

ISSN: 3032-131X

https://doi.org/10.61796/jgrpd.v1i6.1112

APPLICATION OF SIKUAT IN HEALTH SERVICES AT PUSKESMAS CANDI DISTRICT SIDOARJO REGENCY

Ibnu Hadi Kusumo¹, Hendra Sukmana^{2*}

^{1,2}Public Administration Study Program, Muhammadiyah University of Sidoarjo, Indonesia

*Corresponding Author Email: hendra.sukmana@umsida.ac.id

Received: May 22, 2024; Accepted: June 29, 2024; Published: June 21, 2024;

Abstract: General Background: The integration of technology in healthcare systems has become essential for improving service efficiency and quality. Health information systems, like the SiKuat application, are increasingly being adopted in public health centers to enhance healthcare delivery. Specific Background: The SiKuat application is a health information system developed to streamline healthcare services at public health centers. However, its effectiveness in practice, particularly in resource-constrained settings like the Candi District Public Health Center, remains under-explored. **Knowledge Gap:** Despite its potential, there is limited research on the real-world challenges and benefits associated with the implementation of SiKuat in public health centers, especially concerning technical infrastructure and human resource limitations. Aims: This study aims to analyze the implementation and impact of the SiKuat application in healthcare services at the Candi District Public Health Center, Sidoarjo Regency. Results: The study found that the SiKuat application positively impacted healthcare services by improving patient data access, medication stock monitoring, and medical record accuracy. It also facilitated more organized administrative management. However, challenges such as a lack of skilled personnel and occasional technical disruptions were observed. Novelty: This research contributes new insights into the practical application of the SiKuat system, particularly in terms of its impact on operational efficiency and the barriers to its full utilization in a public health center setting. Implications: The findings suggest that while SiKuat has the potential to improve healthcare services, successful implementation requires ongoing training for healthcare staff and infrastructure improvements to overcome the existing challenges.

Keywords:: Implementation, E-Government, SiKuat Application, Health Services



This is an open-acces article under the CC-BY 4.0 license

Introduction

Public services are basic services in the administration of government, including local governments as the main providers of public services, to better meet public needs in accordance with the principles of good governance [1]. The government's obligation to public services is in accordance with the mandate of the Republic of Indonesia Law Number 25 of 2009 on Public Services. This is based on the reality that the needs and challenges faced by society and the government are becoming increasingly complex and diverse [2]. In line with one of the demands in public bureaucratic reform, namely reform in the field of government bureaucracy. For the residents, reforming public services is certainly very important to prioritize, considering they have long been victims of poor public service practices [3].

The high demand from the public for effective, efficient, transparent, and accountable public services requires the government to enhance its capabilities in the field of information and communication technology (ICT) to support the public service process [4]. Various digital applications are created with the aim of realizing an effective, efficient, transparent, and accountable work system, as well as improving work processes to be fast, precise, and accurate [5]. The utilization

of ICT in supporting public services is regulated by Presidential Instruction (Inpres) Number 3 of 2003 concerning the National Policy and Strategy for E-Government Development as an effort to coordinate government activities centered on digital-based public services to optimize work processes and government climate management systems [6].

Based on Presidential Regulation Number 95 of 2018 concerning the Electronic-Based Government System (SPBE), to realize clean, effective, transparent, and accountable governance as well as quality and trustworthy public services, SPBE is necessary [7]. The implementation of SPBE through e-government within the ranks of regional government agencies encourages and realizes an open, participatory, innovative, and accountable governance, thereby enhancing the quality and reach of public services to the community [8]. To realize this, the role of local governments as service providers (rowing) has shifted to a vision as directors, drivers, and facilitators in the provision of public services. This is marked by the orientation and active role of local governments in encouraging community participation in the provision of public services. [9]. In line with this, according to the Republic of Indonesia Law Number 23 of 2014 on Regional Government, Article 386 explains that regional governments can innovate public services to improve the performance of regional government administration. In this case, the local government plays an important role in providing public services, especially in the field of Health [10].

This is in line with the third goal of the 2030 Sustainable Development Goals (SDGs) Agenda, which is good health & wellbeing. Along with the transformation of healthcare services, the demand for digitized health service and information systems has become the government's main focus. As France has done in implementing digital technology in the healthcare system as a solution [11]. Some data also show that the implementation of the e-government model in the healthcare system in developed countries yields good results. Innovative digital health solutions have revolutionized Estonia's healthcare system. Meanwhile, in developing countries, the implementation of digital healthcare systems faces challenges and obstacles, such as issues with limited infrastructure and interoperability. It means that the urgency of services in the health sector is to improve effectiveness, efficiency, and the quality of services.

