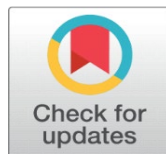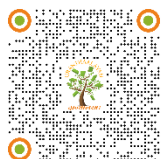# ANALYSIS OF RISK IN THE RECRUITMENT PROCESS OF NON-ASN EMPLOYEES (CASE STUDY OF MARIA WALANDA MARAMIS REGIONAL HOSPITAL, NORTH MINAHASA REGENCY)

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ABSTRACT

With the current status of Maria Walanda Maramis Regional Hospital as a BLUD, the hospital has the authority to regulate flexibility to improve services, including by carrying out its own recruitment, which previously had to go through the Regional Government. Flexibility is given in Planning, Procurement, Recruitment and Acceptance of Non-Permanent Employees (THL), so Maria Walanda Maramis Regional Hospital carries out recruitment of Non-ASN Employees. The various activity is carried out starting from planning, implementation, acceptance and placement and performance evaluation. During this process, it was discovered that there were employees who did not meet the requirement quantitatively and qualitatively, with 2 adverse events or undesirable events. The first KTD had empty formations or no applicants, the risk value was 16 with high status and the second KTD was found during the evaluation of employees who behaved poorly, the risks value was 12 with medium status. Mitigating the risk of adverse events is by implementing TARIF GCG and Compliance. Based on the results of the measurement and assessment of the risk of adverse events above, an evaluation is carried out to make decisions on handling existing risks in order to reduce or minimize risks to the minimum.

Keywords: Risk Management, Recruitment, Non-ASN Employees, Hospital

1. INTRODUCTION

Hospital services in their implementation are very risky because they involve human lives which cannot be compared with financial interests. Apart from that, hospital services are varied and unpredictable. This of course requires the readiness of hospital management to implement operational risk management strategies as the main capital to ensure the quality of hospital services. Based on the Vision of Maria Walanda Maramis Regional Hospital, "The realization of excellent quality

health services makes it a Digital-based Tourism and Regional Referral Hospital by 2026", with the mission as the first point increasing Human Resources and referring to Regional Regulation No. 10 of 2021 concerning Guidelines for Management of Non-Civil Servant Employees, Health and Non-Health Workers and Professional Expert Staff at the Regional Public Service Agency of Maria Walanda Maramis Regional Hospital regulates the status of employees in the BLUD of Maria Walanda Maramis Regional Hospital, Civil Servants and Non-PNS: Permanent Employees and Non-Permanent Employees (THL), Flexibility is given in Planning, Procurement, Recruitment and Acceptance of Non- Permanent Employees (THL), so Maria Walanda Maramis Regional Hospital carries out recruitment of non-ASN Employees.

Of course, the basis for recruitment is because hospitals have a very large scope of work, divided into 3 parts, namely the general administration and finance section, the medical and nursing services sector, and the supporting services sector. As a Regional General Hospital, the number of Civil Servant (ASN) in Maria Walanda Maramis Regional Hospital is only 106 civil servants and 24 CPNS. This number will certainly not be enough to cover all types of activities in hospitals that are currently under development, so it will not be enough to just have ASN staff, so it is necessary to recruit non- ASN employees. Eduardus (2001)

Based on employees needs, Maria Walanda Maramis Regional Hospital hereby carries out the recruitment of non-ASN employees for the first time publicly and is open to anyone according to the required employee qualifications. Different from previous studies, this research will analyze the Risks of the Recruitment Process for Non-ASN Employees at Maria Walanda Maramis Regional Hospital, with the recruitment process as the research object. Faida (2019)

1) PROBLEMS

Based on the Regulation of the Director of Maria Walanda Maramis Regional Hospital No. 500 of 2022 concerning Human Resources Management of Maria Walanda Maramis Regional Hospital, considering that Regional Hospital (RSUD) in its efforts to manage Human Resources more effectively, it is deemed necessary to make several changes as outlined in the Director's Regulation on Human Resource Management in Maria Walanda Maramis Regional Hospital. On Legal Basis:

1) PP No. 72 of 2019 Amendment to PP No. 18 of 2016 concerning Regional Apparatus regulates regional hospitals as special organizational units that have autonomy in managing finances and goods as well as staffing.

