

# Total Quality Management (TQM) in Bpjs Patient Services in MM Dunda Limboto Hospital

Widya Kurniati Mohi<sup>1</sup>, Ramli Makmur<sup>1</sup>

<sup>1</sup>Public Administration Study Program, Faculty of Social Sciences, Muhammadiyah University of Gorontalo, Gorontalo, Indonesia

Email: [ramlimakmur@gmail.com](mailto:ramlimakmur@gmail.com)

**Abstract.** *This study aims to determine and analyze how Total Quality Management in BPJS Patient Services at MM Dunda Limboto Hospital. This research is a descriptive research with a qualitative approach. Several indicators used are Commitment, Communication, Cooperation, Criticism. Based on the results of research and discussion related to the indicators of criticism in question, it was concluded from several informants that the hospital should better understand the situation in the hospital with the existence of a suggestion box, because which patients think about that suggestion, it is better like the advice of the patient by filling in a draft that was delivered directly by the officer to be filled in so that the evaluation material was available and quickly knew the response from the patient but the patient was getting better.*

**Keywords:** TQM, BPJS, Service

Received: October 23, 2021

Revised: November 18, 2021

Accepted: November 24, 2021

## INTRODUCTION

Public service is an important part of Public Administration because it is always in touch with the community at large. Every human being needs service. Service cannot be separated from human life. The community needs quality public services from the government. Service quality is a comparison between the reality of the service received with the expectation of the service to be received. Quality service (Syamsuadi, 2017).

Public services are also tied to health development, which is an effort carried out by all components of the nation to realize a better health status than before, increase awareness, willingness, and ability to live a healthy life aimed at all members of the community. The Healthy Indonesia Program, for example, guarantees and ensures that underprivileged communities can benefit from health services as implemented through the National Health Insurance (JKN) organized by BPJS Health.

BPJS in particular is evidence showing the government is serious in dealing with public health. The program is predicted to lighten the burden on the community. However, not infrequently these programs that have good intentions still cause various complaints from the public, especially in terms of BPJS services. Currently BPJS health is still far from feasible and must continue to be improved. Until now, there are at least three problems that still plague the Health Social Security Administering Body (BPJS). The three issues are membership, operational costs, and services. The main problem faced by BPJS to date, which also underlies the issuance of the new BPJS Health policy is the financial deficit.

Although the state has drawn up regulations regarding the ease of registration of BPJS participants, it is not accompanied by efforts to equalize health service facilities and human resources. Although the government has drafted regulations on the referral system, it provides less information to the public regarding the quality of the Puskesmas compared to hospitals, and does not encourage the development of the referral system for each region.

It is understandable that BPJS has tried to continuously improve the quality of services by highlighting a number of things such as the queuing system, transparency system for bed availability, and inpatient care, but the problem BPJS often faces is the limited facilities and hospitals. If the BPJS user community will only get health services at hospitals that have been registered or cooperate with BPJS health. So not all hospitals can. If the hospital is not registered then the use of the BPJS card is not valid.

The phenomenon of public services that is in the spotlight is in hospital facilities, BPJS users find it difficult to access various facilities. For example, long queues, rooms that are already fully occupied, so you don't get a chance. Then sometimes there are a number of drugs that are not covered, and some officers are sometimes less responsive. This is a BPJS complaint by the community over the BPJS problems that have not been able to be resolved against BPJS health services and also happened at the MM Dunda Limboto Hospital. Today's society is starting to become more critical of looking at health services and professionals from health workers. The community demands good health services from the hospital, on the other hand the government has not been able to provide services as expected due to limitations, except for business-oriented private hospitals, which can provide good health services, especially those related to the availability of services obtained by the community through BPJS.

