

Original Research Article

Quality of health services during the pandemic COVID-19 (Descriptive study at the Pontap community health center in Palopo City)

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ABSTRACT

Background: During the COVID-19 pandemic that has hit the world including the Indonesia since March 2020, it may not reduce the quality of public health services at the Community Health Center for visiting people on the one hand, however, on the other hand, it is still necessary to prioritize the safety of patients and health workers. Health services at the Community Health Center during the COVID-19 Pandemic will be very different from the situation before COVID-19.

Methods: The research was conducted using quantitative research with a descriptive approach which was carried out at the Pontap Community Health Center, Palopo City for 3 months, namely September to November 2020.

The population in this study were all patients who visited the Pontap Community Health Center in Palopo City at the time of the study with a sample of 130 people who were determined using purposive sampling technique.

Results: The results of the study showed the reliability of health workers in the good category was 93.8%, the health worker assurance in the good category was 90.0%, tangibles displayed by health workers was more in the good category, namely 88.5%, empathy for health workers was 93.8%, good responsiveness of 90.0%.

Conclusions: So it is concluded to provide recommendations, namely for health workers to maintain professionalism at work, especially during the COVID-19 pandemic and increase their attention to patients in terms of building good communication between health workers and the public.

Keywords: COVID-19, Health Service, Pandemic, Quality

INTRODUCTION

Health development is essentially an effort undertaken by all components of the nation Indonesia, which aims to increase awareness, willingness and ability of healthy life for everyone in order to realize the degree of the highest possible public health, as an investment for the development of human resources and socially productive economical.¹

The Healthy Indonesia Program is the main program in health development launched by the Ministry of Health in the 2015-2019 period with the aim of increasing the health status and nutritional status of the community

through health and community empowerment efforts supported by financial protection and equalization of health services.

Health care as one of the main parts in Indonesia healthy program dealing with the challenge to include the policy of globalization with the sophistication of its information because of technological advance. One of the health service places is the Community Health Center, abbreviated as the Community Health Center. Based on the Regulation of the Minister of Health Number 43 of 2019 concerning Community Health Centers, it is stated that the Community Health Center is a health service facility that organizes public health efforts and first-level

individual health efforts, by prioritizing promotive and preventive efforts in its working area.²

In order to maintain the quality of health services at the Public Health Center, the government through the Ministry of Health of the Republic of Indonesia issued a regulation of the Minister of Health No. 46 of the Ministry of Health of the Republic of Indonesia concerning the Accreditation of Public Health Centers, Primary Clinics, Independent Doctor Practices, and Independent Dentist Practices the goal is to improve the quality of service and patient safety.¹

Therefore, the Pontap City Palopo Community Health Center has the responsibility to improve the quality of primary services for the general public and for patients who visit the Pontap Community Health Center in particular, so that patients get better health services, thus the degree of public health in the working area of the Pontap Community Health Center will increase.

During the COVID-19 pandemic that has hit the world including the Indonesia since March 2020, it may not reduce the quality of public health services at the Community Health Center for visiting people on the one hand, however, on the other hand, it is still necessary to prioritize the safety of patients and health workers. Health services at the Community Health Center during the COVID-19 Pandemic will be very different from the situation before COVID-19. Community Health Center's management is expected to need to set more stringent security procedures in which the infection control protocol (PPI) was followed according to the standard that has been set.

According to the report of Public Health Center Pontap Palopo, data showed visits in 2018 with details of the number of patient visits as many as 16 106 people, increased in 2019 with a total of 17 174 people and in 2020 which is when the pandemic COVID-19 decreased quite dramatically namely as many as 11,609 people.³

Based on the above problems, research is needed which aims to obtain an overview of the quality of health services at the Pontap Community Health Center during the COVID-19 pandemic based on the dimensions of reliability, assurance, tangibles, empathy, and responsiveness. The selection of this dimension is based on the concepts expressed by Parasuraman et al.⁶

The purpose of this study is to obtain an overview of the quality of health services during the COVID-19 pandemic at the Pontap City Health Center Palopo in 2020 based on the dimensions reliability, assurance, tangible, empathy, and responsiveness.

METHODS

This research was conducted using quantitative research with a descriptive approach, namely to find out a

description of the quality of health services at the Pontap Community Health Center in Palopo City during the COVID 19 pandemic. This research was conducted at the Pontap Community Health Center, Palopo City for 3 months, namely September to November 2020.

The population of this study were all patients who visited Puskesmas Pontap, Palopo City at the time of the study.

