The Effectiveness of Public Health Services In Makassar (Study: Health Services In the Hospitals)

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ABSTRACT: The type of this research is a qualitative research through phenomenology approach. Furthermore, the results of research from many complaints and comments of the community shows that the professionalism of hospital services has not been built in an integrated manner. Therefore, it needs to be constantly fixed. From many problems between the community and the hospital parties that happen almost in all hospitals in South Sulawesi or even throughout Indonesia, it shows that its concept of service has not been optimal. It is the result of employees’ professionalism which has not been built and hospital management which still needs a development.

KEYWORD: services, community, hospital, effectiveness, health

I. INTRODUCTION

A. Background

Hospitals as one of the health service facilities have a very strategic role in efforts to accelerate the level of public health. The government has been seriously and constantly striving to improve the quality of service which is promotive, preventive, curative and rehabilitative. This role is increasingly demanded nowadays due to changes in the epidemiological disease, changes in organizational structure, the development of science and technology, socioeconomic changes of the community and services which is more effective, friendly and able to meet people’s needs.

The reformation era has brought fundamental changes in various fields of life including healthcare issues. One of the fundamental changes that are being rolled out today is the state management. It is from a central-based management into a regional-based management. This management change is officially realized in the form of Indonesian Law No. 22/1999 about the local government, which then followed its implementation guidance in the form of Indonesian Government Regulation No.25/2000 about the authority of provincial government as an autonomous region. The logical consequence of those laws and government regulations are that the effectiveness of health services must be adjusted to the soul and spirit of autonomy. In accordance with the regulation, therefore, the main tasks and their functions are arranged, as follow: (1) Organizing and conducting health services in promotive and rehabilitative manner; (2) Conducting medical services, organizing referral system, providing supportive and non-medical services, providing nursing care services, organizing education and training, and also conducting research and development.

In order to improve the level of public health, there are many things needed to note. One of them considered having an important role is the management of health services. In accordance with Indonesian Law No. 23/1999 about Health Services, in order, the management of health services can achieve the desired goals then the services must meet various requirements such as it is available and sustainable, acceptable and reasonable, accessible, affordable and qualified.

Currently, the hospital is in a very tight competitive climate. The community as the focus subject as well as the object of development is in a stronger position because of the increasing choice of hospitals that can serve it. At the same time, people are also increasingly critical toward health services. Under these conditions, in order to remain to exist in serving its customers, the hospital must have qualified human resources. One of its aspects is the willingness and ability to provide the excellent services.

B. Problem Statements

1. How is the effectiveness of public health services?
2. What is the government strategy for public health services?
II. LITERATURE REVIEW

A. Public Administration

The public administration or state administration is essentially a form of administrative co-operation carried out by two or more persons to achieve a common goal. The purpose of the public administration itself is public service. Public administration encompasses the study of political science, law, social, and management.

One of the public administrative tasks is policy-making or better known as a public policy. It means that these administrators create policies with a purpose to solve problems that exist in the community.

An organization will succeed in achieving its objectives if it is equipped with the supportive tools, namely effective and efficient government administration that can provide a major role for the success of an organization that ultimately leads to the prosperity and people’s welfare. The role administrator is as an agent of change (Irawati, 2007).

B. Administrative Reforms

An administrative reform is a conscious effort which has a plan to change bureaucratic structures and procedures (institutional aspects), and also to change the empowerment structures and procedures of the state apparatus formulated and organized by the government to shape public servants which is capable to provide better services to the community. The administrative reform is one of the important determinant factors in an administrative system which plays a major role in the process of altering header values in achieving government objectives (Dr. Rakhat, pp., 2005).

Referring to the understanding of administrative reform, it can be realized as a conscious effort to implement new ideas about the administrative system to achieve the goals of national development. Then, questions arise, such as what the fundamental actions regarding administrative reform which can be implemented to achieve the goals of national development and regarding social-economic building and nation building.

B. Public Policy Roles

Based on the substance of public policy, government intervention aims to change or to influence the direction and rate of ongoing changes in the community to create the desired conditions.

According to Lindlom in Meyzi Heriyanto (2012), the formulation of public policy is defined as “an extremely complex, analytical and political process that exists in the beginning or at the end of the most definite boundaries. Somehow, a defined complex power called policy making produces an effect called policy.

