Agile Government Action in Health Sector:
Implementation and Leadership

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ABSTRACT

This research aims to analyze the need for agile government action in public health service, the implementation, and the critical role of the leadership. Agile characteristics are needed to eliminate the risk of failure, and satisfactory results are confirmed in the public health sector. The agile approach uses incremental planning, with current technical, customer-oriented, and delivers the most valuable output. This study is descriptive in nature and data collected from various research results related to agile government action in public service, especially in the health sector. This study is also entirely based on secondary data from journals, scientific articles, reports, research papers, and other academic publications. A systematic review was carried out in detail from some of the collected literature. This study's results focused on agile characteristics and their implementation that improves public service, especially in the health sector.

Keywords: Agile Government, Health Service, Implementation, Leadership

1. INTRODUCTION

Health is one of the basic needs of society and is a right for every citizen protected by the Constitution. Health is the most significant and essential aspect of achieving prosperity. Therefore, improving health services is an investment in human resources to achieve a welfare society, and it became the government's primary concern in implementing public services. The government had to guarantee the right to health by providing health services in a fair, equitable, adequate, affordable, and quality manner.

Frederickson [1] stated in the 4th paradigm of human relations that the focus is on human dimensions and social aspects in each type of organization and bureaucracy, and the 5th paradigm of public choices with the emphasis on options based on public interest. Criticism of delivering public services occurs in terms of service discrimination, indifferent ignorance of service delivery, slow response which has grown the awareness of service motivation. They are Institutional strengthening, organizational development, and sensitivity training for the employee to deliver public service. Citizens also had choices if the service was unavailable in specific service units, especially in health and education services, as basic needs.

According to Holbeche [2], bureaucratic agility has four steps. They are developing strategies with ethical; routine with agile practices; implementing innovation, change, and agile services; collaborative capabilities with fair and mutually beneficial working relationships; with the primary keys of people and culture (70%); process (20%) and tools (10%).

The government plays an essential role in the health sector. It is involved in all aspects, from policy making, funding or policy budget, and managing many health programs or policies for citizens. The basic questions that often arise regarding health services, some of the following are (a) service quality; (b) costs; (c) governance or service collaboration, and (d) can the government do more [3].

2. METHODOLOGY

This study is descriptive and related to agile government in the health sector and focused on implementation and leadership. Analysis was conducted by collecting data from various research results of agile government and administration in the public health sector. This study is also entirely based on secondary data from journals, scientific articles, research papers, and other academic publications.

3. RESULTS

AGILE GOVERNMENT

Technological development, including big data, smart city, and others, encourage the community's need to be able to access public services 24/7 (read: twenty-four hours a day and seven days a week). This condition drives the need for government to create internal capacity and expertise to evaluate, respond to and implement the new technologies and internal processes. An agile organization is an organization that can sense and reacts to change without losing alignment with predetermined goals, and to achieve their organizational development is carried out by strengthening organizational goals, increasing motivation, and becoming adaptive to agility itself. [4]

Jiong Tu.et.al [5] discuss how the role of the internet and cellular technology is adopted in implementing hospital services in China, such as helping to reduce the number of patient queues, increasing the volume of hospital services, and increasing the number of services providers. The focus is on how the new technologies change service delivery in the context of systems and institutions. Access to health services is divided into four contexts: service volume, service provider, service time, and the number of patient queues. Case studies from three hospitals that have already adopted the internet and mobile technology first are the *Guangzhou Women and Children's Medical Center* (GWCMC), the second is *People's Hospital of Guangdong Province* (SPHGP), and the third is *Wuzhen Internet Hospital*. The results from these three hospitals demonstrate the integration of online and offline service models. Online services are related to (a) non-clinical services, (b) outpatient treatment, especially for patients who live far away (from the hospital), and (c) remote health management. Offline services are carried out for core health services, emergency, and accident services, operations, and inpatients.

