



COLLABORATION BETWEEN HOSPITALS AND THE CIVIL REGISTRATION OFFICE IN PROVIDING CIVIL ADMINISTRATION SERVICES

(CASE STUDY AT LA MAPPAPENNING REGIONAL PUBLIC HOSPITAL, SOUTH SULAWESI PROVINCE)

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ABSTRACT

This research aims to analyze the effectiveness of public service collaboration in the fields of health and civil administration. The study focuses on a case involving children born at the La Mappapenning Regional General Hospital (RSUD) in Bone Regency, South Sulawesi Province, Indonesia. The collaboration between the RSUD and the Civil Registration Office (Dukcapil) of Bone Regency is designed to facilitate the direct issuance of civil documents (Birth Certificates, Family Cards, and Child *Identity Cards) at the hospital, eliminating the need for a separate visit to the* Dukcapil office. This study employs a descriptive qualitative approach using Huxham's theory of Collaborative Advantage, which includes four dimensions: managing goals, managing trust, managing culture, and managing leadership. Data were collected through interviews, observations, and documentation with fifteen informants. The results indicate that while the collaboration is effective due to the convenience and efficiency it provides, its implementation still faces challenges. Those challenges are differences in goals, an imbalance of roles, limitations of integrated information systems, and a lack of clarity in the leadership structure for decision-making. By adaptively managing the dynamics of trust, organizational culture, and the active participation of leaders from both institutions, this collaboration has the potential to become an innovative model for inclusive and effective public service. This research contributes theoretically to the practice of collaborative governance and offers practical recommendations for optimizing cross-sector partnerships in hospital-based public services.

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INTRODUCTION

Health is a fundamental human right and a key element of well-being that must be realized in accordance with Indonesia's national goals, as outlined in the Pancasila and the Preamble to the 1945 Constitution (Razy & Ariani, 2022). Therefore, all activities and efforts to achieve the highest possible level of public health are carried out based on the principles of welfare, equity, non-discrimination, participation, and sustainability, as this is crucial for developing Indonesia's human resources.

One of the efforts to improve public health starts with maternal and child health, aiming to produce healthy, intelligent, and high-quality children while reducing mortality rates (Pala et al., 2019). It is the responsibility of local governments (regencies/cities) to ensure every mother has access to safe, high-quality, and affordable health facilities. In addition to improving public health, the state is also obligated to provide protection and recognition of personal and legal status for every important occassion. For example, the state must issue a birth certificate for any child born within the territory of the Republic of Indonesia (Aziz, 2018).

In their development, healthcare services and civil administration services often face bureaucratic issues that make processes long and complex. This is due to the many steps that must be taken and the various documents that need to be provided. Additionally, there's a lack of integrated systems between health and civil administration, leading to a disconnect and repetitive processes. For example, birth data from healthcare administration isn't always directly linked to civil administration, which requires a repeated process to obtain a birth certificate.

As quoted in a Kompas.com news article from February 9, 2021, titled "Ministry of Women's Empowerment and Child Protection: 5 Million Children Do Not Have Birth Certificates," the Assistant Deputy for the Fulfillment of Civil, Information, and Participation Rights at the Ministry of Women Empowerment and Child Protection, Endah Sri Rejeki, stated that:

"Several factors cause the high number of children without birth certificates. These include difficult geographical conditions that make services inaccessible, as well as limited internet access when services are offered online, which makes it hard for people to register. Another factor is that the location for birth certificate services is far from the community. There might also be cultural and social factors or local customs at play. Finally, there could be a lack of public understanding about the importance of having a birth certificate. This remains homework for all of us."

Based on the news report above, several factors contribute to the high number of children without birth certificates. These include difficult geographical conditions, which make services and internet access for online registration inaccessible, and the long distance to birth certificate service locations. Additionally, it's suspected that local social, cultural, and customary factors, along with a lack of public understanding about the importance of having a birth certificate, also play a role.

It is the state's obligation to provide comprehensive services to the public, from healthcare for mothers giving birth in hospitals to a child's right to obtain a birth certificate and a Child Identity Card (KIA). The KIA provides the child with a Civil Identification Number (NIK), which will later be used to create an Identity Card (KTP) upon reaching adulthood, as stipulated by law (Wijayanti, 2016).

One of the requirements for a birth certificate is a Hospital Birth Letter from the hospital, which the applicant uses to apply for the child's birth certificate. After the birth certificate is issued by the Civil Registration Office (Dukcapil) of Bone Regency, a Child Identity Card (KIA) can then be issued. This process requires updating the family's Family Card (KK), on which the child must be listed at the parents' place of residence.

