

**KESESUAIAN HARAPAN DENGAN KENYATAAN KUALITAS PADA  
PELAYANAN DI KLINIK MATA RUMAH SAKIT SYARIF  
HIDAYATULLAH**

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**ABSTRACT**

Hospitals as health care providers, can not be separated from environmental influences or pressures that lead to a decrease in the number of patient visits. This study aims to obtain empirical evidence of conformity with the reality of the quality of service at Clinic Syarif Hidayatullah Hospital's Eye Specialist. The method used in this research is comparative research with observasional pre and post. The number of samples used are 75 respondents for the analysis of individual patient time horizon or one shoot study.

The results showed that the level of conformity between expectations with reality based on Cartesian priority diagram (quadrant A) to be handled immediately by the management of the dimensions of tangible quality, the priority to be improved is the waiting room that looks less comfortable, visible eye specialist eye examination room less comfortable and the hospital lacks a clear guide board in providing direction to patients; dimension of quality of reliability is the Registration Officer does not provide the registration information clearly and appropriately and the nurse is less dexterous in conducting preliminary examination of the patient's condition; dimension of responsiveness quality is most of the patients already feel fit between expectations with reality; the quality dimension of assurance is that the nurse does not always confirm the patient's name before entering the eye specialist's room; dimension of empathy quality is Registration officer not always be friendly when serve, Dimension of quality of service as a whole which must be priority that is quality of service of Empathy. Research implication, Syarif Hidayatullah Hospital should prioritize quality of service to customer / patient in giving service, assessed based on respondent's interpretation about the match between expectation with reality covering speed of officer in giving aid, availability of facility needed by patient and hospitality officer in giving service, these efforts can be done by including officers in training therapeutic communication mastery, costumer service and reward or punishment.

***Keywords: Quality Dimension, Cartesian Diagram***

## ABSTRAK

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The results showed that the level of conformity between expectations with reality based on Cartesian priority diagram (quadrant A) to be handled immediately by the management of the dimensions of direct evidence quality, the priority to be improved is the waiting room that looks less comfortable, visible eye specialist eye examination room less comfortable and the hospital lacks a clear guide board in providing direction to patients; dimension of quality of reliability is the Registration Officer does not provide the registration information clearly and appropriately and the Nurse is less dexterous in conducting initial examination of the patient's condition; dimension of responsiveness quality is most of the patients already feel fit between expectations with reality; the quality dimension of assurance is that the nurse does not always confirm the patient's name before entering the eye specialist's room; dimension of empathy quality is Registration officer not always be friendly when serve, Dimension of quality of service as a whole which must be priority that is quality of service of Empathy. Research implication, Syarif Hidayatullah Hospital should prioritize the quality of service to customer / patient in giving service, assessed by respondent interpretation about the match between expectation with reality covering speed of officer in giving aid, availability of facility needed by patient and hospitality officer in giving service, these efforts can be done by including officers in training therapeutic communication mastery, costumer service and reward or punishment.

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## **PRELIMINARY**

Health services are included in the service category. Service is any action or activity which may be offered to another party, essentially intangible and does not result in any ownership, the production of services may be related to physical products or not (Kotler 2007). Hospitals as institutions of health care providers, can not be separated from the influence or pressure of the environment. Growth and development of hospital organization becomes dependent on the state of the organization environment where the hospital is located. This indicates that a hospital management system is required that takes into account the strategic aspect for the hospital to be able to adapt or control those influencing factors that are also constantly changing, whether it is internal factors let alone the external factors

According to Kotler (2004), if the company wants to be able to compete in the global market one way is to commit to create and maintain customer satisfaction and must know to adapt to a changing market, by running a market-oriented strategic planning. This increasingly complex business competition caused a paradigm shift and demanded changes in hospital management towards more professional management based on global standards supported by professional management in terms of planning, implementation and evaluation.

