Original Research Article

Analysis of policy implementation of local public service agency in hospital

Shelvy Haria Roza*, Inge Angelia

Department of Public Health, Institute of Health Sciences Syedza Saintika, Padang, Indonesia

Received: 13 September 2018
Revised: 21 October 2018
Accepted: 23 October 2018

*Correspondence:
Dr. Shelvy Haria Roza,
E-mail: shelvyhr@gmail.com

ABSTRACT

Background: The level of public satisfaction with public hospital services is still quite low, with almost more than 50% complaining about the services it receives. The demand for hospital service quality, the government imposed the policy of local public service agency (LPSA) in the hospital. This study aimed to analyze the implementation of LPSA policy.

Methods: This research was a descriptive research with qualitative approach. This research was conducted in Dr Rasidin Hospital in Padang, during July to October 2017. Key informants were chosen by purposive sampling as many as five people who understand about LPSA policy. Data were collected through indept interview, document review, and observation. Qualitative data were analyzed by thematic analysis.

Results: The result of the research showed that the implementation of LPSA policy from policy standard has been run well, has a sufficient and adequate resources. Disposition of executives were positive in support of this policy to service activities. Communication has not spread evenly across all employees, only revolving around employees who directly handle the local public service agency. The bureaucratic structure was clear.

Conclusions: Implementation of public service agency policies has worked well in terms of the standard policy, disposition, resources, communications, bureaucratic structure.

Keywords: Policy implementation, Policy of local public service agency

INTRODUCTION

Public services in Indonesia still do not satisfy the public expectations, because almost more than 50% of public service users complain about the services it receives. This is because the red tape bureaucracy which is a convoluted procedure, long service time, expensive cost, still far from good governance principles, lack of information and agencies are difficult to find so the public area are neglected.

West Sumatera is one of the provinces that have a less satisfactory level of public service, as the hospital one of the institution that provide the services. Number of public complaints, especially those who were disappointed with the hospital service, in terms of quality, convenience and service, Health services provided by government hospitals are still considered low is caused by too complicated bureaucracy, lack of human resources support and difficulty in measuring performance and financial management systems for either public or private hospitals are less well-managed.

Based on Mayor's Decree No. 517/2015 RSUD Dr Rasidin Padang set up as a local public service agency with full status since November 2015. Changes in hospital status, by becoming a local public service agency (LPSA), hospitals are required to conduct performance appraisals to assess how services provided by the hospital...
to the community. In addition, as the policy of LPSA in RSUD Dr Rasidin Padang run, it requires comprehensive monitoring by external parties. It is useful to measure a program implementation to improve customer satisfaction and facilitate the hospital independence. Therefore, an in-depth study on the implementation of LPSA policy in RSUD Dr. Rasidin Padang is needed. This study aimed to analyze the implementation of LPSA policy in the hospital.

**METHODS**

This research was a descriptive research with qualitative approach. The study was conducted at dr Rasidin Hospital in Padang for 4 months (July-October 2017). Data were collected with in-depth interviews, observation, and documentation studies. Variables in this study are LPSA policy implementation with variables: resource, implementing organization characteristics, implemternt attitudes, communication between organizations (transmission, consistency, clarity). Data were collected with in-depth interviews, observation, and documentation studies. Qualitative data were collected by conducting in-depth interviews to key informants selected by purposive sampling. Key informants of this research was Dr Rasidin Padang Hospital focused on LPSA Committee Team such as director of hospital, accountant of hospital, commitment maker official of LPSA, head of medical service department, dan head of nursery department. Observations were done to staff in hospital in performing health services. Documentation study source at BLUD documents and policies at Rasidin Hospital Padang, operational standard procedures, strategic plans and hospital budget plans. The tools used to collect data in this study are form of interview guidelines, notebook, tape recorder and observation sheets. Technique for testing the validity of data was triangulation technique. Qualitative data was analyzed by thematic analysis.

**RESULTS**

**LPSA policy implementation in Dr Rasidin Hospital Padang resources**

There were adequate resources in managing LPSA in Dr Rasidin Hospital Padang, where the personnel involved were as many as 27 people. For managers of LPSA, leaders have divided main job and function in accordance with educational background, experience, and years of service. Hospitals have been working in improving the ability of the staff in understanding LPSA management with training. This was evidenced by the realization of training activities conducted in 2015 and 2016, as well as evidences of training certificates. This means, the hospital has been able to utilize the available human resources that can improve the quality of human resources. However, the knowledge about LPSA has not been comprehensive for all hospital staff, due to the lack of socialization of LPSA to all hospital staff.