BPJS applies a service flow with tiered referrals. Prior to going to a hospital or specialist doctor, participants must first go to a designated level I health facility, namely a puskesmas, family doctor or clinic, to obtain a referral letter. Except for the emergency department, participants can go directly to a hospital or specialist doctor. As long as the participant's health problems can be handled by health facility I, then the participant does not need to be referred to a hospital or specialist doctor. The decision to refer to the hospital is the authority of the health facility. The conditions are very different from the process in health insurance. With insurance, participants do not need a referral and can go directly to a hospital or specialist doctor of their choice.

This shows the complexity of the BPJS Health service flow because it applies a tiered service flow. In fact, the hope of the community is that they want an easy, fast and professional service procedure before going to the hospital, but that is not the case. Through the Regulation of the Minister of Health of the Republic of Indonesia Number 43 of 2016 concerning Minimum Service Standards in the Health Sector, Minimum Service Standards in the Health Sector, hereinafter abbreviated as SPM The Health Sector is a reference for Regency/City Regional Governments in providing health services that every citizen has the right to obtain at a minimum.

Total Quality Management is a quality management system that focuses on customers (customer focused) by involving all levels of employees in making continuous improvements or improvements that are produced by utilizing certain processes in a system (Ahmad, 2011).

Furthermore, in order for the implementation of TQM to be successful, the organization/company must have clear and directed guidelines. In implementing TQM, organizations/companies can refer to the efficiency attributes proposed by Oakland (2011), namely; (1) Commitment (Commitment) Commitment to provide efficient products or services that are profitable must be demonstrated by management and the company; (2) Consistency The company must provide products with consistent performance, such as accuracy of specifications, accuracy of schedules, accuracy of delivery, and others; (3) Competence The company must provide workers with superior abilities or competencies to carry out the assigned tasks or jobs, so as to support the achievement of company goals; (4) Contact (Relationships) Companies must be able to establish good relationships with consumers, because the company's goal is to provide products that meet the expectations and desires of consumers; (5) Communication The company must be able to establish good communication with consumers, so that the product specifications that consumers want can be translated properly by the company; (6) Credibility Companies must gain the trust of consumers and must also trust consumers. With mutual trust, relationships and communication will be well established; (7) Compassion Companies must have sympathy for external consumers, especially regarding their needs and expectations, and internal consumers

(workers) regarding workers' rights; (8) Courtesy (courtesy) The company through its employees must show a polite attitude to consumers, especially workers who are in direct contact with consumers; (9) Cooperation Companies must be able to create a good climate of cooperation, between workers and between companies and consumers; (10) Capability The company must have the ability to make decisions and take actions related to the provision of products or services; (11) Confidence The company must have confidence that the company is able to provide products or services according to the needs and expectations of consumers. Confidence must be instilled in all workers; (12) Criticism (Criticism) Companies must be willing to accept criticism and input from anyone, both from employees and from external parties, especially criticism from consumers.

Several previous studies related to the research that the author conducted have been studied by several previous researchers, for example the first research conducted by Faizah. (2018), with the research title Analysis of Total Quality Management (TQM) Implementation and Its Effect on Employee Job Satisfaction and Customer Satisfaction (Case Study on BPJS Health in Yogyakarta City). The results of his research show that Total Quality Management (TQM) has a significant effect on employee job satisfaction and customer satisfaction.

Subsequent research was carried out by Agi Wahyunto et al (2018), with the title Analysis of Total Quality Management (TQM) Implementation in the Pending Case of National Health Insurance (JKN) Claims at Kendal Hospital in 2018. The results of the research show analysis of Total Quality Management (TQM) according to Importance Performance analysis. Analysis (IPA) conducted on the components of TQM shows that there are several components that need to be improved and their implementation improved, so that there are no pending JKN claims at RSUD dr. H Soewondo Kendal.

From some of these studies, there are differences from several previous studies, more to the locus, methods and concepts/theories used to measure Total Quality Management (TQM), in BPJS Patient Services at MM Dunda Limboto Hospital.

