

Article

# Contribution of the Nursing Medical Committee to Enhancing Inpatient Service Quality at Labuang Baji Hospital, Makassar

Andi Khairul Musyawir 1\*, Momen Amalia<sup>2</sup>, Fitri Asfa Asmot <sup>3</sup>

- 1,3 Universitas Megarezky 1; e-mail : herul.ipm123@gmail.com
- <sup>2</sup> Universitas Megarezky 2; e-mail : momen.amalia@gmail.com
- \* Corresponding Author : Andi Khairul Musyawir

Abstract: The medical committee is a non-structural body whose members are selected from among the heads of functional medical staff (SMF) or those representing SMF in the hospital. Objective : This study aims to evaluate the role of the nursing medical committee and its influence on the quality of inpatient services at Labuang Baji Hospital Makassar. Method : Analytic descriptive method with the design used crosssectional design Result : Logistic regression analysis showed a significant influence between the role of the medical committee and the quality of inpatient services with a value of p=0.002. Further quality of inpatient services with a value of p=0.002. Further logistic regression analysis showed that the role of the medical committee had a very large influence on service quality, with an Exp(B) value of 44,000. This indicates that each increase in the role of the medical committee can increase the likelihood of good service quality by 44 times. Overall, the results of this study indicate that the role of the nursing medical committee is very influential in improving the quality of inpatient services at Labuang Baji Hospital Makassar. This finding is expected to be the basis for developing strategies to improve service quality in the hospital. Suggestion : Ensure that the roles and responsibilities of the medical committee and nurses are clear and mutually supportiveThe medical committee should have a deep understanding of the care process, while nurses need to know how the role of the medical committee can influence and support their practice.

Keywords: Hospital, Inpatient Service Quality, Nursing Medical Commite.

## 1. Introduction

Hospitals are very complex, dynamic, competitive, capital-intensive and labor-intensive institutions, multidisciplinary in nature and influenced by a constantly changing environment. However, it must continue to carry out its role as a social service provider, prioritizing community service and always considering financial principles. Hospitals must have service facilities at least general medical services, emergency services, medical services, outpatient services, inpatient services, surgery/basic surgical services, health services, pharmacy, nutrition, sterilization, medical records, administrative and management services, general services. Services. Health education, physical therapy, laundry and emergency care, hospital facility maintenance and waste management. (Herawaty, 2021).

Patient satisfaction depends on the quality of service. Service means all efforts of employees to fulfill the desires of their customers through the services provided. A service is considered good for patients, determined by whether the service provided is able to satisfy the patient's needs, according to the patient's perception of the service (satisfactory or disappointing, including the length of service).

Received: 15 January, 2025 Revised: 12 February, 205 Accepted: 17 March, 2025 Published: 19 March, 2025 Curr. Ver.: 19 March, 2025



Copyright: © 2025 by the authors. Submitted for possible open access publication under the terms and conditions of the Creative Commons Attribution (CC BY SA) license (https://creativecommons.org/li censes/by-sa/4.0/) The implementing regulations are the regulation of the Minister of Health No. 755/menkes/per/IV/2011 concerning the implementation of medical committees in hospitals, the medical committee is responsible for credentialing all medical staff who provide medical services, maintaining discipline, ethics and professional behavior, assisting the director in compiling medical staff by law and assisting in its implementation, compiling legal ethics policies and procedures, improving education and training as well as research and development in the medical field and monitoring and evaluating the quality of medical services, surgical cases, drug use, pharmacy, therapy, accuracy, completeness and accuracy of medical records, mortality and morbidity medical review/peer review/medical audit through the formation of sub-committees (PERMENKES RI, 2011).

The quality of health services refers to the level of perfection of health services in creating a sense of satisfaction in each patient. The more perfect the satisfaction, the better the quality of health services. Everyone has their own assessment of the quality of services provided by health service providers even though the quality of health services provided is the same (Najib, 2022).

