



RESPONSIVENESS OF AMBULANCE MOBILIZATION SERVICES IN HANDLING ELDERLY EMERGENCIES AT THE MAGETAN PSTW UPT

Agus Suprpto¹, Sri Roekminiati², Widyawati³

¹ Faculty of Administrative Sciences, Universitas Dr. Soetomo Surabaya, Indonesia

² Faculty of Administrative Sciences, Universitas Dr. Soetomo Surabaya, Indonesia

³ Faculty of Administrative Sciences, Universitas Dr. Soetomo Surabaya, Indonesia

Email : agussuprptouptpstw@gmail.com

E-ISSN : 3109-9777

Received: September 2026

Accepted: September 2026

Published: Oktober 2026

Abstract :

The rapid growth of the elderly population demands the readiness of an adaptive and responsive social service system from the government. In social care settings, handling medical emergencies for the elderly requires ensuring a golden hour through responsive and measurable evacuation services. This study aims to examine and analyze the dynamics of ambulance mobilization services responsiveness in handling medical emergencies for the elderly at the UPT Panti Sosial Tresna Werdha (PSTW) Magetan. The research method used is qualitative with a descriptive analytical design. The research subjects were determined purposively, including ambulance drivers as key informants, and the Head of the UPT, accompanying nurses, and beneficiaries as supporting informants. Data collection was conducted through in-depth interviews, passive participatory observation, and logbook documentation studies. Data validity was tested using source and technique triangulation, while data analysis applied the interactive model of Miles, Huberman, and Saldaña. The results of the study indicate that ambulance mobilization services at the UPT PSTW Magetan have been running responsively and effectively. This responsive performance is supported by two main pillars. First, the consistent preventive fleet maintenance management carried out by the Mobilization Service Operator, including engine maintenance, electrical systems, siren function, and the availability of sterile oxygen, ensures the fleet is always in "Ready for Service" status. Second, the timely response time for medical evacuations to Dr. Sayidiman Regional Hospital averages 25 to 30 minutes, with a fleet preparation time of only 5 to 10 minutes after the report is received. Theoretically, these findings reflect the actualization of the New Public Service (NPS) paradigm and the role of ambulance drivers as street-level bureaucrats who use discretion positively, quickly, and humanely to prioritize the safety of vulnerable groups. This study recommends strengthening digital coordination channels with referral hospitals, Basic Life Support (BLS) training for drivers, and proposing a reserve fleet to mitigate emergency escalations.

Keywords : Service Responsiveness, Ambulance, Elderly Emergency, Street-Level Bureaucracy, New Public Service.

INTRODUCTION

The phenomenon of population aging has now transformed into a structural challenge and a key determinant of global and national public administration dynamics. A linear increase in life expectancy without a correspondingly adaptive social service system has the potential to trigger systemic vulnerability for the elderly, particularly those who are neglected or economically independent. (Patty, 2026) In the contemporary public service paradigm, the state is no longer legitimized merely as a passive and rigid



provider of facilities. Based on the principles of the New Public Service (NPS), the bureaucracy is required to be present proactively, humanely, and responsively to serve and protect the basic rights of the most vulnerable citizens. The effectiveness of governance in front-line agencies is no longer measured conventionally by budget absorption or the completeness of formal documents on the table, but rather by the extent to which all aspects of daily operations are able to move with high flexibility, sensitivity, and responsiveness to the dynamics of the real needs of the community at the grassroots level.(Sulfini et al., 2025).

In technical implementation units for social services, such as the Magetan UPT Panti Sosial Tresna Werdha (PSTW), the realization of bureaucratic responsiveness faces a very specific and crucial reality. The primary characteristics of beneficiaries in nursing homes are the majority of elderly people experiencing cognitive decline, physical limitations, and high levels of comorbid degenerative diseases.(Sa'adah et al., 2025)In this vulnerable ecosystem, medical emergencies such as sudden heart attacks, strokes, or physical injuries from falls pose a threat that can occur at any time, regardless of time. This critical situation demands the certainty of a golden hour, namely the use of very limited time to save lives or prevent fatal accidents through further medical treatment at health facilities outside the nursing home. Therefore, ambulance mobilization services within nursing homes are no longer viewed as secondary supporting transportation logistics facilities, but rather as lifesaving instruments that directly represent the presence of responsive state services in the midst of humanitarian emergencies.(Pratama et al., 2025).

