ABSTRACT

Introduction: Prior to National Health Insurance (Jamkes) era, the performance of “X” Maternal Hospital (RSIA) with a leading field in Obstetrics and Gynecology experiences improvements. But tragically, since the end of 2016, the performance of this maternal hospital has gradually decreased. This condition is worsened with prolonged managerial conflict that is left uncontrolled. The purpose of this research is to reveal the managerial conflicts that happened in this maternal hospital. Methods: This research uses phenomenology study approach through an interview with three informants. Besides interview, direct observation to maternal hospital and its surrounding is also performed. Result and Discussion: Managerial conflicts during the end of 2016 that resulted in human resource problems. This problem caused turnovers of its employees. While some loyal employees handled this conflict in a peaceful manner, others were demotivated and tended to react destructively by demeaning the RSIA’s brand image. A change in the board of RSIA has not been able to mend the performance of RSIA. Conclusion: Managerial conflict has an impact on human resource, which is a turnover, demotivation, and destructive behavior. Managerial conflict must be well-resolved to prevent the defamation of brand image as well as the decrease of operational and financial performance of RSIA.

Keywords: Managerial conflicts, demotivation, destructive, turnover.

Introduction

The increasingly tight competition among health care services is not only limited to hospitals, but also alongside with community health centers (puskesmas) and health clinics in cities and developing areas. Many of which are aware of this situation, which forces them to realize their customers’ satisfaction through various strategies in order to preserve their customers’ loyalty.

“X” Maternal Hospital is located in District “Y”—one of the four most populated districts. X Maternal Hospital has a leading service in obstetrics gynecology and pediatrics. Prior to National Health Insurance (Jamkes) era, the performance of “X” Maternal Hospital (RSIA) experiences an improving trend. X Maternal Hospital has 42 hospital beds with an average bed occupancy rate (BOR) of 60-70%, length of stay (LOS) of 3 days, and turn over interval (TOI) of 1 day. The availability of OBG specialists and pediatrics specialists greatly supports the achievement of operational performance and financial aspects of this hospital. Also, 2014 JKN-BPJS universal coverage policy and the hospital’s management’s decision in taking the position to provide non-JKN-BPJS patients still make this hospital the most popular choice of referral by the nearby residents. This can be shown by the hospital’s service efficiency indicator being in good condition and the hospital doesn’t seem to show any financial problems.

Tragically, since the end of 2016 until today, this hospital’s performance has been decreasing. This condition is worsened with the existence of a prolonged managerial conflict that is left uncontrolled. This conflict causes the plummeting of this hospital to a point where the owner subsidizes highly for operational expenditures.

According to Robbins in Anuari (2017), conflict is a process in which one party experiences a negative consequence from another party. Conflict is defined as the contradiction expressed by two parties or more over a disputed matter. A conflict happens through a process resulted by a cause of conflict. On a health-care-providing organization such as hospitals, the source of occurring conflicts is generally from personal differences; unclear descriptions of duties and responsibilities; incompatibility between medical personnel and organizational problems such high stress level, limited human resources, and task uncertainties.
2006). As stated by Schnurman in Soieb (2013), every organization suffers from conflicts which affects coworkers’ relationship, morale, and productivity. The purpose of this research is to reveal the managerial conflict in X Maternal Hospital.

**Methods**

This research uses qualitative design with a phenomenology approach. This type of approach feels suitable due to its purpose is to discover the opinions and perspectives of informants regarding the existing conflict phenomenon. The word “phenomenology” derives from the Greek word “phainómenon” which means showing one’s existence. Which means, phenomenology can be defined as knowledge as seen consciously. Knowledge stated here means what is perceived by an individual; what is felt and known from their consciousness or experiences. Therefore, phenomenology can also be said as our experience on certain things (Raco, 2010). Phenomenology is closely related to the science of an existence in one’s experience. Phenomenology aims to reveal the meaning of one’s existence. The meaning or significance of someone’s experience with something will rely deeply by how they interact with this “something” (Hasbiansyah, 2008).

Data collecting method is done by an in-depth interview to three informants, which are the Maternal Hospital’s owner, director, and executive staff. The interviewing process is performed by asking questions according to the interview guide. Questions asked will be in the form of open-ended questions in this in-depth interview. Throughout the interview, the researcher will closely listen and take notes of every little details delivered by the informants as well as pay attention to every expressions and gestures made. Apart from in-depth interview, this research also executes an observatory survey to the researched site. Also, the researcher will observe the informants’ working environments, the implicit impressions made by the working staff, and pick up undelivered messages by the hospital staff.

This research started since August 2017 with a preceding information of this research’s means and purposes to every informant. The informans are the Maternal Hospital’s owner, director, and executive staff.

