

Analysis Of The Roles & Interactions Of Political Actors In Improving The Quality Of Public Service In Puskesmas (Study At Puskesmas Karang Rejo, West Tarakan Subdistrict, Tarakan City North Kalimantan Province, Indonesia)

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Abstract: Puskesmas are the spearhead of the government in providing basic health services to the community in Indonesia. Puskesmas are required to provide excellent quality services to the community, but these expectations have not been met. Government efforts are then made through independent financial management of the Regional Public Service Agency (BLUD). Karang Rejo Health Centre is one of the Health Centres that successfully received a designation by the Government of Tarakan City, North Kalimantan Province as one of the Independent Health Centres with BLUD management. This study aims to analyse the role & interaction between political actors or leaders in Puskesmas in improving the quality of excellent service at Karang Rejo Puskesmas. The research informants are 1). Head of Puskesmas, 2). The Head of Section and Head of Administration. Visitors include patients who come for treatment and take care of health certificates. The research used descriptive qualitative research in order to explore in-depth information about the excellent service of Karang Rejo Health Centre. The results showed that first the Head of Puskesmas is a professional doctor, as a political actor has a very important role, especially when conducting vertical interactions and horizontal interactions. Vertical interaction with the leaders above him (head of department, regent) and horizontal interaction with the leaders below him (head of section & head of administration), causing Karang Rejo Health Centre to become independent with BLUD management. Secondly, in the dimensions of public service quality at Puskesmas Karang Rejo, West Tarakan Subdistrict, Tarakan City, North Kalimantan Province, Indonesia, which has been running optimally with an achievement of 85% is the reliability dimension, the responsiveness dimension and the guarantee dimension. These dimensions can be optimal due to changes in the Puskesmas institution which was previously not independent in terms of its finances, turning into independent with BLUD management. Meanwhile, the dimensions of public service quality that have not run optimally and require improved management, amounting to 15%, namely the dimensions of physical evidence and empathy.

Keywords: Roles & interactions between political actors, leaders, public service quality, dimensions of physical evidence, responsiveness, reliability, assurance, empathy, and empathy.

1. Introduction

Health is very important for the community, besides that health is the human right of every human being and at the same time an investment for the success of national development so that it is necessary to organise comprehensive health development. Health services are one of the fundamental rights of the community, whose provision must be organised by the government as mandated in the 1945 Constitution article 28 H paragraph (1), namely: 'Every person has the right to live in physical and spiritual prosperity, to live in a good and healthy environment and to obtain health services' and article

34 paragraph (3), namely: 'The state is responsible for the provision of proper health care facilities and public service facilities'.

In order to improve the degree of public health, the Government of Indonesia has developed a health service system consisting of various types of health facilities, including Community Health Centres (Puskesmas). Puskesmas is the government's frontline in providing basic health services to the community.

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Puskesmas is a health service facility that organises public health efforts and first-level individual health efforts (Regulation of the Minister of Health of the Republic of Indonesia Number 43 of 2019 concerning Puskesmas, 2019), by prioritising promotive and preventive efforts in its working area. In achieving the best degree of public health in its working area, Puskesmas plays a role in health-oriented development, with the aim of forming a community that has health-conscious behaviour (awareness, willingness and ability to live healthy); able to reach quality health services, live in a healthy environment; and have an optimal degree of health for individuals, families, groups and communities.

Towards the era of the National Health Insurance (JKN), Puskesmas as a first-level health care provider facility has a vital role as a gatekeeper for people who want to get referral health services. This has led to an increase in the number of patient visits to the Puskesmas. Puskesmas currently have the challenge of providing good quality health services (M. Shidiq et al., 2018).

Getting quality service is one of the main demands of the community, so Puskesmas are required to provide quality health services, according to standards, with affordable service costs so that it will increase patient satisfaction (Suryawati et al., 2019). As one of the health service facilities, Puskesmas is inseparable from complaints/suggestions/responses from the community towards the services provided by Puskesmas, where until now there are still frequent complaints from the community that services at Puskesmas are not good, not in accordance with community expectations.

