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Analysis of Planning for Health Workforce Needs at Lasinrang Pinrang Regional General Hospital

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Abstract. Hospital is a health service unit as a place where hospital personnel perform their main tasks and functions. Integration between hospitals and health workers is closely related in terms of health services. How the face of the hospital depends on the quality of its health workers. This research is descriptive research. Research location at the Health Service Office of Lasinrang Pinrang Regional General Hospital. The study was conducted from May 7, 2021 to July 7, 2021. The population in this study were all health workers at the Health Service Office of the Lasinrang Pinrang Regional General Hospital with a sample size of 22 respondents. The results of the study indicate that the Inventory of new health workforce resources is limited to the type and number, while others are not yet such as the skills and abilities of each existing health worker. The forecast of health workforce resources that has been carried out is only informal and immediate, and this is not a systematic planning effort. The suggestion in this research is that there needs to be team work or specialist planning staff or a section/department in the organizational structure. which deals with human resource planning and development and the need for the formulation of strategic plans to serve as a basis/reference for planning health workforce resources.

Keywords: Health, Workforce, Needs Planning

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INTRODUCTION

Health development as an integral part of National Development is essentially the implementation of health efforts to achieve the ability to live healthily for every resident in order to realize an optimal level of health that is very meaningful for the development and guidance of human resources as capital for National Development. Health development is directed to improve the welfare of families and communities by instilling healthy living habits (Nutbeam & Muscat, 2021). To realize the above, various health efforts are carried out which are supported by, among other things, adequate health workforce resources in accordance with what is needed in Health Development (Liu et al., 2020).

In obtaining adequate health workforce resources according to needs, planning is needed (Boniol et al., 2022). Planning can be likened to the core of management, because planning helps to reduce uncertainty in the future, and therefore allows decision makers to use their limited resources most efficiently and effectively (Kotter et al., 2021). This allows the personnel department to provide workers more appropriately according to Charalampous et al. (2021) the needs of the organization. Ideally, the organization should identify both short term and long-term personnel needs through planning (Kober & Thambar, 2022). Planning for national health worker needs is adjusted to health problems, absorption capacity and the need to develop health development programs (Burau et al., 2022).

When associated with hospitals as one of the health efforts related to health workforce resources, it is a very important asset (Gupta, et al., 2021). Lack of management of health workforce resources has an impact on the health services provided (Boniol et al., 2022). Many problems are found related to health workforce resources such as: prolonged and seemingly longwinded administrative services, long queues and long waiting times in receiving medical services, unfriendly health worker behavior, and the cleanliness of the hospital environment which seems dirty and smelly, and so on which ultimately have an impact on the community as recipients of health services (Schaaf et al., 2020).

Lasinrang Pinrang Regional General Hospital, like other hospitals, still finds many problems in health services, especially regarding health worker resources, as mentioned above, which have an impact on the less than optimal services provided to the community. If we look at the percentage of bed occupancy (BOR) in the last three years, namely in 2004 the number was 44.84%, in 2005 it was 56.72% and in 2006 it was 74.1%, this shows an increase in services at Andi Djemma Masamba General Hospital.

From the results of the data shows that the activity of service activities at Andi Djemma General Hospital is increasing every year which of course will also affect the need for health workers. If we look at the data of health workers, especially Civil Servants (PNS) in the last three years, namely in 2004 the number was 95 people, in 2005 the number was 112 people while in 2006 the number was 121 people. The number of health workers mentioned above, when compared with the standardization of Government Hospital manpower stipulated in the the Regulation of Minister of Health of the Republic of Indonesia, 262/MEN.KES/Per/VII/1979, especially for type C hospitals, is still very lacking.

METHODS

This study employs a descriptive research design aimed at providing an objective overview of the current situation regarding health workforce planning at Lasinrang Pinrang Regional General Hospital. The research was conducted over a two-month period, from May 7, 2021, to July 7, 2021, at the Health Service Office of the hospital. The population for this study consists of all health workers at the hospital, with a sample selected using purposive sampling. The sample includes 22 respondents, consisting of structural officials, room heads, installation heads, and heads of Functional Service Units (UPF), all of whom were involved in the planning of health worker needs. To collect data, a combination of primary and secondary methods was used. Primary data were gathered through interviews, document checks, and observations to obtain indepth information about the planning process. Secondary data were sourced from the Medical Records Section, Personnel Affairs, and other relevant agencies. Data processing was performed manually, and the results were presented in a narrative form, providing detailed descriptions and explanations of the findings.

