

Managerial Strategy of Buton District Hospital to Maintain Type C Hospital Status

Anita Septiana Maria

Kathrine^{1*}

Department of Magister Management,
Universitas Adhirajasa Reswara Sanjaya,
Bandung, Indonesia

E-mail: anita.septiana.maria@gmail.com

Erliany Syaodih²

Department of Magister Management,
Universitas Adhirajasa Reswara Sanjaya,
Bandung, Indonesia

E-mail: erliany.syaodih15@gmail.com

Mira Veranita³

Department of Magister Management,
Universitas Adhirajasa Reswara Sanjaya,
Bandung, Indonesia

E-mail: mira.veranita@ars.ac.id

ABSTRACT

Hospitals must develop relevant business strategies in order to compete. In determining a strategy, internal and external analysis is needed so that the strategy used is appropriate. Based on a survey by the Provincial Health Service, several criteria for type C hospitals were not met, so the Buton Regency Regional Hospital was threatened with being downgraded. This research aims to determine the appropriate management strategy for District Hospitals in HR management, hospital facilities, and financial management to maintain type C class status. This qualitative study uses an in-depth interview method with purposive sampling. The sample in this study was the regional secretary as the representative of the regional government as the owner of the hospital, the hospital director, the head of finance, the head of personnel, the head of hospital facilities, general practitioners, and specialist doctors of all divisions in the hospital, the head nurse of each treatment room. The research using SWOT analysis results shows that Buton District Hospital is in a position of growth and development and, based on the internal-external matrix, is in a stable position. This condition is good because Buton District Hospital is in a favorable position to take advantage of existing opportunities and strengths. The implications of the research results are for the management of Buton District Hospital to be used as suggestions or references for consideration in making hospital strategies to maintain the status of a type C hospital. Providing input to the head of the Regional Government regarding the great need for financial assistance to meet the requirements of the Minister of Health Regulation regarding the requirements for a type C hospital that Buton District Hospital has not met.

Keywords: SWOT Analysis; Planning; Managerial Strategy; Hospital



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INTRODUCTION

Hospitals must develop relevant and appropriate business strategies to remain competitive among other hospitals or healthcare facilities. The public demands hospitals capable of delivering high-quality services. Hospitals are expected to fulfill all medical service needs and related patient requirements comprehensively. The increasing number of healthcare services has intensified competition within the hospital business landscape. Each hospital must consider various aspects, including the types of services offered, the facilities provided, infrastructure, service delivery speed, and pricing of hospital services. Hammad and Ramie (2022) argue that hospitals must align with societal needs through technological advancements and socioeconomic changes, requiring them to adapt to providing effective and high-quality healthcare systems. Failure to adapt may result in hospitals losing their competitive edge in service provision. Effective strategic management, supported by appropriate planning and control models, can enable hospitals to survive and thrive in a competitive global market (Melani *et al.*, 2024; Susilawati *et al.*, 2024).

Government hospitals are public service institutions that play a critical role in enhancing the health status of the community. With the increasing demands placed on government hospitals to improve their services, numerous challenges arise, including limited available budgets, lengthy bureaucratic processes, financial management regulations that impede service efficiency, and difficulties in measuring performance. Buton Regency Public Hospital (RSUD District Buton), a Type C hospital, is the sole healthcare facility in Buton Regency. RSUD District Buton provides healthcare services to meet the community's needs for various medical services. It delivers healthcare to all segments of society through treatment, disease prevention, curative care, and health rehabilitation services.

Based on the survey results from the Southeast Sulawesi Provincial Health Office, several deficiencies were identified at Buton Regency Public Hospital (RSUD District Buton) that must be addressed to maintain its Type C hospital classification. Failure to meet these requirements poses a risk of downgrading its status. The threat of such a downgrade has prompted researchers to investigate the managerial strategies of RSUD District Buton aimed at preserving its Type C status, with this study focusing on financial management, facility management, and human resource (HR) management. The research encompasses managerial strategies related to the recruitment of human resources, particularly specialist doctors, the management of facility and infrastructure procurement by the Standard Inpatient Class Criteria of the National Health Insurance (KRIS JKN) and the requirements of the Ministry of Health Regulation (Permenkes) for Type C hospitals, as well as an examination of financial management efforts to sustain the Type C classification for RSUD District Buton.

