ANALYSIS POLICIES AND NETWORK TO IMPROVE PATIENT SATISFACTION AT THE PRIMARY CLINIC OF MEDAN HEALTH POLYTECHNIC

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Abstract
Health Polytechnic of the Ministry of Health Medan is one of the Vocational Health Education Institutions, which applies a larger proportion of practical curriculum than theory. This policy due to the availability of required health workers following optimization through the Medan Poltekkes director's policy of increasing the need for appropriate medical personnel. The regulations decided by the director of Medan Health Polytechnic as a policy include two things, namely by adding and restructuring human resources such as recruiting general practitioners as the person in charge of clinics, dentists, and other health workers such as nurses, midwives, nutritionists, sanitation experts, pharmacy, medical laboratory personnel. Networking is needed as process of building and managing productive relationships, both personal and organizational to improve quality of services clinic. Another opinion states that the networking is an information system consisting of humans, data, software (software), hardware (hardware) and the network it self. Networking is the art of communicating with each other, sharing ideas, information and resources to achieve individual or group success. This type of research was experiment study, pre and post test design, used primary data. Data were taken from the result satisfaction indicators from the Service Quality Model namely the SERVQUAL model from Hertanto (2017). The research was conducted for 1 year in 2017 at the Health Polytechnic Clinic of the Ministry of Health Medan. The population in this study were all customers about 500 population, inclusion criteria to be sample 20 – 50 years old about 133 population, and all of the sample have been taken about 41 respondent. Analysis data by Wilcoxon test. The majority of patient satisfaction levels related to clinical services are satisfied with the following types of satisfaction criteria: tangible (63%), reliability (66%), responsiveness (83%), assurance (68%), empathy (73%). Only a small proportion expressed dissatisfaction to the services provided.

Keywords: Policies, Network, Improve Patien
INTRODUCTION

Health Polytechnic of the Ministry of Health Medan is one of the Vocational Health Education Institutions, which applies a larger proportion of practical curriculum than theory. The application of practice is carried out through experimental learning to educational mediums that will help students to integrate theory and practice (Lisko & O’dell, 2010).

In health education, experiential learning is one strategy that can be used to help students integrate theory and practice (Lisko & O’dell, 2010). This strategy is built on the understanding that clinical competence will gradually be achieved through repeated experiences with various complex clinical cases. Critical thinking skills and clinical reasoning are important structures needed to build students’ clinical competence. The results showed that, experiential learning can improve critical thinking skills and clinical reasoning of students who face various cases with varying characteristics so as to increase the desired competence (Coker, 2010) (Fajrin et al., 2016).

This is in line with previous research which states that laboratory and clinical teaching is an attempt to explore ways in which students understand and use the concepts that have been learned so that they can be applied in practice. In this teaching, students must have clinical skills and prepare students to get training before they practice in real conditions with real patients. Thus laboratory skills are one of the learning strategies to achieve clinical skill competencies that must be mastered by students (Ali et al., 2011) (Akaike et al., 2012). Based on the previous description, it is considered necessary to build a primary clinic at the Health Polytechnic of the Ministry of Health Medan, it will be used as a vehicle for students practicing and also provide health services for the surrounding community (Peraturan Menteri Kesehatan Republik Indonesia Nomor 35 Tahun 2019 Tentang Wahana Pendidikan Bidang Kesehatan, 2014) (Situmorang, 2016) (Bailey et al., 2016).

Health services provided to them by primary clinic at the Health Polytechnic of the Ministry of Health Medan, it have to pay attention to the quality and quantity of services. Service quality is measured through patient satisfaction, while service quantity is measured through clinical facilities and human resources at the clinic. This requires related policy and networking to support activities in the clinic (Bangun, 2012) (Kemenkes RI, 2015) (Li et al., 2016) (Boulding et al., 1993).