In the context of Indonesia, the massive use of e-government applications occurred during the COVID-19 pandemic, necessitating policies related to digital-based health service and information systems. This then gave rise to various integrated digital-based health service applications such as the SATUSEHAT application by the Ministry of Health. Subsequently, at the regional government level, the DKI Jakarta Health Office launched the JakSehat application as a form of e-government implementation in the health service system in Indonesia. Similarly, the Surabaya City Health Office has an E-Health application to provide health services to the community in managing public service interests, which is placed in each community health center [12]. Another breakthrough in digital-based healthcare services has also been made by the Sidoarjo Regency Government through the Health Office, which in 2023 implemented the Centralized Health Information System Application (SiKuat).

The SiKuat application is a digitalization program for building digital infrastructure to support the acceleration of service delivery to the community quickly, accurately, and safely. This health service is only implemented at community health centers because the focus is on improving and enhancing the quality of services at all community health centers in Sidoarjo [13]. Until now, there are 30 community health centers that have implemented the SiKuat application. Additionally, community health centers serve as the frontline of comprehensive and integrated health services at the sub-district government level. The benefit of the SiKuat application is that it provides clear

information regarding the patient registration process, doctor schedules, and examination schedules. Thus, with that information, patients do not have to wait too long to receive healthcare services.

Based on data from the Candi District Health Center in Sidoarjo Regency, the comparison of community services using the SiKuat application and directly at the Candi Health Center during 2023 is as follows:

Table 1. Number of Health Services on the Application at Candi Community Health Center

	Month _	Number of Users of the Sikuat Application at Candi District Health Center			
No					
		Man	Women	Amount	
1	February	667	3247	3914	
2	March	690	3263	3953	
3	April	451	2229	2680	
4	May	1049	3892	4941	
5	June	970	3401	4371	
6	July	1166	3556	4722	
7	August	1017	3748	4765	
8	September	1001	3601	4602	
9	October	1116	3680	4796	
10	November	1061	3917	4978	
11	December	1336	3662	4998	
F	Amount	10524	38196	48720	

Source: Processed by Researchers from Candi District Health Center (2024)

From the data above, it can be seen that in total, in 2023, the number of users of the SiKuat application at Puskesmas Candi was 48,720. Of this number, based on gender, the users of the SiKuat application at Puskesmas Candi were predominantly female, with a total of 38,916 users, while males only accounted for 10,524. The user data of the SiKuat application at Puskesmas Candi from February to December 2023 tends to be fluctuating, with the number of users increasing and decreasing each month. Nevertheless, the presence of the SiKuat application has accelerated healthcare services for the community. This aligns with the vision of the Health Department, which aims to adopt a digital approach to healthcare services [14].

Researchers conducted a review of previous studies discussing the implementation of e-government innovations by local governments. There are several previous studies with similar topics but different focuses, including: First, the research conducted by Rachman & Ridwan (2023) with the title "The Implementation of E-Government in Supporting Transparency and Accountability of the Regional Government of Polewali Mandar Regency" indicates that this research uses a qualitative descriptive method with a focus on the successful elements of e-government implementation. The research results show that the implementation of e-government in Polewali Mandar Regency is still not optimal when viewed in terms of support, capacity, and benefits. The difference between previous research and the research conducted by the researcher lies in the focus and locus of the public service sector, where the researcher focuses on the application of e-government in the health sector conducted in Sidoarjo Regency [15].

Second, research by Setianingrum et al., (2021) entitled "The Implementation of E-Government in Improving the Quality of Public Services at the Investment and One-Stop Integrated Service Office of Bandung City, West Java Province" with a qualitative research approach. This research uses Indrajit's e-government theory related to the elements of successful e-government implementation and to examine the factors influencing e-government implementation, as well as conducting a SWOT

analysis and litmus test to find the appropriate strategies to be used. The results show that the implementation of e-government in improving the quality of public services at DPMPTSP Kota Bandung is still not optimal. The availability of an integrated information system is present, but the implementation of socialization has not been evenly distributed among the general public and professions. The element of novelty in this research is that the focus of the study is conducted within the scope of governance in the Puskesmas area of Candi District, Sidoarjo Regency.

Third, research by Wirawan (2020) titled "The Implementation of E-Government in Welcoming the Contemporary 4.0 Industrial Revolution Era in Indonesia" with normative legal research focusing primarily on reviewing literature. The research approach used is the statute approach and the case approach. (case approach). Normative legal research found that the development of the e-government system in Indonesia is increasing in quantity but still inadequate in quality because the implementation of e-government is not evenly distributed across all regions and still functions merely as a provider of static information. Meanwhile, the fundamental obstacles in the implementation of e-government in the 4.0 industrial revolution lie at the regional government level. The most prominent distinguishing factor from previous research is the research approach, where the researcher uses a descriptive qualitative approach in the form of data collection through observation, interviews, and documentation.

