

Analysis Of Patients Satisfaction Programs Of Social Security Providers Based On Health Services Satisfaction At The Hospital Of Dr. Kariadi Semarang

Jati Listiyanto Pujo
Universitas Negeri Semarang Indonesia
jatilistiyantopujo@gmail.com

Sugiyono
Universitas Negeri Semarang Indonesia

Tri Joko Raharjo
Universitas Negeri Semarang Indonesia

Rusdarti
Universitas Negeri Semarang Indonesia

Abstract—This study focuses on several problems that occur due to the mismatch between the quality of health worker services consisting of doctors, nurses, and hospital administrators towards patient satisfaction, especially for patients with the Social Security Administration (BPJS) program. The main problem to be revealed in this study is how the factual conditions between nurse and doctor satisfaction on patient satisfaction of the Social Security Administering Body program in receiving health services. The research method used is descriptive qualitative research, where the main objective is to make descriptions, pictures or paintings systematically and the relationships between the phenomena being investigated. This study uses primary data that comes from direct observation of the research subject, using a questionnaire distributed to respondents, for further analysis using multiple linear analysis which focuses on five dimensions of patient and health service satisfaction, namely: 1) tangible; 2) reliability; 3) responsiveness; 4) assurance; and 5) empathy. The results of the study on 40 patient, 20 doctor and 20 nurse as respondents, stated that the doctor and nurse services at Dr. Kariadi = 91.24%. Based on the dimensions of patient and health service satisfaction, the results of the research data analysis showed that satisfied patients would: 1) reliability = 90.13%; 2) responsiveness = 97.3%; 3) assurance = 91.9%; 4) tangible = 86.32%; and 5) empathy = 88.2%. Based on the results of these studies, it can be concluded that BPJS program patients are generally satisfied with the health services provided by doctors and nurses, especially in the responsiveness dimension. In general, if health workers, especially doctors and nurses feel satisfied, there will be an increase in health services, which directly affects patient satisfaction.

Keywords: analysis, BPJS, service, satisfaction, health service

I. INTRODUCTION

Quality hospital services are one of the goals the hospital wants to achieve. The achievement of human resource performance is one of the benchmarks for the quality of health services

in hospitals. Health workers, especially doctors and nurses in hospitals are the spearhead of service, patients assess whether or not a hospital service relies on the services provided by doctors and nurses.

To achieve quality and high-performance services, it is necessary to have professional health workers, have intellectual, technical and interpersonal abilities, work based on standards, and pay attention to ethical and moral principles. Hospitals in recruiting field medical personnel must be more rigorous and professional in order to achieve quality services through nursing services, because the quality of a health worker can be determined at the beginning of recruitment.

The quality of health services is an important factor in service utilization health. Assessment of service quality Good practice is not limited to physical healing, but also to the attitude, knowledge and skills of officers in giving service, communication, information, courtesy, punctual, responsive and available facilities as well as an adequate physical environment. Satisfaction is one very important indicator in health services. The patient will feel satisfied if the health service performance obtained is equal to or exceeds expectations

One of the important things in human resource management in a hospital is the creation of job satisfaction for health workers or employees. Employee satisfaction is very important for the hospital to pay attention to, because employee satisfaction will affect employee productivity levels. Work productivity will affect the success and quality of health services in a hospital. If the employee or employee is more positive about the work environment, he will feel satisfied, but if the employee is getting more negative on the work environment then he is not satisfied.

The level of satisfaction of health workers, especially doctors and nurses, should be considered by the hospital human resource management. Doctors and nurses are health workers who interact

with patients for a long time. Doctors and nurses also hold an important key in informing the patient's condition. To maintain the quality of health services, hospital human resource management must maintain the level of satisfaction of health workers, especially doctors and nurses.