Customer satisfaction is the level of a person's feelings after comparing the performance he feel compared to expectations and can be formulated as a post-purchase evaluation. If the perception of performance cannot meet expectations, it will happen dissatisfaction. Services in the field of health is realized between patients as customers and health facilities. Satisfaction is the suitability of consumer assessment results on various aspects services that are felt and expected, so that patient satisfaction can be an evaluation service providers regarding the quality of their services (PRATIWI, 2010) (Lannes, 2015) (Khasanah & Pertiwi, 2010) (Khabbah et al., 2017).

Furthermore, Networking is needed as process of building and managing productive relationships, both personal and organizational to improve quality of services clinic. Another opinion states that the networking is an information system consisting of humans, data, software (software), hardware (hardware) and the network it self (Damsar, 2009; Hu et al., 2016).
Networking is the art of communicating with each other, sharing ideas, information and resources to achieve individual or group success. Relationships that are beneficial and mutually beneficial. In other words, building a network must be based on the principle of mutual benefit and two-way communication. Networking is also a process of building communication or relationships, sharing ideas, information and resources on the basis of mutual trust and mutual benefit between partnering parties, which is outlined in the form of a memorandum of understanding or memorandum of understanding (MoU) in order to achieve success. greater shared interests in a particular line of business or a particular goal (Castells, Manuel & Cardoso, 2005).

Several MoU are needed to improve clinical services, it aimed to provide service satisfaction customers, they are CSR (Customer Social Responsibility), BPJS (Badan Penyelenggara Jaminan Sosial/National Insurance Client) and Pharmacy. In this case the Health Polytechnic of the Ministry of Health Medan has obtained the MoU needed to improve clinical services. Likewise, public health centre as a community health service is managed by the local government, have to join with another sector such as BPJS. Public health center also need complete facilities and infrastructure to provide primary services according to community will. However, the level of satisfaction between the clinic Health Polytechnic of the Ministry of Health Medan and public health center have a different because it depends on the type of consumer, so that the assessment of patient satisfaction is too subjective (Fida et al., 2020) (Deharja et al., 2017) (Sureshchandar et al., 2001).

Based on the description above, a study was conducted which aimed to find out the level of patient satisfaction served at the clinic Health Polytechnic of the Ministry of Health Medan, both of the places have been exposed to policy and networking.

**RESEARCH METHODS**

This type of research was experiment study, pre and post test design, used primary data. Data were taken from the result satisfaction indicators from the Service Quality Model namely the SERVQUAL model from Hertanto (2017). The research was conducted for 1 year in 2017 at the Health Polytechnic Clinic of the Ministry of Health Medan. The population in this study were all customers about 500 population, inclusion criteria to be sample 20 – 50 years old about 133 population, and all of the sample have been taken about 41 respondent. Analysis data by Wilcoxon test. This research was carried out after obtaining a research ethics feasibility letter from the Ethics Committee of the Polytechnic Health of Health Ministry Medan. This research was also carried out after obtaining approval from respondents as evidenced by affixing the respondent's signature to the research approval sheet (R. F. M. Kalijogo, 2019) (Bungin, 2007).

**RESULTS AND DISCUSSION**

The following is an overview of the assessment of the quality of services provided by clinic Medan Health Polytechnic officers obtained based on an assessment by patients who have visited Clinic of Medan Health Polytechnic as below.
Based on Figure 1, it can be seen that the majority of patient satisfaction levels related to clinical services are satisfied with the following types of satisfaction criteria: tangible (63%), reability (66%), responsiveness (83%), assurance (68%), empathy (73%). Only a small proportion expressed dissatisfaction to the services provided. Increasing of patient satisfaction at the clinic Medan Health Polytechnic significantly after optimization is carried out by providing policy and networking as depicted analysis Multivariate Analysis of Variance (LSD test) before and after optimization.

