



Development of Health Services Based on Service Dominant Logic at Tamalanrea Community Health Centre in Makassar City

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Article History	Abstract
Received: 06 June 2023 Revised: 05 Sept 2023 Accepted: 11 Nov 2023	<p><i>The complexity of health service delivery requires government agencies to provide a service framework that is effective, sustainable and oriented towards beneficiary satisfaction, especially at community health centre level, which is a level one service provider, considering that providing health services is a crucial issue in national development. Therefore, the development of service frameworks is a necessity for government agencies. This study seeks to analyse and explain how the development of health services based on service-dominant logic is applied to health services in community health centre. This research uses a qualitative approach with data analysis techniques, including data condensation, data presentation and conclusions. This study found that implementing health services still needs some improvements to overcome several problems, such as service inaction, disintegration of the service system, and increased participation of beneficiaries. The results of this study conclude that the development of service-dominant logic-based health services is very relevant as a strategic alternative in improving the effectiveness and sustainability of the health service system framework in Tamalanrea Community Health Centre, Makassar City.</i></p>
CC License CC-BY-NC-SA 4.0	<p>Keywords: <i>Development, Health service, Community health centre, Service-Dominant Logic</i></p>

1. Introduction

The development of public service delivery faces uncertainty caused by the dynamic evolution of society. This encourages public administration to be responsive to the ever-evolving demands of society. Otherwise, public administration will become like a painting without reflecting reality. (Miftah Thoha, 2008) so that the focus of public services cannot only be limited to government responsibilities but also requires the involvement of various parties outside the government, especially the community as service beneficiaries, to encourage the realization of joint participation in the implementation of public services.

Public Governance is a perspective in public administration that is developing today. This perspective is considered an option to facilitate public engagement and seek to understand the interests of society through interaction between all parties who have interests (Nurdin et al., 2023; Alwi & A.Asllinda, 2019). Evidence that the implementation of government public services is exemplary is the output and impact of what is expected by the community, as Dwiyanto (2007) in (Islands, 2023) that the assessment of public service performance is measured by the suitability of the output and its impact. Therefore, developing sustainable public service design in public service organizations is considered a necessity that needs to be continuously Developed. As a facilitator of public services, the government must design tools in the form of a system framework that supports adequate and sustainable services. The service-dominant logic approach offers a sustainable model of public service organization through the integration of attention to public service effectiveness (Radnor, 2013), public value creation (Osborne et al., 2015; Moore, 2002) and the balance of individuals and organizations towards overall service sustainability (Z. Radnor et al., 2014) At the core of the approach is a business logic dominated by public services (Osborne et al., 2013). This concept focuses on creating shared value in delivering public services, where service providers facilitate beneficiary participation

in creating sustainable public services. This approach is derived from the New Public Governance paradigm, which attempts to recombine accountability issues in public administration with the managerial focus of New Public Management. However, this approach involves a framework that goes beyond the two to regulate the importance of service systems. Service-dominant logic assumes that efficiency is essential for public service organizations. However, public service organizations must also be actively involved in the process of creating, developing, and maintaining service provision that is committed, interactive, and provides sustainable benefits to service users (Osborne et al., 2015; Harker, 1999)

Health services are basic human needs that support a productive life. This is also considered the fundamental right of the community to get health services, as stated in the Constitution of the Republic of Indonesia Year 1945 Article 28 H Paragraph (1) concerning health, namely, "Everyone has the right to live a prosperous life physically and mentally, to reside, and to get a good and healthy living environment and the right to health services. Therefore, providing practical and sustainable services is necessary for related agencies.

