



Effect of Time and Waiting Facilities Toward The Satisfaction Level of Pregnant Women in Antenatal Care Services

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Abstract

Efforts to reduce mortality and morbidity in pregnant women by improving integrated ANC services which are comprehensive and integrated antenatal services, including promotive, preventive and curative and rehabilitative efforts. Community Health Centre is one of the basic health facilities that are used to carry out integrated ANC. Every pregnant woman is required to carry out an integrated ANC at the Community Health Centre in the first trimester. The purpose of this study was to analyze facilities and waiting times for the satisfaction level of pregnant women in ANC services. This research was a quantitative research, with a cross sectional approach. The sample of this study amounted to 109 samples with purposive sample technique. The instrument used a questionnaire. Data analysis was carried out by using two predictors regression. The results of F count are obtained that the F table is based on df numerator = 2 and the denominator $(109-2-1) = 106$ for the error rate of 5% = 3.09 because F count is greater than F table, the correlation coefficient tested is significant. The most dominant factor obtained is the facility. The real contribution is 88.7% and the effective contribution is 5.23%, the waiting time has a relative contribution of 11.2% and the effective contribution is 0.66%. The conclusion is the influence between facilities and waiting time on the level of satisfaction of pregnant women in antenatal care services.

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INTRODUCTION

The degree of maternal health in Indonesia is deteriorating when viewed from the Maternal Mortality Rate (MMR). The maternal mortality rate in the world in 2015 was 216 / 100,000 live births (WHO, 2015). The decline in maternal mortality in the world is not followed by a reduction in maternal mortality in Indonesia. The maternal mortality rate in Indonesia increased from 228 / 100,000 live births in 2007 to 359 / 100,000 live births in 2012, then it decreased in the following year of 305 / 100,000 live births (Ministry of Health, 2017).

The efforts to reduce mortality and morbidity in pregnant women are through improving integrated Antenatal Care (ANC) services which are comprehensive and integrated, including promotive, preventive, curative and rehabilitative efforts which include Maternal and Child Health services, nutrition, infectious diseases (immunization, HIV / AIDS, malaria, STDs), treatment of non-communicable diseases and several other local and specific programs according to program needs (Ministry of Health, 2014).

Community Health Centre is one of the basic health facilities that are held integrated ANC. Every pregnant woman is required to carry out an integrated ANC at a health center in the first trimester.

Grobogan Regency has an area of 1,975.86 km², it is the second largest district in Central Java after Cilacap Regency. There are consisted of 19 sub-districts, there are 7 hospitals, 30 health centers, 69 auxiliary health centers, 22 clinics. Two of them are Purwodadi District Health Center I and Grobogan District Health Center (Profile of District Health Office, Grobogan, 2016).

The Phase 1 visits coverage of Grobogan Regency in 2016 reached 22,314 pregnant women or 96.77% of 23,059 pregnant women. Whereas, the phase 4 visits coverage of Grobogan Regency in 2016 reached 21,098 pregnant women or 91.50% of 23,059 pregnant women (Profile of District Health Office, Grobogan, 2016).

Those phenomena has not met the national target of 95%, because there are still many

pregnant women who have made the first visit of antenatal care not continuing until the fourth visit in the third quarter of pregnancy, so their pregnancy is not under control by health workers. This is one of the causes of maternal and infant mortality in Grobogan District, which is still quite high in Central Java Province, namely 18 deaths of pregnant women (Kab. Kab. Grobogan, 2017).

The preliminary study held by conducting interviewing of pregnant women who performed antenatal care examinations at Purwodadi Health Center I and Grobogan Health Center. The results of interviews with 20 pregnant women about satisfaction were obtained 13 pregnant women were not satisfied with the antenatal care service, the facilities were adequate but the waiting room was too small and the seats were insufficient for the patients who came, the service quality of staff was not friendly and information was not clear, so that patients are less satisfied with the service. The waiting time was in a long time in registration counter, and the examination take 60 minutes while taking medicine from the pharmacy takes more than 60 minutes

The purpose of this study was to analyze the effect of facilities and waiting time on the level of satisfaction of pregnant women in conducting antenatal care at Purwodadi Health Center I and Grobogan Health Center.