Based on data from the Information and Documentation Management Officer (PPID) of the La Mappapenning Regional General Hospital, 263 babies were born at the hospital from March 2024 to August 2024. Of these, 190 babies have received their civil identity documents. There are still 73 children born at the hospital who have not yet received their documents. This is because the patients' domicile is not in Bone Regency, they did not bring or do not have a marriage book, or they sometimes failed to bring a Family Card (KK), which is a required document for issuing a child's birth certificate. This situation has drawn the author's attention, as the Cooperation Agreement between the La Mappapenning Regional General Hospital and the Bone Regency Dukcapil Office, effective since March 2024, states that every child born at the hospital should be provided with civil administration services, including a Birth Certificate, a Child Identity Card, and a Family Card, before the patient is discharged.

As a follow-up to the issues in healthcare and civil administration services, a collaboration was initiated between the La Mappapenning Regional General Hospital of South Sulawesi Province and the Civil Registration Office of Bone Regency. This collaboration aims to provide a service where children born at the hospital can return home with civil identity documents, including a Birth Certificate, Family Card, and Child Identity Card, at no cost. According to the provisions of Article 70 of Presidential Regulation No. 96 of 2018 regarding the Requirements and Procedures for Population Registration and Civil Registry, which states, "For the effectiveness of birth and death registration services, the Regional Government shall cooperate with Hospitals and Health Service Facilities to provide online services," the Bone Regency Government can collaborate with a provincial government-owned hospital in South Sulawesi.

The implementation of this collaborative healthcare and civil administration service by these two public institutions is considered an innovation. This aligns with the findings of a study by Alfaruqi (2021) which explains that integrated birth services are an innovation in creating civil administration at healthcare facilities.

The collaboration between the Hospital and the Dukcapil Office, formalized through a cooperation agreement, is an effective and beneficial partnership aimed at achieving shared goals. It provides both healthcare services to mothers who give birth and civil administration services for children born at the hospital. However, during the implementation of this collaboration, there are still children born at the hospital who have not yet been provided with civil administration documents, such as a Birth Certificate, Child Identity Card, and Family Card.

The fact that children born at the hospital cannot yet be fully facilitated with their civil administration documents is a point of concern for the author. This is especially true given that the South Sulawesi Provincial Regional Hospital has a cooperation agreement with the Bone Regency Dukcapil Office to make it easier for mothers to return home with a birth certificate and other civil identity documents for their newborn.

LITERATURE REVIEW

The Concept of Collaboration

Collaboration is defined as a joint effort to achieve goals that cannot be reached individually. According to Batoebara (2021), collaboration involves effective communication, the division of tasks, and shared responsibilities. Therefore, collaboration is a process where two or more individuals or organizations work together to achieve a common goal, whether through direct or digital communication. This concept has become a primary focus in various fields, including business, education, and information technology. Collaboration can enhance productivity, creativity, and innovation by leveraging the different expertise and resources of each team member.

Several factors influence the success of a collaboration, including: Effective communication as the key to collaboration. According to Johnson in Bachtiar et al., (2024), clear and open communication prevents misunderstandings and conflicts. Then, trust among team members is very important for creating a harmonious work environment. Furthermore, the use of appropriate technology supports collaboration by providing communication and project management tools.

Collaborative Governance

Collaborative governance is a process and structure for making public policy decisions that involves diverse societal actors across boundaries, with the aim of achieving public goals through joint ventures, thereby improving outcomes through shared responsibility and co-involvement (Wiyantari Sutaryantha & Kusumasari, 2020). According to Emerson (2018), collaborative governance is carried out through dialogue, negotiation, and the sharing of responsibilities among stakeholders. Collaborative governance is a framework in which various stakeholders, including the government, the private sector, and civil society, work together to achieve common goals (<u>Temitope</u>, <u>2023</u>). This concept is often used in the context of natural resource management, urban planning, and public policy.

Communication is a factor that influences Collaborative Governance, as effective communication is the key. According to Ansell & Gash (2008), open and transparent communication can prevent misunderstandings and conflicts. Trust among stakeholders is very important for creating a harmonious work environment. Leadership is also crucial, as strong and inclusive leadership supports the collaborative process by providing direction and facilitating dialogue.

Collaborative Advantage in Public Sector Services

The collaborative advantage approach is the ability to form effective and beneficial partnerships with other organizations for mutual benefit. Collaborative advantage is related to the creation of synergy between collaborating organizations. Collaborative advantage is achieved when creative things can be produced and common goals can be reached. It explains the achievement of organizational goals that cannot be reached without collaboration (Huxham, 2003).

The Theory of Collaborative Advantage is based on the practice of collaborative management and focuses on the potential benefits and utility gained from the relationships between actors within an organizational network. The Theory of Collaborative Advantage provides a framework to support effective collaborative management (Huxham & Vangen, 2013), namely: Goals, Trust, Culture, and Leadership. These four dimensions are conceptualized to solve problems, tensions, and challenges in collaboration so that the collaboration results in gains rather than losses. Factors that can support the effectiveness of collaboration implementation are elaborated below in the next paragraphs.

