective Equipment, Service Flow during the Covid-19 Pandemic, and services during the Covid-19 pandemic makes it necessary to utilize and efficiently provide existing services for the community. This Standard Operating Procedure is a tool in carrying out activities while working, and must be obeyed by all officers at the Puskesmas.

The research was carried out at the Kutamendala Health Center, Brebes Regency. Kutamendala Health Center is a non-treatment health center that has health workers and non-health workers with a total of 50 people. Puskesmas that have a vision to be the first choice for the community to strive to continue to carry out services in accordance with existing standards.

2. Research Methodology

This study used a qualitative descriptive type. The place where this study was conducted at the Kutamendala Health Center, Brebes Regency with 6 respondents with purposive sampling techniques, consisting of puskesmas management staff consisting of the Head of Puskesmas (R1), Head of Administration (R2), Head of Quality (R3) and the Covid-19 Task Force Team (R4) and Health Workers Representatives (R5), as well as patient representatives (R6). This research instrument with in-depth interview techniques, direct observation and also evidence of searching standard operating procedure documents during the pandemic, then conducting FGD (Focus Group Discussion).

3. Results and Discussion

SWOT Analysis of The Quality of Health Services After the Covid-19 Pandemic at the Kutamendala Health Center

The analysis prioritizes 4 aspects, namely: Strength, Weakness, Opportunity, and Threats in carrying out strategic management:

- **Strength**
The advantages contained in the Kutamendala Health Center, Brebes Regency based on the results of an interview with the Head of the Puskesmas (R1) stated: "The advantages of the Kutamendala Health Center have Human Resources in accordance with their knowledge and competencies, such as 3 general practitioners, 1 dentist, 8

skilled nurses, 20 midwives consisting of 13 implementing midwives at the Puskesmas and 7 village midwives, 2 pharmacists, 1 health analyst, 2 nutritionists, 5 administrative personnel and 3 cleaning services".

Respondent R5 mentioned about the advantages of the Kutamendala Health Center during the covid-19 pandemic: "The Kutamendala Health Center continues to carry out services during the covid-19 pandemic, services in the building such as general examination clinic poly services, mother and child examination poly, dental and oral services, elderly clinic poly, laboratories and pharmacy installations"

"During the pandemic, the Kutamendala Health Center has set one-way flow arrangements, entrances and exits have changed, this is still enforced after the pandemic", this was also said by R5.

In line with R1, R5 also said that "the pandemic is ongoing, the Kutamendala Health Center is screening and triage patients who will enter the Puskesmas room, screening locations outside the entrance, and screening patients with Respiratory Tract Infections (ARI) and Non-ARI, Triage is also carried out as usual, namely patients based on emergency".

R5 states "Officers are required to perform services using Complete Personal Protective Equipment such as gowns, masks, goggles, faceields., to reduce exposure to diseases from patients to officers'

R2 said "there was a change in SOPs during the pandemic which was adjusted to the technical guidelines for Puskesmas services during the Covid-19 pandemic, and became a good habit post-pandemic, so that prevention, detection, and quick and responsive response in dealing with the pandemic'

R3 said "Infectious Disease Control is more controlled, and hygiene is better maintained, officers use PPE (personal protective equipment) and patients entering the Puskesmas environment are required to wear masks, health protocols are prioritized, implementing seating/queue distancing between visitors.

Puskesmas Kutamendala Utilizes information technology for online consultations with telemedicine, this is also still ongoing after the pandemic, this is said by R2.

- Weakness

The weaknesses that exist in the Kutamendala Health Center during the pandemic and post-Covid-19 are:

R1 stated that "Services in the building during the pandemic were limited, so that many patients who were not in the emergency department became unaccepted and services outside the building were not carried out during the pandemic, this was to reduce patient contact with staff."

"R3 mentioned that "Infrastructure facilities are still not available, such as medical devices with a minimum amount, limited covid-19 drug drugs, Personal Protective Equipment for officers are also limited" " R1 and R4 stated "There is a decrease in the number of patients during the pandemic, both outpatients and delivery patients".

"In providing services both during the pandemic and after the pandemic, some of them are in accordance with the SOP (standard operating procedures) of the Covid-19 pandemic, but there are still some officers who are still not disciplined in providing

service time, and it seems that there is still a buildup of patient queues for examination, so there are still obstacles in service activities", this was said by R3.

Another obstacle to post-pandemic health services at the Kutamendala Health Center mentioned by R2 is "the lack of Human Resources for health workers, especially for nurses and registration officers, so that there is still a buildup of patients both during the pandemic and post-pandemic". R5 stated "Post-pandemic, screening and triage have not been carried out again, ARI and Non-ARI patients have not been screened, and in the same waiting room and post-pandemic Health Protocols, there is no distance arrangement on the seats of visitors / patients".

