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## Evaluation of the Quality Services at the Kapas Bojonegoro Community Health Center Based on Public Criticism: A SERVQUAL Study on Waiting Times and Staff Communication

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#### ABSTRACT

This study aims to evaluate the quality of service at the Kapas Bojonegoro Community Health Center based on public criticism using the SERVQUAL approach, particularly in terms of responsiveness and empathy. Public criticism arising from digital reviews often highlights issues such as waiting times, service flow, and staff communication. This study used a descriptive, quantitative method with accidental sampling to collect data from 110 respondents who had received services at the Kapas Community Health Center General Clinic. The research instrument was a SERVQUAL questionnaire with a 1-5 Likert scale used to compare perceptions and expectations. The results showed that all items in the questionnaire were valid and reliable, with a Cronbach's alpha value of 0.920 for perceptions and 0.798 for expectations. The gap analysis showed that the responsiveness aspect had a gap value of -0.39, indicating that service speed and information clarity did not meet expectations. The empathy dimension obtained a gap value of 0.11, which means that the friendly attitude and attention of the staff were rated well by patients. The overall suitability level of 99% indicates that the service is close to patient expectations, although improvements are still needed in terms of waiting time. This study also shows that public criticism can be a useful source of information for continuously evaluating the quality of health center services.

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## ABSTRAK

Penelitian ini bertujuan mengevaluasi kualitas pelayanan Puskesmas Kapas Bojonegoro berdasarkan kritik publik dengan menggunakan pendekatan SERVQUAL, khususnya pada aspek responsiveness dan empathy. Kritik publik yang muncul melalui ulasan digital banyak menyoroti masalah waktu tunggu, alur pelayanan, dan komunikasi petugas. Penelitian ini menggunakan metode kuantitatif deskriptif dengan teknik accidental sampling terhadap 110 responden yang pernah menerima layanan di Poli Umum Puskesmas Kapas. Instrumen penelitian berupa kuesioner SERVQUAL dengan skala Likert 1-5 yang digunakan untuk membandingkan persepsi dan harapan. Hasil penelitian menunjukkan seluruh item dalam kuesioner valid dan reliabel dengan nilai Cronbach's alpha 0,920 untuk persepsi dan 0,798 untuk harapan. Analisis gap menunjukkan bahwa aspek responsiveness memperoleh nilai gap -0,39, yang berarti kecepatan pelayanan dan kejelasan informasi belum sesuai harapan. Pada dimensi empathy, memperoleh nilai gap 0,11, yang berarti sikap ramah dan perhatian petugas dinilai baik oleh pasien. Tingkat kesesuaian keseluruhan sebesar 99% menunjukkan bahwa pelayanan sudah mendekati harapan pasien, meskipun masih perlu perbaikan pada aspek waktu tunggu. Penelitian ini juga menunjukkan bahwa kritik publik dapat menjadi sumber informasi yang bermanfaat untuk mengevaluasi kualitas pelayanan puskesmas secara berkelanjutan.

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## INTRODUCTION

Public services are a key component of the state apparatus, which is based on protecting the Indonesian people and homeland, promoting the welfare of society, educating the nation, and upholding world order based on independence, eternal peace, and justice (Ramdhan et al., 2023). UU Nomor 25 Tahun 2009 emphasizes that every citizen has the right to obtain quality, equitable, and accessible public services. Health services are a type of public service that plays a very important role because they are related to the basic right of every person to obtain optimal health services.

Community Health Centers (puskesmas) are the primary providers of health services for the Indonesian people. Each puskesmas must be able to maintain patient trust and prevent them from switching to other health facilities. One important step is to continuously improve

the quality and standard of service so that patients feel satisfied and confident with the services they receive (Anggit & Setyorini, 2022).

Community health centers are government-owned public health facilities that operate at the regional level and provide basic health services to the community in their working area (Ekasari et al., 2017). In the health care system, community health centers serve as centers for the implementation of health services that develop various programs and provide comprehensive and integrated health services to the community (Wulandari et al., 2024).

