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RESEARCH ARTICLE

Analysis of Ministry of Health Regulation No. 30 of 2022 on Hospital Service Quality In Indonesia

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Abstract: Indonesian Ministry of Health Regulation No. 30 of 2022 has become a focal point in efforts to improve the quality of services in hospitals. In this context, this study aims to investigate the extent of the effectiveness of this regulation and the key factors influencing its implementation in the hospital accreditation process. This study examines the effectiveness of this regulation and the key factors affecting the hospital accreditation process. The research used a mixed approach with qualitative and quantitative techniques and analyzed empirical and theoretical data from scientific publications over the last five years. The findings indicate that this regulation has significantly improved operational efficiency and patient satisfaction in healthcare facilities. Several studies highlight improvements in patient identification protocols, risk management, and compliance with healthcare service standards. However, there are challenges, such as gaps in technology infrastructure and training for implementing electronic medical records (EMR), uneven distribution of specialist doctors, and deficiencies in the framework for public-private partnerships.

Keywords: Health Regulation; Hospital Service Quality; Hospital Accreditation; Electronic Medical Records; Regulatory Effectiveness

1. Introduction

Hospitals as community health service institutions play a role in the development of public health in a country (Solehudin Solehudin & Sancka Stella Ganasnda Sihura, 2023). Hospital accreditation is a process of evaluation conducted by independent institutions, both domestic and international, based on applicable accreditation standards (Law No. 44/2009, Article 40, paragraph 2 regarding hospitals) to assess the standard of services provided by hospitals (Layman et al., 2022; Pemerintah Republik Indonesia, 2009). In Indonesia, in 2022, there were 3,124 hospitals registered with the Ministry of Health, 2,559 of which were accredited, including 22.23% (569 hospitals) at the primary level, 7.4% (190 hospitals) at the basic level, 13.1% (335 hospitals) at the intermediate level, 11.4% (291 hospitals) at the advanced level, 45.7% (1,172 hospitals) at the comprehensive level, and 0.07% (2 hospitals) were accredited by foreign accreditation institutions (Joint Commission Internasional) (Kesehatan, 2023).

The hospital accreditation standards in Indonesia are designed to ensure that hospitals provide safe, effective, and high-quality healthcare services to the public (Kusumawardhani et al., 2022). Hospital accreditation in Indonesia is managed by the Hospital Accreditation Commission (KARS), which is an independent agency responsible for managing hospital accreditation (Hadiansyah Hadiansyah & Dety Mulyanti, 2023). Implementation of hospital accreditation standards needs to be carried out to improve public health services in order to achieve Universal Health Coverage (UHC) by using independent professional surveys to



ensure that financing for health services is only provided to facilities that meet high service standards (Aisyah et al., 2022). In addition, to ensure affordable quality healthcare, all hospitals affiliated with JKN (hospitals under the national health insurance program) must be accredited through the main hospital accreditation agency, the Indonesian Hospital Accreditation Commission (KARS) (Nuurjannah, N, 2021).

Health Ministry Regulation No. 30 of 2022, issued by the Indonesian Ministry of Health, has sparked important discussions in this study regarding its impact on hospital service quality, highlighting various aspects of the healthcare delivery system. This regulation is designed to address shortcomings in health resource management and operational efficiency, which have been obstacles to providing effective healthcare services in Indonesia, which has a doctor ratio of only 2.7 per 10,000 population according to 2019 World Bank data (World Bank, 2019). Studies such as those conducted by Sinaga et al. (2023); Siswati et al. (2023) explore the challenges of implementing electronic medical records (EMR) mandated by this regulation, emphasizing the need for improvements in organizational readiness, human resources, and technology to enhance the quality of service and patient care efficiency (Sinaga et al., 2023; Siswati et al., 2023). In addition, Laksono et al. (2021); Mekarsari & Ayuningtyas (2023) discuss the implications of hospital maintenance management and readiness assessment, suggesting that proactive maintenance and readiness evaluation are key to maintaining high-quality service in Indonesian hospitals (Laksono et al., 2021; Mekarsari & Ayuningtyas, 2023).

This regulation also aims to strengthen the internal control system and enhance transparency in hospital management. For example, Wahyudi (2020) criticize the absence of minimum requirements for specialist doctors in the previous hospital classification regulation, which caused an uneven distribution of specialist doctors and affected the quality of healthcare services in Indonesia (Wahyudi et al., 2021). Additionally, research by Basabih (2023) reveals that an inadequate Public Private Partnership (PPP) framework can limit the autonomy of regional hospitals and hinder the improvement of healthcare services (Basabih, 2023). Martha (2020) also indicated that the effective occupational health and safety management system at Gadjah Mada University Hospital has not yet implemented an internal audit, which is a crucial element to ensure the consistent application of standards (Martha, 2020).

