



## Patient Satisfaction Health Insurance Participants In Childbirth Care

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### Abstrak

*Kepuasan pasien merupakan salah satu ukuran hasil dari kualitas perawatan. Salah satu masalah penting yang terus dihadapi adalah kurangnya kualitas baik pelayanan dan mendapatkan kepuasan klien. Tujuan dari systematic literature review ini adalah untuk menyimpulkan dan memeriksa literature yang berhubungan dengan kepuasan pasien ibu bersalin yang menggunakan asuransi kesehatan. Studi appraisal menggunakan program Critical Appraisal Skills Program (CASP) dan metode sintesis menggunakan modifikasi PICO dengan sumber data didapatkan dari PubMed dan ProQuest terdapat 734 artikel yang di review. Kriteria inklusi adalah (1) Ibu bersalin; (2) Kualitas pelayanan; (3) Kepuasan pasien ; (4) Asuransi Kesehatan (6)Teks lengkap; (7) Artikel yang diterbitkan dari 2013 hingga 2018; dan (8) jurnal internasional. Terdapat 7 artikel yang memenuhi kriteria inklusi. Berdasarkan review ditemukan kepuasan ibu dengan prenatal dapat dikatakan sebagai pengalaman yang dihasilkan dari penilaian subjektif tentang apa yang diharapkan ibu dan apa yang sebenarnya terjadi yang kaitannya dengan persalinan. Faktor yang mempengaruhi kepuasan pasien dalam persalinan yaitu faktor lingkungan, aspek teknis dan profesional keperawatan, dan aspek perawatan dan komunikasi. Kualitas pelayanan adalah konsep dominan dalam jaminan kualitas dan program peningkatan kualitas di sektor kesehatan. Salah satu metode untuk menentukan kualitas adalah mengevaluasi kepuasan pelanggan. Salah satu alat untuk mengevaluasi dan menganalisis kesenjangan kualitas layanan adalah SERVQUAL untuk mempelajari perbedaan antara harapan dan persepsi pelanggan dalam dimensi yang berbeda meliputi dalam lima dimensi kualitas layanan yaitu bukti fisik, keandalan layanan, merespons, jaminan dan empati. Untuk mendapatkan pelayanan kesehatan bisa menggunakan asuransi kesehatan.*

**Kata kunci** : kepuasan pasien, kualitas pelayanan, asuransi kesehatan

### Abstract

*Patient satisfaction is a measure of the quality of care. One important problem that continues to be faced is the lack of good service quality and client satisfaction. The purpose of this systematic literature review is to conclude and examine the literature relating to the satisfaction of maternal patients using health insurance. Assessment studies using the Critical Capability Assessment Program (CASP) and synthesis methods using PICO modifications with data sources obtained from PubMed and ProQuest had 734 articles reviewed. Inclusion criteria are (1) maternity; (2) Quality of service; (3) patient satisfaction; (4) Health Insurance (6) Full text; (7) Articles published from 2013 to 2018; and (8) international journals. There are 7 articles that meet the inclusion criteria. Based on these reviews it was found that maternal satisfaction with prenatal can be said to be the experience that results from a subjective assessment of what is expected from the mother and what actually happens related to labor. Factors affecting patient satisfaction in labor are environmental, technical and professional aspects of nursing, and aspects of*

*care and communication. Quality of service is the dominant concept in quality assurance and quality improvement programs in the health sector. One method for determining quality in evaluating customer satisfaction. One tool for evaluating and analyzing service quality gaps is SERVQUAL to study the difference between customer expectations and perceptions in different dimensions including five dimensions of service quality namely physical evidence, service reliability, response, assurance, and empathy. To get health services, you can use health insurance.*

