

#### COMMICAST

VOL (4), No. (3), (37-44) DOI: https://doi.org/10.12928/commicast.v4i3.9318 ISSN: 2723-7672



# Patient handling complaint strategies for health facilities and services at PKU Muhammadiyah Yogyakarta Hospital

<sup>1</sup>Muhammad Afkar Ulwan Khasyarahman\*, <sup>2</sup>Eka Budy Santoso, <sup>3</sup>Ade Putranto P.W.T.

1,2,3 Communication Department Universitas Aisyiyah Yogyakarta, 55592, Indonesia <sup>1</sup> afkarsulun24@gmail.com\*; <sup>2</sup> ekabudisantoso79@gmail.com; <sup>3</sup> ade.putra.tunggali.ac.id

#### ARTICLE INFO

#### **ABSTRACT**

#### Article history

Received 2023-11-09 Revised 2023-12-26 Accepted 2023-12-28

Handling Complaint Health Services Hospital

Through an effective complaint handling process, information from customers will be obtained as input in improving and developing agency service activities. Complaints are a form of dissatisfaction with information or services received. Thus, complaints can solve customer dissatis faction problems in hospital services to improve hospital quality. This study aims to evaluate the effectiveness of handling complaints at the PKU Muhammadiyah Yogyakarta Hospital. This research is qualitative. Subjects in the study were ten officers who often handled complaints. The study was conducted in 21 August-September 2023 at PKU Muhammadiyah Yogyakarta Hospital. The availability of supporting facilities is adequate, including complaint channels via SMS, email, via telephone, suggestion box, complaint sheet. All staff have received training in effective communication. The flow and procedures for handling complaints have been maximized. However, their many complaints are still repeated. The process of monitoring and evaluating complaint han- dling reporting documentation has been running optimally. The response time for handling complaints is perfect because all cases are handled on average 1x24 hours, the response time reaches 95%. The handling of complaints at the PKU Muhammadiyah Yogyakarta Hospital has been maximized but ineffective. The handling is not yet effective because the information system process does not support the complaint handling process, for example, the delivery of information to patients who have not been able to in realtime. The mechanism for handling complaints is carried out by submitting complaints verbally and in writing to the maximum extent.

This is an open access article under the **CC-BY-SA** license.



#### 1. Introduction

Hospital service orientation is more responsive to customers (patients) through efforts to better recognize, serve, and satisfy the needs and desires of patients by improving and improving service quality following the times (Miskir & Emishaw, 2018). Hospitals are required to be more responsive in responding to any changes that are happening. If the hospital is not responsive, then the hospital is left behind or abandoned by customers (Jennifa et al., 2021).



Some customer complaints are complaints related to medical examination and treatment, poor service provider behavior, unresponsiveness, and inadequate facilities, unclean hospital environment (dirty, broken bathroom), medical complications and death (Osman et al., 2021). Based on data from the Legal Aid Institute (LBH) and the Foundation for Strengthening Participation Initiatives and Community Partnerships (YAPPIKA) in 2011, complaints against public services, especially health services, received the highest score, at 19% (Lewis et al., 2019). Thus, public services in Indonesia need to get serious attention, especially health services. According to Akuna et al., (2021), medical complaints are suggestions and input submitted by patients either verbally or in writing that contain elements or are medical in nature about noncompliance with service procedures or medical actions obtained by patients in hospitals (Thompson, 2017). Another study at one of the government hospitals in Yogyakarta City Hospital stated that patient satisfaction with hospital services can meet patient expectations 87.00% (Afrida et al., 2021).

PKU Muhammadiyah Hospital Yogyakarta is a privately owned class B hospital in Yogyakarta and is managed by the Muhammadiyah Foundation (Rahajeng & Harimurti, 2020). The hospital has a wide range of services that are grouped into general, specialist, and supporting services (Shorten, 2022). Based on the results of the complaint analysis at PKU Muhammadiyah Yogyakarta Hospital during 2022, there were 389 customer complaints (Rohmansyah et al., 2019). The incidence of complaints related to all professions or human resources was 217 cases with communication problems, attitudes, and discipline of officers. A total of 117 patient complaints occurred due to the system. Meanwhile, 55 patient complaints were found against service complaints in outpatient and inpatient care (Mawarti, 2021).