2) Minister of Home Affairs Regulation No. 79 of 2018 concerning Regional Public Service Agencies regulates the flexibility of business practices to improve services to the community.

3) Local Government Regulation No. 10 of 2021 concerning Guidelines for Management of Non-Civil Servant Employees, Health and Non-Health Workers and Professional Expert Staff at the Regional Public Service Agency of Maria Walanda Maramis Regional Hospital regulates the status of employees in the BLUD of Maria Walanda Maramis Regional Hospital:

- Civil servants
- Non-PNS: Permanent Employees and Non-Permanent Employees (THL)

Flexibility is provided in Planning, Procurement, Recruitment and Acceptance of Non- Permanent Employees (THL). Gunawan (2015)

4) Circular Letter of the Minister of PAN-RB RI Number B/185/M.SM.02.03/2022 dated May 31st, 2022, Regulating the Handling of Honorary Personnel in Institutions.

Therefore, Maria Walanda Maramis Regional Hospital is recruiting non-ASN employees. Various activities are carried out starting from Planning and Determining Formation, Announcements, File Selection, Determination of applicant interview teams, Announcement of interview implementation, Implementation of interviews, preparation of final selection results, announcement of final selection results and reporting and acceptance of successful participants. The result of the selection on December 30th, 2022, were that 217 people had passed the selection.

Next is the acceptance and placement of new employees whose performance will be evaluated for 3 months. During the recruitment process up to the employee performance evaluation, it was found that there were employees who did not fulfill the requirements quantitatively and qualitatively, there were empty formations or there were no applicants, and it was discovered during the evaluation that there were incompetent employees. This problem will of course have an impact to the image of the hospital regarding patient and patient family satisfaction as well as public trust in hospital services and of course there will also be a potential decrease in hospital income and other risks. Hakim & Riady (n.d.), Hery (2019)

2) FORMULATION OF THE PROBLEM

Based on the problems above, the problem formulation is determined as follows:

- What is the business map that occurs in the non-ASN employee recruitment process at Maria Walanda Maramis Regional Hospital?
- Identify risks in the recruitment process for non-ASN employees at Maria Walanda Maramis Regional Hospital?
- How is risk mitigated in the non-ASN employee recruitment process at Maria Walanda Maramis Regional Hospital?

3) RESEARCH PURPOSES

This research aims to determine the business map that occurs in the recruitment process for non-ASN employees at Maria Walanda Maramis Regional Hospital. Next, analyze the risks by identifying risks, more specifically for operational risks, where there are 5 aspects, namely HR/People, Systems/Technology, Strategy, Internal Processes, and External Processes, which will then measure the risks by calculating the opportunities and impacts of these risks and then providing solutions, with a risk management design to mitigate it. Indriyani et al. (2022), Jogiyanto (2003)

4) BENEFITS OF RESEARCH

The first thing for the Indonesian Christian University Postgraduate Program is as a manifestation of the Tridharma Perguruan Tinggi in the field of risk management and as input for further research. The second is for Maria Walanda Maramis Regional Hospital as information material for future policies for Human Resource Risk Management at Maria Walanda Maramis Regional Hospital. Manarung & Gunawan (n.d.), Martha & Kresno (2016), Mulyono (n.d.)

5) RESEARCH METHODS

- **Place and Time of Research**

This research was conducted in Maria Walanda Maramis Regional Hospital, North Minahasa Regency, in May until July 2023.

- **Research Materials and Tools**

This research was conducted by the author using a list of questions as initial data collection by conducting interviews using a voice recorder and camera for documentation.

- **Research management**

1) This type of research is descriptive qualitative research using the in-depth interview method with informants in the work environment of Maria Walanda Maramis Regional Hospital to determine the business process risks that occur in the recruitment process for Non-ASN Employees at Maria Walanda Maramis Regional Hospital.