Although community health centers play a strategic role in the health care system as primary health care providers, the quality of their services is often criticized by the public. Various complaints arise, particularly regarding the responsiveness and communication skills of staff in providing services. One example can be seen at the Kapas Bojonegoro Community Health Center, where public criticism is conveyed through digital platforms, particularly through reviews on Google Reviews. Based on a review of public reviews uploaded between October 2024 and April 2025, the complaints include long waiting times of up to almost two hours without clear information, cancellation of laboratory services due to equipment limitations without prior notification, staff attitudes that are considered unfriendly and uncommunicative, changes in queues that are considered non-transparent, and refusal of administrative services due to discrepancies between the address on the ID card and the health center's working area.

These various issues indicate a gap between the public's expectations of health services and the services they actually experience, particularly in terms of speed of service and the quality of communication with health workers. These findings are also in line with the Bojonegoro Health Office's LKJIP 2024 report, which states that a number of community health centers have experienced a significant decline in performance. For example, the performance score at the Kapas community health center fell from 80.62% in 2023 to 69.88% in 2024, indicating challenges in maintaining the quality of basic health services. Based on the results of the Laporan SKM TW II 2025 Bakorwil Bojonegoro survey, the community satisfaction index score was 84.96, which is classified as Good. However, several aspects of service still show weaknesses, particularly in the indicators of complaint handling (3.27), service completion time (3.30), and clarity of service products (3.29). These findings indicate that there is still a gap between the formally recorded administrative achievements and the community's experience in receiving public services.

Research conducted at Padangan Bojonegoro Regional General Hospital found a correlation between service quality and service utilization (Bed Occupancy Rate/BOR). Although the correlation coefficient was low ( $r = 0.111$ ), the results still indicate that service

quality influences people's decisions to use hospital services (Nur Kusuma Hati & Fithri, 2024). Meanwhile, research conducted at Sumberrejo General Hospital in Bojonegoro reinforced similar findings by showing that service quality plays an important role in patient loyalty. The study found that patients who rated inpatient services as good were 6.89 times more likely to make a repeat visit than patients who rated the services as unsatisfactory (OR = 6.89; CI 95%: 2.62-18.14;  $p < 0.001$ ) (Amelia et al., 2022).

This shows that an in-depth evaluation of the quality of health center services needs to be carried out to ensure that the services provided meet the needs of the community. One approach that is often used to assess service quality is the SERVQUAL model developed by Parasuraman, Zeithaml & Berry (1988). This model evaluates service quality based on five main dimensions, namely reliability, responsiveness, assurance, empathy, and tangibles. Responsiveness and empathy play a very important role because both are related to common problems in community health centers, such as long waiting times and poor communication from staff.

Previous studies have measured the quality of health center services using the SERVQUAL model. The results showed that the reliability dimension had the largest gap (-6.00), while the responsiveness (66.5%) and empathy (70.9%) dimensions showed fairly high patient satisfaction levels. Despite the negative gap in the reliability dimension, patient satisfaction levels remained fairly high in the responsiveness and empathy dimensions (Setiawan et al., 2023). A literature review also confirms that the quality of health center services greatly affects patient satisfaction. The main factors include the competence of medical personnel, the availability of facilities, waiting times, and the attitude of health workers (Langi & Winarti, 2024).

Another study found a significant relationship between service quality and outpatient satisfaction ( $p=0.040$ ). The two main problems identified were long service times and unfriendly behavior by medical staff (Septyaningrum et al., 2024). In addition to technical aspects, other studies emphasize the importance of health communication through public health relations. The results show that effective communication between health workers and patients not only increases satisfaction but also builds public image and trust in health care institutions (Paramita et al., 2019).

Based on previous research, SERVQUAL is useful in determining the quality of health center services. Both components are always considered important by the community. The two main components, waiting time (responsiveness) and staff communication (empathy), have not been widely studied. Both continue to emerge as major problems that are always faced by the community. The use of public criticism through digital media as a source to describe the community's experience

directly is still rarely done in academic research. Instead, previous studies still rely on conventional surveys. This study focuses on the use of public criticism as the main source of data, rather than relying solely on internal surveys conducted on patients. The study focuses on two SERVQUAL indicators that are considered most relevant in the context of health center services. These indicators are waiting time and staff communication. This study was conducted at the Kapas Bojonegoro Health Center, which has rarely been used in studies on the quality of health services.