It is undeniable that there has been a paradigm shift from previously fully functioning social hospitals and then into a service industry that is expected to generate profits in order to survive and thrive in a competitive environment. This paradigm shift will affect the governance of the hospital in carrying out its role as a health care provider to the community. The shift in the health paradigm has had a major positive impact on hospital management which is marked by the management of hospitals that implements a quality management / quality pattern and reliable service in the face of global competition and work dynamics. Patient satisfaction is one of the benchmarks of health service quality level. In addition, patient satisfaction is an important element in evaluating the quality of services by measuring the extent of patient response after receiving services .. Patient satisfaction becomes one of the benchmarks of quality level of health services. In the Minister of Health Regulation No. 129/2008 on Minimum Service Standards RS has established patient satisfaction standards that must be achieved by the hospital, in each service unit. With the minimum service standards is expected all hospitals in Indonesia can improve its performance, and are required to provide quality services in accordance with the established standards.

Syarif Hidayatullah Hospital is faced with the fact that the outpatient visits have declined in the last three years, especially in eye specialist clinics. So far, management has not been much explored about the quality of Clinical Services Specialist Eyes especially about the suitability between expectations with reality

quality of service quality dimensions of direct evidence, reliability, responsiveness, assurance and empathy and which dimensions of quality have the highest level of conformity gap in Eye Specialists Clinic. Research M.Ali Pramono

(2004) who examines the Relationship between Perception of Patients About Quality of Doctor and Nurse Service with Willingness to Rehabilitate Inpatient Patients at Kartini Jepara General Hospital as well as Sri Berdi Karyati (2006) who conducted Influence of Patient Perception Perception About Quality Specialist Obsgyn Obstetric Service with the interest of patient re-visit at RSI Rajal Installation of Sultan Agung Semarang.

The objective of this research is to obtain empirical study evidence about the analysis of the fit between expectation and the reality of service quality at Eye Specialist Clinic Syarif Hidayatullah Hospital.

## RESEARCH METHODS

This research is a comparative research with observasional pre and post. The samples were calculated using Slovin formula with 75 samples. The results of the validity analysis on the questionnaire showed that of 30 questionnaires all questions declared valid with R value above 0.361. Reliability test performed obtained Cronbach Alpha value of five variables greater than 0.6 so it is considered meaningful.

Analysis of research data using the method of Importance - Performance Analysis which then grouped in Cartesian diagram. The score of hope and the reality of service quality is then tested with Paired t Test because one sample will have two data with pre and post design.

## RESULT ANALYSIS AND DISCUSSION

Test results on the fit between expectations and reality and discussion are as follows:

### 1. Quality of Service Tangible

The suitability between expectation and reality of service quality at eye clinic of Syarif Hidayatullah Hospital is seen from Tangible of 91,97% (high conformity),

Table 1. Average Hopes and Reality of Direct Evidence

Items	Hope (Y)	Reality (X)	$\bar{Y}$	$\bar{X}$	Conformity
BL1	271	240	3,61	3,20	88,64%
BL2	269	244	3,59	3,25	90,53%
BL3	272	242	3,63	3,23	88,98%
BL4	264	250	3,52	3,33	94,60%
BL5	270	250	3,60	3,33	92,50%
BL6	271	256	3,61	3,41	94,46%
BL7	265	249	3,53	3,32	94,05%
			$\bar{Y}$	$\bar{X}$	Average: 91,97%
			3,58	3,30	

The average of the expected value ( $\bar{Y}$ ) and the known average reality value ( $\bar{X}$ ), are used as the boundary line in the quadrant determination in the placement of the point item of the direct dimension of evidence in the Cartesian diagram. Here is a plot description of each item from the direct proof dimension.

