



© Copyright Kemala Publisher
All rights reserved

Science, Engineering and Social Science Series
ISSN/e-ISSN: 2541 – 0369/2613 – 988X
Vol. 4, No. 4, 2020, Printed in the Indonesia

The Influence of Competence, Service Performance Through A Service Quality Over Midwife units in Banten Hospital

Theresia Sri Lestari^{1*}, CSP Wekadigunawan¹, Endang Ruswanti¹
¹Hospital Administration Management, Esa Unggul University, Jakarta

The main problem in this study is faced by the Indonesian nation is health problems in the group of mothers and babies. Here, the patients' perceptions have competence of midwives, a service performance were needed to assess the quality of service in the midwifery unit at Banten Hospital (RSUD Banten). Thus, there is an effect of perceptions of the quality of midwifery services on patient satisfaction at the Barru Sulawesi Hospital inpatient. The purpose of this study was to analyse the influence of the competence of midwives, the performance of midwifery services on the quality of service in the midwifery inpatient unit Banten Hospital (RSUD Banten). In this study, the quantitative research method involved a sample of 150 people. The data were processed using the Path statistical test (path analysis) of the Amos program. The results showed that there was no positive effect of midwifery competence on the quality of midwifery services, there was a positive effect of midwifery competence on the performance of midwifery services with a positive effect of midwifery service performance on the quality of midwifery services. It was found that patients in the midwifery ward did not directly experience the quality of midwifery services through the competence of midwives. The competence of midwives first affects the performance of midwifery services and then affects the quality of midwifery services. Improving the quality of midwifery services is a top priority due to patient perceptions of the good quality of midwifery services will have an impact on the good performance of midwifery services and the level of competency of midwives in hospitals. Managerial implications become input for the midwifery inpatient room of Banten Hospital, the need to improve the competence of midwives in techniques for better education and midwifery services through training and minimizing deficiencies to improve the quality of midwifery services according to patient expectations.

Keywords: Competency, Service Performance, Service Quality

1. INTRODUCTION

Currently the main problem faced by the Indonesian nation is health problems that occur in groups of mothers and babies, one of the hospital performances that need to be assessed is the performance of maternal and infant health services, childbirth and infant development [1]. The hospital is also a health service institution that organizes complete individual health services that provide inpatient, outpatient and emergency services [2]. Improving the quality of midwifery services is a top priority at Banten Hospital, this is important because the patient's perception of the good quality of midwifery services will have an impact on the patient's assessment of the good performance of hospital services while the implementation is difficult. The level of midwife's competence also affected through the midwifery good

performance services in hospitals. Here, RSUD Banten requires competent midwives to achieve results efficiently and effectively. The competence of the midwife is very important due to allow the human resource system to concentrate on the factors that directly contribute to the success of the organization. The practice of identifying and applying competencies helps midwives understand the condition of the hospital where their efforts will improve or enhance their performance and this will improve or enhance the hospital's performance. The problems identification obtained from this study is the low achievement of the Bed Occupancy Ratio (BOR) of <50% and below the target achievement of 60% - 85% and the low achievement of Average Length of Stay (ALOS) is <3 days and below the achievement target of 6 to 9 days with a high Bed Turn Over (BTO) around 71.8 times / year from the target or standard of 40-50

*Email Address: tari_phjcab.serang@yahoo.com

times / year in the midwifery inpatient room of RSUD Banten. There has been a decrease in the number of new obstetric patient visits from 2017 of 66.99%, decreasing to 56.68% in 2018 at Banten Hospital. The Data of Banten Regional Hospital shows that a high maternal mortality due to bleeding is 1.88%, eclampsia is 11.11%, the high rate of delivery assistance through SC is 24.14%, and delay during SC surgery is 14%. Data on employees who receive training for at least 20 hours a year with no achievement = 0 and indicators of the midwifery quality services does not met the achievement targets or standards set at Banten Hospital. Thus, this study aims to analyze the midwife effect on competence, service performance also quality of midwifery services over inpatient room at Banten Hospital (RSUD Banten), West Java, Indonesia. A five dimensions that can be used to measure service quality were reliability related to reliability. The Responsiveness related on assurance and guarantee gives a sense of confidence while empathy related to understanding and paying attention also physical evidence (tangibles) relates to the display of good attributes or direct evidence. Negative influence between human resource competence and service quality at the NU Cipta Husada Hemodialysis Clinic [3, 4]. Here, a significant effect of service performance at Medika Permata Hijau Hospital with the quality of services provided [5, 6].

