

Operational Business Planning: Upgrading the Pademangan Regional Hospital from Class D to Class C

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Abstract: The objective of the business plan on Upgrading Program of Pademangan Regional Public Hospital from Class D to Class C, is to become profitable regional public hospital in 2025, through establishing a safe and quality health care, whereby it is expected that all Indonesian people will have BPJS insurance card by 2019. The Operational Stages of Upgrading the Pademangan Regional Public Hospital from Class D to Class C consist of service blueprint, inventory management, environmental waste control and implementation of safety to patients.

Key Words: Upgrading the Pademangan Regional Hospital from Class D to Class C, Service blueprint, Type of services, Inventory Management, environmental waste control, safety to patients

I. INTRODUCTION

Hospital is defined as an integral part and health-social organization assigned to provide a complete, curative, preventive services, and at the same time as a training center for health care professionals and a medical research center. The regime of National Health Insurance that was launched by the government in 2014 has increased the demand of a quality and affordable health care. However, the number of such health care facilities is still unable to meet that demand. Referring to the Law No. 44/2009 on Hospital, health care is the right of all people and assured by the Indonesian 1945 Constitution that must be realized by the increased of community health degree as high as possible. Pademangan Regional Public Hospital is located on jalan Budi Mulia Raya no 2 Pademangan Barat Jakarta Utara that stand on a 2790 m² of land and 4 storey building. Pademangan Regional Public Hospital start to operate on April 6th 2015. It was a Sub-District Primary Care Unit (Puskesmas) in Pademangan based on Governor of DKI Jakarta Regulation No. 1024/2014. The change of status was done with the objective to improve the health care for the people. It was expected the change of status will prevent over-patients to happen in type B Hospitals.

However, currently there is a shift of paradigm, from a non-profit into a profitable hospital. The ever-changing market demand may shift the hospital function from having a social function into now becoming a business and take into consideration the economic, legal and politic factors. From the revenue side, Class C hospitals have a higher income than Class D hospitals. Judging from the revenue perspective, Pademangan Regional Public Hospital has the opportunity to upgrade its services from a Class D hospital into a Class C hospital, because there is a significant difference of tariff. The business environment analysis of a company may become the driving or inhibiting factor of the organization and conversely, the organization activities may affect the nearby environment. Pademangan Regional Public Hospital really pay attention to its business environment, both internally and externally. Hospital business environment framework consists of Politic, Economic, Social-Culture and Technology, Supply Demand, Industry and Five Force. The Politic, Economic, Social-culture, and Technology Environment of the Pademangan Regional Public hospital that previously was a class D hospital has always comply to all the regulations when implementing its roles and functions.

In delivering the services, Pademangan Regional Public Hospital accept patients who are covered by the BPJS scheme, almost 90% of its patients are BPJS covered patients. The economic environment of the Pademangan Regional Public Hospital applies the principle of the more patients (volume) who are coming to the hospital, the more the revenue will be. The social-culture environment in the Pademangan sub-district has contributions towards the development of the Pademangan Regional Public Hospital. The people's life is influenced by the local culture may provide a business opportunity to the Pademangan Regional Public Hospital. Especially the unhealthy lifestyle of the local community the environment of the home that doesn't consider the importance of maintaining the hygiene and healthy lifestyle becomes an important point that may lead to introduction of many diseases. The technology environment, in responding to the medical technology development, Pademangan Regional Public Hospital will increase the use of the technology that

exists in the hospital, either that is the medical supporting tools hospital systems that support the medical services pursuant to the patients' needs, such as: three dimensional radiology display, Infection Monitoring System, Nurse Communication System, Improving the Security Encryption, firewall and spam Business Inteligent – Clinical, Real Time Location System From the business environment side, Pademangan Regional Public Hospital, economic wise, there is a possibility to utilize COB-working-together-with private insurance, the cooperation can be in the form of Coordination of Benefit (COB). At the moment there are fifty one private insurance companies who implement the COB mechanism. Pademangan Regional Public Hospital sees that the health care industry is really influencing the health care to be in accordance with the patients' expectation. Because almost all patients would like to have a fast, accurate, and affordable service, thus in its development, the hospital will be upgraded from class D hospital into class C hospital. What differentiate Class D and Class C, is the hospital's capability to provide different type of services, and also the supporting equipment that may assist doctor to ensure patients diagnose. We use five competitive forces theory from Michael Porter for the business development plan of Pademangan Regional Public Hospital from Class D to Class C. This is used to analyze the business competition in hospital industry. Porter (2008) stated that there are five factors that influence business competition. This theory is used because it provides a strong and complete illustration on the level of competition of hospital industry business both from the side of supply, buyer, new entrants, and substitute.