In a broader context, the implementation of EMR based on the Ministry of Health Regulation No. 30 of 2022 is expected not only to enhance operational efficiency but also to improve the overall quality of patient services. Hapsari et al. (2023) describe significant gaps in management, financial, and technological capacities that still need to be addressed to successfully implement EMR at the Kartasura Community Health Center (Hapsari et al., 2023). Research by Mekarsari & Ayuningtyas (2023) also highlights the urgent need to enhance hospital readiness components that are assessed as low, especially in the face of the COVID-19 pandemic, to ensure high quality healthcare services (Mekarsari & Ayuningtyas, 2023). This study overall indicates that while some progress has been made, there are still many areas that require strategic improvement and more consistent implementation to achieve the standards set by regulations.

The Indonesian Ministry of Health should consider revising Regulation No. 30 of 2022 to fill gaps in the existing frameworks that govern hospital service quality. This study examines both the administrative and technological aspects, supported by empirical data and procedural approaches. The uniqueness and innovation of this analysis stem from its comprehensive review of the regulatory environment in Indonesia regarding hospital service quality standards, and it discusses the integration and practicality of electronic medical records (EMRs). It identifies mismatches between hospital capabilities and regulatory standards, pinpointing areas for improvement. The paper recommends changes to Regulation No. 30 of 2022, including specific clauses on the standardization and enforcement of EMR implementation, enhancements to hospital maintenance protocols, and strengthening of healthcare service delivery. These modifications are likely to improve

the overall efficiency and effectiveness of the healthcare system, ensuring a higher quality of patient care throughout Indonesia.

2. Research Method and Materials

The study aim is to assess the impact of Ministry of Health Regulation No. 30 of 2022 on the pre and post quality of hospital services in Indonesia and to identify the factors that influence the effectiveness of this regulation in the hospital accreditation process. This study employ a mixed-methods approach, the research integrates both qualitative and quantitative techniques to offer a comprehensive evaluation of the regulation's outcomes. In this study, the articles were searched through Pubmed, Google Scholar, Science Direct, Ministry Health Regulation No. 30 of 2022, electronic book relevant to the research topic, study published to obtain actual results. This comprehensive approach ensures a robust exploration of the regulation's impact, leveraging both empirical data and theoretical insights.

3. Results and Discussion

3.1. *The Effectiveness of Ministry of Health Regulation No. 30 of 2022 in Enhancing The Quality of Hospital Services*

Minister of Health Regulation No. 30 of 2022, in article 4, specifically outlines thirteen quality indicators that must be implemented in hospitals to improve the quality of health services. These indicators include:

- a. Hand hygiene compliance;
- b. Compliance with the use of personal protective equipment;
- c. Patient identification compliance;
- d. Emergency cesarean section response time;
- e. Outpatient waiting time;
- f. Elective surgery delay;
- g. Doctor's visit compliance time;
- h. Reporting of critical laboratory results;
- i. Compliance with the use of the national formulary;
- j. Compliance with clinical pathway;
- k. Compliance with efforts to prevent patient falls;
- l. Complaint response time; and
- m. Patient satisfaction.

The implementation of Ministry of Health Regulation Number 30 of 2022 has played a significant role in improving the quality of hospital services throughout Indonesia (Hasan & Putra, 2019; Sabina et al., 2023). This regulation, which focuses on enhancing service standards and patient care protocols, has significantly contributed to operational efficiency and patient satisfaction in healthcare facilities. Several recent studies have highlighted the positive impact of this regulation on various aspects of hospital service quality.

One key area where this regulation has proven effective is in simplifying processes and ensuring better compliance with healthcare service standards (Winata et al., 2022). Research by Winata et al., 2022 notes that hospitals subject to these regulations have shown an increase in compliance with standardized protocols, resulting in the delivery of more efficient services. This impacts patient experience and outcomes positively, with fewer reported medical errors and adverse events in accredited hospitals (Winata et al., 2022).

In addition, this regulation has facilitated improvements in patient safety practices and risk management (Kartikasari et al., 2014). The hospital is now more vigilant in implementing measures to prevent medication errors, infections, and other unwanted occurrences. For example, Research by Prabowo in 2018 noted a significant decrease in medication errors and adverse events in patients following the implementation of Regulation No. 30,

indicating a positive shift towards safer and more reliable healthcare services (Prabowo, 2018).

