



IMPLEMENTATION OF KTR POLICY AT ADAM MALIK HOSPITAL

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Abstract

Adam Malik Hospital is an international standard hospital and is Plenary Accredited and is required to provide clean and fresh air for hospital staff and visitors. Adam Malik Hospital declared that its entire area is a Non-Smoking Area through the Decree of the main Director of Adam Malik Hospital Number

HK.02.03/XV.III.3.3.1/6431/2022.

This type of qualitative research explores the implementation of the No Smoking Area policy at Adam Malik Hospital. Data collection through interviews, observation, documentation and document review. The research informants were the Head of the Environmental Health and Occupational Safety and Health Installation at Adam Malik Hospital, the Head of Health Promotion at

Adam Malik Hospital, the Head of the Security Unit at Adam Malik Hospital, the Cleaning Officer Coordinator at Adam Malik Hospital, the families of ICU patients and the families of emergency patients. Data analysis through data reduction, data presentation and drawing conclusions. The results of the research show that the implementation of the No-Smoking Area policy at Adam Malik Hospital needs to be improved, due to several factors: (1) Compliance with implementers is good, but the lack of clarity in the instructions from the policy means that work overlaps and shifts responsibilities to each other. This can be seen from the results of observations that found people smoking, the presence of cigarette butts and the smell of cigarette smoke in the hospital area. The results of the interviews also found that policy implementers carry out socialization and supervision as much as possible, but limited resources cause loss of supervision when they have to do their main work, (2) The smooth functioning of routines and the absence of problems are also slightly disturbed due to policy implementers having limited resources and moving around to carrying out its main duties, (3) The expected performance and impact of the No-Smoking Zone policy at Adam Malik Hospital is still not optimal, as can be seen from the results of observations which show that there are still violations of the No-Smoking Zone. Based on the research results, it can be concluded that the implementation of the No Smoking Area policy at Adam Malik Hospital has not been implemented well. There is no special team to manage the No-Smoking Area, the sanctions are only a warning, causing the No-Smoking Area policy at Adam Malik Hospital to not be optimal.

keywords : Policy implementation, No-Smoking Area Policy, Adam Malik Hospital

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Introduction

Cigarettes are classified as dangerous addictive substances because when smoked they can cause disease and threaten the good health of active smokers and those around them who are exposed to cigarette smoke . Smoking can cause serious health problems that worry many people around the world.

According to the Central Statistics Agency (BPS) report in 2023, the percentage of the Indonesian population aged 15 years and over who smoked each month last reached 28.62 percent, an increase of 0.36 percent compared to 2022. Lampung is the province in Indonesia with the highest percentage of the population who smokes. the highest reached 34.08 percent . The next region is West Nusa Tenggara with a percentage of 32.79 percent , while the number of smokers in North Sumatra is 26.28 percent (BPS, 2023).

In an effort to prevent smoking behavior, the government has prepared programs contained in the 2020-2024 National Medium Term Development Plan (RPJMN) document, focusing on reducing the percentage of smokers from 9.1 percent to 8.7 percent by 2024, including Quit Smoking service activities. (UBM) and implementation of Smoke-Free Zones (KTR) as a policy strategy in the program to control the impact of cigarette consumption. Regulations related to Smoke-Free Zones (KTR) were initiated with the issuance of a joint regulation between the Minister of Health and the Minister of Home Affairs Number 188/MENKES/PB/I/2011, which aims to protect individuals, society and the environment from the effects of exposure to cigarette smoke . According to these regulations, a Smoke-Free Zone (KTR) is defined as a space or area where smoking and production, sales, marketing and/or promotion of tobacco products are prohibited. (Government Regulation , 2011).

No-Smoking Areas (KTR) were formed to protect public health from disturbances and risks of exposure to cigarette smoke in public areas, places of worship, children's play areas, health service facilities (fasyankes), and teaching and learning activities environments. In response to this, the government drafted a regulation that regional governments are obliged to draft regional regulations regarding KTR. This is regulated in Government Regulation P No. 109 of 2012 Article 52. Furthermore, the urgency for KTR is re-stated in Health Law no. 17 of 2023 concerning health which states that in an effort to ensure a clean and healthy environment, therefore every government citizen has the responsibility to respect the rights of citizens to live in a healthy environment, healthy in the physical, biological and social sense.