Community health centre play a vital role in providing health services to the community. This facility implements public health at the first level, focusing on main tasks such as organizing preventive and promotive efforts supported by curative, rehabilitative, and community empowerment efforts (Betri Anita, 2019). In the theory of Michael Lipsky (1980), conceptually, the bureaucracy of community health centre can be identified as a form of street-level bureaucracy. It refers to a bureaucracy that directly interacts with society, where its role and position make it a representation of the government in the eyes of the public. Bureaucratic operations at this lowest level are related to tackling the community's basic needs. However, there is a tendency in the phenomenon of health services in community health centre to be routine, similar to one region to another, and have implications for the impression of slow and convoluted services. A rule-based system may cause this. Therefore, developing health services is an essential aspect of development. This development can be carried out through a service-dominant logic approach, where this concept offers a holistic framework for encouraging effective and sustainable effectiveness and sustainability of service delivery.

The configuration of the seven propositions offers a map of the process of public service delivery that embraces all elements in it (Z. Radnor et al., 2014) in an integrated, long-term relationship building, emphasizing external efficiency and effectiveness in creating value (Osborne et al., 2014; Vidal, 2013) supported by appropriate innovation (Osborne & Brown, 2011), as well as co-production (Osborne & Strokosch, 2013) gives the impression of practical experience (Vargo & Lusch, 2017) In other words, this concept emphasizes the nature of service dominance.

This study seeks to analyse the health service framework at community health centre in Makassar City and explain how the application of service-dominant logic-based development in encouraging service effectiveness and sustainability, considering that health services in community health centre are level one services that have an essential role in achieving national development goals. Therefore, this study will seek to reveal how the system, embed, relationship, value, innovation, co-production and experience in the health service framework, so that the output of this research will explain how the application of service development based on service-dominant logic at Tamalanrea community health centre in Makassar City.

2. Methods

This study uses a qualitative approach to analyse the health service framework and explain the development of service based on service-dominant logic in driving the effectiveness and sustainability of the service framework. In this study, data collection was carried out by interviews, observation and documentation. The research data was then analysed using data analysis techniques (Saldana., 2014), including data condensation, data reduction and conclusions.

3. Results and Discussion

The implementation of health services at Tamalanrea community health centre in Makassar refers to the vision of Tamalanrea community health centre, namely "The realization of a healthy and independent community in Tamalanrea community health centre area" and the mission of (1) improving excellent service to the community through community health centre quality management system (2) Improving the degree of public health through clean and healthy living behaviour (3) increasing the human resources of community health centre who are competent and friendly, Politeness and Courtesy. This is manifested through developing a service framework as a health service delivery flow.

Field observations found indications of slow and convoluted services, evidenced by the queues often piled up and the long process beneficiaries underwent to get health services. This certainly has implications for the low level of public satisfaction with the provision of services. One of the authentic evidenced of these indications is the many criticisms and suggestions the community gave through the suggestion box provided. Various factors influence this; one of the determinants is the framework of the health care system that has not been optimal, where there are indications of systems or sub-systems that have not worked effectively. Therefore, in realizing the commitment of Tamalanrea community health centre, as stated in the vision and mission, the implementation of health services requires the development of a service system framework. To track the factors that influence the suboptimal delivery of health services, the authors conduct interviews with stakeholders, which will be outlined based on seven propositions of service-dominant logic.

System

From the service-dominant logic perspective, the system is seen as one of the public service provider systems; other vital elements are stakeholders, service users, non-profit organizations and information technology. A fundamental assumption of the service-dominant logic approach is that public service organizations should embrace these service systems and learn how they interact with each other to contribute to sustainable service systems. Therefore, the system is the cornerstone of continuous business processes for public services. Based on the results of observations and interviews with the health service system at Tamalanrea Community Health Centre, the following information was obtained:

Table 1. Health Service System of Tamalanrea Community Health Centre

Stakeholder	Perspective
Field of Administrative Management	Manual service system dominates System Shared externally and internally
Counter Service	Work area-based services
General Poly	The community has not optimally utilized ICT According to the flow of health service mechanisms
Pharmacy	Done manually Refers to service flows
Health extension coordinator	Preventive and axial systems
Extension Cadre	Acid System

Source: Data Reduction, 2023

The service system at Tamalanrea community health centre is divided into two types; the first refers to internal services such as the provision of general poly services, dental poly and maternal and child health poly, and family planning, while the second type is an effort held by community health centre in realizing an independent, healthy community through activities that are public awareness of the importance of healthy living. Both models each have their own mechanisms. As a system, community health centre involves stakeholders such as BPJS, hospitals and the community.

