



Implementation of Public Services in the Outpatient Installation of RSUD Dr. Saiful Anwar Hospital

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ABSTRACT

This research is motivated by the implementation of public policy in the Outpatient Installation at RSUD Dr. Saiful Anwar, which was implemented to meet public health service needs. It aims to facilitate public access to services and speed up patient treatment time. They are guided by the regulations of East Java Province Regional Regulation No. 14 of 2016 concerning public services involving the community, medical personnel, and health workers in hospitals, where regulations that have been established relating to public services must be fulfilled. This research aims to describe and analyze the implementation of the Public Service Policy based on East Java Provincial Regulation Number 04 of 2016 concerning Public Services in Outpatient Installations at dr. Saiful Anwar. The second objective is to describe and analyze factors that support and hinder the implementation of the Public Service Policy based on East Java Provincial Regulation Number 04 of 2016 concerning Public Services at Outpatient Installations at dr. Saiful Anwar. Meanwhile, researchers used George Edward III's theory using indicators of communication, resources, disposition, and bureaucratic structure for the theoretical basis. As an analysis step, researchers used descriptive qualitative research methods. The research results show the implementation of East Java Provincial Regulation Number 04 of 2016 concerning Public Services in Outpatient Installations at Dr. RSUD. Saiful Anwar has implemented it. Its implementation shows that the communication and coordination carried out are in accordance with established procedures. The budget allocation has considered equal distribution of each required program. The readiness of resources to carry out their duties can be proven through the suitability of their performance with the primary duties and tasks that have been assigned. As well as technical socialization of activities, it has also been received by all service implementation units in outpatient installations.

Keywords: Policy Implementation, Outpatient Installations, Public Services.

1. INTRODUCTION

Service activities cannot be separated from human life because service is needed in all aspects of life. Likewise, public services are provided by the government. Public service delivery is required to provide accessible, effective, and efficient services based on the needs of the community as a form of the government's obligation to fulfill the basic needs and rights of every citizen in obtaining quality public services by utilizing and utilizing all available resources for the realization of the goals of the Republic of Indonesia. Maximally. However, the reality shows that the condition of each region is that many people still need to receive public services that align with expectations; it even seems complicated, which creates an annoying situation in the provision of services implemented by the government itself. Likewise, health sector services face increasingly complex challenges. Apart from having to adapt to various regulations related to health development, we also have to adapt to several strategic changes in the health sector related to the pandemic that occurred over the three years from 2020 to 2022.

Dr. . Saiful Anwar Hospital is a hospital belonging to the East Java Provincial Government which carries out public service functions. Health services are coordinated by the East Java Provincial Health Service, which focuses on curative public health efforts. In line with the vision of becoming a world-class standard hospital chosen by the community, the efforts made by RSUD dr. Saiful Anwar, of course, continue to be improved to support the above by

providing several public services in the form of administrative activities, medical services, medical support services and non-medical, nursing services, referral services, as a place for education and training, as an educational facility for prospective doctors and specialist doctors, as a means of health research and development. However, related to this matter, problems still need to be found in several services provided by Dr. Saiful Anwar Regional Hospital to the community, including effectiveness, efficiency, and flexibility, which are still constrained.

Flexibility has not been implemented because it is hampered by regulations that are not yet in line; complex and lengthy administrative/bureaucratic flows that cannot yet be resolved entirely; customers mainly come from the lower middle class; hospitality cannot yet be implemented in its entirety; strategy evaluation is carried out by another department, not by the same department that carries out strategic planning so that sometimes the information is not conveyed completely; Facilities and infrastructure, as well as the quantity of personnel, are still inadequate. The number of public complaints received by Dr. Saiful Anwar Regional Hospital increased in 2022 compared to 2021. This is due to WA optimization. Complaints by rebranding using the term "welcome RSSA," also with outreach in several strategic locations in the hospital environment, which was carried out in mid-2022. This proves that even though it is the highest referral government hospital in the implementation of services, many areas still need improvement that, according to service recipients, must be addressed and improved. It can be seen from the fact that there are still many complaints from the public, both directly and via social media. Of the 150 complaints received in 2022, 30 (around 20%) are related to outpatient services. Meanwhile, from 2023 to July 2023, of the 93 complaints received and followed up, 16 were related to outpatient services, or around 17.2%.

