Academic Or Functional Skills? Using Enterpreneurship To Determine Students’ Output At Polytechnic Of Health-Ministry

Dedy Achmad Kurniady¹, Lilis Kholisoh Nuryani², Mulyanto Widodo³, Nano Sukmana⁴, Nia Daniati⁵, Aan Komariah⁶

¹, ⁶Universitas Pendidikan Indonesia  
²Universitas Galuh Ciamis  
³Universitas Lampung  
⁴Universitas Langlangbuana  
⁵Politeknik Kesehatan Tasikmalaya  
¹dedy_achmad@upi.edu, ²lilis.kholisohnurya70@gmail.com, ³mulyanto.widodo@gmail.com, ⁴nanosukmana@unla.ac.id, ⁵daniati1970@yahoo.com, ⁶aan_komariah@upi.edu

ABSTRACT
The purpose of this research is to reveal various theoretical foundations and their implementation in the field, including those related to the following, namely obtaining understanding and analyzing the implementation of life skill-based academic service quality management evaluation activities in the Department of Dental Nursing, Health Polytechnic of the Ministry of Health, Tasikmalaya and Bandung in improving quality of education. Based on the results of the study, it was found that the Quality Mode I Life Skill-Based Academic Service which was formulated based on the evaluation results using the CIPP model can improve entrepreneurial behavior of graduates of Higher Education Department of Dental Nursing, Health Polytechnic of the Ministry of Health, Tasikmalaya and Bandung. The model is designed based on a philosophical foundation that supports administration with an interdisciplinary theory to ensure that the model can solve the problem of the lack of entrepreneurial behavior in Dental Nursing Department graduates. The model is formulated based on rational arguments for the probability of success and the logical choice to apply the model with the best chance of achievement. The implementation model helps organize the academic service process better in an effort to achieve quality and output in the form of changes in entrepreneurial behavior that are indicated to be proactive, innovative, dare to take risks to be more effectively achieved.

Keywords: Entrepreneurship, students’ output, functional skills.

Article Received: 18 October 2020, Revised: 3 November 2020, Accepted: 24 December 2020

INTRODUCTION
The development of higher education quality in dental nursing is not only related to the workforce as part of a comprehensive health system but to the business world(Abernethy et al., 2009; Borders et al., 2015; de Oliveira et al., 2018). The interaction and integration of sub-functions that support the implementation of quality education needs to be examined in relation to the business world. The concepts put forward by researchers regarding life skills, quality of dental nursing higher education services are more focused on the world of work(Elhadd et al., 2007; Hashemian et al., 2019; Ivins & Jones, 2020; Jones et al., 2018; Sabalic & Schoener, 2017; Tucker, 2018). In line with previous research stated that entrepreneurship education programs are increasingly being developed and developed in an effort to equip students with the knowledge and competencies needed to create economic and employment value(Hadiyati, 2011). The assumption underlying the program is to create positive results for graduates entering the business world, however exploration of the results in the literature is still very low, especially for dental nursing, but there is still room where life skills are related to entrepreneurship. Various approaches are used to improve the delivery of health education such as education with services for the community(Hood, 2009), curriculum improvement (Manogue et al., 2011), practical problem-solving skills and up-to-date technical
skill (Ahmad & Ahmad, 2018), according to the needs of the population (Manogue et al., 2011), Counseling and communication skills (Dohmen et al., 2011; Newman et al., 2011; Schaltegger & Wagner, 2011), professionalism (Yoon et al., 2011), interprofessional and intraprofessional (Lee et al., 2015; Paletta et al., 2005; Peou & Zinn, 2015; Purgason et al., 2019; Sohn et al., 2003; Stahl et al., 2006), wider access (Lee et al., 2015; Pardo-Garcia & Barac, 2020; Ulum, 2020), and life skills both from the educational process and the outcomes (Nasheeda et al., 2019b, 2019a).

In this study, the authors offer a conceptual framework that is formulated based on the results of theoretical and empirical studies related to the implementation of life skill-based dental nursing education with a focus on the formation of entrepreneurial behavior. The model is developed based on empirical problems in the field related to competition in the world of work and business opportunities in the health sector. Problems were analyzed by evaluating the CIPP model as a comprehensive framework to help initiate, develop, implement, and program dental nursing education. Life skill-based dental nursing education as stated by WHO needs to be developed and oriented towards entrepreneurial activities (Organization, 2001). Ulum (2020) suggest that entrepreneurship-based life skills education programs are continuously being improved and strived to be better learning than before. Pardo-Garcia & Barac (2020) suggest the importance of entrepreneurial competence by applying problem-solving methodologies for innovation (Nadeem et al., 2020).