The Hospital Medical and Legal Committee (KEHRS) must be formed in every hospital, considering the complexity of hospital health services that cause problems between patients, hospitals and/or health workers such as service providers. In addition, KEHRS is also needed to create good service management and improve the quality of health services and patient safety in hospitals. Permenkes 42/2018 states that KEHRS is a non-structural organizational element that assists hospital directors or managers in implementing hospital ethics and hospital law. (Tadda et al., 2022).

Based on data obtained at the Labuang Baji Hospital, Makassar, there has been a decrease in visits to general patients from year to year. This can be seen from the data we obtained at the Labuang Baji Hospital, Makassar, that in 2021 there were 9,764 inpatient visits, in 2022 there were 8,730 patients, and in 2023 there were 6,850 patients. (RSUD Labuang Baji Makassar 2024).

Based on data obtained at the Labuang Baji Hospital in Makassar in 2021, it had 273 inpatient beds. The BOR figure is 51.98%, the LOS figure is 5 (days). The TOI figure is 3 (days), and the BTO figure is 24 times/year. However, the ideal standard according to PERMENKES No. 1171 of 2011 for BOR is 60-85%. LOS according to PERMENKES No. 1171 of 2011 is 6-9 days, TOI is 1-3 days, and BTO is 40-50 times/year. In this case in 2021, of the four parameters of the inpatient indicator. The indicator values are not included in the efficient category is TOI of 3 days, while the BOR, LOS and BTO indicator values are not included in the efficient category (Menteri et al., 2011). Based on this background, the researcher is interested in conducting research on "the role of the medical nursing committee in efforts to improve the quality of inpatient services at Labuang Baji Hospital".

### 2. Literature Review

Hospital organization is a unique and complex organization. Unique because the hospital is a unique and complex organization. Unique because in the hospital there is a process that produces hotel services as well as medical services, nurses in the form of services to patients who are hospitalized or outpatients. Complex because there are very complicated problems where the hospital is a dense organization in which there are various kinds of treatment facilities, various kinds of equipment and those faced are people who are emotionally unstable, emotionally tense, because they are sick, including the patient's family. Therefore it can be said that hospital services are much more complex than a hotel.

Service quality is an important part of the hospital. Patients view quality health services as health services, so that patient needs can be met, even politely and kindly, on time, responsive and understanding patient complaints (Pohan, 2015). The description of the concept of service quality is largely determined by the difference between customer perceptions of the reality of the services provided and what customers should expect from the service (Ahmad et al., 2022).

Good service quality is measured not only by luxury, technical perfection and appearance of equipment, but also by the attitude and behavior of staff who must reflect professionalism and commitment. In order to improve the environment, patient rooms and Puske facilities, a satisfaction survey was conducted regarding intake. Everyone has the right to receive health services that meet their needs at affordable prices in a standardized health service environment, and has the right to obtain information about better and quality health and services. is still low. These problems can be identified by listening to patient complaints about the quality of health services, starting from the attitude of officers in serving patients, the inadequate room system and the quality of the health center. this also affects patient satisfaction with the quality of service (Muchtar et al., 2023).

The medical committee is a non-structural forum whose members are selected from the heads of functional medical staff (SMF) or those representing SMF in the hospital. The medical committee is under and responsible to the president director (PERMENKES RI, 2011)

The concept of professionalism above is based on a social contract between the medical profession and the community. On the one hand, the medical profession agrees to protect the community by screening (credentialing) medical staff who will practice in the community. Only good (credible) medical staff are allowed to provide services to the community, this is done through a licensing mechanism. Meanwhile, medical staff who do not yet meet the requirements can undergo a coaching process (proctoring) in order to have the necessary competencies so that they can be allowed to provide services to the community after going through credentials. On the other hand, the medical staff profession group obtains special rights (privileges) to carry out medical practices exclusively, and no other party may do so. With these special rights, medical staff who violate professional standards, professional prestige. However. If there are medical staff who violate professional standards, professional disciplinary action can be taken. This disciplinary action is in the form of suspension of clinical privileges so that the public can avoid unprofessional medical practitioners.

