

ANALYSIS OF PUBLIC SERVICE QUALITY IN THE REGIONAL TECHNICAL IMPLEMENTATION UNIT (UPTD) OF CIGALONTANG COMMUNITY HEALTH CENTER, CIGALONTANG DISTRICT, TASIKMALAYA REGENCY

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Abstract

Public service is a vital component of governance, ensuring that the basic needs of the community are met effectively and with high quality. This study aims to analyze the quality of public service at the Cigalontang Community Health Center (UPTD), Tasikmalaya Regency, prompted by the gap between the services provided by the health center and the community's expectations. The focus of this study is based on six dimensions of service quality according to Prof. Dr. Lijan Poltak Sinambela, namely transparency, accountability, conditionality, participation, equality of rights, and the balance of rights and obligations. The method used in this study is a qualitative approach with data collection techniques through observation, documentation study, and in-depth direct interviews with 14 informants consisting of service providers and recipients. Data analysis techniques include data reduction, data presentation, and drawing conclusions. The research findings indicate that, in general, the quality of public services at the Cigalontang Community Health Center (UPTD Puskesmas) is quite good and in accordance with Standard Operating Procedures (SOPs), particularly regarding accountability, responsiveness, and the fulfillment of equal rights without discrimination. However, several challenges remain, such as a lack of transparency regarding service procedures, limited facilities and infrastructure—such as waiting rooms and parking spaces—as well as inconsistent staff attitudes in providing courteous service. The study's conclusions indicate that while minimum service standards have been met, improvement efforts are still necessary, particularly in enhancing facilities and infrastructure and optimizing the dissemination of information to the public to maximize service satisfaction.

Keywords: Service Quality, Public Service, Public Satisfaction.

A. INTRODUCTION

Public services are the primary foundation of a state administration system, ensuring fair and effective fulfillment of public needs. In the context of modern governance, government performance is evaluated based on service standards and the level of public trust in state institutions. In Indonesia, public services encompass strategic sectors such as health, education, and transportation, which directly impact public welfare. Law Number 25 of 2009 concerning Public Services stipulates that service providers are required to provide quality services based on the principles of transparency, accountability, participation, and equal rights and obligations.

Although regulations and service standards have been established, the implementation of public services in the field still faces various obstacles. Various studies indicate a gap between service standards and the reality experienced by the public, such as long service times, lack of information transparency, and limited facilities and infrastructure. In the health sector,

particularly at Community Health Centers (Puskesmas) as primary healthcare facilities, these issues often result in low public satisfaction. This situation indicates a gap between public expectations and the quality of services provided, as explained in the concept of service quality, which emphasizes meeting the needs and expectations of service users.

The urgency of improving the quality of public services is increasingly important in the era of decentralization, where regional governments have been given more comprehensive responsibility for providing services to the public. According to Law Number 23 of 2014 concerning Regional Government, the health sector is included in the mandatory basic service obligations that regional governments must fulfill. In this context, Community Health Centers (Puskesmas), as Regional Technical Implementation Units (UPTD), play a strategic role at the forefront of public health service delivery. Puskesmas are not limited to curative services but also encompass promotive, preventive, rehabilitative, and palliative efforts, as stipulated in Minister of Health Regulation Number 19 of 2024.

Therefore, in practice, various problems remain in the provision of health services at Puskesmas, including at the UPTD Cigalontang Puskesmas in Tasikmalaya Regency. Based on patient complaint data, complaints relate to long service times, inadequate facilities, and a suboptimal service administration system. Furthermore, observations indicate inefficiencies in the registration process and a lack of clarity in service information. This phenomenon indicates that the quality of community health center services has not fully met expected standards, thus requiring a comprehensive analysis to identify the contributing factors.

Based on these issues, this study aims to analyze the quality of public services at the Cigalontang Community Health Center (UPTD), Cigalontang District, Tasikmalaya Regency, using a public service quality perspective. This research is expected to provide theoretical contributions to the development of public administration, particularly in the study of public service quality, as well as practical suggestions for improving health services at community health centers. Therefore, the results of this study are expected to serve as a reference in efforts to improve public services to be more effective, efficient, and oriented towards public satisfaction.