The service system framework at community health centre has not shown any indication as a service-dominant logic-based system; this assumption is based on the system framework in health services has not embraced the entire existing sub-system, where sub-systems such as service counters, pharmaceuticals, and general poly each focus on their roles and functions, no framework integrates all sub-systems substantially so that the delivery of services can be carried out effectively and efficiently. Health services at community health centre refer to the following workflow framework:

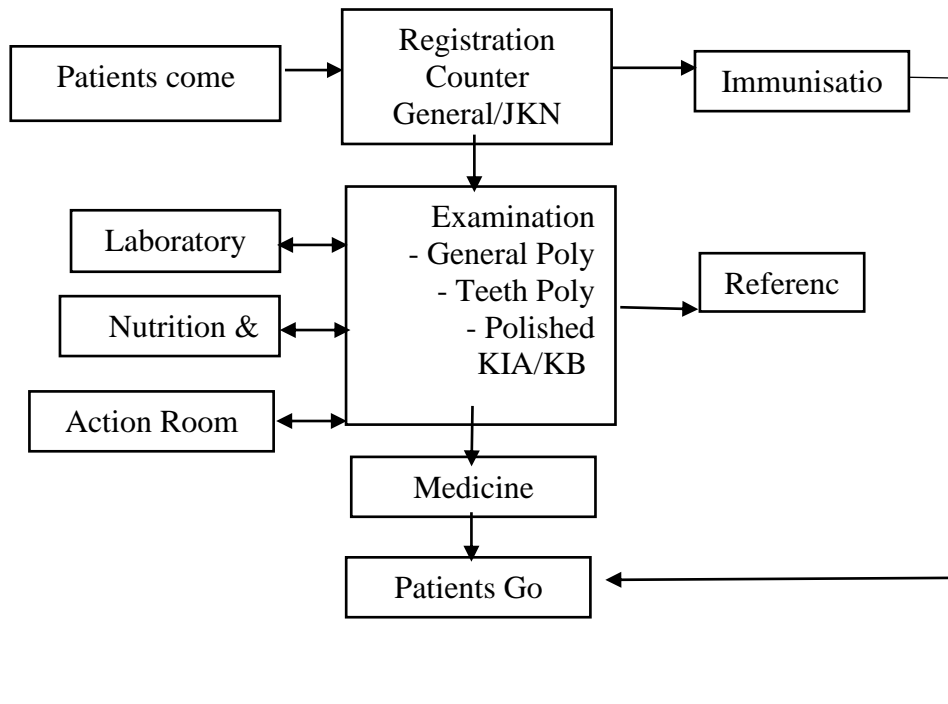


Figure 1. Health Service Flow of Tamalanrea Community Health Centre

Source: Tamalanrea Community Health Centre, 2023

In the picture, the health service mechanism of community health centre systematically illustrates how the community can get health services, but this is still carried out manually. In reality, the flow seems not optimal because the community takes a long time to obtain health services; on the other hand, there is often service disinformation because there is essential involvement of BPJS as a regulator, but its representation is not directly involved in the process of providing health services. This is an implication of the system framework, which is seen as the only system, even though in reality, BPJS, the community and other stakeholders should also be seen as part of a sub-system that contributes to influencing the effectiveness and sustainability of health services at Tamalanrea community health centre in Makassar City. In other words, the design of the health care system should embrace all components of the sub-system in creating a service system framework instead of just focusing on the internal community health centre itself. Meanwhile, in the extension field, the framework system is carried out preventively and flexibly, meaning that extension activities are carried out by utilizing the momentum of interaction with the community.

