



**Service Quality Leadership of Emergency Department of RSUD K.R.M.T
Wongsonegoro (K.R.M.T Wongsonegoro District Hospital)**

Ima Ariyani[✉], Sutopo Patria Jati, Septo Pawelas Arso

Universitas Diponegoro Semarang, Indonesia

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Abstract

Leadership style in hospital environment affects towards service quality. Therefore, chief of RSUD K.R.M.T Wongsonegoro conducts several efforts to increase its service quality especially at Emergency Department. The purpose of this research is to know the most-used leadership style by the chief of RSUD K.R.M.T Wongsonegoro that affects towards service quality at the Emergency Department. This research uses qualitative research method and selects the informant by using purposive sampling technique. The main informants consist of 4 (four) persons, and triangulation informants consist of 4 (four) persons. The data collection techniques used by this research are in-depth interview and document study. Based on the research results, there were two leadership styles found during the research. Firstly, it showed that the most dominant leadership style used by the chief and affected on the employees' discipline in order to increase the service quality at the Emergency Department was transformational leadership style, where the chief encouraged, inspired, and appreciated the employees, so they were able to carry out the applicable policies, because they felt they were appreciated. Secondly, transactional leadership style, by implementing award and punishment systems, the employees were obey the rules they expected to get the award if they executed their job well.

[✉] Correspondence Address:
RSUD K.R.M.T Wongsonegoro Kota Semarang, Jawa Tengah, Indonesia
E-mail: i_dorthy@yahoo.com

INTRODUCTION

Chief of hospital plays an important role in establishing and maintaining his/her employee's discipline, and then he/she must be consequent in sanctioning, reprimanding, or punishing the employees who break the rules (Erni Faturahmah, 2017). The chief is obliged to raise the awareness of the employees especially in doing their job efficiently in accordance with the Minimum Service Standards (SPM) (Kemenkes RI, 2008). Leadership becomes a problem solving tool in an organization, so that leadership itself gets special attention especially in the quality leadership moreover in health services (Alfrida Pare, Noer Bahry, 2012).

Based on the monthly quality report at the Emergency Department of RSUD K.R.M.T Wongsonegoro, in the last 6 (six) months, there were 55,9% patients got triage treatment from the emergency doctors /physicians, the mortality rate was 5 per 1000, the number of mortality on the Emergency Department patient might cause a marked decrease on the quality services, patient satisfactions, endanger the patient's safety, and raise the lawsuits risk, moreover the failure on the IV catheter insertion more than 1 (one) was 1,3%. True emergency patient was 4,2%. Duration which was needed by the doctor in treating the patient was 4,2%. The inpatient who still treated in the Emergency Department for more than 6 hours was 4,5%. Based on the report above, it shows that the service quality at the Emergency Department is considered as "poor". That problem leads to a marked decrease on the service quality of the Emergency Department and it can be seen from the visit rate of the Emergency Department patient dropped in the last four months of 31,8%. It is discovered through the first semester of community satisfaction index in 2019 based on PERMENPAN RB No. 14 of 2017 of 88,69% (CV. Maju Barokah, 2019).

Realizing that leadership style in the hospital really affects towards the service quality especially service quality at the Emergency Department, the chief of RSUD K.R.M.T Wongsonegoro conducts several efforts in order

to increase the service quality at the Emergency Department through some quality management components such as process of quality management, quality leadership, and quality organization (Kemenkes RI, 2009). Quality itself is defined as customer satisfaction. According to Juran, two components of quality are product feature and free from deficiency (Winarsih, 2019).

According to a research conducted by Yudi in 2015, leadership styles which have positive impact on work discipline are transformational, transactional, and autocratic. So, in order to establish the discipline on each employee, it will not be completed if it is just pointing on someone else to transform the organization resources optimally or through approach method by giving an encouragement and award as a reward in accordance with transactional leadership style, because it must be accompanied by an absolute leadership with a threat of punishment such as autocratic leadership style, because it will instill a fear on the employees and they will follow the order of the chief (Yudi Prawira Jaya & Dewi Adnyani, 2015). Then, according to Isdiani in her research found that by implementing transactional and transformational leadership style, it would help the chief to increase the employee's work discipline moreover the employees are involved in the work program arrangement (Isdiani & Sudiro, 2019).

