



Management of Nutritional Services in Regional General Hospitals

Drs. Haji Amri Tambunan

Tommy Syahputra Pardede¹, Chrismis Novalinda Ginting², Karmila Kaban³

^{1,2,3}Master of Public Health, Faculty of Medicine, Dentistry and Health Sciences, Universitas Prima Indonesia, Medan

Email Correspondence : tommisyahputra833@gmail.com

<p>Track Record Article</p> <p>Accepted: 11 August 2024 Revised: 01 September 2024 Published: 06 November 2024</p> <p>How to cite : Pardede, T. S., Ginting, C. N., & Kaban, K. (2024). Management of Nutritional Services in Regional General Hospitals Drs. Haji Amri Tambunan. <i>Contagion: Scientific Periodical Journal of Public Health and Coastal Health</i>, 6(2), 1139–1153.</p>	<p style="text-align: center;">Abstract</p> <p><i>Nutrition services are part of medical support services as one of the benchmarks of service quality in hospitals. Nutritional intake of patients is a crucial issue today due to the high prevalence of malnutrition. Good management must be carried out by the nutrition installation so that patients can meet their nutritional needs. The purpose of this study was to determine the description of nutrition service management at the Haji Amri Tambunan Deli Serdang Regional General Hospital. This type of research is qualitative with a case study design. This research was conducted at the Regional General Hospital Drs. Haji Amri Tambunan Deli Serdang. This research was conducted in May and June 2024. The research informants were 8 consisting of the Head of Medical Support as much as 1, Head of Nutrition Installation as much as 1 Administration as much as 2 people and Nutritionists as much as 2 people and nutrition staff as much as 2 people. Data collection was done with indepth interviews, observation and documentation. Data analysis in this study with data reduction, data display, and conclusion drawing. The results of the study can be stated that the management of planning, organizing, implementing, and supervising nutrition services is in accordance with the SOP. Internal factors that support are standard operating procedures, and internal factors that hinder are human resources. External factors are cooperation with outside parties. From the results of the study it can be concluded that the management of nutrition services has been running well. It is recommended that the Nutrition installation of Drs, Haji Amri Tambunan Deli Serdang General Hospital can increase human resources so that no officers do double work and change the food menu should not be less than 10 days to avoid saturation of patients in consuming food.</i></p> <p>Keywords: Planning, Organizing, Implementation, Supervision, Nutrition Service Management</p>
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INTRODUCTION

In essence, health services are an effort to improve the optimal level of public health. Minimum service standards in the health sector refer to the type and quality of essential services required by the government and that every individual has a minimum right to receive (Sumerta & Redana, 2022). Hospital nutrition services are part of medical support services, which are a benchmark for the quality of service in hospitals (Emiliana et al., 2021; Ratnaningsih et al., 2023). Hospital nutrition services have the role of planning menus and distributing food to inpatients and outpatients. This service aims to help them achieve optimal nutritional status by providing food that is appropriate to the patient's clinical condition, nutritional status and metabolic status (Familta et al., 2019).

Nutrition services provided to inpatients include a series of continuous nutritional care provided to patients which includes nutritional assessment, determining nutritional diagnosis,

nutritional intervention, nutritional monitoring and evaluation (Poluan et al., 2023). Patient nutritional intake is a crucial issue in hospitals today, where the high prevalence of inpatient malnutrition of around 40% related to disease can not only worsen patient clinical outcomes such as length of stay, morbidity, mortality and quality of life, but also the overall sustainability of the system. health services (Arief et al., 2023; Rinninella et al., 2023). Thus, meeting patients' nutritional needs through a balanced diet will have a significant positive impact on their ability to recover. Nutrition installations that directly deal with these problems need to practice good management (Sriantara et al., 2023).

Management of hospital nutrition services is managed through a series of stages, including organizing, planning, implementing and supervising nutrition management (Cholilullah et al., 2021). However, in reality, not all hospitals have implemented nutrition service management well. There are several obstacles faced, for example limited menu variations, lack of flexibility in meeting patient food needs (Fink et al., 2023). And lack of training for nutrition installation staff which can affect quality and patient satisfaction. related to nutrition services in hospitals (Alqurashi et al., 2019; Sathiaraj et al., 2019). Thus, it is necessary to research strategies and techniques in evaluating nutrition service management in hospitals that can improve service quality and patient satisfaction (Arief et al., 2023).

