QUALITATIVE STUDY OF INPATIENT MANAGEMENT IN IMPROVING SERVICE QUALITY AT RSUD TRIKORA SALAKAN INDONESIA

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ABSTRACT

Background: *The implementation of the management function requires the competence of the head of the room as the main manager in the inpatient room to improve the quality of service in the hospital.*

Objective: *This research aimed to know the management competence of inpatient room heads in improving service quality at Trikora Salakan General Hospital.*

Method: *The research method was descriptive with a qualitative approach, with did a deep interview to head of nursing medical and head of the room in improving the quality of service.*

Result: *The result of the research showed that the management competence of the head of the room at Trikora Salakan Hospital was still not optimal, this was influence by the management competence of the head of the room in making room planning, organizing, implementing, and evaluating so that the head of the room needed to improve and maintain his role as head of the room so that the implementation of management competence in the inpatient room was still carried out by both by management standards.*

Conclusion: *Planning competence, some of the heads of the room who do not know about the hospital development plan, no one arranges planning in the room by looking at the strategic plan of the hospital-based only on the needs of the room.*

INTRODUCTION

The quality of service in the hospital can be improved and the service can run properly, if in carrying out its operations, using professional management. Professionally applied management requires proper planning, implementation, supervision, and control and can be coordinated throughout the activities in the hospital to achieve the goals of the hospital itself (Sumartyawati, 2018).

The leadership of the head of the room has an important role in the implementation of the quality management system in the room because the head of the room has a responsibility in managing, planning, and controlling the performance of his staff. So that in overcoming the problem of quality management, it can be handled with quality leadership of the head of the room who cares about the quality of service (Mulat & Hartaty, 2019).

The implementation of management functions requires the competence and performance of the head of the room as a line manager, as well as determinants of performance. Competence is an ability to carry out or perform a job or task based on skills and knowledge supported by the attitude of work demanded by the job (Mulat & Hartaty, 2019).

Trikora Regional General Hospital is a Public Hospital owned by the Government of Banggai Islands Regency which belongs to the category of type C which has the task of assisting the Regent in the implementation of the Regency government in the field of hospital services.

Based on the initial interview conducted by the author on Friday, May 18, 2020, with the head of nursing at Trikora Salakan Hospital according to him there is still much that needs to be improved against improving the quality of the hospital as evidenced by the hospital's medical record data showing that (BOR) in Trikora Hospital is 17.07%, BTO 40.78 times, TOI 5.29 days, while the ALOS is 2.20 days. In 2018 the amount of BOR was 25.17%, BTO 58.77 times, TOI 3.03 days, while ALOS was 2.70 days. As for 2019 the amount of BOR is 32.11%, BTO 42.69 times, TOI 5.20 days, while ALOS is 2.49 days. From the data, we can conclude that from 20017 - 2019 there is an increase in data from BOR, BTO, TOI, and ALOS but although there is an increase this is still far from the standard, therefore there needs to be an increase again.

According to the head of nursing, Trikora Salakan Hospital said that until the end of 2018 yesterday, the results of the evaluation of the performance of the head of the room showed that there had not been an optimal role and function and the description of the head of the room's duties. If viewed from the history of training followed some room heads have participated in ward management training, while when viewed from the military

aspect of each room has had enough energy for the implementation of nursing practice.

METHODS

The method in this research is a qualitative study. Qualitative research is research intended to express symptoms holistically-contextually through the collection of data from natural backgrounds by utilizing the researcher's self as a key instrument.

Sources of information or Respondents in this study are 8 Heads of Inpatient Rooms and Head of Nursing of Trikora Salakan Regional General Hospital. Designated as respondents because they are the ones who are considered by researchers to be able to provide information regarding the management competence of the head of the inpatient room.

The data needed in the preparation of the results of this study is distinguished from two types, namely primary data or principal data is data obtained by the author by plunging directly into the research object in this case conducting interviews and secondary data that is a support for primary data. The secondary data was obtained through the results of scientific work, articles, documents from Trikora Salakan Hospital of Banggai Islands Regency related to management competence (data obtained by the researchers, as well as several journal reviews that support theories in this study.

In data collection techniques, to obtain complete, accurate, and accountable data to its scientific, researchers use data collection including in-depth interviews, observations, and documentation.

RESULTS

Planning, from the results of qualitative data analysis on the competence of nursing medical head planning as a key informant that everything planning in each inpatient room is based on planning from the head of the room only there are some planning made from the director of human resources planning, for now, is sufficient but in the future for the addition of space is still needed again for the addition of human resources.