On the other hand, the level of satisfaction with the services received by patients can be seen from the Community Satisfaction Index (IKM) value in Quarter 2 of 2023 with an achievement of 83.05 with the predicate Good. This contrasts with the many complaints from the public regarding health services at Dr. Saiful Anwar Regional Hospital. For this reason, the researcher intends to analyze the implementation of public service policies at Dr. Saiful Anwar Hospital, East Java Province, which is guided by East Java Province Regional Regulation No. 14 of 2016 concerning public services, especially Outpatient Installations which in practice serve approximately 1,000 (one thousand) patients every day on average.

This research aims to describe and analyze the implementation of the policy as well as factors that support and inhibit the implementation of the Public Service Policy based on East Java Provincial Regulation Number 04 of 2016 at the Outpatient Installation of Dr. RSUD. Saiful Anwar. The benefits of this research will be input or input for improving service quality to meet patient satisfaction so that it can determine the following steps to be taken in measuring policies in the future.

2. THEORETICAL BASIS

2.1 Public Service Concept

Service is a process of various actions, interactions, and activities essential to deliver services to customers. Each has a goal that generates profits. Activity Service is closely related to the issues of how to take appropriate action to deliver services to customers. Therefore, a service can be seen as an outcome received by customers. (Mindarti, 2016). According to Kamarni (2011), the public is the general public who must be taken care of, regulated, and served by the government as a public servant, but also sometimes acts as a ruler in regulating constitutional law. Ratminto (2010) stated that public services are defined as all forms of services, whether in the form of government administration services or licensing services, whether public goods or in the form of services which are essential responsibilities carried out by government agencies (central or regional) as an effort to fulfill the needs of the community.

Ratminto and Winarsih (2010:10) state that public service delivery at least has characteristics that can be used in public services. Among them, the first is service adaptability, namely the degree of service change to the changing demands requested by society. Second, the bargaining position served. Namely, the higher the bargaining, the higher the demand for better service. Third, type Market describes the number of existing public service providers and the communities served. Fourth, Locus of control is an activity that explains who holder internal control provides services. Moreover, the last one is the nature of service, which shows the interests being served or the service provider, which is more dominant.

The principles of public service include having an open nature, being easy to access by various parties, and provided automatically adequate, and being easy to understand. Statutory regulations can account for accountability or services provided. Conditional services provided are by the conditions and abilities of the provider and recipient services to maintain the principles of efficiency and effectiveness. Participatory or encouraging community participation in implementing public services with more attention to the community's aspirations, needs, and hopes. Equality or non-discrimination between ethnicity, race, religion, class, and status intermediate economy service providers and recipients. Moreover, the balance of rights and obligations or givers and recipients of public services can fulfill their rights and respective obligations party.

3. RESEARCH METHOD

3.1 Research design

The research design used is descriptive research. According to Wahyuni (2009:18), descriptive qualitative research seeks and uses descriptive data in words or expressions and opinions from research informants both verbally and in writing.

3.2 Research sites

Research Location at RSUD dr. Saiful Anwar, the scope of this research includes a Study of the Implementation of Public Service Policy based on East Java Province Regional Regulation Number 14 of 2016 concerning Amendments to East Java Province Regional Regulation Number 8 of 2011 concerning Public Services at RSUD dr. Saiful Anwar. Data in research can be grouped into primary data, namely data obtained from sources and raw or unprocessed. Primary data cannot yet provide information for decision-making, so it needs to be processed further. Primary data regarding respondents' or consumers' responses to the quality of outpatient services at Dr. . Saiful Anwar Malang. Furthermore, apart from primary data, there are also secondary data. Namely, data obtained from publishing sources is ready to use. Secondary data can provide information in decision-making even though it can be processed further.

3.3 Data Types and Sources

According to Wijaya (2013), research data is raw information obtained through surveys or observations, facts provided to researchers, and the study environment.

3.4 Data collection technique

In this research, the data collection technique is through several methods, namely semi-structured interviews, observation, literature study by conducting a review study of books, literature, elements, and reports that are related to the problem being solved, and documentation to support the data that the researcher obtained, from the interview and observation process, as well as to strengthen the accuracy of the data that researchers obtained from the interview and observation process.

3.5 Technique Analysis Data

The data was evaluated in three steps, using Miles, Huberman, and Saldana's (2014) theory: condensing the data, presenting the data, and deriving conclusions or verification. Andi Misna (2015) defines data condensation as the process of selecting, narrowing, simplifying, summarizing, and altering data.

4. RESULTS AND DISCUSSION

4.1 Implementation of Outpatient Installation Services

A hospital is a health service institution providing complete individual health services, inpatient, outpatient, and emergency services. The outpatient installation is the first place of service that patients and families expect as a place to provide transparent information before the patient receives the next action/service or when the patient has to be hospitalized. Procedures for service standards in outpatient installations have been socialized to the public through the installation of pamphlets in every unit in the hospital and also on social media, including the official website of RSUD

dr. Saiful Anwar. The registration flow in outpatient installations has been divided into two types: direct and online registration at the hospital.

