

Analysis of the Quality of Health Services Based on the Implementation of Accreditation on Patient Satisfaction at Puskesmas Teminabuan, South Sorong Regency

Intan Sirenden*, Muh. Ilyas, Freddy Chandra, Zamli

Master of Public Health Mega Buana University Palopo

Email Corresponding:
sirendenintan@gmail.com

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ABSTRACT

Background: Quality health services are a basic need and expectation for all individuals seeking care. Health facilities are expected to meet patient expectations through service delivery. **Objective:** This study aimed to evaluate health service quality based on accreditation implementation across five dimensions responsiveness, assurance, tangibility, empathy, and reliability and their effect on patient satisfaction. **Methods:** A quantitative study with a cross-sectional design was conducted at the Teminabuan Health Center, South Sorong Regency. A total of 92 patients participated, and data were collected using a structured questionnaire assessing satisfaction across the five service quality dimensions. **Results:** Partial analysis showed that assurance and tangibility significantly influenced patient satisfaction ($p < 0.05$), while responsiveness, empathy, and reliability did not ($p > 0.05$). The F-test indicated a significant simultaneous effect of all five dimensions on satisfaction ($p = 0.000 < 0.05$). **Conclusion:** The five dimensions of service quality collectively impact patient satisfaction at Teminabuan Health Center. However, assurance and tangibility were the only dimensions with a significant partial effect. These findings highlight the need to strengthen specific service aspects to enhance overall patient satisfaction.

Introduction

This study looks at variables comprehensively from the aspects of responsiveness, assurance, tangible, empathy and reliability, to see patient satisfaction based on accreditation status, where research related to this is still minimal, especially in the Papua working area in general, so that it can become basic data and evaluation of health services in fulfilling aspects of patient satisfaction.

The instrument used in this study is a questionnaire. contains demographic data including age, gender, education and occupation. The research questionnaire contains 35 questions related to the quality of service provided by the Teminabuan Health Center, South Sorong Regency in order to increase patient satisfaction. Service quality is measured with 5 alternative answers Very good (5), Good (4), Fair (3), Less (2), Very less (1).

Seen from the aspects of responsiveness, assurance, tangible, empathy and reliability.

Patient satisfaction with the quality of service and treatment received, speed of service, comfortable environment, staff friendliness, ease of process, availability of drugs, completeness of medical equipment, and affordable health service prices are indicators of the quality of service provided to patients¹. Requirements for health services with a new paradigm in addition to complying with professional and medical codes of ethics, quality services must be in accordance with the needs and preferences of patients where officers must have the capacity and ability to build trust in patients in an effort to encourage improvements in health status and degree².

By measuring patient satisfaction after service delivery at the health center, this plays an important role in assessing service quality³.

health service standards, an important element of health facilities, provides outstanding services whose quality can be assessed⁴. Five indicators of service quality, known as ServQual indicators (responsiveness, assurance, tangible, empathy and reliability), these indicators can measure service quality, which is related to patient satisfaction⁵.

One factor that significantly affects patient satisfaction is a thorough understanding of the wants and needs of service users, in this case patients⁶. Every patient has the right to receive safe and high quality health services, which is the main legal basis for the health sector⁷. Puskesmas is a health service center that prioritizes preventive and promotive activities in order to increase program innovation. It also conducts public health initiatives and first-level individual health efforts⁸.

The Ministry of Health issued Health Regulation No. 46/2015 as a policy in an effort to improve service standards at first-class health facilities, particularly puskesmas. The policy requires that accreditation of such facilities be conducted by an independent body overseeing accreditation, and the Minister of Health will determine accreditation after it has been evaluated to improve sustainable service standards⁹.

Implementation of the accreditation criteria ensures the sustainable delivery of clinical services, effective health program implementation, and efficient health center administration¹⁰. Community health centers are recommended to undergo periodic accreditation, ideally every three years, to maintain service quality. The quality of health services provided directly influences the accreditation status of a health center¹¹. Accreditation serves as a strategic tool to improve risk management, enhance performance, and promote continuous quality improvement in healthcare delivery¹². This process strengthens institutional accountability and ensures that health facilities meet

nationally established standards.

