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INHIBITING AND SUPPORTING FACTORS IMPLEMENTATION OF THE POLICY TO IMPROVE THE QUALITY OF HEALTH SCIENCE HIGH SCHOOL PRODUCTS THROUGH THE INTERNAL QUALITY ASSURANCE SYSTEM (SPMI)

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ABSTRACT

Health education is one of the important pillars in health development. To produce quality graduates, an effective internal quality assurance system (SPMI) is needed. SPMI is a systemic and planned activity to continuously improve quality in the implementation of study programs. This research aims to determine the implementation of policies to improve the quality of high school health study programs through SPMI. This research uses a qualitative method with a case study approach. Data was collected through in-depth interviews, observation and document review. The data used is primary data collected through in-depth interviews and documentation. The data analysis used is interactive model qualitative data analysis. The results of the research show that the implementation of the policy to improve the quality of high school health study programs through SPMI has gone quite well. This can be seen from the commitment from the leadership and the entire academic community, as well as the SPMI documents that have been prepared. However, there are still several obstacles in implementing SPMI, including: lack of understanding of the academic community about SPMI, limited resources, and lack of support from the system.

Keyword: SPMI, high school n the health sector, quality

INTRODUCTIONS

Health education is one of the important pillars in health development. Health education aims to produce quality graduates, namely graduates who have competencies that suit the needs of society. To produce quality graduates, an effective internal quality assurance system (SPMI) is needed. SPMI is a systemic and planned activity to continuously improve quality in the implementation of study programs. SPMI consists of components, namely: vision, mission, goals, objectives, strategies, policies, procedures, information systems, resources and evaluation.

The importance of SPMI in the implementation of health education has been emphasized in Law Number 20 of 2003 concerning the National Education System Article 51 paragraph 2. This article states that the management of higher education units is carried out based on the principles of autonomy, accountability, quality assurance and transparent evaluation. Today's health workers are expected to have competencies that are able to respond to national, regional and global challenges in the form of shifts in the SPM-PT policy from the Director General of Higher Education, various government policy shifts in the employment and health sectors, as well as the implementation of global and regional declarations such as the MDGs which have ended in 2015, patient safety practice, ASEAN Community roadmap 2011-2015 and 2015-2019, and multinational projects such as the HPEQ (Health Professional Education Quality) project which focuses on structuring the higher education system in the health sector (Dirjen Dikti, 2011), SDGs 2015 to 2030. To ensure the availability of health personnel who are competent and qualified in their field and who have high competitiveness,

it is necessary to have a quality assurance system for the administration of higher education institutions in the health sector.

In its implementation, there are several Government policies in System Development Higher Education Quality Assurance (SPM-PT), among others,

1. Law Number 20 of 2003 concerning the National Education System (UU Sisdiknas)
2. Law Number 12 of 2012 concerning Higher Education (UU Dikti)
3. Minister of Research, Technology and Higher Education Regulation No. 44 of 2015 concerning National Higher Education Standards
4. Minister of Research, Technology and Higher Education Regulation No. 32 of 2016 concerning Accreditation of Study Programs and Higher Education
5. Minister of Research, Technology and Higher Education Regulation Number 62 of 2016 concerning the Higher Education Quality Assurance System

Health services are the absolute right of every individual and should be a responsibility that must be fulfilled by all levels of the health profession and policy holders. The quality of health services is largely determined by the health service system and personnel. Health service personnel often face obstacles in terms of number, distribution, quality and qualifications, career development system, and welfare of service providers. Problems that arise at the micro operational level give rise to a perception of low quality of health services, which originates from the gap between existing rules and standards and service implementation that cannot implement them.

Understanding the real conditions faced in the field is very important to review the basis for policies, regulations and standards to improve the quality of services in the health sector (Bappenas, 2005). Based on this situation, researchers feel the need to comprehensively examine the "Inhibiting and supporting factors for the Implementation of the Policy for Improving the Quality of Study Programs in Health Sciences Colleges through the Internal Quality Assurance System (SPMI)."