BPJS or Social Security Administering Bodies are legal entities established by law to administer social security programs. BPJS functions to organize health insurance programs. Health insurance according to the Law is administered nationally based on the principles of social insurance and the principle of equity, with the aim of ensuring that participants receive health care benefits and protection in meeting basic health needs (Kemenkes RI, 2014). Previously there had been research on services for BPJS patients, the actual results of which were that the BPJS patients felt helped because they did not pay anymore costs, but the services provided were still not optimal, including the service that was still long (waiting time for queues and registration) as well as patients complaining about the referral procedure which cannot be made directly, this is difficult for the patient (Dewi & Firdaus, 2015).

Research conducted by Fenny, Enemark, Asante, & Hansen (2014) with a national health insurance background shows that the accessibility received by the community is higher with the existence of mutual cooperation-based insurance, people who need health facilities can get it cheaply. and it is easy with the existence of national insurance in the health sector, the government tries to open up more adequate health access with the existence of BPJS. The research also supports that national health insurance can encourage general public satisfaction at not being anxious anymore when suffering from a disease due to outpatient and inpatient health costs It has been covered all through insurance. Another study by Fenton, Jerant, Bertakis, & Franks (2012) shows that the use of health insurance can increase user or participant satisfaction as it can change with adequate facilities and reduce costs incurred if not use health insurance, however this research shows that the massive use of insurance in a society shows that the number of recipes used has increased nationally, so that the need for drugs continues to grow but the mortality rate is higher. This study shows that contradiction with previous research on the use of national health insurance can encourage a better level of service so that when a patient visits for treatment he will get a taste of the drug and help cure the illness he is suffering from. When a patient has received medication and obtaining sensitive healing will reduce a higher mortality rate so that the existence of national health insurance based on mutual cooperation can reduce patient mortality.

When patients pay dues and visit hospitals or use health facilities, it increases satisfaction in

using health insurance. This is supported by research indicates that when someone pays but doesn't use health facilities identified reduced satisfaction in using insurance (Mohammed, Sambo, & Dong, 2011). This research implicitly reveals that a user will be satisfied when he can use health facilities because he has paid dues every certain period.

National health insurance does not only have an effect on patient satisfaction as participants, but it is necessary to pay attention to other stakeholders, namely doctors and nurses as parties who provide services in the form of treatment to patients. Previous studies have discussed a positive relationship between the quality of hospital services and the satisfaction of patients who are treated both undergoing outpatient care and inpatients who get optimal service when consult a doctor or are undergoing medical treatment, will feel the real satisfaction is higher than the imagined expectation. Patients feel satisfaction when the hospital is able to provide good services optimal to help recovery from illness suffered by patients (Gill & White, 2009; Downey-Ennis, 2011; Vaz, 2018). Health insurance that is administered by the state has an important role to provide health support for the entire community. Many Indonesians who use the BPJS as personal protection from illness suffered by government policies state that every citizen is obliged to become a member of the BPJS. In other countries BPJS is similar to a national insurance scheme organized by the state to cover or guarantee health for all citizens. BPJS is national insurance in the health sector with participants the largest in the world because it includes all Indonesian citizens.

When the number of participants is large and the number of human resources as well limited facilities then it will increase the amount of workload or workloads of doctors and other medical personnel to provide services prime to the patient. Nursing doctors and hospital staff who handle it a large number of BPJS patients have a high workload and vulnerable to a negative relationship with job satisfaction, this is evidenced by research shows that the higher the workload, the lower it is job satisfaction received job satisfaction related to the pressure faced by service providers in this case are doctors, nurses and staff. Hospital workload relates to the amount of work handled as a responsibility related to fiqh and and physical in terms of psychologically a doctor, nurse and staff will feel the higher the level stress received because they feel that the job is getting more from a physical point of view, fatigue is a great potential to deal with by medical personnel. The number of drugs available at health facilities sometimes has limitations and is not in accordance with existing national formulations determined that it can affect the services provided by hospital to BPJS patients.