The SiKuat application, as one of the efforts to realize effective and efficient e-government in the health sector, should be able to provide optimal service satisfaction for the community. However, based on field observations, there are several issues in the implementation of the SiKuat application at Puskesmas Candi, including the lack of features that meet needs, such as the absence of additional patient consent forms and electronic signatures, even though medical records are already electronic, which necessitates preparing manual forms for patient consent and signatures. Additionally, there is no pharmacy menu or medication queue system in the SiKuat application, the socialization of the SiKuat application to the community is still suboptimal, the human resources from the patients themselves, and the application is considered not yet facilitating healthcare services effectively. This is reinforced by the poor ratings or reviews on Google Play from some members of the public who access the SiKuat application. Service users feel that the application system still frequently encounters errors, such as long loading times, the message "something went wrong," and the service queue numbers not being integrated between the application service and the direct service at the community health center [16]. Moreover, the lack of socialization of the SiKuat application also affects the number of users of the SiKuat application at Puskesmas Candi. The initial goal of launching the SiKuat application was to improve healthcare services that were originally conducted conventionally and then transformed digitally. Therefore, it cannot be denied that the existence of this application is expected to solve all problems related to healthcare services at the puskesmas, because the implementation of e-government innovation requires an adjustment period to adapt, both for public service providers and for the community itself [17].

It can be seen from the explanation above regarding the SiKuat application in improving healthcare services, that it is necessary to see to what extent the SiKuat application is implemented. An innovation will be easier to understand if it is understood using a specific model or framework of thought. In analyzing this issue, the application of digitalization concepts in the public sector can be carried out seriously and given attention by the public sector. Indrajit in his book titled "Electronic Government" mentions that the Harvard JFK School of Government states there are 3 (three) elements of successful e-Government implementation that must be possessed and seriously considered, namely: First, the support of the desire (intent) or political will from public officials and politicians

to truly implement the concept of e-government. What is meant by support here is: a) The agreement on the e-government framework as one of the keys to the country's success in achieving its national vision and mission; b) The allocation of various resources (human, financial, labor, time, information, etc.) at every level of government to build this concept with a cross-sectoral spirit; and c) The dissemination of the e-government concept evenly, continuously, consistently, and comprehensively to all bureaucratic circles and the general public through various sympathetic campaign methods.

Second, capacity marked by the presence of the ability or empowerment of the local government in realizing the related e-government dream into reality. There are three things that the government must have in relation to this element, namely: a) The availability of sufficient resources to implement various e-government initiatives, especially those related to financial resources; b) The availability of adequate information technology infrastructure because this facility is 50% of the key to the success of e-government implementation; and c) The availability of human resources with the necessary competencies and expertise so that the implementation of e-government can align with the expected principle of benefit.

Third, the value where the first and second elements are the supply side (service providers from the government side), while the third element (value) is the aspect viewed from the demand side, various e-government initiatives will be useless if there are no parties who feel benefited by the implementation of the concept. What determines the extent of the benefits obtained from e-government is not the government itself, but rather the society and those who have an interest. (demand side). For the government, it is crucial to be meticulous in selecting the priority types of e-government applications that should be prioritized in their development so that they truly provide value (benefits) that are significantly felt by the community [18].

Furthermore, Indrajit revealed that the combination of the three most important elements above will form a nexus or nerve center of the e-government network, which is the key to the main success of ensuring success. In other words, experience shows that if the element becomes the focus of a striving government. Public trust in the administration of public services is the main goal that the government aims to achieve. The goal of implementing e-government is to create an accountable, clean, open, and service-oriented government. In addition, it also aims to establish a continuous information network, build relationships with the business world to support the economy, and create efficient and accountable management systems and work processes [19]. Thus, the purpose of the research is to analyze the implementation of the SiKuat application in optimizing health services at the Candi District Health Center, Sidoarjo Regency.

Methods

The research method used in this study is qualitative, which is descriptive in nature, with the aim of obtaining a deep and comprehensive understanding and depiction. The use of qualitative research methods is based on the existing problems and is considered the most appropriate and suitable for describing the issues that occur. defining qualitative research methods as methods to explore and understand meanings that are considered to originate from social issues by a number of individuals or groups of people. Researchers act as key instruments to obtain the necessary data by being intensively involved in seeking direct data until it is found and deemed sufficient. The reason for using the qualitative descriptive method is due to the nature of the problem being studied; this research aims to analyze and describe the empirical phenomenon, namely the implementation of the SiKuat application in optimizing health services at the Candi District Health Center in Sidoarjo Regency. The researcher wants to provide a detailed depiction of data and facts in the form of words

or images in a narrative writing. Through this research, it is expected to obtain a systematic, factual, and accurate description of the facts regarding the implementation of the SiKuat application.