## **METHODS**

This study uses a qualitative approach with a descriptive type of research because the aim is to reveal and describe facts about Total Quality Management (TQM), in BPJS Patient Services at MM Dunda Limboto Hospital. The sources of data in this study are primary and secondary data. Primary data were taken from several people who became informants and Key Informants, such as: Deputy Director of Services, MM Dunda Limboto Hospital; Head of Medical Services Division; Head of Nursing; Community (BPJS patients) and administrative staff, BPJS MM Dunda Limboto Hospital. The total number of informants is 10 people. Furthermore, secondary data was obtained from searching documents related to research needs such as journal articles, proceedings articles, books, documents of applicable laws and regulations. The data collection techniques carried out were interviews, observations and documentation in the field. Data analysis was carried out by qualitative descriptive analysis with several stages, namely Data Reduction, Data Display and Data Verification.

## **RESULTS AND DISCUSSION**

Hospital Dr. M.M Dunda Limboto, which was originally named RSU Limboto, is a hospital owned by the Gorontalo Regency Government, located in the administrative area of Gorontalo Regency, founded on November 25, 1963 with an initial capacity of 29 beds. Through the Decree of the Minister of Health Number 171/Menkes/SK/III/1994 RSU Dr. M.M. Dunda was appointed as a Class C General Hospital whose inauguration on September 19, 1994 coincided with the use of the name Dr. Mansyoer Mohamad Dunda which is taken from the name of a local independence pioneer who has devoted himself to the field of health so that it is immortalized as the name of the Regional General Hospital owned by the Regional Government of Gorontalo Regency with its position as the implementing unit of the Gorontalo Regency government in the field of public health services.

In its development RSUD Dr. M.M. Dunda Limboto became the Management Agency based on the Decree. The Regent of Gorontalo Number 171 of 2002 concerning the Establishment of the Organization and Work Procedure of the Regional General Hospital Dr. M.M. Dunda Kab. Gorontalo. With the stipulation as a Regional Public Service Agency, since the 2001 Fiscal Year, RSUD Dr. M.M Dunda Limboto began to be developed in stages, with a capacity of 239 beds based on the Decree of the Minister of Health of the Republic of Indonesia Number: HK.03.05/I/1077/2011, RSUD Dr. M.M Dunda Limboto changed type to Class B.

Hospital Dr. M.M Dunda in 2015 obtained a permanent operating permit for the Hospital in accordance with the Governor's Decree No.39/89/I/2015 and the Decree of the Minister of Health No. HK.02.03/I/0363/2015 regarding the establishment of Provincial Hospitals and Regional Referral Hospitals. Letter from the Hospital Accreditation Commission Number: KARS-SERT/567/VI/2012 concerning Basic Accreditation for 5 (five) services namely ER, Medical Services, Nursing Services, Medical Records and Management Administration. Letter from the Hospital Accreditation Commission (KARS) Number: 939/KARS/IX/2017 regarding notification of the results of the accreditation of RSUD Dr. M.M Dunda Limboto with a Plenary Level Pass.

In 2017, precisely on September 14, 2017, Dr. MM Dunda Hospital received an award for the quality of hospital services in the form of a Hospital Accreditation Certificate from KARS (Hospital Accreditation Commission) with Number: KARS-SERT/812/IX/2017 which established in Jakarta by the Executive Chairman of the Hospital Accreditation Commission, namely Dr.dr. Sutoto M.Kes. Along with the demands of the community who increasingly need quality, easier, and faster health services, currently the hospital has a bed capacity of 242 beds for inpatient rooms and 17 beds for emergency units (ER).

Total Quality Management (TQM) is a customer-focused quality management system (Customer-focused) by involving all levels of employees in making continuous improvements or improvements (continuously) this is produced by utilizing certain processes within a system (Ahmad, 2011).