**Keywords :** *patient satisfaction, service quality, health insurance*

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## **INTRODUCTION**

Health services are a concept used to provide sustainable services to the public and society. To get health services, especially maternity women can use health insurance. The benefits of health insurance are freeing participants from the difficulties of providing cash, health costs can be monitored, quality of service can be overcome and the availability of health data. Pregnancy and childbirth are powerful experiences for women(8). Several complaints from participants using health insurance for services from health facilities such as long queues at the facility, patients not examined by doctors, drugs often out of stock, prescription drugs are limited, lack of information about types of services at the hospital, and patients who visit the hospital repeatedly times (3). This is the same as a study conducted in Ethiopia nearly half of 175 (47.7%) women were dissatisfied and the majority of mothers lost the opportunity to receive screening(7). Patient satisfaction is one of the outcome measures of service quality(5.21) Patient satisfaction is a subjective and dynamic perception of the extent to which health services are expected and accepted(20.7). There is some evidence that women are less satisfied so that the reduced number of visits(22.34) influences judgments about the quality of services provided,

as a result of measuring customer satisfaction has become important in assessing system performance (13,10). Several studies conducted in Anglo-Saxon and Scandinavian countries show that satisfaction levels are monitored from the needs and expectations of women(6).

One important problem that continues to be faced is the lack of good service quality and client satisfaction (3). The declining quality of quality services can result in an increase in maternal and infant mortality rates. A complex and ongoing problem in the health sector, especially midwifery, is maternal and infant mortality. To reduce maternal and infant mortality, good services are needed to create services that are non-discriminatory, protective, participatory, and sustainable. Need to make laws governing health services with health insurance. Despite the fact that maternal patient satisfaction is important for further improvement. The purpose of a systematic literature review is to find out the factors that influence maternal satisfaction using health insurance.

## **MATERIALS AND METHODS**

Look for articles through a scope assessment system which is a systematic review that can be used to interpret results based on the evidence base (38). From 2008 to 2018, free full texts, human species, and scientific journals were

identified by the electronic database PubMed, and Proquest. The author uses Boolean (OR or AND) as a conjunction that combines keywords in a search, results that are more focused and relevant in PubMed. In developing the focus of the review and search strategy, researchers used the Population, Exposure, Results, and Study Design (PEOS) format in managing and completing the focus of the review. The use of PEOs will help in identifying key concepts in the focus of the review, developing appropriate search terms to describe the problem, and determining inclusion and exclusion criteria. The focus of the article search is qualitative research so that PEOs is considered suitable for use (2). The data filtering process uses PRISMA Flowchart which can improve the quality of publication reporting (33).

## RESULTS AND DISCUSSION

In searching for articles identified 734 articles, after filtering out titles, abstracts, research methods obtained 136 articles to be taken and reviewed independently based on inclusion and exclusion criteria. Then the articles were screened for further scoping examinations to find suitable and complete references regarding patient satisfaction in labor, 14 articles were obtained for critical assessment, then 7 articles were obtained for final review.

### Analysis of findings

Findings from the systematic search obtained by the article by grouping the findings

consisted of developed countries (Spain) and developing countries (Ethiopia, Uganda, Iran, India, Bangladesh, and Serbia). The quality of the literature Q1 and Q2 uses quantitative and qualitative research methods. All journals discuss patient satisfaction. Participants in the relevant literature are mothers who have BPJS receiving obstetric care.

### Results Findings Data

Data extracted from the *scoping review* article are organized into several themes. The themes included in this literature review include.

From several journals reviewed about factors that influence patient satisfaction in the delivery process related to 1) environmental factors, 2) technical aspects and professional care and 3) aspects of care and communication. There are various dimensions of satisfaction in improving the quality of health services is reliability, Assurance, tangibles, empathy and responsiveness.