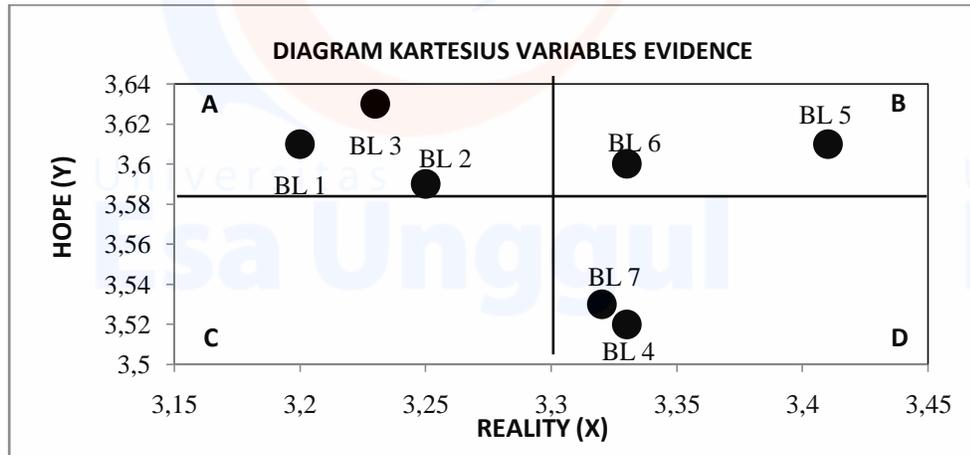


Figure 1. Cartesian Diagram Chart Dimension of Direct Evidence

Based on cartesian diagram found on the dimensions of direct evidence quality, the priority to be improved is the waiting room that looks less comfortable, the eye examination clinic room that looks less comfortable and the hospital lacks a clear sign board in providing direction to the patient

## 2. Quality of Service Reliability

The fit between expectation and reality of service quality at eye clinic of Syarif Hidayatullah Hospital is seen from the reliability of 92,63% (high suitability).

Table 2. Average Hope and Reliability Reality

Items	Hope (Y)	Reality (X)	$\bar{Y}$	$\bar{X}$	(%) Conformity
K1	278	255	3,71	3,40	91,64%
K2	285	269	3,80	3,59	94,47%
K3	281	253	3,75	3,37	89,87%
K4	269	259	3,59	3,45	96,10%
K5	269	245	3,59	3,27	91,09%
			$\bar{Y}$	$\bar{X}$	Average: 92,63%
			3,69	3,42	

The average of the expected value ( $\bar{Y}$ ) and the known average reality value ( $\bar{X}$ ), are used as the boundary line in the quadrant determination in the placement of the point item of the direct dimension of evidence in the Cartesian diagram. Here is a plot description of each item from the direct proof dimension.

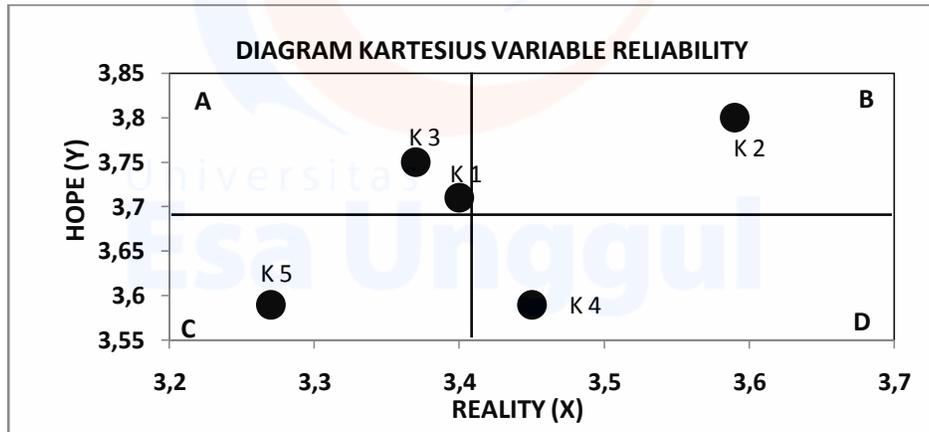


Figure 2. Cartesian Diagram Picture Dimension Reliability

Berdasarkan diagram kartesius didapatkan pada dimensi pada dimensi mutu keandalan yang menjadi prioritas untuk diperbaiki adalah Petugas pendaftaran kurang memberikan informasi pendaftaran dengan jelas dan sesuai dan Perawat kurang cekatan dalam melakukan pemeriksaan awal keadaan pasien.

### 3. Quality of Response Service

The fit between expectation and reality of service quality at eye clinic of Syarif Hidayatullah Hospital is seen from responsiveness 93,08% (high suitability).

