



Analysis of Administrative Services at Bumi Ayu Community Health Center UPT, Dumai City

Dewi Jannah^{1*}, Dila Erlianti², Rudi Hartasetiadi³, Reza Syahputra Alfandi⁴

¹⁻⁴Sekolah Tinggi Ilmu Administrasi Lancang Kuning, Indonesia

*Corresponding Author: dewijannah@stia-lk-dumai.ac.id

Abstract. This study aims to analyze the quality of administrative services at UPT Puskesmas Bumi Ayu, Dumai City, as part of primary public health service delivery. Service quality is an important indicator of institutional performance and community satisfaction. This research uses a qualitative approach with data collected through interviews, observation, and documentation. Informants consisted of the head of the health center and a service user selected purposively based on direct involvement in administrative services. The data were analyzed using the Miles and Huberman model, including data reduction, data display, and conclusion drawing. The assessment framework applies five service quality dimensions: tangibles, reliability, responsiveness, assurance, and empathy. The findings indicate that administrative services generally perform well, particularly in staff responsiveness, procedural reliability, and empathetic interaction. However, several limitations remain, including limited inpatient room facilities and difficulties among elderly users in understanding the Mobile JKN online registration system. These results suggest that service improvement should focus on strengthening physical infrastructure and enhancing user support for digital service access to improve overall administrative service quality in primary healthcare institutions.

Keywords: Administrative Service Quality; Primary Healthcare; Public Health Center; Public Service; Servqual

1. INTRODUCTION

Public service is one of the primary functions of government administration, aimed at meeting the basic needs of the community, including in the health sector. The quality of public service is a crucial indicator in assessing the performance of service institutions, as it is directly related to the level of public satisfaction and trust. From a service quality perspective, service quality can be measured through five main dimensions: reliability, responsiveness, assurance, empathy, and tangibles (Parasuraman et al., 1988).

Healthcare services, as part of public services, have special characteristics because they relate to the basic rights of the community. Normatively, the implementation of public services is regulated by Law Number 25 of 2009 concerning Public Services, which stipulates that every service provider is obliged to provide quality, transparent, fast, easy, affordable, and measurable services. Furthermore, Law Number 36 of 2009 concerning Health states that everyone has the right to access safe, quality, and non-discriminatory healthcare services. Therefore, every government healthcare facility has a legal obligation to meet these service quality standards.

Community Health Centers (Puskesmas), as first-level health care units, play a strategic role in the national health care system. Puskesmas serve not only as primary health care centers but also as hubs for communication and community empowerment in the health sector (Ministry of Health Decree No. 585/Menkes/SK/V/2007). Puskesmas are at the forefront of providing promotive, preventive, curative, and rehabilitative services to the community.

Operationally, services at the Community Health Center (Puskesmas) encompass various types of services, such as nursing, laboratory, pharmacy, and administrative services. Administrative services are the primary entry point into the healthcare process, serving as the initial step before patients receive medical treatment. The quality of administrative services significantly determines the patient's initial experience and influences their overall perception of the quality of healthcare they receive.

Data management and service administration at community health centers (Puskesmas) are crucial components in ensuring smooth service delivery. Public satisfaction with Puskesmas services is greatly influenced by the speed and accuracy of staff in handling the service process, from registration to patient examination and treatment. Ineffective administrative services can potentially lead to long queues, data errors, and inconvenience for service users.

Constitutionally, the state is responsible for providing adequate health care facilities as stipulated in Article 34 paragraph (3) of the 1945 Constitution of the Republic of Indonesia. Technical provisions regarding facility standards are also regulated in Minister of Health Regulation Number 19 of 2024 which stipulates a maximum limit of 10 beds per Community Health Center and Presidential Regulation Number 59 of 2024 concerning the Standard Inpatient Class (KRIS) standard with a maximum of four beds per room (No Title, 2024). This standard serves as a reference in assessing the adequacy of first-level health care facilities and infrastructure.

Based on empirical conditions at the Bumi Ayu Community Health Center (Puskesmas) in Dumai City, several issues remain in administrative services, including limited inpatient facilities and a unequal understanding of the registration process among the public. Interviews indicate that while the use of the Mobile JKN application-based registration system is helpful, it remains a challenge for older adults unfamiliar with digital technology. This indicates a digital literacy gap in access to services.

