UPAYA PENINGKATAN KEPUASAN PASIEN ASKESKIN BERDASARKAN HASIL ANALISIS KESENJANGAN DAN 5 MENURUT PARASURAMAN

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ABSTRACT

The visitation of *Askeskin* (health insurance for the poor) holders at the working area of Gresik Duduk Sampeyan Public Health Center (PHC) from January to December 2007 was 22.2% which was way below the standard of the Regional Health Office.

The study aims at formulating a recommendation for efforts to increase the patient visitation (*Askeskin* holders) based on the result of quality gap analysis at Gresik Duduk Sampeyan PHC. This is an observational research conducted cross-sectional with samples from PHC personnel (medical, paramedical and non-medical) and *Askeskin* holders. There are 30 persons from the PHC and 70 family heads (of *Askeskin* holders) as respondents, taken by cluster random sampling. Data processing is using descriptive statistics frequencies, afterwards data was analyzed according to gap 1 and gap 5.

The result reveals that the services rendered to *Askeskin* patients and patient's expectation show gap at RATER dimension, with gap value of reliability dimension (0.83), assurance (-0.11), tangible (0.17), empathy(-0.011), and responsiveness (0.17). It means that the patients are dissatisfied with the services of reliability, tangible and responsiveness dimensions. PHC personnel perception on patient's expectation shows gap in tangible (-0.34), empathy (-0.18) and responsiveness (-0.04) dimensions. It describes that PHC personnel does not comprehend the expectation of *Askeskin* holders of Gresik Duduk Sampeyan PHC.

Recommendations for efforts to increase patient's visitation (*Askeskin* holders) based on the result of quality gap analysis are: to discipline PHC service–hours and to give punishment if violated; to propose an increase of service fee; to give sanction to midwives and doctors who practice during PHC working hours; to strengthen personnel commitment of rendering satisfactory services to patients; to periodically train service excellence, to do monitoring and evaluation, to perform a training for good and polite communication technique; to appraise staff performance every 3 months; to give rewards for excellent work performance; to regulate visiting hours; to change blanket and sheet every 3 days; to put mattress in the sun every month and dry it if wet; to close the gate until the visiting hours; to optimize task and clarify job description of cleaning service personnel; to change light bulb with higher watts; to paint white the wall and ceiling; to suggest new uniforms; to do intensive communication with patients; to provide time; to hold a service excellence training;

to propose additional personnel; to do more interaction with patients; and to do quick respond by giving customer-focused service.

Keywords: *Askeskin* patient, gap, RATER dimension

ABSTRAK

Kunjungan peserta Askeskin di wilayah kerja Puskesmas Duduk Sampeyan Gresik pada bulan Januari-Desember 2007 adalah sebesar 22,2% di bawah standar yang telah ditetapkan Dinas Kesehatan. Tujuan penelitian ini adalah untuk menyusun rekomendasi upaya peningkatan kepuasan pasien Askeskin berdasarkan hasil analisis *gap* kualitas di Puskesmas Duduk Sampeyan Gresik.

Penelitian ini merupakan penelitian observasional, sedangkan menurut waktu penelitian termasuk *cross sectional*. Sampel penelitian ini adalah petugas (medis, paramedis dan non medis) di Puskesmas sebanyak 30 orang dan 70 KK peserta Askeskin di wilayah Puskesmas Duduk Sampeyan Gresik.sejumlah 70 responden. Cara penentuan sampel menggunakan teknik *cluster random sampling*. Pengolahan data dengan menggunakan analisis *descriptive statistics frequencies*. Kemudian data dianalisis menurut *gap* 1 dan *gap* 5.

Hasil penelitian menunjukkan bahwa jasa yang diharapkan pasien dengan jasa yang diterima pasien Askeskin terdapat *gap* pada dimensi *RATER*, dengan nilai *gap* pada dimensi *reliability* (0,83), *assurance* (-0,11), *tangible* (0,17), *empathy* (-0,01) dan *responsiveness* (0,17). Ini berarti pasien tidak puas terhadap pelayanan dari dimensi *reliability*, *tangible* dan *responsiveness*. Persepsi petugas terhadap harapan pasien, terdapat *gap* pada dimensi *tangible* (-0,34), *empathy* (-0,18) dan *responsiveness* (-0,04). Ini berarti petugas belum memahami harapan pasien Askeskin Puskesmas Duduk Sampeyan Gresik.

Rekomendasi upaya peningkatan kepuasan berdasarkan hasil analisis *gap* kualitas adalah: mendisiplinkan jam buka dan sanksi pelanggaran, mengusulkan menaikkan jasa pelayanan petugas, pengadaan pelatihan *service excellence* secara berkala dan dilakukan monitoring dan evaluasi, pemberian penghargaan atas karyawan yang berprestasi, penerapan peraturan jam berkunjung, sprei dan selimut diganti tiap 3 hari dan kasur dijemur 1 bulan sekali, menutup pintu masuk selain jam berkunjung, mengoptimalkan kinerja petugas kesehatan, mengganti lampu dengan watt yang lebih tinggi, menjalin komunikasi yang lebih intensif dengan pasien, meluangkan waktu lebih banyak untuk mendengar keluhan pasien dan memberi solusi yang tepat, pengadaan pelatihan *service excellence*, semua pihak cepat memperbaiki dengan memberikan pelayanan berfokus pelanggan.

Kata kunci: pasien Askeskin, kesenjangan (*gap*), dimensi *RATER*.