

IMPLEMENTATION OF REGIONAL PUBLIC HOSPITAL DEVELOPMENT POLICY IN IMPROVING HEALTH SERVICES IN ANAMBAS ISLANDS REGENCY, RIAU ISLANDS

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ABSTRACT

Anambas Islands Regency is an autonomous region that consists of a cluster of large and small islands scattered throughout its administrative area with a total of 238 islands. In terms of health services, Anambas Island Regency requires support regarding the availability of adequate infrastructures due to its status as an archipelagic regency located in the border area. To meet the needs of society for health facilities, The Regional Government built the Class C Regional Public Hospital as the target of health affairs development, as regulated in the Regional Regulation of Anambas Islands Regency Number 08 of 2011 concerning the Medium-term Development Plans of 2011-2015. This study is aimed to analyze and describe the implementation of hospital development policies, analyze and describe the supporting and inhibiting factors faced in implementing the Hospital Development Policy, and describe the concepts offered to the Regional Government in implementing the Hospital Development Policy in improving health services in Anambas Islands Regency. This study used explorative research methods with a qualitative approach to explore the identified issues, especially regarding the optimum level of policy implementation along with the obstacles in the process. Data used in this research consists of primary and secondary data obtained through observation, interview, and documentation. In data processing, the researcher used the Grindle policy implementation model to explain the implementation of hospital development policy to improve the health services in Anambas Islands Regency. The result of the study shows that the Implementation of Regional Public Hospital Development Policy in Improving Health Services in Anambas Islands Regency, Riau Islands Province has been implemented although the implementation itself has not been optimal, especially seen from the aspect of the context policy that includes: power, interest, and strategies of the actor involved; institution and regime characteristics; and compliance and responsiveness. Meanwhile, from the aspect of policy content, conditions that are not yet optimal can be seen from the type of benefits; the extent of change envisioned; as well as the program implementer. Other conditions indicated by the interest affected; site of decision making; and committed resources have been running relatively better towards optimal. Supporting factors in the policy implementation can be seen from the Political Will of Regional Leaders and related work units, as well as the involvement of the Guard, Government Safeguard, and Regional Development Team. Inhibiting factors in the policy implementation comprise the absence of project handover to the authorized party, the incompleteness of supporting facilities, the inadequacy of specialist doctors and medical equipment, the legal problem encountered during the process, and the weak coordination between the related work units. The appropriate concept applied in Anambas Islands Regency is PONEK (Pelayanan Obstetri Neonatal Emergensi Komprehensif /comprehensive emergency neonatal obstetrical services) hospital that capable of 24-hour operation hours.

Key words; Policy Implementation, Grindle Model, Hospital, Anambas Islands Regency

INTRODUCTION

In the regional autonomy era, society's demands begin to emerge and they may become more varied and complex during the time. The development of society also may lead to the increasing of their demand regarding the quality of public services. Besides, the unintegrated planning within the interregional planning and planning between the central government and the autonomous regions still poses a major issue that needs to be addressed (Ramses, 2016). In this case,

the Government must protect, serve, and regulate the people which are basically to "provide services" to fulfill the public interest and overcome problems in the public affair (Surjadi, 2009). Moreover, the rising of public pressure in this era has made the people increasingly critical of their rights, one of them is health service.

The 1948 Universal Declaration of Human Rights mentioned that health is part of the right to adequate living for everyone. Moreover, Indonesia's constitution also guarantees the right to health for

the people, as stated in the 1945 Constitution of the Republic Indonesia article 28 H verse 1 that says "Every person shall have the right to live in physical and spiritual prosperity, to have a home and to enjoy a good and healthy environment, and shall have the right to obtain medical care". The reformation era in the field of health services is characterized by the implementation of quality assurance in the services (Pohan, 2004). Generally, there are several aspects of health services that may affect the health status of individuals and communities, namely the facilities, health workers, costs, and service systems (Putri, 2018). Therefore, the Government is responsible to provide adequate health facilities to accommodate the communities' needs for optimum health services.