From the service provider's perspective, administrative officers stated that various efforts have been made to socialize and provide assistance in using the digital registration system, but many people still come directly without pre-registering due to limited technological understanding. In addition to procedural and facility aspects, the empathy dimension of officers is also an important factor, because a friendly attitude, attention, and good communication greatly influence the comfort of service users (Parasuraman et al., 1988).

Based on this description, an in-depth study of the quality of administrative services at the Bumi Ayu Community Health Center (UPT) in Dumai City is needed to obtain a factual picture of the current service conditions. This study aims to analyze the quality of

administrative services based on service quality dimensions and identify influencing factors as a basis for evaluating and improving the quality of public health services.

2. Literature Review

Quality is a crucial factor in both the business and non-business worlds, as the performance of an organization can be measured by the quality of its goods and services. Quality is also defined as the level of quality or degree of goodness or badness of a work product, and is related to individual and organizational performance standards. Work quality reflects how a person performs their duties, as seen from their work behavior and the quality of the work results achieved. Quality is also understood as a dynamic condition related to products, workforce, processes, tasks, and the environment that can meet or exceed the expectations of service users.

(Collins et al., 2021)

Quality is an important factor in both the business and non-business worlds because the good or bad performance of an organization can be measured by the quality of the goods and services produced, where quality is interpreted as the level of quality or degree of good or bad of a work result and is related to the standards of individual and organizational achievement. Work quality reflects how a person carries out their duties which is assessed from work behaviors such as loyalty, honesty, leadership, cooperation, loyalty, dedication, and participation, as well as the quality of work results achieved, and quality is also understood as a dynamic condition related to products, workforce, processes, tasks, and the environment that are able to meet or exceed the expectations of service users (Collins et al., 2021).

Quality is also explained as the overall features and characteristics of a product or service that have the ability to satisfy needs, both explicitly stated and implicit, and includes the characteristics inherent in products and services to suit user needs (Rahman, nd). From a marketing perspective, quality is understood as all the features and characteristics of a product or service that influence the ability to satisfy stated or implied needs by customers (Kotler & Keller, 2019).

Quality is also defined as conformity to objectives and must be oriented toward meeting current and future customer needs so that satisfaction can be maintained sustainably (Nursalam & Fallis, 2013). Public service is a form of fulfilling the interests of the wider community that stems from community needs and does not conflict with applicable norms and regulations, which includes basic services and administrative services related to documents and citizenship status (Wachruroji et al., 2019).

Service is defined as an action or activity offered by one party to another party that is essentially intangible and does not result in ownership, but is oriented towards providing benefits and satisfaction (Widjoyo et al., 2014). Service is also a government activity that provides benefits and satisfaction to the community even though the results are not tied to physical products (Ii & Teori, 2010). Service is a process of fulfilling needs through the activities of others directly and can be viewed as a system consisting of operational parts and service delivery parts to users (Ii & Pelayanan, 2008). Service is an activity or benefit offered to other parties with the aim of providing satisfaction to service users (Fadilah & Hasibuan, 2022).

Administration etymologically means helping and serving, and in a narrow sense, refers to clerical activities such as recording, correspondence, bookkeeping, and archiving to ensure the availability of information (Abd. Rijali Lapodi et al., 2023). Administration is also understood as group collaboration to achieve common goals through a rational and organized process (Marliani & Si, nd). Administration encompasses the processes of planning, organizing, implementing, and monitoring resources to achieve predetermined goals (Mahardika, 2024).

Administrative services are the government's responsibility to provide services to the public that are oriented towards the public interest, taking into account the elements of cost, time, and quality of service (Garcia et al., nd). Administrative services include the provision of various forms of public documents such as population identification, certificates, deeds, and permits needed by the public (Huda et al., 2020). Administrative services include recording, research, decision-making, documentation, and administration activities that produce a final product in the form of an official document (Ilmiah et al., 2023). Administrative services are the process of fulfilling needs through direct activities within the administrative system of a service organization (Mahardika, 2024).

Administrative services are part of public services provided to meet the needs of citizens in accordance with statutory provisions (Mozin et al., 2025). Conceptually, measuring service quality refers to the SERVQUAL model, which states that service quality is measured through five main dimensions: tangibles, reliability, responsiveness, assurance, and empathy, as the basis for evaluating service quality (Parasuraman et al., 1990).

