



Quality Of Dental And Oral Health Services In Banjarbaru City Health Center

Ajeng Ayu Larasati¹, Lanny Sunarjo², Bedjo Santoso³

Master of Applied Dental and Oral Therapist

Jl. Tirta Agung, Pedalangan, Banyumanik, Semarang

Submitted: 15-08-2024

Accepted: 25-08-2024

ABSTRACT

Background: One of the important components in supporting improving the quality of service is health equipment. Dental and oral health service facilities are basically run using a dental unit (DU) because they can help with dental and oral care. Conventional dental units are generally only available in clinics, health centers and hospitals, so that people who are far away and also have limited access receive less attention to dental and oral health services. **Objective:** to identify the quality of dental and oral health services at the Banjarbaru city health center. **Method:** This research uses a qualitative method with an observational approach. **Sample:** The sample in this study was based on inclusion and exclusion categories for dental and oral health service providers. **Results:** Dental and oral health services at the Banjarbaru Community Health Center still lack health facilities, human resources and cross-sector support. **Conclusion:** The quality of dental and oral health services will have an effective impact with support from across sectors with the availability of adequate facilities and adequate quality human resources.

Keywords: Dental and Oral Health Services, Quality of Dental and Oral Health Services

I. BACKGROUND

Indonesia is a developing country that is actively promoting development in all fields, one of which is health development. In accordance with national efforts in the Long Term Development Plan for Health Sector (RPJPK) 2005-2025 which aims to increase awareness, willingness and ability to live healthily for everyone so that the highest level of public health can be achieved. One of the ways this is indicated is that the population has the ability to access quality health services, fairly and evenly [1].

Public demand for services in the health sector is increasing every year. To anticipate this, it is important to maintain the quality of the services provided. Health services are an important factor in improving the health and welfare of every person throughout the world. Article 19 Law no. 36 of 2009 states that everyone has the right to obtain

health services and the government is responsible for the availability of all forms of health care that are quality, safe, efficient and affordable for all levels of society. One of these efforts is to increase the availability and distribution of basic health service facilities such as community health centers in each region [2].

Health services are an effort organized to maintain and improve the level of public health, including dental and oral health services. Dental and oral health services cannot be separated from dental health workers, namely dentists, as well as dental and oral therapists as health workers who are responsible for the prevention, management and care of teeth and mouth for the community [3].

A dental and oral therapist is a professional health worker in the field of dental and oral health who has the authority to provide services in the form of promotive, preventive and simple curative management, and is able to collaborate with other health workers in overcoming dental and oral health problems [4].

Based on 2018 Riskesdas data, 10.2% of the Indonesian population received treatment by dental medical personnel and 49.7% of the population who did not receive treatment had dental and oral problems. In the province of South Kalimantan, people who received treatment from medical dental personnel in the age group 3-4 years were (6.03%), 5-9 years (22.79%), 10-14 years (14.34%), 15-24 years (11.43%), 25-34 years (12.19%), 35-44 years (11.91%), 45-54 years (10.41%), 55-64 years (9.31%), and age 65+ years (4.98%) visits. The fact is that 46.9% of the people of South Kalimantan have problems with damaged/cavities/sick teeth, this will have an impact on the quality of health services provided because of the uneven distribution of facilities and limited access to dental and oral health services [5].

One of the important components in supporting improving the quality of service is health equipment. Therefore, the equipment must be complete and the condition and function of the physical health equipment must be in good condition and can support improving the quality of



health services [6]. Minimal equipment greatly influences the quality of service provided. Procurement of appropriate and well-functioning equipment will expedite patient service activities so that it will have an impact on improving the quality of service in general. One of the factors that influence dental and oral health in society is the lack of awareness among the public regarding the importance of dental and oral hygiene and the low quality of medical devices [7].

II. RESEARCH METHODS AND SAMPLES

This research uses a qualitative method with an observation approach. The sample in this study was based on inclusion and exclusion categories for dental and oral health service providers.