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Patient satisfaction in Clinic of Medan Health Polytechnic’s services is most were very satisfied with the service of the Clinic of Medan Health Polytechnic. A complete implementation of service quality concepts would assist the effectiveness of patient’s satisfaction in public healthcare institution. Research has proven that there is a relationship between customer satisfaction and service quality (Ampah &
According to service quality implies management paradigm the deals with service management in the area of marketing which emphasises the important of customer interaction with service provider in giving service and creating value for money (Ampah & Ali, 2019; Gummesson, 1994). Previous research stated that the correlation results depicted a significant relationship between the three variables: service quality, customer satisfaction, and customer loyalty. Similarly, regression results demonstrated that empathy and responsiveness dimensions have a significant positive impact on customer satisfaction. It is, therefore, recommended that banks should focus more on empathy and responsiveness considering the significant relationship of these two variables on customer satisfaction, in line in this study (Fida et al., 2020).

Based on figure 1. above, it is known that all study participants usually reported being satisfied with the clinical services provided by Medan Health Polytechnic. Five service characteristics make up the level of satisfaction: tangible, reliability, responsiveness, assurance, and empathy. On a tangible level, 63% of visitors said they were satisfied with the Medan Health Polytechnic Clinic's services. This could be due to the clinic's proximity to the main road, the cleanliness and comfort of the waiting room, the adequacy of seats in the waiting room to avoid long lines, and the clinic's relatively new facilities and infrastructure. This is consistent with previous research conducted at the Semaja Samarinda Health Center, which revealed that the value of respondents' satisfaction with the comfort of the waiting room and the cleanliness of the waiting room is 77% and 80%, respectively. The comfort and cleanliness of the waiting room are important dimensions of respondent satisfaction because a comfortable and clean waiting room environment can aid the patient's healing process (Khabbah et al., 2017). As a result, adequate facilities and facilities are a tangible dimension that influences patient satisfaction.

The quality of health services is determined by the reliability dimension. Quality health services will be largely determined by the health care profession in this case. Sixty-six percent of visitors were satisfied with the reliability dimension. This is due to the availability of required health workers following optimization through the Medan Poltekkes director's policy of increasing the need for appropriate medical personnel. The regulations decided by the director of Medan Health Polytechnic as a policy include two things, namely by adding and restructuring human resources such as recruiting general practitioners as the person in charge of clinics, dentists, and other health workers such as nurses, midwives, nutritionists, sanitation experts, pharmacy, medical laboratory personnel. The personnel used for the restructuring do not recruit from outside the institution, but using human resources from within the institution namely lecturers. The recruitment also facilitates the issuance of practice license for medical personnel and paramedics who works at the clinic.

Other regulations also regulate the standard operating procedure (SOP) for services in the primary clinic of Medan Health Polytechnic which one visitors are served with ease of administrative procedures, speed, and accuracy of services provided so the service is faster than before (Prayitno & Suharmiati, 2018). The clinic was still classified as a Medical Center in its early days, with only one type of service and one officer. Starting in 2016, there has been a gradual addition of competent officers according to their fields, supported by adequate facilities and infrastructure, after optimizing through policies and building an extensive network. This is what makes satisfied consumer satisfaction levels possible.
As many as 83% of customers stated that they were satisfied with the responsiveness of officers in providing health services at the Medan Health Polytechnic Clinic properly and quickly. Responsiveness can be seen from the openness or willingness of officers to receive and respond to complaints from patients/patient families, the availability of officers according to patient needs to provide services and the ability of officers to communicate to inform the things that customers need (Prayitno & Suharmiati, 2018).

At the Clinic of Medan Health Polytechnic, 68% of customers said they were satisfied with the service guarantee. The therapeutic communication provided by officers to patients demonstrates the dimension of health service guarantee. Officers providing information about service procedures, actions taken, maintaining patient confidentiality, and responding to patient/patient family problems related to prescribed drugs precisely and quickly are examples of therapeutic communication. Therapeutic communication performed by front-line health workers at the clinic of Medan Health Polytechnic can reassure patients and build customer trust.