Materials and Methods

Research Design

This study employed a quantitative research design using a cross-sectional approach, where data on research variables were collected at a single point in time. The objective was to analyze the quality of health services based on the implementation of accreditation and its effect on patient satisfaction at the Teminabuan Health Center.

Sample

The sample consisted of 92 patient visits recorded during May. The sample size was determined using the Slovin formula. The sampling technique used in this study was simple random sampling to ensure that every patient had an equal chance of being selected.

Data Collection Techniques

The primary methods used for data collection included structured questionnaires and interviews. These instruments were designed to gather quantitative information from respondents that aligned with the scope and objectives of the study. The questionnaire measured service quality based on five dimensions: responsiveness, assurance, tangibility, empathy, and reliability.

Data Analysis Techniques

Data analysis was conducted to fulfill the research objective of evaluating the quality of health services based on accreditation implementation and its relationship to patient satisfaction. Several analytical methods were employed in this study. First, validity and reliability tests were conducted to ensure the accuracy and consistency of the research instruments used to collect data. Next, univariate analysis was applied to describe the demographic and characteristic profiles of the respondents. Finally, multivariate analysis was used to examine the influence of two or more

independent variables on the dependent variable, allowing the researcher to determine which dimensions of service quality had the most significant effect on patient satisfaction¹³.

Ethical Considerance

Although this study did not require formal ethical clearance from an ethics committee, it adhered to ethical research principles. Informed consent was obtained from all participants, and confidentiality of their data was strictly maintained throughout the research process.

Result

Characteristics of Respondents

Based on the research conducted, a total of 92 respondents were obtained. The characteristics of the respondents are presented in Table 1. The table shows that 47 respondents (51.1%) were male and 45 respondents (48.9%) were female. Most patients visiting the Teminabuan Health Center were in the age range of 36–45 years, totaling 32 individuals (34.8%). According to WHO age criteria, this age group falls under late adulthood¹⁴.

The table 2 shows that patients who visit Teminabuan Health Center generally have private employment status with a total of 21 people (22.8%). This private job consists of several jobs such as drivers, and traders.

The distribution of service quality can be seen in the table 3 regarding the service quality of Teminabuan puskesmas. Based on the table 3, about the quality of patients on the Responsiveness aspect of 92 respondents, most of them answered well, 70 people (76.1), Assurance answered well, 74 people (80.4), Tangible answered well, 63 people (68.5). Emphaty answered mostly good at 73 people (79.3) while Reliability answered mostly good at 79 people (85.9) there were no patients who answered less and very less than the total respondents.

Table 1. Characteristics of Respondents Based on Gender and Age

Variables	Category	N	Percentage (%)
Type sex			
	Man	47	51.1
	Woman	45	48.9
Age (Years)			
12 – 16	Teenager beginning	4	4.3
17 – 25	Teenager end	17	18.5
26 – 35	Mature Beginning	26	28.3
36 – 45	Mature end	32	34.8
46 – 55	Elderly Beginning	11	12.0
56 – 65	Elderly End	2	2.2
> 65	Seniors	0	0
Total		92	100

Source: Primary Data, 2024

Table 2. Characteristics of Respondents Based on Occupation

Work	N	Percentage (%)
Civil servants/PPPK	18	19.6
Honorary	6	6.5
Farmer	9	9.8
Fisherman	8	8.7
Private	21	22.8
Student	11	12.0
Housewife	15	16.3
No Work	4	4.3
Total	92	100

Source: Primary Data, 2024

Service Quality

The distribution of service quality can be seen in the table 3 regarding the service quality of Teminabuan puskesmas. Based on the table 3, about the quality of patients on the Responsiveness aspect of 92 respondents, most of them answered well, 70 people (76.1), Assurance answered well, 74 people (80.4), Tangible answered well, 63 people (68.5). Emphaty answered mostly good at 73 people (79.3) while Reliability answered mostly good at 79 people (85.9) there were no patients who answered less and very less than the total respondents.