The research problem is formulated: "How can appropriate managerial strategies enable RSUD District Buton to maintain its Type C hospital classification?"

Research Questions:

1. What are the HR management strategies of RSUD District Buton in recruiting human resources, particularly general practitioners and specialist doctors, to meet the criteria for a Type C hospital?
2. What are the facility management strategies, and what equipment and infrastructure are required by RSUD District Buton to fulfill the Type C hospital requirements as stipulated by the Ministry of Health Regulation (Permenkes)?

3. What are the financial management strategies and capabilities of RSUD District Buton to meet the necessary conditions for maintaining its Type C hospital classification?

LITERATURE REVIEW

Strategic management plays a pivotal role in assisting organizations in determining their direction and objectives for growth through various processes, including assessment, evaluation, and development. These processes aid in identifying goals, establishing appropriate and achievable objectives, and supporting organizations in gaining a competitive advantage (Allison, 2019; Efawati & Chaniago, 2018).

The formulation of organizational strategies is heavily influenced by leadership. A leader's responsibilities extend beyond merely defining the vision and mission; they also encompass providing guidance and motivation to the team to achieve these goals. Strategic leadership involves a leader's capacity to recognize and capitalize on emerging opportunities while addressing obstacles that may hinder attaining organizational objectives (Nahak & Ellitan, 2023).

Analyzing internal and external factors is essential within a comprehensive thinking framework to determine the selected strategy. Various internal and external factors can influence the direction and activities of a hospital, potentially even altering its organizational structure. A combined analysis of external and internal factors will be integrated to produce a SWOT analysis (Strengths, Weaknesses, Opportunities, and Threats). The SWOT analysis results will be utilized to identify developmental issues, which will serve as the basis for formulating strategies (Suhardi, 2023; Efawati et al., 2024).

RESEARCH METHOD

This research was conducted at Buton Regency Public Hospital (RSUD District Buton), located at Jalan Balai Kota, Laburunci, Pasarwajo Sub-District, Buton Regency, Southeast Sulawesi Province. The research spanned approximately seven months, with interviews conducted in February 2025.

Research Design

This study employed interviews with informants selected using a purposive sampling technique. The research subjects or individuals serving as informants were those deemed critical to the data and fact-collection process. The data analysis technique utilized the Miles and Huberman model, which describes cross-checking or confirming validity by integrating findings from observations, documentation, and interviews, ultimately drawing a definitive conclusion from the investigated subject as the research outcome (Miles et al., 2014; Chaniago et al., 2023).

Table 1. Key informants interviewed

No	Informant Position	Persons
1	Local Government (Regional Secretary)	1
2	Hospital Leadership (Director of RSUD District Buton)	1
3	Head of Finance Division	1
4	Head of Personnel and Human Resources Division	2

5	Head of Facilities and Infrastructure Division	2
6	General Practitioner	1
7	Specialist Doctor	6
8	Ward Head	5
Total Number of Informants		19

RESEARCH RESULTS

Based on the findings from the Provincial Health Office survey, there is a risk of classification downgrade for RSUD District Buton, as it has not fulfilled several stipulations set forth in the Ministry of Health Regulation (Permenkes) regarding Type C hospital criteria. The underlying reasons for this potential downgrade include inadequate human resources and the incomplete provision of facilities and infrastructure necessary to satisfy Type C hospital standards fully.