3. METHODOLOGY

This study uses a qualitative approach, focusing on analyzing the quality of administrative services at the Bumi Ayu Community Health Center (Puskesmas Bumi Ayu) in Dumai City. The research location is on Jalan Budi Utomo, Puskesmas Alley, Dumai Selatan District, Dumai City. The location was chosen based on the consideration that Bumi Ayu Community

Health Center is a public health organization that plays a vital role and is greatly needed by the community in providing primary health care.

Research informants are parties who provide information regarding situations and conditions related to the research object. Informants are understood as individuals who know and master data and facts related to the research focus (III, 2007). In this study, informants were determined from elements of service providers and service recipients at the Bumi Ayu Community Health Center UPT. Two informants were interviewed directly, consisting of the Head of the Community Health Center, Dr. Ivanny Octaviany, and one community service user, Denny Febriansyah. The selection of informants was carried out purposively by considering involvement and direct experience with community health center administrative services.

The data types used consist of primary and secondary data. Primary data is data obtained directly from the research subjects through interviews and field observations (Helmi, 2021). Primary data in this study relates to dimensions of service quality, including tangibles, reliability, responsiveness, assurance, and empathy. Secondary data is data obtained from documents, official archives, and other relevant written sources to complement the research needs, particularly those related to the facilities and infrastructure of the Bumi Ayu Community Health Center (UPT Bumi Ayu) (Helmi, 2021).

Data collection techniques were carried out through observation, interviews, and documentation. Observations were conducted by directly observing the administrative service process at the community health center, from patient registration and form completion to file management and archiving. Observations were used to obtain a realistic picture of staff behavior, the speed and accuracy of service, and the condition of supporting facilities (Nurjannah, 2022). Interviews were conducted through a question-and-answer process with informants to obtain information regarding experiences, perceptions, and understanding regarding the quality of administrative services and the obstacles encountered in their implementation (Nurjannah, 2022). Documentation was carried out by collecting and reviewing documents, notes, and visual evidence related to the provision of administrative services as supporting data for the research (Rizky, 2022).

The data analysis in this study used the qualitative data analysis model proposed by Miles and Huberman, which includes three main stages: data reduction, data presentation, and conclusion drawing. Data reduction was carried out by summarizing and selecting relevant data and focusing on important aspects according to the research theme (Pratiwi, 2017). Data presentation was carried out in the form of narrative descriptions arranged systematically so that the relationships between data could be clearly understood (Ningtyas, 20014). The final

stage was drawing conclusions, namely the process of interpreting the data from interviews and observations comprehensively to answer the research problem formulation and produce findings in line with the study's focus (Kasmiati et al., 2021).

4. RESULTS AND DISCUSSION

ResultsThe research data was obtained through direct interviews with the Bumi Ayu Community Health Center (UPT) and service users. The research findings were analyzed using five dimensions of service quality according to Zeithaml, Parasuraman, and Berry (1990): tangible, reliability, responsiveness, assurance, and empathy.

In the tangible dimension, the findings indicate that the general condition of the physical facilities, cleanliness, and service facilities at the Bumi Ayu Community Health Center (UPT) are considered good, but there are still limitations in certain facilities. From observations and interviews, it was discovered that the community health center does not yet have a general inpatient ward and only has one delivery room and an emergency room. This is one of the perceived limitations of physical services. As stated by a community health center officer: "in this community health center there is only one delivery room where after 6 hours the mother and baby can be treated as outpatients." In addition, the community health center has implemented an online registration system through Mobile JKN to facilitate queue number retrieval, but in practice there are still obstacles to understanding for the elderly. One informant said: "I think online registration using Mobile JKN is indeed easier but quite difficult for older people."

Ondimensionsreliability, the results of the interview showed that the service was considered quite reliable and according to procedures. Informants said that the officers provided service in a friendly, responsive manner, and provided clear directions regarding the service flow. Reliability was also seen from the ease of the registration process both in person and online as well as the assistance of officers in using the system. The informant stated: "In my opinion, the service provided by the health center is quite good, the officers are quite friendly in serving patients." The comfort of supporting facilities was also considered adequate, as stated: "The waiting room provided by the health center is adequate so that people feel comfortable, I myself feel comfortable."