Data sources were obtained through observation with direct observation of the research object, documentation in the form of documents, tables, government regulations, and similar documents that are considered beneficial and relevant to the research problem, and interviews with informant selection according to W. Laurence Neuman, which is the researcher's assessment of individuals who can provide the best information to achieve the research objectives. The researcher selects informants who are considered credible to address the research problem [20]. Five informants were obtained in this study, namely 1) Dr. Siti Murtafia, MM, Head of Puskesmas Candi; 2) Puji Santoso, Person in Charge of the SiKuat Application (PIC); 3) Anas Al Ayyubi Fatoni, Operator of the SiKuat Application; 4) Ema Najmatuz Zahiroh; and 5) Eka Arum Pramestya, a patient using the SiKuat application at Puskesmas Candi.

The analysis technique using the interactive model of analysis was developed by Miles et al., (2019) which consists of four components: data collection, data condensation, data presentation, and drawing conclusions. The data that has been collected is then categorized in the process of writing a scientific article. After that, confirmation was carried out with other informants to obtain valid data. Next, the data is processed and a discussion is conducted on the qualitative data in a descriptive form by analyzing it thoroughly. This model can effectively and efficiently summarize and simplify the data obtained during the research, so that the results of this research can be accountable, objective, valid, and accurate [21].

Results and Discussion

Digital platforms through e-government increase opportunities for the public to participate in public policy and management processes, and give rise to many innovations at the government level. The government has been seeking new strategies and tactics not only to rebuild a responsive relationship between them and their citizens but also to encourage citizen engagement in public administration [22]. What is surprising is that despite Indonesia's social context as a developing country, Indonesia is adopting technological innovations, particularly in the ICT field for the health sector. With an average annual per capita income of IDR 75.0 million or USD 4,919.7 per person in 2023 from BPS in 2024, and with various social issues faced, as well as problems with the availability of technological infrastructure, it is interesting to see how the SiKuat application optimizes health services provided by the Puskesmas in Candi District, Sidoarjo Regency. Considering that numerous studies on e-government in the health sector indicate many obstacles in the implementation and sustainability of programs in developing countries. To analyze the implementation of e-government, the researcher uses the theoretical study of the success elements of e-government implementation proposed by Harvard JFK School of Government, as cited by Indrajit, which includes 3 (three) elements, namely support, capacity, and value, which can be elaborated as follows:

Elemen support

Currently, the Minister of Health Regulation (Permenkes) Number 24 of 2022 mandates that all healthcare facilities use electronic medical records (EMR) as documents in providing services at healthcare facilities. (fasyankes). The current development of technology makes digital services a fundamental necessity for public health services. The touch of technology has a significant impact on the appearance or quality of healthcare services. One of the efforts to digitize healthcare services is the Electronic Medical Record. The principles of data and information security and confidentiality are also important aspects in the implementation of RME. The introduction of Permenkes Number 24

of 2022 is an improvement over the previous regulation, namely the Minister of Health Regulation Number 269 of 2008.

The Sidoarjo Regency Government, through the Health Office (Dinkes), implements the regulation. Centralized Health Information System for Community Health Centers (SiKuat), which is an innovation in providing clear information related to patient registration procedures, doctor practice schedules, examination schedules, and medical records. The legal basis that subsequently prompted the issuance of the Decree of the Head of the Sidoarjo District Health Office Number: 445/33/438.5.2/2023 Regarding the Centralized Health Information System for Community Health Centers. (SiKuat). The existence of these regulations to address the development of digital technology in society has resulted in the digital transformation of healthcare services, so medical records need to be maintained electronically with principles of data and information security and confidentiality. The priority of the SiKuat application service is to become a digital service in supporting the acceleration of service delivery to the community through fast, precise, and safe service. Therefore, all community health centers in Sidoarjo Regency, including Candi Community Health Center, are required to implement electronic medical records through the application https://sikuat.sidoarjokab.go.id/.

