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TRANSFORMATION OF THE CLINIC INTO A CLASS D HOSPITAL: CASE STUDY AT YH CLINIC

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ABSTRACT

The development of health systems and infrastructure during the pandemic has become a non-negotiable necessity. Uneven health services and limited access to health in several regions in Indonesia are the driving forces for the development process. As a health service provider, YH Clinic is in the process of transforming from a clinic into a Class D Hospital. This study aims to analyze what obligations the YH clinic must fulfill in the transformation process following the ministry of health regulations and investigate what problems and challenges may occur during the transformation. This research design is descriptive with the case study method and qualitative analysis. Data has been collected through interviews, literature study, and documentary analysis.

Keywords: *Case study, Class D Hospital, Clinic, Health system, Transformation*

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1. INTRODUCTION

Health is an essential issue in developing countries, one of which is Indonesia. In the hierarchy of needs theory, Abraham Maslow explains the importance of health as one of the basic needs that must meet before realizing higher needs, such as the need for self-actualization and self-esteem (Risnaldi, 2011). Health is also one aspect that affects the quality of Human Resources (HR), essential in developing a country. If the quality of health is relatively good, the quality of human resources will also be good (Pohan & Halim, 2016).

A good health system is fundamental to achieving the Millennium Development Goals (MDGs). According to the World Health Organization (WHO), there are 6 (six) components needed to strengthen the health system, especially in developing countries which still face many challenges in building a health system (Putri, 2019). These challenges include the lack of coordination between institutions, inadequate financing of health services, and the lack of health workers (Gotama Indra et al., 2010).

During the pandemic that has lasted for almost 2 (two) years, the development of the health system in Indonesia has become increasingly important and has become a significant concern. The government stated that Indonesia's health system and infrastructure are still not good and need a lot of improvement. Data from the Ministry of Health of the Republic of Indonesia for 2021 also shows that health services are still challenging to reach in some regions in Indonesia and public access to primary health care facilities is still not ideal.

The health system is increasingly faced with maintaining a balance between routine health services and the fulfillment of pandemic handling. This condition requires health service providers, such as health centers, clinics, and hospitals, to carry out developments to create adequate services and develop and survive in the industry.

As a health service provider operating for almost 14 years, YH clinic seeks to improve the quality of health services and expand service coverage by developing it into a Class D Hospital. YH's clinic financial report data for the last 3 (three) years, 2019, 2020, and 2021 showed an increase in clinic patient visits by 15%. The increase in the number of visits generally indicates that clinical facilities have also increased, and patients feel the ease of health services due to insurance (BPJS).

YH Clinic encountered several obstacles in the transformation process, including licensing, lack of income stability that hindered human resource development, employee performance appraisals were still using clinic-made indicators, and information systems were not yet integrated between departments. Therefore, this study aims to analyze what obligations the YH

clinic must fulfill in transforming into a Class D Hospital and identify problems and challenges that may occur so that preventive measures can be taken so that the transformation process goes well.

The next section of this article will explain the primary literature on clinics and hospitals based on the Ministry of Health Regulation and the theory of transformation and organizational change as a basis for analysis. Then the approach and method used in the research are explained. The core discussion helps provide input in the form of a reference for clinics and other health service providers regarding transforming a clinic into a hospital and ends with conclusions and suggestions.

2. LITERATURE REVIEW

2.1. CLINIC

A clinic is a health service facility that provides primary and specialist medical services, is managed by more than one type of health worker (nurse and/or midwife), and is led by a medical professional, namely a doctor, specialist doctor, dentist, or doctor, specialist dentist (Permenkes No 9, 2014)

Based on the Minister of Health Regulation, an inpatient clinic must have an inpatient room that meets the requirements, a pharmacy room, a laboratory room, a kitchen room, and a pharmacy installation organized by a pharmacist and contains clinical laboratory management and services. The minimum number of beds is 5 (five) and a maximum of 10 (ten) beds. The inpatient clinic staff consists of medical personnel, pharmacy staff, nursing staff, nutritionists, health analysts, other health workers, and non-health workers as needed.

If there is a name change, change in the type of business entity, and/or a change in address and place, the Clinic must change its operating license. For changes in the name and type of business entity, the Clinic must apply for an operational permit. It must attach a statement letter for changing the name and/or type of business entity of the Clinic signed by the owner, an amendment to the Notary Deed, and the original Clinic operating permit before the change. As for the change of address and place, the Clinic needs to apply for a building permit and operational access and must attach a statement letter for changing the Clinic's address and place signed by the owner and the original clinic operating permit before the change.

