



The Advantages and Weaknesses of Providing 13 Accreditation Organizing Institutions for Community Health Centres: Indonesia Experience

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Introduction

The Ministry of Health in Indonesia requires all health facilities, including Community Health Centers, to improve their services. Accreditation is seen as the most effective way to achieve this. The Ministry oversees the accreditation process with the help of 13 Accreditation Organizing Institutions (LPA). These LPAs conduct surveys with trained surveyors to speed up the process, expected to be completed by 2024. With 10,145 Community Health Centers in Indonesia and surveys starting in May 2023, the participation of all Centers is crucial. However, there are various challenges in implementing this accreditation process. Research will examine the potential benefits and challenges related to Puskesmas accreditation, focusing on the 13 Accreditation Organizing Institutions' role.

Methods and Data Collection

Assessment and Data Analysis

An evaluation was conducted to assess the implementation of accreditation surveys by 13 institutions from May 2023 to January 2024, focusing on strengths and weaknesses. Samples were taken from registered Community Health Centers.

Data Sources

DATA is collected from DFO and SINAF, software used for implementing accreditation. It originates from 10.145 registered Community Health Centers

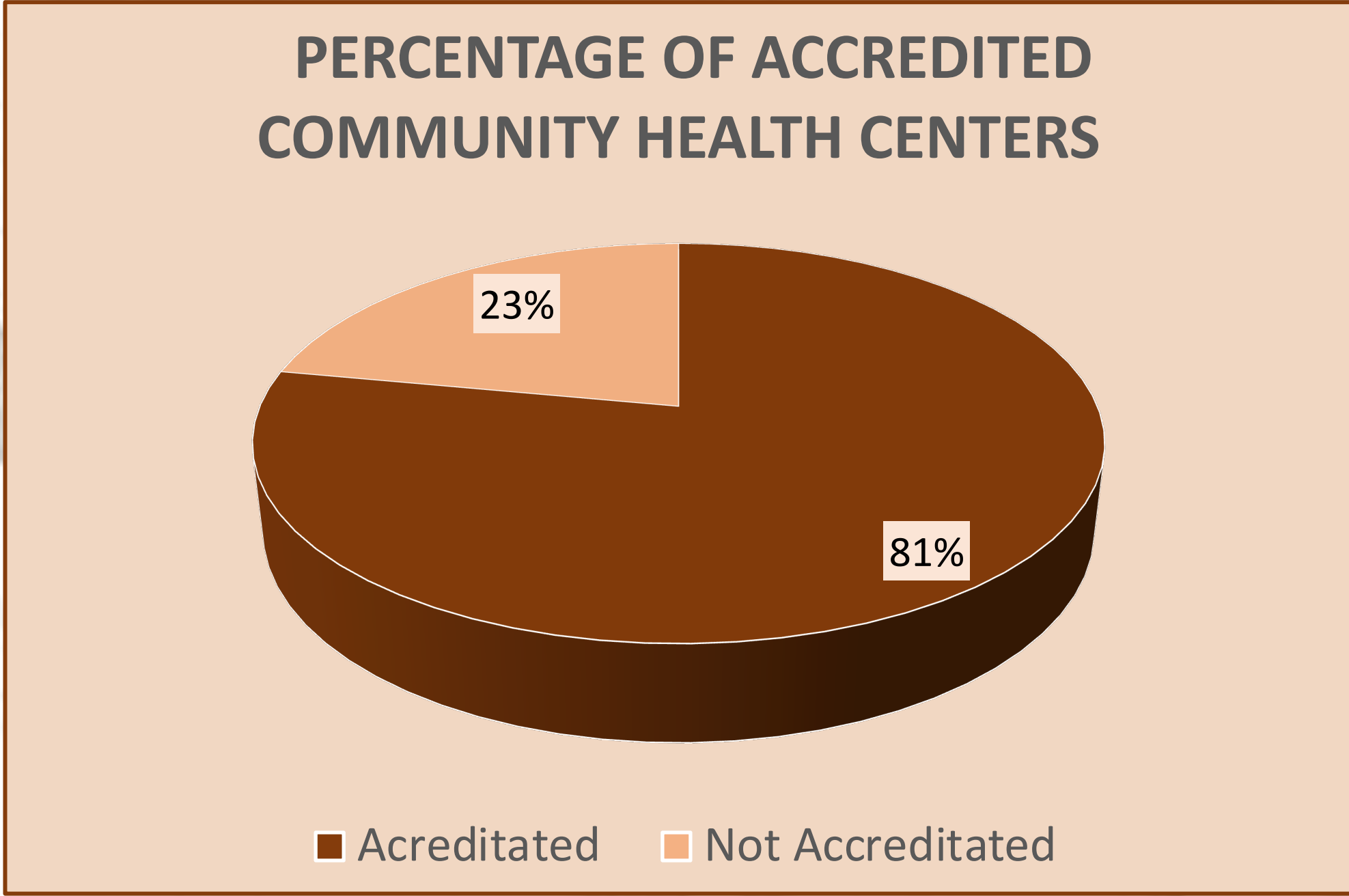
Advantages of 13 Accreditation Organizing Institutions

