Jurnal Kesehatan Masyarakat Perkotaan p-ISSN: 2776-0952 e-ISSN : 2776-0944
Volume 6, No. 1; Maret 2026 Hal 174-194

Primary Healthcare Service Quality Improvement Model Based on Patient Perceptions at Manipi Community Health Center

Hardi [1)*], Mutmainnah Latief [2)], Miftahul Jannah [3)]

[1)2)] Universitas Syekh Yusuf Al Makassari Gowa
[3)] STIKES Datu Kamanre Luwu
Correspondence Author: hardiabnsulsel01@gmail.com
DOI: https://doi.org/10.37012/jkmp.v6i1.3522

Abstract

The quality of primary healthcare services is a key indicator in improving patient satisfaction and loyalty toward first-level healthcare facilities. Patients' perceptions can serve as the basis for developing sustainable service quality improvement strategies. This study aimed to analyze patient perceptions regarding the quality of primary healthcare services and to formulate a service quality improvement model at Manipi Community Health Center, West Sinjai District. A descriptive design with quantitative and qualitative approaches was employed. Data were collected through closed-ended Likert-scale questionnaires, field observations, and semi-structured interviews involving 31 respondents selected via accidental sampling. Data were analyzed descriptively using frequency distributions, percentages, and thematic narratives. The findings revealed that most respondents perceived service quality as good to very good. The most positively rated aspects included staff friendliness, clarity of service information, affordability, patient privacy and confidentiality, and service accessibility. However, service waiting time, limited waiting-room facilities, and accessibility for disabled patients still require improvement. Based on these findings, a service quality improvement model was developed, consisting of strengthening service communication, improving service efficiency, developing supporting facilities, strengthening privacy and patient safety, and enhancing healthcare human resources. Patient perceptions can serve as a basis for sustainable primary healthcare quality improvement at Manipi Community Health Center.

Keywords**:** *Service Quality, Patient Perception, Primary Healthcare, Community Health Center, Patient Satisfaction*

Abstrak

Kualitas pelayanan kesehatan primer merupakan indikator kunci dalam meningkatkan kepuasan dan loyalitas pasien terhadap fasilitas kesehatan tingkat pertama. Persepsi pasien dapat menjadi dasar untuk mengembangkan strategi peningkatan kualitas pelayanan yang berkelanjutan. Studi ini bertujuan untuk menganalisis persepsi pasien mengenai kualitas pelayanan kesehatan primer dan merumuskan model peningkatan kualitas pelayanan di Puskesmas Manipi, Kecamatan Sinjai Barat. Desain deskriptif dengan pendekatan kuantitatif dan kualitatif digunakan. Data dikumpulkan melalui kuesioner skala Likert tertutup, observasi lapangan, dan wawancara semi-terstruktur yang melibatkan 31 responden yang dipilih melalui pengambilan sampel acak. Data dianalisis secara deskriptif menggunakan distribusi frekuensi, persentase, dan narasi tematik. Hasil penelitian menunjukkan bahwa sebagian besar responden menilai kualitas pelayanan baik hingga sangat baik. Aspek yang paling positif dinilai meliputi keramahan staf, kejelasan informasi pelayanan, keterjangkauan biaya, privasi dan kerahasiaan pasien, serta aksesibilitas pelayanan. Namun, waktu tunggu pelayanan, keterbatasan fasilitas ruang tunggu, dan aksesibilitas bagi pasien penyandang disabilitas masih memerlukan perbaikan. Berdasarkan temuan ini, dikembangkan sebuah model peningkatan kualitas layanan yang terdiri dari penguatan komunikasi layanan, peningkatan efisiensi layanan, pengembangan fasilitas pendukung, penguatan privasi dan keselamatan pasien, serta peningkatan sumber daya manusia di bidang kesehatan. Persepsi pasien dapat menjadi dasar untuk peningkatan kualitas layanan kesehatan primer yang berkelanjutan di Puskesmas Manipi.

Kata Kunci: Kualitas Layanan, Persepsi Pasien, Pelayanan Kesehatan Primer, Pusat Kesehatan Masyarakat, Kepuasan Pasien

PENDAHULUAN

Community health centers (Puskesmas), as first-level healthcare facilities, play a strategic role in improving public health status through promotive, preventive, curative, and rehabilitative services. The quality of community health center services is a key factor influencing service utilization, patient satisfaction, and patient loyalty. Studies over the past five years have shown that the quality of primary healthcare services is influenced by the physical environment, service systems, staff competence and attitude, and service accessibility (Dimas et al., 2025; Saktio Pratama et al., 2023; Chaniago & Agustina, 2023).

Several previous studies have emphasized that patient satisfaction at community health centers is generally measured through service dimensions such as waiting time, staff friendliness, clarity of information, and availability of facilities. Yantika et al. (2024) and Kirana et al. (2024) found that waiting time is one of the determinants that frequently influence patient perception of services in healthcare facilities. Meanwhile, the study by Askarila and Kholidah (2024) showed that the dimensions of reliability and assurance have a high level of conformity with patient expectations, although the responsiveness of staff remains a major challenge that needs to be addressed. However, most of these studies have focused on the technical aspects of service and have not deeply explored the patient experience comprehensively.

