



## **The Quality of Health Services for Askes Participants is Reviewed from Responsiveness, Assurance and Empathy Based on Education, Years of Service and Incentives for Health Workers at Pelamonia Hospital Makassar**

Abdullah <sup>1\*</sup>, Dg. Mangemba <sup>2</sup>, Abu Bakar Betan <sup>3</sup>, Hastin Atas Asih <sup>4</sup>, Kurniawati Nawangwulan <sup>5</sup>, Yusnita Yusfik <sup>6</sup>

<sup>1</sup>Nursing Study Program, STIKES Gunung Sari, Indonesia

<sup>2</sup>Nursing Study Program, Poltekkes Kemenkes Palu, Indonesia

<sup>3</sup>Nursing Study Program, STIKES Gunung Sari, Indonesia

<sup>4</sup>Health Information Management Study Program, Politeknik Kesdam VI Banjarmasin, Indonesia

<sup>5</sup>Hospital Administration Study Program, Politeknik Bhakti Kartini, Indonesia

<sup>6</sup>Hospital Administration Study Program, Politeknik Bhakti Kartini, Indonesia

### **Abstract**

Efforts to provide good health services to speed up the healing process of illnesses suffered are everyone's hope and human right. The aim of the research was to determine the quality of health services for Askes participants in terms of Responsiveness, Assurance, and Empathy Based on Education, Years of Service, and Incentives for health workers at Pelamonia Hospitals in. This type of research is observational with a descriptive approach to get an overview of the quality of health services in terms of excellent service at Pelamonia Hospital. The results showed that 89.2% of the 37 health workers who said they received incentives provided good quality service to health insurance patients, while 41.4% of the 29 health workers who said they did not receive incentives provided good quality service. The conclusion is that there are 83.0% of health workers who have a D3 education level and provide excellent quality service to health insurance patients and 89.2% of health workers who receive incentives and provide good quality service to health insurance patients are 89.2%.

**Keywords:** Quality of Health Services, Health Insurance, Responsiveness, Assurance, and Empathy

*\*Corresponding Author: Abdullah*

### **1. Introduction**





Complaints about health services at hospitals are often heard from health insurance participants where the service they receive is less than satisfactory. Usually what is targeted is the poor attitude or actions of doctors or paramedics, inadequate facilities, medicine supplies and patient safety, etc. As demand increases, public complaints about the quality of hospital health services will also increase if they are not balanced with quality services (Mushar, 2006).

Quality health services are one of the basic needs that every person needs. Therefore, hospitals, health centers and other health service organizations as community services need to have excellent service quality characteristics that are in line with patient expectations.

Achieving excellent service requires having certain skills, including looking good and neat, being friendly, showing enthusiasm for work and an attitude of always being ready to serve, being calm at work, not being arrogant because you feel you are needed, mastering your work and understanding and comprehending customer sign language and having the ability handle customer complaints professionally (Veronika: 2009:2).

Excellent service is an effort to serve other people's needs or help prepare what someone needs (Indonesian Dictionary, 1977). Prima (excellent) means high quality and satisfactory. Excellent service in the health sector is the instruction of the Minister of Health of the Republic of Indonesia no. 828/MENKES/VII/1999 concerning the implementation of excellent service in the health sector, it is explained that what influences excellent service are aspects of simplicity, clarity, security, efficiency, economy, timeliness, cleanliness, completeness of facilities, reliability of staff and behavior of health workers. Excellent service as a guide to service that satisfies customers/society, requires requirements so that each service can feel that it has the quality of professional competence. Thus, the quality of professionalism and competence becomes an important and reasonable aspect in every transaction.

## 2. Research methods





This type of research is observational with a descriptive approach to get an overview of the quality of health services in terms of excellent service at Pelamonia Hospital. The population in this study were all health workers at Pelamonia Hospital. The samples in this study were some health workers at Pelamonia Hospital. The sampling technique was carried out using purposive sampling where only health workers met the criteria.

### 3. Results and Discussion

#### a. Results

The characteristics in this study include gender, age group, and level of education. To describe these characteristics in detail, they will be explained as follows:

##### 1) Univariate Analysis

##### a) Gender

Table 1.  
Gender Distribution of Health Workers  
Inpatient Pelamonia Hospital Makassar

Gender	Frequency	Percentage
Man	29	43.9
Woman	37	56.1
Amount	66	100.0

Table 1 shows that 43.9% of health workers are male and 56.1% are female.

