The Influence of Public Health Center Management on the **Quality Public Health Center Services in Ambon City**

Lita Astrid Tarumalesej¹, Muhammad AlwyArifin², Darmawansyah², Sukri Palutturi², AgusBintara Birawida³, Muh. Yusri Abadi²

¹Magister Student of Program Department of Health Administration and Policy, Public Health Hasanuddin University, ²Professor of Department of Health Administration and Policy, Public Health Hasanuddin University, ³Professor of Departmentt of Environmental Health, Public Health Hasanuddin University

Abstract

Health development is integral and important to national development. Therefore, a variety of comprehensive, tiered and integrated health efforts, both provided by the government and private sector, are organized to achieve the national health development goals. This research aims to look at the influence of public health center management on the quality of public health center services in Ambon City. This research is a type of quantitative research by conducting observational with the design of Cross Sectional Study. The research population is the entire head of the public health center and the Head of Business in each of the 22 public health centers in ambon city area. Sampling is done by total sampling technique. The sample set out in this study was 44 people at ambon city public health center. Analysis data using chi-square test. The results showed that there was an influence of planning (p=0,000), supervision, control and assessment (p=0,000) on the quality of public health center services in ambon city. While there is no effect of strengthening mobilization and implementation (0,074) on the quality of public health center services in Ambon city. Thus there is an influence of management on the quality of health services of public health centers in ambon city. It is expected that the head of the public health center improves performance in the preparation of planning by always guided by the previous data

Keywords: Planning, Management, quality, health care, public health centers.

Introduction

Health development is integral and important to national development. Therefore, a variety of comprehensive, tiered and integrated health efforts both provided by the government and private sector are organized to achieve the national health development goals. The implementation of quality health development is able to increase awareness, willingness and ability to live healthy independently for everyone in order to

e-mail: litatarumaselej@gmail.com

realize the optimal level of public health. People tend to demand better, friendlier and more quality public services including healthcare¹⁻⁴. With the increasing public demand for the quality of health services, the function of basic health services in public health centers needs to be gradually improved in order to be more effective and efficient and provide satisfaction to patients, families and communities⁵⁻¹¹

The quality of health care is the level of perfection of health services held in accordance with the code of conduct and service standards set, thus causing satisfaction for each patient¹²⁻¹⁴. ealthy Indonesia program is one of the agenda of the 5th program NawaCita, namely improving the quality of life of Indonesian people, which is further outlined in RPJMN in 2015 - 2019 and the decree of the Minister of Health of the Republic of Indonesia Number HK.02.02/ Menkes/52/2015 on the Strategic Plan of the Ministry

Correspondent Author:

Lita Astrid Tarumalesej

Magister Student of Program Department of Health Administration and Policy, Public Health Hasanuddin University

of Health year 2015 - 2019. To support the achievement of the strategic plan, the Ministry of Health established the Healthy Indonesia Program through three pillars namely: National Health Insurance, Improved Access and Quality of Health Services and Strengthening the Healthy Paradigm.¹⁵

Maluku Province has 208 public health centers spread across 11 districts/cities and accredited as many as 88 public health centers with graduation rates of 54 basic accredited public health centers or 62%, 32 public health centers accredited by the municipality or 36% and 2 main accredited public health centers or 2% while for the plenary level there is not yet or 0%. Ambon city as the capital of Maluku Province has 22 public health centers and all have been accredited 7 of them are mainly accredited, 9 accredited Madya, 6 accredited Basic. Improving the quality and management of public health centers requires active participation of both the head of the public health center, the person in charge of the efforts of the public health center, the implementing of activities and related parties, so that the planning and implementation of quality improvement can be realized as well as providing satisfaction to the users of the public health center.¹⁶

As an indicator of the quality of services in public health centers, it is expected that there is an improvement in the quality of service. Based on the results of performance assessment in public health center turns out to be a public health center with good performance results 10 (ten) public health centers, 6 (six) public health centers with performance results and 6 (six) public health centers with underperforming results. Thus the author wants to research about the effect of public health center management on the quality of public health center services in Ambon City, because after being evaluated it turns out that there are still many public health centers with less performance levels..

Materials and Method

This type of assessment uses quantitative research method by conducting observational with cross sectional study design. The research population is the entire head of the public health center and the Head of Administrative Procedures in each of the 22 public health centers in ambon city area. Sampling is done with total sampling technique. The sample set out in this study was 44 people at ambon city public health center. Data collection techniques are primary data obtained through direct interviews to respondents at the time of research, and secondary data that is data obtained from document collection, public health center profile, other related to the research in question.