The agile government needs an approach that focuses on regulatory flexibility adaptation to a functioning bureaucracy and aligning the level of activities implementation, as reviewed by Margiela et al. [6]. The focus of agile government expands the focus in a broader spectrum by changing the culture of the organization and collaboration methods to achieve a higher level of adaptiveness.

Agile and adaptive governance contributes to shared values to realize service quality, institutional trust, and social outcomes. With organization ability, it is hoped that the community will feel the effectiveness and efficiency of public services so they can quickly (fast respond) resolve other matters. Government agility can increase sensitivity and respond to organizational changes, which arise as a result of the need of the citizen, government policies, and stakeholders that are supported by information and technology [7].

LEADERSHIP IN HEALTH SECTOR

The influence of bureaucratic agility and leadership in the health sector in Indonesia has been reviewed by Asmara. et al. [8] about one of the innovative programs in public health services carried out in Banyuwangi Regency, called Program Pemburu-Bumil- Resti that concern with health services for women with a high-risk pregnancy to reduce the Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR). This research was an ongoing study from January 15th,2019, till February 15th,2019. Villagers that identify as citizens with low education, active in the agricultural sector (as a farmer), and isolated because of language problems, require the government's strenuous efforts to provide fair and affordable public services in the health sector. Banyuwangi District Health Office initiated this program to identify the presence of pregnant women with a high risk of pregnancy. The program is carried out through supervision by surrounding neighbors using smartphone applications to monitor their condition and provide access because the area where they live has minimal access to transportation, especially to adequate health service facilities. The program's effectiveness was in 2014 -2015 and 2017-2018. There was zero death of MMR and IKR. The district government has received the Open Government Partnership in South Korea award. The temporary finding of the Pemburu Bumil Resti Programme must be strengthened by developing a creative culture in rural communities to increase program awareness and participation and a maintenance program running in the next period in Banyuwangi Regency.

Public health leadership is demanding because it deals with any field of a man's life. It also affects all stages of human life, covering all aspects of man and his surroundings, dealing with multiple stakeholders, being ready to take risks, and many required leadership roles [9].

As stated by Coxen et al. [10], analyzing the role of authentic leadership in the health sector to organizational trust encourages the employee in the health sector to do something more or "go to extra mile" in carrying out their duties. The background of the research is motivated by external challenges in delivering health services in South Africa in the form of delivery inefficiencies and customer dissatisfaction and internal challenges such as poor management structures and lack of trust in leadership. The study on leadership was carried out using an authentic leadership model or style viewed from an ethical and positive perspective. Authentic leadership has

four lower-order dimensions. They are self-awareness (i.e., ability to posse self-knowledge and possible strengths); balanced processing (i.e., leader's objective evaluation, analysis of relevant information for decision making); relational transparency (i.e., ability to share available information and unpretentious manner of self-presentation). The fourth dimension is internalized moral perspective (the ability to withstand external pressures by committing to his or own ethical and moral values). Implementing the four dimensions in leadership will also increase the organizational trust in the relationship between superiors and subordinates who respect and trust each other. The study's finding indicates that changes in the leadership behavior in the health sector have encouraged employees and organizations to become more productive, maintain the reputation of public health facilities and remain viable in delivering quality healthcare services.

As research conducted by Gianfredi V. et al. [11] stated, public health leaders play a crucial role in ensuring population health and well-being through prevention and health promotion, healthcare policy and management, collaboration and networking, and effective decision-making process.

Kaplan [12] has discussed how the implementation of the *Virginia Mason Production System* (VMPS) leadership model with philosophical elements of kaizen (continuous improvement) as part of "We Culture" owned by the hospital. The assumption underlying this leadership model is that the systems engineering approach has improved efficiency, quality, and safety in the automotive (e.g., Toyota) and aviation industries so that it can be a transformative model that could be applied in the health sector. The philosophical principles of VMPS are (1) Putting the patient first; (2) focusing on the highest quality and safety; (3) involving all employees; (4) Striving for the highest satisfaction, and (5) Maintaining a thriving economy. The results of the study indicate that there are opportunities for increased work and collaboration and interdisciplinary frameworks to develop solutions to organizational problems.

