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**THE EFFECT OF POLICY IMPLEMENTATION OF INDEPENDENCY PUBLIC SERVICE, MEDICAL CARE SERVICES, AND LEADERSHIP ON QUALITY OF HOSPITAL SERVICES AT GOVERNMENT HOSPITAL OF CLASS A IN INDONESIA**

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**ABSTRACT**

One of the functions of government is public service, including services from the public hospitals to the community. The purpose of the study is to analyze the effect of policy implementation of independency public service, medical care services, and leadership on quality of hospital services at government hospital of grade A in Indonesia. An explanatory study by using survey approach was applied in this study. study results show influence of the implementation of the Public Service Body policy (BLU), medical care, and leadership partially and collectively towards the quality of hospital services. Conclusively the three independent variables are showing a positive and significant influence, partially as well as collectively towards the quality of hospital services. The quality of hospital services is susceptible to the changes performed by the implementation of BLU policy, medical personnel services and leadership. Referring to the value of coefficient beta, leadership variable is recorded as the main factor at 0,460-unit, medical care as the supporting factor at 0,258 unit and implementation of BLU policy as a strengthening factor at 0,180 unit. The carried research contains implications towards technical aspect, social politic, managerial and economic, also leadership aspect. The suggestion this research purposes; the implementation of BLU policy is seen as a new paradigm to public services, it should be consistently maintained and widely socialized, meanwhile hospital is seen as public services organization with intensive services, human resource, technology and capital. By rights a medical professional should professes the compulsory managerial competence in leading a public service hospital.

**KEYWORDS:** Public Service Body policy (BLU), Medical Care, Leadership, the Quality of Hospital Services.

**1. INTRODUCTION**

The World Health Organization (WHO) states that "Health is a state of physical, mental and social well-being, and not just the absence of disease or disability". In addition, it also stated "The highest standard of health is one of the fundamental rights of all human beings regardless of race, religion,

political beliefs, economic or social conditions". Health for all people is fundamental to achieving peace and security and depends on cooperation between individuals and the government (1).

The government has responsibility for the health of its people which can be met by providing welfare in adequate health and social measures (2). Persahabatan Hospital and Fatmawati Hospital as a provider of public health services have the task of providing individual health services in a complete manner and carrying out hospital functions in UU RI No. 44 Th. 2009 about hospital (3). In carrying out their duties, they still face several obstacles, especially in handling complaints and complaints from patients which include administrative aspects, aspects of medical services and nursing care. While Fatmawati Hospital also receives complaints about doctor services and communication problems between doctors and patients (4).

In line with the foregoing, Indonesian Medical Disciplinary Board (MDKI) which is an independent body within the Indonesian Medical Council, in its internal report MKDKI also receives complaints from the public regarding doctor services that tend to increase every year (5) (6). Likewise, the problem of patient complaints at the Persahabatan Hospital and Fatmawati Hospital, including aspects of management (7)(8), facilities and employee behavior including doctors and nurses as well as financing aspects.

One of the essential functions of government is service to the community in addition to other functions, namely empowerment and development (9). Government hospitals are institutions that are the spearhead of providing public services, especially health services to the community, as part of the function of government administration to the community (10).

In carrying out its main duties and functions, Persahabatan Hospital and Fatmawati Hospital must refer to the applicable laws and regulations as a Public Service Provider that is linked to government functions from a public service perspective. In addition, as a service provider institution, it must refer to the universal rules and norms of service institutions in general, and also must refer to the rules and norms of global hospitals (11) (12).

Public administration according to states that Government Science is an integral part of Political Science. Government studies the study of the relationship between governors and governed in order to achieve the goals of the state (13) (14). United Nations Development Program (UNDP) defines governance as "the exercise of political, economic and administrative, authority to manage a nation's affair at all levels" (The exercise of political, economic and administrative authority in managing the nation's problems at all levels) (15). Nine characteristics of good governance according to UNDP: (1) Participation, (2) Rule of law, (3) Transparency, (4) Responsiveness, (5) Consensus orientation, (6) Equity, (7) Efficiency and Effectiveness, (8) Accountability, (9) Strategic vision.

