Recommendation of Manajerial Step in Dealing in Organizational Changes at Company and Hospital PHC Surabaya

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Abstract-The era of globalization has created a challenge for all types of industries to compete, including in health care industry. Organizational changes do lead to an increase effectivity organization with the aim toward improving the organization's ability to adapt to environmental changes as well as changes in the behavior of members of the organization. Since July 2015 organizational structure in Hospital PHC Surabaya changes, namely the establishment of company shade Hospital PHC Surabaya. Phase changes in the organization according to Kurt Lewin's theory and concepts 7'S McKinsey is used as a measure of organizational change readiness in this study. From the analysis we found that the most levels of respondents already at the stage of moving. Where the respondent level manager at the stage of moving at 56.3%, respondents and the head of the division level equal to 31.6% the moving stage and level of respondents held responsible for 34.1% the moving stage. While the four elements of the 7'S McKinsey lowest in the Hospital PHC Surabaya namely to components system, style, staff and skills. Recommendations can be suggested to the company and Hospital PHC Surabaya in the face of organizational change is System, making organizational governance contain the division of tasks between Company and Hospital PHC Surabaya (mainly unit overlapping). In the governance of information technology must integrate and optimize methods for planning, organizing, implementation, delivery and suppot, and monitoring and evaluation of information technology performance. Style, transformational leadership style with the adjustment of organizational conditions should be owned by every leadership at managerial level Hospital PHC Surabaya. Staff, Performance Appraisal recommendation must use effective terms, the method can be used for performance assessment is 180° and 360°. Skill, recommendations for improvement of training programs based on competencies and needs, training programs and soft skills training target equalization.

Keywords: organizational change, the theory of Kurt Lewin, 7'S Mckinsey

1. INTRODUCTION

The era of globalization has created challenges for all types of industries to compete, including the healthcare industry. As the income of the community increases, the need for excellent healthcare is on the rise, encouraging the rapid growth of new hospitals to meet customer needs. Health services have become a lucrative industry and attract investors to invest. The growth of these hospitals leads to increasingly tight competition and customers increasingly have selective choices, and this is a challenge that will affect organizational sustainability. This challenge confronts health service actors, especially hospitals, both government and private, in two options, namely entering the competition arena by making changes and improvements or exit the arena of competition without burdened with changes and improvements. Therefore, an alternative strategy is needed to compete properly for the hospital to compete with other competitors. Such business environment conditions require that hospitals improve the quality and quality of services to

remain successful, both at the operational, managerial and strategic levels.

The change of an organization is basically the result of changing a function of change to move from one position to a system in part or in whole. As a result of these changes induvidu or those within the organization must change to adjust the function or system that has been established (1). Basically all the changes made lead to the improvement of organizational effectiveness with the aim of improving the ability of the organization to adapt to changes in the environment as well as changes in the behavior of members of the organization (2). Robbins further states organizational changes can be made to structures that include strategy and systems, technology, physical structuring and human resources.

Since July 2015 the organizational structure of Hospital PHC Surabaya has changed, namely the establishment of a company that houses the Hospital PHC Surabaya. This change is based on Law Number 44 Year 2009 about Hospital, which states that "The

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hospital may be established by the private sector, and the private sector establishing the hospital shall be in the form of a legal entity whose business activities only operate in hospitals special effort)". The purpose is further mentioned in the Elucidation of Article 7 paragraph (4) namely: to protect the hospital business to avoid the risk due to other business activities owned by the owner of the hospital legal entity.

2. METHOD

Technical data collection is by questionnaire instrument to be filled by three levels of management level (manager, section head, and person in charge) which is considered to represent the entire human resources both in Company and Hospital PHC Surabaya to map the current condition in organizational change that happened. The questionnaire was taken from the theory of change management Kurt Lewin and McKinsey's Theory 7 which was poured in questions according to their respective components. Data collection is done by FGD (Focus Group Discussion) and interviews to managers, heads of departments, and person in charge.

To map the organizational changes of Company and Hospital PHC Surabaya throughout the work unit, the sample used is to conduct a sample determination involving all levels of management (Directors, Managers, Heads, SPI, and Responsible), implementing representatives on each existing work unit and labor representative Medical functional, which is done by taking samples randomly on each work unit. As a preliminary research process an interview was conducted with each of the Directors to explore the Board of Directors' opinions about the organizational changes they expected.

3. RESULTS AND DISCUSSION

Table 1. Data Respondent by Sex

Number	Sex	n	%
1	Male	35	46,1
2	Female	41	53,9
	Total	76	100,0

Table 2. Managerial Level on Organizational Changes

Managerial Level	% Organizational Changes		
	Unfreezing	Moving	Refreezing
Manager	18,8	56,3	25,0
Head of Departement	21,1	31,6	47,4
Person in Charge	39,0	34,1	26,8

Based on Table 2. most of the respondent levels have been at the moving stage. Where respondent level manager at move stage equal to 56,3%, respondent level head of department and equal at step move equal to 31,6% and respondent level of responsibility in step move equal to 34,1%. At unfreezing level manager level is 18,8%, unfreezing level of head department level and equal to 21,1%, unfreezing level of responsible level equal to 39,0%. And at refreezing level manager level equal to 25,0%, phase refreezing of head of department level and equal to 47,4%, refreezing level of responsible level 26,8%.