METHOD

The study was conducted using cross sectional approach. The population of pregnant women who performed antenatal care examinations at Purwodadi Health Center I and Grobogan Health Center numbered 149 pregnant women in Purwodadi Health Center I and 102 pregnant women at Grobogan Health Center. The sample in this study was obtained by calculating using the *Slovin* formula, namely 109 samples used random sampling techniques.

The independent variables in this study included facilities, waiting times. Whereas for the dependent variable is the satisfaction of pregnant women in ANC services. The instrument in this study used a questionnaire sheet. In this study two regression predictors were carried out.

RESULTS AND DISCUSSION

This research was conducted in Purwodadi Public Health Center 1 and Grobogan Health Center, in July-August 2018 with the aim of finding out the most influential factors among other factors with satisfaction of pregnant women in ANC services through questionnaire sheets

Table 1. Characteristics of Respondent

Characteristics	Frequency	Presentage (%)
Age (y.o.)		
20-25	11	10,1
26-30	88	80,7
31-35	10	9,2
Education		
High School	84	77,1
University/College	25	22,9
Occupation		
Housewife	54	49,5
Labor	11	10,1
Civil Servant	6	5,5
Private	24	22,0
Entrepreneur	14	12,8
Pregnancy Phase		
I	83	76,1
II	20	18,3
III	6	5,5
Distance		
Less than 5 km	60	55,0
More than 5 km	49	45,0
Total	109	100

Respondents Characteristic.

Based on the results of the study, it was found that the majority of respondents aged 26-30 years were 88 respondents and the minimum age of respondents was 31-35 years old, 10 respondents. This is in accordance with the theory of the Ministry of Health (2015) that the ideal age for pregnant women is the age of 21-35 years because it is the ideal age for pregnancy and childbirth and reduces the risk of health problems for both the mother and fetus so that antenatal care checks are required to detect pregnancy since first trimester. Respondents mostly have first pregnant; this is in accordance with the results of a study from Solang et al (2012) that pregnant

women who visit the Puskesmas for prenatal care are mostly done in the first pregnancy.

Table 2. Effect of Waiting Time, and Quality of Service on Satisfaction of Pregnant Women in ANC Services at Purwodadi Health Center 1 and Grobogan Health Center

Variable		Total of waiting time	Total of facilities	Satisfaction Level
Total of facilities	Pearson Correlation	.598**	1	.197**
	Sig. (2-tailed)		.000	.000
	N	109	109	109
Total of waiting time	Pearson Correlation	.598**	1	.297**
	Sig. (2-tailed)		.000	.020
	N	109	109	109
Satisfaction Level	Pearson Correlation	.297**	.197**	1
	Sig. (2-tailed)	.001	.020	
	N	109	109	109

The Effect of Facilities on satisfaction of pregnant women in ANC services at Purwodadi I Health Center and Grobogan Health Center

Based on the results of the study, it was found that there were 50 respondents (45.9%) in Purwodadi Public Health Center I and Grobogan Public Health Center category.

Facilities become one of the patient's considerations in making choices. The better the facilities provided, the patients will be more satisfied and will continue to choose health facilities as a priority choice based on perceptions obtained from existing facilities. Based on Mote's research (2008) the availability of facilities and infrastructure greatly influenced the level of satisfaction with service. The lack of facilities available at the service location also affects the motivation of pregnant women to come and visit in order to check up their pregnancy.

The lack of seating in the waiting room so that the frequency of respondents is less in

revisiting and influencing the level of satisfaction of pregnant women.

Based on the table above, it was found that there was a positive correlation of 0.197 between facilities and satisfaction of pregnant women in ANC services. This means that the better the facilities available, the higher the level of satisfaction of pregnant women. So that it can be concluded that there is a positive relationship and the value of efficient correlation between facilities and satisfaction of pregnant women in ANC services with the results of r count greater than r table.

