

The Factors Influence with Quality Services at Dekai Hospital Yahukimo District

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ABSTRACT

Background: The quality of services from hospitals requires good funding from human resources needed by education, training, tenure, attitude, motivation, work discipline, reward, punishment, leadership (direct supervisor).

Objective: To find out the factors that influence the quality of service at the Dekai District of Yahukimo Hospital

Research Method: Analytical with cross sectional study design. The population is all employees of the Dekai District Yahukimo Hospital with a total sample of 251 people conducted in September 2018. Data were obtained using questionnaires and analyzed using square techniques and logistic regression.

Results: Factors supporting service quality in Dekai Yahukimo District Hospital are years of work (p-value = 0.030; RP = 0.714; CI95% = (0.529 - 0.963), work discipline (p-value = 0.001; RP = 1,611; CI95% = (1,244 - 2,087), prizes (p-value = 0,000; RP = 2,203; CI95% = (1,735 - 2,796), penalties (p-value = 0,000; RP = 5,179; CI95% = (3,248 - 8,258), direct supervisor leadership (p-value = 0,000; Rp. 22,302; CI95% = (1,753 3,023). Factors that did not affect the quality of service in Dekai Yahukimo District Hospital were aged (p-value = 10.644; RP = 0.911; CI95% = (0.668 - 1.241), education (p-value = 0.065; RP = 1.3986; CI95% = (1,041 - 1,877), training (p-value = 0,132; RP = 1,268; CI95% = (0,965 - 1,668), work period (p-value = 0,685; RP = 0,926; CI95% = (0,698 - 1,229) and work motivation (p-value = 0.105; RP = 0.771; CI95% = (0.570 - 1.042). *Training, attitude, motivated, reward, punishment* and leadership of superiors directly is the dominant factor that influences the quality of service in the Dekai Hospital Yahukimo district.

Keywords: *Quality Services, Health Employee, Dekai Hospital*

INTRODUCTION

Regulation of the Minister of Health Number: 129 / Menkes / SK / II / 2008 concerning minimum hospital service standards is a certain value that has been set related to something that must be achieved. The minimum types of hospital services that must be provided by the hospital include emergency services, outpatient care, hospitalization, surgery, labor and perinatology, intensive, radiology, clinical pathology laboratories, medical rehabilitation, pharmacy, nutrition, blood transfusions, family services poor, medical records, waste management, management administration, ambulance / hearse, corpse study, laundry, hospital facilities maintenance and infection control (Permenkes 129 / Menkes / SK / II / 2008).

Indicators in the minimum outpatient service standard are based on Permenkes 129 / Menkes / SK / II / 2008, namely Doctors who provide services in 100% Polyclinics Specialist Doctors, opening hours of service between 08.00 - 13.00 every working day except Friday 08.00 - 11.00, waiting time is outpatient: ≤ 60 minutes and customer satisfaction is $\geq 90\%$.

Patient satisfaction report data conducted by Dekai Hospital in 2017 found 70% of patients stated that they were quite satisfied with the service. This shows that patient satisfaction with service quality has not matched the standard service indicators

set at 90% according to Permenkes 129 / Menkes / SK / II / 2008. Patient satisfaction complains about services provided by health workers.

The ability to provide appropriate health services accurately and reliably, sympathetic and with high accuracy to patients. The professionalism of health personnel is also evident from health workers handling patient complaints, serving well, appropriately and in accordance with procedures established in providing health services (Etildawati, 2017). Factors influencing service quality from Gibson's theoretical model cited by Cordova (2017) that individual implementers in health services influence service quality do an analysis of a number of variables that influence individual behavior and performance. The first is the individual variables grouped in the sub variables of ability and skill are the main factors that influence individual behavior and performance, while demographic variables have indirect effects on individual practices and performance. Second is the psychological variable, consisting of sub variables of perception, attitude, personality, learning and motivation. This variable according to Gibson is influenced by family, social level, previous work experience and demographic variables. The third variable is an organization that has an indirect effect on behavior and performance individuals, the variables are grouped into sub-variables of resources, leadership, rewards, structure and design work.

The results of preliminary interviews conducted by researchers in ten patients, 6 patients complained about the services provided by health workers who were "less friendly and lack of attention of officers in serving". In addition, one informant stated "the waiting time for the queue at the counter service feels long in the registration process. In addition, patients wait too long because the doctor is not in place according to the service schedule. "

Based on the description of the problem above, the author is interested in

conducting a study entitled "Factors that influence the quality of service at the Dekai District Yahukimo Hospital".