"The usual planning was me as the head of nursing medical telling the head of the room to write whatever is needed in the room, I think they know better and after that, if we have just met which admin part must be met because we see also the hospital budget is true in this hospital is still limited let alone medical devices but we will continue to work to develop this hospital" (DS, 37 years old, Informant 1).

This can be seen also with statements from ordinary informants about that some of the heads of the room who know about the Hospital development plan, no one arranges planning in the room by looking at the Hospital Plan only based on the needs of the room, most of the head of the room does not use supporting data in making planning, most of the head of the room has an orientation that

the scope of planning only includes planning the material. is wear, and most of the head of the room rarely conducts coordination meetings with his staff.

"We are here planning only based on the needs of the room if the Hospital strategy plan exists but drafting the planning only looks at the needs in the room" (IN, 28 years old, Informant 5).

"For supporting data I have never done if I take data maybe because it is what is seen from the needs of the room so that's all that is passed on so if to take data from other hospitals or what it has never been done" (IT, 31 years old, Informant 2).

"We made a list in the form of a table for planning this room so we put together for example the consumables monthly and the tool once a year. For the monthly, it is also like office stationery and room cleanliness" (UM, 33 years old, Informant 3).

Organizing, from the results of qualitative data analysis on the competence of organizing statements from key informants that they always run the organizational structure with their respective auth and each hospital unit room has an organizational structure to know what they are doing in addition to the selection of the head of the unit room they see who is competent in their respective fields.

"If the organization is more into the organizational structure, we in this room certainly have an organizational structure and auth so that we know what we do so in the other room I tell the entire head of the room to keep making organizational instructions with their auth to clarify what they do if for the selection of the head of the

room, of course, we see the competition and have good skills" (DS, 37 years old, Informant 1).*

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This can be seen also with the usual informant statement most of the head of the room does not run a set organizational structure and there is also the head of the room who do not have an organizational structure in the room, most of the head of the room only uses the method of assignment through direct appointment, there are some heads of the room who have not done proper elaboration, almost all the heads of the room do not do linen reporting systems only record medical devices, The entire head of the room does good and correct drug management, and the entire head of the room does the patient handover well.

"If in the room here does not run sometimes doubles other work and here I do not arrange the organizational structure" (DW, 36 years old, Informant 4).

"The method of assignment well adjust it to the ability of the child who is in service then that is responsible with the patient I see from the ability of the child" (UM, 33 years old, Informant 3).

"The study is equal. They are responsible according to their respective shifts" (DW, 36 years old, Informant 4).

"If for linen I do not do reporting if the problem of medical devices we do have an inventory list of tools that are indeed every year from the medical device team that comes to check the room whether it is still complete or there is less" (IT, 31 years old, Informant 2).

"Furthermore, for the briefing, we always direct the head of the room and other staff to always work well to support patient satisfaction usually this through coordination meetings well here we see the performance of the heads of any room that is still an obstacle, besides that we usually provide training both technical guidance, as well as other training related to the field of service" (DS, 37 years old, Informant 1).

This can be seen by the usual informant's statement that the entire head of the room does not hold regular meetings consistently, some room heads rarely do in the ethical coaching carried out by the head of the room, as the head of the room rarely conducts guidance on his staff, and most of the head of the room has been supervised properly.

"If regular meetings are rarely held in this room because it is usually not too important so I only convey in the group later they see the information" (DW, 36 years old, Informant 4).

"Nothing, this is also because I see they are good so rarely do I do" (DW, 36 years old, Informant 4).

"Supervision sometimes I do sometimes also at least I see the evaluation of their performance" (DE, 33 years old. Informant 8).

Evaluation, from the results of qualitative data analysis on the implementation variables of statements from key informants that in its implementation the head of nursing medical conducted a coordination meeting to evaluate the results of the performance of the head of the room that became an obstacle, and usually they went down directly to see the activities in the room, besides that if there are staff making mistakes they usually get a direct report from the head of the room but this rarely happens.

"The last one is for an evaluation like before that I said that we usually hold coordination meetings, here we evaluate the results of the performance of the heads of the room and ask the obstacles in the room, then I am also the head of nursing the way to see friends in nursing services provided to patients. If for staff who usually make mistakes it is usually a report from the head of the room but if this problem is rarely obtained"' (DS, 37 years old, Informant 1).

This can also be seen from the usual informant statement that some room heads re-examine the completeness and documenting of nursing care, all the head of the room reprimands the staff who made mistakes, and thoroughly the head of the room conducts follow-up to the improvement of his staff.

"Nursing care should be seen if it is not appropriate to be told that it must be improved" (IN, 28 years old, Informant 5).

"To reprimand staff misconduct must be reprimanded if they deny the usual they are immediately called" (DE, 33 years old, Informant 8).