Table 3. Frequency distribution (Responsiveness, Assurance, Tangible, Empathy and Reliability)

Variables	N	Percentage (%)
Responsiveness		
Very Good	21	22.8
Good	70	76.1
Enough	1	1.1
Assurance		
Very Good	15	16.3
Good	74	80.4
Enough	3	3.3
Tangibles		
Very Good	4	4.3
Good	63	68.5
Enough	25	27.2
Empathy		
Very Good	17	18.5
Good	73	79.3
Enough	2	18.5
Reliability		
Very Good	9	9.8
Good	79	85.9
Enough	3	3.3
Total	92	100

Source: Primary Data, 2024

Based on the table 4, the results show that the quality of service for assurance (X2) and tangible (X3) aspects has a sig value <0.05 and a tcount $>$ ttable value so it can be concluded that partially the assurance (X2) and tangible

(X3) aspects have an influence on patient satisfaction.

Table 4. The Effect of Service Quality on Partial Patient Satisfaction

Quality Variable Service (X)	Sig.	T _{count}	T _{table}
Responsiveness (X1)	0.086	1,793	
Assurance (X2)	0.047	2,012	
Tangible (X3)	0.039	2,093	1,991
Empathy (X4)	0.076	1,793	
Reliability (X5)	0.102	1,655	

Source: Primary Data, 2024

F test analysis (Table 5) was conducted to analyze the effect of service quality in this case in terms of 5 aspects, namely responsiveness (X1), assurance (X2), tangible (X3), empathy (X4) and reliability (X5). Based on the results of the study, the significance value obtained for the effect of service quality simultaneously through 5 aspects on patient satisfaction (Y) is $0.000 < 0.05$ and the calculated F_{count} is $17.107 > F_{\text{table}} 2.319$, so it can be concluded that there is a simultaneous influence on service quality through 5 aspects (responsiveness (X1), assurance (X2), tangible (X3), empathy (X4) and reliability (X5) on patient satisfaction (Y).

Table 5. Simultaneous Influence of Service Quality Dimensions on Patient Satisfaction (F Test)

Independent Variables (X)	Dependent Variable (Y)	Sig.	F _{count}	F _{table}
Responsiveness (X1), Assurance (X2), Tangible (X3), Empathy (X4), Reliability (X5)	Patient Satisfaction	0.000	17.107	2.319

Source: Primary Data, 2024

Table 6. Coefficient of Determination for the Model

Model	Dependent Variable (Y)	R Square	Percentage Influence
Full Model (X1–X5)	Patient Satisfaction	0.499	49.9%

Source: Primary Data, 2024

Based on the results of the analysis (Table 6), the Rsquare value obtained is 0.499, so it can be concluded that the effect of service quality simultaneously through 5 aspects on patient satisfaction (Y) is 49.9%.

Discussion

Based on research conducted partially, it is obtained that the responsiveness aspect has no influence on patient satisfaction. The results of this study are in line with research conducted by related to responsiveness, assurance, physical evidence, empathy, reliability and patient satisfaction which concluded that responsiveness has no significant effect on patient satisfaction¹⁵.

However, health service providers must be able to respond to every patient complaint. Thus, high responsiveness on the part of service managers will give patients a sense of confidence that they will always be helped¹⁶.

Health service providers must be able to respond to every patient complaint. Thus, the high responsiveness of the hospital management will give patients a sense of trust that they will always be helped.

In the assurance aspect (X2) in service quality has an influence on patient satisfaction. The results of this study are in line with research conducted related to the effect of service quality on outpatient satisfaction at UPTD Puskesmas Leyangan East Ungaran which concluded that assurance has a significant effect on patient satisfaction. Assurance by patients is said to be good and satisfied with the perceived service quality because patients feel that the Puskesmas is able to provide trust / assurance to patients during treatment¹⁷.

The tangible aspect (X3) in service quality has an influence on patient satisfaction. The results of this study are in line with research related to the influence of tangible, health services on patient satisfaction of BPJS users at the Sungai Saria health center, Padang

Pariaman Regency which concluded that physical evidence (tangible) has a significant influence on patient satisfaction¹⁸. Facilities and infrastructure are one of the needs that must exist and must be met for every health service¹⁹.

Although this study shows that there is no effect of empathy (X4) attention on patient satisfaction, care is a form of feeling given by one person to another as if that person is in the same condition. Providing empathy to patients makes patients feel cared for and respected. Feelings like this need to be created in every patient by health workers.

The reliability aspect (X5) in service quality has no influence on patient satisfaction. The results of this study are in line with research related to the effect of service quality on patient satisfaction at the Palang Health Center outpatient registration site which concluded that reliability does not affect patient satisfaction²⁰.