Sfanton et al. [13] compiled a systemic review to answer whether there is a relationship between health leadership style and quality of care. Management and leadership in health care professionals play an essential role in strengthening the quality and integration of health services. Six leadership styles are generally practiced in organizations: transformational, transactional, autocratic, laissez-faire, task-oriented and relationship oriented. Transformational leadership is characterized by creating motivational relationships among staff (subordinates). The transformational leader can usually inspire trust, and respect for staff and the, communicate loyalty through a shared vision, increase productivity, and strengthen employee morale and job satisfaction. The transactional leadership style is the leader acts as change management, conducting employee exchanges that lead to increased production. The autocratic leadership style is considered ideal for an emergency. The leader makes all decisions without considering staff opinions, and individual mistakes are unacceptable.

In contrast, in the laissez-faire style, the leader does not make staff decisions to act without direction, such as a hands-off approach, so change is rare. Task-oriented leadership involves planning work activities, clarifying roles in a team or group of people, setting goals, and monitoring process performance. Results finding indicate that (1) the consensus leadership style is more suitable in the moderate situation; (2) the mixed leadership style can reduce the number of deaths; (3) the task-oriented leadership style has more influence on the quality of healthcare which gets high marks from staff and patient families; (4) patient satisfaction increases when the leader uses transactional style. The influence of leadership on organizational culture is authentic leadership; the organization's behavior and quality practices significantly influence service quality and patient safety, equality, and effectiveness of care. Transformative leadership has more impact on the quality of nurses and the nursing process.

The COVID-19 pandemic situation has also greatly influenced the leadership model of the health sector. Bosak et al. [14] discuss the COVID-19 pandemic, which poses unprecedented challenges to the healthcare system worldwide. The study analyses the mediating role of mission valence in the relationship between transformational leadership and burnout of health workers in hospitals. Mission valence is to make the organization's mission more exciting and meaningful to employees, helping them cope with environmental demands and pressures. Transformational leadership was observed in overcoming employee burnout during the last three years in Canadian hospitals. It also examined whether there was a mediating role of mission valence in this relationship. Fatigue is an essential issue in the health sector and has increased. In the latest report in Canada that more than 40 percent of nurse experience fatigue. This fatigue of health workers will decrease the level of satisfaction with services and disrupt the quality of health services. It is necessary to analyze the role of transformational leadership applied at the West Island Health and Social Service Centre (HSSC) in Canada as one of the referrals for health promotion hospitals affiliated with WHO. The results showed no direct effect of transformational leadership on the fatigue of the health workers. Instead, it was found that the mediator factor was the valence of the organization's mission more meaningful for humanity.

Stuber et al. [15] conducted a systematic literature review of the relationship between work-related stress and employee mental health impairment in the health sector. A significant factor that influenced this case is leadership behavior, so effective leadership intervention may become the solution to foster employee mentality. From a practical point of view, this study shows that a mental health-oriented leadership that focuses on relational competencies has the potential to combine organizational and behavioral strategies for the promotion of mental health. Leaders who have sensitivity in this regard, as well as the use of technology and artificial intelligence and communication competencies, can encourage the employee's mental health.

4. CONCLUSION

The extreme disruption in the health sector causes the importance of adaptation in the organization and its leadership. A large number of players outside the sector, the changing workforce and patient demographics, new technologies, cost pressures, and other influences have challenged the ability of hospitals and the healthcare system to perform as expected.

Amid the ambiguity of the situation, the organization must be more adaptive in a constantly changing environment. Leaders must show courage, learn and guide their organization to the forefront of innovation and continue to be a learning organization.

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