

Exploration of Hospital Accreditation Process and Readiness of Health Workers in Facing Change (Readiness for Change)

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ABSTRACT : Hospital accreditation is a key effort to enhance the quality of health services and ensure compliance with patient safety standards. This study explores the readiness of health workers to face change during the accreditation process at Sentra Medika Langut Hospital. Utilizing a qualitative phenomenological approach, the study involved in-depth interviews with health workers including doctors, nurses, midwives, and hospital management. The findings revealed that readiness for change is influenced by managerial support, continuous training, and motivation. Leadership support fosters a conducive environment for change, training equips workers with necessary competencies, and motivation promotes proactive adaptation. The accreditation's impact includes enhanced service quality, patient satisfaction, operational efficiency, and profitability. This study concludes that successful accreditation depends not only on meeting administrative standards but also on human resource readiness. Hence, strategies for quality improvement must integrate regulatory compliance, human resource development, and technological innovation to ensure sustainable accreditation.

KEYWORDS: Change Management, Hospital Accreditation, Health Workers, Quality Service, Readiness For Change.

1. INTRODUCTION

Health service facilities are institutions that provide healthcare services to the community through promotive, preventive, curative, rehabilitative, and/or palliative efforts, implemented by both the community and the government at central and regional levels. Hospitals, as defined by the President of the Republic of Indonesia (2023), are healthcare facilities that offer inpatient, outpatient, and emergency care services. As secondary-level healthcare facilities, hospitals deliver comprehensive individual healthcare services, including specialized care provided by medical or dental specialists using advanced medical knowledge and technology (Ervianingsih et al., 2020; Ministry of Health of the Republic of Indonesia, 2020). Healthcare services play a crucial role in maintaining and improving public health and are facilitated by various institutions, including hospitals. In an era marked by intense global competition, hospitals must continuously evolve, necessitating effective management strategies and policies to ensure their sustainability and competitiveness (Andriana et al., 2025). Hospitals, as one of the advanced health facilities, play a crucial role in providing medical services, ranging from inpatient, outpatient, to emergency (President of the Republic of Indonesia, 2023). However, along with technological developments and tight competition among health facilities, hospitals are required to continue to improve the quality of their services, one of which is through accreditation.

Hospitals represent a key component in efforts to improve public health. In the current era of rapid technological advancement, changes and developments are occurring at an accelerated pace, leading to increased competition among healthcare facilities, both public and private. One of the strategies to enhance the quality of hospital services is through the implementation of accreditation (RSUD dr. Soedono Madiun, 2020). Hospital accreditation serves as a mechanism for monitoring hospital performance, ensuring that the services provided meet established standards (Putra, 2024). According to the Ministry of Health of the Republic of Indonesia, by the end of 2021, a total of 3,120 hospitals had been registered nationwide. However, only 78.8% (or 2,482 hospitals) had achieved accreditation, leaving 638 hospitals unaccredited (Ministry of Health of the Republic of Indonesia, 2022). Hospital accreditation is one way to assess the quality and quality of hospital services. Sentra Medika Langut Hospital as a health service provider Although so far as a referral hospital for primary (basic) services from the Health Center and Clinic, excellent services for medical services and nursing services have not been so prominent. Efforts to improve human resource capabilities have been carried out, especially increasing the level of education, while still limited to the level of diploma III health education and S1 Nursing, as well as sharing training for medical and non-medical personnel, but in the implementation it has not been systematically programmed to support the main program and main tasks and functions of the hospital (Sentra Medika Hospital Strategic Plan Document 2024). In achieving



the success of a hospital's accreditation, there are several factors that support this, such as human resources (HR), hospital budget, accreditation socialization and standard operating procedures and supervision (Trisna et al., 2021). The human resources owned by the hospital are one of the important factors in increasing hospital accreditation because they have a dominant role in patient care. Implementation of hospital accreditation standards must involve all employees (Daminggo et al., 2022).

The human resources owned by the hospital are one of the important factors in increasing hospital accreditation because they have a dominant role in patient care. The implementation of hospital accreditation standards must involve all employees (Daminggo et al., 2022). This is in line with research which states that one of the positive impacts of accreditation is increasing the knowledge and skills of hospital staff as a form of meeting service standards in improving hospital accreditation (Phonna et al., 2021). Manzo (2012) stated in a journal that the implementation of accreditation standards encourages changes in higher quality hospital services and increased cooperation between professional disciplines in patient care (David et al., 2021). In line with research which states that the results of the implementation of Hospital accreditation have an impact on various changes, one of which is in Human Resources (HR) (David et al., 2021). An important factor in success in making changes is the individual's readiness to change (readiness for change) (Rizky & Dwarawati, 2023).

The importance of accreditation is not only in fulfilling regulations, but also as a benchmark in assessing the quality of services that have a direct impact on patient safety. Only 78.8% of the total hospitals in Indonesia have been accredited (Ministry of Health of the Republic of Indonesia, 2022), and this shows that there are still major challenges for hospitals that have not met these standards. This further underlines the importance of human resource (HR) readiness in facing the change process needed to achieve accreditation. Readiness for change, or readiness to change, is one of the determining factors for the success of accreditation, especially in responding to changes that occur in hospital organizations (Rizky & Dwarawati, 2023). This readiness is characterized by a proactive attitude towards change, where individuals not only accept the need for change but also actively support and are involved in the change process (Djide, 2022).

There are several factors that can influence Readiness for change in employees in health institutions, namely subjective career success, leadership behavior, and age (Al-Hussami et al., 2018). Previous research conducted in Canada concluded that organizational readiness is a key factor involved as initial support for health workers for initiatives in terms of clinical information systems (Pare et al., 2011). Sentra Medika Langut Hospital is a type D private hospital that was fully accredited by the end of 2023. In the RENSTRA Document, Sentra Medika Langut Hospital has a hospital development plan to provide services and community welfare in the next 3-5 years in the form of upgrading the hospital class to type C.

Achieving hospital accreditation is a complex process that requires the fulfillment of numerous criteria and the implementation of substantial institutional improvements. This has prompted the author to examine the accreditation process in relation to the readiness for change among healthcare workers at Sentra Medika Langut Hospital in delivering health services. Sentra Medika Langut Hospital (SML), classified as a Type D hospital, successfully attained full accreditation at the end of 2023. However, it continues to face challenges in enhancing the quality of healthcare services in alignment with the standards required for the planned Type C accreditation (SML Hospital Strategic Plan Document, 2024). Data on healthcare personnel at SML Hospital indicate that the number of human resources in several categories remains limited compared to the ideal staffing levels necessary to meet accreditation standards.

When compared to the standard requirements for healthcare personnel in hospitals serving patients with diverse medical conditions, the number of specialist medical professionals and support staff remains relatively limited. This shortage poses a significant challenge in meeting accreditation standards, particularly in relation to the availability of optimal medical services, adherence to patient safety protocols, and effective interprofessional coordination. Consequently, it is essential to conduct evaluations and develop strategic efforts to strengthen human resources both through the recruitment of additional healthcare workers and the enhancement of existing staff competencies to ensure optimal readiness for accreditation. At Sentra Medika Hospital Langut Indramayu, the limited number of healthcare workers not only hampers the fulfillment of accreditation standards but also affects the readiness of health workers to undergo change. The accreditation process demands adaptation to various improvements, including service standards, documentation systems, and the implementation of stricter patient safety policies. In this context, workforce limitations may act as a barrier to change readiness, as high workloads and insufficient personnel can reduce the capacity for flexibility and responsiveness to new standards. Based on the aforementioned conditions, this study aims to explore the readiness for change among healthcare workers in the accreditation process at Sentra Medika Hospital Langut Indramayu.