Although hierarchically all components are involved, the reality of health service delivery at Tamalanrea community health centre in Makassar varies; this is influenced by the characteristics of the community and stakeholder actors, so these resources should be an integrated system, interdependent and dominated by service logic, meaning that all sub-systems involved are oriented towards service effectiveness and view the system as one unity that influences each other. This is essential to developing health services at the Tamalanrea community health centre. System thinking in implementing community services must be understood and clearly defined by all components of the sub-system involved so that the health service delivery system results from accumulating resources from all stakeholders.

Implementing health services at Tamalanrea community health centre still tends to be unities. Although it has tried to find alternatives internally to improve the quality of health services, this is only limited to not involving itself internally in a broader framework to cover all sub-system components and stakeholders involved. Therefore, to initiate service development based on service-dominant logic, public service organizations must explore the efficiency of inter-organizational networks as an alternative or modified form of the market model (Osborne et al., 2015).

Embed

The second proposition is embedded in this aspect, asserting that public service organizations must address organizational sustainability issues to continue contributing to the public service system. Whatever alternative is adopted, however, the essential element of sustainable public service is to understand that the sustainability of the service system is a top priority. Therefore, the organization of

public services needs to be a closely interrelated system. Norman (2000) suggests that organizations can only succeed if they can embrace the service system as a whole. About the integration of service systems at Tamalanrea community health centre in Makassar City, the following information was obtained:

Table 2. Embed in health service framework of Tamalanrea community health centre

Stakeholder	Perspective
Field of Administrative Management	The service sub-system has not been integrated
Counter Service	Not yet optimally integrated
General Poly	Contained in the flow of health service mechanisms
Pharmacy	Not yet effectively coordinated
Health extension coordinator	Flexible
Extension Cadre	Flexible

Source: Data Reduction, 2023

The health service framework at Tamalanrea community health centre has yet to show effective service integration, as shown in Table 1.2. The fact that the available system needs to work correctly implies that the service sub-system needs to be coordinated effectively, and no process map exists as a mutual agreement between stakeholders and uniform interpretation. Based on the service dominant logic approach, integration in the health service system at Tamalanrea community health centre is necessary to become an effective and sustainable service. This configuration can be realized through structuring networks between actors in a collaborative framework based on service-dominant logic. This is like system thinking embraced by all system components to the smallest sub-systems involved so that understanding service sustainability always refers to the nature and characteristics of health services. That way, the development of the service system always leads to continuous service effectiveness.

Relationship

As explained earlier public service organizations cannot work in isolation with the holistic service system; this has implications for the importance of relationship management, which is the primary responsibility of public service organizations in regulating service continuity. This assumption confirms that there is a need for collaboration in the delivery of public services so that, to increase the information, resources, and capabilities needed, collaborative approaches take precedence over competitive ones. This principle applies to public and private organizations (Helfert, 2002).

Increasing information, resources and capabilities in delivering health services today requires a collaborative approach. Still, the relationship in the implementation of health services at Tamalanrea community health centre has not shown this, as the information obtained below:

Table 3. Relationship in the Health Service System at Tamalanrea community health centre

Stakeholder	Perspective
Field of Administrative Management	Not yet effective
Counter Service	Constantly being developed
General Poly	Routine
Pharmacy	Relatively follows the characteristics of service users
Health extension coordinator	Not yet effective
Extension Cadre	Flexible
	Flexible

Source: Data reduction, 2023

The lack of effective relationships within the framework of health services can be seen from the relationships between sub-systems that are still routine; these relationships tend to be individual among existing sub-systems; in other words, there is no relationship governance oriented towards developing effective relationship patterns between the sub-systems involved. From the service-dominant logic perspective, the pattern of relationships between sub-system components should be organized within the service system's framework and proactively created, developed, and maintained committed, interactive exchanges and increased community satisfaction. In other words, the core of the relationship in service-dominant logic is trust,

Relationship asserts that effective relationship management is to describe individual-level relationships in which the organization's staff interact with policymakers and service users who are oriented towards excellent service to give a positive impression of the beneficiaries, thereby also increasing the level of public trust and triggering their involvement in the development of the health care framework.

