



## Improving Community Health Services at Bumi Ayu Community Health Center

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**Abstract.** Community health centers (Puskesmas) play a strategic role as primary health care facilities in improving public health status. However, Puskesmas Bumi Ayu still faces several challenges, including limited human resources, inadequate facilities, and suboptimal community participation in supporting health services. This Community Service Program (PKM) aims to enhance the quality of community health services through a community organizing approach that actively involves health workers and service users. The methods employed include health education, interactive discussions, and participatory monitoring and evaluation conducted at Puskesmas Bumi Ayu, Dumai Selatan District. The results indicate an improvement in the understanding of health workers and the community regarding patient-oriented service quality, optimization of available resources, and strengthened collaboration among the health center, local government, and the community. Furthermore, the program fostered collective awareness, positive behavioral changes, and the emergence of local change agents supporting community-based health services. Overall, this PKM contributes to the development of more responsive, inclusive, and sustainable primary health care services in the working area of Puskesmas Bumi Ayu.

## 1. INTRODUCTION

Community Health Centers (Puskesmas) are primary health care facilities that play a strategic role in the national health system, particularly in promotive and preventive efforts for the community. Puskesmas Bumi Ayu, as one of the health service units under the authority of the Dumai City Health Office, bears a significant responsibility in providing basic health services to the population of Dumai Selatan District. With a service coverage area that includes Bumi Ayu Subdistrict, Ratu Sima Subdistrict, and Bukit Datuk Subdistrict, Puskesmas Bumi Ayu serves a population of 38,944 residents based on the 2022 population data of Dumai City. The large number of residents served requires the availability of high-quality, equitable, and sustainable health services to optimally improve community health status.

As a public health service institution, Puskesmas Bumi Ayu has a vision of realizing a healthy, independent, and equitable community. To achieve this vision, the health center implements several strategic missions, including improving the quality of excellent health services, strengthening the professionalism of health human resources, and enhancing community participation as well as cross-sectoral collaboration. However, along with population growth and increasing complexity of health problems, challenges in delivering

health services have also intensified. The World Health Organization emphasizes that the quality of primary health care services is strongly influenced by the availability of health personnel, facilities and infrastructure, management systems, and active community involvement in supporting health programs (World Health Organization 2010).

Objectively, Puskesmas Bumi Ayu still faces several constraints in providing optimal health services. Limitations in the number and competence of health human resources, as well as facilities and infrastructure that are not yet fully adequate, have resulted in a gap between community health service needs and the health center's capacity to meet them. This condition potentially affects public satisfaction and trust in the health services provided. According to Donabedian, the quality of health services is determined not only by outcomes, but also by the structure and process of care, which include health personnel, facilities, and effective work systems (Donabedian 1988). Therefore, efforts to improve health services at Puskesmas Bumi Ayu must be carried out in a comprehensive and sustainable manner.

On the other hand, advances in information technology provide significant opportunities to enhance the effectiveness and efficiency of community health services. The utilization of health information technology such as digital recording and reporting systems, patient data management, and digital-based health education media can assist health centers in improving service quality and expanding access to health information for the community. A study conducted by the Ministry of Health of the Republic of Indonesia indicates that the implementation of health information systems in primary health care facilities can improve data accuracy, accelerate service delivery, and strengthen evidence-based decision-making (Ministry of Health of the Republic of Indonesia 2020). Nevertheless, the optimization of information technology requires the support of competent human resources as well as active participation from the community as service users.

Based on these conditions, Puskesmas Bumi Ayu was selected as the subject of this community service program due to its strategic role in community health services and the real challenges it faces in improving service quality. This Community Service Program (PKM) focuses on enhancing community health services through strengthening human resource capacity, optimizing the use of information technology, and increasing community participation in supporting health programs. The expected social changes resulting from this program include improved quality of health services, increased public awareness and participation in maintaining health, and the realization of more responsive, effective, and equitable primary health care services within the working area of Puskesmas Bumi Ayu.

## 2. METHODS

This Community Service Program (PKM) was implemented using a community organizing approach that positions health workers and community members who utilize the services of Puskesmas Bumi Ayu as active subjects in the planning, implementation, and evaluation processes. The subjects of the program included health personnel of Puskesmas Bumi Ayu, village administrative officials, and community representatives from the service area of Puskesmas Bumi Ayu in Dumai Selatan District. The program was conducted at Puskesmas Bumi Ayu, considering its strategic role as a primary health care facility in improving community health status across the three subdistricts within its service coverage.

The planning process was carried out participatively through initial coordination with Puskesmas Bumi Ayu and community representatives to identify health service problems, priority needs, and available resource potentials. The involvement of community partners from the planning stage aimed to foster a sense of ownership, enhance active participation, and ensure that the community service program was relevant to objective conditions and community needs. The results of these initial discussions served as the basis for formulating a joint action plan to improve the quality of community health services.

The implementation methods of the PKM included health education, interactive discussions, and monitoring and evaluation. Health education was conducted through the delivery of materials related to improving community health services, including an understanding of health service quality, the role of health human resources, the utilization of facilities and infrastructure, and the importance of information technology support in health services. Discussion and question-and-answer sessions were used to explore real challenges faced by health workers and the community, as well as to formulate practical and contextual solutions. This approach was chosen to encourage mutual learning and the exchange of experiences between the PKM team and community partners.

