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Hospital Service Quality from Patients Perspective:

A Case of Indonesia

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ABSTRACT

This study aims to identify and analyse strategic service quality as perception-minus-expectation from patient perspective using SERVQUAL-based Handayani et al.'s framework. The result from 297 respondents shows that the criteria gaps are given as follows in descending order from the biggest gap: (1) responsiveness, (2) assurance, (3) professionalism, (4) reliability, (5) empathy and (6) tangible. Apparently, the gap for each criterion transpires to be significantly different which straightforwardly indicates the quality of the service delivered by hospitals for each criterion is still below respondents' expectations. Recommendation towards hospitals is proposed from technological point of view in forms of IT support in order to significantly improve the process as the dimension of the responsiveness criterion. Nonetheless, suggestion towards the Ministry of Health as the policy maker is also addressed that urges the establishment of policy and its implementation concerning IT support for accelerating hospitals automation.

KEYWORDS

Expectation, Healthcare, Hospital Service Quality, Patient, Perception, Service Quality, SERVQUAL

INTRODUCTION

As a developing country with a projected population of 255 million in 2015 according to the Statistics Central Bureau[1], the Indonesian healthcare industry must also grow to serve its population. In order to provide healthcare services, the Indonesian Ministry of Health (Kemenkes) employs a Health Referral System which is authorized by the Health Minister Regulation No. 001 Year 2012 regarding Individual Healthcare Referral System (Hukor, 2014). In the Referral System, patients' health service is provided by three tiers; tier one is provided by primary healthcare facilities, e.g., Puskesmas, clinics or Pratama hospitals, that provide basic healthcare services; tier two is provided by hospitals both generals and specialized hospitals, that provide specialist healthcare services; and tier three is provided by hospitals that provide sub specialist healthcare services. Thus, it is evident that hospitals hold a vital role in providing healthcare services to the people.

According to Data Rumah Sakit Online[2], there are 2,333 hospitals with a total of 283,515 inpatient beds available. Although the overall ratio beds to population is still around the WHO standard (1:1000),

there many areas in which the ratio is below standard[345]. This inpatient bed shortage will surely affect the healthcare service quality since hospitals have to reject the patients due to bed shortage. Moreover, many Indonesian hospitals in tier two also state that they endure health personnel shortages including general and specialist doctors, nurses and administrative staff[678910]. Furthermore, besides those two there are some other factors that could hinder healthcare service quality, e.g., complex/time-consuming administration process in hospital, medicine or medical equipment unavailability, etc.[11].

On the 1st January 2014, the Indonesian Government launched the National Health Coverage (JKN)[12], authorized by Law No. 40 Year 2004 (SJSN, 2004), through BPJS which is established by Law No. 24 Year 2011 (BPJS, 2011), as a concrete effort to guarantee that the healthcare of all Indonesian citizens are covered. Consequently, this program will increase the number of patients in the hospitals. As hospitals in general are not well-prepared to anticipate the increase, hospitals capacity (facility and healthcare personnel) is unable to meet the demand for healthcare services[13]. Therefore, this event will further exacerbate the earlier situation in which services quality is already hindered by the lack of bed, health personnel, etc.

A poor health service quality is certainly undesirable, especially since the subject is a human being. As human beings and the prime consumers of health services, patients undoubtedly have their own expectations and perceptions of the health services they experience. Understanding patients' perception is deemed necessary because patient satisfaction is essential for quality assurance in medical services and hospitals (Laslet, 1994 in Sohail, 2003). Moreover, O'Connor et. al., (as cited in Shabila et. al., 2014) noted that "patients' perspective is increasingly viewed as a meaningful and important indicator of health service quality that should be taken into account as part of a comprehensive assessment of quality health care". Thus, understanding patients' expectation and perceptions and analyzing the gaps can further give direction for hospitals, viz. the management, in order to improve their services quality from the patients' perspectives, e.g., by evaluating hospitals' current services against the gaps.

A widely used scale for measuring service quality is proposed by Parasuraman, Zeithaml, and Berry (Pasuraman et al., 1985) namely SERVQUAL. SERVQUAL has 5 dimensions, viz., Tangible, Reliability, Assurance, Responsiveness, and Empathy. A previous study by Handayani et al. (2014a) adapts SERVQUAL and formulates a framework to identify and analyze strategic hospital service quality from the perspective of hospital management, government policy maker and academicians in Indonesia. It follows that in Handayani et al. (2014b) patient's expectation was being considered. However, Handayani's study did not address a more detailed and intensive review on the service quality from patient perspective in terms of perception-minus-expectation that is required in order to give directions for hospitals as previously mentioned especially in the case of a developing country. Therefore, this study's goal is to identify and analyse strategic service quality as perception-minus-expectation from patient perspective. Further, this study will adopt SERVQUAL dimensions of Handayani et al.'s framework (Handayani et al., 2014a; 2014b).

This paper is organized as follows: section 2 explains the literature review, while the research conceptual model is explained in section 3. The research methodology and result is discussed in section 4 and 5. Then, the discussion and implication of this research are discussed in section 6. The final sections discuss the conclusions and future works for limitations of this research.

LITERATURE REVIEW

Service Quality

SERVQUAL (Parasuraman et al., 1988) provides dimensions for measuring and managing service quality namely reliability, assurance, tangibles, empathy, and responsiveness as defined in Table 1.

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