**Results and Discussions**

X Maternal Hospital is founded by a senior—by age and clinical experiences—obstetrics and gynecology (OBG) specialist doctor. X Maternal Hospital has a leading service in maternity and pediatrics fields. Aside from the presence of OBG specialist doctors, X Maternal Hospital is also supported by pediatrics specialist doctors who excels in their field. Ever since the foundation of X Maternal Hospital, patient visits have shown an increasing trend every year. Based on an interview with informant number 1, this maternal hospital is a family-owned hospital that has a leading field in obstetrics and gynecology. The founder of this hospital—who is a doctor—also practices in it. This doctor is a relative to the current owner of the hospital.

“This hospital is founded by that man as a family business and is given the name “X Maternal Hospital” which is taken from my surname. The deed of this establishment and other permits are bestowed upon me”

Most of the hospital’s income are from the practices of obstetrics and gynecology specialists; be it outpatients, inpatients, or operating works.

“The man is known by most as a good and friendly person, especially to patients. Many of which are referring to the hospital specifically for him”.

“The pediatrics specialist doctor is a close acquaintance of mine. He is a senior doctor here and has helped much to this hospital”.

But ever since the appearance of managerial conflict at the end of 2016, operational and financial performance of this hospital has been decreasing and worsened. This motivates the researcher to reveal hospital management’s and personnel’s feelings and experiences during the conflict. Managerial conflict is what caused the emergence of the pros and contras.

The contrasts are people who are opposed to the current owner and supported the original hospital’s founder. This research discovered the emotional attachment between the founder and some hospital staff.

“Personal problems between me and the man drive me to a dilemmatic position in managing the maternal hospital. Because that man is known to be a decent person and close to many people including some
of my staff, which some of them chose to quit and support him.”.

“They are mocking me, accusing me of being mad and spreading unfavorable news about me in Facebook, saying that X Maternal Hospital are closing down and suffering bankruptcy. I am currently looking for specialist doctors who wants to practice here but unfortunately there are none because I have been thought to smear my profession as OBG specialist.”.

Sutanto (2000) states that leaders affect the spirit and passion of work, security, quality of work life and the level of achievement of an organization. Ralph M. Stogdill in Sutanto (2000) research defines managerial leadership as the process of directing and influencing the activities and duties of members of the organization. Management conflicts will lead to changes in the quality of the workplace and the level of productivity of the organization. Some that have emotional attachment to the founder are still working in the hospital up until today.

“There is some staff who keeps on working here and tends to defy me as the current owner. They dared me to fire them and to give compensation as per their demands”.

Despite that, some staff shows pro attitude to the current owner due to thinking that this is a private matter between the founder and the current owner and there’s no need for them to intervene. This is revealed by informant number 3 as one of the staff who has worked since the foundation of the X Maternal Hospital.

“I have worked here for so long. I worked for my family at home and I work like any other day”.

The form of individual attachment to the organization can encourage an individual’s concern or responsibility towards the organization. It arises because his perception is an inseparable part of his organization. Mitchel in Polii (2015) stated that job embeddeness is a factor influencing a person’s decision to survive or leave work and organization. The stronger the relationship and the compatibility between the individual and the work environment the greater the sacrifice that must be done. The association of employees with work and organization will affect the behavior of the individual.

According to (Djati, 2003), organizational commitment consists of three variables namely loyalty, willingness and pride. Employee satisfaction with material compensation and social compensation has a significant effect on employee loyalty to the organization, the willingness to work hard and the pride of employees in the organization.

A prolonged managerial conflict can result in uncomfortable situation to some staff. Those who felt the unconduciveness, chose to quit working or transferring. Out of the total 79 working staff, 42 are left at this moment. According to informant number 1, the staff working in X Maternal Hospital are a combination of the pros and the contras towards the current owner.

“There is some staff who stays loyal to me, and working like any other day. While some actually rebels against me. They even come to the hospital only to sleep at the mess. Even worse, there is someone absent for weeks to just suddenly show up”.

Out of the 42 remaining staffs, only 18 of them shows a satisfactory performance. The rest are seemed to be demotivated and some even are being destructive. These demotivated people are the ones who only sleep at the mess, sit and chat around. According to informant number 2, these appalling behaviors still exist.

“Usually they only sit at the security posts, chatting around, smoking cigarettes, and laughing. When they are reminded, they often slack off and even daring me to fire them while asking for compensations as per their demands. But I always ignore them”.

According Sutanto (1999) that committed employees give contribution to organizations because they perform and behave one achieving organization’s goal. There is positive and significant relationship between commitment to supervisors and performance. Some staff even tends to have a destructive behavior. They spread negative information on social media, smearing the current owner, skipping duties, provoking other staff who are still working, and often daring the owner to fire them and demanding ransoms.