2. METHODOLOGY

This research uses quantitative research methods using an analytic survey approach. The correspondent members in this study is a mother who gave birth, mothers with obstetric cases who were inpatients of obstetrics at Banten Hospital in all classes such as grade I, II, and III with 158 correspondents. Furthermore, the sample in this study was the entire population that met the inclusion and exclusion criteria, as many 150 people. The inclusion criteria for the sample of this study were mothers who gave birth, mothers with cases of midwifery who were treated in the midwifery ward > 1 day were willing to be samples of this study is able to answer research questions. Meanwhile, the exclusion criteria were patients who were employees of Banten Hospital and patients who refused to be the sample of this study. We use data collection technique with questionnaires from influence of midwife competence and performance midwifery services on midwifery quality services at Banten Hospital. Here, the questionnaire is use direct and closed questionnaire which is a questionnaire that is peppered by providing the answer options, so that the respondents just have to choose. The questionnaire in this study is consisted of four groups of questions were with the characteristics of respondents, measuring perceptions of midwifery services quality, competence of midwives and the performance of midwifery services in hospitals.

The questionnaire was developed by the researcher by referring to existing references, therefore it was tested for validity and reliability. Validity and reliability tests in this study were conducted at RSUD X, with a sample size of 30 respondents (questionnaire testing) The hypothesis design proposed in this study is as follows:

- a. $H_0; b_{1,2,3} = 0$, meaning that the competence of midwives and the performance of midwifery services did not affect the quality of midwifery services
- b. $H_1; b_{1,2,3} \neq 0$, which means that the midwife's competence and performance of midwifery services have an effect on the quality of midwifery services.

Thus, the research hypothesis is:

- a. $H_1 =$ *There is an effect of midwife competence, midwifery service performance, on the quality of midwifery services at Banten Hospital.*
- b. $H_2 =$ *There is an effect of the competence of midwives on the quality of midwifery services at Banten General Hospital*
- c. $H_3 =$ *There is an effect of the competence of midwives on the performance of midwifery services in RSUD Banten.*
- d. $H_4 =$ *There is an effect of the performance of midwifery services on the quality of midwifery services at Banten General Hospital.*

3. RESEARCH AND DISCUSSION

To achieve the result, we obtain 150 respondents from patients in 20 to 35-year age group were the largest age group who filled out the questionnaire. Furthermore, the 72.6% respondent is a female patient from high school education with religion Muslim around 99.3%. Here, the marital status of all is married and occupation of the patient is mostly housewives by 52% with the characteristics of patient payments were mostly using Indonesian National Assurance (BPJS) of 52% with the class of patient mostly in the class III 82.6%.

A. Validity and reliability test results.

The results of the validity and reliability tests were obtained from the variables of midwifery service quality, service performance and midwife competence which consisted of 31 valid statements and the reliability results were reliable or reliable.

B. Descriptive analysis

Descriptive analysis in this study was obtained with the Three Box Method formula. The following is the recapitulation matrix of the calculation results of the Three Box Method (see Table I).

Table I. Matrix Recapitulation of Three Box Method Calculation Results

Variable	Three Box Method Position			
	Low	Middle	High	Note
Service Quality	342 (poor /low)	491,5 (worth)	621,5 (great)	595 (great)
Service Performance	-	-	636 (great)	636 (great)
Midwife Competencies	-	529 (worth)	633,3 (competent)	626,4 (competent)

The results of this study indicate that the quality of midwifery services is known that the average score for the variable quality of midwifery services around 595 and it is included in the high category. This means that respondents' inpatient midwifery RSUD Banten fully stated that the quality of midwifery services was good. However, there is 1 respondent's statement with a low score of 342, it is about the hygiene of the patient's bathroom which is less clean. This means that it is still felt that the quality of service has not matched with expectations of patients in keeping the patient's bathroom clean. Based on the 4 statements of respondents with a moderate score, they said it was quite good, it was about the midwife immediately replacing the patient's infusion fluids that had run out, the midwife responded to the patient's complaints not by grumbling, the midwife helped the patient go to the bathroom to change clothes, eat or drink if needed and there were tools available. a tool the patient's basic needs to urinate or defecate, for patients who have to rest in bed. This means that there were still services provided by midwives that have not been good according to the expectations of patients in the midwifery ward of Banten Hospital. Meanwhile, in the midwife competency, it is known that the average score for the competency variable is 626.4 and it is in the high category. This means that the midwifery inpatient respondents at Banten Hospital fully stated that the midwife's competence was good.

However, it was found that there was a midwife's behavior with 1 moderate score statement of 529, it is about midwives providing midwifery counseling. This means that midwives were not yet fully good at providing midwifery counseling to patients in the midwifery ward of RSUD Banten.