The existence of policy improvement efforts in the health sector as stated in the regulations of the Minister of Health (Regulation of the Minister of Home Affairs Number 61 of 2007 concerning Technical Guidelines for Financial Management of Regional Public Service Agencies (BLUD), 2007) and (Regulation of the Minister of Home Affairs Number 79 of 2018 concerning Regional Public Service Agencies, 2018), is one of the efforts of the central government and local governments to improve the performance of public service institutions by giving greater authority to the management of its resources, especially its leaders and finances. With the hope that the quality of basic health services can be improved. The Regional Public Service Agency (BLUD) is a form of government agency that is able to provide public services independently and based on the principles of efficiency and effectiveness, and one of the public service institutions that made changes to the Regional Public Service Agency is the Puskesmas (Suryawati et al., 2019).

In 2020 the Government of Tarakan City, North Kalimantan Province, established the Karang Rejo Health Centre as a Health Centre with a financial management pattern of the Regional Public Service Agency (BLUD), the government policy was welcomed by the leadership of the Tarakan City Health Office including the head of the Health Centre. With the establishment of the head of Puskesmas with BLUD management, it will reduce the burden on the leadership of the Health Office in terms of managing human resources and budgets and vice versa will facilitate the Head of Puskesmas and the leadership of the Puskesmas in managing human resources and budgets.

With BLUD financial management, it will facilitate the Head of Puskesmas in meeting operational needs such as Puskesmas infrastructure, availability of medicines, maintenance of medical devices and other equipment. In addition, the fulfilment of medical/ para-medical personnel and improvement of human resources will be achieved (Siswanto, 2007). Before becoming a Puskesmas with BLUD there were many complaints from patients due to limited staff, facilities and infrastructure and limited availability of medicines, so patients had to go to other health facilities for laboratory tests for example and patients bought medicines at pharmacies outside the Puskesmas. In addition, the Head of Puskesmas cannot maintain the infrastructure, this is because all procurement of infrastructure, medicines and maintenance of infrastructure is carried out by the Health Office. Structurally all budget management is in the Health Office where the procurement process cannot be fast according to the needs of the Puskesmas. Thus Puskesmas with BLUD are expected to have better and optimal service quality, to ensure basic health and patient satisfaction.

The explanation above is an illustration that Puskesmas with BLUD management, will have an impact on improving and improving the quality of basic health services at Puskesmas, so the author is interested in conducting research on 'ANALYSIS OF THE ROLES & INTERACTIONS OF POLITICAL ACTORS IN IMPROVING

THE QUALITY OF PUBLIC SERVICES IN PUSKESMAS' (Study at Puskesmas Karang Rejo, West Tarakan District, Tarakan City, North Kalimantan Province, Indonesia).

2. Literature Review

In this study, researchers used descriptive qualitative complementary research (Sugiyono, 2018). Qualitative descriptive research is research that emphasises the search for meaning, understanding, concepts, characteristics, symptoms, symbols and descriptions of a phenomenon of the place under study. Complementary here is complementary with data in the form of percentages. The focus of this research is to analyse how the quality of health services carried out by the head of the Puskesmas & health workers in order to provide health services in the community (Lexy J, 2018) In addition, it also analyses the factors that support and hinder the improvement of the quality of health services. There are 5 dimensions of public service quality that are analysed, namely the dimensions of tangibel (physical evidence), reliability (reliability), responsiveness (response), assurance (guarantee) and empathy (empathy). In addition, the factors that influence the quality of health services are human resources, infrastructure, service standards, standard operating procedures, complaints management, financial management and partnerships,

Data collection techniques were carried out by observation, looking at administrative documents, taking notes and conducting in-depth interviews with questionnaires (Arikunto, 2021) to the Head of Puskesmas, Head of Administration, Person in Charge of Individual Health Efforts and Person in Charge of Public Health Efforts, Person in Charge of Networks and Networks, Person in Charge of Building Infrastructure and Person in Charge of Quality and to patients who are visitors to the Puskesmas.