Preliminary study was done through observation and interview with the Head of Emergency Department and the Head of Emergency Ward on September 4-14, 2019 in RSUD K.R.M.T Wongsonegoro. Based on the results of the preliminary study, it shows that the quality management of the Emergency Department had not run properly and there was no service evaluation activity, which means they did not routinely check their three-month activities and/or evaluate their activities led to the goals or not. Even they did the evaluation program, but there was no follow-up based on the evaluation results, such as they had not run any monitoring action after the treatment, for example asking patient's condition after he/she

went home. But, on the other hand, it is difficult to do any analysis in order to increase the service quality at the Emergency Department, because it is related to a new procedure and also to avoid from the emergence of same problem or decide new target for next improvement. The Decision-making process always involves the Emergency Department employee, such as a deliberation. If it does not get any decision, the problem will be discussed in the higher forum, but the policy remains under the Director (Erni Faturahmah, 2017).

Based on Enny Mar'atus' research in 2014, by implementing good leadership, it will increase the hospital performance. Therefore, in order to gain performance improvement, it needs leadership improvement in motivation factor or competence factor. So, it is expected that through the improvement of hospital performance, it will increase the visit rate (Enny Mar'atus Sholihah, 2014).

Leadership style in the hospital environment will determine the service quality and the employee's performance, especially at the Emergency Department, and it is expected that the function of the hospital can be reached optimally. The chief of the hospital must establish a new image with good reputation in order to deal with any necessity and public demand, also be able to compete with the other healthcare providers (Ingguniadi, Woro, Handayani, & Raharjo, 2018).

The purpose of this research is to know the leadership style that affects towards the service quality at the Emergency Department of RSUD K.R.M.T Wongsonegoro (K.R.M.T Wongsonegoro District Hospital). The benefit of this research is the target hospital is expected that to be able to upgrade its service quality especially at the Emergency Department of RSUD K.R.M.T Wongsonegoro and give its best services to the people who need medical treatment.

METHOD

This research uses qualitative method and selects the informant using purposive sampling. Main informant (MI) in this research consists of 4 (four) persons, they are Director, Vice Director of Medical Services, Head of Medical Services Department, Head of Medical Services Section, and then there are 4 (four) triangulation informants (TI), they are Doctor of the Emergency Department, Nurse Team Leader of the Emergency Department, and Nurse of the Emergency Department. Criteria for the triangulation informant are that nurse must have at least 5 (five) years working experience in the Emergency Department, and have good communication skills, and at least graduated from D3 (Third Diploma) in Nursing Sciences.

This research was conducted in October to December 2019, located at the Emergency Department of RSUD K.R.M.T Wongsonegoro, Semarang City. The data collection technique uses in-depth interview. Some additional devices are used in order to help the researcher to gain the data, such as in-depth interview guidelines and recorder. The validity test uses source triangulation technique, by comparing the interview results between the Director, the doctor(s), and the nurse(s) of the Emergency Department. It is used to check the validity of the answers given by the main informants.

This research uses Content Analysis with inductive data analysis as the data analysis technique. The analysis itself is started from data collection, data reduction, data presentation, and data verification (Sugiyono, 2013).

RESULTS AND DISCUSSIONS

Characteristics of the main informant will be described in the table 1 below:

Table 1. Characteristics of the main informant

No	Code	Age	Sex	Position	Education Background	Working Period (year)
1	MI 1	55	F	Director	Master	30
2	MI 2	46	F	Vice Director of Medical Services	Specialist	14
3	MI 3	51	M	Head of Medical Services Department	Master	15
4	MI 4	45	F	Head of Medical Services Section	Master	17

According to the table 1, those 4 (four) main informants have same education background, i.e.: medical education, and then they continue their study and pursue the Master program (S2). The age of those main informants relatively mature and they have varied working experiences.

Leadership Style in RSUD K.R.M.T. Wongsonegoro

The chief is considered as a person that can inspire the employees, because he/she is often helping the employees and getting around only to greet the patients which are waiting the services at the Emergency Department.

“...Leader gives what people need, for the employee, the leader becomes an example, inspire, appreciate, and have vision to develop the hospital...” (4MI,4TI)

Leadership style is a characteristic in the form of behavior pattern and preferred strategy, and then implemented by the chief/leader to influence his/her subordinates to achieve the purpose of the organization. Based on the in-depth interview results with the main informants and the triangulation informants, the study gains some illustrations that leadership styles implemented by the chief of RSUD K.R.M.T Wongsonegoro and then affects the employees’ discipline especially in the services punctuality at the Emergency Department are autocratic, democratic, transactional, and transformational (Rahim, Junaidi & Afa, 2016).