B. LITERATURE REVIEW

Definition of Quality

The quality of public service is an important concept in the study of public administration, relating to the government's ability to effectively and efficiently meet the desires, needs, and expectations of the public.

The word "quality" has many meanings. According to the Big Indonesian Dictionary, quality means: (1) the degree of goodness or badness of something; (2) the degree or level (of skill, competence, etc.); or quality.

According to Sinambela et al. (Hardiansyah, 2018), quality is anything capable of meeting the needs of customers.

According to Feigenbaum (Widiastuti, 2024, p. 7), quality is defined as complete customer satisfaction.

According to Groetsh and Darvis, as quoted by Tjiptono (2022) in Hardiansyah (2011, p. 35), "Quality is a dynamic condition related to services, people, processes, and the environment that meets or exceeds expectations."

Then, the definition of quality according to Garvin and Davis (Widiastuti, 2024; page 8) states that quality is a dynamic condition related to products, people/workforce, processes and tasks and the environment that meet or exceed customer or consumer expectations.

Definition of Service

According to the Big Indonesian Dictionary (KBBI, 2016), the word "service" has three meanings: (1) the act or method of providing a service; (2) the effort to provide a service to others in exchange for money; and (3) the convenience provided in connection with the purchase or sale of goods and services.

Etymologically, the word "service" comes from the word "layanan," which means helping to provide and/or care for something someone needs. In this context, service can be defined as the method or act of providing a service, such as a service or service, especially in relation to the sale or purchase of goods or services (Poerwadarminta, 1995).

According to Sampara (Sinambela, 2019; p. 5), service is an activity or sequence of activities that occurs in direct interaction between one person and another person or machine physically, and provides customer satisfaction.

Service is an activity or benefit provided by one party to another (Cowell, 1988).

According to Supriyanto and Sri Sugiyanti (Hendrayady, 2023; p. 2), service is an effort to help, provide, provide, or manage all the needs of others. Services are intangible and do not result in ownership of goods. Furthermore, the service-making process may not be tied to a physical product (Hardiansyah, 2018).

Service is a series of activities carried out by individuals or groups with the aim of satisfying the recipient of the service. Pasolong (Widiastuti, 2024; p. 11).

Understanding Service Quality

Service quality is a concept concerning the ability of a government or public institution to provide services that meet the needs and expectations of the public effectively, efficiently, transparently, accountably, and responsively (Hendrayady, 2023; 75). As stated by Lukman (Widiastuti, 2024), service quality is the service provided to customers in accordance with established standards as a reference in service delivery.

According to Evans and Lindsay (Marjoni, 2021; p. 77), service quality is a dynamic condition related to products, services, people, processes, and the environment that meets or exceeds expectations.

According to Parasuraman et al. (Rahayu, 2020), service quality is the gap between service users' expectations and their experience of the service received.

According to Tjiptono (Hendrayady, 2023; 82), service quality is a good indicator of whether the level of service offered and provided by the government meets public expectations. Service quality is a kind of attitude related to user satisfaction, which comes from his expectations and is compared with what the government has given him Parasuraman (Rahayu, 2020).

Dimensions of Service Quality

According to (Sinambela, 2019; p. 6), the dimensions of service quality are as follows:

Transparency

Meaning services that are open, easy, and accessible to all parties in need, provided in an adequate and understandable manner;

Accountability

Meaning services that can be accounted for in accordance with statutory provisions;

Conditional

Meaning services that are appropriate to the conditions and capabilities of the service provider and recipient, while adhering to the principles of efficiency and effectiveness;

Participatory

Meaning services that encourage community participation in the provision of public services, taking into account the aspirations, needs, and expectations of the community;

Equality of rights

Namely, services that do not discriminate based on any aspect, especially ethnicity, race, religion, class, social status, etc.;

Balance of rights and obligations

Namely, services that take into account aspects of justice between the provider and recipient of public services.