C. Hypothesis test

The data analysis technique used the Amos Path Program analysis. After statistical tests were carried out, the data obtained can be processed using the Path analysis test using the Amos program. The variable of midwifery service quality, midwifery service performance and midwife competence, for the quality of midwifery service consists of 5 indicators, consists of reliability, responsiveness, assurance, empathy and direct evidence. The midwifery service performance variable consists of 4 indicators, consists of timeliness, information, technical

ability and environment. Then for the midwife competency variable consists of 2 indicators, they were skills and attitudes of midwives in providing education to patients. The number of statements contained in the questionnaire is 51 statements and processed using Amos equation (see Figure 1 and Table II).

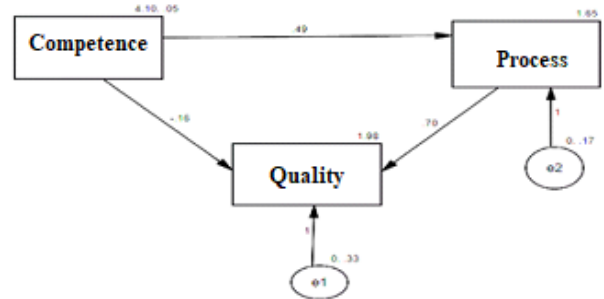


Figure 1. Amos architecture to process hypothesis parameters

Table II. Results of P Value in Amos Calculation

Variable	Estimate	S.E.	C.R.	P	inf
Competence to Performance	.493	.180	2.739	.006	(H ₂) Accept
Competence to Quality	-.162	.257	-.629	.529	(H ₁) Null
Performance to Quality	.703	.139	5.061	***	(H ₃) Accept

The following is the total effect of the relationship between the midwife competency variables on the quality of midwifery services: The direct effect of the relationship between the midwife competence variable and the quality of midwifery service is 0,000 and the indirect effect of the midwife competency variable on the quality of midwifery service through midwifery service performance is 0.126. So, the value of the indirect effect is greater than the direct effect, this proves that the performance of midwifery services is an intervening variable that relates the competence of midwives to the quality of midwifery services. In this study, there was no positive effect of the competence of midwives on the quality of midwifery services in the midwifery ward of Banten Hospital. So, the competence of midwives in the midwifery ward of Banten Hospital does not directly affect in quality of midwifery services, patients more directly find the quality of midwifery services through performance of midwifery services, so that the midwife's competence for patients in the midwifery ward of Banten Hospital is not too important to affect quality midwifery services, even though the results of direct interviews showed the patients stated that the midwives were good. The R² relationship between the midwife competency variables and the quality of midwifery services were: $(- 0.16)^2 \times 100 = 2.56\%$. This means that there were 97.44% of other factors that affect midwifery quality services apart from the competence of midwives such as patient satisfaction, patient loyalty, midwife workload.

The results of hypothesis testing showed that H_2 and H_3 were accepted but H_1 was not accepted, so that there was a positive influence between the competence of midwives on the performance of midwifery services in the midwifery ward of RSUD Banten. R^2 of the relationship between the midwife competency variables and the performance of midwifery services were: $(0.49)^2 \times 100 = 24.01\%$. This means that there were as many as 75.99% of other factors that affect the performance of midwifery services apart from the competence of midwives such as leadership, professionalism, work systems, work mechanisms and organizational actors. The test results were supported by the descriptive test results of the competency variable of midwives who have a high category average score and midwifery service performance is also in the high category. This means that respondents stated that the competence of midwives was good and the performance of midwifery services was also good. Based on the respondent's statement of the This is same as a previous study found that competence had a positive effect on the performance of inpatient nursing crew, workload had a negative and significant effect on the implementation of inpatient nursing crew at Dr. Slamet Garut.

The results of hypothesis testing showed that the performance of midwifery services and the quality of midwifery services were accepted, so there was a positive influence between the performance of midwifery services on the quality of midwifery services in the midwifery ward of RSUD Banten. R^2 of the relationship between the performance variables of midwifery services to the quality of midwifery services were: $(0.70)^2 \times 100 = 49\%$. This means that 51% of other factors affect the quality of midwifery services such as patient satisfaction, patient loyalty and workload. The test results were supported by the descriptive test results of the midwifery service performance variables which have an average high category score and the midwifery service quality is also in the high category. This means that respondents stated that the performance of midwifery services was good and the quality of midwifery services was also good. This is the same as stated in the previous study there is a significant effect of service performance at Medika Permata Hijau Hospital with the quality of services provided.