## 3. Proposed Method

This type of research is a quantitative study using a descriptive analytical method with a cross-sectional design. To see the influence between the independent variables and the dependent variables where the data concerning the independent and dependent variables are studied at the same time and then processed and analyzed. This research was conducted at the Labuang Baji Hospital, South Sulawesi Province in 2024, Jl. DR. Ratulangi No. 81, Labuang Baji, Kec. Mamajang, Makassar City, South Sulawesi This research was conducted in June-July 2024 on nurses in the inpatient installation of the Labuang Baji Hospital, South Sulawesi Province, the number of samples used in this study was 98 people. The sampling was based on the number of nurses hospitalized at the Labuang Baji Hospital.

### 4. Results and Discussion

**Table 1** Frequency distribution based on the role of the medical committee of nurses in the inpatient unit of Labuarg Baji Hospital, Makassar

medical committee	(n)	(%)	
Good	94	95,9	
Not good	4	4,1	
Total	98	100,0	

Source: Primary data,2024

**Table 2** Logistic regression analysis of service quality with the role of the medical committee towards nurses in the inpatient unit of Labuang Baji Hospital, Makassar

variabel	p-value	Exp	95%CI	
		(B)	lower	Upper
medical committee	002	44,000	3,954	489,66 5

Source: Primary data,2024

This study was conducted on all nurses in the inpatient service unit of Labuang Baji Hospital, Makassar. The aim was to determine the role of the nursing medical committee in efforts to improve the quality of inpatient services at Labuang Baji Hospital.

1. Quality of nursing services in the inpatient unit of Labuang Baji Hospital

Based on table 1, the frequency for the service quality variable is in the good category with 89 respondents with a percentage of 90.8%, and the poor category with 9 respondents with a percentage of 9.2%.

The majority of respondents, namely 89 people (90.8%), assessed the service quality as being in the good category. This shows that most respondents are satisfied with the services provided. As many as 9 respondents (9.2%) gave an assessment in the poor category. Although the percentage is relatively small, this shows that there are a small number of respondents who are not satisfied with the quality of service. Overall, the data shows that the quality of service is generally well received by the majority of respondents, but there are several areas that may need to be improved to increase the satisfaction of all parties.

This is in line with previous research by Agus Salim (2020) which showed that Private Hospital Y has good inpatient service quality based on five dimensions (physical evidence, responsiveness, assurance and empathy) especially in the physical dimension. Slightly different from State Hospital X which is still considered Sufficient in the quality of outpatient services based on five dimensions (physical evidence, responsiveness, assurance and empathy).

This is not in line with previous research by Madeleine Yeza T;itania, Harsanto Nursadi. (2023) The basis for public complaint reports is the quality of public services which is still lacking and the implementation of public services which is still considered inefficient and ineffective in terms of complicated procedures or mechanisms, transparency has not been realized, lack of information and accommodating and no guarantee of legal certainty regarding service time and costs. The majority of respondents, namely 89 people (90.8%), assessed the quality of service to be in the good category, indicating a high level of satisfaction with the services provided. However, there were 9 respondents (9.2%) who assessed the quality of service to be in the poor category. This indicates that there are areas that may require attention and improvement to improve overall satisfaction. Overall, the

quality of service was well received by most respondents, but it is necessary to identify and address the problems faced by the small group of respondents who are less satisfied to ensure more comprehensive service improvements.

2. Logistic regression analysis of service quality with the role of the medical committee towards nurses in the inpatient unit of Labuang Baji Hospital, Makassar

Based on table 2 Logistic regression analysis of service quality with the role of the medical committee on nurses in the inpatient unit of the Labuang Baji Hospital, Makassar, namely the p-value of 002, the variable that has an Exp (B) value of 44,000 states that the role of the medical committee has a close influence on the quality of service. The p-value for the medical committee role variable is 0.002. The p-value is less than 0.05, the medical committee role variable has an Exp (B) value of 44,000. This value indicates that each unit change in the role of the medical committee will increase the odds (possibility) of service quality by 44 times. This shows that the role of the medical committee has a very large influence on the quality of service in the inpatient unit. The results of this multivariate analysis underline the importance of the role of the medical committee in improving service quality. With a very significant p-value and a high Exp (B) value, it can be concluded that the active and effective involvement of the medical committee plays an important role in improving the quality of service provided by nurses in the inpatient unit. This analysis provides a clear picture of the importance of the role of the medical committee and how this variable can affect the quality of service in the hospital environment.

