A PRIVATE HOSPITAL’S SWOT ANALYSIS AS AN ACCREDITATION PREPARATION STRATEGY

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ABSTRACT

Hospitals need to have accreditation status to prove that they provide qualified health services. There needs to prepare strategies for hospital accreditation. SWOT is one way to formulate strategy. This research is a qualitative-quantitative research that describes SWOT in a type C private hospital in preparation for accreditation. The method used in this research is conduct in-depth structured interviews with stake-holder parties in preparation for accreditation and analyze it in to SWOT Matrix. In this study, it was found that the strengths of the hospital are communication, infrastructure, and training. The weaknesses are increased workload, lack of understanding of accreditation, and limited financial resources. The opportunities are changes in accreditation standards that involve hospital information systems, good relations between hospitals, facilities from accreditation committee, and community support. The threats are the opportunistic behavior of employees, high accreditation costs, changes in elements of accreditation assessment, and the obligation to participate in accreditation. The hospital strategies are by distributing tasks and helping each other to all members of the accreditation team, strengthening the teamwork of the accreditation team, speeding up repairs during simulation surveys, training on accreditation for members of the accreditation team, conducting simulated surveys and intensive communication with surveyors, and providing supporting infrastructure.

I. INTRODUCTION

Qualified health services are entitled to all people and the government is compulsory to set a quality standard for hospital (1). The hospital's obligation to provide safe, quality, anti-discriminatory, and effective health services by prioritizing the interests of patients by hospital service standards are regulated by law. To improve the quality of service, hospitals are required to carry out periodic accreditation at least once every four years. Operational permits are given to hospitals that have met standards and must be accredited Accreditation is carried out by an independent institution according to the rules of the Minister of Health of the Republic of Indonesia (2). From hospital point of view, accreditation survey also perceived as reliable activity (3).

The national accreditation standard for hospitals in Indonesia is named the National Hospital Accreditation Standard Edition 1 and abbreviated as SNARS Edition 1, taking effect from January 2018 (4). SNARS Edition 1, is a new accreditation standard that is national in nature and is enforced nationally throughout Indonesia. There are several differences from the SNARS Edition 1 compared to the previous Accreditation Standards for Hospitals in Indonesia. In 2019, this standard was upgraded to SNARS 1.1.

Strategic planning is a collection of strategic decisions and actions by calculating the influence of the external and internal environment to produce functional cross-system formulations and implementations and align policies and actions at all levels of management (5).

Strategy in the organization is a plan regarding how the organization will carry out its activities, how the organization can survive successfully, and how the organization will mobilize and satisfy interested parties for organizational goals. Strategies are formulated and implemented by an organization to achieve predetermined goals while maintaining and expanding the organization's activities in new fields in response to changes or environmental conditions. Strategic management is necessary because every organization is complex and
different. Every part needs to work together to achieve organizational goals. Strategic management helps do this (6).

To determine the strategy, the steps taken previously were to analyze internal and external factors. Internal factors consist of strengths and weaknesses. External factors consist of opportunities and threats. After this step is carried out, the next step is to formulate a strategy (7).

Strategic factors, abbreviated as SWOT, consist of Strengths, Weaknesses, Opportunities, and Threats, which are divided into 2, namely internal and external. These factors, if identified by the organization, can assist in achieving or maintaining accreditation status.

The combination of analysis of internal and external factors of an organization is called a SWOT analysis. After completing the SWOT analysis, a suitable strategy can be determined for the organization. In principle, the strategy to be chosen is a strategy that maximizes organizational strengths and external opportunities, protects the organization from external threats, or fixes critical organizational deficiencies (6).

This study will describe the factors in preparing for hospital accreditation so that internal and external factors are known. As a theoretical benefit, this study will provide an overview for hospitals in preparing for accreditation survey. Meanwhile, as a practical benefit, this research can help hospitals in formulating strategies in preparation for accreditation.

II. RESEARCH MATERIALS AND METHODS

In this study, researchers used a qualitative descriptive research method. Qualitative research in this study was carried out by in-depth interviews so that clear patterns would be found. The main objective of qualitative research is to understand social phenomena or phenomena by focusing more on a complete picture of the phenomena that occur(8). This research is a study of hospital preparation in facing accreditation. The hospital subject in this study is a type C hospital that has been fully accredited based on the KARS accreditation standard (National Accreditation Committee of Indonesia). The research subjects were taken based on hospital stakeholders who played an important role in the implementation of accreditation. The head of the accreditation team, the director of the hospital, and the nursing coordinator were the subjects in this study.