Under Decree No. 340/MENKES/PER/III/2010 on Type C General Hospitals, RSUD District Buton fails to meet the eligibility criteria for Type C hospital status due to the following specific deficiencies:

1. Basic Specialist HR for Type C Requirements Unmet: The availability of basic specialist doctors does not fulfill the criteria, with only one internal medicine specialist and one surgical specialist present (whereas a minimum of two doctors per basic specialist medical service is required).
2. Supporting Specialists Unmet: There is an absence of a medical rehabilitation specialist, and only one permanent supporting specialist doctor is available (whereas a minimum of two permanent supporting specialist doctors is stipulated).
3. Insufficient Number of General Practitioners: The number of general practitioners assigned to the Emergency Department (ER) is limited to six individuals (out of a required total of nine), with the potential discontinuity of these six due to their honorary staff status.
4. Intensive Care Facilities Non-Compliant: The intensive care facilities fail to meet standards, primarily due to limited ventilator availability in the Intensive Care Unit (ICU) and Neonatal Intensive Care Unit (NICU), as well as the absence of a Pediatric Intensive Care Unit (PICU).
5. Isolation Facilities Non-Compliant: The isolation facilities do not meet the required standards.
6. Absence of Isolation ICU: No designated isolation ICU is in place.

The minimum bed requirement for a Type C hospital is at least 100 beds. In the initial survey conducted by the Provincial Health Office, the number of beds at RSUD District Buton was found to be fewer than 100, thus failing to meet the criteria for a Type C hospital. However, subsequent efforts were made to increase the number of beds in the wards, fulfilling the minimum requirement for a Type C hospital.

RSUD District Buton currently has 104 beds, satisfying the minimum bed requirement. The number of intensive care beds must constitute at least 10% of the total hospital beds. Additionally, rooms designated for isolation must have a capacity of at least 10% of the total beds, meaning RSUD District Buton should have a minimum of 10 isolation beds. However, only eight beds are available in the isolation care room, which does not yet feature negative pressure. The requirement for intensive care beds specifies 6% for the Intensive Care Unit (ICU) and 4% for other intensive care units, such as the

Neonatal Intensive Care Unit (NICU) and Pediatric Intensive Care Unit (PICU). Currently, RSUD District Buton lacks a PICU room. The existing ICU room does not comply with standards due to insufficient ventilators relative to the available ICU beds.

The introduction of the National Health Insurance Standard Inpatient Class Criteria (KRIS JKN) has necessitated restructuring several treatment rooms to align with these inpatient standards. Currently, only one ventilator is operational, while the remaining units are non-functional and require repair. One proposed solution for addressing the ventilator issue is procurement from the central government and budget allocation for constructing a PICU.

DISCUSSION

Interviews were conducted with all informants, both individually and in groups, and a Focused Group Discussion (FGD) was held involving the Hospital Leadership, Head of the Personnel Division, Head of the Facilities Division, Head of the Finance Division, and the Regional Secretary, who represented the regional leadership as the hospital's owner. The questions posed adhered to the prepared interview instrument guidelines.

The following response to the interview question, "What would be the impact of a downgrade?"

"If the hospital's classification drops from Class C to Class D, the consequence would be that operational costs remain equally high while incoming revenue decreases. BPJS claims would decline by the hospital's class level, making it increasingly challenging to cover substantial operational costs due to the reduced hospital income."

Internal and External Environmental Conditions

Internal environmental analysis is a process of evaluation conducted on the internal aspects of an organization, encompassing the company's resources, organizational structure, corporate culture, employee capabilities and skills, and all existing internal elements of the organization. External environmental analysis, on the other hand, is a process of evaluation performed on the external scope of the organization, which includes competition, the environment, threats, changes in market trends, government political policies, technological advancements, competitor activities, economic factors, location or place, security, social factors, demographics, social and cultural aspects, and globalization (Fikri et al., 2024).

