



A case study of document readiness in the Administration and Management Working Group on accreditation results at Lalolae Health Center

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ABSTRACT

Objective: The results of the self-assessment assessment at the Lalolae Public Health Center which was the target of the 2017–2019 accreditation assessment in East Kolaka Regency showed that most of the low scores were in the administration and management group. This study aims to determine the relations between the readiness of accreditation documents in the Administration and Management Working Group on the accreditation results of the Lalolae Public Health Center in East Kolaka Regency.

Methods: This type of research is quantitative using a cross sectional design. The number of samples in this study were all people in charge of the administrative and management working group at the Lalolae Public Health Center who were determined by the purposive sampling method. This research was carried out from May 1 to July 20, 2020 and took place at the Lalolae Health Center. The sample in this study is 30 respondents.

Results: There are 3 documents in chapter I that have unfulfilled categories, there are 4 documents in chapter ii that have unfulfilled categories, and there are 4 documents in chapter III that have unfulfilled categories.

Conclusion: There is a relation between the readiness of accreditation documents in the administration and management groups to the results of accreditation of Public Health Center.

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Introduction

Accreditation is one of the Ministry of Health's policy strategies in 2015–2019 which aims to improve equitable access and quality of health services in Public Health Center.¹ Based on the Regulation of the Minister of Health of the Republic of Indonesia Number 46 of 2015 concerning the accreditation of puskesmas, Pratama clinics, independent doctors' practice places, and independent dentist practice places, it is stated that puskesmas accreditation must be carried out by all puskesmas in Indonesia.² Accreditation of the puskesmas must be carried out periodically at least once every three years to ensure continuous quality improvement.³ In addition, puskesmas accreditation is one of the credential requirements as a first-level health service facility in collaboration with the Social Security Administration (BPJS).⁴ Therefore, accreditation of this puskesmas is very necessary in an effort to improve the quality and safety of services.

The implementation of puskesmas accreditation standards encourages puskesmas to listen more to the needs and expectations of the community, complaints or criticisms and suggestions

from patients and their families.⁵ In addition, the puskesmas must also respect the rights of patients and families, provide optimal and quality services in individual health care efforts or in public health efforts. The implementation of accreditation will be greatly influenced by factors related to achieving maximum accreditation results. These factors that affect the results of accreditation, if not managed properly, will greatly harm the status of the puskesmas as a competent and credible institution in community services.

Assessment of puskesmas accreditation is carried out with 3 indicators of service groups at puskesmas, namely the administration and management group, the community health effort group, and the individual health effort group.⁶ Each group must be assessed based on the services provided. Data from the results of the evaluation carried out by looking at the ranking and accreditation status of puskesmas in East Kolaka Regency shows that recommendations related to improving accreditation preparation from the Accreditation Commission (FKTP) surveyor team are more in the Administration and Management Working Group (Pokja). Adment at Loea Health Center.

This is also in line with the results of the self-assessment score at the Loea Puskesmas that most of the low scores for accreditation are in the administration and management group. Many problems have caused it, one of which could be due to the fact that the preparations made by the puskesmas are more focused on the working group of Public Health Efforts (UKM) and Individual Health Efforts (UKP) while the availability of documents needed to meet accreditation

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standards is not maximized according to the statements of each head. Public Health Center.

From the results of these studies, it is necessary to prepare a preparatory analysis for each system in it. Therefore, in this study an analysis of the readiness of any accreditation documents will be carried out in the Admen Working Group related to the accreditation results of the Loea Community Health Center. Based on these problems, researchers are interested in conducting research with the title “The Relationship of Document Readiness to the Accreditation Results of Loea Public Health Center. Case in Administration and Management Working Group”.

Method

This type of research is quantitative research, which is a form of research whose analysis uses a statistical model. The research design used was Cross Sectional which aims to determine the relationship between causal research variables that occur in the research object. The variables in the Cross Sectional Study are the dependent and independent variables which are observed once at the same time.⁷ The sample in this study were all health workers who served each chapter, namely Chapters I, II and III in the Administration and Management Working Group, which amounted to 30 respondents.

Data concerning the independent variables and the dependent variable will be collected at the same time then processed and analyzed. The method used is the survey research method. The instrument used to obtain primary data was a questionnaire in the form of a checklist made based on the Puskesmas accreditation assessment instrument. The rating scale used in this instrument is a Likert scale with an ordinal level.⁸

Research location

This research was carried out from May 1 to July 20, 2020 and this research took place at the Lalolae Health Center.

Types and sources of data

Data concerning the independent variables and the dependent variable will be collected at the same time then processed and analyzed. The method used is the survey research method. The instrument used to obtain primary data was a questionnaire in the form of a checklist made based on the Puskesmas accreditation assessment instrument. The rating scale used in this instrument is a Likert scale with an ordinal level.^{8,9}

Data collection techniques

The data analysis used in this research is univariate analysis (descriptive analysis)¹⁰ and ordinal logistic regression analysis for hypothesis testing, namely the regression model used to solve regression cases between the dependent variable (Y) and one or more independent variables (X), where the variable bound (Y) in the form of qualitative data in the form of polycotomus with an ordinal scale.