Providing services to patients at RSUD dr. Saiful Anwar is carried out professionally, effectively, and accountably without distinguishing between treatment classes and patient status by paying more attention to patient safety. Optimizing integrated services such as Integrated Emergency, Integrated Heart, Integrated Kidney, Integrated Oncology as well as improving Inpatient, Outpatient, Surgical, Medical Rehabilitation, Dental and Oral and Forensic Medicine services continues to be implemented in order to realize the best superior services.

In the implementation of outpatient services, there are minimum service standards that service providers must achieve. In 2022, of the six standards that must be achieved, there is one standard that Outpatient Installations cannot achieve; this standard is Outpatient Service Customer Satisfaction, which has an achievement of 91.88%. This is because the target that must be achieved must be at least 90, while the Outpatient Installation achievement is 82.69. Apart from that, in implementing health services in outpatient settings, there are several indicators in 2022 and 2023 that Outpatient Installations cannot meet. The number of specialist doctor attendance and patient waiting times are indicators that have not been achieved so far. This is also in line with the achievements of the Community Satisfaction Index, which shows that the lowest element reported by service users is speed of service. The speed of outpatient services is influenced by many factors, starting from the large number of patients on that day, the information system used, the availability of medical records, the doctor's arrival at the clinic, medical procedures that require additional diagnostics, and also the queue for taking medication. Dr. Saiful Anwar Regional Hospital strives to improve by optimizing the online queue system, Hospital Information System, and dr. ug delivery services.

4.2 Analysis of Public Policy Implementation in Outpatient Installations

Public policy in the Outpatient Installation at RSUD dr. Saiful Anwar is implemented to meet public needs related to health services, which aims to facilitate public access to services and speed up patient treatment times—guided by the regulations of East Java Province Regional Regulation no. 14 of 2016 concerning public services involving the community, medical personnel, and health workers in hospitals, where the regulations that have been established relating to public services must be fulfilled. The results of in-depth interviews show that the initial process of implementing this public service policy is to carry out policy socialization, where the socialization process is carried out to all related parties in all units in the outpatient installation. Apart from that, the flow of the public service process is also socialized to the public through pamphlets distributed in all outpatient installation service units, social media, and direct directions from service officers.

The suitability of public service standards received by patients can be measured through the role of all health workers in providing appropriate responses positive to patients, starting from helping direct the flow of registration to discharge or referral, to the quick response of officers in handling complaints expressed by patients and visitors at the hospital. Budget support for outpatient services is sufficient for all officers to carry out their duties to meet the specified workload. Source of budget funds to help facilitate service delivery as mandated in the Regulation of the Minister of State Apparatus Empowerment and Bureaucratic Reform of the Republic of Indonesia No. 62 of 2018 concerning Guidelines for the National Public Service Complaint System which states: Supervisors are obliged to guarantee the availability of a budget to finance the implementation of public service management in their respective agencies which consists of developmentcapacityManaging human resources, public outreach, and support for complaint management facilities and infrastructure.

According to Mazmanian and Sabatier (1975), the success of policy implementation is influenced by the linkages and support between various implementing institutions. Program failure is often caused by a need for vertical and horizontal coordination between agencies involved in program implementation. This theory is quite clear about what happens in the outpatient installation unit when implementing public service policies at Dr. Saiful Anwar Regional Hospital.

The planning process for public services involves all implementing elements, including related cross-sector elements. The budget allocation for implementing public policy in the outpatient installation has considered the equal

distribution of each required program to help effectively implement tasks in the outpatient installation unit run optimally.

One of the things that was revealed and became an obstacle for the outpatient service management team was the limited human resources in carrying out tasks to fulfill the standard operational procedures that have been set, considering the very complex problems in each service unit and also responding to complaints in all existing service units. In the hospital, 11 the number of nurses who work as nurses is deficient, so this can affect the workload of officers, which could be more optimal. Resources are a significant factor in the implementation of public services. This aligns with research by Riza Fikriana (2018), which revealed that human resources determine service quality. According to George C. Edwards III, the theory of policy implementation is a crucial process because no matter how good a policy is, if it is not prepared and planned well, the expected goals will not be realized. In the process of public services in the Health sector, many aspects must be fulfilled to maintain the quality of service, as explained by Parasuraman (1988), namely that two main factors influence quality. Service that disservice what consumers expect (expected service) and the service received or felt (perceived service) by consumers or the perceived results. Of a number characteristic the

