ANALYSIS OF SERVICE QUALITY USING POTENTIAL "GAIN IN VALUE" METHOD IN OUTPATIENT POLYCLINIC OF X HOSPITAL IN BALI

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Abstract

Private hospitals continue strive to improve patient satisfaction. In measuring the level of satisfaction of hospital patients, currently the IPA (Importance-Performance Analysis) method can be used. Even though the IPA score is high, in reality there are still complaints from people who are undergoing outpatient care. This is because the hospital has not prioritized what services need to be repaired and improved. The purpose of this research is to find out which attributes need to be prioritized in improving hospital services. This study uses Potential Gain in Customer Value (PGCV) method. Based on the research results it is known that the service needs improvement is the indicator "Patient administration department is responsive to patient problems", while the last priority is the indicator "Availability of information about service procedures". Based on the findings it can be recommended to conduct routine training for patient administration staff on the importance of effective communication and empathy for patient concerns. In addition, place emphasis on interpersonal skills, complaint handling, and problem resolution and ensure that administrative staff have open channels of communication to receive and act on such reports quickly.

Keywords: Service Quality, Patient Satisfaction, Potential Gain in Customer Value (PGCV), Outpatient Polyclinics, Private Hospitals

Introduction

Currently, the rapid competition in the service industry requires service providers to meet customer expectations through improving service quality. By improving service quality, customer satisfaction will be fulfilled. In simple terms, satisfaction can be interpreted as a person's perception of a certain item or service in accordance with their expectations.

In providing services to customers, currently more and more hospitals are providing preventive and promote health services, such as routine checkups, pap smears, and fitness centers. The hospital must have the view that it is not expecting someone to health decrease, but preparing to face it and improve health (Trisnantoro, 2005). Healthcare is already a profitable industry and attracts investors to invest. The rapid growth of hospitals has led to increasingly fierce competition and customers have increasingly selective choices, so that it becomes a challenge for hospitals which will affect the sustainability of the organization. Challenges like this have caused health service providers, especially hospitals, both government and private, to be faced with two choices, namely entering the competition arena by making changes and improvements or leaving the competition arena without being burdened with changes and improvements. Therefore, an appropriate alternative competitive strategy is needed so that the hospital is able to compete with other competitors. Such business environment conditions require hospitals to improve the quality and quality of service in order to remain successful, both at the operational, managerial and strategic levels.

With the increasing number of middle-class hospitals in Indonesia, the demand for health services has become even higher, which has encouraged the growth of private hospitals and made the healthcare sector a profit-oriented industry and must compete fiercely. Other data shows that there are still many Indonesian people, especially the middle and upper class who are not satisfied with the quality and services provided by hospitals. This can be seen from increasing number year by year of patients seeking treatment abroad, especially Singapore and Malaysia. Service quality is inseparable from the performance of health workers, medical equipment facilities and infrastructure and supporting workers as well as work systems that must be managed effectively and efficiently to win the competition. Since entry to the era of ASEAN Economic Community which was began in 2015, the competition is increasingly open. This is a challenge for hospital managers, especially private hospitals in Indonesia.

Private hospitals provide services to patients in particular and the public in general. Private hospitals provide professional, quality and safety services. Along with the development of hospitals and changes in hospital regulations that must be followed by every hospital, X Private Hospital in Bali has won Accreditation with the Plenary predicate. This shows that the hospital has met the standardization of the services that have been provided.

Even though the X Private Hospital has met service standards, the fact is that X Hospital is still not optimal in providing services, this was revealed from a Google review with a one star rating result.

Tabel 1 Google Review Results for Private Hospitals

Account	Comment	Star rating
<u>Callizta</u> <u>Santoz</u>	The girl in the pharmacy is VERY RUDE and IMPOLITE.	One
Cok Devi	too slow	One
Elizabeth Christine	The service was very slow, I was screaming from the room to call the medical staff, the handling was slow. Even earlier in the igd I had lost consciousness and even wanted to go home. The next day he went to the icu as if he was released from responsibility and was transferred to the sanglah. In an unconscious state. Finally arrived Sanglah directly in the ICU. Really disappointed even though I paid for the hospital, it wasn't free	One

Source: Google review, 2023

Based on the comments given by consumers at Private Hospital X in the table above, it can be seen that not all patients and their families are satisfied with the services provided by the hospital. Based on the problems found, it shows that the hospital is not yet optimal in improving service quality to achieve high patient satisfaction.