1 Accelerated Accreditation Targets

As of January 2024, 8,196 out of 10,145 Community Health Centres (CHC) have been accredited, reaching 81% of the target. This aligns with Indonesia's goal of achieving a 90% accreditation rate for primary healthcare

2 Wider Coverage and Increased Surveyors

The strategic placement of 13 Accreditation Organizing Institutions across Indonesia ensures comprehensive coverage and increased availability of surveyors for conducting surveys. As of January 2024, there are 6,517 surveyors spread across 13 institutions and 38 provinces, making the accreditation process more efficient



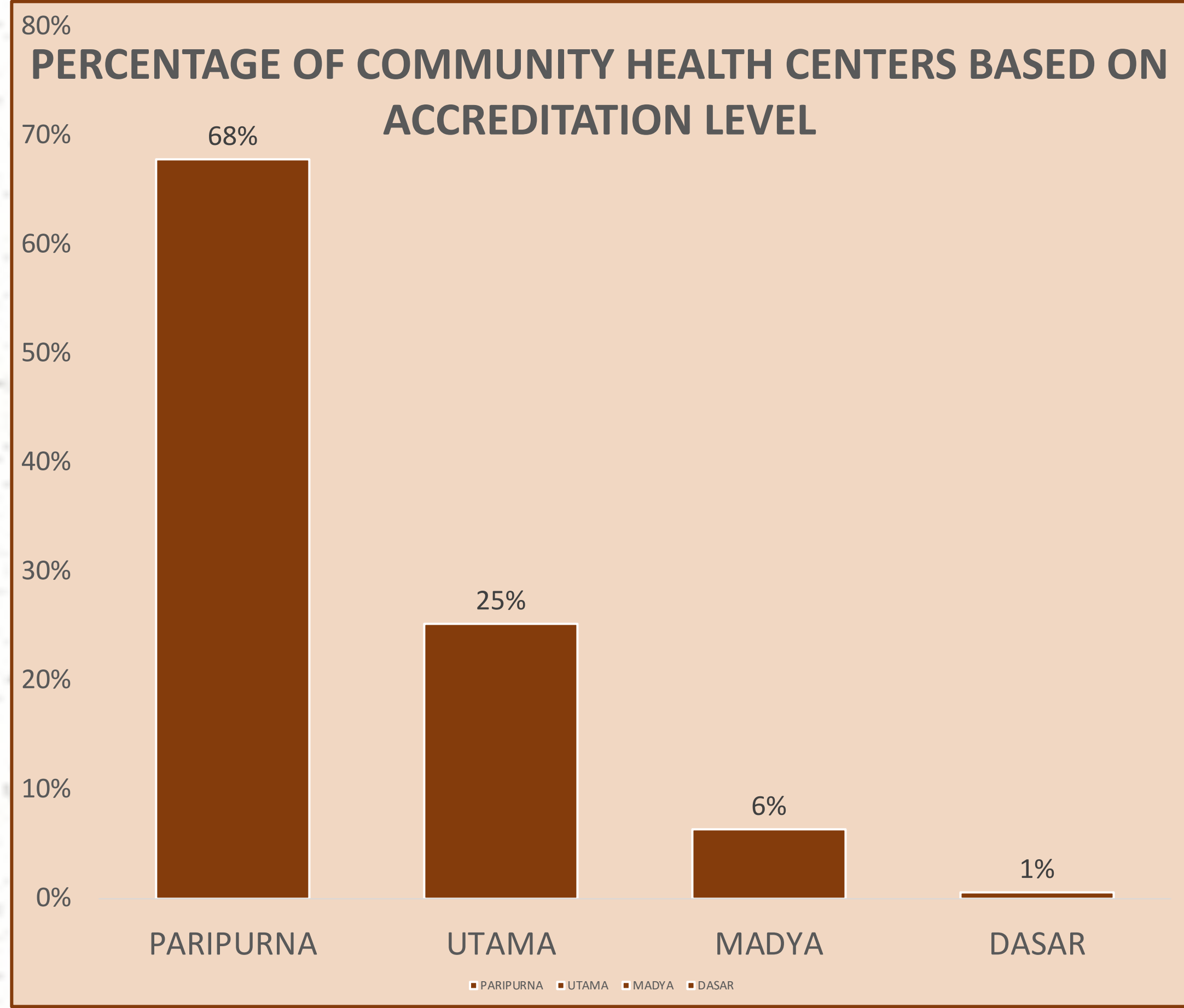
Weaknesses of the Accreditation Process

Score Discrepancies

One weakness we've found is that the scores Community Health Centres get from accreditation surveys don't match what's actually happening on the ground. It seems like surveyors might be giving higher scores to the centers to win their trust, so almost 70% of them end up getting the highest score, "paripurna."

Variable Surveyor Competency

The competency of surveyors varies, despite standardized training modules, curricula, and institutions accredited by the Ministry of Health. This discrepancy in abilities can impact the accuracy and reliability of accreditation results. Therefore, it is essential to standardize and evaluate surveyors to maintain consistent quality.



Challenges with Surveyor Status and Conflicts of Interest

Civil Servant Surveyors

The majority of surveyors, approximately 70%, are government employees who work at Community Health Centers, District/City Health Services, and Provincial Health Services. Their absence from the office during surveys often causes work-related problems. Additionally, there is a tendency to conduct surveys in areas that may result in conflicts of interest.

Conflicts of Interest

Additionally, conflicts of interest often arise when conducting surveys due to the implementation of accreditation policies. These issues must be addressed to ensure a fair, transparent, and reliable accreditation process..

