
The preparation of the Key Performance Indicator (KPI) clinical area in Aspects of Internal Hospital Business Processes the Balanced Scorecard (Case Study) Method in Public Hospital in The City of Surakarta

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ABSTRACT

This type of research is a qualitative study with a case study research design that aims to get an overview of the preparation of clinical area based Key Performance Indicator in Balanced Scorecard internal business process perspective as a performance measurement tool in Surakarta City General Hospital and a reference for the formation of subsequent hospital KPI and assist in the accreditation process hospital.

Kata kunci:

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Jenis penelitian ini merupakan penelitian kualitatif dengan rancangan penelitian studi kasus yang bertujuan untuk mendapatkan gambaran penyusunan Key Performance Indicator (KPI) area Klinis berbasis *Balanced Scorecard* (BSC) perspektif proses bisnis internal sebagai alat ukur kinerja di RSUD Kota Surakarta dan menjadi acuan pembentukan KPI RS berikutnya serta membantu dalam proses akreditasi RS.

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INTRODUCTION

There are many hospitals now in Indonesia although still not sufficient, but hospitals that can be said to be in accordance with the standards are still very minimal. Therefore, the Hospital Accreditation Commission (KARS) was formed which functions to accredit hospitals throughout Indonesia. With the existence of this KARS all hospitals now must follow the standards that have been set. One of the standards set by KARS is about Key Performance Indicators (KPI), this KPI is prepared based on the indicator data of each unit in the hospital, where so far there are still many hospitals that have never made data in writing, so this is a very good thing to apply. At present, there are already KPIs in the Surakarta Regional General Hospital, but they are still not perfect in terms of making and implementing them. This is why researchers made a thesis about the preparation of KPI at the Surakarta City Regional General Hospital, with the hope that researchers can help hospitals in evaluating existing KPIs and also indirectly assisting in the hospital accreditation process.

RESEARCH METHOD

This type of research is a qualitative study with a case study research design. In analyzing this research, the authors used secondary data in the form of hospital data. The subject of the study is the profile of public hospital in the city of Surakarta, the object is Key Performance Indicator, the operational definition are work program, Key Performance Indicator and Balanced Scorecard, measurement of variables are rules of the Hospital Accreditation Committee, unit data and minimum service standards, instruments of data collection are unit data that can come from SPM as a guide in related observations in collecting documents and rules from the Hospital Accreditation Committee. The collected data is reviewed and identified with the committee with meetings and discussions. The analysis was carried out by comparing the existing theories with the data obtained from the results of the case study data at Surakarta Public Hospital. The hypothesis is that the old Key Performance Indicator requires improvement and change.

RESULT AND DISCUSSION

The unit indicator data that has been collected from all of the units in hospital, inc outpatient units, emergency unit, inpatient units, supporting units are calculated using a grading matrix and then concludes that the area used is the **inpatient area**

Table KPI Regional General Hospital of Surakarta City

No	Indikator Area Klinis	Judul Indikator
1.	Patient Assessment	Number of incomplete initial 24-hour assessments at the Inpatient Unit
2.	Laboratory Services	Waiting time for results of Laboratory services <120 minutes
3.	Radiology Services	waiting time for standard photo thorax service ≤3 hours
4.	Surgical Procedure	Site marking location of the operation
5.	Use of antibiotics and other drugs	Aspirin use within the first 24 hours of hospital admission in patients with a diagnosis of AMI
6.	Medication error and near injury (KNC)	Percentage of medication error rates
7.	Use of anesthesia and sedation	Use of anesthesia and sedation
8.	Use of blood and blood products	The incidence of transfusion reactions
9.	Completeness of medical record (MR)	Completeness of filling in MR files after 24 hours of hospitalization
10.	Infection prevention and control (PPI), surveillance and reporting	The percentage of compliance of health workers in doing hand hygiene with the 6 step method at 5 moments was hospitalized

The results obtained by researchers for the preparation of KPIs show that there are differences with the KPIs that are owned by the RS at this time, which is in accordance with the hypothesis of the researchers. This happens because of several things, namely: Urgent time ahead of Accreditation of Hospital so that it cannot be maximized in working on KPI formation, the committee has not been formed at first and after forming the Committee itself the competence is still lacking because there is no comprehensive training on KPI, the person in charge of each unit has not received a specific socialization about KPI, the absence of data of each unit.

CONCLUSION

Key Performance Indicators (KPI) present a series of measures that focus on organizational performance aspects that are most important to the success of the organization at present and in the future.

Clinical areas obtained from the results of the data collection and interpretation, it was concluded that what was used as a priority was the **Inpatient Area**.

Key Performance Indicator clinical area

1. Patient Assessment - Number of incomplete initial 24-hour assessments at the Inpatient Unit
2. Laboratory Services - Waiting time for results of Laboratory services <120 minutes
3. Radiology Services - waiting time for standard photo thorax service ≤3 hours
4. Surgical Procedure - Site marking location of the operation
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The researcher hopes that the KPI can represent the actual conditions in Surakarta City Hospital at this time and can assist in the upcoming hospital accreditation process.

From the results of research on this KPI, it will affect the Hospital Quality Committee specifically and Hospitals in general because it means that there must be a change in the data collection system for KPIs that will cause each employee to work harder.

Limitations in this study are quite high subjectivity because researchers are insiders or employees of Surakarta City Hospital.

The hope is that in the future there will be further research discussing the KPI of the Managerial area and the Patient Safety area.

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