OndimensionsresponsivenessThe findings indicate that officers were considered quite prompt in responding to patient needs and complaints. The availability of medical personnel and staff during the service was deemed adequate, and officers were able to provide easy-to-understand explanations. This responsiveness was reflected in the speed of response when patients came for treatment and conveyed complaints. An informant stated: "When I came to the

community health center for treatment, the response given by the community health center staff was quite quick, they responded well to every complaint I conveyed."

Ondimensionsassurance Interview results indicate that officers provide a sense of security and trust to the community through professionalism, politeness, and the ability to explain service procedures clearly. The community feels confident in following the service process because the explanations provided are easy to understand and in accordance with regulations. The aspect of patient data security is also a concern in the service. This is reflected in the informant's statement: "In my opinion, the attitude of the health center officers is quite professional in serving the community and they are also able to maintain data security so I feel safe."

Ondimensionsempathy The research results show that the community health center staff are considered to be caring and attentive to patients. Staff are willing to listen to complaints and strive to provide solutions according to patient needs. Their friendly attitude and personal approach make patients feel comfortable during the service process. The informant said: "Bumi Ayu Community Health Center has indeed improved, especially in terms of service. Especially recently since the use of Mobile JKN, so when we come, we are immediately served well, quickly, accurately, and quite satisfying for the people who come. I myself am satisfied and feel comfortable."

Overall, the research results show that the quality of administrative services at the Bumi Ayu Community Health Center UPT has been running quite well in all dimensions, although there are still some limitations in terms of physical facilities and public understanding of the digital service system.

The research findings can be interpreted through the SERVQUAL service quality framework, which emphasizes five main dimensions: tangibles, reliability, responsiveness, assurance, and empathy (Zeithaml, Parasuraman, & Berry, 1990). This framework views service quality as the result of the match between user expectations and the service performance received.

From a physical service perspective, the implementation of a digital registration system and the availability of key facilities demonstrate efforts to improve the quality of administrative services. However, the limited availability of inpatient rooms and the continued confusion among the public about using the online system indicate that improvements in facilities and technology have not been fully matched by the readiness of supporting facilities and user understanding. This situation indicates that service modernization needs to be accompanied by infrastructure strengthening and guidance on system use.

In terms of reliability and responsiveness, consistent service patterns and rapid staff responses demonstrate that operational standards have been implemented consistently. Procedural accuracy, staff friendliness, and the ability to provide clear directions are indicators that administrative services are operating according to user expectations. These elements play a crucial role in shaping positive perceptions of service quality because they are directly related to the experience during the service process.

Meanwhile, the assurance and empathy dimensions demonstrate that service interactions are not solely focused on administrative resolution, but also on ensuring the user's sense of security and comfort. Staff professionalism, clarity of information, and attention to patient needs strengthen public trust in the services provided. An empathetic approach is crucial in the context of healthcare, as users often need reassurance and support.

Conceptually, this shows that the quality of administrative services will be stronger if improvements to systems, facilities, and officer competencies are balanced with education for the public as service users.

5. CONCLUSIONS

This study has several limitations that should be considered when interpreting the findings. First, the number of informants in this study was limited, involving only one health center officer and one service user. Therefore, the perspectives obtained do not fully represent the overall experience of users and service administrators. Second, data collection relied primarily on interviews and observations over a limited period of time, thus not capturing the dynamics of service delivery over a longer period.

Third, the research focused on only one health service unit, namely the Bumi Ayu Community Health Center (UPT Puskesmas) in Dumai City. Therefore, the results cannot be directly generalized to all community health centers or other health service facilities. Fourth, the evaluation of service quality was based primarily on informant perceptions and was not supported by quantitative measurements of user satisfaction. Therefore, further research is recommended to involve a wider number of informants, a longer observation period, and a combination of qualitative and quantitative methods to obtain a more comprehensive picture.