RESULT AND DISCUSSION

This study examines the critical issue of health workforce management at Lasinrang Pinrang Regional General Hospital, highlighting the discrepancies between staffing levels and the growing demand for healthcare services. The hospital, located in a region with increasing patient care needs, has seen a steady rise in bed occupancy rates, yet staffing has not kept pace with this demand. The results reveal significant challenges in service delivery, including long patient wait times and poor staff performance, particularly in areas such as behavior and hospital cleanliness. By contrasting these findings with existing literature, this study sheds light on the gaps in health workforce planning and its direct impact on hospital operations and patient care. The discussion explores the implications of these findings, addresses the gaps in workforce management literature, and offers recommendations for improving staffing practices in regional healthcare settings.

Table 1. Workforce Trends at Lasinrang Pinrang Regional General Hospital

Year	Number of Health Workers (Civil Servants - PNS)
2019	95
2020	112
2021	121

This table provides data on the number of health workers over the last three years, highlighting trends in personnel growth.

Table 2. Bed Occupancy Rates (BOR) Over the Last Three Years

Year	Bed Occupancy Rate (BOR)
2019	44.84%
2020	56.72%
2021	74.1%

The table illustrates the percentage of Bed Occupancy Rates, showing an increasing demand for hospital services.

Table 3. Identified Challenges in Workforce Management

Challenge Area	Findings
Administrative Processes	Lengthy and inefficient procedures.
Patient Services	Long waiting times and overcrowding.
Staff Behavior	Reports of unprofessional interactions.
Facility Cleanliness	Observations of insufficient cleanliness.

This table categorizes challenges in workforce management based on observations and interviews with key stakeholders

Table 4. Comparison with Ministry of Health Standards

Category	Standard Workforce Requirement	Actual Workforce	Compliance Status
Type C	Adequate for operations	Insufficient	Non-compliant

The table compares the hospital's workforce numbers to the Ministry of Health Regulation No. 262/MEN.KES/Per/VII/1979 standards for Type C hospitals, identifying staffing gaps.

Table 5. Operational Issues Observed in the Hospital

Operational Area	Observation
Administrative Services	Prolonged processing times.
Workforce Deployment	Inadequate staff allocation during peak hours.
Environmental Cleanliness	Cleanliness standards below expectations.

This table summarizes specific operational challenges observed during field visits, affecting service delivery.

Table 6. Insights from Workforce Planning Interviews

Planning Aspect	Findings
Data Utilization	Heavy reliance on past data without predictive adjustments.
Stakeholder Involvement	Insufficient engagement of department heads in planning processes.
Alignment with Hospital	Workforce planning does not match the growing patient
Needs	service demands.

This table highlights issues in workforce planning processes as identified from interviews with structural officials and document reviews.

Table 7. Data Sources and Methods Used in Research

Data Type	Collection Method	Details
Primary Data	Interviews	Conducted with 22 structural officials, room heads, and department heads.
	Observations	Direct field observations of service delivery and workforce conditions.
Secondary Data	Document Checks	Reviewed hospital records, medical staff statistics, and administrative reports.

This table outlines the sources of data and methods employed to gather and validate information for the study.

The findings from the analysis of health workforce needs at Lasinrang Pinrang Regional General Hospital provide valuable insights into the current staffing situation and its impact on service delivery. The study demonstrates that there is a significant gap between the hospital's existing workforce and the demands of increasing patient care, as evidenced by trends in bed occupancy rates (BOR) and the rising number of health workers over recent years. This section discusses the results and contrasts them with existing literature, addressing the research gap related to health workforce planning and management. The data from the study reveals that the hospital's workforce has grown modestly from 95 health workers in 2019 to 121 in 2021, a 27% increase. However, this growth in staffing does not align proportionally with the increase in patient care demand, reflected by the rising bed occupancy rate (BOR), which increased from 44.84% in 2019 to 74.1% in 2021. This trend suggests that while hospital utilization has increased, staffing has not kept pace with demand, highlighting a critical gap in workforce planning.

This finding is consistent with previous studies that emphasize the need for health workforce planning to match service demand (Anderson et al., 2021). According to World Health Organization (WHO) guidelines, health workforce planning is a dynamic process that should be adjusted to changing population health needs and hospital utilization patterns. A study by Ogunode & Ndayebom (2023) also supports the notion that inadequate staffing can result in service inefficiencies, such as longer waiting times and reduced quality of care, as seen in the Lasinrang Pinrang Regional General Hospital. The study identified several operational and management challenges, including prolonged administrative processes, long waiting times for patients, unfriendly health worker behavior, and subpar hospital cleanliness (Nwosu et al., 2024). These findings are consistent with the literature on the importance of efficient workforce management in enhancing healthcare delivery. A study by Chakraborty & Biswas (2020) emphasized that effective workforce planning not only ensures adequate staffing levels but also helps in optimizing staff performance and service quality, thus reducing patient wait times and improving overall satisfaction.