III. RESEARCH RESULT

Based on observation data on the scope of the research area, there are aspects in measuring the quality of health services, such as:

1. General description

a. Facility

Dental and oral health service facilities are basically run using a dental unit (DU). The dental unit is the most important component which consists of several pieces of equipment, including a three way syringe, high-speed handpiece and low-speed handpiece. Dental units are tools used by dentists and dental and oral therapists to assist in examinations and then determine what therapy can be given to patients. In general, to help with dental and oral care (drilling, fillings, cleaning and examinations).

b. Human Resources

Human Resources (HR) in the dental and oral health sector in South Kalimantan consist of various health workers involved in dental health

c. Health Service Procedures

services. Several types of dental and oral health workers in this area include:

1. Dentists: They are professionals who have completed dental education and are responsible for overall dental care, including clinical procedures such as fillings, extractions, teeth cleaning, and oral surgery.
2. Specialist Dentist: Dentist who has taken further education to specialize in a particular field, such as orthodontics (specialist in braces), periodontology (gums and tooth supporting tissue), prosthodontics (making artificial teeth), and others.
3. Dental Nurse: Dental nurses are tasked with assisting dentists in providing treatment to patients. They can also be tasked with providing education about dental and oral health, including how to care for your teeth properly.
4. Dental Assistant: Assists the dentist in various clinical procedures and also plays a role in administration such as taking patient history, keeping equipment clean, and managing medical materials.
5. Dental Health Educator: These health workers have the main focus in providing education to the public about the importance of maintaining dental and oral health through various health promotion programs.

HR Challenges in South Kalimantan:

- **Limited Expertise:** In several areas in South Kalimantan, especially in interior and remote areas, the number of dentists and dental experts is still limited.
- **Workforce Distribution:** Most dental and oral health workers are concentrated in big cities, such as Banjarmasin and Banjarbaru, while in rural and border areas, access to dental health services is more difficult.

Table 1 Stages of providing health services

| | |
|--------------------------------------|--|
| Patient Registration | <ul style="list-style-type: none"> • Patients come to a health facility, such as a community health center or hospital, and register. • Administrative officers will record patient data, both new and existing patients, and check whether the patient has health insurance such as BPJS Health or other guarantees. |
| Anamnesis (Medical Interview) | <ul style="list-style-type: none"> • The dentist will conduct an anamnesis or interview to find out the patient's main complaints related to the teeth and mouth, such as toothache, cavities, or other disorders. • General health history will also be checked, such as any allergies or other medical conditions that affect dental health. |



| | |
|---|---|
| Dental and Oral Physical Examination | <ul style="list-style-type: none">• The dentist performs a physical examination to see the condition of the teeth and mouth directly. This involves checking for cavities, the condition of the gums, oral tissue, and any broken or damaged teeth.• If necessary, supporting examinations such as dental X-rays are carried out to get a clearer picture of the dental problems being experienced. |
| Diagnosis and Treatment Plan | <ul style="list-style-type: none">• After the examination, the dentist will make a diagnosis of the problem the patient is experiencing.• The doctor then explains treatment options that are appropriate to the patient's condition, whether conservative treatment such as teeth cleaning, fillings, or further procedures such as extraction or installation of dentures. |
| Implementation of Treatment | <ul style="list-style-type: none">• Scaling and Cleaning Teeth: If the patient experiences problems with plaque or tartar, the doctor will perform scaling (cleaning tartar).• Tooth Fillings: If there are cavities, the dentist will perform fillings to repair the damage.• Tooth Extraction: If the tooth cannot be saved, a tooth extraction procedure is performed.• Root Canal Treatment: If the infection has reached the inside of the tooth (pulp), root canal treatment is performed to save the tooth. |
| Dental Health Education | <ul style="list-style-type: none">• After the medical procedure is carried out, the dentist or dental nurse will provide education to the patient about how to maintain good dental and oral health, such as brushing your teeth properly, using dental floss, and eating a healthy diet for your teeth.• Patients will also be given advice regarding further treatment if necessary, and scheduled for further follow-up. |
| Consultation and Referral (If Necessary) | <ul style="list-style-type: none">• If treatment at the health facility is not possible, the patient can be referred to a larger hospital or an appropriate dental specialist. For example, for orthodontic treatment (installation of braces) or oral surgery. |
| Use of BPJS Health | <ul style="list-style-type: none">• For BPJS Health participants, basic dental services such as simple tooth fillings, non-complex tooth extractions, and scaling can be covered by BPJS, especially at first-level health facilities such as Health Center. |