This study will attempt to describe the real situation of the hospital and analyze internal and external factors of the hospital so that they can be used as a basis for strategic planning in facing hospital accreditation. The time of data collection in this study took time from July to August 2019. The location of this study was the Yasmin Hospital, Banyuwangi, Indonesia. This is type C Hospital, owned by private company, and got very excellent accreditation certification from KARS (Indonesian Committee of Hospital Accreditation). This hospital profile can represented majority of hospital in Indonesia since its profile is as same as most common hospital in the country. From this hospital, we can learn how to prepare accreditation so the result can be maximal.

Accreditation is defined as the recognition given by the Hospital Accreditation Commission after the hospital meets the accreditation standards from independent institution(9). Strength has a definition of resources from within the hospital organization that can be used to deal with threats or opportunities. This means the advantages of the hospital compared to competitors. Weaknesses are internal conditions that put the hospital in trouble and limitations when facing opportunities or threats. Meanwhile, opportunities are external situations of the organization that has the potential to benefit the organization. The definition of threat in this research is an external situation that has the potential to harm the organization in preparing for accreditation. A strategy is defined as a comprehensive planning formulation of how the organization can achieve its mission and objectives, namely preparing hospital accreditation. The technique used in data collection in this research is in-depth interviews with informants using interview guidance instruments and voice recording media. Data obtained from research then processed and grouped according to the definition.

Selection of informants using purposive sampling, where the informant is appointed by the researcher as the person who can answer research questions according to hospital conditions. The selected informants were representatives from each field of hospital accreditation surveyors, namely: one person from medical field/doctor, one person from management, and one person from the nursing department.

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This study examined 3 people as the main informants, first, the head of the hospital accreditation team who is a specialist. Second informant were the main director of the hospital, a doctor who plays a role in management, third, a nurse who is in charge of hospital quality control who also has a role in hospital accreditation as the person in charge of nursing.

The selection of informants was taken with the consideration that the informant was the person who best understood the process of implementing accreditation at the Yasmin Hospital, Banyuwangi. This was confirmed by cross-checks conducted by the researcher with other hospital staff.

This research was conducted at the Yasmin Hospital Banyuwangi. Yasmin Hospital is a public hospital located in Banyuwangi Regency. This hospital is a type C hospital that received a complete accreditation standard certificate (Paripurna) from KARS in 2017.

Qualitative research requires criticism and evaluation in assessing the accuracy of the data generated. There are four criteria for obtaining the accuracy of the data generated in qualitative research. The four things are credibility, transferability, dependability, and confirmability.

a. Credibility
In this study, the involvement of researchers in the participants' lives was carried out for at least 6 months before data collection. This is possible because the researcher is a member of the organization where the participants work. The involvement of researchers can improve the accuracy of the data because researchers can also confirm and clarify data obtained from participants by returning to participants and looking for other data needed.

b. Transferability
This research took the location in Yasmin Banyuwangi Hospital, which is a private type C hospital. At the time of the research, RS Yasmin Banyuwangi accredited KARS 2012 standards. Sampling was done carefully with a purposive sampling method. Participants who were taken using the purposive sampling method aimed at essential units in the implementation of accreditation preparation, so that representatives from the medical unit were obtained, that are doctors, paramedics or nurses, and managerial staffs. The representative of the unit was chosen by the researcher with the hope that the participants would have a good conceptual understanding of the subject or topic of this study, the preparation for hospital accreditation.

c. Dependability
Dependability shows the consistency of the results of the research when it is carried out by different researchers at different times but with the same methodology and interview script. This is of course quite difficult to do in qualitative research. However, in this study, the dependability test was still carried out on the participants.

The first dependability assessment is by conducting a stability test, in which the researcher asks identical questions to one participant at different times and produces the same answer. The second test is the consistency test, by confirming the answers to the interview script questions. All participants can answer questions under the context of the study using the interview script provided by the researcher. The final test, equivalence, was assessed by using alternative questions that the researcher asked the participants, and the same data results were obtained.

d. Confirmability
In this study, confirmability was carried out by consulting with expert researchers. Also, the researcher tries to describe the entire research process properly so that the research reader can understand the research process and can make an assessment of the findings in this study.

III. RESULT AND DISCUSSION

Strength
1. Communication and Teamwork
All research informants agreed that the human resource factor was an important factor in preparing for accreditation. By using existing human resources, the hospital can prepare for accreditation well. At Yasmin Hospital Banyuwangi, good engagement between members of the accreditation team and all elements of the hospital is an important support. This caused by effective communication that lead to good teamwork (10). Although, some research don’t see any correlations between cohesiveness of hospital staff and productivity (11).