The research locus is Karang Rejo Health Centre, West Tarakan Sub-district, Tarakan City, North Kalimantan Province, Indonesia, with the consideration that Karang Rejo Health Centre is the first health centre in Tarakan City to be established with BLUD (Regional Public Service Agency) management and is the health centre with the largest patient visits in Tarakan City.

3. Results And Discussion

3.1 Analysis of the Role and Interaction of Political Actors in Improving the Quality of Public Services at Puskesmas

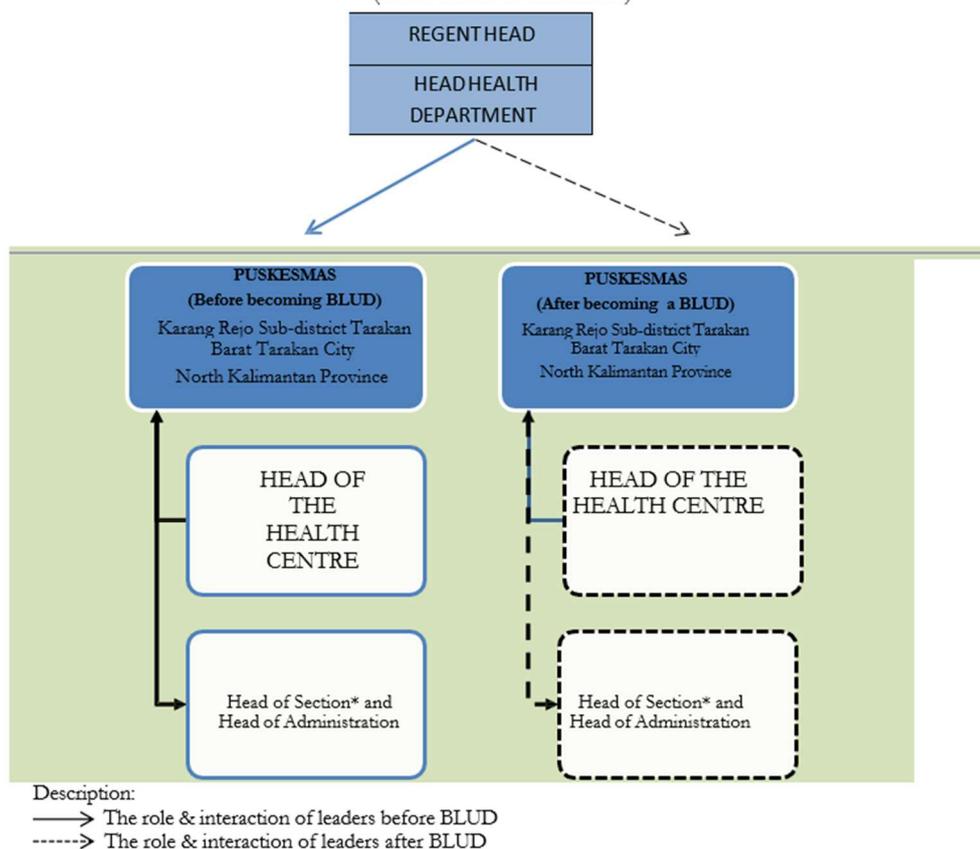
The leadership of an institution such as the Head of Puskesmas determines the progress and development of a public service organisation. The Head of Puskesmas is a professional doctor, as a political actor has an important role, when conducting vertical interactions and horizontal interactions. Vertical interaction with leaders above (Head of Service, Regent) and with leaders below (Head of Administration, Head of Section). Interactions with the leaders above and below act equally as political actors, who have professional responsibilities for their work. This shows the importance of the role and interaction between leaders (Figure 1).

