JURNAL MIDPRO, Vol. 13 No. 01 (Juni, 2021) : 40 - 51 Terakreditasi Nasional Peringkat 4 No. 36/E/KPT/2019

Available Online at http://jurnalkesehatan.unisla.ac.id/index.php/midpro



Quality Analysis Of Antenatal Care Services During The Covid-19 Pandemic

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ABSTRACT

Antenatal Care is a pregnancy service that aims to improve the physical and mental health of pregnant women optimally, so that they are able to face the period of childbirth, postpartum, newborn, and family planning. In this COVID-19 pandemic situation, there are many restrictions on almost all routine services including maternal and newborn health services. The more complete the Antenatal Care services provided, the better the service quality and satisfaction for pregnant women. To determine the relationship between direct evidence, reliability, responsiveness, assurance and empathy to the quality of ANC services in the work area of the Wolo Health Center in 2020. This research is a quantitative analytic study with an analytical survey design. The sample in this study were pregnant women with TM II and III in the working area of the Wolo District Health Center. Kolaka in 2020 as many as 86 people for the purposes of sampling. Data were analyzed using testChi Square.

Research Results: There is a significant relationship between physical evidence, reliability, responsiveness, assurance and empathy on the quality of antenatal care services in the Work Area of the Wolo District Health Center. Kolaka Year 2020. There is a significant relationship between direct evidence, reliability, responsiveness, assurance and empathy on the quality of antenatal care services. Improve the quality of ANC services during the Covid 19 Pandemic, such as adding land for indoor needs which must be spacious, so that pregnant women TM II and III feel comfortable in the waiting room for health services with a minimum distance of 1 meter.

Keywords: Quality of service; direct evidence; reliability; responsiveness; assurance and empathy

Article history:

Received: 7 Maret 2021

Received in revised form:16 Maret 2021

Accepted: 16 April 2021 Available online: 1 Juni 2021



E-ISSN: 2684-6764

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INTRODUCTION

E-ISSN: 2684-6764

Corona viruses are a large family of viruses that cause mild to severe diseases, such as the common cold or the common cold and serious diseases such as MERS and SARS-Transmission from animals to humans (zoonosis) and transmission from humans to humans is very limited.-For 2019-nCoV is still it is not clear how it was transmitted, it is suspected from animals to humans because the cases that emerged in Wuhan all had a history of contact with the Huanan animal market¹.

Non-natural disasters caused by the Corona Virus or COVID-19 have had an impact on increasing the number of victims and property losses, expanding the coverage area affected by the disaster, as well as having implications for broad socio-economic aspects in Indonesia. The government has designated this non-natural disaster as a national disaster through Presidential Decree of the Republic of Indonesia Number 12 of 2020 concerning the Determination of Non-Natural Disasters for the Spread of Corona Virus Disease 2019 (COVID-19) as a National Disaster².

Under normal circumstances, maternal and neonatal mortality in Indonesia is still a big challenge, especially during a disaster situation. Currently, Indonesia is facing a non-natural COVID-19 national disaster so that maternal and neonatal health services are one of the services affected both in terms of access and quality. It is feared that this will lead to an increase in maternal and newborn morbidity and mortality².

Antenatal Care is a pregnancy service that aims to improve the physical and mental health of pregnant women optimally, so that they are able to face the period of childbirth, postpartum, newborn, and family planning. Lack of knowledge of the mother about the signs of labor can cause harm to the mother and her baby. The description of the level of knowledge of pregnant women on the signs of the labor process is very important, because by knowing the signs of the labor process, the mother can know that the delivery is near and the mother is mentally and physically ready in the labor process. The signs of labor include thinning and opening of the cervix, uterine contractions, and the discharge of mucus mixed with blood.³

In 2020 the trend of K1 pregnancy visit coverage in Indonesia has decreased since January as many as 76,878, February as many as 65,167, March 61,506 and April 59,326. the same thing happened to the coverage of K4 pregnancy visits which also decreased, in January as many as 57,166, February 54,587, March 52,537, and April 50,7674

The decrease in the coverage of pregnant women's visits because without realizing it many people without symptoms (OTG) are active as usual, at risk of transmitting to pregnant women and there is no covid screening for pregnant women - rapid tests, Lots of information related to Covid-19 which

is not necessarily all true, There are still various public understanding of Covid-19, the level of public anxiety is quite high, including pregnant women. Community compliance is still low⁵.

