

SERVICE EXPERIENCE BY THE BUGIS ETHNIC ON HEALTH SERVICES PROVIDED IN PUBLIC HOSPITALS IN SOUTH SULAWESI

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Abstract

Background: Quality of health services is an important issue, access to quality services are considered insufficient, as an element that is very necessary to improve health. Assessing quality of health services means reviewing customer satisfaction. Customer satisfaction is one indicator of a quality service, to assess this, measurement feedback need from patients as customers.

Objective: This study aimed to assess customer's satisfaction when attending public hospitals and to elicit their experiences according to themes that match the philosophies of the ethnic Bugis.

Methods: In depth interviews had been conducted on 50 patients and relatives at 3 public hospitals commonly visited by the ethnic Bugis in South Sulawesi.

Results: Several emerged themes that matched with the Bugis philosophies are service experiences such as *sipakatau* (mutual respect), *marenreng perru'* (loyal), *mamase'* (emphaty), and *macca'* (smart creative). Concerns on the quality and timely provision of healthcare services were raised. There were complaints on the attitude of health professionals. Similarly, many had experienced long waiting hours and were not happy with the facilities at the hospitals.

Conclusion: Patient's expectations regarding the provision of healthcare services at the Government Hospital in South Sulawesi are well suited with the Bugis philosophy.

Keywords: Patient, Service experience, Ethnic Bugis, Regional Public Hospital

Introduction

The health industry is considered one of the most challenging sectors. This is a globally growing industry that includes countless hospitals, clinics, and institutions intended to provide basic, secondary and tertiary patient care. More than 10% of the developed country's gross domestic product (GDP) is consumed by the health industry. Worldwide, patients, doctors, and governments are

increasingly concerned about the quality of health services (1).

The quality of health services is an important issue, access to quality services is considered insufficient, as an element that is very necessary to improve health. Assessing service quality means reviewing customer satisfaction. Customer satisfaction is one indicator of quality service. Hospitals in South Sulawesi

must maintain the quality of their services in providing services to customers consisting of several tribes namely Bugis, Makassar, Mandar, Toraja. One of the most dominant tribes in the area of South Sulawesi is the Bugis tribe. The Bugis people uphold their philosophy, namely *Sipakatau*, *Marenreng Perru*, *Mamase*, *Malempu'*.

In addition, service experience is more important, varied, complex, and personal to health services and consumers really want proof of competence and hospital services, especially in a competitive environment (2).

Based on the above, this study looked on the service experience of ethnic Bugis patients towards the health services provided by the public hospitals in South Sulawesi.

Materials and Methods

This research was conducted at Siwa Hospital, Andi Makassar Hospital, and Tenriawaru Hospital as a representative of all public hospitals in South Sulawesi Province. This was a qualitative study whereby in Depth Interviews were conducted with patients and their families who had received treatment from the three hospitals.

The interviews were guided by a list of questions to be asked. Respondent's answers were documented and analyzed through themes developed according to, what they had experienced when utilizing the healthcare services and their suggestions on improvement to deliver the health services. These themes were matched with the philosophies of ethnic Bugis which emphasized on *sipakatau* (mutual respect), *marenreng perru'* (loyal), *mamase'* (emphaty), and *macca'* (smart creative).

Results

Siwa District Regional Public Hospital Wajo District is a Regional Public Hospital owned by the Wajo Regency. Siwa Hospital provides outpatient services such as poly internal medicine, poly surgery, dental poly, general poly, Mother and Child services, Medical Rehabilitation and Physiotherapy as well as

inpatient services. Outpatient services are carried out by existing polyclinic units, complete with specialist doctors. Besides that, it is supported by supporting units including laboratory units, radiology, ICU, nutrition and also pharmacy and emergency care services that serve 24 hours, and emphasize more on aspects of social services to the community, especially people who are below the poverty line and at the same time as hospitals references within the scope of Wajo Regency and districts directly adjacent to Wajo district. in Siwa having 76 beds with an average occupancy rate 68% per year (3). From the survey results of patient satisfaction in Inpatient Installation, namely in 2016 the patient satisfaction rate was 81.04% and in 2017 there was a significant increase of 82.22% (4), even though this number was not in accordance with Minimum service standards at hospitals are set at $\geq 90\%$ (5).

Tenriawaru Regional Public Hospital Bone District is a government-owned hospital in Bone Regency located on Dr. Wahidin Sudirohusodo Street at Watampone and includes type B Hospital having 323 beds. Tenriawaru Hospital supports health services according to Regent Bone Regulation Number 32 of 2010 concerning Minimum Service Standards (SPM) in Tenriawaru Hospital Class B Bone district namely outpatient installation services, installation hospitalization, emergency department, radiology, laboratory, physiotherapy, pharmacy, and excellent services for labor and perinatology or called PONEK and Hemodialysis (6). From the report on patient satisfaction survey at the Inpatient Service Unit in Tenriawaru Regional Public Hospital, Bone Regency is 21.03% stated that they were Very Satisfied, as many as 74.09% expressed satisfaction, as much as 4.18% stated they were dissatisfied, as much as 0.43% stated they were not satisfied, and 0.26% stated that they were very dissatisfied (7).

