

## CHAPTER II

### LITERATURE REVIEW

#### A. Public Service

##### 1. Definition of Public Service

According to Indonesian dictionary, service has three meanings: (1) subject or serving, (2) efforts to serve the needs of others with earning rewards (money), (3) convenience provided in connection with the sale and purchase of goods or services. Service is essentially an activity or benefit offered by one party to another and essentially has no intangible and does not result in ownership of anything, the production process may also be associated with a physical product (Donald 1984, quoted by Hardiansyah, 2011:10). According Lovelock (1991), quoted by Hardiansyah (2011:10), service is a product that has no form or shape so that there is no form that can not be owned, and has no durable, but can be experienced and felt by the service recipient. From the previous explanation, service is an activity that offered and intangible but can be experienced and happen in a short time which production process may not be associated with a physical product.

Public service is interpreted as service delivery (serve) for the people who have an interest in the organization in accordance with basic rules and procedures that have been established (Sinambela, 2006:5). Furthermore, according to

Kemenpan No.63/KEP/M.PAN/7/2003, public services is all service activities forms undertaken by public service providers as an effort to fulfill the needs of service recipients and implemented for the provisions of the legislation. Boediono (2003), defining public service as a process aid to others in order to require particular sensitivity and interpersonal relationships to create satisfaction and success.

From the definition above, it can be concluded that what is meant by public services are any services needed by the community to meet the interests to be achieved in a public organization with the specific ways in order to create satisfaction and success.

According Hardiansyah (2011:11), there are three (3) essential elements in public service:

- a. Organization of providers (operators) is the government ministry/ local government.
- b. People, community, or organization with an interest or service recipients.
- c. Customer satisfaction of service recipients.

From the above description, the local governments have strong position as regulators. The government has a duty to fulfill the needed or requested services for the society or organization. Furthermore, interested organization or community that requires service does not have the bargaining power or not in the equivalent position to receive service. Thus, it could lead to two way communication directions to perform *KKN* and worsening services provided by the government.

The most essential thing in a public service is setting direction of public policies oriented to satisfy the customer that can be done by improving and enhancing management performance of the government / local government so that the people who need service can get provided services and assessed satisfactorily.

## **2. The New Public Service**

According to Denhardt and Denhardt (2003:42-43), theorists of citizenship, community and civil society, organizational humanism, new public administration, and postmodernism have helped to establish a climate in which it makes sense today to talk about a New Public Service. Though we have been aware the differences, even substantial differences are existing in these various viewpoints, we would suggest there are also similarities that distinguish the cluster of ideas we could call as the New Public Service from those associated with the New Public Management and the Old Public Administration. Moreover, there are a number of practical lessons that the New Public Service suggests for those in public administration. These lessons are not mutually exclusive, rather they are mutually reinforcing. We will outline these ideas, then, discuss each one in more detail in the following seven chapters. Among these ideas, we will find out the most compelling points:

### **a. Serve Citizens, Not Customers**

The public interest is the result of a dialogue about shared values rather than the aggregation of individual self-interests. Therefore, public services do not

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merely respond to the demands of “customers,” but rather focus on building up the relationships of trust and collaboration with the citizens.

b. Seek the Public Interest

Public administrators must contribute to building a collective, shared notion of the public interest. The goal is not finding out quick solutions driven by individual choices rather than the creation of shared interests and shared responsibility.

c. Honoring Citizenship over Entrepreneurship

The public interest is better advanced by public service and citizens committed in making meaningful contributions to society than by entrepreneurial managers acting as if public money were their own.

d. Think Strategically, Act Democratically

Policies and programs meeting public needs can be most effectively and responsibly achieved through collective efforts and collaborative processes.

e. Recognize that Accountability Isn't Simple

Public service should be attentive to more than the market; they should also attend to statutory and constitutional law, community values, political norms, professional standards, and citizen interests.

f. Serve Rather than Steer

It is increasingly important for public servants to use shared, value-based on leadership in helping citizens articulate and meet their shared interests rather than attempting to control or steer the society in new directions.

g. Value People, Not Just Productivity

Public organizations and the networks in which they participate are more likely to be successful in the long run if they are operated through processes of collaboration and shared leadership based on respect for all people.