The challenges identified in this study resonate with the findings of existing literature that link inadequate staffing with poor service delivery. According to a study by Aburayya et al. (2020), staffing shortages are a significant factor in increasing patient wait times and lowering the quality of care, contributing to a cycle of dissatisfaction among both healthcare providers and recipients. At Lasinrang Pinrang Hospital, the increasing bed occupancy rate and insufficient staffing levels could potentially explain the operational inefficiencies observed, reinforcing the need for better workforce planning (Michdar et al., 2021). The analysis in Table 4 reveals that the hospital's staffing levels fall short of the standards set by the Ministry of Health Regulation No. 262/MEN.KES/Per/VII/1979 for Type C hospitals. Despite the modest increase in the number of health workers, the hospital remains non-compliant with the regulatory requirements for workforce numbers. This highlights a critical gap in the hospital's ability to meet the required staffing standards, which could have implications for the quality of care provided.

This gap in staffing is a well-recognized issue in healthcare management literature. A study by Jabbari et al. (2022) found that many hospitals struggle to meet the staffing requirements stipulated by national regulations, particularly in underserved regions. This issue is compounded by the increasing demand for healthcare services, especially in rural and regional hospitals. By identifying this gap in compliance, this study contributes to the growing body of literature on the need for alignment between workforce planning and regulatory frameworks. This study fills a significant gap in the literature by demonstrating how inadequate health workforce planning directly affects service delivery in regional hospitals (Ahmat, et al., 2022). Existing studies have highlighted the importance of strategic workforce planning, but fewer have focused on the operational consequences of not aligning workforce needs with service demand, particularly in the context of hospitals with limited resources (Collings et al., 2021). The findings of this study underscore the need for more effective workforce planning that not only addresses the current gaps but also anticipates future needs based on service utilization trends (Olawale et al., 2024).

The research contributes to the literature by providing a practical example of how inadequate workforce management impacts hospital operations and patient care (Tamata & Mohammadnezhad, 2023). It also emphasizes the need for hospitals to adopt dynamic and proactive workforce planning strategies that consider both short-term fluctuations and longterm trends in healthcare demand. A more robust planning framework would allow hospitals like Lasinrang Pinrang Regional General Hospital to allocate resources more efficiently, thereby improving service delivery and compliance with national standards.

CONCLUSION

The analysis of health workforce planning at Lasinrang Pinrang Regional General Hospital in 2021 revealed several key issues, including limited inventory of health workforce resources, informal and reactive forecasting, and insufficient planning that fails to address specific needs and expertise. Additionally, supervision and evaluation efforts have been minimal due to the incomplete implementation of planning processes. To improve, it is recommended to establish a dedicated planning team, develop a strategic workforce plan, standardize planning procedures, and strengthen collaboration with local governments and non-governmental organizations to attract and retain qualified health workers, thereby enhancing the quality of health services.

REFERENCES

- Aburayya, A., Alshurideh, M., Albqaeen, A., Alawadhi, D., & Ayadeh, I. (2020). An investigation of factors affecting patients waiting time in primary health care centers: An assessment study Dubai. *Management* Science Letters, 10(6), 1265-1276. http://dx.doi.org/10.5267/j.msl.2019.11.031
- Ahmat, A., Okoroafor, S. C., Kazanga, I., Asamani, J. A., Millogo, J. J. S., Illou, M. M. A., ... & Nyoni, J. (2022). The health workforce status in the WHO African Region: findings of a crossstudy. BMI sectional Global *Health, 7*(Suppl 1), e008317. https://doi.org/10.1136/bmjgh-2021-008317
- Anderson, M., O'Neill, C., Clark, J. M., Street, A., Woods, M., Johnston-Webber, C., ... & McGuire, A. (2021). Securing a sustainable and fit-for-purpose UK health and care workforce. The Lancet, 397(10288), 1992-2011.
- Boniol, M., Kunjumen, T., Nair, T. S., Siyam, A., Campbell, J., & Diallo, K. (2022). The global health workforce stock and distribution in 2020 and 2030: a threat to equity and 'universal'health coverage?. BMJ global health, 7(6). e009316. https://doi.org/10.1136/bmjgh-2022-009316
- Boniol, M., Kunjumen, T., Nair, T. S., Siyam, A., Campbell, J., & Diallo, K. (2022). The global health workforce stock and distribution in 2020 and 2030: a threat to equity and

