

RESPONSIBILITY OF SERVICE TO INPATIENTS AT NEGERI LAMA PUBLIC HEALTH CENTER, SUB-DISTRICT DOWNSTREAM BAR

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Received : 15 Mei 2025

Published : 13 July 2025

Revised : 5 Juni 2025

DOI : [https://doi.org/ 10.54443/ijset.v4i9.852](https://doi.org/10.54443/ijset.v4i9.852)

Accepted : 30 Juni 2025

Link Publish : <https://www.ijset.org/index.php/ijset/index852>

Abstract

Responsiveness is one of the important indicators in public services that reflects the ability and alertness of the apparatus or officers in responding to the needs, complaints, and expectations of the community as service users. This study aims to determine the responsiveness of services to inpatients at the Lama Public Health Center, Bilah Hilir District and to find out what obstacles are faced by inpatients at the Lama Public Health Center. This study was motivated by the many complaints from the community regarding slow services, unfriendly attitudes of officers, and the service process that takes quite a long time. The focus of this study discusses the responsiveness of services to inpatients at the Lama Public Health Center, Bilah Hilir District, which includes aspects of responding, speed and accuracy of service, and discussing the inhibiting factors that occur in the service process for inpatients at the Lama Public Health Center. The method used in this study is descriptive qualitative. Data collection techniques are carried out through in-depth interviews, direct observation, and documentation. The results of the study indicate that the services provided by the Lama Public Health Center are still not fully responsive to patient needs. There are several major obstacles, such as limited medical personnel, ineffective manual queuing system, lack of training on excellent service, and the absence of a structured complaint system. These factors cause delays in service and reduce the level of public satisfaction. Responsiveness indicators such as speed, accuracy, and the ability of officers to respond to complaints have not been optimally met. Therefore, it is necessary to make comprehensive improvements to the Puskesmas service system. Suggestions from this study are the addition and equalization of medical personnel, digitization of service and administration systems, HR training in communication and service ethics, optimization of triage systems and priority routes, improvement of medical facilities and infrastructure, especially in first-level service facilities such as Puskesmas.

Keywords: *Responsiveness, Service, Responding, Speed and Accuracy*

INTRODUCTION

Responsiveness is one of the indicators in public services related to the responsiveness of state apparatus to the needs of the community who require services as regulated in the legislation. Responsiveness is a response from the service provider with the benefit of fulfilling the desires and complaints felt by the community as service users (Dwiyanto, 2014:148) in (Wulandari & Utomo, 2021). Responsiveness is the ability of bureaucracy to recognize community needs, set service agendas and priorities, and develop service programs according to community needs and aspirations. In short, responsiveness is a measure of bureaucracy's responsiveness to the hopes, desires, and aspirations, as well as the demands of service users. According to (Dwiyanto, 2017) in (Nugraha, 2020).

Service is very important for the continuity of human life, because basically humans need help from others in their lives. Society today makes many demands to get public services. Service basically concerns a very broad aspect of life. In national life, the government has the function of providing various services needed by the community. Public service is all forms of service, both in the form of public goods and public services which in principle are the responsibility and are implemented by central government agencies, in the regions, and in the environment of regional-owned enterprises, in the context of implementing the provisions of laws and regulations (Kusuma 2016). In the Basic Law Number 25 of 2009 concerning public services, it is explained that public services

are activities or a series of activities in order to fulfill the need for services in accordance with statutory regulations for every citizen and resident for goods, services and administrative services provided by public service providers. Based on the regulation of MENPAN Number 63 of 2004 which states that the essence of public service is the provision of excellent service to the community which is the embodiment of the obligations of government officials as public servants. Thus the quality of public service performance is directed at realizing public satisfaction as users of the service. The purpose of public service is to meet the needs of citizens in order to obtain the desired and satisfactory service. Therefore, service providers must be able to identify the needs and desires of citizens, then provide services according to the desires and basic needs of citizens, services to achieve other state goals that are included in public services. Public service is an essential activity in achieving strategic government goals. As explained by Dwiyanto (2006: 20), Public service not only functions as a means of interaction between the government and the community, but also plays a role as a tool to realize government policies. In a democratic country, public service must be carried out by meeting certain standards to ensure that the interests of the community are well served.