Table 3. Average Expectations and Reality Power Facts

Items	Hope (Y)	Reality (X)	$\bar{Y}$	$\bar{X}$	(%)Conformity
DT1	271	256	3,61	3,41	94,46%
DT2	274	251	3,65	3,35	91,78%
DT3	270	248	3,60	3,31	91,94%
DT4	281	262	3,75	3,49	93,07%
DT5	286	267	3,81	3,56	93,44%
DT6	265	248	3,53	3,31	93,77%
			$\bar{Y}$	$\bar{X}$	Average: 93,08%
			3,66	3,40	

The average of the expected value ( $\bar{Y}$ ) and the known average reality value ( $\bar{X}$ ), are used as the boundary line in the quadrant determination in the placement of the point item of the direct dimension of evidence in the Cartesian diagram. Here is a plot description of each item from the direct proof dimension.

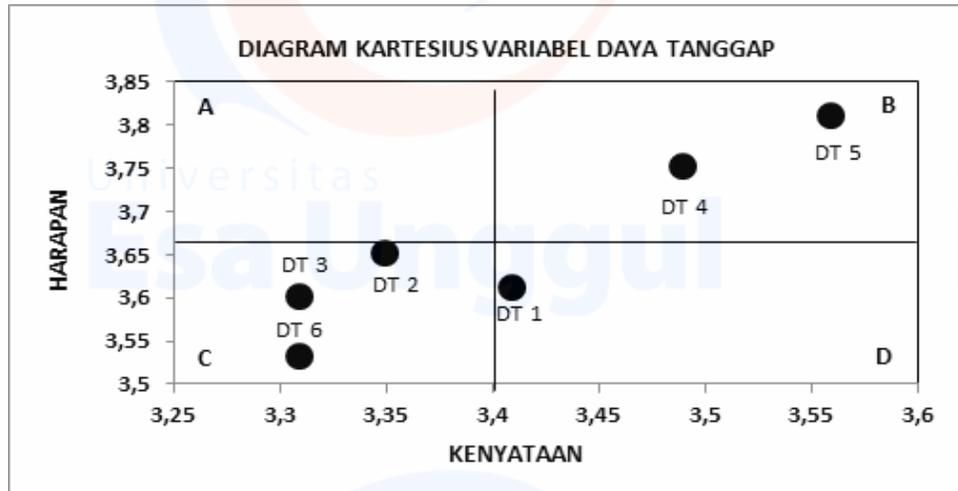


Figure 3. Cartridge Picture of Power Response Diagram

Based on cartesian diagram, the dimensions on the quality dimension of the priority response to be improved are the Registration Officers who do not immediately serve the patients who will register, Registration officers are less nimble in providing services, Nurse less service deftly when the patient arrives in the eye clinic waiting room and the security guard did not respond quickly enough to answer the patient's questions.

#### 4. Quality of Assurance Service

The suitability between expectation and reality of service quality at eye clinic of Syarif Hidayatullah Hospital is seen from the guarantee of 91,82% (high suitability).

Table 4. Average Expectations and Reality of Assurance

Items	Hope (Y)	Reality (X)	$\bar{Y}$	$\bar{X}$	(%)conformity
J1	271	253	3,61	3,37	93,35%
J2	271	239	3,61	3,19	88,37%
J3	276	259	3,68	3,45	93,75%
J4	268	255	3,57	3,40	95,24%
J5	279	257	3,72	3,43	92,20%
J6	272	247	3,63	3,29	90,63%
J7	258	234	3,44	3,12	90,70%
J8	280	253	3,73	3,37	90,35%
			$\bar{Y}$	$\bar{X}$	Average: 91,82 %
			3,63	3,33	

The average of the expected value ( $\bar{Y}$ ) and the known average reality value ( $\bar{X}$ ), are used as the boundary line in the quadrant determination in the placement of the point item of the direct dimension of evidence in the Cartesian diagram. Here is a plot description of each item from the direct proof dimension.