The implementation of policies especially regarding the implementation of Public Service Agency (BLU) policies (16). The Public Service Agency (BLU), in RI Law No.31 of 2004 concerning the State Treasury, aims to include: (1) BLU is an agency in government. (2) BLU provides services to the community by providing goods or services. (3) BLU is given flexibility in financial management patterns, (4) BLU is not seeking profit (not for profit). (5) BLU establishes activities based on efficiency and effectiveness, as well as productivity with sound business practices and must consider service quality, equity and service equality, costs as well as convenience to obtain services. Research Savas, E.S (1987) in the United States mentions that there are 10 service provider, producer and consumer relations models in his book: Privatization. The Key to Better Government, namely: 1). Government Service.2). Government Vending, 3). Intergovernmental Agreement. 4), Contract.5) Franchise, 6) Grant, 7) Vouchers, 8) Market, 9) Voluntary, 10) Self Service (17).

Republican Government Regulations Indonesia No. 32 of 1996 concerning health workers states that: (1) Health workers are everyone who has service in the field of health and has knowledge and or skills through health education where certain types require the authority to carry out health efforts. (2) Health facilities are places used to carry out health efforts (3) Health efforts are any activities to maintain and improve health done by the government and / or society (18).

Gasperz (2006: 48), states that Total Quality Leadership or Quality Leadership abbreviated is leadership that involves all employees in satisfying customers and building quality into every system and process in the organization (19). In quality management (Yukl, 1998), leaders simultaneously set the direction and goals of company quality and motivate members of the organization to progress together towards continuous quality improvement (20)(21)(22). In quality management, there is a new approach known as transformational leadership. Some important characteristics of transformational leaders needed in the dynamics of quality management improvement, are: Having a strong vision and mission; Have a map for action (map for action); Having a framework for vision (frame for the action); Have self-confidence (self-confidence); Dare to take risks (risk taking); Have an inspirational personal style; Having the ability to stimulate individual efforts; Having the ability to identify benefits (23).

Lori Di Prete Brown, et al., (2000) stated that quality is a comprehensive and multi-facet phenomenon. Quality maintenance activities can involve one or several dimensions as follows: The quality dimension is appropriate for clinical services and management to support health services (24). These eight quality dimensions can help mindset in defining problems and analyzing existing problems to measure the extent to which program standards or health service standards have been reached. The dimensions of health service quality include: technical competence; linkages to services; effective; Efficient; Continuous; Security Human Relations; Convenience.

Service Quality Dimensions (Zeithaml, et al, 1990: 26) as stated earlier, can also be applied to the quality of service in hospitals, are: Tangibles (physical evidence); Reliability; Responsiveness; Assurance; Empathy (25).

The dimensions of the quality of health services according to Lori Di Prete Brown, et al (2014) and Parasuraman (1985) suggest that the dimensions of technical competence and safety can be categorized into the reliability dimension; the dimension of human relations can be categorized into the empathy dimension; comfort dimensions can be categorized into tangibles dimensions (26) (27). It seems that the five dimensions of service quality in Parasuraman are simpler but can also include the eight dimensions of health service quality according to Lori Di Prete Brown, et al. (2014) Thomas R (1996: 275) cites Maxwell (1994,1992) that the dimensions of health service quality are: Access; Relevance to need; effectiveness; Equity; Social acceptability; Efficiency and economy (26)

The reason for choosing the object of the Persahabatan Hospital and the Fatmawati Hospital is a class A hospital that has extensive specialized and sub-specialist medical service facilities and capabilities, so that it can obtain aspects of public services (BLU), aspects of human resources and aspects of patient satisfaction. The research objective is to obtain empirical evidence about the formal implementation of public services, especially hospital services. Research contributions are recommendations for public service implementers and health policy makers in order to improve hospital services,

## II. METHOD

### 2.1 Design Research

The cross-sectional study was applied in this study to analyse causality relationship simultaneously the variables of BLU policy implementation, leadership, medical personnel services and hospital service quality. The study conducted at Persahabatan hospital and Fatmawati hospital Jakarta. Three hundred and seventeen samples were selected by using the purposive sampling. The number of samples is calculated based on Isaac & Michael table with with significant level 5%.