The configuration of relationship governance effectiveness is a relationship that shows harmonious relationships among the actors involved, be they stakeholders or beneficiaries. This can trigger the long-term sustainability of developing a health service framework at Tamalanrea community health centre in Makassar.

Based on observations and interviews with stakeholders, the main problem in building relationships in health service delivery is that people often do not understand the mechanisms and procedures provided by the community health centre; they have varied characteristics, so it is difficult to determine what kind of communication patterns can be applied to manage these interactions. Relationships in the context of service-dominant logic offer a robust framework for shaping, guiding and, when necessary, ending relationships between organizations with diverse individual characteristics (Gulati, R., 2000). Furthermore, Palmuttee (2000) describes it as the level of trust, appreciation, and friendship that arises from close interactions between individuals and other partner components.

Value

One of the triggers for the failure of public service delivery is that organizers need to be more systematic in addressing the problem of public value creation for beneficiaries (Gains & Stoker, 2009). As a healthcare provider, public value creation is crucial in increasing community satisfaction and practical service sustainability.

Tamalanrea community health centre supports the service motto, namely "serve sincerely", with values 1) safe and comfortable; provide services that focus on patient comfort, 2) Quality; provide services that meet service quality standards, 3) protect; provide health protection to the entire community.

The phenomenon of health service delivery at Tamalanrea community health centre is only limited to things that tend to be normative substantially. The reality of its implementation has not reached the core value of health service delivery; this can be seen from community involvement has not been considered as a resource that can create added value even though active community participation can increase the efficiency, effectiveness, and relevance of health services provided by community health centre. It can utilize local knowledge, experience, and community needs to improve service quality. Tamalanrea community health centre is expected to create public value. This means that community health centre not only provides health services as a routine task but also contributes positively to the satisfaction of the wider community.

A doctor or medical team can offer different forms of treatment, including surgery, medications, therapy, and so on. However, the actual value to patients arises from their interaction with the treatment plan. It creates value in the patient's context by forming impressions of their experiences through the service and has a demonstrable impact on patient's clinical outcomes.

With the community health centre acting as the organizer of this process, this function is carried out by aligning the organization's service offerings with the personal needs, abilities, and experiences of individuals and their social context. The responsibility of a public service organization is to determine the types of services offered and facilitate this process of value creation. In other words, public service organizations are parties that should be put into the equation as co-creators of value, not simply users of services. This has been in line with the value creation designed by Tamalanrea community health centre, but this needs to be substantively translated through the behaviour of public service organizations. This is based on the phenomenon of health services that only focus on planning internally and exclude aspects of the characteristics of the beneficiary community.

On the other hand, the enormous task load also affects this, where there are limited resources to serve a relatively large number of people. Nevertheless, value creation is still pursued by Tamalanrea community health centre through socialization to increase public understanding of obtaining health services. Therefore, to develop health services at Tamalanrea community health centre, the main task must be to determine how public values and organizational values are balanced, meaning that no one dominates the other. Still, the implementation of public services is service-dominant logic.