On the financial support side, the SiKuat application is sourced from the Regional Public Service Agency (BLUD) as a technical implementation unit (UPT) that applies sound business practices to improve healthcare services to the community. The budget for the SiKuat application comes from the BLUD Puskesmas, as outlined in the adequate BLUD Puskesmas business plan budget, where since 2023, BLUD has allocated a budgetary resource of 12 million per year with the following details:

Table 2. Budget for the Implementation of the SiKuat Application at Candi Community Health Center

No.	Budget Ceiling	Year	Explanation
1	Rp.12.000.000,-	2023	Honor Narasumber Sosialisasi Program Sikuat
1.	Kp.12.000.000,-	2023	Rp.1.000.000/Bulan Selama 1 Tahun
			Honorarium for the Socialization Program Resource
2.	Rp.12.000.000,-	2024	Person: Rp.1,000,000/Month for 1 Year

Source: Candi District Health Center (2024)

Meanwhile, in terms of human resource availability, Puskesmas Candi has a Person in Charge of the SiKuat Application (PIC) and the main operator of the SiKuat application, as well as operators in each polyclinic who directly integrate with the main operator of the SiKuat application. This is supported by their ability to operate ICT and provide services according to standard operational procedures (SOP). The SiKuat application includes services in each polyclinic, administration, and payment for health services, covering the Puskesmas Kiosk, Counter, Pharmacy, Warehouse, Cashier, Emergency Room, Laboratory, General Polyclinic, Elderly Polyclinic, Family Planning Polyclinic, and Maternal and Child Health Polyclinic. This is also reinforced by SiKuat application users who assess that the human resources in the health services of the SiKuat application at Puskesmas Candi have the capability to provide clear information regarding the patient registration process, doctor practice schedules, and examination schedules. With that information, patients do not have to wait too long to receive healthcare services.

From the interview with Anas Al Ayyubi Fatoni, the operator of the SiKuat application at Puskesmas Candi, he stated, "As the operator of the SiKuat application, my main task is to ensure that all electronic medical record data entered into the system is accurate and up-to-date. I also assist

patients at Puskesmas Candi in understanding and using the SiKuat application correctly. The SiKuat application is very helpful in terms of electronic medical records. With this application, the recording and tracking of patient medical records become more efficient." I can also quickly generate the required reports without having to manually collect the data.

The socialization of the SiKuat application is conducted directly every month in all villages within the Candi sub-district. In addition to socializing with the community, socialization is also provided to the implementing officers with the issuance of application guidelines. (manual guide). In this socialization, it was conveyed by the Head of the Sidoarjo District Health Office, the Head of the Candi Health Center, and the SiKuat Application Operator with the aim of introducing and educating users about the usage and benefits of the SiKuat application in improving efficiency, transparency, and accuracy in electronic medical record keeping and online queuing. Here is the documentation of the socialization of the SiKuat application in Kalipecabean Village, Candi District, Sidoarjo Regency, conducted by Dr. Siti Murtafiah, MM, Head of the Candi District Health Center.



Figure 1. Socialization of the SiKuat Application in Kalipecabean Village, Candi **Source:** Author's Documentation, 2024

Based on the results of interviews with informants, it was found that socialization was conducted both offline and online, targeting the puskesmas environment as the PIC and the community as application users. In addition, the SiKuat application has been socialized through the official website http://dinkes.sidoarjokab.go.id/ and social media such as Instagram @pemkabsidoarjo. The socialization of the SiKuat application is carried out evenly, continuously, consistently, and comprehensively by the Sidoarjo District Health Office Team. In this socialization, several values emphasized in the implementation of the SiKuat application include service-oriented, accountable, competent, harmonious, loyal, adaptive, and collaborative.

Elemen Capacity

Based on the review from the perspective of IT infrastructure availability, it is known that the SiKuat application has been able to integrate the application system built by the Ministry of Health, namely the Satu Sehat application, to support the digital transformation of the Ministry of Health. This is because the SiKuat application includes standardization of services and health information for the ease of exchanging medical record data and various other benefits such as online queuing, patient data search, addition of patient data, online patient data recording, BPJS bridging, E-Prescription creation, and health service payments. The data integration capability of the SiKuat application is inseparable from the regulation of the Sidoarjo District Health Office Head's Decree Number: 445/33/438.5.2/2023, which mandates that the SiKuat application will always be developed and adjusted to the applicable provisions gradually and continuously.

In an interview with Anas Al Ayyubi Fatoni, the operator of the SiKuat application at Puskesmas Candi, regarding the management of the SiKuat application in relation to handling large

volumes of data, especially with the continuously increasing electronic medical records, "the SiKuat application uses a robust and structured database to handle large volumes of data." This system is equipped with data compression and archiving management features that help optimize storage. We also have a routine backup mechanism to ensure that the data remains safe and can be restored in case of damage.