Nurses are an integral part of giving services to patients who are being treated and

consult a doctor nurses provide services by ensuring and monitoring conditions the patient's health so that it can be ensured to be in prime condition when the patient is consulting the doctor the nurse provides services with administer the patient's medical records so that doctors can easily to examine and analyze the patient's condition by looking at the history health when nurses have a high workload this affects the quality of services provided to patients because of this The research is trying to combine previous studies only test patient satisfaction and test the satisfaction of the doctor or nurse for merged into one novelty research.

II. METHOD

The research carried out is included in non-experimental research with data collection carried out prospectively by distributing questionnaires to respondents and analyzed descriptively. The subjects in this study were taken by purposive sampling technique as many as 40 out patients of the BPJS program, 20 doctors and 20 nurses at the General Hospital Dr. Kariadi Semarang.

Data from variables such as patient characteristics (age, sex, education, occupation, participation status) and characteristics of doctors and nurses (age, sex, education, and occupation), as well as aspects of satisfaction dimensions (tangible, reliability, responsiveness, assurance), empathy) was collected by filling out a questionnaire by the respondent and then a descriptive analysis was carried out.

The research data analysis was assessed using a Likert scale with the answer classifications of 5 (very satisfied), 4 (satisfied), 3 (quite satisfied), 2 (dissatisfied) and 1 (very dissatisfied). Then the average value of each of the following dimensions was calculated. This value is related to the range of satisfaction levels between patients and health workers, especially doctors and nurses.

III. RESULT AND DISCUSSION

From a total of 40 respondents from the patient class, the age range of the respondents was 17-72 years with an age range of <30 years of 42% and an age range of > 30 years, of 58%. Based on gender, most of the respondents were female (60.2%). Other patient characteristics data includes education level where most of the respondents are highly educated (48.3%), followed by private employees (28.4%) and the lowest is the unemployed group (23.3%) and all patients use BPJS.

Respondents who came from doctors, amounting to 20 people, had an age gap between 27 - 60 years, with an age range of <30 years, 28% and an age range > 30 years of 72%. Based on gender, 40% of doctor respondents were women and 60% were men. While the respondents who came from nurses,

amounting to 20 people, have a range of ages between 27 - 45 years, with an age range of <30 years, by 45% and an age range > 30 years by 55%. Based on gender, 62% of nurse respondents were female and 38% were male.

The overall satisfaction score assessment shows that the majority of respondents consisting of BPJS patients, doctors and nurses are satisfied with general health services at Dr. Kariadi Semarang, amounting to 91.24%. Based on the dimensions of patient and health worker satisfaction, especially doctors and nurses, the results of the research data analysis showed that satisfied patients would: 1) reliability 90.13%; 2) responsiveness 97.3%; 3) assurance 91.9%; 4) tangible 86.32%; and 5) empathy 88.2%.

Research conducted by WHO in nine developing countries concluded that the largest population using health services was the five-year-old age group (toddlers) and the 30-35 year age group. The same thing in the research conducted by Abdilah AD, where most of the respondents were less than 30 years old. If it is related to the results of the research, it can be said that the productive age group tends to be more demanding and expect a lot more on the quality of health services and are more likely to criticize while in the age group less than 30 years, only 21.8% expressed satisfaction.

One of the factors that shape patient satisfaction is the attention given by nurses to during treatment at the hospital for BPJS patients. Research conducted by Kutney-Lee et al., (2009) shows that patient satisfaction will be greater as a form of performance shown by nurses. When giving proper attention to patients. Nurses will have high hours of work so that is the time dyedicated to the patient to be greater this is to be a great attention to the patient because it can be served with a lot of time and can meet the needs of the patient when certain things happen. The presence of nurses who have more working hours for patients will help heal faster. Nurse who pours out many hours of work to the patient can help with things that are urgently needed to treat patients immediately get certain medical actions.