- Opportunity

"The opportunity that exists at the Kutamendala Health Center, Brebes Regency, is support for the existence of a health bpjs, so that people can still do health services for free," said R2.

R1 mentioned "The mobilization and implementation of a special forum is the existence of mini-workshops which are carried out every month and quarter by implementing the rules of the Covid-19 pandemic and carried out with information technology and are still carried out post-pandemic".

R1 also said that: "There is good coordination between the health office, other puskesmas in Brebes Regency, and across sectors during the covid-19 pandemic and it will continue to be implemented after the covid-19 pandemic"

R5 stated that "Financing for the implementation of services during the Covid-19 pandemic is sourced from the STATE BUDGET (State Budget) and APBD (Regional Budget) and other sources of legal use in accordance with applicable regulations and the existence of service guidelines during the pandemic and this can still be accessed post-pandemic through the ministry of health's website.

R3 and R4 stated "There is an increase in the number of patients that occurs after 2 years of pandemic, both services in the building and outside the building such as posyandu, vaccination services and also delivery services".

R3 also stated "Pandemic SOPs are still in effect, even though the number of Covid-19 patients has decreased 2 years after the pandemic".

- Threat

The threat that comes from external factors is the large number of first-level health facility services from the private sector such as primary clinics whose services and service quality are better, said R3.

And based on the results of the SWOT analysis of the quality of health services, after two years of the Covid-19 pandemic at the Kutamendala Health Center, Brebes Regency, then researchers conducted Grouping and the quality of health services can be seen through indicators of service quality indicators including;

- Tangible

From the physical form of the building with good physical appearance, starting from the front view with a large parking lot, available facilities and infrastructure, human resources for health workers and non-health workers who are in accordance with their needs, comfort in patient waiting rooms, toilets available for employees, patients and disabilities. During the pandemic, the Kutamendala Health Center

changed the flow of services and also the place of service, starting from the patient registration place, patient polyclinic, laboratories and waiting rooms in accordance with pandemic guidelines, namely social distancing, the availability of hand washing stations for visitors before entering, and the existence of a glass wall barrier between patients and service personnel.

- **Reability**
During the pandemic, there was a change in service hours, namely 7.30 wib to 11.30 wib. Then the service hours changed again after the pandemic, namely 7.30 to 14.00, but the lack of socialization of Puskesmas service hours to the community, so that many people still came to do health services at the schedule that had been set after the pandemic.
- **Responsiveness (Ability to provide fast, precise, responsive service)**
Both during the pandemic and post-pandemic, in providing services to the community, officers have been able to provide services in accordance with standard operating procedures.

Officers while carrying out patient services use PPE (Personal Protective Equipment), and patients are required to use masks when entering the service room, this is still ongoing after 2 years of the COVID-19 pandemic, although the health protocols carried out by visitors / patients began to decline, this can be seen from the number of visitors who at the beginning of entering did not use masks.

- **Assurance (Fairness, friendliness and courtesy of employees when performing services)**
The courtesy and friendliness of the officers can be said to be good, this can be seen from the attitude of the officers who put the elderly patients and the disabled patients first.

Continue to carry out health protocols, especially for patients who enter the Puskesmas not wearing masks, given masks first when registering to perform services.

- **Emphaty (Attitude of attentive officers when performing services),**
The attention of the officers of the Kutamendala Health Center, Brebes Regency to the patient when the patient came has been done well, this can be seen from the absence of complaints about the unfavorable attitude of the patient.

4. Conclusion

- **Tangible**
The physical appearance of the Kutamenda Health Center seen from the building looks good, the comfort of the waiting room is in accordance with the SOP of the Covid-19 pandemic, service facilities are quite good, although there are still many that need to be added and improved such as medical equipment and also personal protective equipment for health workers.
- **Reliability (reliability of officers in serving patients)**
In carrying out patient services, Kutamendala Puskesmas officers are in accordance with Standard Operating Procedures during the pandemic, and are still being implemented post-pandemic.

- Responsiveness
In providing health services to the community, able to provide a good response
- Assurance (fairness, friendliness and courtesy of employees)
The manners and friendliness of the officers are good, in accordance with the applicable SOP, this can also be seen from the priority for elderly patients and also disabilities.
- Emphaty
From interviews conducted with the complaint management team, empathy carried out by officers has been carried out properly, both carried out before the pandemic, during the pandemic and post-pandemic.

5. Suggestion

- Puskesmas Kutamendala continues to maintain health services in accordance with the SOP in force at the Puskesmas after the pandemic ends
- The Kutamendala Health Center continues to prioritize health protocols after the pandemic ends.
- The Kutamendala Health Center remains the first choice for the community, by providing complete facilities as a First Level Health Facility.

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