2. LITERATURE REVIEW

Hospital Accreditation

Hospital accreditation is a formal recognition granted to healthcare institutions that have met established standards and regulations, as determined by the government (Regulation of the Minister of Health of the Republic of Indonesia, 2020). All healthcare service facilities (Fasilitas Pelayanan Kesehatan/FPK) are mandated to continuously improve the quality of healthcare services through both internal and external efforts (President of the Republic of Indonesia, 2023). Accreditation involves a systematic evaluation of a healthcare organization's adherence to predefined performance standards, with the ultimate objective of enhancing service quality. Numerous leading international health organizations recognize accreditation as a credible indicator of healthcare quality and have emphasized its role in improving both organizational and clinical performance (Hussein et al., 2021).

Accreditation refers to a review that evaluates a healthcare organization's compliance with predetermined performance standards with the ultimate goal of improving the quality of healthcare services. Several leading international healthcare organizations have viewed accreditation as a valid marker of quality and discussed the effectiveness of using accreditation standards as a tool to improve organizational and clinical performance (Hussein et al., 2021).

Readiness for Change

Readiness for Change refers to an individual's or organization's positive attitude, belief, and mindset in facing change, indicating a perceived ability to adapt to new conditions (Budiani et al., 2020). It also reflects the tendency to accept change, which plays a critical role in the success of organizational transformation. When readiness levels are high, the acceptance and implementation of change are generally more effective. Conversely, low readiness may necessitate preliminary interventions to enhance the preparedness of those affected by the change (Dewanti & Ginanjar, 2023).

Individual readiness for change is the employee's/officer's perspective regarding the need for organizational change with acceptance of change and the extent to which employees believe that the change will benefit employees/officers and the organization (Haffar et al., 2019). Hanpachern et al. (1998) explained that individual readiness for change is the mental, psychological and psychological readiness of employees as a form of their willingness to participate in improving and developing the organization, this is very important because it is a determining factor in the success of organizational change (Nurmayanti, 2021).

Health workers

Health workers are people who have completed formal and non-formal education so that they have knowledge and skills in the health sector to improve public health (Fadhillah et al., 2019). Health workers themselves in Law of the Republic of Indonesia number 17 of 2023 are defined as anyone who devotes themselves to health and has a professional attitude, knowledge, skills, obtained from higher education which for certain types has the authority for health efforts. Everyone who has knowledge and skills obtained after completing education in the health sector to carry out health efforts as a form of dedication to health is a health worker (Komnas HAM, 2021).

Health services

Health services are initiatives undertaken by the government with the objective of improving public health outcomes (Arifin et al., 2022). These services encompass efforts carried out individually or collectively within organizations to prevent disease, promote health, and restore community well-being (Mustofa et al., 2020). According to Indonesian Government Regulation No. 47 of 2021 concerning the Implementation of Hospital Midwifery, health services are classified into general hospitals and specialized hospitals. The classification of hospital types is determined based on the scope of services provided, the availability of healthcare and supporting facilities, as well as the qualifications and quantity of human resources.

Lewin's Theory of Change

Lewin's Theory Model explains how to initiate, manage, and stabilize the change process. In this model, there are 3 (three) stages in the change process, namely unfreezing, movement, and freezing. Based on this model, the change process requires the elimination of existing behaviors and attitudes and the learning and adoption of new attitudes. The first stage in the behavior change process is called unfreezing, the problems or issues that arise are explained and communicated to the individual so that the need and importance of change can be understood and accepted. This phase requires individual encouragement to discard old attitudes and behaviors by convincing the individual that change needs to occur (Almaamari et al., 2018). Lewin's second step in the change process is movement, which involves changing desired attitudes and behaviors, because old behaviors have been unlearned and discarded,

individuals are ready for new behaviors and change perspectives. This step is a learning stage where new information, models, and values are provided in order to operate effectively in such situations. Refreezing is the final step in the behavior change process. In this phase, new attitudes, values, and behaviors are stabilized to ensure that new ways of operating are reinforced and sustainable. The fit between new behavior and organizational traditions needs to be ensured because without fit, new behavior is likely to die out. Refreezing can be achieved by reinforcing the new situation through formal mechanisms such as policies, procedures, rules and regulations (Almaamari et al., 2018).

Weiner's Theory of Change

The Organizational Readiness for Change theory in the approach (Weiner, 2009) explains that there are 5 factors that can influence change, namely organizational culture, policies and procedures, past experiences, organizational resources, organizational structure that influence Change Valence and Informational Assessment.

Conceptual Framework

The conceptual framework of research is needed as a basis for thinking to conduct a research that is developed from the theoretical review that has been discussed previously. The conceptual framework is basically a framework that connects the concepts that are to be observed or measured in this research (Soekidjo, 2010).

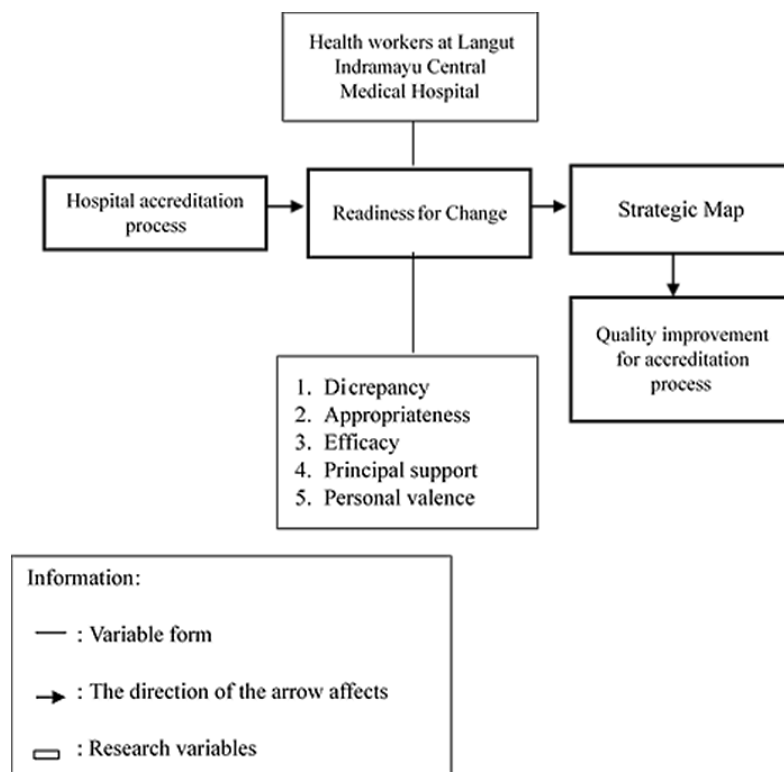


Figure 1 Conceptual Framework

The chart presented illustrates that healthcare workers experience significant changes as a result of the hospital accreditation process, which in turn compels the institution to implement various organizational changes. This transformation process necessitates a high level of readiness for change among all hospital personnel to ensure successful adaptation and implementation.