Informants also agreed that many of the accreditation teams involved were in young age, and this was also a supporting factor. With the team's age span not far apart, employee bonding can be tighter. The tasks assigned to the team can be executed faster. The technology knowledge gap which is often an obstacle for human resources with old age can be overcome by the presence of young-aged human resources.

This age equality factor can also be a positive value in the organization. Increased employee turnover rate and low loyalty are factors that are influenced by the high age diversity of an organization (12).

Accreditation covering all elements of the hospital, including doctors, nurses, pharmacies, and other non-medical. Of course, in this case, good cooperation between professions is needed. The accreditation team that was formed was a combination of all professions in the hospital. When this is done, the hospital will find it easier to convey information and coordinate, especially those related to accreditation (13). Motivation, commitment, and leadership also, can be a significant factor to increase the staff performance (14).

In the observations of researchers, each working group made by the head of accreditation consists of at least one medical /paramedic person and at least one person from management. This can facilitate socialization and brainstorm in understanding the elements of accreditation assessment.

2. Trainings of team

Before forming a complete accreditation team, the hospital sent several people to take part in some training on accreditation. This helps the organization prepare for accreditation. Among them, the training that was followed was service excellence, which is in quality control division of the hospital and is available in the PMKP/quality control and patient safety working group.

This training or education has proven to be necessary to prepare the accreditation. The importance of training can improve the quality of documentation for hospitals which is also followed by improving the quality of service to patients (15). In the result, this will be an added value for the hospital in implementing accreditation standards.

3. Adequacy of infrastructure

When the hospital will decide to take an accreditation survey, the hospital owners and directors allocate funds and human resources to prepare for accreditation specifically. If this is not done, it will be difficult to prepare for accreditation.

For hospital accreditation survey costs, KARS has set fees starting from IDR 19,900,000.00 to IDR 98,000,000.00 depending on the type and facilities of the hospital. This does not include the cost of internal hospital preparation in meeting accreditation standards. In the research conducted, the cost of accreditation was nearly $ 400,000, or approximately 1% of the hospital's annual operating costs (16).

Weaknesses

1. Increased workload

The number of human resources that did not increase when they had to prepare for accreditation increased the workload of related human resources. This increase can risk a decrease in employee performance. If the workload continues to increase, in addition to decreasing employee performance, the quality of the hospital in patient care can also decrease (17).

2. Lack of understanding

A basic understanding of accreditation must be possessed by all hospital staff. If there is no understanding of this accreditation, the hospital accreditation team needs to disseminate it. This will make it difficult for the hospital to prepare for accreditation (18).
3. **Lack of training**

Training is one of the assets for accreditation preparation. The informants themselves realized that reading the guidance from KARS was not enough to be able to understand the elements of accreditation assessment. In addition, there are trainings that must be followed by hospital human resources in order to get the best score in the accreditation assessment (19).

4. **Limited hospital financial resources in preparation for accreditation**

The allocation of funds for accreditation preparation can become an obstacle. There is no definite amount in the prerequisite for hospital budgets, but if the funds prepared by the hospital are insufficient, the accreditation results will not be maximal. However, costs of accreditation preparations are high but the costs of adverse event from unqualified health service are more expensive (20).

**Opportunities**

1. **The latest accreditation standards that involve a lot of hospital information system roles**

The informants agreed that in implementing accreditation, the team was helped by the role of hospital information system. Documentation is required not only in physical form but also electronically. In preparing for future accreditation, the role of hospital information system division is important for ease of preparation (21).

2. **Good relations between hospitals**

As a district that is not too big and there are only 2 other hospitals around the Yasmin Hospital in Banyuwangi, the informants felt that communication with the other nearest hospitals was easy. Good communication and relationships in sharing information about accreditation, as well as working together to prepare for accreditation. When 2017 Yasmin Banyuwangi Hospital was accredited, RSI Fatimah Banyuwangi was also preparing for accreditation. Blambangan Public Hospital, which has finished carrying out accreditation, helps surrounding hospitals by actively communicating with the hospital's accreditation team.

3. **Facilities from the accreditation organizing committee**

KARS has facilities to conduct training, accreditation guidance, and simulation surveys before conducting accreditation surveys. This can be an opportunity in carrying out accreditation preparations. Yasmin Banyuwangi Hospital does not conduct accreditation guidance but does a simulation survey 3 months before the accreditation survey. The input from the surveyors in conducting this simulation survey can be used as a reference that the accreditation team can understand. The response of the accreditation team when the simulation survey was conducted was carried out quickly so that it did not leave homework before the accreditation survey was carried out (4).