The implementation of responsive ambulance services in the field is highly dependent on the role of Mobilization Service Operators or ambulance drivers as street-level bureaucrats. Based on Michael Lipsky's theoretical perspective, the success of a public policy is ultimately determined by the actions of front-line employees who interact directly with sociological realities on the ground. Nursing home ambulance drivers hold strategic positions that require extensive technical discretion within minutes, even seconds.(Agustini et al., 2024). They are not only required to possess driving skills, but also to make quick decisions on the road, choose the fastest alternative route to the referral hospital, and overcome psychological barriers when dealing with hysterical or uncooperative elderly people. Thus, the quality of public service in the responsiveness dimension, which includes indicators of speed of response time, clarity of handling flow, and full preparedness for action, rests on the competence and alertness of these front-line actors in translating formal nursing home Standard Operating Procedures (SOPs) into adaptive rescue actions.(Rhamadhani et al., 2022).

The empirical reality on the ground often reveals a wide gap between ideal operational regulations and the implementation of responsiveness at the ground level. Complexity arises when demands for speedy response are confronted with various internal and external organizational constraints. Internally, the responsiveness of ambulance services is heavily influenced by preventive

aspects, such as routine vehicle document checks, regular engine maintenance, and fleet technical condition checks to ensure ambulances are always on standby and do not experience technical problems when needed suddenly.(Anshori & Saleha, 2023). The scarcity of driver personnel who must be prepared in a 24-hour shift system and the limited number of proportional fleets often slow operational response times. Meanwhile, from the external side, the geographical characteristics of Magetan Regency, which has a hilly area and a fairly long travel distance to the main referral hospital, coupled with the constraints of dense road traffic, are external inhibiting variables that directly test the maximum limits of responsiveness of the mobilization service of the shelter.(Tasalim et al., 2025).

Research on the responsiveness of public services in the social sector, particularly in government-owned nursing homes, has so far been minimal and tends to focus on evaluating macro policies, data administration, or simply providing physical facilities. The novelty of this research lies in its in-depth analysis of the micro-operational role of the Mobilization Service Operator or ambulance driver, directly linking the effectiveness of daily vehicle preventive management measures to the success rate of emergency medical rescue operations in the field.(Haedar et al., 2025). Ignoring the analysis of this emergency mobilization aspect will bias the understanding of the quality of nursing home services and will not address the most basic needs of the elderly. Based on the urgency of this sociological and bureaucratic phenomenon, this study aims to objectively examine, measure, and describe the dynamics of ambulance mobilization services responsiveness in handling elderly emergencies at the Magetan PSTW UPT. The results of this study are expected to provide strategic contributions in the form of recommendations for improving SOPs for medical disaster mitigation, a fleet management model based on service readiness, and increasing the technical operational capacity of nursing home frontliners to be more responsive, humane, and sustainable.(Ramadhani et al., 2025).

RESEARCH METHOD

This study applies a qualitative approach with a descriptive analytical design to explore in-depth, holistic, and contextually the dynamics of service responsiveness in the emergency mobilization line at the Technical Implementation Unit of the Tresna Werdha Social Home (UPT PSTW) in Magetan, East Java. The choice of this descriptive qualitative method was deemed most appropriate because the researcher wanted to capture the sociological reality and actions of the street-level bureaucracy naturally without any variable manipulation. Through this design, the researcher captured how daily preparedness and discretionary space of ambulance drivers are implemented in dealing with critical situations of the elderly, which are then described into a logical, structured, and empirical scientific narrative. The locus of this research was deliberately determined (purposively) at the UPT PSTW Magetan considering the specific characteristics of its region and the urgency of handling neglected elderly in the area that demands a highly effective emergency

medical referral system outside the home.(Sofwatillah et al., 2022).

The determination of research subjects or informants in this qualitative study applies a purposive sampling technique, namely selecting individuals who directly experience, understand, and are actively involved in the research object so that the data obtained has a strong level of sociological validity. The key informant in this study is the Mobilization Service Operator or ambulance driver of the nursing home as the main actor implementing the daily vehicle technical as well as the executor of medical evacuation. To obtain a balanced and comprehensive perspective, the researcher also involved supporting informants (triangulated informants) consisting of the Head of the UPT PSTW Magetan as the operational policy maker, medical officers or nurses of the nursing home who accompany the elderly in the ambulance, and representatives of elderly residents of the nursing home (who still have good cognitive capacity) who have received the emergency mobilization referral service.(Lusia Kiareni et al., 2024).