METHODS

This research uses a qualitative method with a case study approach. This research was conducted in four high school study programs in the Budi Luhur Cimahi health sector. Data was collected through in-depth interviews, observation and document review. So primary data collection uses in-depth interview methods, as well as documentation. It is hoped that you will be able to find out the elements that are subject to quality assurance, the process of implementing internal quality assurance and find the inhibiting and supporting factors for SPMI policies in the College of Health Sciences environment.

This research uses a qualitative approach (Moleong, 2014:6). The type of qualitative descriptive research used in this research was intended to obtain information regarding SPMI policies in four study programs at the Budi Luhur Cimahi College of Health Sciences. Informants in this research were determined in interviews based on the criteria of having the most accurate information or which was closely related to the research objectives, namely informants who were directly involved with SPMI policies or who had strong information about the things aimed at by this research.

Relevant informants can be individual heads of study programs and former heads of study programs, secretaries of study programs and academic heads of study programs or other relevant officials. Even though the informant has been determined, if the informant refers to a person rather than a position, then in this study the researcher tries to determine the choice of informant based on criteria.

certain. The method used in this research is a qualitative descriptive method. The essence of this method according to Burhan (2014:92) (1) Ontologically, postpositivism is critical realism which views social reality as existing in reality in accordance with natural law, but it is

impossible if a social reality can be seen correctly by humans (researcher); (2) Methodologically, an experimental approach through observation is not enough to find the truth of the data, but must use the triangulation method, namely using various methods, data sources, researchers and theories. (3) Epistemologically, the relationship between the observer or researcher and the object or The social reality studied cannot be separated.

Data analysis is the final process in qualitative research (Creswell, 2010). According to Creswell (2010) there are several steps in analyzing data as follows:

1. Process data and interpret data for analysis. Read the entire data. Analyze in more detail by coding the data.
2. Apply the coding process to describe the setting, people, categories, and themes to be analyzed.
3. Indicate how these descriptions and themes will be restated in the narrative or qualitative report
4. Interpret or interpret the data

Several steps in qualitative data analysis above will be applied in this research. In this research, the data obtained was written in interview transcripts, then coded, themes were sorted as a result of the findings, and then the data was interpreted.

RESULTS

Based on the results of observations and existing problem findings, it shows that there are several important findings which are problems in the Implementation of the Internal Quality Assurance System (SPMI) Policy in each study program in Higher Schools, so that they need attention for improvements. The results of the research show that the implementation of the policy to improve the quality of high school health study programs through SPMI has gone quite well. This can be seen from the commitment from the leadership and the entire academic community, as well as the SPMI documents that have been prepared. The SPMI components that already exist in the two high schools include: vision, mission, goals, objectives, strategies, policies, procedures, information systems, resources and evaluation. However, there are still several obstacles in implementing SPMI. The important findings can be summarized. The important findings that are the problem in this research can be seen in the following table:

Table Internal Quality Assurance System (SPMI)

Positive Findings	Negative Findings
1. Everyone has a strong commitment to running SPMI well so that its implementation can be well systemized 2. Models developed for quality assurance with reference to Higher Education regulations, namely PPEPP (Determination, Implementation, Evaluation, Control, Improvement) 3. Human resources at the Quality Assurance Agency (BPM) consist of young human resources who have high enthusiasm and an advanced mindset so as to provide positive energy in the implementation of SPMI 4. Highly cooperative human resources are demonstrated by collaborating with stakeholders and related professional	1. Monitoring the implementation of each standard that has been determined based on the quality procedures that have been created has not been implemented optimally. 2. Evaluation is limited to the results of the Internal Audit and following up on recommendations from the Management Review Meeting. 3. There are study programs that are still not optimal in implementing SPMI because they are still in the stage of completing the required quality documents. 4. There are study programs that already have the required standards, but are still in the development stage.