The four factors will illustrate the most important factors in determining the hospital development strategy. Which resulted with the supply and buyer having strong force, competition in the industry and the threat from new entrants are low, and substitution are considered having low force as well, because services provided are not the same with the services available in the Pademangan Regional Public Hospital. Considering the Porter's analysis then the Pademangan Regional Public Hospital business plan to upgrade it into Class C is very promising. This haven't considering the opportunity and threat analysis where hospital actually has many opportunity like Pademangan population density to become source of revenue, the cooperation with insurance companies, government support in financing the hospital, distance with other hospitals that are considered very far, support from the North Jakarta Health Office to provide referral to the Pademangan Regional Public Hospital. While the threats faced by Pademangan Regional Public Hospital are considered low. Pademangan Regional Public Hospital has superior services and the tariff is considered lower since it is a public hospital, this make threat from similar competitor, no longer exist. Class C hospital is part of general health facility of city or district level, because in Jakarta is a special zone, therefore, it may be established in sub-district level. Not to mention the fact that previously a Class D hospital with facility and capacity of an adequate medical services like four basic specialized and four supporting specialized services already exist. In order to achieve the medical services quality and capacity in Class C hospital, then it has to be supported with a well plan, good and correct hospital's facilities and infrastructures. Pademangan Regional Public Hospital has the following visions: to become the people-preferred Hospital that able to provide a quality health care, while the missions are as follows:

- 1) Provide a fast, accurate health care to the people by referring to the believed values
- 2) Provide a high-quality health care that oriented to patient's safety standard.
- 3) Provide high technology infrastructure and facilities in health care.
- 4) Developing reliable and skillful human resources who have strong dedication for the sake of company's advancement.

The Pademangan Regional Public Hospital also has the following values: collaboration, commitment, integrity, trustworthy, and empathy. While the short term, medium term and long term objectives are as follows:

1. Short term objectives: To provide high quality health care to the people. Pademangan Regional Public Hospital as stated by the Law No. 44/2009 on Hospitals, that health care is the right of every people and assured by the 1945 Constitution which must be realized by the increased of community health degree as high as possible.
2. Mid-term objectives: to ensure the successful National Health Insurance service delivery by 2019.
3. Long-term objectives: to become a profitable regional public hospital by 2025, by establishing a safe and high quality health care, where it is expected that all Indonesian people would already have insurance especially BPJS.

II. LITERATURE REVIEW

To determine the feasibility whether this hospital business may provide a good and profitable opportunity and potential, the following evaluation were done by using matrices like opportunity, threat, weakness and strength.

Table 1 Opportunity

NO	Opportunity	Weight	Rank	Score
1	Population Density	0,1	4	0,4
2	Support from Regional Government in Hospital Financing	0,05	4	0,2
3	Cooperation between hospital and BPJS (National Health Insurance Company)	0,05	3	0,15
4	Hospital location that close to big corporations (PT Indofood, PT Jaya Ancol, PT Asahimas, High Stars hotel)	0,05	3	0,15
5	Distance to other public hospitals are quite far (10 KM)	0,1	3	0,3
6	Support from North Jakarta Health Office to provide referral services, both from primary health care units (Puskesmas) and Class D hospitals	0,15	3	0,45
Total		0,5		1,65

Table 2 Threat

NO	Threat	BOBOT	PERINGKAT	SKOR
1	Rumah sakit kompetitor mempunyai layanan sejenis	0,2	2	0,4
2	Kemungkinan beralihnya pasien ke Rumah Sakit yang fasilitasnya lebih lengkap	0,2	2	0,4
3	Lingkungan pemukiman rawan banjir	0,1	3	0,3
Jumlah		0,5		1,1

Tabel 3 Strength

NO	STRENGTH	BOBOT	PERINGKAT	SKOR
1	Tenaga profesional yang berkualitas	0,25	4	1
2	Pelayanan yang cepat dan ramah	0,05	4	0,2
3	Sudah terakreditasi Program Khusus Rumah Sakit	0,05	4	0,2
4	Lokasi Rumah Sakit yang strategis dan mudah dijangkau	0,05	4	0,2
5	Tarif Kompetitif	0,1	4	0,4
Jumlah		0,5		2,00