Responsiveness refers to the ability of service providers to respond appropriately to the needs, expectations, aspirations, and demands of the community as service users. Good public services must be able to capture and respond quickly to all forms of input from the community. For example, when the public complains about the length of the administrative process, a responsive service provider will immediately make improvements to speed up the service. With high responsiveness, public trust in the government can increase, because the public feels that their voices are heard and cared for. Responsibility is an indicator that shows the extent to which the process of providing public services is carried out in accordance with established administrative standards and provisions. This includes the rules that must be followed by service providers so that services run according to the correct procedures. According to Levine, quoted in (Wulandari & Utomo, 2021). The Community Health Center is a functional organization that organizes health efforts that are comprehensive, integrated, equitable, and acceptable and affordable to the community, with the active role of the community and using the results of the development of appropriate science and technology, at a cost that can be borne by the government and the community (Bibu, 2019). Based on the results of an interview with one of the old village residents, the Old Village Health Center is a health center in Bilah Hilir District, Labuhanbatu Regency, the community hopes that the Old Village Health Center can provide the best service according to its capabilities and its function as a health center for people who need medical help. Therefore, the health center is expected to provide the best and affordable service to the community.

Based on the researcher's initial observations through direct observation of several patients who visited the Negeri Lama Health Center, it turned out that there were still complaints from the public about the services provided. Several patients complained because they had to queue longer than the existing service waiting time provisions to be able to get service. Several patients also stated that the response of patient services, in getting services was not optimal so that many patients felt ignored and their rights as patients were neglected to get maximum service. From the results of initial observations of the study using an initial interview approach with residents around the Negeri Lama Health Center and also visiting patients, it showed that there were indications of problems in the health center. This can be seen from the results of the initial research interviews. The results of the interview were the problem of the attitude of officers towards the response of services to the community. The lack of response from officers to patients who need services has caused various negative impacts, both for patients and the health institution itself.

When patients come for treatment, they expect to be served quickly and responsively, especially if they are in urgent or emergency conditions. However, when health workers do not respond promptly, this can make patients feel neglected, unappreciated, and can even worsen their emotional and physical condition. The provision of services by officers to patients while waiting for their queue number to be called, often causes dissatisfaction among patients due to inconsistencies in the queue system. One of the most striking problems is discrimination against patients, both intentionally and unintentionally. This discrimination can appear in various forms, such as preferences for certain patients, different treatment based on social, economic, or physical background, and even unfairness in calling based on proximity to medical personnel. In accordance with the problems in the field, the problems in the field are shown that the lack of response from the health center in the implementation of service time, the speed of service that should be ready within 5 minutes can reach 15-20 minutes, and the order of service, health center officers often work casually can be seen from the service process that takes quite a long time starting from registration, examination, to queuing to take medicine so that patients feel bored.

Figure 1.1 Service Period

LAYANAN PELAYANAN		LAYANAN PELAYANAN LAMA WAKTU PELAYANAN	
1. Ruang Pendaftaran dan Revisi Buku	Pelayanan Pendaftaran dan Revisi Buku	Pelayanan Pendaftaran dan Revisi Buku	12 menit
2. Ruang Pendaftaran dan Revisi Buku	Pelayanan Pendaftaran dan Revisi Buku	Pelayanan Pendaftaran dan Revisi Buku	12 menit
3. Ruang Pendaftaran dan Revisi Buku	Pelayanan Pendaftaran dan Revisi Buku	Pelayanan Pendaftaran dan Revisi Buku	12 menit
4. Ruang Pendaftaran dan Revisi Buku	Pelayanan Pendaftaran dan Revisi Buku	Pelayanan Pendaftaran dan Revisi Buku	12 menit
5. Ruang Pendaftaran dan Revisi Buku	Pelayanan Pendaftaran dan Revisi Buku	Pelayanan Pendaftaran dan Revisi Buku	12 menit
6. Ruang Pendaftaran dan Revisi Buku	Pelayanan Pendaftaran dan Revisi Buku	Pelayanan Pendaftaran dan Revisi Buku	12 menit
7. Ruang Pendaftaran dan Revisi Buku	Pelayanan Pendaftaran dan Revisi Buku	Pelayanan Pendaftaran dan Revisi Buku	12 menit
8. Ruang Pendaftaran dan Revisi Buku	Pelayanan Pendaftaran dan Revisi Buku	Pelayanan Pendaftaran dan Revisi Buku	12 menit

