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POLICY INNOVATION OF 'JEMPUT SAKIT ANTAR SEHAT' AS HEALTH ACCESSIBILITY IN MAGELANG CITY

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Abstract: Access issues often become a barrier to getting excellent health services due to geographical, economic, and health limitations. To overcome this, the Magelang City Government, through the Public Safety Center (PSC), launched the innovative Jemput Sakit Antar Sehat (JSAS) service. This service is available 24 hours a day and can be used in emergency and non-emergency situations free of charge. This study used a qualitative descriptive method, with data obtained through observation, interviews, and documentation. The results showed that JSAS is very useful, especially for people who do not have access to medical transportation. This service is also considered superior to the previous system due to its flexibility and broader reach. However, several challenges are still faced, such as the limited number of medical personnel and vehicles, and the lack of socialization, which causes minimal public knowledge about this service. To increase the effectiveness of JSAS, additional human resources and fleets are needed, such as increased socialization through the media and community leaders, and collaboration with the private sector or social institutions to support the sustainability of the program.

Abstract: *Akses terhadap layanan kesehatan yang berkualitas sering kali terhambat oleh faktor geografis, ekonomi, dan kondisi kesehatan masyarakat. Untuk menjawab tantangan ini, Pemerintah Kota Magelang melalui Public Safety Center (PSC) menghadirkan inovasi Jemput Sakit Antar Sehat (JSAS). Layanan ini memberikan fasilitas transportasi medis gratis selama 24 jam bagi masyarakat dalam kondisi darurat maupun non-darurat. Penelitian ini menggunakan metode deskriptif kualitatif dengan teknik pengumpulan data melalui observasi, wawancara, dan dokumentasi. Hasil penelitian menunjukkan bahwa JSAS sangat membantu masyarakat, terutama mereka yang tidak memiliki kendaraan pribadi atau kesulitan mobilitas. Program ini dianggap lebih unggul dibanding sistem sebelumnya karena mampu menjangkau lebih banyak warga dan memberikan pelayanan yang lebih fleksibel. Meski demikian, terdapat beberapa kendala seperti terbatasnya jumlah armada dan tenaga kesehatan, serta masih rendahnya tingkat pengetahuan masyarakat akibat minimnya sosialisasi. Untuk meningkatkan efektivitas layanan, disarankan adanya penambahan sumber daya manusia dan kendaraan, perluasan informasi melalui media massa dan tokoh masyarakat, serta kolaborasi dengan pihak swasta atau lembaga sosial dalam mendukung keberlanjutan dan perluasan program JSAS di masa mendatang.*

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INTRODUCTION

Health is a fundamental right of every Indonesian citizen, as stipulated in Law Number 17 of 2023 concerning Health. This regulation aims to ensure that every individual receives safe, high-quality, and affordable healthcare services. However, its implementation continues to face various challenges, particularly in terms of accessibility and equitable distribution of health services (Peraturan.BPK, 2023). Geographical and economic factors remain major barriers to accessing healthcare{(Sarjito, 2024);(Cahya et al., 2023)}. As an archipelagic country with extreme topography, Indonesia faces obstacles such as limited infrastructure, high transportation costs, and a lack of medical facilities and personnel especially in remote areas (Adrianto, 2021). Financial constraints also hinder the poor from accessing medical care, medications, and preventive services, contributing to rising illness and mortality rates. {(Levesque et al., 2013) in (Ananda, 2022)} explain that access to healthcare comprises key dimensions: availability, affordability, acceptability, and cultural appropriateness, all of which must be met to ensure equitable healthcare within the public health system. Limited access often becomes the root of health inequities, especially in areas with geographic, health-related, and economic constraints. Therefore, effective strategies are needed to overcome these barriers in order to realize a more inclusive and equitable healthcare system (Sabitta et al., 2024).