Based on the above problems, the impact that will occur if complaint handling is not resolved properly is customer trust and hospital image, as well as decreased hospital revenue. Thus, hospitals need a good grievance handling analysis in terms of receiving, managing, deciding, solving, finding solutions to resolve patient complaint cases, and follow-up handling of complaints in order to improve and maintain the quality, quality and image of the hospital. In general, this study aims to evaluate the implementation of complaint handling strategies at PKU Muhammadiyah Yogyakarta Hospital.

#### 2. Method

This research is a qualitative study to determine the handling of patient complaints in the Public Relations Unit, Outpatient Poly, Inpatient, at PKU Muhammadiyah Yogyakarta Hospital (Creswell & Creswell, 2018). The study population was public relations officers, namely, officers who handle complaints. The research was conducted from August to October 2023. The number of research samples was four people from the sample, including the person who handled the complaint directly, namely the head of the room. Meanwhile, the sample exclusion criteria include people who do not handle complaints directly, namely the executive nurse. The sampling method was purposive sampling technique 9 (Manning & Kunkel, 2014). The instruments in this study were the researcher himself, in-depth interview guidelines, observation guides (checklist), note-takers, recording devices, and cameras. The variables of this study consisted of independent variables, namely, the public relations unit. The criteria according to Jennifa et al., (2021) include:

- 1) Resources, development and improvement of resources including an integrated information system based on SIMRS and other supporting facilities for handling complaints so that it will be more effective in handling complaints;
- 2) Record, data on complaints that have been handled to be reported as soon as possible for continuous improvement efforts so that the same complaints do not recur;
- 3) Speed of complaint handling, every complaint gets a response and is handled quickly according to the specified indicator standard of 1x24 hours.

#### 3. Theoretical Framework

### **Interpersonal Communication**

Interpersonal communication is communication between people face to face that allows each participant to capture the reactions of others directly, both verbally and non-verbally (Wakslak et al., 2014). A special form of interpersonal communication is dyadic communication involving only two people (Solomon & Theiss, 2020). The characteristics of dyadic communication are that the communicating parties are in close proximity; the communicating parties send or receive messages simultaneously and spontaneously either verbally or non-verbally. the success of communication is the responsibility of the communication participants (Berger & Roloff, 2019).

The closeness of the relationship of the communicating parties will be reflected in the types of messages or their non-verbal responses, such as touch, expressive eye gaze, and very close physical distance. although everyone in interpersonal communication is free to change the topic of conversation, the reality is that interpersonal communication can be dominated by one party (Larsen et al., 2021).

As the most complete and most perfect communication, interpersonal communication plays an important role until whenever as long as humans still have emotions. the fact that this face-to-face communication makes humans feel more familiar with each other (Jensen, 2021). in contrast to using communication using mass media or through even the most sophisticated technology such as cell phones, email, or teleconferences that make humans alienated.

#### **Excellent Service**

Excellent service or what is commonly referred to as excellent service means the best service. Means good if an agency provides services in accordance with applicable guidelines (Novitasari,

2022). The principle of public service means providing service to the community as a manifestation of government apparatus as a form of service to the community. Excellent service can be interpreted as the best service in meeting the expectations of the community or customers. So that excellent service is that has standards and quailty to be able to realize the expectations of the community or customers (Sari et al., 2021).

Basic Concepts of Excellent Service. Ability: Certain abilities that iclude work skills in the field of work pursued in supporting excellent service program, such as carrying out effective communication, developing motivation, and using as a tool to foster relationship into and out of organization, agencies or companies (Susiloningtyas et al., 2022). Attitude: Behavior that must be highlighted when dealing with customers. Customers will judge the company from the first impression that relates to the people involved in the company (Atik & Katmini, 2022). Appearance: Physical or non-physical appearances that reflects credibility to customers. Attention: Full concern for customers, having a connection with the needs and desires of customers, as well as understanding their suggestions and criticisms (Azmy et al., 2022). Responsibility or Accountability: An attitude of partially to customers is a form of concern to minimize customer dissatisfaction. In the concept that has been expressed by many experts (Atik & Katmini, 2022).