Anambas Island Regency is an autonomous region resulting from the division of Natuna Regency which consists of a cluster of large and small islands scattered throughout its administrative area with a total of 238 islands. In terms of health services, Anambas Island Regency requires full support regarding the availability of adequate infrastructures due to its status as an archipelagic regency located in the border area. According to data processed by Badan Pusat Statistik/Statistics Indonesia in 2015, it is recorded that the health infrastructures in Anambas Island Regency comprise of two 2 hospitals, 7 primary health care centers, and 49 auxiliary primary health care centers. Since 2013, the number of hospitals and primary health care centers remained unchanged, meanwhile, the number of auxiliary primary health care centers increased significantly from 31 units in 2013, then rose to 42 units in 2014, and finally reached 49 units in 2015 (BPS, 2015). The limited facilities and infrastructure may limit the community in obtaining optimal health services since it can lead to the referral of patients to hospitals in other locations that require longer travel time, which can hamper the treatment process and lead to the increased cost for transportation and accommodation.

In consequence, to meet the needs of society for health facilities, The Government of Anambas Islands Regency established the development of Class C Regional Public Hospital as the target of health affairs development, as regulated in the Regional Regulation of Anambas Islands Regency Number 08 of 2011 concerning the Medium-term

Development Plans of 2011-2015. Furthermore, the development of this hospital is issued as the main priority program in the Medium-term Development Plans of 2016-2021. However, the development process in 2014-2015 was considered unsuitable with the planning methods stated in the Medium-term Development Plans of 2011-2015. The hospital that had been built was not by Class C hospitals, this might implicate the completion target of the hospital construction that set in the 2016-2021 Medium-term development priorities, which are planned to be inaugurated no later than 2017, but during the process, it has encountered obstacles and cannot be carried out as intended. Also, the condition of the hospital itself is considered inadequate due to the absence of medical equipment with the damaged building. Hence, this condition implies that it is necessary to increase the budget allocation for the construction of supporting facilities that are not yet by Class C hospital type, as regulated in the Regulation of the Minister of Health Number 56 of 2014 concerning Hospital Classification and Licensing.

Due to the demand for the government to immediately realize the operationalization of the hospital, the Regent of the Anambas Islands on 12 November 2018 inaugurated the operation of the hospital as a Class D Regional Hospital even though the construction of several infrastructures was remained incomplete and there was an incompatibility with the initial planning stated in the Medium-term Development Plans of 2011-2015, which was issued for the development of Class C hospital.

With the facts stated above, this phenomenon will not occur if the Development Implementation Policy can be implemented properly and hospital operations can be carried out accordingly to improve health services in Anambas Islands Regency. To respond to this issue, the researcher conducted this study to analyze and describe the implementation of hospital development policies, analyze and describe the supporting and inhibiting factors faced in implementing the Hospital Development Policy, and describe the concepts offered to the Anambas Islands Regency Government in implementing the Hospital Development Policy in improving health services in Anambas Islands Regency.

METHOD

This study used explorative research methods with a qualitative approach to explore the identified issues, especially regarding the optimum level of policy implementation in developing the general hospital along with the obstacles in the process. Data used in this research consists of primary and secondary data obtained through various techniques, such as observation, interview, and documentation. To obtain thorough data and information, the researcher conducted a purposive technique by determining the informants that are considered to be competent and knowledgeable regarding the issue, such as The Regent; Head of Referral Health Services Section of Riau Islands Province; Head of the Hospital Referral and Monitoring Sub-directorate of the Ministry of Health; Secretary of The Health, Population Control, and Family Planning Office of Anambas

Island Regency; Head of the Public Works, Spatial Planning, Housing, and Settlement Area Office of Anambas Island Regency; Head of Social, Culture, and Economy Division of Regional Research and Development Planning Agency; Head of Commission II Regional People's Representative Assembly; and Tarempa State's Attorney Office. As for the informants from the community, the researcher conducted a snowball technique.

In data processing, the researcher used the Grindle policy implementation model (Grindle, 1980) (Figure 1) to explain the policy implementation in developing the regional public hospital to improve the health services in Anambas Islands Regency. As for data validation, the researcher conducted data triangulation involving the informants and data cross-check.