Managing Goals is explained by <u>Emmerson</u>, (2012), "Governmental collaboration is an interactive process between different actors aimed at jointly solving public problems through the coordination and integration of resources." An agreement on goals among the actors in a network organization is a prerequisite for the successful achievement of common objectives. The assumption is that the collaborative goal will not be met or implemented if one of the actors in the network organization disagrees with or does not accept the collaborative objective (<u>Agranoff & McGuire</u>, 2003).

Goal alignment is crucial for increasing shared commitment. However, a reliance on goals in a collaborative context often faces problems due to the diversity of expertise and resources, which leads to a variety of goals for each actor in the collaborative organization. This condition can make actors reluctant to share resources, whether financial or informational (Provan & Kenis, 2008), Conversely, an enforced uniformity of goals can create conflict among the actors involved (Agranoff & McGuire,

2003; Ansell & Gash, 2008). There are six dimensions in managing goals: level, origin, genuineness, relevance, content, and openness. The author only analyzes based on Relevance, because the collaborative goals can be understood by identifying the specific objectives of the Director of the La Mappapenning Regional General Hospital and the Head of the Bone Regency Dukcapil Office in undertaking this collaboration to ensure its effectiveness.

Managing Trust. Trust is important and necessary for a successful collaboration (Sasmitha et al., 2024). In reality, many collaborations show that trust is often weak. As a strong foundation for collaboration, trust must be built and maintained by each member of the collaborative organization.

Trust in a collaboration is built gradually by setting simple but realistic and achievable goals. This strengthens mutual trust among actors and provides a solid foundation for the collaboration (Tuomela & Tuomela, 2005). Another concept, explained by Fontecha-Tirado (2019) states that "trust can be built through the experience of mutually beneficial, low-risk shared gains." This research focuses on analyzing how both parties manage the dynamics that occur during the implementation of the cooperation.

Managing Culture. Culture in this context refers to the habits and actions that originate from the organizational culture of the actors involved. Some studies explain that a shared culture results in great connectivity among organizational members, which reduces or eliminates the potential for errors in the collaborative process (Ketemaw et al., 2024). However, in reality, cultural diversity among actors is inevitable because each member comes from a different background. This diversity can cause conflicts, misunderstandings, and friction among the actors (Vangen, 2017). The possibility of conflict in a collaborative organization is called the cultural paradox. One way to overcome the cultural paradox is by managing tension (Vangen & Winchester, 2014). Tension management has three interconnected dimensions: 1) Accommodation, which addresses the interaction between organizations in a collaboration; 2) Agency, which focuses on the individual actors and their qualities within the collaborative organization; and 3) Quantity, which analyzes the amount and extent of cultural diversity within the collaborative organization. This research focuses on analyzing agency tension related to the actors directly responsible for issuing the civil identity documents at the hospital.

Managing Leadership. In a collaborative context, leadership relates to a formal leader or organization with members who are committed to achieving a goal. Researchers on leadership in collaboration tend to emphasize relational and process-oriented leadership to inspire, maintain, support, and communicate (Nurhayati et al., 2024). Huxham, in Sufianty (2014) argues that communication structure and process are leadership media that play a crucial role in directing specific outcomes. There are three leadership media in collaboration: structure, process, and participation.

Healthcare Services

The definition of healthcare services, based on Article 1, paragraph 3 of Law No. 17 of 2023 on Health, is any and all forms of activities and/or a series of service activities provided directly to individuals or the community to maintain and improve the public's health in a promotive, preventive, curative, rehabilitative, and/or palliative manner. Furthermore, Article 18 states that there are two types of health efforts, namely individual and community-based, with five characteristics: promotive, preventive, curative, rehabilitative, and palliative. Healthcare services provided in hospitals are generally regulated in Law No. 17 of 2023. Specifically, Article 184, paragraphs (1) and (2) state that hospitals carry out the function of providing individual healthcare services in a specialist and/or subspecialist form. In addition to these services, hospitals can also provide basic healthcare services.

Civil Administration Services

In essence, the government is obligated to provide protection and enforcement regarding the determination of an individual's personal and legal status for every significant event experienced by the person. Each regency/city government is required to implement national policies related to Law No. 23 of 2006, as amended by Law No. 24 of 2013 on Civil administration. This law aims to improve civil administration for the public by addressing issues related to demographics. Every Indonesian citizen is required to have a Birth Certificate, which legally signifies that a person is a legitimate citizen. Civil administration services, one of which is the issuance of a birth certificate, serve as official proof of a person's birth status and event. The certificate is issued by the Civil Registration Office (Disdukcapil).

The regional government is obligated and responsible for organizing Civil administration, as is the government of Bone Regency. The Bone Regency Civil registration Office is the implementing element of the regional government, led by the Head of the Office, and is responsible to the Regent for the provision of population and civil registry services.