3. METHODOLOGY

This study employs a qualitative design with a phenomenological approach. Phenomenological research is a scientific method that explores and investigates events or experiences encountered by individuals or groups. This approach was selected to gain a comprehensive understanding of the relationship between the hospital accreditation process and healthcare workers' readiness for



change in delivering health services. Additionally, the study collects and utilizes data from predetermined research participants, ensuring the acquisition of in-depth and meaningful insights.

This study was conducted at the Sentra Medika Langut Hospital in Indramayu, West Java. This location was chosen because the Sentra Medika Langut Hospital is a type D private general hospital that has been fully accredited. Meanwhile, the time of the study was conducted in October - November 2024. The informants in this study were health workers involved in the accreditation process, including: 1) One Director of PT RS Sentra Medika Langut, 2) One Director of Sentra Medika Langut Hospital, 3) One Internal Audit Unit (SPI) of the hospital (kars member), 4) One Head of Nursing, 5) One Head of General and HR, 6) One Member of the Hospital Quality Committee, 7) Two general practitioners practicing at Sentra Medika Langut Hospital, 8) Two nurses consisting of the head of inpatient care, and the head of the IGD (emergency installation) nurse, and 9) Two midwives consisting of the head of the VK room (verlos kamer) midwife, and the functional / implementing field. The selection of samples in this study used a purposive sampling technique, namely by determining individuals who would become informants with certain criteria and related to the research topic.

The data collected in this study are primary data and secondary data. Primary data were obtained through in-depth interview guides containing open-ended questions regarding the readiness for change of health workers in providing health services and the readiness of hospitals in facing the accreditation process. Secondary data in this study were obtained from document reviews. with in-depth interview guides containing open-ended questions regarding the readiness for change of health workers in providing health services and the readiness of hospitals in facing the accreditation process. Secondary data in this study were obtained from document reviews. Before the interview process was carried out, the subject or resource person would be given informed consent which aims to obtain permission from the subject to conduct research. In the documentation process during the interview, the researcher used voice recording media and field notes to assist the researcher in documenting the in-depth interview activities. The results of the in-depth interview were then documented in the form of transcripts and coding was carried out. Data analysis in this study was carried out in a qualitative descriptive manner by presenting the results of the in-depth interview narratively.

4. RESEARCH RESULT

The results of this study are presented based on themes and subthemes that emerged from the analysis of interview data with healthcare workers. These findings illustrate the readiness of healthcare workers to face changes during the accreditation process, the factors influencing their readiness for change, and the strategies implemented by hospitals to support this process.

Readiness of Health Workers in Facing Accreditation Changes

The results of this study reveal various perceptions of health workers regarding hospital accreditation and the changes they face. Most informants stated that the accreditation process went smoothly despite facing various challenges. All parties in the hospital, from security personnel to management, played an active role in ensuring the success of accreditation.

a. Health Worker Perception

In the sub-theme of health workers' perceptions of change, most informants considered that the changes that occurred needed to be made to align hospital standards with applicable accreditation standards. This change was also considered useful in improving the quality of hospital services, including in terms of patient safety and health workers' professionalism. Informants also emphasized that they were ready to face changes in policies and procedures in the future because change is an inevitable part of the health service system.

b. Challenges and Obstacles

This study also found various challenges and obstacles in the accreditation process. Several informants revealed that hospitals still have limitations in terms of facilities, infrastructure, and fulfillment of administrative requirements before accreditation is implemented. In addition, the lack of initial understanding of accreditation requirements is an obstacle for hospitals in preparing themselves optimally. Limited resources, both in terms of governance and information technology, are also challenges that need to be resolved. Nevertheless, the hospital continues to seek strategies that allow accreditation standards to be met according to the hospital's capabilities without burdening its operations.

c. Team Coordination

In terms of team coordination, this study identified strategies implemented in facing the accreditation process. Hospital management routinely holds weekly evaluation meetings to monitor the progress of accreditation, where all unit heads are involved in discussions related to the strategies implemented. The top-down approach in coordination is the main mechanism in ensuring that each part of



the hospital understands and carries out its duties in accordance with the established standards. In addition, the existence of guidelines and guidelines from hospital management also helps health workers prepare themselves for the changes that occur. All of these strategies show that the success of accreditation depends on the active involvement of all elements of the hospital in carrying out their respective roles and responsibilities effectively.

Accreditation Process of Sentra Medika Langut Hospital

The accreditation process in new hospitals post-pandemic is carried out in a series of stages involving various parties. In the initial stage, a comparative study was conducted to other accredited hospitals to understand the needs that must be prepared in the accreditation process. After that, the hospital registered with an accreditation institution, where several institutions were considered before finally selecting the Hospital Accreditation Committee (KARS) as the institution that would assess the accreditation. In addition, the hospital accreditation process also refers to the Minister of Health Regulation (PMK) Number 20 of 2020, which requires hospitals to undergo accreditation every four years. Accreditation is also a requirement for hospitals to be able to cooperate with BPJS Kesehatan. Therefore, the preparations made include all lines involved, including the board of directors, hospital management, medical and non-medical personnel, as well as patients and families. The hospital also formed an internal accreditation team involving all medical and non-medical personnel, with support from the company that oversees the hospital.

Key Factors Influencing Readiness for Change

The results of this study identify key factors that influence readiness for change in the hospital accreditation process, which include managerial support, training, and motivation for health workers.

a. Managerial Support

Support from hospital leadership is a critical factor influencing organizational readiness for change. Informants revealed that leaders are directly involved in the accreditation process by involving all stakeholders, from unit heads to other staff. In addition, moral support is also provided through an evaluation mechanism for each input from staff, so that the accreditation process can run smoothly. This support is not only in the form of policy, but also in the form of routine coordination through periodic meetings involving all fields. Informants also emphasized that leaders demonstrate commitment to change by ensuring that facilities and infrastructure are well prepared and supporting the development of the hospital to increase its status from type D to type C.

b. Training

Preparation of health workers in facing changes is also supported by training provided by management. Informants emphasized that the accreditation process encourages health workers to update their insights through literacy related to hospital safety standards and patient safety-based services. In addition, formal training is also provided, such as additional training for nurses and midwives who work directly with patients, as well as for health workers in special units such as perinatology and central surgery. This effort aims to ensure that all health workers have adequate competence to face changes in service standards set out in accreditation.

c. Providing Motivation to Health Workers

Motivation for health workers is also an important aspect in readiness for change. Informants revealed that building a solid team and having one perception is the main key in facing change. Brainstorming is carried out periodically to align the vision and increase confidence in undergoing the accreditation process. In addition, leaders also provide motivation by providing direction and supervising the evaluation of the implementation of accreditation standards. This effort helps health workers to be more confident in facing change and ensures that the entire process runs in accordance with applicable provisions.

Overall, readiness for change in hospitals is influenced by the synergy between managerial support, competency strengthening through training, and continuous motivation for health workers. The combination of these three factors creates an environment conducive to change, so that hospitals can develop according to established standards.