As many as 73% of customers expressed satisfaction with the officers' empathy in providing health services at the clinic of Medan Health Polytechnic. Officers' empathy in serving customers is demonstrated by their friendliness and willingness to listen to patients without regard to the patient's social status (Prayitno & Suharmiati, 2018). Furthermore, the care of health workers in serving patients can be seen in good communication with patients or with the patient's family so that patients feel at ease and confident that they will receive quality care.

The level of visitor satisfaction in the 5 dimensions of health services at the clinic of Medan Health Polytechnic can actually be further improved through periodic officer competency training. This policy program can be regulated by the existence of regulations and policies from the Director of Medan Health Polytechnic. If this can be done on an ongoing basis, the clinic of Medan Health Polytechnic which is a primary clinic (FKTP) can provide the primary services needed by academics in the Medan Health Polytechnic Environment and the surrounding community on a wider scope. This policy is also one that supports health transformation on the first pillar. The role of the clinic Medan Health Polytechnic in the first pillar of health transformation is that apart from providing health education to the community, it also plays a role in increasing the capacity and capability of primary services through policies and building networking for the development of Medan Health Polytechnic clinics.

The results of this study are in line with previous research on the effect of Service Quality on Consumer Satisfaction at St. Hospital. Elisabeth Semarang stated that about 71.6% of consumers are satisfied with health services described through these 5 dimensions, while the remaining 28.4% is influenced by other variables outside of the observed variables (Khasanah, Imroatul & Pertiwi, 2010). In today's very tight competition, the key to gaining a competitive advantage is the provision of high quality services which will result in customer satisfaction or customer satisfaction. Optimizing the improvement and development of Clinics as a medium for education carried out by improving infrastructure, infrastructure, health personnel, types and numbers of health services can improve service quality. High customer satisfaction is expected to create high loyalty from consumers, so that it will attract repeat patient visits and become one of the sources in increasing income from the clinic of Medan Health Polytechnic as public service agency.
Previous research stated that the correlation results depicted a significant relationship between the three variables: service quality, customer satisfaction, and customer loyalty. Similarly, regression results demonstrated that empathy and responsiveness dimensions have a significant positive impact on customer satisfaction. It is, therefore, recommended that banks should focus more on empathy and responsiveness considering the significant relationship of these two variables on customer satisfaction (Fida et al., 2020). Based on research, findings indicated that while all three dimensions are somewhat influential on patient satisfaction, in public hospitals tangibles dimension seems to exert no significant influence on satisfaction. Findings are important both for public and private hospital managers and for policy makers (Yesilada, Figen & Direktör, 2010). Majority of the respondents expressed their discontentment over the responsiveness of the service providers when compared to tangibility and reliability quality variables. There is no relationship between the quality variable tangibility and overall satisfaction. Related to the overall satisfaction, 42 percent of respondents have neutral perspective indicated that they are either satisfied or dissatisfied as against the 43.3 percent of dissatisfied customers (Potluri & Angiating, 2018).

Previous studies indicated that service quality has a significantly positive impact on loyalty. When products or services exceed the expectations of customers, their repurchase intention will increase (Boulding et al., 1993) (Cronin et al., 2000). The excellent service quality contributes to customer retention and loyalty (Potluri, Rajasekhar Mouly & Zeleke, 2009). In the health care context, (Boshoff & Gray, 2004) verified a positive relationship between service quality and loyalty as measured by buying intentions. Hence, service quality perceived by a patient will affect patient loyalty (Wu, 2011) Data was collected from public healthcare delivery respondents in health administration in Ghana. There are 252 respondents from public healthcare institutions (healthcare administrators, medical doctors, nursing officers, and patients). Results showed that 55% healthcare participants stated service quality adoption in public healthcare institutions to be medium, followed by 45% of respondents to be high. The study concluded that marketing mix adoption among public healthcare institutions in Ghana is medium. Also, there is a fairly good relationship between patients (customers) satisfaction, and service quality and hence effective adoption of service quality leads to customer satisfaction (Ampah & Ali, 2019).