Puskesmas as an institution, the organisational structure of Karang Rejo Puskesmas is determined through the Regulation of the Mayor of Tarakan and adjusts to the Regulation of the Minister of Health (Regulation of the Minister of Health of the Republic of Indonesia Number 43 of 2019 concerning Puskesmas, 2019). The structure consists of the Head of Puskesmas, Head of Administration,

Head of Finance, Head of Section in Charge of Individual Health Efforts and Head of Section in Charge of Public Health Efforts, in charge of Networks and Networks, in charge of Building Infrastructure and in charge of Quality. The positions in the structure are filled with the availability of existing staff.

Karang Rejo Health Centre is an Independent Health Centre with the management of a Regional Public Service Agency (BLUD) so that the Health Centre manages its finances independently based on the Minister of Home Affairs Regulation (Minister of Home Affairs Regulation Number 61 of 2007 concerning Technical Guidelines for Financial Management of Regional Public Service Agencies (BLUD), 2007) and (Minister of Home Affairs Regulation Number 79 of 2018 concerning Regional Public Service Agencies, 2018). With independent management, it can facilitate Puskesmas in meeting its operational needs such as the need for medicines, consumables, medical devices and other service needs. Puskesmas before becoming BLUD did not have independent budget management and had considerable difficulty in meeting their operational needs.

Chart 1 Organisational Structure of Puskesmas (before BLUD & after BLUD)



*The Head of Section consists of the Head of Finance, Head of Section in charge of Individual Health Efforts and Head of Section in charge of Public Health Efforts, in charge of Networks and Networks, in charge of Building Infrastructure and in charge of Quality

Furthermore, the analysis of factors affecting the quality of public services at Puskesmas Karang Rejo West Tarakan Sub-district, Tarakan City, North Kalimantan Province can be seen as the following data (see Chart 2).

- Accountability**
 Accountability at Karang Rejo Health Centre has been running optimally, all activities carried out are reported regularly every month to the Health Office so that the Head of the Health Office can also evaluate regularly. The Head of Karang Rejo Health Centre also routinely evaluates the performance of service officers on the achievements of each field's programme, so that improvements can be made immediately, as said below:
 Head of the Tarakan City Health Office:
 'All Puskesmas activities in Tarakan City that have been carried out are reported regularly every month and we also routinely evaluate them'
- Leadership**
 Karang Rejo Health Centre is led by a general practitioner who is assigned directly by the Mayor. The leadership of the Head of Karang Rejo Health Centre as a political actor who has an important role, when interacting with the leaders below him and interacting with the leaders above him as other political actors, shows good leadership roles and interactions (Draha M, 2010). As he said the following:
 Head of Karang Rejo Health Centre:
 'We have routinely evaluated the performance of service officers and the achievements of their respective programs, then we also routinely report all Puskesmas activities to the Head of the Tarakan City Health Office'
 This happens because the leadership has the ability to oversee the Karang Rejo Puskesmas before becoming BLUD until the Karang Rejo Puskesmas with BLUD