Post Accreditation Impact

a. More Organized Management

The accreditation process has a significant impact on hospital management by creating more systematic and standardized governance. Informants revealed that accreditation provides a clearer direction in hospital management with the standards that must be met. This standardization is not only an addition, but also the main guideline in achieving hospital goals. With standards that are in line with the accreditation system, the quality of service is more guaranteed. Accreditation also plays a role in evaluating the suitability of standards that have been applied with applicable accreditation standards. In addition, the hospital's vision and mission

have changed as part of adapting to accreditation demands. This process makes the hospital have a more focused vision and mission that is in accordance with the objectives of accreditation. In addition to changes in the governance system, another impact of accreditation is the increased understanding and role of human resources (HR) in the hospital. The implementation of Key Performance Indicators (KPI) also began to be applied after accreditation to assess employee performance more systematically, including aspects of discipline, skills, and compliance with training programs and internal policies.

b. Improved Service Quality, More Organized Management

Improved service quality is another significant impact of accreditation. The standardization applied in accreditation becomes the main guideline in providing services to patients, so that hospitals must ensure that all service procedures meet the established standards. This impact is clearly visible in service procedures, where each stage of service is now more systematic and follows Standard Operating Procedures (SOP). In addition to improvements in service procedures, accreditation also contributes to patient safety. This also has a positive impact on hospitals, because it improves the reputation and public trust in the quality of services provided. The long-term impact of accreditation is increased discipline in dealing with changes that continue to occur in the health care system. Hospitals are better prepared to face new trends and regulatory changes that may emerge in the future. The application of the concept of good governance in hospital governance is also increasingly visible after accreditation, with improvements in management and the implementation of more transparent and accountable policies. All of these changes ultimately improve the quality of services provided by hospitals to patients and strengthen overall hospital governance.

c. Patient Satisfaction

The results of this study indicate that the hospital accreditation process has a significant impact on patient satisfaction. Based on interviews with informants, after accreditation, the number of patient visits increased consistently every month. In addition, the evaluation of patient satisfaction conducted by the quality committee showed that the level of patient satisfaction was above 90%. The main factor contributing to this increase was the increasing trust of patients in the services provided. In addition, trust from external parties such as referrers and insurance companies also increased. Accreditation also has a long-term impact in the form of increasing public interest in hospitals and increasing the hospital's reputation as a trusted health facility.

d. Increase in Hospital Profit

Accreditation also has an impact on increasing hospital profits. Improving the quality of services that are oriented towards quality and patient safety attracts more patients to seek treatment. Informants stated that the implementation of accreditation standards contributes to service efficiency and provides significant benefits to hospitals. Other factors that support this improvement are friendlier, more professional services, and in accordance with established procedures, which make patients feel appreciated and treated well.

e. Solid Teamwork

Accreditation also brings changes in the aspect of teamwork in the hospital environment. Informants revealed that teamwork has become more solid because from the preparation stage to the implementation of accreditation, all elements in the hospital work collectively. In addition, the existence of key performance indicators (KPI) provides motivation for health workers to maintain the quality of their work, because individual performance will affect the overall team assessment. Thus, accreditation not only improves the quality of service but also forms a better culture of cooperation in the hospital.

Hospital Quality Improvement Strategy for Re-accreditation

The results of the study indicate that the strategy for improving hospital quality for re-accreditation is carried out with various approaches, including compliance with regulations, improving service quality, operational efficiency, human resource development, utilization of technology, and expansion of medical services. The main strategy in maintaining accreditation standards is to adhere to the regulations set by the health authorities. In addition to compliance with regulations, hospitals also emphasize improving service quality. This is done through synergy between fields to reduce the risk of medical errors, improve communication and education to patients, and improve the comfort of the facilities and infrastructure available.

Human resource development is an important factor in quality improvement strategies. Hospitals strive to increase the capacity of medical and non-medical personnel through training, education, and staff development. In addition, the use of technology is a key strategy in improving health services. Implementation of a hospital information system is one of the steps taken to improve administrative efficiency, accelerate the service process, and improve communication and coordination between units. Hospitals

also continue to develop and add services to meet the needs of the community. With these additional services, it is hoped that hospitals can increase competitiveness and maintain public trust.

Overall, the hospital quality improvement strategy for re-accreditation includes a multidimensional approach involving regulatory compliance, service quality improvement, operational efficiency, human resource development, technology utilization, and medical service expansion. This approach aims to maintain accreditation standards, improve patient satisfaction, and ensure that the hospital remains competitive in providing quality health services.

Discussion

Readiness of Health Workers in Facing Changes During the Process Accreditation (Readiness For Change)

The results of this study reveal various perceptions of health workers regarding hospital accreditation and the changes they face. Most informants stated that the accreditation process went smoothly despite facing various challenges. All parties in the hospital, from security personnel to management, played an active role in ensuring the success of accreditation. Accreditation is considered a process that brings change for the better, both for employee and patient safety. Health workers acknowledge that these changes require them to continue updating their literacy and skills, especially in understanding hospital safety standards. Despite feelings of doubt, health workers continue to strive to develop and adapt.

Most informants considered that the changes that occurred needed to be made to align hospital standards with applicable accreditation standards. These changes were also considered useful in improving the quality of hospital services, including in terms of patient safety and the professionalism of health workers. Informants also emphasized that they were ready to face changes in policies and procedures in the future because change is an inevitable part of the health care system. This is in line with research conducted by Al-Sayedahmed (2023) which stated that the overall analysis showed a positive perception of the benefits of accreditation among health care employees (as indicated by participation in accreditation activities and/or preparation for survey visits) and was reflected in the dimensions of quality and safety of patient health services.

Similar research results were also found in a study conducted by Katoue et al. (2021) which stated that health workers indicated that accreditation improved the patient safety culture in their organization through staff compliance with good practices, improved documentation and patient handover practices, and incident reporting. A good perception of the accreditation change process can improve the smoothness of the accreditation process because health workers who have a positive view will more easily accept and implement the established standards. When health workers understand the benefits of accreditation for improving service quality, they tend to have higher intrinsic motivation to participate in the accreditation process, including participating in training, implementing updated SOP, and increasing compliance with patient safety standards (Basarah et al., 2022). Research by Clarke et al. (2022) shows that health workers who have a positive perception of accreditation tend to be more collaborative in carrying out their duties, which ultimately increases the efficiency of the overall accreditation process. With a good perception of change, hospitals can also more easily carry out evaluations and continuous improvements.

Nevertheless, the hospital continues to seek strategies that allow accreditation standards to be met according to the hospital's capabilities without burdening its operations. This is in line with research conducted by Gogoi et al. (2024) which states that the challenges of hospitals in the accreditation process are often caused by limited facilities and infrastructure, which can hinder the accreditation process. Limited facilities often make it difficult for hospitals to meet patient safety standards and optimal clinical procedures. Without improving facilities and infrastructure, hospitals not only experience obstacles in meeting accreditation standards, but also face challenges in improving the quality of health services in a sustainable manner (Manchanda et al., 2018; Anesi & Kerlin, 2021).

In terms of team coordination, this study identified strategies implemented in dealing with the accreditation process. Hospital management routinely holds weekly evaluation meetings to monitor the progress of accreditation, where all unit heads are involved in discussions related to the strategies implemented. In addition, the existence of guidelines and guidelines from hospital management also helps health workers prepare themselves for the changes that occur. All of these strategies show that the success of accreditation depends on the active involvement of all elements of the hospital in carrying out their respective roles and responsibilities effectively. This is in line with research conducted by Kawczak et al. (2023) where team coordination can significantly improve the accreditation process by encouraging organizational alignment among health care professionals.



