

# **RINGKASAN**

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### Pengaruh Pembelajaran Organisasi terhadap Budaya Organisasi dan Kepemimpinan Transformasional serta *Clinical Governance* di Rumah Sakit Tipe B Jawa Timur

*World Health Organization (WHO)* memandang kinerja rumah sakit harus dipandang sebagai sesuatu yang lebih komprehensif. *World Health Organization (WHO)* melihat bahwa terjadinya masalah penurunan utilisasi rumah sakit berawal dari penilaian kinerja rumah sakit yang kurang holistik. WHO menganggap pengukuran kinerja rumah sakit selama ini lebih berfokus pada aspek manajerial dan finansial tanpa memperhatikan dengan sungguh-sungguh aspek pelayanan klinis (*clinical performance*). Aspek pelayanan klinis ini sangat penting diperhatikan karena berpengaruh terhadap kecacatan (morbiditas) dan kematian (mortalitas). Kedua aspek tersebut tentu tidak dapat diperbandingkan dengan besarnya pendapatan (*revenue*). Sebaliknya, jika masalah ini diperhatikan secara serius akan berdampak secara luar biasa terhadap kepercayaan publik kepada rumah sakit pemerintah yang akhirnya bermuara pada peningkatan pendapatan.

Salah satu pendekatan kinerja rumah sakit yang dipandang mengakomodasi masalah kinerja klinis ini adalah pendekatan *clinical governance*. Rumah sakit yang memiliki *good clinical governance* dapat menjawab permasalahan ini karena berfokus pada 3 hal yaitu berfokus utama pada kesehatan pasien, tindakan didasarkan pada bukti ilmiah (*evidence based*), dan pendekatan ini sejalan dengan tugas profesional kesehatan yang merupakan pelaku utama pelayanan sebuah rumah sakit yaitu dokter dan perawat. Transformasi ke arah pelaksanaan *good clinical governance* di rumah sakit memerlukan 2 mekanisme. Mekanisme pertama bersifat *top down* berupa kebijakan pemerintah. Mekanisme kedua adalah *bottom up* yang berasal dari rumah sakit sendiri. Mekanisme *bottom up* ini terdiri dari 3 hal yaitu membentuk lingkungan belajar (*learning environment*), kepemimpinan yang baik (*excellent leadership*) dan staf yang memiliki nilai-nilai yang tinggi (*highly valued staff*).

Penelitian ini secara umum bertujuan melihat hubungan ketiga hal tersebut yaitu pembelajaran organisasi, budaya organisasi, kepemimpinan dan *clinical governance* karena masalah tersebut belum banyak diteliti. Penelitian ini merupakan studi eksplanatori dengan metode pengumpulan datanya menggunakan rancangan survei yaitu dengan mengambil sampel dari suatu populasi dengan menggunakan kuesioner sebagai alat pengumpul data. Pendekatan yang digunakan adalah kuantitatif yaitu suatu pendekatan dimana di dalam pembuktian hipotesisnya didasarkan pada informasi kuantitatif yang diperoleh dari data hasil pengukuran. Ditinjau dari tujuannya maka penelitian ini adalah penelitian kausalitas (*causal relationship*) karena berusaha mencari pengaruh antara variabel.

Populasi dalam penelitian ini adalah bagian pelayanan klinis yang merupakan tim kerja yang bertugas memberikan pelayanan klinis tertentu di RS Tipe B di Jawa Timur. Bagian pelayanan klinis ditentukan berdasarkan 2 jenis pelayanan yaitu bagian pelayanan klinis dasar dan bagian pelayanan klinis penunjang yang terdiri dari bagian Bedah, Obstetri Ginekologi, Anak, Penyakit

Dalam, Laboratorium dan Radiologi. Berdasarkan data dari Dinas Kesehatan Propinsi Jawa Timur terdapat 16 Rumah Sakit tipe B di Jawa timur, sehingga seluruh populasi berjumlah 96 bagian pelayanan klinis. Unit analisis pada penelitian ini adalah bagian pelayanan klinis. Dari populasi bagian pelayanan klinis, keseluruhannya dipergunakan sebagai obyek observasi. Dengan demikian penelitian ini menggunakan metoda sensus, tidak memerlukan teknik pengambilan sampel. Responden yang digunakan dalam penelitian ini berfungsi sebagai sumber data adalah dokter dan perawat atau bidan atau analis atau radiografer di masing-masing 6 bagian terpilih seperti tersebut di atas. Jumlah responden dari masing-masing bagian pelayanan klinis adalah 3 orang yang terdiri dari dokter (bukan kepala pada bagian pelayanan klinis) dan perawat atau bidan atau analis atau radiografer ( yang senior ).

Hasil dari penelitian ini dapat menjelaskan beberapa temuan yaitu pembelajaran organisasi berpengaruh positif terhadap *clinical governance* (Path Coeff = 0.433, p value= 0.003 ). Pembelajaran organisasi berpengaruh positif terhadap kepemimpinan transformasional (Path Coeff = 0.445, p value= 0.00.. ). Pembelajaran organisasi berpengaruh negatif terhadap budaya organisasi (Path Coeff = -0.657, p value=0.00..). Budaya organisasi berpengaruh positif terhadap *clinical governance* (Path Coeff = 0.443, p value= 0.003). Kepemimpinan transformasional berpengaruh positif terhadap *clinical governance* (Path Coeff = 0.637, p value= 0.00..).Pembelajaran organisasi berpengaruh secara tidak langsung terhadap *clinical governance* melalui budaya organisasi dan kepemimpinan transformasional (Path Coeff = -0.002, p value=0.003). Temuan lain dalam penelitian ini adalah rumah sakit yang digunakan sebagai tempat pendidikan dokter berdampak memperbaiki kualitas budayanya menjadi lebih egaliter, kolaboratif dan adaptif, dan kinerjanya (*clinical governance*) tidak lebih jelek dari pada rumah sakit non pendidikan.