Result

Based on table 1. The results of the planning variable study, showed that of the 44 respondents in ambon city public health center, a total of 32 respondents (68.2) stated good public health center level planning and as many as 14 respondents (31.8%) which states the planning of the level of public health centers is not good. Mobilization and implementation showed that of the 44 respondents in ambon city public health center, as many as 23 respondents (52.3%) and 21 respondents (47.7%) driving and poor implementation. Supervision, control and control, said that out of 44 respondents in ambon city public health center, a total of 29 respondents (65.9%) supervision, control and good judgment and as many as 15 respondents (34.1%) supervision, control and poor judgment. The quality of health services showed that out of 44 respondents in ambon city public health center, a total of 25 respondents (56.8%) the quality of good health services and as many as 19 respondents (43.2%) which states the quality of health services is not good.

Table 1. Distribution of Respondents Based on Research Variables ast Ambon City public health center in 2020

Variable	Amount (n)	Percent (%)	
Planning			
Well	30	68.2	
Not good	14	31.8	
Movement and Execution			
Well	23	52.3	
Not good	21	47.7	
Supervision, Control and Assessment			
Well	29	65.9	
Not good	15	34.1	
Service Quality			
Well	25	56.8	
Not good	19	43.2	
Total	44	100.0	

Source: Primary Data 2020

Research variable		Service Quality					
	Well		Not good		– amount		Р
	n	%	N	%	N	%	1
Planning							
Well	23	76.7	7	23.3	30	100.0	0.000
Not good	2	14.3	12	85.7	14	100.0	
Movement and Execution							
Well	16	69.6	7	30.4	23	100.0	0.074
Not good	9	42.9	12	57.1	21	100.0	
Supervision, Control and Assessment							
Well	22	75.9	7	24.1	29	100.0	0.000
Not good	3	20.0	12	80.0	15	100.0	
Total	25	56.8	19	43.2	44	100.0	

Table 2. The Effect of Research Variables Quality of Health Services at Ambon City public health center in2020

Source: Primary Data, 2020

Based on table 2 planning variables shows that out of 30 respondents with a good assessment of planning, as many as 23 respondents (76.7%) the quality of good health services and as many as 7 respondents (23.3%) which states the quality of health services is not good. Meanwhile, of the 14 respondents with poor assessment of planning, 2 respondents (14.3%) the quality of good health services and as many as 12 respondents (85.7%) which states the quality of health services is not good. The statistical test result was obtained a value of p =0.000, because the value $p= \alpha = 0.000 < 0.05$ then Ho was rejected, This means that there is a statistically variable influence of public health center level planning on the quality of health services in ambon city public health centers.

Based on the variables of mobilization and implementation shows that of the 23 respondents with a good assessment of mobilization and implementation, a total of 16 respondents (69.6%) who stated the quality of good health services and as many as 7 respondents (30.4%) who stated the quality of health services were poor. as many as 9 respondents (42.9%) who stated the quality of good health services and as many as 12 respondents (57.1%) who stated poor quality of health services. Statistical test results obtained a value of p = 0.074, because p> α value = 0.074> 0.05 then Ho accepted, this means that there is no statistically meaningful influence of variable movement and implementation of public health center level on the quality of health services in ambon city public health center.

Based on variable scrutiny, control, and assessment shows that of the 29 respondents with a good assessment of supervision, control and assessment, as many as 22 respondents (75.9%) the quality of good health services and as many as 7 respondents (24.1%) which states the quality of health services is not good. Meanwhile, of the 15 respondents with poor rating on supervision, control and assessment, as many as 3 respondents (20.0%) health care quality and as many as 12 respondents (80.0%) which states the quality of health services is not good. The statistical test result was obtained a value of p = 0.000, because the value of $p = \alpha = 0.000 < 0.05$ then Ho was rejected, this means that there is a statistically variable influence of handling, control and assessment of the level of public health centers on the quality of health services in ambon city public health centers.

Discussion

The quality of health services according to Sastrianegara is a degree of health service perfection that conforms to professional standards and service standards by using the potential resources available in hospitals or public health centers in a reasonable and efficient and effective manner and is given safely and satisfactorily norms, ethics, laws and socio-cultural by taking into account the limitations and capabilities of the government and the consumer community.¹⁷Quality improvement is a process of measuring the degree of

perfection of health services compared to standards or principles with the corrective actions that are systemic and to achieve optimum or excellent quality of service in accordance with existing science and technology standards and resource capabilities.¹⁸