The data sources used in this study are classified into two main groups: primary data and secondary data. Primary data collection was conducted directly in the field through in-depth interviews using semi-structured interview guidelines to explore discretionary space, roadblocks, and emergency coordination patterns. Researchers also conducted passive participant observation to directly observe the behavior of actors in the field, starting from the discipline of the vehicle completeness inspection process, routine engine maintenance, checking the physical condition of the ambulance fleet, to simulations of the speed of vehicle preparation when referral instructions are issued by leaders. Meanwhile, secondary data was obtained through a documentary study of the Standard Operating Procedure (SOP) document for medical referrals, a recapitulation of emergency response time data for the orphanage, and logbook records of daily activities assigned to transport beneficiaries recorded in the HRMS system.

All collected field data were then tested for validity (trustworthiness) using source triangulation and technical triangulation techniques. Source triangulation was conducted by comparing the results of ambulance driver interviews with the testimony of accompanying nurses and the perceptions of elderly beneficiaries, while technical triangulation was conducted by matching the interview results with physical evidence in vehicle maintenance records and evacuation logbooks. Finally, data analysis techniques were carried out interactively and continuously following the Miles, Huberman, and Saldaña model, which consists of three simultaneous activity flows. First, data condensation to summarize, select, and focus raw data from the field regarding the preventive and responsive aspects of vehicles. Second, data presentation (data display) by compiling a descriptive narrative supported by a matrix table of evacuation travel times from the shelter to the hospital. Third, conclusion drawing and verification to formulate essential meanings, identify patterns of obstacles, and produce applicable recommendations regarding responsiveness patterns for elderly-friendly and sustainable ambulance mobilization services.

FINDINGS AND DISCUSSION

The responsiveness of ambulance mobilization services at the UPT Panti Sosial Tresna Werdha (PSTW) Magetan is a concrete manifestation of the New Public Service (NPS) principle, which prioritizes the safety and comfort of beneficiaries. In front-line social service units, the effectiveness of handling medical emergencies for the elderly is not only determined by responsiveness during evacuations, but also depends heavily on the commitment of preventive and continuous fleet maintenance management. Ambulance drivers, as street-level bureaucrats, play a central role in maintaining the reliability of operational vehicles, ensuring they are always ready for service. Discipline in executing daily technical tasks is the main foundation that ensures that every emergency call can be responded to quickly, accurately, and without technical obstacles in the field.(Sa'adah et al., 2025).

As a preventative measure to ensure the reliability of vehicle functions, the Mobilization Service Operator consistently carries out a series of technical tests and routine maintenance of the ambulance fleet. These inspection activities include maintaining vital engine components, checking fuel availability, ensuring the completeness of vehicle legal documents (STNK), testing the electrical system and siren, as well as sterilizing the cabin space and the availability of basic medical facilities such as oxygen tanks. Comprehensive oversight of these technical and administrative aspects aims to minimize the risk of mechanical failure when the fleet is deployed in emergency conditions that require accelerated travel times. The implementation of these planned maintenance tasks and inspections of the fleet's condition are reflected in detail in the operational vehicle maintenance management log records of the Magetan PSTW UPT, as presented in Table 1 below.

Table 1: Preventive Maintenance Management Log for Operational Vehicles of UPT PSTW Magetan

No	Day / Date	Vehicle Type	Inspection & Maintenance Items	Readiness Status	Information
1	Tuesday, June 9, 2026	Ambulance (Toyota 2.0)	Checking the engine oil volume, filling the radiator with water, and testing the siren and rotating lights.	Ready for Duty	All electrical and mechanical systems are functioning normally, ready for emergency use.
2	Thursday,	Ambulance	Checking the	Ready for	Optimal tire