According to the dictionary of administration, public policy is the strategic utilization of existing resources to solve community or government problems. Meanwhile, according to Russell, he defined public policy as whatever government decides to do and not to do. Both authors claim that their opinions are their response to political issues. Another account says that the idea of public policy is expressed as one of the tactics and strategies which aim to achieve a goal. Therefore, in his opinion, the policy contains three elements, namely, (1) Identifying of the desired goals; (2) Formulating tactics or strategies from various ways to achieve the desired goals; and (3) providing various inputs to increase the possibility of those tactics and strategies implemented in the real condition.

Richard Layard (2005) in John F. with Helliwell (2005) argues that the short-term trend of commitment and the increasing of monetary have a correlation with achievements rewards. Furthermore, rewards for individual performance targets especially for a short-term target may experience a corrosive effect on trust and loyalty. It may also create unhappiness in the process.

III. METHOD

This research employs a qualitative research using phenomenology approach. Data is collected from main data sources (informants) and secondary data sources. Techniques of data collection used are individual interviews and observation documentation (participant observation). After having been validated, the data is on the trusted degree after being validated by using extensive observation. It is conducted to point out researcher’s persistence in observation and interview. The triangulation data analysis techniques in this study apply the principle of transferability, dependability, and confirmability. Data obtained through observation will be analyzed in depth further with throughout and direct observations in the form of testimony, visibility, and observation. The data obtained from the interviews with the informants will be analyzed structurally. Its steps are started to data collection, data reduction, data interpretation and data presentation with structured and systematic drawing conclusion in the end.

IV. DISCUSSION

Hospital services are an effort to meet the needs of the community. Hospital services serve to provide comprehensive and integrated health services undertaken in an effort to improve public health, disease prevention, disease cure, and health recovery which is excellent and affordable to improve the level of public health.
Hospitals as one form of health care facility should provide excellent services. Hospital management should strive to satisfy its patients, in this case, people with varying degrees of needs.

A hospital is established and run with the purpose to provide health services in the form of care, examination, treatment, medical or non-medical action, and other diagnostic actions required by each patient within the abilities limits of technology and facilities provided in the hospital (Wijono, 1999).

In addition, the hospital should be able to provide health services which are fast, accurate, and corresponding to the progress of medical technology so that it can serve as a hospital reference to the other hospitals in its level.

Health services in the hospital are service actions in form of outpatient services, inpatient services, administrative services and emergency services which cover medical services and medical supports.

Meanwhile, to be called as a form of health services, both from the medical health services and from public health services must have a variety of basic requirements. Those basic requirements are as follows:

1. **Available and Sustainable**
The first basic requirement of good health services is that it must be available and sustainable in the community.

2. **Acceptable and Reasonable**
The second basic requirement of good health services is that it must be acceptable and reasonable in the community. It means that the health services are not contrary to beliefs in the community.

3. **Accessible**
The third basic requirement of good health services is that it must be easily accessed by the community (accessed in term of location).

4. **Affordable**
The fourth basic requirement of good health services is that it must be easily afforded by the community. Affordability means in the term of cost. To be able to realize such a situation, it should be pursued health services corresponding to the economic capacity of the community.

5. **Qualified**
The last basic requirement of good health services is that it must be qualified. It refers to the level of perfection of health services held in which on one hand it can satisfy the costumers and on the other hand its procedures is according to the ethics code and standards that have been set.

In the service effort of the hospital, the patients who get services have a certain expectation. If the hospital party can fulfill or give beyond their expectations from time to time, it will grow the patients’ thought that it is the effective and qualified hospital service.

A. **Public Health Services**
The problems faced by hospitals either government-owned hospitals or private hospitals can be divided into three things, namely financial management, service standards (quality and patient safety) and safety guarantees services (national coverage).

**Financial Management**
The management of central and local government hospitals like other agencies under government authority can be considered as an office. Its difference is that the office does not generate income from services. However, financial management such as income received by the hospitals must be deposited to the state treasury no later than 24 hours after being received. Meanwhile, the direct usage of money received through public services is prohibited by the applicable law.

It is like the budgets of central and local government hospitals which have to make a budget plan a year early to get budgets for the next year. Each budget that has been disbursed to a local hospital has been set its usage in details for each type of activities which will be conducted. The budget usage for different types of activities is prohibited. Furthermore, if it needs necessary changes, it needs to wait for the budget change mechanism in the middle of the ongoing year.