One of the government's breakthroughs in addressing healthcare service issues, particularly in terms of accessibility, is the launch of the Public Safety Center (PSC) 119 (Hamrun et al., 2020). The establishment of PSC 119 is the result of a national collaboration between the central and regional governments, involving an integrated system between the National Command Center (NCC) in cooperation with the Ministry of Health in Jakarta and PSC 119 units in each regency/municipality (Yuliana et al., 2020). One city that has implemented the PSC 119 service is Magelang City. Magelang is a region with relatively small geographic coverage but a relatively high population density in certain areas (Darmawan, 2024), such as Central Magelang, which has a density of nearly 9,500 people per square kilometer. This condition poses serious challenges in the distribution of emergency medical services when using conventional transportation systems (Data go, 2024). Therefore, the government has made efforts to improve healthcare accessibility by launching the Public Safety Center (PSC) 119 service in Magelang City.

In Magelang City, PSC 119 has been operating since 2017 and became an official Technical Implementation Unit (UPT) in 2022 under the name *Magelang Emergency Service* (MES). Initially, the concept of PSC 119 in Magelang was limited to handling emergency services or urgent medical situations. However, in practice, the scope of PSC 119's services remained confined to emergency medical cases and was unable to cover patients requiring urgent attention but not classified as emergencies. The absence of a patient pick-up service for non-emergency cases made it difficult for certain groups especially those with limited mobility or lack of transportation access to receive timely medical assistance. This limited service coverage created a gap in the system, resulting in the suboptimal fulfillment of citizens' rights to equitable healthcare access. Acknowledging this need, the Magelang City Government subsequently developed the innovation *Jemput Sakit Antar Sehat* (JSAS) as an expansion of the PSC 119 system to address accessibility issues more comprehensively and inclusively.

Conceptually, innovation refers to a breakthrough in the form of creative ideas, renewed concepts, or adaptations of existing practices that are modified to have a tangible impact and significant benefits for society (Riyani et al., 2023). In the context of the public sector, innovation does not necessarily have to be a completely new invention; it can also take the form of developing or improving pre-existing systems or services {(Landaburu, 2016); (Saputro, 2023)}. In this regard, public innovation is understood as the government's adaptive effort to respond to societal needs more effectively and efficiently by improving service quality, including in the health sector (Hartley, 2005; Asmara et al., 2020). The Jemput Sakit Antar Sehat (JSAS) service in Magelang City was launched in 2021, at a time when the city experienced high rates of pre-hospital mortality and deaths caused by accidents. This situation was exacerbated by a rising poverty rate in the same year (PSC, 2023).

Table 1. Number of KLL Victims in Magelang City in 2020-2023

Number of Victims of KLL in Magelang City	Unit	2020	2021	2022	2023
Minor Wounds	Unit	229	280	513	383
Severe Injuries	Unit	0	1	0	1
Die	Unit	24	22	24	28

Sources: Datago Kota Magelang (2024)

Considering the limited availability of medical transportation and the need for inclusive access to healthcare services, the Magelang City Government launched the JSAS program. Therefore, this study seeks to answer the following research question: How does the JSAS service improve access to healthcare in Magelang City, particularly for vulnerable groups in pre-hospital situations? The purpose of this research is to analyze the Jemput Sakit Antar Sehat (JSAS) service innovation in improving access to healthcare services in Magelang City, especially for vulnerable populations. The analysis employs Levesque's healthcare accessibility framework and Rogers' diffusion of innovation theory to evaluate both the effectiveness and the strategic relevance of the service. The main focus of this study is to understand the contribution of JSAS in overcoming healthcare access barriers, particularly those experienced by vulnerable groups.

RESEARCH METHOD

This study employs a qualitative approach with a post-positivist paradigm, aiming to gain an in-depth understanding of the innovation phenomenon within the *Jemput Sakit Antar Sehat* (JSAS) service in Magelang City. The post-positivist approach was chosen because it accommodates the view that social reality is complex, dynamic, and cannot be fully explained through a purely objective qualitative approach. Through this perspective, the researcher seeks not only to describe the facts but also to explore the meanings, perceptions, and experiences of the involved actors, including service providers (PSC 119 officers) and service recipients "the community" (Sutrisni et.el, 2024)

The researcher served as the primary instrument for data collection using triangulation techniques, which included observation, interviews, and documentation. Observations were conducted by directly visiting the PSC 119 service center and communities that had utilized the *Jemput Sakit Antar Sehat* (JSAS) service. In-depth interviews were conducted to gain more detailed information and generate diverse data. In this study, data were obtained from primary sources, which refer to information gathered directly from key informants. The key sources in this research included the Health Innovator of Magelang City, the Head of PSC 119 Magelang City, and community members who had used the *Jemput Sakit Antar Sehat* (JSAS) service.