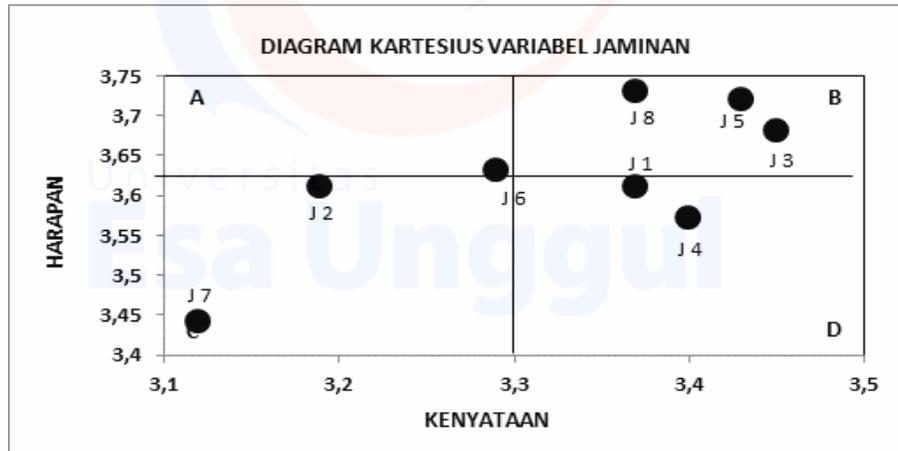


Figure 4. Cartesian Diagram Picture of Warranty Dimension

Based on the Cartesian diagram obtained on dimensions of the quality dimensions of the priority guaranteed to be fixed is the Patient does not always confirm the patient's name before entering the eye specialist room

### 5. Quality of Empathy Service

The fit between expectation and reality of service quality at eye clinic of Syarif Hidayatullah Hospital is seen from empathy 91,39% (high suitability)

Table 5. Average Expectations and Empathy Reality

Items	Hope (Y)	Reality (X)	$\bar{Y}$	$\bar{X}$	(%)conformity
E1	279	251	3,72	3,35	90,05%
E2	267	241	3,56	3,21	90,17%
E3	273	250	3,64	3,33	91,48%
E4	285	262	3,80	3,49	91,84%
E5	286	270	3,81	3,60	94,49%
E6	270	244	3,60	3,25	90,28%
			$\bar{Y}$	$\bar{X}$	Average: 91,39 %
			3,69	3,37	

The average of the expected value ( $\bar{Y}$ ) and the known average reality value ( $\bar{X}$ ), are used as the boundary line in the quadrant determination in the placement of the point item of the direct dimension of evidence in the Cartesian diagram. Here is a plot description of each item from the direct proof dimension.

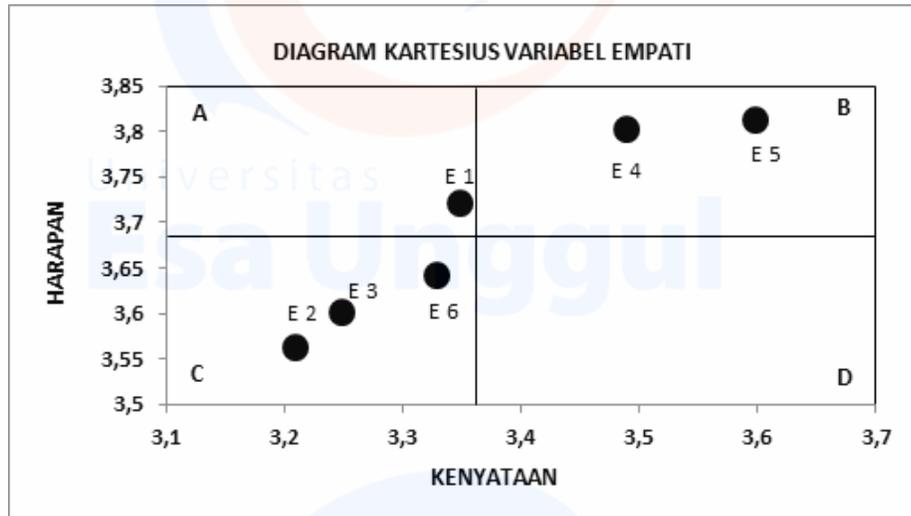


Figure 5. Cartesian Diagram Picture of Empathic Dimension

Based on Cartesian diagram found in dimensions of empathy quality dimension which is a priority to be improved is the Registration Officer is not always friendly when serving.