2) The Research Subjects the informants in this research are: Head of General Administration and Finance (Recruitment Team Head), Head of General and Personnel Sub-division (Secretary of the Recruitment Team), Head of Services and Medical Division (Recruitment Team Member), and Head of Support Division (Recruitment Team Member). Parera (2020), Pratiwi & Riyadi (2021)

6) Data Analysis Methods

Data collection on the recruitment process starts from planning data to evaluation. For risk analysis, use:

- **Bowtie Analysis (BTA)**

Bowtie analysis, also called "cause-effect" analysis, displays data that is easy to understand and quite simple ideas by combining causes and consequences Chevreau et al. (2006), Burgess-Limerick et al (2014), De Dianous (2006). It will be very helpful to assess risk with qualitative analysis of hazard identification and detailed quantitative assessment of the possibility of adverse events or undesirable events (CMPT, 1999) in Astuti (2017).

- **Fishbone Diagram**

It is a graphic tool used to explain and relate the interactions between factors that influence each other in a process. What is usually called a fishbone diagram because its shape is the same as a fishbone describes cause and effect (Dr. Kaoru Ishikawa: 1943). He is a scientist from Japan and a chemical engineering alumnus at the Tokyo University.

- **Heat Map**

Measuring the risk of adverse events with a heat map table using the formula: $R = P \times D$
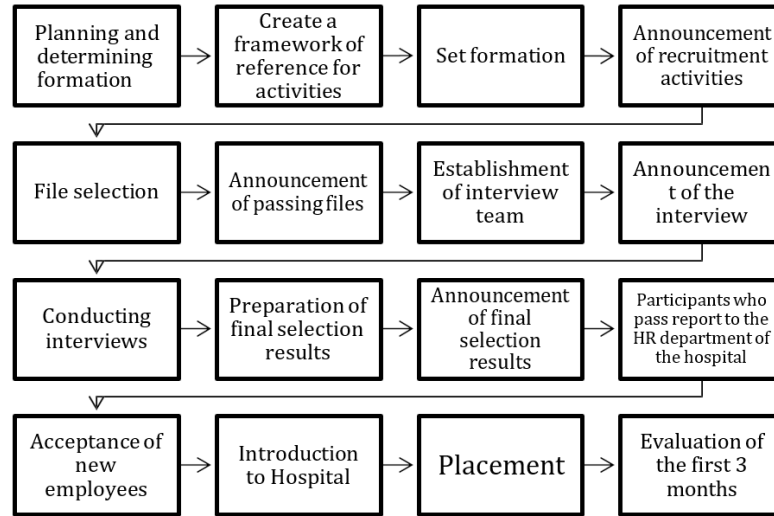
Information:

R = Risk Weight, P = Risk Opportunity, and D = Risk Impact

Determining the opportunity risk value based on the frequency of occurrence uses a Likert scale of 1 – 5 (Very Rarely – Very Often). And determining the impact risk value is based on estimates, using a Likert scale of 1 – 5 (Very Low – Very High)

1.1. POST OCCUPANCY EVALUATION (POE)

A business map is a collection of organized and interrelated activities to solve a particular problem or produce a product or service, to achieve a goal. The business process for recruiting non-ASN employees at Maria Walanda Maramis Regional Hospital as follows:

Planning and determining formation → Create a framework of reference for activities → Set formation → Announcement of recruitment activities

File selection → Announcement of passing files → Establishment of interview team → Announcement of the interview

Conducting interviews → Preparation of final selection results → Announcement of final selection results → Participants who pass report to the HR department of the hospital

Acceptance of new employees → Introduction to Hospital → Placement → Evaluation of the first 3 months

RECRUITMENT PROCESS DATA

- Total Applicants: 537 People
- Pass File: 355 People
- Number Of People Who Took Part in The Interview: 333 People
- The Final Results Received: 217 People
- Who Reported Back: 214 People

