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**Extended Abstract Dr Erna Setijanigrum for ICoPS 2019**

1 message

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Wed, Nov 13, 2019 at 6:30 PM

Dear Committee,

I would like to send my conference paper entitled "EXTRA ROLE BEHAVIOUR OF THE APPARATUS IN THE EFFORTS TO PROVIDE BETTER SERVICE TO THE ELDERLY: A STUDY OF THE INNOVATION OF "SANTUN LANSIA" PROGRAM IN INDONESIA" attached to this email. Thank you for your kind attention.

Best Regards,

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# EXTRA ROLE BEHAVIOUR OF THE APPARATUS IN THE EFFORTS TO PROVIDE BETTER SERVICE TO THE ELDERLY: A STUDY OF THE INNOVATION OF "SANTUN LANSIA" PROGRAM IN INDONESIA

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## ABSTRACT

To provide health services for the elderly, the Ministry of Health of the Republic of Indonesia launched service innovations at the community health center called "Santun Lansia". " Santun Lansia " is a promotive, preventive, curative, and rehabilitative service for the elderly with the concept of "one stop service". The uniqueness of this service is to focus on politeness, which is serving the elderly with a smile, friendly, patient, and respect them as parents. This study aims to see how the application of the innovation "Courtesy Elderly" and how the apparatus performs extra roles in carrying out their duties. This research uses descriptive qualitative method. The study sites were in six community health center representing large cities, medium cities and small cities. The results of this study indicate that the innovation "Santun Lansia" consists of innovation service processes, service products, service methods, service systems, and service policies. This research also shows that in carrying out their duties, the community health center apparatus must carry out extra-roles. The conclusion obtained is that both officials from the large-scale city health center, medium city, and small city must carry out the same extra role including aspects of altruism, civic virtue, conscientiousness, courtesy and sportsmanship.

Keyword: Extra role, apparatus, service, elderly, "elderly polite"

## INTRODUCTION

Today, Indonesia is an aging population, because the number of elderly is more than 7%. Based on Susenas data, the elderly in Indonesia were 9.3% in 2017. It is estimated that in 2020 (10%), 2025 (11.8%), 2030 (13.8%) and 2035 (15.8%) ). The increase in the number of elderly is due to an increase in Indonesia's life expectancy, from 70.8 years in 2017 to 72.2 years in 2035. The five provinces in Indonesia that have the highest elderly population are Yogyakarta (12.48%), East Java (9.36%), Central Java (9.26%), Bali (8.77%), and West Java (7.09%).

One of the problems of the elderly is health problems. As we get older, the elderly are vulnerable to chronic degenerative diseases. Elderly experiencing stroke (Kang, 2015), cardiovascular (Wang et al, 2015) heart valve disease (Cardiol, 2019), osteoporosis (Katherine., Et.al, 2000), hypertension (Philip., Et.al, 2005), diabetes (Nilka, 2018).

The Ministry of Health of the Republic of Indonesia has launched an innovative service for the elderly in the community health center called "Santun Lansia". "Santun Lansia" is a promotive, preventive, curative and rehabilitative service for the elderly. This service is carried out at the community health center with the concept of "one stop service". The uniqueness of this service is to focus on politeness, which is serving the elderly with a smile, friendly, patient, and respect them as parents. In carrying out their duties, a health officer often has to carry out duties outside of their formal duties. So, the authorities must carry out extra roles in carrying out their duties. Extra roles are carried out by a nurse (Talat et.al, 2017; Cheng et.al, 2017) emergency physician (ES Williams et.al, 2007), nursing staff (Nistha Malik et.al, 2017), doctors (James, 2016), and employees in health care organizations (Wen HY, 2010).

This study aims to see how the application of the innovation "Santun Lansia" in community health centers. And how is the apparatus carrying out extra-roles in providing services to the elderly.

## RESEARCH METHOD

This research uses descriptive qualitative methods (Dann & Neuman, 2016), which is an approach to explore and understand the meaning of individuals or groups as a social or human problem (Creswell, 2017). Data collection techniques are three ways, which are observation, interviews, and documentation (Yin, 2011). Data analysis includes three steps from (Matthew B. Miles, et al, 2014) data collection, data display, until conclusions. The research was conducted at the Medokan Ayu

community health center in Surabaya and the Sidoarjo community health center in Sidoarjo representing large cities, Sobo community health center in Banyuwangi and Summersari community health center in Jember representing medium cities, Pandian community health center in Sumenep and Nganjuk Pusk community health center esmas in Nganjuk representing small towns. Informants in this study were 42 people consisting of 12 doctors and 30 nurses.