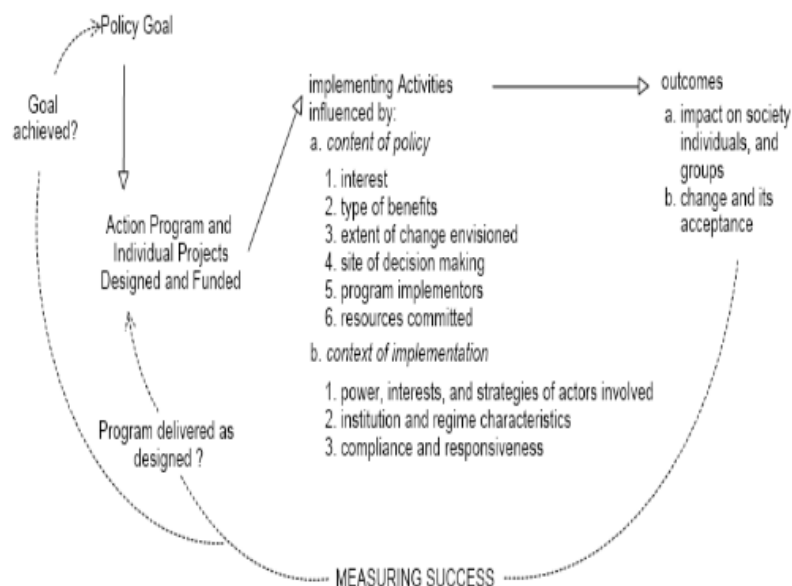


Figure 1. Grindle Policy Implementation Model (Grindle, 1980)

RESULTS AND DISCUSSION

1. Implementation of Regional Public Hospital Development Policy In Improving Health Services In Anambas Islands Regency, Riau Islands

Grindle (1980) stated that the success of policy implementation is determined by the implementability level of the policy itself that can be analyzed by observing the content of the policy and context of implementation.

1.1 Content of Policy

a. Interests Affected

In terms of its implementation, a policy may involve many interests and to what extent these interests influence its implementation. According to the interview, parties that involved in the Regional Public Hospital Development policy at the regional level were the Public Works, Spatial Planning, Housing, and Settlement Area Office as the executor, with Investment, Integrated One-Stop Service, Transmigration, and Labour Office; Regional Research and Development Planning Agency; Regional Leader;

Regional People's Representative Assembly; Regional Government Budget Team; and Guard, Government Safeguard, and Regional Development Team. Meanwhile, the interview result also shows that The Health, Population Control, and Family Planning Office of Anambas Island Regency had not been involved in the policy implementation of the hospital development during the development process, although the involvement was initiated later after the completion of the hospital development. On the other hand, the involvement of the Health Office of Riau Islands Province also occurred after the development was completed, which was for visitation agenda and application for hospital operational permit.

Based on the findings, the interests that benefit from the implementation of the Regional Public Hospital Development Policy are the community and the Regional Government. Benefits for the community if this policy goes well that the patients will no longer be required to be transferred to other hospitals in different cities that causes additional costs for patients. For the Regional government, the implementation of this policy will support the achievement of the regional vision and mission stated in the Medium-term Development Plan.

b. Type of Benefit

The benefit of the implementation of Regional Public Hospital in Anambas Island for the community is the assurance of adequate health services by reducing the cost of transportation and accommodation. Meanwhile, for the regional government, having a fully functioned hospital can

reduce the number of referred patients to the hospitals outside the region.

Nevertheless, according to the field observation, the researcher found that the services available in the hospital have not been optimum, since there were still patients who were referred to a hospital in Tanjungpinang, which required a ferry boat to reach from Anambas Island Regency (Figure 2). This finding is also supported by public statements stating that the facilities available at the hospital were still minimal that unable to provide optimal services for the community. In conclusion, the policy implementation of hospital development has not provided substantial benefits for the communities and the regional government.

c. The Extent of Change Envisioned

According to the observation conducted by the researcher, there were still several obstacles that had been identified after the completion of the hospital development, such as the room conditions that had not met the standards and the incompleteness of the supporting facilities (Figure 3). Meanwhile, the interview results showed that the implementation of hospital development policy is a form of commitment from the regional government in terms of the improvement of health services by providing an adequate facility for the community. However, the implementation itself has not been by the desired extent of change because there are requirements regarding the building condition, infrastructures, and permit that has not been implemented that affects the expected extent of change.