In recent developments, issues of privacy, confidentiality, and security in healthcare services have received increasing attention, particularly along with growing public awareness of patient rights. The study by Hendra Pratama et al. (2023) emphasizes that the assurance of security and service quality plays an important role in building patient trust and satisfaction with healthcare facilities. Patients not only expect good medical services but also protection of their health data and information. The study by Adi Sutrisno and Arief Budiono (2025) emphasizes that the protection of patient rights and privacy is an essential component in improving the quality of healthcare services.

This study has several novelty elements compared to previous studies. First, the study not only measures the level of patient satisfaction with healthcare services but also develops a primary healthcare service quality improvement model based on patient perceptions. Second, the study integrates aspects of privacy, confidentiality, security, comfort, service efficiency, and patient loyalty within a single analytical framework of primary healthcare services. Third, the study is conducted in the context of a community health center in a semi-rural sub-district setting, which has been relatively under-examined in primary healthcare

research.

Manipi Community Health Center, located in West Sinjai District, is one of the primary healthcare facilities serving as the central public healthcare center in the area. The high volume of patient visits makes service quality improvement a primary necessity to maintain patient satisfaction and loyalty. Therefore, this study is important to describe patient perceptions of healthcare service quality and to develop a primary healthcare service quality improvement model based on patients' experiences as service users.

METODE PENELITIAN

This study is a descriptive study using a quantitative approach supported by qualitative data. The research was conducted at Manipi Community Health Center, West Sinjai District. The population of this study consisted of all visitors of Manipi Community Health Center, with a sample of 31 respondents selected through accidental sampling. The respondent criteria included patients who were currently or had previously received healthcare services at Manipi Community Health Center and who were willing to participate as respondents.

The research instruments consisted of a closed-ended questionnaire using a Likert scale to measure respondents' perceptions of various service aspects, an observation sheet to assess the environmental conditions and service processes, and semi-structured questions to explore respondents' experiences, expectations, and suggestions. The research variables included the physical environment and service comfort, service information and administration system, service flow and waiting time, healthcare staff–patient interaction, privacy, confidentiality and service security, and patient satisfaction and loyalty.

Data were analyzed descriptively through frequency distributions, percentages, and thematic narrative presentation. The findings were then used as the basis for developing a primary healthcare service quality improvement model.

HASIL DAN PEMBAHASAN

This study employed a descriptive method to describe respondent characteristics and patients' assessments of various aspects of healthcare services at Manipi Community Health Center, West Sinjai District. The research findings are presented in the form of frequency distribution tables and descriptive narratives as follows:

Respondent Characteristics

Table 1. Distribution of Respondents by Gender

Gender	n	(%)
Male	9	29.0
Female	22	71.0
Total	**31**	**100**

Source: Primary Data, 2026

The findings indicate that most respondents were female (71.0%), suggesting that women are more dominant in utilizing healthcare services at Manipi Community Health Center.

Table 2. Distribution of Respondents by Age

Age	n	(%)
< 20 years	3	9.7
20–35 years	11	35.5
36–50 years	11	35.5
> 50 years	6	19.4
Total	**31**	**100**

Source: Primary Data, 2026

The findings show that most respondents were within the productive age group of 20–50 years, indicating a high demand for healthcare services among this age group.

Table 3. Distribution of Respondents by Last Education

Last Education	n	(%)
Elementary School	5	16.1
Junior High School	6	19.4
Senior High School	14	45.2
Higher Education	5	16.1
Never Attended School	1	3.2
Total	**31**	**100**

Source: Primary Data, 2026

The findings indicate that the majority of respondents had completed senior high school education, which may influence their understanding of healthcare service information.

Table 4. Distribution of Respondents by Type of Visit and Payment

Variable	Category	n	%
Type of Visit	Outpatient	22	71.0

Variable	Category	n	%
	Follow-up Check	8	25.8
	Referral Request	1	3.2
	Total	**31**	**100**
Payment	BPJS	30	96.8
	General (Self-paid)	1	3.2
	Total	**31**	**100**

Source: Primary Data, 2026

Based on the table on the distribution of respondents by type of visit and payment, it is known that most respondents were outpatients, totaling 22 individuals (71.0%); while 8 respondents (25.8%) came for follow-up checks, and 1 respondent (3.2%) came to request a referral.

Regarding the type of payment, the majority of respondents used BPJS Health insurance, totaling 30 individuals (96.8%), while only 1 respondent (3.2%) paid out-of-pocket (general). These results indicate that healthcare services at Manipi Community Health Center are mostly utilized by BPJS Health participants, with the dominant type of visit being outpatient services.

Assessment of the Physical Environment and Comfort

Table 5. Distribution of Respondents by Assessment of the Physical Environment and Comfort

Aspect	Poor n (%)	Fair n (%)	Good n (%)	Very Good n (%)	Total
Cleanliness of waiting room	0 (0%)	2 (6.5%)	17 (54.8%)	12 (38.7%)	31 (100%)
Availability of seating	0 (0%)	7 (22.6%)	10 (32.3%)	14 (45.2%)	31 (100%)
Lighting & ventilation	0 (0%)	5 (16.1%)	19 (61.3%)	7 (22.6%)	31 (100%)
Supporting facilities	0 (0%)	14 (45.2%)	14 (45.2%)	3 (9.7%)	31 (100%)
Accessibility for disabled patients	1 (3.2%)	19 (61.3%)	8 (25.8%)	3 (9.7%)	31 (100%)

Source: Primary Data, 2026

Based on the frequency distribution table on the assessment of the physical environment and comfort at Manipi Community Health Center, it is known that the cleanliness of the waiting room was mostly rated as good by 17 respondents (54.8%) and very good by 12 respondents (38.7%), while 2 respondents (6.5%) rated it as fair. Meanwhile, accessibility for disabled

patients remained the aspect most frequently rated as fair, namely 19 respondents (61.3%), followed by the good category at 8 respondents (25.8%), the very good category at 3 respondents (9.7%), and the poor category at 1 respondent (3.2%). Overall, the findings indicate that the physical environment and comfort of services at Manipi Community Health Center are perceived as good by most respondents, although facilities for disabled patient access still require improvement.