C. RESEARCH METHODOLOGY

This research was conducted at the Cigalontang Community Health Center (UPTD) in Cigalontang District, Tasikmalaya Regency. The location was chosen based on the fact that this primary health facility plays a crucial role in providing services to the local community. The research implementation was adjusted to the field data collection timeframe as outlined in the research schedule. The study population included all parties participating in the service mechanism at the UPTD Cigalontang Community Health Center, including service providers and recipients. The sample selection employed a purposive sampling approach, with informant selection criteria aligned with the research objectives. A total of 14 informants were recruited, including health workers, service staff, and the community as service users. The research instrument used was the researcher herself as the primary instrument, supported by interview guidelines, observation, and documentation. The research indicators refer to the dimensions of public service quality as proposed by Prof. Lijan Poltak Sinambela (2019): transparency, accountability, conditionality, participation, equality of rights, and balance of rights and obligations. Data validity was tested through triangulation of sources and methods to ensure the credibility and consistency of the findings.

Primary data collection was conducted through observation, document study, and in-depth interviews with 14 informants. Observation was used to directly observe service dynamics, interviews aimed to obtain in-depth information from informants, while documentation was used to supplement the data in the form of archives, reports, and other relevant supporting documents. Data collection steps were carried out systematically, starting from preparation, implementation in the field, and recording research results. Data analysis conducted in this study used qualitative analysis techniques that included data reduction, data presentation (data display), and conclusion drawing/verification.

D. RESULT AND DISCUSSION

Research result

Overall service quality must fulfill users' dreams and fulfill their desires. However, while this explanation is intended for service users, it does not mean that service providers must comply with all consumer requests when determining service quality. Service quality can be measured by comparing users' perceptions of the service they receive with their actual expectations.

The research results indicate that the quality of public services at the Cigalontang Community Health Center (Puskesmas) has generally performed quite well. However, several indicators still require further improvement. Based on an analysis of the service quality dimensions according to Sinambela (2019), the following findings were obtained.

Transparency

The transparency dimension relates to the provision of public services that are open, easily accessible, and accessible to all relevant parties, with adequate and easily understood information provided. Information regarding service procedures has not been fully communicated clearly to the public. This is evident in the ongoing confusion among patients

regarding the registration process and available services. Furthermore, limited information resources, such as signage, also hinder the transparency of service information.

Accountability

In terms of accountability, the services provided adhered to applicable standard operating procedures (SOPs). Service personnel were deemed to have carried out their duties in accordance with their respective responsibilities, although in some situations, delays in service were still observed, particularly when patient numbers increased.

Conditional

In terms of the conditional dimension, services are considered quite responsive to community needs. This is demonstrated by the efforts of staff to provide services tailored to the patient's condition. However, limited facilities and infrastructure, such as waiting rooms, parking areas, and other supporting facilities, are inhibiting service optimization.

Participatory

The participatory dimension, where public involvement in providing input on services, remains relatively low. Although a complaints mechanism exists, not all citizens utilize it optimally.

Equal rights

Furthermore, in terms of equal rights, the services provided demonstrate the principle of non-discrimination. All patients, both BPJS and non-BPJS users, receive the same services without any discrimination.

Balance of rights and obligations

In terms of the balance of rights and obligations, the relationship between service providers and recipients has been quite good. The public receives their right to services, while officers carry out their obligations in accordance with applicable regulations. Although there is still variation in staff friendliness.

Overall, the field data found in this study indicates that the quality of service at the Cigalontang Community Health Center (Puskesmas UPTD) meets most public service indicators. However, several weaknesses remain in the areas of information transparency, service facilities, and the effectiveness of the administrative system.

Discussion

Research findings indicate that the quality of public services at the Cigalontang Community Health Center (Puskesmas UPTD) is the result of an interaction between procedural aspects, human resources, and the service environment. Theoretically, this aligns with the view that service quality is a dynamic condition influenced by various factors, both internal and external to the organization.

Transparency

Limitations in the transparency dimension indicate a gap between service standards and implementation in the field. Conceptually, transparency is a crucial element in public services because it relates to public access to information. Unclear service information impacts low service efficiency and has the potential to reduce public satisfaction. In this dimension, public quality assessments are conducted in line with public desires, including employees who guarantee timely service. The assurance provided by service providers relates to employee reliability, the provider's ability to provide safe and adequate facilities, and instills a high level of trust in service users. Providing service assurance to service users will increase trust in service providers among service users. Service transparency is crucial for patients to make informed medical decisions and understand their rights. The Community Health Center (Puskesmas) Technical Implementation Unit (UPTD) is considered to have made efforts to implement transparency, but needs improvement in actively conveying information by officers to the public for better understanding.