Communication that exists non-verbally between patient and doctor can support the satisfaction received by the patient because this is closely related to the attention given by the doctor when the patient is in consultation or is suffering pain in the inpatient room (Mast, 2007). The patient also needs attention one given by the doctor is that the doctor listens well and mean it when the patient is describing the symptoms of the disease, what is being suffered this can add to the patient's comfort because it can be given space to tell stories related to the complaints that are being experienced because of the pain so far, therefore the doctor who provides space for the patient to talk and explain in detail the symptoms that are being experienced is able to

provide satisfaction in health services. Patients need a privacy space to be free from worry that the pain suffered is known by others, it is part of the quality services that exist in hospitals that doctors are able to keep related secrets with the current medical condition the patient is suffering from, this is also in the code binding ethics to doctors. Patient condition and medical record is a secret part that can only be known by doctors and families with an interest in understanding the pain suffered by the patient (Lin et al., 2013).

IV. CONCLUSION

Based on the results of these studies, it can be concluded that BPJS program patients are generally satisfied with the health services provided by doctors and nurses, especially in the responsiveness dimension. In general, if health workers, especially doctors and nurses feel satisfied, there will be an increase in health services, which directly affects patient satisfaction.

REFERENCE

- [1] Downey-Ennis, K. (2011). Patient satisfaction. *International Journal of Health Care Quality Assurance*.
https://doi.org/10.5005/jp/books/14122_132
- [2] Fenny, A. P. okua., Enemark, U., Asante, F. A., & Hansen, K. S. (2014). Patient satisfaction with primary health care - a comparison between the insured and non-insured under the National Health Insurance Policy in Ghana. *Global Journal of Health Science*.
<https://doi.org/10.5539/gjhs.v6n4p9>
- [3] Fenton, J. J., Jerant, A. F., Bertakis, K. D., & Franks, P. (2012). The cost of satisfaction: A national study of patient satisfaction, health care utilization, expenditures, and mortality. *Archives of Internal Medicine*.
<https://doi.org/10.1001/archinternmed.2011.1662>
- [4] Firdaus, F.F. dan Dewi, A. (2015). Evaluasi Kualitas Pelayanan terhadap Kepuasan Pasien Rawat Jalan Peserta BPJS di RSUD Panembahan Senopati Bantul. *JMMR (Jurnal Medicoeticolegal dan Manajemen Rumah Sakit)*,4(2).
- [5] Gill, L., & White, L. (2009). A critical review of patient satisfaction. *Leadership in Health Services*.
<https://doi.org/10.1108/17511870910927994>
- [6] Kementerian Kesehatan. (2014). Peraturan Menteri Kesehatan Republik Indonesia nomor 75 Tahun 2014 tentang PusatKesehatan Masyarakat.
- [7] Kutney-Lee, A., McHugh, M. D., Sloane, D. M., Cimiotti, J. P., Flynn, L., Neff, D. F., & Aiken, L. H. (2009). Nursing: A key to patient satisfaction. *Health Affairs*.
<https://doi.org/10.1377/hlthaff.28.4.w669>
- [8] Lin, Y. K., Lee, W. C., Kuo, L. C., Cheng, Y. C., Lin, C. J., Lin, H. L., ... Lin, T. Y. (2013). Building an ethical environment improves patient privacy and satisfaction in the crowded emergency department: A quasi-experimental study. *BMC Medical Ethics*.
<https://doi.org/10.1186/1472-6939-14-8>
- [9] Mast, M. S. (2007). On the importance of nonverbal communication in the physicianpatient interaction. *Patient Education and Counseling*.
<https://doi.org/10.1016/j.pec.2007.03.005>
- [10] Mohammed, S., Sambo, M. N., & Dong, H. (2011). Understanding client satisfaction with a health insurance scheme in Nigeria: Factors and enrollees experiences. *Health Research Policy and Systems*.
<https://doi.org/10.1186/1478-4505-9-20>
- [11] Vaz, N. (2018). Patient satisfaction. In *Healthcare Administration for Patient Safety and Engagement*.
<https://doi.org/10.4018/978-1-5225-3946-9.ch010>