

# Digitization of Health Services at Kakaskasen Health Center, North Tomohon District, Tomohon City

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**Abstract.** This study aims to describe the digitization of health services at the Kakaskasen Health Center, North Tomohon District, Tomohon City. This study uses a descriptive qualitative approach, the number of informants is 5 people with data collection techniques namely observation, interviews, and documentation, with data analysis techniques through data reduction, data presentation, and conclusion. The results showed that the Digitization of Health Services at the Kakaskasen Health Center had not yet run well because it was found that according to the research data, the community did not fully understand the online queuing procedure, how to access it, the completion time was often delayed by up to one hour and the online queue only accelerated the taking of queue numbers but for the time of service there are still frequent delays, service products are not as expected with those that have been set, facilities and facilities are not 100% complete and officers are not good or friendly to the community.

**Keywords:** Digitalization, Service, Kakaskasen Health Center.

## 1 Introduction

Fast, easy, affordable, and quality service is an obligation that must be carried out by the government to the community. To realize this, it is necessary to transform public services towards digital to accelerate and facilitate services. Digitization of public services is a necessity to increase transparency and improve the quality of services to the community. Instruction of the President of the Republic of Indonesia Number 3 of 2003 concerning National Policies and Strategies for the Development of E-Government, is a reference in the Digitization of Health Services. The development of e-government is an effort to develop government administration based on (using) electronics to improve the quality of public services effectively and efficiently. Through the development of e-government, management systems and work processes are arranged in the government environment by optimizing the use of information technology [1].

Public services are activities in the context of meeting the needs of the community which includes goods, services, and administrative services provided by public service providers. Public service providers are any state organizing institutions, corporations, or independent institutions established by law for public service activities. Law Number 25 of 2009 concerning Public Services is a law that regulates the principles of good governance, which is the effectiveness of the functions of the government itself [2]. Public services carried out by governments or effective corporations can

strengthen democracy and human rights, promote economic prosperity, and social cohesion, reduce poverty, increase environmental protection, be wise in the use of natural resources, and deepen trust in government and public administration.

The state is obliged to serve every citizen and resident to fulfill basic rights and needs within the framework of public services which is the mandate of the 1945 Constitution of the Republic of Indonesia, building public trust in public services that will be carried out by public service providers is a series of activities that must be carried out. carried out in line with the expectations and demands of all citizens and residents regarding improving public services [3]. Health is a basic right for every human being, health is also one of the things that must be considered in achieving a prosperous life, with a high level of good health, the hope for community welfare will also increase. So by Law Number 23 of 2014 concerning Regional Government in Chapter IV article 11 paragraph (2) it is stipulated that the areas of government that must be carried out by Regency and City Regions are education, health, public works, and spatial planning, people's housing and regional areas. settlements, peace, public order, and community and social protection [4].

In the Act, it is stated that health is one of the obligations that must be carried out by the government properly. Health needs are one of the major responsibilities of the government as a form of public service. The purpose of health development as a form of

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national commitment can be seen in Article 3 of Law No. 36 of 2009 concerning health which reads: Health development aims to increase awareness, willingness, and ability to live healthy for everyone to realize the highest level of public health. Most importantly, as an investment for the development of socially and economically productive human resources.

It is explained in Law Number 36 of 2009 that health is a healthy state, both physically, mentally, spiritually, and socially that allows everyone to live socially and economically productive. In article 5, paragraphs 1 and 2. Paragraph 1; is that everyone has the same rights in obtaining access to resources in the health sector. Paragraph 2; Everyone has the right to obtain safe, quality, and affordable health services. As a form of a government effort to provide health to the entire community, in each sub-district, a government agency was built as a unit for providing health services to every community, namely the Community Health Center which is usually abbreviated as Puskesmas, which is one form of health facilities as the spearhead of health services in Indonesia and is a strategic provider of health services to the community to accelerate the improvement of public health [5].