Continuous data describes the pattern of data in mean and standard deviation. Kolmogorov test was tested for normality test. The multiple linear regression analysis techniques were used to examine the relationship between the BLU policy implementation, leadership, medical personnel services and hospital service quality.

### 2.2 Instruments

Data collection using a questionnaire. The questionnaire was examined by experts through content validity and conducted initial validity and reliability testing of 30 respondents. The questionnaires were 1) Questionnaire of Implementation of Public Service Agency Policies; 2) Medical Personnel Services questionnaire; 3) Leadership questionnaire Implementation of Public Service Agency Policies. Questionnaire was Implementation of Public Service Agency Policies was used to measure the Implementation of Public Service Agency; and 4) Hospital Service Quality Policies. The questionnaire was developed by the researcher. Reliability analysis showed Cronbach's alpha value of 0.88, and it was accepted because it was reliable. The Medical Personnel Services questionnaire was developed to

measure the Medical Personnel Services. The questionnaire was developed by the researcher. The internal consistency showed Cronbach's alpha value of 0,891. The Medical Personnel Services questionnaire was 5-likert scale consisted of strongly agree=5, agree=4, doubtful=3, not agree=2, and disagree=1

The leadership questionnaire was used to measure the leadership style of health care providers to provide medical services. The leadership questionnaire was developed by the researcher. The internal consistency showed Cronbach's alpha value of 0,926. The leadership questionnaire was 5-likert scale consisted of strongly agree=5, agree=4, doubtful=3, not agree=2, and disagree=1

Hospital Service Quality questionnaire was used to measure the quality of hospital service quality. The questionnaire was developed by the researcher. The internal consistency showed Cronbach's alpha value of 0,921 and it was accepted because it was reliable. The Hospital Service Quality questionnaire was 5-likert scale consisted of strongly agree=5, agree=4, doubtful=3, not agree=2, and disagree=1

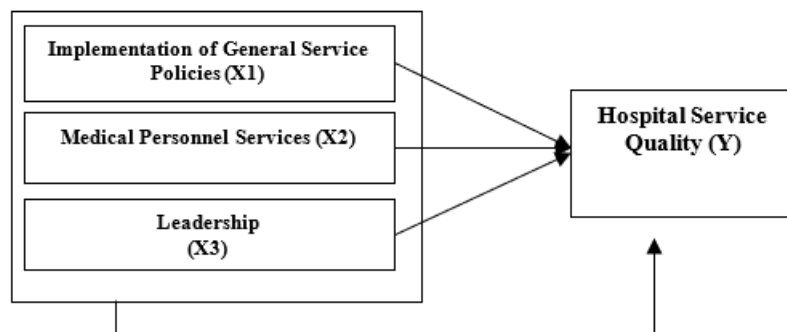


Figure 1. Research Model

### 2.3 Ethical consideration

The Satyagama University Ethics Review Committee has approved this study. Informed consent was obtained from each participant who willing to participate in this study

### 2.4 Research Hypothesis

Based on theoretical studies and empirical results, the hypotheses developed are as follows:

H1: Implementation of general service policies, Medical Personnel Services and Leadership effect simultaneously on the Quality of Hospital Services.

H2: Implementation of general service policies effect positively on the Quality of Hospital Services.

H3: Medical personnel services policies effect positively on the quality of hospital services.

H4: Leadership effect positively on the quality of hospital services.

### III. RESULTS

3.1 The relationship between BLU policy implementation, leadership, medical personnel services and hospital service quality

Table 1 showed the linear regression model to relationship between BLU policy implementation, leadership, medical personnel services and hospital service quality. R2 statistic is the proportion of the variance parameter to the yield parameter in the regression model. Thus, R2 role as a measuring tool is to explain how much BLU policy implementation influenced by leadership, medical personnel services and hospital service quality. As the R2 increases with the additional variables in a regression model, which means that the accuracy of the model to predict BLU policy implementation value increases.