2.2. HOSPITAL

Hospital is a health service institution that provides complete individual health services that provide inpatient, outpatient, and emergency services (Permenkes no 3, 2020). Based on the type of service provided, the Hospital consists of a general hospital and a particular hospital. Public hospitals

provide health services in all fields and types of disease and at least consist of medical services and medical support, nursing and midwifery services, and non-medical services (Permenkes no 3, 2020). Public hospitals have a mission to provide quality and affordable health services to improve the community's health status. The task of public hospitals is to carry out health service efforts efficiently and effectively by prioritizing healing and recovery, which is carried out in a harmonious and integrated manner with improvement and prevention and the implementation of referral efforts (Arifah, 2017).

General hospitals are classified into class A public hospitals, class B, class C, and class D. Furthermore, type D general hospitals are classified into class D general hospitals and class D Pratama. The Minister of Health also regulates the minimum standards that must be owned by class D public hospitals, which consist of:

- The number of beds is at least 50 pieces
- Types of services consist of nursing and non-medical services (CSSD, medical records, pharmacy, blood services, laundry, nutrition, maintenance of infrastructure and medical equipment, information, and communication).
- Human resources consist of nursing staff, pharmacy staff, radiographers for biomedicine, medical laboratory technology experts, and non-health workers.
- Minimum buildings and infrastructure, namely emergency room, outpatient room, inpatient room, operating room, ICU, radiology room, laboratory room, blood bank room, pharmacy room, nutrition room, infrastructure maintenance room, waste management room, room sterilization, laundry room, administration and management room, medical record room, parking space, ambulance, clean water, waste and sanitation management room, fire fighting room and medical gas management room.

In addition to the minimum standards that every class of public Hospital must possess, the Minister of Health also stipulates that every Hospital must have a permit after meeting the requirements for location, building, infrastructure, human resources, pharmacy, and equipment. Hospital permits include building permits and operational permits. The building permit is valid as long as the Hospital provides health services and is proposed by the hospital leader to construct a building or change the function of an existing building into a hospital. In contrast, the operational permit is valid for 5 (five) years. It can be extended as long as it meets the requirements and classification of the Hospital and is proposed to carry out health service activities, including the determination of Hospital class by fulfilling the requirements and/or commitments.

2.3. ORGANIZATIONAL TRANSFORMATION AND CHANGE

Organizational transformation is defined as drastic changes in the organization regarding how the organization works and interacts with its environment. Efforts to make changes are directed at three organizational factors: the overall organizational structure, management processes, and organizational culture (Siagian, 227-4).

Generally, the principal reasons for organizational transformation are the dynamics of the business environment, such as globalization, competition, and continuous market and technological changes (Poerwanto et al., 2013). Kotter (1998) explains that the success of the transformation process in an organization is influenced by a change process that is passed in various continuous stages, where complete change takes a long time.

Kertajaya (1999) states that organizational transformation includes structural transformation, namely systems, organizational structure, technology, corporate strategy, and cultural change, namely human resources. Bony Pattipawaey (2020), Lisnurida (2008), and Arifah (2017) conducted a situation analysis in the form of internal and external clinical factors as one of the stages in analyzing hospital development.

In addition, in studying the transformation process of the Karawang Regional General Hospital as a regional self-financing unit, Husnedi (2000) identifies the concept of change starting with forming organizational values that will be socialized and will become behavioral guidelines for all individuals in the organization, formulating a vision, mission and strategy, structural change, human resource development, and finally the analysis of challenges and obstacles in the change process.

Based on the results of an interview with the Director of the YH clinic, there are 5 (five) things that became points of development in transforming the clinic into a class D hospital. The main thing is called 5M, namely Material (infrastructure, both medical and non-medical), Man (Human Resources), Method, Money, and Marketing (marketing).