#### 4. Result and Discussion

PKU Muhammadiyah Yogyakarta Hospital has a high number of visits every day (Mawarti, 2021). This causes the number of prescriptions served by the pharmacy unit to be high. Previous research at Wonosobo Islamic Hospital also stated that the high number of prescriptions caused the response time of pharmaceutical services to not comply with SPM.13 Good management of the perception of waiting time can increase the coverage of pharmaceutical services (Dewi, 2018).

Facilities in the delivery of complaints is one of the indicators that describe the quality of complaints management in the hospital (Wulandari, 2021). For example, the quality of grievance management is slow and there is no information from the hospital to the patient regarding the grievance handling process.14 Facilities for patient grievance services at PKU Muhammadiyah Yogyakarta Hospital are through customer service, suggestion boxes, SMS, and email. The same complaint channeling media is also found in Yogyakarta Regional Hospital, which is a call center via telephone and SMS and has provided a patient-oriented complaint channel. Availability of facilities and facilities in all service units or rooms. The availability of complaint facilities and facilities that are not in accordance with the Standard Operating Procedure causes patients to submit their complaints through the mass media.15 One of the strategic steps taken by the hospital in improving the quality of patient complaint governance is to build information transparency through the website <u>www.rspkuj</u>.

The flow of the customer complaint mechanism has a procedure to resolve complaints quickly and unrepeatedly, starting from the complaint handling process and complaint management. The complaint handling process consists of: confirming customer complaints, recording customer complaints into the Corrective or Preventive Action Request Form, distributing complaints to relevant units, coordinating with relevant fields or experts, and resolving complaints. hospital officers in handling complaints are known based on officers who have received, listened to, and served well customers who make complaints, as well as providing the best solution for problem solving.

Patients and their families can submit complaints or complaints verbally or in writing. The hospital has prepared facilities in the form of suggestion boxes and complaint forms. Complaint management is carried out by grouping complaints in four categories. Then, the categories are adjusted to the quality indicators that have been determined. The flow of complaint handling is very clear. There is a complaint identification process, for example, minor complaints can be resolved directly in the relevant service unit.

However, complaints that have been resolved are submitted to public relations for documentation. The final process in handling complaints is reporting. In addition to documenting complaints, the complaint handling officer finds solutions, conveys solutions and provides feedback with a predetermined response time to customers. The hospital will find the right solution to prevent patient dissatisfaction:

"...Then public relations mediate to the relevant units, then assists until the complaint is resolved. If it involves the legal field, there is a disposition from the director to the legal field to follow up, analyze the case, until lawyer assistance is needed..." (al).

Patient complaints always get a solution and are immediately handled and documented completed recorded in the complaint book and the provision of close status. Close status complaints are complaints that have been completed internally and externally. Complaints are analyzed by the quality and patient safety team. The team looks for the root of the problem by involving related professions, such as doctors to determine solutions. After the solution is determined, the team conveys it to the patient or family of the patient who made the complaint:

"...Well, for the solution, if we feel that in a one-month document or in a three-month recap there is a unit whose complaints are just that, then we collaborate with the quality and patient safety committee so that together with the relevant units we can find the root of the problem. The hope is that the complaint will not happen again. Now, for example, if the complaint is only sufficiently resolved by the public relations department and related units, then we look for data to the related units, and we from public relations contact the complainant. If the complaint is felt to be related to legal issues, going into moderate or severe, then we usually consult the health law department.

What steps should be taken. If it requires coordination of more than two or three people, we usually organize internal coordination by presenting the doctors, then the head of the relevant room, then the person in charge of the room to find a solution, and then present the complainant, yes, to answer the complaint together by appointing one of our internal team as a spokesperson..." (al).

Handling complaints submitted by customers to the hospital is considered complete if the customer has understood the procedure as explained by the hospital and the patient or patient's family has understood and no longer complains. Hospitals still need to socialize to patients and families of patients about complaint services, place special staff to handle complaints, make a recording system that is not yet effective because not all facilities are available in integrated patient complaints and are easily accessible by hospital staff, and accelerate the realization of service improvement innovations to increase patient satisfaction.17 The form of reporting carried out at the hospital is a notebook in the service unit and a recapitulation of complaints in the form of Microsoft Excel, then reported to public relations.