**Table 1: The informants’ knowledge of LPSA policy implementation.**

| No | Information | Informant |
|----|-------------|-----------|
| 1  | "LPSA managers at hospital seems quite well and they have been trained, but there are some that have not been appropriate but until now there is still no significant obstacles." | (If-2) |
| 2  | Yes... hospitals annually regularly conduct training for LPSA management officers.. it is about financial accounting system, and financial management of LPS” | (If-1) |

Standard facilities that support the implementation of the LPSA policy refer to standard C type hospital facilities. In general, no special facilities are required in LPSA management. The LPSA system itself is a system that is integrated into the operational activities of the hospital. Here are the interviews with informants:

**Table 2: The informants’s about components resources of LPSA policy implementation.**

| No | Information | Informant |
|----|-------------|-----------|
| 1  | "So far, facilities are sufficiently supportive in the management of LPSAs in this hospital” | (If-5) |
| 2  | "The existence of LPSA can give us the independency to manage the necessary budget." | (If-5) |

Funds is resource in achieving successful policy implementation. Dr Rasidin Hospital Padang funds came from services, education, cooperation, and interest. Funds managed were in accordance with the plan prepared in providing the needs of the hospital. In financial management the hospital LPSAs provide flexibility in the use of funds, where hospitals can use the funds obtained and operational without complicated procedures.

**Policy standards**

The results of the study showed that dr Rasidin Hospital has complied the LPSA policy standards, by the existence of business strategic plan (BSP), budget business plan (BBP), and financial operational standard. Based on the results of the analysis, the implementation of governance patterns of Dr Rasidin Hospital Padang has been running well in accordance with Permendagri No 61/2007. Organizations and governance that was executed was in accordance with the needs of the organization, mission and strategy development, and the paradigm of organizational culture unit in Dr Rasidin Hospital Padang where the paradigm of making hospital independent. In addition, the organizational structure of the LPSA holder was explicit and in accordance with the vision, mission,
strategy and culture of the organization in Dr Rasidin Hospital Padang.

Supervision in LPSA management in Dr Rasidin Hospital Padang was not running well. This should be due to not having a supervisory board because according to the regulation of the supervisory board it is required for hospitals whose income more than 30 billion to have one, while Dr Rasidin Hospital income is still 25 billion / year. In accordance with article 43 of Permendagri 61/2007 which stated only LPSAs with a certain turnover or asset value may (not compulsory) have a Supervisory Board. However, the hospital kept its internal supervision in the presence of an ICU (internal control unit) which was conducted by an internal auditor based directly under the LPSA leader. Internal audit unit (SPI) has not been supported with adequate human resources competence to carry out supervision with a very wide scope, so its existence has not given optimal result in supervising the improvement of LPSA performance in Dr Rasidin Hospital.

Accounting system and LPSA financial statements in Dr Rasidin Hospital Padang have been in accordance with financial accounting standards (FAS) which based on Regulation of the Minister of Finance No. 76 / PMK.05 / 2008 and accounting guidelines general hospital service Board issued by the Directorate General of Medical Services Ministry of Health.

Information Clarity of information on policy standards has been well implemented to the level of the implementor. Information towards LPSA management. Where employees have a clear understanding of the policy standard, this information can be useful for the executor in carrying out the activity well. However, LPSA information has not spread evenly across all employees, only revolving around employees who handled the LPSA itself.

**Table 4: The informants’s about disposition of LPSA policy implementation.**

| No | Information                                                                 | Informant |
|----|-----------------------------------------------------------------------------|-----------|
| 1  | “We really support the management of LPSA, and hope to improve the performance of this hospital.” (if-5) |           |
| 2  | “So far it has been performing according to the task and authority given to me, although there are still many things to be fixed” (if-4) |           |

**Dispositional structure**

The LPSA policy implementer has a good attitude towards LPSA management. Where employees have a positive view of the implementation of LPSA policy in Dr Rasidin Hospital Padang. The LPSA policy implementer had the same perspective as the policy maker in which there were agreements between the policy maker and the policy implementer in executing the policy without leaving the set goals.