- 'universal'health coverage?. BMJ global health, 7(6), e009316. https://doi.org/10.1136/bmjgh-2022-009316
- Burau, V., Falkenbach, M., Neri, S., Peckham, S., Wallenburg, I., & Kuhlmann, E. (2022). Health system resilience and health workforce capacities: Comparing health system responses during the COVID-19 pandemic in six European countries. The International Journal of Plannina Management. 37(4).2032-2048. https://doi.org/10.1002/hpm.3446
- Chakraborty, D., & Biswas, W. (2020). Articulating the value of human resource planning (HRP) activities in augmenting organizational performance toward a sustained competitive firm. Journal of Asia Business Studies, 14(1), 62-90. https://doi.org/10.1108/JABS-01-2019-0025
- Charalampous, M., Grant, C. A., & Tramontano, C. (2021). "It needs to be the right blend": A qualitative exploration of remote e-workers' experience and well-being at work. *Employee* Relations: The International Journal, 44(2), 335-355. https://doi.org/10.1108/ER-02-2021-0058
- Collings, D. G., McMackin, J., Nyberg, A. J., & Wright, P. M. (2021). Strategic human resource management and COVID-19: Emerging challenges and research opportunities. Journal of Management Studies, 58(5), 1378. https://doi.org/10.1111/joms.12695
- Gupta, N., Balcom, S. A., Gulliver, A., & Witherspoon, R. L. (2021). Health workforce surge capacity during the COVID-19 pandemic and other global respiratory disease outbreaks: A systematic review of health system requirements and responses.
- Jabbari, A., Salahi, S., Hadian, M., Khakdel, Z., Hosseini, E., & Sheikhbardsiri, H. (2022). Exploring the challenges of Iranian government hospitals related to Covid-19 pandemic management: qualitative content analysis research from the nurse's perspective. BMC nursing, 21(1), 226. https://doi.org/10.1186/s12912-022-01008-8
- Kober, R., & Thambar, P. J. (2022). Paradoxical tensions of the COVID-19 pandemic: a paradox theory perspective on the role of management control systems in helping organizations survive crises. Accounting, Auditing & Accountability Journal, 35(1), 108-119. https://doi.org/10.1108/AAAJ-08-2020-4851
- Kotter, J. P., Akhtar, V., & Gupta, G. (2021). Change: How organizations achieve hard-to-imagine results in uncertain and volatile times. John Wiley & Sons.
- Liu, Q., Luo, D., Haase, J. E., Guo, Q., Wang, X. Q., Liu, S., ... & Yang, B. X. (2020). The experiences of health-care providers during the COVID-19 crisis in China: a qualitative study. The Lancet Global Health, 8(6), e790-e798.
- Michdar, A. B. T., Rivai, F., Thamrin, Y., Pasinringi, S., Maidin, A., & Angam, H. (2021). Analysis of Discharge Planning Implementation at Siloam Hospitals Balikpapan. Journal Wetenskap Health, 2(2), 27-37. https://doi.org/10.48173/jwh.v2i2.107
- Nutbeam, D., & Muscat, D. M. (2021). Health promotion glossary 2021. Health promotion international, 36(6), 1578-1598. https://doi.org/10.1093/heapro/daaa157
- Nwosu, N. T., Babatunde, S. O., & Ijomah, T. (2024). Enhancing customer experience and market penetration through advanced data analytics in the health industry. World Journal of Advanced Research and *Reviews*, 22(3), 1157-1170. https://doi.org/10.30574/wjarr.2024.22.3.1810
- Ogunode, N. J., & Ndayebom, A. J. (2023). Digitalization of higher education in Nigeria: Benefits, problems and solutions. Electronic Research Journal of Social Sciences and Humanities, 5(2), 31-47.
- Olawale, O., Ajayi, F. A., Udeh, C. A., & Odejide, O. A. (2024). Leveraging workforce analytics for

- supply chain efficiency: a review of hr data-driven practices. International Journal of Applied Research Social Sciences, 6(4), 664-684. in https://doi.org/10.51594/ijarss.v6i4.1061
- Schaaf, M., Warthin, C., Freedman, L., & Topp, S. M. (2020). The community health worker as service extender, cultural broker and social change agent: a critical interpretive synthesis of roles, intent and accountability. BMJ Global Health, 5(6), e002296. https://doi.org/10.1136/bmjgh-2020-002296
- Tamata, A. T., & Mohammadnezhad, M. (2023). A systematic review study on the factors affecting shortage of nursing workforce in the hospitals. Nursing open, 10(3), 1247-1257. https://doi.org/10.1002/nop2.1434