

THE PERCEPTION OF HOSPITAL STAKEHOLDERS ON CARDIAC INTERVENTION BASED ON THE THEORY OF CONSUMER PERCEIVED VALUE INDONESIA CASE

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Abstract: *The Differences in perception among hospital stakeholders is a frequent occurrence in the implementation of cardiac intervention. Differences in perception mainly occur in the decision of cardiac intervention action process, whether it is done gradually two steps or one shot actions. Two stages means that the patient is given the opportunity to do outpatient a few days then the next action is taken. One stage means that patients who experience a heart attack are immediately treated even though the patient can still be given the opportunity to be outpatient.*

The different stages of action have an impact on various factors such as costs, both for patients and for management. On the other hand, gradual or one shot action will have an impact on the availability of time and energy for medical personnel.

The purpose of the study was to analyze the difference in the impact of the implementation of gradual and simultaneous actions on cardiac intervention based on the perception of stakeholders by referring to the concept of consumer perceived value. The method used is the comparison means method which compares the perceptions of doctors, management, nurses and patients on the indicators of benefits and indicators of costs incurred in each implementation of cardiac intervention. The indicators that are compared are product benefits, service benefits, personnel benefits and image benefits as well as cost or expenditure indicators consisting of monetary costs, time costs, energy costs, and psychological costs. The data used is primary data obtained through the use of surveys to collect opinions and perceptions of respondents towards the implementation of the cardiac intervention..

The results showed that most of the respondents considered that the gradual action was more profitable than the one-time action, in terms of the use of time, cost and energy used. However, the research findings show a contrast, namely gradual action will actually reduce hospital admissions in terms of revenue receipts because most patients do not come to the hospital to continue the action due to various factors such as psychological factors and regulatory compliance factors. The implication of this finding is that hospital management makes more precise calculations on indicators related to the implementation of cardiac intervention.

Keywords: *Consumer Perceived, Stakeholders, Value, Cardiac Intervention*

I. Introduction

Differences in perceptions among hospital stakeholders such as hospital leaders, doctors, nurses, foundation leaders and patients often occur in decisions made by management (Kotler, 2008). Differences in perception mainly occur in indicators perceived by consumers such as product quality, price suitability and other psychological indicators. Consumers or customers make comparisons between the sacrifices obtained with the value obtained from consuming a product or service (Kotler, P., & Kevin, L., 2009)

Differences in perception are not only related to the monetary dimension but are related to other dimensions such as trust, price, image, time and energy dimensions (Hasyim, 2017). In the concept of perceived value, it is explained in detail which indicators are compared by a consumer in making decisions. The concept of perceived value is generally defined as "the ratio or trade-off of the total benefits received with the total sacrifices incurred. Understanding Value is the customer's overall assessment of the utility or usability of a product based on the perception of the product or service being assessed, the greater the perception of the benefits that will be obtained compared to the sacrifices incurred, the consumer will judge that the product has a high value, and vice versa (Hasyim et al., 2016)

The concept of perceived value is very important to apply because it relates to decision making. This is because the concept of perceived value is taken from the opinion or views of the user (user) so that it is more objective (Al Khattab & Aldehayyat, 2011). If the concept of perceived value is applied to the hospital sector, this concept will make decisions made by decision makers more accurate, efficient and effective (Tsai & Yeh, 2010).

Decisions taken from the analysis of the aspirations of the interested parties will make a positive contribution to the development of the company and will lead to satisfaction of user stakeholders. This can happen because decision making with this approach will benefit all parties involved.

The problem is that the decisions taken by the company's leadership are only based on the opinion of the power holders in the company, as a result, there is a gap between the decisions taken and their implementation in the field (Chan Kim.W & Mouborgne R, 2005).

This study tries to apply the concept of perceived value proposed by Kotler and Kevin Keller examining the perceptions of hospital stakeholders on the choice of implementing cardiac surgery between performing in two stages or carrying out in one stage.

Two stages means that the patient is given the opportunity to do outpatient a few days then the next action is taken. One stage means that patients who experience a heart attack are immediately treated even though the patient can still be given the opportunity to be outpatient.

Decision-making in terms of carrying out heart surgery is often a difference in perception whether it is done in two stages or one stages. The difference of opinion is caused by differences in perception of the indicators of the implementation of heart surgery actions that are carried out. will be implemented. The stages of action have an impact on various factors such as cost expenditure, both for patients and for management, on the other hand, gradual or one-time actions will have an impact on the availability of time and energy for medical personnel.

Companies are required to be able to determine the right marketing strategy so that their business can survive and win the competition, the strategy carried out by modern companies both those engaged in services and those engaged in tangible products at this time is to compete to show value, meaning the company is no longer focuses on offering products only but tends to sell values that are considered to exceed other companies which are unique from other companies (Hui-Yao & Shieh, 2012). So that companies can sell values that are in accordance with the expectations of meeting consumer needs and desires, companies must make efforts to understand consumer perceptions of the desired value or what is called consumer perceived value. Understanding perceptions based on consumer needs and desires will make a positive contribution to decision making by companies, consumer perceptions are important in determining a decision (Peter, 2010).