Source: Old State Health Center 2024

Judging from the long service process in the service process at the Old State Health Center, Bilah Hilir District, it is not comparable to the workforce assigned to the Health Center, even though there are quite a lot of workers at the Old State Health Center, Bilah Hilir District, this can be seen from the Workforce Table at the Old State Health Center below: The number of workers at the Old State Health Center is 81 (eighty one) people, of which 2 (two) people are general practitioners or doctors with status who work in government health service units, 1 (one) person is an ASN dentist or a doctor with Civil Servant status who works in a dental and oral health service unit for the community, 1 (one) PTT doctor or a doctor who is appointed for a certain period of time in a health service facility but not as a civil servant, 9 (nine) ASN midwives or health workers who work in government agencies such as health centers, regional hospitals or government-owned health institutions who have ASN status, 37 (thirty-seven) contract midwives or health workers who work based on temporary work agreements with certain agencies without ASN status. And there are 5 (five) ASN nurses or nursing staff who work in government agencies such as regional general hospitals (RSUD), Community Health Centers or other government-owned health facilities with the status of Civil Servants (PNS) or Government Employees with Work Agreements (PPPK), 7 (seven) contract nurses or nursing staff who work based on temporary work agreements or contracts with certain agencies without permanent employee status or ASN, 3 (three) ASN public health personnel or health workers who work in the field of public health who focus on improving public health and implementing health programs managed by the government who have ASN status.

And there are 5 (five) contract public health workers or health workers who work in the public health sector who focus on improving public health and implementing health programs managed by the government without ASN status, 2 (two) ASN pharmacists or workers who work in drug management and pharmaceutical services in government agencies such as the Ministry of Health, government hospitals, and other health institutions as Civil Servant Employees (PNS), 1 (one) ASN sanitarian or health worker who works in the field of environmental health and sanitation in Indonesia who focuses on disease prevention efforts and health promotion with ASN status, 2 (two) contract pharmacists or health workers who are employed by the government, hospitals or other health institutions for a specified period of time. There is 1 (one) ASN lab person or employee who works in a health laboratory under a government agency such as the Ministry of Health, government hospitals, or research institutions with ASN status, 1 (one) Nusantara Sehat Nutrisi person or health worker who works on a program or initiative that aims to improve public health in Indonesia through a good nutrition approach, 1 (one) person with a D3 finance contract or a worker who has a diploma III in finance and is employed on a contract basis, 1 (one) ambulance driver or professional worker who is responsible for driving and operating an ambulance, 1 (one) security guard is an officer who is responsible for maintaining security in the health center environment, 1 (one) cleaner is a person who is responsible for cleanliness in the health center.