Documentation involved the collection of data from relevant documents, reports, and official publications. This research was conducted in Magelang City from October 2024 to February 2025. Data analysis was carried out using a qualitative descriptive approach through the processes of data reduction, data presentation, and conclusion drawing, applying an interactive model (Sahab, 2022).

RESULT AND DISCUSSION

The *Jemput Sakit Antar Sehat* (JSAS) is a healthcare program developed by the Magelang City Government through the Public Safety Center (PSC) 119 as a solution to the challenges of healthcare accessibility, particularly for communities facing transportation barriers. The JSAS service is based on the need to provide fast, efficient, and free medical transportation for those in need, as emphasized by the health innovator of Magelang City in relation to the development of this service.

> *"So, the innovation arises from a problem, the main problem in Magelang City is that many people in Magelang City are constrained to go to service facilities, especially vulnerable groups, especially the elderly, who have difficulty going to health facilities. In addition, patients who are discharged from hospitalization or surgery are often reluctant to carry out follow-up control due to transportation limitations" (Interview of Mrs. M)*

Innovation of the Sick Inter-Healthy Pick Up Service (JSAS) is intended for the people of Magelang City or people in the city of Magelang. There are two types of services in the JSAS Inter-Healthy Sick Pick-Up, the first is non-gadar services, namely public services where patients cannot visit health facilities, including stroke patients, diabetes, degenerative diseases (hypertension), post-surgical wounds, mental

disorders, and other non-communicable diseases. While the second type of service is a special service, namely services with Emergency conditions (Kesehatan & Magelang, 2023).

The mechanism in the implementation of JSAS is that the public can place an order by making an emergency call to the PSC 119 number or can contact the PSC 119 Magelang City WhatsApp number. After that, the call center will verify the patient's condition and determine the level of service needed (emergency or non-emergency). The implementation of services includes picking up patients from their homes or the scene of the incident to health facilities, as well as between patients from the health facility to their homes after undergoing treatment.

In its implementation, PSC 119 also integrates with other health services to ensure better coordination with health facilities in Magelang City. To assess how JSAS addresses accessibility barriers and gains public acceptance, this study adopts two theoretical perspectives. First, Rogers' (2003) innovation theory, cited by (Ibad Syahrul, 2023)is used to evaluate the success and acceptance of the service. Second, Levesque et al.'s (2013) health accessibility framework, also referenced by (Ananda, 2022), is employed to examine the dimensions of access that JSAS seeks to address. These frameworks provide a structured and comprehensive basis for analyzing the effectiveness of JSAS in the context of public health innovation.

A. Relative Advantage

The relative superiority of an innovation is judged by the added value and benefits offered compared to previous innovations (Fokas & Kastis, 2021). In this case, the JSAS Inter-Healthy Sick Pick-up service is a development of the *Magelang Safety Center* (MSC), which previously only handled medical emergencies. *Magelang Safety Center* (MSC) itself is the first service at PSC 119 Magelang City, but in 2021, the local government expanded its coverage to not only serve emergency patients, but also non-emergency patients. The presence of JSAS aims to help people who often have difficulties in getting medical transportation, especially for non-emergency patients (Jonsson et al., 2022). This service also has advantages over conventional health transportation methods, one of which is time efficiency, where patients immediately get transportation to health facilities without having to wait for a long time. As conveyed by the Magelang City Health Innovation Innovator:

> *"Yes, this JSAS service program is quite helpful in reducing the death rate both from traffic accidents and pre-hospital deaths. Because in this service, there is also a response time in emergency conditions, which is less than 10 minutes. So in emergency services, it must be less than 10 minutes while non-emergency services adjust to demand" (Interview Mrs. M)*

This confirms the relative advantage of JSAS in providing faster, more reliable, and free medical transportation (Shah et al., 2023), removing financial and logistical barriers for many residents. In addition, the JSAS service also helps in reducing the burden of transportation costs for the people of Magelang City from the results of interviews with several people who have used the JSAS service stating that they feel helped by this JSAS service, because this service is provided free of charge to the people of Magelang City so that people no longer need to use conventional transportation. The services at PSC 119 Magelang City were free for the people of Magelang City, even before the JSAS. PSC 119 Emergency services were free for the community. As conveyed by the head of PSC 119, Magelang City.