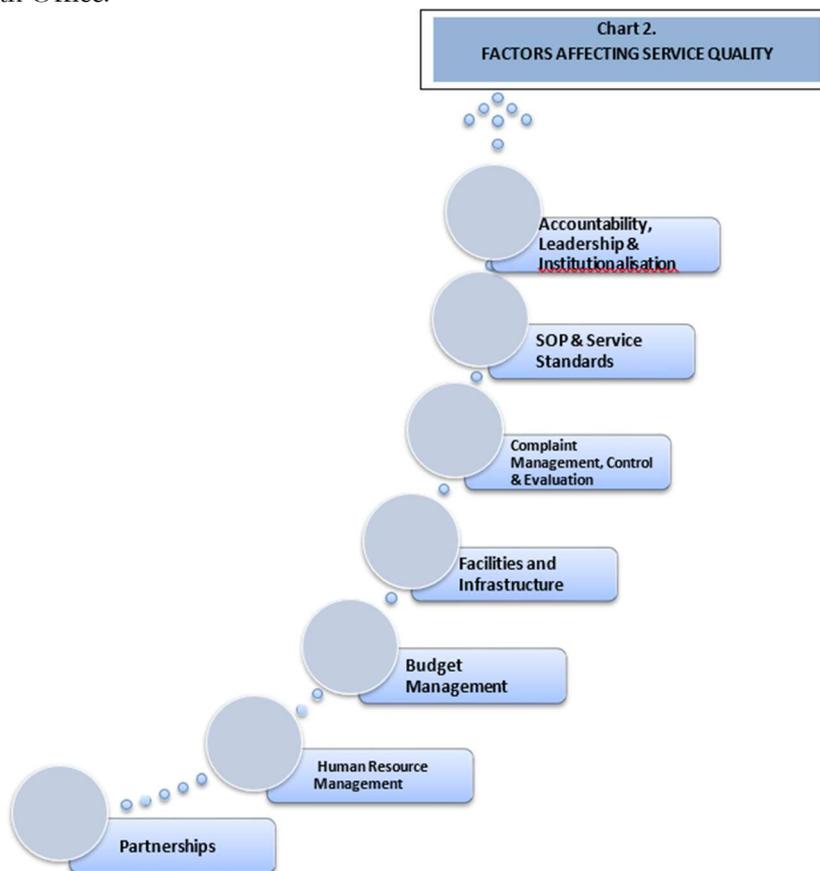
management. The Head of Karang Rejo Health Centre is also able to oversee Karang Rejo Health Centre to become a primary strata accredited health centre, indicated by the existence of Karang Rejo Health Centre which is the health centre with the largest number of patient visits in Tarakan City. The number of employees has not been fulfilled as needed, but officers strive and continue to coordinate by the Head of Puskesmas so that all individual health efforts and public health efforts can be carried out.

- Institutionalization

The organisational structure of Karang Rejo Health Centre is determined through the Regulation of the Mayor of Tarakan by adjusting the Regulation of the Minister of Health (Regulation of the Minister of Health of the Republic of Indonesia Number 43 of 2019 concerning Puskesmas, 2019). The structure consists of the Head of Puskesmas, Head of Administration, Head of Section in Charge of Individual Health Efforts and Head of Section in Charge of Public Health Efforts, in charge of Networks and Networks, in charge of Building Infrastructure and in charge of Quality. The positions in the structure are filled with the availability of existing officers. As stated below.

Head of Karang Rejo Health Centre:

‘The organisational structure of Karang Rejo Health Centre is determined through the Regulation of the Mayor of Tarakan City by adjusting the Minister of Health Regulation No 43 of 2019, so that all Puskesmas activities are reported to the Head of the Tarakan City Health Office.’



Source: Data processed

- Standard Operating Procedures (SOP)

At Karang Rejo Health Centre, there is a Standard Operating Procedure (SOP) set by the Head of Karang Rejo Health Centre for all types of services as the basis for officers in working or in providing services to patients, and the SOP is updated every time there is a new policy regulation. As stated by the Head of Administration below.

Head of Administration:

"At Karang Rejo Health Centre, there are Standard Operating Procedures (SOPs) for all types of services as the basis for officers to work. This SOP is determined by the Head of Karang Rejo Health Centre"

- Service Standards

"Regarding service standards, they are not yet optimally available, because not all services at Karang Rejo Health Centre have service standards", according to information from the Head of the Section in Charge of Public Health Efforts.

Where patients also do not know the service standards of the Puskesmas because the service standards have not been published optimally. Service standards are not displayed in each service room, according to Public Service Law Number 25 of 2009 that service standards must be submitted to the community because the community has the right to evaluate services provided that are not in accordance with service standards.

- Complaint Management

"Complaint management at Karang Rejo Health Centre is not yet optimal", according to information from the Head of the Section in Charge of Public Health Efforts.

This is because the Puskesmas does not have a special room or table for complaints so that patients cannot submit complaints directly. Patient or visitor complaints can only be submitted through the suggestion box and online (Puskesmas web, WA and Instagram).