The model formulation was developed based on the results of a thorough evaluation with the CIPP model. So far, the evaluation of nursing programs is limited to surveys regarding customer satisfaction, curriculum and service quality. CIPP evaluation according to the context, such as the existence of difficulties in the world of work, the need for human resources in the business world, business opportunities in the nursing world that have not been optimized are still rarely done. Mirzazadeh et al. (2009) suggested that context evaluation is useful for planned program changes or having to adjust for changing conditions. The second component, input evaluation helps determine an appropriate program model to meet identified needs. Process evaluation provides formative information to guide revisions and adjustments while the planned program is underway (Purgason et al., 2019; Stahl et al., 2006). The final component of product evaluation provides valuable information for assessing program outcomes (Maria, 2020; Mehboob & Othman, 2020; Ahmad & Sahar, 2019). The general evaluation that is carried out is mostly on the final component and process while the context (the needs of the entrepreneurial world based on life skills are still weak). On this basis, the authors are interested in researching on “How to Evaluate the Quality Management of Dental Nursing Academic Services at the Health Polytechnic of the Ministry of Health, Tasikmalaya and Bandung” which can shape and lead to students’ life skills in higher education students in setting graduate quality standards and assist institutions in formulating institutional independence in formulating institutional independence. The implementation of life skills at the two Health Polytechnic of the Ministry of Health has not been focused on optimizing human resource needs in the entrepreneurial world.

In general, the research questions that will be answered in this study are as follows: 1) How is the quality profile of graduates viewed from the entrepreneurial aspect in JKG Health Polytechnic of the Ministry of Health, Tasikmalaya and Bandung; 2) What is the life skill-based academic service quality model to improve the entrepreneurial orientation of the JKG quality graduates from the Health Polytechnic of the Ministry of Health, Tasikmalaya and Bandung; and 3) How does life skill-based academic service quality model function to improve graduate quality entrepreneurial orientation. The purpose of this study is to reveal various theoretical foundations and their implementation in the field, including those related to the following, namely obtaining understanding and analyzing the
implementation of life skill-based academic service quality management evaluation activities in the Department of Dental Nursing Health Polytechnic of the Ministry of Health, Tasikmalaya and Bandung in improving quality of education. Specifically, the objectives of this study are to: 1) analyze the quality profile of graduates in terms of entrepreneurship in the JKG Health Polytechnic of the Ministry of Health of the Ministry of Health, Tasikmalaya and Bandung; 2) The formulation of a life skill-based academic service quality model to improve the entrepreneurial orientation of JKG students at the Health Polytechnic of the Ministry of Health, Tasikmalaya and Bandung; and 3) To analyze the function of life skill-based academic service quality model to improve the entrepreneurial orientation of JKG students at the Health Polytechnic of the Ministry of Health, Tasikmalaya and Bandung (Aram Hanna, 2020; Ahmad & Ahmad, 2019).

Practically the results of research on the implementation of life skills to improve the quality of educational academic services in the context of improving and developing higher education are expected to be utilized by various parties in the context of improving the quality of education. Furthermore, the results of this study can be used as input in order to overcome educational problems to improve the quality of JKG graduates from the Health Polytechnic of the Ministry of Health and improve the quality of JKG education for the graduates to prepare qualified Dental Health Associate Experts in the context of entering the era of globalization and free market, especially in ASEAN countries.

RESEARCH METHODOLOGY
Research Approach
The method used is a descriptive analytic study intended to obtain information about the status of symptoms at the time of the study. This descriptive-analytic study will focus on a case study of the evaluation of the quality of life-skill-based academic services in improving the entrepreneurial orientation of the quality of graduates in the JKG Health Polytechnic of the Ministry of Health of the Ministry of Health, West Java (Tasikmalaya and Bandung), this is considered eligible for samples or research data sources. The reason for choosing qualitative research is that researchers are more focused in gaining an in-depth understanding of the phenomenon of the entrepreneurial profile of students.

Research Location and Participants
The institutional level used as the data source is the academic community of Dental Nursing Health Polytechnic of the Ministry of Health of the Ministry of Health, Tasikmalaya and Bandung, which are considered relevant for the problems identified. Determination of case areas based on phenomena and research questions. Determination of the Institute for the Department of Dental Nursing Health Polytechnic of the Ministry of Health of the Ministry of Health, Tasikmalaya and Bandung. The case studied is to study the relevant problems, determined based on the mapping scale according to the research data needs. Data sources or informants The data sources in this study were selected by purposive sampling and snowball technique, according to the needs until the data is considered saturated.