## FINDINGS AND DISCUSSIONS

### Innovation of Elderly Service : Santun Lansia

Mulgan and Albury (2003) said that : “Successful innovation is the creation and implementation of new processes, products, service and methods of delivery, which result in significant improvements in outcomes efficiency, effectiveness or quality”. In line with the opinion of Mulgan and Albury, the innovations of "Santun Lansia" at the community health center of Medokan Ayu, Sidoarjo, Sobo, Summersari, Pandian, and Nganjuk include the following:

- a. Service Process Innovation: the change in procedure used is to speed up services for the elderly by providing a special queue number for the elderly that is set automatically from the printer.
- b. Service Product Innovation: changing the product design by creating a service innovation called "Santun Lansia". The word "Santun" means serving the elderly with a smile, friendly, patient and respectful as a parent.
- c. Service Method Innovation: a new way for elderly services by providing special services in the form of segregation of services starting from queue numbers in polyclinics, pharmacies and laboratories, consultation rooms, and seating at the waiting room.
- d. Service System Innovation: the new method used is to apply the concept of "one stop service".
- e. Service Policy Innovation: The new rules applied are vision, mission, motto, and work culture which is oriented towards elderly services.

### Extra Role Behavior of Apparatus

Extra Role Behavior, which is commonly called Organizational citizenship behavior (OCB) is an extra individual behavior, which is not directly or explicitly recognized in a formal work system, and which in the aggregate is able to increase the effectiveness of organizational functions (Organ, 1988). Organizations generally believe that to achieve excellence must strive for the highest individual performance, because basically individual performance influences team or work group performance and ultimately affects overall organizational performance.

Good organizational performance requires the behavior of its members as expected by the organization. The behavior demanded by the organization today is not only in-role behavior, but also extra-role behavior. This extra-role behavior is also called Organizational Citizenship Behavior (OCB). Borman and Motowidlo (1993) state that OCB can improve organizational performance because this behavior is a "lubricant" of the social engine in the organization, in other words with this behavior, social interaction with members of the organization is smooth, reducing the occurrence disputes, and improve efficiency. This behavior came because of feelings as members of the organization and feel satisfied when it can do something more to the organization. Feelings as members and satisfied when doing something more only happens if someone has a positive perception of the organization. OCB is a person's actions outside his obligations, does not pay attention to self-interest (Sloat, 1999), does not require a job description and formal reward system, is voluntary in working with colleagues and receive special orders without complaints (Organ and Konovski, 1989).

The large number of services that must be provided by Puskesmas organizers "Elderly Elderly" requires puskesmas officials to carry out extra role behavior. From the results of the research that has been carried out, as many as 10 (ten) types of tasks have been identified that require extra role behavior from the puskesmas apparatus. Table 1. below shows the application of extra role behavior from the Puskesmas apparatus

Table 1. Application of Extra Role Behavior

No	Type of Innovation	Type of Activity	Extra Role Behavior Action
1	Service Process	Provision of special queue numbers for the elderly.	<ul style="list-style-type: none"> <li>▪ The parking attendant shows the direction of the road to the elderly to get to the elderly's special registration machine</li> <li>▪ Cleaning service, ambulance driver security guard helps the apparatus registration section by helping the elderly push the registration machine button.</li> </ul>
2	Service Product	Serve the elderly	<ul style="list-style-type: none"> <li>▪ Parking attendants as the earliest officers to meet the</li> </ul>