In supporting the implementation of public services in outpatient installations, especially complaint facilities, RSUD dr. Saiful Anwar has provided facilities for receiving complaints by utilizing information technology facilities. Dr. . Hospital Saiful Anwar followed up on this by creating innovations for the complaint reception room and progressive information technology; the abundance of social media is responded to by optimizing WhatsApp media. Optimization WhatsApp media rebranded the complaint channel at Dr. . Saiful Anwar Regional Hospital as "Sambat RSSA." Besides that, Dr. Saiful Anwar Hospital also accommodates all complaints from the community through various platforms usually used by the community, such as Instagram, Facebook, Twitter, Google Reviews, and WhatsApp. Service users submit suggestions, complaints, and input by writing their complaints via WhatsApp, which a complaints officer will then respond to with a maximum response time of 7 days and a minimum response time of 1 x 24 hours. If the public or patients do not use this media, the public can convey their complaints directly to the complaints officer.

From the results of interviews with complaint officers, it was discovered that when the complaint report was prepared, the substance of the complaints that many service recipients of Dr. . Saiful Anwar Regional Hospital complained about was about HR (Human Resources), both in terms of friendliness and ethics as well as in terms of competence. The friendliness and ethics of the staff in providing services are essential because, from a psychological perspective, the service recipients, most of whom are patients, will feel cared for if the Professional Care Providers (PPA) in the Outpatient Installation serve with heart. This is to the work culture of RSUD Dr. Saiful Anwar, namely 5S, which stands for Greetings, Greetings, Smiles, Politeness, and Manners.

4.2.1 Communication Analysis

Communication is the first step in the policy implementation process. This process is carried out to convey information about policies that will be implemented jointly, both to policy implementers and the target community using the service. Good communication will go through a straightforward process, whether the content or information conveyed is easy to understand and can be accepted by the policy targets, in this case, the public. Apart from that, the information that has been submitted must be clear and unchanging so as not to confuse service users. All activity implementers have received information regarding implementing public service policies, where all implementing officers must properly implement all service standards. The public as service users have also received precise information about the flow of public services and information about the complaint services provided. Sometimes, some people do not care about pamphlets or social media, so in understanding the flow of public services, they still need guidance from service officers around them. The results of in-depth interviews with key informants regarding the clarity of the procedures that have been established are that the policies have been well conveyed and understood by all outpatient installation units, both the tasks in the service and the standards that need to be carried out to provide comfort and safety for patients as service users. Service officers are also given socialization regarding receiving complaints.

This aligns with research by Phaksy Sukowati N, Hadi M, and Pani Rengu S. (2019), who found that policies can be implemented well if there is effective communication between program implementing groups and target groups. The main requirement for effective policy implementation is that implementers carry out policy decisions passed on to implementing personnel. This is also true of the theory presented by George C. Edward III that policies can be implemented well if there is effective communication between program implementing groups and the target group. The first requirement for effective policy implementation is that implementers carry out policy decisions passed on to implementing personnel.

The results of the communication analysis show that communication is needed in the socialization process. The information conveyed must be clear and not cause confusing perceptions. For this reason, a continuous educational process is needed. The communication results could have been more effective with the community as service recipients, but coordination with teams and cross-sector coordination has been carried out well. Socialization is needed in order to improve service quality. Good communication and coordination will create harmonious environmental relationships; resources can be accommodated through good communication, commitment can be established through the communication process, and SOPs and task clarity can be well received through effective communication.

4.2.2 Resource Analysis

Resources are critical capital for achieving public service initiatives. Policy implementation will go smoothly if it is supported by adequate resources, a sufficient budget, adequate resources based on competency, guaranteed quality, and a complete and functional physical infrastructure. The planning process is well-structured around needs, money, and unambiguous accountability. In policy implementation, the budget is associated with the adequacy of capital or investment in a program or policy to enable policy implementation because, with enough budget support, the policy would run effectively in attaining its objectives. In Widodo (2010), Edward III remarked, "New town studies suggest that the limited supply of federal incentives was a major contributor to the program's failure." In Widodo (2010), Edward III concluded that limited budget resources would have an impact on policy implementation success. Aside from the program's necessity for efficient implementation, funding constraints have a negative impact on policy actors' disposition. A budget is an important consideration when adopting a policy.