Tabel 4 Weakness

NO	Weakness	BOBOT	PERINGKAT	SKOR
1	Kurangnya tenaga dokter spesialis	0,2	2	0,4
2	Kapasitas tempat tidur masih 54	0,10	1	0,10
3	Fasilitas peralatan belum tersedia dengan lengkap sesuai standar	0,10	1	0,10
4	Bangunan rumah sakit belum sesuai standard kelas C	0,05	3	0,15
5	Lahan parkir terbatas	0,05	3	0,15
Jumlah		0,5		0,9

Table 5 Formulation of EFE and IFE Strategy Combination

			Total
IFE	Strenght Total= 2,00	Weakness Total 0,90	IFE = 2,9
EFE	Oppportunity Total= 1,65	Threat Total 1,1	EFE = 2,75

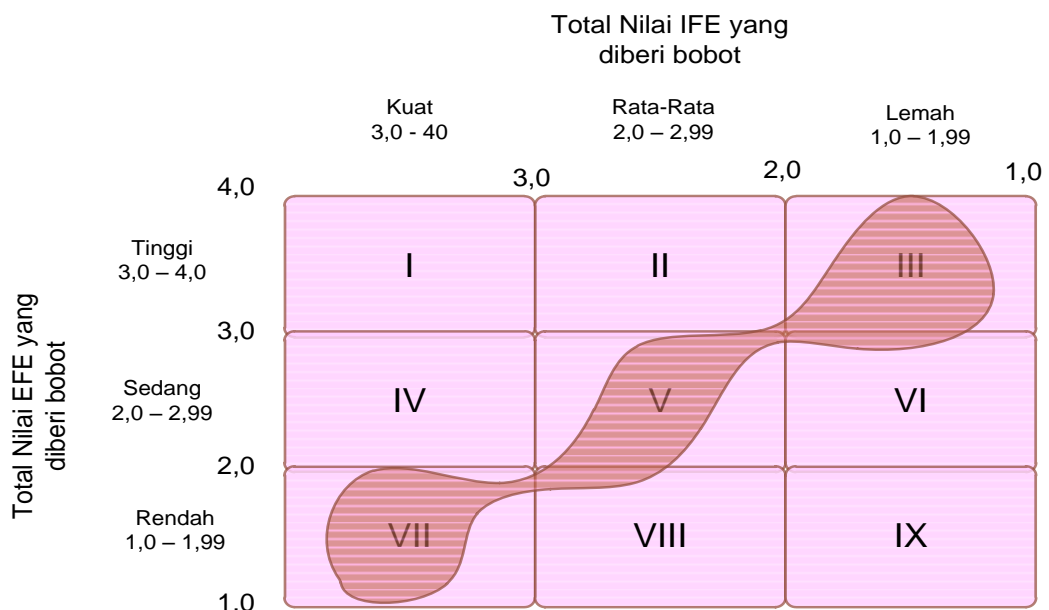


Figure 1 External and Internal Matrix

The analysis of internal and external business environment provides the IFE of 2,9 and EFE of 2,75, therefore, the Pademangan Regional Public Hospital is fall under the fifth cell, which means the strategy to be used is hold and maintenance, which are market penetration and product development. From that strategy Pademangan Regional Public Hospital use market penetration as the main strategy and product development as the alternative strategy. From the matrix above, it can be concluded that by utilizing the government support in financing the hospital may continuously improve the hospital's health care through upgrading the hospital class from Class D to Class C. With the availability of professional health care personnel and consider that as the strength of Pademangan Regional Public Hospital to provide a quality services. Pademangan Regional Public Hospital may become the trustworthy public hospital and become the referral of other hospitals. Since Pademangan Regional Public Hospital has been accredited on hospital with special program, then Pademangan Regional Public Hospital may become a trustworthy hospital and more patients will come to it. Leveraging its strategic and easy location in the promotion comprehensively may increase the hospital's revenue. With a competitive tariff as one of the strength in providing health care to the people in Pademangan sub-district and surrounding community and lastly leveraging the hospital information system to improve the service delivery to the patients In the QSPM quantitative strategy formulation, by using inputs from analysis and matching results of the previous analysis to determine objectively different alternative strategy among EFE SWOT Matrix, IFE Matrix, or combination of SWOT and IFE matrix in order to provide the required information to develop QSPM. The result of quantitative strategy that was produced can be seen in the following figures: The alternative strategy that suitable with Pademangan Regional Public Hospital is market penetration dan product development.