Regulation of the Minister of Health of the Republic of Indonesia Number 43 of 2019 concerning Public Health Centers (Puskesmas) is a health service facility that organizes public health efforts and first-level individual health efforts, by prioritizing promotive (health improvement) and preventive (prevention efforts) efforts, to achieve the highest degree of public health in its working area. In carrying out its duties and functions, it has the function to provide comprehensive, sustainable, and quality basic health services, (PERMENKES Number 43 of 2019) the puskesmas functions as a:

- The center for driving development with a health perspective.
- Family and community empowerment center.
- First-tier health service center.

One form of health service organized by the health center is promotive services (health improvement) which is the first level of prevention, which is defined by public health experts in Indonesia as health improvement. This is because the meaning contained in the term promotion of health is to improve a person's health, namely through balanced nutrition intake, regular exercise, and so on so that the person remains healthy and does not get sick. In the Regulation of the Minister of Health of the Republic of Indonesia Number 43 of 2019 concerning public health centers (Puskesmas) it is necessary to have good and quality health services by health providers. Therefore, puskesmas are required to provide good and quality services to satisfy their patients [6].

According to Widodo, in the realization of what is a concern and is carried out by public servants so that the quality of service becomes good and quality, then in providing public services it should be: 1) Easy to manage for those who are interested, 2) Get reasonable service, 3) Get equal service without favoritism, and 4) receive honest and transparent treatment [7]. Explicitly reviewed, Sianpar explained that "public services are all

forms of public sector services carried out by government officials in the form of goods and services, which are by the needs of the community and the provisions of applicable laws." [8].

Improve public services, will be difficult to implement without the support of regulations which are the legal basis. One form of legal support which is the basis and support for public services is the decision of the State Minister for Administrative Reform Number 81 of 1993, in which public services must contain the main elements; (1) The rights and obligations of the providers and recipients of public services must be clear and known for certain by each party, (2) The regulation of each form of public service must be adjusted to the conditions of the community's needs and ability to pay, based on the provisions of the applicable laws and regulations. apply while adhering to efficiency and effectiveness. (3) The quality of the process and results of public services must be strived to provide security, convenience, smoothness, and legal certainty that can be accounted for, (4) If the public services provided by the government agency are forced to be expensive, then the relevant government agency is obliged to provide an opportunity for the community to participate in organizing it by applicable laws [9].

Tomohon Mayor Regulation Number 31 of 2019 concerning the Implementation of Tomohon Smart City. That smart city is a smart city concept that has integrated modern information and communication technology into daily governance to increase efficiency, provide accurate information, improve public services, and improve people's welfare. In Tomohon Mayor Regulation Number 31 of 2019 in Chapter III Article 5 point (a), it says that smart governance is an improvement in governance that can change traditional patterns in the bureaucracy to produce faster, more effective, efficient, communicative and always-on business processes. make improvements. Referring to the Tomohon Mayor Regulation Number 31 of 2019, the Kakaskasen Health Center, North Tomohon District, Tomohon City has made innovations in the context of digitizing services at the Kakaskasen Health Center with an online queuing system to increase service acceleration to improve health. The digitization of services carried out by the Kakaskasen Health Center, North Tomohon District, Tomohon City can be seen from the online queuing program that is applied to the people of Tomohon City. To help and reduce the occurrence of queue swelling that occurred at the Kakaskasen Health Center [10].

However, at the time of initial observation, it was found that the online queuing program from digitizing health services at the Kakaskasen Health Center had not fully run according to its objectives. This is because the process of digitizing online queuing services is closely related to the use of electronic goods (mobile phones and laptops) to access the online queue, but the majority of people in the service area of the Kakaskasen Health Center do not fully know the ways and steps to operate the online queuing system. The availability of facilities and infrastructure does determine the continuity of using the online queuing system, but it is found that not all people have electronic devices that can operate the

online queuing system, even the inadequate network limitations are the main obstacle to operating the online queuing system. From all walks of life, people who have not been able to access this online queuing system, even those who understand better to operate the online queuing system are the millennial generation, while the majority who come to visit the Kakaskasen Health Center are elderly people (elderly).

