Abdul Wahid Mahsuni, Agus Sholahuddin, Sri Hartini Jatmikowati

E-mail: abdulwahid_fe@unisma.ac.id E-mail: agus.sholahuddin@unmer.ac.id E-mail:@unmer.ac.id

ABSTRACT

The enactment of Permenkes number 4 of 2019 concerning Technical standards for fulfilling basic service quality at minimum service standards in the health sector has changed various public policies regarding health, especially public policies in the field of health services related to the implementation or implementation of policies in hospitals. Service performance is still far from what was expected, in order toPolicy ImplementationFor health services at the Gondanglegi Islamic Hospital in Malang Regency, the need for qualified human beings who can provide adequate services to the public is urgently needed. Good and fast service implementation has become a demand and expectation for the community. One of the areas targeted for actualization in question is in terms of service to the community. This is in line with and in accordance with the spirit of reform which demands quality services. The purpose of this research is ufor uTo describe and analyze inpatient health services based on Permenkes Number 4 of 2019 at Islamic HospitalsGondanglegi, Malang Regency. The results of this study thatHealth servicesInpatientsBased on the Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, they are as follows:

- a. in terms of quantity and quality standards of goods and/or services, it has been arranged to comply with the type C Hospital policy. This cannot be separated from whatexplained that as a policy made by the government in the form of government actions that have specific goals that prioritize the interests of the community
- b. b. in terms of the number and quality standards of health personnel/human resourcesstill constrained by location and other factors, the personnel for specialist doctors is still not sufficient, while for other fields they are sufficient.
- c. in terms of technical instructions or standard compliance procedures;
- d. Permenkes standard technical guideline; Compliance with regulatory standards of all ministries and agencies (K/L) is adopted into the 5-year Strategic Plan (Renstra) and operationally defined annually in the annual Work Program (Proker). Then it is lowered again into more technical planning in the Terms of Reference. This was done because of the rationalization of budget availability and the preparation of Human Resources (HR), which took time.
- e. Inpatient room guidelines compared to Human Resources (HR); There is still a shortage of 1-3 nurses compared to the standard calculation (regulation) of fulfilling the staffing pattern. The fulfillment of personnel in inpatient rooms is carried out in a programmed (planned-phased), regulation-based, data-based and considering economic factors.
- f. Juknis number of beds, infrastructure;
 The number of beds (TT) meets the minimum standard for type C hospitals, namely 100 beds (TT) with a minimum class III availability of 20-30% of the total beds (TT) and 30% preparation for changing the function of a general inpatient room into an isolation room if there is a spike in the

incidence of infectious disease cases according to the Circular Letter from the East Java Provincial Health Office in 2022.

- g. Technical Guidelines for BPJS at the Gondang Legi Islamic Hospital;
- The implementation of BPJS services is carried out by establishing a Quality Control and Cost Control Team (KMKB) which in principle seeks to balance business profit targets with service quality standards provided to patients participating in BPJS Health. The number of patients paying through BPJS Health reaches around 75% of the total payment method for all patients. Monitoring the quality of BPJS Kesehatan services is carried out by the Main Branch Office of BPJS Kesehatan Malang through walk through audits (WTA) 5 times in 2022 and monitoring 7 compliance indexes for advanced referral health facilities (FKRTL) periodically with values ranging from an average of 70-80%.
- h. viewed from the elements of the health Authoritythat all doctors and health workers as well as caregiving professionals (PPA) have been equipped with letters explaining their respective authorities.
- i. in terms of Information elementhealth that through an integrated Hospital Management Information System (SIMRS), health information continues to be developed. In terms of health information elements, health services for inpatients at the hospital are very fulfilling, through integrated SIMRS, health information can be continuously developed. In terms of the information element, through an integrated SIMRS, health information continues to be built, can be continuously developed, and is very fulfilling in health information which is presented clearly and informatively.
- j. in terms ofhealth facility elementsthat the health facilities are carried out according to the needs of the hospital, namely type C, the health services for inpatients at the hospital are very fulfilling and good, the health facilities provided are quite adequate.
- k. reviewed based on technical instructions or standard fulfillment procedures, that the Hospital is equipped with regulations that refer to government regulations to carry out activities technically (for example SPO), technical instructions or standard piloting procedures are well explained.
- 1. in terms of Communication Factorsthat the communication factor between the doctor in charge of service (DPJP), professional care giver (PPA) and other health workers including with the patient and family has complied with regulations in the hospital is very fulfilling.
- m. in terms of Communication variable namely Transmission, that the dissemination of information manually and digitally has been regulated in regulations, easy to translate and relatively good, in regulations it has been regulated for dissemination of manual and digital information, everything related to transmission is explained properly both manually and digitally.
- n. in terms of Communication variable namely Claritythat for the delivery of high alert drugs to patients there must be clarity in communication, one of which is the obligation to do double checks on patients that have been regulated in the SOP. One of the information provided about the drug given to the patient is explained in detail.
- o. in terms of Communication variable namely Consistencythat the consistency of the implementation of communication according to regulations has been monitored and evaluated and set forth in the semester or annual attachments, very consistent, communication is carried out consistently.
- p. in terms of Disposition Factorthat it has been regulated separately to be able to evaluate its services.
- q. in terms of Leadership Appointment Factorat the Gondanglegi Islamic Hospital in Malang Regency that Specifically, the appointment of directors and deputy directors has been regulated separately in regulations belonging to the Gondanglegi Islamic Hospital Foundation, namely in accordance with the mechanism and SOP of appointment.
- r. in terms of Incentive Factorat the Gondanglegi Islamic Hospital in Malang Regency, that the Incentives at the Hospital are regulated based on certain calculations and are optimized every month and of course they are sufficient and meet standards. Hospital incentives can be received on time every month. It's fine, has been arranged by the Hospital.
- s. in terms of Organizational Structure Factorsat the Gondanglegi Islamic Hospital in Malang Regency, that the organizational structure is adapted to the needs of a type C Hospital and adapted to current conditions.
- t. in terms of Standard Operating Procedures (SOUP) at the Gondanglegi Islamic Hospital in Malang Regency, in fact, it has been issued as needed and refers to related policies and with reference to related policies, SOPs have been issued according to needs and implemented optimally.