**Communication**

Clarity of information on policy standards has been well implemented to the level of the implementor. Information was delivered by the head of hospital directly to the hospital LPSA team. The head has transcribed the information clearly and comprehensively to the policy implementer, so this information can be useful for the executor in carrying out the activity well. However, LPSA information has not spread evenly across all employees, only revolving around employees who handled the LPSA itself.

**Table 5: The informants’s about bureaucratic structure of LPSA policy implementation.**

| No | Information                                                                 | Informant |
|----|-----------------------------------------------------------------------------|-----------|
| 1  | “The organizational structure of the LPSA management exists, the plot is clear. For the formulation of tasks are in accordance with the instructions of the leaders and with the involvement of other staff” (if-2) |           |
| 2  | “I work in accordance with the assigned duties and authorities, ie as accountant LPSA” (if-4) |           |

**DISCUSSION**

Policy as a series of proposed activities in a particular environment where there are constraints and opportunities on the implementation of such policy proposals in order to achieve certain objectives. To assess the success of the implementation activity in the
study it is assessed from five factors. These factors are policy standards, resources (staff, facilities, funding sources), organizational characteristics, organizational attitude, inter-organizational communication (transmission, consistency, clarity).  

The availability of resources is a key determinant factor in policy implementation. According to Edward III, the resources included are staff, facilities, and funds. Human resources, of course, greatly assist the organization in realizing the implementation of new policies within the organization. In this case, Dr. Rasidin Hospital had an adequate and appropriate human resources in managing the LPSA policy. This staffs determined the direction of the implementation of LPSA system in Dr. Rasidin Hospital Padang. Hospital have been able to utilize the available human resources optimally which can improve the quality of human resources. According to Rondonowu's research, each stage before implementing the policy requires the existence of qualified human resources in accordance with the work specified by the established policy. According to Roza research, the number and quality of human resources are very dependent on the workload and scope of work. The number and quality of staff are strongly influenced by their classifications and educational qualifications. 

The existence of facilities that support the implementation of the LPSA system in Dr. Rasidin Hospital where already integrated in hospital operations activities. The availability of facilities depends on the activities provided by the hospital, where the facility standard refers to the general standards issued by the public health service applicable to hospitals in general, such as minimum hospital service standards and hospital accreditation. The implementation of the LPSA policy in Dr. Rasidin Hospital Padang caused an increase in hospital income since its enactment in 2015. The tendency of increase in hospital income means there is an influence of policy implementation on the financial performance of the hospital. In addition, the implementation of the LPSA policy provides the hospitals in managing the finances, providing health services that meet the needs and health problems experienced by the hospital. The availability of health services are in accordance with the needs of the community that will accelerate the healing of patients that can ultimately lead to patient satisfaction on the quality of services provided.

Good attitude of policy implementor in running the LPSA management in Hospital where staffs really support this policy in operational activities run the policy as well as what the policy makers want. When implementors have different attitudes or perspectives with policy makers, the policy implementation process is also ineffective.

Clarity of information on policy standards has been well implemented to the level of the implementor. The Leader has transcribed the information clearly and comprehensively to the policy implementer, so that the transmission of information is clear. Insufficient communication to the implementers seriously influences policy implementation.

Coordination among implementers was already running well, with the implementers performing their tasks in accordance with the flow and process. However, in carrying out the activities of implementers were still experiencing obstacles and obstacles due to the absence of some clear procedure operational standard in carrying out activities such as financial accounting system guidelines. The success of a policy implementation is supported by a permanent procedure for policy actors in implementing the policy and the responsibility in implementing a policy in order to achieve the objectives with good coordination.

From the analysis on the financial performance, service, and quality and benefits for the hospital before and after the application of LPSA, it was seen that there were increase of budget, and the income of RSUD Dr. Rasidin Padang, and the increasing of hospital service performance, and the improvement of the quality and the benefit for the society. The results of this study were in line with Kusnadi's research that changes in hospital institutional status significantly proved to have an effect on service performance. Similarly, the Meidyawati study at the national stroke hospital that the implementation of the LPSA policy has provided increased income, and the independence of the hospital. The results of this study were in line with Roza’s research that Implementation of public service agency policies has an influence on the service performance, but less has an influence on the quality service.