- Control and Evaluation

Control and evaluation at Karang Rejo Health Centre, namely evaluation and coordination meetings both cross-programme and cross-sector, have been carried out routinely according to the specified schedule, if not carried out according to the schedule then the activity will be rescheduled. as above has been said by the Head of Puskesmas.

Head of Karang Rejo Health Centre:

"We have routinely evaluated the performance of service officers and the achievements of each program, then we also routinely report all Puskesmas activities to the Head of the Tarakan City Health Office"

- Facilities and Infrastructure

"Facilities and infrastructure at Karang Rejo Health Centre for service needs have been well met", said the Head of Administration.

The facilities and infrastructure referred to include a vehicle parking area, respective service rooms for all types of services, a children's playground, lactation corner, meeting room, Head of Puskesmas room, Administration room, planning and finance room, prayer room, operational vehicles (ambulance and four-wheeled vehicles and two-wheeled vehicles), tools (computers, scanners, and printers), air conditioners, generators, liquid waste management, toilets, warehouses and medical and laboratory equipment. The availability and completeness of these infrastructure facilities facilitate officers in providing services and provide comfort to patients or visitors to the Puskesmas.

- Budget Management

Karang Rejo Health Centre is a health centre with regional public service agency management so that the health centre manages its finances independently based on the Minister of Home Affairs Regulation (Minister of Home Affairs Regulation Number 61 of 2007 concerning Technical Guidelines for Financial Management of Regional Public Service Agencies (BLUD), 2007) and (Minister of Home Affairs Regulation Number 79 of 2018 concerning Regional Public Service Agencies, 2018). With independent management, it can facilitate the Puskesmas in meeting its operational needs such as the need for medicines, consumables, medical devices and other service needs. As above has been said by the Head of Puskesmas.

Head of Karang Rejo Health Centre:

"Karang Rejo Health Centre manages its finances independently and is reported regularly to the Head of the Tarakan City Health Office" In addition, independent health centres can easily maintain medical equipment according to standards.

- Human Resource Management

In addition, through the BLUD budget, independent health centres can increase the human resource capacity of their staff through trainings, technical guidance and workshops. Puskesmas can also recruit contract staff through the BLUD budget. This can improve the quality of health services at Karang Rejo Health Centre. As above has been said by the Head of Puskesmas.

Head of Karang Rejo Health Centre:

‘Karang Rejo Health Centre with its independence can increase the capacity of human resources of its officers through trainings, technical guidance and workshops’

Although the need for employees at Karang Rejo Health Centre has not been fully met according to the needs of the Puskesmas, the Puskesmas is able to provide maximum service to patients and all types of services at the Puskesmas are running properly (M. A. Shidiq et al., 2018). Officers placed in patient services are in accordance with their respective competencies.

- Use of Information Technology / Information Systems

At Karang Rejo Health Centre has used information technology / information systems such as the patient numbering / queuing system using a health information system, patient data from the counter is automatically read in each intended service room.

‘For BPJS patients who will seek treatment at the Puskesmas, they can register through mobile JKN and there is also an online consultation media available’, said the Head of Administration. At Karang Rejo Health Centre there is an Informatics Technician who assists service staff if there are problems in the information system.

- Partnerships

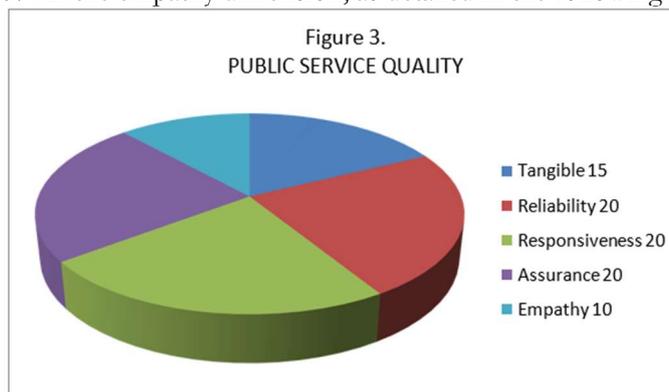
‘Karang Rejo Health Centre has collaborated with the Hospital as a referral place that facilitates both BPJS-facilitated patients and general patients,’ explained the Head of Puskesmas.