u. in terms of Fragmentation (distribution of responsibility for a policy to several different bodies so that it requires coordination) at the Gondanglegi Islamic Hospital in Malang Regency in order to facilitate communication and integration, policies at the Hospital involve other related fields.

Keywords: Implementation, Policy, Service, Hospital

Research Context

Studies on the implementation of service policies in hospitals need to be carried out in order to meet the minimum service standards in the health sector, so that synchronization of cooperation is needed in the implementation of services between health workers and health support workers, especially at the Gondanglegi Islamic Hospital, Regency. Malang Service Implementation is something related to the roles and functions of the organization that must be carried out. The roles and functions are meant apart from protecting, as well as fulfilling the basic needs of society at large in order to realize people's welfare. (Rasyid, 1997).

Service performance is still less than expected, in order to Policy Implementation For health services at the Gondanglegi Islamic Hospital in Malang Regency, the need for quality human resources who can provide adequate services to the public is urgently needed. The implementation of good and fast service has become a demand and expectation for the community. The areas targeted for actualization in question are in terms of service to the community. This is in line with and in accordance with the spirit of reform which demands quality services.

Organizational development is largely determined by the quality of its human resources. On the one hand, qualified human resources are expected to be able to exploit natural resources in such a way as to benefit society at large. On the other hand, quality human resources within the ranks of the organization's management will be able to provide satisfactory services to the public. This last point is important because so far, a lot of criticism and outbursts of dissatisfaction have been directed at the organization of the Gondanglegi Islamic Hospital in Malang Regency as a result of their services being judged "less" by the community.

To achieve the objectives of human resource development, as stated in the description, the organization needs support from other organizations in developing its human resources. The role of the other organizations can be in the form of executors or organizers of education and training; financial assistance for the implementation of education and training; and other forms of roles that enable the development of human resource capacity.

In order to improve the quality of service to the community and to reduce the high cost economy, increase efficiency, productivity and effectiveness, the development of human resources is an absolute requirement that must be met if you want to survive and develop and win total competition in today's increasingly competitive global era. Human resource development can be done in various ways, including through education and training.

Nowadays, education and training programs are increasingly directed at increasing the human capacity of planners, implementers and supervisors and controllers of development. Therefore the existence of humans as human resources needs to be reviewed in terms of quality and quantity.

Furthermore, paying attention to the increasing demands of the community at the Gondanglegi Islamic Hospital in Malang Regency for services, both in the form of administration, services, and in the form of products. People want fast and precise service. But the real conditions in the field, it turns out that the demands of the community have not been fulfilled.

This is because the people at the Gondanglegi Islamic Hospital in Malang Regency are still not optimal in carrying out service tasks. Facts on the ground at the Gondanglegi Islamic Hospital in Malang Regency show that human resources who sit in certain positions required to attend education and training only attend training after the person concerned takes office.

The program to improve the quality of human resources at the Gondanglegi Islamic Hospital in Malang Regency through a human resource development policy strategy seeks to be more adaptive to progress and development, the complexity of challenges and opportunities,

and to be accommodative to the implementation of basic tasks.

Formulation of the problem

The problem statement is How is the health service for inpatients based on Permenkes no. 4 in 2019 at the Islamic Hospital Gondanglegi, Malang Regency?

Research purposes

To describe and analyze inpatient health services based on Permenkes Number 4 of 2019 at Islamic HospitalsGondanglegi, Malang Regency.

RESEARCH METHODS

Types and Research Methods

Through this qualitative research approach, researchers are able to fully and comprehensively describe the phenomenon under study as described in the research focus, so that they can answer the problems formulated and thus the research objectives can be achieved.