FINAL RESULTS OF RECRUITMENT

| APBD		BLUD		EMPTY FORMATION	
Position	**Quantity**	**Position**	**Quantity**	**Position**	**Quantity**
General Practitioner	6 People	Medical Specialist	10 People	Neurologist	1 People
Nurse	90 People	Nurse	11 People	Cardiologist	1 People
Midwife	14 People	Medical Records	12 People	Elektromedicine	1 People
Dental and Oral Nurse	1 People	Radiographer	5 People	Medical Physicist	1 People
Pharmacist Assistant	7 People	Radiation Protection	1 People	Laundry Staff	1 People
Lab Analyst	9 People	Administration Staff	28 People	Sarpras	3 People
Anesthetist	2 People	Sanitarian	1 People	IT Staff	2 People
Physiotherapy	2 People	IT Staff	4 People	Medical Record	3 People
CSSD	1 People	Kitchener	7 People		
Laundry Staff	1 People	Sarpras	3 People		
		CSSD	2 People		
Total	132 People	Total	84 People	Total	13 People

2. FINDINGS AND DISCUSSION

1) Risk Analysis of Unwanted Events (KTD)

Analysis of the risk of adverse events from the Non-ASN Employee Recruitment Process from HR factors (people), internal processes, systems (technology), external factors and strategy.

• Problem analysis with fishbone diagrams

The Fishbone Diagram can be used to determine the root cause and effect of this research problem, namely analyzing the risk of HR factors (people), internal processes, systems (technology), external factors and strategies related to risk. The Non-ASN Employee Recruitment Process can be described as follows:

Based on the fishbone diagram above, HR/People risk factors, system/technology risk factors, strategic risk factors, external risk factors and internal risk factors are hazards and the root cause is the cause.
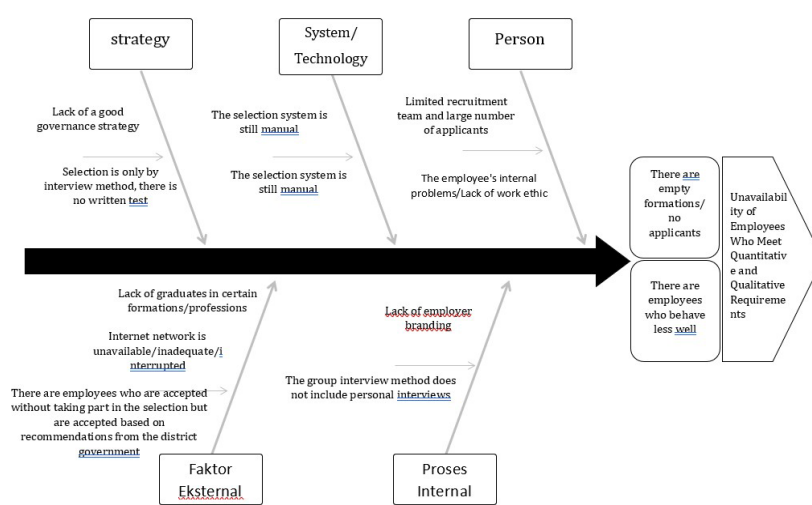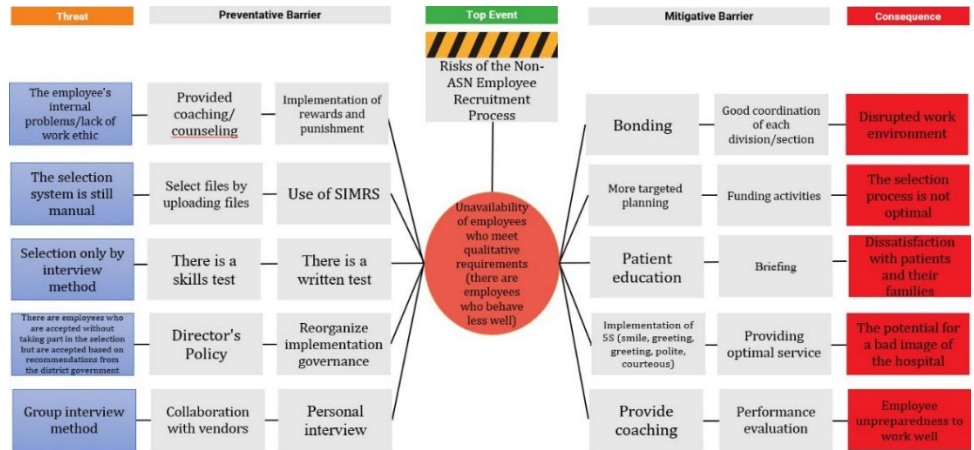