Data Collecting Technique and Data Analysis Technique
Data obtained from various sources, using various data collection techniques (triangulation) continuously until the data is saturated. Systematically arrange the data obtained from interviews, field notes, and documentation, by organizing data into categories, breaking down into units, synthesizing, arranging into patterns, choosing which ones are important and what will be studied, and making conclusion so that it is easily understood by oneself and others. Researchers analyzed the data by compiling the data so that it could be interpreted. Organizing data means categorizing them into patterns, themes or categories. Without categorization or classification of data there will be chaos. Interpretation or interpretation means giving meaning to analysis, explaining patterns or
categories, looking for relationships between various concepts. Interpretation describes the perspective or views of the researcher, not the truth. Various ways that can be followed. There is no one specific way all qualitative research can hold. One way that can be recommended is to follow the following steps which are still very general in nature, namely: data reduction, data display, and drawing conclusions & verification (Creswell & Garrett, 2008).

RESULTS AND DISCUSSION
The quality profile of graduates is viewed from the entrepreneurial aspect of the dental nursing department at polytechnic of health-ministry

The results of observations of the learning process and study of documentation such as curriculum, quality objective indicators of dental nursing study programs, obtained an illustration that the values instilled lead students to become professionals in their fields. Students learn to master the basic skills of simple dental nursing care in a professional society. Students are more required to master planned dental and oral health services, both for the general public and for certain groups. Students learn to understand the sustainable implementation of dental care in the promotional, preventive and curative fields. Dental nursing learning process takes place in a curriculum that emphasizes professionalism. This was stated by DM that the main focus of curriculum design was in accordance with the Vision and Mission of the Health Polytechnic of the Ministry of Health, the Dental Nursing Study Program is more focused on producing professional graduates of dental nursing, besides that students are given moral responsibility including care for clients, empathy and with a feeling of compassion. Students as professional dental nurses who provide professional services to anyone. Students are required to have a high commitment to quality services according to professional standards of behavior and ethics (K.N.KKD.Dosen.DM.Bdg).

The same thing was stated by SKR that the learning process directs students to become professional graduates in the field of dental nursing, is also required to be able to take preventive and curative promotional actions for dental and oral health care services, graduates together with the community play an active role in encouraging people to have adequate levels of dental health (K. N. KKD.Dosen.DM.Bdg). The results of observations on the entrepreneurship learning process show that students learn to be entrepreneurial, for example making tools in dental medicine or doing joint business activities for tartar cleaning services. Students learn to offer a number of services such as scaling to the general public. Students first learn for skills related to dental care then are involved in dental service activities for the community, students are involved in standardized services in the tartar cleaning process, for example: 1) preparing the target position for tartar cleaning, (2) carrying out an examination with tools diagnostic set, (3) performs therapeutic communication of tartar cleaning, (4) performs tartar cleaning per quadrant, (5) polishes the entire tooth surface, (6) applies antiseptic solution, and (7) carries out instructions after tartar cleaning (K. N. KKD.Dosen. Cur.Bdg). Students are not only learning dental care skills. Students are given limited experience selling services to the community. Activities of students will provide knowledge about activities that can be done after graduation, namely offering dental health services to the community even though on a limited basis. DM argues that the learning process and practice of dental nursing services functions to provide an understanding of values such as a) more self-confidence, b) has a task and outcome orientation, c) has the courage to take risks, d) has a leadership spirit, and e) has orientation to the future both as a professional and entrepreneurial staff (Duckworth et al., 2007). This value reflects the basic beliefs of both students as prospective professionals and prospective dental service providers (K.N.KKD.Dosen. DM. Bdg).
Life skill-based academic service quality model in improving the quality entrepreneurship orientation of graduates of the dental nursing department health at polytechnic of health-ministry

The model is developed based on research results, validation of experts, promoters and practitioners as well as empirical dynamics in the field. Referring to the concept of educational administration, TN argues that the proposed model guarantees a more effective learning process (W. MML. L. Philosophy. 1. Lecturer. TN). The same thing was stated by SD that governance in the academic service system guarantees an academic service process in accordance with learning objectives (W. MML. L. Philosophy. 1. Lecturer. SD). The demands of the philosophical foundation were put forward by TN and SD as an important aspect to direct the model so that it can be critically improved and sustainable. The philosophical foundation provides the meaning given to ensure the achievement of the goals of life skill-based education services to raise the entrepreneurial profile to be clearer. The most important in the model is the development of the previous model, empirical models of academic services to improve entrepreneurship have a philosophical foundation, the development of a model departs from critical thinking about administrative systems in education management (W.MML.L. Filosofi.1. Expert. Adm.DD). It is further explained that the philosophical foundation used for model development can direct a way of thinking to develop a more critical model, improve existing and contextual models, most importantly encourage progress in the implementation of a dental life skill-based academic service system that is consistent, critical for improvement and sustainability.

