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# Development of the Strategic Hospital of DKT Dr. Soetarto Yogyakarta

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#### Abstract

This study aims to develop the strategy Hospital DKT Dr Soetarto Yogyakarta to know the condition of the external and internal environment, alternative strategies, and priority strategies that can be done. This research is qualitative descriptive survey method. The development strategy is based on the concept of strategic management by using three stages: an input stage, using EFE matrix, IFE matrix, phase matching: using SWOT matrix, IE matrix, and the last stage is the stage of the decision to use a matrix QSPM. The data used is primary data obtained through observation, interviews and questionnaires, and secondary data from the archive documentation and medical records hospital. The results using IE matrix indicates the position of the hospital in a position to grow and build, so alternative strategies generated is incentive strategy and integration strategy, the SWOT matrix generates seven alternative strategies, and in the matrix QSPM, strategic priorities generated by the score allure total (STAS) is the highest obtained by the strategy of building partnerships with other bodies concerned with the improvement of health services

**Keywords** 

Development of strategies, management strategies, EFE, IFE, SWOT, IE, QSPM

## **INTRODUCTION**

The hospital is an important element for the community in the needs of health services. Hospitals as a health service have a strategic role in efforts to prevent, cure, and recover from disease. Indonesian Government Regulation No. 49 of 2013 defines hospitals as service institutions that conduct individual health services in a complete manner by providing inpatient, outpatient and emergency services.

Hospitals as health service facilities play an important role in health development. The hospital's role is to be able to provide quality and affordable health services to the community in order to improve community health status. The main task of the hospital as a social organization is to seek efficient health by prioritizing integrated healing and recovery.

The role of hospitals in providing health services to the community, encouraging hospital managers to be able to clean up and optimize their resources in order to maintain the quality of services provided. The importance of maintaining the quality of health services can have a positive impact on people who use hospital services so that people will

come back when they need health services in the future.

Nowadays, hospital growth has increased. Increase in government hospitals and private hospitals. The increase in hospital construction was triggered by the influx of foreign investors, an increase in the upper class population, improved income in the percapita community, a critical attitude in maintaining health and choosing where to seek treatment (Azhary, 2009)

DKT Dr. Soetarto Hospital in Yogyakarta is a type C government hospital managed by the Indonesian Ministry of Defense through the Army Health Center. Hospitals with buildings and nuances typical of the military are included in the cultural heritage, currently not only serving military members and their families, but benefited the general public who need health services.

Efforts to develop and improve health services, the hospital has prepared a strategic plan for 2016-2020. The strategic plan that is designed is a basic guideline for hospitals in making activity programs. Based on the planned strategy, the hospital plans a number of diversification and integration strategies

such as providing hemodialysis units, developing hospital management information systems, and collaborating with third parties on the needs of medical, non-medical, and hospital solid waste treatment.

The results of in-depth interviews with hospital managers and observations made, the hospital still has several obstacles including not fulfilling human resources to fill positions in hospital organizational structure, lack of renewal of polyclinic renewal, renewal of hospital buildings and medical devices, as well as the percentage of bed use hospitalization at the hospital (Bed Occupancy Ratio-BOR) below the standard of efficient use.

This condition shows that the hospital's strategic plan has not been compiled in a comprehensive manner., external threats and strengths, internal weaknesses of each factor. So the hospital's efforts in developing and improving health services have not been optimal.

With these conditions, the hospital needs to respond by designing a more comprehensive strategy by involving all components of the hospital so that the strategic plan prepared can anticipate changing conditions (Karmawan, 2016)

# LITERATURE REVIEW

## **Strategy Management**

Strategy management is a series of decisions and steps that can produce formulation and implementation of plans to achieve goals for the company (Pearce and Robinson, 2013) whereas according to David and David (2016) strategy management is an art and science in formulating, implementing, and evacuating functional decisions which makes a company or organization can achieve its objectives.

# Strategy

Strategy is an action that requires decisions in top management and company resources are quite large. The strategy has various multifunctional or multidimensional consequences and requires every consideration of internal and external factors faced by the company (David and David, 2016). According to Pearce II and Robinson (2013) strategy is a large-scale design with a long-term orientation to be able to interact with a competitive environment in order to achieve company goals.