4. CONCLUSIONS

Based on the results of this study, it can be concluded Patients in the midwifery ward of RSUD Banten do not directly experience the quality of midwifery services through the competence of midwives. The competence of midwives first affects the performance of midwifery services and then affects the quality of midwifery services. So, the higher the level of competence of midwives, the higher the performance of their services, and the higher the level of performance of midwifery services, the higher the quality of midwifery services at Banten Hospital. There is no positive influence between the competence of midwives on the quality of midwifery services in the

midwifery ward of RSUD Banten. There is a positive influence between the competence of midwives on the performance of midwifery services in the midwifery ward of RSUD Banten. There is a positive influence between the performance of midwifery services on the quality of midwifery services in the midwifery ward of RSUD Banten. Based on the results of this study, the suggestions given were adding other indicators for the midwife workload variables and patient loyalty in this study such as the interest of midwifery patients to come back for treatment and continue to do the same activities in the future to Banten Hospital, either continuously meaning that patients will appreciate their loyalty by subscribing and using products or Banten Hospital services in a sustainable manner, because the better the quality of midwifery services, the greater the level of loyalty and the quality of service plays an important role in increasing patient loyalty. Adding to the wider population in this study such as to all RSUDs in the Banten province. It is recommended to the inpatient midwifery unit RSUD Banten on reliability, it is necessary to conduct competency tests for midwives, include midwives in training on midwifery education and handling midwifery cases and conduct case studies or midwifery seminars. In terms of responsiveness and assurance, it is necessary to improve the skills of midwives in the management of education provision by means of competency tests, improve education by providing opportunities to continue education to a higher level and activate supervision by the midwifery team. In empathy, it is necessary to prioritize the friendliness of officers in providing midwifery services, be patient in dealing with patient complaints. These efforts can be done by involving officers in training on mastery of therapeutic communication, customer service and giving rewards or punishments. On the quality of direct evidence, it is necessary to improve the cleanliness of the patient's bathroom (toilet), the placement of special room officers who were in charge of cleaning and supervising the cleanliness of the midwifery inpatient unit.

References

- [1]. Haryanto, F.K. (2018). *Pengaruh Kompetensi Sumber Daya Manusia Terhadap Kualitas Pelayanan dan Kepuasan Pasien di Klinik Hemodialisa Muslimat Nu Cipta Husada*. Tesis, Program Studi Administrasi Rumah Sakit, Universitas Esa Unggul, Jakarta.
- [2]. Indrawan, R. dan Yaniawati, P. (2017). *Metodologi Penelitian Kuantitatif, Kualitatif, dan Campuran untuk Manajemen, Pembangunan, dan Pendidikan*. Bandung: PT Refika Aditama.
- [3]. Indriani, I. (2018). *Pengaruh Kompetensi Dan Beban Kerja Terhadap Kinerja Pelaksanaan Asuhan Keperawatan Pada Bagian Rawat Inap Rumah Sakit Umum Dr. Slamet Garut*. *Jurnal, Wacana Ekonomi*, Vol.17; No 02; Tahun 2018, hal. 025-032.
- [4]. Kementerian Kesehatan RI. (2018). *Profil Kesehatan Indonesia Tahun 2018*. Jakarta: Kementerian Kesehatan RI.
- [5]. Kotler, P. dan Keller, K.L. (2017). *Manajemen Pemasaran, Edisi 13, Jilid 1*. Jakarta: Erlangga.
- [6]. Kementrian Dalam Negeri RI. (1945). *Undang-Undang Dasar 1945 pasal 34, ayat 3 tentang Penyediaan Fasilitas Pelayanan Kesehatan dan Fasilitas Pelayanan Umum Yang Layak*. Jakarta.
- [7]. Kementerian Kesehatan RI. (2009). *Undang-Undang RI Nomor 36 Tahun 2009 tentang Kesehatan*. Jakarta.

- [8]. Kementerian Kesehatan RI. (2009). *Undang-Undang RI Nomor 44 Tahun 2009 tentang Rumah Sakit*. Jakarta.
- [9]. Kementerian Kesehatan RI. (2019). *Undang-Undang RI Nomor 4 Tahun 2019 tentang Kebidanan*. Jakarta.
- [10].P, Th Endang dan SW Elisabeth, (2015). *Mutu Pelayanan Kesehatan dan Kebidanan*. Pustaka Baru Press, Yogyakarta.
- [11].Susi, B. (2018). *Profil Rumah Sakit Umum Daerah Banten Tahun 2018*. Banten.
- [12].Schiffman dan Kanuk, (2017). *Perilaku Konsumen*, Jakarta : PT. Indeks Gramedia
- [13].Unang, A. (2014). *Analisis Kinerja Pelayanan Dan Kepuasan Pasien Terhadap Kualitas Pelayanan RS Medika Permata Hijau*. Jakarta. Tesis, Program Studi Magister Manajemen, Universitas Esa Unggul, Jakarta.

Received: 20 June 2020, Accepted: 27 August 2020