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Implementation Of Service Quality In Order To Increase Patient Satisfaction Of Simolawang Surabaya Health Center

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ABSTRACT

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This study aims to evaluate the implementation of service quality in improving patient satisfaction at UPT Puskesmas Simolawang, Surabaya. Using a descriptive quantitative approach, data were collected from 182 patients through structured questionnaires based on the SERVQUAL model, which includes five dimensions: tangibles, reliability, responsiveness, assurance, and empathy. Descriptive statistical analysis was used to assess public perceptions of service performance in each dimension. The results show that the overall service quality is perceived as "very good," with the assurance dimension receiving the highest score, particularly on the item related to the availability of free healthcare services. Conversely, the responsiveness dimension received the lowest score, especially on the item concerning the timeliness of staff response during peak hours. These findings suggest that while trust, professionalism, and equitable access are strengths of the institution, improvements in real-time service responsiveness and infrastructure comfort are needed. The study contributes to the ongoing discourse on quality improvement in primary healthcare and provides practical recommendations for public health administrators to enhance patient-centered services using the SERVQUAL framework.

INTRODUCTION

Healthcare services are one of the most essential components in improving public welfare and measuring government accountability. Community health centers (Puskesmas) play a critical role in delivering primary healthcare services that are affordable, equitable, and of acceptable quality. In the context of decentralization in Indonesia, Puskesmas not only function as the first point of medical care but also serve as a barometer of public service quality at the local level (Ministry of Health RI, 2016). Accordingly, enhancing service quality in these institutions is crucial for increasing community

satisfaction and maintaining public trust in health governance.

At Puskesmas Simolawang, Surabaya, recent findings indicate that several challenges persist in service implementation. Observations and public feedback have highlighted recurring issues such as prolonged waiting times, inadequate medical equipment, unclear service procedures, and limited interpersonal communication from healthcare personnel. These issues are reflected in the decline of the Public Satisfaction Index (IKM), which, although still categorized as "Good," has shown a downward trend over several periods. According to the Ministry of Administrative Reform (Kepmenpan No. 63/2003),

public services must adhere to the principles of transparency, accountability, responsiveness, and equity. A decreasing IKM suggests that some of these principles may not be fully realized in current service delivery, warranting a deeper evaluation of service quality gaps.

To assess and improve the quality of public health services, a structured theoretical framework is necessary. The Service Quality (SERVQUAL) model developed by Parasuraman, Zeithaml, and Berry (1988) has been widely applied to evaluate service performance in both public and private sectors. The model identifies five critical dimensions of service reliability, quality: tangibles, responsiveness, assurance, and empathy. Each dimension captures distinct aspects of user perceptions-from physical infrastructure and staff competence to emotional connection and trust (Parasuraman et al., 1990; Zeithaml et al., 1996). The SERVQUAL model has proven particularly effective in healthcare settings, where service outcomes depend not only on clinical interventions but also on the patient experience (Zahroh, 2017; Kadam et al., 2022).

This study applies the SERVQUAL model to analyze the implementation of service quality at Puskesmas Simolawang. By measuring each dimension based on patient feedback, the research aims to identify which aspects of the service are meeting expectations and which require improvement. The results of this study are expected to provide valuable insights for health service management and offer strategic recommendations for quality enhancement that align with community needs and policy standards.

LITERATURE REVIEW

Service Quality

Service quality is a critical factor in evaluating the success of public service institutions, including those in the healthcare sector. According to Parasuraman, Zeithaml, and Berry (1988), service quality is defined as the comparison between customer expectations and their perceptions of the services received. The SERVQUAL model, developed by the aforementioned scholars, includes five dimensions: tangibles, reliability, responsiveness, assurance, and empathy. These dimensions serve as comprehensive indicators to assess and measure service quality across different contexts. In the realm of healthcare services, SERVQUAL has been widely

adopted to evaluate patient satisfaction and to identify which aspects of service delivery require improvement (Zahroh, 2017).

In this study, SERVQUAL is applied at Puskesmas Simolawang to determine the extent to which service quality aligns with public expectations. Each of the five SERVQUAL dimensions was used as an evaluation instrument covering various indicators, including facility quality, timeliness of services, procedural clarity, and staff behavior. This application aligns with Kotler's (2007) assertion that customer satisfaction is an emotional response that arises when the perceived service either meets or falls short of prior expectations. The outcomes of this assessment can inform targeted efforts to enhance service quality, both from an internal management perspective and in the formulation of public policies based on community needs.