Source: Documentation of The Researcher

Figure 2. The Condition of The Referred Patients to Hospital in Tanjungpinang



Source: Documentation of The Researcher

Figure 3. Existing Condition of The Regional Public Hospital in 2019

d. Site of Decision Making

Apart from the regional government, the implementation of hospital development policy also involved the Guard, Government Safeguard, and Regional Development Team from the Ranai State Prosecutor's Office in the decision making. This finding is supported by the documentation of the follow-up evaluation meeting for the hospital development in Anambas Islands Regency that took place in the Regional Research and Development Planning Agency Meeting Room on April 10, 2017, which showed the request for legal opinions from the Guard, Government Safeguard, and

Regional Development Team. The involvement of the team was initiated by the report regarding the potency of state losses. Furthermore, the involvement of the parties in decision making is important to ensure that the policy objectives can be achieved by the objectives that have been set.

e. Program Implementor

The implementation of a policy needs to be supported by competent and capable implementors for the success of the policy. The readiness of policy implementors can be characterized by the capabilities, whether the technical, managerial, planning or controlling skills.

The Public Works, Spatial Planning, Housing, and Settlement Area Office of Anambas Islands Regency served a role as a main executor in the hospital development, meanwhile, the Health, Population Control, and Family Planning Office of Anambas Islands Regency served a role as a user. According to the interview, there had been no official project handover from the executor to the user. Furthermore, based on the findings from the documentation of the follow-up evaluation meeting for the hospital development in Anambas Islands Regency on April 10, 2017, the hospital development was not by the Regulation of Minister of Health Number 340 of 2010 concerning the Hospital Classification due to the absence of laboratory and radiology room. Moreover, the construction and operational permit also had not been fulfilled. Thus, it can be concluded that as executor of the program, The Public Works, Spatial Planning, Housing, and Settlement Area Office of Anambas Islands Regency does not possess adequate technical competence regarding the Standardization of Public Hospital Development, and also did not make coordination efforts with the Health, Population Control, and Family Planning Office of Anambas Islands Regency, which ultimately led to impacts on technical requirements and unfulfilled licensing requirements.

f. Resource Committed

The success of policy implementation requires support from adequate resources. In the hospital development program, the Regional Government supports the program budgeting as a form of political will from regional leaders. However, the competence of the human resources also serves as a substantial factor in this program, considering this program execution refers to the technical provisions regulated in the Regulation of Minister of Health Number 56 of 2014 concerning the Hospital Classification and Licensing.

1.2 Context of Implementation

a. Power, Interest, and Strategies of Actor Involved

It is necessary to consider the powers, interests, and strategies used by the actors involved in the policy to expedite the process of implementation. It is possible that the policy implementation will not meet the expected results if the process is not planned accordingly. As for the parties who have interests and authority in Implementing the Policy for the hospital development program are the regional government and the public.

In the hospital development program in Anambas Islands Regency, the related parties, including the regional work unit, had applied coordination efforts as a strategy to synchronize the implementation. Based on the documentation findings, it is recorded that the parties had participated in a coordination meeting on January 25, 2017, and a follow-up evaluation meeting on April 10, 2017, that took place in the Regional Research and Development Planning Agency Meeting Room.