Although this study shows that there is no effect of attention (reliability) on patient satisfaction, the ability of officers to provide care (reliability) must be accurate and reliable.

Based on the research conducted, the results show that there is an effect of service quality based on the implementation of puskesmas accreditation simultaneously through 5 aspects (responsiveness (X1), assurance (X2), tangible (X3), empathy (X4) and reliability (X5) on Patient Satisfaction (Y). the conclusion is based on the results of the f test analysis. The result of the significance value obtained for the effect of service quality simultaneously through 5 aspects on patient satisfaction (Y) is $0.000 < 0.05$ and the calculated F_{count} is $17.107 > F_{table} 2.319$.

The results of this study are in line with other studies showing that service quality variables include: assurance has an influence on patient perceptions ($p=0.00$), courtesy has an influence on patient perceptions ($p=0.00$). Based on the results of multiple regression tests, it is found that simultaneously the

tangibles variable has a greater influence on patient perceptions at accredited and non-accredited health centers in Banggai Regency²¹.

Puskesmas accreditation affects the quality of the fulfillment of predetermined standards. Health centers must meet the requirements and criteria set by the accreditation agency. Thus, accreditation ensures that the health center has met the set standards to provide safe, effective, and quality services to patients.

Conclusion

The conclusions in the study are: Assurance variables (X2) and tangible variables (X3) have an influence on health services based on the implementation of patient satisfaction (Y) and there is a simultaneous influence on service quality based on the implementation of accreditation through 5 aspects (responsiveness (X1), assurance (X2), tangible (X3), empathy (X4) and reliability (X5) on Patient Satisfaction (Y) and the effect of service quality based on accreditation implementation through 5 aspects (responsiveness (X1), assurance (X2), tangible (X3), empathy (X4) and reliability (X5) on Patient Satisfaction (Y). is 49.9%.

Suggestions in this study are: For further researchers it is recommended to further research related to factors that affect patient satisfaction in order to improve service quality, For the Teminabuan Health Center, South Sorong Regency, it is hoped that it can maximize services in all aspects so as to improve service quality and achieve maximum accreditation to increase patient satisfaction.

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References

1. PURBA J, Zulkarnain M, Misnaniarti M. Mutu Pelayanan Kesehatan Rawat Jalan Dari Perspektif Kepuasan Pasien Berdasarkan Status Akreditasi Puskesmas di Kota Universitas Sriwijaya; 2021.
2. Mahfudhoh M, Muslimin I. Pengaruh Kualitas Pelayanan Terhadap Kepuasan Pasien Pada Rumah Sakit Umum Daerah Kota Cilegon. *Jurnal Ilmiah Manajemen Kesatuan*. 2020;8(1):39-46. doi:10.37641/jimkes.v8i1.310
3. Guspianto G, Lobat ME, Wardiah R. Analisis Tingkat Kepuasan Pasien Rawat Jalan di Puskesmas Simpang IV Sipin Kota Jambi. *Jurnal Kesmas Jambi*. 2023;7(1):14-21. doi:10.22437/jkmj.v7i1.21528
4. Agustina D, Solin AP, Khairunnisa SA. Strategi Peningkatan Mutu Pelayanan Kesehatan Di Rumah Sakit Padang Sidempuan. *Jurnal Kesehatan Tambusai*. 2023;2(1):123-134.
5. Joko Sujarwo. Analisis Kualitas Layanan Kesehatan Terhadap Kepuasan Pasien (Studi Pada Instalasi Rawat Jalan Puskesmas Sukomoro Kabupaten Nganjuk). *Otonomi*. 2023;23(April):243-248.
6. Hidayah N, Sitepu N, Hilda, Masniah, Ulina K. Tingkat Kepuasan Pasien terhadap Pelayanan Kefarmasian di UPT Puskesmas Bromo Kecamatan Medan. *Healthy Tadulako Journal (Jurnal Kesehatan Tadulako)*. 2023;9(1):27-35.
7. Riyanto OS, Fuad. Perlindungan Hukum Praktik Kedokteran di Rumah Sakit: Implementasi Kenyamanan Dokter dalam Memberikan Pelayanan Kesehatan. *Jurnal Riset dan Kajian Hukum Hak Asasi Manusia*. 2023;2(1):1-14.