4. **Community Support**

As one of the largest type c hospitals in Banyuwangi, Yasmin Banyuwangi Hospital has collaborations with many insurers and agencies. In the MoU on cooperation, it was stated that the hospital requires accreditation certification by the competent authority. One example of an insurance agency that asks for accreditation prerequisites is BPJS Kesehatan. This increases team spirit in implementing accreditation preparations. (22)

**Threats**

1. **Opportunistic behavior of employees in accreditation**

In preparation for accreditation, good teamwork is required. If there are team members who do not carry out their duties productively, and even tend to destroy the atmosphere of accreditation preparation, then the employee concerned is not worthy of being included in the preparation team (23).

2. **High accreditation fees**

Accreditation surveys require a lot of money. However, the accreditation survey alone is not the cost the hospital has to pay. There are accreditation guidance fees, simulation survey costs, training, and other costs that the hospital must prepare. If the hospital's finances are not ready, then this cost will be heavy (16).

3. **Change from the accreditation assessment element**
With accreditation standards that are frequently updated, there will be changes in the assessment elements, and there is a possibility that the old assessment elements will not be applied. Even when carrying out accreditation preparations, the hospital made many changes to implement the standard elements of accreditation assessment. One part that needs to be changed a lot is the medical record section (24,25).

4. **Obligation to follow accreditation by institutions**

Hospital cooperation with institutions before accreditation can be a pressure if these institutions ask for hospital accreditation prerequisites (26). Likewise with accreditation that did not pass. This is a factor that the hospital needs to pay attention to in preparing for accreditation.

**Strategies**

1. **Distribution of tasks for the whole team**

With the existence of a hospital accreditation team that is young and full of enthusiasm, a good division of tasks is needed by the team so that accreditation can run well. The accreditation team is divided into working groups (working groups). This is adjusted to the division of the elements of the accreditation assessment.

2. **Strengthening team cohesiveness**

With a limited number of teams and a large number of accredited assignments, the accreditation chair evaluates the team's work. If there is a team that is having difficulties in preparation, the other team that has finished its main task is asked to help the team that is struggling. This can speed up the completion of tasks in preparation for accreditation (10).

3. **Speed of improvement during the simulation survey**

When the simulation survey was conducted, the surveyors from KARS immediately gave feedback on the readiness of the hospital. Standard assessment elements are not appropriate, evaluation and notes are carried out. Here the role of the hospital accreditation team is to immediately implement the evaluation of the surveyors.

4. **The documentation is assisted by the HIS team**

With the Hospital Information System division, accreditation documentation that was previously difficult to do can be more easily accessed. The weakness, the data from HIS is still raw data. The accreditation team needs to perform data processing before the required data can be obtained (27).

5. **Training for the accreditation team**

With the large number of trainings regarding accreditation, the hospital sent several representatives to carry out the training. An example of the training that the Yasmin Banyuwangi Hospital has participated in is training on effective communication. The informants felt that the number of trainings attended was insufficient, this was due to the limited hospital budget in preparation for accreditation (15).

6. **Procurement of infrastructure**

There are many facilities and infrastructure when equipped according to accreditation standards. With an adjusted budget, the hospital procures the necessary infrastructures.

**SWOT Analysis**

Data from in-depth interview were collected and analyzed in to IFAS (Internal factor analysis summary) and EFAS (external factor analysis summary) matrix (6). Weighs and Ratings were added into the table. The scoring (weighs and ratings) in this research is gotten by observation result of researcher.
### Table 1. IFAS Weighing

<table>
<thead>
<tr>
<th>Opportunities &amp; Threats</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
<th>F</th>
<th>G</th>
<th>H</th>
<th>Total</th>
<th>Weigh</th>
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</thead>
<tbody>
<tr>
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<td>2</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
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<tr>
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<td>1</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>10</td>
<td>0.089</td>
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<td>3</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>16</td>
<td>0.143</td>
</tr>
<tr>
<td>Community support</td>
<td>D</td>
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<td>2</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>12</td>
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<tr>
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<td>2</td>
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<td>3</td>
<td>2</td>
<td>2</td>
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<td>1</td>
<td>2</td>
<td>2</td>
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<td>Standard Changes</td>
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<td>2</td>
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<td>1</td>
<td>2</td>
<td>2</td>
<td>15</td>
<td>0.134</td>
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<td>Obligations to participate</td>
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<td>3</td>
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<td>2</td>
<td>2</td>
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<td>18</td>
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<td>13</td>
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### Table 2. EFAS Weighing