Research focus

The focus of this research is Health services for inpatients based on Permenkes Number 4 of 2019 at the Gondanglegi Islamic Hospital, Kondanglegi Regency, Malang Regency.

- a. In terms of quantity and quality standards of goods and/or services;
 - a.1. Standard quantity:
 - a.1.1. Patient;
 - a.1.2. Medical Teaga;
 - a.1.2.1. Doctor;
 - a.1.2.1.1. Medical specialist;
 - a.1.2.1.2. General practitioners;
 - a.1.2.2. Nurse;
 - a.1.2.3. Midwife:
 - a.1.2.4. Inpatient Class;
 - a.1.2.4.1. Number of rooms for Adults;
 - a.1.2.4.2. Number of rooms for children;
 - a.2. Quality of goods and/or services:
 - a.2.1. Drugs;
 - a.2.2. Hospital Supplies;
 - a.2.3. Infrastructure (ambulance);
- b. In terms of the standard number and quality of health personnel/human resources;
 - b. 1. Specialist doctor customers;
 - b.2. Customers of general practitioners/doctors on duty;
 - b.3. Nurse/medical personnel customers;
- c. Reviewed based on technical instructions or standards compliance procedures;

- c. 1. Permenkes standard technical guideline;
- c. 2. Inpatient room technical guidelines compared to Human Resources;
- c. 3. Juknis number of beds, infrastructure; c.4 Technical Guidelines for BPJS at RSI Gondang Legi;

RESEARCH RESULTS AND DISCUSSION

Health services for inpatients based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of the standard quantity and quality of goods and/or services, have been regulated to comply with Type C Hospital policies. What isexplained that as a policy made by the government in the form of government actions that have specific goals that prioritize the interests of the community, which are formulated as follows:

- a. Policies always have a goal or are oriented towards a particular goal.
- b. Policies contain actions or patterns of action of government officials.
- c. Policy is what the government actually does and not what the government intends to do.
- d. Public policies are positive (government actions regarding a particular problem) and negative (government officials' decisions not to do something).
- e. Public policy (positive) is always based on certain laws that are coercive. (Anderson in Widodo, 2010:14).

Meanwhile regarding the capacity of goods according to procedures to be checked through the hospital's health technology team, the details are as follows;

- a.1. Standard quantities can be seen from: a.1.1. Patients totaled 51,278 people,
- a.1.2. Meanwhile, medical personnel are as follows which can be seen from the number of specialist doctors, general practitioners, nurses and midwives whose details are;
- a.1.2.1. Doctors as many as 34 people with details.

- a.1.2.1.1. 22 specialist doctors
- a.1.2.1.2. 11 General Practitioners
- a.1.2.2. Nurses as many as 119 people
- a.1.2.3. Midwives as many as 16 people
- a.1.2.4. Inpatient Class of 4 blocks with details,
- a.1.2.4.1. The number of rooms for adults is 77 rooms
- a.1.2.4.2. There are 23 rooms for children While the quality of goods and/or services with the following details:
- a.2.1. Drugs; Pharmaceutical supplies/preparations are carried out according to standards (100%) as PMK 72/2016 concerning Pharmaceutical Service Standards in Hospitals.
- a.2.2. Hospital equipment tools; According to PMK No. 3/2020 concerning Hospital Licensing Classification concluded that about 75% of medical devices (alkes) were met and around 80% of regulatory standards were met for other public equipment.
- a.2.3. Infrastructure (ambulance); A total of 3, 2 standard transport ambulances, 1 specifically for bodies.

For this reason, the types of services provided are classified as general hospitals and special hospitals. General hospitals and special hospitals are classified by the government based on service capabilities, health facilities, supporting facilities, and human resources. Regarding the standard, it has been regulated to comply with the type C hospital policy. For goods capacity, it is according to the procedure to be checked through the Hospital Health technology team.

Health services for inpatients based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of the standard number and quality of health personnel/human resources are still constrained by location and other factors, personnel for specialist doctors are still insufficient, while for other fields are complete, with details as follows b.1. Specialist doctor customers; On average, Surgical Clinics: 2,913 people, Children's Clinics: 2,361 people, Mental Clinics: 1,093 people, Skin Clinics: 1,103 people, Eye Clinics: 3,069 people, Obgyn Clinics: 579 people, Orthopedic Clinics: 816 people, Pulmonary Clinics 3,121 people.

Internal Medicine Clinics: 7,578 people, Medical Rehab Clinics: 7,844 people, Neurology Clinics: 6,403 people, while the customers are general practitioners/doctors on duty; On average there are 8,954 people,

Taking into account the statements of the informants it can be concluded that Health services for inpatients based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of the standard number and quality of health personnel/human resources are still constrained by location and other factors, personnel for specialist doctors are still not fulfilled, while for other fields are complete.