Planning is the most important process of all management functions because without planning other functions; implementation, direction, and control will not be able to run. The planning of public health centers is the most important aspect in the management of public health centers. With the planning of public health centers can be structured and organized to achieve the function of public health center management. Planning by coordinating with all employees to draw up an annual activity plan that will be carried out in the year. Public health center level planning will provide a comprehensive view of all tasks, functions and roles that will be carried out and guide in the process of achieving the objectives of public health centers efficiently and effectively.¹⁹ In line research conducted by Shobirin (2016) is that there is a significant relationship of public health center management planning with the quality of treatment services in general poly in public health centers in Bangkalan Regency.In planning the level of public health centers, from the public health centers studied all have been referred to the Public Health Center Level Planning Guidelines. With the provisions of 4 stages in public health center level planning, namely the preparation stage, situation analysis, preparation of the proposed plan of activities and the preparation of the plan of implementation of activities. And the four stages have been implemented by the public health center well.²¹

Implementation is the process of organizing, monitoring and assessing the performance of the annual plan of the public health center, both the annual plan of mandatory health efforts and the annual plan of the health effort of choice, in addressing health problems in the working area of the public health center. The implementation of the public health center program can be carried out well in the event of good teamwork, which has been prepared at the time of planning. The results of the research conducted by Sarah, Sudiro and Eka (2017) conducted an analysis study of mananjemen reviewed from inpatient services after the accreditation of private plenary hospital x Semarang City, according to him in the implementation there are still deficient such as monitoring activities that have not been carried out regularly and structured, evaluation activities only

in the form of meetings and correction actions carried out have not been able to address the existing problems significantly.²⁴

Supervision and control is a process to continuously observe the implementation of activities in accordance with the work plan that has been prepared and conduct corrections in the event.²⁵Control of the quality of health services is very important considering the public health center one of the first level health facilities that is the vanguard of public health organizers. Efforts to improve the quality of public health center services are also very important for the realization of quality health services for all communities.²⁶From the results of tests conducted by Yusni, 2014 it is known that the management of supervision in public health centers does not significantly affect the quality of health services. The direct effect of public health center supervision management on the quality of health services is (16.63%), while the indirect influence of public health center supervision management on the quality of health services through access to health services amounts to (4.35%). so that the number of direct and indirect influences of public health center supervision variables on the quality of health services amounts to 20.98% while the remaining 79.02% is influenced by other variables²⁷. Improving quality in public health centers as a setting²⁸⁻³³ is a series of various health determinants. Various health problems can be handled at the level of public health centers as basic service institutions, such as NHI services³⁴, nutrition problems and stunting³⁵⁻⁴⁰, disease problems ⁴¹⁻⁴³and cultural aspects 44-46.

Conclusion

This study concluded that there is a statistically meaningful influence on the quality of health services of public health centers in ambon city. The better the planning in the public health center, the better the quality of health services in the public health center in Ambon city. There is no statistically meaningful effect on the mobilization and implementation of the quality of public health center health services in Ambon city. The less good the mobilization and implementation of programs in public health centers, the less good the quality of health services in public health centers in Ambon city. There is a statistically meaningful influence on the supervision, control and assessment of the quality of health services of public health centers in ambon city. The better supervision, control and assessment, the better the quality of health care. It is expected that the head of the public health center improves performance in the preparation of planning by always guided by the previous data.

Ethical Clearance: Taken from faculty of Public Health ethical committee

Source of Funding: Self

Conflict of Interest: Nil.

References

- Suswani A, Arsin AA, Amiruddin R, Syafar M, Palutturi S. Factors related quality of life among people living with HIV and AIDS in Bulukumba. International Journal Of Community Medicine And Public Health. 2018;5(8):3227-3231.
- Said M, Palutturi S. Increasing inpatient service quality of using quality function deployment method in nene mallomo hospital of sidrap regency, Indonesia. Indian Journal of Public Health Research & Development. 2018;9(4):287-291.
- Tahir M, Amiruddin R, Palutturi S, Rivai F, Saleh LM. Quality Evaluation of Health Services at Community Health Centers: through Accreditation Surveys in Indonesia. Indian Journal of Public Health Research & Development. 2020;11(1).
- Tahir M, Amiruddin R, Palutturi S, Rivai F, Saleh LM. Religius Character in Improving Primary Health Services Quality in South Sulawesi. Indian Journal of Public Health Research & Development. 2019;10(10):1428-1432.
- 5. Kementerian RK. Kementerian Kesehatan RI tentang Standar Akreditasi Puskesmas. Jakarta: Direktorat Jenderal Bina Upaya Kesehatan; 2014.
- Lamri L, Setyadi DS, Riadi SSR, Hariyadi S, Palutturi SP. Determinants of Organizational Citizenship Behavior, Work Satisfaction and Performance of the Eselon IV Officials of Regional General Hospitals in East Kalimantan Province. Journal of Arts and Humanities. 2020;9(4):88-97.
- Mubarak S, Palutturi S, Zulkifli A, Nuru H. Factors Affecting Work Satisfaction of the Village Midwives at Sidenreng Rappang Regency, South Sulawesi Province, Indonesia. International Journal of Health Sciences and Research (IJHSR). 2016;6(1):334-340.
- 8. Supriadi S, Minarti SMS, Paminto APA, Hidayati THT, Palutturi SPS. Factors related to Nurses' Job