RSU Adam Malik is a health facility owned by the Ministry of Health which has received the title of International Accreditation which should be free from exposure to cigarette smoke , because freedom from cigarette smoke is one of the markers for meeting these criteria. In 2022 the



Director of Adam Malik Hospital has issued policy Number: HK. 02.03/XV.III.3.3.1/64431/2022 concerning Smoking-free Areas and preparing implementation guidelines.

Health facilities are emphasized as the highest priority in the law as smoking-free areas, so that hospitals must be free from cigarette smoke to the outermost areas, so that hospitals do not provide special rooms for smoking. Adam Malik Hospital is one of three government hospitals located in Medan City. Based on Ministry of Health policy, this hospital has been appointed as a Teaching Hospital and Referral Center for the provinces of Aceh, Riau, West Sumatra and North Sumatra. Apart from that, this hospital has also obtained Plenary Level status in the hospital accreditation process (North Sumatra Province Health Profile, 2016). In 2019, the Haji Adam Malik Central General Hospital (RSUP) also succeeded in obtaining accreditation from *the Joint Commission International* (JCI). The success of achieving this title shows that the services provided by Adam Malik Hospital have focused on continuously improving quality and patient safety. All efforts to provide clean air for patients and visitors have been made by Adam Malik Hospital as written in the Decree of the Main Director of Adam Malik Hospital Number: HK.02.03/XV.III.3.3.1/6431/2022 Policy on Smoke-Free Areas in Hospitals Adam Malik Medan and with implementation guidance in the form of Adam Malik Hospital No-Smoking Area Guidelines.

To find out whether the implementation of the KTR policy has been effective, researchers conducted an initial survey on September 29 2023 and obtained information by conducting direct interviews with 3 (three) health workers (nurses) who work in the Hospital Occupational Health and Safety Department (K3RS) and Environmental Health (Kesling) as well as 3 (three) families of patients who were visiting Adam Malik Hospital. From interviews with health workers and visitors, it was found that the implementation of KTR is still low, even though the hospital has created health promotion media about the dangers of smoking, signs prohibiting smoking, prohibiting selling or advertising cigarettes in the Adam Malik Hospital environment, but the smoking behavior carried out by health workers, The patient's family cannot be stopped by finding cigarette butts in the patient's family waiting room, the patient's family smoking during the visit. Apart from that, there are no sanctions given if health workers or the patient's family are found smoking, the only appeal is in the form of a non-binding prohibition.

To validate this information, researchers carried out direct observations from October 1, 2023 to October 9, 2023 in the patient's family waiting room areas. The results of the observations were that an average of 30 cigarette butts were found in the morning, on Saturdays and Sundays the number of cigarette butts increased to around 40-50 cigarette butts. Apart from that, at H Adam Malik General Hospital there are no sanctions given if health workers or the patient's family are found smoking, the appeal is only in the form of a non-binding prohibition.



Based on the description of the problem based on the results of the initial survey, the researcher concluded that the efforts or results of the work and actions taken were not appropriate or appropriate, so that the expected goals in implementing the KTR policy at Adam Malik Hospital were not achieved, so the researcher concluded that the implementation of the KTR policy at Adam Malik Hospital not working as expected. Therefore, researchers are interested in studying the implementation of the No Smoking Zone (KTR) policy at Adam Malik Hospital in 2024.

Methods

This research utilizes a qualitative approach to examine the implementation of policy, specifically focusing on how implementers comply and how all aspects related to the smoke-free area policy are carried out. The research is conducted at Adam Malik Hospital, a vertical health service facility under the Ministry of Health of the Republic of Indonesia. The research began with the preparation of a proposal, starting from September 1, 2023, to March 30, 2024, and will be implemented in April 2024. Primary data sources are key informants, who are likely to include the Head of Environmental Health (Kesling) and Occupational Health and Safety Hospital (K3RS), the Head of the Security Unit, the Head of Hospital Health Promotion (PKRS), the Cleaning Officer Coordinator, and the Person in Charge of the Patient Family Waiting Room. Secondary data used will support the implementation of the smoke-free area policy at Adam Malik Hospital. Researchers will use measurement tools such as observation sheets and questionnaires. To validate the data, triangulation is used to compare and confirm the validity of the information obtained from various sources.