By looking at the existing problems, the steps that must be taken in improving the quality of services using online queue digitization must be socialization from the Kakaskasen Health Center about the use of service digitization and the government must intervene in improving the quality of the network to improve the quality-of-service digitization services at the Kakaskasen Health Center.

Based on this, research on the digitization of health services at the Kakaskasen Health Center, North Tomohon District, Tomohon City needs to be carried out so that the digitization of services can run by the objectives of the service digitization program. So, the researcher raised this issue to be "Digitalization of Health Services at Kakaskasen Health Center, North Tomohon District, Tomohon City".

## 2 Research Methods

The research method used in this research proposal is a qualitative method with a descriptive approach. The qualitative-descriptive approach according to Sugiyono is a research method used to examine the condition of natural objects, as opposed to an experiment, where the researcher is the key instrument, the data collection technique is done by triangulation (combined), the data analysis is inductive, and the results of qualitative research emphasize meaning rather than generalization [11]. It is intended that the data or problems obtained are studied more comprehensively, in-depth, natural, and as they are and without interference from researchers on the facts that appear in the field. The location in this research is the Kakaskasen Health Center, North Tomohon District, Tomohon City. The researcher uses Moelong's understanding that: "the best way to determine the research field is to consider substantive theory; go and see if there is a suitability such as time, cost, effort should also be taken into account in determining the location of the research." [12].

The focus of this research is a limitation in research with the aim that researchers are not trapped by the amount of data in the field when conducting research. The focus of this research, namely the digitization of health services at the Kakaskasen Health Center, North Tomohon District, Tomohon City About Online Queues. According to the results and initial observations, the researchers found that there were several indicators related to the problems that the researchers raised, namely: (1) Service Procedures (2) Completion Time (3) Service Products (4) Facilities and infrastructure (5) Competence of service providers.

In this study, the selection of sources was carried out using a purposive sampling technique combined with incidental sampling. Purposive sampling is a

sampling technique with certain considerations where information or data is collected by selecting the number of informants who are considered to know and can be trusted to be sources of data, as the first step the author chooses key informants, namely the head of the health center, while the other informants are health workers and people who use health services. While incidental sampling is taking respondents as a sample based on chance.

Data were obtained through respondents by conducting direct questions and answers and guided through interview guidelines by the indicators that the authors examined. In addition to secondary data obtained from documents or data at the Kakaskasen Health Center.

In this study, the research instrument or research instrument is the human or the researcher himself by observing, listening, asking, asking, and taking research data. This study uses observations or interviews that are supported by existing indicators [13]. "Research instruments whose quality greatly affects the reliability and reliability of research results, therefore, the persistence of researchers is needed when conducting research." Thus, qualitative research as a human instrument has the function of establishing research, selecting informants as data sources, collecting data, assessing data quality, analyzing data, interpreting data, and making conclusions on findings [14]. In general, the data needed in qualitative research can be collected through observation, interviews, and documentation. The focus of observation is carried out on 3 main components, namely space (space), actor (actors), and activity (activity) [13]. At this stage, the researcher uses 3 stages of data collection, namely: Observation, Interview, and Documentation.

## 3 Results And Discussion

### 3.1 Service Procedure

From the results of research conducted by researchers, it was found that the service procedure at the Kakaskasen Health Center used an Android mobile phone and registration machine, took a number in the JKN application, waited for a call to be checked for approximately 15 minutes, took medicine or a referral. There are still some people or patients who come for treatment who do not know the mechanism of the online queue service procedure because of the lack of public understanding of digitizing, especially elderly patients who must be accompanied by other people to access the online queue as well as the unstable network and uneven android users. Must be assisted by family in online queue registration. So, the researchers argue that the online queuing service procedures at the Kakaskasen Health Center are not yet fully known by the public, even the availability of electronic goods and networks greatly affects the online queuing service procedure system starting from number registration, registration, and event services provided.