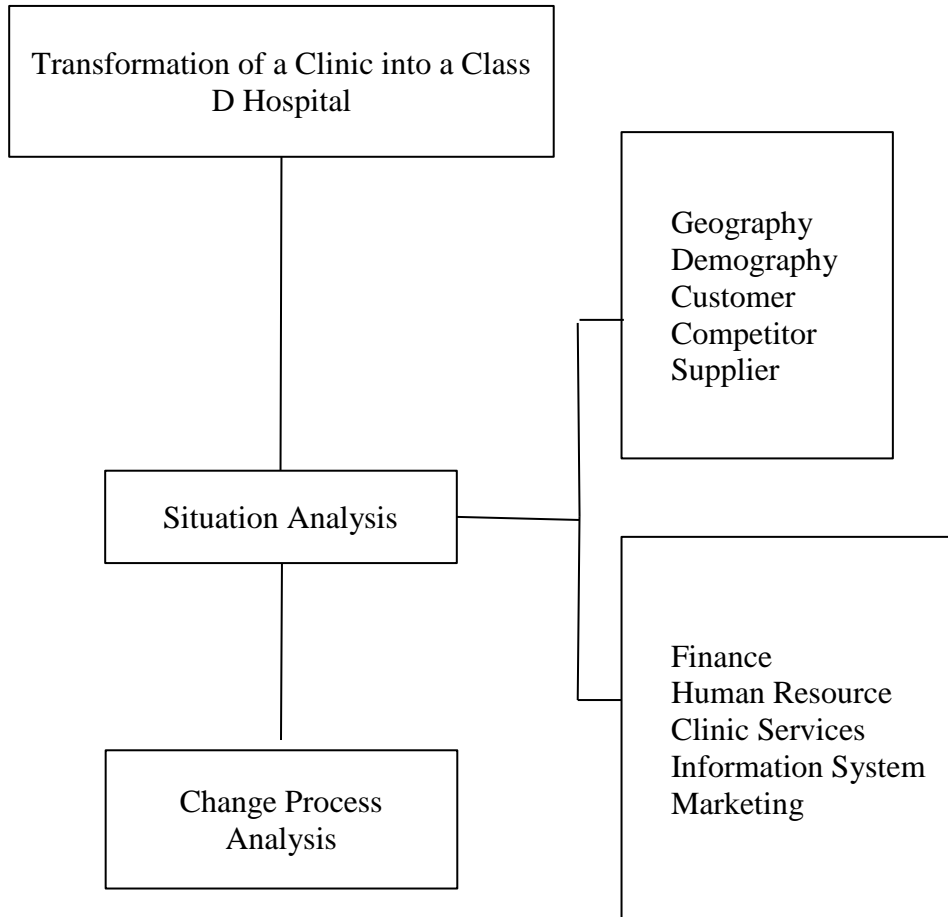


Figure 1. Conceptual Framework, Source : The author

This study uses a conceptual framework compiled by the researcher referring to previous research relevant to the formulation of the problem and research objectives. Situation analysis in the form of clinical external and internal factors is used to review the current clinical condition and compared with the minimum standards owned by Class D Hospitals based on Minister of Health Regulation No. 3 of 2020. Analysis of changes is carried out based on 5 (five) main points of development submitted by the Director through interviews, analysis of the fulfillment of obligations according to the regulations of the minister of health, and the concept of change refers to the research of Husedi (2000), which includes an analysis of challenges and obstacles.

3. RESEARCH METHODS

In this study, the authors used a descriptive research design with case study methods and qualitative analysis to analyze the problems that became

the research topic. The authors collected data through literature study, documentary analysis, and interviews. Literature study helps review various literature originating from journals, regulations related to hospitals and clinics, books, and articles to enrich information about the conceptual framework used for research. The data was strengthened by reviewing documents derived from the clinic's annual report and supporting documents that researchers obtained from internal clinics.

Interviews were conducted by the director, deputy director, and several managers to deepen the information not available in the document and find out more about the clinic's transformation plan. This method is critical to gaining understanding, knowledge, and personal experience stories through conversation (Mears, 2009; Mills, Eurepos, & Wiebe, 2010). The interview format used is semi-structured, where questions are prepared before the interview and then developed into further questions relevant to the interviewees' responses (Bryman, 2012).

The data collected refer to the points according to the conceptual framework that the author has prepared. The author will compare the current clinical conditions with the conditions that should be owned by class D hospitals based on applicable regulations to find out what obligations the clinic must fulfill in carrying out the transformation process. The analysis of the change process refers to important development points conveyed by the director, followed by an analysis of the fulfillment of obligations resulting from the first analysis and identifying the stages of change referring to Husnedi's (2000) research, starting by identifying the formation of values in hospitals that will be socialized and become employee behavior guidelines, formulation of vision, mission and strategy, structural changes, HR development, and finally the challenges and obstacles in the transformation process.