##### b) Age group

Table 2.  
Distribution Group Age Health workers  
Inpatient Pelamonia Hospital Makassar

Age group	Frequency	Percentage
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26 – 28	4	6.1
29 – 31	8	12.1
32 – 34	19	28.8
35 – 37	9	13.6
38 – 40	7	10.6
41 – 43	3	4.5
44 – 46	5	7.6
47 – 49	6	9.1
>50	5	7.6
Amount	66	100.0

Table 2 shows that the 32-34 year age group is the highest at 28.8 % and the 41-43 year age group is the lowest at 4.5 %.

### c) Level of education

Table 3.

Distribution of Education Level of Health Workers  
 Inpatient Pelamonia Hospital Makassar

Level of education	Frequency	Percentage
SPK	10	15.2
D3 Nursing	22	33.3
D3 Midwifery	18	27.3
Bachelor's Degree in Nursing	8	12.1
Bachelor of Medicine	8	12.1
Amount	66	100.00

Table 3 shows that the highest level of D3 Nursing education was 33.3% and the lowest was 12.1%, respectively.





#### d) *Responsiveness (Responsiveness)*

Table 4.

Distribution of *Responsiveness* (Responsiveness) of Health Workers among Inpatients and Askes Participants at Pelamonia Hospital, Makassar

<i>Responsiveness</i>	n	Percentage
Good	46	69.7
Not enough	20	30.3
Amount	66	100.0

Table 4 shows that health workers provide *Responsiveness* (Responsiveness) 69.7 % of those providing good health insurance were 69.7 % and those providing less as much as 30.3 %.

#### e) *Empathy (Attention)*

Table 5.

Distribution of *Empathy* (Attention) of Health Workers to Participant Inpatients Askes Pelamonia Hospital Makassar

<i>Empathy</i>	n	Percentage
Good	39	59.1
Not enough	27	40.9
Amount	66	100.0

Table 5 shows that health workers who provide good *empathy* (attention) to health insurance patients are 59.1 %, and those who provide less as much as 40.9 %.

#### f) *Assurance (Security Guarantee)*

Table 6.

Distribution of *Assurance* (Security Guarantee) for Health Workers to Inpatients of Askes Participants at Pelamonia Hospital Makassar

<i>Assurance</i>	n	Percentage
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Good	40	60.6
Not enough	26	39.4
Amount	66	100.0

Table 6 shows that 60.6 % of health workers provide good *assurance* (security guarantee) for health insurance patients, and 39.4 % say it is inadequate.

### g) Service Quality

Table 7.

Distribution of Service Quality for Health Workers In Inpatients  
Participating in Askes at Pelamonia Hospital, Makassar

Service Quality	n	Percentage
Good	45	68.2
Not enough	21	31.8
Amount	66	100.0

Table 7 shows that health workers who provide good quality service to health insurance patients are 68.2 %, and who provide service quality was poor as much as 31.8 %.

### h) Health worker education

Table 8.

Distribution of health worker  
education Pelamonia Hospital Makassar

Health worker education	N	Percentage
Enough	47	71.2
Not enough	19	28.8
Amount	66	100.0

Table 8 shows that health workers who have sufficient education are 71.2 %, and those who have less than 28.8 %.

### i) Work period of health workers

Table 9.





Distribution of Work Periods of Health Workers  
 Pelamonia Hospital Makassar

Years of service	n	Percentage
Long	41	62.1
New	25	37.9
Amount	66	100.0

Table 9 shows that 62.1 % of health workers have a long service period, and 37.9 % have a new work period.

**j) Health worker incentives**

Table 10.

Distribution of Health Worker  
 Incentives Pelamonia Hospital Makassar

Incentive	n	Percentage
Accept	37	56.1
Do not accept	29	43.9
Amount	66	100.0

Table 10 shows that 56.1% of health workers received incentives and those who stated they did not receive incentives were 43.9%.

**1. Bivariate Analysis**

**a. Distribution of Education of Health Workers Based on Excellent Service Quality**

Table 11.

Distribution of health workers' education based on Quality of Service for  
 Inpatients Participating in Askes at Pelamonia Hospital Makassar

Health worker education	Excellent Service Quality				Amount
	Good		Not good		
	n	Percentage	n	Percentage	
Enough	39	83.0	8	17.0	47
Not enough	6	31.6	13	68.4	19
Amount	45	68.2	21	31.8	66

Table 11 shows that of the 47 health workers who have a sufficient level of education, 83.0 % of the 19 health workers provide good quality





service to health insurance patients, while of the 19 health workers who have less education. There are 31.6 % who provide excellent quality service.