> *"The phenomenon is that not all of the people of Magelang City can afford it; some are able, but not all have access to transportation, for example, they need a fleet of cars or ambulances. The existence of JSAS can help to solve this problem. People do not have to rent a special car or need financing. With the program in free fish, everything is free" (interview with Mr. S)*

The existence of PSC 119 provides easy access to health services without having to worry about travel costs, making it more accessible to all people in the community.

B. Compatibility

The suitability in this stage is to assess the extent to which JSAS meets the needs of the people of Magelang City in getting faster and easier access to health services (Yuliana et al., 2020). If in the past the services at PSC 119 only served medical emergencies, now with the existence of JSAS, the services are more evenly distributed according to the needs of the community. In addition, JSAS also supports the vision and mission of the city of Magelang as a healthy city by ensuring that every citizen has equal access to health services. As conveyed by the health innovator of Magelang City

> *"The vision of the city of Magelang is an advanced, healthy, and happy city of Magelang, so we support the second mission, which is to increase human resources, so if the human resources are healthy, the quality is also expected to be good" (interview with Mrs. M)*

With this service, groups of people who previously faced mobility barriers such as transportation limitations or certain physical conditions can still reach health facilities without significant barriers. This is in line with the findings (Li & Wang, 2024), which assert that the increased accessibility of public services, including medical transport, has a significant impact on improving the quality of health of vulnerable groups previously marginalized in the conventional service system. This can be seen in the table from the results of interviews with several people who have used JSAS services.

Table 2. Results of Community Interviews Related to the Existence of JSAS

Before the JSAS service	After JSAS service
It is difficult to get transportation, especially for the elderly and non-emergency patients.	It is easier for people to get transportation services that suit their needs.
If you use public or private transportation, you feel uncomfortable and are not always safe.	The transportation provided by PSC 119 is more comfortable and safer, especially for the condition of patients who need a lying position.
Patients have to wait a long time if they are looking for their alternative to go to a health facility.	With responsive service, patients can get transportation faster.
If you use public transportation or online, it can be expensive and not always affordable.	JSAS services reduce the burden of transportation costs for the community because they are not collected at all.

Sources: Results of Community Interview Data Processing

From the experiences of individuals before and after using JSAS, there is a significant difference. They now feel more supported and are able to receive the medical care they need more quickly. In addition, the presence of JSAS also contributes to proper medical handling, as emphasized by the health innovation initiator of Magelang City:

> *"JSAS is a strategic innovation in accelerating public access to health services, especially in emergencies. This service has proven not only to improve the accuracy of medical response but also to have a real impact on public health indicators, such as reducing mortality rates due to delayed treatment and increasing timely referrals to health facilities. Moreover, JSAS contributes to the expansion of pre-hospital service coverage and the reduction of untreated early-stage complications." (Interview of mrs M).*

This initiative demonstrates that a responsive and affordable service approach can improve the quality of the health system and enhance the public's sense of security in accessing medical services. From this, it can be concluded that the existence of JSAS not only brings positive impacts to the community but also supports the government's efforts in reducing mortality rates in Magelang City.

C. Complexity

Complexity in public service innovation refers to the level of difficulty felt by users in understanding and using a new service. The simpler a service, the more likely it is that it can be widely accepted and used by the community (Solong & Muliadi, 2021). In this case, JSAS service is designed to have a low level of complexity, with a simple booking procedure. The public only needs to contact the number 119 or the official WhatsApp number of PSC 119 Magelang City, which will then be followed up by officers through a verification process and assessment of service needs.

The design of this accessible service is in line with the principle of low complexity in digital healthcare systems in developing countries, which emphasizes the importance of a simple interface and a process that does not confuse users, so that services can reach more people effectively (Holst et al., 2020). The results of interviews with the community show that there are no obstacles while using the JSAS service, both from the service and during the ordering process, as the answer from one of the people who has used the service.