The results of observations on the academic service system include the learning process in the classroom about entrepreneurship and field studies that have been running. Several business activities to encourage the interaction process between students and business practitioners, both related (dental nursing) and unrelated, such as the food bazaar in Tasikmalaya show that the entrepreneurial learning management system has been running. The same thing was stated by SD that the learning process uses a variety of approaches including providing hands-on learning experiences with business activities such as making a set of dental unit sarongs, making tampons, cotton rolls, and food bazaar practices. The aim is to introduce students to business activities.

The results of the FGD regarding the model and the problems faced in entrepreneurship learning revealed that the perceptions of both theorists and practitioners about the model basically showed the similarities in the explanation of the model. SD further explained that the life skill-based academic service model in the context of dental nursing can be understood as the design of learning services used to help visualize the achievement of learning objectives. The model is needed because the learning process requires a variable relationship plan to mathematically describe the management process of life skill-based academic service delivery. The same thing was stated by AK, in the discussion that basically the development of a model to improve a life skill-based academic service model to improve the quality entrepreneurial orientation of graduates of the Department of Dental Nursing (JKG) Health Polytechnic of the Ministry of Health of the Ministry of Health, Tasikmalaya as a work system design at the Prodi level or Health Polytechnic of the Ministry of Health to explain how the academic service system is based on life skills.

Basically, each institution has its own learning model to increase the entrepreneurial profile of graduates. The data shows that the entrepreneurial learning model in the Health Polytechnic of the Ministry of Health Tasikmalaya and Bandung is not much different. The two Health Polytechnics of the Ministry of Health introduce the business world through an experiential, albeit limited, social learning process. The purpose of designing the model is to
provide learning experience and development of individual potential not only in the world of work but in the business world. Model development focuses on increasing output in the form of increasing the ability of graduates to compete in the world of work and business. The results of the discussion show that there is an appropriate understanding of the model, it can be concluded that the academic service model is based on life skills as a representation of a learning administration system that represents real administrative practice. Therefore, in this system an accurate representation form as an actual process that allows the Dental Nursing Study Program to provide services based on a model. The design of the model is based on research findings on a model developed by the Health Polytechnic.

Figure 1. Traditional Versus Transformative HR

The function of life skill-based academic service quality models in improving the quality of graduate entrepreneurship orientation

The results of observations on the implementation of the model indicate a change in the academic service management system in the dental nursing study program. Several study programs focus more on encouraging the development of student interest in business activities in the dental nursing field. Activities in a model developed in accordance with the Vision are a description of the role of the institution in the future. Vision as a form of joint commitment to optimize the educational function of the Department of Dental Nursing Health Polytechnic of the Ministry of Health. The school’s vision is based on ethical values in order to produce professional Health Human Resources with the realization of professional students as the main focus of the school.

This was stated by one of the entrepreneurship lecturers that there was a change in the function of organizing entrepreneurship courses, there was an additional allocation of resources in the form of budget and facilities, some of the proposed programs were accepted with the support of the leadership, compared to before we as a team of lecturers became more enthusiastic because of this support. high enough for the development of student entrepreneurial concept and practical learning. At the Prodi level, the organizing function is relatively clear. This is based on the availability of information on resource ownership (budget), the opportunity to propose entrepreneurship learning programs, including the willingness of lecturers to help implement the proposed program. This was stated by the Secretary of the Dental Nursing Department, although the expected target was not too high, in general there were significant changes both from the input, especially student motivation in entrepreneurship learning and support for the process from the study program and the lecturers. Judging from the output of graduates in the entrepreneurship course there has been a change, the implementation of a life skill-based academic service model to improve entrepreneurship is more focused than before this model was
implemented, lecturers and students are more focused on growing, developing, improving 3 main characters, namely innovation, dare to take risks and proactively explore opportunities that can be used as economic resources for entrepreneurship.

Students feel that academic service activities are more practical with real business experiences. The students admitted that learning entrepreneurship was more practical with experience and interactions with several entrepreneurs such as alumni who were presented giving more detailed explanations about business. The same thing was stated by TN, one of the students who was very interested in exploring entrepreneurial activities both in the health sector and in other fields. TN said that the entrepreneurial learning process is more determined based on the orientation of the students, we are taught directly to actualize values that have economic value through innovation, apply economic values and innovation with creative behavior patterns and are real results-oriented, that’s why a program is proposed. by students and lecturers to be implemented.