• Risk analysis of adverse events with Bowtie Analysis Diagrams

Based on the results of the previous fishbone diagram analysis, in-depth identification was then carried out and 2 KTDs were obtained which can be described as follows:

Bowtie Analysis Diagrams KTD 1
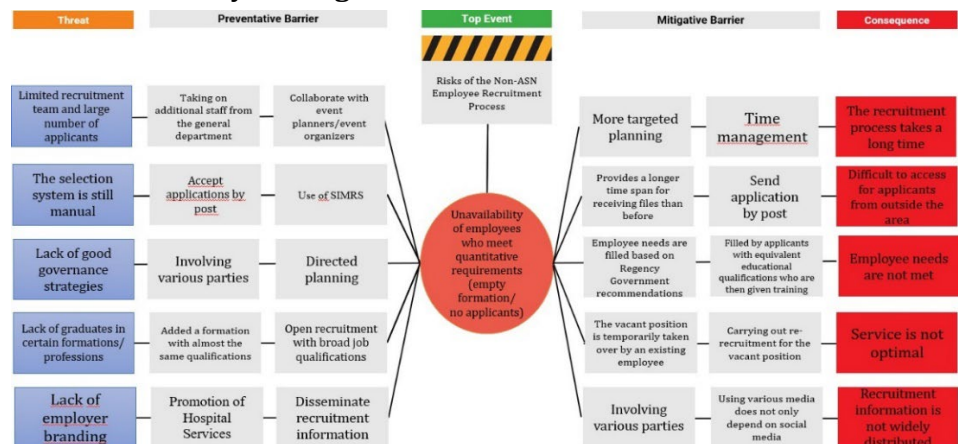
Bowtie Analysis Diagrams KTD 2

- Measurement and assessment of adverse event risks

The calculation results of each adverse event risk based on the risk opportunity and risk impact are then assessed as in the following table:

KTD Risk Category	Causes of the Risk of KTD	Opportunity Scale (Probability)	Impact Scale (Impact)	Risk Weight (Risk)	Impact Status
1.	There is an empty formation/no applicants	4	4	16	High
2.	There are employees who behave less well	3	4	12	Medium

- Mapping the risk of unforeseen accidents with Heat Map

Based on the table above, the risk of adverse events can be mapped into the heat map table as follows:

IMPACT						
	5 Very High	5	10	15	20	25
	4 High	4	8	12 KTD 2 = 12	16 KTD 1 = 16	20
	3 Medium	3	6	9	12	15
	2 Low	2	4	6	8	10
	1 Very Low	1	2	3	4	5
	Scale	1 Very rarely	2 Rarely	3 Medium	4 Frequently	5 Very frequently
	PROBABILITY					

3. OBSERVATIONS

From the results of the existing risk analysis and assessment, each KTD can be evaluated based on the risk level as follows:

KTD Risk Category	Causes of the Risk of KTD	Risk Weight (Risk)	Risk Impact	Evaluation desc
1	There is an empty formation/no applicants	16	High	Managed/ Minimized
2	There are employees who behave less well	12	Medium	Controlled/ Minimized

1) Risk Mitigation with GCG TARIFF Principles

Mitigating the risk of adverse events in this research is by implementing the 5 (five) GCG TARIF principles, namely Transparency, Accountability, Responsibility, Independence and Fairness. Based on the results of the assessment and evaluation of the risk of adverse events above, risk mitigation is then carried out using the principles of GCG TARIFFS which are described below:

- **KTD 1**

Undesirable events (KTD 1) (Accountability) There is empty formations/no applicants			
Cause -Limited recruitment team and large number of applicants -The selection system is still manual -Lack of good governance strategies -Lack of graduates in certain formations/professions -Lack of employer branding		Score	Status
Opportunity -Failure to meet minimum service standards (Score = 4, frequently)	**Impact** -The recruitment process takes a long time -Difficult to access for applicants from outside the area -Employee needs are not met -Service is not optimal -Recruitment information is not widely distributed (Score = 4, High)	16	High
Opportunity Mitigation - Collaborate with event planners/event organizers and take on additional staff from the general department - Using SIMRS and receiving applications by post - Directed planning involving various parties	**Impact Mitigation** -More focused planning and time management -Send applications by post and provide a longer time frame for receiving files than before -Filled by applicants with equivalent educational qualifications who are then given training and employee	6	Low

- Open recruitment with broad job qualifications and add formations with almost the same qualifications - Disseminate information on recruitment and promotion of hospital services (Score = 2, rare)	needs are filled based on Regency Government recommendations -Carrying out re-recruitment for the vacant position and the vacant position will be temporarily taken over by an existing employee -Using various media does not only depend on social media and involves various parties (Score = 3, Medium)

- **KTD 2**

Undesirable events (KTD 2) (Independency)
There are employees who behave less well

Cause		Score	Status
-The employee's internal problems/lack of work ethic -The selection system is still manual. -Selection only by interview method -There are employees who are accepted without taking part in the selection but are accepted based on recommendations from the district government. -Group interview method			
Opportunity -Not creating a conducive work environment -Bad image of the hospital (Score = 3, medium)	**Impact** -Disturbed work environment -The selection process is not optimal. -Patient and patient family dissatisfaction -Potential for a bad image of the hospital -Unpreparedness of employees to work well. (Score = 4, High)	12	Medium
Opportunity Mitigation -Implementing rewards and punishments and providing coaching/counseling -Use of SIMRS and file selection by uploading files -There is a written test and skill test. Reorganize implementation governance and director policies. -Personal interviews and collaboration with vendors (Score = 1, very rare)	**Impact mitigation** -Good bonding and coordination of each division/section -More targeted planning and funding of activities -Patient education and briefing -Implementation of 5S (smile, greeting, greeting, politeness) and providing optimal service -Provide coaching and performance evaluation. (Score = 2, Low)	2	Very Low

The results of adverse event risk mitigation using the GCG TARIFF Principles are presented in the following heat map table:

IMPACT		1 Very rarely	2 Rarely	3 Medium	4 frequently	5 Very frequently
	5 Very High	5	10	15	20	25
	4 High	4	8	12 KTD 2 = 12	16 KTD 1 = 16	20
	3 Medium	3	6	9	12	15
	2 Low	2	4	6	8	10
	1 Very Low	1	2	3	4	5
	Scale	1 Very rarely	2 Rarely	3 Medium	4 frequently	5 Very frequently

PROBABILITY

2) Risk Mitigation with compliance

The research results obtained show that it is necessary to carry out a risk management process for the recruitment process for non-ASN employees at Maria Walanda Maramis Regional Hospital, namely using a compliance approach. Risk mitigation with compliance is the involvement of all relevant policy stakeholders in implementing the non-ASN employee recruitment process at Maria Walanda Maramis Regional Hospital to carry out the duties and functions of each party by setting good governance strategies and considering evaluations for determining policies. Silaen et al. (n.d.)

There are several things that need to be mitigated regarding the principle of compliance with regulations, namely:

1) In order to fulfill the Regulation of the Regent of North Minahasa Number: 32 of 2018 dated 2 March 2018 concerning the Achievement of Minimum Service Standards for the Maria Walanda Maramis Regional General Hospital, North Minahasa Regency for 2018-2023, the Maria Walanda Maramis Regional Hospital needs to make improvements specifically for the need for existing human resources to achieve minimum service standards at Maria Walanda Maramis Regional Hospital.