The community that utilized or used services at the Old State Health Center in the past five years, we can see

from the table of Inpatient Visits at the Old State Health Center, Bilah Hilir District in 2019-2023 is as follows:

Table 1 Inpatient Visits at NegeriLama Health Center 2019-2023

No	Year	Amount
1	2019	1575
2	2020	965
3	2021	643
4	2022	567
5	2023	454

Source: Old Public Health Center Administration Section

In table 1 it can be seen that the average number of inpatient visits has decreased every year, in 2019 there were 1575 inpatients at the old state health center consisting of 200 children, 700 women, 675 men, and in 2020 there were 965 inpatients at the old state health center consisting of 100 children, 465 women, 400 men and in 2021 there were 643 inpatients at the old state health center consisting of 80 children, 263 women, and 300 men, while in 2022 there were 567 inpatients at the old state health center consisting of 100 children, 367 women, 100 men, while in 2023 there were 454 inpatients inpatients at the old state health center consisting of 57 children, 296 women and 101 men, the decrease in the number of patients could indicate an improvement in the level of public health services, but could also indicate the low responsiveness of services provided by the Old State Health Center to the community.

Low responsiveness is indicated by the misalignment between existing services and community needs. This indicates the failure of an organization in realizing the goals and missions of the organization. Thus, the health center can be said to be responsible if they are considered to have high responsiveness to what is the problem, complaints and aspirations of the community. This condition illustrates that the responsiveness or responsiveness of inpatient services that have been implemented by the old state health center has not been optimal. Seeing the problems that often occur in inpatient services, it is important to see how responsive the health center services are so that the services provided are in accordance with what the community expects as patients, so that better services can be realized. The Old State Health Center is a health center that provides inpatient services. However, the service at the Old State Health Center is still not in accordance with the wishes of the community because complaints from the community or patients are still often heard in the provision of services, such as delays in serving patients. According to Zeithalm in the book (Luturmas, Y., & Luturmas, R. 2022), indicators of service responsiveness are the ability to respond to customers, speed of service, accuracy of service, accuracy of service, timeliness of service and the ability to respond to complaints. However, the Old State Health Center in Bilah Hilir District has not met the indicators of the ability to respond to customers which include good attitudes and communication from service providers.

LITERATURE REVIEW

Responsiveness

Responsiveness in public service refers to the ability of an organizationto respond to the needs and expectations of the community. Responsiveness is the ability to identify community needs and develop appropriate service programs. This includes aspects such as speed, accuracy, and precision in providing services, indicators of responsiveness include the ability to respond to complaints, officer attitudes, and the use of feedback for service improvement, good responsiveness reflects efficient organizational performance in meeting public demands (Dwiyanto 2006)

Public service

Public service is a service to achieve the government's strategic goals. Levine in the journal (Rusni Djafar & Sune, 2022) put forward three concepts that can be used to assess the quality of public services, namely:

1. Responsiveness is the responsiveness of service providers to the hopes, desires, aspirations and demands of service users.
2. Responsibility is a measure of the extent to which public services are provided in accordance with the correct and established principles or provisions of administration and organization.
3. Accountability is a measure that shows how much the service delivery process is in accordance with the interests of stakeholders and the norms that develop in society.

