

Performance of Basic Specialists Doctor in USU Hospitals and the Influencing Factors

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Abstract: Performance of basic specialist doctor is accomplishments by internist, pediatric, general surgery, or obstetrics and gynecology in doing his job corresponding with standard and criteria the specified performance for work. However, there is no known picture of the performance of basic specialist doctors and the factors that influence them. This qualitative research is done with interview to 4 informants, incidentally, performance and work environment measurement at 4 rooms where informants work. Based on the results, the performance of basic specialist doctors is less than the standard, especially in the aspects of behavior and quantity of work. This is influenced by dissatisfaction factors on financial and organizational culture in Universitas Sumatera Utara Hospital that is not results and people oriented, and there is no culture of aggressiveness. This is made worse by the condition of the doctor's work environment that is not suitable for working. Therefore, hospital management needs to pay attention to the financial benefits of basic specialist doctors, results-oriented, people-oriented, and a culture of aggressiveness. The working environment around the basic medical specialists also need to be improved, such as dry temperature 21-24°C, the maximum noise intensity 45dBA, and the intensity of illumination 300-500 Lux.

1 INTRODUCTION

Based on opinion Rethans, et al. (2002), Rival, et al. (2008), Mejia, et al. (2010), and Aamodt (2016), performance is accomplishments by someone in doing his job or his job corresponding with standard and criteria the specified performance for work that. Performance standards can be seen from four perspectives, namely from the competence of the doctor, from the tasks that must be completed by the doctor, the purpose or work of the doctor, and the nature of the doctor's work during work. Doctor specialist basic is a doctor who specializes in internist, pediatric, general surgery, and obstetrical and gynecology (Tim Penerbit, 2002). By because that, which is called as performance basic specialist is accomplishments by a doctor who specializes in internist, pediatric, surgery general, or obstetrics and gynecology in doing his job or his job corresponding with standard and criteria the specified performance for work that. The basic specialist doctor performance should be assessed so as to know the level of achievement by the doctor.

According to Subanegara (2011), indicators performance medical personnel who work at

hospital on a general is all over medical personnel have privilege, completeness amount and type specialist, have permission legitimate practice, certified ATLS (Trauma Life Support) for doctor who works in the IGD (Emergency Installation), follow training technical 20 hours a year, accuracy time service, time response service, time motion service, service corresponding, procedure and standard quality, implementing a patient safety program, no error, the number of patients served, satisfaction patient to doctor, magnitude revenue generated doctor, and no malpractice demands to doctor. Specifically for basic specialist doctor, indicator performance used only based on coaching and training obtained through various activities scientific with collect 250-300 SKP (System Credit Points) every five years later converted to competence (Zulfendri, 2014). However, to achieve this achievement is not easy. There are many factors that influence the performance of the basic specialist doctor.

Some research results by Nofrinaldi, et al. (2006), Rejeki (2012), Cahyani, et al. (2013), Arigemilia, et al. (2016), and Erlangga, Kasim, and Meliala (2016), revealed that factors that affect

performance basic specialist doctor is satisfaction with services (medical services or remuneration), satisfaction with the performance of doctors, relationship between doctors and superiors, organizational culture, work environment conditions (good lighting and circulation, without noise and odor and security at work), supervision, career level clarity, and clarity of employment status.

Universitas Sumatera Utara Hospital (USU Hospital) is one of the teaching hospitals in Medan. However, from the results of interviews and literature searches, it is not known the picture of basic specialist doctor's performance at USU Hospital and the factors that influence it. Therefore, this study was conducted to find out the description of the performance of basic specialist doctors at USU Hospital and the factors that influence it.

2 RESEARCH METHODS

This research is qualitative research and done at Universitas Sumatra Utara Hospital. The data is obtained with interview with 4 informants and measurement of work environment. Determination informant on incidental, ie doctors who are in place when research do.

3 RESULTS AND DISCUSSION

The results showed that the performance of all informants (4 people) less than the standard that has been determined, especially on the behavioral aspect, and 2 informants (obstetrics and gynecology specialists and internist) on the aspect quantity of work. The level of performance of these basic specialist doctors is influenced by several factors. On work satisfaction factor, basic specialist doctors satisfied in several aspects, such as volume of work, actual tasks, opportunities to progress, relationships with colleagues, and attention of superiors, except financial benefits.

Results revealed that all informants (4 people) felt satisfied with the actual task, while the volume of work, 3 informants (75%) feel satisfied and 1 informant (25%) felt enough satisfied. Satisfaction that seen on some expression the informant who is doctor specialist in obstetrics and gynecology "*no problem anyway, enough to be satisfied*" related time practice, because advantages patients amount who have to served, and informants who are doctors

pediatric stated "*yes it's okay, we are limited in time, but we still serve patients*".

Research results related to the work environment reveal that 2 informants (50%) very satisfied and 2 informants (50%) felt satisfied. The results of this questionnaire are supported by the statement of the informant who was doctor pediatric "*eee, there is no dust, satisfied*" related existence said a dust in room practice. The results of questionnaires and interviews with informants are in line with the results of the measurement of dust concentration in 4 rooms where the informant work. The measurement results in each room: 0.105 mg/m³, 0.102 mg/m³, 0.074 mg/m³, and 0.057 mg/m³. Based on the Decree of the Minister of Health of the Republic of Indonesia No. 1204 of 2004 concerning Hospital Environmental Health Requirements, the standard concentration of dust in a room in a hospital is not exceeding 0,150 mg/m³, so it can be concluded in 4 of these rooms that it meets the standards.