According to DS, the process of organizing entrepreneurial learning is more effective. This is based on the conformity of perceptions between the lecturers and students and there are clearer goals related to the entrepreneurial orientation that the students want to impart. They have a clearer orientation related to learning objectives, the learning process is also directed according to the concept model previously stated, we have also received an explanation regarding the model that will implement the objectives of the academic service model more focus, students learn to know (learning to know) about entrepreneurship, to be able (learning to do), for one’s own life (learning to be) and learning to be able to work together (learning to live together) with other students to explore business opportunities. Students need to be given practical entrepreneurial knowledge in order to be creative in creating economic value, becoming entrepreneurs and being able to live in the community as entrepreneurs who can generate value.

The experience of applying a life skill-based academic service model increases understanding of the concepts needed as a framework for management to encourage entrepreneurship in students. Policy makers at the study program level are more aware of the importance of understanding the system mechanism and implementing the model. Various theories put forward and practiced such as academic service systems, systems theory in models and entrepreneurial theory to explain creativity and innovation, including the courage to take risks, are taught not only in business / economic activities. The learning process directs students to have an entrepreneurial spirit even though they work like they have innovation power and are proactive in encouraging changes in activities such as promotive, preventive and curative activities with technology or with limited resources.

**Discussion**

The quality of graduates in health tertiary institutions determines the quality of health life in the community and encourages competitiveness in the era of globalization. Actions to face global competition include expanding and increasing access to health quality education which encourages graduates to be ready for work and ready for entrepreneurship. Improving the quality of health higher education graduates is the main focus of higher education. The institution has serious concerns with implementing an education system that ensures quality according to its customers. Improving the quality of human resources for higher education includes aspects of intellectual, emotional, spiritual, creativity, moral and responsibility as well as other aspects comprehensively.

Efforts to improve the quality of higher education in health continue to be improved, including the development of a national curriculum in accordance with global demands and the development of a local curriculum. On a regular basis, the institution encourages
improvement of the competence and qualifications of lecturers either through training or education at a higher level according to qualifications. The institution expands the use of teaching materials and learning tools, encourages the procurement and improvement of educational facilities and infrastructure according to quality demands. The institution encourages the development and procurement of teaching materials through research, guarantees education funding policies and improves the quality of education.

Efforts to meet quality demands in accordance with the indicators of higher education quality have not shown significant improvement. The demands of the Ministry of Health's Strategic Plan (2015) related to the availability of health workers for health care, both preventive, curative and health promotion, are still lacking, including dental nursing. The output of graduates in terms of quality, quantity and distribution is still an obstacle to expanding access and improving the quality of health services. Efforts to improve health human resources and face the constraints of a shortage of health personnel both in Puskesmas and Hospitals depend on the ability of the Health Polytechnic of the Ministry of Health’s strategic plan (2015-2019) in the form of governance of Health Polytechnic of the Ministry of Health which has a more orientation, broad from just fulfilling the labor market to being globally oriented and broad. The fact is that the Health Polytechnic of the Ministry of Health has difficulty implementing and developing the process input and output of graduates due to various factors, especially resources.

The life skills education that is being held has not provided the basis and training to be carried out correctly regarding the values of life that are needed for the development of life in the real world and in the world of health. The implementation of life skills education varies with standards that do not meet public expectations and are less adapted to the conditions of students in their environment even though they have the same general principles. The abilities, abilities and skills required by graduates to carry out their profession are still lacking. Their skills do not cover all aspects of human behavior as a provision to carry out their lives. Faculties in the health care profession are required to be able to cultivate practitioner abilities, independence and be better equipped to use critical thinking and problem-solving skills to evaluate evidence and arrive at independent decision making (Bennet et al., 2006; Lincoln & Guba, 1985). The purpose of life skills education has not been followed by implementing real entrepreneurial programs such as business incubators. The program focuses more on education and training for skills, expertise and proficiency as well as professional values as a workforce. Life skill development does not come out of the general principles of life skill education (Roth & Lee, 2007). This development does not change the existing education system or curriculum. What is needed is an articulation of the curriculum to be oriented and integrated into the development of life skills, ethics-socio-religious.

Life skill education for students is integrated into the educational process, learning uses the principles of learning to know, learning to do, learning to be, and learning to live together. The implementation of life skill education in Nursing Health Polytechnic of the Ministry of Health of the Ministry of Health of Tasikmalaya has not optimized the potential of the surrounding area according to the principles of contextual education and broad-based education. Other findings explain that the governance of dental health service education must be up to date, appropriate for the purpose and relevant to the population it serves, no matter where the population is located, even in the world (Fallows & Steven, 2000; Gonzales et al., 2012). Implementation of dental nursing education in accordance with general health needs. Lee et al. (2015) and Peou & Zinn (2015) adds that the widening access to higher education and an increase in the education services sector have brought new opportunities and uncertainties for young people who transition to working life (Lestari, 2015). This condition is faced by
dental nursing graduates from the Health Polytechnic in West Java.