As for the existing infrastructure, both adequate computers and a strong network are in place, allowing for a quick response in the services required by the community for the SiKuat application. The speed of data access and transactions heavily depends on the network infrastructure and the capacity of the servers used. If there are any issues, we usually scale the server or increase the network bandwidth, as well as conduct regular monitoring of the system's performance to ensure the SiKuat application remains responsive. The SiKuat application is designed with scalability in mind. It can also add features or increase user and data capacity without having to make major changes to the system. The development team also continuously monitors the organization's needs to ensure SIKUAT remains relevant and effective.



Figure 2. Integration of the SiKuat Application into Satu Sehat **Source:** satusehat.kemkes.go.id

In addition, the capacity of human resources from the Health Department and Community Health Centers in planning and readiness for infrastructure needs, as well as efficient budget allocation, can have an impact on the development of reliable ICT. The HR capacity in the SiKuat application, especially at Puskesmas Candi, is carried out based on job analysis and workload analysis, where the employee needs have been adjusted in terms of quantity and quality through training and technical guidance to improve the available HR capabilities. Even monitoring and evaluation are conducted once a month by CV Natusi and the Health Office to ensure the smooth operation of the SiKuat application.

Elemen Value

With the issuance of the Sidoarjo Regency Health Office Head's Decree Number: 445/33/438.5.2/2023, the work environment of all Puskesmas in Sidoarjo Regency, especially Puskesmas Candi, is committed to realizing an application system to respond to community demands related to the acceleration and ease of health services while considering the principles of data and user information security. This is because the SiKuat application, which has been integrated with the Satu Sehat application as a national-scale central system, contains information such as medical records from examinations, treatments, observations, and interviews with patients in the SiKuat application, which is confidential information.

Figure 3. SiKuat Application Manual Guide **Source:** Puskesmas Kecamatan Candi, 2024

CV Natusi, as a stakeholder collaborating with the Health Office, provided the PIC with an offline explanation of the manual guide or application usage handbook, facilitating the socialization process of the SiKuat application. Meanwhile, the PIC and Puskesmas Candi, as the program implementers, conducted socialization to the community through notifications at village offices in the Candi District area.

Based on an interview with Eka Arum Pramestya, a user of the SiKuat application, it is also noted that "the implementation of the SiKuat application has brought benefits to the public, especially changing the image of community health centers that have been considered slow in providing health services. Thus, the existence of the SiKuat application can provide convenience where the community can register for queues, receive health services, obtain medication, therapy, and procure medicine easily." Moreover, this application also provides health information and doctor schedules as well as health services available at community health centers.

The assessment is relevant to the results of the 2023 Government Agency Performance Report (LKJiP) of the Sidoarjo District Health Office, which states that efforts to optimize health services to the community through Puskesmas in the Sidoarjo District continue to be enhanced through the construction of new Puskesmas buildings, the fulfillment of medical/clinical/laboratory equipment and other facilities, the adequacy of medical personnel (doctors, nurses, specialists) continues to be improved, as well as non-medical personnel who will support the smooth operation and functions of the Puskesmas. The performance for the average score indicator of the Community Satisfaction Survey (SKM) at the Puskesmas can be illustrated in the following table.

Table 3. Average Survey Scores of SKM at Community Health Centers

Target	Realization	2023		
Indicator	2022	Target	Realization	Achievement Percentage
The average SKM score at the community health center	95,5%	95%	96,98%	102%

Table 4. The SKM score at the community health center

No	Puskesmas	Average SKM
1.	Sidoarjo	97,39

No	Puskesmas	Average SKM
2.	Sekardangan	97,12
3.	Urangagung	96,01
4.	Buduran	96,57
5.	Candi	97,27
6.	Porong	98,71
7.	Kedungsolo	96,42
8.	Tanggulangin	95,86
9.	Tulangan	95,64
10.	Kepadangan	96,43
11.	Jabon	98,15
12.	Krembung	96,5
13.	Krian	95,54
14.	Prambon	97,81
15.	Tarik	96,36
16.	Balongbendo	97,22
17.	Sedati	98,79
18.	Wonoayu	97,74
19.	Taman	98,14
20.	Trosobo	96,44
21.	Waru	96,86
22.	Medaeng	97,89
23.	Gedangan	97,69
24.	Sukodono	96,33
25.	Barengkrajan	95,45
26.	Ganting	97,05
27.	Sidodadi	95,35
28.	Tambakrejo	98,88
29.	Tarik	96,93
30.	Wonokasian	96,93
	Average Puskesmas in Sidoarjo	96,98
	Regency	70 , 78