### 3. The Quality of Public Service

The word quality has many different definitions and so varied. It starts from the conventional to be more convenient so that quality can be directly describe the characteristics of a product in form of performance, reliability, easy to use, aesthetics, and so on (Sinambela, 2006:6). Furthermore, according to the theoretical Sinambela, public service goal is basically satisfying the public, and to achieve satisfaction charged excellent service quality that is reflected in the following points:

- a. Transparency, the service is open, straightforward and can be accessible to all needed parties provided adequate and easy to be understood.
- b. Accountability, services that can be accounted in accordance with laws and regulations.
- c. Conditional, the services in accordance with the conditions and capabilities giver and care receiver by sticking to the principle of efficiency and affectivity.
- d. Participatory, that it can to encourage people participation in organizing public services by taking into account the aspirations, needs, and community expectations.

e. Equality of rights, that service does not discriminate views of any particular aspect of love, race, religion, class, social status, and others.

f. Rights equilibrium and obligations, the services account aspects of fairness between the giver and receiver of public services.

From the description, it is clear that the demand for service quality should be criteria-meets the above criteria so that the goal of public service that is satisfying the public can be achieved and will impact the members positively for the image of the public service. With more advanced society, the demands of public services should be oriented so that excellent service society increasingly facilitated the access to services. Excellent service provided to service users will impact the maximum of satisfaction level. According to Boediono (2003:63-65) In this the series of integrated activities in service excellence should be:

a. Simple general service

It can be said as excellent if the implementation is not complicated, the procedure is not that intricacies, reachable requirements for customers, not looking opportunity in narrowness, and so on.

b. Open public services

One of the customers' desire is being well-served with full of honesty, therefore the staffs who conduct service customer must give an honest explanation. It is in the rules or norms that we should not feel too proud of our self in giving service for others so that we do not expecting something in return from the customers.

c. Easy public services

To have an easy service, it requires straightforward procedures and the staffs should be sincere and give the service from their heart. They should be able to face the challenge from themselves in order to not expecting something back in the future from the customers.

d. Giving appropriate public service

The meaning of appropriate is defined as the right direction, or the right target, or just in the sense of not more and not less. It is just being proper, to fulfill the promise. Therefore, it should be supported with simple procedures, adequate facilities, and communicate effectively as well.

e. Complete public services

Complete means the availability of what is required by the customer once customers take care acquired full suite of services, unnecessary again the need to refine the other. This does not guarantee the excellence public service as long as not supported by good human resources and tools.

f. Reasonable public services

Reasonable public services are not meant to be luxurious that only cause burdensome for customers. Normal service means not giving made-up service, but appropriate public services.

g. Affordable public services

Especially money retribution must be reachable by customers. Not fabricated by building up an expensive parking lot charging high cost for it. Luxurious,

parking spot requiring expensive parking fee so that unreachable for the customers and not desired by the public services as defined previously

Still related to the values described above that the service must be proactive in other words, service providers should be active in providing services that service providers will always act before served requested that service recipients are considered and understood. Behave positively is also needed. This attitude can change the atmosphere and excitement for consumer interaction. A positive attitude shown by the service provider will easily seen with body language like smiling, how to shake hands, how to view and how to speak up if the service providers it will be positive consumers respond positively impacted as well.

Furthermore, in measuring the quality of public services, Zeithaml (1990) cited by Hardiansyah (2011:47) says there are 10 important benchmark dimensions for the quality of public services that are:

- a. Tangible, consisting of physical facilities, equipment, personnel and communication.
- b. Reliable, consists of the ability to create a service unit services presented appropriately.
- c. Responsiveness, willingness to help consumers responsible the quality of services provided.
- d. Competence, required demands, knowledge, and skills either by personnel in providing service.



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- e. Courtesy, attitudes or welcome behavior, friendly, responsive toward the willingness of costumers and making contact as well as personal relationships.
  - f. Credibility, fairness in any effort to attract public trust.
  - g. Safety, services to be provided should be guaranteed free from hazards and risks.
  - h. Accessible, easy to make contact and personal approach.
  - i. Communicative, willingness to listen towards the costumers' willingness as well as conveying new information for public.
  - j. Understanding the costumers needs, makng an effort to know the needs of costumers (Hardiansyah, 2011:47)

#### **4. Community Satisfaction Indeks (IKM)**

In addition to see the satisfaction of community service by Kemempnan : KEP-25/M.PAN/2/2004 there are 14 indicators that must be present for at least the basic measurement citizen satisfaction index are the following range:

- a. Service procedures, the ease stages of service provided to the views of the service flow simplicity.
- b. Services requirements, technical a well as administrative requirements needed to get the services in accordance with the type of service.
- c. Staff clarity, the existence and the certainty position of the staffs (name, position and authority and responsibility their replied).

d. Discipline of the service workers, the seriousness of officers in provides services primarily to the consistency of working time in accordance regulations.

e. Responsibility for service workers, namely clarity of authority and responsibility responsible officials in the administration and settlement services.

f. The ability of service personnel, the level of expertise and skill owned by officers in providing / finishing services to community.