The measurement results working climate, dry climate, in each room: 23.1°C, 22.9°C, 23.5°C, and 25.2°C. Based on the Decree of the Minister of Health of the Republic of Indonesia No. 1204 of 2004 on Environmental Health Requirements Hospital, standard dry at room temperature in the hospital, particularly the administrative and meeting space, is 21-24°C, so it can be summed up in three places already meet the standards, except Obstetrics and Gynecology room, at 25.2°C.

Results of measurement of noise intensity level in each room: 61.2dBA, 63.5dBA, 60.1dBA, and 64.4dBA. Based on the Decree of the Minister of Health of the Republic of Indonesia No. 1204 of 2004 concerning Hospital Environmental Health Requirements, standard noise intensity levels in rooms in hospitals, especially public spaces, a maximum of 45dBA, so it can be concluded, in 4 rooms that it does not meet the standards.

Results measurement of the intensity of lighting in each room: 153 Lux, Lux 203, 184 Lux, and 183 Lux. Based on the Decree of the Minister of Health of the Republic of Indonesia No. 1204 of 2004 concerning Hospital Environmental Health Requirements, the standard intensity of lighting in rooms in hospitals, especially public spaces, is a minimum of 300 Lux and a maximum of 500 Lux, while based on the results of measurements of 4 rooms under 300 Lux, so that it can concluded in 4 rooms that did not meet the standards.

Work climate, noise intensity, and lighting intensity that do not comply with these standards indicate poor environmental conditions for basic specialist doctors to work. Whereas the condition of

a good work environment, such as appropriate conditions of repression, good circulation, and not relevant, can affect the doctor's performance. Need a comfortable work space that can create a comfortable, quiet and safe work atmosphere that supports the comfort of doctors in working (Hussin, 2011; Untari and Wahyuati, 2011; Cahyani, et al., 2013; Rahmah, et al., 2013).

Based on the results of interviews related to the attention of a supervisor, s, all informant feel there is attention from the boss and is satisfied with the attention. This was stated by the lack of oversight of the performance of the entire informant, the increased competence of all informants, and there were career paths felt by 3 informants (75%). However, the improvement in perceived competency does not include the assistance of costs to develop career profession from specialist become a sub-specialist, as stated by one of the informants who is a doctor specialist obstetrics and gynecology, "*there are, but pay for your self*". While there is an informant who is a doctor pediatric who does not feel the opportunity at all for develop career from functional to be structural, such as the statement of the informant, "*functional to structural! We have no career path from functional to structural*".

Intrinsic motivation (success, recognition/appreciation, work itself, responsibility, and career development) has a positive and significant effect on the performance of doctors (Rahmah, et al., 2013). Based on the results of the research by Untari and Wahyuati (2014) and Suryani and Yarosi (2015), not only intrinsic motivation can affect a person's performance, but also competence and supervision. Competency enhancement is needed which aims to increase knowledge, skills and attitudes and existing behavior (hard competency and soft competency). Based on research, that supervision relates to employee performance. Oversight is needed to compare actual performance with established standards, so it can find out if there is a deviation or an improvement needs to be done.

Interview result related relationship with colleague work, 1 informant (25%) felt very satisfied and 3 informants (75%) felt satisfied. The results of Rahmah's research (2013). revealed that extrinsic motivation (interpersonal relationships and working conditions) also influenced the performance of doctors. The relationship between humans is a characteristic of humans as social beings. Humans need the existence of other human beings to give each other judgment, communicate, help, support and cooperate in life. Doctors also have a need for

good relationships with direct supervisors and coworkers.

Based on the results of interviews regarding financial factors revealed that 3 informants (75%) felt enough satisfied and 1 informant (25%) felt less satisfied with profit financially. Lack of feeling satisfied seen on statement an informant who is a doctor pediatric. The informant stated "*incentive! Less satisfied, we don't accept incentives*" related satisfaction doctor about magnitude incentive received (excluding salary/services medical). According to Aziri's research (2011) and Dinarianti's research (2011) that there is an influence between incentives on performance.

In the organizational culture factor, all informants feel that in USU Hospital, especially on aspects innovation and risk taking, attention to details, the team orientation, and stability. But the informant who is an obstetrician and gynecologist did not feel aspect result orientation, people orientation and aggressiveness in the organizational culture at USU Hospital. This will affect the performance of basic specialist doctors. This is supported by the results of research from Rejeki (2012) and Handayani (2016) which revealed that there was an influence of organizational culture on the performance of doctors. The attitude and behavior of human resources can change if they consistently carry out work culture so that they can achieve higher work productivity (Sudaryono, 2014).

4 CONCLUSIONS AND SUGGESTIONS

Based on the results of the research and discussion at this point, it can be concluded that the performance of basic specialist doctors is less than the standard, especially in the aspects of behavior and quantity of work. This is influenced by dissatisfaction with the financial and organizational culture in USU Hospital that is not results oriented and people oriented, and there is no culture of aggressiveness. This is made worse by the condition of the doctor's work environment that is not suitable for doctors in working.

Therefore, hospital management needs to pay attention to the financial benefits of basic specialist doctors, people and results-oriented organizational culture, and a culture of aggressiveness. The working environment of all basic specialists also needs to be improved, such as dry temperatures of

21-24°C, maximum noise intensity of 45 dBA, and lighting intensity of 300-500 Lux, thus supporting the comfort of basic specialist doctors in working.

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