Results

Descriptive analysis (univariate) was conducted to determine the frequency distribution and percentage of completeness or completeness of each document at the Loea Community Health Center. There are 3 categories of document completeness according to the document assessment level on the accreditation assessment instrument, namely the fulfilled category with a score of 2, partially

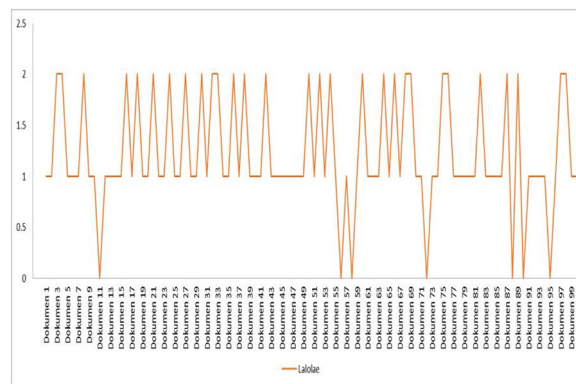


Fig. 1. Distribution of document fulfillment at Lalolae Puskesmas.

Table 1
Result of determination test analysis.

	Sig.
Cox and Snell	.768
Nagelkerke	1.000
McFadden	1.000

Source: Primary Data (2020).

fulfilled with a score of 1, and not fulfilled with a score of 0. The documents analyzed in this study amounted to 100 documents which were divided into 3 CHAPTERS in the administration and management groups. The results of the descriptive analysis can be seen in the following graph.

From the graph in Fig. 1, it can be seen that the completeness of the documents in the fulfilled and partially fulfilled category has the greatest frequency and is relatively the same in number for, while the unfulfilled category has the least frequency.

This explains that the availability of accreditation readiness documents in the administration and management groups at your local health center mostly meets the existing accreditation standards and a small part still has some documents that have not been fulfilled or completed. Of course this is why the accreditation results at your local health center have not More specifically, we can see the relationship between document readiness and the accreditation results of your local health center from the results of statistical analysis of hypothesis testing (Table 1).

Discussion

Public Health Center have an important role in the implementation of health services in Indonesia. Puskesmas are required to guarantee the quality improvement, performance improvement and implementation of risk management are carried out sustainably, so it needs to be assessed through accreditation mechanism.⁴ Accreditation is wrong one Ministry of Health policy strategy by year 2015–2019 which aims to improve equitable access and the quality of health services at Public Health Center.¹¹ Health center accreditations aimed to improve the quality of health services in health centers, so that the quality of better health services can provide satisfaction for patients or communities who receive health services.¹² Accreditation of Puskesmas in East Kolaka Regency is carried out gradually. In the early stages of 2017, based on the strategic plan from the health office, there were 12 Puskesmas that submitted submissions, one of which was the local health center. However, in its implementation, only 2 primary accredited puskesmas and the rest were basic accredited. In achieving accreditation, it is necessary to make efforts to map the ability of health centers to provide services according to these standards.¹³

Puskesmas in carrying out services are partly based on habits or rules that have been standardized themselves without making the standard of compliance with documents and services as a reference.² Puskesmas are obliged to carry out an accreditation assessment every three years.¹⁴ Through accreditation, it is hoped that the quality of health center services will increase, one of which can be seen from the increase in patient satisfaction.¹⁵

This research is in line with research conducted by magh-firoh and rochmah¹⁶ regarding the readiness for accreditation of Puskesmas Madiun in preparation for accreditation where to achieve improved performance in Administration and Management, medium health centers carry out ways of meeting performance targets by increasing performance targets including improving the implementation of Puskesmas accreditation programs affect the completeness of documents.¹⁶ The focus of the completeness of accreditation documents is determined on improving the performance and improving the performance of Administration and Management at the Puskesmas as a demand for accreditation to be carried out in accordance with activities or programs that aim to provide quality service and provide satisfaction to targets or society.¹⁷ In an effort to improve the performance of program implementers, it is inseparable from the role of the Head of the Puskesmas, the person in charge and administrators and management.¹⁸ Interviewees felt that hospital accreditation contributed to the improvement of healthcare quality in general, and more specifically to patient safety, as it fostered staff reflection, a higher standardization of practices, and a greater focus on quality improvement.¹⁹

For the inferential analysis results in testing the hypothesis, it can be explained that there is a relationship between the readiness of accreditation documents in the administration and management groups to the results of accreditation of local health centers in East Kolaka Regency. This can also be seen in the results of descriptive or univariate analysis of the data obtained where there are values is directly proportional to the average document fulfillment with the puskesmas accreditation status. In local puskesmas with basic accredited status there are still blank or incomplete documents so they are in the unfulfilled category with a document percentage rate of 30%. The results indicate that AACSB accreditation facilitated organizational learning in three of the four schools.²⁰

Conclusion

There is a relationship between the readiness of accreditation documents in the administration and management groups to the results of accreditation of local health centers in East Kolaka Regency. This relationship can be seen in the results of the hypothesis test analysis carried out, namely in all prerequisite tests the final test decision from ordinal logistic regression analysis is to reject

H0 or accept H1 which means there is a relationship between the independent variable and the dependent variable.

Conflicts of interest

The authors declare no conflict of interest.

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