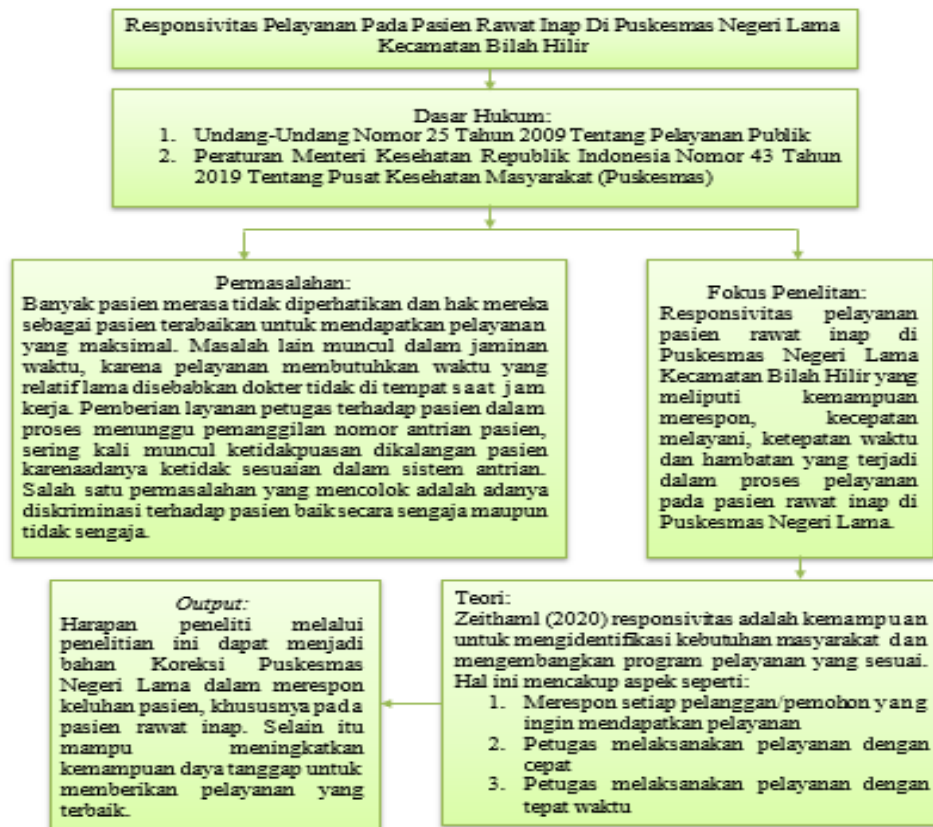
Health Center

Minister of Health Regulation Number 43 of 2019 states that Community Health Centers are health service facilities that carry out health care efforts.

public health and first-level individual health efforts, with more emphasis on health improvement efforts and

prevention efforts in their work areas. Health service facilities are places used to organize health service efforts, both promotive (health improvement), preventive (prevention efforts), curative (disease) and rehabilitative (health recovery) carried out by the government, local government or community. Health centers have the task of implementing health policies to achieve health development goals in their work areas.

Conceptual Basis



METHOD

The research location is a place where researchers conduct research on the objects to be studied. The research location chosen by the author is at the Lama Public Health Center, Bilah Hilir District. The reason the author is interested in taking this research location is because there are many problems in patient services, complaints about the attitude of officers who are less responsive to patients who need services at the Health Center, and discrimination against different patients based on social, economic or physical backgrounds, and even injustice in calling based on proximity to medical personnel. I found out about this after I conducted a direct pre-survey at the location and interviewed patients at the health center. In compiling this thesis proposal, the researcher uses an approach known as qualitative with a descriptive type. According to (Moleong, 2004) descriptive is revealing an objective picture of the conditions found in the object being studied. While the qualitative approach in question is carried out to understand the phenomenon of what is experienced by the research subject, for example behavior, perception, motivation, actions and others holistically and by means of description in the form of words and language, in a specific natural context and by utilizing various scientific methods.

In conducting this research, researchers must collect information and data to add attention to existing problems or phenomena and be able to describe well the facts in the field so that researchers can see and provide a clear picture and data information regarding the Responsiveness of Inpatient Services at the Lama Public Health Center, Bilah Hilir District. Quoting from the Qualitative Research Methods book, Research Informants are people who are used to provide information about the situation and conditions of the research background. Then (Sugiyono, 2016) stated that the determination of informants that are often used in qualitative research is purposive sampling, the determination of purposive sampling informants is a technique for taking samples of data sources with certain considerations and objectives. The particular considerations in question are choosing data sources or people who are considered to know the most about the problems and focus of the research. In the use of qualitative analysis, the interpretation of what is found and the drawing of final conclusions use logic or systematic reasoning. The qualitative analysis used is an interactive analysis model, namely an analysis model that requires three components in the form

of data reduction, data presentation, and drawing conclusions/verification using the interactive model owned by (Sugiyono, 2008).