The Puskesmas has also collaborated with independent health facilities in its working area related to program services referred to the Puskesmas from independent health facilities, namely cases of TB, Measles, Leprosy, HIV and provision of vitamin A

3.2 Quality of Public Services

The results of research related to the quality of public services include 5 dimensions of public services (Hardiyansyah, 2018), at Puskesmas Karang Rejo which were analysed the results reached 85%, which is an accumulation of the achievement of all dimensions of tangible, reliability, responsiveness, assurance and empathy.

The five dimensions are the tangible dimension (physical evidence) worth 15%, reliability (reliability) worth 20%, responsiveness (response) worth 20%, assurance (guarantee) worth 20% and empathy (empathy) worth 10%. The quality of such public services (Figure 3) at Karang Rejo Health Centre, shows that Karang Rejo Health Centre with BLUD (Regional Public Service Agency) management that has been carried out has succeeded in approaching the optimal value. With a quality achievement of 85%, while the remaining 15% has not been achieved or not optimal because there are shortcomings in its implementation of 5% in the tangible dimension (physical evidence) and 10% in the empathy dimension, as detailed in the following data.



Source: Data processed

3.2.1 Tangible Dimension (Physical Evidence)

The results of research related to services at Karang Rejo Health Centre in the tangible dimension are based on the results of observations and interviews conducted by researchers to the Head of Puskesmas, Head of Administration, Person in Charge of Individual Health Efforts and Person in Charge of Public Health Efforts, Person in Charge of Networks and Networks, Person in Charge of Building Infrastructure and Person in Charge of Quality and to patients who are visitors to the Puskesmas, officers in stages. The results that have been processed show that almost all indicators in the tangible dimension are in accordance with the expectations of the leaders as political actors who determine policy (policy makers), staff and patients or visitors, both in terms of providers as service providers and users as those served (Sinambela, 2016). The appearance of officers when providing services is neat and attractive by using uniforms & ID cards, the service room is clean and comfortable because it is equipped with air conditioning, toilets and hand washing facilities, comfortable seating, trash cans; the service process is easy & fast where no patient complains. The officers provide services with timely efforts (Silaswara, 2021).

Services at Karangrejo Health Centre, all of which are easily accessible such as the elderly poly and maternity room are placed on the first floor. Adequate infrastructure facilities such as medical aids and computers are available in each room, making it easier for officers to serve patients and patients can be served quickly. Even though there is a patient waiting room that is less comfortable (5%) because there is no air conditioner available, only a few fans so that when there are many patients and before noon the waiting room conditions feel hot.

3.2.2 Reliability Dimension

In the reliability dimension, the Head of Puskesmas and the Head of Administration, the Person in Charge of Individual Health Efforts and the Person in Charge of Public Health Efforts at Puskesmas Karang Rejo are optimal and good at providing services (Zainal, 2018), because officers work according to (20%) service standards and SOPs (Standard Operating Procedures) set at the Puskesmas. This means that the interaction between actors/leaders in organisations such as Puskesmas can also run very well, because each leader carries out their *tupoksinya* (main tasks & functions according to their positions). All technical/medical personnel (Doctors, Pharmacists, Nurses, Midwives, Laboratory Analysts, Pharmacist Assistants, Oral Dental Therapists, Nutritionists, Sanitarians) who provide services to patients, are all required to have a registration certificate and practice permit, in accordance with the

regulations of an institution in the form of a Puskesmas (Regulation of the Minister of Health of the Republic of Indonesia Number 43 of 2019 concerning Puskesmas, 2019). All service personnel are able to use existing tools at the Puskesmas such as operating medical devices and computers.