Research Sriantara et al., (2023), stated that the lack of budget provided for one portion of patient food, as well as inaccurate data provided by other installations, namely the Inpatient Installation regarding patient data, resulting in errors in serving patient food are problems found in the nutrition installation of Buleleng Regency Hospital.

Research Emiliana et al., (2021), revealed that the inpatient nutrition service of RSU. Bahteramas has not been implemented optimally where four of the 14 indicators of hospital nutrition guidelines related to menu planning, ordering and purchasing, cooking and food distribution are still not well fulfilled.

Research Familta et al., (2019), that the lack of human resources so that many officers do double jobs and there is still a lack of facilities and infrastructure such as water heaters to the room is a problem of nutrition services found in the Arifin Achmad Regional General Hospital, Riau Province. Research Yustina et al., (2021), that the problems of nutrition services in the hospital include the location of the kitchen where patient food management is not feasible because it is close to the mortuary isolation room and ipal or waste processing machines. In addition, nutrition personnel are also still lacking so that there can be delays in food distribution services.

Research Sartika et al., (2022), mentioned that the management of nutrition services at RSUD Besemah Pagar Alam has not gone well. This can be seen from the results of his research that aspects of the process of planning, receiving storing and distributing food are not in accordance with the standards in hospital nutrition guidelines, while aspects of food procurement include ordering and purchasing food ingredients and processing food ingredients are appropriate including the availability of menus, menu guidelines, menu cycles, food ingredients to be cooked, cooking utensils, the existence of cooking assessments, the availability of cooking SOPs, and regulations on the use of food additives.

Regional General Hospital Drs. Haji Amri Tambunan Deli Serdang, previously known as the Deli Serdang Regional General Hospital, is located in the city of Lubuk Pakam, the capital of Deli Serdang Regency. This hospital is the hospital chosen by the Deli Serdang Regency Government as a service referral hospital with class B education status. The results of the preliminary study found that problems with nutrition services include a lack of chefs and waiters which can hamper the provision of food to patients, a minimum budget provided by hospitals for one portion of a patient's food, and inaccurate data regarding the number of inpatients resulting in mistakes in serving patient food. Therefore, it is necessary to have a further understanding regarding the management of nutrition services at the Drs Regional General Hospital. Haji Amri Tambunan Deli Serdang.

METHODS

This type of research is qualitative research using a case study design that aims to describe the management of nutrition services at the Drs. Haji Amri Tambunan Deli Serdang Regional General Hospital. This research was conducted at the Drs. Haji Amri Tambunan Deli Serdang Regional General Hospital. This research was conducted in May and June 2024.

The main informants of this study were the Head of Medical Support as much as 1 and the Head of the Nutrition Installation as much as 1. Key informants were 2 administrators and additional informants were 2 nutritionists and 2 nutrition staff.

Data collection with interviews was conducted with indepth interviews to explore information holistically and clearly from informants. Observation is done by equipping yourself with a format or blank as an instrument that contains items that are the focus of research. And documentation is done by utilizing sources in the form of data and records or reports that are relevant and related to the research problem.

Data analysis in this study of the Miles and Huberman model consists of a data reduction process of selecting or selecting, focusing or focusing and simplifying all types of information

that support research data obtained and recorded during the data research process. Data display data presentation is done in the form of brief descriptions, charts, relationships between categories, flowcharts and the like. Presentation of data is most often used in qualitative research in the form of narrative text. And Conclusion drawing in the form of taking conclusions in the form of a description or description of an object. This research has received ethical approval for health research at Drs. H. Amri Tambunan Regional General Hospital with number 445.013/KEPK/RSUD-AT/VI/2024.