Accreditation Process

The accreditation process in new hospitals post-pandemic is carried out in a series of stages involving various parties. In the initial stage, a comparative study was conducted to other accredited hospitals to understand the needs that must be prepared in the accreditation process. After that, the hospital registered with an accreditation institution, where several institutions were considered before finally selecting the Hospital Accreditation Committee (KARS) as the institution that would assess the accreditation. This team consists of the head of the room and the head of the unit, where each head of the unit is responsible for one working group (pokja) that covers the elements of the accreditation assessment. Thus, almost all hospital stakeholders, from management to health workers, participate in this process.

In addition, the hospital accreditation process also refers to the Regulation of the Minister of Health (PMK) Number 20 of 2020 (Permenkes, 2020) which requires hospitals to undergo accreditation every four years. Therefore, the preparations made include all lines involved, including the board of directors, hospital management, medical and non-medical personnel, as well as patients and families. The hospital also formed an internal accreditation team involving all medical and non-medical personnel, with support from the company that oversees the hospital. This shows that the accreditation process is not only the responsibility of hospital management, but also involves all elements of the organization to ensure compliance with the established standards.

Readiness For Change Key Factors

The results of this study identify key factors that influence readiness for change in the hospital accreditation process, including managerial support, training, and motivation for health workers. Support from hospital leaders plays a significant role in readiness for change. Informants revealed that leaders are directly involved in the accreditation process by involving all stakeholders. Leaders play a role in providing policies that require all elements of the hospital to comply with accreditation standards. In addition, moral support is also provided through an evaluation mechanism for each input from staff, so that the accreditation process can run smoothly. Informants also emphasized that leaders demonstrate commitment to change by ensuring that facilities and infrastructure are well prepared and supporting the development of hospitals to increase their status from type D to type C. This is in line with research conducted by Zhang et al (2023) in which the role of leaders such as support given to employees plays an important role in shaping organizational culture, which is very important for fostering creativity, innovation, and performance. The results of a similar study by Fortenberry (2025) in which the ability of leaders in providing support for organizational change contributes to increasing the readiness of health workers in facing the challenges of change.

Informants emphasized that the accreditation process encourages health workers to update their insights through literacy related to hospital safety standards and patient safety-based services. In addition, formal training is also provided, such as additional training for nurses and midwives who work directly with patients, as well as for health workers in special units such as perinatology and central surgery. This is in line with research conducted by Treuer et al. (2022) where training provided to health workers can encourage their insights needed in the change process during the adaptation process. Training of health workers is an important strategy in facilitating organizational change in the health care system. Training is a key factor in the readiness of health workers for change because it plays a role in increasing the competence, adaptability, and motivation of health workers in dealing with changes in the service system.

This increased competency allows them to be more confident in adopting new policies and standards set in the accreditation process or health service reform (Wynne et al., 2024). In addition, training helps reduce resistance to change by providing a better understanding of the reasons and long-term benefits of the policies being implemented. Uncertainty is often a major trigger for resistance to change, so through training, health workers can understand that the changes are intended to improve the quality of care and patient well-being (Damawan & Azizah, 2020). Training also strengthens the culture of safety and quality of care within health organizations.

Motivation for health workers is also an important aspect in readiness for change. Informants revealed that building a solid team and having one perception is the main key in facing change. In addition, leaders also provide motivation by providing direction and supervising the evaluation of the implementation of accreditation standards. This effort helps health workers to be more confident in facing change and ensures that the entire process runs in accordance with applicable provisions. Similar research results were found in research conducted by Mansyur et al. (2024) which found that intrinsic motivation, such as self-development and job satisfaction, and extrinsic factors. In the context of health workers, high motivation can encourage them to provide better services to patients, follow procedures more carefully, and adapt to changes in the service system (Ajobiewe et al., 2022).



Overall, readiness for change in hospitals is influenced by the synergy between managerial support, competency strengthening through training, and continuous motivation for health workers. The combination of these three factors creates an environment conducive to change, so that hospitals can develop according to established standards.

Impact of Changes After Accreditation

The accreditation process has a significant impact on hospital management by creating more systematic and standardized governance. Informants stated that accreditation provides a clearer direction in hospital management with the standards that must be met. With standards that are in line with the accreditation system, the quality of service is more guaranteed. This is in line with research conducted by Lewis & Hinchcliff (2023) which states that hospital accreditation has various relationships with hospital management governance. The accreditation process encourages health institutions to adopt clear operational standards, improve documentation systems, and improve coordination between units. In addition, the hospital's vision and mission have changed as part of adapting to accreditation demands. This process makes the hospital have a more focused vision and mission and is in accordance with the objectives of accreditation, so that all areas in the hospital, both health workers and non-health workers.

In addition to changes in the governance system, another impact of accreditation is the increased understanding and role of human resources (HR) in the hospital. Before accreditation, many staff did not understand their duties and responsibilities in depth. However, after participating in training provided by the accreditation institution, hospital HR became more aware of their duties. The implementation of Key Performance Indicators (KPI) also began to be implemented after accreditation to assess employee performance more systematically. Research with similar results was found in a study conducted by Gregory et al. (2020) in which Health worker training is an important strategy in facilitating organizational change in the health care system. Training plays an important role in improving health workers' understanding of their duties and responsibilities by providing structured learning that is oriented towards professional practices and standards. Through training, health workers gain a deeper understanding of standard operating procedures, patient safety protocols, and ethical principles in health services. Training also allows them to hone the clinical and administrative skills needed to carry out their daily tasks, so that they can work more effectively and efficiently (Bannour et al., 2024).

Improving service quality is another significant impact of accreditation. The standardization applied in accreditation is the main guideline in providing services to patients, so hospitals must ensure that all service procedures meet the established standards. The results of this study are in line with research conducted by Alhawajreh et al. (2023) which states that during the accreditation process, hospitals will apply standards and procedures in the patient safety and rights process. In addition, accreditation has a significant impact on service efficiency. If all assessment elements in accreditation are implemented properly, hospitals can increase efficiency in various aspects, including operational cost management, quality control, and effectiveness of patient services. This is in line with research conducted by Karegeya et al. (2023) which states that the accreditation system can significantly improve service quality. In addition, accreditation also increases health workers' compliance with service standards, including in terms of doctor visit schedules and compliance with established clinical SOP. All of these changes ultimately improve the quality of services provided by hospitals to patients and strengthen overall hospital governance. The results of this study indicate that the hospital accreditation process has a significant impact on patient satisfaction. Based on interviews with informants, after accreditation, the number of patient visits increased consistently every month. In addition, patient satisfaction evaluations conducted by the quality committee showed that the patient satisfaction level was above 90%. The main factor contributing to this increase was increased patient trust in the services provided. This is different from the results of a study conducted by Alhawajreh et al. (2023) which found that although accreditation improves the safety and quality of services. Accreditation also has a long-term impact in the form of increased public interest in hospitals and an increase in the hospital's reputation as a trusted health facility.