Table 6 QSPM

Faktor-faktor Eksternal Utama	Bobot	Market Penetratio		Produk Develop ment	
		AS	TAS	AS	TAS
A. Peluang (Opportunities)					
1. Kepadatan penduduk	0,1	4	0,4	3	0,3
2. Adanya dukungan pemerintah daerah dalam pembiayaan rumah sakit	0,05	4	0,2	4	0,2
3. Adanya kerja sama antara Rumah Sakit dengan BPJS	0,05	3	0,15	3	0,15
4. Lokasi Rumah Sakit berdekatan dengan perusahaan besar (PT Indofood, PT Jaya Ancol, PT Ashahimas, Hotel berbintang)	0,10	3	0,3	5	0,5
5. Jarak Rumah Sakit pemerintah lainnya dengan Rumah Sakit Umum kelas C Pademangan cukup jauh (10 km)	0,15	3	0,45	3	0,45
6. Adanya dukungan dari Suku Dinas Kesehatan Jakarta Utara untuk fasilitas rujukan, baik dari puskesmas maupun Rumah Sakit Umum Kelas D					
B. Ancaman (Threat)					
1. Rumah Sakit kompetitor mempunyai layanan sejenis	0,2	2	0,4	2	0,4
2. Kemungkinan beralihnya pasien ke Rumah Sakit yang fasilitasnya lebih lengkap	0,2	2	0,4	3	0,6
3. Lingkungan pemukiman rawan banjir	0,1	3	0,3	1	0,1
C. Kekuatan (Strength)					
1. Tenaga profesional yang berkualitas	0,25	4	1	3	0,75
2. Pelayanan Yang Cepat dan Ramah	0,05	4	0,2	2	0,1
3. Sudah terakreditasi Program Khusus Rumah Sakit	0,05	4	0,2	2	0,1
4. Lokasi Rumah Sakit yang strategis dan mudah dijangkau	0,05	4	0,2	3	0,15
5. Tarif Kompetitif	0,1	4	0,4	3	0,3
D. Kelemahan (Weakness)					
1. Kurangnya tenaga dokter spesialis	0,2	2	0,4	2	0,4
2. Kapasitas tempat tidur masih 54	0,10	1	0,10	3	0,3
3. Fasilitas peralatan belum tersedia dengan lengkap sesuai standar	0,10	1	0,10	2	0,2
4. Bangunan rumah sakit belum sesuai standar kelas C	0,05	3	0,15	2	0,1
5. Lahan parkir terbatas	0,05	3	0,15	2	0,1
	2,00		5,65		5,3

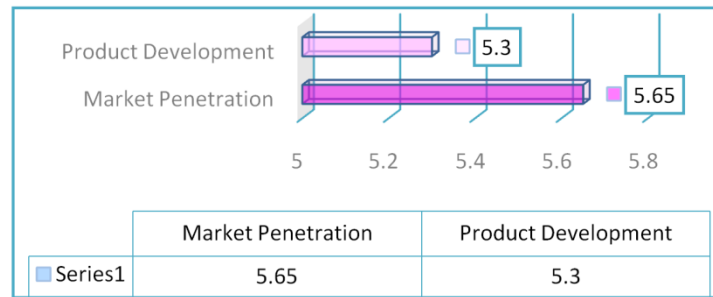


Figure 2 Alternative Strategy

The strategy analysis was using canvas business model. Canvas business model is a strategy on which target to be achieved. Canvas business model also a business strategy management that can be used to illustrate, design, and narrow several strategy aspects into one whole strategy. There are nine important elements in a canvas business model.

Table 7 Canvas Business Model

Key Partners	Key Activities	Value Proposition	Customer Relationships	Customer Segments
<ul style="list-style-type: none"> • Puskesmas • BPJS • Asuransi Kesehatan Swasta • Dinkes Prov DKI • Kemenkes • Perusahaan (Farmasi, Alkes) • PT • Bank 	<ul style="list-style-type: none"> • Pengembangan Kesehatan • Operasional Rumah Sakit • Manajemen Vendor 	<ul style="list-style-type: none"> • Layanan Rawat Jalan • Layanan Rawat Inap • Layanan gawat darurat • Pemeriksaan Penunjang 	<ul style="list-style-type: none"> • Pelayanan Ramah, Cepat, Nyaman 	<ul style="list-style-type: none"> • Pasien Asuransi • Pasien BPJS • Pasien Perusahaan • Pasien Individu
	Key Resources <ul style="list-style-type: none"> • Keahlian Dokter • Pengembangan SDM • Akses ke jaringan • Data Pasien • Fasilitas Bangunan • Kekuatan Keuangan 		Channels <ul style="list-style-type: none"> • Poliklinik • IGD • Rawat Inap • ICU, HCU • Kamar Bedah • Farmasi • Laboratorium • Radiologi 	
Cost Structure <ul style="list-style-type: none"> • Biaya Pelayanan • Biaya operasional 		Revenue Streams <ul style="list-style-type: none"> • Rawat Jalan • Rawat Inap • Tindakan 		

