

## Analisis konflik pemilik dan pengelola di Rumah Sakit Husada

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### Abstrak

Konflik pemilik dan pengelola di Rumah Sakit Husada dianalisis untuk mendapatkan jawaban terhadap pertanyaan (a) mengapa terjadi konflik, (b) bagaimana konflik meningkat, (c) apa dampak konflik dan (d) bagaimana konflik diselesaikan.

Dengan menggunakan metoda penelitian kualitatif, 17 informan di rumah sakit diwawancarai secara mendalam. Informan dibagi dalam dua kelompok. Kelompok pertama mewakili pelaku utama dalam konflik, yaitu Perkumpulan sebagai pemilik rumah sakit, Direktur sebagai pengelola dan Badan Pembina. Kelompok kedua mewakili masyarakat rumah sakit, yaitu dokter, perawat dan staf-manajemen. Hal ini untuk memenuhi prinsip triangulasi sumber. Kedua kelompok informan dibagi lagi dalam dua subkelompok, masing-masing mewakili pihak pro-Perkumpulan dan pro-Direktur. Keberpilihan informan didasarkan atas observasi peneliti, kemudian dibandingkan dengan pendapat atasannya langsung. Semua data dianalisis dengan menggunakan teknik constant comparative analysis.

Direktur melihat konflik sebagai akibat dari intervensi Perkumpulan terhadap manajemen rumah sakit serta perilaku oknum-oknum Perkumpulan yang didorong oleh motivasi untuk mencari keuntungan di rumah sakit. Perkumpulan melihat konflik disebabkan oleh ambisi Direktur untuk berkuasa terus. Konflik meningkat sejak kehadiran Badan Pembina yang dituduh telah diperalat Direktur untuk mewujudkan ambisinya, kemudian memuncak karena Direktur melalui Badan Pembina hendak membubarkan Perkumpulan dan membentuk perkumpulan baru. Serta, konflik hanya bisa diakhiri dengan pemberhentian Direktur.

Pendapat dominan informan kelompok kedua mendukung pendapat Perkumpulan, termasuk mereka yang pro-Direktur.

Mengenai dampak konflik, informan umumnya percaya bahwa konflik telah menurunkan BOR dan kualitas pelayanan kesehatan. Namun, dari sisi positif konflik telah menimbulkan kesadaran pentingnya menciptakan sistem hubungan kerja yang transparan antara Perkumpulan dan Direktur, suatu faktor yang diyakini ikut melahirkan situasi konflik oleh informan kedua kelompok.

*Analysis of Owner and Management Conflict at Husada Hospital* This research was designed to determine cause and effect on conflict of owner and management at Husada hospital. Four research questions were formulated: (a) why conflict, (b) how conflict is escalated, (c) how conflict affects hospital performance and (d) how conflict is resolved. Conflict is defined as incompatible behavior between parties whose interests differ. Specifically, the parties involved in the conflict under study were Husada Foundation (Perkumpulan Husada) and hospital Director.

A qualitative research design was set-up. Using in-depth interviews technique, seventeen hospital

informants were asked to answer the four basic questions. They were divided into two groups, representing respectively those directly involved in the conflict and hospital society consisting of medical doctors, nurses and management staff. Each group, for purpose of validating data, was again sub-divided into two units, each representing pro-owner and pro-management side. Data was analyzed using constant comparative analysis technique.

Persistent intervention by the Foundation on hospital management and self-interest oriented behavior by some Foundation members were seen by the Director as the prime causes of conflict. On the other hand the Foundation was of the opinion that conflict was inevitable due to Director's obsession to grip his power longer. The set-up of Board of Trustees (Badan Pembina/Dewan Penyantun) had contributed to conflict escalation. The Board, established in compliance with the decree of Director General of Medical Services of the Ministry of Health issued in 1996, was misused as a mere vehicle of the Director to substantiate his ambition. Manifest conflict was erupted when the Board of Trustees was heading to dissolve the Foundation and replaced it by a new similar one. Dismissing the Director was seen as the only alternative to end the conflict.

The view was overwhelmingly supported by the majority of the informants in the second group.

Decrease on BOR (bed occupancy rate) and quality of health services provided by the hospital were regarded as the prime effects resulted from the conflict. On the positive side, however, conflict had raised commitment by some members of the Foundation to design a clear job description for the hospital Director.