According to the interviews, the aforementioned strategy was considered less optimal. Moreover, the role of the Regional Research and Development Planning Agency in ensuring consistency of planning with its implementation was considered inadequate, since the Agency started the coordination efforts with the regional government 2 (two) years after the completion of the development through the coordination and evaluation meetings.

b. Institution and Regime Characteristics

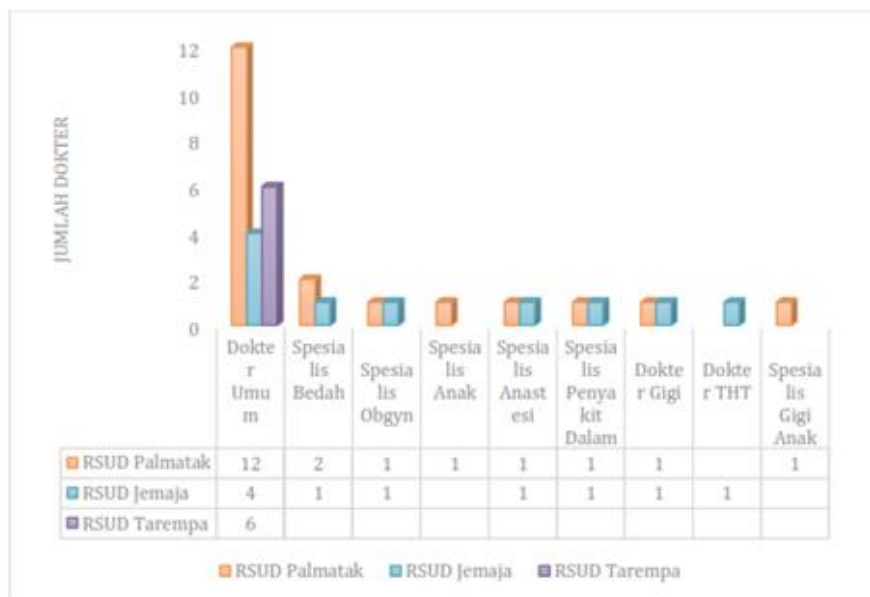
To improve the health facilities in Anambas Islands Regency, the Regional Government established the development of Class C Regional Public Hospital as the target of health affairs development, as regulated in the Regional Regulation of Anambas Islands Regency Number 08 of 2011 concerning the Medium-term Development Plans of 2011-2015. Furthermore, the development of this

hospital is issued as the main priority program in the Medium-term Development Plans of 2016-2021 and the hospital inauguration was targeted in 2017.

Based on the documentation findings, the researcher found that the number of specialist doctors in Anambas Islands Regency (2019) was minimal. The doctor composition in Anambas is dominated by general doctors (Figure 4).

Thus, based on interviews with several informants and documentation conducted by researchers, it can be concluded that the

Regional Public Hospital Development Policy has a good Political Will, namely to increase access to referral health services to the community and reduce patient referrals to other locations. However, the researcher found indications that the development of the hospital was too forced, in addition to the fact that the building condition did not meet the standards as well as the lack of adequate health workers.



Source: The Health, Population Control, And Family Planning Office Of Anambas Islands Regency

Figure 4. The Number Of Doctors In Anambas Islands Regency (2019)

c. Compliance and Responsiveness

Another thing that is important in the process of the implementation of the Regional Public Hospital Development Policy is compliance and responses from the parties involved. Compliance is useful for determining whether the actions of policy actors are by the standards set by government agencies. Also, policy implementation will be effective if the implementation bureaucracy complies with those provisions outlined by the regulations (implementation guidelines and technical guidelines) with the assumption that policy goals and objectives must be clear and consistent because they are evaluation standards and legal means for the

implementing bureaucracy to mobilize resources.

Based on the documentation carried out by researchers on the permit documents, there are indications that the permits in the regional public hospital development had not been in line with the procedures stipulated in the Regulation of The Minister of Health Number Number 56 of 2014 concerning Hospital Classification and Licensing, whereas the operational permit document in this project was issued by the. Investment, Integrated One-Stop Service, Transmigration, and Labour Office of Anambas Islands Regency. It means that the permit documents in this project are not by the regulation.

Also, there are inconsistencies in development planning that can be seen from the mismatch of class classification plans for Regional Public Hospitals and the eventual implementation in the field. According to the Regional Medium-term Development of 2011-2016, the initial hospital type was Type C. Nevertheless, the documentation of Coordination and Evaluation Meeting that held in the Regional Research and Development Planning Agency Meeting Room on January 25, 2017, and April 10, 2017, stated the discussion of the Follow-up Plan for the development of Type D Pratama Hospital. Then, the Anambas Public Hospital was later inaugurated by the Regent of the Anambas Islands Regency on November 12, 2018, as a Type D hospital.