Policy execution will only be successful if there are enough high-quality and abundant human resources. The quality of human resources is measured by their talents, passion, professionalism, and field competency. In contrast, quantity refers to whether there are enough human resources to cover the full target group. Human resources have a significant impact on success because trustworthy human resources enable speedier policy implementation. As a result, in order to implement public services at the RSUD Outpatient Installation, Dr. . Saiful Anwar will require adequate resources and the capacity to master his profession.

According to the research findings, resources are an important aspect in successful policy implementation. During implementation, the entire team must grasp the policies surrounding regulations, and each rule is evaluated. Results of resource analysis in implementing public policy in RSUD's outpatient installation Dr. . Saiful Anwar needs to raise the quality and quantity of human resources while implementing the Managerial Patient Service Unit. Human resource fulfillment is required to lessen high workloads, along with training to increase officers' ability to handle patient concerns. The resource component is inextricably linked to the other factors; with adequate human resources and high-quality performance, the key tasks and functions can be completed successfully.

4.2.3 Disposition Analysis

The disposition or attitude of policy implementers is critical in the approach to implementation or public policy. Assume that a policy is to be implemented effectively. In that situation, policy implementers must not only know what to do, but also be able to carry it out in practice without bias. The study's findings reveal that managers and implementers are devoted to carrying out their responsibilities in accordance with the set SOPs. Service officers carry out their tasks in accordance with directives and decrees issued by their superiors. This is consistent with Gorge C. Edwards III, who stated that the attributes most commonly used by implementers include honesty, high commitment, and honesty, which will always overcome the hurdles encountered in the program/policy. Honesty instructs

implementers to stick to the program direction indicated in the program standards. His passion and honesty fueled his enthusiasm for continuously implementing the program stages. The results of the disposition analysis in implementing public services in outpatient installations provide work motivation for program implementers to create the high level of commitment required. However, this requires support from various parties and internal hospital coordination from various units, so to maximize this commitment, good cooperation with each existing unit at home needs to be improved so that every goal that has been set can be achieved.

4.2.4 Analysis of Bureaucratic Structure

Bureaucratic frameworks are necessary for policy implementation. This feature of bureaucratic structure encompasses two critical components: the mechanism and the structure of the implementing agency. The program implementation mechanism is typically specified by standard operating procedures (SOP) in the program/policy guidelines. A good SOP includes a clear, methodical, simple, and uncomplicated framework that everyone can comprehend, as it will be used as a reference in the implementor's work.

The results of the research show that the organizational structure outlined in the form of SOPs is clearly accepted and carried out well by the public service team at the Outpatient Installation and the RSUD complaint officer team because the management carries out intensive socialization, support from sufficient personnel is the capital for carrying out tasks well. Monitoring and evaluation are also routinely carried out yearly to make improvements or revisions to SOPs to improve and improve public services in hospitals. The results of the analysis of the bureaucratic structure in public services at the outpatient installation of RSUD dr. Saiful Anwar, clarity of SOPs is significant, clear work procedures, officers' understanding of the steps carried out facilitate fast and responsive handling in the field, so that handling errors can be minimized.

5. CONCLUSIONS AND RECOMMENDATIONS

5.1 Conclusion

The conclusion from the results of this research is based on the results and discussion of the research that has been presented. Namely, the implementation of public services in outpatient installations at RSUD dr. Saiful Anwar has been implemented by established regulations, the target response time in responding to complaints, and ease of access has been achieved. Call center access is friendlier to use because the application is widely owned by the public, namely the WhatsApp application; the response time is expected to be a maximum of 7 working days, and a response of 1 x 24 hours has been implemented according to established procedures.

The results of the implementation of planning about public services involve all implementing elements, including related cross-sector elements. This shows that the communication and coordination carried out follow established procedures. The budget allocation for the implementation of public policy in the outpatient installation has considered the equal distribution of each required program to help the effective implementation of tasks in the outpatient installation unit run optimally. The readiness of resources to carry out their duties can be proven through the suitability of their performance with the primary duties and tasks that have been assigned. As well as technical socialization of activities, it has also been received by all service implementation units in outpatient installations.

5.2 Suggestions

Based on the conclusions from the research results stated above, suggestions can be given, including the hope that the delivery of information uses media that is more acceptable to all levels of society, including people with disabilities, so all elements of the public well can receive that information. Post-complaint monitoring and evaluation must be accepted by all departments so that complaints can be adequately conveyed, which will also impact improving and improving service quality. Moreover, it is necessary to strengthen the bureaucratic structure by changing the structural culture to an innovative culture by simplifying bureaucracy and encouraging implementing activities by utilizing information technology.

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