

Management Visit Evaluation to Improve the Quality of Ponek Services at Bhakti Wira Tamtama Hospital Semarang

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ABSTRACT

Background: All hospital staff, both functional and managerial, are responsible for continuous quality improvement. Bhakti Wira Tamtama Hospital in Semarang has committed to sustainable quality improvement. This commitment is embodied in the innovative work program of the Hospital Quality and Patient Safety Committee (KMKP) of Bhakti Wira Tamtama Hospital in the form of Management Grand Rounds. This innovative work program involving management visits by the Quality and Patient Safety Committee at Bhakti Wira Tamtama Hospital has been implemented for about three years but has not been evaluated for its effectiveness. **Objective:** To evaluate the Management Visit in the Ponek Department of Bhakti Wira Tamtama Hospital Semarang. **Methods:** The type of research used in this study is a Mixed-method research design known as The Explanatory Sequential Design. Mixed Method research is a method for analyzing, collecting, and blending quantitative and qualitative research methods within a single study to understand the research problem better. **Results:** The Influence of Internal Factors on Staff Perception Based on the hypothesis testing results, a P-Value of 0.179. The Influence of Staff Perception on Service Quality Improvement Based on the hypothesis testing results, a P-Value of 0.000 was obtained. **Conclusion:** Internal factor variables have no significant influence on staff perception. There is a significant influence between the staff's perception variable regarding service quality improvement, with a correlation value of P-Value = 0.000. This result is supported by in-depth interviews that indicate positive reception by the medical staff.

Keywords: Evaluation, Management Visit, Ponek

INTRODUCTION

Improving the quality of healthcare services is a shared responsibility of all hospital staff, both functional and managerial. The Hospital Quality Committee plays a key role in ensuring accreditation and optimal service quality (Singh., 2020). One crucial step in enhancing quality sustainably is through structured and routine work programs, including weekly and monthly management meetings that have proven effective in increasing patient satisfaction (Hill et al., 2020; Rivai et al., 2020).

Acceptability is a perception of implementation that is practiced in a pleasant, comfortable, and satisfying manner. The measurement of

acceptability is viewed from the perspective of stakeholders such as policymakers, administrators, service providers, and consumers/patients. Fidelity refers to the extent to which interventions are implemented according to the protocols established by the program developers. The benchmark for this dimension is compliance with the developed implementation, with outcomes of fidelity measured by: 1) adherence to program protocols, 2) the steps or number of programs delivered, and 3) the quality of program delivery. The improvement design regarding fidelity is created based on issues identified in the initial evaluation results (Wutz et al., 2023).

In this context, Bhakti Wira Tamtama Hospital is committed to assisting the IV/Diponegoro Military Command in enhancing awareness and the ability to live healthily for soldiers, civil servants, and their families. This is an important investment in their health and the success of the Indonesian Army's primary duties. One of the innovations implemented over the past three years is management visits conducted by the Quality and Patient Safety Committee. Management visits are proactive steps taken weekly, involving doctors or officers leading visits to various units to identify and address challenges faced in operations (Saleh, 2018).

Management visits are an innovation from the Improvement Subcommittee, which is part of the Quality and Patient Safety Committee. These management visits are routinely conducted once a week. The management visit activities are attended by the head of the installation, unit heads, heads of accreditation work programs, and representatives from related units that are not currently providing services. Management visits are conducted to each unit in rotation to understand the problems and obstacles faced by the units in the hospital's operations. The results of the management visits are recorded, and a weekly report is prepared to be submitted to the hospital director. The hospital director reviews the report as material to help determine policies.

This activity involves the head of the installation, unit heads, accreditation work program, as well as representatives from other units. The results of the visit are recorded and reported to the hospital director as a consideration in policy-making. Recognizing the importance of individual perceptions of this program is key to success. The acceptability of the program encompasses not only comfort and satisfaction but also the trust of stakeholders, including service providers and patients. By listening to feedback from all parties, we can create an environment that better supports the improvement of service quality.

By building a sustainable quality culture through activities such as management visits, Bhakti Wira Tamtama Hospital strives to ensure optimal healthcare service quality. This is not just about meeting standards, but about

creating a positive experience for every patient. Awareness of the importance of health and service quality can enhance healthcare services and is an investment for the future, for soldiers, civil servants, and the community.