Based on table 1: the dental treatment process in health facilities generally follows a systematic flow, starting from registration to post-treatment education. The primary goal is to

diagnose a patient's dental or oral problems, provide appropriate treatment, and maintain long-term dental health.

IV. OBSERVATION FINDINGS

Table 2 Examination stages in providing dental and oral health services

| | |
|----------------------------|---|
| Initial Examination | : The dental hygienist will conduct an initial examination of the condition of the patient's mouth and teeth to determine what health problems there may be. |
| Health History | : The dental health worker will ask about the patient's general health history and dental health history to understand the context of the health condition being experienced. |
| Education | : Providing information and education to patients regarding the importance of dental care and steps that can be taken to maintain healthy teeth and mouth. |
| Maintenance | : Carrying out treatment procedures such as cleaning teeth, filling cavities, or other actions necessary to improve the patient's dental health condition. |
| Counseling | : Provide advice and recommendations regarding dental care that is |



| | |
|---------------------------------|---|
| | appropriate to the patient's condition, including routine care at home and scheduling subsequent visits. |
| Explanation of Procedure | : If necessary, the dental hygienist will explain the procedure to be carried out in detail so that the patient feels more comfortable and understands what will happen. |
| Monitoring and follow-up | : After treatment, the dental health worker will monitor the progress of the patient's condition and provide follow-up if necessary, such as scheduling regular visits or follow-up care. |

V. INTERVIEW FINDINGS

Information was collected using the interview method with heads of community health centers, dentists, dental and oral therapists

Table 3 Results of interviews with health service providers

| No | Question | Conclusion |
|----|---|--|
| 1. | Does the number of human resources have an impact on dental and oral health services? | Sufficient and high-quality human resources are one of the keys to success in providing optimal dental and oral health services. With an adequate number of human resources, dental and oral health services can be more affordable, high quality and meet the needs of the community. |
| 2. | Can facilities affect dental and oral health care and services? | Adequate and modern facilities will support health workers in providing optimal services. Good facilities will increase the accuracy of diagnosis. Improve quality of care. Increase patient comfort. Improve work efficiency. Thus, it can be concluded that adequate facilities are an important factor in providing quality dental and oral health services. |
| 3. | Does the implementation of dental and oral health services by implementing SOPs and quality standards have an impact on the quality of health services? | Implementation of SOPs and quality standards is very important in improving the quality of dental and oral health services. With SOPs and quality standards in place, patients can feel safer and more comfortable in receiving treatment. Apart from that, health workers can also work more efficiently and effectively. |
| 4. | Does the provision of medicines and dental health care materials have an influence on dental and oral health services? | The quality and availability of appropriate medicines and dental care materials will greatly determine the success of a treatment procedure. The preparation of medicines and dental care materials is an important component in dental and oral health services. The quality and availability of these materials will greatly influence treatment outcomes, patient comfort, and the work efficiency of health workers. |
| 5. | Do evaluations and follow-up plans make dental and oral health services effective? | Evaluation and follow-up planning is a continuous cycle. By carrying out regular evaluations and taking appropriate action based on the evaluation results, we can continue to improve the quality of dental and oral health services. |