The paradigm of learning for life, school to work and entrepreneurialism has not been fully used as the basis for educational activities. The link between education and the real life of students, the implementation of education must always be directed so that students lead a healthy, quality life, gain broad knowledge and insight and have access to be able to fulfill their life properly (Dohmen et al., 2011; Fajar, 2002; Rusdiana, 2018). According to the Ministry of Trade (Kemendag) to encourage an increase in the number of entrepreneurs in Indonesia, until now, the entrepreneurship sector in Indonesia is far behind compared to other ASEAN countries (Hadiyati, 2011). The Head of the Ministry of Trade’s Public Relations Bureau said, based on the Entrepreneurship Global Index (2018) data, the entrepreneurship index in developed countries is 14% (Perdagangan et al., 2012). Meanwhile, the entrepreneurship index in Indonesia is only 3.1%, still below other ASEAN countries, namely Singapore, Malaysia, Thailand and the Philippines. Entrepreneurship directly plays an important role in contributing to economic growth, so efforts to encourage the creation of new entrepreneurs need to be done (Harper et al., 2019).

Efforts that can be made by the managers of the Tasikmalaya Ministry of Health Nursing Higher Education in developing and improving the quality of educational services so that graduates have adequate life skills. These efforts include 1) increasing cooperation with DU / DI for curriculum development according to community needs / DUDI, 2) expanding the range of student real work practices to increase student awareness of the importance of skills related to public health, 3) expanding cooperation in organizing job fairs, and 4) encourage entrepreneurship in students. Efforts to improve the quality of the Health Polytechnic of the Ministry of Health in Dental Nursing include developing national and local curricula, developing and upgrading lecturers’ qualifications through education and training, increasing access to teaching resources through procurement of books and learning tools, improving educational facilities and infrastructure, improving policies education funding and improving the quality of public higher education in the health sector. Mirzazadeh et al. (2009) added that the psychomotor domain includes learning technical skills, the affective domain includes empathy and behavior management, namely ‘heart’; and the cognitive domain including students’ critical thinking about themselves and their environment.

CONCLUSIONS AND SUGGESTIONS

Conclusions

Based on the results of the study, it was found that the Quality Mode I Life Skill-Based Academic Service which was formulated based on the evaluation results using the CIPP model can improve the entrepreneurial behavior of Higher Education graduates of the Department of Dental Nursing Health Polytechnic of the Ministry of Health, Tasikmalaya and Bandung. The profile of the quality of graduates in terms of entrepreneurship is still low, the values that show character such as being brave to take risks have not become a common characteristic, the profile shows more participants as graduates who are ready to work independently. Model design as a system that has the aim of improving entrepreneurial behavior. The model is designed based on a philosophical foundation that supports administration with an interdisciplinary theory to ensure that the model can solve the problem of lack of entrepreneurial behavior in Health Polytechnic of the Ministry of Health graduates of the Department of Dental Nursing. The model is formulated based on rational arguments for the probability of success and the logical choice to apply the model with the best chance of achievement. The assumptions underlying the model are cooperation and administrative principles for the management system.
REFERENCES

[1] Abernethy, A. P., Herndon II, J. E., Wheeler, J. L., Day, J. M., Hood, L., Patwardhan, M., Shaw, H., & Lycerl, H. K. (2009). Feasibility and acceptability to patients of a longitudinal system for evaluating cancer-related symptoms and quality of life: pilot study of an e/Tablet data-collection system in academic oncology. Journal of Pain and Symptom Management, 37(6), 1027–1038.

[2] Ahmad I, Ahmad S. Multiple Skills and Medium Enterprises’ Performance in Punjab Pakistan: A Pilot Study. Journal of Social Sciences Research. 2018; Special, (4):44-9.

[3] Ahmad I, Ahmad S. The Mediation Effect Of Strategic Planning On The Relationship Between Business Skills And Firm's Performance: Evidence From Medium Enterprises in Punjab, Pakistan. Opcion. 2019;35(24):746-78.

[4] Ahmad, I., Sahar. Waste Management Analysis From Economic Environment Sustainability Perspective. International Journal Of Scientific & Technology Research. 2019; 8(12), 1540-1543.

[5] Aram Hanna, M. (2020). The Vital Role of Pink Marketing in the Creation of Women Loyalty. International Journal of Social Sciences and Economic Review, 2(3), 28-37. doi:10.36923/ijsser.v2i3.74

[6] Bennet, L., Roelfsema, V., Pathipati, P., Quaedackers, J. S., & Gunn, A. J. (2006). Relationship between evolving epileptiform activity and delayed loss of mitochondrial activity after asphyxia measured by near infrared spectroscopy in preterm fetal sheep. The Journal of Physiology, 572(1), 141–154.