In order for the implementation of TQM to be successful, the organization/company must have clear and directed guidelines. In implementing TQM, organizations/companies can refer to the efficiency attribute proposed by Oaklan (2011), which has twelve indicators but I only explain four indicators which are indeed the same as what I researched about TQM BPJS at MM Dunda Hospital, namely:

### **Commitment**

Organizational commitment is a condition in which an employee sided with a particular organization and its goals and desires to maintain membership in the organization. According to Stephen P. Robbins, it is defined that high job involvement means siding with an individual's particular job, while high organizational commitment means siding with the organization that recruits the individual. In school organizations, teachers are professionals who deal directly with students, so teachers in carrying out their duties as educators are able to carry out policies with certain goals and have a strong commitment to the school where they work. Commitment to providing an efficient product or service that is profitable must be demonstrated by management and the company.

Commitment is the strongest influence, with people identifying with requests and being highly motivated to carry them out, even when the source of motivation is no longer there (Meyer et al., 2004).

Commitment is the ability and willingness to align personal behavior with the needs, priorities and goals of the organization (Lim et al., 2017). This includes ways to develop goals or meet organizational needs which essentially prioritize the organization's mission over personal interests (Soekidjan, 2009). According to Meyer and Allen (1991, in Soekidjan, 2009), commitment can also mean an individual's strong acceptance of the goals and values of the organization, and individuals strive and work and have a strong desire to stay in the organization.

Furthermore, Soekidjan (2009) explains that in general a strong commitment to the organization is proven, increasing job satisfaction, reducing absenteeism and improving performance.

Organizational commitment is a reflection where an employee recognizes the organization and is bound to its goals. This is an important work attitude because people who are committed are expected to show their availability to work harder to achieve organizational goals and have a greater desire to stay at a company (in Cassidy & Kreitner, 2011). In addition, organizational commitment is an important behavioral dimension that can be used to assess employee tendencies, identify and involve someone who is relatively strong in the organization, and knows the wishes of organizational members to maintain membership in the organization and are willing to strive for the achievement of organizational goals and are able to accept norms. The norms that exist within the company.

Based on initial observations, researchers saw the effectiveness of BPJS services at MM Dunda Hospital running properly, only researchers saw long queues of outpatients who were waiting for doctors to check, as for the results of interviews conducted by researchers for one month with several informants, researchers can conclude that hospital services still have to be further improved, especially with medical personnel, so that there are no queues and always generalize those who use BPJS or not, so that the service will be more excellent.

### **Communication**

Companies must be able to establish good communication with consumers, so that the product specifications that consumers want can be translated well by the company.

The term communication in English is "communication", from the Latin "communicatus" which has the meaning of sharing or belonging together. According to Lexicographer, communication is an effort aimed at sharing to achieve togetherness. If two people communicate then the same understanding of the messages exchanged is the goal that is desired by both. Webster's New Collegiate Dictionary 1977 edition, among others, explains that communication is a process of exchanging information between individuals through a system of symbols, signs, or behavior. Meanwhile, Cargan and Shield argue that communication theory is a relationship between theoretical concepts that provide in whole or in part information, explanations, judgments, and estimates of human actions based on communicators (people) who communicate (speaking, reading, listening, watching) for a certain period of time. through the media (intermediaries).

Communication is an attempt to convey an idea to receive feedback from the ideas that we convey. Tania & Nurudin, (2021) Some of these understandings, communication is an interaction process carried out by two or more living things, either directly or through electronic media which aims to convey messages and exchange thoughts and feelings that can be done through gestures, emotional expressions, writing and others, but the more effective communication is speaking. Communication theory is a relationship between theoretical concepts that help give, in whole or in part, information, explanations, explanations, judgments or predictions of human actions based on communicators (people) communicating (talking, writing, reading, listening, watching, and so on) for a long period of time. certain period of time through the media.

Communication according to several experts including according to Everett Rogers in Cangara (1998) Communication is defined as "the process in which an idea is transferred from a source to one or more recipients, with the intention of changing their behavior". Meanwhile, according to Muhammad (2005) Communication defined as "the exchange of verbal and non-verbal messages between the sender and the recipient of the message to change behavior". Communication theory is a very important part of human life. Humans are social beings who cannot live alone who always need the help of others. To establish a relationship with other people is by communication. The effectiveness of communication that occurs will make the relationship that exists will run well.