g. Service speed of, which is targeted to be completed in time service time allowed by the unit of service providers.

h. Justice in getting the service, i.e. the service implementation without distinguishing class / status of the customers.

i. Courtesy and friendliness of staff/ workers, the attitude and behavior of officers in providing services to the community as polite and friendly as well as mutual respect and honor.

j. Reasonable service fee, which is the affordability of the amount of the fees imposed by the service unit.

k. Certainty service fee, the correspondence between the fees paid the cost has been determined.

l. Certainty service schedules, the execution time of service, appropriate with the conditions set.

m. Environmental comfort, the condition of facilities and infrastructure of clean services, neat, and organized so as to provide comfort to service recipients.

n. Safety of services, namely ensuring the safety level of the unit providers of service or the means used, so people feel at ease to get service to the risks resulting from the implementation of the service.

In the efforts of improving health care quality factor, actor is quite important in the public service which addressed to the staff or employees who provide services. In this case the strategy department social RI cited by Chamsyah (2009:72-75), one of the efforts done is to strengthen the human and human resource capacity and institutional implies professionalism and performance improvement program actors development of social welfare, including government officials at the central and local, community / business organizations as well as service recipients for prevent and resolve social problems that exist and to realize aspirations and hope in improving their quality of life. The importance of strengthening strategy capacity building and institutional, that building/development programs welfare can be implemented in accordance with the principles of professionalism accountability, efficiency, effectiveness s well as the sustainability of the program.

Also in terms of adequate public services considered in improving the quality of public services is the availability of facilities and supporting infrastructure to speed service and provide comfort to consumers. This will have an impact on customers' satisfaction in it services provided by an organization or an agency. By Moenir (1995:119), service facility are all kinds of tools, working equipment and other facilities that serve as the main tool / helper in managing the work, and also

serves social in the context of the interests of those who are dealing with intended organizations,

In a book published by minister of home affairs(1973:121), one of the aspects for public welfare in the health sector is the development of health facilities that are gradually developed and being integrated with public health efforts through community health centers (Puskesmas).

Furthermore, service is considered as important factors because it could increase the service effectiveness and its satisfaction, Moenir (1995:199) describes service facility functions as follows:

- a. Speeding up the process of work implementation that could save time.
- b. Increase productivity, either goods or services.
- c. Better product quality / guaranteed.
- d. Assessment measures the composition and stability guaranteed.
- e. It is easier / simpler in motion the perpetrators.
- f. Causing a sense of comfort for people with an interest.
- g. Causing a sense of satisfaction to the people concerned.
- h. Causing a sense of satisfaction to those concerned so that can reduce their emotional nature.

## **B. Health Service**

### **1. Definition**

Levey and Loomba (1973) explains the meaning of health service is any private or collectively organized effort conducted in an organization to maintain and improve health quality, prevent, and heal and restore health. Individuals, families, groups, or communities (Azwar, 1996:34). The form and range of health services can be determined as follows:

- a. Services Coordination, whether performed individually or together in an organization.
- b. The scope of activities area, whether it only covers maintenance activities health, health promotion, disease prevention, healing illness, convalescence or a combination thereof.
- c. Health service targets, whether for individuals, families, groups or for society as a whole.

In general, the form and type of health services can be distinguished, in this case, Hodgetts and Cascio (1983), quoted by Anwar (1996:36) distinguish health services into 2 groups:

- a. Medical care/service

Health services are included in the medical service is characterized by a coordinating can be alone (solo practice) or together in a single organization (institution), ultimate goal to cure diseases and recover health, and the goal for individuals and families.

b. Public health service

Health services are included in the public health service is characterized by organizing that usually together in one organization, the main objective to maintain and improve health and prevent disease, as well as targeted especially for groups and communities.

This distinction is further elaborated by Leavel and Clark cited by Azwar (1997:37) in the table below:

Medical Services	Public Health Services
Executive power is primarily doctor	The staffs specialists is community experts
The main concern in healing disease	The main concern is the prevention for disease
The main target is an individual or family	The main target is the citizen in general
Paying less attention to efficiency	Always trying to find ways efficiently
Should not attract attention because contrary to medical ethics	Able to attract the public attention, for example, health education
Individual functioning and bound by law	Running its function as organizing community and support legislation
Income derived from the reward	Income in the form of salary s given by government
Responsible only for the patient	Responsible for all communities
Do not attempt to monopolize health even get a rival	Can monopolize health efforts
The administration matter is very simple	Dealing with leadership problems

**Table 2.1 Differences of medical care and public health service  
Leavel and Clark cited by Azwar (1997:37)**

From the above explanation, it can be seen the difference between medical service that focuses on individual services or individuals with public health care services which focuses on all citizens.

