



Analysis of the Influence of the Regulation on the Ability of Communication Health Officer at Dr Wahidin Sudirohusodo General Hospital

Nur Sri Widyastuti¹, Yusriani², Andi Nurlinda³

1,2,3 Departemen Of Public Health, Universitas Muslim Indonesia, Makassar, Indonesia

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ABSTRACT

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Health promotion is a core quality issue to raise awareness and maintain quality of life. Standards for health promotion in hospitals are needed to ensure the quality of services provided. Therefore, WHO formed a working group at the 9th International Conference on Health Promotion Hospitals, Copenhagen, in May 2001. This study aims to analyze the effect of the regulations on the communication skills of health officers at Dr. Wahidin Sudirohusodo General Hospital, Makassar. This study uses a quantitative research design using a cross-sectional approach. The population and sample in this study are health officers and inpatients at Dr. Wahidin Sudirohusodo General Hospital, Makassar. Based on the results of bivariate analysis using the Chi-square test, it is concluded that there is a significant effect of regulation on the communication skill abilities of health officers. It is hoped that the hospital will improve the quality of hospital health promotion implementation through health promotion training such as effective communication training and hospital health promotion management.

Email: widyanuskin@gmail.com
yusriani.yusriani@umi.ac.ida
andi.nurlinda@umi.ac.id

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1. INTRODUCTION

Health promotion is a core quality issue to raise awarness and maintain quality of life. Standars for helath promotion in hospitals are needed to ensure the quality of service provided. Therefore, WHO set up a working group at the 9th Intenational Conference on Health Promotion Hospitals, Conpenhagen, May 2001. Sice then several working groups and country networks have worked on the development of standards. As a result, five core standards that apply to all hospitals have been developed according to the international requirements set by the ALPHA program developed by the International 6 Society for Quality in Health. (who, n.d.)

According to Notoatmodjo 2014, "Health promotion is a form of education that seeks to make people behave in good health." (Notoatmodjo, 2007)

Health promotion in Iran is still new and has received support from the legislature and special policies of the Ministry of Health and Nursing to promote hospital health promotion. Hospitals in Iran are focused on improving the quality of healthcare. However, the findings in this study indicate that hospital health promotion programs have not become a priority, and are considered part of hospital accreditation. (Afshari et al., 2016)

The implementation of PKRS is carried out in 5 (five) levels of prevention which includes health promotion for healthy groups of people to improve health, preventive level health promotion for high risk groups so they don't get sick (special protection).), health promotion at the curative level so that patients recover quickly or do not get worse (early diagnosis and prompt treatment), health promotion at the rehabilitative level to reduce or reduce disability (disability limit), and health promotion for patients who have just recovered (recovery) and recovered from illness (rehabilitation) (Indonesia, 2018)

According to Green and Ottoson (1998) Health Promotion is a combination of various supports regarding education, organizations, policies, and legislation for environmental and behavioral changes that benefit health. According to the definition so far used by the Center for Health Promotion, Health

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Promotion is the process of empowering or empowering people to be able to maintain, improve and protect their health through increasing awareness, will and ability, as well as developing a healthy environment.(Kedokteran & Andalas, 2013)

With the implementation of health promotion in hospitals, it is possible to create quality hospitals that meet hospital accreditation standards both nationally and internationally. Integration of Health Promotion in patient care through increased effective communication and education can also improve patient quality and safety. Based on the results of an evaluation conducted by the Hospital accreditation agency, it showed that most sentinel events were caused by ineffective communication, both between Care Provider Professionals (PPA), and between PPA and Patients. In addition, good and sustainable PKRS implementation can create behavioral and environmental changes that suit patient needs. (Indonesia, 2018)

Patient care at the hospital is a complex service and involves various health workers as well as patients and families. This situation requires effective communication, both between care professionals and between care professionals and patients and families. Each patient is unique in terms of needs, values, and beliefs. Hospitals must build trust and open communication with patients. Effective communication and education will help patients understand and participate in decision-making regarding the treatment they are undergoing. Treatment management can improve if patients and families are given the information they need and are included in decision-making and processes that match their expectations. Hospitals provide educational programs based on the services for example hospitals provide. (Kepmenkes RI, 2022)

The approach used in implementing policies regarding energy conservation is the theory put forward by George C. Edwards III. implementation can begin through an abstract condition and a question about what are the conditions for successful policy implementation, according to George C. Edwards III there are four variables in public policy, namely communication, resources, attitudes, and structure bureaucracy.(Implementasi et al., 2021)

The success of policy implementation requires that the implementer knows what to do. The communication factor plays a role as a reference so that policy implementers know exactly what they are doing. This means that communication can also be expressed by orders from superiors to policy implementers so that the implementation of the policy does not deviate from the desired target. Thus the communication must be stated clearly, precisely, and consistently. (Sangadah & Kartawidjaja, 2020)