[7] Borders, L. D., Brown, J. B., & Purgason, L. L. (2015). Triadic supervision with practicum and internship counseling students: A peer supervision approach. The Clinical Supervisor, 34(2), 232–248.

[8] Creswell, J. W., & Garrett, A. L. (2008). The “movement” of mixed methods research and the role of educators. South African Journal of Education, 28(3), 321–333.

[9] Dang, S., Feng, S., Tien, J., Peters, C. J., Bulkley, D., Lolicato, M., Zhao, J., Zuberbühler, K., Ye, W., & Qi, L. (2017). Cryo-EM structures of the TMEM16A calcium-activated chloride channel. Nature, 552(7685), 426–429.

[10] de Oliveira, V. F., Bittencourt, M. F., Pinto, Í. F. N., Lucchetti, A. L. G., da Silva Ezequiel, O., & Lucchetti, G. (2018). Comparison of the Readiness for Interprofessional Learning and the rate of contact among students from nine different healthcare courses. Nurse Education Today, 63, 64–68.

[11] Dohmen, T., Falk, A., Huffman, D., Sunde, U., Schupp, J., & Wagner, G. G. (2011). Individual risk attitudes: Measurement, determinants, and behavioral consequences. Journal of the European Economic Association, 9(3), 522–550.

[12] Duckworth, A. L., Peterson, C., Matthews, M. D., & Kelly, D. R. (2007). Grit: perseverance and passion for long-term goals. Journal of Personality and Social Psychology, 92(6), 1087.

[13] Duval-Couetil, N., & Wheadon, J. (2013). The value of entrepreneurship to recent engineering graduates: A qualitative perspective. 2013 IEEE Frontiers in Education Conference (FIE), 114–120.

[14] Duval-Couetil, N. (2013). Assessing the impact of entrepreneurship education programs: Challenges and approaches. Journal of Small Business Management, 51(3), 394–409.

[15] Elhadd, T. A., Al-Amoudi, A. A., & Alzahrani, A. S. (2007). Epidemiology, clinical and complications profile of diabetes in Saudi Arabia: a review. Annals of Saudi Medicine, 27(4), 241–250.

[16] Fajar, M. (2002). Kata Pengantar School-Based Management (Manajemen Berbasis Sekolah). Jakarta: Logos Wacana Ilmu.

[17] Fallows, S., & Steven, C. (2000). Building employability skills into the higher education curriculum: a university- wide initiative. Education+ Training.

[18] Gonzales, C. H., Leroy, G., & De Leo, G. (2012). Augmentative and alternative communication technologies. In Computer engineering: Concepts, methodologies, tools and applications (pp. 1164–1180). IGI Global.
[19] Hadiyati, E. (2011). Kreativitas dan inovasi berpengaruh terhadap kewirausahaan usaha kecil. Jurnal Manajemen Dan Kewirausahaan, 13(1), 8–16.

[20] Harper, N. J., Mott, A. J., & Obee, P. (2019). Client perspectives on wilderness therapy as a component of adolescent residential treatment for problematic substance use and mental health issues. Children and Youth Services Review, 105, 104450.

[21] Hashemian, F., Farzian, M., & Bakhshaei, M. H. (2019). Evaluation of prevalence, distribution and types of drug errors reported in Besat Medical Center of Hamadan during 2014-2015. Medical Science, 29(3).

[22] Hood, J. G. (2009). Service learning in dental education: meeting needs and challenges. Journal of Dental Education, 73(4), 454–463.

[23] Ivins, N., & Jones, N. (2020). Two-layer reduced compression system for lower limb wounds: a non-comparative evaluation. British Journal of Community Nursing, 25(Sup4), S10–S16.

[24] Jones, N. J., Ivins, N., Ebden, V., Hagelstein, S., & Harding, K. G. (2018). Neuromuscular electrostimulation on lower limb wounds. British Journal of Nursing, 27(20), S16–S21.

[25] Lee, H., Kiang, P., Kim, M., Semino-Asaro, S., Colten, M. E., Tang, S. S., Chea, P., Peou, S., & Grigg-Saito, D. C. (2015). Using qualitative methods to develop a contextually tailored instrument: Lessons learned. Asia-Pacific Journal of Oncology Nursing, 2(3), 192.

[26] Lestari, K. E. (2015). Analisis kemampuan pembuktian matematis mahasiswa menggunakan pendekatan induktif-deduktif pada mata kuliah analisis real. MENDIDIK: Jurnal Kajian Pendidikan Dan Pengajaran, 1(2), 128–135.