## **Summary**

### **The Effect of Organizational Learning on Organizational Culture, Transformational Leadership and Clinical Governance of Type B Hospitals in East Java**

The World Health Organization (WHO) conceives that hospital performance should be viewed in a more comprehensive way. It views that the decrease of hospital utilization begins from the less holistic hospital assessment. The WHO considers that evaluation of hospital performance was more focused on managerial and financial aspects, without a thorough scrutiny on clinical service (clinical performance). The clinical service aspect is very important because it has an implication on morbidity and mortality. These two measures are incomparable with the revenue. On the other hand, if this aspect is considered seriously, it will give a dramatic effect on public trust towards public hospitals which will eventually leads to increase of income.

One of the approaches on hospital performance which is thought to accommodate clinical performance is the clinical governance approach. Hospitals that have good clinical governance can respond to these problems because it focuses on three things, including focus on patients' health and evidence based service. This approach coincides with the professional nature of the backbones of hospital health care givers: doctors and nurses. Transformation towards good clinical governance in hospitals requires two mechanisms. The first is top-down from government policy, and the second is bottom up from the hospitals themselves. The bottom-up mechanisms consist of three items: creation of learning environment, excellent leadership, and a high valued staff.

This research aims to find the relationship between those three factors: organizational learning, organizational culture, and leadership; with clinical governance, because this problem has not been widely studied.

This research is an explanatory study with a survey design as a method for data collection by questionnaire taken from population samples. A quantitative approach was taken, in which hypothesis examination was based on quantitative information obtained from the measurement. From its aim, this research can be categorized as causal relationship study because it tries to seek relations between the variables.

The population in this study is clinical service departments as teamwork of type B Public Hospital in East Java. There are two kinds of clinical service department, basic and supporting clinical service departments. They are department of surgery, obstetric and gynecology, pediatrics, and internal medicine laboratory and radiology service. Based on data from health department of East Java province, there are 16 type B hospitals in East Java, so the numbers of population of this study are 96 clinical service departments. The respondents as sources of data in the survey are doctors, midwives, nurses, medical lab technologist, and radiographer in those service areas. The unit of analysis of this study is hospital's working unit consists of 96 clinical service departments from 16 public hospitals. Analysis technique used in this research is Structural Equation Modelling or SEM of AMOS 5.00 and SPSS version 10.0 program package.

The results of this study can explain a few findings, as follows. This research shows that organizational learning positively affects clinical governance in hospital (Path Coeff = 0.433, p value= 0.003 ). This research shows that organizational learning positively affects transformational leadership (Path Coeff = 0.445, p value= 0.00.. ) This research shows that organizational learning negatively affects organizational culture in hospital (Path Coeff = -0.657, p value=0.00..). This research shows that organizational culture positively affects clinical governance in hospital (Path Coeff = 0.443, p value= 0.003). This research shows that transformational leadership positively affects clinical governance in hospital (Path Coeff = 0.637, p value= 0.00..).This research shows that organizational learning also has indirect affects on clinical governance through organizational culture and transformational leadership (Path Coeff = -0.002, p value=0.003). Other finding, this research shows that organizational culture of hospital, which is used as a teaching hospital, will be more egalitarian, collaborative, and adaptive. The hospital performance will not worse than a non teaching hospital.

**ABSTRACT**

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### **THE EFFECT OF ORGANIZATIONAL LEARNING TOWARD ORGANIZATIONAL CULTURE, TRANSFORMATIONAL LEADERSHIP AND CLINICAL GOVERNANCE OF TYPE B HOSPITALS IN EAST JAVA**

The World Health Organization (WHO) conceives that hospital performance should be viewed in a more comprehensive way. The clinical service aspect is very important because it has an implication on morbidity and mortality. These two measures are incomparable with the revenue. On the other hand, if this aspect is considered seriously, it will give a dramatic influence on public trust towards public hospitals which will eventually lead to increase of income. One of the approach on hospital performance which is thought to accommodate clinical performance is the clinical governance approach.

This research aims at finding the effect of three factors: organizational learning, organizational culture, and leadership on clinical governance in hospitals. The population in this study is clinical service departments of type B Public Hospitals in East Java and the sampling method is purposive sampling using four basic specialist services (surgery, obstetric and gynecology, pediatrics, and internal medicine) and two supporting services (laboratory and radiology service). The respondents as sources of data in the survey are doctors, midwives, nurses, medical lab technologists, and radiographers in those service areas. The unit of analysis of this study is hospital's working unit consisting of 96 clinical service departments from 16 public hospitals. Analysis technique used in this research is Structural Equation Modelling or SEM of AMOS 5.00 and SPSS version 10.0 program package.

This research shows that organizational learning positively affects clinical governance in hospital (Path Coeff = 0.433, p value= 0.003 ) and transformational leadership (Path Coeff = 0.445, p value= 0.00.. ) and negatively affects organizational culture in hospital (Path Coeff = -0.657, p value=0.00..). Organizational culture positively affects clinical governance in hospital (Path Coeff = 0.443, p value= 0.003). Transformational leadership positively affects clinical governance in hospital (Path Coeff = 0.637, p value= 0.00..). Organizational Learning also has indirect effects on clinical governance through organizational culture and transformational leadership, (Path Coeff = -0.002, p value=0.003). Other finding, this research shows that organizational culture of hospital, which is used as a teaching hospital, will be more egalitarian, collaborative, and adaptive. The hospital performance will not worse than a non teaching hospital

**Key words :** organizational learning, organizational culture, leadership, clinical governance