While the 4 elements of 7'S Mckinsey the lowest in Hospital PHC Surabaya that is on the system components, style, staff and skills will be the topic of discussion in this study.

Table 3. Focus Group Discussion for Systems

Factor	Strategic Issue	Results	Recommendation
System	Organizational Governance	Not enough coordination function	Establish an organizational governance that contains the division of tasks and authority between company and hospital (especially units that are overlapping)
		Unclear authority between company and hospital	
	Hospital management information system	Has not been integrated and its application is still separated	Must be a blue print for hospital management information system that accommodate all the needs of the unit
		Lack of socialization (new 1-2 times only)	Re-functioning systems analysts on information technology units

System, create an organizational governance that contains the division of tasks between Company and Hospital PHC Surabaya (especially overlapping units). The separation between ownership and control in the management of the company between Company and Hospital PHC Surabaya. Establishment of Supervisory Board which is a nonstructural unit at the Hospital to conduct internal non-structural guidance and supervision of hospitals that involves community elements. In addition, the recommendation of organizational structure by placing the head of nursing field into the committee. In information technology of governance must integrate and optimize methods for planning, organizing, implementing, delivery and support, as well as monitoring and evaluation of

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information technology performance. Information technology unit at company makes Hospital management information system grand design. Information technology unit must have at least System Analyst, Programmer, responsible for hardware and network that maximize the function of system analyst.

Table 4. Focus Group Discussion for Style

Factor	Strategic Issue	Results	Recommendation
Style	Organizational Governance	Not enough coordination function	Establish an organizational governance that contains the division of tasks and authority between company and hospital (especially units that are overlapping)
	Leadership Style	Unclear authority between company and hospital	Fungsi PT sebaiknya lebih pada pembuat kebijakan
		The absence of a definite vision and mission in the company as a direction/ reference	The existence of alignment of leadership styles that support change (transformational leadership style)
		Leadership style should not only be administrative	Changes in leadership styles that suit changes and support the creation of the desired organizational culture (adhocrasy)

Style (leadership style) there are several qualities of leadership style suitable to lead change in PHC, including model Otokratik, Kastodial, Supportive and Kolegial. The transformational leadership style with the adjustment of organizational conditions must also be owned by each manager at the PHC's managerial level.

Staff, performance appraisal recommendations should use effective performance appraisal terms, namely: the existence of job description criteria, the expectation of performance to be achieved, the standardization, trained appraisers, continuing to open continuous communication, reviewing the performance, maintaining Processes that are running. The methods that can be used for performance appraisal are 180° and 360°.

Table 5. Focus Group Discussion for Staff

Factor	Strategic Issue	Results	Recommendation
Staff	Performance Appraisal	Still subjective	Making performance appraisal instruments with more detailed and objective key performance indicators (1800 or 3600) and linked to rewards and punishments
		There is no performance appraisal system associated with rewards and punishment	
		Performance appraisal done not yet 360 degrees, still based on the assessment of direct superior	
		Performance appraisal results have not been documented and socialized optimally as a reference for human resource improvement	
		Performance appraisal has not been included in hospital management information systems	System appraisal performance incorporated hospital management information systems

Skill, strategic issues gained from FGD results in depth interviews and discussions are the need for soft skill training and training to establish an agent of change, as for recommendations that can be given are improvement of training programs based on competence and needs, soft skill training program and target equity Training. Soft skill training programs include effective communication, effective meetings, effective leadership, conflict resolution, problem solving strategies, dealing with difficult people, time management and organizational skills, high performance team building and managing, transition and change. Of the nine training, there are three trainings that have not been listed in the training program in RS PHC that is effective leadership, time

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management and organizational skills, transition and change.

Tabel 6. Hasil Focus Group Discussion Skill

Factor	Strategic Issue	Results	Recommendation
Skill	Soft Skill Training	Implementation of the training has not been competency-based	Improved training programs based on competencies and needs that are standardized
	Training to shape agent of change	Equity in training objectives	Soft skill training program
		Scheduling less organized training	Created human resource mapping as needed training both hard and soft skills
		Pelatihan soft skill yang masih kurang	Pemerataan sasaran pelatihan

4. CONCLUSION

Phase of organizational change according to Kurt Lewin's theory (1951) that occurred in Hospital PHC Surabaya is at this moving stage in because the change has been going on for more than a year since July 2015. System: not yet maximal coordination function, unclear authority between Company and Hospital PHC Surabaya, Hospital management information system that has not been integrated and its application is still separate, lack of socialization.

Insufficient coordination function, unclear authority between PT and RS, the absence of definite vision and mission in PT as direction/direction, leadership style should not only administrative. PA is still subjective, there is no PA system associated with reward and punishment, PA is not yet 360 degrees, still based on the assessment of direct superior, PA results have not been documented and disseminated optimally as a reference for improvement of human resources, PA has not been included in Hospital management information system. Implementation of training not yet competency based, Equity in training target, Scheduling less organized training, Training soft skill related still less.

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