Health services for inpatients based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of technical instructions or procedures for fulfilling standards;

- c. 1. Permenkes standard technical guideline; Compliance with regulatory standards of all ministries and agencies (K/L) is adopted into the 5 year Strategic Plan (Renstra) and operationalized annually in the annual Work Program (Proker). Then it is lowered again into more technical planning in the Terms of Reference. This is done because of the rationalization of budget availability and preparation of human resources which takes time.
- c. 2. Inpatient room technical guidelines compared to human resources;

There is still a shortage of 1-3 nurses compared to the standard calculation (regulation) of fulfilling the staffing pattern. The fulfillment of personnel in inpatient rooms is carried out in a programmed (planned-phased), regulation-based, data-based and considering economic factors.

c. 3. Juknis number of beds, infrastructure;

The number of beds (TT) has met the minimum standard for type C Hospital, namely 100 TT with a minimum availability of class III of 20-30% of the total TT and 30% preparation for changing the function of general inpatient rooms to isolation rooms if there is a spike in the incidence of infectious disease cases according to a Circular Letter from the East Java Provincial Health Office in 2022.

c.4 Technical Guidelines for BPJS at the Gondang Legi Islamic Hospital;

The implementation of BPJS services is carried out by establishing a Quality Control and Cost Control Team (KMKB) which in principle seeks to balance business profit targets with service quality standards provided to patients participating in BPJS Health. The number of patients paying through BPJS Health reaches around 75% of the total payment method for all patients. Monitoring the quality of BPJS Kesehatan services is carried out by the Main Branch Office of BPJS Kesehatan Malang through walk through audits (WTA) 5 times in 2022 and monitoring 7 compliance indexes for advanced referral health facilities (FKRTL) periodically with values ranging from an average of 70-80%.

Inpatient health services based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of the element of Health Authority that all doctors, health workers and care-giving professionals (PPA) are equipped with letters explaining their respective authorities respectively. In terms of health information elements, health services for inpatients at the hospital are very fulfilling. There are already letters explaining the authority of all Deputy Directors and other medical personnel as well as budget execution documents (DPA). Judging from the element of health authority, all doctors and health workers and care-giving professionals (PPA) are equipped with letters explaining respective authorities.

Health services for inpatients are based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of the information element said by the Director of the Gondanglegi Islamic Hospital that Through an integrated hospital management information system (SIMRS), health information continues to be developed. from the elements of health Judging information, health services for inpatients at the hospital are very fulfilling. Through an integrated hospital management information system (SIMRS), health information can be continuously developed. In terms of the information element, through an integrated hospital management information system (SIMRS), health information is continuously built, can be continuously developed, and is very fulfilling in health information which is presented clearly and informatively.

Taking into account the statements of the five informants, the researcher concluded thathealth services for inpatients based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of elements of health facilities that health facilities are carried out by adjusting the needs of the Hospital, namely type C, Health services for inpatients at the Hospital have fulfilled and it is good, the health facilities provided are quite adequate.

Health services for inpatients based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency are reviewed based on technical instructions or procedures for fulfilling standards that the Hospital has been equipped with regulations referring to government regulations to carry out activities technically. This means that the health services for inpatients at the hospital are fulfilled because they are equipped with various regulations that refer to government regulations to carry out activities technically (for example, there is an SPO). already fulfilled, already good, the technical instructions or standard piloting procedures are well explained.

Health services for inpatients based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of the Communication Factor that is the communication factor between the doctor in charge of service (DPJP), professional care giver (PPA) and other health workers including with patients and the family has complied with the regulations in the hospital and have complied. And also the communication factor between the doctors in charge of the service (DPJP), budget executing documents (DPA) and other medical personnel including patients and families is in accordance with regulations and set forth in Hospital rules and also the presence of authorized staff who are very communicative and clear in giving directions.

Health services for inpatients based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of the Communication variable, namely Transmission, that the dissemination of information manually and digitally has been regulated in regulations, easy to translate and relatively good, in regulations have been set for the dissemination of manual and digital information, everything related to transmission is explained properly both manually and digitally.

Health services for inpatients based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of communication variables, namely clarity that for the delivery of high alert drugs to patients there must be clarity in communication, one of which is the obligation to do a double check on patients who has been set in the SOP. One of the information provided about the drug given to the patient is explained in detail.

Health services for inpatients based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of the Communication variable, namely the consistency that the consistency of implementing communication according to regulations has been monitored and evaluated and set forth in semester or annual attachments. is good, communication is carried out consistently.

Health services for inpatients are based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of the Disposition Factor that has been regulated separately so that the service can be evaluated as good, it has been regulated by the Hospital.

Health services for inpatients based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of the Appointment Factors for leaders at the Gondanglegi Islamic Hospital in Malang Regency, specifically the appointment of directors and deputy directors has been regulated separately in the regulations

belonging to the Hospital Foundation Islam Gondanglegi, namely in accordance with the appointment mechanism and SOP.

Health services for inpatients are based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of Incentive Factors at the Gondanglegi Islamic Hospital in Malang Regency, that incentives at the Hospital are regulated based on certain calculations and are optimized every month and of course sufficient and up to standard. In certain calculations, hospital incentives can be received on time every month. It's fine, has been arranged by the Hospital.