Andi Makassar Hospital became one of the referral hospitals in South Sulawesi Province so that on May 7, 2009, Andi Makassar Hospital in the City of Pare-pare was upgraded to a Non-

Educational Type B Hospital based on the Decree of the Minister of Health of the Republic of Indonesia. Andi Makkasau Hospital Having 250 beds and serves health services, including Management Administration, Medical Services consisting of Internal Medicine Specialists, Surgeons, Obstetrics & Gynecologists, Orthopedic Specialists, Pediatricians, Skin and Sex Specialists, Nerve, Ear, Nose Throat (ENT), Ophthalmologists, oncologists, psychiatrists, anesthesia specialists, cardiologists, pulmonary specialists, emergency services, nursing services, medical records, pharmacy, K3 (occupational health and safety), radiology, physiotherapy, laboratories, operating rooms, hemodialysis, and control Infection at Hospital and High-Risk Perinatal (8). From the report on the patient satisfaction survey conducted in the Inpatient Unit of the Andi Makassau Regional Public Hospital in 2017, 78,9% stated that they were Very Satisfied, as many as 20.6% stated they were Satisfied, and 0,5% stated that they were Dissatisfied (9).

a. Characteristics of Informants

A total of 50 informants were interviewed from the 3 regional public hospitals in South Sulawesi; 66% (33) and 34% (17) male and female, with an age range of 25-75 years.

Theme 1: Reliability of Healthcare services and mutual respect (*Sipakatau*)

Some of the informants had conveyed their concerns regarding the quality of healthcare services that are provided; specifically pertaining to competency of the doctors to reduce the transfer out of patients and should be more diligent in visiting patients.

"For me, I want to be checked by the doctor early in the morning (visite) because so many hours of rest in the afternoon" (Informant 3)

"We should get, how does the hospital provide experts and expert doctors so that we are not referred to outside" (Informant 6)

In addition, they were complaining on the long waiting hours to be seen by the doctor.

"For me, in terms of service at the hospital, this is treated less. Doctors come to check up, or visit here so it is improved, so how many hours

have I waited here? The doctor has never come at all, only nurses have come" (Informant3)

The attitude of the health professionals was also the issue raised.

"Well... if possible nurses or doctors would be able to use a little local language because we don't really understand that Indonesian is all, more regional people used to come here" (Informant 1)

"Well ... hope in the future to be better, more maximal again, the doctor as long as it is needed can be present" (Informant 3)

b. Theme 2: Healthcare service Experiences and loyalty (*Mamase*)'

Issue on limited time spent for counseling by the doctors was one of the experiences mentioned especially during peak hours when the clinics were crowded.

"My experience after my child was treated here, for example, the doctor wasn't there on the day off, usually not a doctor but nurse, my advice is better if the doctor is there at the day off" (Informant 4)

Some of the informants said that they were discriminated in terms of the urgency of the services provided based on their health insurance status. They wanted the hospital to differentiate services provided to patients with health insurance (BPJS) from the general patients.

"In terms of service in hospitals like doctor cared less and came late to check up, so how many hours I waited here doctors had never entirely come" (Informant 3)

"We have Health Insurance (BPJS), if possible, pay more attention if possible to improve services for Health Insurance (BPJS) patients, so now there is a difference with the general" (Informant 8)

Some of the informants had good experience when sought treatment at one of the hospitals (Andi Makkasau Hospital Pare Pare).

"Sometimes we need nurses, but nurses are already there in front of me did not know they break or where to go" (Informant 3)

"If experience - I have had the experience of taking my mother to Fatimah Hospital, where the nurse is good, caring about how to bathe

the nurse who is also helping, if this is not the case, if at the Fatimah Hospital, we clean the patient in the morning, but the nurse himself, the cleanliness is better there" (Informant 7)

c. Theme 3: Types of services provided and availability of supporting facilities (Macca')

There was also a concern on the availability of some health services and quality of supporting facilities.

"Yesterday, when my brother happened to have a nurse who did not understand his condition, he asked for help, there was a problem with the oxygen tube, so I said please give a little better because it was jammed three times already" (Informant 2)

"If you want to be operated on, there are equipment that don't exist, it's good to have the equipment so that I won't be referred to Lamadukelleng Regional Public Hospital, Sengkang Regency, enough to be treated or operated on Siwa Regional Public Hospital only" (Informant 9)

"Maybe it's a fan or air conditioner, because it's hot here, the patient is also very hot" (Informant 3)

Although in general they feel that the types of services or other supporting facilities should be improved, some praised the hospital Tenriawaru Regional Public Hospital Bone Regency, which has so far been quite good in terms of types of services and well equipped and thus made them feel comfortable.

"I think it's enough for the services provided at this hospital, I am quite satisfied" (Informant 2)

"Well ... if we are here it is comfortable" (Informant 1)

Hospitals with enough facilities and well equipped were appreciated by the informants but there were concerns on the maintenance and cleanliness of the facilities.