It is the state's obligation to provide comprehensive services to the public, from healthcare for mothers giving birth in hospitals to the right of a newborn child to obtain a Birth Certificate and a Child Identity Card (KIA). The KIA serves as the Civil Identification Number (NIK), which will later be used to create a National Identity Card (KTP) upon reaching adulthood, in accordance with legal regulations.

One of the requirements for a Birth Certificate is a Hospital Birth Reference Letter from the hospital. The applicant uses this reference letter to apply for the child's birth certificate. After the birth certificate is issued by the Bone Regency Dukcapil office, a Child Identity Card can then be issued. This process requires updating the family's Family Card, on which the child will be listed at the parents' place of residence.

RESEARCH METHODS

This study uses a qualitative approach and a descriptive method (Ardyan et al., 2023). The qualitative approach allows the researcher to gain an in-depth understanding of the phenomenon being studied, as well as to identify and understand new aspects of the phenomenon that have not been previously studied in depth (Renjith et al., 2017). The descriptive method is used to describe a phenomenon or situation, either generally or specifically, based on existing facts or data (Nassaji, 2015).

The research was conducted at the La Mappapenning Regional General Hospital in Bone Regency as it is the first hospital in the region to collaborate with the Bone Regency Dukcapil Office. This hospital is also a pioneer in government service collaboration in the health and civil administration sectors. The collaboration is specifically focused on facilitating the issuance of civil identity documents for children born at the hospital. Researchers also conducted interviews with informants at the Bone Regency Civil registration Office.

The data sources for this research are both primary and secondary. Primary data was collected through observation, interviews, and documents. Observation was conducted to directly understand the real situation by monitoring and recording data or facts relevant to the study's focus at the La Mappapenning Regional General Hospital. Interviews were a direct question-and-answer process aimed at informants at the research location. The informants consisted of seven people from the La Mappapenning Regional General Hospital's internal staff and three informants from the Bone Regency Civil registration Office. Additionally, five pregnant mothers who gave birth at the hospital were interviewed as beneficiaries of the government collaboration.

Secondary data sources were supplementary data obtained indirectly from their origin, such as previous studies related to the Operational Cooperation Agreement between the two institutions, documents of those who received civil administration at the hospital, and photographic documentation of activities related to healthcare and civil administration services at the La Mappapenning Regional General Hospital in Bone Regency.

Documentation techniques were also used to obtain accurate data regarding the collaboration between healthcare and civil administration services at the La Mappapenning Regional General Hospital. The data collected included the number and information of pregnant patient mothers who gave birth, documentation of children who received civil administration, and activity documents related to the implementation of the collaboration between the hospital and the Bone Regency Civil registration Office.

The data analysis for this qualitative research was conducted both during data collection and after the data collection was completed. In the research process, the researcher used the interactive model of data analysis (Miles et al., 2018), which includes data collection, data condensation, data display, and conclusion drawing/verification.

RESEARCH RESULTS

The results of this research discuss the effectiveness of collaboration between government institutions to solve public problems through the coordination and integration of resources in the fields of healthcare and civil administration services. The effectiveness of the collaboration is seen in the issuance of Birth Certificates, Child Identity Cards, and Family Cards by the Bone Regency Civil registration Office for mothers who give birth at the La Mappapenning Regional General Hospital in Bone Regency, South Sulawesi Province.

This is consistent with what the Head of the Bone Regency Civil registration Office (Dukcapil) stated on Thursday, April 17, 2025:

"It's important to have a collaboration through cooperation between the Dukcapil office and the hospital for the issuance of civil identity documents, especially for newborns to immediately get a birth certificate. This is because each institution has its own authority, so I think this is something that needs to be done to solve the problem for children born in hospitals, so they can get their birth certificates before they go home. Moreover, since everything is now online, there is no need to come to the office anymore to get civil identity documents like a birth certificate for a child born in the hospital."

A collaboration between two government agencies with different authorities can be implemented through a partnership, making it easier for the public to receive services from both agencies in a single location. For example, a mother can give birth at a hospital and get civil identity documents for her baby without needing to visit the Dukcapil office.

This collaboration was formalized through a Cooperation Agreement Document between the Bone Regency Civil registration Office and the La Mappapenning Regional General Hospital. It has been in effect since 2024 and was extended for two more years. This aligns with an interview with the Director of the La Mappapenning Regional General Hospital on Thursday, March 20, 2025, who explained:

"The Cooperation Agreement that we have signed (between the Head of the Dukcapil Office and the Director of the La Mappapennig Regional General Hospital) is a concrete form of collaboration between two different institutions, so that public services can be implemented more effectively in just one place"

To examine the effectiveness of the public service collaboration between the Health Sector and Civil administration for children born at the La Mappapenning Regional General Hospital, this research uses a framework for effective collaboration management, as per <u>Huxham & Vangen (2013)</u>. theory of Collaborative Advantage, This framework includes Goals, Trust, Culture, and Leadership, as follows.