Information System and Registration

Table 6. Distribution of Respondents by Assessment of the Information System and Registration

Aspect	Poor n (%)	Fair n (%)	Good n (%)	Very Good n (%)	Total
Clarity of registration information	0 (0%)	4 (12.9%)	20 (64.5%)	7 (22.6%)	31 (100%)
Building directions/signage	0 (0%)	11 (35.5%)	15 (48.4%)	5 (16.1%)	31 (100%)
Ease of registration	0 (0%)	7 (22.6%)	20 (64.5%)	4 (12.9%)	31 (100%)
Speed of counter service	0 (0%)	7 (22.6%)	16 (51.6%)	8 (25.8%)	31 (100%)
Manner of providing information	0 (0%)	7 (22.6%)	15 (48.4%)	9 (29.0%)	31 (100%)

Source: Primary Data, 2026

Based on the frequency distribution table on the assessment of the information and registration system at Manipi Community Health Center, it is known that the clarity of registration information was mostly rated as good by 20 respondents (64.5%) and very good by 7 respondents (22.6%), while 4 respondents (12.9%) rated it as fair. Meanwhile, the manner in which staff provided information was rated as good by 15 respondents (48.4%), very good by 9 respondents (29.0%), and fair by 7 respondents (22.6%). Overall, the findings show that the information system and registration process at Manipi Community Health Center were rated as good by most respondents, as the service information was easy to understand, the registration process was relatively simple, and the staff were able to convey information clearly to patients.

Service Flow and Waiting Time

Table 7. Distribution of Respondents by Assessment of Servie Flow and Waiting Time

Aspect	Poor n (%)	Fair n (%)	Good n (%)	Very Good n (%)	Total
Clarity of service flow	0 (0%)	6 (19.4%)	19 (61.3%)	6 (19.4%)	31 (100%)
Queuing system	0 (0%)	9 (29.0%)	16 (51.6%)	6 (19.4%)	31 (100%)
Estimated waiting time	0 (0%)	12 (38.7%)	11 (35.5%)	8 (25.8%)	31 (100%)
Staff response during peak queue	0 (0%)	11 (35.5%)	16 (51.6%)	4 (12.9%)	31 (100%)

Source: Primary Data, 2026

Based on the frequency distribution table on the assessment of service flow and waiting time at Manipi Community Health Center, it is known that the clarity of service flow was mostly rated as good by 19 respondents (61.3%), while 6 respondents (19.4%) each rated it as very good and fair. Meanwhile, the staff's response during peak queue times was rated as good by 16 respondents (51.6%), fair by 11 respondents (35.5%), and very good by 4 respondents (12.9%). Overall, the findings show that the service flow and queuing system at Manipi Community Health Center were perceived as good by most respondents; however, the efficiency of service waiting time still requires improvement to enhance patient comfort.

Staff Interaction with Patients

Table 8. Distribution of Respondents by Assessment of Staff Interaction with Patients

Aspect	Poor n (%)	Fair n (%)	Good n (%)	Very Good n (%)	Total
Staff friendliness	0 (0%)	7 (22.6%)	12 (38.7%)	12 (38.7%)	31 (100%)
Patience in answering questions	0 (0%)	8 (25.8%)	21 (67.7%)	2 (6.5%)	31 (100%)
Explanation of procedures/treatment	1 (3.2%)	10 (32.3%)	16 (51.6%)	4 (12.9%)	31 (100%)
Respectful attitude toward patients	0 (0%)	7 (22.6%)	17 (54.8%)	7 (22.6%)	31 (100%)
Willingness to assist patients	0 (0%)	5 (16.1%)	19 (61.3%)	7 (22.6%)	31 (100%)

Source: Primary Data, 2026

Based on the frequency distribution table on the assessment of staff interaction with patients at Manipi Community Health Center, it is known that staff friendliness received ratings of

good and very good from 12 respondents each (38.7%), while 7 respondents (22.6%) gave a fair rating. Meanwhile, regarding staff's willingness to assist patients, the majority of respondents gave a good rating, with 19 respondents (61.3%), followed by very good from 7 respondents (22.6%), and fair from 5 respondents (16.1%). Overall, the findings show that healthcare staff–patient interaction at Manipi Community Health Center was rated as good by most respondents, particularly in terms of friendliness, patience, respectful attitudes toward patients, and staff readiness in assisting patients throughout the healthcare service process.