Health services for inpatients are based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of Organizational Structure Factors at the Gondanglegi Islamic Hospital in Malang Regency, that the organizational structure is adapted to the needs of type C Hospitals and adapted to current conditions and has also been adapted to the needs of type C Hospitals for its organizational structure.

Health servicesinpatients based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of the Standard Operating Procedures (SOP) at the Gondanglegi Islamic Hospital in Malang Regency that has been issued as needed and refers to related policies and with reference to policies -related policies, SOPs have been issued according to the needs and made according to the needs and implemented optimally.

Health services for inpatients based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, in terms of Fragmentation that is to facilitate communication and integration, policies at the Hospital involve other related fields, are very fulfilling, are good, work the same as other related fields.

Conclusion

Health servicesInpatientsBased on the Government Regulation of the Republic of Indonesia Number 4 of 2019 at the

Gondanglegi Islamic Hospital in Malang Regency, they are as follows:

a.in terms of quantity and quality standards of goods and/or services,it has been arranged to comply with the type C Hospital policy. This cannot be separated from whatexplained that as a policy made by the government in the form of government actions that have specific goals that prioritize the interests of the community.

b.in terms of the number and quality standards of health personnel/human resourcesstill constrained by location and other factors, the personnel for specialist doctors is still not sufficient, while for other fields they are sufficient.

c.in terms of technical instructions or standard compliance procedures;

c. 1. Permenkes standard technical guideline;

Compliance with regulatory standards of all ministries and agencies (K/L) is adopted into the 5-year Strategic Plan (Renstra) and operationally defined annually in the annual Work Program (Proker). Then it is lowered again into more technical planning in the Terms of Reference. This is done because of the rationalization of budget availability and preparation of human resources which takes time.

- c. 2. Inpatient room technical guidelines compared to human resources; There is still a shortage of 1-3 nurses compared to the standard calculation (regulation) of fulfilling the staffing pattern. The fulfillment of personnel in inpatient rooms is carried out in a programmed (planned-phased), regulation-based, data-based and considering economic factors.
- c. 3. Juknis number of beds, infrastructure; The number of beds (TT) has met the minimum standard for type C hospitals, namely 100 TT with a minimum availability of class III of 20-30% of the total TT and 30% preparation for changing the function of the general inpatient room into an isolation room if there is a spike in the incidence of infectious disease cases according to Circular Letter from the East Java Provincial Health Office in 2022.
- c.4 Technical Guidelines for BPJS at Gondang Legi Islamic Hospital; The implementation of BPJS services is carried out by establishing a Quality Control and Cost Control Team (KMKB) which in principle seeks to balance business profit targets with service quality

standards provided to patients participating in BPJS Health. The number of patients paying through BPJS Health accounts for around 75% of the total payment method for all patients. Monitoring the quality of BPJS Kesehatan services is carried out by the Main Branch Office of BPJS Kesehatan Malang through walk through audits (WTA) 5 times in 2022 and monitoring 7 compliance indexes for advanced referral health facilities (FKRTL) periodically with values ranging from an average of 70-80%.

d.viewed from the elements of the health Authoritythat all doctors and health workers as well as care-giving professionals (PPA) have been equipped with letters explaining their respective authorities.

e. in terms ofInformation elementhealth that through an integrated hospital management information system (SIMRS). information continues to be developed. In terms of health information elements, the health services of inpatients at the hospital have been fulfilled. through an integrated hospital management information system (SIMRS), health information can be continuously developed. In terms of the information element, through an integrated hospital management information system (SIMRS), information continues to be built, can be continuously developed, and is very fulfilling in health information which is presented clearly and informatively.

f. in terms ofhealth facility elementsthat the health facilities are carried out according to the needs of the hospital, namely type C, the health services for inpatients at the hospital are very fulfilling and good, the health facilities provided are quite adequate.

g.reviewed based on technical instructions or standard fulfillment procedures, that the Hospital is equipped with regulations that refer to government regulations to carry out activities technically (for example SPO), technical instructions or standard piloting procedures are well explained.

h.in terms of Communication Factorsthat the communication factor between the doctor in charge of service (DPJP), professional care giver (PPA) and other health workers including with patients and families has complied with the regulations in the hospital.