Based on initial observations, the researchers saw that the communication made by hospital staff with patients was running as it should, explaining the flow for managing BPJS Health procedures and other things, but at the time of the study the researchers found that the services at the hospital still had difficulty explaining to the layman and those who elderly but they always try to make people understand by repeating to explain about the BPJS Health procedure.

### **Cooperation**

According to the Big Indonesian Dictionary (2008) cooperation is something that is handled by several parties. Cooperation is an attitude of wanting to do a job together regardless of the background of the people who are invited to work together to achieve a goal. cooperation or learning together is a group process in which members support and rely on each other to reach a consensus. In addition, the ability to cooperate can increase self-confidence and the ability to interact, as well as train students to adapt to a new environment.

According to Thomas & Johnson (2014), cooperation is a grouping that occurs among living things we know. Cooperation or learning together is a team process (group) in which members support and rely on each other to achieve a consensus. The classroom is an excellent place to build group (team) skills, which you will need later in life. Cooperation can remove mental barriers due to limited experience and a narrow perspective. So you will be more likely to discover your own strengths and weaknesses, learn to respect others, listen with an open mind, and build cooperative agreements. By working together, small groups will be able to overcome various forms of obstacles, act independently and with a sense of responsibility, rely on the talents or thoughts of each group member, trust others, express opinions and make decisions.

The implementation of cooperation can only be achieved if mutual benefits are obtained for all parties involved (win-win). If one party is harmed in the cooperation process, then the cooperation is no longer fulfilled. In an effort to achieve mutual benefits or benefits from cooperation, it is necessary to have good communication between all parties and a common understanding of common goals (Bowo, 2007).

Cooperation is a form of social interaction. According to Abdulsyani, cooperation is a form of social process, in which there are certain activities that are shown to achieve common goals by helping each other and understanding each other's activities. common goals. As quoted by Abdulsyani, Roucek and Warren, said that cooperation means working together to achieve common goals. It is one of the most basic social processes. Usually cooperation involves the division of tasks, where everyone does every job that is his responsibility to achieve a common goal.

According to Thomas & Johnson (2014), cooperation is a grouping that occurs between living things that we know. Cooperation or learning together is a team process (group) in which members support and rely on each other to achieve a consensus. The classroom is an excellent place to build group (team) skills, which you will need later in life. Cooperation can remove mental barriers due to limited experience and a narrow perspective. So you will be more likely to discover your own strengths and weaknesses, learn to respect others, listen with an open mind, and build cooperative agreements. By working together, small groups will be able to overcome various forms of obstacles, act independently and with a sense of responsibility, rely on the talents or thoughts of each group member, trust others, express opinions and make decisions.

Based on the initial observations, the researchers saw that there was already cooperation between officers and patients but it was not maximal, it was only limited to asking questions, complaints and others, unlike people working together in general, at the time of the study, the patient still did not understand the procedures carried out at the related hospital. with the case management itself, it is necessary to explain or make pamphlets for complaints so that patients can read them and go directly to the destination without having to queue with patients who have different problems.

### **Criticismn**

In the Big Indonesian Dictionary (2003), criticism is criticism or feedback, sometimes accompanied by descriptions and good considerations of a work, opinion, and so on. Criticism opens itself up to debate, tries to convince others, and contains contradictions. Thus criticism becomes an exchange of public opinion. Criticism is not only a matter of good taste, but must involve methods of analysis and special forms of experience that are not shared by other people in general. According to Curtis, criticism is a matter of analyzing and evaluating something with the aim of increasing understanding, expanding appreciation, or helping to improve work.

Based on initial observations that in each room there must be a suggestion box so that patients can provide suggestions and criticisms for services at the hospital but it is rare for patients to fill it out, even they don't know what to fill, and at the time of the study several informants said that the hospital should better understand the situation in the hospital with a suggestion box, because which patients are thinking about that suggestion, it is better like suggestions from patients by filling out drafts which are delivered directly by officers to be filled in so that the evaluation material is available and quickly knows the response from the patient but patients who are getting better.

