



Quality of Service for Health Workers at the Motaha Community Health Center, South Konawe Regency, Southeast Sulawesi

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Abstract

A community health center (puskesmas) is a functional organization that carries out health efforts that are comprehensive, integrated, equitable, acceptable and affordable to the community and use the results of appropriate science and technology development, at a cost that can be borne by the government and the community. The aim of this research is to determine the quality of service of health workers at the Motaha District Health Center. South Konawe, Southeast Sulawesi. This type of research is descriptive observational. This type of research is observational, descriptive in nature, which aims to describe the quality of service of health workers at the Motaha District Health Center. South Konawe, Southeast Sulawesi. Based on the results of field research, it shows that 40 respondents (76.9 %) had sufficient knowledge and 12 respondents (23.1%) had insufficient knowledge.

Keywords: Quality, Services Health Workers, Health Workers

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1. Introduction

Community Health Centers are the spearhead of health implementation, so that the success of health programs relies on Community Health Centers. A community health center can be defined as a functional health organization which is a center for community health development which also fosters community





participation in addition to providing comprehensive and integrated services to the community in its working area in the form of main activities. (Efendy, 1996).

In connection with the importance of the health aspect in the framework of national development which is adapted to the socio-cultural and geographical conditions of the Indonesian population, in November 1967 the Government of the Republic of Indonesia formulated an integrated health program in accordance with the social conditions and capabilities of the Indonesian people which was named PUSKESMAS (Public Health Center) as a health service that provides curative and preventive services in an integrated and comprehensive manner and is easily accessible to the community.

In the context of a modern state, public service has become an increasingly important institution and profession. It is no longer a part-time activity, without legal protection, adequate salaries and social security, as happened in many developing countries in the past. As an institution, public services guarantee the continuity of state administration which involves developing service policies and managing resources originating from and for the public interest. One of the things that is of concern is the health service sector which is still the public's hope regarding quality and the growing awareness of the importance of quality, namely Health Law Number 36 of 2009 concerning health services, especially at the community health center level (Aditama, 2002).

A community health center (puskesmas) is a functional organization that carries out health efforts that are comprehensive, integrated, equitable, acceptable and affordable to the community and use the results of appropriate science and technology development, at a cost that can be borne by the government and the community. These health efforts are carried out with an emphasis on providing services to the wider community to achieve optimal levels of health, without compromising the quality of services to individuals. The management of community health centers is usually under the district and city health services (Nadesul, 2008).





There are many problems that trigger the low image of community health centers at the moment. Incomplete facilities such as poor quality medicines, staff who are less responsive to patients, less friendliness in providing services, so that people are less satisfied every time they go to a health service center for treatment. Apart from that, the poor functioning of the community health center program has triggered the low quality of community health center services in the eyes of the community (Nadesul, 2008).

Another problem that arises is the accessibility, quality of service and utilization of community health centers as well as the performance of community health centers in providing community health services and the coverage of health service program activities in the community as a whole is not yet optimal and implemented according to expectations, the use of community health centers as a home for community health care, especially in community health centers, is still very minimal. , people tend to use traditional shamans/medics. This is influenced by several factors, including (1). Patient knowledge, (2) HR capabilities (3). Availability of facilities and infrastructure (4). Placement and distribution of health workers. (Archive of Puskesmas visitors/patients February - March 2014).

2. Research methods

This type of research is observational, descriptive in nature, which aims to describe the quality of service of health workers at the Motaha District Health Center. South Konawe, Southeast Sulawesi. The population in this study is all health workers at the Motaha District Health Center. South Konawe, Southeast Sulawesi. In taking samples, the author used a total population technique (exsautif sampling) where the entire population was used as a research sample so that a sample size of 52 respondents was obtained.

3. Results and Discussion

a. Results





This research was carried out at the Motaha District Health Center. South Konawe, Southeast Sulawesi, based on the research results there were 52 respondents obtained and based on the results of data processing it can be seen as follows:

a) Respondent characteristics

1. Age characteristics

The research results based on the age of the respondents can be seen in the following table:

Table 1
Distribution of respondents based on age at Motaha District Health Center. South Konawe, Southeast Sulawesi

Age	N	%
29-35	15	28.8
36-43	18	34.6
44-50	7	13.5
> 50	12	23.1
Amount	52	100

Based on the results of field observations, it shows that the highest age group is 36-43 years with 18 (34.6 %) respondents, and the lowest is 44-50 years with 7 (13.5%).

2. Characteristics by gender

Based on the research results, it shows that the gender of the respondents can be seen in the following table;

Table 2
Distribution of respondents based on gender at Motaha District Health Center. South Konawe, Southeast Sulawesi

Gender	N	%
Man	14	26.9
Female	38	73.1
Amount	52	100





The results of field observations showed that based on gender, the highest was female, 38 (73.1%) respondents and the lowest was male, 14 (26.9%) respondents.

3. Characteristics based on education

The research results based on the respondents' education can be seen in the following table:

Table 3
Distribution of respondents based on education level at the Motaha District Health Center. South Konawe, Southeast Sulawesi

Education	N	%
Spk/equivalent	20	38.5
Diploma	24	46.2
Bachelor	8	15.4
Amount	52	100

From the results of research on respondents' education, it shows that the highest education was at the diploma education level, namely 24 (46.2 %) respondents and the lowest was at the undergraduate education level, 8 (15.4%) respondents.