Results

Adam Malik Hospital Profile. Adam Malik Hospital is a general hospital owned by the central government which is technically under the Directorate General of Health Services of the Indonesian Ministry of Health. Adam Malik Hospital is located at Jalan Bunga Lau No. 17 Medan Tuntungan and as a Teaching Hospital in accordance with the Decree of the Minister of Health No: 502/Menkes/SK/IX/1991, dated September 6 1991. Adam Malik Hospital on January 11 1993 officially became the Education Center for the Faculty of Medicine, University of North Sumatra and was inaugurated by the President of the Republic of Indonesia, precisely on July 21, 1993.

Based on RI Minister of Health Decree No. HK.00.06.3.5.5317 dated 31 October 2006 Adam Malik Hospital has been accredited for 16 services. In June 2007 Adam Malik Hospital changed its status to a Public Service Agency (BLU) in stages based on Minister of Finance Decree No. 280/KMK.05/2007 and Minister of Health Decree No. 756/Menkes/SK/VI/2007. On June 10



2009, the status of RSUP H. Adam Malik officially became a Government Agency that implemented full Public Service Agency (BLU) Financial Management in accordance with Minister of Finance Decree No. 214/KMK.05/2009.

Adam Malik Hospital has a land area of 33328.43 m² and a floor area of 99234.93 m² with a total of 42 buildings. Based on the latest Decree of the Main Director of RSUP H. Adam Malik No. HK.02.03 / Adam Malik Hospital has 23 general services, consisting of 69 clinical services and 12 non-clinical services.

Informant Characteristics.

The informants in this research are the human resources most closely related to KTR.

Informant's Name	Gender	Age (years)	Educatio n	Position
Dr David Sinarta Ginting, M.Kes	Man	51	S2	Head of the Environmental Health (Kesling) and Occupational Health and Safety Hospital (K3RS);
Misrah Panjaitan, S.Kep., Nurse., M.Kep	Woman	55	S2	Head of Hospital Health Promotion (PKRS);
Muhammad Siddik Surbakti	Man	53	Senior high school	Head of Security Unit
Muhammad Idris, S.Kom	Man	35	S1	Cleaning Coordinator
Wagino	Man		Senior high school	Visitors to Adam Malik Hospital
Numpak Siregar	Man	35	Senior high school	Visitors to Adam Malik Hospital

Implementation of the Adam Malik Hospital No-Smoking Area (KTR) Policy.

Adam Malik Hospital is a referral center in North Sumatra and has been determined to have international standards by the *Joint Commission International (JCI)* through the *Initial Survey Joint Commission International (JCI)* on 27-31 August 2018 and the *Focus Survey Joint Commission International (JCI)* in January 2019. And Most recently, on November 23 2023, Adam Malik Hospital received Plenary Level Accreditation by the Hospital Accreditation Commission (KARS) with certificate number: KARS-SERT/398/XI/2023.

In international and national accreditation, it is mandatory for hospitals to implement KTR by creating programs starting with smoking-free area policies and guidelines containing KTR standards which aim to improve the quality of health and protect the public from the dangers of



cigarette smoke. From the data obtained by researchers, Adam Malik Hospital supports non-smoking areas (KTR) as evidenced by the existence of KTR's internal policy as stated in the Decree of the Main Director of Adam Malik Hospital Number: HK.02.03/XV.III.3.3.1/6431/2022 Smoke Free Area Policy at Adam Malik Hospital Medan and with implementation guidelines in the form of Adam Malik Hospital No Smoking Area Guidelines and socialization and provision of facilities and infrastructure.

Compliance (compliance) of policy implementers (implementors) with established guidelines or rules. The success of policy implementation can be seen from the compliance of implementers in implementing the policies contained in the policy document. This compliance shows that the implementer understands and implements the policy appropriately, so that the policy can run according to the expected goals. From the KTR guidelines, indicators have been determined that indicate that the expected conditions are in accordance with policy objectives.

Researchers made observations on Saturday 25 May 2024 starting at 08.00 WIB at all Adam Malik Hospital locations and found several indicators that had not been met. In terms of socialization with no smoking posters and signs and no smoking appeals, Adam Malik Hospital has been carried out, starting from every entrance gate to every patient waiting room, the walls of every hallway, elevator, inpatient room and all existing polyclinics. Researchers also found people smoking, cigarette butts and the smell of cigarette smoke as a result of observations and documentation.