RESULTS

Table 1. Informant Statements regarding Nutrition Service Planning at the Drs Regional General Hospital. Haji Amri Tambunan Deli Serdang

INFORMANT	STATEMENT
Administration	Before planning dietary data, we collected information about the patient, including their diagnosis and dietary needs. The clinical nutritionist then conveys the patient data in the room to the nutritionist, who then manages the patient's nutrition. Menu changes are made every 10 days. If there are leftovers on the menu, such as tuna, we immediately notify the nutrition team to make menu adjustments. The menu served is in accordance with the plans made by the room nutritionist and staff.
Head of Nutrition Installation	Menu planning follows a 10-day cycle with predetermined portion standards and recipes. The menu is calculated based on the type of food that will be served, such as M2 or soft food, and adjusted to the budget according to the Regional Regulation from the District Government Regent's office. Food providers are selected through the MOU and are responsible for providing food as ordered. The budget for three meals and two snacks per patient per day is IDR 50,000, which is paid by management to the provider. Menu planning that needs to be changed is discussed with the Medical Support department, then continues with the Service Division, Deputy Director 2, and finally to financial management before it is decided with the provider. Facilities and infrastructure are in accordance with the Ministry of Health's SOP and have passed 5 plenary sessions, with renewal carried out every year.
Head of Medical Support Division	The hospital plans the patient's food menu per day based on entries from nurses in each room. The number of daily patients determines food requirements. The menu follows a 10-day cycle that is tailored to the patient's needs, diet, and type of disease. The expenditure budget is evaluated every quarter and comes from the BLUD (Regional Public Service Agency), and approved by the director. The annual evaluation of the menu and food ingredients is carried out by the nutrition and Medical Support Division, then approved by Deputy Director 2 (Service Sector). Facilities and infrastructure are adequate, and stocks of fragile materials are available.
Administration	The menu planning is approved by the installation head first, then submitted to the Medical Support Division, then reported and approved by the Service Division, from the Service Division it is forwarded to the financial management section and financial management contacts the provider.
Nutritionists	Menu planning is based on requests from the room, with room nutrition entering food according to the type of disease and the patient's diet as determined by the doctor. The menu is prepared based on this information. Menu changes are made every 10 days in a three-month cycle. The food menu is adapted to local markets and the situation of the surrounding area. Menu planning must comply with the

INFORMANT	STATEMENT
	Ministry of Health's SOP prepared by a nutritionist, and the menu served is in accordance with previous planning.
Nutritionists	Planning a patient's diet starts with a 10-day cycle, adjusted based on the number of patients and the diet determined by the doctor. The type of food is adjusted to the patient's diet, such as regular food, soft, filtered, or using a probe. The menu served is in accordance with planning from MSPM, with the patient's diet set by the doctor and entered into SIMRS, where the patient's diet barcode is printed and updated every day.
Nutrition Staff	The food menu is determined according to the patient's history, without errors. Carefully pay attention to the patient's diet, such as reducing salt and avoiding soup for kidney disease patients, as well as reducing sugar and measuring rice for DM patients, with a choice of fruit such as banana and watermelon.
Nutrition Staff	Usually the nutrition staff and the head of the nutrition installation discuss to determine the patient's food, diet... this patient, this menu... for the next 10 days. Oh yes, the food served is suitable for the patient. There is a 10 day cycle here... the 10 day cycle is for 3 months. It was planned beforehand. For today, the menu is in accordance with the diet, right... according to the patient's condition. That's it.

Planning in management as the first step of achieving goals by providing direction and clarity of these goals so that all components or elements in the organization know well the goals to be achieved.

Based on the results of interviews with informants related to nutrition service planning, it is found that the management of nutrition service planning has been running well at the Drs. Haji Amri Tambunan Deli Serdang Regional General Hospital. It can be seen that the entire food menu served to patients, especially inpatients, is in accordance with the previous menu planning. The food menu served is also based on the medical history and diet of each patient. Every 10 days per every three months, the patient's food menu will be changed. The use of food ingredients is adjusted to the surrounding environmental situation. In addition, facilities and infrastructure are sufficient. The budget has been determined by management for each year.

Table 2. Informant Statements regarding the Organization of Nutrition Services at the Drs Regional General Hospital. Haji Amri Tambunan Deli Serdang

INFORMANT	STATEMENT
Administration	The Kais are selected directly by the director. Coordinators in each section of the nutrition installation are selected by Kais. The division of tasks for each member has been adjusted to their respective abilities.
Head of Nutrition Installation	The top structure is the director, then enters the service sector (WaDir 2), below that is the medical support sector, below the medical support there is the Head of the Nutrition Installation and the coordinator in each unit is selected by the Head of the Nutrition Installation. The organizational structure in nutrition already has a model from above. The person's position is in accordance with their competency in each nutrition unit.
Head of Medical Support Division	"The top structure is the director, then enters the service sector (WaDir 2), below that is the medical support sector, below the medical support there is the Head of the Nutrition Installation. The secretariat created the structure and issued the decree because they have organizational guidelines."