Slameto, that ability is a skill consisting of three types, namely the ability to deal with and adapt to new situations quickly and effectively, know/use abstract concepts effectively, know relationships and learn them quickly.(Lasut et al., 2016)

Some of the factors that hinder the implementation of PPA's role as educators are as follows: Care Provider Professional Readiness (PPA); Insufficient coordination and delegation; Personal character; Limited health workers; Recording system (Siddiqiyah, 2017)

According to Dr. Tutik, Care Provider Professionals (PPA) are those who directly provide care to patients, namely Doctors in Charge of Patients (DPJP), Nurses, Dietitians, Pharmacists, and other Supporters.(Dr.Rr.Tutik Sri Hariyati, SKp., 2006)

According to research (Noviyanti & Noprianty, 2019) that discharge planning is carried out in an integrated manner involving care-giving professionals (PPA) such as doctors, nurses, nutritionists, clinical pharmacists, and physiotherapists.

According to the Standard Operational Procedures of the (RSUD M.Natsir, 2019), Care Provider Professionals (PPA) are patient caregivers who are hospital staff who have the right to provide patient care plans regarding the development of the patient's condition at any time. Hospital staff who are entitled to provide care are Doctors in Charge of Service (DPJP) who are responsible for the service

2. METHOD

This study uses a quantitative approach to the type of survey research with a cross-sectional approach. The influence of the regulation on the communication skills of Health officers at Dr Wahidin Sudirohusodo Makassar General Hospital. Carried out from December 2022 to February 2023. The population in this study were caring professionals, Doctors, Nurses, Midwives, nutritionists, Physical Therapy, and Pharmacy who had direct contact with patients, a total of 1762 people. The sample was



determined using random sampling with the 1997 Lameshow formula. A total of 317 people.

3. RESULTS AND DISCUSSION

Table 1. Distribution of Respondents Based on Respondent Characteristics in RSUP Dr Wahidin Sudirohusodo

Sudironusodo									
Characteristics		rch sample							
	amount (n)	percentange (%)							
	Gender								
Man	89	28.1							
Women	228	71.9							
Total	317	100.0							
Umur									
20-29 year	102	32.2							
30-39 year	121	38.2							
40-49 year	55	17.4							
50-59 year	34	10.7							
>/=60 year	5	1.6							
Total	317	100.0							
Education									
Senior high school	2	.6							
3-year diploma	72	22.7							
Banchelor	195	61.5							
Masters	29	9.1							
Doctor	19	6.0							
Total	317	100.0							
Marital status									
Not married yet	104	32.8							
married	213	67.2							
Total	317	100.0							
Years of servive									
<1 year	9	2.8							
1-10 year	176	55.5							
11-20 year	87	27.4							
21-30 year	38	12.0							
> 30 year	7	2.2							
Total	317	100.0							

Based on table 1, it is known that the characteristics of respondents based on gender were 228 women (71.9%) and 89 men (28.1%). Characteristics based on the age of 20-29 years were 102 people (32.2%), aged 30-39 years were 121 people (38.2%), aged 40-49 years were 55 people (17.4%), ages 50-34 people (10.7%) were 59 years old and 5 people aged 60 and over (1.6%). Characteristics based on D3 education were 72 people (22.7%), Bachelor education were 195 people (61.5%), Masters education were 29 people (9.1%), Doctoral education were 19 people (6.0%) and high school education as many as 2 people (0.6%). Characteristics of respondents based on married status were 213 people (67.2%) and unmarried status were 104 people (32.8%). While the characteristics of respondents based on work experience under 1 year were 9 people (2.8%) and the most working period was between 1 year and 10 years as many as 176 people (55.5%).



Table 2. Frequency distribution based on the variables researched at RSUP Dr Wahidin Sudirohusodo

Variable Category	N	%					
Regulation							
Not Good	20	6.3					
Good	297	93.7					
Total	317	100.0					
Ability communication skills of Health officers							
Not Good	74	23.3					
Good	243	76.7					
Total	317	100.0					

Based on table 2 it is known that the statements of respondents based on good regulations were 297 people (93.7%) and 20 people (6.3%) were not good. While the statements of respondents based on the ability of communication skills of Health officers were good as many as 243 people (76.7%) and not good as many as 74 people (23.3%).

Table 3. Relationship between Regulation and Communication Skill Health Officers

	Ability					otol	
Regulation	Not Good		Good		Total		P value
	n	%	n	%	N	%	
Not Good	16	80,0	4	20,0	20	100	
Good	58	19,5	239	80,5	297	100	< 0,001
Total	74	23.3	243	76.7	317	100.0	

Based on Table 3, it shows that in the regulatory variable, out of 20 people (100%) stated that they were not good enough, it was obtained that 16 people (80.0%) had poor abilities and 4 people (20.0%) had good abilities, while out of 297 people (100%) stated that good regulations were obtained as many as 239 people (80.5%) had good abilities and 58 people (19.5%) had poor communication skills.