Patient Behavior in the Waiting Room and During Service

Table 9. Distribution of Respondents by Assessment of Patient Behavior in the Waiting Room and During Service

Aspect	Poor n (%)	Fair n (%)	Good n (%)	Very Good n (%)	Total
Orderliness while waiting in queue	0 (0%)	5 (16.1%)	18 (58.1%)	8 (25.8%)	31 (100%)
Compliance with service flow	0 (0%)	4 (12.9%)	19 (61.3%)	8 (25.8%)	31 (100%)
Cooperative attitude during service	0 (0%)	3 (9.7%)	17 (54.8%)	11 (35.5%)	31 (100%)
Politeness in interacting with staff	0 (0%)	2 (6.5%)	16 (51.6%)	13 (41.9%)	31 (100%)
Patience while waiting for service	1 (3.2%)	7 (22.6%)	17 (54.8%)	6 (19.4%)	31 (100%)

Source: Primary Data, 2026

Based on the frequency distribution table on the assessment of patient behavior in the waiting room and during service at Manipi Community Health Center, it is known that the orderliness aspect during queuing was mostly rated as good by 18 respondents (58.1%), very good by 8 respondents (25.8%), and fair by 5 respondents (16.1%). Meanwhile, the aspect of patience while waiting for service received good ratings from 17 respondents (54.8%), fair from 7 respondents (22.6%), very good from 6 respondents (19.4%), and there was still 1 respondent (3.2%) who gave a poor rating. Overall, the findings show that patient behavior in the waiting room and during the receipt of healthcare services at Manipi Community Health Center fell within the good to very good category, particularly in terms of queue orderliness, compliance with service flow, cooperative attitude, and politeness in interacting with healthcare staff.

Aspects of Privacy, Confidentiality, and Security

Table 10. Distribution of Respondents by Assessment of Privacy, Confidentiality, and Security

Aspect	Poor n (%)	Fair n (%)	Good n (%)	Very Good n (%)	Total
Room arrangement / consultation separation	0 (0%)	6 (19.4%)	15 (48.4%)	10 (32.3%)	31 (100%)
Staff attitude in maintaining confidentiality	0 (0%)	2 (6.5%)	15 (48.4%)	14 (45.2%)	31 (100%)
Safety of the health center environment	0 (0%)	11 (35.5%)	16 (51.6%)	4 (12.9%)	31 (100%)

Source: Primary Data, 2026

Based on the frequency distribution table on the assessment of privacy, confidentiality, and security aspects at Manipi Community Health Center, it is known that room arrangement or consultation separation was mostly rated as good by 15 respondents (48.4%), very good by 10 respondents (32.3%), and fair by 6 respondents (19.4%). Meanwhile, the aspect of the safety of the health center environment received good ratings from 16 respondents (51.6%), fair from 11 respondents (35.5%), and very good from 4 respondents (12.9%). Overall, the findings show that privacy, confidentiality, and security aspects of services at Manipi Community Health Center were perceived as good by most respondents, particularly in maintaining patient information confidentiality. However, the security of the service environment still requires improvement to provide more optimal safety and comfort for patients during the healthcare service process.

Semi-Structured Question Results

The semi-structured question results were used to reinforce the quantitative findings by describing respondents' experiences, perceptions, and expectations toward healthcare services at Manipi Community Health Center. The results of the semi-structured interviews are described as follows:

Reasons for Choosing Manipi Community Health Center

The majority of respondents stated that they chose Manipi Community Health Center because of its proximity to their residence and easy accessibility. In addition, respondents mentioned that the health center is the primary and nearest healthcare facility in their area. Some respondents also expressed that good service, adequate facilities, and ease of obtaining BPJS referrals were the reasons for choosing the health center.

Source of Information and Recommendation

Most respondents obtained information about Manipi Community Health Center through family, relatives, and the surrounding community. Recommendations from people close to them became a factor that influenced respondents' decisions to utilize healthcare services at the center. This indicates a reasonably good level of public trust in the quality of services provided.

Respondents' Expectations Regarding Services

Before receiving healthcare services, the majority of respondents expected fast service, friendly healthcare staff, communicative doctors, and adequate service facilities. Based on respondents' experiences during service receipt, most of these expectations were considered to have been well fulfilled.

Experience Using Other Healthcare Facilities

Some respondents reported that they had used other healthcare facilities, but still chose to seek treatment at Manipi Community Health Center because the services were considered faster, the staff were friendlier, and the location was closer to their residence. Meanwhile, respondents who had never switched healthcare facilities stated that the health center was the most easily accessible and suited their healthcare needs.

Perception of Cost and Service Access

Healthcare service costs were perceived as affordable by almost all respondents, particularly because most services are covered by BPJS Health insurance. Furthermore, access to Manipi Community Health Center was perceived as easy because the service location is close to the community's residences.

Intention for Revisit and Recommendation

All respondents stated that they were willing to return to use the healthcare services at Manipi Community Health Center whenever they needed healthcare. The main reasons stated included good service, friendly staff, affordable service costs, and easy service access. In addition, nearly all respondents stated their willingness to recommend the health center to their family and relatives.

Suggestions for Improvement from Respondents

The improvement suggestions most frequently raised by respondents related to reducing service waiting time. This finding is consistent with previous research showing that waiting time remains a service aspect that needs improvement. In addition, respondents also

expressed the need to add waiting room facilities and healthcare personnel to improve service comfort and efficiency. Nevertheless, a small number of respondents stated that they had no suggestions because they were already satisfied with the services received.