Innovation

According to the service management literature, innovations that contribute to the sustainability of public service organizations and public service systems need to break away from the dominant limitations of products that previously hindered their positive impact on sustainability (Djellal, R., F. Gallouj, 2013). The innovation process naturally involves risk, as supported by the majority of innovation failures (Klein, Katherine, Sorra, 1996). To contribute to sustainable business logic for public services, it is essential to engage with these risks and manage them well explicitly. With a proactive approach like this, innovation can significantly contribute to the sustainability of public service organizations. This can be realized through continuous development and improvement (incremental innovation), the construction of new services that complement existing services (evolutionary innovation), the expansion of geographic or industrial coverage of existing services to include new groups of service users (expansive innovation), and the creation of entirely new forms of public services that meet the newly identified needs in new ways (total innovation) (Osborne & Brown, 2011). The phenomenon in the implementation of health services at Tamalanrea community health centre shows that initiatives in innovating tend to be low as information obtained from observations and interviews in the field:

Table 5. Innovation of Tamalanrea community health centre

Stakeholder	Perspective
Field of Administrative Management	Labour alarm
Service Counter	Not yet maximally realized
General Poly	Not yet maximally realized
Pharmacy	There is no pharmaceutical sub-field yet

Source: Data Reduction, 2023

One of the innovations designed by Tamalanrea community health centre is a childbirth alarm, which aims to remind the control time of community who will give birth so that all the requirements and needs to obtain services can be prepared by reminding them. On the other hand, in other sub-systems, there has yet to be any innovation in developing health services. In contrast, the innovations realized come from higher levels of the organization, in this case, Tamalanrea community health centre. The service counter sub-system has implemented an online queuing system, which has yet to be optimally realized due to low public participation in information technology in obtaining health services.

As stated earlier, integration in the health care system is an essential aspect in developing sustainable health services; understanding how the system works can be a reference for creating innovations in health service development sustainably; these innovations must continuously adapt to the dynamic dynamics of health service delivery, this innovation does not only occur at the management level top but also supported by innovation in low management and designed holistically and dominated by the service itself so that the delivery of health services can be realized effectively and sustainably.

Co-production

The public service model is generally one in which public officials are exclusively responsible for designing and providing services to citizens, who only demand, consume, and evaluate them (Pestoff, 2006). Such an understanding of co-production derives from the dominant logic of products. Production and consumption are separated as processes so that public services are conceptualized as products designed and produced by public policymakers and service professionals and passively consumed (relatively) by service users. The question is not how to add co-production to public services but how to actively engage and work with them to ensure sustainable public service organizations and systems (Osborne et al., 2016). Based on observations and interviews in the field, the following information was obtained:

Table 6. Co-production of Tamalanrea community health centre

Stakeholder	Perspective
Field of Administrative Management	Utilization of suggestion boxes
	Utilization of cadres in seeing opportunities (community needs)
	Cadre training
	There is a problem of lack of understanding of the community

Service Counter	Networking is axial Utilized through the suggestion box
General Poly Pharmacy	There is a problem of lack of understanding of the community Utilization of suggestion boxes

Source: Data Reduction, 2023

The active involvement of beneficiaries in realizing the health service framework at Tamalanrea community health centre is continuously facilitated through the provision of suggestion boxes, which aim to identify feedback as input material in developing the health service framework. Public involvement as co-production has been implemented at Tamalanrea community health centre in Makassar City, but this application is inseparable from various obstacles and problems. Often, the input given by the community cannot be fulfilled by community health centre due to limited resources owned. The second problem is a tendency for individual community input, so the input conveyed is subjective and has implications for the difficulty of defining problems to build a sustainable health service development framework.

Based on service-dominant logic, community health centre should proactively strive to uncover, understand, and meet future needs rather than simply reacting to existing or current needs, such as trends in public services. Then, take processes beyond co-production and unlock the potential for co-design and co-creation of public services between service users and service professionals, both of which are mooted as vital for sustainable public services in the future (Alford, 2016).

The co-production configuration referred to in the concept of service-dominant logic has substantially not been found in health services at Tamalanrea community health centre in Makassar City because so far, the community health centre has only shown efforts to focus on collecting these inputs have not been outlined in projections for the future of health services. Therefore, to develop health services, community health centre must proactively strive to understand symptoms, define them realistically and determine strategic alternatives in health service development.

