

ABSTRAK

ANALISIS KUALITAS PELAYANAN KELUARGA BERENCANA (KB) PADA AKSEPTOR KB HORMONAL DI PUSKESMAS PURWOKERTO BARAT KABUPATEN BANYUMAS

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Latar Belakang: Rendahnya jumlah peserta KB aktif di Puskesmas dapat dipengaruhi oleh kualitas pelayanan yang diberikan. Kualitas pelayanan berpengaruh positif dan signifikan terhadap kepuasan dan loyalitas pasien. Kualitas pelayanan akan meningkatkan peserta KB baru dan memantapkan pemakaian kontrasepsi. Penelitian ini bertujuan untuk menganalisis kualitas pelayanan KB pada akseptor KB hormonal di Puskesmas Purwokerto Barat Kabupaten Banyumas.

Metode: Penelitian ini menggunakan metode penelitian deskriptif kualitatif dengan pendekatan fenomenologi. Informan utama dalam penelitian ini adalah 7 akseptor KB hormonal di Puskesmas. Informan pendukung adalah Kepala Puskesmas dan 2 petugas KB di Puskesmas. Data penelitian didapat melalui wawancara mendalam, telaah dokumen dan observasi. Teknik analisis data yang digunakan adalah *content analysis* dengan pendekatan *thematic network*.

Hasil Penelitian: Dimensi reliabilitas diketahui jenis KB menentukan lama pelayanan, waktu tunggu lebih dari satu jam dan dibutuhkan keterbukaan pasien. Daya tanggap diketahui membutuhkan peran konsultasi dan pelayanan tidak terjadwal didasarkan pada kesiapan alat serta tingkat kegawatan. Jaminan diketahui petugas memiliki kompetensi yang memadai dan pelayanan sesuai SOP namun pasien merasa ada petugas yang kurang ramah. Empati diketahui petugas mampu menempatkan diri pada pasien namun informasi yang diberikan petugas masih kurang dapat dipahami. Bukti fisik atau bukti langsung diketahui penampilan petugas sesuai protokol kesehatan dan fasilitas yang tersedia mencukupi serta layak pakai.

Kesimpulan: Kualitas pelayanan dilihat dari dimensi reliabilitas (waktu tunggu, jenis KB dan keterbukaan pasien), dimensi daya tanggap (peran konsultasi dan kesiapan melayani kegawatan pasien), dimensi jaminan (kompetensi, keamanan operasi dan keramahan terhadap pasien), dimensi empati (kemampuan petugas menempatkan diri dan memahami pasien), dan dimensi bukti fisik atau bukti langsung (penampilan petugas dan kelengkapan fasilitas).

Kata kunci: Keluarga Berencana, Kualitas, Pelayanan

ABSTRACT

ANALYSIS OF FAMILY PLANNING SERVICES QUALITY IN HORMONAL FAMILY PLANNING ACCEPTORS IN WEST PURWOKERTO PUBLIC HEALTH CENTER BANYUMAS REGENCY

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Background: The low number of active family planning participants at the public health center can be affected by the quality of services provided. Service quality has a positive and significant effect on patient satisfaction and loyalty. Quality of service will increase new family planning participants and strengthen contraceptive use. This study aims to analyze the quality of family planning services for hormonal family planning acceptors at West Purwokerto Public Health Center Banyumas Regency.

Methods: This study used a qualitative descriptive research method with a phenomenological approach. The main informants in this study were 7 acceptors of hormonal family planning at West Purwokerto Public Health Center. Supporting informants were the Head of the Public Health Center and 2 family planning officers at the Public Health Center. The research data were obtained through in-depth interviews, document review and observation. The data analysis technique used is content analysis with a thematic network approach.

Results: The dimension of reliability is known that the type of family planning method determines the length of service, the waiting time is more than one hour and requires patient openness. Responsiveness is known to require a consulting role and unscheduled services based on equipment readiness and level of emergency. Assurance is known that the staff have adequate competence and the service is in accordance with the SOP, but patients feel that there are staffs who are less friendly. Empathy is known that staffs are able to position themselves, but the information provided by staffs is still not understandable. Tangible is known that the appearance of the staff is in accordance with the health protocol and the available facilities are sufficient and suitable for use.

Conclusion: Service quality is seen from the reliability dimensions (waiting time, type of family planning method and patient openness), responsiveness dimensions (the role of consultation and readiness to serve the patient's emergency), assurance dimensions (competence, operation safety and friendliness to patients), empathy dimensions (the ability of officers to position themselves and understanding the patient), and the tangible dimensions (appearance of staff and completeness of facilities).

Keywords: Family Planning, Quality, Services