METHODS

The type of research used in this study is Mixed Method research with an Explanatory Sequential Design. Mixed Method research is a method for analyzing, collecting, and combining quantitative and qualitative research methods within a single study to gain a better understanding of the research problem. The Explanatory Sequential Design is a Mixed Method research design that begins with the collection of quantitative research data and is followed by the collection of qualitative research data to explain the results obtained from the previous quantitative research. The foundation of this research model is that quantitative data and results provide an overview of the research problem; further analysis, particularly through the collection of qualitative data, is needed to refine, expand, or clarify the general picture (Masrizal, 2012). The characteristics of this research model are that quantitative data is prioritized over qualitative data, qualitative data serves as secondary data that supports the quantitative data, and qualitative data functions to justify the quantitative data. The quantitative research method in this study is descriptive observational research. The purpose of collecting quantitative data is to test hypotheses. The research design uses a cross sectional approach aimed at obtaining an overview of the fifth research question (Notoatmodjo, 2012).

The first research question is how the acceptability and fidelity of medical staff towards the implementation of management visit activities at RS Bhakti Wira Tamtama Semarang. To assess the acceptability and fidelity of medical staff towards management visits, an implementation research method is used. Implementation research applies the implementation results using the taxonomy of acceptability and fidelity. Acceptability is assessed using a survey from a questionnaire, while fidelity is evaluated through a checklist from each

room related to quality indicators in Ponak (Proctor et al., 2011). The qualitative research design in this study employs a phenomenological approach. The phenomenological qualitative research design is a research design that uses descriptive analysis techniques to describe an individual's experience or phenomenon in daily life (Eddles-Hirsch, 2015). The technique used for qualitative data collection in this study is in-depth interviews.

The research was conducted at Bhakti Wira Tamtama Hospital in Semarang, located at Jl. DR. Sutomo No.17, Barusari, Semarang Selatan District, Semarang City. The subjects of this study are members of the sample, specifically the ponak medical staff and other medical staff involved in ponak services at Bhakti Wira Tamtama Hospital in Semarang. The object of the research, which was analyzed and concluded by the researcher, is the routine management visits conducted by the Quality and Patient Safety Committee at Bhakti Wira Tamtama Hospital in Semarang. The research variables consist of independent and dependent variables. The SEM model variables include the influence of internal factors (independent) on staff perceptions (dependent) and the influence of staff perceptions (independent) on service quality improvement (dependent). The researcher submitted a research permit to the Postgraduate Program of MARS UMY, which was forwarded to Bhakti Wira Tamtama Hospital in Semarang with research permit No. 076/EC-KEPK FKIK UMY/I/2024 from the Ethics Committee of the Faculty of Medicine and Health Sciences at Muhammadiyah University of Yogyakarta.

RESULTS AND DISCUSSION

Table 1. Characteristics of respondents in the research

	Frequency	Percentage (%)
Age (years)		
17-25	6	9,2
26-35	35	53,8
36-45	15	23,1
46-55	9	13,8
Unit		
Ponak	9	13,8
Dahlia	10	15,4
Perina	10	15,4
VK	12	18,5

Obsgyn	6	9,2
OT	18	27,7
Education		
D2	1	1,5
D3	40	61,5
D4/S1	21	32,3
Spesialist	2	3,1
Sub-Spesialist	1	1,5
Total	65	100

Based on the table above, it shows that the total number of respondents is 65. In terms of age, respondents are predominantly in the 26-35 year range, accounting for 35 or 53.8%. By unit, respondents are mostly from the OK unit, totaling 18 or 27.7%. In terms of education level, the majority of respondents have a last education level of a Diploma 3 (D3), amounting to 40 or 61.5%.

Table 2. Descriptive analysis of the medical staff profile in the Ponak unit and related units based on research indicators at Bhakti Wira Tamtama Hospital Semarang

Indicator	N	Mean	Min-Max
Affective	65	4,13	1-5
Load	65	4,16	3-5
Etiics	65	3,73	1-5
Effectiveness	65	4,46	2-5
Koherence	65	4,44	3-5
Self confidence	65	4,06	3-5
Oportunity cost	65	4,26	2-5
Aeptability	65	4,41	3-5

The table above shows that, in general, the average score for each indicator is 4. The highest average score occurs in the effectiveness indicator, with a score of 4.46, while the lowest average score is found in the ethics indicator, with a score of 3.73. For the affective and ethics indicators, the scores range from 1 to 5. However, for other indicators, there were no respondents who answered with a score of 1. Validity testing is based on the Sig value in Pearson Correlation, which is conducted by correlating each indicator's score to the total score. Reliability testing is based on the Cronbach's Alpha value. In this study, a sample size of 65 was used with a significance level or alpha of 5%. The results indicate that all data across each indicator are valid, as they have a

Sig value of < 0.05. Based on the calculations, the reliability score for the questionnaire instrument used is 0.854. This indicates that the reliability is very

high. Thus, all research data are valid and reliable, making them suitable for further analysis.