#### Types of Strategies

According to David and David (2016) the type of strategy is divided into 4 groups of

strategies consisting of 11 alternative strategic actions that can be carried out by a company or organization including: integration strategy; forward integration, backward integration, horizontal integration, intensive strategy; market penetration, market development, product development, diversification strategies; related diversification, diversification not related, defensive strategy; reduction, divestment, liquidation

#### Vision and mission

Vision is a statement that outlines a company's strategy that is focused on the company's energy and resources in achieving the desired future while the mission is a broad and eternal statement about a company, the mission includes the philosophy of making corporate strategy decisions, indicating the image that the company wants to determine, reflects company concepts, and indicate key product or service areas (Pearce II and Robinson, 2013)

## **Environmental Identification**

According to David and David (2016) environmental identification consists of the and internal environment. Identification of the external environment is carried out to determine trends and events beyond the control of the company which consists of the main opportunities and threats affecting the company while identification of the internal environment is a process undertaken to find out information relating to the strengths and weaknesses of the company. Identification of the external environment identifies various factors including: economic, social, cultural. demographic and environmental factors. political, governance and legal factors, technological factors, and competing factors. Identification of the internal environment identifies various factors including: management factors, marketing factors, financial factors, production and operating factors, research and development factors, and management information system factors.

# **Strategy Formulation Stage**

Strategy formulation is the process of developing the vision and mission of a company or organization by identifying and analyzing the external and internal environment.

The strategy formulation stage is integrated into the conceptual framework of strategic decisions that can help plan the strategy, identify, implement, and evaluate. Menueur David and David (2016) the stage of strategic planning is carried out through three

stages consisting of the input stage using the EFE matrix, CPM matrix, IFE matrix, matching stages using the SWOT matrix, SPACE matrix, BCG matrix, IE matrix, and the Grand Strategy matrix, and the decision stage uses the QSPM matrix.

#### **RESEARCH METHODS**

This study aims to develop the strategy of DKT Hospital Dr. Soetarto Yogyakarta. The research is a descriptive qualitative research with survey method. Respondents or informants consisted of 10 respondents with 7 respondents as internal stakeholders and 3 respondents as external stakeholders. The study uses primary data through observation, interviews, and questionnaires, secondary data through archival documentation and medical records. External variables consist of economic, social, geography, demographic culture, law, technology, and competition, and internal variables consist of management, marketing, finance, operations, research development, and management information systems. Data analysis was performed using a strategy management approach through the input stage with EFE matrix. IFE matrix. matching stage using the IE matrix SWOT matrix, and the decision stage using the OSPM matrix.

# **RESULTS AND DISCUSSION**

The results of the identification of the environment there are several external factors that become opportunities and threats and internal factors that become strengths and weaknesses that affect the sustainability of the hospital.

# **Input Phase**

Information obtained from the results of environmental identification is evaluated using the EFE matrix and the IFE matrix by giving weights and ratings for each of the main factors to get a weighted score for each factor. The results of the EFE matrix analysis, and the IFE matrix are presented in table 1 and table 2

Table 1. EFE Matrix

|               | abio ii Ei E matrix                              |        |         |                |  |  |
|---------------|--|--------|---------|----------------|--|--|
| No            | External Factors                                 | Weight | Ranking | Weighted score |  |  |
| Opportunities |  |        |         |                |  |  |
| 1             | Public purchasing power for<br>high health needs | 0.053  | 3       | 0.159          |  |  |
| 2             | Periodic mass treatment in Korem 072             | 0.053  | 3       | 0.159          |  |  |