4. ORGANIZATION PROFILE

YH's Main Inpatient Clinic is one of the clinics located in Madiun Regency. Founded and led by H. Pamuji, S.Kep., Ns., M.H and Hj. Yeni Eka Purnamawati, S.Kep., Ns. This Clinic has been operating since 2008 with an operating permit for the Medical Center and Maternity Home. Then in the second extension from 2014 to 2019, it changed to the status of "Main Inpatient Clinic," followed by a third extension from 2019 to 2024. The vision was "Providing professional service" with the mission of "Providing services quickly, accurately, carefully, efficiently, and with quality by prioritizing service acceleration and patient healing" and has the motto "Your healing and satisfaction is our smile."

On March 1, 2018, the Clinic collaborated with the Health Insurance Administration Agency (BPJS Kesehatan) to provide Advanced Level

Referral Health Services for BPJS Health Insurance Program Participants. YH Clinic aims to assist government programs, especially programs in public health, economy, and the workforce, to meet the needs for health and community employment.

Health services are focused on preventive, curative, and rehabilitative services with primary medical services and costs that are affordable by the community. The Clinic provides 24-hour emergency services and specialist polyclinics, including specialists in internal medicine, ENT, surgery, and lung. In addition, there are also laboratory services for Medical Check-Up (MCU) for the general public and agencies, and other supporting facilities, such as pharmacy, nutrition, and ambulance units. In addition, the Clinic is also active in carrying out community social activities, such as zakat maal, alms, free circumcision, free medical treatment, compensation for orphans, and public education about health in the Madiun Regency area to date.

5. RESULT AND DISCUSSION

5.1. Situation Analysis

5.1.1. External Environmental Analysis

5.1.1.1. Geography

Madiun Regency is located almost at the western end of East Java Province, and it has 15 sub-districts consisting of 198 villages and eight sub-districts. YH Clinic is situated in Geger District, one of the sub-districts in Madiun Regency, which has the highest number of towns among other sub-districts, which is 19 villages and is located between the connecting road of 2 regencies, namely Ponorogo Regency and Magetan Regency. Access to the clinic is easy to reach either by two wheels or four wheels and is close to residential areas.

5.1.1.2. Demographics

Table 5.1 Total Population and Population Density Level in Geger District, Madiun Regency in 2019-2021

	2019	2020	2021
Jumlah Penduduk	65.734	66.081	66.946
Kepadatan Penduduk	1.794	1.805	1.829

Source : madiunkab.bps.go.id

Based on data from the Central Statistics Agency for Madiun Regency, in 2020-2021, Geger District is an area with the highest population density in the Madiun Regency area. It is ranked third with the highest

population growth rate after Kebonsari and Wungu Districts, which amounted to 1.03% in 2015. 2020-2021. The population growth rate of Geger District also shows an increase of 0.98% in 2020-2021, and of course, this increase will be followed by the rise in public demand for adequate health services.

5.1.1.3. Customer

Table 5.2 Number of Visits to YH Clinic Patients in 2019-2021

Tahun	Pasien Umum			Pasien BPJS		Total
	Rawat Inap	Rawat Jalan	Operasi	Rawat Inap	Rawat Jalan	
2019	311	3991	102	100	365	4869
2020	237	4743	115	122	242	5459
2021	243	5355	108	89	158	5953

Source: YH Clinic Annual Report 2019, 2020, and 2021

The number of general and BPJS patients has increased from 2019 to 2021. Although the number of inpatients from the general public and BPJS has decreased, the overall number of patient visits increases every year. This increase shows that the level of public trust in the health services provided by the YH Clinic is relatively high. The deputy clinical director also said: "...based on existing data, the increase in the number of patients is not only from Kabupaten Madiun but also from outside the city."

5.1.1.4. Competitor

The threat of YH Clinic's competitors does not only come from the number of existing health facilities around the clinic or the emergence of new entrants but also comes from the increase in the number of facilities or services provided by each existing health facility. The clinical director confirmed this:

"...actually, both government health service facilities and independent practices in the district and city of Madiun today, are all our competitors. So we are trying our best to develop our facilities and services so that they can compete in the future."