Closed-Ended Questionnaire Results (Likert Scale)

Ease of Access and Information

Table 11. Distribution of Respondents by Ease of Access and Information

Statement	Disagree n (%)	Undecided n (%)	Agree n (%)	Strongly Agree n (%)	Total
The location of the health center is easy to reach	0 (0%)	0 (0%)	14 (45.2%)	17 (54.8%)	31 (100%)
The registration procedure is easy to understand	0 (0%)	3 (9.7%)	20 (64.5%)	8 (25.8%)	31 (100%)
Information on service flow is clear	0 (0%)	4 (12.9%)	15 (48.4%)	12 (38.7%)	31 (100%)
Staff explanations are easy to understand	0 (0%)	3 (9.7%)	26 (83.9%)	2 (6.5%)	31 (100%)

Source: Primary Data, 2026

Based on the frequency distribution table on the ease of access and information for healthcare services at Manipi Community Health Center, it is known that all respondents gave positive ratings regarding the location of the health center. A total of 17 respondents (54.8%) strongly agreed and 14 respondents (45.2%) agreed that the location of the health center is easy to reach. Meanwhile, regarding the aspect of staff explanations being easy to understand, the majority of respondents agreed, totaling 26 respondents (83.9%), 2 respondents (6.5%) strongly agreed, and 3 respondents (9.7%) were undecided. Overall, the findings show that service access and the information provided at Manipi Community Health Center were perceived as good by most respondents, particularly in terms of ease of reaching the service location, understanding the registration procedure, and receiving service explanations from healthcare staff.

Physical Environment and Comfort

Table 12. Distribution of Respondents by Physical Environment and Comfort

Statement	Disagree n (%)	Undecided n (%)	Agree n (%)	Strongly Agree n (%)	Total
The waiting room is clean and comfortable	0 (0%)	1 (3.2%)	15 (48.4%)	15 (48.4%)	31 (100%)

Statement	Disagree n (%)	Undecided n (%)	Agree n (%)	Strongly Agree n (%)	Total
Public facilities are well maintained	0 (0%)	4 (12.9%)	18 (58.1%)	9 (29.0%)	31 (100%)
The waiting room atmosphere is conducive	0 (0%)	5 (16.1%)	20 (64.5%)	6 (19.4%)	31 (100%)

Source: Primary Data, 2026

Based on the frequency distribution table on the physical environment and comfort at Manipi Community Health Center, it is known that most respondents gave positive ratings regarding the condition of the waiting room. Regarding the statement that the waiting room is clean and comfortable, 15 respondents (48.4%) each stated agreement and strong agreement, while 1 respondent (3.2%) was undecided. Meanwhile, on the statement that the waiting room atmosphere is conducive, 20 respondents (64.5%) agreed, 6 respondents (19.4%) strongly agreed, and 5 respondents (16.1%) were undecided. Overall, the findings show that the physical environment and comfort of services at Manipi Community Health Center were perceived as good by most respondents, particularly in terms of waiting room cleanliness, condition of public facilities, and the overall service atmosphere, which were comfortable for patients.

Healthcare Staff Services

Table 13. Distribution of Respondents by Healthcare Staff Services

Statement	Disagree n (%)	Undecided n (%)	Agree n (%)	Strongly Agree n (%)	Total
Staff are friendly and polite	0 (0%)	4 (12.9%)	19 (61.3%)	8 (25.8%)	31 (100%)
Staff patiently answer questions	0 (0%)	6 (19.4%)	21 (67.7%)	4 (12.9%)	31 (100%)
Medical explanations are clear	0 (0%)	6 (19.4%)	16 (51.6%)	9 (29.0%)	31 (100%)
Patients are treated with respect	0 (0%)	2 (6.5%)	17 (54.8%)	12 (38.7%)	31 (100%)

Source: Primary Data, 2026

Based on the frequency distribution table on healthcare staff services at Manipi Community Health Center, it is known that, regarding the aspect of staff being friendly and polite, the majority of respondents agreed, totaling 19 respondents (61.3%), 8 respondents (25.8%) strongly agreed, and 4 respondents (12.9%) were undecided. Meanwhile, regarding the aspect of patients being treated with respect, the majority of respondents agreed, totaling 17

respondents (54.8%), 12 respondents (38.7%) strongly agreed, and 2 respondents (6.5%) were undecided. Overall, the findings show that healthcare staff services at Manipi Community Health Center were perceived as good by most respondents, particularly in terms of friendliness, patience during service delivery, clarity of medical explanations, and respectful attitudes toward patients throughout the healthcare service process.

Waiting Time and Service Efficiency

Table 14. Distribution of Respondents by Waiting Time and Service Efficiency

Statement	Disagree n (%)	Undecided n (%)	Agree n (%)	Strongly Agree n (%)	Total
Waiting time meets expectations	0 (0%)	4 (12.9%)	19 (61.3%)	8 (25.8%)	31 (100%)
The queuing system is orderly	1 (3.2%)	6 (19.4%)	20 (64.5%)	4 (12.9%)	31 (100%)
Service is fast and straightforward	0 (0%)	6 (19.4%)	20 (64.5%)	5 (16.1%)	31 (100%)

Source: Primary Data, 2026

Based on the frequency distribution table on waiting time and service efficiency at Manipi Community Health Center, it is known that, regarding the aspect of waiting time meeting expectations, the majority of respondents agreed, totaling 19 respondents (61.3%), 8 respondents (25.8%) strongly agreed, and 4 respondents (12.9%) were undecided. Meanwhile, on the statement that service is fast and not convoluted, the majority of respondents agreed, totaling 20 respondents (64.5%), 5 respondents (16.1%) strongly agreed, and 6 respondents (19.4%) were undecided. Overall, the findings show that waiting time and service efficiency at Manipi Community Health Center were perceived as good by most respondents, particularly in terms of the queuing system and the service process, which were considered fast and not convoluted. Nevertheless, some respondents still felt that service waiting time needed to be improved for more optimal service.