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</thead>
<tbody>
<tr>
<td>Strengths</td>
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<td></td>
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<td>Infrastructures</td>
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<td>0.241</td>
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<tr>
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<td>Lack Trainings</td>
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<td>0.482</td>
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<td>1.688</td>
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<table>
<thead>
<tr>
<th></th>
<th>Strength</th>
<th>Weakness</th>
<th>S-T</th>
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<tbody>
<tr>
<td><strong>Total IFAS</strong></td>
<td>1.063</td>
<td>1.688</td>
<td>-0.625</td>
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### Table 3. IFAS Rating and Scoring

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<th>Weigh x Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIMS Roles</td>
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<td>Inter-Hospital Relation</td>
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<td>Community support</td>
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<tr>
<td><strong>Total</strong></td>
<td>0.429</td>
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<td>1.339</td>
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<table>
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<th>Threats</th>
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<tr>
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<td>Costs</td>
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<td>Standard Changes</td>
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</table>
Obligations to participate: 0.143, 2, 0.286
Total: 0.571, 2, 1.277

Opportunities: 0.571, 9

Table 4. EFAS Rating and Scoring

<table>
<thead>
<tr>
<th>Opportunities</th>
<th>Threat</th>
<th>O-T</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.571</td>
<td>1.277</td>
<td>0.062</td>
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TOTAL EFAS: 1.339, 1.277, 0.062

Table 5. Yasmin Hospital Organization Position in Accreditation Preparation

Based on the position, in preparing accreditation, Yasmin hospital placed in upper left quadrant. It means the best strategy to do was stabilization strategies. In this quadrant, organization should overcome the weaknesses to optimize the opportunities (6).

So, there are 2 types of strategies that this hospital can do. First, aggressive maintenance strategies. Hospital should overcome all possibilities that can be weaknesses to organization. Start from internal culture, budgetting, workload, lack of understandings, lack of trainings, no key performance indexes, or etc (28). In this strategies, organization should do major changes.

Second strategy is selective maintenance strategies. Organization should focus on their weakness maintenance only to optimize the opportunities (29). From the data we got, Yasmin hospital weakness are: workload increase, lack of understanding, lack of trainings, limited number of hospital resources, and limited budget funds for the provision of resources.

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IV. CONCLUSION

Internal factors for Yasmin Hospital Banyuwangi were divided into 2:

The strength of the hospital was the factor of communication and the cohesiveness of human resources, the implementation of training for the accreditation team, and the adequacy of facilities and infrastructure. The weaknesses in preparing for accreditation that the Yasmin Hospital Banyuwangi has are an increase in workload, lack of understanding, lack of training, limited number of hospital human resources, and limited budget funds for the provision of resources.

External factors of Yasmin Hospital Banyuwangi were divided into 2:

Opportunities, which include: accreditation standards that use hospital information managements a lot, good relations between hospitals, facilities from accreditation agencies in facing surveys, and support from www.turkphysiotherrehabil.org
communities and institutions outside the hospital. The threats were: opportunistic behavior of employee, high accreditation costs, changes in elements of accreditation assessments, and the obligation of institutions to follow accreditation.

Strategies that applied in this hospital were: Distribution of tasks and mutual assistance for all members of the accreditation team. Strengthen the cohesiveness of the accreditation team. Speed of improvement during the simulation survey. The other steps are training for accreditation for accreditation team. Next strategy was implementation of simulation surveys and intensive communication with the surveyors. And the last one is infrastructure procurement.

Suggestions

Based on hospital position in SWOT quadrant, there were 2 types of strategies that Yasmin Hospital could did. They are aggressive maintenance strategy and selective maintenance strategies. For aggressive maintenance strategy, hospital should improve all of their weaknesses possibilities, include: internal culture, budgeting, workload, understandings, trainings, key performance indicators, etc. For selective maintenance strategies, yasmin hospital can focused on maintaining communication with KARS/accreditation committee, so, they can work load, understandings, trainings, etc. For selective maintenance strategies, they are aggressive maintenance strategy and selective maintenance strategies. For aggressive maintenance strategy, hospital should prepare the budget and regeneration staff earlier than before.

REFERENCES

8. Hunter DDJ, McCullom DJ. Defining Exploratory-Descriptive Qualitative (EDQ) research and considering its application to healthcare. 8.

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