"Well... maybe if cleaning problems should be cleaned" (Informant 7)

d. Theme 4: Hospitality to Visitors of Patients (Marenreng Perru') (family and friends' involvement)

In general, the informants were satisfied with the visiting hours allocated so that relatives and friends to visit patients. They consider the visits are important for emotional support to patients.

"It seems that the visiting hours will be added, meaning that if you add the visiting hours, I am happy if a lot of families come to visit, if all those who come will pray" (Informant 1)

"Keeper of the patient or visiting hours should not be limited, to guard the patient may be adjusted to the patient's condition if a guard or two guards enough" (Informant 1)

Discussion

This research shows that generally customers or patients have always been the main focus in health services at any health facility. Patient satisfaction is one of the determining factors for the success of a health service; through patient experience one can assess the extent to which they receive health care or services, needs and desires, and values that can describe the quality of health services.

In this study, health services that should be available in hospitals are reliable and excellent health services for all aspects, both in terms of the provision of service, treatment, information, communication, and education. Service provider can respect each other (patient or patient), if they try to understand the obstacles experienced by patients in terms of communication. Malott et al. states that patients want to be informed, can speak according to their will and could participate actively on the decision for treatment choice (10).

Patients' experiences during hospitalization are very diverse, but the experiences most felt to be not optimal by patients are the level of care provided by the nurses and the time allocated by doctors to consult the patient's family. The hospitals should not distinguish health services based on health insurance or general patients. Further to adjusting

customer service experience, a conceptual model was developed to explore how the service climate perceived by organizations affects the three main variables in implementing adaptive service experiences, namely empathy, anticipation and creativity (11).

In the current era of globalization, consumers are smart and creative enough to choose what services they need and want from hospitals, especially with the existence of technology and information so rapidly that they easily access information related to health services while being hospitalized. The top six recommendations are new facilities, private rooms, food on demand for interactive computers, unlimited hours of visits, and more quiet time so patients can rest (12).

Service providers must recognize and respect friends and family who are a source of support for customers (patients), especially in Bugis ethnic who have the *Siri Na Pecce* ideology which includes the nature of *Marenreng Perru'*, namely loyal. Clinical, interpersonal and communication skills are needed to ensure that patients are safe, comfortable, cared for and included in care planning will not only provide patient satisfaction, but also gratitude. When health professionals attending patients are rewarded by showing gratitude gestures, they are likely to continue to give their best (13).

Conclusion and Recommendation

This study had showed that patient's expectations regarding the provision of healthcare services at the Government Hospital in South Sulawesi, are well suited with the Bugis philosophy. However, there are many areas of concern emerged which can be improved such as the professionalism of the health personnel and conditions of the treatment facilities. It is recommended that the hospitals conduct routine surveys or measurements of patient satisfaction and continuously make improvements.

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References

1. Talib F & RZ. An interpretive structural modelling for sustainable healthcare quality dimensions in hospital services. *Int J Qual Res Serv.* 2015;2(1)(June):28-46. DOI: 10.1504/IJQRS.2015.069780.
2. Berry LL, Wall EA & Carbone LP. Service clues and customer assessment of the service experience: lessons from marketing. *Acad Manag Perspect.* 2006;20(2):43-58.
3. RI Ministry of Health. Guidelines for preparing minimum service standards at hospitals. Indonesia: RI Ministry of Health; 2012.
4. Siwa Regional General Hospital. Profile of RSUD Siwa. Wajo Regency, South Sulawesi. 2017.
5. Siwa Regional General Hospital. Siwa Hospital Satisfaction Survey Report. Wajo Regency, South Sulawesi. 2017.
6. Tenriawaru Hospital. Profile of Tenriawaru General Hospital. Bone Regency, South Sulawesi. 2016.
7. Tenriawaru Hospital. Tenriawaru Hospital satisfaction survey report. Bone Regency, South Sulawesi. 2016.
8. Profile of Andi Makkassau Regional Hospital. Pare-Pare, South Sulawesi. 2017.
9. Report on the Andi Makkassau Hospital Patient Satisfaction Survey. Pare-Pare, South Sulawesi. 2017.

10. Malott D & Ayala L. The root of all satisfaction, patients want caregivers who provide information and compassion. Press Ganey Aust Satisf Snapshot. 2014.
11. Wilder KM, Collier JE & Barnes DC. Tailoring to customers' needs: understanding how to promote an adaptive service experience with frontline employees. *J Serv Res*. 2014. DOI: 10.1177/1094670514530043.
12. Merlino JRA. Understanding the drivers of the patient experience. *Harv Bus Rev*. 2013. Available from: <https://hbr.org/2013/09/understanding-the-drivers-of-the-patient-experience>.
13. Torpie K. Customer service vs. patient care. *Patient Exp J*. 2014;1(2). Available from: <http://pxjournal.org/journal/vol1/iss2/3>.