Informants stated that the implementation of accreditation standards contributes to service efficiency and provides significant benefits to hospitals. With the increasing number of patients, hospitals can optimize existing resources and increase profitability. In line with research conducted by Abdou & Ghaleb (2023) which shows that Accreditation often leads to increased operational efficiency and quality of care, which can indirectly affect profitability. Similar results were also found in research conducted by Thomas et al. (2017) which found evidence that Accreditation can provide financial benefits in the medium to long term. Accreditation can have a positive impact on hospital profits in the medium to long term. After obtaining accreditation, hospitals often experience increased trust from patients and insurance partners, which can increase the number of patient visits and revenue. Accreditation also brings changes in aspects of teamwork in the hospital environment. The accreditation process encourages the



entire team to work together to achieve the targets that have been set. Informants revealed that teamwork became more solid because from the preparation stage to the implementation of accreditation, all elements in the hospital worked collectively.

Accreditation promotes improved teamwork in hospitals through several mechanisms. Accreditation standards require clearer communication protocols, such as team briefings and the use of patient safety checklists, to reduce miscommunication. Accreditation also promotes a culture of patient safety and quality improvement, which makes teams more accustomed to working together to solve problems and improve service efficiency.

Hospital Quality Improvement Strategy for Re-Accreditation

The results of the study indicate that the strategy for improving hospital quality for re-accreditation is carried out with various approaches, including compliance with regulations, improving service quality, operational efficiency, human resource development, utilization of technology, and expansion of medical services. The main strategy in maintaining accreditation standards is to adhere to the regulations set by the health authorities. Informants stated that hospitals must follow every change in regulations issued by the government. This is in line with research conducted by Szalados (2021) which states that compliance with regulations in countries that adopt a federal system. Similar results were also found in research conducted by Agustina et al. (2022) which stated that improving the quality of health services in hospitals can be achieved by meeting the accreditation standards that have been set. In addition to compliance with regulations, hospitals also emphasize improving the quality of service. This is done through synergy between fields to reduce the risk of medical errors, improve communication and education for patients, and improve the comfort of the facilities and infrastructure available.

Implementation of structured communication protocols and regular interdisciplinary meetings can significantly improve patient safety by ensuring appropriate treatment management and diagnostic accuracy. Human resource development is an important factor in quality improvement strategies. Optimization of human resources is also carried out by allocating workers more efficiently to improve service effectiveness. This is in line with research conducted by (Alharbi & Aloyani, 2023) which states that training and development are very important to improve the quality of health services. Hospitals can also continue to develop and add services to meet community needs. The availability of complete medical facilities is the main attraction for patients. With these additional services, it is hoped that hospitals can increase their competitiveness and maintain public trust. The addition of new services and the use of sophisticated technology can facilitate care and reduce costs. In addition, improving infrastructure supports the smooth running of the accreditation process, so that health service standards are easier to meet. Digitization of medical records, implementation of an application-based queuing system, and integration of telemedicine services are innovative steps that can accelerate patient access to health services.

Strategic Map

Strategic Map is a visual tool used by organizations to illustrate their strategic goals and the relationships between those goals. By using a strategy map, organizations can ensure that each team member understands their role in achieving the overall goal (Handoko et al., 2022). From a financial perspective, budget allocation for health worker training and infrastructure improvements are the main foundations in supporting readiness for change. This investment contributes to increased profits followed by increased hospital revenue, reflecting financial sustainability obtained from operational efficiency and improved service quality. From a patient satisfaction perspective, infrastructure improvements and implementation of accreditation-based policies contribute to reduced patient waiting times. From an internal process perspective, the implementation of standard operating procedures (SOP) in accordance with accreditation is a key step in ensuring service efficiency. This SOP not only increases service effectiveness but also improves the referral system, so that patients receive faster and more appropriate services. This increase in internal process efficiency supports the overall effectiveness of the organization, reduces the workload of health workers, and improves the quality of services provided to patients. From a learning and growth perspective, evaluating the readiness for change of health workers is a crucial first step in understanding the extent to which health workers are ready to face the transformation required in the accreditation process. After training, the increase in key performance indicators (KPI) becomes a measure of the success of the implementation of the change strategy. This increase in KPI reflects improvements in various aspects of service, such as clinical effectiveness, compliance with SOP, and efficiency in providing services to patients. Overall, this strategic map shows that the readiness of health workers to face changes during the accreditation process is highly dependent on investment in training and infrastructure, internal process efficiency, and improving the quality of service that focuses on patient satisfaction.



5. CONCLUSION AND SUGGESTIONS

This study concluded that the readiness of health workers to face changes during the accreditation process was influenced by factors such as managerial support, training, and motivation. Most health workers viewed accreditation as a positive step for patient safety and professionalism, despite challenges related to facilities and meeting administrative requirements.

Key factors influencing readiness for change include leadership support in policy and coordination, training to improve health worker literacy, and motivation through evaluation and shared vision. These three factors create an environment that supports change and allows hospitals to adapt to accreditation standards without disrupting operations.

The Strategic Map of readiness for change reflects the relationship between aspects of the hospital organization. In the financial perspective, optimization of training budgets and operational efficiency support readiness for change. The customer perspective emphasizes improving service quality and information transparency. The internal process perspective involves a health worker readiness monitoring system and digitizing accreditation records, while the learning and growth perspective focuses on ongoing training and measuring health worker readiness with KPI.

Suggestions for further research include exploring psychosocial factors that influence health worker readiness, such as work stress, job satisfaction, and organizational culture. In addition, comparative studies between hospitals with different levels of accreditation readiness can provide deeper insights into effective strategies.

For policy makers, it is hoped that the government and accreditation institutions can formulate more adaptive policies, including providing financial and technical incentives to support the implementation of accreditation standards and formulating more flexible regulations to suit local needs.

Hospital management is advised to develop a continuous training strategy that not only focuses on administrative aspects, but also improves the technical and communication competencies of health workers. Strengthening transformational leadership and integrating information technology into the hospital quality management system can also accelerate the accreditation process and improve operational efficiency.

REFERENCES

1. Abdou, B. A., & Ghaleb, F. (2023). Impact of Achieving Hospital Accreditation on Assuring Quality in Clinical Laboratories: Experience of an Oncology Hospital in low middle income country. *American Journal of Clinical Pathology*, 160 (Supplement_1). <https://doi.org/10.1093/ajcp/aqad150.181>
2. Agustina, Kiswanto, Hartono, B., Abidin, Z., & Sa'am, Z. (2022). Analisis Stakeholder Kebijakan Akreditasi Puskesmas Kabupaten Bengkalis Tahun 2021. *Visikes: Jurnal Kesehatan*, 21, 86–105.
3. Ajobiewe, J. O., Oguntayo, G. O., Ajobiewe, H., Yashim, A. N., Adigun, K. A., Ogakwu, M. N., Alau, K. K., Udefuna, P. U., Umeji, L. C., Salami, A. O., Aniakor, G. C., & Dangana, A. (2022). The Relevance of Motivation on Productivity of Health Workers; a Case Study of Karu General Hospital, Abuja. *Scholars Journal of Applied Medical Sciences*, 10(7), 1123–1132. <https://doi.org/10.36347/sjams.2022.v10i07.015>
4. Andriana, C, B. T. Widjaja, & Fushen. (2025). The Influence of Service Quality and
5. Telemedicine Convenience on Patient Trust and Its Impact on Elderly Patient Satisfaction at Siloam Hospital Bekasi Sepanjang Jaya. *International Journal of Current Science Research and Review (IJCSRR)*, Vol. 08, Issue 02 Feb, p. 822-832, Copernicus Indexed, <https://ijcsrr.org/single-view/?id=21347&pid=21198>
6. Anesi, G. L., & Kerlin, M. P. (2021). The impact of resource limitations on care delivery and outcomes: routine variation, the coronavirus disease 2019 pandemic, and persistent shortage. *Current Opinion in Critical Care*, 27(5), 513–519. <https://doi.org/10.1097/MCC.0000000000000859>
7. Alharbi, K. M. S., & Aloyuni, S. A. S. (2023). The importance of training and development of employees in improving the quality of health services. *International Journal of Health Sciences*, 7(S1), 2190–2201. <https://doi.org/10.53730/ijhs.v7ns1.14473>
8. Alhawajreh, M. J., Paterson, A. S., & Jackson, W. J. (2023). Impact of hospital accreditation on quality improvement in healthcare: A systematic review. *PLoS ONE*, 18(12 December), 1–20. <https://doi.org/10.1371/journal.pone.0294180>