METHODOLOGI: There are 5 (five) major steps in doing this research, which are Problem Identification, Literature study, Data Collection, Data Processing and Analyzing, and Conclusion and Recommendation. These steps need to be taken in order to complete the project. First, it needs to do problem identification from the research, so it will see the problem more clearly. This step is about defining the problem, and determining the research objectives. The objective on this project is to determine the feasibility of the project whether this project is feasible or not, based on the swot analysis and QSPM quantitative strategy formulation. Literature reviews in this project are intended to help reader to get the information needed to understand this project. It provides literature study to help reader to get the information needed. The literature reviews about this project are taken from several sources and media, which are printed books, brochures, article from the internet, government regulation, interview with people involved in health industry, interview with prospective clients, and printed reports from related feasibility projects.

ANALYST: Pademangan Regional Public Hospital that focuses in health care, has operational strategy stages, among others are: service blueprint, inventory management, waste and environment control and implementation of patient safety. Hospital blueprint is an illustration or map that describes accurately a system of service in such way so it will be easy for an officer to understand, in this regard Pademangan Regional Public Hospital already eligible in terms of number of type of services. In the general medical services there is an addition of DOTS clinic (in the Minister of Health Regulation No. 56/2014, there isn't any DOTS clinic in Class C and Class D hospitals). Pademangan Regional Public Hospital also provide eye clinic which included in other specialized services (in Minister of Health Regulation No. 56/2015 only available in Class B and Class A Hospital). This because Pademangan Regional Public Hospital already equipment for eye since it was still a Pademangan Sub-district primary health care (Puskesmas). Pademangan Regional Public Hospital also provide prosthodonti dan orthodonti services (in Minister of Health Regulation No. 56/2014, this specialized services only exist in Class C hospitals), this is because prosthodonti doctor was a transfer from Pademangan Sub-district primary health care, due to high demand from the patients.

Table: 8 Type of Services available in Class D, Class C Hospitals, and in Pademangan Regional Public Hospital.

NO	Kelas D	RSUD PADEMANGAN	KELAS C
I Pelayanan			
A Pelayanan Medik Umum			
1	Pelayanan Medik Dasar	Pelayanan Medik Dasar	Pelayanan Medik Dasar
2	Pelayanan Medik Gigi Mulut	Pelayanan Medik Gigi Mulut	Pelayanan Medik Gigi Mulut
3	Pelayanan KIA/KB	Pelayanan KIA/KB	Pelayanan KIA/KB
4	-	Pelayanan Poli TB Dots	-
B. Pelayanan Gawat Darurat			
1	24 Jam & 7 hari Seminggu	24 Jam & 7 hari Seminggu	24 Jam & 7 hari Seminggu
C. Pelayanan Medik Spesialis Dasar			
1	Penyakit Dalam	Penyakit Dalam	Penyakit Dalam
2	Kesehatan Anak	Kesehatan Anak	Kesehatan Anak
3	Bedah	Bedah	Bedah
4	Obstetri dan Ginekologi	Obstetri dan Ginekologi	Obstetri dan Ginekologi
D. Pelayanan Spesialis Penunjang Klinik			
1	Radiologi	Radiologi	Radiologi
2	Patalogi Klinik	Patalogi Klinik	Patalogi Klinik
3	-	Anestesiologi	Anestesiologi
4	-	Rehabilitasi Medik	Rehabilitasi Medik

E. Pelayanan Medik Spesialis Lain			
1	-	Mata	-
2	-	Telinga Hidung Tenggorokan	-
3	-	Neurologi	-
4	-	Poli Paru	-
F. Pelayanan Spesialis Gigi & Mulut			
1	-	Prosthodonti	Prosthodonti +/-
2	-	Orthodonti	Orthodonti +/-
3	-	-	Bedah Mulut +/-
4	-	-	Konservasi/endondosi +/-
5	-	-	Periodonti +/-
6	-	-	Pedodonti +/-
7	-	-	Penyakit Mulut +/-

Pademangan Regional Public Hospital will develop a Child Growth and Development services, since there are many children below 5 years old who like to play gadgets. Based on medical rehabilitation specialist, those children were unable to maintain eye contact and delayed speech due to the gadgets unable to provide the stimulus or interactions (only one way) that required by children, and to address this issue, communication therapy is needed.