Accountability

In terms of accountability, although services adhere to SOPs, inconsistencies in implementation indicate that accountability has not been fully internalized in service practice. Theoretically, accountability relates not only to compliance with regulations but also to consistency in their implementation. This finding indicates the need to strengthen service oversight and management.

Conditional

This dimension relates to the ability of services to adapt to the needs and conditions of each patient. Informants stated that medical staff were quite responsive to elderly patients or those with special conditions. The limited facilities and infrastructure in the conditional dimension demonstrate that service quality is determined not only by staff competence but also by facility support. Conceptually, the tangibles dimension of service quality emphasizes the importance of physical aspects as part of the service experience. Limited facilities can reduce user comfort and satisfaction even if the service is technically adequate.

Participatory

Patient involvement in the service process, such as in medical decision-making or providing input on services, remains minimal. This low level of public participation indicates that the public service approach is not fully based on user involvement. In public service theory, participation is a crucial indicator in creating services that are responsive and adaptive to community needs. Therefore, strategies are needed to increase public awareness and access to complaint mechanisms.

Equal rights

The next dimension analyzed in this study is the dimension of equal rights, which emphasizes the principle that all patients have the right to receive equal health care without discrimination, whether based on social status, type of membership, or other medically irrelevant factors. Based on interviews and observations, several patients stated that they felt they were treated equally during the service process without any significant discrimination by medical or administrative staff. The application of the principle of equal rights indicates that services have been carried out fairly and inclusively. This is in accordance with the principle of public service, which emphasizes non-discrimination in service delivery.

Balance of rights and obligations

Furthermore, the relatively good balance of rights and obligations indicates a harmonious service relationship, although improvements are still needed in interpersonal communication between staff. Informants acknowledged that they received services in accordance with their rights as patients, such as free medical treatment, hospitalization, and routine check-ups. Furthermore, they were also aware of their obligations, such as bringing complete documents and following referral procedures. However, some patients felt their rights were not maximized, especially when facilities or medications were limited. This dimension reflects the service provider's ability to demonstrate its presence to the public. This is tangible evidence of the service provided by the service provider, including the appearance and capabilities of physical facilities and infrastructure, and the condition of the environment.

Critically, the results of this study confirm that improving the quality of public services cannot be achieved in isolation but must be achieved through a comprehensive approach. Improvements need to focus on increasing information transparency, strengthening service systems, and developing facilities and infrastructure. Thus, more optimal service quality can be achieved, ultimately increasing public satisfaction and trust in public services.

E. CONCLUSION

The conclusion of this study indicates that the quality of public services at the Cigalontang Community Health Center (Puskesmas UPTD) has been operating procedurally and ethically well. The greatest success lies in the implementation of accountability and equal rights, which have minimized the potential for administrative malpractice and discrimination. However, there are aspects that require serious attention, namely optimizing information transparency through more inclusive channels and improving physical facilities. Based on these findings, practical recommendations include increasing seating capacity in the waiting room, rearranging the parking area to improve comfort, and using clearer and regularly updated visual information media. Theoretically, this study reinforces the public service management literature that service quality is not solely determined by the competence of staff but is also significantly influenced by the readiness of supporting infrastructure to respond to the dynamic needs of the community.

However, several aspects remain suboptimal, particularly in the dimensions of transparency, participation, and the availability of facilities and infrastructure. The lack of clarity in service information and the suboptimal use of information media make it difficult for the public to understand the service flow. Furthermore, limited physical facilities and low public participation in providing feedback are also factors hindering the overall improvement of service quality. Overall, the quality of public services at the Cigalontang Community Health Center (Puskesmas UPTD) is influenced by a combination of service system factors, human resources, and facility support. Therefore, improving service quality requires a comprehensive approach through improvements to the service information system, upgrading facilities and infrastructure, and strengthening community participation mechanisms. This will ensure more effective, efficient, and satisfaction-oriented public services can be achieved sustainably.

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