Table 2. Internal Factor Evaluation (IFAS) Matrix

No	STRENGTHS	Weight	Rating	Weighted Score
1	Owned by local government (APBD funding)	0.063	4	0.255
2	Fully accredited	0.021	3	0.063
3	Bureau of Public Service Area (BLUD) status	0.063	4	0.255
4	Responsive management leadership	0.042	3	0.127
5	Affordable service rates	0.042	3	0.127
6	Spacious infrastructure	0.021	3	0.063
7	HR >90% in productive age	0.042	4	0.170
8	Competent specialist HR	0.063	4	0.255
9	Accessible location for other regencies	0.042	3	0.127
10	Hospital service promotion media	0.042	3	0.127
TOTAL				1.57

WEAKNESS				
1	Insufficient specialist HR	0.063	2	0.127
2	Insufficient general practitioner HR	0.042	2	0.085
3	Inadequate facilities and infrastructure so that services are not optimal	0.063	2.5	0.159
4	General practitioners' residences far from the hospital	0.063	2	0.127
5	Limited HR development	0.042	2.5	0.106
6	Bottom-up approach communication is not yet optimal	0.042	2.5	0.106
7	Management is not functioning optimally	0.063	2.5	0.159
8	Lack of competent HR in specific fields	0.042	2	0.085
9	Lack of cutting-edge technology	0.063	2.5	0.159
10	Insufficient BLUD funds for operational needs	0.063	2.5	0.159
TOTAL		1		1.27
TOTAL SCORE				2.85

Table 3. External Factor Evaluation (EFAS) Matrix

No	OPPORTUNITIES	Weight	Rating	Weighted Score
1	Local government support	0.0833	3	0.25
2	The only hospital in Buton Regency	0.083	4	0.333
3	BPJS collaboration	0.083	4	0.333
4	Central government aid via the KJSU program	0.083	3	0.25
5	Affordable access to several work areas in the Buton district and outside the Buton district (e.g., Wakatobi)	0.055	3	0.166
6	Collaboration with teaching hospitals	0.055	3	0.166
7	Third-party (outsourcing) collaboration	0.055	3	0.166
TOTAL				1.66
THREATS				
1	Low regional revenue (PAD); employee spending exceeds the maximum limit (>30%)	0.083	1	0.083
2	There are 4 competing hospitals in Bau-bau City, which is only 40km from Buton Regency	0.083	1	0.083
3	BPJS criteria limit ER patients and restrict the number of outpatient referrals from Primary Healthcare Facilities (FKTP).	0.083	1	0.083
4	Low community purchasing power	0.055	1	0.055
5	Government regulations prohibiting the appointment of honorary staff	0.055	2	0.11
6	Constraints with other institutions, such as the Regional Civil Service Agency (BKD), regarding quotas during the Civil Servant (ASN) selection process.	0.055	2	0.11
7	Sub-districts within the working area of Buton Regency that prefer referrals to the city due to their distance from RSUD District Buton	0.0833 3333	2	0.166
TOTAL		1		0.69
TOTAL SCORE				2.36

