ANALYSIS IMPECT OF MANAGEMENT AND LEADERSHIP COMMITMENT, MANAGEMENT PROCESS OF QUALITY, QUALITY OUTCOMES, AND ACCREDITATION BENEFITS ON PATIENT CENTEREDNESS AT SILOAM HOSPITALS SURABAYA'S EMPLOYEES

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Abstract

Siloam Hospitals Surabaya is a private hospital located in the center of Surabaya. Becoming one of the hospitals of choice for the city community is a challenge in itself for Siloam Hospitals Surabaya to provide the best quality and patient-centered health services. This research was conducted to see the influence of management process of quality, quality outcomes, accreditation benefits, and management & leadership commitment factors on patient centeredness among employees at Siloam Hospitals Surabaya.

This research uses a positivistic paradigm with a descriptive quantitative approach. The method used in this study refers to references that can carry out simultaneous analysis processes related to the variable research model, namely the Structural Equation Model (SEM) using the AMOS 20.0 application or software. Data was collected through a questionnaire distributed to 121 respondents according to predetermined characteristics, namely Siloam Hospitals Surabaya employees who are included in the organizational structure of the hospital accreditation team. The results of this study found that management & leadership commitment, management process of quality, quality outcomes, and accreditation benefits have a significant effect on patient centeredness at Siloam Hospitals Surabaya's employees.

Keywords: Management And Leadership Commitment, Management Process Of Quality, Quality Outcomes, Accreditation Benefits, Patient Centeredness.

Introduction

Wolper and Pena (in Azwar, 1996) state that a hospital is a place where sick people seek and receive medical services and a place where clinical education for medical students, nurses and various other health professional staff is held. Hospitals in Indonesia are regulated by the government through Law of the Republic of Indonesia Number 44 of 2009 where hospitals are health service institutions that carry out full individual health services that provide inpatient, outpatient and emergency services. As with other public services, to be able to provide health services to the community, a hospital must have a license to establish and operate which is periodically updated and its activities are evaluated. Based on the Law of the Republic of Indonesia Number 44 of 2009 hospitals can be divided based on their type and classification.

Hospital services to the community continue to grow. Consistently and continuously, the hospital continues to improve and strive to improve patient awareness.

Siloam Hospitals Group (Siloam) is the leading private hospital network in Indonesia and has become the benchmark for quality health services in Indonesia. Siloam's medical team consists of 2,700 general practitioners and specialist doctors, as well as 10,000 nurses and other support staff and serves nearly 2 million patients annually. To meet the need for world-class medical services for all people in Indonesia, Siloam's business strategy which is based on economies of scale (the principle of economies of scale) allows each of its hospital units to operate at lower costs. Thus, the company's vision of realizing international quality health services in Indonesia that is based on divine compassion can become a platform for Siloam to respond to the dynamic social

transformation in Indonesia. Currently the Siloam Hospitals Group has 42 hospitals and 23 clinics spread from Sabang to Marauke (siloamhospitals.com, 2022)

One of the Siloam Hospitals Group hospitals is Siloam Hospitals Surabaya. Located in the center of Surabaya City, Siloam Hospitals Surabaya provides the best international-class service through excellent services such as a 24-hour emergency service, a comprehensive stroke service center, hemorrhoids clinic, wound clinic, pain clinic, spine clinic and child development clinic. Siloam Hospitals Surabaya has received international recognition from the Asia Pacific Hand Hygiene Excellence Award from the World Health Organization (WHO) and the Asia Pacific Society of Infection Control (APSIC), as well as KARS accreditation from the Ministry of Health of the Republic of Indonesia.

This research was conducted to see the influence of management process of quality, quality outcomes, accreditation benefits, and management & leadership commitment factors on patient centeredness among employees at Siloam Hospitals Surabaya.

Literature Review
Patient Centeredness
The implementation of PCC (Patient Centered Care) implies that health care workers assess patient characteristics, needs, and patient choices and then discuss with patients about their health conditions and treatment plans and encourage patient participation in decisions related to treatment and implement treatment options according to needs patients (Lauver et al. 2001; Schoot et al. 2005).

Management And Leadership Commitment
Kerstin V. Siakas1 and Elli Georgiadou (2002) said "Management commitment and leadership are the driving factors for motivating employees to strive for continuous process improvement".