## CONCLUSION

Based on the results of the research and discussion, it can be concluded that this research is as follows: Commitment (commitment) can be concluded by the informant that hospital services still have to be further improved, especially with medical personnel who must be added so that there are no queues and always generalize those who use BPJS or not, so that the service will be more excellent; Communication (communication) can be concluded that the service at the hospital is still having difficulty explaining to the layman and the elderly but they always try to make the public understand by repeating the procedure related to BPJS Health; Cooperation, namely the patient still does not understand the procedures carried out at the hospital related to the case management itself, it is necessary to explain or make a pamphlet for the complaint so that the patient can read it and go directly to the destination without having to queue with the patient the constraints are different. Based on the results of the interview above related to the criticism indicator in question, it was concluded from several informants that the hospital should better understand the situation in the hospital with a suggestion box, because which patient is thinking about the suggestion, it is better like the suggestion from a patient with holding a draft that is delivered directly by the officer to be filled in so that the evaluation material is available and quickly finds out the response from the patient but the patient has started to improve.

## SUGGESTION

Based on the conclusions above, the researchers suggest for the Hospital; (1) Improved excellent service for patients who use BPJS Health; (2) Make it easier to explain about BPJS Health procedures that can be understood by ordinary people and the elderly; (3) Improved responsiveness without distinguishing between BPJS patients and general patients; (4) Facilities are added so that patients can be treated properly; (5) For criticism, you can make a draft to the patient in terms of service satisfaction.

## REFERENCES

- Ahmad, M. (2011). *Analisis Manajemen Mutu Terpadu (TQM) dalam Pelayanan Rumah Sakit*. UNG REPOSITORY.
- Bowo, A. (2007). *Kerjasama*. Yogyakarta: Pustaka Larasati.
- Cangara, H. (2019). *Pengantar ilmu komunikasi*. litbang.kemkes.go.id
- Cassidy, C. M., & Kreitner, R. (2011). *Principles of management*. South-Western/Cengage Learning.
- Faizah, W. (2018). *Analisis Implementasi Total Quality Management (TQM) Dan Pengaruhnya Pada Kepuasan Kerja Karyawan Serta Kepuasan Pelanggan (Studi Kasus pada BPJS Kesehatan di Kota Yogyakarta)*. Yogyakarta: UII.

- Lim, A. J. P., Loo, J. T. K., & Lee, P. H. (2017). The impact of leadership on turnover intention: The mediating role of organizational commitment and job satisfaction. *Journal of Applied Structural Equation Modeling*, 1(1), 27-41.
- Meyer, J. P., Becker, T. E., & Vandenberghe, C. (2004). Employee commitment and motivation: a conceptual analysis and integrative model. *Journal of applied psychology*, 89(6), 991.
- Muhammad, A. (2005). *Komunikasi Organisasi*, Cet. VII, Jakarta: Bumi Aksara.
- Oakland, J. (2011). Leadership and policy deployment: the back bone of TQM. *Total Quality Management & Business Excellence*, 22(5), 517-534.
- Soekidjan, S., & Kij, S. (2009). *Komitmen Organisasi sudahkah menjadi bagian dari kita*. Jakarta: Rineka Cipta.
- Syamsuadi, A. (2017). *Pelayanan Publik Dan Birokrasi Pemerintahan*. Bahan Ajar Mata Kuliah Pelayanan Sektor Publik Ilmu Pemerintahan Universitas Abdurrahman.
- Tania, A. S. R., & Nurudin, N. (2021). Self Disclosure Komunikasi Antar Pribadi Pasangan Jarak Jauh dalam Mempertahankan Hubungan Saat Physical Distancing Era Pandemic COVID-19. *Komuniti: Jurnal Komunikasi dan Teknologi Informasi*, 13(1), 1-15.
- Thomas, L., & Johnson, E. B. (2014). *Contextual Teaching Learning*. Jakarta: Kaifa.