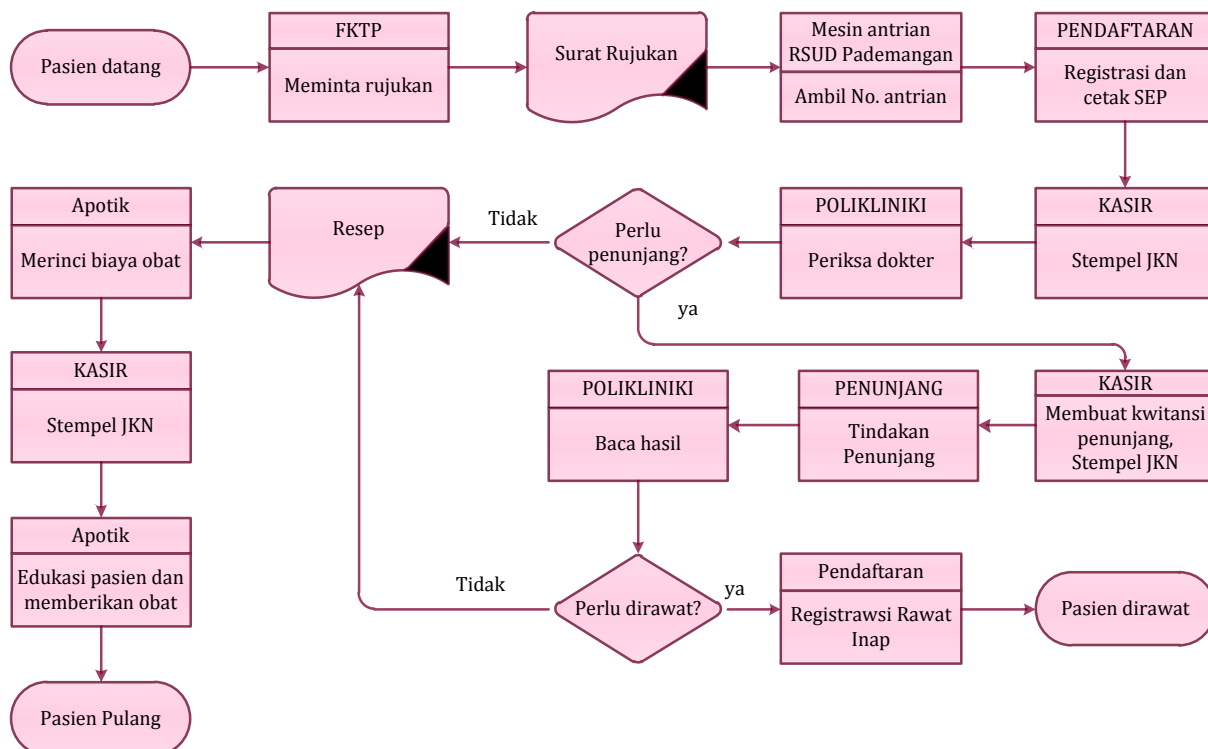


Figure 3 Flow Chart of BPJS Out-Patients in Pademangan Regional Public Hospital before using SIMRS

- Patient come to primary health care (puskesmas or clinic) examined by the physician, and then referred to Pademangan Regional Public Hospital since the primary health care were unable to provide the services that the patient needed.
- Patient then come to Pademangan Regional Public Hospital (with referral letter) and then take registration queue number.
- In the registration, patient then do re-registration and submitting the files and referral letter received from the primary health care to access the relevant specialized clinic, the registration then printed patient eligibility letter (SEP) as proof of registration and submit that to the relevant specialized clinic.

- d. Patient then goes to the relevant clinic and get examined, if supporting intervention is required then the patient must goes to the cashier first to pay the supporting intervention (laboratory/radiology) and obtaining the JKN stamp, while for patients who do not require supporting intervention (laboratory/radiology) patient then obtain prescription from the physician, which then go to the pharmacy to obtain the medication..
- e. Supporting (laboratory/radiology) performing intervention to the patients and then the result of that supporting intervention (laboratory/radiology) is given to the previous physician, if the patients required hospitalization, then the patients must first register themselves, to the inpatient officers, if the patients don't require hospitalization, then the patients can go to pharmacy to submit the prescription.
- f. Pharmacy accept the prescription and provide the detailed price for the medication to the patient and the patient is requested to go to the cashier to be verified and to receive the JKN stamp, where the patient then return to the pharmacy to submit the prescription that already stamped by the cashier.
- g. Patient then wait for the medication, where the pharmacist then provide explanation on how to take the medication, then send the patient home.