Managing Goals

Managing Goals is the process of setting objectives and the ways to achieve them in the implementation of government service collaboration in the health and civil administration sectors at La Mappapenning Regional General Hospital. This is done by understanding the purpose of the La Mappapenning Regional General Hospital's duties in government healthcare services and the purpose of the Bone Regency Dukcapil Office's duties in government civil administration services. This serves as proof of the relevance of the collaboration between the two agencies, which results in civil administration services for children born at the hospital.

Based on the interview with the Head of Medical Services at the La Mappapenning Regional General Hospital, pregnant patients who give birth at the hospital can directly receive civil identity documents for their newborns. This program is part of the cooperation agreement between the La Mappapenning Regional General Hospital and the Bone Regency Dukcapil Office, called the ININNAWA KU Program (Mothers Give Birth Comfortably, Go Home with Civil identity documents).

Based on the interview with the Head of Medical Services at the La Mappapenning Regional General Hospital on Monday, March 20, 2025, Managing Goals in terms of motivation to achieve the collaborative goal with the Bone Regency Dukcapil Office can be explained as follows:

"We see that the main motivation of the Dukcapil office is to improve access and convenience for the community to civil administration services. With this collaboration, people who give birth or whose family members die at the hospital can immediately obtain official documents such as birth certificates or death certificates without having to come to the Dukcapil office again. This is very helpful for the community, especially in emotional situations that require convenient services. In addition, this is also part of the effort to digitalize and integrate public services."

This has been carried out in accordance with the provisions in Article 70 of Presidential Regulation Number 96 of 2018 concerning the Requirements and Procedures for Population Registration and Civil Registration, which states that "For the effectiveness of birth and death registration services, the Regional Government shall cooperate with Hospitals and Health Service Facilities to provide online services.

Figure 1. Provision of Civil Identity Documents at La Mappapenning Regional General Hospital for Patient Mothers Who Gave Birth at the Hospital



Source: Information and Documentation Management Officer (PPID) of La Mappapenning Regional General Hospital, 2025.

Figure 1 shows a patient receiving civil identity documents for a child born at the hospital, located in the Public Relations, Legal, and Marketing Office. This activity is handled directly by a designated PIC (Person in Charge) who is qualified to process and provide the civil identity documents right after the patient gives birth and before she leaves the hospital.

Figure 2. List of Recipients of Civil administration Services at La Mappapenning Regional General Hospital



SOUTH SULAWESI PROVINCIAL GOVERNMENT DEPARTMENT OF HEALTH

LA MAPPAPENNING BONE REGIONAL HOSPITAL

Jalan H. M. Jusuf, Desa Mappesangka Kecamatan Ponre Kode Pos 92765

Email: rsud.lamappapenning@gmail.com

KABUPATEN BONE

No	NAME OF PARENTS	NAME OF BABY	SEX	DATE OF BIRTH	BIRTH CERTIFICATE/ FAMILY CARD ISSUED DATE	KK	AKTE	KIA	KET
1.	RISMAN SYAM/ANDI HASNIA BAHRI	AHMAD RAFISQY UKKASYA	MALE	04/30/2025		~	1		
2.	HERIADI/ ANDI TENRI UMMU	ALSYAZANI FAREZKI HERIADI	FEMALE	04/27/2025		*	1		
3.	SABRI/ARNI	AURA ANNISA	FEMALE	04/11/2025		′	'		
4.	HERMAN/HASRIATI	MUHAMMAD RAFLI	MALE	04/30/2045		1	1		
5.	WAHYUL NESI/ HILDA	MUHAMMAD ADZAM ALFATIH WAHYUL	MALE	04/28/2025		~	•		
6.	HERMAN/KADERIA	DAISHA SALSISA	FEMALE	04/23/2025		1	1		
7.	AHMAD/ LELAWATI	MUHAMMAD AZKA	MALE	04/20/2025		1	1		
8.	LARANI/LINDAYANTI	ULFAQIHA NAMIRA ELSHANUM	FEMALE	04/09/2025		~	1		

Source: Information and Documentation Management Officer (PPID) of La Mappapenning Regional General Hospital, 2025.

Figure 2 shows the List of Recipients of Civil administration Services at the La Mappapenning Regional General Hospital as an example of the types of civil identity documents received by patient mothers who gave birth at the hospital, in accordance with the Cooperation Agreement between the La Mappapenning Regional General Hospital and the Bone Regency Dukcapil Office. These documents include the Family Card (KK), Birth Certificate, and Child Identity Card (KIA).

The Bone Regency Dukcapil Office has the same goal of bringing services closer to the community by fulfilling the civil administration needs of mothers who give birth at the hospital without having to go to the Bone Regency Dukcapil Office. These services can be accessed directly at the hospital before leaving, thereby achieving the goal of mothers giving birth comfortably at the hospital and returning home with their child's civil identity documents.