The stages of the PKM activities consisted of: (1) the preparation stage, including coordination, problem identification, and material development; (2) the joint action planning stage through participatory discussions with community partners; (3) the implementation stage, consisting of health education and discussions on improving health services; (4) the monitoring and evaluation stage to assess the achievement of program objectives and partner responses; and (5) the reporting and follow-up stage, which included the preparation of PKM reports and recommendations for strengthening health services at Puskesmas Bumi Ayu.

### **3. RESULTS**

The implementation of the Community Service Program (PKM) at Puskesmas Bumi Ayu demonstrated participatory and collaborative mentoring dynamics involving the PKM team, health workers, and representatives of the service-user community. The range of activities carried out included initial coordination, health service quality improvement counseling, interactive discussions, as well as monitoring and evaluation. The mentoring process was conducted in a conducive and communicative manner, as indicated by the active involvement of participants in identifying health service problems and formulating alternative solutions that were aligned with the objective conditions of Puskesmas Bumi Ayu.

The results of the activities indicate an improvement in the understanding of both health workers and community members regarding the importance of patient-oriented health service quality. Technically, participants gained insights into health service standards, optimization of facilities and infrastructure utilization, enhancement of human resource competencies, and the role of information technology in supporting more effective and efficient service delivery. Interactive discussions also revealed several constraints that have been encountered, such as the limited number of health personnel, high workloads, and the suboptimal management of health service data systems.

In addition to increased technical capacity, this PKM activity also led to changes in behavior and attitudes among both health workers and the community. Health workers demonstrated a stronger commitment to providing excellent services, while community members began to develop greater awareness and willingness to actively participate in health programs and utilize health center services more optimally. This condition serves as an early indicator of emerging collective awareness regarding the importance of collaboration between service providers and the community in improving overall health status.

Furthermore, the results of the community service activities revealed the formation of more structured patterns of cooperation among Puskesmas Bumi Ayu, village administrative officials, and the community. This pattern can be understood as the embryo of a new social institution in the field of community-based health services. Additionally, several health workers and community figures emerged as local leaders who play a driving role in promoting improvements in health services and health education at the village level. Thus, this PKM activity contributes to a gradual process of social transformation toward more responsive, inclusive, and equitable community health services.

#### 4. DISCUSSION

The results of the PKM activities at Puskesmas Bumi Ayu reinforce the view that improving community health services depends not only on the availability of facilities and health personnel, but also on empowerment processes and active community involvement. The community organizing approach applied in this PKM is consistent with the concept of primary health care, which positions the community as a strategic partner in health development (World Health Organization 2008). These findings indicate that community participation plays a crucial role in enhancing the effectiveness and sustainability of health services.

Theoretically, improvements in health service quality are closely related to the concept of public service that emphasizes user satisfaction and service provider accountability. Parasuraman, Zeithaml, and Berry assert that service quality is determined by the alignment between users' expectations and perceived service performance (Parasuraman, Zeithaml, and Berry 1988). In the context of this PKM, the improved understanding of service standards and effective communication among health workers contributed to better perceptions of service quality at Puskesmas Bumi Ayu.

From a health development perspective, the findings of this PKM are also aligned with promotive and preventive approaches that emphasize the importance of community empowerment. Green and Kreuter argue that health behavior change is more effective when supported by increased knowledge, positive attitudes, and a conducive social environment (Green and Kreuter 2005). The increased awareness of community members in utilizing health center services and their active participation in health-related discussions reflect a process of social learning that supports sustainable health behavior change.

The social changes that have begun to emerge—such as cross-sectoral cooperation and the emergence of local health leaders—indicate a gradual process of social transformation. This is consistent with Soetomo's perspective, which emphasizes that community empowerment encourages the formation of new social institutions and local leadership that strengthen community capacity (Soetomo 2011). In the context of Puskesmas Bumi Ayu, the presence of local leaders plays a vital role in sustaining efforts to improve health services.

Overall, the discussion of the PKM results confirms that community-based and multi-stakeholder collaborative approaches are relevant strategies for improving community health services. The PKM not only resulted in increased individual and institutional capacity, but also promoted structural and cultural changes within the local health service system. These findings reinforce the literature emphasizing that sustainable health development requires synergy among health workers, communities, and local governments as an integrated public

service system (Todaro and Smith 2015).

## **5. CONCLUSION**

The Community Service Program (PKM) on Improving Community Health Services at Puskesmas Bumi Ayu demonstrates that a participatory community organizing approach is effective in promoting improvements in health service quality at the primary health care level. The mentoring process, conducted through socialization, capacity building, and participatory discussions, successfully enhanced the understanding, awareness, and involvement of health workers and community members in supporting more responsive and community-oriented health services.

Theoretically, the findings of this PKM affirm that health service quality is determined not only by the availability of resources and infrastructure, but also by community participation, quality communication, and trust-based relationships between service providers and users. Puskesmas plays a strategic role not only as a public service institution, but also as a space for social empowerment in fostering healthy behaviors and disease prevention at the community level.

Based on these findings, it is recommended that Puskesmas Bumi Ayu continue to develop participatory community-based health service models through strengthening human resource capacity, optimizing facilities and infrastructure, and utilizing information technology. Cross-sectoral synergy among the health center, village government, and the community should be reinforced to achieve high-quality, inclusive, and sustainable health services.

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