Determination of the sample used is nonprobability sampling with purposive sampling technique. The use of purposive sampling technique was chosen because not all samples have criteria that match the problem under study. The researcher chose purposive sampling technique by determining certain considerations or criteria that must be met by the samples used in this study. The total sample size is 130 people with inclusion criteria, namely patients aged >19 years, willing to be respondents and provide answers. Meanwhile, the exclusion criteria were that patients could read and write.

This study upholds the principles of research ethics, namely that respondents are assured that their participation in research or the information that has been given will not be used in any way that can harm the respondent in any form. In addition, there is informed consent stating that the data obtained will only be used for the development of knowledge and to maintain the confidentiality of respondents in any form.

Data collection techniques in this study consisted of primary data collection, namely data obtained through direct interviews with respondents through questionnaires and secondary data collection through data collection monthly and annual reports of the Pontap Community Health Center. During this data collection, researchers and the data collection team applied health protocols, namely always wearing a mask, keeping a minimum distance from respondents of 1 meter, and always washing hands using hand sanitizer or soap.

Data that has been collected and data processing is carried out, then analyzed by univariate. The formula used is:

$$P = \frac{f}{n} \times 100\%$$

Information:

P = percentage

f = number of correct answers

n = number of questions.

RESULTS

Based on the results of data collection and processing, the description of the data presentation consisting of a

frequency table accompanied by narrative explanations is as described below:

Characteristics of respondents

The characteristics in this study include gender, age, education and occupation.

Gender

Table 1: Distribution of respondents by gender at the Pontap community health center in 2020.

Gender	N	%
Man	50	38.5
Women	80	61.5
Total	130	100

Table 1 above shows that generally the respondents are women, namely 80 people (61.5%) and men as many as 50 people (38.5%)

Age group

Table 2: Distribution of respondents by age group at the Pontap community health center in 2020.

Age Group (years)	N	%
<19	15	11.5
20 - 29	35	26.9
30 - 39	25	19.2
40 - 49	14	10.8
50 - 59	24	18.5
≥ 60	17	13.1
Total	130	100

Table 2 shows that the most respondent age group is the 20-29 age group as many as 35 people (26.9%) and the lowest is the 40-49 years age group, namely 14 people (10.8%).

Level of education

Table 3: Distribution of respondents by level of education at the Pontap community health center in 2020.

Level of education	N	%
Primary school	9	6.9
Junior High School	25	19.2
High school	50	38.5
College	46	64.6
Total	130	100

Table 3 shows that the education level of respondents with a number of most the high school is 50 people (38.5%) while the number of education level lows the Primary school were 9 people (6.9%).

Type of work

Table 4: Distribution of respondents by type of work at the Pontap health center in 2020.

Type of work	N	%
Does not work	40	30.8
Housewife	13	10.0
Government employees	30	23.1
General employees	20	15.4
entrepreneur	22	16.9
Farmer	5	3.8
Total	130	100

Table 4 shows that generally the respondents who do not work are 40 people (30.8%), while the respondents who work 35 are mostly civil servants, namely 30 people (23.1%) and the lowest respondents who work as farmers are 5 people (3,8 %).

Distribution of respondents to the variables

Reliability

Table 5: Distribution of respondents according to staff reliability at the Pontap community health center in 2020.

Reliability	N	%
Good	122	93.8
Less	8	6.2
Total	130	100

Table 5 shows that the respondents who stated that the reliability of the officers was good were 122 people (93.8%) while the respondents who stated that the reliability of the officers was less were 8 people (6.2%).

Assurance

Table 6: Distribution of respondents according to assurance officers at the Pontap community health center in 2020.

Assurance	N	%
Good	117	90.0
Less	13	10.0
Total	130	100

Table 6 shows that respondents who stated that Assurance officers were good were 117 people (90.0%) while respondents who stated that Assurance were less were 13 people (10.0%).

Tangibles

Table 7 shows that respondents who expressed tangibles most that tabgibles good that 115 people (88.5%), while

respondents who expressed tangibles less as many as 15 people (11.5%).

Table 7: Distribution of respondents according to tangibles from officers at Pontap community health center in 2020.

Tangibles	N	%
Good	117	90.0
Less	13	10.0
Total	130	100

Empathy

Table 8: Distribution of respondents according to officer empathy at Pontap community health center in 2020.

Empathy	N	%
Good	122	93.8
Less	8	6.2
Total	130	100

Table 8 shows that empathy according to the respondents most are either 122 (93.8%), while respondents who expressed an empathy approximately 8 people (6.2%).

Responsiveness

Table 9: Distribution of respondents according to the responsiveness of officers at Pontap community health center in 2020.