Table 3. The Outer Loading Value of the SEM Model The validity testing of indicators in the SEM model is reviewed based on the outer loading values. In summary, the outer loading value for each indicator

	Internal factors	Improvement of Service Quality	Staf perseption
Affective			0.695
Aceptance			0.807
Beban			0.853
Oportunity cost			0.822
Effectifness		0.917	
Etics			0.602
Coherence		0.932	
Self confidence			0.734
Education	0.072		
Unit	0.994		
Age	0.580		

Table 4. Validity and Reliability Values for Each Variable in the SEM Model

	Cronbach's Alpha	Composite Reliability	Average VarianceExtracted (AVE)
Internal factor	0.734	0.808	0.689
Service Quality Improvement	0.830	0.921	0.854
Staff perseption	0.852	0.888	0.573

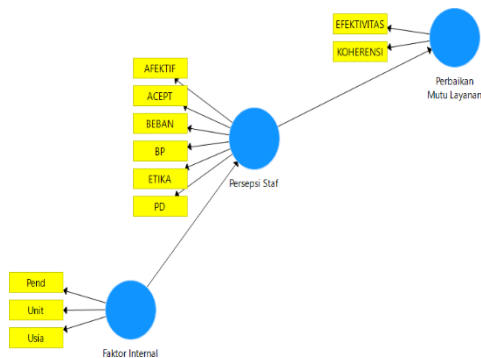


Figure 1. SEM Model for Indicator Validity Testing

The validity of variables in the SEM model is assessed based on the Average Variance Extracted (AVE) value. Meanwhile, the reliability of variables in the SEM model is evaluated using Cronbach's Alpha and Composite Reliability values. The threshold for validity required for a variable to be considered valid is $AVE \geq 0.500$. On the other hand, the threshold for reliability required for a variable to be deemed reliable is Composite Reliability > 0.700 or Cronbach's Alpha > 0.700. Nevertheless, a Composite Reliability or Cronbach's Alpha value of 0.600 is still considered acceptable.

Table 5. Hypothesis Testing

	Original Sample(O)	Sample Mean(M)	Standard Deviation (STDEV)	T Statistics (O/STDEV)	PValues
Internal Factor and Staff Perception	0.311	0.270	0.231	1.345	0.179
Staff Perception and Service Quality Improvement	0.693	0.707	0.036	19.309	0.000

The conclusion regarding the relationship between the two variables is based on the results of statistical tests. A P-Value correlation of 0.179 was obtained, which indicates that there is no significant influence of the internal factor variable on staff perception. The

conclusion regarding the relationship between the two variables is based on the results of statistical tests. A P-Value correlation of 0.000 was obtained, which means that there is a significant influence of the staff perception variable on the improvement of service quality. The

coefficient value is positive. The results of the inner model test can be illustrated

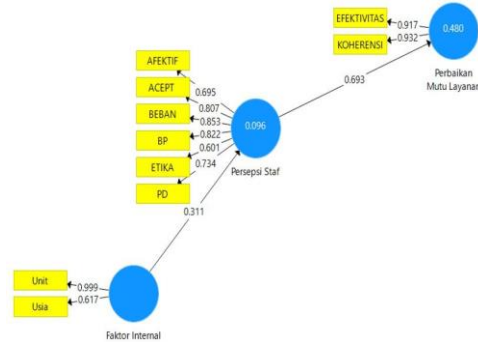


Figure 2. Inner Mode Test Results

Based on the research results of age categories, the respondents were dominated by those aged 26-35, accounting for 35 or 53.8%. Age is not related to perceptions of service quality because each age group has differences in perspectives and ways of thinking; as one gets older, the acceptance of the services received tends to improve. Adults tend to have a more mature way of thinking, which can influence their use of services. Differences in perception among each age group can affect individual behavior towards healthcare services (Dida et al., 2021).

The results of the study based on the level of education indicate that the majority of respondents have a last degree of D3, totaling 40 or 61.5%. The study shows that education significantly impacts a person's perception of health services. The higher a person's level of education, the better their perception of health services (Oktaviani and Dewanto, 2022). The results of the hypothesis testing found a P-Value of 0.000, leading to the rejection of H0, which means there is a significant influence between the staff's perception and the improvement of service quality. The coefficient value is positive, indicating a positive influence. The research on affective indicators and acceptability shows that respondents like or are comfortable with and can accept the management visit activities. The activities include supervision with checks on standard operating procedures (SPO), human resources (SDM), and facilities, including the available infrastructure in each unit (Ulfa Mutmainnah et al, 2021). This is supported by the statement from the informant:

as follows:

"The staff in the obstetrics field are very accepting of the management visit activities because they are very beneficial for the operation of obstetrics. The implementation of the management visit has already been applied. For example, if we face a shortage or obstacles, we inform management about the shortfall so that management can follow up." (Informant 2).