While the flow of BPJS outpatient after using SIMRS, are as follows:

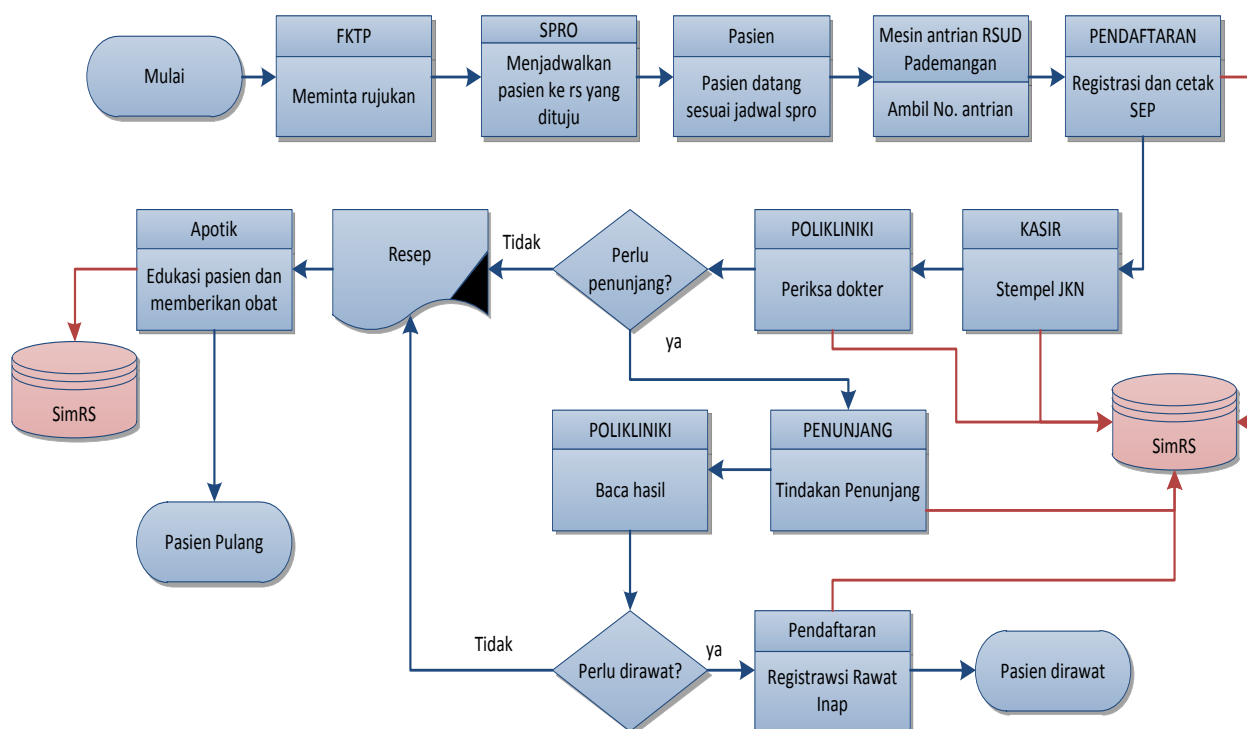


Figure 4 Flow of RSUD Pademangan BPJS Out Patient after using SIMRS

Flow of RSUD Pademangan BPJS Out Patient after using SIMRS, the process became shorter than the previous one, there are two stages that were removed when using SIMRS, which are the going to cashier part. First, patients don't have to go to cashier anymore when supporting intervention is required, since this will consume a lot of time for the patient, patient may spent 5 until 10 minutes just to wait for the cashier prepare a receipt of supporting intervention, that even when the cashier was not crowded. Secondly, patient no longer required to go to cashier to obtain the JKN stamp when submitting prescription that already detailed by the pharmacist, this is really not effective, patient must do double works after receiving prescription from the doctor, patient then directed to go to the pharmacy then to cashier again to obtain the medication, from that process can consume around 10-15 minutes, all have been integrated by the system and cashier will recap the data through SIMRS and prepare reports to claim that to BPJS. When waste in services is addressed, then hospital operationalization will not undermine the inventory both disposable medical or non-medical supplies. Pademangan Regional Public Hospital uses SIMRS application to recap the inventory data, when the goods going in or out the supply warehouse. The management medical goods or medicine, every unit must first submit a request of medical or medicine in accordance to the flow and standard operating procedure applicable in Pademangan Regional Public Hospital. While for medicine stock, the pharmacist will re-stock the medicines, when the stock level reaches 30-40%, pharmacist then order those medicines to the drug companies.