VI. DISCUSSION

Health services :

Health services are an integral part of efforts to maintain public health. Health services cover a variety of aspects, including disease prevention, diagnosis, treatment, rehabilitation and health promotion. Quality health services have a significant impact on improving the quality of life of individuals and society as a whole. In the context of health services, dental and oral health services have an important role in maintaining overall health [8]. Based on observational studies on health

services, there are main factors that support the success of providing health services, such as:

a. Health facilities

Dental and oral health service facilities are basically run using a dental unit (DU). Dental units are core equipment in dental practice, consisting of various instruments such as three-way syringes and handpieces, which are used for dental examination and treatment.



b. Human Resources

Dental hygienist which plays an important role in providing dental and oral health services to the community. Each health worker has different roles and responsibilities, but complements each other to provide comprehensive care. The presence of various dental health workers is very important to ensure that the people of South Kalimantan have access to quality dental health services. This collaboration between various health professionals will result in better and more effective care. Overall, human resources in the dental health sector in South Kalimantan are quite complete. However, continuous efforts need to be made to improve the quality and quantity of dental health workers, especially in remote areas. Apart from that, it is also important to continue to develop dental health education programs to increase public awareness about the importance of maintaining healthy teeth and mouth. Health services can take place comprehensively with a balance between health facilities and human resources, the following aspects have an influence in improving the quality of health services in the provision of dental and oral health services [9].

Dental and oral health service procedures

Dental care process generally follow these steps:

1. Registration: Patients come to the health facility and register themselves. Personal and insurance data will be recorded.
2. History: The dentist will ask about the patient's complaints and health history related to the teeth and mouth.
3. Physical Examination: The dentist will directly examine the condition of the teeth and mouth, including the oral cavity, gums and teeth. If necessary, supporting examinations such as x-rays will be carried out.
4. Diagnosis: Based on the results of the examination, the dentist will determine the problem the patient is experiencing.
5. Treatment Planning: The dentist will explain various treatment options according to the patient's condition, such as fillings, extractions, or root canal treatment.
6. Implementation of Maintenance: Maintenance actions will be carried out in accordance with the agreed plan.
7. Education: After treatment, patients will be given education about how to maintain healthy teeth and mouth, such as how to brush their teeth properly and eat well.
8. Control: The patient will be scheduled for regular control to monitor the progress of the condition of his teeth and mouth.

9. Referral: If special treatment is required, the patient can be referred to a dental specialist.
10. Use of BPJS: BPJS Health participants can utilize basic dental services at certain health facilities.

In short, the dental care process starts from the initial examination, continues with diagnosis and treatment planning, then implementation of treatment, and ends with education and follow-up. The main purpose of the dental care process is to maintain healthy teeth and mouth, prevent dental disease, and provide appropriate treatment if dental problems occur. Each patient has a different condition, so treatment plans will also vary [10]. Therefore, it is important to consult a dentist to get proper treatment.

Factors influencing the quality of health services

1. Internal factors

Factors that originate from within the health facility itself, and can be directly controlled by management. includes:

Human Resources, Organizational Structure, Facilities and Equipment, Information Systems, Organizational Culture, Budget. The internal influence of health quality is influenced by health worker factors, health worker professional ethics, and communication. In Sitti Jai's research in 2020, 87 people (96.6%) were satisfied with the dental and oral health services at the Talamate Makasar community health center. This is because the doctor on duty at this polyclinic always examines and treats patients according to their main complaint, apart from that the doctor is considered accurate in explaining the results of the examination and diagnosis of the patient's disease. The less good the patient's perception of the quality of the doctor's medical technical skills service, the less loyal the patient will be. What determines the quality of the service include factors such as the ability, skills and knowledge of the service provider [11].

2. External

Factors that originate outside the health facility and are generally outside the direct control of management. includes:

Government Policy, Technology, Socio-Cultural Environment, Economic Conditions, Competition, cross-sector support.