2. MATERIALS AND METHODS

2.1 Types of Research

This research is a descriptive analytic study with a cross-sectional study approach, namely data collection is done simultaneously to determine the correlation between the variables studied (Swarjana, 2013). This research is to find out the factors that influence the quality of service at Dekai Yahukimo District Hospital.

2.2 Location and Time of Research

The study was conducted at the Dekai General Hospital and the time of the study was conducted in September 2018.

2.3 Population and Samples

Population is a generalization area consisting of: objects / subjects that have certain qualities and characteristics set by researchers to be studied and then conclusions drawn (Sugiyono, 2013). The population in this study were 263 people in Dekai General Hospital. The sample is a portion of the population that is considered representative (Sugiyono, 2013). The samples in this study were health workers who served in outpatient services in Dekai Hospital as many as 196 people. Sampling was based on saturated sampling techniques, namely all employees in Dekai General Hospital as many as 263 people with criteria for active work and not currently attending education or leave and the number of samples obtained was 251 people.

3. RESULTS

3.1. Bivariate Analysis

a. Effect of age on service quality

Table 1. The influence of age on the quality of service at the Dekai District Yahukimo Hospital in 2018

No	Age	Quality of service				Number	
		Less		Good		n	%
		n	%	n	%		
1	< 30 year	31	42,5	42	57,5	73	100
2	> 30 year	83	46,6	95	53,4	178	100
Total		114	45,4	137	54,6	251	100
$p\text{-value} = 0,644; RP = 0,911; CI95\% = (0,668 - 1,241)$							

Based on Table 1, it shows that out of 73 employees aged <30 years as many as 31

people (42.5%) have poor service quality and 42 people (57.5%). While from 178 people, employee age > 30 years, 83 people (46.6%) had 95 people (53.4%) as good and good service quality. The results of the chi square test obtained $p\text{-value} = 0.644 > 0.05$. This means that there is a significant effect that is significant on the quality of service at the Dekai District of Yahukimo District Hospital. The prevalence ratio (RP) = 0.911; CI95% = (0.668 - 1.241) interpreted is not a factor that influences service quality.

B. The influence of education on service quality

Table 2. The effect of education on the quality of service in the Dekai District of Yahukimo District Hospital in 2018

No	Education	Quality of service				Number	
		Less		Good		n	
		n	%	n	%		
1	Low	25	59,5	17	40,5	42	100
2	High	89	42,6	120	57,4	209	100
Total		114	45,4	137	54,6	251	100

p-value = 0,065; RP = 1,3986; CI95% = (1,041 - 1,877)

Table 2, shows that of the 423 low-educated employees 25 people (59.5%) had poor service quality and 17 people (40.5%) were good. While from 209 employees who were highly educated as many as 89 people (42.6%) had poor service quality and as many as 120 people (57.4%) were good. The results of the chi square test obtained $p\text{-value} = 0.065 > 0.05$. This means that there is no significant effect of education on the quality of service in the Dekuk Regency Yahukimo Hospital in 2018 which is not meaningful. Prevalence ratio (RP) = 1.3986; CI95% = (1,041 - 1,877) which is interpreted that low education in employees tends to have a service quality that is less than 1,3986 compared to highly educated employees.

C. Effect of training on service quality

Table 3. The effect of training on the quality of service in the Dekai District of Yahukimo District Hospital in 2018

No	Training	Quality of service				Number	
		Less		Good		n	
		n	%	n	%		
1	No	40	53,3	35	46,7	75	100
2	Yes	74	42	102	58	176	100
Total		114	45,4	137	54,6	251	100

p-value = 0,132; RP = 1,268; CI95% = (0,965 - 1,668)

Table 3, shows that of the 75 employees who have never participated in the training as many as 40 people (53.3%) have less service quality and as many as 35 people (46.7%) are good. Of the 176 people who attended the training 74 people (42%) had poor service quality and 102 people (58%) were good. The results of the chi square test obtained $p\text{-value} = 0.132 > 0.05$. This means that there is no meaningful influence between training on service quality in Dekai Yahukimo District Hospital. Prevalence ratio (RP) test results = 1,268; CI95% = (0,965 - 1,668) which is interpreted that employees who have never attended training tend to have poor service quality.