**Table 1. Result of R2 in Regression Model**

Independent variables	R <sup>2</sup> (%)
Leadership	53
medical personnel services	41.1
hospital service quality	35.5
R	77,2
R square	59,6
Adjusted R Square	59,3

#### 2.2. Determining how well the model fits

Table 1 showed the model summary to determine the model fits. The value of 0.77 indicated a good level of prediction for BLU policy implementation. The the R Square value of 0.596. It was indicated that hospital service quality was influenced by 59.6% of the implementation of the Public Service Body policy

**Table 2. F test and multiple regression**

Variable	F value	Sig.	F <sub>table</sub> (α=0,05)
Implementation of general service policies (X1), Medical personnel services (X2) and Leadership (X3)	154,227	0,001	2,62

Based on the results of table 2 above, the F count value is 154.227 and the F table value with a numerator-free degree 3 and the denominator 314 at  $\alpha$  (0.05) 2.62, then  $F_{\text{count}} > F_{\text{table}}$  so that  $H_0$  is rejected and  $H_a$  is accepted, which means the implementation of BLU policy, medical personnel, and leadership has a real effect. Likewise, if the F count value of 154.227 (Sig. > 0.000) shows that the variable Implementation of public service policies (X1), Medical personnel services (X2) and Leadership (X3) significantly affect the quality of hospital services.

#### Linear Regression Equations

$$\hat{Y} = a + b_1X_1 + b_2X_2 + b_3X_3$$

$$\hat{Y} = 0,491 + 0,180X_1 + 0,258X_2 + 0,460X_3 \text{ or}$$

$$\text{Hospital service quality} = 0,491 + 0,180 \text{ implementation of public service agency policies} + \\ 0,258 \text{ medical personnel services} + 0,460 \text{ leadership}$$

#### IV. DISCUSSION

The hospital service quality variable is quite sensitive to changes caused by the variable implementation of BLU policy, medical personnel and leadership services. The leadership variable is the main factor influencing the quality of hospital services with a value of 0.460 units, while the supporting factor is the service variable of medical personnel with a value of 0.258 units, while the reinforcing factor is the variable implementation of BLU policy with a value of 0.180 units.

H1: Implementation of general service policies (BLU), Medical Personnel Services and Leadership have a simultaneous effect on the Quality of Hospital Services.

Based on hypothesis testing, it shows the results of an F value 154.227 (Sig. > 0.000) shows that the implementation of BLU policies, medical personnel services, leadership together have effect on the quality of hospital services. These results show the value of the R Square value of 0.596 (59.6%) that 59.6% of the quality of hospital services is influenced by the implementation of BLU policies, medical personnel services, leadership together, while the rest (40.4%) is explained by variables. other.

From the results of the discussion of the variable implementation of the BLU policy, medical personnel services and leadership, each of which individually had a significant influence in a positive direction on the quality of hospital services and could explain the effect on the quality of hospital services, each of which amounted to: BLU policy implementation. 35.5%, medical personnel service 41.1%, and leadership 53%. While the rest is explained by other variables. However, the hospital performance indicator shows a HEALTHY performance (AA). In this case there is a difference between the influence variable independent on the quality of hospital services and the fact that the hospital's

performance is HEALTHY (AA). This is also possibly due to the fact that there are still many variables not examined in this study which may have a positive influence on hospital services, for example Men, Money, Materials, Machines and Mechanization, Modern Information Method, Markets, Motivation and Mounting Product Requirements; which was not done in this study.

These results indicate that the implementation of BLU policies, medical personnel services, leadership together provide a positive and significant role in the quality of hospital services, where the more effective the implementation of BLU policies, medical personnel services, leadership together will improve the hospital service quality.

H2: Implementation of general service policies has a positive effect on the Quality of Hospital Services.

There is a significant positive effect on the variable implementation of public service agency policies on the quality of service at the class A government central public hospital (RSUP) in Jakarta. These results show that the implementation of the BLU policy has a positive and significant role in the quality of hospital services, where the more effective the implementation of the BLU policy will improve the quality of hospital services.

These results are indicated by the attitude of respondents that the hospital provides health services that aim to improve general welfare, provide better services to patients, provide individual health services, meet service development needs both in number and qualifications, function to receive referrals from outside both patient referrals, materials inspection as well as science and technology, fair and equitable services, services to the poor / poor.