5.1.1.5. Supplier

In supporting its operational activities, YH Clinic requires logistics to support services, such as medicines, medical devices, and medical and non-medical materials. Currently, the clinic has 28 drug suppliers and four non-drug suppliers as supporting services. Non-drug suppliers, including suppliers of laboratory and radiology needs. Clinics choose reliable suppliers

to support their service needs. So consumer confidence will increase the quality of the drugs and the services to be provided. Based on the interview, so far, the supplier relationship with the clinic is going well, especially regarding delivery time, supply quality, and price.

5.1.2. Internal Environmental Analysis

5.1.2.1. Finance

The author has limited access to detailed financial amounts and clinical financial reports. The deputy director of the clinic explained that the clinic's current income is still not stable enough. So this is quite a particular concern for the clinic. In addition to coming from foundation subsidies, clinic revenues are a source of budget for hospital development in the future. The current financial recording process is still manual and straightforward, only recording income using Microsoft Excel and matched with the clinical management information system application, Khanza.

5.1.2.2. Human Resources

Table 6.4 Number of Human Resources for YH Clinic in 2020, 2021, and 2022

No	Kategori	Tahun		
		2020	2021	2022
1.	Dokter Umum	3	5	5
2.	Dokter Gigi	1	1	1
3.	Dokter Spesialis	7	6	6
4.	S1 Kedokteran	1	1	1
5.	S1 Apoteker	1	1	1
6.	S1 Farmasi	2	1	1
7.	D3 Farmasi	1	1	1
8.	SMK Farmasi	2	2	2
9.	S1 Keperawatan	3	3	2
10.	S1 Teknik	1	1	1
11.	D3 Keperawatan	20	24	20
12.	D1 Keperawatan	2	3	3
13.	D4 Fisioterapi	1	1	1
14.	D4 Analis	1	1	1
15.	D3 Analis	1	1	1
16.	SMK Analis	1	1	1
17.	D3 Sanitasi	1	1	1
18.	S1 Gizi	1	1	1
19.	Tenaga Lainnya	10	10	10

Jumlah	59	65	60
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Source: YH Clinic Annual Report

The number of staff at YH Clinic changes every year. Changes that have occurred over the last three years, 2020, 2021, and 2022, have been in specialist doctors, pharmacists, and nursing staff. Based on the interview with the deputy director of the clinic, the change in human resources, especially the reduction in the number of health workers in 2022, was due to changes in the fast rules.

The human resources selection process begins with registration, screening prospective staff based on the required qualifications, an inquest call, and signing the contract. Currently, the clinic is implementing a probationary period and training for new employees.

"... previously it was three months of training then went straight to work. Now, training +- 2 weeks later, there is a three month probationary period. The system is getting better."

The clinic applies this probation period to assess the performance of new employees before being appointed as permanent employees, whether it is as expected or not.

5.1.2.3. Clinic Service

Currently, YH Clinic has a complete range of primary and supporting service facilities. 24-hour emergency services, outpatient specialist poly, dental clinic, inpatient service, pharmacy, and laboratory. The clinic is also equipped with BPJS services to support the existence of advanced health facility services. The inpatient room is available for VIPs and classes 1,2 and 3 so that patients have many choices to determine the room according to their financial capabilities.

5.1.2.4. Information Systems

In today's digital era, information systems are an essential thing. The utilization of information systems at the clinic can help the effectiveness and efficiency of operational activities. One of the obstacles to health services in a health facility is data processing, which includes administrative and functional data efficiently and effectively. To overcome these obstacles, the existence of information technology is one of the supporting factors that can improve the quality of health care services. YH Clinic also experiences this obstacle at this time, where the existing information system has not been fully integrated. The Management Information System used at the YH clinic is Khanza, in this system includes bed lists, treatment services, medical records and so on. However, the system does not yet cover financial reporting. Researchers see that YH Clinic is always trying to develop this information system. However, its implementation has not been able to run optimally and has not been well integrated.

5.1.2.5. Marketing

YH clinic's marketing system is still done simply by word of mouth. The YH Clinic, which operates for 24 hours, is deeply embedded in the people of Madiun Regency because it has been operating for 14 years, so good management is needed so that this image becomes better and can always be accepted by the community. The clinic must continuously improve the quality of service, where the employees involved must also have a sense of responsibility in satisfying consumers, either directly or indirectly. However, researchers feel the need for improvement in marketing, for example, promotion through radio and making website media for promotional activities, so that the reach becomes wider.

5.2. Change Process Analysis

YH clinic's preparation for development into a hospital began with the licensing process carried out in stages. There are Online Single Submission (OSS) permits, establishment permits, and approval permits to obtain analytical studies submitted to the Investment and One-Stop Service (DPMPTSP) Office, as well as the health and environmental services that apply for a business permit.