Public Satisfaction Index

The Public Satisfaction Index (Indeks Kepuasan Masyarakat, or IKM) is an official instrument used by the Indonesian government to measure public perceptions of the quality of services provided by public agencies. The IKM is governed by the Regulation of the Minister of Administrative and Bureaucratic Reform (Permenpan RB) No. 14 of 2017, which serves as a standard for evaluating public service performance. The index is calculated through surveys using structured questionnaires distributed to service users. The IKM evaluates several indicators, including procedural compliance, speed of service, and the professionalism of service personnel. At Puskesmas Simolawang, IKM surveys are conducted periodically, and the results are used as a benchmark to measure the effectiveness of healthcare service delivery. As outlined in the research document, the IKM score is categorized as "very good"; however, continuous evaluation is necessary to identify which service dimensions require further strengthening.

A previous decline in IKM scores, despite still being in a high category, signals a potential gap between public expectations and actual service performance. This highlights the importance of involving the public in ongoing service evaluation processes. According to the Decree of the Minister of Administrative Reform No. 63 of 2003, public services should be grounded in the principles of participation, transparency, fairness, and accountability. Therefore, integrating **IKM**

assessments with the SERVQUAL model offers a more comprehensive evaluation approach. This dual-method framework enables institutions such as Puskesmas Simolawang to design targeted strategies for service quality improvement that are measurable and aligned with the actual needs of the community.

METHOD

This study applies a descriptive quantitative research approach, aiming to systematically describe and interpret the quality of health services as perceived by patients at UPT Puskesmas Simolawang, Surabaya. The quantitative descriptive method is considered suitable for assessing service quality since it allows for the measurement of specific dimensions using structured instruments and statistical analysis. The study was conducted during February 2025, with the research site located at the Puskesmas Simolawang service area.

The target population includes individuals who had received healthcare services at Puskesmas Simolawang. A total of 182 respondents were selected through random sampling techniques. The selection criteria included community members from the Puskesmas Simolawang area and residents of Surabaya aged 18 years and above who visited the facility during the data collection period. This sampling method ensured that various demographic segments were represented, thereby increasing the generalizability of the findings within the local context.

Data were collected through a structured questionnaire based on the SERVQUAL model, which consists of five core dimensions of service quality: tangibles, reliability, responsiveness, assurance, and empathy. The questionnaire employed a differential scale ranging from 1 to 4, where respondents were asked to rate their perceptions of service performance across 13 specific indicators aligned with the SERVQUAL framework. The instrument was validated through a preliminary trial to ensure clarity, consistency, and reliability of each item.

The analysis technique used in this study is descriptive statistics, focusing on the calculation of mean scores and percentages for each SERVQUAL dimension. This approach allows the researcher to identify the strengths and weaknesses of each service component as perceived by patients. The results were interpreted in accordance with existing public service standards and benchmarks established by the Ministry

of Administrative Reform (Kepmenpan No. 63/2003) and the public satisfaction index (IKM) guidelines.

To enhance data credibility and validity, the research also considered cross-checking questionnaire results with documentation from institutional service reports, complaint logs, and patient feedback forms. Although the study is primarily quantitative, these supporting documents provided contextual insights that complemented statistical findings. The use of a systematic instrument and structured analysis ensures that the study findings offer an evidence-based understanding of service quality performance at Puskesmas Simolawang.

RESULT

This study was conducted to evaluate the perceived service quality at UPT Puskesmas Simolawang using the SERVQUAL model. The analysis is based on survey responses from 182 patients who received healthcare services at the facility in February 2025. The findings reveal the performance of five core service quality dimensions tangibles, reliability, responsiveness, assurance, and empathy and the overall level of public satisfaction:

Respondent Characteristics

The respondents consisted of individuals aged 18 years and above who had utilized services at Puskesmas Simolawang. The sample represented a diverse demographic, including male and female patients from various districts in Surabaya, particularly those residing within or near the service area of the puskesmas. Most respondents were first-time visitors or regular users of outpatient care. The random sampling approach ensured representation across age groups, socioeconomic backgrounds, and service types accessed (general consultation, maternal health, child care, etc.).