- h. 1. in terms of Communication variable namely Transmission, that the dissemination of information manually and digitally has been regulated in regulations, easy to translate and relatively good, in regulations it has been regulated for dissemination of manual and digital information, everything related to transmission is explained properly both manually and digitally.
- h. 2. in terms of Communication variable namely Claritythat for the delivery of high alert drugs to patients there must be clarity in communication, one of which is the obligation to do double checks on patients that have been regulated in the SOP. One of the information provided about the drug given to the patient is explained in detail.
- h. 3. in terms of Communication variable namely Consistencythat the consistency of the implementation of communication according to regulations has been monitored and evaluated and set forth in the semester or annual attachments, very consistent, communication is carried out consistently.
- i. in terms of Disposition Factorthat it has been regulated separately to be able to evaluate its services.
- j. in terms of Leadership Appointment Factorat the Gondanglegi Islamic Hospital in Malang Regency that Specifically, the appointment of directors and deputy directors has been regulated separately in regulations belonging to the Gondanglegi Islamic Hospital Foundation, namely in accordance with the mechanism and SOP of appointment.
- k. in terms of Incentive Factorin the Gondanglegi Islamic Hospital, Malang Regency, that incentives in the hospital are regulated based on certain calculations and are optimized every month and of course they are sufficient and meet standards. Hospital incentives can be received on time every month. It's good, it has been arranged by the RS.
- l. in terms of organizational Structure Factorsat the Gondanglegi Islamic Hospital in Malang Regency, that the organizational structure is adapted to the needs of a type C Hospital and adapted to current conditions.
- m. in terms of Standard Operating Procedures (SOUP) at the Gondanglegi Islamic Hospital in Malang Regency, in fact, it has been issued as needed and refers to related policies and with reference to related policies, SOPs

have been issued according to needs and implemented optimally.

n.in terms of Fragmentation (distribution of responsibility for a policy to several different bodies so that it requires coordination) at the Gondanglegi Islamic Hospital in Malang Regency in order to facilitate communication and integration, policies at the Hospital involve other related fields.

Suggestion

Practical Implications

After various coherent reviews regarding inpatient health services based on Government Regulation of the Republic of Indonesia Number 4 of 2019 at the Gondanglegi Islamic Hospital in Malang Regency, several suggestions are proposed as follows:

- 1. For managers of the Gondanglegi Islamic Hospital in Malang Regency:
 - Open a wider network
 - The management team of the Gondanglegi Islamic Hospital is expected to proactively open up the widest possible network to all hospital stakeholders in order to be able to increase their capacity as a service institution. Because with a strong institution, the hospital management team can become a transformation agent to achieve perfect service.
- 2. For Communities in Malang Regency Increasing community participation Communities who have roles and functions as service users are expected to participate more in their roles.
- 3. For the government to give hospital management authority

 The government is expected to give full authority to the hospital management team to organize and manage professionally by involving capable human resources.

Theoretical Implications

The theoretical recommendations that can be conveyed from this research are expected to open new insights and horizons in using the top down perspective policy implementation model approach developed by George C. Edward III. Edward III named his public policy implementation model the Direct and Indirect Impact on Implementation. In this theoretical approach there are four variables that influence the successful implementation of a policy,

namely communication, resources, disposition and bureaucratic structure.

BIBLIOGRAPHY

- Agostiono. 2006. Implementation of Public Policy Model Van Meter and Van Horn, http://kertyawitaradya. wordpress, accessed 5 September 2010.
- Akib, Haedar and Antonius Tarigan. "Policy Implementation Concept Articulation: Perspective, Model and Measurement Criteria," Reading Journal, Volume 1 August 2008, Pepabari University Makassar.
- Anggraini, I. (2014). Implementation of Social Institution Management Policy (Study on Community Institutions in Ngadas Village, Poncokusumo District, Malang Regency) (Doctoral dissertation, Brawijaya University).
- Agustian, Ary Ginanjar, The Secret to Success in Building "ESQ" Emotional and Spiritual Intelligence, Jakarta: PT. Arga, 2000.
- Take care, Chaedar. 2002. Basically Qualitative, Pustaka Jaya, Bandung.
- Antwi, KB., Analoui, F., Cusworth, JW. (2007). Human Resource Development in Facing the Challenges of Local Government Decentralization in Africa: Empirical Evidence from Ghana.
- Dude, Burhan. 2003. Analysis of Qualitative Research Data on Philosophical and Methodological Understanding Towards Mastery of the Application Model. Jakarta: PT. Raja Grafindo Persada.
- Cook, Sarah and Macaulay, Steve, 1997, Perfect Empowerment, translated edition, translated: Paloepi Tyas R., PT. Elex Media Komputindo, Jakarta.
- Chasanah, K., Rosyadi, S., & Kurniasih, D. (2017). Village Fund Policy Implementation. The Indonesian Journal of Public Administration (IJPA), 3(2), 12 32.
- Dwiyanto. 2006. Conducted research in three provinces (DI Yogyakarta, Sumatra) west and South Sulawesi). Public bureaucratic reform in Indonesia.