> *"No, so far there have been no obstacles at all, even the officers are very responsive and agile in serving. Usually, I just want to be delivered when the PSC will be immediately responsive and when the day is on standby according to the time I requested" (interview with Mrs. L)*

PSC 119 continues to strive to provide the best service for the community, although in the process, it still faces various obstacles, as conveyed by the head of PSC 119, Magelang City.

"When it comes to ease of access, I think it's quite easy for the public to access. They just need to contact our call center at wa number or 119. Even though we often get prank calls or stray numbers, there have even been officers who have been on standby at the scene but there is nothing there. In addition, the obstacles faced are also in the service, which is related to patient pick-up, sometimes if the patient is in a residential place in a densely populated area, so that the ambulance car cannot enter the alley that which causes a slightly longer response time" (interview Mr. S)

Despite facing various obstacles, PSC 119 Magelang City remains committed to improving the quality of services and finding the best solutions so that people can continue to get fast, safe, and optimal health services(Yanuar, 2019).

D. Observability

An innovation must be observable in whatever aspect it works and produce a better outcome (Sugiharto et al., n.d.). In this stage, it is to measure the real impact of JSAS that can be directly felt by the community, especially in terms of increasing the accessibility of health services. With this service, people who previously experienced difficulties in finding medical transportation have found it easier, this is proven by looking at JSAS service users at every turn.

Table 3. Number of JSAS Service Users in 2023-2024

No	Year	Number of Jsas Services
1	2023	1197
2	2024	1019

Source: Magelang City PSC 119 Data

The large number of requests each time proves that this service is highly sought after by the people of Magelang City. The sustainability and improvement of these services will further ensure that every citizen who has transportation constraints can obtain medical services faster, safely, and more conveniently(Ervianingsh et al., 2020).

The success of JSAS can also be measured through a survey of public satisfaction with this service. Data from the results of a survey conducted by PSC 119 shows that 86% of people are satisfied with using PSC 119 services. Based on direct observation in the field, the interaction between JSAS officers and patients shows a friendly, communicative attitude and upholds service ethics. Officers actively greet patients and families, explain procedures in easy-to-understand language, and uphold empathy, especially to elderly patients or those in weak condition. This humanist approach creates a sense of security and comfort for patients, while reflecting a good and professional quality of service (Li & Wang, 2024; Ervianingsh et al., 2020). This is also evidenced by the results of interviews that have been carried out, which prove that the public is very satisfied with the JSAS service.

"I am very satisfied with this service, the officers are kind and friendly and also when I was picked up there were health workers so I felt safe, even though my house was in an alley that could not be entered by the officer's car, the officer was immediately quick to bring a safe for my husband" (Interview with Mrs. T)

Another convenience that can be felt by the public with this service is that this service is available 24 hours for the community. This is to ensure that anyone who needs medical transportation can access it at any time, both day and night. To ensure that JSAS services run optimally for 24 hours, officers are divided into 3 guard shifts, so that there is always a team that is ready to be on standby throughout the day to provide medical services to the community.

Table 4. Shift Schedule of UPT PSC 119 Magelang City

Sift	Time	Sum

Morning Sit	07 : 00 WIB SD / 02 : 00 WIB	10 – 12 People
Afternoon Shift	02 : 00 WIB SD/ 21 : 00 WIB	6 – 7 Persons
Night Shift	21 : 00 WIB SD/ 07 : 00 WIB	5 – 6 People

Source: Magelang City PSC 119 Data

In the distribution of shift schedules, not all are the same, this is because the most service requests are made in the morning, in PSC 119 itself there are 32 officers consisting of the Head of UPT, Head of Sub-Division, Doctors, Midwives, Health Workers, Drivers and Call Centers.

E. Approachability

In this stage, affordability is not only related to physical distance, but also to how easily information about the service is accessed, as well as whether it is known and accepted by the community(Jonsson et al., 2022). According to this aspect of proximity includes cognitive and social dimensions, where health services must be recognizable, understood, and trusted by the community to be truly utilized optimally. The *Jemput sakit Antar sehat* is designed to be accessible to all levels of society without being constrained by information or communication.