Affective indicators emerge and develop due to the encouragement of comfort, security, and other benefits felt in an activity, such as management visits. Affective indicators play a role in management visits where employees voluntarily and actively participate in their performance within the organization they work for (AlHarbi et al, 2016). Management visits in every activity involve supervision and discussions regarding the issues of each unit, leading to the identification of solutions and follow-up improvements that will be routinely monitored by the Quality Committee, with the hope of enhancing service quality (Ulfa Mutmainnah et al, 2021). "Our management visit activities are very much in agreement."

"During the management visit, we were able to convey complaints or obstacles or issues that exist in the room, especially in the Dahlia room. We hope that with this management visit, there will be follow-up actions. There are problems, but there are also solutions. "Coincidentally, the issues or problems experienced in the Dahliah room already have solutions or have been followed up by the management." (Informant 3).

In management visits, the acceptability indicator is that employees receive the activity positively. For example, health officials who find deficiencies or issues that do not comply with SOP during procedures can still fulfill patients' rights and then report the issues during management visits. The perspective of acceptability also needs to consider how patients respond to the services they receive. The ability to

accept is also a form of expressing one's attitude.

The results of the research regarding the burden indicators show that the majority of respondents stated that the activities were not burdensome. The demands and challenges faced by healthcare workers stem from an overload of work, the pressure to complete tasks, and the expectations related to their roles. The task load factor can lead to differing perceptions of the same information between individuals (Egawati and Aryani, 2022). Workload is a very important aspect; when employees have a workload that does not meet the job standards, even encroaching on their break time, it will result in a decline in service quality. Based on the results of the interviews with informants, the management visit activities do not burden the main priority tasks because these activities take place in the morning, are conducted every Wednesday with the scheduled units, and only discuss the issues present in those units to ensure they are resolved promptly and that services run smoothly.

Research on ethical indicators has the lowest average value. The ethical indicator shows that there are no moral or ethical consequences in the implementation of management visits, with the majority of respondents answering neutrally. Ethics is closely related to the behavior and attitudes displayed by an individual. The study of what is good and bad is highly relevant in addressing various issues that fundamentally involve behavior (Dhian, 2019). Ethics is more about the use of human reason with objectivity to determine the rightness or wrongness of a person's behavior towards others. Based on the results of the questionnaire, there are no moral or ethical consequences in the implementation of management visits, as the majority of respondents answered neutrally. This indicates that the quality of service in hospitals needs to be improved further (Fatriyawan dan Safitri, 2022).

The research on opportunity indicators shows that the majority of respondents agree that management visits do not interfere with priorities. Opportunity is the condition of potential growth in the future. The situation that occurs is an opportunity from the

activities carried out, such as management visits to the raft house, which impacts the improvement of service quality and helps enhance service quality. "Relevance or connection, because if there are management visits, at the very least we know the shortcomings in the room." So, to follow up on what needs improvement, it should be updated again, and there must be actions taken in the room to achieve it. It is also beneficial in improving the quality of service. "Helping to develop from the existing shortcomings, for example, there are inputs from the obstetrics and gynecology department, so it can serve as input for the obstetrics and gynecology department." (Informant 5 and Informant 6).

The results of the research on the indicators of effectiveness and coherence show that the majority of respondents agreed that management visits have a positive impact on the improvement of service quality and assist in enhancing service quality. The quality of healthcare services depends on the effectiveness related to healthcare service norms and clinical guidelines in accordance with existing standards. Effective healthcare services are part of service quality, which is one of the factors that can influence the quality of care (Ulfa Mutmainnah et al, 2021). The role of the hospital towards patients is to provide the best possible service in order to meet their desired needs. The application of work effectiveness serves as the foundation for performance in executing every program, ensuring that each plan and its implementation are on target (Ambia, 2018).

Research related to indicators of self-confidence and the involvement of medical staff in management visit activities mostly indicates self-confidence. The involvement of medical personnel can be seen from participation in training, participation in teams, clinicians involved in projects, and clinical departments in hospitals that have officially organized projects. This is important for the improvement of the quality management system in hospitals (Manurung et al, 2021). The factors that dominate or influence work quality are self-confidence manifested in assertive and decisive attitudes, viewing failure as a beneficial experience, being optimistic,

creative, and having self-esteem. These will affect work quality in terms of responsibility, cooperation, leadership, loyalty, and work discipline (Manurung et al, 2021).

CONCLUSION

From the qualitative and quantitative research conducted, it appears that the majority of respondents understand the purpose and intent of management visits. However, in terms of ethics, the sense of responsibility in carrying out management visits is less compared to other indicators. There is no significant influence of internal factor variables (age, unit, and education) on staff perceptions. The research results indicate that there is a significant influence of staff perceptions on the improvement of service quality, with a correlation value of P-Value = 0.000. This finding is supported by in-depth interviews, which reveal that the acceptance by medical staff is positive.

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