Management Process Of Quality
Tjiptono and Diana (2003), Total Quality Management (TQM) is an approach to increasing organizational productivity (quantitative performance), improving quality (reducing errors and damage levels), increasing effectiveness in all activities, increasing efficiency (reducing resources through increasing productivity), and do the right things in the right way.

Quality Outcomes
Kotler and Keller (2009:143), Quality (quality) is the totality of features and characteristics of products or services that depend on the ability to satisfy stated or implied needs. We can say that a seller has delivered quality when his product or service meets or exceeds the customer's expectations.

Accreditation Benefits
According to Republic of Indonesia Ministry of Health Regulation (Permenkes) No. 59a/Menkes/PER/II/1998 concerning hospitals, accreditation is an acknowledgment given by the government to hospital management, because it has met the minimum standards set.

Research Issues and Methodology
This research is causal in nature because it is used to develop existing research models to test research hypotheses which are determined based on a literature review to answer the problems identified in the previous chapter. The problems raised in this study were the directions of previous researchers which were then developed. The research was conducted to analyze management and leadership commitment, management process of quality, quality outcomes, and accreditation benefits on patient centeredness. The research method used in this study is a quantitative method. The quantitative method is used because the results of the analysis can be obtained accurately if used according to the rules, can measure the interaction of the relationship between two or more variables and can simplify the reality of complex and complicated problems in a model.

This study will use probability sampling where the sampling technique provides equal opportunities for each element (member) of the population to be selected as a member of the sample. In this study, data collection techniques were carried out by distributing questionnaires to 121 respondents who were employees and were involved in the organizational structure of the hospital accreditation team.

A research requires data analysis and interpretation which aims to answer research questions and reveal certain social phenomena that form the basis of research. Data analysis is a process of simplifying data into a form that is easier to read and interpret. Data obtained through questionnaires, will be processed using analytical techniques.

The method chosen to analyze data must be in accordance with the research pattern and the variables to be studied. The analysis technique used in this study uses SEM (Structural Equation Modeling).

According to Hair et al. (2006, p.710), Structural Equation Modeling (SEM) is a multivariate technique that combines aspects of factor analysis and multiple regression which allows researchers to simultaneously measure the tension of interrelated dependency relationships between measured variables and latent constructs (variates) as well as between multiple latent constructs. The advantage of SEM application in research management is due to its ability to adjust the dimensions of a concept or factor (which is very commonly used in management) and its ability to measure the effect of theoretical relationships (Ferdinand, 2002). The analysis tool that will be used to answer research problems is the AMOS 22.0 software (Moment Structure Analysis). AMOS is often used in marketing and strategic management studies (Ferdinand, 2002).
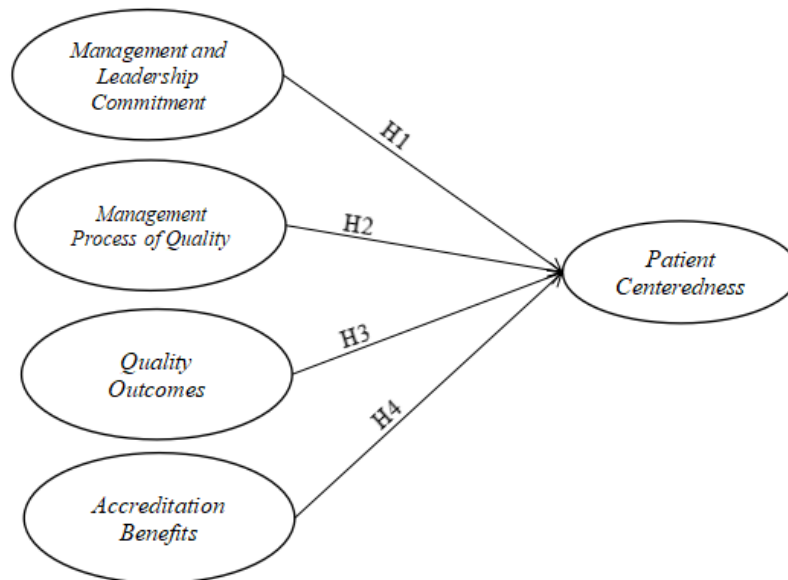

