SERVQUAL IN ELDERLY COMMUNITY SERVICES

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ABSTRACT

The hope of elderly patients (seniors) when they come to health services is to get satisfaction with the services they receive, so that it will become a benchmark in health services and strive to increase the needs of all aspects of health quality in the elderly. Objective: This study aims to determine the description of elderly satisfaction with the quality of elderly poly health services at the Kalibaru Kulon Banyuwangi Community Health Center in 2024. Method: This research is descriptive quantitative research. The research subjects were elderly (>60 years) using research instruments in the form of questionnaires and direct interviews with respondents. Results: from a total of 90 respondents, 41 people (82%) were satisfied with the satisfaction results of elderly patients who visited the elderly polyclinic. Furthermore, the quality of health services using the servqual method is seen from 5 dimensions, namely the satisfactory physical evidence (tangibles) dimension is 44%, satisfactory reliability dimension is 48%, responsiveness dimension is 52%, satisfactory assurance dimension is 48 %, and the satisfactory empathy dimension is 50%. Results: from a total of 90 respondents, 41 people (82%) were satisfied with the satisfaction results of elderly patients who visited the elderly polyclinic. Furthermore, the quality of health services using the servqual method is seen from 5 dimensions, namely the satisfactory physical evidence (tangibles) dimension is 44%, satisfactory reliability dimension is 48%, responsiveness dimension is 52%, satisfactory assurance dimension is 48 %, and the satisfactory empathy dimension is 50%.

Based on the overall quality of health services, it was found that 66% of elderly patients felt unsatisfactory. Conclusion: The majority of respondents in this study felt satisfied when seeking treatment at the Community Health Center and felt less satisfied with health services when viewed from all dimensions, however, in assessing each dimension, respondents felt satisfied with their visit to the Kalibaru Kulon Banyuwangi Community Health Center

Keywords*: satisfaction, quality, elderly, health services*

1. INTRODUCTION.

Elderly (elderly) is someone who is 60 years or older and is in the final stages of their life. Based on the World Health Organization (WHO), elderly people are divided into several groups, namely the elderly between the ages of 60-74 years, the elderly between the ages of 75-90 years and the very old (4). Based on the World Health Organization (WHO), elderly people are divided into several groups, namely the elderly between the ages of 60-74 years, the elderly between the ages of 75-90 years and the very old (4) Health status in each country is still a serious problem for WHO. This is because there are still inequalities in the health sector in each country, which is why WHO has made the main focus in the Sustainable Development Goals (SDGs) in recent years on the health sector. Especially in Indone sia there are still obstacles in the distribution of health service facilities between villages and cities (5). Health services for the elderly originate from various groups in the community and Community Health Centers as basic (primary) health service facilities (6).When a patient visits a health service, the hope of the patient and family is to get the best service and health needs as well as comfort and safety in terms of skilled staff, comfort of the waiting room, queues that are not too long, clean toilets and human resources.

who work in the health service sector (7). Elderly diseases are generally not contagious and are degenerative, usually caused by unhealthy eating habits and lifestyles (8). According to Kholifah, explained that elderly services are holistic in nature which includes promotive efforts, preventive efforts, curative efforts and rehabilitative efforts (1).

Patient satisfaction is the result of an assessment or evaluation in the form of the patient's emotional response (feelings of joy and satisfaction) due to the fulfillment of expectations or desires in the use and consumption of services so that it is a very valuable asset because they will continue to use the selected services (9). Puskesmas is the leading unit in providing services to the community (10). One way the Community Health Center creates patient satisfaction is through service quality (11). The services available at the Community Health Center for the elderly are elderly polyclinics with a good environment (12,13).

2. LITERARTURE REVIEW

According to Parasuraman et.al (1985), the dimensions of health service quality are influenced by two variables, namely the service received (perceived service) and the expected service (14). SERVQUAL is to look for the gap between the patient's perception assessment score regarding the quality of service received and the patient's expectation score (15). The aim is to look for a negative gap score result, meaning that the patient's satisfaction with the quality of service is less than satisfactory, if the gap score result is equal to zero, it means that the quality of service is stated satisfactory, while a positive gap score means the quality of service is very satisfactory (16). There are five dimensions to measure service quality which are called SERVQUAL dimensions (17).

These dimensions are physical facilities (tangibles), reliability, responsiveness, assurance and empathy (18).

These dimensions are:1. Physical facilities (Tangibles) include physical facilities, equipment, communication facilities and neat employee appearance (9). 2. Reliability is the ability to provide promised services promptly, accurately and satisfactorily. All of this is related to trust in service in terms of time.3. Responsiveness is the ability of officers to assist patients in providing fast service, responsiveness to patient needs and fast service.

4. Assurance includes the knowledge, ability, politeness and trustworthiness of officers, free from danger, risk and doubt.5. Empathy includes ease of relationships, good communication, personal attention and understanding the patient's needs. This dimension reflects workers' ability to understand customer feelings (9). The aim of this research is to determine the description of elderly satisfaction with the quality of elderly poly health services at the Kalibaru Kulon-Banyuwangi Community Health Center.