This can be seen from the relative contribution of 88.7% and the effective contribution of 5.23%. The results of the research that has been carried out still have some respondents who complain about the patient's waiting room and the availability of waiting seats, because Purwodadi District Health Centre I and Grobogan Health Center does not have waiting room facilities for patients. Besides that the cleanliness of each examination room is still considered to be lacking by respondents and the toilets smell.

According to Sareong's research (2013) which states that there is dissatisfaction that arises in patients in the Rantepao Health Center caused by physical facilities, namely waiting time, waiting room cleanliness, lack of available seats in the waiting room. It means that lack of facilities and comfort can affect patient satisfaction.

According to Mardiyani (2015), adequate equipment will make visitors feel satisfied because visitors feel the availability of the desired needs is available. According to Sondari et al (2017), saying that facilities must be improved because good facilities cause patients' expectations of service to be high. This is related to Leonard L Berry's statement, where services are actions, appearances or services that are consumed but not owned. although the appearance of services is represented by a certain form, but the essence purchased is appearance.

The Mernawati et al (2016) study states that facilities are related to patient satisfaction, where they assume that the examination and waiting room are clean, neat and comfortable, have sufficient medical equipment, the

appearance of doctors and nurses are positively related to the level of satisfaction of outpatients at Lamper Tengah Health Center.

Based on the results above it can be concluded that the better the facilities available, the higher the level of satisfaction of pregnant women in antenatal care services.

The Correlation between waiting time and satisfaction of pregnant women in ANC services at Purwodadi Health Center I and Grobogan Health Center

Based on the results of the study it can be seen that most pregnant women who stated that the waiting time in the medium category were 52 respondents (47.7%).

Based on the results of the research, patients still complained about the delay in the service schedule at the Purwodadi Health Center I and Grobogan Health Center registration counters which could cause the patient queue to pile up and require a long time for patients to wait. so they did the distribution of medical record files to the initial examination room (minimum 3-5 files) and the absence of a fixed procedure / Standard Operating Procedure. Especially in terms of setting standards when patients wait to get service.

Similar research comes from Baotran et al. (2012) that has a significant relationship between waiting time and antenatal satisfaction. In line with Laeilayah N (2016) there is a relationship between waiting time and patient satisfaction. The mean waiting time for outpatient service at Indramayu District Hospital was 70.18 minutes and most of the categories were long time (> 60 minutes).

Based on the table above, there is a positive correlation of 0.297 between waiting time and satisfaction of pregnant women in antenatal care services. This means that the less waiting time needed to get service, the greater the satisfaction of pregnant women in doing antenatal care. The waiting time needed was starting from registering, making and searching medical records, distributing medical records to poly services, checking antenatal care and taking drugs. The results of the questionnaire analysis can be seen from the relative contribution of 11.2% and the

effective contribution of 0.6% while the waiting time needed is still quite long.

Based on the results of the questionnaire, the waiting time that has the most influence on the satisfaction of pregnant women is the waiting time needed for registration and the waiting time used for taking drugs. According to Febriyanti (2013), factors that influence waiting time are incomplete patient requirements, old patients claiming to be new patients, the error of system of management information and devices, new patients do not fill in the registration form.

According to Bielen et al (2007) waiting time is not only a determinant of service satisfaction, but also moderates the relationship of satisfaction and loyalty. Moreover, the determinants of satisfaction of customer waiting time include perceived waiting time, with information provided if there is a delay, and the comfort of the environment while waiting.

Research by Camacho et al (2006) says that reducing waiting time can lead to increased patient satisfaction and greater willingness to return to examinations.

Based on the results of the description above it can be concluded that the faster the waiting time, the higher the level of satisfaction of pregnant women in performing antenatal care.

The Effect of facilities and waiting times towards the level of satisfaction of pregnant women in antenatal care services.