### Discussion

Articles are selected and taken as part of patient satisfaction information. Considering patient satisfaction is a major concern for assessing the quality of health services provided and providing information about the success rate of service providers to meet client expectations and values. The main purpose explained by all the articles in this scoping review is to know the

Table 1. PEOs Framework

Population and their problems	Exposure	Outcomes or Themes	Study Design
- Women - Women's - Maternity - Mother - Mothers - Mothers' - satisfaction - Pleasure - Gratification	- quality of care - quality of care midwifery - labor - health Insurance	- experience - Opinion - View - Perspective	All research studies / design studies related to health insurance participant patient satisfaction with delivery services

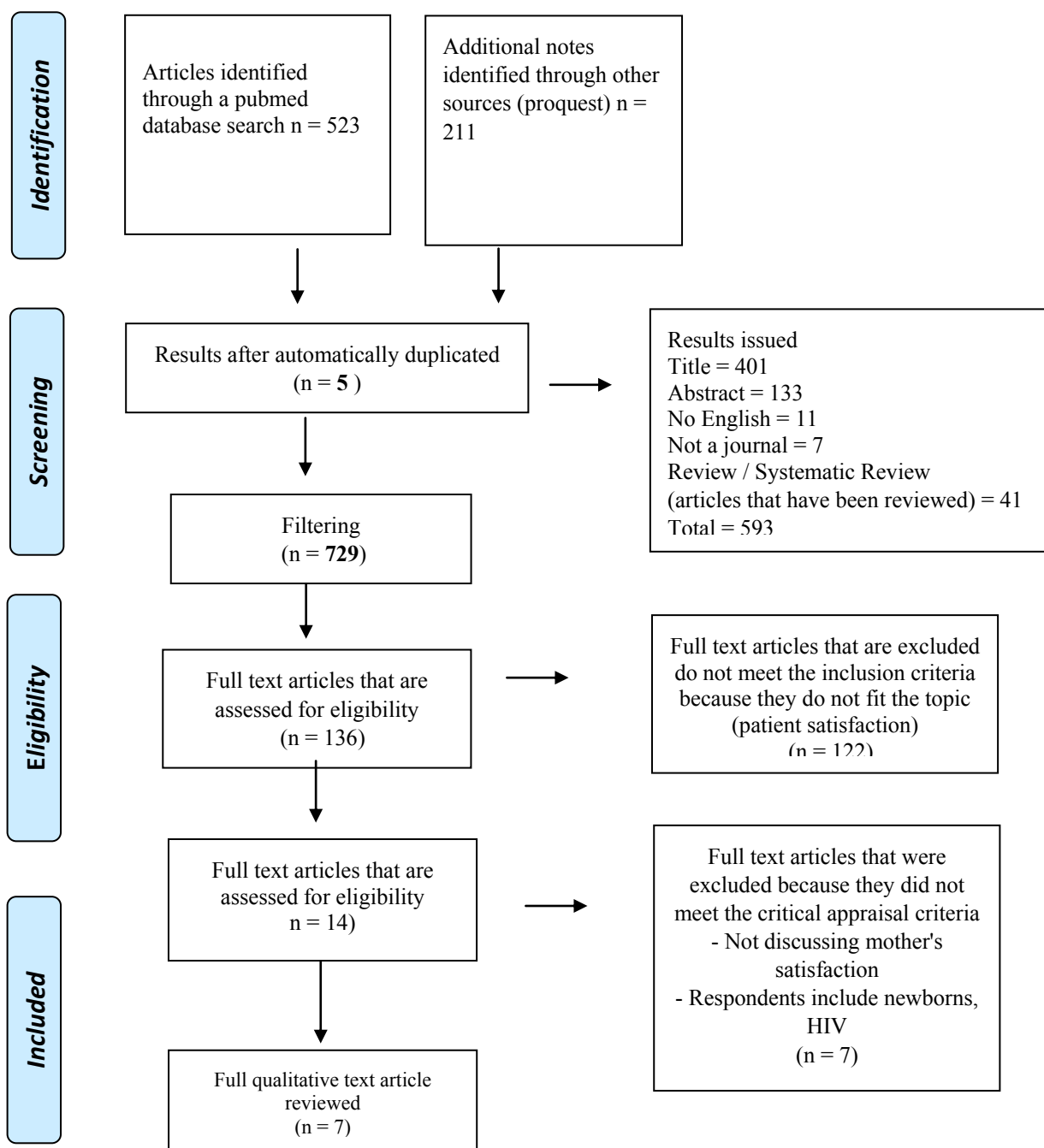


Figure 1. Flow Chard Sintesa Scoping review

evaluation of patient satisfaction in childbirth services.