This is in line with previous research by Endang Pertiwi Wati and Alfianur (2018) the influence of the role of the medical committee on nursing in nursing services at the Ulin Banjarmasin Regional General Hospital showed that 78 respondents (85.9%) were in the optimal role category, the quality of nursing services treated in the Banjarmasin Regional General Hospital was 70 respondents or 76.1%. categorized as good, the results of the analysis of the relationship between optimizing the role of the nursing committee and improving the quality of nursing services at the Ulin Banjarmasin Regional General Hospital p-value = 0.43 < 0.05

This is not in line with previous research by Hesti Lestari (2021) the shortcomings are in the speed of service which has an achievement of 69.70% with poor service quality. Therefore, the speed of service is a priority for improvement that must be carried out by the three hospitals to realize excellent service.

The medical committee has a crucial role in efforts to improve the quality of services in health facilities as a body responsible for the evaluation, supervision, and development of medical personnel professionalism, the medical committee ensures that medical service standards remain high and consistent. they conduct regular clinical audits, evaluate the competence of medical personnel, and provide recommendations for further training or education. therefore, the role of the medical committee is very important in ensuring that health services provided to patients are always of high quality and in accordance with applicable professional standards. Analysis of the research results according to the Regulation of the Minister of Health of the Republic of Indonesia Number 755 / MENKES / PER / IV / 2011, it can be concluded that the research is in accordance with the regulations. The study shows that the role of the Medical Committee has a positive effect on the quality of nursing services, which is in accordance with the function of the Medical Committee to maintain and improve the quality of medical services in hospitals. However, it is important to pay attention to the results of previous studies to get a more comprehensive picture of other factors that affect service quality, such as speed of service and other operational factors.

#### 5. Conclusions

Based on the results of the study on the role of the medical nursing committee in efforts to improve the quality of inpatient services at the Labuang Baji Hospital in Makassar, the following conclusions can be drawn. Most respondents assessed the quality of service to be in the good category, as many as 89 respondents with a percentage of 90.8%, and the category of less good as many as 9 respondents with a percentage of 9.2%. Most respondents assessed the role of the medical committee to be in the good category, as many as 94 respondents with a percentage of 95.9%, and the category of less good as many as 4 respondents with a percentage of 4.1