## 2. Requirements for Basic Health Services

The basic Health service is a needed condition to be met to measure the quality of health services being held. Terms of principal health services have value to fulfill patient or community rights want to be served in order of what is expected or desired community can perceived impact of positive and sustained by demand of the community. Good health service should have different basic requirements as described by Azwar (1996:38-39).

### a. Available and sustainable

This means that all types of health services needed by the community can not be hard to find, and their presence in the community is any time needed.

### b. Acceptable and reasonable

It means that the health service would not be contrary to the beliefs and public confidence.

### c. Easily to get

Sense of achievement is meant here, especially from the point of location. Thus, to achieve good health, then managing the distribution of health service facilities is very important health services are concentrated in urban areas and while it is not found in rural areas, not the service good health.

d. Easy to reach

Definition of affordability is meant especially from the point of costs to realize that such a situation should be sought health care costs is consistent with the ability economy.

e. Good quality

Understanding the quality of what is meant here is that realizing the degree of perfection held health service, which in a one other may satisfy the users of services, and others tat how its implementation in accordance with the code of ethics and standards that have been determined.

### **C. The Quality of Health Services.**

#### **1. Definition**

Quality is the totality of form and traits of a good or service, which it includes as well the sense of safety or fulfillment user needs (DIN ISO 8402 (1986), quoted by Azwar (1996:48). According Azwar (1996:48), quality of health services is a shows the level of health service excellence, which on the one hand can lead to satisfaction in each patient according to the satisfaction of the average population, and on the other hand its implementation procedures in accordance with the code of professional service standards of ethic. Meanwhile, according to Milton I Rover and C montova Aqualiar, WHO (1988), cited by Wijono (1997:231) is the quality of the health services are suitable or appropriate appearance (which dealing with standards) of an intervention known to be safe,



that can deliver the results to the community in question and has having the ability to make an impact on mortality, morbidity, inability and malnutrition.

From the definition above it can be concluded that what is meant by health services is the level of excellence of service provided to the patient and lead to satisfaction in accordance with professional standards and ethics so as to provide the ability to make an impact on the death, illness, incapacity, and malnutrition.

## **2. Dimensions of Quality of Health Services**

There are different dimensions of nature dimensions.

### **a. For health service users**

Quality of health services is mainly dealing with the dimensions of responsiveness of the officer /worker to fulfill the needs of patients, excellence communications from officer with the patients. Being apprehensive as well as good hospitality are needed from friendly worker in serving patients, and to cure the patient disease.

### **b. For health care providers.**

More related to the quality of health services in conformity dimensions organized with the development of science and cutting-edge technology and or professional autonomy in the administration of health services in accordance with the need to provide services officer patient. Responsive officers in providing services.

c. For health services.

Quality of health services are related more to the dimensions of efficiency in the use sources of funding, health funding obligations, and or ability health services subtracting losses funding services health (Robert and Prevost (1987) cited by Azwar (1996:49).

From the above explanation can be understood that the dimensions of health service got to see the quality of health service. When they meet the terms that have been mentioned above will improve the quality of health services ranging from officers responsiveness of service providers, technological sophistication in service and the efficiency of resource use funds used so that the objective improving the quality of health service can be filled. In other opinion there are other dimensions that are most important to help patterns in measuring the extent to which standards have been achieved programs or health service standards.

Dimension of program or service standards are described by Wijono (1997:254).

a. Technical competence.

Technical Competence terms of skills, abilities and appearance officers, and support staff.

b. Accessible toward the service.

Access means that health services are not hindered by circumstances geographic, social, economic, cultural, and organizational or task constraints.

c. Effectiveness

The quality depends on the effectiveness of health services related to norm of health services and technical guidance in accordance with the instructions there is.

d. Relationships between humans

Dimensions of human relationships between officers associated with interaction and patients, managers and workers, and between the health team with community.

e. Efficiency

Efficiency of health care is an important dimension of quality because efficiency affects health condition; especially dealing with limited sources power health services in general.

f. Continuity of service

Continuity of care/service means client will receive services complete and requirements (including referrals) without blocking procedure diagnosis and therapy unnecessary.

g. Safety

As one of the dimensions of quality, safety means reduce the risk of injury, infection, or other hazards associated with services.

h. Amenities, Agreeableness, and enjoyment

Hospitality / enjoyment (amenities) associated with health service were not directly related to the effectiveness Clinic/puskesmas, but can affect patient satisfaction and being willing to return to the facility health to obtain the next service.