Researchers conducted interviews with 4 (four) key informants involved in the management of KTR, namely the Head of the Hospital Environmental Health and Occupational Health and Safety Installation (K3RS) as Informant 1, the Head of Hospital Health Promotion (PKRS) as Informant 2, the Head of the Security Unit (Hospital Security Guard as Informant 3, and Hospital Cleaning Coordinator as Informant 4 . The researcher also conducted interviews with 2 (two) hospital visitors, namely the family of the ICU patient in the waiting room on the 4th floor of CMU as informant 5 and the family of the emergency room patient in the emergency room waiting room as informant 6. As follows Excerpts from interviews related to implementor compliance are as follows:

"Yeah, you know ... "The Kesling and K3 sections must understand the KTR policy."

"...we have socialized it to all hospital staff and hospital visitors who enter the hospital."

"...we put foster and KTR stickers in the hospital environment. "We have also conducted outreach to all health workers and security guards to be passed on to patients and hospital visitors."



"...we once allocated in the 2017 Budget for KTR outreach in the form of posters and leaflets . We don't know the budget amount, because it is in the general section. In 2024, we don't have any proposals yet."

"...so far, if there is a violation, there is only a warning, there are no fines or any other treatment. If the violator resists, they are told to leave the place in coordination with the security guard."

(Informant 1).

"Yes sir, mother's part is about KTR socialization. We created these fosters and there is even a video about KTR which we play all the time on the TV in the patient waiting room."

"...we have socialized the KTR to our staff, nurses, PPDS and hospital visitors."

"...we put up a picture of KTR and the ban on smoking in the hospital environment."

"...everyone who works in a hospital is obliged to reprimand anyone who smokes."

"Yes, it's a shared responsibility and usually the security guard is assigned to reprimand him."

"...there doesn't seem to be a special budget, we included it in the PHBS budget. So like leaflets and so on, they are included in health promotion efforts."

"... violators are only reprimanded and told to leave the deck. So anyone who saw reprimanded the smoker. The mechanism is just like that, nothing special."

(Informant 2).

"Yes sir, I know sir . KTR means that no smoking is allowed in the entire hospital area, sir, right up to the fence."

"...we have socialized it to visitors in the waiting room, sir, and we monitor and reprimand anyone who smokes."

"... every shift we go around the area assigned to be on guard, sir, we remind no one to smoke."

"...actually everyone who works in a hospital is obliged to supervise and reprimand if there is a KTR violation, sir."

"Yes, it's a shared responsibility and there are no special officers for KTR, we are the security guards and cleaners, sir, who are really involved in this, sir ."

(Informant 3).

"Yes, sir... Smoke-free areas, sir, that's also our part that was ordered to monitor people smoking, sir."

"...for KTR we convey to the families of patients in the waiting room that smoking is not allowed and we show them the smoking ban on the wall."

"...we were told to tell those who smoked to put out their cigarettes and told them to leave the place."

"...actually everyone who works in a hospital is obliged to reprimand anyone who smokes."



Yes, our part is also given responsibility, sir. Just ask for permission. We are limited in manpower and sometimes we are not monitored at night, sir . "Sometimes in the morning there are lots of cigarette butts in the patient waiting room."

(Informant 4).

Based on the results of interviews with officers related to KTR at Adam Malik Hospital above, it can be seen that the KTR policy has been understood and complied with by internal implementers verbally and visually and has been socialized to all hospital employees and visitors, including students. For indicators that have not been achieved, such as the presence of people smoking, the discovery of cigarette smoke and the smell of cigarette smoke are events caused by external implementers such as hospital visitors, both students and patient families.

Researchers also conducted interviews with hospital visitors, in this case the patient's family, with interview excerpts as follows:

"...regarding the ban on smoking from the first time you enter, the officers in the emergency room have said that you are not allowed to smoke in this hospital. I've been here for 4 days, sir."

"...I've seen people smoking there (pointing to the outside seating area) especially on Saturdays and Sundays, lots of people come to visit their families. "At night after 22.00 WIB there are also people smoking there."

"...morning and evening someone came, like a security guard, to tell you not to smoke here. I have also seen officers in green clothes like janitors scolding smokers at 7 in the morning."

(Informant 5).