Thus, according to the interviews and documentation findings, The Regional Government of Anambas Islands Regency Government does not comply with the laws and regulations and possess inconsistencies in the planning process. Moreover, the hospital also received negative reviews from the community due to the unsatisfactory services. Therefore, the researcher reckoned that the decision made by the regional government by operating the hospital was inaccurate and had the potential to cause new problems, namely indications of violating the provisions of Article 62 of Law 44 of 2009 concerning Hospitals. Nugroho (2018) stated that an excellent policy has a wise characteristic that does not generate new bigger issues.

2. Supporting And Inhibiting Factors In The Implementation Of Regional Public Hospital Development Policy In Improving Health Services In Anambas Islands Regency, Riau Islands

According to the interviews, it can be seen that the regional government has applied collaborative efforts to achieve the desired policy goals, driven by supporting factors, namely the "Political Will" of the regional leaders and other related work units.

Furthermore, the policy implementation was also supported by the involvement of the Guard, Government Safeguard, and Regional Development Team during the process.

As for the inhibiting factors, the documentation of the coordination meeting that held on January 25, 2017, in the Regional Research and Development Planning Agency Meeting Room shows that there was indeed a legal problem at that time and was in the investigation stage, however, the planning process continued while waiting for the audit results from the National Government Internal Auditor. According to the interviews, The inhibiting factors for the implementation of the Regional Public Hospital Development Policy in Anambas Islands Regency are the absence of project handover from the Public Works, Spatial Planning, Housing, and Settlement Area Office to the Health, Population Control, and Family Planning Office, the incompleteness of supporting facilities, the inadequacy of specialist doctors and medical equipment, and the legal problem that encountered during the process. More importantly, one of the substantial inhibiting factors was the weak coordination between the Regional Research and Development Planning Agency with the related regional government offices.

3. Concepts Offered To The Regional Government Of The Anambas Islands Regency In The Implementation Of Regional Public Hospital Development Policy In Improving Health Services In Anambas Islands Regency, Riau Islands

Hamdi (2015) stated that Every public policy always has a goal, namely to solve public problems. Every public policy will always contain meaning as an effort of the community to find solutions to the problems they face in their daily lives, every public policy is always a pattern of action that is outlined in programs and activities and every public policy is always contained in positive law.

The researchers classify the policies in Regional Public Hospital development in Anambas Islands Regency as not smart, since the policies do not solve the problems at their core

that leads to the bigger problems and dissatisfaction from the community.

In this case, based on the research findings, the researcher suggests the Anambas Islands Regency Government cut the patient referral chain that often occurs from Anambas Islands Regency to Tanjungpinang, Riau Islands Province. The Government needs to apply the concept of PONEK (*Pelayanan Obstetri Neonatal Emergency Komprehensif/comprehensive emergency neonatal obstetrical services*) hospital that capable of 24-hour operation hours. The 24-hour PONEK hospital is a hospital that can provide comprehensive and integrated maternal and neonatal emergency services 24 hours a day, and 7 days a week.

CONCLUSION

According to the research findings, some conclusions can be drawn from this study:

1. The Implementation of Regional Public Hospital Development Policy in Improving Health Services in Anambas Islands Regency, Riau Islands Province has been implemented although the implementation itself has not been optimal, especially seen from the aspect of the context policy that includes: power, interest, and strategies of the actor involved; institution and regime characteristics; and compliance and responsiveness. Meanwhile, from the aspect of policy content, conditions that are not yet optimal can be seen from the type of benefits; the extent of change envisioned; as well as the program implementer. Other conditions indicated by the interest affected; site of decision making; and committed resources have been running relatively better towards optimal.
2. Supporting factors in the policy implementation can be seen from the Political Will of Regional Leaders and related work units, as well as the involvement of the Guard, Government Safeguard, and Regional Development Team. Inhibiting factors in the policy implementation comprise the absence of project handover to the authorized party, the incompleteness of supporting facilities, the inadequacy of specialist doctors and medical equipment, the legal problem encountered during the process, and the weak coordination between the related work units.
3. The appropriate concept applied in Anambas Islands Regency is PONEK (*Pelayanan Obstetri Neonatal Emergency Komprehensif/comprehensive emergency neonatal obstetrical services*) hospital that capable of 24-hour operation hours.