8. Nadia N, Hadiwiardjo YH, Nugrohowati N. Implementasi Program Jaminan Kesehatan Nasional terhadap Pelaksanaan Pelayanan Promotif dan Preventif. *Jurnal Ilmu Kesehatan Masyarakat*. 2023;12(05):388-401. doi:10.33221/jikm.v12i05.2267
9. Sutanti D, Suparman R, Setianingsih T, Laelatul Badriah D. Studi Analisis Ketercapaian Implementasi Kebijakan Akreditasi Puskesmas Dan Kinerja Puskesmas di Kabupaten Kuningan. *Journal of Public Health Innovation*. 2022;2(02):189-198. doi:10.34305/jphi.v2i02.462
10. Ringrih IA. Implementasi Kebijakan Akreditasi Puskesmas di Kota Makassar (Tesis). e-Journal Katalogis. Published online 2022.
11. Arifuddin A, Rochmiyati S, Nur AF, Dyastuti NE. Peranan Clinical Governance Terhadap Penjaminan Mutu Rumah Sakit : Sistematis Review. *Healthy Tadulako Journal (Jurnal Kesehatan Tadulako)*. 2022;8(2):84-96
12. Ningrum EN, Wati E. Hubungan Akreditasi Puskesmas Dengan Kepuasan Pasien di Puskesmas Kabupaten Banyumas. *Human Care Journal*. 2020;5(3):732. doi:10.32883/hcj.v5i3.755
13. Mutmainnah U, Aril Ahri R, Wahidin Sudirohusodo R. Analisis Faktor Yang Berhubungan dengan Mutu Pelayanan Kesehatan terhadap Kepuasan Pasien Rawat Inap di RSUP Wahidin Sudirohusodo Makassar, Indonesia. *Journal of Muslim Community Health (JMCH)*. 2020;2(1):52-74.
14. Pratama DA, Widiarti A, Toemon AI, Mutiasari D, Trinovita E. Hubungan Dukungan Keluarga Dengan Kepatuhan Pasien dalam Pengobatan Tuberkulosis di UPT Puskesmas Pahandut Kota Palangka Raya. *Barigas: Jurnal Riset Mahasiswa*. 2024;2(1):38-42.
15. Amalia A, Tua H, Rusli Z. Daya Tanggap, Jaminan, Bukti Fisik, Empati, Kehandalan, dan Kepuasan Pasien. *Jiana, Jurnal Ilmu Administrasi Negara*. 2017;14(3):356-363.
16. Sudirman SN. Hubungan Kualitas Pelayanan dengan Kepuasan Pasien Rawat Inap di RSUD Ampara Kabupaten Tojo Una-Una. *Jurnal Kesehatan Tadulako*. 2015;1(2):15-22.
17. Sari DN, Sari DN. Pengaruh kualitas pelayanan terhadap kepuasan pasien rawat jalan pada uptd puskesmas leyanan ungaran timur. Published online 2020.
18. Hasan A. Pengaruh Tangibles, Empathy, Reliability, Responsiveness dan Assurance Jasa Kesehatan Terhadap Kepuasan Pasien Pengguna BPJS pada Puskesmas Sungai Sariak Kabupaten Padang Pariaman. *Jurnal Ilmiah Dikdaya*. 2021;11(1):85. doi:10.33087/dikdaya.v11i1.200
19. Suci Ramadhani, Dwi Sutiningsih CTP. Implementasi Standar Pelayanan Minimal Bidang Kesehatan pada Penderita Hipertensi di Puskesmas Kota Surakarta. *Healthy Tadulako Journal (Jurnal Kesehatan Tadulako)*. 2024;10:316-323.
20. Agustya FI, Allan D, Sakti K, Pribadi FA. The Effect Of Service Quality To Patient Satisfaction at Patient Registration Puskesmas Palang. *Jurnal Manajemen Informasi Kesehatan*. 2021;8(1):71-83.
21. Ekaputri R, Anwar A, Djafar N. Persepsi Pasien Tentang Kualitas Pelayanan di Puskesmas Akreditasi dan Non Akreditasi Kabupaten Banggai. *Jurnal Ilmiah Kesehatan Diagnosis*. 2019;14(3):241-246. doi:10.35892/jikd.v14i3.243.