**CONCLUSION**

The implementation of the policy of LPSA Dr. Rasidin Hospital Padang from the policy standard has met the technical requirements in the procedure, has adequate resources such as personnel, facilities, and funds. The implementing disposition has a positive attitude and supports this policy in service activities. Inter-organizational communications on the information of the LPSA have not spread evenly across all employees, but only revolve around the employees who handle the LPSA.


Funding: No funding sources  
Conflict of interest: None declared  
Ethical approval: The study was approved by the Institutional Ethics Committee

REFERENCES

1. Baedhowi, Revitalization Of Apparatus Resources In Order To Improve The Quality Of Public Services. J Ilmu Administrasi dan Organisasi, Bisnis dan Birokrasi. 2006;15:2.
2. Dwiyanto, Agus. Public Service Management: Caring, Inclusive and Collaborative. Yogyakarta: Gadjah Mada University Press, 2010.
3. ICW, Indonesian Corruption Watch Annual Report on Public Service Performance. ICW Jakarta. 2006.
4. Ombudsman. Report on Public Services in Padang City. 2008. Available at: www.ombudsman.go.id. Accessed on 4 July 2018.
5. Isbandoro. Customer Loyalty: Effect of Service Quality and Customer Satisfaction at Syaiful Anwar General Hospital Malang. Jurnal isjd.pdii.lipi.go.id.
6. Meidyawati. Analysis of PPK BLUD Implementation in Stroke Hospital in Bukittingi [thesis]. Padang; Andalas University; 2014.
7. Riyadi. Transformation Pattern of Regional Public Hospital: Changes in Form of Institution or financial management. Jurnal MARSII. 2005;5(4).
8. Ayuningtyas D. Political Analysis and Policy of DKI Jakarta Government Hospital Financing. Public Health J National Society. 2010;5:116-24.
9. Wasim I, Al Habil. The Administrative Ethics Between Professionalism And Individual Conscience. J Business Management Rev. 2011;1(10):43-5.
10. Widodo. Public policy analysis: Concepts and Applications Analysis of Public Policy Processes. Malang: Bayu Media. 2011.
11. Rahajaan T. Kajian Implementasi Penerapan Badan Layanan Umum di RSUP dr. Wahidin Sudirrusosodo Makassar. Jurnal Media Kesehatan Masyarakat Indonesia. FKM Universitas Hasanuddin. 2013.
12. Triprasetya AS. Analysis of the Preparedness of the Implementation of the Policy of the Regional Public Service Agency (BLUD) of the Puskesmas in Kulon Progo Regency. J Kebijakan Kesehatan Indonesia. 2014;3(3).
13. Rondonuwu J. Change Management In Government Agency: Case Study Of The Implementation Of PPK-BLUD Policy In NTB Provincial Mental Hospital. Jurnal Kebijakan Kesehatan Indonesia. 2013;2(4):163-70.
14. Roza SH. Analysis of the implementation of radiology equipment maintenance systems in dr M. Djamil Hospital. J Medika Sainitika. 2016;7(2):85-94.
15. Muninjaya AAG. Quality management of health services. Buku Kedokteran EGC: Jakarta. 2013
16. Duong DV, Binns CW, Lee AH, Hipgrave DB. Measuring Client-Perceived Quality Of Maternity Services In Rural Vietnam. Int J Quality Health Care. 2004;6:447-57.
17. Surianto. Evaluation of Policy Implementation of Regional Public Service Bodies at Undata Regional Hospital, Central Sulawesi Province. J Kebijakan Kesehatan. 2011;2(1):35-40.
18. Hardiyansyah. Quality of Public Services. Concepts, Dimensions, Indicators and Implementation. Yogyakarta: Gava Media. 2011: 196.
19. Kotter J. Leading Change Why Transformation Efforts Fail. Boston: Harvard Business Review Article. 2013.
20. Kusnadi D. The Influence of Policy Implementation From The Change of Institutional Status Toward Quality of Patient Service in Hospital. Int J Scientific Tech Res. 2015;4(10):159-64.
21. Roza SH. Analysis of the Implementation of Blud Policy on the Quality and Performance of Hospital Services. J Medika Sainitika. 2017;8(2):57-68.

Cite this article as: Roza SH, Angelia I. Analysis of policy implementation of local public service agency in hospital. Int J Community Med Public Health 2018;5:5036-40.