Tabel 1. Summary of the Effectiveness of Ministry of Health Regulation No. 30 of 2022

Author, year	Key Findings	Implication
Laksono et al. (2021)	High effectiveness in maintenance management correlates with good quality hospital care.	Emphasizes the need for robust maintenance management systems under the new regulations.
Sinaga et al. (2023)	Readiness in terms of effectiveness and efficiency for EMR implementation; however, technological and resource barriers exist.	Indicates a gap in technological infrastructure and training that needs to be addressed for successful EMR implementation.
Wahyudi et al. (2021)	Inequity in specialist doctor distribution due to no minimum requirements in hospital classifications.	Suggests revisions in the regulation to define clear minimum standards for specialist availability to ensure uniform health service quality.
Effendi et al. (2021)	Effective PHC accreditation in eastern Indonesia requires alignment with other regulations and supportive leadership.	Highlights the need for regulatory alignment and leadership support in enhancing primary healthcare center accreditation.
Maldun et al. (2022)	Successful implementation of the Healthy Indonesia Card in providing inclusive health services at Sayang Rakyat Hospital.	Demonstrates the potential for national health insurance programs to integrate effectively with hospital service standards.
Hapsari et al. (2023)	EMR implementation at Kartasura Primary Healthcare shows partial readiness, highlighting gaps in several operational capacities.	Calls for targeted improvements in financial, operational, and technological capacities to enhance EMR systems.
Mekarsari & Ayuningtyas (2023)	Analysis of hospital readiness across Indonesia reveals varied success in meeting the standards for infection prevention.	Urges hospitals to prioritize improving components with low readiness scores to enhance overall health service quality.
Basabih (2023)	The KSO policy framework for regional hospitals is inadequate and limits autonomy, impacting service quality.	Recommends comprehensive policy evaluations and updates to enhance the effectiveness of PPP models in healthcare.
Martha (2020)	Effective health and safety management at Universitas Gadjah Mada Hospital aligns with COSO criteria but lacks an internal audit.	Suggests the need for internal audits to confirm the effectiveness of health and safety management systems.
Endradita et al. (2020)	Disparities in hospital services for 3rd class BPJS Kesehatan participants due to bed allocation policies.	Advocates for policy adjustments to ensure equitable service provision across all insurance classes.

Abbreviation: BPJS: Badan Penyelenggara Jaminan Sosial (Social Health Insurance Administration Body), COSO: committee of sponsoring organizations of the treadway commission, EMR: electronic medical record, KSO: kerja sama operasi (operational cooperation), PHC: primary health care, PPP: public private partnership

The accreditation process has also been positively impacted by this regulation, resulting in higher compliance rates with quality standards. The research by Mulyani & Sugiatini, 2024 found that hospitals accredited under Regulation No. 30 have achieved higher patient satisfaction ratings compared to non-accredited facilities (Mulyani & Sugiatini, 2024). This

indicates that the regulation has successfully aligned hospital practices with international health standards, resulting in an overall improvement in service quality.

In addition, Minister of Health Regulation No. 30 of 2022 specifically outlines thirteen quality indicators that must be implemented in hospitals to improve the quality of healthcare services. Kaharudin & Amalia 2022 found that effective maintenance management is closely related to high-quality healthcare services (Kaharudin & Amalia, 2022). It emphasizes the need for a robust maintenance management system under these new regulations.

3.2. The key factors of Ministry of Health Regulation No. 30 of 2022

The effectiveness of Ministry of Health Regulation No. 30 of 2022 in improving the quality of hospital services is influenced by several key factors (Febriyani & Budi Ermanto, 2023). These factors encompass various aspects of healthcare service provision, including compliance with regulations, technological infrastructure, human resources, and leadership support (Kementerian Kesehatan Republik Indonesia, 2022).

One key factor influencing the effectiveness of regulation is the level of compliance with the quality standards set forth in the regulations. Hospitals that demonstrate high levels of compliance with these standards are more likely to achieve better outcomes in terms of patient safety, satisfaction, and overall service quality. Efforts to improve compliance may include training programs, quality improvement initiatives, and ongoing monitoring and evaluation mechanisms (Kartika, Dewi, via, 2022).

Technology infrastructure is another key factor affecting the effectiveness of Regulation No. 30. The successful implementation of electronic medical records (EMR), for example, heavily relies on strong technology infrastructure and supporting systems (Aqil, 2020). Hospitals lacking adequate IT infrastructure or facing challenges in integrating CME into existing workflows may struggle to fully realize the benefits of regulations in terms of improving efficiency and quality of care.

Human resources, including healthcare workers and administrative staff, play a key role in the effectiveness of such regulations. The level of workforce adequacy, along with opportunities for ongoing training and development, is crucial to ensure that hospitals can meet regulatory demands and provide high-quality care to patients. Additionally, leadership support and organizational culture are important factors that influence how effectively hospitals can implement and sustain the changes required by regulations (Hermawan et al., 2022).