II. Literature review

Customer Perceived value is the difference between the prospective customer's evaluation of all benefits and all perceived costs of alternative offerings (Kotler; & Keller, 2006), the indicators measured by consumers in the concept of customer Perceived Value (CPV) are monetary cost, time cost, energy cost, and psychological cost. Benefit indicators measured by consumers are product benefits, service benefits, personal benefits, and image benefits.

Perception is related to many things such as quality and brand image perception is also related to Consumer Satisfaction and Loyalty (Hsin Chang & Wang, 2011). Decisions are taken only consider one factor such as costs or revenues, generally it result in less objective decisions. Therefore, some concepts suggest that in determining a decision to consider various factors related to the main problem.

Consumer perceptions are also related to brand which has an impact on the acceptance of a product or service offered (Hasyim et al., 2016). Several studies have shown that trust factor is a moderating variable in a transaction relationship, especially in conditions where transactions are carried out online, the trust factor is something that can strengthen relationships or even weaken the relationship of both relationship. (Gefen et al., 2003). Consumer perceptions are also related to brand because brand helps the company attract customers to buy the product, influences the customer behavior and encourages him or her to repeat the purchase process. As well as, turns customers' eyes to recognize products in term of its associated brands (Abraheem et al., 2012).

However, measuring perceived value solely on the perceived price is an important concept but it is not enough, because prices are closely related and often used with the concept of benefits and sacrifices, this thinking is based on the view that perceived value is generally defined as "the ratio or trade-off of the total benefits received for the total sacrifice (Lallmahamood, 2007).

Value is the customer's overall assessment of the utility or usability of a product based on perceptions of what is received and what is given(Kotler, P., & Kevin,L., 2009) In addition, it is defined as the interaction between the customer and the product or service.

Some research on perceived value still focuses on monetary value such as determining unit costs, or monetary benefits, and service activities that are measured from the financial side only(Kotler, 2008) as seen from related studies that emphasize the determination of service unit costs.

Making decisions by choosing the cheapest or most efficient alternative way to get benefits, other effectiveness analyzes are comparative, while cost benefit analysis usually only considers one program at a time. Cost benefit analysis always compares the monetary costs and benefits of an activity, this is not too wrong(Suko Gomer et al, 2020) but consumers not only judge a product only from the financial side, but consumers also judge a service or product based on other non-financial indicators, such as image, the use of time, and the use of energy sacrificed to obtain a product(Doyle, 2013)The use of the cost benefit analysis approach in general only takes into account in terms of cost sacrifice, while the concept of perceived value considers many factors as stated above(Sarma., 2017).

III. Method and Research Design

Descriptive analysis and comparative analysis were used in this study. Descriptive analysis is used to explain descriptively the respondents' answers to the indicators of questions given to respondents. The results of the descriptive analysis are expected to explain the perceptions of the sample respondents The target population of the study consists of cardiologists, cathlab staff, nurses, hospital management and patients. Samples are taken proportionally to the total population, thus the number of samples depends on the size of the population of each component. The first process of research was carried out through group discussion forums to obtain input from stakeholders in the context of preparing research instruments in the form of questionnaires, which were then distributed to respondent stakeholders. The results of respondents' answers are processed using the compare means method

To understand the research process, a research design was prepared as shown in the following figure

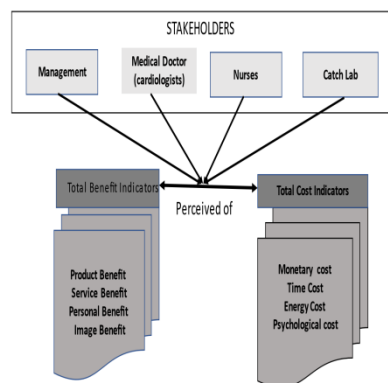


Figure 1: Research Design

IV. Research Hypothesis

There are differences in perceptions among stakeholders of the implementation of heart intervention in terms of perceived value indicators. This hypothesis is based on the assumption that hospital and patient stakeholdersmanagement considered the ratio between benefits and costs from a financial perspective, while doctors, laboratory staff and nurses considered the ratio of benefits and costs from the indicators of time and energy sacrifice.

V. Results and Discussion

The results of data processing showed that the average value of the answer index from all groups of respondents indicated that the implementation of two-stage heart surgery was more profitable than one-stage cardiac intervention, with an average index value of 3.18. The management gave the highest average index value of 3.5 followed by the average index value performed by the patient, which was 3.2 out of a scale of 4. For management, the consideration of doing heart surgery gradually is more profitable considering the amount of income that will be received. received is greater than the revenue received in the implementation of a single-stage operation. On the other hand, the patient considers the implementation of the two-stage operation more beneficial because of psychological considerations and mental preparation.