According to Zarei (2015), patient satisfaction is a positive or negative attitude that reflects the patient's feelings towards the service and is an important part of the health care process (39). Patient satisfaction is a general outcome measure for the quality of care and the goal of improving quality in health care (15,17). Maternal satisfaction with prenatal care

can be said to be the experience that results from subjective judgments about what mothers expect and what actually happens related to labor. The results obtained from several articles that counseling services can satisfy mothers after being given counseling about pregnancy and childbirth. Factors relating to the mother are satisfactory with three aspects of awareness of the rights of the patient and preparation for childbirth through counseling (20).

Table 2. Extraction Data

Title	Author, Year and Place	Purpose	The design	Data collection	Informant and Recruitment	Theme	Research result	Grade
<i>Satisfaction with emergency obstetric and new born care services among clients using public health facilities in Jimma Zone, Oromia Regional State, Ethiopia: a cross sectional study</i>	(Kumsa et al., 2016) Ethiopia	To assess satisfaction with Emergency Obstetric services and newborn care among clients who use public health facilities in the Jimma zone, Southwest Ethiopia.	Quantitative	Questionnaire	Mothers who gave birth in the last 12 months	<ol style="list-style-type: none"> <li>1. Availability of drugs and equipment</li> <li>2. Communication of health workers</li> <li>3. Health care provided</li> <li>4. Attitude of health workers</li> </ol>	The first factor affecting overall satisfaction is the availability of medicines and supplies. A reduction in unit satisfaction with the availability of drugs and equipment reduces client satisfaction	Q1
<i>Client satisfaction in a faith-based health network: findings from a survey in Uganda</i>	(Okumu and Oyugi, 2018) Uganda	To assess the level of client satisfaction with services provided by a health facility	Quantitative	Questionnaire	mother respondents	<ol style="list-style-type: none"> <li>1. Access health facilities</li> <li>2. Waiting time</li> <li>3. Health providers</li> <li>4. Support staff</li> <li>5. Rights</li> <li>6. Payment</li> <li>7. Food</li> <li>8. Sanitasi</li> <li>9. Facilities and environment</li> <li>10. Approval</li> <li>11 Confidentiality</li> <li>12. Experience seeking treatment</li> </ol>	Most client satisfaction is valued above 70% except payment and rights. high dissatisfaction with payments. Health workers must take the time to explain the rights and rights and fees charged to the client.	Q2
<i>Gaps in continuity of care: patients' perceptions of the quality of care during labor ward handover in Mulago hospital, Uganda</i>	(Kaye et al., 2015) Uganda	To improve quality in health care	Qualitative	Interview	40 respondents during hospitalization and in 4-6 months after delivery.	<ol style="list-style-type: none"> <li>1. Communication</li> <li>2. Quality of care</li> <li>3. Decision-making</li> </ol>	Handover of maternity tasks is associated with patient dissatisfaction, especially the handover process, decision making that follows the handover and failure of communication of information to patients. As a gap in continuity of care, and contribute to poor quality of care, birth trauma and mothers' dissatisfaction with the experience of giving birth.	Q2