Source: LKJiP Dinkes Kabupaten Sidoarjo Year 2023

From the above phenomenon, it can be observed that Puskesmas Candi received an average SKM score of 97.27, indicating that the performance achievement for the level of community satisfaction with the services of Puskesmas Candi in 2023 has met the target. This is also because Puskesmas Candi has been accredited with a full status (the highest accreditation status), resulting in an improvement in service quality. Additionally, due to budget support, the facilities and infrastructure at the health center are well-equipped, leading to better service quality. In addition, Candi Health Center always responds quickly to any complaints from patients regarding the service. Improvements and evaluations of services are continuously carried out to ensure that the needs of the community are met well. Various efforts to optimize healthcare services at Puskesmas Candi include improving response time and patient wait times, evaluating service flow to expedite the service process, enhancing a culture of greeting and smiling, and improving coordination and communication between programs to foster good cooperation within Puskesmas Candi.

Conclusion

The SiKuat application is an e-government system developed by the Sidoarjo Regency

Government in the health sector to facilitate access to health information and health services available at community health centers. Based on the discussion and data obtained with the approach of 3 elements of successful e-government implementation, namely: First, support, which is very important in ensuring that users can optimally utilize SiKuat, reduce potential operational disruptions, and improve efficiency in financial and asset management. This adequate support demonstrates SiKuat's commitment to providing sustainable services and supporting users' success in using the application. Second capacity, this SiKuat application has a strong capacity to support the organization's operations. SiKuat is capable of handling many users simultaneously with effective access management, as well as managing large volumes of data with good access speed. This system is also designed to handle a large number of transactions securely and efficiently without compromising performance. Supported by stable server and network infrastructure, SiKuat ensures optimal performance. In addition, this application is easy to integrate with other systems used by the organization and can be further developed according to the organization's evolving needs. The three values, the SiKuat application provides great value to the organization. SiKuat can improve operational efficiency by integrating financial and asset management into a single platform, saving time and costs. This application also improves accuracy and transparency, facilitates audits, and reduces the risk of errors. In addition, SiKuat has flexibility and can be developed according to the organization's needs, as well as being supported by strong technical support and training for users.

Overall, SiKuat offers significant improvements in efficiency, accuracy, and flexibility for organizations. shows that the implementation of the SiKuat application at Puskesmas Candi has been effective and efficient. The existence of the SiKuat application functions not only as a provider of statistical information but also serves to provide services quickly, accurately, and safely. Interestingly, the SiKuat application has also been integrated with the Satu Sehat application, which is the central system of the Ministry of Health. Puskesmas Candi, as the program implementer, demonstrates its commitment, especially in terms of policy regulations, human resource competence and expertise, budgetary resources, and adequate SiKuat application infrastructure, which has implications for the acceleration of healthcare services. This is also supported by efforts within the internal environment of Puskesmas Candi, which conducts intensive monitoring and evaluation every month.

The recommendation that can be given in this research is that the implementation of the SiKuat application can become a best practice outside the Sidoarjo Regency area for implementing digital transformation with an approach to accelerating public health services. However, on the other hand, for Puskesmas Candi or the Health Office along with stakeholders, they can make technical developments and improvements to maximize the use of the SiKuat application, thereby enhancing the quality of health services to the community.

References

- [1] Undang-Undang Republik Indonesia Nomor 25 Tahun 2009 Tentang Pelayanan Publik. 2009.
- P. Maolana, T. F. A. Maruao, A. Hidayani, C. S. Wijaya, and F. Ardiansyah, "Penerapan Inovasi Pelayanan Publik GO-DOK Di Kota Tasikmalaya," *Minist. J. Birokrasi dan Pemerintah. Drh.*, vol. 2, no. 1, pp. 22–28, 2020, doi: 10.15575/jbpd.v2i1.8022.
- [3] A. Dwiyanto, *Mewujudkan Good Governance Melalui Pelayanan Publik*. Yogyakarta: UGM PRESS, 2021.
- [4] A. A. Bouty, M. H. Koniyo, and D. Novian, "Evaluasi Sistem Pemerintahan Berbasis Elektronik Menggunakan E-Government Maturity Model (Kasus di Pemerintah Kota