9. Al-Hussami M., S. Hammad, & F. Alsoleihat. (2018). The influence of leadership behavior, organizational commitment, organizational support, subjective career success on organizational readiness for change in healthcare organizations. *Leadersh. Heal. Serv.*, vol. 31,no. 4, pp. 354–370.
10. Al-Sayedahmed, H., Al-Qaaneh, A., Al-Tawfiq, J., Al-Dossary, B., & Al-Yami, S. (2023). Perception of Health Care Professionals Toward Hospital Accreditation at Johns Hopkins Aramco Healthcare. *Quality Management in Healthcare*, 32(4).
https://journals.lww.com/qmhcjournal/fulltext/2023/10000/perception_of_health_care_professionals_toward4.aspx
11. Almaamari, Q., Kassim, R.-N., Raju, V., Al-Tahitah, A., Ameen, A., & Abdulrab, M. (2018). Factors Affecting Individual Readiness for Change: A Conceptual Framework. *International Journal of Management and Human Science*, 2, 13–18.
12. Arifin, S., Lestaris, T., Putra, R. A., Widiarti, A., Mutiasari, D., Widodo, T., & Helena, J. (2022). Sistem Pelayanan Kesehatan Masyarakat. In *file:///D:/Jurnal and Ebook Ruang Lingkup Sistem Pelayanan Kesehatan/Perbup_No_32_2018_tentang_Sistem_Rujukan_Pelayanan_Kesehatan.pdf* (Issue April)
13. Bannour, R., Cheikh, A. Ben, Bhiri, S., Ghali, H., Khefacha, S., Rejeb, M. Ben, & Laatiri, H. S. (2024). Impact of an educational training about healthcare waste management on practices skills of healthcare workers: a preexperimental study in a tertiary Tunisian hospital. *Antimicrobial Resistance and Infection Control*, 13(1), 122. <https://doi.org/10.1186/s13756-024-01446-w>
14. Budiani, M. S., O. P. Mulyana, N. W. S. Puspitadewi, and others. (2020). Peran kepercayaan diri dan kemampuan multitasking terhadap readiness to change pada mahasiswa. *J. Psikologi. Teori. dan Terapan*, vol. 10, no. 2, p. 150.
15. Catleya Basarah, J., Andry, A., & Tahjoo, A. (2022). Perceived accreditation benefits, participation and organizational commitment in hospital accreditation performance. *International Journal of Public Health Science (IJPHS)*, 11(2), 527–536. <https://doi.org/10.11591/ijphs.v11i2>
16. Daminggo, C. A. A., Suryawati, C., & Arso, S. P. (2022). Analisis Peran Kepemimpinan dan Motivasi Tim Akreditasi dalam Keberhasilan Capaian Akreditasi. *Jurnal Manajemen Kesehatan Indonesia*, 10(2), 106–114.
17. David, B., Suparlan, M., Tambengi, B., & Ohoiledwarin, M. (2021). Persepsi Perawat Tentang Dampak Akreditasi Di Rumah Sakit Budi Mulia Bitung. *Jurnal Ilmiah Perawat Manado (Juiperdo)*, 8(01 SE-Articles). <https://doi.org/https://doi.org/10.47718/jpd.v8i01.1154>
18. Dewanti, A. W., & Ginanjar, R. (2023). Pengaruh Readiness for Change dan Transformational Leadership terhadap Kinerja Karyawan pada PT Waskita Karya (Persero), Tbk. *Jurnal Bingkai Ekonomi*, 8(2), 9–20.
19. Djide, N. G. N. (2022). Psychological capital. In *Encyclopedia of Human Resource Management, Second Edition*. doi: <https://doi.org/10.1177/1548051813515924>
20. Ervianingsih, S., Dewi, N. P., Kusumaningrum, A. E., Asriwati, Ismainar, H., Magfirah, Umniyatun, Y., Nurmansyah, M. I., Alaydrus, S., Hadi, N. I., Syamsuriansyah, Siregar, R. A., & Darmayani. (2020). Pembaharuan dalam organisasi pelayanan kesehatan, vol. 1.
21. Fadhillah, H., Endang Wahyati, E., & Sarwo, B. (2019). Pengaturan Tentang Tenaga Kesehatan Dalam Peraturan Perundang-Undangan Dan Azas Kepastian Hukum. *Soepra*, 5(1), 146. <https://doi.org/10.24167/shk.v5i1.1653>
22. Fortenberry, J. L. J. (2025). Leadership development programs in healthcare organizations: What they are and how to assemble them. *Health Services Management Research*, 38(1_suppl), 3S-10S. <https://doi.org/10.1177/09514848241307451>
23. Gogoi, A. P., Kalita, J., & Kakati, N. (n.d.). *Enhancing care standards: Accreditation's impact on healthcare quality*.
24. Gregory, M. E., Rothwell, C. D., & McAlearney, A. S. (2020). Training as a Facilitator of Organizational Change in Health Care: The Input-Mediator/Moderator-Outcome-Input Model. In A. Montgomery, M. van der Doef, E. Panagopoulou, & M. P. Leiter (Eds.), *Connecting Healthcare Worker Well-Being, Patient Safety and Organisational Change: The Triple Challenge* (pp. 263–279). Springer International Publishing. https://doi.org/10.1007/978-3-030-60998-6_16
25. Handoko, J., Narsa, I. M., & Basuki, B. (2022). Efektivitas Peta Strategi Dalam Alokasi Biaya: Suatu Eksperimen Berbasis Internet. *Jurnal Akuntansi Kontemporer*, 14(1), 26–42. <https://doi.org/10.33508/jako.v14i1.3199>
26. Hanpachern, C., Morgan, G. A., & Griego, O. V. (1998). An extension of the theory of margin: A framework for assessing readiness for change. *Human Resource Development Quarterly*, 9(4). <https://doi.org/10.1002/hrdq.3920090405>