Experience

Experience will indirectly form the transformation of knowledge, which differentiates sustainable business models in different markets, be they public or private, that focus on products or services. This sustainable business model prioritizes unit cost control and internal efficiency in the production process, focuses more on applying specific skills, and views knowledge as a core resource. In this context, service users are always partners in creating value because the value of a service only arises when the service is used. Experience and perception are essential in determining the value of the service (Lusch and Vargo, 2006). The dominant sustainable business model in public services places the utilization and transformation of knowledge and skills at the core of public service delivery, prioritizing service experience over the specification of output units and their associated costs.

Tamalanrea community health centre in Makassar has yet to focus on this aspect; this is shown by providing health services that still tend to be in the style of New Public Management, where beneficiaries are still seen as customers who must be served. In other words, the nature of health services in community health centre still shows transactional characteristics. For example, the absorption of criticism of the advice of beneficiaries who still rely on contact through suggestion boxes has yet to provide dialectical space in developing health services. Therefore, to develop health services based on service-dominant logic, knowledge transformation must be facilitated through dialectical space to reduce the potential for interpretive errors between stakeholder actors. This promises greater access to a broader range of knowledge sources. Still, such access also has challenges when it comes to filtering and weighing these sources of information against each other (Dunleavy, P., H. Margetts, 2006). In Service-Dominant Logic (SDL), the concept of experience as knowledge transformation refers to the view that value in the context of services comes not only from concrete products or outputs but also from the knowledge transformation process between service providers and beneficiaries.

Experience in SDL involves a knowledge transformation process, where knowledge from providers and consumers is exchanged, understood, and integrated during service interactions. This transformation of knowledge leads to the creation of better value. Understanding of value in SDL is gained through experience and perception during interaction. How consumers perceive, understand, and interpret service interactions dramatically influences the value received. The experience and transformation of knowledge are not limited to one direction. Interactions can bring new knowledge,

update existing knowledge, and support adaptation and flexibility in creating value that matches the needs and expectations of beneficiaries.

SDL emphasizes the concept of co-creation of value, which means that the service provider creates value jointly by the provider and beneficiary during the interaction process. The transformation of knowledge co-occurs and contributes to better value creation. Thus, in service-dominant logic, experience is considered a dynamic process in which knowledge is consumed, shared, and transformed during interaction, which plays a crucial role in the value creation of the service.

4. Conclusion

This study concludes that the dynamics of health service delivery at Tamalanrea community health centre in Makassar still require several improvements, including service inaction, increased community participation in service continuity, and increased innovation to encourage effective and sustainable service delivery. This can be implemented by changing the service product-focused orientation to a dominant logic approach. The emphasis on seven dominant logic service propositions, including system, embed, relationship, value, innovation, co-production and experience, is a feature of strategic steps in developing practical and sustainable health services at Tamalanrea community health centre in Makassar.

As a public service organization, Tamalanrea community health centre requires a holistic approach to designing a health service framework and facilitating the involvement of critical actors as initiators, including the beneficiaries themselves, where they take part in initiating the development of a health service system based on service-dominant logic. In this way, the problem of service inaction can be addressed through the collaboration of actively engaged resources, where they proactively serve as co-producers of the service.