E-ISSN: 2684-6764

In Indonesia, maternal mortality and neonatal mortality are still a big challenge and need attention in the COVID-19 disaster situation. Based on data from the Task Force for the Acceleration of Handling COVID-19 as of September 14, 2020, the number of confirmed COVID-19 patients was 221,523 people, recovered patients were 158,405 (71.5% of confirmed patients), and 8,841 people died (3.9). % of confirmed patients)⁶

Of the total patients who were positive for COVID-19, 5,316 people (2.4%) were children aged 0-5 years and 1.3% of them died. For the group of pregnant women, there were 4.9% of pregnant women who were confirmed positive for COVID-19 from 1,483 confirmed cases that had accompanying condition data. These data indicate that pregnant women, childbirth, postpartum and newborns are also vulnerable targets for COVID-19 infection and this condition is feared to increase maternal and newborn morbidity and mortality.⁶

In this COVID-19 pandemic situation, there are many restrictions on almost all routine services including maternal and newborn health services. For example, pregnant women are reluctant to go to the puskesmas or other health service facilities for fear of being infected, there are recommendations for postponing pregnancy check-ups and classes for pregnant women, as well as the unpreparedness of services in terms of personnel and infrastructure including Personal Protective Equipment. was born to be one of the services affected, both in terms of access and quality.⁷

The more complete the Antenatal Care services provided, the better the quality of service and satisfaction for pregnant women. Likewise, if the midwife as the provider of Antenatal Care does not provide services according to standards, the quality of Antenatal Care services is not good. Standardized Antenatal Care Service Guidelines during the pandemic period have been socialized to all midwives in Indonesia, including midwives in the Wolo Health Center Work Area, Kolaka Regency.⁸

Indications of service quality can be reflected in the patient's perception of the health services received. From this perception, patients can provide an assessment of the quality of service. Quality is a standard that must be achieved by a person or group or institution or organization regarding the quality of human resources, the quality of working methods, processes and work results in the form of products or services.⁹

The quality of Antenatal Care services in order to fulfill the needs of Antenatal Care services is determined by two factors. The first is the puskesmas factor that is related to the quality of health services and the level of patient satisfaction. That is, as long as the quality of Antenatal Care services meets patient satisfaction, the level of conformity will be high and puskesmas are needed by the community.

The purpose of conformity is that there is a similarity in goals, the puskesmas can provide good services to the community and the community receives services in accordance with expectations.⁸

E-ISSN: 2684-6764

On the other hand, as long as the quality of ANC services does not meet the level of patient satisfaction, the level of conformity will be low, resulting in puskesmas being abandoned by the community. The second factor is the change (transition) of demography, epidemiology, socioeconomics as well as the values and critical attitudes of the community that will create very complex and multifaceted health service needs. Thus, the position and quality of puskesmas services are very important to implement⁹

Coverage of repeat visits (K4) Working Area of Wolo Health Center Kab. Kolaka has decreased significantly from before the pandemic and during the pandemic. K4 visits before the pandemic period were an average of 115 pregnant women, while during the pandemic there were an average of 50 pregnant women and as many as 10% there were still visits by pregnant women who were less than 4 times during pregnancy.

METHOD

This research uses the type of analytical survey research. In this analytical survey research, research is not conducted on the entire object under study (population), but only takes part of the population (sample). In this study, an analysis of the quality of ANC services was seen in the Work Area of the Wolo Health Center, Kolaka Regency in 2020.

The population in this study were all pregnant women who carried out ANC examinations in the Wolo Health Center Work Area, Kolaka Regency in October - December 2020, as many as 631 pregnant women.

Taking this research sample using purposive sampling is one of the non-random sampling techniques where the researcher determines the sampling by setting special characteristics that are in accordance with the research objectives.

Research instruments are tools or materials used to collect data. The instrument of this research is a questionnaire that contains questions on the dependent and independent variables.