INFORMANT	STATEMENT
Administration	The division of staff duties in nutrition services is carried out based on ANJAB (Job Analysis) from functional positions, classified into managerial, and applied in the room. Coordination of nutrition admin tasks is regulated through the BKN EKIN for civil servants and hospital EKIN for non-PNS or honorary workers. EKIN BKN is assessed every three semesters by authorized officials. The Head of the Nutrition Installation coordinates nutrition admin tasks, which are listed in ANJAB and understood by each staff.
Nutritionists	The nutritionist makes a menu plan which then requires approval from the head of the installation through a meeting. Staff are divided according to position and needs in the nutrition installation. The food preparation process begins with receiving raw food ingredients, which are then washed, sorted, cut and processed by the chef. After being processed, the food is served in the distribution room, where the banquet staff sorts the food according to the patient's receipt or diet ticket. For class 1 and VIP, food containers have been determined, while for class 2 and 3 use bento. The meal attendant delivers the meal to the patient, checks the patient's name and diet ticket, and delivers the meal when appropriate. Diet tickets are received from the nutrition admin, who receives entries from room nutrition.
Nutritionists	There are staff who do multiple jobs such as quality control, chef, clinical nutrition, distribution, and reporting. The method for grouping the tasks of each nutrition staff is based on their respective abilities and is determined by the Head of the Nutrition Installation.
Nutrition Staff	The nutrition staff have adjusted their work to their competencies.
Nutrition Staff	There are no staff who do double work based on their educational abilities.

Organizing is a process of grouping people, tools, tasks, responsibilities or authority in such a way as to create an organization that can be moved in order to achieve predetermined goals.

Based on the results of interviews with informants in this study it was found that the management of organizing nutrition services has been running well at the Drs. Haji Amri Tambunan Deli Serdang Regional General Hospital. It is seen that all nutrition staff already have their respective duties in accordance with their competence. The top structure is the director, followed by deputy services, one of which is supporting services that include the nutrition installation. The hospital has an assessment team for the performance of all staff, including staff in the nutrition installation. For the patient's diet, the nutritionist plans the menu. After obtaining an acc from the head of the installation, the food can then be logged in to be provided and served to patients.

Table 3. Informant Statements regarding the Implementation of Nutrition Services at the Drs Regional General Hospital. Haji Amri Tambunan Deli Serdang

INFORMANT	STATEMENT
Administration	If a patient wants to go home, the clinical nutritionist consults with the outpatient clinic, where a nutritionist can be called for cases such as malnutrition. If a doctor is not available, nutrition education tasks are carried out by clinical nutrition. For inpatients, screening is carried out in the emergency room within 24 hours to obtain information such as height, weight and lab results, which are then used to determine diet menus and nutritional education based on disease diagnosis.
Head of Nutrition	Here, the workflow from ordering to receiving food is organized to precise specifications, followed by selection, storage, and maintenance at appropriate