Figure 1. Research Model
Source: Hijazi et al (2017)

Finding and Discussion
Finding

Questionnaires were distributed to 121 respondents who met the requirements as a sample for this study, namely respondents who were employees of Siloam Hospitals Surabaya and joined in the Organizational Structure of the Hospital Accreditation Team. Respondent characteristics are data obtained from respondents in the form of gender, age, last education, and position. The following is a summary of the characteristics of the respondents through the table below:

Tabel 1 Respondent profile descriptive statistics

Respondent Profile	Description	Frequency	Percentage
Gender	Male	57	47,1
	Female	64	52,9
Age	20 - 24	1	0,8
	25 - 29	16	13,2
	30 - 34	34	28,1
	35 - 39	29	24,0
	40 - 44	19	15,7
	45 - 49	12	9,9
	50 - 54	8	6,6
	55 - 59	2	1,7
Education	High School	1	0,8
	Associate's degree	38	31,4
	Undergraduate	75	62,0

	Postgraduate	7	5,8
Position	Non Medic - Staff	36	29,8
	Nurse	34	28,1
	Medical	30	24,8
	Nursing Assistant	12	9,9
	Non Medic - Non Staff	7	5,8
	Paramedic	2	1,7

This study uses a data analysis technique, namely Structural Equation Modeling (SEM), so that there are seven steps that must be taken to evaluate the criteria for Goodness of Fit, namely: the level of conformity between the reality of research results in the field supported by a theoretical framework and a research model developed using predetermined criteria.

The research carried out is causal because it develops a research model that already exists and tests the research hypothesis that has been determined based on the study of the literature to answer the problem formulation that has been determined. The research was conducted using quantitative methods using statistical techniques in order to collect, process, and test data. The research carried out also has stages from theory as a beginning, establishing hypotheses, determining respondents, collecting data, analyzing data and providing conclusions as stages of quantitative methods. The quantitative method was chosen to be used because it has accurate results if it is applied according to the rules for testing the relationship between two or more of the variables used. The results of the goodness of fit evaluation to see the degree of compatibility between the model and the data re-test results, include four variables namely management and leadership commitment, management process of quality, quality outcomes, and accreditation benefits as measured by 23 indicators can be seen in table 1 below:

Tabel 2 SEM Feasibility Test Index

Kriteria *Goodness of Fit*		Full Model	Critical Value	Conclusion
Absolute Fit Indices	*Probability Chi-square*	0,140	> 0,05	*Good fit*
	Cmin/DF	1,080	≤ 2,00	*Good fit*
	GFI	0,832	≥ 0,90	*Marginal fit*
	RMSEA	0,026	≤ 0,08	*Good fit*
Incremental Fit Indices	*TLI*	0,978	≥ 0,95	*Good fit*
	CFI	0,980	≥ 0,95	*Good fit*
Parsimony Fit Indices	*AGFI*	0,801	≥ 0,90	*Marginal fit*

In testing structural relationships, hypothesis testing is carried out to test the significance of the influence between variables, using the critical ratio (CR) and probability values (p-value). Whether or not there is a significant effect between variables using the provisions if the CR value 1.96 or the p-value 5% significance level, then it is decided that there is a significant effect between these variables.

Table 2 below is the result of testing structural relationships in the context of testing for each hypothesis proposed in the study based on the output of Structural Equation Modeling:

Tabel 3 Hypothesis Testing Results Affect Inter-Variables

Pengaruh Antar Variabel		*Std Estimate*	*C.R.* [a]	*P-value* [a]
(H1) Management & Leadership Commitment	→ *Patient Centeredness*	0,319	4,390	0,005
(H2) Management Process of Quality	→ *Patient Centeredness*	0,317	3,582	0,007
(H3) Quality Outcomes	→ *Patient Centeredness*	0,411	4,667	0,016
(H4) Accreditation Benefit	→ *Patient Centeredness*	0,326	4,988	0,012
[a] *C.R. and the p-value is calculated using the bootstrap bias-corrected percentile method, for data that is not normally distributed in multivariate*				

Based on Table 2 above, it can be explained as follows:

1. The estimated results of the coefficient of influence of management & leadership commitment on patient centeredness show a significant effect with a CR value of 4.390 (greater than 1.96) and a significance value (p-value) of 0.005 (smaller than 5% significance level). The resulting coefficient of influence is 0.319 (positive), meaning that the stronger the management and leadership commitment, the more patient-centered hospital services will be. Thus, the first hypothesis which states that management & leadership commitment has a significant effect on patient centeredness at Siloam Hospitals Surabaya is acceptable (H1 is accepted).