2) Maria Walanda Maramis Regional Hospital has proven its service to the community, one of which is the achievements it has achieved, namely the Accreditation Certificate from the Indonesian Health Facilities Hospital Accreditation Institute (LAFKI) Number: 040/LAFKI/AKREDITASI/XI/2022 dated November 30th, 2022 concerning Hospital Accreditation Certificate at Maria Walanda Maramis Regional Hospital, North Minahasa Regency as an acknowledgment that the hospital has met hospital accreditation standards and was declared PASSED at PARIPURNA Level. As a basis for advancing the hospital, Maria Walanda Maramis Regional Hospital needs to make various changes and developments to improve the quality of services in the hospital. Some important things that need to be done, there are:

- Better planning, management and governance strategies for handling human resources (HR) issues

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- Implementation of hospital management information system (SIMRS)
- Strengthen employer branding, one of which is by highlighting the superior services available at the hospital
- Maximize hospital social media
- Implementation of rewards and punishment for all employees
- Training to increase employee competency
- Carrying out bonding to increase employee motivation and work ethic

4. CONCLUSION

From the research results above, it can be concluded that:

- The Recruitment Process for Non-ASN Employees at Maria Walanda Maramis Regional Hospital has gone through 16 stages.
- Using the fishbone and bowtie diagram analysis, it was found that the risk identification of the Non-ASN employee recruitment process at Maria Walanda Maramis Regional Hospital was obtained as many as 2 risks of adverse events;
- From the 2 unforeseen risks, risk analysis, measurement and assessment are carried out using the risk weight formula R = P 12;
- Evaluate all risks of adverse events by managing, controlling and reducing the risks to the minimum;
- By implementing GCG TARIFFS through opportunity prevention controls and impact mitigation and recovery controls, the risk level can be reduced to scores 6 and 2;
- The risk control process is carried out properly so that it can reduce and minimize existing risks;
- This process can also be controlled and evaluated and can be reported to stakeholders for policy strategy and decision making;
- Having a good non-ASN employee recruitment process at Maria Walanda Maramis Regional Hospital will support the hospital's vision and mission for the expected minimum service standards;
- This research contributes to the general administration and finance section, especially the planning, general and personnel sections, the medical and nursing services sector, the support services sector as well as all employees at Maria Walanda Maramis Regional Hospital.

5. SUGGESTION

For Maria Walanda Maramis Regional Hospital, in the future, the implementation of Non-ASN Employee Recruitment will hopefully be able to make changes to the implementation process.

- Accept applications via POS and Website to reach more applicants
- Hold a written test to select applicants
- Hold skills tests for applicants with certain professions to produce competent new employees
- Hold interviews individually, not in groups, so you can get to know the applicant's character better.

6. RECOMMENDATION

Furthermore, the author recommends that Maria Walanda Maramis Regional Hospital continues to develop the services available at the hospital by assessing every future risk and looking at opportunities that may occur and implementing risk management so that Maria Walanda Maramis Regional Hospital can continue to develop and advance to become a hospital that has Excellent and quality service in accordance with minimum service standards. Widyatmojo (2021)

The adverse event factors identified by the author are in accordance with the conditions that occurred at Maria Walanda Maramis Regional Hospital, so the author suggests that other research can be carried out in other organizations with different time periods so that new things can be discovered in the future along with developments and policy changes. Zulmawan (2019)

7. APPENDICES

1) Research Informant Data

The suitability of the informants is selected based on their relationship, position and experience in work assignments related to the research. The number of informants is adjusted to research needs. In this study, the informants consisted of 4 (four) informants with age and education characteristics as depicted in the following table:

Informant	Name	Gender	Position	Working time	Educational
I1	Dr. Andrea P. Ramoh	Male	Head of Medical Services Section (Recruitment Team Leader)	7 Years	Bachelor of Medicine
I2	Ns. Marlen Rondonuwu, S.Kep	Female	Head of General and Personnel Subdivision (Secretary of the Recruitment Team)	17 Years	Bachelor's Degree in Nursing Profession
I3	Dr. Anthonius Tumbol, M.Kes	Male	Head of Medical and Nursing Services (Recruitment Team Member)	17 Years	Bachelor of Medicine, Masters in Health
I4	Dr. Pricillia V. Adam	Female	Head of Support Services Division (Recruitment Team Member)	11 Years	Bachelor of Medicine

CONFLICT OF INTERESTS

None.

ACKNOWLEDGMENTS

None.

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