Title	Author, Year and Place	Purpose	The design	Data collection	Informant and Recruitment	Theme	Research result	Grade
<i>An investigation on the quality of midwifery services from the viewpoint of the clients in Isfahan through the SERVQUAL model</i>	(Oliaee, Jabbari and Ehsanpour, 2016) Iran	To evaluate the quality of midwifery services at the Isfahan health center	Quantitative	Questionnaire	218 respondents	Service quality dimensions: dimensions of responsibility, reliability, responsiveness, assurance and empathy	There are negative gaps in the five dimensions that are relevant in providing services. The widest gap is in the average tangibles dimension (Results: and the narrowest gap is in the assurance dimension. So that the performance of midwifery staff is not satisfactory for patients.	Q2
<i>Satisfaction with childbirth services provided in public health facilities: results from a cross-sectional survey among postnatal women in Chhattisgarh, India</i>	(Jha and Larsson, 2017) India	To measure the satisfaction of postnatal Indian women with childbirth services in several public health facilities	Quantitative	Questionnaire	1004 respondents Mothers for Vaginal Birth (VB) and Caesarean Birth (CB)	1. Patient Satisfaction 2. Factors that influence patient satisfaction	Most women are satisfied with the delivery services they receive. Maternal Satisfaction for Vaginal Birth (VB) is not satisfied interacting with the care provider (midwife), is able to maintain privacy, and free from fear of labor has a positive effect on overall satisfaction with labor and Caesarean Birth (CB) is not satisfied with postpartum care received	Q1
<i>Clients' Experience and Satisfaction of Utilizing Healthcare Services in a Community Based Health Insurance Program in Bangladesh</i>	Sarker, 2018) Bangladesh	To measure the level of client satisfaction with health services and insurance schemes	Quantitative	Questionnaire	233 respondents Mother has health insurance	1. Patient Satisfaction 2. Patient Satisfaction Domain 3. Health insurance	The most satisfied domains are related to diagnostic services, explanations about drugs prescribed by the environment around health facilities and the behavior of health workers towards clients	Q2
<i>Satisfaction with pregnancy and birth services: The quality of maternity care service as experienced by women</i>	(Gobernaticas et al., 2011) Spain	To investigate satisfaction with the quality of maternal care received and to determine whether health technologies increase satisfaction or interfere with the construction of personal satisfaction in the care process	Qualitative	Using the perspective, methodology, and phenomenology of inexperienced mothers	Mother after giving birth	1. Health technology 2. Quality of service 3. Facilities and expertise 4. Relations between officers 5. Structural aspects	Satisfied with health care technology and see it as a source of security	Q1



**Table 3. Thematic**

THEME	SUB THEMES
Patient Satisfaction	<ul style="list-style-type: none"> <li>A. Definition of Patient Satisfaction <sup>5,6</sup></li> <li>B. Factors affecting patient satisfaction in the delivery process <sup>1,2,3,5</sup> <ul style="list-style-type: none"> <li>1. Environmental factor                             <ul style="list-style-type: none"> <li>a. Cleanliness <sup>2</sup></li> <li>b. Comfort <sup>2</sup></li> <li>c. Sanitation (health and equipment) <sup>2</sup></li> <li>d. Food quality <sup>2</sup></li> <li>e. Facilities <sup>1,2,7</sup></li> </ul> </li> <li>2. Technical aspects and professional care                             <ul style="list-style-type: none"> <li>a. Treatment <sup>1</sup></li> <li>b. Approval <sup>2</sup></li> <li>c. Confidentiality <sup>2,5</sup></li> <li>d. Rights <sup>2</sup></li> <li>e. Decision making <sup>3,5</sup></li> <li>f. providing information <sup>3</sup></li> <li>g. attitudes of health workers <sup>1,2,5</sup></li> </ul> </li> <li>3. Aspects of care and communication                             <ul style="list-style-type: none"> <li>a. Communication of health workers <sup>1,3,5</sup></li> <li>b. Diagnostic treatment treatments <sup>2</sup></li> <li>c. Quality of health services <sup>2</sup></li> </ul> </li> </ul> </li> </ul>
Quality of Health Services	<ul style="list-style-type: none"> <li>Patient Satisfaction Dimension <sup>4,6,7</sup> <ul style="list-style-type: none"> <li>A. <i>Reliability</i> <sup>4,6</sup></li> <li>B. <i>Assurance</i> <sup>4,6</sup></li> <li>C. <i>Tangibles</i> <sup>4,6</sup></li> <li>D. <i>Emphaty</i> <sup>4,6</sup></li> <li>E. <i>Responsiveness</i> <sup>4,6</sup></li> </ul> </li> </ul>
Health insurance	Health Insurance <sup>6</sup>