**6. Analysis of Cartesian Diagram of Conformity Between Expectations With Reality From Each Dimension of Service Quality at Eye Specialist Clinic Syarif Hidayatullah Hospital**

Table 6. Average Flow of Hope and Reality Service Quality Dimension At Eye Specialist Clinic Syarif Hidayatullah Hospital

Items	Hope $\bar{Y}$	Reality $\bar{X}$	(%) conformity
Tangible	3,58	3,30	91,97%
Releability	3,69	3,42	92,63%
Responsiveness	3,66	3,41	93,08%
Assurance	3,62	3,33	91,82%
Empaty	3,69	3,37	91,39%
	$\bar{Y}$	$\bar{X}$	Average: 92,18%
	3,65	3,37	

The average of the expected value ( $\bar{Y}$ ) and the known average reality value ( $\bar{X}$ ), are used as the boundary line in the determination of the quadrant in the placement of item points from the quality dimension of service in Cartesian diagram. Here is a description of the placement of each item from the service quality dimension :

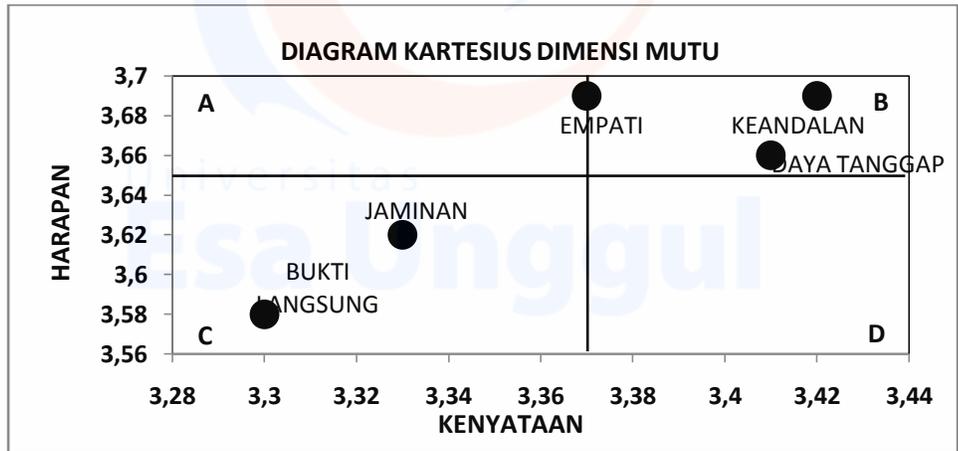


Figure 6. Cartesian Diagram Picture Dimension of Service Quality at Eye Specialist Clinic Syarif Hidayatullah Hospital.

Based on Cartesian diagram the quality dimension as a whole is obtained: Quadrant A there is dimension of quality of Empathy, Quadrant B there is dimension of Quality Reliability and Responsiveness and in quadrant C there is quality dimension Direct evidence and Guarantee.

In the test of the difference between the expectation and the reality of the five dimensions of service quality, there are significant differences across the dimensions of the quality of service at Eye Specialist Clinic Syarif Hidayatullah Hospital

Table 7. Test Results Difference Between Expectations with Reality Service Quality Dimension Service at Eye Specialist Clinic Syarif Hidayatullah Hospital

No	Quality Dimensions	Average		Results	Information
		Hope	Reality		
1	Tangible	3,58	3,30	0.004	Meaningful
2	Reliability	3,69	3,42	0.000	Meaningful
3	Responsiveness	3,66	3,41	0.001	Meaningful
4	Assurance	3,62	3,33	0.001	Meaningful
5	Empathy	3,69	3,37	0.000	Meaningful

## CONCLUSION

The compatibility between expectation and reality of service quality at eye clinic of Syarif Hidayatullah Hospital is seen from Tangible of 91.97% (high suitability), reliability 92.63% (high suitability), responsiveness 93.08% (high suitability) Assurance of 91.82% (high suitability), and empathy 91.39% (high suitability)

