



Research Article

Construction of the Hybrid Agile Management Model in Public Health Services in Indonesia

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Abstract.

Community health care centers (Puskesmas) sometimes view management as ancillary, unimportant tasks. Traditional management issues in which services are separated into distinct journeys, each reliant on fulfilling previous steps without response or recurrence, can be onerous for governance frameworks with rigid structures. Management issues can be prevented by modifying how the service and organizational structure are managed. In such circumstances, an agile strategy can be advantageous. According to the guiding idea of the agile principle, agile will adjust to the requirements and quirks of the workplace in which it is implemented, especially in the various operations of government agencies. The Hybrid Agile Model of Public Health Service proposes a new, flexible management structure for local government service units based on the growth of human resources and continuous cultural change, without ignoring the routine activities of such bodies in making them more reliable and efficient. The model and its implementation procedure, tested at Puskesmas in South Sulawesi, Indonesia, have been described in depth.

Keywords: agile health service, hybrid agile management, human resource management, organizational culture, traditional organizational management.

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1. INTRODUCTION

With the increasingly complex state administrative development conditions and the increasing demands of the public towards the government, bureaucratic reforms in Indonesia today are urged to make increasingly inevitable improvements[1]. The Center for Public Health Services (Puskesmas) in organizing public services sees the management of the organization in a government program as not a thing that is pending, but a thing that is given from the program. Several scientific investigations indicate that the puskesmas service system has multiple flaws. In Indonesia, these problems are explicitly stated in the National Public Administration Development Strategy and supported by Presidential Regulation 81 of 2010 concerning the Grand Design of Bureaucratic Reform 2010-2025 as the government's commitment to making bureaucratic reform a

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policy priority. Moreover, they manifest themselves in several segments of the function, including national health projects that focus on this research.

In the context of government operations and accordance with the long-term goals of the Bureaucratic Reform 2010-2025 initiative, the health services in puskesmas have been identified and summarized into three groups; these can form the foundation for the creation of a Hybrid Agile Management model in Indonesia's public health services (Figure 1). Problems that arise in a grouping will be systematically analyzed. Each of these research priorities or analyses will develop problems that will be developed for future research.

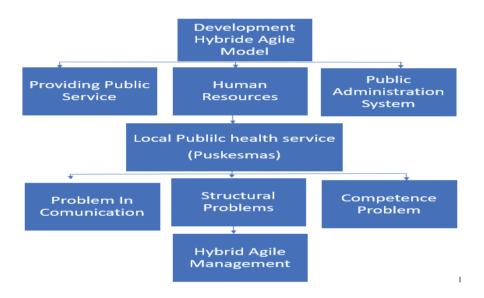


Figure 1: a structure developing a hybrid Agile Management Model.

Issues in puskesmas can be broken down into three categories, as shown in Figure 1 above

- 1. communication issues; communication issues in puskesmas health services; and c. communication issues in puskesmas between puskesmas and with service users.
- 2. Issues with the framework, such as those concerning the puskesmas system, the hierarchy, and the distribution of power
- 3. Concerns about competence; problems with establishing uniform standards for qualifications and training

Agile approach in the implementation of public policy is very important in public administration[2]. This approach is a tool for regulatory change and defines policy



formulations involving multi-stakeholders. This research examines the challenges that will be faced by public organizations in formulating and implementing public service programs [3].

Healthcare concerns manage traditional government policy programs using project management approaches, such as Vaccination or Immunization. Management is typically complex due to organizational structure and challenges with government policy programs[4]. Some scholars have found success in managing a wide range of building and infrastructure projects by modeling management information systems and using a specialized multi-criteria approach[5–7.; however, they did not address the evolving organizational structure of the health service but they have neglected to take into account the ever-changing nature of health service delivery [8]. The organizational structure is sensitive even at the level of the program team, and any disruptions could have far-reaching effects[9]. To better manage health care programs and to adapt the company's internal management structure, this study seeks to develop a hybrid agile organizational model. As a result, this new model is considered more advanced for transitioning organizational schemes from a functional type to a more flexible type (matrix) by using more adaptive management principles. These values are based on the Agile Manifesto[10]. The highlighted obstacles are paperwork, staff education, experience, dedication, stakeholder communication and participation, responsibilities in agile settings, agile team locations, and regulation. Emphasis is centered on the structure and the managerial and organizational system as the primary job description, authority, and interrelationships. In the form of research guidelines, communication frameworks and competencies will be determined. This model was tested in a case study of Toraja, Bone, and Bulukumba districts in South Sulawesi.

1.1. Development of Hybrid Agile Management at Local Public Health

Health development held at puskesmas aims to realize a community that: a. has healthy behaviors that include awareness, willingness, and ability to live a healthy life; b. able to reach quality health services c. living in a healthy environment; and d. have an optimal degree of health, both individuals, families, groups, and communities. This goal becomes very important for the Health Program in Indonesia, and also has contributed to the use of a more effective and efficient budget. To be successful, it is necessary to introduce a simple and agile organizational structure.



Agile approaches are highly iterative learning, flexibility, and development emphasizing stakeholder interaction [11]. Regarding agile implementation, this approach is more effective for incremental program process improvements. Saini et al.[12] Determine the most critical factors for success in passing on and transferring tacit knowledge in an agile and lean construction setting. They discovered that both concepts could be used as a program management tool for organizational learning since they require collaboration between the source and consumer of knowledge to produce new knowledge. Strehle et al.[13] use one of the agile methods the Scrum method [14] and evaluate the framework's potential adoption in the construction industry. Their research demonstrates that Scrum has enormous potential within construction businesses' design and planning departments. Agile processes afford more adaptability, or as stated in [13], "the ability to generate and respond to change in an unpredictable business environment for profit." In addition,[14, 15] offer suggestions for using Scrum in various phases of construction projects. Agile approaches can be efficient at the program level, but they can impose tremendous complexity and the requirement to be flexible at the program portfolio level, according to Sweetman and Conboy[16] refers that agile approaches can be very effective at the program level, they can impose significant complexity and the need to be adaptive at the program portfolio level.