“...Viewed from discipline aspect, chief is a perfect role model because he/she is

considered as a discipline figure. The chief comes earlier in the morning, follows the morning assembly and goes home in the afternoon although he/she has official out-of town programs...” (3MI,2TI)

Discipline is an important factor in producing employee’s best performance. Proper discipline will show huge responsibility from the employees towards their duty, so they will be more enthusiastic during their work and expected to achieve the enhancement of service quality at the Emergency Department (Isdiani & Sudiro, 2019). Policy related to the discipline especially about the employees’ discipline in services punctuality and on-time attendance has been regulated in the regulation of employee’s discipline and services punctuality at the Emergency Department based on the Minimum Service Standard of the Emergency Department (Kemenkes RI, 2008). In fact, the employee’s discipline has already been regulated in the employee’s discipline regulation on the Government Regulation No. 53 of 2010 about the Discipline of Civil Servant.

The chief is not always involving his/her subordinates in the decision making or arranging the policy especially if it is related to the discipline, existing regulations or the standards. Because working hours itself has been regulated in the employee’s discipline regulation. Still, the opening hours related to the medical services has already been regulated in the Minimum Service Standard, that is 24 hours services at the Emergency Department (Presiden Republik Indonesia, 2009) (Kemenkes RI, 2009).

“...The policy related to the discipline has had its own standards, and the hospital employees must carry out that policy...”. (2MI,2TI)

“There is threat and coercion to regulate their discipline especially in their attendance and also starting the on-time services...”. (3MI,1TI)

“...Because of the presence of the threat, the employees are more discipline...”. (2MI,1TI)

Decision making without involving the doctor is the form of autocratic leadership style. The enhancement of discipline between the employees shows the effect of autocratic leadership style on the employee's discipline in the principle of services punctuality based on the Minimum Service Standard. This is suitable with the research results conducted by Yudi Prawira which stated that autocratic leadership style influenced towards the work discipline.

An autocratic leader/chief has several characteristics such as making a decision without involving his/her subordinates, and running the threat and/or coercion along with the implementation of the policy, and conducting strict supervision on the subordinates (Yudi Prawira Jaya & Dewi Adnyani, 2015).

“...In order to influence the subordinates/the employees to obey the policy, firstly, the chief will look on what do they want. After their desires are granted, they will automatically obey the policy. Because the chief himself cannot compel them without fulfilling their desire. Because the chief himself cannot compel them without fulfilling their desire. Then, it becomes one of the chief's methods to ingratiate the employees/subordinates...”. (2MI,3TI)

“...The employees obey the established regulations because they feel they are being appreciated by their chief and there is good communication between them and their chief...”. (3MI,3TI)

The chief of the hospital is a figure that inspires all of his/her employees. The chief usually visits on each service unit to meet and greet the patients and also the employees directly. It boosts the employee's motivation to be more discipline in performing their best

services just like what their chief does. Based on the interview results, it can be analyzed that the chief of the hospital is the figure that can inspire and motivate his/her employees/subordinates by doing some innovations in the enhancement of hospital services (Yekti, 2012).

“...There is a reward and punishment system for the undisciplined employee and it is very effective to intensify the implementation of discipline on each employee. So, the employees become more discipline...”. (3MI,1TI)

The punishment itself made by the chief of the hospital and it is regulated in the Director policy about punishment for the employee, i.e.: Surat Keputusan/Decree (SK) of Director of RSUD K.R.M.T. Wongsonegoro No. 335 of 2017 about the Punishment Policy Imposed on the Services. One of components in the assessment is the employee's discipline. But there is no particular regulation that manages a punishment for the undisciplined doctor in the services punctuality in accordance with the applicable regulations (Kemenkes RI, 2008).

If it is found that there is an employee that does not attend on time or does not start the services in accordance with the specified time, the chief will directly reprimand him/her. Reprimand/Warning is done through phone call or instant messenger such as Whatsapp by the Head of the Emergency Department, and also the coordinator of the general practitioners will contact the doctor or nurse who has not come yet or they have not executed the Emergency Department services yet. That warning is only used to warn or remind the doctors or the nurses to come earlier or sooner and open the Emergency Department services.