To ensure broad public awareness, various outreach strategies have been implemented since the launch of the service. These include community meetings, counseling sessions at health centers, the use of social media platforms, and collaboration with healthcare workers in various medical facilities. This approach aims to raise public awareness about the existence, benefits, and procedures for accessing the *Jemput Sakit Antar Sehat* (JSAS) service when needed.

The results of community-based research regarding the existence of the Jemput Sakit Antar Sehat (JSAS) service indicate that some residents are not specifically aware of this service. Most only recognize PSC 119 in general, without a clear understanding of the JSAS component within it. Based on the interviews conducted, 4 out of 6 respondents reported learning about PSC 119 through healthcare workers at the facilities where they received treatment. Additionally, some others became aware of the service through neighbors who had previously used it. As stated by one community member during an interview:

> *"If the socialization is direct from PSC 119, I used to know this PSC service from officers at the health center. If you need transportation for treatment, you can use the PSC 119 service". (interview with Mrs. D)*

In addition, there is also one of the people who has been used to declare

> *"If it's related to JSAS, I don't know, I know the PSC 119 service, in the past, who provided information about my neighbors besides that from Mr. RT also told me about PSC 119 free health transportation" (interview with Mrs. E)*

But some already know this JSAS service because this service is a flagship program in the city of Magelang, so it is not surprising if they find out through writings in public areas in the city of Magelang.

F. Affordability

One of the main goals of JSAS is to ensure that these services can be enjoyed by all people, including those from lower economic groups. Therefore, JSAS services are provided free of charge for the people of Magelang, so that there are no cost constraints in getting safe and comfortable medical transportation (Nasution et al., 2024).

Based on interviews with community members, the level of satisfaction with the *Jemput Sakit Antar Sehat* (JSAS) service in Magelang City is notably high. One of the primary factors contributing to this satisfaction is that the service is provided free of charge, eliminating additional financial burdens for the public, particularly for economically vulnerable groups. This aspect of social alignment adds significant value to the JSAS service, as it addresses the needs of individuals who have long been hindered by financial limitations in accessing medical transportation. The funding for the JSAS program is fully sourced from the Magelang City Regional Revenue and Expenditure Budget (APBD), ensuring that all operational aspects, including staff salaries and facilities under the Public Safety Center (PSC) 119, are managed directly by the Magelang City Health Office. Therefore, this program reflects the local government's responsibility and commitment to ensuring equitable access to healthcare services for all segments of the population.

In addition to the financing aspect, the affordability of JSAS services is also reflected in the ease of the procedure for using them. The public only needs to contact the PSC 119 Unit through the WhatsApp

application to request services, without having to go through a complicated bureaucratic process. This process is considered very practical and responsive to the needs of residents in emergency and non-emergency situations. In addition, the geographical factor of Magelang City, which is relatively small and not too large, is also an advantage. With compact regional conditions, the PSC 119 Unit can reach all city areas more quickly and efficiently, thereby accelerating the response time in providing services. This further strengthens the public's positive perception of the effectiveness of JSAS services as an inclusive and accessible medical transportation solution (Hadi Prabowo, 2022).

G. Availability and Accommodation

In this case, it is ensured that the health services needed by the community are easily affordable and that their presence in the community is ready when needed (Adrianto, 2021). For JSAS services to be truly useful, the availability of the fleet and medical personnel is an important factor. PSC 119 Magelang City ensures that vehicles and officers are ready to stand by in the optimal time, so that services can be used whenever needed (Qiao et al., 2022). Based on direct observation in the field, the interaction between JSAS officers and patients shows a friendly, communicative, and upholding service ethic. Officers actively greet patients and families, explain procedures in easy-to-understand language, and show empathy, especially to elderly or frail patients. This kind of operational approach reflects the principles of improving access that place patients at the center of services, as described in the 12-step framework of improving access to health services by (Chen, 2024), which emphasizes the importance of user engagement, process transparency, and system readiness in responding to service needs quickly and efficiently.

In addition, the JSAS service system is also made flexible to accommodate various patient needs. For example, for patients with certain conditions that require special attention, the vehicle is equipped with supportive medical facilities. This flexibility allows JSAS to serve not only patients in emergencies but also those who need transportation for routine check-ups, health check-ups, or rehabilitation.

