

Analisis kepuasan pasien unit rawat jalan untuk meningkatkan mutu pelayanan di RS.Marinir Cilandak pada tahun 2004

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Abstrak

Rumah sakit sebagai penyedia jasa layanan kesehatan dituntut untuk selalu dapat menyediakan pelayanan yang berkualitas, cepat, menyenangkan dan memuaskan pelanggan. Karena banyaknya rumah sakit saat ini, meningkatnya arus informasi dan tingkat pendidikan membuat masyarakat semakin kritis dan memilih rumah sakit yang dapat berkualitas.

Kunjungan pasien di unit rawat jalan RS. Marinir Cilandak pada tahun 2001-2003 yang semakin menurun, di sisi lain adanya keluhan pasien poliklinik yang diterima oleh manajemen dan adanya pasien yang batal berobat karena kecewa terhadap pelayanan di Poliklinik membuat peneliti ingin melihat bagaimana gambaran kepuasan pasien di unit rawat jalan RS.Marinir Cilandak.

Masalah dalam penelitian ini adalah belum adanya pengukuran kepuasan pasien di Unit Rawat Jalan RS. Marinir Cilandak sehingga tujuan penelitian ini untuk mengukur kepuasan pasien / keluarganya di Unit Rawat Jalan RS.marinir Cilandak dalam upaya meningkatkan mutu pelayanan. Jenis penelitian yang dilakukan adalah cross sectional survey, dengan pendekatan analisa kuantitatif dan kualitatif. Peneliti menggunakan kuesioner yang sudah diuji validitas menggunakan Korelasi Pearson Product Moment (r) dan diuji reliabilitas menggunakan nilai Alpha. Kuesioner diedarkan kepada 400 responden yang berobat di unit rawat jalan RS.Marinir Cilandak pada April - Juni 2004.

Dari penghitungan distribusi frekuensi didapatkan karakteristik responden yang paling banyak datang berobat adalah wanita, usia 21-35 tahun, tidak bekerja/ibu rumah tangga, pendidikan SMA, dengan gaji 1-2 juta per bulan, status pasien militer/keluarganya, tempat tinggal di jakarta selatan, cara pembayaran dengan biaya dinas dan datang ke rumah sakit dengan alasan rumah sakit dinas. Untuk mengetahui gambaran kepuasan digunakan metode servqual dengan menghitung servqual score. Hasilnya adalah pada dimensi reliability (- 0,92), kemudian dimensi responsiveness (-0,80), dimensi tangible (-0,62), dimensi assurance (-0,56) dan terakhir dimensi empathy (-0,51). Dui 400 orang responden yang puas terhadap terhadap dimensi tangible 19%, Reliability 13.5%, Responsiveness 19.8%, assurance 23,5% dan empathy 33%.

Kemudian dilakukan uji chi square untuk melihat kemaknaan perbedaan proporsi antara karakteristik responden dengan kepuasan. Hasilnya menunjukkan adanya hubungan signifikan hanya tingkat pendidikan dengan kepuasan responden dimensi assurance dengan nilai $p = 0,012$. Rata-rata nilai persepsi dan harapan pasien kemudian dipetakan kedalam diagram kartesius yang terdiri dari 4 kuadran dimana masing-masing kuadran dapat menggambarkan harapan dan persepsi responden terhadap pelayanan serta prioritas perbaikannya. Ketepatan waktu dimulainya pelayanan, kecekatan perawat dan penjelasan dokter tentang penyakit merupakan atribut yang terletak di kuadran A dan merupakan prioritas utama untuk segera

diperbaiki. Untuk mencari akar masalah dari faktor pada kuadran A dilakukan pengamatan dan wawancara.

Dengan menggunakan diagram fishbone didapatkan penyebab terjadinya faktor-faktor yang terletak di kuadran A adalah keterlambatan dokter, sarana belum memadai, berkas status terlambat masuk poli, kurangnya waktu tatap muka antara dokter dan pasien, tidak ada SOP perawat di poli, kurangnya ketrampilan komunikasi pada perawat dan kurangnya fungsi pengawasan. Diakhir penelitian disarankan menunjuk koordinator unit rawat jalan, membuat komitmen dengan dokter, membenahi medical record, mengoptimalkan fungsi Kepala Sub Departemen Perawatan, membuat SOP dan alur proses di poliklinik, menjadwalkan pelatihan dan melengkapi kebutuhan yang belum tersedia.

Hospital as the public health service is required to always provide a quick, qualified, comfort and satisfied services to the public. As today, there already many hospital existing and increasing in the information field as well as education, making people are getting critical in choosing a good and qualified hospital.

Outpatient visiting to the Marinir Hospital Cilandak during year 2001 - 2003 are getting decreased, and on the other side there have been complaining of the patient to the hospital and been accepted by the management, also some patient have been cancelled their treatment at the hospital due to the unsatisfaction toward the hospital services and this has become a reason for the surveyor to see the description of how is the satisfaction of the patient in having the services at the Marinir Hospital Cilandak.

The main problem in this survey is that there is no certain measurement of the patient satisfaction at the Marinir Hospital, so that the aim of this survey is to make certain satisfaction measurement of the patient and their family in having services in this hospital and to upgrade the quality of the services as well. The type of the survey that will be doing in this hospital is cross sectional survey, by analyzing quantitative and qualitative approach. The surveyor is using questioner that has been tested its validity using Pearson Product Moment r correlation and reliability tested using Alpha value. The questionnaire were circulated to 400 respondent that have their treatment at the Mariner Hospital Cilandak during April - June 2004.

From the frequent distribution calculation, the most characteristic respondent is coming from women by age of 21 - 35, jobless 1 house maker, senior high school that earn 1-2 million per month, patient status military / the family, living in south Jakarta, term of payment by military service and visiting hospital as to military service hospital.

To find out of satisfaction description, there will be using servqual method by calculate servqual score. Which in result at the reliability dimension (- 0,92), then responsiveness dimension (-0,80) tangible dimension (-0,62), assurance dimension (-0,56) and latest empathy dimension (-0,51). From 400 respondent those who satisfied with tangible dimension is 19%, Reliability 13,5%, Responsiveness 19,8%, Assurance 23,5% and empathy 33%. Following is chi square test to find out the proportional different between respondent characteristic and satisfaction. The significant relation is only showed on the education grade with respondent satisfaction at the assurance dimension with value $p = 0,012$. The average perception and patient desire will be mapped into kartesius diagram which is consist of 4 quadrant where in each quadrant describe wishes and perception respondent toward the service and its priority mending. Punctuality in

servicing, nurses alertness and doctor's explanation / diagnosis in regard with its disease are all in the A quadrant and are main priority to have its mend immediately. To find out the main reason from the A quadrant there has been a surveyed and interviewed.

By using fishbone diagram they can find out the reason of the factors which are in the A quadrant such as doctor who come late, inadequate service, file /medical record that is being late to reach the poll, lack of time between doctor and patient, no SOP at the poll, lack of communication among nurses and lack of supervision. At the end of the survey, it is suggested to appoint the coordinator for outpatient unit, making commitment with doctor, organize medical record, optimal the function of head of nursing dept, preparing SOP, making regulation at the poli, scheduling the training and completing the necessary things that has not been provided.

Reference : 35 books (1980-2003)</i>