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The Effect Of Implementation Of Permenkes No 46 Of 2015 Regarding Accreditation Of Puskesmas, Primary Clinics, Places Of Mandiri Doctor Practices, And Mandiri Medical Practices On The Performance Of Human Resources And The Effectiveness Of Using The Use Of The Puskama Dana Services

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ABSTRACT

Effect of implementation of Permenkes no. 46 of 2015 concerning the accreditation of Health Centre, pratama clinics, independent doctor's practice, and independent dentist's practice on the performance of human resources and the effectiveness of the use of funds and their impact on the quality of services at health centre. This study aims to determine whether there is an influence on the implementation of Permenkes no. 46 of 2015 concerning the accreditation of health centre, pratama clinics, independent doctor's practice, and independent dentist's practice on the performance of human resources and the effectiveness of the use of funds and their impact on the quality of services at health centre in bekasi. This research was conducted based on purposive sampling, the aim of which was targeted at respondents of the head of health centre, administrative coordinator, treasurer Jaminan Kesehatan Nasional, treasurer bantuan operasional Kesehatan, treasurer Anggaran Pendapatan Belanja Daerah, so that sample of 100 respondents was obtained sufficiently and represented the population in the city of Bekasi. This study used a research questionnaire that was distributed to 20 health centre units. The method used is SEMPLS (partial least square structural equation modeling) which is based on an evaluation of the interdependence relationship between variables. From the results of the study it was found that there was a significant positive strong relationship between the implementation of Permenkes no. 46 of 2015 concerning the accreditation of health centre, pratama clinics, independent doctor's practice, and independent dentist's practice on human resource performance. There was no significant relationship between the implementation of Permenkes no. 46 of 2015 concerning the accreditation of health centre, pratama clinics, independent doctor's practice, and independent dentist's practice to the effectiveness of the use of funds shows a significant positive relationship between Permenkes no. 46 of 2015 concerning the accreditation of health centre, pratama clinics, independent doctor's practice places, and independent dentist's practice places on the quality of services at healt centre in Kota Bekasi. Permenkes no. 46 of 2015 on the performance of human resources and the effectiveness of the use of funds and their impact on the quality of services at the puskesmas.

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1. Introduction

National development is an integral and very important thing to build Health, the holding of Health development which aims to raise awareness, desire and the power of healthy life for all individuals in order to create a maximum suitability of public health. A very important role in the

success of developing health is the development of levels and competitiveness of Indonesian human resources (Depkes, 2004).

Various efforts were made to realize national health growth at all levels and systematically. In providing basic health, this puskesmas is the front line (Kemenkes, 2015). The function of this Puskesmas is to provide public health and individual health according to the statement of the Minister of Health Regulation No. 75 of 2014. The main level prioritizes promotive and preventive efforts to obtain the maximum number of residents in the work area (Menkes, 2014). In the era of National Health Insurance (JKN), health services are carried out in stages starting from First Level Health Facilities (FKTP) which are the first stage Health Service Providers (PPK) that serve BPJS Health victims and then submitted to the next stage of healing facilities if needed (Health, 2018).

Public Relations of Health (2016) described the proposed scheme which resulted in FKTP creating the first portal for BPJS Health members to continue health services. This condition forms a rebuttal for all FKTPs to protect the excellence of health services. The parameter of health service excellence is confirmation according to the provisions of legal information and the Indonesian Ministry of Health's Health Business Development Organization (2015). In efforts to develop the quality of Puskesmas services, it must be confirmed in stages at least every 3 years (Susilawati Susilawati, 2017).

The aim of this accreditation is to ensure that quality updates, performance development and the application of vulnerability management are carried out in close contact with the Puskesmas (Dye, 1981). There is a belief in Article 39 paragraph (5) of the Regulation of the Minister of Health Number 75 of 2014 to grow the advantages of basic comfort services and community health centers in connection with the Minister of Health Regulation Number 46 of 2015 regarding information on Puskesmas, Primary Clinics, Doctors' Independent Practices, and places Dentist Independent Practice (Kemenkes, 2015).

Research that has been carried out related to the implementation of Permenkes NO 46 of 2015 has been examined by (Susilawati Susilawati, 2017) (Koesoemahardja et al., 2016) from the above research it can be concluded that Puskesmas need to deliver safe and quality services in order to realize development. Research that has been done related to the performance of human resources, especially in the health and pharmaceutical fields, has been studied by (Auliani, 2012) Ardianto (2012), (Suryanegara, 2013), (Sayd, 2014) and (Salamate, 2014). The result of the research above is that the performance of a public health facility, including both in pharmacies and pharmacy installations, is strongly influenced by the human resources working at the health facility. In addition to work facilities, motivation, work discipline and work environment are factors that support the performance of public health services.