4. Characteristics based on length of service

Based on the distribution of respondents according to the length of work of health workers on duty at the Community Health Center, it can be seen in table 4 as follows:

Table 4
Distribution of respondents based on length of work at the Motaha District Health Center. South Konawe, Southeast Sulawesi

Length of Employment (years)	n	%
≤ 5	4	7.7
> 5	48	92.3
Amount	52	100





The results of the research showed that the highest length of work for respondents was > 5 years of work, 48 (92.3%) respondents and the lowest was 48 (92.3%) of respondents with a work period of \leq 5 years.

b) Research outcome variables

a. Knowledge

From the results of field observations regarding respondents' knowledge can be seen in the following table:

Table 5
Distribution of respondents based on officer knowledge at the Motaha District Health Center. South Konawe, Southeast Sulawesi

Knowledge	N	%
Enough	40	76.9
Not enough	12	23.1
Amount	52	100

Based on the results of field research, it shows that 40 respondents (76.9 %) had sufficient knowledge and 12 respondents (23.1%) had insufficient knowledge.

b. Officer performance

From the results of field observations regarding the performance of respondents can be seen in the following table :

Table 6
Distribution of respondents based on the performance of officers at the Community Health Center Motaha District. South Konawe, Southeast Sulawesi

Officer Performance	N	%
Enough	38	73.1
Not enough	14	26.9
Amount	52	100





The research results showed that the performance of officers in the sufficient category was 38 respondents (73.1 %) while the performance of respondents in the poor category was 14 respondents (26.9%).

c. Facilities and infrastructure

From the results of field observations regarding facilities and infrastructure can be seen in the following table :

Table 7
Distribution of respondents based on facilities and infrastructure at the Motaha District Health Center. South Konawe, Southeast Sulawesi

Facilities and infrastructure	N	%
Enough	50	96.2
Not enough	2	3.8
Amount	52	100

Based on the results of field research, it shows that based on the facilities and infrastructure at the Community Health Center, 50 (96.2%) stated that the facilities and infrastructure were sufficient and 2 (3.8%) respondents stated that the facilities and infrastructure were insufficient.

b. Discussion

The research results show that the knowledge, performance of officers, as well as facilities and infrastructure at the Community Health Center can be seen in the following discussion:

1. Knowledge

Knowledge is one of the determining factors, someone who does not have the general knowledge needed to do a job cannot produce good performance, and vice versa, someone who has high knowledge can easily do their job well.

Knowledge is the result of knowing and this occurs after people sense. This knowledge can be obtained from one's own experience or from the





experience of others. Therefore, knowledge can have a strong positive effect on decision making in providing health services to patients in need. Based on the results of field research, it shows that 40 respondents (76.9 %) had sufficient knowledge and 12 respondents (23.1%) had insufficient knowledge.

Looking at the data above, it shows that in community health centers, the average knowledge of officers is sufficient, where they understand the work they carry out in accordance with the educational background of the respondents. Apart from that, officers also understand that the measurement of service quality depends on patient satisfaction, namely the perceived service results in relation to their expectations of service.

The results of this research are in line with the results of research presented by Maryaningsih (2005) at the District General Hospital. Bulukumba, namely 29 (76.3 %) who said it was sufficient.

2. Officer performance

According to Mangkunegara (2007) Performance is the work result that can be achieved by an employee or group of employees in an organization, in accordance with their respective authority and responsibilities, in an effort to achieve the goals of the organization concerned legally, without violating the law and in accordance with morals and ethics.

The quality of health services actually shows the appearance of health services which is known as output (outcome), namely the final results of the activities and actions of professional health workers towards patients and provides facts that health services are good and of good quality.

The results obtained in this study showed that the performance of officers was in the adequate category as many as 38 respondents (73.1 %), this was because the officers really paid attention to the service to patients who came to visit the Puskesmas, another factor that influenced it was the patient service time at the general polyclinic at the Community Health Center





is appropriate. Doctors who provide services are always at the health center so that patients do not have to wait too long to receive treatment. Apart from that, another form of attention is that the officers always guide patients to receive services from registration to examination by a doctor.

The results of the research are in accordance with the results of research obtained by Amiruddin, 2007, that the quality of service is influenced by the performance of officers at the community health center. The results of this research are also supported by the results of research conducted by Faizin (2008), regarding the relationship between the level of education and length of work of nurses with the performance of nurses at RSUs. Pandan Arang, Boyolali Regency, that the amount of nursing work is quite greater, namely 79.6% compared to the less performance of nurses.

3. Facilities and infrastructure

The research results showed that 50 respondents (96.2%) stated that the facilities and infrastructure at the Community Health Center were sufficient, this is because the management at the Community Health Center always tries to meet service needs, especially basic health services which are an obligation that must be provided by the Community Health Center.

The results of this research are in accordance with the research results obtained by Erna, 2012, that based on the results of logistic regression analysis, it shows that only the facilities and infrastructure variables have a statistically significant relationship. From the results of this analysis then It was determined that facilities and infrastructure are related to the quality of ANC services at the Makassar City Health Center. This can be seen from the statistical value of the Wald test which has a significant value smaller than 0.05. From the results of the Wald statistical value, it was found that the facilities and infrastructure factor ($wald = 5.42$) was the most dominant factor related to the quality of service at the Community Health Center.





4. Conclusion

Based on the results of research on the quality of health worker services at the Motaha District Health Center. South Konawe, Southeast Sulawesi can be concluded as follows:

1. Respondents' knowledge at the Motaha District Health Center. South Konawe, Southeast Sulawesi is enough.
2. The results obtained in this study show that the performance of officers in the adequate category is 73.1%.
3. Facilities and infrastructure at the Motaha District Health Center. South Konawe, Southeast Sulawesi, 96.2% of respondents said it was enough.

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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