		with a smile, friendly, patient and respectful as a parent.	<p>elderly must be extra smile, friendly, patient, and respect the elderly.</p> <ul style="list-style-type: none"> <li>▪ Security guards as the earliest officers who meet with the elderly must be extra smile, friendly, patient, and respect the elderly.</li> <li>▪ Doctors and nurses must patiently answer elderly questions.</li> </ul>
3	Service Method	Separation of queue numbers in polyclinics, pharmacies, laboratories, consultation rooms, and waiting room seats.	<ul style="list-style-type: none"> <li>▪ Security guards must help elderly people to a special room provided for the elderly</li> <li>▪ Nurses must take the elderly from the waiting room, doctor's consultation room, pharmacy, to the parking lot.</li> <li>▪ Nurses assist with assignments in pharmacies and laboratories for all elderly needs</li> </ul>
4	Service System	the application of the concept of " <i>one stop service</i> ".	<ul style="list-style-type: none"> <li>▪ Doctors, nurses, cleaning services, and security guards take the elderly from one service room to another.</li> </ul>
5	Service Policy	Vision, mission, motto, and work culture oriented to the service of the elderly.	<ul style="list-style-type: none"> <li>▪ Doctors, nurses, administrative officers, cleaning services, security guards, and parking attendants must be polite to elderly patients</li> </ul>

Source: data analysis

According to Organ (1988), OCB is built from five dimensions, each of which is unique, which are:

1. *Altruism*, which is willingness to help coworkers in completing their work in unusual situations,
2. *Civic virtue*, which is concerning the support of workers for administrative functions in the organization,
3. *Conscientiousness*, which is describe workers who carry out their duties and responsibilities more than what is expected,
4. *Courtesy*, which is behavior alleviates problems related to work faced by others,
5. *Sportsmanship*, which is describes the sportsmanship of a worker towards the organization.

Extra Role Behavior that has been applied by the apparatus when connected with five dimensions of Extra Role Behavior is as shown in Table 2.

Table 2. Analysis of the Five Dimensions of Extra Role Behavior

No	Type of Innovation	Extra Role	Extra Role Dimension
1	Service Process	<ul style="list-style-type: none"> <li>▪ The parking attendant shows the direction of the road to the elderly to get to the elderly's special registration machine</li> </ul>	Civic virtue, Conscientiousness, Courtesy, Sportsmanship
		<ul style="list-style-type: none"> <li>▪ Cleaning service, ambulance driver security guard helps the apparatus registration section by helping the elderly push the registration machine button.</li> </ul>	Altruism, Civic virtue, Conscientiousness, Courtesy
2	Service Product	<ul style="list-style-type: none"> <li>▪ Parking attendants as the earliest officers to meet the elderly must be extra smile, friendly, patient, and respect the elderly.</li> </ul>	Conscientiousness, Courtesy, Sportsmanship
		<ul style="list-style-type: none"> <li>▪ Security guards as the earliest officers who meet with the elderly must be extra smile, friendly, patient, and respect the elderly.</li> </ul>	Conscientiousness, Courtesy, Sportsmanship
		<ul style="list-style-type: none"> <li>▪ Doctors and nurses must patiently answer elderly questions.</li> </ul>	Civic virtue, Conscientiousness, Courtesy, Sportsmanship
3	Service Method	<ul style="list-style-type: none"> <li>▪ Security guards must help elderly people to a special room provided for the elderly</li> </ul>	Conscientiousness, Sportsmanship
		<ul style="list-style-type: none"> <li>▪ Nurses must take the elderly from the waiting room, doctor's consultation room, pharmacy, to the parking lot.</li> </ul>	Altruism, Conscientiousness, Courtesy, Sportsmanship
		<ul style="list-style-type: none"> <li>▪ Nurses assist with assignments in pharmacies and laboratories for all elderly needs</li> </ul>	Altruism, Conscientiousness Civic virtue, Sportsmanship

4	Service System	<ul style="list-style-type: none"> <li>Doctors, nurses, cleaning services, and security guards take the elderly from one service room to another.</li> </ul>	Altruism Civic virtue, Conscientiousness, Courtesy, Sportsmanship
5	Service Policy	<ul style="list-style-type: none"> <li>Doctors, nurses, administrative officers, cleaning services, security guards, and parking attendants must be polite to elderly patients</li> </ul>	Conscientiousness, Courtesy, Sportsmanship

Source: data analysis

## CONCLUSION

Innovation "Santun Lansia" implemented by the community health center in the context of providing services to the elderly has made the authorities carry out extra role behavior in carrying out their duties. There was no difference in extra roles between officials in large, medium-sized city and small-town health centers. All officers apply extra role behavior including aspects of Altruism, Civic virtue, Conscientiousness, Courtesy and Sportsmanship.

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