Research that suggests the quality of services at the Puskesmas, among others (Etlidawati Diyah Yulistika, 2017) (Naima Sudirman; Anzar, Muhammad, 2018) from this study can conclude that the quality of health services has a huge impact on the level of patient satisfaction. Based on the Decree of the Minister of Health No. 46 of 2015 determines a parameter about the portal and the quality of health services, namely the number of residents who use the puskesmas. Service quality is one of the multi-dimensional ideas, so in measuring quality in addition to being compared to health service quality standards, it must be assessed with many other quality dimensions.), dimensions of effectiveness (effectiveness), dimensions of efficiency (efficiency), dimensions of continuity (continuity), dimensions of security (security), dimensions of comfort (comfort), dimensions of information (communication), dimensions of punctuality (punctual), and dimensions of human relationships (relationship). Puskesmas confirmation is very important to protect the quality of puskesmas services.

Service quality is a service trust that is the same as the standards set. Reliable quality can lead to happy patients but not a guarantee of customer satisfaction, maintenance of quality performance development through updates related to administrative schemes, quality administration schemes and clinical service implementation schemes, and implementing insecurity management (Ministry of Health, 2015). dr. Armein Sjuhary Rowi, M.Kes, Head of the main health service section of Bogor City, said

2. Method

The technique used in the research is a multivariate analysis technique where in this study the

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main factors are the implementation of the Minister of Health No. 46 of 2015, HR, the effectiveness of the use of funds and the quality of services at the Puskesmas. Meanwhile, from the main factors above, the independent variable is the implementation of Permenkes No. 46 of 2015 and the dependent variable is the performance of human resources, the effectiveness of the use of funds and the quality of services at the Puskesmas.

This study uses Permenkes No. 46 of 2015 as the independent variable. Permenkes No. 46 of 2015 which was compiled as a public policy from the government gave a fairly broad impact in its implementation, as the following research design:

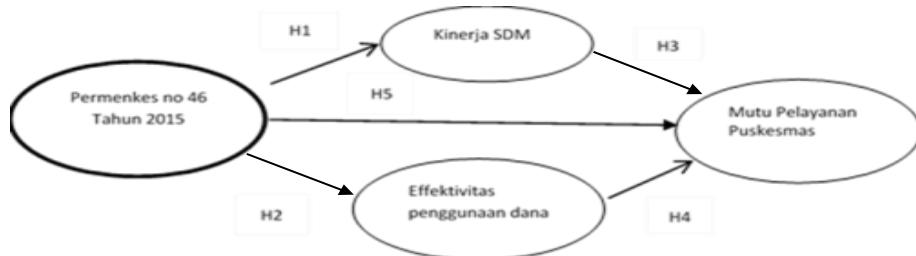


Figure 3.1 Conceptual Framework

The related factors used in the research are the performance of human resources, the effectiveness of the use of funds and the quality of services at the Puskesmas. Performance is the appearance of individual works both in quality and quantity in groups according to (Ilyas, 2002). This performance can be in the form of personal appearances or personnel co-workers, both functional and structural positions, as well as all staff personnel in the group. The description of performance involves 3 main elements including form, value, and measurement. The selection of goals from all parts of the group is a way to improve performance.

3. Result and Discussions

3.1 Respondent Identity

Based on table 1, it is found that the majority of respondents' gender is female (93%) while male (7%). The characteristics of informants are based on the age of the majority, namely 41-45 years old (39%), then informants who are 46-50 years old (26%), the next respondent is 36-40 years (17%), respondents. the next 31-35 years (11%), the next respondent 51-55 years (5%), and the last 56-60 years (2%). The characteristics of respondents based on years of service are mostly >3 years (55%) then the service period is less than 6 years (45%).

3.2 Descriptive Analysis

HR performance has a budget of at least 2.19, the highest budget is 4.13, the general budget is 2.87 with a general distortion of 0.33. PERMENKES No. 46 of 2015 has a budget of at least 2.50, the highest budget is 3.50, the general budget is 2.89 with a general distortion of 0.20. The excess service has a budget of at least 2.04, the highest budget is 3.56, the general budget is 2.48 with a general distortion of 0.40. While the Effectiveness of the Use of Funds has a budget of at least 2.31, the highest budget is 4.00, the general budget is 3.02 with a general distortion of 0.33.