## **D. Public Health Center (Puskesmas)**

### **1. Definition**

To improve public health requires an agency that supports the government's goal to improve the health community. Health institutions are the local government clinic/puskesmas is active and the first spear health services of community. Puskesmas is an implementation unit functional acting as health development, coaching centers community participation in health and health care centers the first level in conducting a comprehensive, integrated, and continuing on a people living in a particular area (Azwar, 1996:119). Puskesmas is the central Health development function to develop and foster health society and conducts leading-edge health service and near by with the community in the form of comprehensive main activities in Jurisdiction (Wijono, 1997:532).

From the above understanding is central to the construction of health centers community health service centers, and community health centers and organizers of health services in the communities closest to principal form of activity in his area. According to RP3JPK/SKN cited by Wijono (1997:533), the main functions of puskesmas organized through various main activities the local government clinic will continue to be developed in stages in accordance with the needs.

### **2. The Principle of Puskesmas Management**

As the first level of health service advice in Indonesia, work management of puskesmas that is guided by four principles.

a. The principle of responsibility area

In organizing work, health centers must implement principle of accountability should in the responsible area. It means that puskesmas should be responsible for all the health problems that occur in the work area.

b. The principle of public participation

In organizing work, puskesmas should implement the principle of public participation, which means trying to involve the community in organizing the program works.

c. The principle of integration

Organizing the work program, puskesmas should implement the principle of integration, which means trying to integrate these activities not only with health programs, but also other sectors of the program.

d. Principle Reference

In organizing work, Puskesmas have to implement reference principle, meaning that if it is not able to deal with a health problem, they should refer to the better health service. Indeed, for medical service, the reference point is the hospital, while for service public health referral pathways are various office health

(Azwar, 1996:120-121).

### 3. Environmental Space Activities of Puskesmas

Puskesmas has a space environment activities in providing services health service to the community, include:

a. Outpatient service

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- b. Maternal and child welfare service
  - c. Family planning service
  - d. Nutrition activities effort
  - e. Enterprises school activities
  - f. Environmental health service
  - g. Mental health service
  - h. Health education service
  - i. Community health service
  - j. The prevention and eradication of infectious diseases
  - k. Sports health effort
  - l. Elderly health effort
  - m. Eye health business
  - n. Occupational health service

While the scope of the work area of Puskesmas is largest According to the health minister's decision Number 279/MENKES/SK/IV/2006 about guidelines

for service delivery service of public health nursing in Puskesmas that includes activities within the clinic building activities public health nursing is done in poly nursing upbringing, medical clinic, and the inpatient clinic, include:

- a. Nursing upbringing to outpatient and inpatient
- b. Finding new cases (early detection) in outpatients.
- c. Checkin/health education
- d. Monitoring regularity of treatment
- e. Reference case/health issues to other health professionals in puskesmas.

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- f. Giving advice (counseling) nursing
  - g. Activities that are abundant appropriate task delegation and authority granted or established procedures (eg treatment, prevention case of emergency hospitalization, etc.)
  - h. Creating a therapeutic environment in the health service halls of Puskesmas (convenience, safety, etc.).
  - i. Documentation of nursing

#### **4. Program objective of health effort by Puskesmas**

In accordance with puskesmas staff is to increase the community degree by doing all the activities related to public health form of prevention and cure of disease. The role of Puskesmas in Health service is important as the spearhead of the community health and the work done Puskesmas within its jurisdiction.

Wijono (1997:532-533), explains the purpose of the effort of puskesmas health/clinic include general purpose and special purpose programs. General purpose program is holding a puskesmas health service quality, smoothly, affordable with active community participation so that get ability of healthy life for every resident in order to realize optimal health for all communityt,for special purpose program improvement service of puskesmas is as follows:

- a. Coverage increased effectiveness, and efficiency of puskesmas program which includes the development, construction, and services.

- b. Increasing capacity of communities to help them in health and increase community participation, including private in the form of various health measures.
- c. Improving nutritional status of the community through improved family nutrition and behavioral and lifestyle fee that support the achievement of improved nutrient.
- d. Improving the quality of people's living environment through improved environment, changes in behavior and lifestyle.
- e. Reduction of morbidity, mortality, disability as a result of disease and accidents, mental illness, drug abuse and hazardous materials, and the effect of an unhealthy environment.
- f. Development of healthy and prosperous families with the increasing acceptance of norms small family, happy, and prosperous.

From the above explanation, it is clear that the role of puskesmas in increasing service of national welfare of society through health service Quality is a form of proof that the puskesmas is spearheading reject measuring success in health service less attention to aspects of quality then the clinic will be members of poor impact on the quality Public health.