## References

- A. D. Rahayu, C. Sandra, and S. Utami, "Hubungan Citra Pelayanan dengan Pemanfaatan Layanan Rawat Inap di Rumah Sakit Jember Klinik Tahun 2018," *Journal Pustaka Kesehatan*, vol. 9, no. 2, pp. 103–110, 2021.
- [2] A. S. Herawaty, "Analisis Efisiensi Pelayanan Rawat Inap di RS Ibnu Sina Makassar Tahun 2016, 2017, dan 2018 (Melalui Pendekatan Barber-Johnson)," *Media Publikasi Promosi Kesehatan Indonesia (MPPKI)*, vol. 4, no. 2, pp. 121–127, 2021, doi: 10.56338/mppki.v4i2.1484.
- [3] A. Tadda, I. Indar, and A. Ilyas, "Tinjauan Hukum Eksistensi Komite Etik Dan Hukum Rumah Sakit (KEHRS) Dalam Penyelesaian Sengketa Medik," *Jurnal Ilmiah Ecosystem*, vol. 22, no. 1, pp. 120–135, 2022, doi: 10.35965/eco.v22i1.1392.
- [4] D. Firmansyah and Dede, "Teknik Pengambilan Sampel Umum dalam Metodologi Penelitian: Literature Review," Jurnal Ilmiah Pendidikan Holistik, vol. 1, no. 2, pp. 85–114, 2022, doi: 10.55927/jiph.v1i2.937.
- [5] E. Rohayati, "SUBANG TAHUN 2023," Jurnal Kesehatan, vol. 10, no. 10, pp. 41-52, 2024.
- [6] F. Muchtar, P. Eka, and M. Erawan, "Patients at Public Health Center Poleang Barat, Bombana Regency Year 2022," *Jurnal Kesehatan*, vol. 3, no. 4, 2023.
- [7] G. G. Ahmad, B. Budiman, S. Setiawati, Y. Suryati, I. Inayah, and A. Pragholapati, "Kualitas Pelayanan Terhadap Minat Pasien Dalam Memanfaatkan Kembali Jasa Pelayanan Rawat Jalan Rumah Sakit Di Masa Pandemi Covid 19: Literature Review," *Jurnal Ilmu Keperawatan Dan Kebidanan*, vol. 3, no. 1, p. 1, 2022, doi: 10.26751/jikk.v13i1.866.
- [8] I. A. Mutiara, E. Gusti, and E. Yusmanisari, "Relationship Quality Hospitalized Services With Interest in Service Reuse At Pasuruan Regency Health Center," *Jurnal Informasi Kesehatan Indonesia*, vol. 8, no. 1, pp. 40–49, 2022.
- [9] J. Tampiasih and D. Karno, "Hubungan Kualitas Pelayanan Kesehatan dengan Tingkat Kepuasan Pasien di Rumah Sakit," *Jurnal Tampiasih*, vol. 1, no. 2, pp. 22–32, 2023.
- [10] K. Hartati et al., "Pengukuran implementasi tata kelola klinis diadaptasi dari Clinical Governance Standards," Manajemen Pelayanan Kesehatan, vol. 17, no. 1, pp. 51–59, 2019.
- [11] K. Najib, "Pengaruh Kualitas Pelayanan Kesehatan terhadap Kepuasan Pasien Rawat Jalan di RSUD Saptosari Gunungkidul D.I. Yogyakarta," *Manajemen, Bisnis Dan Ekonomi*, vol. 1, no. 1, p. 35, 2022, doi: 10.26798/manise.v1i1.666.
- [12] N. Suriani, Risnita, and M. S. Jailani, "Konsep Populasi dan Sampling serta Pemilihan Partisipan Ditinjau Dari Penelitian Ilmiah Pendidikan," *Jurnal IHSAN: Jurnal Pendidikan Islam*, vol. 1, no. 2, pp. 24–36, 2023, doi: 10.61104/ihsan.v1i2.55.

- [13] P. Menteri et al., "BERITA NEGARA," Kementerian Kesehatan Republik Indonesia, vol. 151, no. 2, pp. 10-17, 2011.
- [14] PERMENKES RI, "Peraturan Menteri Kesehatan RI Tentang Komite Etik dan Hukum Rumah Sakit," Kementerian Kesehatan, vol. 151, no. 2, pp. 10–17, 2011.
- [15] R. A. F. Apriyani, "Hubungan Peran Komite Keperawatan Terhadap Peningkatan Mutu Pelayanan," Babul Ilmi Jurnal Ilmiah Multi Science Kesehatan, vol. 15, no. 1, pp. 222–232, 2023. [Online]. Available: https://jurnal.stikes-aisyiyahpalembang.ac.id/index.php/Kep/article/view/
- [16] R. Layli, "Pengaruh Mutu Pelayanan dengan Kepuasan Pasien Rawat Inap di Rumah Sakit: Literature Review," MPPKI, vol. 6, no. 9, pp. 1708–1714, 2023, doi: 10.56338/mppki.v6i9.3720.
- [17] S. Sujito, "Analisis Kesiapan Menghadapi Akreditasi Berdasarkan Standar Akreditasi Versi SNARS 1 Di RSUD Sungai Rumbai," *Human Care Journal*, vol. 7, no. 2, p. 334, 2022, doi: 10.32883/hcj.v7i2.1679.
- [18] W. M. M. S. Paraisu and D. Mulyanti, "Theoretical Review Study: Peran Dan Fungsi Mutu Pelayanan Kesehatan Di Rumah Sakit," *Diagnosa: Jurnal Ilmu Kesehatan Dan Keperawatan*, vol. 1, no. 1, pp. 46–52, 2023, doi: 10.59581/diagnosa-widyakarya.v1i1.164.