Service procedures must be owned by every public service provider institution to ensure that quality

services are provided by public service providers so that the service recipient community feels a high value for these services. Without a clear procedure, the services provided may be far from public expectations. In such circumstances, there will be a high expectation gap [15]. Public service is an activity carried out by a person or group of people based on material factors or a certain system of procedures and methods to fulfill the interests of others by their rights. He also concluded that service is essentially a series of activities because it is a process. As a process, services take place regularly and continuously, covering all people's lives in society [16].

### 3.2 Completion Time

From the results of the research that the researchers did, it was found that the target time for completion of services from the Kakaskasen Health Center was fifteen minutes. People or patients who come for treatment and check their health have to wait for approximately 40 minutes to 50 minutes to be called by employees to be examined, although often in the waiting room only one or two patients' queue. It is found that there are often employees who leave work during working hours and there are employees who play on cellphones during work hours. So, the researcher argues that the Completion Time at the Kakaskasen Health Center has not been by the time that has been set in providing services to patients or the community this is caused by the presence of officers who leave work during work operational hours so that the time that has been set is often not appropriate even though an online queue has been implemented at the Puskesmas Kakaskasen.

The completion time is to determine the period for the completion of public service, starting from the completion of technical and administrative requirements until the completion of a service process. According to Kurniyawan in that public service is a service provider for the needs of people of the community who have the interests of the organization by the basic rules and procedures that have been set [17]. In Notoatmodjo, as written by Skinner, behavior is a person's response or reaction to external stimuli or stimuli. The behavior of an implementor is very influential, no matter how good the rules are made if the attitude of the implementor is not good then the policy will not work as it should [18].

### 3.3 Service Products

From the results of the research conducted, it was found that the service products at the Kakaskasen Health Center were not fully by the provisions because there were still some non-technical problems such as power outages. It was found that there were insufficient medicines available at the health center and they had to be purchased at the pharmacy according to the prescription issued. Incomplete files from patients so that they have not been directly served. There are no service procedures displayed in public rooms so patients do not know the Puskesmas procedures. There are still vacancies for employees during working hours in public rooms and there are still delays in services and doctors

who are not available but have been scheduled. There are still differences in services to certain communities such as family or closest relatives.

So, the researcher argues that the service products at the Kakaskasen Health Center are not as expected, this is due to several technical and non-technical factors that cause the service products by the Puskesmas have not been implemented properly even though the online queue has been implemented, there are still technical and non-technical problems. technical aspects that affect the services provided as an output in the form of service products.

Public service is an activity carried out by a person or group of people based on material factors through certain systems, procedures, and methods to comply with the interests of others by their rights. He concluded that service is essentially a series of activities because it is a process. As a process, services take place regularly and continuously, covering all people's lives in society [19].

Public Service Standards according to the Decree of the Minister for Empowerment of State Apparatus No. 63 of 2003 is one of the service products. Service products are the results of services that will be received by predetermined provisions [20]. Sheridan discusses commitment as the provision and ability to adjust behavior to the needs, goals, and priorities of the organization, including how to prioritize what the goals of the organization are from self-interest. [21].

### 3.4 Facilities and Infrastructure

From the results of the study, it was found that the facilities and infrastructure at the Kakaskasen Health Center were not 100% complete and adequate. There is incomplete medical equipment. Some employees are lacking in providing services, only playing cellphones. The availability of mobile phones and networks will determine the success of the online queue. Online queues are very helpful in speeding up service and number retrieval, but there are still non-technical problems such as network and mobile phone facilities. The researcher believes that the availability of facilities and infrastructure at the Kakaskasen Health Center is not yet fully complete, this is evidenced by the results of interviews from several informants who stated that the facilities and infrastructure were not 100% complete and even the online queuing machine could not be used anymore. Online queues are very helpful in speeding up service and number retrieval, but there are still non-technical problems such as network and mobile phone facilities.

