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ANALYSIS ON THE IMPLEMENTATION OF ECOLITERACY-BASED GREEN HOSPITAL PROGRAM POLICIES IN BHAKTI HUSADA GENERAL HOSPITAL OF BANYUWANGI

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ABSTRACT

Background: The fact shows that the hospital management do not concern on the existence of hospitals in the middle of residence with limited environmental supports, whereas the current paradigm reveals that hospital management and the complexity of its activities do not cause negative burden of environmental pollution. The demands of modern society's needs for hospital services has also shifted to the demands of environmentally friendly health services. Material & methods: A qualitative approach with a case study design is applied in this study. This study uses the Delphi method which aims to formulate, prioritize, and design policy problem solving strategies. Result: The analysis showed that four variables namely environmental conditions, relationships between organizations, organizational resources, and characteristics and capacity of implementing agencies affect the performance and impact of decentralization policies. Studies on these four variables are useful for understanding the implementation of Ecoliteracy-based green hospital program policies at Banyuwangi General Hospital. Conclusion: The policy environment is related to resource constraints and the availability of physical infrastructure. Relationships between organizations are determined by the clarity and consistency of program objectives. Organizational resources are related to the balance between budget sharing and program activities and the support of local political leaders. Characteristics and capabilities of organizing agencies are the commitment of officers on the program and the nature of internal communication.

KEYWORDS: Analysis of Policies, Ecoliteracy-Based Green Hospital Program, Delphi Method.

1.0 INTRODUCTION

The existence of hospitals with limited environmental support is not highly concernedby the hospital management, even though the current paradigm shows hospital management and the complexity of its activities do not bring the negative burden of environmental pollution and even provide positive benefits for environmental sustainability.^[1] One of the health problems occurring in the hospital environment is the representation of inaccurate implementation of a policy.

Policy implementation is the implementation of public policy decisions carried out by distributing existing resources both financial and human resources so as to produce outputs as previously planned.^[2] Policy analysis is a planned and systematic effort in making an analysis or accurate assessment of the consequences of policies, both before and after the policy is implemented.^[3]

Based on Indonesia Health Profile data, there are 1372 hospitals spread across several districts and provinces, and only a few hospitals are committed to implementing the Green Hospital program, including the RS Kanker Dharmais (Dharmais Cancer Hospital), Persahabatan Hospital and R. Syamsudin District Hospital, SH Sukabumi, Sidoarjo District Hospital and Bhakti Husada General Hospital is the only state-owned hospital that applies the concept of Green Hospital around Besuki residency.^[4] The hospital having green hospital concept was built, designed, renovated and maintained by paying considering aspects of health and sustainable environment.^[5]

The implementation of Green Hospital should be based on Ecoliteracy so that the principle of fulfilling the concept of Green Hospital can run optimally and can support improving the quality of hospital services. Ecoliteracy describes awareness on the importance of the environment.^[6] Safety for hospital users is a major need, because the community, including patients, are increasingly aware of the importance of receiving the right to safety in every set of health services provided by the hospital, including security guarantees from the negative impacts caused by the quality of the environment in the hospital.^[5] In the application of Green Hospital, Bhakti Husada General Hospital refers to the national standard or regulation namely the Ministry of Health Regulation 2018 on Green Hospitals. However, in the implementation of ecoliteracy-based green hospital program policies, there still found inaccuracies in the implementation of several criteria for environmentally friendly hospitals that are not in accordance with the 2018 RI Ministry of Health Guidelines related to Green Hospital.

2.0 MATERIALS AND METHODS

This research applies a qualitative approach with a case study research design. It uses technical triangulation, and source triangulation. Technical triangulation is in-depth interviews, observation, and documentation study. Source triangulation includes main informants, key The key informants, and additional informants. informant in this study is the Head of Bhakti Husada General Hospital in 2018-2019. The main informants in this study is the Head of Bhakti Husada General Hospital in 2019-present, the Head of the IPSRS Sub Division of the Bhakti Husada General Hospital as the head of the Green Hospital Program, the Accounting Staff as the Secretary of the Green Hospital Program, the General Staffing and Training Staff, the Head of the IPCN, the Head of the Catering Unit, and the Head of the Household Subdivision. Additional informants includesnurses and patients of healing garden activities. The policy is analyzed using the Delphi Method used in the forecasting and selection stages of alternative strategies / policies by policy actors having direct interaction with the policies that have been formulated.

3.0 RESULT

3.1 The Environment

The policy environment condition is influenced by resource constraints and the availability of physical infrastructure. The resource constraint is related to the lack of human resources, namely sanitarians. Besides, the problems related to the availability of physical infrastructure are the location of hospitals that are not easily reached by public transportation and the absence of pedestrian transportation facilities in the hospital area to the transportation place.

"We only have one sanitarian, but we should take care of several things" (IU4, 25 Years old).

"There used to be a staff for composting, but now he is shiftedto the cleaning service section,. Therefore, composting has stopped working. We are trying to plant hydroponics however it does not grow because we have no experts to take care of it" (IU2, 25 Years). "Patients find it difficult to reach the hospital because of the difficulty of public transportation to reach the hospital"(IU 2, 25 Years old).