<p>organizations to implement quality within the institution</p> <p>5. The existence of rewards for certain awards can encourage HR to be able to work in accordance with predetermined standards or improve these standards</p> <p>6. There is a meeting forum which is used as a medium for free or informal communication between units</p> <p>7. There is an increase in management capabilities through management training and SPMI.</p>	<p>5. The targets or policy measures made still do not fully meet the standards set by LAM-PTKs</p> <p>6. There is a work climate that is not based on guidelines and low awareness regarding a quality culture that still needs to be improved</p> <p>7. There are still human resources who are slow to respond, so the Quality Assurance Agency (BPM) must be more active in promoting the implementation of SPMI in institutions</p> <p>8 The implementation of internal quality assurance is not timely due to the busyness of HR in internal units which is also related to workload.</p>
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DISCUSSION

From a theory development perspective, this research can be considered as the development of several theories, where the research discusses the Implementation of the Internal Quality Assurance System Policy (SPMI) in each high school study program in the health sector, so that it requires an ideal model of the Internal Quality Assurance System (SPMI) policy that Suitable for this College of Health field, it uses several theories as references such as public policy, policy implementation. Van Meter and Van Horn also explained that the implementation model assumes that policy implementation proceeds linearly from public policy, implementers and policy performance, where this model is influenced by six factors, namely:

1. Standardization & Targets.

Based on the theory of Van Meter and Van Horn which shows that policy implementation must have standardization and targets so that the policy can run as expected;

2. Resources.

Based on the concept of Van Meter and Van Horn's policy implementation theory, in which policy implementation requires adequate resource support, where human resources are the most important factor in implementation, because apart from being the subject of policy implementation, it is also an object of public policy;

3. Characteristics of the Implementing Organization.

Based on Van Meter and Van Horn, the characteristics of the implementing agency refer to the bureaucratic structure. More clearly, the characteristics relate to the abilities and criteria of hierarchical supervisory level staff regarding sub-unit decisions in the implementation process. The characteristics of organizational implementers are that they have a certain scope and cannot implement problems if they involve synergistic matters. They need to be formed like a task force so that implementation can be optimal;

4. Attitude of the Implementers.

The implementation of policy attitudes or dispositions of implementers is divided into three things, namely: (1) The implementor's response to the policy, which is associated with the implementor's willingness to implement public policy; (2) Conditions, namely understanding the policies that have been established; and (3) The intensity of the implementor's disposition, namely the value preferences held;

5. Communication.

Communication is very necessary in realizing the implementation of existing policies. Communication in this case is used in the context of conveying information to policy implementers about what standards and objectives must be consistent and uniform (consistency and uniformity) from various information sources;

6. Social, Economic and Political Conditions.

The policy system at the forefront, social, economic and political conditions also influence the effectiveness of policy implementation. Socio-economic and political conditions without concrete results that make policies better will be in vain.

This research can produce new policy implications in the Internal Quality Assurance System (SPMI) which can run the education system optimally and improve the quality of education. The implications of this new policy are not only being able to achieve the specified goals and targets but also being able to follow developments in system dynamics, guidelines and standards that apply in the provision of educational services. In this case, the policy implications lead to improvements through the real implementation of the Controlling Integrated Education System (CIES) which prioritizes improvements to education systems, especially those related to SPMI policies that have not been running well, through integrated control involving all stakeholders and Human resources must have a strong commitment and cooperative attitude in carrying out SPMI well so that its implementation can be well systemized.

Based on the theories above and existing explanations, the following proposition can be formulated:

1. The Internal Quality Assurance System (SPMI) policy can be realized by paying attention to the communication support that exists between both implementers and stakeholders.
2. Commitment from implementers and stakeholders plays an important role in implementing SPMI in improving the quality of Health Sector Colleges and Academies.
3. SPMI can be realized if there are improvements in the implementation of quality culture, appropriate workload and completeness of documents.
4. Quality assurance in the education system can be realized through the implementation of a Controlling Integrated Education System which prioritizes quality management with integrated control.