The results of F count are obtained that the F table is based on the numerator $dk = 2$ and the denominator $(109-2-1) = 106$ for the error rate of $5\% = 3.09$ because F count is greater than F table, the correlation coefficient tested is significant.

Based on the calculated results of effective donations and relative contributions obtained facilities and waiting times have positive support for the level of satisfaction of pregnant women in antenatal care services.

According to the research of Listiyana et al (2017), it was found that satisfaction levels were influenced by facilities, and waiting times. So it can be assumed that both of these factors can increase satisfaction.

The results of the study found that the two variables tested in this study were the most

dominant facilities. This can be seen from the relative contribution of 88.7% and the effective contribution of 5.23% greater than the waiting time variable. Facilities are facilities and infrastructure that support health services as much as possible in an effort to increase patient satisfaction with the health services provided (Kotler, 2008). The most influential facility in this study was the completeness of the antenatal care examination equipment in accordance with Rahman et al. (2016) pregnant women were quite satisfied with the ANC services provided by health workers in ancillary services in Siwak, Malaysia. While the results of the research variables that have the least effect are the waiting time. Obtained relative contribution data is 11.2% and effective contribution is 0.66%. One similar study states that patient satisfaction is influenced by the actual waiting time of patients, and the speed of service received by patients ($P < 0.05$) the main factor that extends service waiting time and decreases patient satisfaction, is a relatively long waiting time (Torry et al., 2016).

This is different from previous studies by Zarei et al (2015) found a strong relationship between service quality and patient satisfaction. About 45% of the variance in overall satisfaction is explained by the four dimensions of perceived service quality. Service costs, process quality and interaction quality have the greatest effect on overall patient satisfaction.

CONCLUSION

There is a positive influence between facilities and waiting time on satisfaction of pregnant women in antenatal care services.

SUGGESTION

Further study needs to be done by conducting research using variables that have not been revealed and use other methods.

REFERENCES

Bielen, F., & Demoulin, N. (2007). Waiting time influence on the satisfaction-loyalty relationship in services. *Managing Service*