The lack of human resources in implementing green hospital-based policies can hamper the goals of a program and the lack of human resources both in quantity and quality in an organization is due to errors on planning future human resources which can hinder the vision of achieving organizational goals.^[7] Organizations that are not supported by good employees related totheir quantity, quality, strategy, and good operations, then the organization is certainly difficult to maintain and develop its existence in the future.^[8]

Additionally, observations on the implementation of an ecoliteracy-based green hospital program showed that Bhakti Husada Hospital did not have pedestrian transportation infrastructure facilities so it did not meet the indicators of the location and landscape aspects contained in the Green Hospital Guidelines of the Indonesian Ministry of Health and also the Decree of Environmentally Friendly Hospital in 2019. It is also supported by the theory mentioning that health infrastructure is one of the key factors in achieving health development in Indonesia. Infrastructure is very important, but in addition to infrastructure, the factors that influence health development are accessibility, whether or not the health infrastructure is accessible by the community.^[9] In addition, defines infrastructure as physical facilities developed or needed by public agencies for government functions in the supply of water, electricity, waste disposal, transportation in the form of railroad networks, airports and highway facilities and other services to facilitate economic and social objectives.[10]

3.2 Relationship of Organizations

The results showed that the change of the Head of Hospital resulted in the clarity and consistency in the implementation of the ecoliteracy-based green hospital program changes. The clarity and consistency of program objectives is one of the important points of the relationship factor between organizations as has been stated by one of the informant as follows:

"by the change of the Head of the hospital, the policy also changes, finally the green hospital program is no longer consistently carried out by employees, for example, using personal tumblr on every meeting" (IU2, 25 years).

"Lately many visitors and patients family are smoking in the hospital area, even though there has been put some posters and smoking bans, and there are security guards who monitor smoking behavior" (IU3, 27 years)

The clarity means when policies have been implemented, then instructions must not only be accepted by the implementers of the policy, but it also has to be communicated clearly. The ambiguity of the message conveyed regarding the implementation of the policy causesmiss interpretation and even contradicts the meaning of the initial message.^[11]

3.3 The Organizational Sources

This aspect is related to the balance between budget sharing and program activities. Funding ofecoliteracybased green hospital program policy at Bhakti Husada General Hospital sourced from the internal hospital, thus the implementation of the program does not run optimally. As stated by the informant as follow:

"It is certainly the budget problem, because the green hospital program has lots of innovation activities but minimal funds, such as the installation of LED lights that require a lot of funds, PJU" (IU 2, 25 Years)

Regarding organizational resources, namely the balance between the budget sharing and program activities, financial resources, namely material resources or funds needed in implementing policies, play an important role. Lack of financial resources will cause implementation and application of policies failure.^[12]

In addition to the problem of budget balance and program activities, problems related to organizational resources, namely the support of local political leadersalso exist. As quoted from the interview results as follows:

"The funding of green hospital program is only sourced from the internal hospital with no external budget, so some of the activities and innovations of green hospitals are not optimal due to lack of budget" (IU 4, 25 years)

Advancing health policy is determined by the support of local political leaders by considering the difficulties of implementation^[13]. The politics of policy implementation concerns on managing factors, organizations and institutions that play a role in health reform.^[14]

3.4 Characteristics and Capability of Institutions

In this aspect, the officers' commitment on the program's implementation determines available various outputs, thus it can predicts achievements and changes expected. The following is an excerpt from the results of the interview regarding the commitment of the officers:

"Many program implementers do not understand the content and context of environmentally friendly hospital guidelines from the Ministry of Health, only few aspects are understood such as bringing personaltumbler when meeting" (IU4, 25 years).

"Sometimes employees forget to turn off the water tap after using, and let the bathroom lights on. They were consistent with the program only in the beginning" (IU3, 27 years)" The policy implementer or changesteam needs to recognize the complexity, policy, context and administration in which the policy will be implemented. Policy implementers need perseverance, discipline, and accuracy to work in specific contexts and need to make decisions about staffing, organizational structure, and relationships with stakeholders to make policy happen.^[13] implementation Through informant statements and previous research it was concluded that policy actors as policy implementers, both at the leadership and technical levels have certain characteristics in increasing policy effectiveness. Commitment of officers greatly influences the quality of service, this commitment includes theoretical abilities, technical abilities, conceptual abilities, moral abilities and technical skills.^[15]

The nature of internal communication is one of the subfactors of the characteristics and capabilities of the implementing agency in influencing the performance and impact of policy implementation. Actualization of a good organizational climate, namely the creation of and effective communication active between management and subordinates, between subordinates and colleagues, subordinates, and leadership among the public in an organization. Atmosphere creation is expected to accelerate a variety of coordination, cooperation and achievement.^[16] The following excerpts of interviews related to the nature of internal communication in the implementation of an ecoliteracy based Green Hospital program:

"As the head of the Green Hospital program, I do not have optimal communication with the current head of the hospital, because the new Head of the Hospital has never asked about this program."(IU 2, 25 Years)

In addition to the issue of officers' commitment to the program and the nature of internal communication, other problems occurred namely the support and political resources of the agency. Advancing health policy is determined by the support of local political leaders by considering the difficulties of implementation.^[13]

"We have no political support, all programs are funded by the hospitals, however we were able to won 3rd place at the national level green hospital competition which was posted in several media" (IU 1, 29 Years)

4.0 DISCUSSION

The implementation of the ecoliteracy based Green Hospital program in Bhakti Husada General Hospital was started on August 2018. In the application of the program, every individual realizes the importance of environmental sustainability. Bhakti Husada General Hospital refers to the Decree on Green Hospital Policy Head of the Bhakti Husada General Hospital of Banyuwangi and the national standardization of the Ministry of Health Regulation 2018 on Guidelines for Green Hospitals. The program includes several aspects, namely leadership aspects related to the basic licensing of environmental management, environmental monitoring performance, aspects of location and landscape, hospital buildings,managing risks of hazardous and toxic chemicals (B3), waste management, energy efficiency, water efficiency, environmental hygiene and disease vectors, food management, air quality, and socio-economic of society aspects.

The observation results at Bhakti Husada General Hospital showed several ecoliteracy-based eco-friendly hospital components have been implemented at Bhakti Husada General Hospital, including the existence of green open spaces, healing gardens and activities, bicycle parking areas, the presence of bio pores, the use of paving lights, the use of power PJU lights solar. rainwater reservoirs, infiltration wells and leadless pipes, composting, the use of used paper, laundry units using environmentally friendly detergents, the existence of non-smoking area education media, the use of natural stone as material, tens meter and non-mercury thermometers, the existence of B3 storage, namely spill kits, use of energy-saving LED lights, use of water faucetstap, the presence of Wastewater Treatment Plant (WWTP), use of ATS with bank capacitors, a place for managing medical waste, non-medical or solid waste, as well as the action of planting 1000 trees. The flagship activity in the ecoliteracy-based Green Hospital Program at Bhakti Husada General Hospital is a healing garden that provides a healing effect for patients, reduces the effects of stress and providing a garden for a relaxation for patients and employees.

However, at the level of policies implementation, there are still inaccuracies found, namely a number of environmentally friendly hospital criteria that are not in accordance with the Ministry of Health of the Republic of Indonesia Guidelinesfor Green Hospital related to ecofriendly strategy plan document including the waste minimization policy and 3R (Reduce, Reuse, Recycle) policy do not exist, the limited access of public transportation to the hospital location, no incinerator operating licenses, no roof garden, terrace garden, no physic garden and hydroponic plants, no eligible garbage dump for domestic waste, no increase in human resource capacity i.e., training or certification, and the absence of waste management. In addition there is also no energy savings, no intensity of electricity consumption, no use of energy-efficient Central AC, noper block electricity sub-meter use, no information dissemination related to energy efficiency through socialization or workshops, no standing banners and television media related to water management, not using sensor faucets, there is no urinal installation with a tap or sensor.

Regarding the environmental cleanliness, there are no competency certificates or training for cleaning service officers from personnel agencies accredited by BNSP, there are no competency certificates for HDI operators. Referring the air quality, three is no laboratory test results for incinerators, boiler, and lastl aboratories vehicle accredited by KAN, not measuring hospital operational vehicle emissions, there are no banners and standing banners, or TV media related to air quality.

5.0 CONCLUSION AND RECOMMENDATION

The identification of policy issues in this study includes environmental conditions, relationships between organizations, organizational resources and the characteristics and capabilities of agencies. The condition of the policy environment is influenced by resource constraints and the availability of physical infrastructure. Relationships between organizations are determined by the clarity and consistency of program objectives. Organizational resources are related to the balance between budget sharing and program activities and the support of local political leaders. Characteristics and capabilities of agencies related to the commitment of officers on the program and the nature of internal communication.

Some recommendations for Bhakti HusadaGeneral Hospital of Banyuwangi are firstly to involve the Regional Government or external support in the implementation of an ecoliteracy-based green hospital program by issuing Regional and Local Regulations related to an Ecoliteracy-based Green Hospital Program, thus the implementation of an ecoliteracy-based green hospital program runs well. Second, the socialization of the Decree of Environmental Friendly Hospital Policy of Bhakti Husada General Hospital and the Ministry of Health's Green Hospital Environmental Guidelines of 2018 to all employees of Bhakti Husada General Hospital during regular meetings and through social media as a form of commitment to the implementation of an ecoliteracy-based green hospital program. Third, providing online motorcycle taxi at the station of Bhakti Husada General Hospital area as a form of providing infrastructure for patients or visitors.

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Declaration

Authors declare that this manuscript has never been published in any other journal.

Authors contribution

Author 1: Information gathering, preparation and editing of manuscript.

Author 2: Concept initiation and final review of manuscript.

Author 3: Concept initiation.

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