References

- Abd. Rijali Lapodi, A., Sinay, H., Lating, Z., Ibrahim, I., & Adi Sasono, M. (2023). Hubungan kualitas pelayanan administrasi dengan kepuasan pasien di wilayah kerja Puskesmas Piru Kabupaten Seram Bagian Barat tahun 2023. *Calory Journal: Medical Laboratory Journal*, 1(4), 01–11. <https://doi.org/10.57213/caloryjournal.v1i4.37>
- Rizky, A. (2022). Peran orang tua dalam membina sikap attitude. 2, 787(8.5.2017), 2003–2005.
- Collins, S. P., Storrow, A., Liu, D., Jenkins, C. A., Miller, K. F., Kampe, C., & Butler, J. (2021). *BAB II Landasan teori*. 167–186.
- Fadilah, A., & Hasibuan, I. H. (2022). Pengaruh pelayanan customer service terhadap kepuasan nasabah bank syariah. *Jurnal Al-Fatih Global Mulia*, 4(2), 107–120. <https://doi.org/10.59729/alfatih.v4i2.55>
- Garcia, A. R., Filipe, S. B., Fernandes, C., Estevão, C., & Ramos, G. (n.d.). *Pelayanan administrasi*. 1–9.
- Helmi, S. (2021). *Analisis data* (Issue July).
- Huda, M., Wiyono, S., Hidayatullah, M. F., & Bahri, S. (2020). Studi kasus sistem informasi dan pelayanan administrasi kependudukan. *Komputika*, 9(28), 59–65. <https://doi.org/10.34010/komputika.v9i1.2518>
- Ii, B. A. B., & Pelayanan, A. P. (2008). *Bisa dipandang sebagai sebuah sistem yang terdiri atas dua komponen utama, yakni*. 6–26.
- Ilmiah, J., Pendidikan, W., Studi, P., Pemerintahan, I., & Karawang, U. S. (2023). Kinerja pemerintah desa Kondang Jaya dalam penyelenggaraan pelayanan publik pada bidang administrasi. *Jurnal Ilmiah*, 9(1), 163–172.
- Kasmiati, et al. (2021). *Metode dan jenis penelitian*. 32(3), 167–186.
- Khalifah, N., & Nurjannah, H. S. (2022). Analisis prosedur penelitian. *Jurnal Ilmiah*, 28(2), 134–141.
- Kotler, P., & Keller, K. L. (2019). *Manajemen pemasaran* (12th ed.). Universitas Indonesia.
- Mahardika, D. D. K. (2024). *Administrasi pendidikan* (3 February), 4–6.
- Marliani, L., & Si, M. (n.d.). *Definisi administrasi dalam berbagai sudut pandang*. 150, 17–21.
- Mozin, S. Y., Arkani, S., & Labasir, S. N. (2025). Pelayanan publik dalam perspektif administrasi: Prinsip dan implementasi. *Jurnal PROFIT*, 17(1), 1–12.
- Ningtyas, M. (20014). Peran peergroup dalam membentuk gaya hidup konsumtif remaja. *Metode Penelitian*, 32–41.
- Nursalam, & Fallis, A. (2013). Quality management direktor. *Journal of Chemical Information and Modeling*, 53(9), 1689–1699.
- Pratiwi, N. (2017). Penggunaan media video call dalam teknologi komunikasi. *Jurnal Ilmiah Dinamika Sosial*, 1, 213–214.
- Rahman, A. (n.d.). *Manajemen kualitas suatu pengantar*.
- Sari, M., & Subandi, W. (2020). Tangible dalam rangka meningkatkan pelayanan Kabupaten Tabalong. *Japb*, 3(2), 1195–1209.

- Sri Irmawati, D. (2019). Kualitas pelayanan kesehatan di Puskesmas Kecamatan Tatanga Kota Palu. *Jurnal Katalogis*, 5, 188–197.
- Uli, N. Z., Katjina, H., & Riskia, A. N. (2025). Value jurnal ilmiah manajemen. *Jurnal-Umbuton.ac.id*, 3(1), 41–51.
- Wachruroji, M. R., Irawani, B., & Paselle, E. (2019). Kualitas pelayanan kesehatan bagi pasien pengguna Badan Penyelenggara Jaminan Sosial (BPJS) di Puskesmas Gunung Sari Ilir Kecamatan Balikpapan Tengah. *Ejornal Administrasi Negara*, 7(1), 6663–6676.
- Widjoyo, S., Hatane, P., Brahmana, R. K. M. R., Pemasaran, J. M., Petra, U. K., & Siwalankerto, J. (2014). Pengaruh kualitas layanan dan kualitas produk terhadap kepuasan pelanggan dan loyalitas konsumen restoran Happy Garden Surabaya. 2(1), 1–9.