Figure 5 Infectious and Non-infectious Waste Collection in Pademangan Regional Public Hospital

For waste management, Pademangan Regional Public Hospital manage the waste pursuant to Minister of Health Decision No. 1204/Menkes/SK/X/2004 on hospital environment health requirements. Hospital wastes are all hospital wastes in the form of solid, liquid and gas. Solid hospital wastes are solid wastes that consist of infectious wastes, pathological wastes, sharp object wastes, pharmacy wastes, chemical wastes, radioactive wastes, container wastes, cytotoxic wastes, radiotherapy wastes. Infectious wastes are stored in the trash bin using yellow color plastic. Sharp solid wastes, like needle, glasses, small pipes are stored inside a container. Non medical solid waste consists of waste produced from the kitchen activities, office activities or other activities. To exterminate the solid medical wastes, Pademangan Regional Public Hospital working with PT Arah environmental Indonesia, that agreement are extended every year based on the agreement. Before taken by the PT Arah environmental Indonesia, we collect the solid medical wastes in a locked and secured container; the officer who handles it must use helmet/hat, mask, special gloves, foot protector/safety shoes, eye protector and long shirt. PT Arah Environmental then collect the trash three times in one week. Non-medical solid wastes disposal area in Pademangan Regional Public Hospital has segregated organic and non-organic wastes. The temporary storage area must be waterproofed, closed, easy to clean. For the disposal, Pademangan Regional Public School has worked with the Sanitation Office in the sub-district level, where the collection is done on daily basis.

In providing health care, an already accredited hospital will apply patient's safety standard in accordance to Hospital Accreditation Commission. Patient's safety is a system that make patient's treatment safer, covers risk assessment, risk identification and management, reporting and incident analysis. The capacity to analyze incident and it follow up action, and the implementation of solution to minimize risks and to prevent injury due to the error in taking or not taking an action. Patient's safety Incident is any unintentional incident and condition that potentially cause injury and is preventable. Thus, all patients who are treated become safer due to the using of patient safety standard. Patient's safety goals become the major requirements in KARS accreditation, the intention of patient's safety goals is to promote specific improvements in patient's safety, which highlights the troubled parts in the health care delivery. Improving the system design will provide a safe and high quality health care and focused on the overall system solutions. In accordance to hospital accreditation standard, that in treating the patients, hospitals must apply patients safety goals.

There are 6 goals, which are:

- 1) Patient's identification accuracy.
- 2) Effective communication improvement
- 3) Improving the high-alert medicines security.
- 4) The certainty on right-location, right-procedure, right-patient operation.
- 5) Reducing the infection risk of health care
- 6) Reducing the injury risk due to the fell of patients.

The safety team of Pademangan Regional Public Hospital has the following activities: Regular dissemination, patient safety rounds, monitoring and evaluation of patient safety goals and also documenting end evaluating the patient's safety goals and also takes note on the Patient Safety Incident. Nosocomial infection is a type of infection that got from the hospital and the spread of this kind of infection may happen between employee, from health care personnel and hospital's visitors. The cross infections control becomes the priority of the Pademangan Regional Public Hospital. In the practice, health care personnel, will experience difficulties to understand whether or not patient is infected or not, health care personnel must apply universal awareness with all patients, by applying the following. Wash hand by following the five moment Hand hygiene based on WHO standards, Handling of disposable needle sesuai dengan WHO by disposing the needle and other sharp objects safely, Handling spill of patient body liquid, must be cleaned and disinfected with the right material. Follow the standards for the medial equipment sterilization and disinfectant. Handle all materials that have been contaminated by body liquid in accordance to the procedures. Dispose wastes in accordance to the procedures.

CONCLUSION

To address business competition, Pademangan Regional Public Hospital, apply the market penetration strategy. Registration is now accessible through whatsapp, BBM, for referral patient from primary health unit, can register themselves through SPRO (Online Referral System), website-based application also provide information on the specialists, their schedule, what kind of services that are provided and its tariff, and there is also a doctor consultation services.

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