Satisfaction and Performance at Private Hospitals in Samarinda City, Indonesia. Journal of Arts and Humanities. 2020;9(6):42-52.

- Nahlah A, Palutturi S, Abadi MY. Factors Related to the Satisfaction of Patients in Pelamonia Hospital. SCOPUS IJPHRD CITATION SCORE. 2019;10(7):1191.
- Muin H, Palutturi S, Sirajuddin S. User Satisfaction about the Use of SIMRS on Performance of Street Units in Nene Mallomo Hospital Sidenreng Rappang Regency. 2019.
- Amiruddin R, Palutturi S, Rahman SA. Training effect to the knowledge and skills of midwives in maternity health services at primary health care. International Journal Of Community Medicine And Public Health. 2018;5(11):4651-4655.
- 12. Muninjaya A. Manajemen Kesehatan Edisi 2. Jakarta: EGC; 2004.
- Tatali R, Arifin A, Hamzah A. Pelayanan Kesehatan Pasien Rawat Jalan di Poliklinik Bedah RSU Haji Makassar. Media Kesehatan Masyarakat Indonesia Universitas Hasanuddin. 2011;7(2):27488.
- Darmawansyah D, Arifin A. Analisis Mutu Pelayanan Kesehatan Ditinjau dari Aspek Input Rumah Sakit di Instalasi Rawat Inap RSU. Haji Makassar. Media Kesehatan Masyarakat Indonesia Universitas Hasanuddin.7(2):27425.
- 15. Menteri KR. Peraturan Menteri Kesehatan Republik Indonesia Nomor 46 Tahun 2015. Jakarta: Kementerian Kesehatan RI; 2015.
- Sukri Palutturi MY. Hubungan Kualitas Kepemimpinan terhadap Kinerja Petugas di Puskesmas Tamalanrea Makassar: Administrasi dan Kebijakan Kesehatan, Universitas Hasanuddin; 2014.
- Satrianegara MF. Organisasi dan Manajemen Pelayanan Kesehatan. Jakarta: Salemba Medika; 2014.
- Andi Nahlah SP, Muh. Yusri Abadi. Factors Related to the Satisfaction of Patients in Pelamonia Hospital. Indian Journal of Public Health Research & Development. 2019;10(7):5.
- Sulfianti Fakhruddin AR, Darmawansyah. Hubungan Manajemen Konflik dengan Kinerja Tenaga Kesehatan Di Puskesmas Pesisir Kabupaten Pangkep. Jurnal Administrasi dan Kebijakan Kesehatan. 2015.

2218 Medico-legal Update, October-December 2020, Vol. 20, No. 4

- Shobirin. Hubungan Perencanaan Manajemen Puskesmas dengan Mutu Pelayanan Pengobatan Di Poli Umum Puskesmas Kabupaten Bangkalan. Jurnal Administrasi Kesehatan Indonesia. 2016;2:14.
- 21. Lohafri Tanan I, Darmawansyah. ANALISIS TINGKAT KEPUASAN PASIEN DI PUSKESMAS BARA PERMAI KOTA PALOPO. Jurnal AKK. 2013;2(3):7.
- 22. Sarlin D, M, A., & Darmawansyah. Studi Manajemen Pengelolaan Obat di Puskesmas Labakkang Kabupaten Pangkep. Jurnal Manajemen dan Pelayanan Farmasi. 2014.
- 23. Nensi Debora Arung AH, Sukri Palutturi. Proses Pengambilan Keputusan Ibu Hamil Terhadap Pelayanan Persalinan Di Puskesmas Lempo Toraja Utara, Universitas Hasanuddin; 2013.
- 24. Sarah Nurulita Fathanah Sukma S, Eka Yunila Fatmasari. Analisis Manajemen ditinjau dari Pelayanan Rawat Inap Pasca Akreditasi Paripurna Rs Swasta X Kota Semarang. Jurnal Kesehatan Masyarakat. 2017;5(4).
- 25. Sukri Palutturi SR, Peter Davey, Cordia Chu. The Challenges and the Needs of Partnership in the Implementation of Healthy Cities in Indonesia: A Case Study of Makassar. Journal of US-China Public Administration. 2015;12(6):8.
- 26. Indar. Etikolegal Dalam Pelayanan Kesehatan. Yogyakarta: Pustaka Pelajar; 2017.
- 27. Yusni. Pengaruh Manajemen Pengawasan Puskesmas terhadap Mutu Pelayanan Kesehatan di Garut. Jurnal Publik. 2014.
- Palutturi S, Rutherford S, Davey P, Chu C. Comparison Between Healthy Cities and Adipura in Indonesia. Malaysian Journal of Medicine and Health Sciences. 2013;9(1):35-43.
- Palutturi S, Zulkifli A, Syam A. The Key Challenges and Recommendations for Healthy Cities Implementation of North Kolaka, Indonesia. Indian Journal of Public Health Research & Development. 2017;8(2):252-257.
- Palutturi S, Rutherford S, Davey P, Chu C. Professional Challenges to Strenghten Partnerships in the Implementation of Healthy Cities in Indonesia: A Case Study of Makassar. Research Journal of Medical Sciences. 2015;9(3):147-153.
- 31. Palutturi S, Darmawansyah, Nurhayani. ACHIEVEMENT AND TYPOLOGY OF