Perception of Cost and Service Availability

Table 15. Distribution of Respondents by Perception of Cost and Service Availability

Statement	Disagree n (%)	Undecided n (%)	Agree n (%)	Strongly Agree n (%)	Total
Service costs are affordable	1 (3.2%)	1 (3.2%)	17 (54.8%)	12 (38.7%)	31 (100%)

Statement	Disagree n (%)	Undecided n (%)	Agree n (%)	Strongly Agree n (%)	Total
Medicines and services are available	0 (0%)	4 (12.9%)	19 (61.3%)	8 (25.8%)	31 (100%)
Cost information is clear	0 (0%)	2 (6.5%)	21 (67.7%)	8 (25.8%)	31 (100%)

Source: Primary Data, 2026

Based on the frequency distribution table on the perception of cost and service availability at Manipi Community Health Center, it is known that, regarding the aspect of affordable service costs, the majority of respondents agreed, totaling 17 respondents (54.8%) and 12 respondents (38.7%) strongly agreed, while 1 respondent (3.2%) was undecided and 1 respondent (3.2%) disagreed. Meanwhile, on the statement that cost information is clear, the majority of respondents agreed, totaling 21 respondents (67.7%), 8 respondents (25.8%) strongly agreed, and 2 respondents (6.5%) were undecided. Overall, the findings show that healthcare service costs at Manipi Community Health Center were perceived as affordable by most respondents. In addition, the availability of medicines and services and the clarity of cost information were also rated as good, thereby supporting patient satisfaction with the healthcare services provided.

Patient Satisfaction and Loyalty

Table 16. Distribution of Respondents by Patient Satisfaction and Loyalty

Statement	Disagree n (%)	Undecided n (%)	Agree n (%)	Strongly Agree n (%)	Total
Satisfied with the service	0 (0%)	3 (9.7%)	14 (45.2%)	14 (45.2%)	31 (100%)
Willing to return for treatment	1 (3.2%)	2 (6.5%)	13 (41.9%)	15 (48.4%)	31 (100%)
Willing to recommend the health center	1 (3.2%)	3 (9.7%)	14 (45.2%)	13 (41.9%)	31 (100%)

Source: Primary Data, 2026

Based on the frequency distribution table on patient satisfaction and loyalty at Manipi Community Health Center, it is known that, regarding the aspect of being satisfied with the services, 14 respondents (45.2%) each stated agreement and strong agreement, while 3 respondents (9.7%) were undecided. Meanwhile, regarding the willingness to recommend Manipi Community Health Center to family or relatives, 14 respondents (45.2%) agreed, 13 respondents (41.9%) strongly agreed, 3 respondents (9.7%) were undecided, and 1 respondent (3.2%) disagreed. Overall, the findings show that the level of patient satisfaction

and loyalty at Manipi Community Health Center is in the good category. This is reflected in the high willingness of respondents to return to use healthcare services and to recommend Manipi Community Health Center to others.

Discussion

This discussion interprets the research findings in greater depth by linking the empirical findings with relevant theories and previous research findings, thereby comprehensively explaining the service quality conditions at Manipi Community Health Center.

Respondent Characteristics and Their Implications for Service Utilization

The majority of respondents were women of productive age with secondary education. This condition indicates that women remain the dominant group in utilizing primary healthcare services, in line with women's roles in maintaining the health of themselves and their family members. In addition, the secondary education level possessed by respondents provides them with sufficient ability to understand service information, administrative flow, and medical instructions given by healthcare staff, thereby supporting more optimal service utilization. This finding is consistent with the study by Kadek Purnama Sari et al. (2025), which states that sociodemographic characteristics, particularly gender and education level, affect patient perceptions of service quality and behavior in utilizing healthcare services. That study explains that individuals with higher education levels tend to have a better understanding of health information and are more active in utilizing the available healthcare services.

Physical Environment and Service Comfort

The physical environment of first-level healthcare facilities plays an important role in shaping patients' comfort and perception of the services they receive. The study by Sriatmi and Yoga Pramana (2022) reported that aspects of cleanliness, tidiness of service rooms, and waiting room comfort are physical environment components most frequently assessed by patients and influence the overall service quality assessment. The alignment of this finding indicates that, although the physical environment is not the sole determinant of patient satisfaction, adequate facility conditions can support a more positive service experience, particularly for patients who must wait for a certain duration.

Information System and Administrative Process

The information system and administrative process at Manipi Community Health Center were rated as clear and easy to understand by most respondents. The clarity of information related to service flow, registration procedures, and administrative requirements helps

patients understand service stages from the outset, thereby reducing confusion and anxiety when accessing healthcare services. This condition contributes positively to patients' perceptions of the service quality received. This research finding is consistent with the results of the study by Mirnawati et al. (2024), which states that the quality and clarity of service information are significantly related to patient satisfaction, where information that is easy to understand enhances patients' comfort and trust in healthcare facilities.