### b. Distribution of Work Periods Based on Excellent Service Quality

Table 12.

Distribution of Work Period of Health Officers Based on Excellent Service Quality for Inpatients and Askes Participants at Pelamonia Hospital, Makassar

Work period of health workers	Excellent Service Quality				Amount
	Good		Not good		
	n	Percentage	n	Percentage	
Long	33	80.5	8	19.5	41
New	12	48.0	13	52.0	25
Amount	45	68.2	21	31.8	66

Table 12 shows that of the 41 health workers who have long service terms, there are those who provide good quality of excellent service for asks patients as much as 80.5 % while out of 25 officers health who have a new working period There are 48.0 % who provide excellent quality service.

### c. Distribution of Incentives for health workers Based on Excellent Service Quality

Table 13.

Distribution of Health Worker Incentives Based on Excellent Service Quality for Inpatients Participating in Askes at Pelamonia Hospital Makassar

Health worker incentives	Excellent Service Quality				Amount
	Good		Not good		
	n	Percentage	n	Percentage	
Accept	33	89.2	4	10.8	37
Do not accept	12	41.4	17	56.6	29
Amount	45	68.2	21	31.8	66

Table 13 shows that of the 37 health workers who stated that they received incentives, 89.2 % of them provided good quality service to health insurance patients, while 29 health officials stated do not receive incentives, some give them excellent service quality as much as 41.4 %.





## b. Discussion

This research was carried out to determine the quality of health services for Askes participants in terms of excellent service by taking a sample of 66 health workers. The following is a discussion of the variables studied, namely: Health worker education, length of service, and incentives.

### 1. Health Officer Education

Education is an activity to increase a person's knowledge, including increasing mastery of theory and decision skills regarding problems involving activities to achieve goals (Ranupanjoyo and Husnan, 1995).

Table 8. Shows that 71.2 % of health workers have sufficient education, and those with less education were 28.8 %. Table 1 shows that of the 47 health workers who have sufficient education, 83.0 % provide good quality services to health insurance patients. Meanwhile, of the 19 health workers who had less education, there were 31.6 % who provided good quality services.

The results of this research are in line with research conducted by Mat Hilda (2000) at the Faisal Islamic Hospital in Makassar, where 75.28% of health workers who had sufficient education provided good quality service and 22.22% who had less education.

### 2. Health Officer Work Period

Health workers who have worked for a certain company for a long time have various experiences related to their respective fields, in carrying out their daily work health workers receive various input regarding work implementation and trying to solve various problems that arise, so that in carrying out their work health workers who have worked for a long time are certainly better able to provide good service.

Table 9. Shows that 62.1 % of health workers have sufficient work experience, and 37.9 % have insufficient work experience. Table 12. shows that of the 41 health workers who have sufficient work experience, there are





80.5 % who provide good quality services. Meanwhile, of the 25 health workers who had less work experience, 48.0 % provided good quality services.

The results of this research are in line with research conducted by Fitri (2001) at Nuha Hospital, North Luwu Regency, where 83.0% of health workers had sufficient work experience and 17.2% had insufficient work experience.

### 3. Incentive

The service distribution system in the form of incentives is considered very valuable for health workers, so it will bring a positive perception of the service system provided by health workers. Meanwhile, health workers will lose their work motivation because the incentive system they expect does not match the workload they carry out and it is likely that they will provide less than optimal service to patients. In this research, the incentive referred to is additional income in the form of money outside the basic salary obtained after or before work.

Table 10 shows that 56.1 % of health workers received incentives, and 43.9 % did not receive incentives. Table 13 shows that of the 37 health workers who stated that they received incentives, 89.2 % provided good quality services, while 29 There were 41.4 % of health workers who did not receive incentives who provided good quality services.

The results of this research are in line with Sri Handriyani (2005) at the Takalar Regional General Hospital where 77.3% of health workers received incentives and 16.7% did not receive incentives.

## 4. Conclusion

1. Health workers who have a D3 education level and provide excellent quality service to health insurance patients are 83.0%.
2. Health workers who have long service periods and provide excellent quality service to health insurance patients account for 80.5%.





3. Health workers who received incentives and provided good quality service to health insurance patients were 89.2%.

## 5. Compliance with ethical standards

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### Disclosure of conflict of interest

This research collaboration is a positive thing for all researchers so that conflicts, problems and others are absolutely no problem for all writers.

### Statement of informed consent

Every action we take as authors is a mutual agreement or consent.

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