Besides the previous punishment above, the undisciplined employees also get service payroll deductions, receive a memo or warning letter (SP), and they cannot join into any seminar or workshop. According to the implementation of the reward for the obedient and discipline employees because they have worked and following the Minimum Service Standard of the Emergency Department and then the punishment for the undisciplined employees, so it can be concluded that the chief

has implemented transactional leadership style. By using this leadership style, the chief relies on the reward and punishment systems in order to motivate the employees to be more responsible on their duties in accordance with the MSS (SPM) of the Emergency Department. This is compatible with the transactional leadership style characteristics, the chief is involving an exchange process where his/her subordinates will get a real reward based on the chief's instructions (Sukmasari, 2011). And it can be inferred that the transactional leadership style which is implemented in the hospital environment influences towards the employees' discipline especially in the services punctuality in accordance with the Minimum Service Standard in RSUD K.R.M.T Wongsonegoro. The employees will try to fulfill their duty especially in performing on-time services, because they want to get the reward (Panjaitan, 2010).

The Emergency Department Services Quality Improvement

Technically the hospital employee's expertise shows the capability of the human resources in executing his/her duty. This capability is easier to be seen and to be felt by the patients and/or their families. The patients will be more satisfied if the doctors and also the nurses are communicative to them as an evidence that they care about their patients. One of competency improvements in the human resources sector at the Emergency Department is pursuing higher education, improving the capability and skills. The hospital itself also conducts any in-house training or ex-house training.

"...The competency of the employees at the Emergency Department must be improved...". (3MI, 2TI)

"...A proposal or request to follow a training, seminar, and/or workshop for the doctors and the nurses are submitted through the hospital's education and training department...". (3MI, 1TI)

The Emergency Department employee's competency must always be improved (Putro, 2016). A proposal or request to follow a training, seminar, and/or workshop for the doctors and

the nurses are submitted through the hospital's education and training department. In fact, there are some doctors from the Emergency Department have not joined ATLS training yet or they have already followed the training but their license needs to be upgraded, so the hospital gives them chance and fund to follow the training. They need to submit their request/proposal via the hospital's education and training department and then they must be waiting for the approval from the chief of the hospital. Unfortunately, their request not always be approved by the chief or the Director, because the hospital's budget is limited. If the budget is limited, they may follow the seminar or training but they should be divided into several phases.

The competency of each doctor and also nurse always be evaluated by the hospital, and then the evaluation results will be followed up with the training request that uses the hospital's fund. By following the training, it is expected that the nurses' competency can be upgraded and improved in accordance with the needs of quality improvement in the hospital (Kemenkes RI, 2009). Based on the analysis above, it can be concluded that the chief of the hospital has The Juran Trilogy concept in his/her vision, which is the quality management is one of three parts based on the employee in different levels and it contributes towards the hospital's quality improvement.

Quality Leadership in Service Implementation at the Emergency Department

The autocratic leadership style plays an important role towards the employee's services punctuality based on the Minimum Service Standard. It is implied from how the chief makes a decision without involving his/her subordinates, there is threat or coercion to execute the policy and also the presence of strict supervision towards the employee's discipline at the Emergency Department. Democratic leadership style also plays a role in the employee's discipline especially in the service punctuality based on the Minimum Service Standard which is the chief accepts the critics, suggestions, and arguments from his/her

subordinates, also he/she is able to direct his/her subordinates to work based on the chief's policy. Transactional leadership style plays a role on the employee's discipline especially in the services punctuality based on the Minimum Service Standard of the Emergency Department.

It is implied from the implementation of reward system for the disciplined employee rated from his/her on-time services in accordance with the regulations, and also punishment system for the undisciplined employees. Transformational leadership style plays a role in the punctuality of services in accordance with Minimum Service Standard, and also the chief becomes the good figure for the subordinates, be able to inspire them, and motivates the doctor especially in implementing the discipline, and be able to understand and fulfill the employee's needs.

CONCLUSION

Based on the research results about service quality leadership at the Emergency Department in RSUD K.R.M.T Wongsonegoro, it can be concluded that a number of leadership styles are implemented by the chief of RSUD K.R.M.T. Wongsonegoro, such as autocratic, democratic, transactional, and transformational; The most used leadership style is transformational and transactional styles, where the chief encourages, inspires, and appreciates the employees.; By the implementation of reward and punishment system, the employees are obedient to the hospital policy, and also they feel more appreciated and they are craving for the reward after executing their duties well.

For the doctors, their discipline and services punctuality in accordance with the Minimum Service Standard of the Emergency Department is improving. It is implied from the attendance list data and also the amount of patient visit in the RSUD K.R.M.T Wongsonegoro is increasing.

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