References

- Alford, J. (2016). Co-Production, Interdependence and Publicness: Extending public service-dominant logic. *Public Management Review*, 18(5), 673–691. <https://doi.org/10.1080/14719037.2015.1111659>
- Betri Anita, H. F. dan Y. (2019). *Puskesmas dan Jaminan Kesehatan Nasional*. DEEPUBLISH (Group Penerbitan CV. BUDI UTAMA).
- Djellal, R., F. Gallouj, and I. M. (2013). Two decades of research on service innovation: what place for public services? *Structural Change and Economic Dynamics*, 27, 98–117.
- Dunleavy, P., H. Margetts, S. B. and J. T. (2006). *Digital Era Governance*. Oxford University Press.
- Gulati, R., N. N. and A. Z. (2000). (2000). Strategic networks. *Strategic Management Journal*, 21, 203–215.
- Helfert, G., T. R. and A. W. (2002). Redefining market orientation. *European Journal of Marketing*, 36, 1119–1139.
- Kepulauan, D. B. (2023). *Jurnal Ilmiah Administrasi Publik (JIAP) Mengukur Kualitas Pelayanan Berbasis Preferensi Masyarakat pada Pemerintahan*. 9(2), 88–99.
- Klein, Katherine, Sorra, J. (1996). The Challenge of Implementation. *The Academy of Management Review*. <https://doi.org/10.5465/AMR.1996.9704071863>
- Michael Lipsky. (1980). *Street Level Bureaucracy : DILEMMAS OF THE INDIVIDUAL IN PUBLIC SERVICES*. Russell Sage Foundation.
- Miftah Thoha. (2008). *Administrasi Publik Kontemporer (1st ed.)*. PRENADAMEDIA GROUP.
- Nurdin, N. H., Hamson, Z., Mahmud, M. N., & Zainal, N. H. (2023). Democratic Public Service (Case of License Operating Billboards in Makassar City). *Jurnal Ilmiah Ilmu Administrasi Publik*, 13(1), 103. <https://doi.org/10.26858/jiap.v13i1.43900>
- Osborne, S. P., & Brown, L. (2011). Innovation, public policy and public services delivery in the UK. The word that would be king? *Public Administration*, 89(4), 1335–1350. <https://doi.org/10.1111/j.1467-9299.2011.01932.x>
- Osborne, S. P., Radnor, Z., Kinder, T., & Vidal, I. (2014). Sustainable public service organizations: A public service-dominant approach. *Society and Economy*, 36(3), 313–338. <https://doi.org/10.1556/SocEc.36.2014.3.1>
- Osborne, S. P., Radnor, Z., Kinder, T., & Vidal, I. (2015). The SERVICE Framework: A Public-service-dominant Approach to Sustainable Public Services. *British Journal of Management*, 26(3), 424–438. <https://doi.org/10.1111/1467-8551.12094>

- Osborne, S. P., Radnor, Z., & Nasi, G. (2013). A New Theory for Public Service Management? Toward a (Public) Service-Dominant Approach. *American Review of Public Administration*, 43(2), 135–158. <https://doi.org/10.1177/0275074012466935>
- Osborne, S. P., Radnor, Z., & Strokosch, K. (2016). Co-Production and the Co-Creation of Value in Public Services: A suitable case for treatment? *Public Management Review*, 18(5), 639–653. <https://doi.org/10.1080/14719037.2015.1111927>
- Osborne, S. P., & Strokosch, K. (2013). It takes two to tango? Understanding the co-production of public services by integrating the services management and public administration perspectives. *British Journal of Management*, 24(S3). <https://doi.org/10.1111/1467-8551.12010>
- Pestoff, V. (2006). Citizens and Co-production of Welfare Services. *Public Management Review*, 8. <https://doi.org/10.1080/14719030601022882>
- Radnor, Z. and S. O. (2013). (2013). Lean: a failed theory for public services? *C Management Review*, 15, 265–287.
- Radnor, Z., Osborne, S. P., Kinder, T., & Mutton, J. (2014). Operationalizing Co-Production in Public Services Delivery: The contribution of service blueprinting. *Public Management Review*, 16(3), 402–423. <https://doi.org/10.1080/14719037.2013.848923>
- Saldana, M. & H. (2014). *Qualitative Data Analysis*. America: SAGE Publications.
- Vargo, S. L., & Lusch, R. F. (2017). Service-dominant logic 2025. *International Journal of Research in Marketing*, 34(1), 46–67. <https://doi.org/10.1016/j.ijresmar.2016.11.001>