The primary premise is that the conventional method for implementing a healthcare policy program may be considerably enhanced by adopting a matrix organizational structure backed by an Agile framework for implementing business operations. Therefore, the Hybrid Agile Management Model is offered as a new model. The proposed model is based on earlier research conducted by the author [17]. On the level of business process organization, it is a matrix model with an enhanced Agile foundation. It is predicted that, under the current conditions, it represents an appropriate transition solution for more sophisticated organizational forms at affordable financial costs, thereby contributing to more effective local and regional self-government functions, notably in healthcare issues.

1.2. Hybrid Agile Management process at Local Public Health

The hybrid agile management process is founded on a balanced application of Agile principles within a policy program environment and incremental implementation. Framework Agile Scrum and Dynamic Systems Development Method. The classification of roles and powers as business, technical, and management roles makes the DSDM framework appropriate [18]. Scrum is a framework for managing software development



projects, but its principles can also be applied to other types of projects[19]. Using the Scrum method [20] and the DSDM framework [21, 22], use (1) defining roles and authority and (2) agile organizational schemes to describe process management.

The program implementation of the health service policy follows an agile organizational structure. Agile organizational structures consider the level of the policy program hierarchy (strategic, tactical, and operational) and the nature of the program, as well as performance indicators for government health care programs. The program exists concurrently with the consideration of agile management principles, specifically sprints, to provide greater flexibility and punctuality to the policy program environment. Advantages of the suggested strategy include the use of agile sprints, which allow for more effective process application and iterative and incremental methods across the board of the policy program. Hybrids result from this form of cooperation, combining separate systems' advantages. It can interact with its surroundings on both a programmatic and a functional level is a plus. Agile sprints are an asset to the proposed strategy because they allow for more effective process application and iterative and incremental approaches across all stages of the policy program. This sort of cooperation combines the advantages of two systems; hence it has called a hybrid. An additional advantage is that it can interact with its surroundings on both a programmatic and a functional level.

1.3. Financing Budget, Human Resources, and IT support at Local Public Health

Sufficient resources are required to implement the proposed solution. The one on the decision-makers to reallocate budget money legally and equitably. Given the importance of intrinsic motivation and external financial support, budget, human resources, and TIK play pivotal roles in determining the likelihood of success. The ability and motivation of leaders to see opportunities and seize them for positive change is essential. Money from other sources, such as private investors, is also readily available. A primary goal is to maximize the effectiveness of central and federal funding through the involvement of several parties. The importance of education is emphasized while talking about human resources. Agile principles, matrix organizational structures, and the concept of shared and individual accountability must be introduced to the students. The goal of this ongoing training is for all participants to come to share a common worldview. [23, 24]. The matrix structure necessitates formal training and a well-defined function. Creating a communication plan is one of the fundamental aspects of information support. The communication plan answers the question of which organization-related information is



necessary for specific groups. The plan specifies the communication system's function (creation, distribution of information, and people being informed).

1.4. Barriers to HybridAagile Management at Local Public Health

Strong emphasis is placed on the obstacles that arise while implementing Hybrid Agile Management, distinguished by its more flexible framework. [25] identified potential occurrence areas:

- Modification of functional organizational structures to a framework that is more adaptable
- 2. Role organization within the framework
- 3. Concerns regarding individual accountability
- 4. Evaluate the project's progress and success
- 5. Promotion of intergroup communication
- 6. Health service implementation by implementing agile hybrid management

1.5. Implementation of Hybrid Agile Management Model at Local Public Health

Adopting the proposed hybrid agile management paradigm, the problems mentioned earlier can be addressed and remedied.

- 1. An Overview of the Matrix Structure
- 2. The creation of a Program Management Office
- 3. Creating a Purchasing Division (PD)
- 4. In the Budget Office
- 5. Methodologies and courses for managing projects
- 6. Forming a Group to Carry Out a Specific Project
- By using agile methods in the policy implementation phase of program development



The transformation of functional organizations into agile organizations is strongly recommended, as it is believed to be more responsive to the challenges of health policy programs, mainly due to the horizontal relationship between departments, program staff, and community members. This implementation also introduces agile organizational management principles. For example, the relationships between the units of health care centers in different regions are functional, whereas the hierarchy between regents, mayors, and governors still adheres to vertical relationships.

Puskesmas in the implementation of public services, if required by policy programs can recruit staff from other departments, and communities and form interdisciplinary cross-functional groups according to the agile model. Traditional Puskesmas will implement traditional program management, while multi-stakeholder Puskesmas is proposed to apply the principle of hybrid agile management. The agile management approach gives an organization the ability to adapt to its environment. In terms of the implementation of policy programs, it is necessary for policies that are incremental and incremental for the achievement of program objectives.

2. Conclusion

This study demonstrates that the current functional methods of the puskesmas structure do not adhere to the requirements of multistakeholder policy programs. These facts demonstrate the need to modify Puskesmas' organizational structure, program management strategy, and work process organization. However, the conventional multistakeholder matrix approach to this issue is likewise inadequate. Hybrid agile management and organizational growth are enhanced by a multidisciplinary strategy, straightforward and quick communication channels, and lateral links between divisions. The assumption is that an Agile framework for arranging business operations can significantly improve the effectiveness of a matrix organizational structure.

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