3.2.3 Responsiveness Dimension

Based on data processing of the research conducted, it was found that the responsiveness dimension of leaders such as the Head of Puskesmas, Head of Administration, Person in Charge of Individual Health Efforts and Person in Charge of Public Health Efforts, Person in Charge of Networks and Networks, Person in Charge of Building Infrastructure and Person in Charge of Quality, has been running optimally and well (20%). At Karang Rejo Health Centre, doctors and staff are quick to respond and provide information to patients who want to get services, doctors and staff make maximum efforts (Zainal, 2018). As an organisation the doctors and officers try to maintain a positive image of the organisation responsibly, namely providing public services quickly to all patients without discriminating against patients, all patients are equal to get the same service (Draha M,

2010). Although at certain times, when the number of patients is large and the staff is limited (due to illness and absence), the service will usually be a little slow where patients will wait a little. However, all doctors and staff work according to the SOP (Standard Operating Procedure). When doctors treat patients, they try not to make mistakes, and other staff provide services precisely and carefully. Doctors strive to never misdiagnose patients, officers in the pharmacy strive to never give the wrong medicine to patients. In addition, technical staff also endeavour to never make mistakes in their work and they are all willing to listen to patient complaints.

3.2.4 Assurance Dimension

The quality of basic health services at Puskesmas Karang Rejo when viewed from the assurance dimension has been fully implemented in accordance with community expectations (Suryawati et al., 2019). The Head of Puskesmas & all officers work based on the SOP so that officers provide services to patients in accordance with the predetermined timeframe. The officer has also informed the patient regarding the cost of services in accordance with the standards set by the City Government, so that the patient is not hesitant / sure (20%), with the payment of these fees and fulfills them, and all health file processing at the Karang Rejo Health Centre is guaranteed legality such as referral letters and health certificates issued by the Puskesmas signed by the examining doctor and wet stamped.

3.2.5 Empathy Dimension

The empathetic attitude of the head of the Puskesmas and the technical officers at Puskesmas Karang Rejo is quite good, where the officers serve patients in a friendly manner, with courtesy and do not act discriminatively towards patients. Based on observations made by researchers that officers serve patients one by one according to the queue number, and officers also direct patients according to the desired service needs. However, the attitude of officers in serving patients still does not describe good empathy (10%), such as when visitors first enter the Puskesmas where the officer does not stand and give an opening greeting 'good morning', as well as in the service room there are still officers who only call patients without saying 'please sir / ma'am'.

4. Conclusion

This study concludes that firstly, the Head of Puskesmas is a professional doctor, as a political actor has a very important role, especially when conducting vertical interactions and horizontal interactions. Vertical interaction with the leaders above (head of department, regent) and horizontal interaction with the leaders below (head of administration, head of section). Interactions with leaders above and below act equally as political actors, have professional responsibility for their work, so that

they can manage Puskesmas, which previously ran programs depending on funding from the Head of the Health Office, at this time have become independent with BLUD no longer dependent on funding from the Head of the Health Office.

Secondly, in the dimensions of public service quality at Puskesmas Karang Rejo Karang Rejo West Tarakan Sub-district, Tarakan City, North Kalimantan Province, Indonesia, which has run optimally its achievement of 85% is the dimension of reliability, the dimension of responsiveness and the dimension of assurance. These dimensions can be optimal due to changes in the role and status of the Puskesmas Institution from not independent to an Independent Puskesmas Institution with BLUD management. Meanwhile, the dimensions of public service quality that have not run optimally and require improved management, the shortfall is 15%, namely the tangible dimension, especially in the service comfort indicator where the patient waiting room needs to be provided with air conditioning. In the empathy dimension, the attitude of officers who are less open and friendly to patients or visitors. Patients who enter the health centre or service room for the first time do not get a 'good morning' or 'please come in' greeting. Things that can affect service quality at Karang Rejo

Health Centre are complaints management that is not yet optimal, there is no special complaints desk, and there are also no service standards published to patients or visitors.

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