Table 1 Respondent Characteristics

No	Kategori	Subkategori	Frekuensi	Persentase (%)
1	Jenis Kelamin	Laki-laki	62	34
		Perempuan	120	66
2	Usia	20-35 tahun	78	43
		36-50 tahun	38	21
		51-65 tahun	50	27
		>65 tahun	16	9
3	Pendidikan	Tidak/Belum Sekolah	7	4
		Belum Tamat SD	26	14
		Tamat SD/Sederajat	57	31
		SLTP/Sederajat	33	18
		SLTA/Sederajat	50	27
		Akademi/Diploma III/Sarjana Muda	1	1
		Diploma IV/Strata I	8	4
4	Pekerjaan	Belum/Tidak Bekerja	20	11
		Buruh Harian Lepas	1	1
		Karyawan Honorer	2	1
		Karyawan Swasta	31	17
		Mengurus Rumah Tangga	75	41
		Pelajar/Mahasiswa	37	20
		Pensiunan	2	1
		Wiraswasta	14	8
5	Jenis Layanan	Poli Umum	75	41
		Poli Lansia	38	21
		Layanan Battra	9	5
		Pelayanan Lainnya	9	5
		Poli Gigi	19	10
		Konsultasi Gizi	5	3
		Poli KIA	22	12
		Konsultasi Psikologi	5	3

Mean Scores for Each Service Quality Dimension

The results of the SERVQUAL-based questionnaire show that all five dimensions scored within the "very good" category. The average mean scores per dimension are as follows:

Assurance: 3.92
Reliability: 3.90
Empathy: 3.89
Tangibles: 3.88

• Responsiveness: 3.87

These scores indicate a strong and consistent level of public satisfaction with healthcare service delivery at Puskesmas Simolawang. The narrow range of mean values also reflects overall service quality uniformity across dimensions.

Interpretation of Each Dimension

Assurance received the highest overall mean score. This dimension reflects patient trust in staff competence, professionalism, and the sense of safety during service interactions. The free-of-charge service policy was identified as a major contributor to the high rating in this dimension, particularly in items assessing affordability and financial transparency.

Reliability, which measures the ability to perform promised services accurately and

consistently, also scored high. Respondents expressed satisfaction with procedural clarity, correct handling of administrative processes, and consistency in service schedules.

Empathy was also well-rated. Patients appreciated the respectful and caring attitude of medical personnel. This was especially true for those requiring special attention such as the elderly, pregnant women, or caregivers accompanying children.

Tangibles, referring to physical facilities and equipment, scored slightly lower but still within the "very good" range. Although patients considered the facilities clean and adequately equipped, several noted that seating availability and waiting room comfort could be improved.

Responsiveness scored the lowest among the five, though still high. Some respondents reported delays in service initiation and difficulty in obtaining quick assistance during peak hours. This highlights a potential gap in real-time staff availability and responsiveness to urgent patient needs.

Highest and Lowest Scoring Items

The highest individual item score was found in the assurance dimension, particularly on the item regarding "affordable or free health services," which reflects patients' appreciation of cost-related fairness. On the other hand, the lowest scoring item was part of the responsiveness dimension, specifically related to "speed of response from staff when assistance is needed." Although not rated poorly, this area indicates a relative need for improvement in timeliness and staff coordination during busy periods.

Overall, the Public Satisfaction Index (IKM) based on the survey results confirms that service quality at Puskesmas Simolawang is perceived as excellent, though targeted improvements particularly in service responsiveness and facility comfort could further enhance patient satisfaction.

DISCUSSION

Tangibles

The tangibles dimension refers to the physical environment, facilities, equipment, and appearance of personnel involved in service delivery (Parasuraman et al., 1988). In this study, the tangibles dimension received a high mean score of 3.88, indicating that patients perceive the physical aspects of service delivery at Puskesmas Simolawang as very good.

expressed Respondents satisfaction with the cleanliness of the facility and the organization of public service spaces, including waiting areas and examination rooms. However, based on patient suggestions (bismillah 2.docx, Bab IV), comfort in the waiting area and seating availability were noted as areas that could be improved. This reflects the idea proposed by Zahroh (2017) that a clean, welland accessible environment organized, significantly enhance patients' perception of care, particularly in primary health facilities.

Reliability

Reliability refers to the ability of service providers to deliver what is promised dependably and accurately (Parasuraman et al., 1988). In this research, reliability scored an average of 3.90, which is indicative of a consistently reliable service. Patients reported that healthcare personnel carried out their duties according to schedule and provided appropriate services based on established procedures. Additionally, there were few reports of miscommunication or administrative errors, the perception supporting that services dependable. This aligns with the findings in the thesis (bismillah 2.docx, Bab IV) and is supported by Setiawan and Sayuti (2020), who emphasize that consistent service delivery builds long-term trust and satisfaction among service users.