"Of course the opportunity will be given while he still wants to change, such as if someone makes a mistake or while he is still in the ICU team will still be monitored if he shows improvement I feel safe but if there is no improvement means I have to leave it to the head of nursing" (IT, 31 years old, Informant 2).

DISCUSSION

Planning, changes in the hospital processing system that occur today towards the concept of managerialism, in the context of hospitals the role of managers (who do not directly perform medical services) must increase because it has a very important role in planning this certainly has the consequence that human resources must be available that have a scientific basis and insights about health and hospitalization this is in line with previous research that was conducted Ronita Jayanti Purba (2007) said that every organization needs to do a plan in every activity of its organization, whether production planning, new employee recruitment planning, and budget planning (Fahrozy, 2017), (Yusuf, 2017).

Organizing in management has many important activities, including regulating how the organization is managed effectively and efficiently for patients in the hospital room

with the number of human resources and facilities available (Fragawaty et al., 2019).

This is in line with previous research submitted (Munijaya, 2004) The head of the room in organizing management functions that will serve the relationship between workers and their activities as a form of achieving organizational goals and management activities to ensure accuracy between ratios, officers, and workloads, and motivate and guide workers (Ningsih et al., 2017), (Alamri, 2015), (Yanidrawati, 2012).

Implementation, from the information obtained during the study, can be known that the briefing activities in each hospital room can be known through formal meetings at the ward level, but in the implementation, the activity is not done routinely only through Whatsapp containers if there is something to talk about, the head of the room tends to only enjoy the work of performing services on patients and lacks the commitment to perform managerial tasks. It's the ability to manage less effective time. Especially if viewed with less ethical coaching this will have an impact on the performance of other staff, as well as supervision activities that are rarely done as long as there are no other staff mistakes this is in line with the Kron theory (2000) the ability of the head of the room in providing good direction is needed, all directors must be properly good with its part and its quality wisdom and help other staff in displaying tasks effectively and efficiently.

The head of the room must direct his staff to perform the task of providing nursing care following hospital standards (Hidayat et al., 2019), (Utama, 2003), (Novieastari et al., 2018).

Evaluation, from the results of research, shows that the evaluation of Management activities at Trikora Salakan Hospital is still less effective this can be seen from the answers of informants regarding nursing care examinations that some respondents rarely do which should be an important main task for them, and the head of the room always gives the right rebuke to his staff who make mistakes in working, The head of the room often performs follow-up in the evaluation. This is reinforced by Edward's theory (2001) stating that the head of the room must be able to evaluate it properly so that it can immediately improve it (Suharyoko, 2016), (Cooper & Lu, 2016), (Garrow, 2016).

And from the aspect of evaluation that is systematic will have an impact on the implementation of nursing care by standards. So there needs to be a performance evaluation to see the problems that occur during implementation so that the services provided are more effective and efficient.

To other researchers, it is advisable to conduct further research by expanding the research area in the field of competence of the head of the room management and adding other variables to increase mastery in the field of management of the head of the room

(Silaban et al., 2017) (Irawan et al., 2017) (Elysabeth et al., 2015)

CONCLUSION

Based on the results of research and discussion on the competence of the head of the room management in improving the quality of service at Trikora Salakan Hospital can be drawn several conclusions, namely as follows.

Planning competence, some of the heads of the room who do not know about the hospital development plan, no one arranges planning in the room by looking at the strategic plan of the hospital-based only on the needs of the room, most of the heads of the room does not use supporting data in making planning, most of the head of the room has the orientation that the scope of planning only includes the planning of consumables, and most of the head of the room rarely conducts coordination meetings with his staff, organizing, most of the heads The room does not run a set organizational structure, most heads of the room only uses the method of assignment through direct appointment, implementation, all room heads do not hold regular meetings consistently, some room heads rarely do in ethical coaching conducted by the head of the room, while the head of the room rarely conducts guidance on his staff, and evaluation, some room heads re-examine the completeness and documenting. In nursing care, the entire head

of the room did admonishments on the staff who made a mistake, and thoroughly the head of the room did follow-up to the improvement of his staff.

RECOMMENDATIONS

To Trikora Salakan Hospital is advised on the aspect of planning competence should be prepared strategically and to develop indicators of the success of the planning process should not be due to the importance of formalities in accreditation assessment, but it is true to determine the right strategy in managing the hospital, then from the aspect of organizational competence an important step is taken, namely to make a hospital diagnosis starting from good organizing so that the bus a directional in carrying out their respective duties and functions, from the aspect of the implementation of the head of the room is also recommended to improve self-ability through training, skills, and functions of management functions to provide nursing services under existing standards.

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