"...smoking ban. It was said earlier that you shouldn't smoke in the hospital, sir, I think it's okay here, sir . So I'm sorry, I was really worried about my family's situation, so I spontaneously smoked."

"...just now I saw there were cigarette butts there so I thought it was okay to smoke here. "The suggestion is that perhaps I, as the patient's family, am a bit worried and confused about the sick family, so we hope that medical services will provide us with clear information and read the no smoking large and clear readings."

(Informant 6).

The researcher concluded that the implementers had carried out outreach when the patient and the patient's family entered the hospital so that the implementers actually understood and implemented the policy, however there were other factors that needed to be studied further regarding indicators that had not been achieved, namely KTR violations at Adam Malik Hospital.

In this research, normative commitment through personal morality (*normative commitment through morality*) has been seen that each staff involved complies with the KTR guidelines created which are considered an obligation, whereas in terms of normative commitment through



legitimacy (*normative commitment through legitimacy*) The management has prepared this policy to regulate the behavior of everyone at Adam Malik Hospital so that they comply with the No Smoking Area.

Improper routine of other functions and the absence of problems in implementing the No-Smoking Area Policy (KTR) at Adam Malik Hospital. In policy implementation, the success of a policy is marked by the smooth implementation of routine functions and the absence of problems encountered. This condition shows that the policy has been implemented effectively and has not experienced significant obstacles.

From the results of observations and interviews related to compliance above, the researcher concluded that there was a discrepancy that caused KTR violations to persist at Adam Malik Hospital. The researcher continued the next interview regarding the smooth running of other routine functions and the absence of problems with the following interview excerpts :

" There is a decree from the Director of UP Hospital, H Adam Malik, regarding KTR, but it does not clearly explain who the monitoring and management team is because it says all the hospital staff are there . "

"... if we were there, the officers were divided into security guards to carry out warnings. Personally, I have to make special officers for this KTR so that no one smokes . "

" In my opinion, there must be special officers and if necessary, sanctions will be given, but this must be through a written policy. "Our problem is that visitors often smoke at night and there is a lack of supervision because there are no officers whose job it is to focus on monitoring smokers at the KTR . "

(Informant 1)

"... none of us feel burdened by the KTR policy."

"In my opinion, a special team and a special mechanism must also be created. "Our problem is that visitors often smoke at night and there is a lack of supervision because there are no special officers."

(Informant 2)

"...because our officers are limited and take turns on duty, so we don't focus on monitoring KTR, but we try to do it. Personally, I have to make special officers for this KTR so that no one smokes."

"...our security guards try their best to carry out their duties, but at night visitors often smoke in secret while we have to watch over the others."

(Informant 3)

"...we don't have the courage to give much input, sir, because we are ascoring PT. "But indeed we are trying our best to monitor KTR, it's just that there are limited officers and



we can't monitor them 24 hours because sometimes the person on duty at night has to move according to the needs of the time."

(Informant 4)

From the results of the interview it can be concluded that the resource responsible is unclear and has other duties so that at some point it will disrupt the routine functioning of the hospital service system. In order for the policy to be implemented well, of course it explains who the implementers are, what their duties and authorities are and the limitations of what must be done and what cannot be done.

In implementing the KTR policy at Adam Malik Hospital, the government actor is the Ministry of Health, private actors are the second parties who take part in health services such as providers of cleaning staff and security officers, and community actors, namely students, patients and hospital visitors.

Expected performance and impact in implementing the No Smoking Area Policy (KTR) at Adam Malik Hospital. Performance that is in accordance with policy objectives and expected impacts, such as benefits obtained by hospital staff, students, patients and patient families or hospital visitors. It is hoped that the KTR policy can increase public awareness about the dangers of smoking, reduce cigarette use, reduce the cost of living and poverty rates in the community and improve the level of public health.

From the observation results, it is still visible that the performance of Adam Malik Hospital's KTR policy is still not optimal, as can be seen from the observation results which show that there are still KTR violations. In terms of interviews, it also shows and is acknowledged by parties involved in implementing the KTR that they are still overwhelmed in supervising the KTR. The following is an excerpt from an interview regarding the impact and performance of KTR Adam Malik Hospital as follows:

"...I have reprimanded smokers several times and there were even hospital staff who smoked. But again, if he was only reprimanded, he would just put out his cigarette at that moment. So, if we want to maximize it, there must be clear fines or sanctions and the mechanism you asked about must be created."