Class A Government Hospital (RSUP Persahabatan and RSUP Fatmawati) as the implementer of public policy for public service agencies that provide services for the community by providing goods and / or service without priority seeking profit in operational activities based on the principles of productivity and efficiency, in accordance with Law No. 31/2004 concerning State Treasury and PP RI No. 23/2005 on BLU financial management. Which must also refer to other laws including Law No.25 / 2009 concerning public services, Law of the Republic of Indonesia no. 36/2009 on health and RI Law no. 44/2009 on hospitals. Hospital BLU services must also refer to the principles of Good Governance, namely Participation, Rule of Law, Transparency, Responsiveness, Consensus Orientation, Equity, Efficiency and Effectiveness, Accountability, Strategic Vision. The implementation of this BLU policy is one of the functions of government, namely the implementation of services which is an effort to make it easier for the community to use their rights and obligations.

H3: Medical personnel services have a positive effect on the quality of hospital services.

There is a significant positive effect from medical personnel service variables on the quality of service at the class A government central public hospital (RSUP) in Jakarta. These results indicate that medical



personnel services provide a positive and significant role in the quality of hospital services, where the more effective medical personnel services, the better the quality of hospital services.

The results of the study were supported by the respondent's attitude that the action and administration of drugs (writing prescriptions) were appropriate in the context of healing efforts; fast and appropriate action in overcoming an emergency situation (emergency); patients understand before taking medication / action; obtain patient consent before taking medication / action; behave respectfully and politely towards patients in order to gain trust; respond seriously to patient complaints about the services provided and what the patient feels is inappropriate; provide information as clearly as possible about the condition of the patient and the services that have been provided; write a complete report on everything regarding the patient's condition and the services provided (medical records); as well as being honest and open with patients about the problem of financing, the possibility of cure and the prognosis of the disease.

Although medical personnel in operational performance and service quality performance make a dominant contribution, there are still many other human resources in hospitals that provide services, this is seen in Government Regulation No. 32/1996

H4: Leadership has a positive effect on the quality of hospital services.

There is a significant and positive influence from leadership variable on the quality of service at the class A government central public hospital (RSUP) in Jakarta. These results indicate that leadership provides a positive and significant role in the quality of hospital services, where the more effective the leadership, the better the quality of hospital services.

The results of the study were indicated by the attitude of the respondents that leaders have high morals and ethics which are felt by their employees and patients; the ability to mobilize and encourage the performance of its employees; be a role model for their employees; generate morale, discipline and punctuality in serving patients; present when needed by employees and ready to help; as well as giving awareness to employees that working as part of a comprehensive service system in the hospital. This result means that the quality of hospital services is quite sensitive to changes in leadership variables. The leadership variable is the main factor affecting the quality of hospital services. It can be explained that the leadership factor, which is the core in management, can affect the effectiveness of the hospital, because of its leadership policies and functions (28) (29) (22).

Seeing these functions, leadership can make decisions / policies that can affect all aspects of activities within the hospital, because the effects can have an impact on the overall performance of the hospital. The results showed that leadership has a significant positive effect with role of 53% on the quality of hospital services, while the remaining 47% is explained by other variables. It can also be seen from

the order of the beta coefficient values among the variables that affect the quality of hospital services, leadership is the main factor that affects the quality of hospital services.

## V. RESEARCH FINDINGS

This study is difference with the other studies in leadership influence dominantly on hospital service quality. Leadership is as primary factor to affect hospital service quality. The findings of the researchers is the effectiveness of leadership as motivation to enhance for hospital employee to give service quality with better. This is conducted with the Hospital Vision as general service policies (BLU) for character strength in the hospital.

## VI. CONCLUSION AND RECOMMENDATION

The research results show both simultaneously and partially between Implementation of general service policies, medical personnel services, and Leadership have a positive and significant effect on hospital service quality. These results indicate that the implementation of BLU policies, medical personnel services, leadership together have a positive and significant role in the quality of hospital services. Thus, if the implementation of BLU policies, medical personnel services, leadership are carried out effectively, it will improve the quality of hospital services.

The recommendation from the research results is that leaders must create conditions for employees to excel; managerial bilateral meetings to discuss punishments and rewards; the hospital created a reward system for employee performance and improve employee by training and skills development so employees will be motivated to get achievements at work.

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