

The Effect Of Hospital Accreditation To Employees Career In Duta Mulya Hospital Majenang

Hendi ^{1*}, Pramono Hari Adi², Saryono³

¹ Faculty of Economics and Business, Jenderal Soedirman University

² Faculty of Economics and Business, Jenderal Soedirman University

³ Faculty of Economics and Business, Jenderal Soedirman University

Abstract. Hospital accreditation is official recognition from the government to hospitals that already meet the standards of health care. To obtain the recognition, a hospital has to go through a sequential formal evaluation on compliance to the hospital quality standards. Post even, the accreditee shall receive feedback in the form of overview hospital performance in various aspects including human resources, facilities, funding and the organizational culture. On the top of all, the accreditation system provides reassurance to customers and the public that the hospitals are providing high quality services according to standards. The research was done at hospitals Duta mulya Majenang. This study uses the same type of quantitative analysis methods descriptif analytic approach and cross sectional ,data analysis using SPSS. Samples were taken using the methodology of random probability sampling with simple random sampling. Sampling included the 15 doctors, pharmacists 3, 15 nurses, 16 midwives, nonmedical 30. In this study, using a questionnaire covering the career ladder, the addition of human resources, compliance with hospital facilities, remuneration system, an increasing of patients.

Keywords: Accreditation, Career path, Fulfillment facilities, increase of patients

1. INTRODUCTION

The attitude of the hospital staff is a field of study that is less developed, consistent with prior studies perkembanganya (Greenfield, 2013). Accreditation apparently produce polarization directional view with some people who have strong opinions about the value and benefits, fits and others expressed concerns about the cost, the clinical relevance of accreditation standards and inconsistencies surveior. The reason this disagreement is less understood and may be re-influence the number of circumstances and underlying factors associated with for example the type of jobs and professions, accreditation models, as well as organizational, financial aspects and aspects of politics. (Greenfield, 2013)

Accreditation involves certification programs, services, organizations, agencies or institutions by external bodies authorized to use the process for assessing the performance in relation to the standards set in Indonesia to support continuous improvement (D Greenfield, 2009)

Despite the broad absorption of international accreditation program, a process in which the accreditation program impact on the quality and yield poorly understood. A systematic review of literature highlights accreditation inconsistent findings, with conflicting evidence around the impact of organizational, financial impact, size and quality of program ratings. Efforts to build value has appeared in respond to repeated calls for further evidence, albeit with limited success (Mumford V, 2015)

Before further efforts to evaluate the effectiveness, there is a need to understand how accreditation can work to achieve the desired results. Set theory program of the underlying will clarify the relationship between the accreditation process and the anticipated effect, serves as a tool to understand the process clearly (ie. How the accreditation process is supposed to work and why. Explain the theory of program for accreditation can also support the design, optimization of processes, identify conditions contextual necessary for success and improve learning. Therefore, the aim of this study was to explore how organizations respond to and interact with the

* Email Address: dokterhendi@gmail.com

accreditation process and the actual and potential mechanisms through which can affect the quality accreditation. (Mumford V, 2015)

2. LITERATURE REVIEW

2.1 Accreditation

Hospital accreditation is official recognition from the government to hospitals that already meet the standards of health care and is the result of a formal evaluation in order to improve the quality through accreditation will also get an idea of whether or not the hospital personnel's performance in improving its work. Accreditation will provide reassurance to customers and the public that the services provided in the hospital held up well and according to standards (Depkes, 2000). Hospital accreditation is recognition of the hospital that is given by an independent agency organizing accreditation set by the minister of health, having judged that the hospitals that meet the standards of hospital care applicable to improve the quality of hospital services on an ongoing basis (PMK 12 tahun 2012). The existing human resources in hospitals is composed of health professionals that includes physicians, nurses, midwives, non-medical (pharmacists, nutritionists, medical records, laboratory analyst)

2.2 Human Resources

Human resources is a very important element of the organization. Human resources are the main pillars once the driving wheel in an effort to realize the organization's vision and mission. Therefore it must be ensured these resources are managed as well as possible to be able to not contribute optimally. It requires a systematic and planned management so that the desired goals in the present and the future can be achieved which is often referred to as human resource management. The purpose of human resource management is to manage or develop the competence of personnel to be able to realize the mission of the organization in order to realize the vision.