Similarly, the La Mappapenning Regional General Hospital provides healthcare services to pregnant mothers and offers an additional service in the form of managing civil administration. This is made possible by a shared commitment and objective to bring services closer to the community and improve their quality, in this case, by making it easier for mothers to give birth at the hospital and go home with their child's civil identity documents.

The researcher also observed the process of providing the civil identity documents, which was handled directly by a designated PIC (Person in Charge) who serves as the contact person for the Bone Regency Dukcapil Office in issuing the civil identity documents.

Figure 3. PIC (Person in Charge) of La Mappapening Regional General Hospital Serving Patients Receiving Civil administration Directly at the Hospital



Source: Information and Documentation Management Officer (PPID) of La Mappapenning Regional General Hospital, 2025.

Figure 3 shows the PIC (Person in Charge) from the La Mappapenning Regional General Hospital providing service to issue civil identity documents. This is in accordance with what was agreed upon through the cooperation agreement signed by the hospital and the Bone Regency Dukcapil Office.

Managing Trust

Managing Trust is the process of building and maintaining trust as a strong foundation for the collaboration between the La Mappapenning Regional General Hospital and the Bone Regency Dukcapil Office. This involves observing how the dynamics of the collaboration's implementation are managed to understand the efforts made by both parties to maintain mutual trust.

In addition to a shared online folder, the PIC (Person in Charge) from the La Mappapenning Regional General Hospital and the Dukcapil operator regularly engage in two-way communication to prevent errors and overcome obstacles in the process of issuing civil identity documents at the hospital. An interview about data and communication management with the Acting Head of the Administrative Information Management Division at the Bone Regency Dukcapil Office on Thursday, April 17, 2025, stated that, "...by forming a special team from both Dukcapil and the hospital team in a WhatsApp group, two-way communication can be established, and obstacles and feedback can be handled immediately." The Civil administration Operator from the Bone Regency Dukcapil Office added:

"My team and I hold regular internal briefings to align our perceptions and goals for this collaboration. We also share information about the process of issuing civil identity documents at the hospital, such as improving service speed and public satisfaction, and strengthening the culture of cooperation between the hospital and the Dukcapil Office".

Any issues and the entire issuance process can be checked directly through the WhatsApp communication channel. The WhatsApp numbers of the operator and the PIC at the hospital were provided at the start of the cooperation, allowing for two-way information exchange during the document issuance process. This demonstrates the trust each party has in managing and implementing the collaboration, especially in the process of issuing civil identity documents at the hospital. This is consistent with the results of an interview with Mr. Erwan, the Director of the La Mappapening Regional General Hospital, on Thursday, March 20, 2025:

"The division of authority and tasks is regulated in the cooperation agreement and SOP. We ensure these documents are socialized to all relevant units. If there is any confusion, we immediately clarify it through internal meetings or direct communication".

The division of authority and direct communication between the hospital and the Bone Regency Dukcapil Office streamlines the issuance of civil identity documents for mothers who give birth at the hospital. This allows the management of the collaboration's dynamics to proceed in accordance with regulations without prolonging the problem-solving process. This is achieved by leveraging technology and clearly defining the main duties, functions, rights, and obligations of each collaborating party.

In addition to observing patients who were processing civil identity documents at the hospital, the researcher also conducted a literature review on the rights and obligations of the La Mappapenning Regional General Hospital. This review was based on the Operational Cooperation Agreement between the hospital and the Bone Regency Dukcapil Office, specifically Document Numbers 03/PKS/CPL/III/2024 and 440/1176/UPTD RSUD LM, dated March 1, 2024. Article 3 of this agreement outlines the duties and responsibilities, which include the First Party (Bone Regency Dukcapil Office) being tasked with and responsible for preparing a platform to upload required documents and application forms for issuing family cards, birth certificates, and child identity cards. They are also responsible for preparing the necessary facilities and infrastructure to support the implementation of the ININNAWA KU program, and for assigning personnel to verify and validate birth data from the hospital to manage all verified documents until the birth certificate is issued.

Meanwhile, the Second Party (La Mappapenning Regional General Hospital) is tasked with and responsible for preparing supporting facilities and infrastructure for the ININNAWA KU program. They also assign personnel to report residents who give birth at the hospital, fill out resident biodata forms, and upload required documents to the platform provided by the First Party. Furthermore, they are responsible for printing the civil identity documents to be handed over to the family and for protecting and maintaining the confidentiality of resident biodata from unauthorized parties, in accordance with legal regulations.

Based on field observations, the researcher found that the duties and responsibilities, as stated in the operational cooperation agreement, have been carried out by each party at the La Mappapenning Regional General Hospital. According to a patient who received civil identity documents at the hospital during an interview on Thursday, March 20, 2025:

".....I was served well and without any problems. We have already received the civil identity documents for my child without having to go to the Bone Dukcapil office. I think this is very helpful for us because after giving birth we can just focus on caring for our baby."