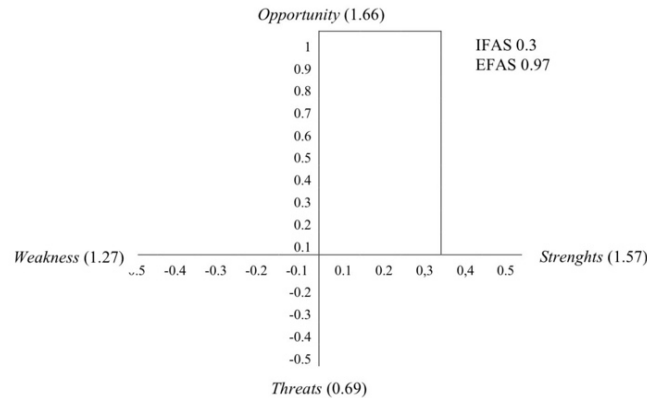


Figure 1. SWOT Quadrant Diagram

Based on the completion of the Internal Factor Evaluation (IFE) and External Factor Evaluation (EFE) matrices, the scores for each factor are identified as follows: strengths at 1.57, weaknesses at 1.27, opportunities at 1.66, and threats at 0.69. The Internal Factor Analysis Summary (IFAS) score is 2.85, while the External Factor Analysis Summary (EFAS) score is 2.36. The subsequent step involves creating a graphical diagram to determine the quadrant position of RSUD District Buton. The analysis reveals that RSUD District Buton is positioned in Quadrant I, which signifies a growth position. This quadrant indicates an advantageous position for the organization, with opportunities and strengths that can be leveraged (Rangkuti, 2009). The strategy applicable in this position is to support growth-oriented policies (growth-oriented strategy) aggressively. Consequently, it can be concluded that RSUD District Buton is in a favorable condition, as it can capitalize on its opportunities and strengths.

Internal External (IE) Matrix

Total IFE value

Strong 3.0-4.0 Average 2.0-2.99 Low 1.0-1.99

Total EFE value

High 3.0-4.0

Moderate 2.0-2.99

Low 1.0-1.99

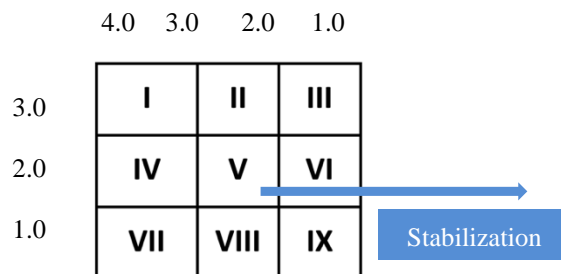


Figure 2. Internal External (IE) Matrix

Description:

Quadrants I, II, IV: Growth

Quadrants III, V, VI: Stabilization

Quadrants VII, VIII, IX: Divestment

Based on the results of the Internal Factor Evaluation (IFE) and External Factor Evaluation (EFE) matrices, the next step is to compile these findings into the Internal-External (IE) Matrix. The IFE matrix yields a score of 2.85, while the EFE matrix yields a score of 2.36. These IFE and EFE matrix scores indicate that the values fall within Quadrant V, representing stability, specifically the “hold and maintain” position, signifying the need to preserve and sustain the current state.

Table 4. SWOT Matrix of RSUD District Buton

INTERNAL	Strength (S)	Weakness (W)
	1. Hospital owned by the Buton Regency Regional Government 2. Fully accredited 3. BLUD status 4. Responsive management leadership 5. Affordable pricing 6. Spacious building 7. HR >90% of productive age 8. Possessing competent specialist human resources 9. Location accessible to other regencies 10. Availability of hospital service promotion media	1. Insufficient number of specialist human resources 2. Insufficient number of general practitioner human resources 3. Inadequate hospital facilities 4. General practitioner human resources' residences located far from the hospital 5. Lack of human resource development 6. Suboptimal team communication and bottom-up processes 7. Management not functioning optimally 8. Lack of human resources competent in their fields 9. Not supported by cutting-edge technology 10. BLUD funds are insufficient to meet hospital operational needs
EXTERNAL		
Opportunities (O)	SO Strategies	WO Strategies
1. Regional Government support 2. The only hospital in Buton Regency 3. Collaboration with BPJS 4. Central Government assistance 5. Affordable access for several areas within Buton Regency and beyond (e.g., Wakatobi) 6. Collaboration with teaching hospitals 7. Collaboration with third parties	1. O1,O2,O3,S1,S2,S3 Increase the types of hospital services and enhance hospital facilities and infrastructure to position it as a hospital serving the working area of Buton Regency and external regions (e.g., Wakatobi). 2. O1,S6 Add available treatment rooms, such as PICU, ICU Isolation, and Drug-Resistant TB Isolation. 3. O5,S9	1. O1, O6, O7, W1, W2 Increase the number of specialist doctors currently lacking and procure specialist doctors not yet available. 2. O1,W10 Negotiate with the Regional Government regarding managing regional retribution funds and opportunities to increase Regional Government financial assistance for the hospital. 3. O4,W9 Procure CT scans, ventilators, and necessary facilities and infrastructure for PICU construction. 4. O1,W4 Utilize official residences for general practitioners. 5. O4,W1