For bivariate analysis, this study uses the Chi Square statistical test with the condition that the p value is seen as the . value Continuity Correction if there are no cells with expected frequency >1 and many cells with expected frequency <5 not more than 20% of the total number of cells, parametric statistical tests and data scales for independent and dependent variables are categorical and categorical with table 2x2,

RESULTS

E-ISSN: 2684-6764

Table 1

Direct Evidence Relationship, reliability, responsiveness and assurance to quality ANC service

	Quality of Service ANC								
Live Evidence	Well			Not enough			Total	p value	OR
	f	%	f	f	%				
Well	5 7	82.6	1	2 1	17.4		69	0.023	4,222
Not enough	9	52.9	8	3 4	7.1		17		
Reliability	Quality of Service ANC								
	Well			Not enough			Total	p value	OR
		f %		f %					
Reliable	56	82.4		12	17.6		68	0.038	3,733
Not enough	10	55.6		8	4	4.4	18		
Responsiveness	Quality of Service ANC						Total	p value	OR
	Well			Not enough			_		
	f	%		f		%			
Respond	61	85.9		10		14.1	71	0.000	12,200
Not enough	5	33.3		10		66.7	15		
Guarantee	Quality of Service ANC					Total	P Value	OR	
	Well			Not enough			=		
	f	%		f			-		
Ensure	58	;	82.9	12	2	17.1	70		
Less Guarantee	8		50	8		50	16	0.013	4,833
Empathy	Quality of Service ANC Well Not end				gh	Total		P value	OR
	f	%	f	•	%				
Care	55	84	10		15.4		65	0.006	5,000
Not enough	11	.6 52	10	4	47.6		21		
Amount	66	.4 76 .7	20		23.3		86		

DISCUSSION

The Relationship of Physical Evidence to the Quality of ANC Services in the Work Area of the Wolo District Health Center. Colossus 2021.

Based on results research tested using Chi Squareit can be concluded that there There is a significant relationship between direct evidence and service quality in the Work Area of the Wolo District Health Center. Kolaka Year 2020.

E-ISSN: 2684-6764

Direct evidence includes physical evidence of services, equipment, staff and communication facilities. physical form (tangible) is a dimension related to the attractiveness of the physical facilities, equipment, and materials used by the hospital, as well as the appearance of employees as the ability to show their existence to outsiders. The appearance and ability of physical facilities and infrastructure and the state of the surrounding environment are tangible evidence of the services provided by the hospital. These physical facilities include buildings, equipment and equipment used (technology), as well as the appearance of employees. A good physical appearance will affect the patient's perception in choosing a hospital as a place of treatment.¹⁰

Previous research also states that there is a significant effect between Physical Evidence on Consumer Satisfaction. This means that the Physical Evidence at Hotel Santika Bandung affects customer satisfaction, meaning that a proper building, proper interior appearance and existing facilities will determine customer satisfaction.¹¹

Hospitals are considered good if in providing services. The completeness of hospital facilities also determines the assessment of patient satisfaction, for example health facilities that have complete and good facilities and infrastructure, safe parking spaces, comfortable waiting rooms, and clean inpatient rooms that pay more attention to needs. patients or people visiting the hospital.¹²

The results of other studies also show that simultaneously, service quality variables, dimensions of physical evidence (tangiable), reliability (reliability), responsiveness (responsiveness), assurance (assurance), and empathy (empathy) affect patient satisfaction. However, when viewed separately (partial), the service quality dimensions of physical evidence (tangiable), reliability (reliability), and assurance (assurance) have no significant effect on patient satisfaction.¹³

Based on the results of the research that the researchers found in the field, the researchers assumed that the direct evidence found at the KIA polyclinic was the lack of space, not only the examination room but also the waiting room. During the COVID-19 pandemic, one of the contents of the health protocol was the prohibition ofcrowd, but the condition of the room does not allow to maintain a minimum distance of 1 meter from other people.

The Relationship between Reliability and Quality of ANC Services in the Work Area of the Wolo District Health Center. Colossus 2021.