Based on these research findings, it can be stated that Managing Trust serves as a strong foundation for both parties in building and maintaining trust. By observing how the dynamics of the collaboration's implementation are managed, we can understand the efforts made by the two collaborating parties to adapt to changes in the organizational environment and maintain mutual trust, because the value of accountability is consistently applied.

Managing Culture

Managing Culture is the process of understanding the principles of behavior that are implemented in the collaboration, so that the potential for errors is reduced or eliminated. This is done by considering the Agency Tension factor, which reveals the goals and expectations of each stakeholder in the implementation of government service collaboration in the health and civil administration sectors. This was explained in an interview with the Head of the Bone Regency Dukcapil Office on Thursday, April 17, 2025:

"...every child born must receive a KIA as part of their civil identification data. Later, when the child reaches adulthood, they will re-apply to get a KTP, so the registration, in addition to the birth certificate, is also completed with a KIA for the newborn."

In addition to the KIA, if a child born in the Bone Regency area with the parents also domiciled in the same regency, then he/she must receive a birth certificate issued by the Bone Regency Dukcapil Office. The process of providing civil identity documents at the Dukcapil office is based on the SOP, as explained by Mr. Adi, a Dukcapil operator, on Thursday, April 17, 2025:

"...residents who have a child need to get civil identity documents such as a birth certificate and KIA. For the implementation, we refer to the existing SOP, which is that the public can either come directly to the Dukcapil office or through an online platform that can be accessed via our website. This is also our effort to provide easy and fast service without having to come to our office."

In addition to processing civil identity documents directly at the Dukcapil office, the public can also process documents for newborns online through the Dukcapil website. Field observations also showed that people could come directly to the Dukcapil office and were also informed about the online services available. This was conveyed by Mr. Adi, the operator, on Thursday, April 17, 2025:

"People who come to the Dukcapil office to handle civil identity documents can also do it online so that the waiting time at the office can be shortened. They only need to come to the office to pick up documents that cannot be sent as a soft copy, such as KTP and KIA. However, birth certificates can be sent via WhatsApp or email because it already use an electronic signature."

The Bone Regency Dukcapil Office is enhancing its services online to make it easier for the public to process civil identity documents. Similarly, the La Mappapenning Regional General Hospital has been providing services for pregnant mothers, with staff and doctors in the delivery room checking the pregnancy up to the delivery procedure.

Managing Leadership

Managing Leadership is the ability to manage and direct others to achieve the goals of implementing government service collaboration in the health and civil administration sectors. This is done by understanding three key leadership media: structure, process, and participation.

Based on the research on Managing Culture at the La Mappapenning Regional General Hospital, there is a clear hierarchical structure and a division of tasks based on authority. This is consistent with an interview with Mr. Erwan, the Director of the La Mappapenning Regional General Hospital, on Thursday, March 20, 2025, who stated:

"....in order to carry out the tasks of each field, the main duties and functions have been regulated so that a clear division of tasks can increase the success of the collaboration. Specifically, services in the health sector are handled by the Head of Medical Services, and civil administration services are carried out in the public relations, legal, and marketing department".

This was also affirmed by Mr. Erwan, the Director, on Thursday, March 20, 2025, who said, ".....coordination meetings are held routinely at the beginning of each month to check the work of each field to identify any obstacles in carrying out their duties." The attitude of the leaders at the La Mappapening Regional General Hospital is very supportive of a mutually beneficial collaboration in the performance of each field's tasks at the hospital.

Based on the Governor of South Sulawesi Regulation, which clearly regulates the main duties and functions, the organizational structure and hierarchical flow are clear. Furthermore, the process, as explained in Managing Culture, is also in line with the SOP that has been agreed upon by both parties in the implementation of the collaboration. Thus, the process has supported the Managing Leadership required in the collaboration by prioritizing leadership mechanisms with the proper flow through clear SOPs and job descriptions.

DISCUSSION

The effectiveness of public service collaboration in the health sector with civil administration sector for children born at La Mappapenning Regional General Hospital can be examined by the Collaborative Advantage theory of Huxham & Vangen (2013). This theory provides a framework to support effective collaboration management, namely Goals, Trust, Culture, and Leadership, as follows.

Managing Goals

An agreement on goals among the actors in a network organization is a prerequisite for the successful achievement of common objectives. It is based on the assumption that collaborative goals will not be met or implemented if one of the actors in the network organization disagrees with or does not accept the collaborative objective (Agranoff & McGuire, 2003; Ansell & Gash, 2008). This was found to be the case in this study, where data and documents from the La Mappapenning Regional General Hospital show that all actors have agreed to provide services according to their field of duty. Therefore, the collaboration was carried out based on a shared goal to bring services closer to the public, which has been achieved at a single location.