| Weighted Total Scores of Opportunities and Threats 3.090 |   |       |                                |       |
|--|---|-------|--------------------------------|-------|
|  | Total Weight  | 1,0   | Total<br>Threat<br>Score       | 1.330 |
| 9  | The establishment of a new hospital   | 0.039 | 3                              | 0.117 |
| 8  | Capital strength of private hospitals   | 0.044 | 2                              | 0.088 |
| 7  | other hospitals are more complete   | 0.054 | 2                              | 0.108 |
| 6  | Use of the latest medical technology Facilities and services at                   | 0.061 | 3                              | 0.183 |
| 5  | Hospital accreditation regulations  | 0.064 | 3                              | 0.192 |
| 4  | Increase BPJS Health contributions  | 0.054 | 3                              | 0.162 |
| 3  | Hospital geographical location  | 0.053 | 3                              | 0.159 |
| 2  | Is one of the cultural heritage buildings   | 0.051 | 3                              | 0.153 |
| 1  | Changes in disease patterns in the community                                      | 0.056 | 3                              | 0.168 |
|  | Threats (T)   |       |                                |       |
|  |   |       | Total<br>Opportuni<br>ty Score | 1.760 |
| 9  | Permanent patients from<br>members and families of the<br>Army                    | 0.061 | 4                              | 0.244 |
| 8  | Development of facilities for<br>special infection services<br>such as HIV / AIDS | 0.056 | 3                              | 0.168 |
| 7  | Collaborate with health insurance companies                                       | 0.061 | 4                              | 0.244 |
| 6  | Regionalization of a tiered referral system                                       | 0.063 | 3                              | 0.189 |
| 5  | Availability of vacant land for hospital area development                         | 0.063 | 4                              | 0.252 |
| 4  | Increasing the population<br>growth of Yogyakarta every<br>year                   | 0.059 | 3                              | 0.177 |
| 3  | Habits of the public go to the hospital   | 0.056 | 3                              | 0.168 |

Source: Data processed

Table 2. IFE Matrix

| Table 2. IFE Mailix |  |        |             |                    |
|---------------------|--|--------|-------------|--------------------|
| No                  | Internal factors   | Weight | Ranki<br>ng | Weighte<br>d score |
| Strenghts (S)       |  |        |             |                    |
| 1                   | Have standard operational procedures for each unit                       | 0.032  | 4           | 0.128              |
| 2                   | Monitoring and evaluating each unit regularly                            | 0.031  | 4           | 0.124              |
| 3                   | The speed of handling and service to patients                            | 0.031  | 4           | 0.124              |
| 4                   | Medical and non-medical workers of productive age                        | 0.03   | 4           | 0.12               |
| 5                   | Discipline of medical and non medical personnel is high                  | 0.032  | 4           | 0.128              |
| 6                   | Having a specialist in<br>internal medicine<br>professionals and seniors | 0.031  | 4           | 0.124              |
| 7                   | Disseminating information on PPK 1 / FKTP in the Yogyakarta area         | 0.029  | 4           | 0.116              |
| 8                   | Provides patient complaint services via telephone / sms                  | 0.028  | 3           | 0.084              |
| 9                   | Having social media as a promotional media                               | 0.025  | 3           | 0.075              |
| 10                  | Patient outpatient visits are quite high                                 | 0.032  | 4           | 0.128              |

|    |   |       | Total<br>Strengt<br>h<br>Score | 2.24  |
|----|---|-------|--------------------------------|-------|
| 20 | Hospital Information System integrated  | 0.03  | 4                              | 0.12  |
| 19 | Provides online patient registration services through the hospital website  | 0.028 | 4                              | 0.112 |
| 18 | Has a 4-dimensional ultrasound tool that has been used  | 0.029 | 4                              | 0.116 |
| 17 | Having a hemodialysis unit with high patient visits   | 0.027 | 3                              | 0.081 |
| 16 | In collaboration with PT<br>Environmental Direction<br>in hospital solid waste<br>treatment                                       | 0.032 | 4                              | 0.128 |
| 15 | In collaboration with the<br>Department of Population<br>in making the certificate of<br>a child born in the hospital<br>for free | 0.03  | 3                              | 0.09  |
| 14 | Providing homecare services   | 0.026 | 3                              | 0.078 |
| 13 | Provides BPJS Health services   | 0.031 | 4                              | 0.124 |
| 12 | Have an internal financial audit team   | 0.032 | 4                              | 0.128 |
| 11 | Recording and financial management are well structured  | 0.028 | 4                              | 0.112 |

