

# Improving Quality of Health Service Through Accreditation

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## ABSTRACT

Every citizen has the right to get comprehensive health services, but the current condition is that there are many complaints and dissatisfaction with health workers and health facilities. The purpose of writing this article is to provide an overview of the importance of creating quality health services through increasing accreditation culture. The method used through literature review. It was found from the results of the study of this article that the implementation of accreditation has not been cultured optimally, this is because some views of the accreditation process are momentum and technical in nature. Therefore this view must be changed, through improvements from various aspects. Things that can be done such as change together, commitment, creating a service focus on patient health and safety, and creating healthy hospital management.

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## I. Introduction

Health development is carried out on the basis of humanity with the aim of increasing awareness, will and ability to live a healthy life for every individual, family and community (Greenfield & Braithwaite, 2008; Smits et al., 2014). One of the health development efforts is to improve the quality of service. the community's need for optimal quality hospital services, encouraging the government through health exemption, coordinating with the independent agency KARS (Hospital Accreditation Commission) to carry out accreditation. Accreditation is a process of acknowledging the improvement of the quality of services and institutions that are recognized nationally and internationally, after meeting several predetermined standards (Hospital Accreditation Commission, 2012).

Hospital Accreditation is an acknowledgment given by the government to hospital management for the demands of meeting established standards. Law no. 44 of 2009 concerning Hospitals requires hospitals to undergo periodic accreditation at least once every 3 (three) years. Accreditation is carried out by prioritizing patient safety and security. Quality improvement including patient safety and security is an important standard in the 2012 version of hospital accreditation. These standards require hospitals to provide services to patients in a safe and quality manner (Hospital Accreditation Commission, 2012).

The situation in the field that was found, the mandatory policy for every hospital to be accredited by KARS was only a ceremonial one. All sections, from top managers to lower managers, are working hard towards the month leading up to accreditation, by participating in various trainings, seminars, mentoring by a team of assessors, revamping facilities and facilities which spend a large amount and other activities. Efforts were made before and during

accreditation, but after passing accreditation it cannot be said that the spirit of hard work and the same efforts were made to make quality service a culture for patient safety.

Every citizen has the right to receive proper health services. This is in line with Article 28H of the 1945 Constitution of the Republic of Indonesia, which states that every citizen has the right to health services and Article 34 paragraph (3) states that the state is responsible for providing proper health facilities and public services. The implication is that every resident must receive health services in accordance with medical needs and pay according to his ability. Therefore, health facilities and service providers must strive to provide health services to the community. Health service quality assurance is integrated with various parties and factors. Health service delivery activities cannot be successful without the commitment and involvement of all people or parties involved. For this reason, the health care profession must always pay attention to the quality of health services.

## **II. Methods**

The method used in this article review is literature review based on the phenomena observed by the author.

## **III. Results and Discussion**

Quality health services are the rights of patients, families and communities. Various efforts have been made to achieve better health services. One way that is considered very good is through the hospital accreditation process, because accreditation is related to improving hospital health services (Poerwani & Sopacua, 2006). Training programs, hospital structural improvements, management improvements, provision of infrastructure are carried out for an accreditation process for hospital graduation. Recognition for the efforts made is expected not only as nationally but internationally as well (Shaw, Groene, Mora, & Sunol, 2010). It can be concluded that the government's policy on hospital accreditation policy in Permenkes number 12 of 2012 is the right solution in efforts to improve service quality.

Data collection up to December 2016 there were 830 hospitals accredited by KARS from 2488 hospitals or the proportion was 33.3%, while the latest data as of April 2017 were 929 accredited by KARS with various plenary, major, intermediate, basic and prime statuses. While the number of hospitals in Indonesia is 2601, so that in proportion it is only 31.9%. In terms of quantity, there has been an increase in the number of hospitals in Indonesia and followed by an increase in hospitals that have been accredited by the KARS version (RI Ministry of Health, 2016). However, the increase in the number of hospitals and the accreditation process that has been followed cannot guarantee an increase in the quality of health services to the Indonesian people.

The hospital will make various efforts to get accreditation approval from KARS. Recognition of passing accreditation is important for hospitals, because in the end it will affect income in the form of materials and prestige for the community and competitiveness for other hospitals. Various aspects are biased for the sake of an accreditation. A quality service process for patient safety and security is put aside. Accreditation is not seen as a reference to increase professionalism, but is seen as an impromptu burden that must be completed on time. The leadership of the hospital, with power, will act as a dictator for his subordinates, for the goals he wants to achieve.

According to research conducted through a systematic review method, it was concluded that accreditation has an influence on improving the quality of providing health services to patients (Alkhenizan & Shaw, 2011). The service system should be created to guarantee the continuity of health services. Various operational and flow standards in hospitals have been regulated in accreditation standards. Operational standards, flow, policies have been formed

but have not yet created quality services, because health services involve various parties and complex aspects (Corrigan, 2012).

Preparation for accreditation and the process of implementing accreditation are seen as changing many factors for the better for the hospital. These changes include operational standards/actions, attitudes of health service providers, health promotion efforts, organizational management, salary/reward staff, patient safety and satisfaction, facilities and amenities, career development, skills and knowledge of organizational members (Greenfield & Braithwaite, 2008). These various factors will create quality quality services if they are carried out not only during the preparation and implementation of accreditation. Consistency before, during and after accreditation is very important to create quality health services as a whole.

Accreditation should be part of learning from the lower, middle to superior levels in the process of forming a culture of quality health services and patient safety (Smits, Supachutikul, & Mate, 2014). The success of accreditation goals is influenced by leadership in the organization and the character of health service providers (Braithwaite et al., 2010). Managerial leadership influences the achievement of health organization goals, the process of socializing accreditation goals, assistance and motivation is needed to create patient safety products (Probst, Jiang, & Graso, 2016). In the learning process, it takes a long time and commitment to change. Because there is no better end of update without starting from a beginning of change together.

The hospital accreditation process is expected to be able to (1) increase the joint commitment of all health service providers in hospitals to behave professionally, (2) create service products focused on sustainable efforts, based on patient satisfaction and safety and improve service quality, (3) create priorities on patient safety, staff safety and environmental safety and (4) Forming better hospital management focusing on shared welfare and a conducive organizational climate.

#### **IV. Conclusion**

The positive impact of the policy of Permenkes number 12 of 2012 concerning Hospital Accreditation Accreditation is seen as a process in improving the quality of hospital services. This was stated, because the accreditation process will build a system and integrate the culture of health services and produce performance that is based on service standards and professional standards. This part is important and has a positive impact because it makes the service provider feel safe and comfortable in carrying out his duties and the recipient of the service will feel satisfied because the service provided has met his standards and desires.

The negative impacts of this accreditation are (1) accreditation demands make management act dictatorial with targets on accreditation standards, (2) staff provide services as compulsion in supervision, not as a mandate carried out with sincerity, (3) accreditation requires a high cost large because it will change various things such as systems, documents, infrastructure and other needs according to established standards, (4) the implementation of accreditation provides a loophole to disguise the truth of information reality with established standards, (5) accreditation is seen as a momentum, not as a habit.

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