2. The estimated results of the effect coefficient of management process of quality on patient centeredness also show a significant effect with a CR value of 3.582 (greater than 1.96) and a significance value (p-value) of 0.007 (smaller than 5% significance level) . The resulting coefficient of influence is 0.317 (positive), meaning that the better the quality management process, the more patient-centered hospital services will be. Thus, the second hypothesis which states that the management process of quality has a significant effect on patient centeredness at Siloam Hospitals Surabaya is also acceptable (H2 is accepted).

3. The estimated effect of the coefficient on the effect of quality outcome on patient centeredness also shows a significant effect with a CR value of 4.667 (greater than 1.96) and a significance value (p-value) of 0.016 (smaller than 5% significance level). The resulting coefficient of influence is 0.411 (positive), meaning that the higher the quality of the service outcomes, the more patient-centered hospital services will be. Thus, the third hypothesis which states that the quality outcome has a significant effect on patient centeredness at Siloam Hospitals Surabaya is also acceptable (H3 is accepted).

4. The results of the estimated coefficient of the effect of accreditation benefits on patient centeredness also show a significant effect with a CR value of 4.988 (greater than 1.96) and a significance value (p-value) of 0.012 (smaller than 5% significance level). The resulting coefficient of influence is 0.326 (positive), meaning that the higher the benefits of accreditation, the more patient-centered hospital services will be. Thus, the fourth hypothesis which states that the accreditation benefit has a significant effect on patient centeredness at Siloam Hospitals Surabaya is also acceptable (H4 is accepted).

Discussion

Based on the results of data processing using AMOS 22.0, the following results are obtained:

The management & leadership commitment variable has a significant effect on patient centeredness in Siloam Hospitals Surabaya employees with a CR value of 4.390 (greater than 1.96) and a significance value (p-value) of 0.005 (smaller than 5% significance level). The resulting influence coefficient is 0.319 (positive), meaning that the stronger the management & leadership commitment, the greater the patient centeredness of Siloam Hospitals Surabaya employees. This can happen because leaders and managers have a clear vision in improving service quality, consistently participate in improving the quality of hospital services, have the ability to process changes that occur in services, and participate in the hospital accreditation process. In addition, the most important thing is that the leaders in the hospital are able to generate confidence in their subordinates that efforts to improve service quality will be successful and have an impact on this patient centeredness in every employee of Siloam Hospitals Surabaya. Every week, leaders at Siloam Hospitals Surabaya have a routine agenda, often called a coordination meeting. In this coordination meeting, issues of problems that occur or important information that affect health services to patients and families will be discussed. Regarding issues of problems that occur, they are taken from incident reports made by staff. From the incident report, it will be discussed for discussion of handling and preventive actions so that similar incidents do not happen again. In addition, appreciation for services to patients will also be presented in this coordination meeting. Appreciation is obtained through the feedback form of patients who have received health services at the hospital. Each leader is required to provide socialization or pass on the information obtained through the coordination meeting so that the leaders are responsible if their subordinate staff does not know about the information or socialization that is internal to the hospital. In the accreditation process, every leader also has an important role, in this case every leader is required to ensure that every subordinate staff knows the standards that have been set and is patient-centered in order to be able to provide the best quality of service.

The management process of quality variable also has an influence on patient centeredness in Siloam Hospitals Surabaya employees. The results of the estimation of the effect coefficient of management process of quality on patient centeredness also show a significant effect with a CR value of 3.582 (greater than 1.96) and a significance value (p-value) of 0.007 (smaller than 5% significance level). The resulting coefficient of influence is 0.317 (positive), meaning that the better the quality management process, the more patient-centered hospital services