RESULT AND DISCUSSION

Response to Customers/Applicants Who Want to Get Service

Observation results show that the response to customers or applicants who access services at the Old State Health Center is still less than optimal. This is reflected in the long waiting time that patients must experience before receiving services, both at the registration stage, examination by medical personnel, and when collecting medication. In addition, the absence of adequate information boards and the unavailability of a digital queue system means that patients must interact directly with officers to obtain information, which ultimately contributes to the disruption of the service process. Based on the results of an interview with one of the patients at the Negeri Lama Health Center, complaints were found regarding the service provided by the officers at the registration section. The patient felt disappointed because he had to wait quite a long time even though the queue was not too long. What was highlighted was the attitude of the officer who was considered unfriendly and answered questions in a curt tone when the patient asked for his queue number. This shows that there is a problem not only in terms of the speed of service, but also in the quality of interaction between officers and patients. This behavior shows a low level of empathy and interpersonal communication which should be the minimum standard in public services.

This situation strengthens the evidence that the service responsiveness indicator has not been fully met at the Old State Health Center. Referring to Zeithaml's theory, responsiveness includes the ability of officers to respond to customers quickly, on time, and attentively. In practice, responsiveness is not only about how quickly patients are served, but also how well officers are able to understand and respond to the emotional and information needs of patients. A curt attitude or lack of responsiveness in responding to questions from patients is a form of failure to meet these indicators. This problem is also reinforced by findings in previous studies, such as research by Tasya Ulfa Anandita (2024) which states that the inaccuracy of time in opening registration and the indifferent attitude of officers are major obstacles in realizing responsive services at health centers. This means that the problems that occur at the Negeri Lama Health Center are not unique, but rather part of a pattern of public service problems in various first-level health facilities in Indonesia. From a legal perspective, such service conditions are contrary to Law Number 25 of 2009 concerning Public Services, which requires every service provider to fulfill the principles of transparency, certainty of time, and fair treatment. In addition, Minister of Health Regulation Number 43 of 2019 concerning Community Health Centers also emphasizes that services must be carried out by paying attention to the social and psychological aspects of patients, which means that officers must be friendly, communicative, and able to create a sense of comfort for patients.

Speed of Officers in carrying out services

The speed of officers in carrying out services is one of the crucial aspects in realizing optimal public service quality. Fast service reflects the efficiency of work and the readiness of officers in responding to community needs. This speed does not only refer to the time of service completion, but also to the accuracy of procedures and compliance with applicable operational standards. Speed is an important indicator in assessing the performance of the apparatus. Officers who are able to provide services quickly and responsively demonstrate a high level of professionalism, and reflect a well-organized work system. This has a positive impact on the perception and level of public satisfaction with the services provided. Therefore, increasing the speed of service needs to be supported by an efficient system, the use of information technology, and continuous human resource training.

Thus, fast, accurate, and quality public services can be achieved comprehensively. Speed of service is a measure of the time required to serve customers. Speed of service is one of the factors that affect service quality. Speed of service can be measured by calculating the time required to serve customers. Service speed can vary depending on the industry. Fast service speed can increase customer satisfaction. Slow service speed can cause disappointment and have a negative impact on the company. Service speed can be measured by tracking the time from when the customer orders until the order is delivered. Service speed can be measured by tracking the time from when the customer sits down until they are greeted. Observation results on service speed show that service speed has a positive effect on customer satisfaction. However, service speed can also be influenced by various factors, such as the number of employees and service situations. Observation results, however, there are some respondents who expressed dissatisfaction with the speed of service. Nurses who provide fast health services can foster trust and positive responses from patients. The speed of service provided by nurses ensures patient safety. Service speed has a positive and significant effect on the level of service satisfaction. This finding is reinforced by the research results of Tasya Ulfa Anandita (2024), which states that slowness in service is often caused by the undisciplined work attitude of officers, not solely because of the high workload. The study emphasizes the importance of establishing a responsive

work culture, including direct supervision of officer behavior when providing services. The same thing was seen at the Negeri Lama Health Center, where the lack of supervision of work discipline caused officers not to feel bound to always maintain speed and focus in serving. In terms of regulation, this situation clearly contradicts Law Number 25 of 2009 concerning Public Services, which mandates fast, certain, efficient, and community satisfaction-oriented services. When officers serve at a slow pace without objective reasons, then the service does not meet the principles of "time certainty" or "professionalism." In addition, Minister of Health Regulation Number 43 of 2019 concerning Community Health Centers emphasizes that health services must reflect social responsibility and guarantee patient comfort. Slow and unresponsive services, especially those caused by unprofessional behavior of officers, are not in accordance with the mandate of the regulation.