3.RESEARCH METHODOLOGY

This research uses descriptive quantitative research conducted at the Community Health Center. The population in this study were elderly people aged 60 years or more who visited the elderly clinic at the Kalibaru Kulon-Banyuwangi Community Health Center with a sample size of 90 people using the Slovin formula.

The sampling technique in this research is a purposive sampling technique where the researcher determines sampling based on the subjects who come and who meet the criteria or characteristics until the number of subjects is met and must meet the inclusion and exclusion criteria. The method for collecting data in this research is by filling out a patient satisfaction questionnaire regarding the quality of health services based on characteristics (age, gender, education and occupation) which have validity and reliability.The score from the questionnaire is a negative value which means it is declared unsatisfactory, a score equal to zero means satisfactory and a positive value means very satisfactory.

4.RESULT AND DISCUSSION

Based on research data on elderly respondents at the Kalibaru Kulon-Banyuwangi South Health Center, the following results were obtained: Determination of sample size according to Sintar et al. (2009) is dependent on the number of indicators multiplied by 4 to 10. The number of samples in this study is:Sample = number of indicators x 6 = 15 x 6 = 90 respondents

Table 1 Characteristics of elderly respondents in the Kalibaru Kulon-Banyuwangi area (n=90)

	frequency(n)	Persentage (%)
Gender		
male	50	55.6
women	40	44.4
total	90	100
age		
60-65 Years	40	46,7
66-70 Years	50	41,1
>70 Years	11	12,2
education		
elementary school	36	36
Junior High school	225	225
senior High school	18	18
College	11	
Work		
Doesn't work	33	33
Laborer	42	42
Farmer	6	6
Trader/entrepreneur	6	6
teacher	3	3

Patient age based on WHO, 60-75 years old 46 person, then 75-90 years old 4 person

Based on data processing shows that the reliability variable (X_2) is the variable that has the largest beta coefficient. This means that public satisfaction is more influenced by the reliability variable (X2) compared to other variables.it shows that the reliability variable (X2) is the variable that has the largest beta coefficient. This means that public satisfaction is more influenced by the reliability variable (X2) compared to other variables.

Table 2. t test satisfaction of elderly respondents in the KalibaruKulon-Banyuwangi Community Health Center working area

Variabel	t hitung	t tabel	Signifikansi	Alpha
Tangible	2,501	0,67723	0,014	0,05
Reliability	4,641	0,67723	0,000	0,05
Responsiveness	0,658	0,67723	0,495	0,05
Responsiveness	3,688	0,67723	0,000	0,05

Variable of Tangible;Reliability; Responsiveness; Responsiveness has partial effect on satisfaction with elderly community services at the Kalibaru Kulon Community Health Center elderly polyclinic. Variable Variable Beta p-value Description

Table 3. Satisfaction of elderly respondents in the KalibaruKulon-Banyuwangi Community Health Center working area

Variabel	Beta	p-value	Keterangan
Tangible (X1)	0,281	0,014	Influential
Reliability (X2)	0,356	0,000	Influential
Responsiveness (X3)	0,070	0,495	No effect
Empathy (X4)	0,289	0,000	Influential

Based on Table 3, it shows that the reliability variable (X2) is the variable that has the largest beta coefficient. This means that community satisfaction is more influenced by the reliability variable (X2) than other variables. The coefficient of the reliability variable (X2) has a positive sign, this means that the better the reliability provided, the greater the public's satisfaction with the elderly polyclinic services at the Kalibaru Kulon Community Health Center.

Results of Multiple Linear Regression Test Analysis-To determine the independent variable that has the most influence on the variable (Y), it can be done by comparing the regression coefficient (Beta) between one variable and another. The independent variable with the most dominant source of influence is the variable (Y) which has the largest regression coefficient.

The results of the analysis show that the reliability variable (X2) is the variable that has the largest beta coefficient. This means that community satisfaction is more influenced by the reliability variable (X2) than other variables. this means that the better the reliability provided, the greater the public's satisfaction with the elderly polyclinic services at the Kalibaru Kulon Community Health Center.

Reliability in health services is a very important factor and is often considered the most influential on patient satisfaction at Community Health Centers. Reliability is often the basis for the effectiveness of other dimensions of service quality, for example, tangibles and empathy are more empathy are more meaningful when the service provided is reliable. Patients will appreciate good facilities and personnel attention more if they know that the medical services they receive are also consistent and reliable, besides that reliability is a key factor that influences patient satisfaction at the Community Health Center. Although other aspects such as empathy, responsiveness and tangibles are also important, reliability in providing services is the most basic. Constraints create trust, reduce anxiety and ensure that patients always receive needed services in a timely and consistent manner. Therefore, Community Health Centers must focus on increasing service reliability to ensure high patient satisfaction, this is in accordance with previous research conducted by Adhytyo and Mulyaningsih (2013) and Bu'ulolo et al. (2019) which states that reliability is the most dominant factor in patient satisfaction (Adhytyo and Mulyaningsih, 2013; Bu'ulolo et al., 2019).

CONCLUSION

1) There is a tangible influence on satisfaction with elderly community services
2) There is an influence of reliability on satisfaction with elderly community services
3) There is no influence of responsiveness on satisfaction with elderly community services
4) There is an influence of empathy on satisfaction with elderly community services
5) The variable that has the most dominant influence on service satisfaction for the elderly community is reliability.

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