INFORMANT	STATEMENT
Installation	temperatures, with no long-term stock—only for one day of use. Nutrition consultations for outpatients are now handled by nutritionists who attend twice a week, with room nutritionists handling consultations and education on the other days. Each room has a nutritionist who carries out 1x24 hour screening and monitoring, with the results completed at CPPT and transferred to SIMRS. The head of the nutrition installation prepares a food schedule for patients, with a morning and afternoon duty schedule.
Head of Medical Support Division	The implementation of nutrition services is running well. At the clinic, a nutritionist handles consultations, although he is not present every day. Patients must be referred by the DPJP before nutrition consultation, with the role of clinical nutrition remaining mandatory. All inpatients are accompanied by clinical nutritionists, who provide counseling and evaluation every 3 days. The food distribution schedule follows the existing SOP. The food management process includes receiving goods, sorting, washing, cutting, processing, serving and distributing to patients. So far, obstacles in implementation can be overcome.
Administration	The implementation is organized, the first thing is that the patient's diet is determined by the room nutritionist in collaboration with the respective room doctor, then recorded in SIMRS. In the SIMRS you will see the patient's diet and the food ordered by the room nutritionist, then the nutrition admin makes a request to order goods, from there the items ordered according to the menu will come, our menu has a 10 day cycle and will be applied based on the diet specified. distributed to each room and then distributed according to the diet and name of the patient listed.
Nutritionists	Inpatient and outpatient nutrition consultations are provided by nutritionists. After the patient returns from inpatient care, the nutritionist provides nutritional care to the patient so that he can apply it at home.
Nutritionists	Incoming food ingredients are sorted between wet and dry, then processed and distributed. Morning food is distributed around 7, lunch between 11-12, and afternoon meal between 5-6. The food menu is served according to the doctor's instructions, with special adjustments for patients with kidney disorders or diabetes following standard spices, recipes and menus. Before distribution, quality control checks taste, texture and compatibility with the patient's diet barcode to minimize complaints.
Nutrition Staff	The entire implementation of providing and serving food is structured and planned in accordance with SOP.
Nutrition Staff	The distribution of food to patients depends on what kind of service the room is in. Then the nutrition staff discussed it and conveyed it to the waiter. Amprahan from the room. The room is spacious, for example there are 26 patients, the diet uses the SIMRS system up to the nutritionist. How many patients for today. Then it was discussed... the distribution of food was appropriate. For special patients, for example diabetes patients, definitely reduce sugar... use sugar below 5% for 1 day of calories... for the heart, reduce oil, fried food, limit salt.

Implementation (actuating) aims to mobilize group members to achieve company goals and company members to avoid subordinates not carrying out their duties under pressure or coercion but on the basis of conscious choice with full responsibility.

Based on the results of interviews with informants in this study, it was found that the management of the implementation of nutrition services has been running well at the Drs. Haji Amri Tambunan Deli Serdang Regional General Hospital. It can be seen that the entire implementation of nutrition services already has a workflow. When implementing centralized

food distribution to inpatients, the food is in accordance with the patient's medical history and diet, and the distribution time has been determined by the nutritionist. Before food is processed and served, food ingredients are sorted, sorted and cleaned first. Dry and wet food ingredients are placed in their respective storage areas. The hospital does not have a large stock of food ingredients. Food ingredients that arrive are only for one day's use. During implementation, there are still staff or dietitians who do double work, whether it is working in the kitchen, or providing nutritional care and consultation to patients.

Table 4. Informant Statements regarding Supervision of Nutrition Services at the Drs Regional General Hospital. Haji Amri Tambunan Deli Serdang

INFORMANT	STATEMENT
Administration	"Once there was a complaint from a patient in terms of the taste of the food and there were objects that got into the food and the first person to deal with the complaint was the nutritionist in the room, then the complaint was forwarded to the Nutrition Installation for a meeting about the complaint and we apologized directly to the patient and complaints are handled immediately on the same day, if we complain repeatedly we will be subject to SP by our superiors."
Head of Nutrition Installation	"Every morning we hold a briefing and ask each coordinator from each unit about the problems and menu that will be prepared today, and the person in charge of supervising nutrition services at the hospital is the Head of the Nutrition Installation, then the Head of the Nutrition Installation reports to the Medical Support Division, and the Medical Support Division reports to the Service Division (WaDir 2) and in making decisions, the Head of the Nutrition Installation asks each coordinator from each unit. For internal audits in this nutrition installation, there is someone who supervises it, namely PPI, PPI gives monthly reports, they monitor us and provide input if there are nutrition staff who violate SOPs such as not wearing masks, gloves, head coverings and aprons because they are hot to the Head of the Nutrition Installation . No one knew about our PPI's arrival, they came suddenly"
Head of Medical Support Division	"Nutrition services in hospitals are assessed based on 4 quality indicators which are evaluated every quarter, for example when a patient doesn't want to eat, we evaluate why, whether it's because of the taste, texture, we evaluate. Those who supervise nutrition services, especially nutritionists, are Quality Control, Head of Nutrition Installation, PPI, and K3RS and management also supervises. For internal audits, there are meetings. For example, there is a report from PPI and then the results of the report are discussed together. No one knew about the arrival of PPI and K3RS. The hospital's way of overcoming the problem of complaints is by asking clinical nutritionists to always go around evaluating the food served to patients. "If there is a shortage of food, we immediately contact the provider to send the food quickly because we don't keep food in stock."
Administration	"If there is a problem, we will synchronize the number of patients being fed. There are misses or additional patients, then we synchronize them. Everything is structured."
Nutritionists	"If there is a problem or complaint, the room nutritionist educates and apologizes to the patient then reports it to the nutrition installation to find a solution. Usually complaints are resolved on the same day."
Nutritionists	"The person who supervises the performance of the staff in the nutrition installation is the Head of the Nutrition Installation and the person who supervises the distribution of food to patients is quality control."
Nutrition Staff	"All food served to patients is supervised by a nutritionist to control quality."