Managing Trust

Based on the researcher's observations at the La Mappapenning Regional General Hospital, all activities related to providing civil administration services have been carried out in accordance with the common agreement outlined in the Cooperation Agreement. Trust is very important and necessary for a successful collaboration (Emerson, 2018). In reality, many collaborations show that trust is often weak. Trust, as a strong foundation in collaboration, demonstrates the need for it to be built and maintained by each member of the collaborative organization. Having a shared online folder that both parties can access will increase mutual trust regarding the document issuance process.

Managing Culture

The Bone Regency Dukcapil Office is enhancing its online services to make it easier for the public to process civil identity documents. Similarly, the La Mappapenning Regional General Hospital provides services for pregnant mothers, with staff and doctors in the delivery room checking the pregnancy through to the delivery procedure at the hospital. Ketemaw et al., (2024), explain that a shared and compatible culture will lead to greater connectivity and mutual understanding among actors, which results in a smooth collaboration. Conversely, differences in organizational boundaries, types of expertise, and objectives, which represent cultural diversity, can cause conflict, misunderstandings, and friction among the actors involved in the collaboration (Vangen, 2017; Vangen & Winchester, 2014).

Managing Leadership

Researchers on examining leadership in collaboration tend to emphasize relational and process-based leadership to inspire, nurture, support, and communicate (<u>Agranoff & McGuire, 2003</u>). <u>Huxham (2003)</u> argues that the communication structure and process are leadership mechanism that play a very important role in directing specific outcomes.

The Managing Leadership process has been implemented by the Director, as the highest leader in the hospital, by routinely conducting work evaluations and directing his officials according to their respective fields of duty. Furthermore, the Managing Leadership aspect also includes the form of participation in the implementation of the collaboration, in this case, between the Director of the La Mappapenning Regional General Hospital and the Head of the Bone Regency Dukcapil Office.

All parties participate, and the Director provides oversight in the implementation. This was evident during the observation of the duties of the head of public relations, legal, and marketing, who directly checked on patients and the necessary files for issuing civil identity documents for newborns at the hospital. According to. Menurut Huxham & Vangen (2013) collaboration is characterized as an intense form of mutual connection among actors who are bound and work together to gain individual and collective benefits and support one another. In exploring the principles and practices of achieving collaborative advantage, a number of behavioral qualities are considered very important.

CONCLUSION

The collaboration between the La Mappapenning Regional General Hospital of South Sulawesi Province and the Bone Regency Dukcapil Office to ensure newborns at the hospital immediately receive civil administration documents (Birth Certificates) can be summarized based on the indicators of Managing Goals, Managing Trust, Managing Culture, and Managing Leadership as follows:

Based on the Managing Goals approach, the collaboration between the health and civil administration sectors in providing public services for newborns is effective, though there is still room for improvement. This collaboration has successfully unified the goals of both institutions, which is to provide an integrated service that quickly and accurately issues birth documents (birth certificates, family cards, and child identity cards).

Based on the Managing Trust approach, the collaboration between the La Mappapenning Regional General Hospital and the Bone Regency Dukcapil Office shows quite effective and positive results, particularly in building and maintaining trust between the institutions and with the public through the Cooperation Agreement signed by policymakers from both agencies.

Based on the Managing Culture approach, the collaboration between these two public institutions shows that aligning their organizational cultures plays a crucial role in the success of integrated public services, positively impacting the effectiveness of services in both the health and civil administration sectors.

Based on the Managing Leadership approach, the collaboration between the La Mappapenning Regional General Hospital and the Bone Regency Dukcapil Office is influenced by strong, visionary, and collaborative leadership that promotes cross-sector synergy. This is in line with the three

leadership media: the organizational structure as the foundation for effective collaboration, the SOP as a crucial medium for regulating the cross-sector process, and participatory leadership at every stage of the cooperation. All these factors make a real contribution to increasing the effectiveness of public service collaboration.

The recommendations from this study are to conduct regular monitoring and evaluation of the implementation of the Cooperation Agreement (Perjanjian Kerja Sama/PKS) to ensure that the collaborative goals are truly achieved. This should involve various elements, such as the community receiving the services, to get input from all perspectives for optimizing the implementation of the PKS. It is also recommended to establish a fixed communication channel (focal point) in each institution to maintain daily coordination and avoid miscommunication, and to create a joint SOP as part of the Cooperation Agreement document to strengthen public trust and mutual trust among the collaborating parties. The study recommends improving the integration of information systems between the hospital and the Dukcapil office, for example, by creating an integrated birth services dashboard that can be accessed by both parties, such as through a joint website. This would enhance collaboration by gradually testing and developing digital services, starting with the most needed features like automatic notifications or document tracking to create an effective and efficient work culture. Finally, it is necessary to conduct regular technical capacity and public service training, including simulations for handling special cases. Additionally, providing awards or incentives to employees from both institutions who demonstrate the best collaborative performance would serve as a cultural motivation.

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