D. Effect of tenure on service quality

Table 4. Influence of years of service on the quality of service at Dekai Yahukimo District Hospital in 2018

No	Work period	Quality of service				Number	
		Less		Good		n	
		n	%	n	%		
1	New	42	43,3	55	56,7	97	100
2	Long	72	46,8	82	53,2	154	100
Total		114	45,4	137	54,6	251	100

p-value = 0,685; RP = 0,926; CI95% = (0,698 - 1,229)

Table 4 shows that out of 97 employees who have a new service period of 42 people (43.3%) have less service quality and as many as 55 people (56.7%) are in good criteria. Of the 154 employees who had a long service period of 72 people (46.8%) had less service quality and as many as 82 people (53.2%). The results of the chi square test obtained $p\text{-value} = 0.685 > 0.05$. This means that there is no significant effect of work period on the quality of service in the Dekai District of Yahukimo District Hospital. The prevalence ratio (RP) = 0.926; CI95% = (0,698 - 1,229) which is interpreted that the working period is not a significant factor in service quality.

E. Effect of attitudes on service quality

Table 5. The influence of attitudes on service quality in Dekai Yahukimo District Hospital in 2018

No	Attitude	Quality of service				Number	
		Less		Good		n	
		n	%	n	%		
1	Less	37	36,6	64	63,4	101	100
2	Good	77	51,3	73	48,7	150	100
Total		114	45,4	137	54,6	251	100

p-value = 0,030; RP = 0,714; CI95% = (0,529 - 0,963)

Based on Table 5, it shows that of the 101 employees who behaved less as many as 37 people (36.6%) had less service quality and as many as 64 people (63.4%) were in good criteria. Of the 150 employees who were good as many as 77 people (51.3%) had poor service quality and as many as 73 people (48.7%) were in good criteria. The results of the chi square test obtained $p\text{-value} = 0.030 < 0.05$. This means that there is an influence of attitudes towards service quality in the Dekai District of Yahukimo District Hospital. The prevalence ratio (RP) = 0.714; CI95% = (0.529 - 0.963) interpreted that attitude is not a significant factor in the quality of service provided by employees.

F. Effect of work motivation on service quality

Table 6. The effect of work motivation on the quality of service in the Dekai District of Yahukimo Hospital in 2018

No	Motivation	Quality of service				Number	
		Less		Good		n	%
		n	%	n	%		
1	Low	36	38,3	58	61,7	94	100
2	High	78	49,7	79	50,3	157	100
Total		114	45,4	137	54,6	251	100

$p\text{-value} = 0,105$; RP = 0,771; CI95% = (0,570 - 1,042)

Table 6, it shows that of 94 low motivation employees, 36 people (38.3%) had poor service quality and 58 people (61.7%) were good. Of the 157 highly motivated employees 78 people (49.7%) had poor service quality and as many as 79 people (50.3%) were good. The results of the chi square test obtained $p\text{-value} = 0.105 > 0.05$. This means that there is no significant effect of work motivation on service quality in Dekai Yahukimo District Hospital. When viewed from the value of RP = 0.771; CI95% = (0.570 - 1.042) interpreted that work motivation is not a significant factor in the quality of service provided by employees.

4. DISCUSSION

4.1 Effect of age on service quality

The results of the study showed that there was no significant effect of age on service quality in Dekai Yahukimo District Hospital in 2018 ($p\text{-value} = 0.644$). The

results of this study are not in line with the research conducted by Samsualam, Indar, & Syafar (2008) which revealed that there is an influence of age on the quality of service. But in the study of Kumajas (2012) in Datoe Binangkang Hospital Bolaang Mongondow District revealed the opposite that there was no influence of age on the quality of service. Age is the range of life span from birth and age (Handayani, 2010). Age will affect a person's physical condition, enthusiasm, burden and responsibility both at work and in daily life. For employees who are less than 30 years old, even though they have good physical condition, to carry out physical activities but in general they have a relatively less sense of responsibility compared to those aged ≥ 30 years (Sandra, 2013).

The results of the analysis showed that 42.51% of employees aged <30 years old had less service quality and less service quality for employees aged >30 as much as 46.6%. This shows that the age of employees aged <30 years and >30 years has equal opportunities for the quality of services provided.