	June 18, 2026	(Toyota 2.0)	air pressure of all four tires, cleaning the patient's cabin (disinfecting the stretcher), and checking the oxygen tank.	Duty	pressure, sterile cabin cleanliness, fully charged medical oxygen.
3	Friday, June 19, 2026	Ambulance (Toyota 2.0)	Checking the fuel indicator (BBM), checking brake function, and cleaning the cabin AC filter.	Ready for Duty	The fuel is fully charged, the braking system is effective and safe.
4	Friday, June 19, 2026	Ambulance (Toyota 2.0)	Checking the battery water, checking the completeness of the vehicle documents (STNK), and replacing dim headlights.	Ready for Duty	The headlights have been replaced with new ones, with bright light for nighttime mobilization.
5	Tuesday, June 23, 2026	Ambulance (Toyota 2.0)	Checking the engine oil volume, filling the radiator with water, and testing the siren and rotating	Ready for Duty	All electrical and mechanical systems are functioning normally, ready for emergency use.

			lights.		
6	Thursday, June 25, 2026	Ambulance (Toyota 2.0)	Checking the air pressure of all four tires, cleaning the patient's cabin (disinfecting the stretcher), and checking the oxygen tank.	Ready for Duty	Optimal tire pressure, sterile cabin cleanliness, fully charged medical oxygen.

(Research source 2026)

Based on the preventive maintenance management log data for operational vehicles of the Magetan PSTW UPT in Table 1, it can be concluded that the maintenance activities of the Toyota 2.0 ambulance fleet have been carried out consistently, planned, and comprehensively by the Mobilization Service Operator. Maintenance that covers technical aspects of the engine, braking system, electrical, siren and rotator functions, to administrative completeness such as vehicle registration certificates and supporting medical facilities in the form of sterile oxygen cylinders, demonstrates a high preventive commitment in maintaining the fleet's status so that it is always at the "Ready for Service" level. This disciplined daily inspection reflects the application of the principle of reliability and early risk mitigation efforts against potential technical problems or breakdowns on the highway during emergency evacuations. Theoretically, the compliance of ambulance drivers in operating this routine maintenance emphasizes their role as street-level bureaucrats who do not merely carry out mechanical routines, but take real protective actions to guarantee the right to safety and comfort of elderly beneficiaries. The availability of a fleet that is always in prime and hygienic condition is the main foundation that enables the entire series of responsiveness of emergency mobilization services, starting from receiving instructions to delivery to the referral hospital, to be executed optimally, safely, and on time without significant operational obstacles.(Fitriyanti et al., 2026).

Table 2: Logbook of Response Time for Medical Evacuation of the Elderly at the Magetan PSTW UPT

No	Day/ Date	Initial Lansia	Emergen cy Report	Ambulance Departure	Arrival Time at	Total Resp	Destinatio n Health
----	--------------	-------------------	----------------------	------------------------	--------------------	---------------	------------------------

			Hours	Time	Health Facility	onse Time	Facility/Hospital
1	Tuesday, June 9, 2026	Grand pa D	11.00 WIB	11.10 WIB	11.25 WIB	25 Minutes	Dr. Sayidiman Regional Hospital
2	Thursday, June 18, 2026	Grand pa S	09.15 WIB	09.20 WIB	09.45 WIB	30 minutes	Dr. Sayidiman Regional Hospital
3	Friday, June 19, 2026	Grand pa M	08.15 WIB	08.20 WIB	08.45 WIB	30 minutes	Dr. Sayidiman Regional Hospital
4	Friday, June 19, 2026	Haryono	08.15 WIB	08.20 WIB	08.45 WIB	30 minutes	Dr. Sayidiman Regional Hospital
5	Tuesday, June 23, 2026	Grand pa SM	10.00 WIB	10:05 WIB	10:27 WIB	27 Minutes	Dr. Sayidiman Regional Hospital
6	Thursday, June 25, 2026	Grand pa SL	08.30 WIB	08.40 WIB	08.57 WIB	27 Minutes	Dr. Sayidiman Regional Hospital

(Research Source 2026)