- Quality: An International Journal*, 17(2), 174-193.
- Camacho, F., Anderson, R., Safrit, A., Jones, A. S., & Hoffmann, P. (2006). The relationship between patient's perceived waiting time and office-based practice satisfaction. *NC Med J*, 67(6), 409-413.
- Chompikul, J., & Isaranurug, S. (2008). Factors related to the utilization of antenatal care services among pregnant women at health centers in Aceh Besar district, Nanggroe Aceh Darussalam province, Indonesia. *J. Publ. Health Dev*, 6(2), 99-108.
- Febriyanti, D. H., Kurniadi, A., Kom, M., & Nuswantoro, A. F. K. U. D. (2013). Deskripsi Faktor-faktor yang Mempengaruhi Waktu Tunggu Pendaftaran di TPPRJ RSUD Tugurejo Semarang Tahun 2013. *Skripsi. Fakultas Kesehatan. Universitas Dian Nuswantoro. Semarang*.
- Kemenkes RI. 2014. *Data dan Informasi Angka Kematian Ibu*. Jakarta
- Listiyana, I., & Rustiana, E. R. (2017). Analisis Kepuasan Jaminan Kesehatan Nasional pada Pengguna BPJS Kesehatan di Kota Semarang. *Unnes Journal of Public Health*, 6(1), 53-58.
- Oladapo, O. T., Iyaniwura, C. A., & Sule-Odu, A. O. (2008). Quality of antenatal services at the primary care level in southwest Nigeria. *African Journal of Reproductive Health*, 12(3), 71-92.
- Firdaus, F. F., & Dewi, A. (2015). Evaluasi Kualitas Pelayanan Terhadap Kepuasan Pasien Rawat Jalan Peserta BPJS di RSUD Panembahan Senopati Bantul. *JMMR (Jurnal Medicoeticolegal dan Manajemen Rumah Sakit)*, 4(2).
- Habibi, M. (2012). *Hubungan Waktu Pelayanan Rekam Medis Di Tpprj Dengan Kepuasan Pasien Poliklinik Bedah Di Rumah Sakit Umum Dr. Saiful Anwar Malang Tahun 2012* (Doctoral dissertation, Universitas Muhammadiyah Surakarta).
- Kemenkes RI. 2014. *Data dan Informasi Angka Kematian Ibu*. Jakarta.
- Laeliah, N., & Subekti, H. (2016). Waktu Tunggu Pelayanan Rawat Jalan dengan Kepuasan Pasien Terhadap Pelayanan di Rawat Jalan RSUD Kabupaten Indramayu. *Jurnal Kesehatan Vokasional*, 1(2), 102-112.
- Mardiyani, Y., & Murwatiningsih, M. (2015). Pengaruh Fasilitas dan Promosi terhadap Kepuasan Pengunjung melalui Keputusan Berkunjung sebagai Variabel Intervening pada Objek Wisata Kota Semarang. *Management Analysis Journal*, 4(1).
- Mernawati, D., & Zainafree, I. (2016). Analisis Faktor-Faktor Yang Berhubungan Dengan Tingkat Kepuasan Pasien Rawat Jalan Di Puskesmas Lamper Tengah Kecamatan Semarang Selatan Kota Semarang. *Public Health Perspective Journal*, 1(1).
- Mursyida, R. F., Mawarni, A., & Agushybana, F. (2012). Kepuasan ibu hamil dan persepsi kualitas pelayanan antenatal care di puskesmas tanjung kabupaten sampang madura. *Media Kesehatan Masyarakat Indonesia*, 11(2), 174-181.
- Nissa, A. A., & Mardiyarningsih, E. (2013). Gambaran Kepuasan Ibu Hamil terhadap Pelayanan Antenatal Care di Puskesmas Getasan.
- Oladapo, O. T., Iyaniwura, C. A., & Sule-Odu, A. O. (2008). Quality of antenatal services at the primary care level in southwest Nigeria. *African Journal of Reproductive Health*, 12(3), 71-92.
- Poli, T. M., Rattu, A. J. M., & Tulung, M. (2016). Analisis Waktu Tunggu Pelayanan Unit Rawat Jalan Rsup Prof Dr. Rd Kandou Manado. *Community Health*, 1(1).
- Profil Dinas Kesehatan Kabupaten Grobogan (2016) Angka Cakupan K1 dan K4 di Kabupaten Grobogan.
- Profil Dinas Kesehatan Kabupaten Grobogan (2017) Angka Kematian Ibu di Kabupaten Grobogan.
- Solang, S., Lohoraung, A., & Purwandari, A. (2012). Hubungan Kepuasan Pelayanan Antenatal Care Dengan Frekuensi Kunjungan Ibu Hamil Di Puskesmas Kombos Kecamatan Singkil Kota Manado. *Jurnal GIZIDO*, 4(1), 349-357.
- Sondari, A., & Raharjo, B. B. (2017). Tingkat Kepuasan Pasien Rawat Jalan Peserta

- Jaminan Kesehatan Nasional (JKN). *HIGEIA (Journal of Public Health Research and Development)*, 1(1), 15-21.
- Torry, T., Koeswo, M., & Sujianto, S. (2016). Faktor yang Mempengaruhi Waktu Tunggu Pelayanan Kesehatan kaitannya dengan Kepuasan Pasien Rawat Jalan Klinik penyakit dalam RSUD Dr. Iskak Tulungagung. *Jurnal Kedokteran Brawijaya*, 29(3), 252-257.
- ZA, Z., AM, I., & NM, B. (2012). Satisfaction among pregnant women towards antenatal care in public and private care clinics in Khartoum. *Khartoum Medical Journal*, 4(2).
- Zarei, E., Daneshkohan, A., Pouragha, B., Marzban, S., & Arab, M. (2015). An empirical study of the impact of service quality on patient satisfaction in private hospitals, Iran. *Global journal of health science*, 7(1), 1.