INFORMANT	STATEMENT
Nutrition Staff	"If we are staff, then we are heads of nutrition installations... but if it's nutrition as a whole, it's definitely the service."

Supervision aims to ensure that the implementation of activities is in accordance with the plans and policies set, knowing as early as possible the progress and deviations that occur in the implementation and if there are deviations, carrying out early repairs and if there are deviations and obtaining new material can be used for the preparation of the next program.

Based on the results of interviews with informants in this study, it was found that the management of nutrition service supervision has been running well at the Drs. Haji Amri Tambunan Deli Serdang Regional General Hospital. It is seen that the entire implementation of the provision and distribution of food served to patients is supervised and controlled by nutritionists who collaborate or are assisted by nutritionists in each patient's inpatient room. If there are problems, obstacles or complaints from patients about the food served, then it will be discussed to find solutions directly on the same day. For outpatients, nutritional supervision is carried out by a nutritionist. For internal audits, this is done in an internal meeting.

DISCUSSION

Management of Nutrition Service Planning at Drs. Haji Amri Tambunan Deli Serdang Regional General Hospital

A hospital management makes plans so that goals become clearer and more directed. this planning is the first step in achieving goals that will provide direction and clarity of these goals so that all hospital parties know well the goals to be achieved and all parts of the organization will work together towards the same goal. Good planning will require an adequate monitoring and evaluation system and serve as feedback for control measures (Yustina et al., 2021).

One of the interview materials discussed between researchers and informants about nutrition service planning in this study is the food menu. Based on the results of interviews with informants related to nutrition service planning, it was found that the management of nutrition service planning has been running well at the Drs. Haji Amri Tambunan Deli Serdang Regional General Hospital. It can be seen that the entire food menu served to patients, especially inpatients, is in accordance with the previous menu planning. The food menu served is also based on the medical history and diet of each patient. Every 10 days per every three months, the patient's food menu will be changed. The use of food ingredients is adjusted to the surrounding environmental situation. In addition, facilities and infrastructure are sufficient. The budget has been determined by management for each year.

The results of this study are in line with Familta et al., (2019), who said that food management planning management in the Tampan Mental Hospital nutrition installation was running well according to the Ministry of Health's hospital nutrition service guidelines. There are already regulations on hospital feeding, have portion standards, recipe standards, seasoning standards and menu standards that are used 10-day menus. Menu planning in the Tampan Mental Hospital nutrition installation in menu planning, the steps taken are in accordance with the recommendations of hospital nutrition guidelines where the head of the nutrition installation together with staff in the nutrition installation together make menu planning.

The management of nutrition installation services at the Arifin Achmad Regional General Hospital Riau Province has been running well (Familta et al., 2019). The results of this study are supported by Muliawardani et al., (2016), that the planning of nutrition services at Grhasia Mental Hospital is well planned and in accordance with the role of nutrition and social medical records. Grhasia Mental Hospital conducts budget planning which is carried out once a year and menu planning every six months. Menu planning is adjusted to the nutritional needs of patients, the budget, with the disease and adapted to environmental conditions such as the provision of food ingredients in the market. Menu planning uses a 10-day menu cycle and is carried out every six months.