Based on the medical evacuation response time logbook data in Table 2, it can be concluded that the ambulance mobilization service at the Magetan PSTW UPT demonstrates a very high and consistent level of responsiveness in handling health emergencies for beneficiaries. The results of recording six incidents of handling elderly people such as Mbah D, Mbah S, Mbah M, Haryono, Mbah SM, and Mbah SL show that the average total response time from the time the emergency report was received until it arrived at the main referral health facility (dr. Sayidiman Regional Hospital) ranged from 25 to 30 minutes. The speed of ambulance departure from the nursing home, which only required a preparation time of around 5 to 10 minutes after the report was received, demonstrates the high operational preparedness of the Mobilization Service Operator and accompanying medical team. This time efficiency is crucial considering the

characteristics of the beneficiaries, who are elderly people with high physical vulnerabilities who require certainty of the golden hour to prevent the risk of fatalities. The success in maintaining this fast response time is inseparable from the contribution of effective fleet preventative maintenance management which is carried out regularly, so that vehicles are always ready to use without experiencing technical problems during the trip. Theoretically, this response time achievement reflects the actualization of the responsiveness dimension of public service according to Zeithaml et al., where front-line officers do not simply comply with formal regulations, but actively demonstrate empathy and responsiveness without delay (procrastination). As street-level bureaucrats, ambulance drivers successfully utilize discretionary space on the highway to choose the most effective route to the hospital, so that minimum service standards in mitigating medical emergencies for the elderly can be met optimally, measurably, and sustainably. (Yunanto & Fitriyani, 2025).

CONCLUSION

Based on the research results, it can be concluded that the ambulance mobilization service at the Magetan PSTW UPT has been running responsively and effectively in handling medical emergencies for elderly beneficiaries. The success of this service responsiveness is supported by two main interlocking pillars, namely preventive fleet maintenance management by the Mobilization Service Operator who ensures that vehicles are always in "Ready for Service" status, and the achievement of an efficient response time ranging from 25 to 30 minutes to Dr. Sayidiman Regional General Hospital with a preparation time of only 5 to 10 minutes. The speed and accuracy of this action are vital in ensuring the certainty of the golden hour for elderly people experiencing critical situations. Theoretically, this achievement reflects the actualization of the New Public Service paradigm and the role of ambulance drivers as street-level bureaucrats who utilize discretionary space positively, quickly, and humanely to prioritize the safety of lives and fulfill the basic rights of vulnerable citizens in social institutions.

Suggestion

In order to maintain and improve the quality of responsiveness of ambulance mobilization services at the Magetan PSTW UPT, it is recommended that the agency strengthen Standard Operating Procedures (SOPs) through the integration of a digital coordination system with referral hospitals, facilitate first aid training (basic life support) for Mobilization Service Operators to increase the capacity for emergency medical treatment on the road, maintain discipline in recording fleet preventative maintenance logbooks, and propose the provision of a reserve fleet to mitigate the risk of escalation of medical emergencies that occur simultaneously within the institution.

REFERENCES

Agustini, NLPB, Dewi, NPAR, Israfil, I., Suyasa, IGPB, Putra, KAN, & Arnaya, IGPS (2024). Elderly Mobilization Technique Training for Caregivers in Long-Term Care:

- Improving Mobilization Knowledge and Skills. Ahmar Metakarya: Journal of Community Service, 4(1), 103–108. <https://doi.org/10.53770/amjpm.v4i1.330>
- Anshori, YT El, & Saleha, E. (2023). JIPAGS (Journal of Indonesian Public Administration and Governance Studies) IN BANYUMAS DISTRICT Implementation of Social Welfare Service Policy for The Elderly People in Banyumas Regency. 7, 21–30.
- Figo Syafatullah, A., & Haris, RA (2025). Improving the Quality of Services of the Technical Implementation Unit for Child Protection and Social Services in Sumenep. Proceedings of the National Seminar of the Faculty of Social and Political Sciences, 2(1), 96–108. <https://doi.org/10.24929/semnasfisip.v2i1.4063>
- Fitriyanti, I., Yunadi, A., Sujono, Rusny Istiqomah, & Ismiati, B. (2026). OPERATIONAL MANAGEMENT MODEL AND RESOURCES OF PHILANTHROPICAL AMBULANCE PROGRAM: A STRATEGIC STUDY IN LAZISMU BANTUL CITY. 25(8).
- Haedar, A., Aryanto, ZY, Ulfah, M., Wahyuni, S., Arlando, CI, Puspitasari, D., Manggala, EDP, & Arifin. (2025). Improving Ambulance Driver Knowledge Through Basic Ambulance Training. Indonesian Journal of Community Service, 6(1), 761–765.
- Lusia Kiareni, C., Sorisa, C., & Parhusip, J. (2024). Analysis of the Application of Sampling Distribution to Information Quality and Social Media User Satisfaction. Journal of Student Science Research, 2(6), 560–564. <https://doi.org/10.61722/jssr.v2i6.3004>
- Patty, S. Rukmana. (2026). ANALYSIS OF THE READINESS OF THE MUHAMMADIYAH KEEROM CHILD WELFARE INSTITUTION (LKSA) IN FACING ACCREDITATION. JOURNAL OF SOCIAL WELFARE SCIENCES “HUMANITAS” FISIP UNPAS, 8(1).
- Pratama, LME, Wardani, Y., & Lidya, H. (2025). Caregivers' Experiences of Geriatric Emergency Management for Older Adults Receiving Long-Term Care in Turi, Sleman. Florence Nightingale Journal of Nursing, 8(2), 316–325. <https://doi.org/10.52774/jkfn.v8i2.463>
- Purnomo, S., Friaresta, IH, Herawati, L., Wardiyanto, B., & Kurnia, JA (2026). Kanggo Riko's innovation in the new public service paradigm in Banyuwangi. Student Business Journal, 6(2), 762–779. <https://doi.org/10.60036/jbm.1081>
- Ramadhani, FB, Annisa, FF, Putri, MH, Dariz, L., Zaki, NL, Maharani, ND, Rohmani, S., Firmansyah, D., Algiyansyah, R., & Kurdi, F. (2025). DEDIKASI SAINTEK: Journal of Community Service Assistance for Hypertension Management through Hypertension Group Activity Therapy for the Elderly at the Tresna Werdha Social Home in Jember (Hypertension Management Assistance through Hypertension Group Activity. 4(3), 275–282.
- Rhamadhani, Dyah Ayu Nur, Hapsari, Oktavi Elok, & Rohman, F. (2022). DESIGN OF ELDERLY HOMES WITH A UNIVERSAL ARCHITECTURAL APPROACH IN MALANG. 1(2), 13–22.
- Sa'adah, N., Dewi, Sofia Rhosma, & Zulka, Ayesie Natasa. (2025). The Relationship Between Cognitive Function and the Risk of Falls in the Elderly at the UPT. Social Home for the Elderly (PSTW) Bondowoso. University of Indonesia, 6(4), 18371–18377.
- Saputri, R., Puspaningtyas, A., Hariyoko, Y., & Widodo, D. (2024). IMPLEMENTATION OF “UNIVERSAL HEALTH COVERAGE” POLICY

- USING THE STREET LEVEL BUREAUCRACY APPROACH IN GRESIK REGENCY. 2(02), 306–312.
- Sofwatillah, Jailani, M. Syahran, Risnita, & Saksitha, D.A. (2022). Quantitative and Qualitative Data Analysis Techniques in Scientific Research. *Genta Mulia Journal*, Volume 15, (P-ISSN 2301-6671 E-ISSN: 2580-6416), 79–91. <https://ejournal.stkipbbm.ac.id/index.php/gm>
- Sulfina, Anita, N., Ramadani, V., & Randy, Muh Fuad. (2025). GUIDANCE IN IMPROVING THE FREE PRIZE DRAW SERVICE MECHANISM (UGB) IN THE SOCIAL SERVICES OF SOUTH SULAWESI PROVINCE. 3(November), 2324–2329.
- Sutaji, Augustinah, F., & Pramudiana, ID (2025). Evaluation of the Service Quality of the Sambat Rene Ker Application in the Malang City Government in Increasing the Responsiveness of Online Public Complaints. *Journal of Education and Social Sciences (Jupendis)*, 3(1), 360–377. <https://doi.org/10.54066/jupendis.v3i1.2933>
- Tasalim, R., Setyawan Ridhani, B., Amaliah, M., Novia Rhamadayanti, R., Bulkis, S., Nursing Profession Study, P., Health, F., & Sari Mulia Banjarmasin, U. (2025). “Contrast Bath” Modality Therapy for the Elderly at the Budi Sejahtera Banjarbaru Social Protection and Rehabilitation Center for the Elderly. *JIMU: Multidisciplinary Scientific Journal*, 03(04), 547–551.
- Yunanto, MK, & Fitriyani, Y. (2025). Responsiveness of Public Services to Outpatient Service Users at Tempel II Community Health Center, Sleman Regency, Mohammad. *Indonesian Research Journal on Education*, 5(2), 797–806.