Punctuality in Implementing Services

Timeliness in performing services refers to the ability of service providers to provide services to patients or users according to the promised or expected time, without any unreasonable delay. In the context of health services, timeliness involves every stages in the service process, starting from patient registration, medical examination, to decision making or medical action. Good punctuality is essential in improving patient satisfaction, as excessive waiting times can reduce patient comfort and negatively impact their experience in receiving care. Conversely, fast and timely service reflects the efficiency and professionalism of the service provider and can increase patient trust in the institution concerned. Therefore, maintaining punctuality in every aspect of service is one of the main factors in efforts to improve the quality of health services. Observation results on the accuracy of service found that some patients felt dissatisfied with the response given by officers. When patients came to register or ask for information, there were some officers who seemed less responsive in providing responses. In addition, timeliness in service is also a major concern. Although there is a predetermined service schedule, in reality many patients have to wait longer than the promised time. For example, patients who have a consultation schedule with a doctor often experience delays due to long queues or delays in the doctor in treating previous patients. In some cases, patients who arrive on time actually have to wait longer than those who arrive later because the queue system is not well organized. Overall, this observation shows that there are still several aspects that need to be improved in the service, especially in terms of officer response and timeliness. To improve the quality of service, it is recommended that officers be more proactive in responding to patients in a friendly and responsive manner. In addition, an evaluation of the queue system and time management is needed so that services can run more efficiently and on time. With these improvements, it is hoped that the level of patient satisfaction can increase and services become more optimal.

Obstacles That Occur in the Service Process for Inpatients at the Old State Health Center

Obstacles in the inpatient service process at the Old State Health Center can be discussed in more detail by looking at various factors that affect the quality of medical services there. Based on interviews and existing field results, the following is a detailed explanation of the obstacles that occur.

1. Medical Personnel Shortage

Limited number of medical personnel, One of the main obstacles in providing optimal health services at the Health Center is the limited number of medical personnel, especially nurses and doctors. Although the total number of nurses registered at the Health Center is 12 (twelve) people, in reality only 3 (three) nurses are consistently on duty and on standby at the Health Center every day. Meanwhile, most of the other nurses are assigned to other service locations such as integrated health posts, activities outside the Health Center, or integrated service units in the Health Center's work area, so their presence at the main facility cannot always be relied upon. The same thing also happens to doctors. Of the total 4 (four) doctors registered, only 1 (one) doctor is actively present every day at the Health Center, while the others carry out duties outside, including services in other work areas or work part-time.

This condition is increasingly felt at certain times, such as during busy service hours or at night. At these times, the number of medical personnel available is often not comparable to the number of patients who need services, especially in inpatient rooms. The small number of medical personnel on duty causes limitations in responding to patient needs quickly and comprehensively. The facts on the ground show that these limitations are most apparent at night. The number of nurses on duty at night is very limited, so not all patient requests can be handled immediately. For example, there was an incident where a patient who needed help pressed the call button, but only received a response from the officer after waiting for more than 20 minutes. Long waiting times like this are an indicator that the capacity of medical personnel is inadequate, especially in emergency situations that should be handled quickly. The impact of this delay in service is greatly felt by patients. Many patients expressed disappointment and frustration because they felt they did not receive the proper attention from medical personnel. For patients who are sick or anxious, delays in service can increase psychological stress and worsen their health condition. Long waiting times

also reduce the level of patient trust in the services provided by the Health Center. Therefore, the limited number of medical personnel is not only an operational constraint, but also has a direct impact on the quality of service, patient safety, and the relationship between patients and health service providers as a whole.