	Optimize services and reduce hospital referral rates. 4. O6,O7,S1,S3 Procure specialist human resources through collaboration with teaching hospitals.	Implement a Specialist Doctor Utilization Program for specialist human resources that do not yet hold civil servant status. 6. O1, W5, W6, W8 Conduct periodic human resource development initiatives.
Threats (T)	ST Strategies	WT Strategies
1. Relatively small Regional Own-Source Revenue (PAD) 2. Presence of four competing hospitals 3. BPJS criteria and limitations on FKTP referrals by BPJS 4. Low community purchasing power 5. Government regulations prohibiting the appointment of honorary staff 6. Constraints with other institutions, such as BKD, resulting in no specialist quotas during ASN selection 7. Several sub-districts in Buton Regency's working area are closer to Bau-Bau City	1. T1,S1,S3,S4 Management develops a structured and clear work plan to optimize budget absorption in the fiscal year, with programs designed to be clear and detailed.	1. T5, W1 Collaborate with third parties to procure specialist doctor human resources. 2. T6, W7, W8 Unlike previous selection processes, the Personnel Management human resources team ensures that human resource proposals for the next ASN selection encounter no obstacles. 3. T7, W10 Collaborate with the Transportation Agency to provide public transportation for hospital routes. 4. T2, W3 Enhance the availability of facilities, infrastructure, and supporting examinations to minimize the need to refer patients to the city.

HR Management of RSUD District Buton

Table 5. SWOT Matrix for General and Specialist Doctors of RSUD District Buton

		Strength	Weakness
	INTERNAL	1. Hospital owned by the Regional Government 2. BLUD status 3. Responsive management leadership	1. Insufficient number of specialist human resources 2. Insufficient number of general practitioner human resources 3. Limited BLUD funds
EXTERNAL			
Opportunity		SO Strategies	SO Strategies
1. Regional Government support 2. Collaboration with Teaching Hospitals		1. Collaborate with education centers to address the shortage of specialist human resources, such as internal medicine specialists and surgeons, and procure human resources that are not yet available, such as medical rehabilitation specialists.	1. Increase the number of specialist doctors currently lacking and procure specialist doctors not yet available. Addition of general practitioner human resources through the P3K/PNS program. 2. Utilize outsourcing programs for human resource procurement.

Threat	ST Strategies	WT Strategies
1. Small Regional Own-Source Revenue (PAD) 2. Government regulations prohibiting the appointment of honorary staff 3. Constraints with other institutions, such as BKD, resulting in no quotas during ASN selection	1. Management develops a structured and clear work plan to optimize the absorption of the Regional Budget (APBD).	1. Proactively ensure that BKD opens quotas for general practitioners and specialists during the next ASN selection period. 2. Collaborate with the Specialist Doctor Utilization Program (PDGS) for specialist HR not yet holding civil servant status.

Human Resource Management Strategies of RS RBUD District Buton:

1. Collaborate with education centers to address the shortage of specialist human resources, such as internal medicine specialists and surgeons, and procure human resources that are not yet available, such as medical rehabilitation specialists.
2. Increase the number of specialist doctors currently lacking and procure specialist doctors not yet available.
3. Augment general practitioner human resources through the P3K/PNS program.
4. Utilize outsourcing programs for human resource procurement.
5. Management develops a structured and clear work plan to optimize the absorption of the Regional Budget (APBD).
6. Proactively ensure that the Regional Civil Service Agency (BKD) opens quotas for general practitioners and specialists during the next Civil Servant (ASN) selection period.
7. Collaborate with the Specialist Doctor Utilization Program (PDGS) for specialist human resources not yet holding civil servant status.