- Gorontalo)," *J. Penelit. Komun. Dan Opini Publik*, vol. 23, no. 1, 2019, doi: 10.33299/jpkop.23.1.1758.
- [5] Instruksi Presiden Nomor 3 Tahun 2003 Tentang Kebijakan dan Strategi Nasional Pengembangan E-Government. 2003.
- [6] D. Susianto, E. Ridhawati, and S. Sucipto, "Implementasi E-Government Berbasis Android Untuk Meningkatkan Pelayanan Publik," *J. Al-AZHAR Indones. SERI SAINS DAN Teknol.*, vol. 7, no. 3, p. 179, 2022, doi: 10.36722/sst.v7i3.1143.
- [7] Peraturan Presiden Nomor 95, "Peraturan Presiden Nomor 95 Tahun 2018 tentang Sistem Pemerintahan Berbasis Elektronik," *Menteri Hukum Dan Hak Asasi Manusia Republik Indonesia*. p. 110, 2018.
- [8] A. Sutrisno, Sujianto, and H. As'ari, "Evaluasi penerapan e-government di lingkungan Pemerintah Kabupaten Bengkalis," *J. Community Res. Serv.*, vol. 7, no. 1, pp. 13–23, 2019, doi: 10.24114/jcrs.v7i1.40319.
- [9] P. Santosa, *Administrasi Publik: Teori dan Aplikasi Good Governance*. PT Refika Aditama, 2008.
- [10] Undang Undang Republik Indonesia Nomor 23 Tahun 2014 Tentang Pemerintah Daerah. 2014.
- [11] C. Bérut and S. Saurugger, "Digital technologies as a response to healthcare system crises: agenda-setting of digital health policies in France," *French Polit.*, vol. 21, no. 3, pp. 227–248, 2023, doi: 10.1057/s41253-023-00223-2.
- [12] A. Z. Al Meslamani, "Technical and regulatory challenges of digital health implementation in developing countries," *J. Med. Econ.*, vol. 26, no. 1, pp. 1057–1060, 2023, doi: 10.1080/13696998.2023.2249757.
- [13] R. Rachman and R. A. Ridwan, *Penerapan E-Government Dalam Mendukung Transparansi Dan Akuntabilitas Pemerintah Daerah Kabupaten Polewali Mandar*, vol. 10, no. 4. Publik: Jurnal Manajemen Sumber Daya Manusia, Administrasi Dan Pelayanan Publik, 2023. doi: 10.37606/publik.v10i4.1009.
- [14] Kartika Setianingrum, H. I Nyoman Sumaryadi, and Ella Wargadinata, "Penerapan E-Government Dalam Meningkatkan Kualitas Pelayanan Publik Di Dinas Penanaman Modal Dan Pelayanan Terpadu Satu Pintu Kota Bandung Provinsi Jawa Barat," *VISIONER J. Pemerintah. Drh. di Indones.*, vol. 12, no. 4, pp. 843–854, 2021, doi: 10.54783/jv.v12i4.344.
- V. Wirawan, "Penerapan E-Government dalam Menyongsong Era Revolusi Industri 4.0 Kontemporer di Indonesia," *J. Penegakan Huk. dan Keadilan*, vol. 1, no. 1, pp. 1–16, 2020, doi: 10.18196/jphk.1101.
- [16] Play.google.com, "Rating dan Ulasan Untuk Ponsel Pada Aplikasi siKuat." 2024. [Online]. Available: https://play.google.com/store/apps/details?id=co.id.natusi.sikda&hl=id&gl=US
- [17] D. F. A. Rahmawati and D. Hertati, "Inovasi Program Aplikasi Surabaya Single Window Alfa Dalam Meningkatkan Pelayanan Perizinan Online Surabaya Nomor 5 Tahun 2013 Tentang Pedoman Pemanfaatan Teknologi Informasi dalam hal e-government, yang salah satunya adalah pelayanan perizinan dan non," *Soc. J. Ilmu Adm. Sos.*, vol. 11, no. 2, pp. 154–164, 2022, doi: 10.35724/sjias.v11i02.4885.
- [18] S. Mariano, "Penerapan E-Government Dalam Pelayanan Publik di Kabupaten Sidoarjo," *J. Magister Kebijak. Publik*, vol. 1, no. 1, pp. 1–15, 2018.
- [19] J. W. Creswell, *Research Design Pendekatan Metode Kualitatif, Kuantitatif, dan Campuran*, IV; A. Faw. Yogyakarta: Pustaka Pelajar, 2019.

- [20] L. W. Neuman, *Social Research Methods Qualitative and Quantitative Approaches (7th ed.).* England: Pearson Education, 2014.
- [21] M. B. Miles, A. M. Huberman, and J. Saldaña, *Qualitative Data Analysis: A Methods Sourcebook*, 4th ed. USA: SAGE Publications Inc, 2019.
- B. Kusumasari, W. A. Setianto, and L. L. Pang, "A Study on Digital Democracy Practice: Opportunities and Challenges of e-Health Implementation in Indonesia," *J. Ilmu Sos. dan Ilmu Polit.*, vol. 22, no. 1, p. 1, 2018, doi: 10.22146/jsp.28863.