"...We have uploaded the requirements for constructing the building, now we have received the UKL-UPL permit in Jakarta and the liquid waste disposal permit (IPLC)."

Currently, the clinic is waiting for the final permit process to proceed to the groundbreaking process and then start the construction of the hospital. In addition, to prepare to become a hospital, the director and deputy director have prepared strategies and targets to implement after the construction is completed.

Clinical development focuses on the material, man, method, marketing, and money. Regarding material points, the clinical director said:

"...the need for medical and non-medical facilities, ranging from nursing, support, governance, administration, equipment, finance, IT, waste, and cleanliness."

The clinic is trying to add several facilities to the existing facilities, including the MCH and KB Poly, Gynecology, Neurology, urology, orthopedics, and children's poly. In addition, there will also be additional inpatient rooms, laboratory equipment, operating rooms, isolation rooms, and an increase in the number of beds in the ER.

Based on the Minister of Health Regulation No. 3 of 2020, the number of beds is the main differentiator in classifying hospital classes, services, human resources, buildings, infrastructure, and equipment. The number and qualifications of human resources are adjusted to the results of the analysis of hospital services' workload, needs, and capabilities. The Minister of Health stipulates that class D hospitals have at least 50 beds, so in this

transformation, YH clinics need to increase the number of beds that were only 10 before.

"...from our human resources we want to add specialist doctors, recruitment has been prepared, capacity, legality, including other supports, just add about 20% of what the clinic currently has..."

Referring to the interview results, apart from HR, the clinic will try to apply methods according to customer needs, whether functional, team or structural methods. Director will combine Clinic marketing through social media or directly to target consumers. Then, from a financial point of view, the director explained:

"... this aspect of money is our goal. Without this aspect, the development will not work, including human resource development, which is currently our focus."

According to Husnedi (2000), the concept of change begins with forming organizational values that will be socialized and will become behavioral guidelines for all individuals in the organization. The clinic strives to develop professional values, discipline in all respects, competence, concern, cooperation, and responsibility by holding regular evaluation activities for all staff.

Furthermore, the formulation of the vision, mission and strategy will be adjusted to the conditions of the hospital later.

Structural changes in the third stage include changes in organizational structure and systems. The hospital's organizational structure will be adjusted to the condition of increasing the number of human resources. Then, system changes include incentive systems, decision-making systems, and inter and inter-unit communication systems. For the distribution of incentives, considerations are made based on workload. The decision-making system developed by the YH clinic is based on the considerations of the director and certain related parties. In addition, to carry out maximum supervision, the inter-and inter-unit communication system developed will be adjusted to the organizational structure. Every month an evaluation meeting is held for each division and manager for target reports, achievements, and finances of all divisions with the director. All levels of management will be involved in this meeting.

6. CONCLUSION AND DISCUSSION

The current condition of YH's clinic in terms of the external environment, demographics, geography, customers, competitors, and suppliers has supported the plan to develop the clinic into a hospital. In terms of the internal environment, the clinic needs to do a lot of development so that the transformation process can run well.

According to Minister of Health Regulation No. 3 of 2020, the number of beds is the main thing, then services, human resources, buildings,

infrastructure, and equipment. The number and qualifications of human resources are adjusted to the results of the analysis of hospital services' workload, needs, and capabilities. Clinics need to expand the number of beds to 50 and increase the number of services, including KIA Poly, Family Planning Poly, Gynecology Poly, Neurology Poly, urology, orthopedics, and children rooms, operating rooms, isolation rooms and equipping laboratory equipment.

Several obligations need to be fulfilled by the YH clinic so that this development process can continue to be competitive and sustainable. Based on document analysis and interviews, aligning goals and mindsets and mindsets between superiors and staff and developing human resources are challenges that need special attention for clinics in this transformation process.

It is necessary to segregate duties for several HR who still have dual duties, especially those related to accounting and finance. Clinical financial management procedures still need a lot of development, mainly related to developing information systems that can be useful for hospital business processes to run more effectively and efficiently. YH Clinic can seek to develop systems, such as ERP, which includes complete financial reporting and financial management.

This research wants to contribute to further research and health facilities that want to carry out the process of transformation and development as a reference for the concept of changes that need to be made by health facilities so that the transformation process runs optimally.

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