One strategic step that can be undertaken is implementing a collaboration program with third parties. This aligns with findings from a literature review, which indicate that measures taken by hospitals include collaborating with the government, conducting training for medical personnel, and creating opportunities for partnerships with foreign investors to enhance the hospital's development in the future (Rosita et al., 2023). The SWOT analysis results of RS Lirboyo reveal a favorable situation characterized by strong opportunities and strengths, enabling the organization to fully develop its potential by capitalizing on available opportunities. This can be optimized by minimizing existing weaknesses and challenges, one of which involves focusing on human resource management, specifically increasing human resources to prevent overlapping roles among healthcare workers (Nugraheni & Kirana, 2021). Enhancing the capacity of hospital employees can be achieved through periodic briefings, such as daily briefings, and providing training and development opportunities for staff (Monica et al., 2023).

Facility Management of RSUD District Buton

The requirements for a Type C hospital include stipulations regarding hospital facilities and infrastructure as regulated by the Ministry of Health Regulation (Permenkes). Adequate facilities are essential to ensure the effective delivery of healthcare services within the hospital (Agustina & Munawarah, 2023). Various considerations serve as the basis for developing primary healthcare facilities into hospitals, including challenges in accessing advanced healthcare services, government and legislative efforts to enhance population welfare, the demographic and economic conditions of the population, as well

as human resource and financial capacities (Susilawati et al., 2024). Primary Healthcare Facilities must consider both external and internal factors when planning their development into hospitals (Sira & Junadi, 2023).

Incomplete facilities and infrastructure represent a significant concern raised by patients. Patients opt for treatment at the hospital; however, due to these facilities and infrastructure limitations, the hospital frequently refers patients to other facilities or hospitals with superior resources. This leads to patients' dissatisfaction with the services provided, making them reluctant to seek treatment at the hospital again.

Table 6. SWOT Matrix for Facilities of RSUD District Buton

	Strength	Weakness
	INTERNAL	EXTERNAL
	1. Buton Regency Government Hospital. 2. BLUD status.	1. Inadequate hospital facilities. 2. Management not functioning optimally. 3. Not supported by cutting-edge technology. 4. BLUD funds are insufficient to meet hospital operational needs.
Opportunity	SO Strategies	WO Strategies
1. Regional Government support 2. The only hospital in Buton Regency 3. Central Government assistance	1. Request assistance from the Central Government for procuring equipment such as ventilators and constructing a PICU.	1. Develop a sound hospital work plan to optimize fund absorption, particularly concerning proposals for procuring hospital facilities and infrastructure, including physical hospital improvements aligned with KRIS JKN standards.
Threat	ST Strategies	WT Strategies
1. Relatively small Regional Own-Source Revenue (PAD) 2. Presence of four competing hospitals	1. Negotiate with the Regional Government regarding increasing the Special Allocation Fund (DAK) for Health this year to meet Type C hospital requirements and comply with KRIS JKN standards.	1. Increase the facilities and infrastructure needed based on a priority scale addressing the most urgent requirements.

Facility Management Strategies for Facilities and Infrastructure of RSUD District Buton:

1. Request assistance from the Central Government for procuring equipment such as ventilators and constructing a Pediatric Intensive Care Unit (PICU).
2. Develop a sound hospital work plan to optimize fund absorption, particularly concerning proposals for procuring hospital facilities and infrastructure, including physical hospital improvements aligned with the National Health Insurance Standard Inpatient Class Criteria (KRIS JKN).
3. Negotiate with the Regional Government regarding increasing the Special Allocation Fund (DAK) for Health this year to meet Type C hospital requirements and comply with KRIS JKN standards.
4. Increase the facilities and infrastructure needed.