Therefore, from the description of government’s financial management which is very rigid and sticks to the ongoing budget plan, it can be concluded that it is not flexible toward budget’s utilization. Its result is a mismatch between the planned budget and its realization. This is further exacerbated by the inaccurate or poor preparation of the budget plan. Therefore, sometimes planning makes implementation difficult.
As a very important public service, the hospital needs to change its institutional paradigm from socio-bureaucratic based to socio-economic based which must apply the modern management concepts while still maintaining the mission and social function of the hospital.

According to Rijadi, S (2005), naturally, the hospital is a business entity and not an office. Therefore, the effective and efficient hospital management will maximize the results and quality of the hospital services aside whether the hospital is owned by the government or private parties. As a business entity, for government hospitals, the institutional form becomes very important because the management of money, people, and goods depends on the form of institution.

Coming from those problems, the government publishes the Indonesian Law No. 1/2004 about State Treasury. In verse 68 and 69, the government proposes an idea to form a Public Service Agency (BLU) within non-profit format and organized professionally and independently. The Public Service Agency is formed with the aim to improve services in the community in order to promote public welfare, to educate the life of the nation, and to provide the qualified and affordable services in which its financial sources come from customer charge and government aid. The Public Service Agency (BLU) is a governmental agency established to provide services to the community in form of providing goods and/or services sold without looking for profit in its activities based on efficiency and productivity principles (Government Regulation No. 23/2005 about Financial Management of Public Service Agency (BLU)).

Meanwhile, with the enactment of a Law about regional autonomy, the status of the government hospital is transferred to regional technical institutions. If all local government hospitals’ status is transferred to a Local Public Services Agency (Badan Layanan Umum Daerah [BLUD]) according to the Indonesian Law No. 1/2004 about State Treasury and the Government Regulation No.23/2005 about the Financial Management of Public Services Agency (PPK BLU), then its status diversion must be carefully prepared in order its result in line with the expectations.

Furthermore, the legal basis for the design application of the Financial Management of the Local Public Service Agency (PPK BLUD) will be regulated in the Government Regulation No. 58/2005 about Regional Financial Management and Minister of Home Affairs Regulation No 61/2007 about the Technical Guidelines for the Financial Management of Regional Public Service Agency.

Service Standards (Quality Improvement and Patient Safety)

In this increasingly global era in which the information technology is getting more advanced, the boundaries between countries are increasingly invisible. People easily seek the medication anywhere either domestically or abroad. This change should also be followed by the quality standards of hospitals in Indonesia.

Along with the development of advanced science and technology, and the increase of people’s welfare and critical thinking in assessing the quality of health services, it is deemed necessary to make significant changes to the quality of hospitals in Indonesia. Indonesian people are getting selective and deserve a right to a qualified and safe service. Furthermore, the improvement of health services quality is expected to reduce public interest to seek medication abroad.

In accordance with the Indonesian Law No.44/2009, article 40/1, it states that in an effort to improve the hospital services quality, accreditation must be done regularly once in three years. It is expected that the accreditation for community service may ensure the quality standards and patient safety.

Safety Guarantees Services (National Coverage)

The general problem faced by hospitals in the implementation of health services in this safety guarantees (BPJS) era is the issue of service cost. The hospitals which belong to the government, foundations and private service have not set the correct cost. Service cost determined by the hospital management is not made based on the basis of the correct cost analysis. It is an analysis which applies a basic unit cost. Consequently, the determined cost does not reflect the real cost which should be expensed for one unit cost in the provided health services.

Social Security Administrator (BPJS) pays out the services received by its member using a package system or based on the clinical pathway (CP). Therefore, it just increases the financial problems in the hospital. It is because the actual objective of package-based or clinical pathway (CP) cost is to create a quality and cost control in providing health service in the hospital.

Considering those problems, the hospitals have to run a rational, effective, and efficient hospital management. Steps that must be done in this case are to revise the service cost by calculating the real and correct unit cost.

The good health services are a need for everyone. Everyone wants to feel appreciated, wants to be served, and wants to get the same position in the eyes of society. However, there is often dichotomy in health service in Indonesia. There have been so many cases that illustrate how bad the health services in Indonesia are.
It is like the good health service only for those who have thick pockets. Meanwhile, for those poor people do not get the same services which are fair and proportional. Poor people seem not allowed to be sick.