Based on the above description, the research problem can be formulated into the following question: "How is the quality of service at the Kapas Bojonegoro Community Health Center based on public criticism using the SERVQUAL approach, particularly in terms of waiting time and staff communication? " This study aims to evaluate the quality of service at the Kapas Bojonegoro Community Health Center based on public criticism using the SERVQUAL approach, with a focus on the indicators of waiting time and staff communication. The results of this study are expected to contribute theoretically to the development of literature on the quality of public services in the health sector and provide practical recommendations for improving the quality of community health center services in Indonesia.

## METHODS

This study uses a descriptive quantitative method with a survey approach. According to Sugiyono (2013), quantitative research is based on positivism philosophy, used to examine a specific population or sample using research instruments, and analyzed statistically to test hypotheses. According to Sugiyono (2013), quantitative research is based on positivism philosophy, used to examine a specific population or sample using research instruments, and analyzed statistically to test hypotheses. The population of this study was 5,898 people who had received services at the Kapas Community Health Center General Clinic, Bojonegoro Regency, in the past year. To determine the sample size, the following Slovin formula was used:

$$n = \frac{N}{1 + N(e)^2}$$

Description:

- $n$ : number of samples sought
- $N$ : Population size (5,898)
- $e$ : Margin of error value of 5%

The sampling technique used was accidental sampling, which is the selection of respondents based on anyone who had received general medical services at the health center and was willing to fill out the questionnaire. Based on Slovin's calculation, the ideal sample size

was actually larger, but adjustments were made considering field conditions, such as limited data collection time, variations in the number of patients who came each day, and the fact that not all patients were willing to be respondents. Therefore, the sample size was set at 110 respondents, which was considered to meet the minimum size for descriptive quantitative research and to be able to provide a representative picture of patients' perceptions of service quality.

The research instrument used the SERVQUAL questionnaire with a 1-5 Likert scale to measure perception; a score of 1 indicates strongly disagree, and a score of 5 indicates strongly agree. For measuring expectations, a score of 1 means not very important, and a score of 5 means very important. This scale was used to compare patients' expectations and perceptions of service quality. The research focused on two main aspects, namely waiting time and staff communication. Data analysis was carried out in several stages, namely validity testing using Pearson Product Moment correlation, reliability testing using Cronbach Alpha, SERVQUAL gap analysis to calculate the difference between patient perceptions and expectations, and descriptive analysis through tables and narrative descriptions to provide a comprehensive picture of service quality at the Kapas Community Health Center.

## RESULTS AND DISCUSSION

The results of the study show that all questionnaire items consisting of two measurements, namely expectations and perceptions, are valid. This is evidenced by the calculated r value being greater than the table r value (0.195). Thus, the two main dimensions of responsiveness and empathy can be used to measure service quality in accordance with the characteristics of the questionnaire statements, such as staff alertness, clarity of information, friendly attitude, staff attention, and ability to understand patient needs. The results of the validity test analysis are summarized in Table 1 below.

**Table 1. Validity Test Results**

Indicator	R Calculated P	R Calculated E	Table R	Decision
P1	0,6545	0,4661	0,1576	Valid
P2	0,6517	0,5953	0,1576	Valid
P3	0,7437	0,6419	0,1576	Valid
P4	0,6949	0,5822	0,1576	Valid
P5	0,7937	0,4597	0,1576	Valid
P6	0,7087	0,5422	0,1576	Valid

P7	0,7087	0,6052	0,1576	Valid
P8	0,7280	0,6411	0,1576	Valid
P9	0,7549	0,5452	0,1576	Valid
P10	0,8089	0,5802	0,1576	Valid
P11	0,7573	0,5117	0,1576	Valid
P12	0,7667	0,5151	0,1576	Valid

Source: Data Processing (2025)

Next, a reliability test was conducted to determine the consistency of the research instrument. The results showed that all items in the questionnaire were reliable and could be used in the study. The Cronbach Alpha values for the variables of expectation and perception were 0.798 and 0.920, respectively. Both values were greater than the minimum value of 0.70. The reliability test results are shown in the following table:

**Table 2. Reliability Test Results**

<b>Reliability Statistics</b>				
<b>Variable</b>	<b>Cronbach's Alpha</b>	<b>N of Items</b>	<b>Criteria</b>	<b>Decision</b>
PERCEPTION (P)	0,920	12	< 0.70	Reliabel
EXPECTATION (E)	0,798	12	< 0.70	Reliabel

Source: Data Processing (2025)

After the instruments were declared valid and reliable, a SERVQUAL gap analysis was conducted to compare the community's perceptions and expectations of the services provided by the Kapas Bojonegoro Community Health Center. This analysis was carried out by calculating the difference between the average perception and expectation scores for each indicator. A negative gap value indicates that the service has not met the respondents' expectations, while a positive gap value indicates that the service has exceeded expectations. The calculation of the gap value based on the SERVQUAL dimensions produced the gap value calculation results shown in Table 3.

The gap analysis results show that the responsiveness dimension has an expected value of 26.90 and a perceived value of 26.51, resulting in a gap of -0.39. This indicates that the waiting time and responsiveness of officers in assisting Kapas Community Health Center

patients are still not in line with community expectations, especially in terms of service speed, clarity of the queuing process, and accuracy of information provided. However, the empathy dimension has an expected value of 26.32 and a perceived value of 26.43, each with a gap value of 0.11. This positive gap indicates that the service is considered to have met or slightly exceeded patient expectations in terms of friendliness, staff attention, and the quality of interpersonal communication.

**Table 3. Gap Results Based on Servqual Dimensions**

<b>Indicator</b>	<b>expectations</b>	<b>perceptions</b>	<b>GAP</b>
<i>Responsiveness</i> (ketanggapan)	26,90	26,51	-0,39
<i>Empathy</i> (Empati)	26,32	26,43	0,11

Source: Data Processing (2025)

The level of conformity between patients' expectations and perceptions based on the scores given by respondents to the questionnaire about expectations and reality can be seen in Table 4. Based on Table 4, which shows the total scores given by respondents on the perception aspect of 5.823 and the expectation aspect of 5.854, the level of conformity obtained is 99%. This score indicates that, in general, the services provided by the Kapas Community Health Center are very close to the community's expectations. However, this result has not reached 100%, which means that there is still a gap in certain service aspects, particularly in terms of service speed and clarity of information, such as service procedures, waiting times, and complaint handling.

**Table 4. Conformity Table**

<b>number of respondents</b>	<b>Number x</b>	<b>perception scores</b>	<b>expectation scores</b>	<b>level of conformity</b>
110	12	5823	5854	99%

Source: Data Processing (2025)

The level of suitability is calculated to determine the extent to which the services received (perception) have met patient expectations. Thus, suitability is obtained using the following suitability level formula.

$$TKi\ Total = \frac{perceptions}{expectations} \times 100\%$$

$$\begin{aligned} &= \frac{5823}{5854} \times 100\% \\ &= 99\% \end{aligned}$$

Overall, the results of this study indicate that the quality of service provided by the Kapas Community Health Center has reached a good level, although responsiveness still needs improvement. This is in line with public criticism emphasizing complaints about long waiting times, lack of explanation about procedures, and inconsistency in the information provided. Therefore, a better queuing system, standard procedures for delivering information, and quick responses from staff are essential to improve the overall quality of service.

Based on the results of the study, it appears that the quality of service in two dimensions, namely responsiveness and empathy, has not fully met patient expectations. The responsiveness dimension has a negative gap value of -0.39, indicating that the speed of service, clarity of queues, and staff readiness are still below patient expectations. This gap shows that the patient experience still does not meet health service quality standards, even though some aspects of service are rated well. This is in line with public criticism that highlights long waiting times, unclear service flows, and delays in staff responding to patient complaints and questions. In accordance with the SERVQUAL concept, service quality is determined by how well the services received meet or exceed customer expectations (Zeithaml & Berry, 1988).

In the empathy dimension, there was a positive gap of 0.11. These results indicate that interpersonal interactions such as friendliness, politeness, staff attentiveness, and the ability to provide clear information have met patient expectations. Other studies emphasize that effective communication between healthcare personnel and patients increases patient satisfaction and perception of healthcare services (Paramita et al., 2019). Thus, despite complaints about communication through the system or service flow, direct interaction between patients and staff still provides a positive experience. Compared to previous studies, the results show that the reliability dimension has the largest gap, but the responsiveness and empathy dimensions show a fairly high level of patient satisfaction. Despite the negative gap in the reliability dimension, patient satisfaction levels remain quite high in both dimensions (Setiawan et al., 2023). The quality of health center services greatly affects patient satisfaction. The main factors include the competence of medical personnel, the availability of facilities, waiting times, and the attitude of medical personnel (Langi & Winarti, 2024).