Internal and external factors interact and influence each other. For example, changes in government policy (external factors) may force health facilities to change their organizational structure or operational procedures (internal



factors). Conversely, good service quality (internal factors) can improve the reputation of health facilities and attract more patients (external factors). To achieve optimal performance, health facilities need to be able to identify, analyze and respond to both internal and external factors. In this way, health facilities can adapt to environmental changes and provide quality health services to the community [12].

VII. CONCLUSION

The quality of dental and oral health services will have an effective impact with support from across sectors with the availability of adequate facilities and sufficient quality human resources.

REFERENCES

- [1]. Depkes RI. Profil Kesehatan Indonesia. Jakarta: Kementerian Kesehatan Republik Indonesia. 2015.
- [2]. Bappenas. Peningkatan Akses Masyarakat Terhadap Kesehatan Yang Berkualitas. http://www.bappenas.go.id/files/5613/5229/8326/bab-28_200902022046161756_29.pdf. 2020.
- [3]. Mustakim, M. Model Perilaku Pencegahan Infeksi Silang Pada Dokter Gigi di Kota Makassar. Universitas Hasanudin; 2020.
- [4]. Permenkes. Peraturan Menteri Kesehatan Republik Indonesia Nomor 58 Tahun 2012 Tentang Penyelenggaraan Pekerjaan Perawat Gigi. Jakarta: Kementerian Kesehatan Republik Indonesia. 2012.
- [5]. Kementerian Kesehatan RI. Hasil Riset Kesehatan Dasar (Riskesdas). Badan Penelitian dan Pengembangan Kesehatan Kementerian Kesehatan RI. Jakarta. 2018.
- [6]. Fansurna, Anderi. "Pencegahan Penyakit Gigi Melalui Penyuluhan, Kuratif Sederhana Dan Sikat Gigi SDN Tungkaran Kabupaten Banjar." *Jurnal Rakat Sehat: Pengabdian Kepada Masyarakat* 2.2 (2023): 162-169.
- [7]. Prastiwi, Arini Cyndwiana, and Dumillah Ayuningtyas. "Implementasi Lean Dalam Strategi Pemasaran Di Rumah Sakit Gigi Dan Mulut: Tinjauan Literatur." *Jurnal Administrasi Rumah Sakit Indonesia* 9.2 (2023): 36-42.
- [8]. Jalias, S. J. F. D., & Idris, F. P. (2020). Pengaruh Mutu Pelayanan Kesehatan Gigi Dan Mulut Terhadap Minat Kembali Pasien Melalui Tingkat Kepuasan Di Puskesmas tamalate makassar 2020. *Journal of Muslim Community Health*, 1(2), 37-49.
- [9]. Megatsari, H., Laksono, A. D., Ridlo, I. A., Yoto, M., & Azizah, A. N. (2018). Perspektif Masyarakat Tentang Akses Pelayanan Kesehatan. *Buletin Penelitian Sistem Kesehatan*, 21(4), 247-253.
- [10]. Dandel, E. F. (2022). Aspek Hukum Pelanggaran Kode Etik Mengenai Rahasia Kedokteran. *Lex Crimen*, 10(12).
- [11]. Artamevia, R., Sumerti, N. N., Agung, A. A. G., & Arini, N. W. (2023). Tingkat Kepuasan Pasien Terhadap Mutu Pelayanan Kesehatan Gigi Dan Mulut Pada Praktik Mandiri Terapis Gigi Dan Mulut Tahun 2023. *Jurnal Kesehatan Gigi (Dental Health Journal)*, 10(2), 94-109.
- [12]. Sari, N., & Sulistiadi, W. (2022). Teledentistry: Strategi Marketing Pelayanan Kesehatan Gigi Dan Mulut Di Era Pandemi Covid-19: Systematic Review. *Jurnal Administrasi Rumah Sakit Indonesia*, 8(1), 26-31.