#### 5. Conclusion

The results of this study illustrate that the supporting facilities for handling patient complaints are adequate, such as the availability of complaint channels via sms, email, via telephone, suggestion boxes, and complaint bars that can accommodate all complaints to be resolved optimally. The flow and procedures for handling complaints are maximized. However, researchers still found many of the same complaints repeated. The process of documentation, reporting monitoring and evaluation of complaint handling has run optimally. This can be seen from each room already having routine documentation reports. The documentation report can be monitored and evaluated by the Public Relations department. Then, Public Relations reports to the Board of Directors regularly.

## Acknowledgment

Praise and gratitude to Allah Swt, because with his blessings and grace, I can complete this scientific paper. The writing of this scientific paper was carried out in order to fulfill one of the requirements to obtain a bachelor's degree in Communication Science, Faculty of Economics, Social Sciences and Humanities, Universitas 'Aisyiyah Yogyakarta.

I realize that without the help, prayers, and guidance from various parties, it is quite difficult for author to complete this scientific paper. Therefore, I would like to thank: (1) My mother, father, and extended family, who always pray and provide support and motivation for author. (2) Mr. Eka Budi S. who has guided, provided input, and assisted in the author's research. (3) Mrs. Mega Ardina, S.P. M.Sc. as the Dean of the Faculty of Economics, Social Sciences and Humanities, Universitas 'Aisyiyah Yogyakarta. (4) Mr. Ade Putranto P.W.T., MA as Ka. Communication Science Study Program at 'Aisyiyah University Yogyakarta. (5) Mr. Subagio, M.A as the supervisor who has provided guidance, direction, and input to the author. (6) Not to forget the communication science lecturers who have also provided enthusiasm and motivation for the author. (7) Mr. Alfis Khoirul Khisholi, S.Kom.I., M.SI. As the facilitator at PKU Muhammadiyah Yogyakarta hospital. (8) Communication Science class of 2019 friends who always encourage and have accompanied the author during the lecture period. (9) And last but not least to myself. Thank you for struggling so far.

The author realizes that in writing this scientific paper there are still shortcomings, for which constructive criticism and suggestions are expected to be able to perfect this scientific paper. Finally, the author would like to thank you and hopefully this scientific paper can be useful for all parties in need.

#### References

- Afrida, M., Nurwidiyanti, E., & Marfuah, M. (2021). Relationship between Spinal Anesthesia and Hypothermia Incidence among Post Operative Patients in the Operating Recovery Room "JIH" Hospital Yogyakarta. *D'Nursing and Health Journal (DNHJ)*, 2(2). https://doi.org/10.36835/dnursing.v2i2.201
- Akuna, M., QURESHI, M., & MILLER, N. (2021). Vitt reaction associated with johnson & johnson COVID-19 vaccine. *Chest*, *160*(4). https://doi.org/10.1016/j.chest.2021.07.764
- Atik, A., & Katmini. (2022). Nurses' Experience in Providing Excellent Service to Patients Very Important Person at Panti Nirmala Hospital. *ENDLESS: International Journal of Future Studies*, 5(1). https://doi.org/10.54783/endlessjournal.v5i1.43
- Azmy, A., Hermawan, E., Arifin, A. L., & Pranogyo, A. B. (2022). The effect of talent management optimization on workforce agility through job satisfaction and employee engagement to develop excellent service in private hospital. *Academy of Strategic Management Journal*, 21(5).
- Bangunawati Rahajeng, & Sabtanti Harimurti. (2020). An overview of the use of Carbamazepine at PKU Muhammadiyah Hospital Yogyakarta. *International Journal of Research in Pharmaceutical Sciences*, 11(SPL4). https://doi.org/10.26452/ijrps.v11ispl4.4329
- Berger, C. R., & Roloff, M. E. (2019). Interpersonal communication. In An Integrated Approach to Communication Theory and Research, Third Edition. https://doi.org/10.4324/9780203710753-24
- Bruhn Jensen, K. (2021). A Handbook of Media and Communication Research: Qualitative and Quantitative Methodologies. In *Taylor & Francis Group*.
- Creswell, J. W., & Creswell, J. D. (2018). Research Design: Qualitative, Quantitative, and Mixed Methods Approaches John W. Creswell, J. David Creswell Google Books. In *SAGE Publications, Inc.*
- Jennifa, J., Sari, D. A., & Anugraheni, E. (2021). Correlation Knowledge and Attitude of Nurse Behaviour in Medical Waste Disposal in Inpatient Ward of The JIH Hospital Yogyakarta. *D'Nursing and Health Journal (DNHJ)*, 2(2). https://doi.org/10.36835/dnursing.v2i2.200
- Larsen, R., Mangrio, E., & Persson, K. (2021). Interpersonal Communication in Transcultural Nursing Care in India: A Descriptive Qualitative Study. *Journal of Transcultural Nursing*, *32*(4). https://doi.org/10.1177/1043659620920693
- Lewis, S., Bambra, C., Barnes, A., Collins, M., Egan, M., Halliday, E., Orton, L., Ponsford, R., Powell, K., Salway, S., Townsend, A., Whitehead, M., & Popay, J. (2019). Reframing "participation" and "inclusion" in public health policy and practice to address health inequalities: Evidence from a major resident-led neighbourhood improvement initiative. *Health and Social Care in the Community*, *27*(1). https://doi.org/10.1111/hsc.12640
- Manning, J., & Kunkel, A. (2014). Researching Interpersonal Relationships: Qualitative Methods, Studies, and Analysis. In *Researching Interpersonal Relationships: Qualitative Methods, Studies, and Analysis*. https://doi.org/10.4135/9781452270142