Financial Management of RSUD District Buton

The BLUD (Regional Public Service Agency) status of RSUD District Buton represents a key strength in maintaining its Type C hospital classification. However, the relatively small Regional Own-Source Revenue (PAD) of Buton, the limited Regional Budget (APBD) allocated to RSUD District Buton, and the insufficiency of BLUD funds to meet operational needs pose significant obstacles that hinder RSUD District Buton from fulfilling the Type C hospital criteria as stipulated by the Ministry of Health Regulation (Permenkes) and KRIS JKN. The challenges that arise include the limited budget available for hospital operations, which impedes service quality enhancement, excessively protracted bureaucratic processes in fund disbursement, financial management regulations that obstruct the smooth delivery of services, and difficulties in measuring performance. Meanwhile, the hospital requires substantial support in terms of human resources, technology, and capital (Meidyawati, 2011, as cited in Priastuti *et al.*, 2017).

Table 7. SWOT Matrix for Finance of RSUD District Buton

	INTERNAL	Strength	Weakness
		1. Buton Regency Government Hospital. 2. BLUD status.	1. BLUD funds are insufficient to meet hospital operational needs. 2. Limited facilities, resulting in some diagnoses failing to meet BPJS claim requirements.
EXTERNAL			
Opportunity		SO Strategies	WO Strategies
1. Regional Government support 2. Central Government assistance		1. Request assistance from the Central Government for procuring equipment such as ventilators and constructing a PICU. 2. Implement a budget-refocusing strategy if directed by the government.	Develop a sound hospital work plan to optimize fund absorption, particularly concerning proposals for procuring hospital facilities and infrastructure, including physical hospital improvements aligned with KRIS JKN standards.
Threat		ST Strategies	WT Strategies
1. Relatively small Regional Own-Source Revenue (PAD) 2. Presence of four competing hospitals 3. Stringent BPJS claim requirements		Negotiate with the Regional Government regarding increasing the Special Allocation Fund (DAK) for Health this year to meet Type C hospital requirements and comply with KRIS JKN standards.	1. Negotiate with the Regional Government regarding managing regional retribution funds and opportunities to increase the Regional Budget (APBD) for RSUD District Buton. 2. Increase the facilities required to meet BPJS claim criteria.

Financial Management Strategies of RSUD District Buton:

1. Request assistance from the Central Government for procuring equipment such as ventilators and constructing a Pediatric Intensive Care Unit (PICU).
2. Implement a budget-refocusing strategy if directed by the government.
3. Develop a sound hospital work plan to optimize fund absorption, particularly concerning proposals for procuring hospital facilities and infrastructure, including physical hospital improvements aligned with the National Health Insurance Standard Inpatient Class Criteria (KRIS JKN).

4. Negotiate with the Regional Government regarding increasing the Special Allocation Fund (DAK) for Health this year to meet Type C hospital requirements and comply with KRIS JKN standards.
5. Negotiate with the Regional Government regarding managing regional retribution funds and opportunities to increase the Regional Budget (APBD) for RSUD District Buton.
6. Increase the facilities required to meet BPJS claim criteria.

CONCLUSIONS

RSUD District Buton is positioned in a growth phase based on the SWOT diagram and in a stable position according to the Internal-External (IE) Matrix. Strategies correspond to each component, encompassing Human Resource Management, Facility Management, and Financial Management.

1. Human Resource Management Strategies of RSUD District Buton:
Increase the number of specialist doctors and general practitioner human resources by leveraging third-party collaboration and ensuring quotas are available during the next Civil Servant (ASN) selection process.
2. Facility Management Strategies of RSUD District Buton:
Capitalize on opportunities for central government assistance to procure a PICU room and ventilators, enhance facilities and infrastructure, and improve rooms according to KRIS JKN requirements based on a priority scale.
3. Financial Management Strategies of RSUD District Buton:
Negotiate with the Regional Government regarding potential opportunities to increase the APBD through the Special Allocation Fund (DAK) or regional retribution funds and undertake budget refocusing according to a priority scale.

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