Note: number is the article code in the *data extraction*

Environmental factors are very significant predictors of maternal satisfaction. Efforts to assess and improve the quality of the health care system require the experience of the health care system user in the form of satisfaction. The results show that almost half of all mothers are dissatisfied with cleanliness, sanitation facilities and the quality of food served (20). The causes of dissatisfaction also found in this study were the absence of clean latrines, lack of water supply and inadequate waiting chairs (1) substandard facilities (28) and place of visit. This is also supported by research conducted in Holeta, the center of Ethiopia, which revealed that most women have good perceptions but lack of equipment available at the clinic (5). Unlike the case with studies that say that clients are satisfied with the environment (facilities, environment, and cleanliness) provided by health schemes (35). In the health care environment, the hygiene process and management as a factor of satisfaction and a

better physical environment of the health facility result in greater patient satisfaction and even lead to positive perceptions from health care providers (39). The environment or location and access to health care influence the perception of the quality of care (10).

Satisfaction with the technical and professional aspects of care is an important role of midwives' professional competence during labor. The importance of good relations and communication for health workers with mothers in health services. Midwife characteristics such as supportive, friendly, caring, respectful and non-judgmental are the most desirable characteristics (20). Interaction, provision of information, involvement in decision making affect patient fasting during labor (15,24). Health education is an important component of maternal and child health services depending on health workers providing information about health. The most common causes of dissatisfaction are the

length of time to wait and the lack of provision of information about the care of mothers and babies especially mothers after giving birth (24,27). Increasing interpersonal interactions with health workers and ensuring privacy during labor are the first steps to increasing labor/delivery satisfaction (11,32). Communication between clients and health care providers has a significant impact on client satisfaction (17). Influencing factors such as the attitude and competence of polite providers, availability of drugs and medical equipment (23), care culture, disrespectful, inhuman service, hospitalization revenue process (18), payment (19) and lack of emotional support can hamper their access to obstetric care, provide support and comfort influence the assessment of maternal quality (30).

The role of health professionals in addition to carrying out technical procedures, health workers must pay special attention to humans to develop rational and communicative skills. Thus, to improve the quality of maternity services not only information about outcome indicators but also information about the views and experiences of women with the structure and process of care indicators (8). Research says that there is a relationship between nurse therapeutic communication and patient satisfaction (9). Communication between clients and health care providers has a significant impact on client satisfaction (19). The five dimensions of service quality are physical evidence, service reliability, response, guarantee, and empathy (28). Increased availability, accessibility, acceptance and quality of midwifery services in the functioning of a health system that is responsive to the needs and requirements of women in obtaining services (10) specific policies and resources needed, and maintaining implementation to address many factors in providing nurses. Maternal health uses (16) the importance of ensuring the quality of service during ongoing care (35). With health insurance exempt from providing cash, medical

costs can be controlled, service quality can be overcome and the availability of health data that can meet the health care needs without considering the current economic conditions that require health services (37).

## CONCLUSION AND RECOMMENDATION

The findings described here provide some further scientific insight on patient satisfaction. Three factors that influence satisfaction in childbirth using health insurance include 1) Environmental factors including cleanliness, comfort, sanitation, quality, and food facilities. 2) The technical and professional aspects of care include care, approval, confidentiality, rights, decision making, providing information and attitudes of health workers. 3) The aspects of care and communication include health worker communication, diagnostic medical care, and the quality of health services. Quality of service is the dominant concept in quality assurance and quality improvement programs in the health sector. Therefore, evaluating overall quality can contribute to understanding how patients feel certain dimensions of the quality of care and feedback provided by health services for patient satisfaction, especially in labor care.

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