Interventions to improve performance of existing staff and service quality have the potential to improve patient care in underserved settings. But in order to implement interventions effectively, policy makers need to understand and address the contextual factors which can contribute to differences in local effect. Researchers therefore must recognise the importance of reporting how context may modify effect size (Blacklock et al., 2016). Previous study about final number of respondents was 864 including 161 from county hospitals, 190 from rural community health centers (CHCs), 164 from tertiary hospitals, 80 from secondary hospitals, and 269 from urban CHCs. Type of health care facilities was significantly associated with total PCAT score and domain scores. CHC was associated with higher total PCAT score and scores for first contact-access, ongoing care, comprehensiveness-services available, and community orientation than secondary and/or tertiary hospitals, after controlling for patients' demographic and health characteristics. Higher PCAT score was associated with greater satisfaction with primary care received. CHC patients
were more likely to report satisfactory experiences compared to patients from secondary and tertiary facilities (Hu et al., 2016). Patient satisfaction with outpatient and inpatient care was significantly associated with type of healthcare delivery setting in Jilin, China. Seeking outpatient care from community health centers (CHCs) was significantly associated with a higher ratio of patient satisfaction. Patients of county and tertiary hospitals complained about long-waiting times, bad attitudes of health workers, high expense of treatment, and their overall satisfaction towards outpatient care was lower. In the terms of inpatient care, patients were more satisfied with treatment expense in CHCs compared with county hospitals (Li et al., 2016).

Consumer satisfaction is a person's feeling of pleasure or disappointment that comes from the comparison between his impression of the performance or results of a product with his expectations. The level of patient satisfaction indicates the level of success of a health service in improving the quality of its services. Measuring the level of patient satisfaction can be done using various measurement methods. From several existing methods, various studies show that the Service Quality (Servqual) instrument is valid for various service contexts through measuring the five service dimensions (Tangible, reliability, responsiveness, assurance, and empathy) in determining the level of customer satisfaction. Physical evidence (tangibles) in the form of appearance and ability of clinical physical facilities and infrastructure and the condition of the surrounding environment provided by service providers which include physical facilities (buildings), technology (equipment and equipment used), appearance of employees and means of communication. Reliability is the clinic's ability to provide services as promised accurately and reliably. This must be in accordance with consumer expectations such as timely performance, error-free service, sympathetic and reliable attitude. Responsiveness is a willingness to help and provide fast and appropriate service to consumers by delivering clear information. Assurance is the knowledge, courtesy and ability of clinical officers to foster consumer confidence in the clinic (F. M. Kalijogo, 2019). Managing relationship with costumers (patients) is becoming more important in the new paradigm. The paper discusses Customer Relationship Management (CRM) in healthcare and proposes a social CRM or CRM 2.0 model to take advantage of the multi-way relationships created by web 2.0 and its widespread use in improving customer services for mutual benefits between providers and their costumers (Almunawar & Anshari, 2012).

Measurement of patient satisfaction level related to market planning primary Clinic of Medan Health Polytechnic as a vehicle practice learning for student its surrounding. Medan Health Polytechnic has 20 study programs for health workers in North Sumatera. If the level of patient satisfaction can be maintained and improved, the primary Clinic of Medan Health Polytechnic can be used as own a vehicle for student practice learning, because it is one of the indicators of clinical quality, so it becomes one of the requirements as a vehicle for student practic (Estri & Fajarini, 2017; Kencana, 2017; PERMENKES RI Nomor 30, 2022).

Director of Medan Health Polytechnic by making cooperation with BPJS, partnerships with banks and independent practice doctors as well as pharmacists and independent practice midwives. The cooperation built improves health facilities and services, such as ambulance assistance, patient beds, waiting chairs, medical equipment and others. Increasing cooperation networks to improve facilities and
infrastructure, this is part of the indicator for patient satisfaction assessment (Soumokil et al., 2021).

**CONCLUSION**

About consumer satisfaction in health services at the Medan Health Polytechnic Clinic after intervention that the majority of patient satisfaction levels related to clinical services are satisfied and only a small proportion expressed dissatisfaction to the services provided.

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