What makes the gap between the rich and the poor in the health services domain cannot be understood. Doctors in different hospitals often implicitly show their true personality to the patients. Implicitly, they say that the medical education is not cheaply undertaken. Therefore, as the result of that expensive education, people must pay the meaning of life with the extraordinary nominal of cost. Perhaps, in the initial paradigm when someone chooses his way of life as a doctor, they suffer disorientation problems. Devotion to the community and nation is not the main factor that dominates someone’s desire to become a doctor. Sometimes, there are commercialization factors which underlie to take the medical education as his next educational journey. This paper is absolutely not made to discredit a doctor. A doctor is a very noble job. Being a doctor is a position which makes someone being able to more appreciate the meaning of life. Its main point is that nowadays being doctor in Indonesia is illustrated as a job commercialization neither health services. If those false paradigms can be straightened, the position of a doctor will return to the noble level.

Health services often seem not in line with the expensive cost which is spent. Sometimes, hospitals do not serve patients well and hospitable. Doctors also sometimes make diagnoses carelessly. Not to mention, nurses are often lazy in working. Someone once said that hospitals in Japan do not provide entertainment facilities such as televisions for hospital employees. Therefore, the working conditions will be much more conducive because their concentration will not be split between work and entertainment affairs. Meanwhile, in Indonesia, the existence of television for hospital employees is a necessity. Actually, this condition can damage work productivity. Although, there is always the justification that professionalism is always upheld in undertaking professional duties. The validation of those words is not clear. However, it seems to indicate the real service condition given by hospitals management in Indonesia. Those words are kind a bit true out of the condition in Japan’s hospitals.

B. The government strategy for public health services

1. Improving the Equity and Affordability of Health Services

The improvement of the equity and affordability of public health services can be achieved through organizing the free health service for poor people in the Community Health Center (Puskesmas) and its network, and in class III hospital. Through this effort, it is expected that the level of health disparity between the rich and the poor will get decreasing. To anticipate the technical obstacles in the field faced by the poor in obtaining appropriate services, such as administrative and procedural barriers, socialization and advocacy to host institutions will be enhanced further while strengthening monitoring and safeguarding. Furthermore, other ways which can be conducted are improving the facilities and infrastructure of the Community Health Center (Puskesmas) and its network; developing and improving the selective hospitals especially for those in disaster and underdeveloped regions; procuring drugs and medical supplies; and providing operational and maintenance costs. Through the implementation of various policies and accompanied by progress in the social and economic fields, it is expected that the health of poor people will be getting better.

2. Improving the Quality of Health Services

In order to improve the quality of health services, the efforts which will be carried out are conducting the appointment and placement of health personnel, such as doctors and nursing staff, especially for those in remote areas; improving the number of the Community Health Centers (Puskesmas) which have doctors; improving the number of regional hospitals which have basic specialist doctor; and improving the quality of the education and training of health workers.

Planning the needs of health personnel need to be improved to meet the needs of health personnel, especially for health services in Community Health Centers (Puskesmas) and its networks, and also in regional hospitals, especially in remote and disaster areas. This step needs to be followed by improving the skill and professionalism of health workers through education and training including career development for health workers, and also by setting competency standards and regulation for the health profession.

Other important efforts which need to be conducted are ensuring the fulfillment of the quality standards, safety, and appropriateness of therapeutic products/drugs, household health supplies, traditional medicines, food supplements and cosmetic products through monitoring the food safety and hazardous materials, monitoring the use of narcotics, psychotropic, and addictive substances, and monitoring the product quality, effectiveness, and safety. The capacity of drug and food monitoring laboratory also needs to be improved. The development of Indonesian indigenous medicines should be increased by developing and investigating the medicinal plants, increasing the promotion of Indonesian indigenous medicines usage, and developing the standardization of medicinal plants from Indonesia natural sources.
3. **Improving Clean and Healthy Living Behavior**

In order to improve people’s clean and healthy living behavior, activities which need to be conducted are (1) developing the health promotion media and communication, information, and education technology; (2) developing health efforts from community (such as integrated service posts (posyandu), rural maternity hospital, and school health efforts) and from young generation; and (3) improving the health education to the community.

V. **CONCLUSION**

Public health services are a very important thing in the context of both micro and macro level development. Professional health services will run maximally if a cooperation which supports and reminds each other of their responsibility as a public servant in terms of public health services is established. Therefore, the community is not enough involved as the object of development. However, they need to be involved as the subject of development. It means that the responsibility regarding public health belongs not only to health worker but also the community. The community should be also engaged to maintain the public health and to participate in controlling the performance of apparatus in providing public health services in every health center either in Community Health Center (Puskesmas), government-owned hospitals, or private hospitals which is spread all over Indonesia.

**REFERENCES**