- Dunn, William N. 2003. Introduction to Public Policy Analysis. Yogyakarta: Gajah Mada University Press.
- Dye, Thomas R. 1981. Understanding Public Policy, Prentice-Hall International, Inc., Englewood Cliffs, NY.
- Endang Wahyati Yustina, Getting to Know Hospital Law, Keni Media, Bandung, 2012.
- Edward III, George C (edited), 1984, Public Policy Implementing, Jai Press Inc, London-England.
- Grindle, Merilee S. 1997. Getting Good Government. Harvard UniversityPress. harvards.
- Implementation in The Third World, Princeton University Press, New Jersey.
- Goggin, Malcolm L et al. 1990. Implementation, Theory and Practice, Scott, Foresmann and Company, USA.
- Hasibuan, Malayu SP 2008. Human Resource Management. Jakarta: PT. Script Earth.
- -----, 2000. Human Resource Management, STIE YKPN, Yogyakarta.
- Hermein Hadiati Koeswadji, Law for Hospitals, Citra Aditya Bakti, Bandung, 2002.
- Helga, Mayona. 2009. The ideal model of public service to the community" with a case study in the City of Bukittinggi, West Sumatra.
- Hill, Michael. (ed.). 1993. The Policy Process:

 A Reader. New York: HarvesterWheatsheaf
- Huda, Nurul and Alvien Nur. 2015. Public Finance: Policy Instrument Approach in Islamic Perspective. Jakarta: PT Elex Media Komputindo.
- Life. 2018. Public Policy: Evaluation, Reform, Formulation. Malang: Intrans Media.
- I Made Leo Agus Jaya. 2003. Bureaucratic Performance Improvement in Public Services. The research was conducted at the Regional Secretariat of Jembrana Regency with a qualitative approach.
- Irawan, Prasetya, 1993. "Human Resource Management", STIA-LAN, Jakarta.
- Jatmikowati, SH, & Suroso, TE (2016). Village and Social Empowerment Legitimacy;

- Review the Implementation of Law No. Policy. 6/2014 Concerning Villages in Malang Regency. Publication: Journal of Public Administration, 1(2).
- Kharisma, VD (2013). Implementation of Village Fund Allocation Utilization Policy. JIANA (Journal of Public Administration), 12(2), 94-102.
- Kaji, Yulianto. 2008. Policy Implementation in the Perspective of Reality, Eternal Light, Tulung Agung, East Java.
- Lane, V. and Jacobson, R. (1995) "Stock Market reactions to brand extension announcements: The effects of brand attitude and familiarity," Journal of Marketing, Vol. 59 No. 1, pp. 63-77.
- Lester, James P, and Joseph Stewart, Jr. 2000.

 Public Policy: An Evolutionary
 Approach. Belmont, CA:

 Wadsworth.
- Levine, P., B. Rose, S. Green, G. Ransom, and W. Hill. 1990 Pathogentesting of ready-to-eat meat and poultry products collected at federally inspected establishments in the United States, J. Food Prot. 64:1188–1193.
- Leonard, Nadler. 1982, Designing Training Programs: The Critical Events Models, USA, Wesley Publishing Company.
- Lincoln, YS & Guba, EG 1985. Naturalistic Inquiry, 1st edition, Sage Publication, Beverly Hills.
- Liow, H., Lengkong, FD, & Palar, NA (2018).
 Implementation of Village Owned
 Enterprise Management Policy in
 Tondegesan Village, Kawangkoan
 District. Journal of Public
 Administration, 4(61).
- Mangimpis, A.C, and Alden Lalom. 2014.

 Implementation of Village
 Administration Policies in Public
 Services in Amurang Timur District,
 South Minahasa Regency. Journal of
 Public Administration, 2(3).
- Mustopadidjaja AR. 2003. Public Policy Process Management: Formulation, Implementation and Performance Evaluation. Jakarta: Institute of State Administration of the Republic of Indonesia.

- Marno, Islam By Management and Leadership: Theoretical and Empirical Reviews of the Development of Islamic Education Institutions, Jakarta: Lintas Pustaka, 2007.
- Madina, Kenzheganova. 2008. Human Resource Development in Developing Countries: The Republic of Kazakhstan.
- Martoyo, Susilo. 1996, Human Resource Management. Yogyakarta: PT. BPFE.
- Miles, Mathew B., Michael Hubernman and Johnny Saldana. 2013. Qualitative Data Analysis, A Methods Sourcebook. Edition 3.
- Moleong, Lexy J. 2002. Qualitative Research Methodology. Bandung: PT. Rosdakarya youth.
- M. Ngalim Purwanto, Educational Administration and Supervision, (Bandung: Rosdakarya's Youth, 2008), Cet. XVIII.
- Nakok, Aruan (2003) conducted research in the East Java province of Surabaya, this research was also conducted in four districts of Jember, Malang, Tuban and Pamekasan.
- Nawawi, Hadari. 1994. Applied Research. Cet. 1. Gajah Mada University Press, Yogyakarta.
- Notoatmodjo, Soekidjo. 1997. Education and Health Behavior. Rineka. Create. Jakarta.
- -----. 2003. Education and Health Behavior. Rineka. Create. Jakarta.
- Pan Suk Kim. 2000. Administrative reform in Korea, especially South Korea with case studies on Kim Dae Jung's government.
- Parasuraman, A, Valerie A. Zeithaml, Leonard L. Berry. 1998 SERVQUAL: Multiple Item Scale For Measuring Consumer Perception Of Service Quality. Journal Of Retailing Vol. 64 No. 1, pp. 12-37.
- Prabu Mangkunegara, 2000. Company Human Resource Management. Bandung: PT Juvenile Rosdakarya.
- Pacady, F., Sholahuddin, A., & Prianto, B. (2020). Implementation of village asset management policies at the