Responsiveness

The responsiveness dimension, which focuses on staff willingness to help and provide prompt service, received the lowest average score (3.87) among the five dimensions, though still classified as "very good." Several respondents noted longer-thanexpected wait times, especially during peak hours or in the absence of digital queueing systems (bismillah 2.docx, Bab IV). This finding aligns with the research of Sihombing & Pratama (2022), which suggests that timely assistance is a key determinant of user satisfaction in public health services. Delays or perceived indifference can significantly reduce patient satisfaction, even when other aspects of care are well executed. Improving this dimension could involve increasing staff allocation during busy periods and enhancing communication systems for real-time updates.

Assurance

Assurance reflects the competence, courtesy, and ability of staff to instill confidence and trust in patients (Zeithaml et al., 1990). In this study, assurance emerged as the highest scoring dimension (mean = 3.92). This was particularly influenced by the perception that services were provided free of charge, which helped reduce financial anxiety and built trust in the healthcare system. Moreover, patients viewed staff as polite, competent, and respectful, aligning with the findings in the thesis (bismillah 2.docx, Bab IV). According to Kotler (2007), the sense of safety and trust in service providers greatly influences overall satisfaction, especially in healthcare vulnerability is high.

Empathy

Empathy refers to the provision of individualized and caring attention to service users (Parasuraman et al., 1988). With an average score of 3.89, this dimension ranked third overall. Patients appreciated the friendliness and attentiveness of healthcare staff, especially in services involving maternal and child health, where emotional support is crucial (bismillah 2.docx, Bab IV). However, a few respondents suggested that interactions could be improved by spending more time listening to patient concerns. This is consistent with Zahroh (2017), who argues that emotional engagement and communication are essential components of quality service in healthcare.

CONCLUSION

This study evaluated the implementation of service quality at Puskesmas Simolawang using the SERVQUAL model, which includes five key dimensions: tangibles, reliability, responsiveness, assurance, and empathy. The analysis, based on 182 patient responses, indicates that all dimensions were rated as "very good." Nevertheless, a closer look reveals differences in performance levels across dimensions and specific service items.

The assurance dimension recorded the highest overall mean score. Among the items assessed, the provision of free or affordable healthcare services received the most favorable rating. This item reflects patients' strong appreciation for the financial accessibility of services, which significantly enhances their trust and satisfaction. The perception that they can access medical treatment without financial burden

instills a sense of fairness and inclusion, particularly among lower-income communities.

In contrast, the responsiveness dimension scored the lowest, with the most critical item being related to the timeliness of staff response when assistance is needed. Patients reported experiencing service delays, particularly during peak hours or when administrative queues were long. This finding points to challenges in real-time responsiveness and staff coordination, which, if left unaddressed, could affect the overall perception of efficiency and care.

These findings indicate that while the foundation of service quality at Puskesmas Simolawang is strong, there are targeted areas that require improvement. The high performance in assurance demonstrates that policies offering free healthcare have a substantial positive impact. Meanwhile, the need for better responsiveness calls for operational enhancements in service flow and human resource allocation.

Practical Implications To further improve service delivery, several practical measures can be implemented. First, to address responsiveness issues, the Puskesmas should consider optimizing staff distribution during peak hours and introducing digital queue management systems. This can reduce wait times and ensure patients receive timely assistance.

Second, maintaining the high assurance score requires consistent professional training and reinforcement of service standards. Health workers should be continuously equipped with up-to-date clinical knowledge and communication skills to foster patient trust and safety.

Third, while tangibles were rated positively, some patients expressed discomfort with waiting room conditions. Minor infrastructure upgrades—such as improved seating, clearer signage, and ventilation—can enhance patient comfort and support the perception of a modern, patient-centered environment.

Lastly, implementing real-time patient feedback mechanisms, such as QR code-based satisfaction surveys, will allow the institution to monitor service quality continuously and respond proactively to emerging issues.

In sum, Puskesmas Simolawang has demonstrated strong service performance through its commitment to patient satisfaction and accessibility. By addressing operational gaps in responsiveness and sustaining excellence in assurance, the health center

can further elevate public trust and deliver inclusive, efficient, and high-quality healthcare services.

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