(Informant 1)

"...it is true that our KTR performance is still low, so a special program must be created with a special KTR manager."

(Informant 2)

"...I have reprimanded smokers several times and there were even hospital staff who smoked. If he was only reprimanded, he would just put out his cigarette at that moment. So



if you want to maximize it, there must be clear fines or sanctions and a good mechanism. We also ask for protection. If there is a fine, there will automatically be resistance from the violators. So please form a good team .

(Informant 3)

"... I don't dare say much about that matter, sir . For this, ask management directly, sir . What is certain is that we are trying to help monitor people who smoke in the Adam Malik Hospital area, sir."

(Informant 4)

From the results of the interview above, the researcher concluded that the expected performance and impact had not been felt by all parties. The aim of the Adam Malik Hospital KTR policy is to provide clean and fresh air for the community so that it will have an impact on improving the level of public health.

Researchers also ask for suggestions and input from implementers to improve the performance and impact of KTR policies.

Obstacles in implementing the Adam Malik Hospital KTR policy. According to the results of interviews with informants, researchers found obstacles and received several inputs that could improve the performance and impact of KTR policies, namely:

"...if you want the maximum, there must be clear fines or sanctions and a mechanism ..."

(Informant 1).

From Informant 1's suggestion above, researchers tried to approach regulations from various sources. The application of fines to violators of non-smoking areas in various regions has been regulated in several regional laws and regulations.

"...at night, visitors often smoke and supervision is lacking because there are no special officers ..."

(Informant 2).

"...if you want to maximize it, there must be clear fines or sanctions and a good mechanism. We also ask for protection. If there is a fine, there will automatically be resistance from the violators. So please form a good team .

(Informant 3).

From the suggestions of Informants 2 and 3 above, researchers tried to approach regulations from various sources. The formation of this special team is called a task force (Satgas) as regulated in Medan City Regional Regulation Number 3 of 2014 concerning Non-Smoking Areas and Medan Mayor Regulation No. 35 of 2014 states in Article 33 paragraph (1) that KTR development is



carried out by Regional Work Units (SKPD) which have main duties and functions in accordance with the place stated as KTR. The SKPD aims to ensure compliance by everyone, whether Regional Government or other legal subjects, with the implementation of Regional Regulations regarding smoking-free areas, which will ultimately create a clean and healthy space and environment, and be able to protect the public from direct exposure to other people's cigarette smoke, or indirectly.

"...our program promotes multidisciplinary smoking cessation clinics so that the impact is better."

(Informant 2).

From Informant 2's suggestion regarding smoking cessation clinics above, this is in accordance with the Regulation of the Minister of Health of the Republic of Indonesia Number 3 of 2020 concerning Classification and Licensing of Hospitals that the requirements for Class A, B and C Hospitals are to have a Stop Smoking Clinic Room which is included in the Action Room Lungs. The Smoking Cessation Clinic (KBM) is an effort made by the government and community health centers to help active smokers quit smoking. KBM aims to reduce the negative impact of smoking on individual and community health. Adam Malik Hospital itself already has a Smoking Cessation Clinic which will later be developed to suit community needs.

"This is an open room, sir, so for the first time I thought I could smoke here, sir. "Maybe just cover it and use a roof, sir, so that other people will see that this is indeed a closed room where smoking is prohibited."

(Informant 5)

From Informant 5's suggestions regarding facilities and infrastructure which the researcher will later convey to the KTR management at Adam Malik Hospital. This suggestion is very good and a closed room is safer for the patient's family to rest while waiting for their sick family.

"There are 9 waiting rooms : on the 4th floor of CMU, there are the most cigarette butts here, maybe because the patient's families are stressed because that is the waiting room for the families of patients in the ICU and operating room. At CMU Floor 1, radiotherapy and nuclear waiting room. There are often lots of cigarette butts in the emergency room waiting room, sir . At PJT there is a waiting room on the 1st floor, but because it is a closed room, families come out to smoke and are close to the hospital fence. In the Pavilion, on the 4th floor, people cannot smoke because the waiting room is closed, but sometimes cigarette butts are found in the toilet trash cans in the morning. There is also a UTD waiting room, sir, you often encounter cigarette butts in the morning. There are 4 poly waiting rooms, on each floor there is a waiting room, but the only one connected to outside air is the waiting room on the 3rd floor. Sometimes cigarette butts are found."