Table 1.
The results of the Validity Test of the Variable Dimensions of the
Implementation of the Minister of Health Regulation No. 46 Year 2015

Dimension	Loading Factor Value	Decision
Management	0,8716	Valid
Public Health Effort	0,7288	Valid
Individual Health Enterprise	0,8530	Valid

Source: Research data processed

Based on table 5.7, it shows that the three dimensions that make up the implementation variable of the Minister of Health No. 46 of 2015 are all valid as evidenced by the loading factor value > 0.50

Table 2
Test Results of the Validity of the Variable Dimensions of Human Resource Performance

Dimension	Loading Factor Value	Decision
Initiative	0,5699	Valid
Collaboration	0,7485	Valid
Work quality	0,6185	Valid
Working Quantity	0,6386	Valid

Source: Research data processed

Based on the table above, it shows that the four dimensions that make up the human resource performance variable are all valid as evidenced by the loading factor value > 0.50 .

Table 5.
The Result of the Validity Test of the Dimensions of the Effectiveness of the Use of Funds

Dimension	Nilai Loading Faktor	Keputusan
Report	0,5661	Valid
Utilization	0,7297	Valid
Defrost	0,7187	Valid
Planning	0,8617	Valid

Source: Research data processed

Based on table 5 shows that the four dimensions that make up the variable effectiveness of the use of funds are all valid as evidenced by the loading factor value > 0.50 .

Table 6
Result of Validity Test of Service Quality Variable Dimensions

Dimension	Loading Factor Value	Decision
Effectiveness	0,6109	Valid
Efficient	0,6730	Valid
Connection	0,7630	Valid
Information	0,5261	Valid
Security	0,6876	Valid
Convenience	0,8016	Valid
Continuity	0,7404	Valid
Accuracy	0,7875	Valid
Affordability	0,6821	Valid

Source: Research data processed

Based on table 5.10, it shows that the nine dimensions that make up the service quality variable are all valid, as evidenced by the loading factor value > 0.50 .

3.3 Discussion

a. Effect of Implementation of Minister of Health Regulation No. 46 of 2015 on HR Performance

Permenkes Number 46 of 2015 is a general ordering strategy as well as regarding the measurement of the approval of Puskesmas in the provision of first-stage services to residents. Articles 3 and 4 explain that in the Puskesmas there must be ratification, it can be carried out within 3 years. Determination of the quality of validation, namely the final result of the validation review by surveyors and the provisions of the meeting of the independent institution managing the ratification. This determination is confirmed by a deed of ratification.

Ratification based on the Minister of Health Regulation number 46 of 2015 concerning the ratification of Puskesmas, Pratama Clinics, Doctors' Independent Practices, and Dentists' Independent Practices, namely the determination presented by an independent institution carrying out the ratification determined by the Minister after sufficient ratification. The first intention of ratification is to strengthen the development of strengths, performance through related updates to the administrative system, the administrative system of advantages and the system of implementing clinical services, and determining the administration of insecurity, and not just measurements to

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obtain a certificate of ratification. Based on one of the other literature, the endorsement is the ability of the organization to carry out an event which is an official determination given by the ratification committee to others. Validation is an activity that observes all aspects of the process. The observed aspect relates to the strategy in it (Henseler et al., 2009). Aims to develop sustainable standards (Poerwani, 2008).

The test results prove that there are differences between after and before the implementation of Permenkes No. 46 of 2015. Likewise, the path coefficient test shows that the implementation of Permenkes No. 46 of 2015 has a direct effect on HR performance by 0.541 or 54.1%. The results of the study are the same as the results of Ensha's research (2018) which explains that there is a direct impact on the implementation of Permenkes No. 46 of 2015 on Work Performance/Productivity. These results indicate that many of his work assignments can be done with time management and good cooperation between officers and the management of the puskesmas.

b. Effect of Implementation of Minister of Health Regulation No. 46 of 2015 on the Effectiveness of the Use of Funds

The results of the different tests prove that there is a difference between after and before the implementation of Permenkes No. 46 of 2015 on the Effectiveness of the Use of Funds. However, this difference has no impact on the effect of the implementation of Permenkes No. 46 of 2015 on the Effectiveness of the Use of Funds. The possibility that the disbursement of existing funds depends on the existing policies of the Regional Government. The puskesmas must be able to advocate for the government so that the disbursement of funds is in accordance with what has been planned.