The principle of public service According to the Decree of the Minister for Empowerment of State Apparatus No. 63 of 2003, it has several components, one of which is the completeness of facilities and infrastructure. Completeness of facilities and infrastructure is the availability of work facilities and infrastructure, and other supporting tools including the provision of telecommunications and information technology facilities. [20]. Public management focuses on the application of management principles, namely efficiency in the use of resources, the effectiveness of

customer orientation, orientation to market forces, and being more sensitive to public interests [22]. Public management is the application of the science and art of management to a context in which various values determine the outcome of an assessment of success and where the rules influence the obstacles caused by administrative policies [22].

### 3.5 Competency of Service Providers

From the results of the study, it was found that according to the data in the field that the competence of service providers at the Kaskasen Health Center was a good Human Resources (HR) with an educational background and placed according to their respective abilities and expertise and supported by training provided by the DINKES. The staff's skills are good but the attitude is still not friendly to patients. Some of the employees at work only play on cell phones.

The researcher argues that the Competency of Service Providers at the Kakaskasen Health Center is good, it is supported by the educational background and titles of each officer, but the ethics and attitudes of the officers are often not by the educational background because during work hours it is found that some officers only play cell phones and less friendly to service recipients or the community.

According to Mounir, so that services can satisfy the person or group of people being served, the actor in charge of serving must meet four criteria, namely: [23]:

1. Polite behavior
2. How to say something related to what the person concerned should receive
3. Time to deliver right
4. Hospitality

Characteristics that are closely related to policy/program implementers. The important characteristics possessed by the implementer are honesty, commitment, and democracy. Implementors who have a high commitment and honesty always survive among the obstacles encountered in the program/policy. Honesty directs implementors to stay within the predetermined program level. Attitudes and commitments increase the message of both implementers and policies to members of the target group. This commitment will reduce resistance from the community and foster a sense of trust and concern for target groups towards implementers in programs or policies [24].

## 4 Conclusion

Based on the data from the research and discussion as described and described in the previous chapter, the researcher concludes that the digitization of services at the Kakaskasen Health Center, North Tomohon District, Tomohon City has not been fully running well, supported by information data that the researchers found that the online queuing service procedure is not fully known. by the community, starting from the procedure for accessing the online queuing system, there must

even be a family member who must accompany the patient to access the online queuing system. The turnaround time was found to be often inconsistent with the time set by the health center, even though it was already using the online queuing system, there was still an inaccuracy in the time set for providing services. The service products provided by the health center even those received by the community are not by what has been determined due to differences in services to the community and relatives or families of officers so service products are not by what has been determined.

Facilities and infrastructure for the online queuing system that is not yet 100% adequate, starting from the availability of online queuing machine facilities, facilities owned by the community such as mobile phones, which do not all have Android, and networks that are not adequate and unstable, and the completeness of medicines that are not fully available. The competence of service providers is good, supported by the educational background and expertise of each officer and placed according to expertise and skills that are by their respective fields but the less friendly and unfavorable attitude to the community is still found in providing services, operators who access the system Online queues are often still not able to access the online queue system optimally.

From the results of data analysis and discussion of this research, it can be concluded that the effectiveness of Micro Business License Services at the Manado City Investment and One Stop Integrated Service Office is still less effective. This is more because the service in making business licenses is still constrained. After all, it does not comply with Standard Operating Procedures (SOP), both in terms of completing micro business licenses it takes quite a long time; service mechanisms tend to be slow and convoluted, the attitude of the waiters is not friendly, fees are still charged, lack of coordination between leaders and subordinates and inadequate service facilities.

## Acknowledgments

Research and membership at the International Conference on Social Science (ICSS) of 2022 can be held with financial assistance from the Faculty of Social Science, Universitas Negeri Manado, Indonesia.

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