SUMMARY

Analysis of Hospital Care Installation Performance
Based on 4 Perspective Balanced Scorecard
(Study of Increasing Effort of Hospital Care Installation
Performance of BPRSD dr. Soegiri Lamongan)

Sriwulani Sumargo

Performance measurement of hospital can be financial or non financial. One of non financial performance for hospital care installation that actually used is measurement of the bed occupancy rate or BOR. Indonesian Health Department’s standardization for BOR is 60% to 75%.

BPRSD dr. Soegiri Lamongan is a type C government hospital belongs to Lamongan District. It has 110 beds for in patient that devided into wards and private services unit and served by 26 doctors and more than 70 others medical attendans. This hospital has unsatisfied BOR among 4 years from 2001 until 2004. It were: 44,28%, 53,15%, 46% and 55,83%. But financial performance was quit good because it was always the same, or higher, than the financial target made by the government.

The aim of this study was to perform factors that made the BOR lower than standard. Balanced scorecard was a tool that has chosen to be the base of these study because of its comprehensive perspective. The perspective of: learning and growth, internal activity, customer and financial were ideal to look for the factors that made BOR lower than the standard. Each of the perspective has some critical success factors and indicators. Director and management of the hospital were ask to mention them and gave value(s). The higher the value was the strong the influence to customer to choose this hospital care installation and automatically increase the BOR.

Learning and growth perspective has critical success factors: doctors, nurses and training. Internal activity perspective has services quality process, medical and non medical equipment, working procedure and innovation factors. Customer perspective has: BOR, customer complaint’s management and promotion. And financial perspective has income and outcome of the hospital care installation and management of services fee for the employee.

Measurement criteria that used in this study were : \( \geq 80\% \) was very good, \( 60\% - 79,99\% \) was good enough and less than 59,99 was bad. The result of this study was bad because its rate in the score card was 49,99%. Learning and growth’s score was 54,13%, internal activity was 55,59%, customer perspective was 46,63% and financial perspective was 42,31%.

Learning and growth’s lowest score was training score, activity internal’s was innovation, customer’s was promotion and financial’s was management of services fee. The conclusion was that this hospital didn’t focus to the customer and has low BOR because of: lack of training, innovation and promotion and also unsatisfied services’ fee management. To give solution and recommendation to increase the BOR, focus group discussion and observer’s suggestion were performed at the end of the study. The recommendation has been create for each specific ward and room.

x
ABSTRACT

The Bed Occupancy Rate (BOR) of dr. Soegiri Hospital in Lamongan was decreased during 2002 and 2003 from 53.15 % to 51.46 %. It was tend to increase on the 2004, to 55.83 %, but while the BOR increase, the financial income from in patient institution decreased 0.28 % from its target during 2004.

The aim of this research is to analyze factors that influenced BOR and financial results. Tools that compatible to analyze , the comprehensive ones, is balanced scorecard. Balanced scorecard analyze four perspectives that have cause and effects links each other. There were : learning and growth perspective, business internal process perspective, customer perspective and financial perspective. In this research, learning and growth perspective was analyze about human resources activity and climate for action, business internal was analyze activity internal like : medical service quality, standard operational procedures, policy and innovation. Customer perspective was analyze the organization readiness to perform services, instead of customer satisfaction. Financial perspective was analyze income and the aim of budgeting, expenses and incentives.

The results was, that hospital have enough well educated doctors and nurses. They have been satisfied of working places, most were unsatisfied of medical tools, reward system, incentives and human relation management. The SOP and policy were unqualified, highly gross and net death rate and bad information system. In financial perspective it was found that there was a small budget for training and medical equipment.

To increase BOR there were some recommendations and schedules that came from focus group discussion. The programs must be held carefully to purpose the good result of occupancy.

Key words : BOR, BSC, learning and growth perspective, internal activity perspective, customer perspective and financial perspective, CSF.