Meanwhile, on the side of operating operators such as doctors, nurses and laboratory personnel, the considerations are in terms of time and energy. The implementation of the two stages provides an opportunity for doctors, nurses and lab staff to prepare better time and energy.

The conclusion from the results of data processing shows that the implementation of heart surgery in two stages provides more benefits for management, patients, doctors, nurses and laboratory staff (see the following table) that there are differences in perceptions between management and patients on the one hand with doctors, nurses and laboratory workers.

This study shows that respondents' perceptions tend to perceive that gradual action is considered beneficial compared to direct action. This is due to the assumption that doctors, nurses will be more thorough, have more sufficient time, and management has more sufficient time in arranging scheduling and providing better facilities and infrastructure so as to avoid the accumulation of patients when taking direct action, on the other hand. other patients can manage physical readiness better.

Table 1 Compare Means Results

Stakeholders / Indicators	Cardiologist	Management	Nurses	Patient	Means
Benefit	3,1	3,5	2,9	3,2	3,18
Cost	2,3	2,8	2,4	2,4	2,5
Gap	+0,8	+0,7	+0,5	+0,8	+0,6

Findings

Although the results of data processing indicate that cardiac intervention is gradually perceived as more profitable for management, doctors, patients, nurses and lab staff, this is because each party can make better preparations and scheduling for the next action.

However, in fact the management needs to consider other factors influenced in making decisions, because from the data collected it shows that during the last 3 months of 2019 between July and October there were 46 patients who underwent terization measures but only 15 came back for the second stage of implementation. people or 32%. In August there were 50 patients who underwent re-treatment, but those who returned for only 5 people or 10% did the second stage of action, and in September there were 45 patients who had terization procedures, only 6 people came back to do cardiac stents or only 13%. From the data above, it shows that the number of patients who return to follow-up is only less than 10% on average. The low follow-up visits have an impact on management's estimates of earning revenue from the second stages.

Various factors that cause the patient does not return to carry out the second stages actions, first; the psychological condition of patients who feel they are not strong enough to face further action, secondly, some patients switch to using non-surgical drugs such as herbal medicines, the three patients who are hindered by regulations, especially those related to the pattern of zoning programs which require that patients who undergo

surgery must be in accordance with the location of the area of the patient's domicile with the hospital where the procedure was performed.

The decision to take gradual action basically makes management lose patients, meaning the hospital loses potential income from a financial perspective which reduces hospital cashflow. This finding encourages the hospital management to develop a strategic management of stent installation which is a policy that can benefit both parties, the stakeholders on the one hand, namely doctors, nurses and patients and the hospital management on the other.

VI. Conclusion

Based on the results of the study, the conclusions in this study are as follows:

1. There are two dimensions assessed by respondents, namely the dimensions of benefits and dimensions of expenses (costs).
2. Each dimension has an indicator that is assessed, the Benefit dimension consisting of product benefits, service benefits, personal benefits and image benefits, while the expense dimension consists of monetary costs, costs related to use of time, costs related to the use of energy and costs related to psychological cost
3. This study measures the perceptions of the four main components related to the implementation of stent placement and catheterization for heart patients, which are cardiologists, management, nurses and patients who have experienced catheterization and cardiac insertion, to the benefits that can be obtained and the costs incurred. in performing catheterization and stent placement
4. On average the index calculation results based on respondents' answers show that the four components that become the unit of analysis, which are Doctors, Management, Nurses and Patients, state that gradual action or two stages action is more profitable than one stage-time action.
5. The average index of benefit dimension shows a value of 3.18 while the average index of respondents' perceptions of cost shows a value of 2.5. Thus, respondents' perceptions state that gradual action is more profitable than one-time action and costs are in terms of costs. In monetary terms, the loss of time and energy is less than the product benefits, service benefits and personnel benefits

VII. Managerial Implications

Decision making by management taken from research results is a good thing for the development of a company this is because the research results come from scientific studies based on theoretical studies combined with empirical facts in the field, therefore the results of this study need to be used as the basis for decision making by the management of the hospital because the data processed came from the two things mentioned above, theoretically and empirical facts in the field.

There are four main components related to the provider of stent installation and catheterization for heart patients, which are cardiologists, management, nurses and patients who have experienced catheterization and cardiac insertion. product benefits, service benefits, personal benefits and image benefits, as well as the dimensions of expenditure (cost) consisting of monetary costs, costs related to the use of time, costs related to the use of energy and costs related to psychological Based on this, the implications of these findings should be that the management of the hospital should choose to take action in stages for patients with coronary heart disease.

However, these findings are contradictory to other findings based on empirical data that it turns out that the number of patients who return to continue the second stages is only about 10 percent for various reasons as mentioned in the previous chapter, this has implications for hospital acceptance financially, this means hospital management loses earnings than previously estimated. Loss of revenue from previous estimates will have an impact on the financial performance and cash flow of the Hospitals.

The contradictions of these findings need to be anticipated by the hospital, especially for decision makers from the hospital's board of directors and commissioners to develop decision-making strategies in order to maintain the sustainability of the hospital.

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