Human resources in the Hospital consists of: 1) Health workers that include medical (doctors), paramedics (nurses) and non-nursing paramedics ie pharmacists, health analyst, assistant pharmacist, nutritionist, physiotherapist, radiographer, medical recorder. 2) Power of non-health namely the financial, administrative, personnel and others.

2.3 Facilities and infrastructure

General Hospital D class is based on service, human resources, equipment and buildings and infrastructure. Services provided in the General Hospital of class D olehrumah least include medical services, pharmacy services, and ebidanan keawatan services, medical support services, non-clinical support services and inpatient services (56 Permenkes .2014)

2.4 Career

Career is the overall position / job / position that can be occupied seseorang selama his working life in the organization or in some organizations. Sdut perspective of employees, office is a very important thing because everybody wants a position in accordance with his desire and want the highest possible positions in accordance with kemampuannya. bilamana someone noticed that his career goal would be achieved in the organization, the person might not have morale is high or not motivated to work or even going to leave the organization. (Marihot, 2002)

2.5 An increasing number of patients

Patient is a person who receives medical care, patients often suffer from illness or injury and require the help of a doctor to memulihkannya.

3. RESEARCH METHOD

This type of research berifat descriptif quantitative analytic approach. This research places on employees including general practitioners, specialist doctors, midwives, nurses, non-medical. The subjects of this study hospital accreditation by employees. The location of this research is done in the hospital Duta Mulya, Majenang, Cilacap. Employees directly by questionnaire. By performing doctor questionare techniques against a number of specialists, general practitioners, midwives, nurses and non-medical. The population of this research employee who has passed the accreditation of hospitals. Analsisi tool research using square che.

4. RESULT AND DISCUSSION

The results of this study researchers presented two forms of analysis that researchers performed a univariate analysis that aims to describe the picture of each variable studied in the form of frequency distribution and bivariate analysis to analyze two variables that were related, such as the following results:

4.1 Overview Performance, Career Paths, Facility Compliance and Increased Number of Patients

Description of illustration performance and career path, meeting facilities and an increase in the number of patients, Can be seen in the following table:

Table 1. The frequency distribution of picture performance and career path, meeting facilities and an increase in the number of patients,

variables	Frequency	Percentage (%)
performance		
High	14	17.7
moderate	65	82.3
Career Paths		
High	9	11.4
moderate	64	81.0
Low	6	7.6
Amenities		
High	35	44.3
moderate	43	54.4
Low	1	1.3
Increasing Number of Patients		
High	65	82.3
Low	14	17.7

According to the table 1 is known that when seen from the performance characteristics, most of the employees have moderate performance (82.3%), the characteristics of the career path shows most employees have a career path was (81.0%), fulfillment facility characteristics indicate most employees have moderate facilities (54.4%) and the characteristics of the increase in the number of patients most employees have a high increase in the number of patients (82.3%).

4.2 Performance relationship with Career Paths, Facility Compliance and Increased Number of Patients

Analysis that second namely bivariate analysis which is the analysis of the two variables were related, and in this analysis using test Chi Square, Namely to determine the relationship between performance with a career path, meeting facilities and an increase in the number of patients,

a. Performance relationship with Career Paths

Table 2. Correlation of performance with a career path

performance	Career Paths						Total		<i>p value</i>
	High		moderate		Low		f	%	
	f	%	f	%	f	%			
High	3	21.4	11	78.6	-	-	14	100.0	0.245
moderate	6	9.2	53	81.5	6	9.2	65	100.0	
Total	9	11.4	64	81.0	6	7.6	79	100.0	

based on table 2 that employees with high performance most have a career path is being (78.6%), as well as employees with performance being largely have a career path was (81.5%). The analysis also showed *p*-value relationship with a performance of 0.245 career path, or it means the $p\text{-value} > \alpha$ (0.05) so that it can be interpreted that the statistics are not there is a relationship between performance with a career path.