E-ISSN: 2684-6764

Based on results research tested using Chi Squarecould concluded that there is There is a significant relationship between reliability and service quality in the Work Area of the Wolo District Health Center. 2020 Kolaka

Reliability is the company's ability to provide services as promised accurately and reliably. Service reliability includes fast and precise patient admission procedures, service procedures that do not bother patients, fast and timely service, and officers provide error-free services. Reliability is categorized into satisfied and dissatisfied 14

Reliability will affect patient satisfaction, users of home care services, patients have the perception that if nurses are able to examine patients immediately then for them that is a quality service. In addition, when they were first cared for, the nurse accepted them without complicated procedures, this is in line with their view that quality is the speed of service.¹⁵

The reliability variable has a positive and significant effect on hospital patient satisfaction, it can be interpreted that if the ability to provide services immediately and satisfactorily and in accordance with what was promised will increase, patient satisfaction will also increase. ¹⁶

The relationship between reliability and patient satisfaction is that reliability has a positive and significant effect on patient satisfaction. The better the customer's perception of reliability, the higher the patient's satisfaction where if the patient's perception of reliability is bad, the lower the patient's satisfaction, where good quality will provide an experience for customers and will further invite them to come back for the next visit and become loyal customers.¹⁷

Based on the results of the research that the researchers met in the field, the researchers assumed that the quality of health services at the Wolo Health Center when viewed from the reliability dimension (reliability) had been carried out in accordance with community expectations, where midwives who served could provide reliable examinations for pregnant women TM II and III accurately and according to staffQuality standards that have been set according to the guidelines for midwifery services during the COVID-19 pandemic.

The Relationship of Responsiveness to the Quality of ANC Services in the Work Area of the Wolo District Health Center. Colossus 2021.

Based on results research tested using Chi Squareit can be concluded that there There is a significant relationship between responsiveness and quality of ANC services in the Work Area of the Wolo District Health Center. Kolaka Year 2020.

In research on the quality of health services and the factors that influence patient satisfaction, responsiveness is stated as one of the 12 indicators that are always included in various studies related to service quality. In an analytical study with 246 respondents comparing patient satisfaction with services at government hospitals and private hospitals, it was found that private hospitals had high satisfaction rates in the dimensions of responsiveness and empathy, while government hospitals had the lowest scores in the responsiveness dimension.¹⁸

E-ISSN: 2684-6764

The existence of customer satisfaction can provide several benefits including the relationship between the company and its customers to be harmonious, provide a good basis for repeat purchases, can encourage the creation of customer loyalty, form a word of mouth recommendation that is profitable for the company, reputation company to be good in the eyes of customers.¹⁹

For a hospital, it is very important to have officers, especially nurses who are responsive in serving customers/patients, because nurses are hospital resources who interact with patients the most. The responsiveness of officers in serving patients/clients is closely related to patient satisfaction¹⁷

Based on the overall results of the research exposure, the researcher can give an assumption that the quality of health services at the Wolo Health Center when viewed from the responsiveness has been implemented in accordance with the existing theory, where midwives have responsiveness in understanding the needs of pregnant women TM II and III who are served and provide quick response to those needs.

The Relationship of Assurance to the Quality of ANC Services in the Work Area of the Wolo Health Center, Kab. Colossus 2021.

Based on results research tested using Chi Squareit can be concluded that there There is a significant relationship between assurance and service quality in the Work Area of the Wolo District Health Center. Kolaka Year 2020

With the guarantees provided, the community is satisfied with the security services provided, because the security guarantees provided are not limited to the administrative side but really secure the quality of the food circulating in the city of Surakarta with the aim that the community can avoid diseases \pm diseases that easily transmitted and with this home industry visit it can improve the health of the people of Surakarta City²⁰

The assurance variable has a positive and significant effect on patient satisfaction at Sarila Husada Hospital Sragen for outpatients. This can be interpreted if the trustworthiness of employees increases, patient satisfaction increases ¹⁶

The better the guarantee provided, the higher the customer satisfaction Customer satisfaction is the level of one's feelings after comparing the perceived performance (results) compared to their expectations¹³

E-ISSN: 2684-6764

The higher the quality of service provided, the higher the level of patient satisfaction, service quality and price have a positive and significant effect on customer satisfaction, and have an indirect effect on customer loyalty through customer satisfaction.²¹