REFERENCES

- Badan Pusat Statistik (BPS) Kabupaten Kepulauan Anambas. (2015). *Kabupaten Kepulauan Anambas dalam Angka 2015*. Kabupaten Kepulauan Anambas: Badan Pusat Statistik Kabupaten Kepulauan Anambas.
- Djohan, D. (2014). *Merajut Otonomi Daerah Pada Era Reformasi*. Jakarta: IKPTK.
- Dunn, W. N. (2003). *Pengantar Analisis Kebijakan Publik Edisi Kedua, Terjemahan Samodra Wibawa dkk.* Yogyakarta: Gajahmada University Press.
- Grindle, M. S. (1980). *Politic and Policy Implementation in the Third World*. New Jersey: Princeton University Press.
- Hamdi, M. (2015). *Kebijakan Publik Proses, Analisis dan Partisipasi*. Jakarta. Jakarta: Ghalia Indonesia.
- Hardiansyah. (2018). *Kualitas Pelayanan Publik*. Jakarta: Gava Media.130
- M, Andi Ramses. (2016). *Tata Kelola Pemerintah di Daerah Perbatasan*. Jurnal Ilmu Pemerintahan, 22.
- Mulyadi, D. (2015). *Studi Kebijakan Publik dan Pelayanan Publik Konsep dan Aplikasi Proses Kebijakan Publik dan Pelayanan Publik*. Bandung: Alfabeta.
- Muttalib, M. A. (2013). *Theory of Local Government (Terjemahan Tim MIPI)*. Jakarta: MIPI.
- Ndraha, T. (2008). *Kybernology dan Pembangunan*. Tangerang: Sirao Credentia Center.
- Nugroho, R. (2006). *Kebijakan Publik Untuk Negara-negara berkembang (model-model perumusan Implementasi dan evaluasi)*. Jakarta: PT.Elex Media Komputindo Kelompok Gramedia.
- Nugroho, R. (2018). *Public Policy*. Jakarta: PT. Elex Media Komputindo Kelompok Gramedia

- Pohan, I. S. (2015). *Jaminan Mutu Layanan Kesehatan Dasar-dasar pengertian dan penerapannya*. Jakarta: Buku Kedokteran EGC.
- Putri, D. M. (2018). *Antropologi Kesehatan Konsep dan Aplikasi Antropologi dalam Kesehatan*. Yogyakarta: Pustaka Baru Press.
- Sailiwa, W. S. (2010). *Implementasi Kebijakan Publik dan Etika Profesi Pamong Praja*. Sumedang: AlQaprint.
- Suaib, M. R. (2016). *Pengantar Kebijakan Publik: dari administrasi*. Yogyakarta: Calpulis.
- Subarsono, A. (2010). *Analisis Kebijakan Publik Konsep Teori dan Aplikasi*. Yogyakarta: Pustaka Pelajar.132
- Sumaryadi, I. N. (2013). *Sosiologi Pemerintahan dari Perspektif Pelayanan, Pemberdayaan, Interaksi, dan Sistem Kepemimpinan Pemerintahan Indonesia*. Bogor: Ghalia Indonesia.
- Suradinata, E. (2008). *Membangun Daerah Menuju Indonesia Bangkit*. Jakarta: PT.Elex Media Komputindo.
- Surjadi. (2009). *Pengembangan Kinerja Pelayanan Publik*. Bandung: PT. Refikas Aditma.
- Tachjan, H. (2006.). *Implementasi Kebijakan Publik*. Bandung: AIPI Bandung-Puslit KP2W Lembaga Penelitian UNPAD.
- Wahab, S. A. (2012). *Analisis Kebijakan Publik dari Formulasi ke Penyusunan Model*. Jakarta: Bumi Aksara.
- Wasistiono, S. (2015). *Metodologi Ilmu Pemerintahan*. Jatinangor: IPDN Press.