Based on the research results from a theoretical development perspective, this research can be considered as developing several theories, where the research discusses the Implementation of the Internal Quality Assurance System Policy (SPMI) in each high school study program in the health sector, thus requiring an ideal model of Internal Quality Assurance System policy. (SPMI), which is suitable for universities in the health sector, uses several theories as references such as public policy, policy implementation. Van Meter and Van Horn also explained that the implementation model assumes that policy implementation proceeds linearly from public policy, implementers and policy performance, where this model is influenced by six factors, namely:

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CONCLUSION AND SUGGESTION

Based on research results, factors that support the implementation of SPMI in health sciences colleges include:

1. Commitment of the leadership and the entire academic community. The commitment of the leadership and the entire academic community is a very important factor in

implementing SPMI. Leaders and the entire academic community must have a high awareness and understanding of the importance of SPMI.

2. Support from the government. Support from the government is also an important factor in implementing SPMI. The government can provide support in the form of regulations, budgets and training.
3. Availability of resources. Availability of resources, both human resources, funds and infrastructure, is also an important factor in implementing SPMI.
4. Factors inhibiting the implementation of SPMI. Based on research results, factors that inhibit the implementation of SPMI in high schools in the health sector include:
 - a. Lack of understanding of the academic community about SPMI. Lack of understanding of the academic community about SPMI can hinder the implementation of SPMI. Therefore, it is necessary to carry out socialization and training about SPMI on an ongoing basis to the entire academic community.
 - b. Limited resources. Limited resources, both human resources, funds and infrastructure, can also hinder the implementation of SPMI.
 - c. Integrated quality system support has not been running optimally.

REFERENCES

1. Burhan. B. (2014). Metode penelitian sosial & ekonomi: format-format kuantitatif dan kualitatif untuk studi sosiologi, kebijakan, publik, komunikasi, manajemen, dan pemasaran edisi pertama. Jakarta: kencana prenatal media group.
 2. Creswell, J. W. (2010). Research design: pendekatan kualitatif, kuantitatif, dan mixed. Yogyakarta: PT Pustaka Pelajar.
 3. Cruickshank, M. (2003). Total Quality Management in the Higher Education Sector: a Literature Review from an International and Australian Perspective. Total Quality Management & Business Excellence, Vol. 14, Iss. 10, pp. 1159-1167
 4. Dirjen Dikti. (2010). Sistem Penjaminan Mutu Perguruan Tinggi (SPM-PT). Jakarta: Kementerian Pendidikan Nasional, Direktorat Jenderal Pendidikan Tinggi.
 5. Mizikakaci, F. (2006). A Systems Approach to Programme Evaluation Model For Quality In Higher Education. Quality Assurance in Education, Vol. 14, No. 1, 2006, pp. 37-53.
 6. Moleong, Lexy J, (2014), Metodologi Penelitian Kualitatif, PT Remaja Rosdakarya,. Bandung. Ajidarma, Seno Gumira
 7. Permenristekdikti No. 62 Tahun 2016 tentang Sistem Penjaminan Mutu Pendidikan Tinggi
 8. Permenristekdikti No. 44 Tahun 2015 Tentang Standart Nasional Pendidikan Tinggi
 9. Permenristekdikti No. 32 Tahun 2016 Tentang Akreditasi Progam Studi dan Perguruan Tinggi
 10. Sudiby, S., dan Surahman. (2014). Metodologi Penelitian Untuk. Mahasiswa Farmasi, Jakarta: Trans Info Media
 11. UU Nomor 12 Tahun 2012 Tentang Pendidikan Tinggi (UU Dikti)
 12. UU Nomor 20 Tahun 2003 Tentang Sistem Pendidikan Nasional (UU Sisdiknas)
- Winarno. (2012). Kebijakan Publik, Teori, Proses, dan Studi Kasus edisi & Revisi. Terbaru. CAPS. Yogyakarta