Currently, PSC 119 Magelang City has 6 units of ambulances and 2 units of motorcycles used to provide health services to the community. The available fleet includes various types, namely: 1 unit of JSAS Ambulance for Sick Pick-up services, 1 unit of Siamor Ambulance for the Elderly, 1 unit of Hearse for delivery of bodies, 2 units of Emergency Car to handle medical emergency cases, 1 unit of Operational Car for other supporting activities.

All ambulance units at PSC 119 can be used flexibly, which means they are not limited to just one specific type of service. Each service will be adjusted to the availability of the fleet to ensure that the public continues to get access to fast and appropriate medical transportation. However, in its implementation, the PSC 119 service sometimes faces obstacles, especially when there is a surge in demand for ambulances. Fleet limitations are often a challenge, especially when multiple requests come in at the same time, especially for emergencies.

In situations like this, patients who have signed up for non-emergency services may have to wait longer, as officers must prioritize handling emergency patients first. Nevertheless, PSC 119 continues to strive to provide the best service by optimizing the use of the available fleet so that all people continue to get access to the health services they need.

In addition, obstacles are also experienced related to existing human resources, the Head of PSC 119 revealed:

> *"If from a technical point of view this is related to the ambulance fleet first, yes, for the ambulance car that we have still lacks support, it is related to technicalities such as power steering, then the rear door is also open to the side, because ideally it opens up technically, maybe that's it, if the other is probably related to the limitation of human resources, this is also our challenge at PSC 119 because the average officer here is a freelance daily worker (THL), so if at any time they are accepted by PPPK or CPNS then they have to leave, while we cannot re-recruit THL". (Interview with Mr. S)*

Despite the existing challenges, PSC 119 continues to strive to provide the best service by optimizing the use of available fleets and personnel, ensuring that all residents continue to have access to the healthcare services they need. Compared to similar services in other regions, which are still limited to conventional referral systems without an active patient pick-up approach, the JSAS innovation in Magelang City demonstrates superiority in terms of responsiveness and service coverage (Wardana et al., 2023). This serves as an indicator that proactive approaches like JSAS can be an effective pre-hospital service model and are worth replicating in other regions.

CONCLUSION

The *Jemput Sakit Antar Sehat* (JSAS) service in Magelang City has proven to be an effective public service innovation in addressing the issue of healthcare accessibility, particularly for communities with mobility limitations and low socio-economic conditions. Based on Rogers' diffusion of innovation theory, JSAS offers a **relative advantage** by providing free, fast, and responsive medical transportation compared to conventional systems. The service also demonstrates a high level of **compatibility**, as it aligns with the needs, geographic conditions, and values of the Magelang community. In terms of **complexity**, JSAS is relatively low, as the service request mechanism is simple via a 119 call or WhatsApp. It also shows strong **observability**, as reflected in the growing number of users each year and the high level of public satisfaction with the service.

Meanwhile, according to Levesque's theory of healthcare accessibility, JSAS meets several key dimensions. In terms of **affordability**, the service is free of charge, fully subsidized by the local government budget (APBD). Regarding **availability and accommodation**, PSC 119 provides 24-hour services with a rotating shift system, ensuring continuous access. On the **approachability** dimension, service information is easy to access, and the program is delivered through a human-centered approach based on real needs in the field. Nevertheless, JSAS still faces challenges, such as limited ambulance fleets, human resources, many of whom are non-permanent staff, and low public awareness in certain areas. However, the commitment of PSC 119 and the support of local government policies serve as crucial assets for the sustainability and further development of this innovation. Therefore, JSAS stands as a promising model of accessible and inclusive healthcare innovation that can be replicated in other regions.

A. Suggestion

Based on the findings in the field, it is suggested that the local government together with PSC 119 service providers continue to develop and strengthen JSAS services by increasing the number of fleets and health workers to reach more people, expanding the reach of socialization so that information on this service is spread evenly, increasing the capacity and professionalism of officers through periodic training, optimizing the coordination system and the use of information technology for Accelerate service response, and conduct regular evaluations by involving input from the community to ensure sustainability and overall improvement of service quality.

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