The absence of the influence of age can be caused by other factors that affect employee performance that are not caused by physical age of the employee, but rather the environment in the hospital such as the existence of reward and punishment, so employees do not feel satisfied in work that affects employee performance. Judging from the age limit of employees aged >30 years the oldest is 52 years old and the youngest is 23 years old, so physically it does not affect the performance of employees who are still in their productive age. The average employee aged <30 years is an employee with an employee honor status or contract, so that employees will compete - race to create good performance in order to be considered and a priority in the reception of civil servants. The same thing is also done by employees aged >30 years, most of whom are civil servants and have an influence on satisfaction and motivation for good and equal career

divisions tend to have good performance, thus not affecting service quality. This is in accordance with the theory proposed by Gibson (2003) in Cahyono (2012), that age has an indirect effect on individual behavior and performance. The older a person is, not necessarily able to show intellectual maturity both cognitively and psychomotor when doing work. This is probably due to the personal values of the individual concerned, flexibility and other psychological factors that influence.

4.2 Influence of Education with service quality

The results showed that there was no significant effect between education on service quality in Dekai Yahukimo District Hospital (p -value = 0.065). The results of this study are in line with the research conducted by Suyati (2014), that education does not affect service quality through work productivity. Education requires people to do and fill their lives to achieve safety and happiness. Education is needed to get information, for example things that support health so that it can improve the quality of life. Thus it can be interpreted that the higher a person's education, the easier it is to receive information so that the more knowledge he has, the less education will hinder the development of one's attitude towards the values introduced (Prayoto, 2014).

Education of employees who have high education ($> D$ -III) has less service quality as much as 59.5% and employees who have low education ($< D$ -III) have service quality that is as much as 42.6%. This means that the education level of employees is equally likely to service quality.

The absence of the influence of employee education on the quality of service is due to the placement of employees in accordance with the level of education in the parts of the organization in the Dekai District of Yahukimo Hospital. Most of the educated staff (SMA / SMK) are mostly in the administrative field, while the medical and paramedic units as a whole

have higher education. The lack of quality of service for employees in Dekai Hospital depends on the ability and skills of individuals and attitudinal factors of employees in working to improve the quality of services in hospitals. All company personnel from senior managers to operational subordinates must obtain education regarding quality. The aspects that need to be emphasized in education include the concept of quality as a business strategy, tools and techniques for implementing quality strategies, and the role of executives in implementing quality strategies. This needs to get attention, especially employees who still have high school / vocational education in improving service quality.

4.3 Effect of Training on service quality

The results showed that there was no significant effect between training on service quality in Dekai General Hospital Yahukimo district (p -value = 0.132). The results of this study are in line with the research conducted by Suyati (2014), that training does not affect service quality through work productivity. Thoha (2010) said that the purpose of the regulation and arrangement of the implementation of position training for employees was to ensure the harmony of employee coaching. Training is a teaching-learning process using certain techniques and methods according to the needs in accordance with the employee placement midwife.

Employees in Dekai Hospital who had never attended training as much as 53.3% had poor service quality and employees who had attended training as much as 42% had poor service quality and from the results of the prevalence ratio test (RP) = 1,268; CI95% = (0,965 - 1,668) which is interpreted that employees who have never attended training tend to have poor service quality. This shows that training is influenced by other variables in this study that affect the quality of services provided by employees including the attitude of the employees themselves. The understanding that they know from the

results of the training if it is not supported by a good attitude influences the quality of service even though they have the ability and skills at work. This is due to a lack of job satisfaction by employees due to the distribution of rewards and lack of punishment on employees so that they tend not to work according to their abilities and skills.

There is a need for attention from the management of Dekai Hospital in improving the quality of services through training sessions, so that the training provided to employees can be maximized by changing the attitude of work behavior with efforts or encouragement in the form of reward and punishment from the Dekai Regional Hospital.

4.4. Effect of tenure on service quality

The results of the study showed that there was no significant effect of working period on service quality in Dekai Yahukimo District Hospital (p-value = 0.685). The results of this study are not in line with the research conducted by Astriana (2014) in Makassar Haji Hospital revealing that the working period has an influence on the quality of service. According to Robbins (2006) a person's tenure shows the level of seniority. Where the level of seniority is an expression of work experience. According to Sandra (2013), the longer a person's work experience, the more skilled the officer is, it is easy to understand their duties and responsibilities, thus providing an opportunity for achievement. The results of the analysis showed that employees who had a new service period of 43.3% had poor service quality and employees with a long service period of 46.8% had poor service quality. This shows that the working period of new and old employees alike tends to have less performance which has an impact on service quality.

The absence of the influence of the working period on service quality can be influenced by the existence of a reward or award given. Employees who are not satisfied, especially employees who have long worked, can affect performance.