c. Effect of Implementation of Minister of Health Regulation No. 46 of 2015 on Service Quality

The results of the different test (Table 5.35) show that there is no difference between after and before the implementation of Permenkes No. 46 of 2015 on Service Quality. The thing that causes there is no difference between after and before the implementation of Permenkes No. 46 of 2015 is Punctuality. Puskesmas staff need time to adapt to Permenkes No. 46 of 2015 which was implemented so as to reduce the quality of services compared to before the implementation of Permenkes No. 46 of 2015. Implementation of Permenkes No. 46 of 2015 also has a direct effect on Service Quality by 0.121 or 12.1% and an indirect effect through HR Performance and Effectiveness of Funds Use of -0.113 or -11.3%. So, in total, the implementation variable of the Minister of Health Regulation No. 46 of 2015 has an effect on Service Quality of 0.009 or 0.9%.

The results of this study are in line with the results of research by Shaw et. al (2014) on 73 hospitals in Europe ensured that the approval had an impact on the administration of excellence in the services provided. This approval relates to the expertise and security system of the people. In summary, it can be said that ratification is an event carried out to obtain a ceremonial determination of the acquisition of standards. This gain is primarily the development of advantages and related performance.

d. The Influence of Human Resources Performance on Service Quality

The results of the study indicate that HR performance has a negative effect on service quality of 0.145 or 14.5%. This aspect shows the inability of officers to analyze, measure, realize and make decisions to solve the problems they face. Must wait for direction and encouragement from superiors or management in solving the problem.

e. Effect of Effective Use of Funds on Service Quality

The results of the study prove that the Effectiveness of the Use of Funds has a direct impact on Service Quality of 0.782 or 78.2%. The research results are the same as those conducted by Purwaningsih (2015). The advantages of healing services for patients are that there is no happiness for someone with the services provided, positive advantages are associated with health, development of healing levels, speed of service, happy healing environment, good staff, easy formalities, complete tools, medicines and relatively low funds. cheap (Marsuli, 2005).

Although the quality of the healing services provided to the community is individual, there is an individual basis based on past knowledge, education, psychological conditions during service and environmental impacts. Especially regarding the measurement of performance in providing health services, there are two parts that must be monitored, namely medical technical and interpersonal relations. This aspect includes descriptions and giving reports to sick people and determining the

patient's actions to be carried out on him. This interpersonal relationship is related to giving news, empathy, honesty, sincerity, sensitivity and certainty by monitoring privacy (Marsuli, 2005).

Customers of health services cannot be measured by medical technicalities, therefore they measure from the non-technical part. There are 2 measurements regarding the healing service, namely safety and the size of the service obtained. Health care customers will compare the health services obtained with a focus on the services provided so as to build satisfaction with excess services (Foster & Cadogan, 2000).

f. Services before and after the implementation of Permenkes No. 46 of 2015

The results showed that there were differences between after and before the implementation of Permenkes No. 46 of 2015. this can be seen in the different tests carried out. The biggest difference as a result of the implementation of Permenkes No. 46 of 2015 is an Individual Health Business (Services in the building). Puskesmas must be able to continuously improve the quality of public health efforts (outside the building) and management.

4. Conclusion

Based on the results and reviews that have been obtained on the research, it can be concluded: First, there is a strong positive significant relationship between the implementation of Permenkes no. 46 of 2015 concerning the ratification of puskesmas, pratama clinics, doctors' independent practice areas, and dentists' independent practice areas on the performance of human resources, in terms of time management and good cooperation between officers and puskesmas management. Second, there is no significant relationship between the implementation of Permenkes no. 46 of 2015 concerning the ratification of puskesmas, pratama clinics, doctor's independent practice areas, and dentists' independent practice areas on the effectiveness of the use of funds because the disbursement of existing funds depends on the existing policies of the Regional Government. Third, there is a significant positive relationship between HR performance and service quality in terms of leadership and patient safety systems. Fourth, there is a significant positive relationship between the effectiveness of the use of funds on the quality of services in terms of any increase in the effectiveness of the use of funds used to fulfill the needs of the puskesmas will increase the types of services available. Fifth, there is a significant positive relationship between the Minister of Health no. 46 of 2015 concerning the ratification of puskesmas, pratama clinics, doctor's independent practice areas, and dentists' independent practice areas on the quality of services at puskesmas in Bekasi City in terms of individual health businesses (in-building activities).

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