Completeness of standards and guidelines, media for delivering information on maternal and child health are important things to do to support the delivery of quality antenatal care services. In addition, it is also necessary to provide security and welfare guarantees for midwives on duty, especially in puskesmas and their networks8

Service quality greatly affects patient satisfaction. A service is said to be good or bad depending on the level of service user satisfaction based on the quality of the service itself. that pregnant women are generally able to express satisfaction with the quality of service even though some services do not match between the care they receive and their expectations of the facilities provided.¹⁰

Patients feel safe with the behavior of doctors, nurses are skilled and able to serve patients, patient confidentiality is maintained, patients feel safe with actions, treatment according to needs, friendly staff, the actions of doctors who are believed to be free from danger and doubt. On the other hand, there are still patients who are dissatisfied with various aspects of the guarantee.¹⁸

Based on the overall results of the research exposure, the researchers can conclude that the quality of health services at the Wolo Health Center when viewed from the dimension of assurance is mostly implemented, where midwives are able to guarantee a sense of security not transmitting Covid 19 because the midwives themselves use complete PPE and always wash their hands. after each action to the previous patient.

The Relationship of Empathy to the Quality of ANC Services in the Work Area of the Wolo District Health Center. Colossus 2021.

Based on results research tested using Chi Squareit can be concluded that there There is a significant relationship between empathy and service quality in the Work Area of the Wolo District Health Center. Kolaka Year 2020.

Empathy (caring attitude) shown by health workers. This attitude will touch the patient's emotions. This factor will affect the level of patient compliance (compilance). To be able to empathize, a health worker must be able to observe and interpret patient behavior. This depends on the ability of

health workers to interpret the information provided by patients about their internal situation through their behavior and attitudes. Every health worker has a different ability to empathize²².

E-ISSN: 2684-6764

Empathy consists of indicators: prioritizing the interests of the applicant/customer, the officer serving with a friendly attitude, the officer serving with a polite attitude, the officer serving non-discriminatory (discriminating) and the officer serving and respecting each customer. Empathy is divided into two, namely good and bad. It is said to be good if more than 75% of the indicators are met and it is said to be bad if it is less than 75%.23

Empathy variable does not have a positive and significant effect on patient satisfaction at Sarila Husada Hospital Sragen for outpatients. This can be interpreted if the ease of providing information and attention to patients properly does not necessarily increase, then the satisfaction of patients at Sarila Husada Hospital Sragen in Outpatients has a tendency to decrease.16

Health centers have hopes of getting more attention from health workers, for example, officers must be able to comfort patients if they are nervous and can accept patient complaints well. A number of 83.3% stated that respondents felt very cared for and provided services as needed15

Service quality can be measured by comparing perceptions between the expected service and the service received and perceived by consumers. Patient satisfaction is the result of the patient's assessment that the product or service has provided a level of enjoyment where this level of fulfillment can be more or less. Patients will feel satisfied if the perception is the same or more than expected. Patient satisfaction is determined by the patient's perception of service performance in meeting patient expectations. Patients feel satisfied if their expectations are met or will be very satisfied if the patient's expectations are exceeded.24

Based on the overall results of the research exposure, the researcher can provide an assumption that the quality of health services at the Wolo Health Center when viewed from empathy is in accordance with the theory or code of ethics of midwives, where midwives provide treatment or personal attention to pregnant women TM II and III who are served, so as to create a harmonious atmosphere and mutual understanding between those who serve and those who are served.

CONCLUSION

Pregnant women TM II and III who stated good quality amounted to 66 (76.7%) and poor quality amounted to 20 (23.3%). TM II and III pregnant women which states direct evidence of good category amounted to 69 (80.2%), reliability of reliable category amounted to 68 (79.1%), responsiveness of response category amounted to 71 (82.6%), guarantee category guarantee amounted to 71 (81.4%) and empathy for caring category amounted to 65 (75.6%). There is a significant relationship between

physical evidence, reliability, responsiveness, assurance and empathy on the quality of antenatal care services in the Work Area of the Wolo District Health Center. Kolaka Year 2020.

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