b. Performance relationship with amenities

Table 3. Relationship with facility performance

performance	Amenities						Total		<i>p value</i>
	High		moderate		Low		f	%	
	f	%	f	%	f	%			
High	10	71.4	4	28.6	-	-	14	100.0	0.077
moderate	25	38.5	39	60.0	1	1.5	65	100.0	
Total	35	44.3	43	54.4	1	1.3	79	100.0	

based on table 3 known that employees with high performance facilities mostly have high compliance (71.4%), while the employees with performance being largely have fulfillment facility moderate (60.0%). The analysis also showed *p*-value relationship with a performance of 0.077 fulfillment facility, or it means the $p\text{-value} > \alpha$ (0.05) so that it can be interpreted that the statistics are not there is a relationship between Performance with fulfillment facilities.

c. Relations Performance by Increasing Number of Patients

Table 4. Relationship of performance with an increase in the number of patients

performance	Increasing number of patients		Total	<i>p value</i>
	High	Low		

	f	%	f	%	f	%	
High	14	100.0	-	-	14	100.0	
moderate	51	78.5	14	21.5	65	100.0	0.056
Total	65	82.3	14	17.7	79	100.0	

based on table 4 note that employees with high performance all have a high increase in the number of patients (100.0%), while the employees with performance being contained 21.5% had an increase in the number of patients is low. The analysis also showed p-value relationships with an increasing number of patient performance of 0.056, or it means the p-value > α (0.05) so that it can be interpreted that the statistics are not there is a relationship between performance with an increasing number of patients.

REFERENCE

- Greenfield D, Pawsey M, Naylor J et al. Are accreditation surveys reliable? *Int J Health Care Qual Assur* 2009;22:105–16.
- Lovern E. Accreditation gains attention. *Mod Healthc*. 2000;30:46.
- Greenfield D, Braithwaite J. Health sector accreditation research: a systematic review. *Int J Qual Health Care* 2008;20:172–83.
- Braithwaite J, Greenfield D, Westbrook J et al. Health service accreditation as a predictor of clinical and organisational performance: a blinded, random, stratified study. *Qual Saf Health Care* 2010;19: 14–21.
- Mumford V, Forde K, Greenfield D et al. Health services accreditation: what is the evidence that the benefits justify the costs? *Int J Qual Health Care* 2013;25:606–20.
- Brubakk K, Vist GE, Bukholm G et al. A systematic review of hospital accreditation: the challenges of measuring complex intervention effects. *BMC Health Serv Res* 2015;15:280.
- Mumford V, Greenfield D, Hogden A et al. Counting the costs of accreditation in acute care: an activity-based costing approach. *BMJ open* 2015;5:e008850.
- Mumford V, Reeve R, Greenfield D et al. Is accreditation linked to hospital infection rates? A 4-year, data linkage study of *Staphylococcus aureus* rates and accreditation scores in 77 Australian acute hospitals. *Int J Qual Health Care* 2015;27:478–84.
- Walshe K. Understanding what works—and why—in quality improvement: the need for theory-driven evaluation. *Int J Qual Health Care* 2007;19:57–9.
- Chen H-T. *Practical Program Evaluation*. Thousand Oaks, CA: Sage Publications, 2005.
- Departemen Kesehatan Republik Indonesia Direktorat Jendral Pelayanan Medik Direktorat Rumah sakit Umum dan Pendidikan, 1996. *Standar Pelayanan Rumah sakit* : 111 hlm
- Departemen Kesehatan Republik Indonesia, 1996. *Pedoman Akreditasi Rumah sakit di Indonesia*, Jakarta, 134 hlm