Based on the Cartesian diagram of each quality dimension the priority of management to be immediately resolved is:

- a. **Quality of Direct Evidence Services.** The findings of this study, based on the results of Cartesian diagrams of direct evidence, items that are included in the top priorities are improved (quadrant A) are: The waiting room looks comfortable, the clinic's spy cytology check room looks comfortable, the Hospital has a clear guide board in providing direction to the patient
- b. **Quality of Service Reliability.** The findings of this study, based on Cartesian diagram results of reliability, items included in the main priorities corrected (quadrant A) are: Registration officers do not provide clear and appropriate registration information; The nurse is not nimble in performing an initial examination of the patient's condition.
- c. **Quality of Response Quality.** The findings of this study, based on the results of Cartesian Power Response diagram, most patients already feel in accordance with the responsiveness. because in general the level of implementation of the service has been in line between expectations with the reality experienced by patients.
- d. **Quality of Warranty Service.** The findings in this study, based on the Cartesian Jamianan diagram results, items included in the top priority fixed (quadrant A) are: Nurses do not always confirm the name of the patient before entering the eye specialist room
- e. **Quality of Empathy Service.** The findings in this study, based on the results of Cartesian Empathy diagram, items that are included in the top priority are improved (quadrant A) are: The registration officer has not been friendly when serving.
- f. **The overall dimension of service quality.** The findings in this study, based on Cartesian diagram results of the fifth dimension of quality as a whole, the items included in the top priority are improved (quadrant A) is Empati. Kuadran B there is a quality dimension of Reliability and Responsiveness and on the C quadrant there is dimension quality of Direct evidence and Warranty.

In the test of the difference between the expectation and the reality of the five dimensions of service quality, there are significant differences across the dimensions of the quality of service at Eye Specialist Clinic Syarif Hidayatullah Hospital

## **IMPLICATIONS**

The implications mentioned here are with the results of this study is expected to have implications on improving the quality of clinical services eye specialist is also expected to cause increased patient satisfaction / customer to the quality of service tersebut. Sebab theoretically patient satisfaction assessed based on the interpretation of the respondents about the match between expectations with reality covering the

speed of the officers in providing assistance, the availability of infrastructure facilities needed by the patient and the hospitality of the officers in providing services.

Management needs to prioritize the quality of service to customers / patients in providing services. Because theoretically patient satisfaction assessed based on the interpretation of the respondents about the suitability between expectations with reality include the speed of officers in providing help, the availability of infrastructure facilities required by patients and hospitality officers in providing services, especially on quality of empathy service. These efforts can be done by including officers in training therapeutic communication mastery, customer service and reward or punishment.

### **SUGGESTION**

Syarif Hidayatullah Hospital should improve the quality of service from the appropriate expectations of patients / customers to be very appropriate to make the indicators of service quality so that the quality of hospital services continue to be improved and the creation of loyal customers.

For service with quality that has not as expected of customer / patient, management of Syarif Hidayatullah Hospital should immediately find the way out to be able to approach patient expectation, such as:

- a. **Tangible:** renew and add signage, renovate and rearrange the waiting room in order to increase patient comfort.
- b. **Reliability:** conducting supervision and guidance on SOP compliance of officers in carrying out basic tasks, such as preliminary examination by nurses, provision of clear information by registration officers and others
- c. **Responsiveness:** simultaneous simulation of speed and respond time of all officers including doctors in providing services to patients
- d. **Assurance:** officers always make a positive identification of the identity of patients who will receive services
- e. **Empathy:** conducting continuous service excellence training to all officers including medical personnel, other health workers and non-medical enrollment personnel to provide maximum service for patients by applying smile, greetings, and patient.
- f. **From the quality as a whole the Priority is the quality of empathy services:** Efforts that can be done by including all officers / employees in training mastery of therapeutic communication, customer service and reward or punishment.

For the next researcher to be able to continue this research because in this research have not got the whole about patient's desire to go back to Syarif Hidayatullah Hospital Clinic and external cause causing decrease of visit at Eye Specialist Clinic at Syarif Hidayatullah Hospital.

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