The purpose of this study is to find out what attributes need to be prioritized in improving hospital services. After that, provide recommendations for improvements from the research results to the management of Private Hospital X.

There are five dimensions used in determining the quality of service according to Parasuraman (2018) such as:

- a) Reliability: related to the hospital's ability to provide accurate services start from the first time without making any mistakes and delivering services in accordance with the agreed time.
- b) Responsiveness: related to the willingness and ability of employees to help customers and respond to their requests, as well as inform when services will be provided and then provide services quickly.
- c) Assurance: related to the behavior of employees so that they are able to foster customer trust in the company and the company can create a sense of security for its customers.
- d) Empathy: related to the hospital's efforts to understand the problems of its customers and act in the interests of customers, as well as giving personal attention to customers and having comfortable operating hours.
- e) Physical Evidence (tangibles): regarding the attractiveness of the physical facilities, equipment, and materials used by the hospital, as well as the appearance of employees.

Methodology

This research is a descriptive study that explains and evaluates service quality using the Potential Gain in Customer Value method as a decision-making material for those in authority. This research was conducted at X private hospital in Bali. The number of respondents used was 30 people using random sampling method. Collecting data using a questionnaire using a Likert scale.

Validity Test

According to Sugiyono (2019), an instrument is said to be valid if it is able to measure what is desired. Instrument validity was determined by correlating the score obtained for each question or statement with the total score of all questions or statements representing a variable dimension. If the score of each question item is significantly correlated with the total score at a certain alpha level, it mean that the measuring device is valid. The validity obtained in the

above manner is known as content validity with processing techniques using item analysis. Next, r_s value compared to value rtable (α,n) . If the value of rs > rt able (0,3), then the statement items are considered valid.

Reliability Analysis

According to Sugiyono (2019), reliability refers to an understanding that an instrument can be trusted enough to be used as a data collection tool because the instrument is good. In testing the Cronbach's Alpha technique was used. According to Sugiyono (2019) high and low reliability is indicated by a number called the reliability coefficient. The minimum coefficient of a measuring instrument is 0.60, because it can already show a fairly strong relationship.

Potential Gain Customer Value (PGCV)

The PGCV method can be used to determine service quality attributes that need to be improved and prioritized in order to increase customer satisfaction. The priority in improving the quality of service on the attributes that are measured is seen based on the magnitude of the PGCV index value. The attribute with the largest PGCV index value is the first priority in repair and so on until the attribute with the smallest PGCV index value. According to Hom (1997), the steps to calculate the magnitude of the PGCV index are as follows:

Calculate the value of ACV (Achieved Customer Value) with the formula:

 $ACV = I \times P$

with I: The average score of expectations or expectations

P: average score in reality or fact.

Calculating the value of UDCV (Ultimately Desired Customer Value) with the formula:

 $UDCV = I \times P_{max}$

with I: The average score of expectations or expectations

 $P_{max} = maximum score (4)$

The Result

The research variable used in the questionnaire to determine the level of service quality gap in private hospital X in Bali, is a hospital service variable, which uses 5 dimensions of measurement of the hospital service quality variable, namely as follows:

Tabel 2 Research Attributes

The Fact		t	D'		Expectation			
SS	S	TS	STS	Dimension of Services Quality	SP	P	TP	STP
				Toilets in the hospital are clean (X1)				
				The appearance of doctors, nurses, midwives and staff at Private				
	Hospital X is neat and clean (X2)							
				Reliability Dimension				
				Treatment at X Private Hospital does not have to wait long (X3)				
				Doctors, nurses, midwives and pharmacists are always there				
	according to the service schedule (X4)							
				Responsive Dimension				
				Nurses, midwives and other medical personnel at Private Hospital				
	X are fast and responsive in serving patients (X5)							
The patient administration sect				The patient administration section is responsive to patient problems				
				(X6)				

	The Fact Dimension of Services Quality		Expectation					
SS	S	TS	STS	Dimension of Services Quality	SP	P	TP	STP
				The treating doctor has knowledge that makes it easier for the				
				patient to understand (X7)				
				Nurses, midwives and other medical personnel are skilled at				
				carrying out their duties (X8)				
				Empathy Dimension				
				Availability of information about service procedures (X9)				
				Willingness of medical staff to patiently listen to patient complaints				
	(X10)							

Instrument Validity Test

Based on the results of validity testing on all indicators shown in the following table.