Conclusion

1 Advantages of 13 LPA

The implementation of Community Health Centre accreditation, involving 13 Accreditation Organizing Institutions, brings clear benefits. It helps to reach accreditation targets faster, ensures that more health centers across Indonesia are accredited, and significantly increases the number of surveyors available to conduct accreditation surveys..

2 Addressing Weaknesses

We need to address some weaknesses in the accreditation system to ensure it is effective and fair. These include discrepancies between the survey scores and the actual conditions at the Community Health Centre, varying levels of competency among surveyors, the risk of employee disciplinary violations due to absenteeism, and potential conflicts of interest during the survey process.

Reference

- Undang-Undang Nomor 17 Tahun 2023 tentang Kesehatan
- Peraturan Menteri Kesehatan Nomor 34 tahun 2022 tentang Akreditasi Puskesmas, Klinik, Laboratorium Kesehatan, Unit Transfusi Darah, Tempat Praktek Mandiri Dokter dan Tempat Praktek Mandiri Dokter Gigi
- Keputusan Dirjen Yankes No. Hk.02.02/I/3991 /2022 tentang Petunjuk Teknis Survei Akreditasi Pusat Kesehatan Masyarakat, Klinik, Laboratorium Kesehatan, Unit Transfusi Darah, Tempat Praktik Mandiri Dokter, dan Tempat Praktik Mandiri Dokter Gigi

Recommendations

☆ Score Discrepancies

Implement stricter monitoring and evaluation mechanisms to ensure accurate assessment of Community Health Centres

📄 Variable Surveyor Competency

Develop and implement standardized training programs for surveyors, including rigorous evaluation and certification processes

👤 Civil Servant Surveyors

Explore alternative solutions for surveyor recruitment, such as engaging independent professionals or establishing a dedicated pool of surveyors.

⚖️ Conflicts of Interest

Develop clear guidelines and procedures to address potential conflicts of interest, ensuring transparency and accountability in the accreditation process.