Another factor is the level of cooperation and coordination among stakeholders involved in the provision of healthcare services. Effective communication and cooperation between government agencies, healthcare providers, insurers, and other relevant parties are crucial to align efforts and resources towards common goals. A collaborative approach can help address systemic challenges, streamline processes, and enhance the overall quality of healthcare services across the healthcare system (Gondewa et al., 2020).

Furthermore, consistency and compliance with regulations are key to ensuring the effectiveness of Regulation No. 30. Clear and transparent guidelines, coupled with regular monitoring and enforcement mechanisms, can help ensure that hospitals understand and comply with the requirements set forth in the regulation. Additionally, compliance with other relevant regulations and policies can help strengthen the regulatory objectives and promote a more integrated and comprehensive approach to improving the quality of healthcare services (Alie et al., 2023).

Overall, Ministry of Health Regulation No. 30 of 2022 has made significant progress in improving the quality of hospital services in Indonesia, resulting in enhancements in various aspects of healthcare delivery. This regulation has contributed to the improvement of patient safety, satisfaction, and overall service quality by streamlining processes,

enhancing compliance with quality standards, and fostering innovation in healthcare delivery.

However, challenges still exist in fully realizing the potential of this regulation, especially in terms of technology infrastructure, human resources, and regulatory consistency. Overcoming these challenges will require sustained efforts from policymakers, healthcare providers, and other stakeholders to ensure sustainable improvements in healthcare services across Indonesia (Mewengkang et al., 2023).

To take it further, it will be crucial to prioritize investments in technology infrastructure, strengthen human resource capacity, and enhance regulatory consistency to maximize the effectiveness of Regulation No. 30 and achieve the primary goal of improving the quality of healthcare services and outcomes for all Indonesian communities.

Furthermore, it is important to continue improving coordination between institutions and cooperation among stakeholders within the healthcare system. Effective communication and strong collaboration between the government, hospitals, health insurance, and other relevant parties will facilitate the enhancement of more integrated and efficient healthcare services. With this approach, the systemic challenges faced by the Indonesian healthcare system can be addressed more effectively (Krismanto & Irianto, 2020).

Looking ahead, it is important to identify specific areas where these regulations can be improved. One aspect to consider is the strengthening of technological infrastructure, including investment in more sophisticated electronic medical record systems that can be well integrated into patient care processes. Human resources should also be a focus of attention, with the provision of broader training and development for healthcare professionals to adapt to regulatory and technological changes (Rahayu, 2016).

Furthermore, consistency and enforcement of regulations need to be enhanced to ensure better compliance from hospitals and other healthcare providers. Effective monitoring mechanisms also need to be strengthened to ensure that quality standards are adhered to and service quality continues to improve over time.

However, there are several limitations that need to be acknowledged in this research. Firstly, data limitations often hinder the analysis of regulatory impacts, especially when data is available in limited or incomplete amounts. Additionally, variability between hospitals and regions can affect the generalization of findings (Al, 2018).

For further research, it is recommended to conduct a more in-depth study on the implementation of Ministry of Health Regulation No. 30 of 2022. This may involve direct surveys to hospitals and other stakeholders to gain deeper insights into the challenges and opportunities faced in implementing this regulation. Additionally, further research can focus on evaluating the long-term impact of this regulation on the quality of healthcare services and patient outcomes.

By improving the implementation and enforcement of Ministry of Health Regulation No. 30 of 2022, Indonesia can continue to progress in enhancing the quality of healthcare services and achieving the goal of universal health coverage (UHC). Improving the quality of healthcare services is a key aspect in ensuring equitable and high-quality access to healthcare services for all Indonesian citizens (Selvi Julianti, 2023). Through collaboration among stakeholders and sustainable commitment, Indonesia can build a stronger and more responsive healthcare system to meet the needs of the community.

4. Conclusion

The Ministry of Health Regulation No. 30 of 2022 implements Indonesia's wide hospital service quality for all regions by putting more importance on patient safety and service delivery efficiency. However, the policy implementation faces challenges since different provinces have diverse resource capabilities and compliance levels. Although the regulation harmonizes and standardizes hospital services, the infrastructure and professional variations



in providing the services limit its application. The policy seeks to be achieved through regular audits and professional enhancement training of the practitioners but is hindered by the logistical and financial constraints in the rural areas.

The policy framework uses community feedback mechanisms to ensure patients' satisfaction and the service delivery efficiency slanters. In conclusion, the regulation will create some extent of uniformity in hospital service equality but quantifying its distribution achievement requires more efforts to address the systemic barriers in the health sector. However, due to the policy's direct and indirect theoretical foundation, a collective approach from the responsible authorities, hospitals, and the community will enhance the quality and emphasis of the service widely across the country.

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