[27] Lincoln, Y. G., & Guba, E. (1985). E. 1985. Naturalistic Inquiry. London, Sage Publications. Contextualization: Evidence from Distributed Teams.” Information Systems Research, 16(1), 9–27.

[28] Maria, A. (2020). Construction of an Industry Cycle Indicator for Profitability Prediction Analysis of Aggregate Firms in Bangladesh. International Journal of Social Sciences and Economic Review, 2(4), 9-18. doi:10.36932/ijsser.v2i4.76

[29] Mehboob, F., & Othman, N. (2020). Examining the Links Leading to Behavioral Support for Change: An Expectancy Theory Perspective. International Journal of Social Sciences and Economic Review, 2(4), 1-8. doi:10.36923/ijsser.v2i4.78

[30] Mirzazadeh, A., Sadeghirad, B., HAGHDOST, A. A., Bahreyni, F., & Rezazadeh, K. M. (2009). The prevalence of obesity in Iran in recent decade; a systematic review and meta-analysis study.

[31] Nadeem, M. A., Qamar, M. A. J., Nazir, M. S., Ahmad, I., Timoshin, A., & Shehzad, K. (2020). How Investors Attitudes Shape Stock Market Participation in the Presence of Financial Self-Efficacy. Frontiers in Psychology, 11(2286), 1-10. doi:10.3389/fpsyg.2020.553351.

[32] Nasheeda, A., Abdullah, H. B., Krauss, S. E., & Ahmed, N. B. (2019a). A narrative systematic review of life skills education: effectiveness, research gaps and priorities. International Journal of Adolescence and Youth, 24(3), 362–379.

[33] Nasheeda, A., Abdullah, H. B., Krauss, S. E., & Ahmed, N. B. (2019b). Transforming transcripts into stories: A multimethod approach to narrative analysis. International Journal of Qualitative Methods, 18, 1609406919856797.

[34] Newman, L., Wagner, M., Knokey, A.-M., Marder, C., Nagle, K., Shaver, D., & Wei, X. (2011). The Post-High School Outcomes of Young Adults with Disabilities up to 8 Years after High School: A Report from the National Longitudinal Transition Study-2 (NLTS2). NCSER 2011-3005. National Center for Special Education Research.

[35] Organization, W. H. (2001). The World Health Report 2001: Mental health: new understanding, new hope. World Health Organization.

[36] Paletta, L., Fritz, G., & Seifert, C. (2005). Q-learning of sequential attention for visual object recognition from informative local descriptors. Proceedings of the 22nd
International Conference on Machine Learning, 649–656.

[37] Pardo-Garcia, C., & Barac, M. (2020). Promoting Employability in Higher Education: A Case Study on Boosting Entrepreneurship Skills. Sustainability, 12(10), 4004.

[38] Peou, C., & Zinn, J. (2015). Cambodian youth managing expectations and uncertainties of the life course—a typology of biographical management. Journal of Youth Studies, 18(6), 726–742.

[39] Perdagangan, M., Nomor, N. R. I., Nomor, U., & Dunia, P. (2012). Peraturan menteri perdagangan Republik Indonesia. Indonesia.

[40] Purgason, L. L., Boyles, J., & Greene, C. (2019). Teaching Technology and Tolerance in Tandem: Culturally Responsive Classroom Guidance Interventions. Journal of School Counseling, 17(23), n23.

[41] Roth, W.-M., & Lee, Y.-J. (2007). “Vygotsky’s neglected legacy”: Cultural-historical activity theory. Review of Educational Research, 77(2), 186–232.

[42] Rusdiana, A. (2018). Kewirausahaan: Teori dan Praktek. Pustaka Setia.

[43] Sabalic, M., & Schoener, J. D. (2017). Virtual reality-based technologies in dental medicine: knowledge, attitudes and practice among students and practitioners. Technology, Knowledge and Learning, 22(2), 199–207.

[44] Schaltegger, S., & Wagner, M. (2011). Sustainable entrepreneurship and sustainability innovation: categories and interactions. Business Strategy and the Environment, 20(4), 222–237.

[45] Smith, A. J., Moretti, A. J., Brame, J., & Wilder, R. S. (2019). Knowledge, attitudes and behaviours of patients regarding interdental deplaquing devices: A mixed- methods study. International Journal of Dental Hygiene, 17(4), 369–380.

[46] Sohn, H., Farrar, C. R., Hemez, F. M., Shunk, D. D., Stinemates, D. W., Nadler, B. R., & Czarnecki, J. J. (2003). A review of structural health monitoring literature: 1996–2001. Los Alamos National Laboratory, USA, 1.

[47] Stahl, T., Voelter, M., & Czarnecki, K. (2006). Model-driven software development: technology, engineering, management. John Wiley & Sons, Inc.