- Mawarti, R. (2021). Stunting Knowledge on the Prevention of Babies with BBLR in the PKU Muhammadiyah Yogyakarta Hospital. International Journal of Health Science and Technology, 2(2). https://doi.org/10.31101/ijhst.v2i2.1847
- Miskir, Y., & Emishaw, S. (2018). Determinants of Nursing Process Implementation in North East Cross-Sectional Ethiopia: Study. Nursing Research and Practice. 2018. https://doi.org/10.1155/2018/7940854
- Novitasari, D. (2022). Hospital Quality Service and Patient Satisfaction: How The Role of Service Excellent and Service Quality? Journal of Information Systems and Management, 01(01).
- Osman, W., Ninnoni, J. P. K., & Anim, M. T. (2021). Use of the nursing process for patient care in a Ghanaian Teaching Hospital: A cross sectional study. International Journal of Africa Nursing Sciences, 14. https://doi.org/10.1016/j.ijans.2021.100281
- Puspita Dewi, P. (2018). Implementation Analysis Of Effective Communication Guide On Nurses In PKU Muhammadiyah Gamping Hospital. Jurnal Medicoeticolegal Dan Manajemen Rumah Sakit, 7(1). https://doi.org/10.18196/jmmr.7157
- Putri Apriliana Wulandari, P. A. W. (2021). Analysis Of Accuracy Of Cjs Patient Diagnosis Code In Buayan Health Center On The Outdoor Diagnosis Of Pku Muhammadiyah Gombong. Health Media, 2(2). https://doi.org/10.55756/hm.v2i2.60
- Ratna Sari, D., Kartikasari, D., & Herya Ulfah, N. (2021). Impact of Effective Communication on the Quality of Excellent Service and Patient Satisfaction in the Outpatient Department. KnE Life *Sciences*. https://doi.org/10.18502/kls.v0i0.8883
- Rohmansyah, R., Zuhri, M., & Danarto, A. (2019). The Contextualization of Philanthropic Hadiths Muhammadiyah PKU Hospital, Yogyakarta. RELIGIA. https://doi.org/10.28918/religia.v23i2.1887
- Shorten, A. (2022). Immigration, language and disadvantage. Nations and Nationalism, 28(2). https://doi.org/10.1111/nana.12794
- Solomon, D., & Theiss, J. (2020). Culture and Interpersonal Communication. In Interpersonal Communication. https://doi.org/10.4324/9780203147832-10
- Susiloningtyas, L., Cahyono, A. D., Wiseno, B., & Phetrasuwan, S. (2022). The Influence of Work Discipline on the Quality of Excellent Service for Health Administration Staff in Hospital Kediri Regency. STRADA Jurnal Ilmiah Kesehatan, 11(1). https://doi.org/10.30994/sjik.v11i1.887
- Thompson, J. D. (2017). Organizations in action: Social science bases of administrative theory. In **Organizations** in Action: Social Science Bases of **Administrative** Theory. https://doi.org/10.4324/9781315125930
- Wakslak, C. J., Smith, P. K., & Han, A. (2014). Using abstract language signals power. Journal of Personality and Social Psychology, 107(1). https://doi.org/10.1037/a0036626