will be. As one of the private hospitals in Surabaya, Siloam Hospitals Surabaya continues to develop health services and add new services in order to provide maximum health services to the community. This is done by adding increasingly sophisticated equipment and periodically carrying out the calibration process so that the accuracy of the equipment is maintained so that the health services provided are precise and accurate. The equipment calibration process is also one of the assessment factors in hospital accreditation so that this maintains and improves the quality of health services to patients. Apart from the equipment aspect, Siloam Hospitals Surabaya regularly improves the competence of its experts through training, both internally and externally. So that in addition to upgrading equipment, experts are increasingly expanding their competence. In addition to the two things above, Siloam Hospitals Surabaya also encourages every staff to document everything that affects service quality through incident reports so that service quality is maintained and continuously improved. In this incident report, staff can report if there are incidents that cause complaints and harm to patients and the hospital. Staff were asked to explain in detail what happened, who was involved, what actions were taken immediately after the incident occurred and how the impact of the incident was. This is one way for Siloam Hospitals Surabaya to continue to be patient-centered, maintain and improve the quality of service to patients.

The quality outcome variable also has an influence on patient centeredness in Siloam Hospitals Surabaya employees. The results of the estimation of the coefficient of the effect of quality outcome on patient centeredness also showed a significant effect with a CR value of 4.667 (greater than 1.96) and a significance value (p-value) of 0.016 (smaller than the 5% significance level). The resulting coefficient of influence is 0.411 (positive), meaning that the higher the quality of the service outcomes, the more patient-centered hospital services will be. Siloam Hospitals Surabaya has one department where ensuring customer satisfaction is the main priority, that department is PSE, Patient Service Excellent. This department exists so that every patient and family who seeks treatment at Siloam Hospitals gets the best service so that they are satisfied with the services provided. Every patient seeking treatment will be asked to fill out a feedback form online and at Siloam Hospitals it is known as SOFAS (Siloam Online Feedback Aggregator System). SOFAS can be accessed by patients and families from the barcode that has been provided in the hospital area or filling in from a link that will be sent automatically since the patient and family make transactions at Siloam Hospitals. SOFAS contains the services received by patients and their families both in outpatient, inpatient, emergency room, medical check-up, and Siloam at Home. Each section has a target of 65% for patient satisfaction using health services and as a whole for the hospital, the target set is 85%. From SOFAS filling, PSE will make a PSI (Patient Satisfaction Index) report that must be accounted for to the head office every month. The target of this report is that Siloam Hospitals Surabaya can see how patient and family satisfaction is with the service. In addition, SOFAS can assist hospitals in terms of maintaining and improving services to patients and families.

Apart from management & leadership commitment, management process of quality, and quality outcome variables, the accreditation benefit variable also influences patient centeredness. The higher the benefits of accreditation, the more patient-centered hospital services will be. Every hospital in Indonesia is required periodically to have accreditation standards so that services to patients can be maximized. Siloam Hospitals Surabaya in 2022 has renewed its hospital accreditation in November. Following the LAM-KPRS standard, Siloam Hospitals Surabaya succeeded in achieving plenary accreditation. This shows that Siloam Hospitals Surabaya meets the established standards and has provided a good quality of service for every patient. Accreditation has a role for every hospital to continue to be patient-centered, maintain and improve the quality of service quality.

Of all the variables above, all independent variables have a significant effect on the dependent variable. So that all hypotheses can be accepted in this study. Of all the independent variables above, the quality outcomes variable is the variable with the highest Std Estimate and P-value compared to the other variables.

Conclusion

This research model was conducted to see how management & leadership commitment, management process of quality, quality outcomes, and accreditation benefits have a significant effect on patient centeredness in hospital employees. This research was conducted with a sample of 121 employees who are included in the organizational structure of accreditation. By knowing the results of this study, it is hoped that it can be input for the hospital to improve the quality of service to patients in the future.

The results of this study show that there is a significant influence from management & leadership commitment, management process of quality, quality outcomes, and accreditation benefits on patient centeredness

Research Limitation

In this study there are still things that can be developed, therefore the researchers provide the following recommendations;

1. The limitations of this research are the limited number of respondents because it only focuses on one hospital unit. In future research, several hospital units or a government hospital can be used to see how the independent variable influences the dependent variable.

2. Further research can also be developed to look for other strategies to see not only patient-centered hospital services but to see patient satisfaction and customer loyalty towards hospitals.

3. Adding to the characteristics of the respondents, especially in terms of length of service because the different characteristics of the respondents allow for different results.

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