Responsiveness	N	%
Good	117	90.0
Less	3	10.0
Total	130	100

Table 9 above shows that respondents who stated that the responsiveness fit 117 people (90.0%), while respondents who declare responsiveness consider less as many as 13 people (10.0%).

DISCUSSION

The reliability of the staff in this study was based on the patient's assessment of the aspects of patient examination which were carried out regularly, provided an explanation at the beginning before carrying out the action, gave moral encouragement in terms of recovery, was dexterous in carrying out various actions and was able to complete tasks independently.

Most of the people who visited the Pontap Community Health Center, as many as 93.8%, stated that the reliability of officers during the COVID-19 pandemic was a good category which was largely influenced by the way officers took service actions, especially in the aspect of timeliness of service.

During the Covid-19 pandemic, the response time of officers was further increased in order to reduce the waiting time required in the COVID-19 prevention protocol. In addition, people who visit the Pontap Community Health Center feel how the officers are more active in explaining or helping about matters related to patient illnesses.

This is because during the COVID-19 epidemic, all health workers at the Pontap Community Health Center are tasked with providing good health education related to diseases suffered by the community as well as covid-19 education.

The community gives a good perception regarding the reliability of officers during the COVID-19 pandemic, this is what explains the high public opinion regarding the reliability of officers.

However, there were still a small number of people who expressed the reliability of officers in the poor category, namely 6.2%, arguing that there were still some health workers who provided services that were not in accordance with the expectations of the community. This is understandable considering that during the COVID-19 pandemic, several restrictions were made by health workers such as reducing prolonged contact time with visiting people in an effort to reduce the potential for COVID-19 transmission.

According to Supranto, (2002), hospitals are said to have assurance if the services provided by the hospital to patients are accompanied by the expertise of doctors in determining the diagnosis, skills and knowledge of medical personnel, as well as assurance and trust in the services provided.⁴ This is in line with the results of this study where the visiting community has a good assurance of confidence in the skills and knowledge of health workers in providing health services.

In addition, the use of personal protective equipment during the COVID-19 pandemic which is strictly enforced by health workers while in health services also contributes to a sense of security and public trust. Based on observations, it appears that health workers use masks, full hazmat suits, gloves while providing services so that people's fear of exposure to the virus that causes COVID-19 is reduced or even disappeared.

Meanwhile, in the dimension of direct evidence that is assessed based on the facilities and infrastructure of the Pontap Community Health Center, there are still poor views, especially on the aspect of the appearance of the Community Health Center building which is in a densely populated area and in front of the Community Health Center (Community Health Center Area) there is a house. residents who are supposed to be the yard of the Public Health Center. This creates the impression that the Public Health Center looks small and there is less parking space.

In addition, the arrangement outside the Community Health Center, especially the arrangement of the yard that is not optimal, even outside the Community Health Center, especially the regular road access, is used as a parking lot which gives an impression of chaos. This has triggered the emergence of a public response to direct evidence that was less than 11.5%.

According to Kotler, physical appearance, equipment and personnel include cleanliness, tidiness, and comfort of the room, assessment of exterior and interior, completeness, readiness and cleanliness of the tools used, and neatness and cleanliness of the appearance of officers to health services for patients.⁵ will have an impact on the level of patient satisfaction.

During the COVID 19 pandemic which is currently sweeping the world as is currently happening, empathy is needed by every customer, including patients. Patient and painstaking reflection of the attitude of officers when providing health services to the public is one of the keys in dealing with patients amid the COVID-19 pandemic. Health workers at the Pontap Community Health Center practice patience and diligence in providing health services so that the visiting community responds positively in the aspect of empathy.

Said words were polite, respectful, and friendly applied by health workers answered the concerns of society and is quite effective in calming people who are still traumatized and views on COVID considered a disgrace.

Meanwhile, in the dimension of responsiveness, based on the results of the study, it can be seen that during the COVID-19 pandemic, health workers actively provided education and motivation for patient recovery, especially for COVID-19 patients.

The efforts made by these health workers have greatly helped the public in warding off various speculations and hoaxes that have been circulating regarding COVID-19 information that made people afraid. With the responsiveness shown by these officers, it builds a

positive view related to the quality of good health services at Pontap Community Health Center.

CONCLUSION

Based on the explanation above it can be concluded that the reliability of health workers in the good category was 93.8%, the health worker assurance in the good category was 90.0%, tangibles displayed by health workers was more in the good category, namely 88.5%, empathy for health workers was 93.8%, good responsiveness of 90.0%.

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Ethical approval: The study was approved by the Institutional Ethics Committee

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