Service Flow, Waiting Time, and Efficiency

The service flow at Manipi Community Health Center was rated as fairly orderly and well-structured by most respondents. However, waiting time remained the aspect that received the most attention and complaints from patients. The predominance of improvement suggestions related to reducing waiting time indicates that service efficiency has not yet been fully optimized, particularly during peak visiting hours. This condition is likely influenced by the high volume of patient visits, which is not proportional to the number of available healthcare personnel. This finding is consistent with the study by Dewi and Marsepa (2021), which states that waiting time has a significant influence on the level of patient satisfaction at community health centers, where longer service waiting times tend to lower patients' perceptions of healthcare service quality.

Healthcare Staff Services and Interactions

The interaction between healthcare staff and patients received very good ratings from most respondents. The friendliness, patience, and ability of staff to provide medical explanations clearly and understandably were considered to contribute substantially to patient satisfaction. The professional and humane attitude demonstrated by healthcare staff was able to create a sense of comfort and increase patients' trust in the services provided. This finding is consistent with the results of the study by Aini et al. (2025), which states that effective communication by healthcare personnel—encompassing empathy, clarity of information, and respectful attitudes toward patients—has a significant relationship with the level of patient satisfaction at community health centers. The alignment of this finding indicates that the quality of staff–patient interaction is one of the important factors in improving the quality of primary healthcare services.

Aspects of Privacy, Confidentiality, and Service Security

The aspects of privacy, confidentiality, and service security at Manipi Community Health Center were perceived as good by most respondents. Patients felt that their personal health information was well protected by staff during the registration process, examinations, and

medical service delivery. The implementation of confidentiality principles provides patients with a sense of safety in openly disclosing their complaints and medical history. In addition, the arrangement of service rooms that takes privacy into account, such as separation of examination areas and restrictions on access by unauthorized parties, also supports patients' positive perceptions of service quality.

Nevertheless, the findings also indicate that the environmental security aspect still requires improvement so that patients' sense of safety can be more optimal, particularly with respect to comfort during waiting and patient mobility within the service area. This condition indicates that the protection of privacy and security relates not only to the confidentiality of medical information but also encompasses physical safety while in the healthcare facility. This finding is consistent with the national study by Adi Sutrisno and Arief Budiono (2025), which emphasizes that the protection of patient rights and privacy—including the guarantee of medical data confidentiality and security during the receipt of services—is an essential component in improving the quality of healthcare services and in building patient trust in primary healthcare facilities. The alignment of this finding indicates that efforts to strengthen the privacy protection and security systems at community health centers play a strategic role in enhancing patient satisfaction and loyalty.

Perception of Cost and Service Availability

The perception of service cost was rated as affordable, particularly with the support of the National Health Insurance (JKN). The JKN financing system plays a role in reducing patients' direct cost burden when accessing primary healthcare services, thereby supporting respondent satisfaction with community health center services. In addition, the availability of medicines and adequate medical services further reinforce positive perceptions of service quality. This finding is consistent with the literature review by Lesmana et al. (2025), which states that JKN improves access to healthcare services and provides financial protection, although equitable service quality and availability remain a challenge.

Satisfaction, Loyalty, and Implications for Service Improvement

The relatively high level of patient satisfaction and loyalty is reflected in respondents' willingness to return for treatment and to recommend the health center to others. Patient loyalty is an important indicator of the success of primary healthcare services because it reflects a service experience perceived as positive over time. Nevertheless, the presence of improvement suggestions related to waiting time, waiting room facilities, and the availability

of healthcare personnel indicates that continuous service quality improvement remains necessary.

This finding is consistent with the study by Meisyaroh S et al. (2023), which states that although most patients rated the services and communication of healthcare staff at the community health center as good and the level of satisfaction was considered high, there were still service aspects that required continuous improvement. That study emphasized that healthcare staff services and communication have a significant relationship with patient satisfaction, such that high satisfaction does not mean that services are flawless; rather, services must continue to be evaluated and improved in accordance with community expectations. Accordingly, the results of this study reinforce the notion that service quality at the community health center can be categorized as good, but improving service efficiency and supporting facilities remain priorities for maintaining and enhancing patient satisfaction and loyalty.

Primary Healthcare Service Quality Improvement Model

Based on the findings, the primary healthcare service quality improvement model at Manipi Community Health Center consists of five main components:

1. **Strengthening Service Communication**

   This includes enhancing the communication skills of healthcare staff, providing clear service information, and strengthening the empathetic and friendly attitude of healthcare staff.

2. **Improving Waiting Time Efficiency**

   This is carried out through strengthening the service queuing system, regulating service schedules, and adding healthcare personnel during peak visiting hours.

3. **Developing Supporting Facilities**

   This includes improving waiting room comfort, adding seating, improving room ventilation, and providing accessibility for disabled patients.

4. **Strengthening Patient Privacy and Security**

   This is carried out through strengthening patient data protection systems, arranging more private consultation rooms, and improving the security of the service environment.

5. **Enhancing Healthcare Human Resource Competence**

   Through training on service excellence, effective communication, patient safety, and strengthening of a service culture based on patient satisfaction.

KESIMPULAN DAN REKOMENDASI

Patient perceptions of healthcare service quality at Manipi Community Health Center are generally within the good to very good category. The most positively rated aspects of services include the friendliness of healthcare staff, clarity of service information, affordability of costs, ease of service access, and the implementation of patient privacy and confidentiality.

However, service waiting time, limited waiting room facilities, and accessibility for disabled patients remain aspects that need to be improved. Based on the findings, a primary healthcare service quality improvement model was developed, consisting of strengthening service communication, improving waiting time efficiency, developing supporting facilities, strengthening patient privacy and security, and enhancing healthcare human resource competence.