Instead of new employees, but feel satisfied with the work they get so they feel comfortable at work that can improve performance. So that satisfaction in working is not influenced by the employee's tenure. In this study the number of employees with honorary status reached 145 people with the status of the honorarium the amount of salary or incentives provided was different from the permanent employees.

The encouragement of the expected rewards in the form of rewards can certainly increase work motivation to improve the quality of good service, especially for honorarium and contract employees. Whereas for employees who are old due to past behavior that is accustomed to behaving discipline and enthusiasm in working according to procedures, it is likely that they will continue to behave accordingly in the future, and vice versa. So that it can be concluded that the old and new working periods expressed in work experience do not necessarily guarantee good performance if they are used to behaving inappropriately.

4.5. The influence of attitudes on service quality

The results showed that there was a significant effect of attitudes on service quality in Dekai Yahukimo District Hospital (p-value = 0.030). The results of this study are in line with the research conducted by Astriana (2014) in Makassar Haji Hospital revealing that attitudes influence the quality of service. Criteria for employee attitudes will be related to the service process Customers of health care institutions will feel that hospital nurses have served them well according to service procedures. This situation is shown by positive staff attitudes and behaviors that will help users of health services overcome complaints of illness (Bustami, 2012).

The attitude of employees in the Dekai Public Hospital is lacking in the quality of service that is lacking as much as 36.6% and employees who have a good attitude with less service quality as much as 51.3%. The prevalence ratio (RP) = 0.714;

CI95% = (0.529 - 0.963) interpreted that attitude is not a significant factor in the quality of service provided by employees. This is because attitudes are influenced by external factors in this research variable such as direct supervisor leadership. Lack of direct supervisor leadership to employees has an impact on job dissatisfaction, especially employees who feel their work is good but do not get good rewards, otherwise employees who have poor service quality because they do not get punishment. This has led to a decline in work morale which has an impact on the quality of service provided by employees.

A good attitude by employees at Dekai Hospital is a concept of concern for customers by providing the best service. Barata (2013) also added that there are three main things in the definition of prime service, namely the attitude approach related to the organization's concern to customers, efforts to serve customers with the best actions and organizational goals to be able to satisfy customers with specific service standards. Efforts to increase attitudes need to be aware of individuals themselves in improving the quality of services and the need for support from the leadership and management of the Dekai Hospital in shaping good employee attitudes.

4.6. Effect of Motivation on the quality of service

The results showed that there was no significant effect of work motivation on service quality in Dekai Yahukimo District Hospital in 2018 (p-value = 0.105). The results of this study are in line with the research of Anggorowati (2012) at Jogja Hospital revealing that there is no effect of motivation on service quality. Motivation is an act of a group of factors that cause individuals to behave in certain ways (Herlambang, 2012). Motivation teaches how to encourage subordinate work morale so that they want to work harder and work hard by using all their abilities and skills to be able to advance and achieve company goals. While the motivation is the driving force that results in an organization member

willing and willing to time to organize various activities into his responsibility and fulfill his obligations in the number of achievement of goals and various organizational goals that have been determined previously (Siagian, 2010).

Statement of respondents about motivation in working with low motivation that each work or provide services to patients must require colleagues. This causes employee independence to decrease. In other words, employees have a high morale when together with other fellow employees. In addition, employees do not feel proud of the results of services that get appreciation from leaders or co-workers. This shows that employee motivation seems to have other needs that must be considered by the hospital management.

5. CONCLUSION

The results of this study can be summarized as follows:

1. There is no significant effect between age on service quality in Dekai Yahukimo District Hospital (p-value = 0.644; RP = 0.911; CI95% = (0.668 - 1.241).
2. There is no significant influence between education on service quality in Dekai Yahukimo District Hospital (p-value = 0.065; Rp = 1.3986; CI95% = (1,041 - 1,877).
3. There is no meaningful influence between training on service quality in Dekai Yahukimo District Hospital (p-value = 0.132; RP = 1.268; CI95% = (0.965 - 1.668).
4. There is no significant effect of work period on service quality in Dekai Yahukimo District Hospital (p-value = 0.685; RP = 0.926; CI95% = (0.698 - 1,229).
5. There is a significant effect of attitudes on service quality in Dekai Yahukimo District Hospital (p-value = 0.030; RP = 0.714; CI95% = (0.529 - 0.963).
6. There is no significant effect of work motivation on service quality in Dekai Yahukimo District Hospital (p-value =

0.105; RP = 0.771; CI95% = (0.570 - 1.042)

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