Source: Data processed

|    | Weaknesses (W)  |       |                       |       |
|----|---|-------|-----------------------|-------|
| 1  | Lack of personnel in filling<br>hospital organizational<br>structures | 0.024 | 2                     | 0.048 |
| 2  | Lack of human resources<br>focused on hospital marketing<br>units     | 0.028 | 2                     | 0.056 |
| 3  | Lack of human resources focused on IT units                           | 0.028 | 2                     | 0.056 |
| 4  | Lack of customer service at the hospital                              | 0.025 | 2                     | 0.05  |
| 5  | Brand Image as a military hospital                                    | 0.024 | 2                     | 0.048 |
| 6  | General patient visits are low  | 0.027 | 2                     | 0.054 |
| 7  | The use of inpatient units is not optimal                             | 0.027 | 2                     | 0.054 |
| 8  | The lack of operational funds<br>from the Ministry of Defense         | 0.028 | 2                     | 0.056 |
| 9  | Sub-Satker financial management of PNBP                               | 0.027 | 2                     | 0.054 |
| 10 | Maintenance of facilities and<br>infrastructure is not optimal        | 0.032 | 1                     | 0.032 |
| 11 | Limited use of the latest medical devices                             | 0.032 | 1                     | 0.032 |
| 12 | The lack of updates on the<br>physical building                       | 0.028 | 1                     | 0.028 |
| 13 | Limited polyclinic / examination room for patients                    | 0.029 | 1                     | 0.029 |
| 14 | The lack of research / research in the field of health                | 0.025 | 2                     | 0.05  |
| 15 | Some features are not<br>available on the hospital<br>website         | 0.027 | 2                     | 0.054 |
|    | Total Weight  | 1,0   | Weakn<br>ess<br>Total | 0.701 |

Weighted Total Score Strength and Weaknesses 2.941

Source: Data processed

# **Matching Stage**

Based on the results obtained in the previous stage, the total weighted score of the

EFE matrix was 3.090 and the IFE matrix was 2.941. The results of the analysis using the IE matrix showed that the hospital was in cell II which indicated being in a growing and developing condition. The resulting alternative strategies are incentive strategies (market penetration, market development, and product development) and integration strategies (forward integration, backward integration, and horizontal integration). Based on the analysis using the SWOT matrix obtained 7 alternative strategies that can be done by the hospital including: SO Strategy: Increase patient visits through marketing efforts by utilizing a tiered referral system, building partnerships with other institutions related to improving health services, and developing hospital areas to adjust needs community supported by professional specialist doctors, WO Strategy: Increase patient loyalty by maximizing the use of medical devices and polyclinics in hospitals, ST Strategy: Improve service quality oriented to patient satisfaction with competitive service prices, improve the quality of human resources with the latest disease training or seminar in the community, WT Strategy: Maintenance of hospital facilities by optimizing hospital operational funds

# **Decision Stage**

The decision phase is carried out with CDGM with the hospital leadership to determine strategic priorities that can be taken from various alternative strategies obtained from the previous stage. In the decision stage, only 4 alternative strategies are evaluated using the QSPM matrix by combining strategies that theoretically have the same goal. The results of the QSPM matrix, the priority order of the strategy is to build partnerships with other institutions related to improving health services with a total attractiveness score of 3,881, increasing patient loyalty by maximizing the use of medical devices and polyclinics in hospitals with a total attractiveness score of 3,741, maintenance of hospital facilities by optimizing hospital operational funds with a total attractiveness score of 3.289, and improving the quality of human resources owned by training or seminar handling the latest diseases in the community with a total attractiveness score of 2.608

# **CONCLUSIONS**

Based on the analysis conducted, it can be seen that the external condition of the hospital is quite good, based on a weighted score the odds are greater than the threat and the total weighted score of the EFE matrix is 3.090, so it can be said the hospital can optimize the existing opportunities to face and anticipate external threats. faced by the hospital. While the internal condition of the hospital is quite good based on a weighted score of strength greater than the weakness and the total weighted score of the IFE matrix is 2.941, so it can be concluded that the hospital has an internal strength enough to overcome the internal weaknesses. Alternative strategies that can be implemented by hospitals are to increase patient visits through marketing efforts by utilizing a tiered referral system, building partnerships with other institutions related to improving health services, and developing hospital areas to adjust community needs supported by professional specialists, increase patient loyalty by maximizing the use of medical devices and polyclinics in hospitals, improving the quality of services oriented to patient satisfaction with competitive service prices, improving the quality of human resources owned by training or seminar handling the latest disease in the community, maintenance of hospital facilities by optimizing operational funds hospitals, and priority strategies that can be taken by hospitals based on the analysis conducted is to build partnerships with other institutions related to improving health services.