(Informant 4)

"...I saw there were cigarette butts there so I thought it was okay to smoke here. "The suggestion is that perhaps I, as the patient's family, am a bit worried and confused about the sick family, so we hope that medical services will provide us with clear information and read the no smoking large and clear readings."

(Informant 6).

Researchers also assessed organizational achievements related to organizational performance based on the target indicators set by Adam Malik Hospital in the Smoke Free Area Guidelines with the following results :

Table 7. Target Achievement of Adam Malik Hospital KTR Guidelines Indicators

No	Indicator	Target / Focus of Assessment	Achievements
1	<i>Inputs</i>	- There is a written policy regarding KTR. - There are personnel assigned to manage KTR. - There is promotional media about the smoking ban/KTR.	- There is - There are but not special. - There are shaped Foster and signs.
2	<i>Process</i>	- Implementation of the socialization of the No Smoking Zone policy both directly (face to face) and indirectly (via print, electronic media) - There is a regulation of duties and responsibilities in implementing KTR in health service facilities. - Installation of KTR policy announcements via posters, no-smoking signs, madding, circulars , loudspeakers. - Installation of KTR signs around health service facilities. - Implementation of KTR education, the dangers of smoking, smoking ethics and not smoking in the hospital area.	- Carried out face to face and electronically - Yes, but still in general to all hospital staff and visitors. - There were posters, circulars and appeals were made via loudspeakers. - Yes, it's installed. - Yes, it happened.
3	<i>Outputs</i>	H. Adam Malik General Hospital environment without cigarette smoke . - Health officers and all employees do not smoke and can reprimand smokers in the H. Adam Malik General Hospital area to	- Not yet, it still smells of cigarette smoke . - Not yet implemented optimally.



		- comply with KTR provisions. - Smokers are asked to smoke outside the H. Adam Malik General Hospital area. - There are sanctions in the form of warnings for those who violate the KTR.	- Yes, smokers are reprimanded and smoke outside the Adam Malik Hospital area. - There are already sanctions in the form of warnings.
4	Outcomes	"No smoking" writing or symbols were found in easily visible places throughout the hospital area. - No people were found smoking in the rooms and areas of the hospital - Do not provide ashtrays and smoking facilities . - No cigarette fosters or promotions were found - Does not sell cigarettes - There is no smell of burnt tobacco or cigarette smoke - No cigarette butts were found	- Yes, it's been done. - Still found. - Yes, Adam Malik Hospital does not provide ashtrays. - Yes, there is no encouragement or promotion of cigarettes. - Yes, the Hospital does not sell cigarettes. - It hasn't been done yet, it still smells of cigarette smoke . - Not yet done, cigarette butts were still found.

From the table above, the researcher concludes that the *input* and *process indicators* have been achieved and that they have been implemented by the implementer, but the *output* and *outcome* indicators have not been achieved optimally.

Conclusion

Based on the description and research results that have been explained previously, the researcher draws conclusions according to the problems studied, namely Analysis of the Implementation of the KTR Policy at Adam Malik Hospital, where the implementation of the KTR policy at Adam Malik Hospital has not been implemented properly according to the provisions stipulated in the Director's Decree Main Adam Malik Hospital Number: HK.02.03/XV.III.3.3.1/6431/2022 concerning Smoke-Free Areas and Guidelines for Smoke-Free Areas at Adam Malik Hospital in 2022. Compliance with the implementers is actually good, it's just that the instructions from the policy are unclear creating overlapping work and shifting



responsibilities to each other. This can be seen from the results of observations that found people smoking, the presence of cigarette butts and the smell of cigarette smoke in the hospital area. The results of the interview also convey the message that in fact policy implementers are doing their best to socialize and supervise KTR, but limited resources cause them to lose supervision when they have to do their main work. The smooth functioning of routines and the absence of problems are also slightly disturbed due to the security guards and cleaning staff having limited resources and moving around to carry out their main duties and at the same time having the task of monitoring and reprimanding if there are KTR violations. The expected performance and impact of the KTR policy at Adam Malik Hospital is still not optimal, as can be seen from the results of observations which show that there are still KTR violations. In terms of interviews, it also shows and is acknowledged by parties involved in the implementation of KTR that there are still violations and overwhelm in KTR supervision.





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