- Sidorejo Village market, Pagelaran District, Malang Regency. Publication (Journal of Public Administration), 5(2), 165.
- Purwanto, Erwan Agus and Dyah Ratih Sulystyastuti. Public Policy Implementation: Concepts and Applications in Indonesia. Yogyakarta: Gava Media
- Phipipus Ng, Aini N. 2004. Sociology and politics. Jakarta; PT Raja Grafindo Persada
- Ritzer G, Goodman JD. 2010. Modern Sociological Theory, 6th Edition. Jakarta; golden
- Scott J. 2011. Sociology: The Key Concepts. Jakarta: Rajawali Press
- Soekanto S. 2014. Sociology An Introduction, Revised edition; 6th printing. Jakarta: Rajawali Press
- Soekidjo Notoatmodjo, Health Ethics & Law, Rineka Cipta, Jakarta, 2010.
- Subarsono, AG. 2005. Public Policy Analysis, Concepts, Theories and Applications.
- Yogyakarta: Student library.
- Setyawan, D., & Srihardjono, NB (2016).

 Analysis of Village Law Policy
 Implementation Using the Edward III
 Model in Landungsari Village,
 Malang Regency. Reform, 6(2).
- Ramayulis, Islamic Religion Teaching Methodology, Jakarta: Kalam Mulia, 2008.
- Ritva Laakso-Manninen, Riitta Viitala. 2007. Competence Management And Human Resource Development, HAAGA-HELIA Publication Series.
- Ruliaty. 2007. Conducted research conducted in Bulukumba District, which is one of the regencies in the province of South Sulawesi, and is located 153 km from Makassar City.
- Savas, ES. 1987. Privatization: The Key To Better Government, Chatham House Publishers Inc., New Jersey.
- Siagian, Administrative Philosophy, Volume 1.

 Bandung. Gramediana Publisher 2006.
- SM, Anowar, Uddin.2010. The Impact of Good Governance on Development in Bangladesh.

- Soekidjo Notoatmodjo, Health Ethics & Law, Rineka Cipta, Jakarta, 2010.
- Stewart, John, 1998. Understanding The Management of Local Government, London, Longman.
- Stoner, James AF, et. al, Management, Sixth Edition, New Jersey: Prentice Hall, 2005.
- Tangkilisan, Hessel Nogi S. 2003. Evaluation of Public Policy: Explanation, Analysis & Transformation of Nagel's Mind. Yogyakarta: Balairung Co
- Topatimasang, Roem. Faqih, Mansour and Toto Rahardjo. 2000. Changing Public Policy. Yogyakarta: Student Librarian (IKAPI Member)
- Tanvir, Kayani. 2008. The Challenge of Human Resource Development to keep pace with globalization.
- Tegene, Abebe, Desta. 2008. Mhuman resource management in Ethiopia.
- Terry, George R, Guide to Management, trans. J. Smith. DFM, Jakarta: Earth Script, 2006.
- Triono. 2008. The Influence of Organizational Culture, Leadership, and Human Resource Competence on Organizational Performance.
- Turney, C., et.al, The School Manager, Sydney: Allen & Unwin, 1992.
- Authority, Ocean. 1994. Public Policy: Process and Analysis. Intermedia Jakarta.
- Winarno, Budi. 2002. Public Policy Theory and Process, Media Pressindo Yogyakarta.
- Wahab, Solichin Abdul. 2008. Introduction to Public Policy Analysis. Malang: UMM Press Malang
- Wahab, H. Solichin Abdul. 2017. Policy Analysis: From Formulation to Development of Policy Implementation Models. Jakarta: Public PT Bumi Aksara
- Winarno, Budi, 2008. Implementation of State Policy. Jakarta: Sinar Graphics.
- ----- 2014. Public Policy: Theory, Process, and Case Studies.
- Yogyakarta: CAPS (Center of Academic Publishing Service)
- White K. 2011. Sociology of Health and Disease, 3rd Edition. Jakarta: Rajawali Press

- Widya.1986. Human Resource Management. Publisher Sanyata Sumanasa Wira Sespim Polri, Bandung
- Yukl, Gary A, Leadership in Organizations, Translated by Jusuf Udaya, LicEc, Jakarta: Prenhallindo 1998.

Law No. 44 of 2009 concerning Hospitals.

Explanation of Law No. 44 of 2009 concerning Hospitals.

Law No. 36 of 2009 concerning health.

Ministry of Education and Culture. Big Indonesian Dictionary second edition. Library Hall. Jakarta. 1995.

KepMenKes No.582 of 1997 Concerning Government Hospital Fare Patterns

http://www. understandingpakar.Com /2014/09/ understanding management according to experts.