27. Haffar, M., W. Al-Karaghoul, Z. Irani, R. Djebarni, and G. Gbadamosi. (2019). The Influence of Individual Readiness for Change Dimensions on Quality Management Implementation in Algerian Manufacturing Organisations. *Int. J. Prod. Econ.*, vol. 207, pp. 247–260.
28. Hussein, M., Pavlova, M., Ghalwash, M., & Groot, W. (2021). The impact of hospital accreditation on the quality of healthcare: a systematic literature review. *BMC Health Services Research*, 21(1), 1057. <https://doi.org/10.1186/s12913-021-07097-6>
29. Kemenkes RI. (2020). *Peraturan Menteri Kesehatan Nomor 30 Tahun 2020 tentang Klasifikasi dan Perizinan Rumah Sakit*. pp. 1–80.
30. Kemenkes RI. (2022). *Standar Akreditasi Rumah Sakit*.
31. Komnas HAM. (2021). *Standar Norma dan Pengaturan Nomor 4 tentang Hak atas Kesehatan*.
32. Karegeya, J. P., Kengere, O., & Bogere, M. (2023). Accreditation and Health Service Delivery in Rwanda - a Case Study of Accreditation Project of King Faisal Hospital, Kigali. *European Journal of Social Sciences Studies*, 9(2). <https://doi.org/10.46827/ejsss.v9i2.1586>
33. Katoue, M. G., Somerville, S. G., Barake, R., & Scott, M. (2021). The perceptions of healthcare professionals about accreditation and its impact on quality of healthcare in Kuwait: a qualitative study. *Journal of Evaluation in Clinical Practice*, 27(6), 1310–1320. <https://doi.org/10.1111/jep.13557>
34. Kawczak, S., Fernandez, A. P., & Mooney, M. (2023). Advancing Teamwork in Health Care Through Continuing Education Joint Accreditation. *Journal of Continuing Education in the Health Professions*. <https://doi.org/10.1097/ceh.0000000000000494>
35. Lewis, K., & Hinchcliff, R. (2023). Hospital accreditation: an umbrella review. *International Journal of Quality in Health Care*, 1(35), 1–7. <https://doi.org/https://doi.org/10.1093/intqhc/mzad007>
36. Li, E., Clarke, J., Ashrafian, H., Darzi, A., & Neves, A. L. (2022). The Impact of Electronic Health Record Interoperability on Safety and Quality of Care in High-Income Countries: Systematic Review. *Journal of Medical Internet Research*, 24(9), 1–15. <https://doi.org/10.2196/38144>
37. Manchanda, V., Suman, U., & Singh, N. (2018). Implementing Infection Prevention and Control Programs When Resources Are Limited. *Current Treatment Options in Infectious Diseases*, 10(1), 28–39. <https://doi.org/10.1007/s40506-018-0142-3>
38. Mansyur, E., Salim, M., & Abdillah, W. (2024). International Journal on Economics, Finance and Sustainable Development (IJEFS) Motivation As A Key Driver For Performance Improvement Among Health Promotion Staff At Jalan Gedang Health Centre, Bengkulu City. In *International Journal on Economics, Finance and Sustainable Development* (Vol. 2024, Issue 11 <https://journals.researchparks.org/index.php/IJEFS>)
39. Manzo, B.F. (2012). Nursing in the Hospital Accreditation Process: Practice and Implications in the Work Quotidian. *Rev. Latino Am.emfermagem*. Vol.20, No.1, hal.151-158.
40. Mustofa, A., Roekminiati, S., & Lestari, D. S. (2020). *Administrasi Pelayanan Kesehatan Masyarakat*. Jakad Media Publishing.
41. Nurmawati, M. A. P. T. A. S. (2021). Pengaruh Perceived Organizational Support terhadap Individual Readiness for Change yang Dimediasi oleh Psychological Capital. *Jurnal Manajemen Dan Keuangan, Vol 10 No 1 (2021): Jurnal Manajemen Dan Keuangan*, 28–42. <https://ejurnalunsam.id/index.php/jmk/article/view/2914/2459>
42. Paré, G., C. Sicotte, P. Poba-Nzaou, and G. Balouzakis. (2011). Clinicians' perceptions of organizational readiness for change in the context of clinical information system projects: insights from two cross-sectional surveys. *Implement. Sci.*, vol. 6, pp. 1–14.
43. Presiden Republik Indonesia. (2023). *Undang-Undang Republik Indonesia Nomor 17 Tahun 2023 Tentang Kesehatan*. Undsng-Undang, pp. 1–300.
44. Phonna, C. D., D. R. Sari, A. Nuryanti, and D. B. Karo. (2021). Persepsi Perawat Tentang Dampak Akreditasi Terhadap Mutu Pelayanan Kesehatan. *J. Hosp. Accredit.*, vol. 3, no. 2, pp. 79–83.
45. Putra, E. R. K. (2024). Analisis Perencanaan dan Penganggaran dalam Persiapan Akreditasi: Studi Kasus Rumah Sakit Griya Mahardhika Yogyakarta. *Syntax Idea*, vol. 6, no. 1, pp. 94–108.



46. Rizky, F., & Dwarawati, D. (2023). Pengaruh Perceived Organizational Support terhadap Readiness for Change pada Guru. *Bandung Conference Series: Psychology Science*, 3, 735–741. <https://doi.org/10.29313/bcpsps.v3i2.7341>
47. Soekidjo, N. (2010). *Metodologi Penelitian Kesehatan*. Rineka Cipta.
48. Szalados, J. E. (2021). The laws and regulations governing hospitals and healthcare entities. In *The Medical-Legal Aspects of Acute Care Medicine: A Resource for Clinicians, Administrators, and Risk Managers*. https://doi.org/10.1007/978-3-030-68570-6_4
49. Thomas, A., Raghunath, S., Rana, B. K., & Nagpal, S. (2017). An Exploratory Study on the Benefits of Quality Accreditation: Financial Impact and Chief Executive Officer Perspectives. *International Journal of Research Foundation of Hospital and Healthcare Administration*, 5(2), 60–67. <https://doi.org/10.5005/jp-journals-10035-1077>
50. Trisna, E., Luwiharsih, & Djembarsari, A. (2021). *Artikel Penelitian Dampak Bimbingan Akreditasi Terhadap Kelulusan Akreditasi Rumah Sakit 1 RS Haji Jakarta 2 Komisi Akreditasi Rumah Sakit 3 STIKES Pertamedika Jakarta*. 03, 3–5.
51. Von Treuer, K. M., McCabe, M. P., Karantzas, G., Mellor, D., Konis, A., & Davison, T. E. (2022). Facilitating Staff Adoption of New Policies and Procedures in Aged Care Through Training for Readiness for Change. *Journal of Applied Gerontology*, 41(1), 54–61. <https://doi.org/10.1177/0733464820949801>
52. Weiner, B. J. (2009). A theory of organizational readiness for change. *Implement. Sci.*, vol. 4, no. 1, pp. 1-9, doi: <https://doi.org/10.1186/1748-5908-4-67>.
53. Wynne, K., Mwangi, F., Onifade, O., Abimbola, O., Jones, F., Burrows, J., Lynagh, M., Majeed, T., Sharma, D., Bembridge, E., Stubbs, M., Sunner, C., Bergmann, J., Bagade, T., & Malau-Aduli, B. S. (2024). Readiness for professional practice among health professions education graduates: a systematic review. In *Frontiers in Medicine* (Vol. 11). Frontiers Media SA. <https://doi.org/10.3389/fmed.2024.1472834>
54. Zhang, W., Zeng, X., Liang, H., Xue, Y., & Cao, X. (2023). Understanding How Organizational Culture Affects Innovation Performance: A Management Context Perspective. *Sustainability (Switzerland)*, 15(8). <https://doi.org/10.3390/su15086644>

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