Based on the research findings, Manipi Community Health Center needs to improve service efficiency through strengthening the queuing system and service-time arrangement, adding supporting facilities such as waiting-room seating, ventilation, and accessibility for disabled patients. Healthcare staff need to receive continuous training in service excellence and effective communication. The local government is expected to support the improvement of community health center service quality through the provision of resources and periodic monitoring of service quality. Further research is expected to develop service quality improvement models using analytical approaches and larger sample sizes.

REFERENSI

1. Adi Sutrisno, & Arief Budiono. (2025). Perlindungan Hukum Dalam Kualitas Pelayanan Medis Terhadap Hak Dan Privasi Pasien Rawat Inap (Studi Kasus Di Rumah Sakit Umum Daerah Provinsi Papua Barat). Sehat Rakyat: Jurnal Kesehatan Masyarakat, 4(2), 311–329. https://doi.org/10.54259/sehatrakyat.v4i2.4346
2. Aini, Y. N., Kelana Setiadi, D., & Rosyda, R. (2025). Hubungan Komunikasi Efektif Tenaga Kesehatan Dengan Kepuasan Pasien Rawat Inap Di Puskesmas Tanjungsari.
3. Askarila, A. A., & Kholidah, D. (2024). Puskesmas Batu Kota Batu. Jurnal Informasi Kesehatan Indonesia, 10(2).

4. Chaniago, T., & Agustina, D. (2023). Analisis Mutu Pelayanan Kesehatan Terhadap Kepuasan Pasien Jaminan Kesehatan Nasional (JKN) Rawat Jalan Di Puskesmas Simalingkar Kota Medan, 7, 21475–21487.

5. Dewi, M. O., & Marsepa, E. (2021). Pengaruh Waktu Tunggu Terhadap Kepuasan Pasien Di Puskesmas Mauk Kabupaten Tangerang Banten. Nusantara Hasana Journal, 1(7).

6. Hendra Pratama, N., Gusti Irawan, A., Prayatna, S., Luthfiah, M., & Pramita Gurning, F. (2023). Mutu Pelayanan Jaminan Kesehatan Nasional (JKN) Dalam Meningkatkan Kepuasan Pasien Di Fasilitas Kesehatan Tingkat Pertama.

7. Kadek Purnama Sari, N., A. Rumayar, A., & E. C. Korompis, G. (2025). Hubungan Karakteristik Peserta JKN Dengan Pemanfaatan Pelayanan Puskesmas Di Wilayah Kerja Puskesmas Sario Kota Manado, 6(2).

8. Kirana, A., Harahap, S. G., & Efkelin, R. (2024). Hubungan Waktu Tunggu Dengan Kepuasan Pasien Rawat Jalan Di Rumah Sakit Umum Daerah Cengkareng Tahun 2024. Journal of Public Health Sciences, 13(2), 198–208. https://jurnal.ikta.ac.id/index.php/kesmas

9. Lesmana, I., Tasya Br Ginting, I., Dewi, J., Siahaan, S., Rumapea, R., Khris, Y., & Saragih, C. (2025). Tinjauan Literatur Tentang Program Jaminan Kesehatan Nasional (JKN) Sebagai Kebijakan Publik Dalam Pelayanan Kesehatan Di Indonesia. Jurnal Ilmiah Ekonomi Dan Manajemen, 3(12), 264–277. https://doi.org/10.61722/jiem.v3i12.7460

10. Mastra Dewa Saputra, D., Partina, A., & Amallia, B. A. (2025). Cakrawangsa Bisnis Pengaruh Kualitas Pelayanan Terhadap Kepuasan Pasien Pada Puskesmas Tanjungsari Di Gunungkidul, Daerah Istimewa Yogyakarta. In Bunga Alfausta Amallia (Vol. 6, Issue 1).

11. Meisyaroh S, M., Murtini, M., & Haslinda, H. (2023). Kepuasan Pasien Pada Pelayanan Kesehatan Di Puskesmas. Jurnal Ilmu Kesehatan Masyarakat, 12(03), 238–245. https://doi.org/10.33221/jikm.v12i03.1853

12. Mirnawati, Ida Puspita Sari, D., Rafli Aidillah, M., & Supriyatno, A. (2024). Hubungan Kualitas Informasi Pelayanan Dengan Tingkat Kepuasan Pasien Di Puskesmas Air Putih Samarinda.

13. Saktio Pratama, A., Nurwidji, & Fardiansyah, A. (2023). Analisis Pengaruh Kualitas Pelayanan Terhadap Kepuasan Pasien Di Puskesmas Gayaman Kabupaten Mojokerto.

14. Sriatmi, A., & Yoga Pramana, L. D. (2022). Faktor Lingkungan Fisik Dan Dimensi Tangibles Pelayanan Terhadap Niat Kunjungan Ulang Ke Puskesmas Di Kabupaten Demak. Jurnal Kesehatan Lingkungan Indonesia, 21(2), 235–244. https://doi.org/10.14710/jkli.21.2.235-244

15. Yantika, C., Luvia Harmen, E., & Mohammad Natsir Bukittinggi, U. (2024). Hubungan Waktu Tunggu Dengan Kepuasan Pasien Rawat Jalan Di Rumah Sakit Islam Ibnu Sina Bukittinggi. JPAMS: Journal of Public Administration and Management Studies, 2, 15–19. https://journal.umnyarsi.ac.id/index.php/jpams