Tabel 3 Validity Test

Item	Correlation coefficient	Information
X1	0,597	Valid
X2	0,810	Valid
X3	0,552	Valid
X4	0,759	Valid
X5	0,438	Valid
X6	0,607	Valid
X7	0,630	Valid
X8	0,597	Valid
X9	0,925	Valid
X10	0,659	Valid

Based on the lowest to highest correlation value (0.438 to 0.925) all items are worth greater than 0.3. Thus, all statement items used are worthy of being used as research instruments.

Instrument Reliability Test

Based on the results of reliability testing on all indicators, the Cronbach's Alpha value was 0.848. Because the Cronbach Alpha value is greater than 0.6, it can be stated that the research instrument is reliable.

Potential Gain in Customer Value (PGCV)

The following is the result of calculating the gap value or service quality score at X Private Hospital.

Tabel 4
Gap Score Facts and Expectations

Dimensions	Indicator		Score	Gap
		Fact	Expectation	
Tangible	X1	3,27	3,80	-0,53
	X2	3,07	3,87	-0,80
Reliability	X3	2,60	3,80	-1,20
	X4	2,77	3,83	-1,07
Responsive	X5	2,67	3,73	-1,07

	X6	2,53	3,83	-1,30
Assurance	X7	3,03	3,80	-0,77
	X8	3,03	3,97	-0,93
	X9	3,33	3,93	-0,60
Empathy	X10	3,30	3,83	-0,53

Indicators that have a negative gap mean that the quality of service perceived by outpatients at Private Hospital X is not appropriate or worse than expected by outpatients. To improve these conditions an analysis was carried out using the Potential Gain in Customer Value (PGCV) whose results were used as the final result to determine priority service improvements that should be carried out by the hospital to increase outpatient satisfaction at Private Hospital X. The results of integrating the PGCV method as following.

Tabel 5 PGCV Index

Indicators	ACV	UDCV	PGCV Index	Improvement Priority Ranking
X1	12,4	15,2	2,8	8
X2	11,9	15,5	3,6	7
X3	9,9	15,2	5,3	2
X4	10,6	15,3	4,7	4
X5	10,0	14,9	5,0	3
X6	9,7	15,3	5,6	1
X7	11,5	15,2	3,7	6
X8	12,0	15,9	3,8	5
X9	13,1	15,7	2,6	10
X10	12,7	15,3	2,7	9

Based on the PGCV index value, it can be determined the priority scale of service indicators that must be improved and improved. The indicator with the largest PGCV index value is X6, namely "Patient administration is responsive to patient problems" with a PGCV index value of 5.6. So that the X6 indicator is first ranked as a top priority for improving the service quality of X Private Hospital While the indicator with the smallest PGCV index value is X9, namely "Availability of information about service procedures".

Discussion

The PGCV index is used to determine the priority scale for service indicators that must be improved and improved. Based on the PGCV index analysis, it is known that the first priority of Private Hospital X management if they want to improve the quality of their services is the following indicators:

- "Patient administration is responsive to patient problems"
 The services provided to patients should be given top priority, as should the results obtained in this study. When patient administration provides the best service, patient loyalty will increase. This can trigger positive "word of mouth" from patients. In addition, place emphasis on interpersonal skills, complaint handling, and problem resolution and ensure that administrative staff have open channels of communication to receive and act on reports quickly.
- While the last priority is the indicator "Availability of information about service procedures".
 Based on the results of the analysis, it is known that there is a lack of information about service procedures, so improvements are needed and there is a need for improved services to patients.

Research conducted by Alifah, et.al (2020), it is known that from the PGCV index analysis, it is known that the first priority of hospital management if they want to improve the quality of their services is the indicator of "ease of access to buy necessities for patients", while the last priority is the indicator of "hospital environmental safety".

Then another study conducted by Wicaksono et.al (2014), it was found that services that need to be improved based on the results of weighted PGCV calculations include cleanliness and beauty of hospitals, complete medical equipment and support, sufficient doctor consultation time, available medicines, providing complete information about diseases, and others.

Based on research conducted by Jumariah, et.al (2021), it is known that the results of the PGCV index can be known in the order of attributes that are priorities for improvement, namely:

- a. Minimum standard availability of equipment in the living room (e.g. nursing call, nebulizer)
- b. The hospital has complete medical equipment
- c. Medicines needed by patients are fully available
- d. Clean bathroom, enough water and equipped with safety
- e. Medical personnel are always there and ready when needed
- f. Fast and precise examination, treatment, and treatment services
- g. Medical personnel provide sufficient service time to patients
- h. Availability of specialists in hospitals
- i. Medical personnel respond quickly and appropriately to patient complaints
- j. Apologies from medical personnel if something unpleasant happens to the patient.