2. Limited Facilities and Resources

The medical facilities available at the Old State Health Center are still very limited and have not been able to match the completeness of the facilities owned by hospitals. These limitations include both aspects of physical facilities and medical equipment that are important in supporting the health service process. One of the most striking obstacles is the condition of the treatment room and the adequacy of other supporting facilities. Overall, the Old State Health Center has five inpatient rooms. However, of these, only four rooms are suitable for use. The remaining room is in an unusable condition because it requires renovation or physical repairs in order to be able to function again. Each room is equipped with three beds, so the total number of beds available at the health center is currently 12 units. However, the condition of several beds is not entirely good and some are already showing signs of wear and tear, so they are not fully able to provide comfort for patients.

The same condition also occurs in other supporting facilities, such as bathrooms in the inpatient environment. Several patients complained that the bathrooms were poorly maintained, unclean, and in some cases damaged. This situation adds to the discomfort of patients during their treatment at the health center. In addition, the available medical equipment is very limited. For example, there are only two oxygen cylinders available to serve all patients, while monitors and other supporting equipment often do not function optimally or have to wait for repairs. The limited availability of other medical devices is also an obstacle. Many examination tools are not yet available at the health center, so for certain medical cases, patients must be referred to the general hospital in Rantau Prapat. This referral process is not without obstacles, because the distance from the Old State Health Center to the general hospital takes about three hours, which of course increases the risk for patients with emergency conditions.

The impact of these limited facilities is very real for patients. They not only experience decreased comfort during hospitalization, but also face delays in the treatment and care process. When medical devices are not available or not functioning properly, the treatment process is hampered, and in some cases, the patient's condition can worsen due to delays in adequate medical treatment. Therefore, improving facilities and completeness of medical devices is an urgent need to support the quality of service at the Negeri Lama Health Center.

CONCLUSION

Responsiveness of services to inpatients at the Old State Health Center

- a. Response to Customers/Applicants, where responsiveness, health center officers have not been fully able to provide responsive services to patient needs and complaints. Many patients said that they felt ignored, experienced delays in getting information, and found officers who were less friendly and uncommunicative. This shows that although SOPs have been implemented, their implementation has not been optimal, especially in forming a responsive and empathetic service attitude towards the community.
- b. In terms of service speed, it was found that the service process was still slow, even when the number of patients was not dense. Long waiting times were caused by a queue system that was not yet technology-based, limited number of officers, and the work behavior of officers who were less disciplined and seemed not to be in a hurry in serving patients. This situation has a direct impact on the level of patient satisfaction and reflects low efficiency in service time management.
- c. In terms of punctuality, services often do not comply with the established schedule. Many patients who arrive on time actually have to wait longer, due to uncoordinated service flows. Patient triage has not been carried out consistently by all staff, so patient care is not based on the level of medical urgency. Lack of understanding and training on queue management and service scheduling are the main causes of this untimeliness.

1) Obstacles That Occur in the Service Process for Inpatients

- a. Limited Medical Personnel, Inpatient services at the Old State Health Center experience major obstacles in the form of limited medical personnel, especially general practitioners and nurses. This causes long waiting times, patient congestion, and decreased service quality. The high workload also has an impact on medical personnel fatigue and hampered other health programs. To overcome this problem, the health center plans to optimize work schedules, increase interprofessional collaboration, propose additional medical personnel, and conduct training and improve work facilities.
- b. Limited facilities and infrastructure, the Old State Health Center still faces limited medical facilities and infrastructure, such as a lack of diagnostic equipment (USG, EKG, nebulizer), inadequate inpatient rooms,

and narrow service rooms and waiting rooms. This has an impact on the slow service process, especially when there are many patients, and reduces the comfort and effectiveness of treatment. Medical personnel have conveyed these needs to the authorities, but the procurement process is slow. To overcome this problem, the health center plans to increase equipment procurement, facility maintenance, and establish cooperation with the government through advocacy.

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