With all the troubles happening, the owner has been doing mediation with the employment agency (dinas ketenagakerjaan) to cut off the hospital’s operational expenditures by readjusting the staffs’ payroll. The current
staffs’ payroll is based on the minimum regional wage. The consequence of the efforts done by the owner is that some of the staff slacks and challenges the owner to fire them even more and demanding their ransoms. In spite of all these, the owner has not taken any further actions regarding the behaviors of the provoking staffs up until today. According to Robyn in Reilly (2014) there are three types of staff in every organization, which are engaged employee, not engaged employee, and actively disengaged. Engaged employees are those who work passionately and feels an attachment to the company they work for. They are full of innovations in reaching their company’s goal. Not-engaged employees are those who are passively behaving, unpassionate in their shifts. While actively disengaged employees are those who felt displeased with their jobs, talks often about their discontent in working, constantly complains, and casually intimidates to their coworkers. They disregard their customers, productivity, safety, and service quality.

The visit to X Maternal Hospital shows that much equipment and many facilities are maintained poorly. The conditions of inpatients room, operating room, kitchen, and laundry are filthy and disorganized. The inpatients room are dusty and some of its walls are moldy and starting to peel off. The operating room seems to not have been used for some time, the equipments are shrouded in dusty cloths. The neighboring kitchen and laundry room—located at the back of the hospital—are filled with trash lying, clothes and towels hanging, fading paints, and scraped-off walls.

Emergency service area, polyclinics, furniture, medical equipment, examination laboratory room, pharmacy service, and medical record room are relatively cleaner. The conditions of these rooms and the documents archived looks to be cleaner and more organized. Currently, only the daily general polyclinic service is conjoined with the emergency departments service. During the last period, the outpatients visit only ranges from 30-40 patients, while the inpatients visit only adds up to 1-3 patients per month. These visits indeed plummets substantially in comparison with the visits prior the management conflicts despite the facilities provided by the hospital is adequate for emergency department service, inpatients treatment rooms, operating rooms, observation rooms, and specialty services.

The result of interviews with several informants stated that most of the human resources remaining tends to sit around and chatting to each other: “There has been a lot of inactivity since the problem. In reality, I have a lot of acquaintances that I met often to generate the hospital visit as it were before, but to no avail.”.

“All these sitting around is caused by the uncertainty of patients admitting in the emergency department. Inpatients are becoming scarce and most of them are treated by local doctors. This is possibly due to the leadership style of the hospital’s director”.

At this moment, the owner has appointed a generic doctor as the hospital’s director to manage the operational activities here. The appointed director is relatively young and it is the first time he manages a hospital despite having a form of relation with the owner. This managerial conflict also results in solidarity denial actions by specialists’ colleagues towards the hospital. The owner struggles deeply to recruit specialist doctors which is hoped to increase the hospital’s operational activity. Even though, the support of the specialist doctors is one of the key factors that determines this hospital’s performance prior the conflict. The decrease in operational performance causes financial problems which made the owner sell her assets and financially subsidize from her other personal business.

“I ran other kinds of business such as selling, an important home industry can finance the staff and donate to charities”.

This research has studied the hospitals financial report documents from October 2016 until August 2017. It turns out that the income made by the hospital does not fully cover its monthly operational expenditures. This decrease in income is one of the indicators of the plummeting of hospital’s and staff’s performance. The declining of staffs’ performance is thought to be caused by dissatisfaction towards their working environment.

As stated by Cortes in Wuryanto (2010), there are several factors causing working dissatisfactions, which are management leadership and positive practice environment.
Working satisfaction is related to working environment, like organizational policy, vertical and horizontal structural relationship, rewards, direct superiors’ quality, and working environments conditions. A prolonged management conflict will cause human resource related problems such as turnovers, demotivation, and destructive behaviors. A prolonged management conflict can also cause staff not being satisfied in terms of their job. A new leadership style has not been able to solve this hospital’s performance crisis up until now.

According to Sutanto (2000) research management system that sets goals and work decisions made in groups will create a conducive working atmosphere. Managers make decisions after considering the suggestions and opinions of members of the organization so that conflicts between management and employees can be prevented. Leadership must be owned by every organization leader. Leadership effectiveness is determined by its ability to influence and direct its members(Sutanto, 2000).

According to Elizabeth Satriowati (2016), there is significant influence between transformational leadership, compensation and communication on job satisfaction. Other results showed that was a significant influence between transformational leadership, compensation, communication and job satisfaction on employee performance.

Conclusion
Managerial conflict can cause human resource related problems, which are turnovers, demotivation, and destructive behaviors. Management conflicts must be handled by a well-suited leadership style so that it does no further operational and financial performance decrease of the hospital.

References