Overall, a compliance rate of 99% indicates that the services provided by the Kapas Community Health Center almost fully meet the expectations of the community. However, this

compliance rate is still less than 100%, which means that there are still some areas that need improvement, particularly in terms of service accuracy and staff response speed. This supports previous research stating that waiting time is a major factor affecting patient satisfaction in health facilities. Therefore, this study not only confirms the results of previous studies but also provides new insights into how public criticism can be used as an initial indicator to evaluate service quality, particularly in terms of waiting times and staff communication. This study highlights the importance of improving staff responsiveness and interpersonal communication to enhance overall service quality.

## **CONCLUSION**

Based on the results of this study, which aimed to evaluate the quality of service at the Kapas Bojonegoro Community Health Center based on public criticism using two dimensions of SERVQUAL in terms of waiting time (responsiveness) and staff communication (empathy). The results of the analysis of patient perceptions and expectations concluded that the overall quality of service was close to patient expectations but did not fully meet the expected standards. The responsiveness dimension shows that the speed of service, clarity of the queue, and accuracy of information are not yet fully in line with patient expectations. These findings reinforce public criticism of long waiting times and inconsistent information delivery. Thus, the objective of the study to evaluate service quality from the responsiveness dimension shows that this dimension still requires significant improvement.

In terms of empathy, the service has met and slightly exceeded patient expectations. This shows that interpersonal interactions such as friendliness, attentiveness, and the ability of staff to provide information directly have become an important part of the strength of the Kapas Community Health Center. Thus, the research objective to evaluate the quality of service in staff communication can be said to have been achieved, and this dimension has become an important component in increasing community satisfaction. A suitability level of 99% indicates that the quality of service at the Kapas Community Health Center has come close to community expectations, although there is still a gap in the responsiveness dimension, which indicates the need for improvement in service speed and consistency of information.

This study recommends a number of strategic steps to improve service quality at the Kapas Community Health Center. Improvements to the queuing system and waiting time management need to be prioritized so that patients have a clearer and more consistent idea of service duration. In addition, the quality of communication by staff needs to be improved, especially in terms of conveying information about procedures, service changes, and explanations of the examination process that are accurate, complete, and easy for patients to understand. The use of digital public criticism is also important to be carried out continuously as part of internal evaluation so that every community complaint can be responded to more quickly and accurately. Further research is recommended so that the study covers a

broader SERVQUAL dimension or compares service quality between service units, thereby providing a more comprehensive picture of health service quality and contributing more broadly to the development of public administration studies in the field of health services.

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## B. LoA



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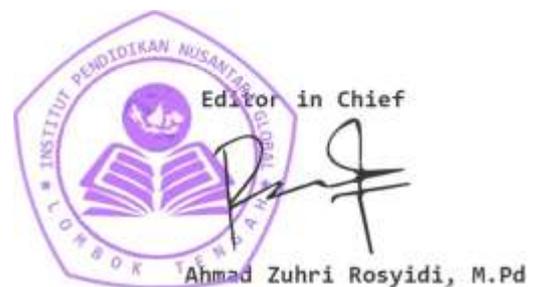
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Subject : Letter of Acceptance

Dear Authors: Miftakhur Rohmah, Ahmad Taufiq, & Junadi

We are pleased to inform you that the Jurnal Ilmiah Global Education (JIGE) Editorial Board has given the first approval of your article for publication. The editor, who conducted the initial review of your manuscript "Evaluation of the Quality Services at the Kapas Bojonegoro Community Health Center Based on Public Criticism: A SERVQUAL Study on Waiting Times and Staff Communication" was informed of the decision which is due for publication in January - March 2026 (Vol 7, No 1).

Thank you for submitting your work to this journal. We hope you submit your articles in future.



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2) Junadi S.Sos, M.Si