The results of the chi-square test showed a p-value (Sig.) of <0.001, which means it is less than 0.05, so that the regulatory variable has a significant relationship to the ability communication skills of Health officers at RSUP Dr. Wahidin Sudirohusodo Makassar.

Discussion

The focus of this study was to see the direct effect of health promotion regulatory variables on the communication and education skills of care givers at Dr Wahidin Sudirohusodo General Hospital, Makassar. Quantitative data from the research results have been presented and described in the research data.

The importance of regulation in the promotion of hospital health is intended so that the implementation of PKRS management in hospitals can run optimally. The regulations contained in Wahidin Sudirohusodo General Hospital were made in the form of a health promotion implementation policy.

The health promotion policy was made in 2016. This policy contains health promotion services at Wahidin Sudirohusodo Hospital Makassar. In addition to policies regarding the implementation of Health Promotion, there are also guidelines for Health Promotion Organizations, which contain organizational structure, work mechanisms, workforce patterns, personnel qualifications and resources as well as reporting mechanisms.

Health promotion policies and guidelines at Wahidin Sudirohusodo Hospital use the Regulation of the Minister of Health of the Republic of Indonesia Number 004 of 2012 concerning Technical Guidelines for Hospital Health Promotion, which already contains Minister of Health Regulation No. 44 of 2018 concerning Implementation of Hospital Health Promotion.

Minister of Health Regulation No. 44 of 2018 concerning Implementation of Hospital Health Promotion provides more detail regarding the implementation of Health Promotion in Hospitals, for

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example there is an article that regulates hospital health promotion standards. Article 11 (a) states that every hospital must have health promotion regulations.

Based on the results of this study, it was found that as much as 93.7% of health officers at Wahidin Sudirohusodo General Hospital stated that health promotion regulations as a model for implementing health promotion were very good. This can also be seen from the statements given by health officers at Wahidin Sudirohusodo Hospital regarding implementation. based on the SOP for providing information and education to patients and patient families as much as 51.1% stated that this had often been done at Wahidin Sudirohusodo Hospital.

Based on the results of the chi-square test $p = 0.000 < \alpha = 0.05$, which means that there is a relationship between health promotion regulations and the communication skills of Health officers at Wahidin Sudirohusodo General Hospital, Makassar. This is based on the fact that existing policies regarding health promotion have been running effectively so that they can affect the ability to provide education to patients or their families at Wahidin Sudirohusodo General Hospital Makassar.

Regulation is a reference in implementing programs, as well as implementing hospital health promotion requires regulation. The influence of regulation is actually a fundamental thing, its function is not only as a guide but in the process of implementing health promotion programs it also functions as an assessment tool.

In line with Larasanti's research (2018), states that regulation is the flow of implementation, regulation is a guideline for evaluation, regulation binds organizational commitment, and the effectiveness of its implementation is a core reference that is consistent in implementing hospital health promotion.(Larasanti, 2018)

Based on the results of the cross tab on the results of this study as much as 80% of regulations that are not good enough have bad abilities as well. This illustrates that poor health promotion regulations will allow health officers at Wahidin Sudirohusodo Hospital to have the ability communication skills of Health officers not to run smoothly. Therefore, the RSUP Wahidin Sudirohusodo Makassar needs to conduct an assessment of the need for staff so that health promotion at the hospital can be fulfilled both in quantity and in quality.

Overall, health promotion regulations at Wahidin Sudirohusodo General Hospital have been going well. However, there were 16.7% who stated that the development of health promotion media by involving care giving professionals was still rarely carried out. Hospitals can find out about existing PKRS policies, especially in terms of developing health promotion media.

Research conducted at Airlangga University Hospital in Surabaya states that policy support is needed in the implementation of health promotion in hospitals as part of improving the quality of organizational management. Airlangga University Hospital already has a PKRS unit, there is an activity program that does not only involve the PKRS team but also involves doctors and nurses, as well as an allocation of funds and infrastructure as a form of hospital policy support in improving the quality of implementing health promotion at the hospital. (Munyang et al., 2021)

Research conducted by (Taghdisi et al., 2018) at the largest Heart Hospital in Northwest Iran revealed that the implementation of hospital health promotion has not run optimally due to low management policy activity which has obstacles such as a lack of special programs and budgets for health promotion, and lack of guidelines for implementing activities. Because organizational managers need to improve health promotion standards, budgets, and specific plans so that policy promotion implementation can run well

4. CONCLUSION

The research results show was concluded that there was a significant effect of regulation on the communication skills of Health officer's abilities so that health promotion at the hospital can be fulfilled both in quantity and in quality.

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