PARTNERSHIP IN THE IMPLEMENTATION OF HEALTHY CITIES IN INDONESIA: A CASE STUDY OF MAKASSAR. I J A B E R. 2016;14(2):939-949.

- Palutturi S, Chu C, Moon JY, Nam EW. A Comparative Study on Healthy City Capacity Mapping: Indonesia and Korea. The Social Sciences. 2015;10(6):848-854.
- Palutturi S, Arifin MA. Re-Standardization Makassar Healthy City based on Local Needs. Indian Journal of Public Health Research & Development. 2019;10(2).
- Palutturi S, Sahiddin M, Ishak H, Hamzah. Community Motivation and Learning to Pay the National Health Insurance ContributionAsian Journal of Scientific Research. 2018;11(2):276-286.
- 35. Syam A, Palutturi S, Djafar N, Astuti N, Thaha AR. Micronutrients and growth of children; a literature review. International Journal of Medical Science and Public Health. 2016;5(10):1981-1987.
- 36. Sirajuddin S, Syam A. Influence of a Red Palm Oil Emulsion on the Level of Retinol in the Plasma of Primary School Children in the Coastal Area of Makassar City. Pakistan Journal of Nutrition. 2016;15(5):465.
- 37. Jafar N, Indriasari R, Syam A, Kurniati Y. Exploration on adolescent knowledge related metabolic syndrome (METS). Indian Journal of Public Health Research & Development. 2018;9(6):263-266.
- Tahangnacca M, Amiruddin R, Syam A. Model of stunting determinants: A systematic review. Enfermería Clínica. 2020;30:241-245.
- Mallongi A, Safiu D, Amqaim H, et al. Modelling of S02 and CO Pollution Due to Industry PLTD Emission Tello in Makassar Indonesia. Journal of Engineering and Applied Sciences. 2019;14(2):634-640.
- 40. Palutturi S, Syam A, Asnawi A. Stunting in a political context: A systematic review. Enfermería Clínica. 2020;30:95-98.
- Noor NB, Amiruddin R, Awal M, Palutturi S, Mallongi A. Proxy model of comorbidities with stroke incident in South Sulawesi. Pak. J. Nutr. 2017;16:857-863.
- 42. Awal M, Amiruddin R, Palutturi S, Mallongi A. Relationships between lifestyle models with stroke

occurrence in South Sulawesi, Indonesia. Asian Journal of Epidemiology. 2017;10(2):83-88.

- 43. Bahry Noor N, Amiruddin R, Awal M, et al. Stroke: Morbidity, risk factors and care in Taiwan. Pakistan Journal of Nutrition. 2013;16(11):128-134.
- 44. Asrina A, Palutturi S, Andayanie E. Culture and health behavior of buton society of Baubau City, Southeast Sulawesi. Indian Journal of Public Health Research & Development. 2018;9(9):315-318.
- Latu S, Maidin A, Palutturi S. Implementation of family planning program policy based on culture in Jayawijaya Province of Papua. Indian Journal of Public Health Research & Development. 2018;9(8):54-58.
- 46. Asrina A, Palutturi S, Tenri A. Dole-Dole Tradition in Health Seeking Behavior of Buton Society, Southeast Sulawesi. Indian Journal of Public Health Research & Development. 2018;9(7):270-274.