## REFERENCES

- Achmadi, 2008. Perencanaan Strategi Rumah Sakit Port Medical Center Tahun 2009-2013 Dengan Pendekatan Balanced Scorecard, Fakultas Kesehatan Masyarakat, Universitas Indonesia, Depok.
- Aji Purwita Andika, 2016. Pemahaman Implementasi Rencana Strategi Bisnis RS PKU Muhammadiyah Pertanahan, Medicoeticoilegal dan Manajemen Rumah Sakit. 5(2)
- Assauri, S, 2004. *Tantangan Pimpinan Rumah Sakit Menghadai Paradigma Baru.*Manajemen Usahawan. 9.(33). 50-55.
- Azhary, M Emil, 2009. Potret Bisnis Rumah Sakit Indonesia. Economic Review. 218.
- David, F.R and David, F.R. 2016. Strategic Management: A Competitive Advantage Approach, Concepts, and Cases. 15<sup>th</sup> ed. Pearson Education, inc. New Jersey. Terjemahan N. Pusparidan L. N. Puspitasari. 2016 Manajemen Strategik: Suatu Pendekatan Keunggulan Bersaing-Konsep, Salemba Empat, Jakarta.

- Hunger, J. David, and Wheelen, Thomas L, 2003.
  Manajemen Strategis. Andi, Yogyakarta.
  Jauch, Lawewnce R & William F. G, 2004.
  Strategic Management and Businees Policy.
  Ninth Edition, McFraw-Hill, New York.
- Karmawan, Budi, 2016. Penyusunan Rencana Strategis Rumah Sakit Pertamina Jaya Tahun 2017-2022. ASRI. 2(2).
- Lasyera Efio, Yuli Hendri Yeni, and Busuddin Hadril, 2018. *Analisis Rencana Strategi Rumah Sakit Umum Daerah Arosuka Kabupaten Solok.* Kesehatan Andalas, 7(2).
- Peraturan Pemerintah Republik Indonesia Nomor 49 Tahun 2013 Tentang Badan Pengawas Rumah Sakit. 8 Juli 2013.
- Permana, Dodi, and Lukviarman, Niki, 2012. Analisis Lingkungan Industri dan Formulasi Strategi: Studi Pengembangan Institusi Rumah Sakit. Siasat Bisnis. 16(1), 1-12.
- Pearce II, John A, and Robinson Jr, Richard B, 2013. *Manajemen Strategis: Formulasi, Implementasi, dan Pengendalian*, Edisi 12, Salemba Empat, Jakarta.
- Ristrini, 2005. Perubahan Paradigma Jasa Pelayanan Kesehatan Rumah Sakit dan Rekomendasi Kebijakan Strategis Bagi Pimpinan. JMPK. 8(1), 5-6.
- Sekaran, Uma, and Roger Bougie. 2017. *Metode Penelitian Untuk Bisnis*, Edisi 6, Salemba Empat, Jakarta.
- Sugiyono, 2016. *Metode Penelitian Kuantitatif, Kualitatif dan R&D.* Alfabeta, Bandung.
- Sulastini, Gini Permana. 2012. Analisis Penetapan Strategi Bisnis Unggulan Rumah Sakit Jati Sampurna Tahun 2012-2017, Fakultas Kesehatan Masyarakat, Universitas Indonesia, Depok,
- Surachman, Sudarma, Nimran. 2011. Knowledge Management dan Peran Strategic Partner SDM: Pengaruhnya Terhadap Perencanaan Strategik dan Kinerja Organisasi Studi Pada Rumah Sakit Di Bali, Jurnal Manajemen dan Kewirausahaan,13(1).
- Susanto, Aminudin, 2013. Analisis Faktor-Faktor Yang Mempengaruhi Perilaku Pasien Dalam Memanfaatkan Rawat Inap Di Rumah Sakit PKU Muhammadiyah Nanggulan, JMMR. 2(2).

Umniyatun, Yuyun, 2018. Penyusunan Rencana Strategis Bisnis Pada Rumah Sakit Swasta Di Jakarta. Arkesma. 3(1).

Undang-Undang Republik Indonesia Nomer 44 Tahun 2009 Tentang Rumah Sakit