Conclusion

Based on the analysis of the PGCV index, it is known that the first priority for the management of Private Hospital X if it wants to improve the quality of its services is the indicator "Patient administration is responsive to patient problems", while the last priority is the indicator "Availability of information about service procedures". In addition, place emphasis on interpersonal skills, complaint handling, and problem resolution and ensure that administrative staff have open channels of communication to receive and act on reports quickly.

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Appendix

Correlations

Correlations

X1	Pearson Correlation	1	,431*	,279	,312	,209	'330	,184	.111	,479**	,520**	,597**
	Sig. (2-tailed)	X1	x2 ⁰¹⁷	X3 ¹³⁶	X42093	X5.268	XR ⁰⁷⁵	X7,331	X8 ⁵⁶⁰	X9.007	X117003	x,001
	И	30	30	30	30	30	30	30	30	30	30	30
Х2	Pearson Correlation	,431*	1	,474**	,575**	,392*	,371*	,431*	,585**	'693**	,418*	,810**
	Sig. (2-tailed)	,017		'008	,001	,032	,043	,017	,001	'000	,021	,000
	И	30	30	30	30	30	30	30	30	30	30	30
ХЗ	Pearson Correlation	,279	,474**	1	,355	-'088	,553**	,209	,175	,491**	,142	,552**
	Sig. (2-tailed)	,136	'008		,054	,717	,002	,267	,356	900'	,454	,002
	И	30	30	30	30	30	30	30	30	30	30	30
Х4	Pearson Correlation	,312	,575**	,355	1	,149	,538**	,312	,420*	,678**	,647**	,759**
	Sig. (2-tailed)	'083	,001	,054		,433	,002	'083	,021	'000	'000	'000
	И	30	30	30	30	30	30	30	30	30	30	30
X5	Pearson Correlation	,209	,392*	-'0ea	,149	1	-,131	,614**	,273	,343	'080	,438*
	Sig. (2-tailed)	,268	,032	.717	,433		,489	'000	,144	.064	,674	,015
	И	30	30	30	30	30	30	30	30	30	30	30
ΧB	Pearson Correlation	'330	,371*	,553**	,538**	-,131	1	,128	,318	,528**	,332	,607**
	Sig. (2-tailed)	,075	,043	,002	,002	,489		,500	,087	'003	,073	'000
	И	30	30	30	30	30	30	30	30	30	30	30
X7	Pearson Correlation	,184	,431*	,209	,312	,614**	,128	1	,281	'e38 _{**}	,312	,630**
	Sig. (2-tailed)	,331	,017	,267	'083	'000	,500		,132	'000	,093	'000
	И	30	30	30	30	30	30	30	30	30	30	30
X8	Pearson Correlation	,111	,585**	,175	,420*	,273	,318	,281	- 1	,667**	,246	,597**
	Sig. (2-tailed)	,560	,001	,356	,021	,144	,087	,132		'000	,190	'000
	И	30	30	30	30	30	30	30	30	30	30	30
Xθ	Pearson Correlation	,479**	'693**	,491**	,678**	,343	,528**	,639**	,667**	- 1	,597**	,925**
	Sig. (2-tailed)	,007	'000	,006	'000	,064	,003	,000	'000		,001	,000
	И	30	30	30	30	30	30	30	30	30	30	30
X10	Pearson Correlation	,520**	,418*	,142	,647**	'080	,332	,312	,246	,597**	1	,859**
	Sig. (2-tailed)	,003	,021	,454	'000	,674	,073	,093	,190	,001		,000
	И	30	30	30	30	30	30	30	30	30	30	30
Х	Pearson Correlation	,597**	,810**	,552**	,759**	,438*	,607**	'830**	,597**	,925**	'859**	1
	Sig. (2-tailed)	,001	'000	,002	'000	,015	,000	,000	'000	'000	'000	
	И	30	30	30	30	30	30	30	30	30	30	30

Correlation is significant at the 0.01 level (2-tailed). ** Correlation is significant at the 0.05 level (2-tailed).

Reliability

variables in the procedure. Listwise deletion based on all

a.			
	Total	30	100,0
	Excludeda	N 0	_% ,0
Cases	Valid	30	100,0

Case Processing Summary

Alpha	N of Items
Cronbach \$48	10

Reliability Statistics