According to Srientara et al., (2023), mentions that the main activity in the first planning function is to set goals and performance targets. Good planning will certainly result in good performance as well. Planning must represent many parties and be prepared based on the needs of various units in the organization, therefore “planning cannot be carried out by just a few people” (Sudianing et al., 2022). Good planning requires an adequate monitoring and evaluation system that serves as feedback for control measures. Therefore, the availability of facilities and infrastructure will help streamline the management of nutrition service planning in hospitals (Familta et al., 2019).

Organizational Management of Nutrition Services at the Drs. Haji Amri Tambunan Deli Serdang Regional General Hospital

Organizing is a process of grouping people, tools, tasks, responsibilities or authority in such a way as to create an organization that can be moved in order to achieve predetermined goals. Organizing provides input and provides direction to subordinates to be able to carry out their duties properly, and understand the field of tasks assigned to them, thus directing aims to form a relationship that connects actions with goals. This function is more likely to regulate administrative activities. The goal is to achieve efficiency and effectiveness in holding and subsequent functions (Yustina et al., 2021).

Based on the results of interviews with informants in this study, it was found that the management of organizing nutrition services has been running well at the Drs. Haji Amri Tambunan Deli Serdang Regional General Hospital. It can be seen that all nutrition staff already have their respective duties in accordance with their competence. The top structure is the director, followed by deputy services, one of which is supporting services that include the nutrition installation in it. The hospital has an assessment team for the performance of all staff, including those in the nutrition installation. For the patient's diet, the nutritionist plans the menu. After obtaining an acc from the head of the installation, the food can then be logged in to be provided and served to patients.

The results of this study are in line with research conducted oleh Muliawardani et al., (2016), stated that the organization in the Grhasia Mental Hospital nutrition installation was well arranged, namely the organizational structure that was in accordance with its functions such as human resources, there was a division of tasks, authority and responsibility. Determination of human resources is a form of organization, in this case the number of human resources needed and determined the field of work according to their expertise and competence (Sriantara et al., 2023).

Nutritionists in hospital nutrition services are nutrition professions consisting of Registered Diesien (RD) and Technical Registered Diesien (TRD). Registered diesien are responsible for nutrition care services and food and diet services, while TRD are responsible for assisting RD in carrying out nutrition care and food and diet services and carrying out authority in accordance with competence. The stratification and assessment of RD and TRD are adjusted to the levels in the existing nutrition functional positions. To meet accreditation standards and the implementation of hospital nutrition services, a nutrition service leader is needed who has competence and experience in the field of nutrition/dietetek, namely a Registered Diesien (RD) and preferably those who have received management education (Familta et al., 2019).

Management of Nutrition Service Implementation at Drs. Haji Amri Tambunan Deli Serdang Regional General Hospital

Implementation (actuating) is an effort to move group members in such a way that they want and try to achieve the company's goals and the goals of the company's members because the members also want to achieve those goals. This is very important to avoid subordinates from carrying out their duties under pressure or coercion but on the basis of conscious choice with full responsibility (Yustina et al., 2021).

Based on the results of the researcher's interviews with informants in this study, it was found that the management of the implementation of nutritional services had been running well at the Drs. Haji Amri Tambunan Deli Serdang Regional General Hospital. This can be seen that the entire implementation of nutritional services already has a workflow. When distributing food centrally to inpatients, the food is in accordance with the patient's medical history and diet, and the distribution time has been determined by a nutritionist. Before the food is processed and served, the food ingredients are sorted, divided and cleaned first. Dry and wet food ingredients are placed in their respective storage areas. In the hospital, there is no large stock of food ingredients. The food ingredients that come are only for one day's use. During the implementation, there are still staff or nutritionists who do double work, whether it is work in the kitchen, or providing nutritional care and consultation to patients.

The standard operating procedures carried out by nutrition officers in the management and distribution of food at the Nutrition Installation have been running well (Familta et al., 2019). The results of this study are also in line with research Muliawardani et al., (2016), that the equipment in the kitchen of the Grhasia Mental Hospital nutrition installation is sufficient to support the processing process and the equipment is always maintained and cared for. If there is any damage, it will be immediately reported to the superior so that it can be repaired immediately. Meanwhile, the distribution of food is carried out by waiters and food is distributed three times a day, namely morning, afternoon and evening. The method used when distributing food uses the centralized and decentralized methods.

However, in contrast to research Safitri (2017) in Familta et al., (2019), that there is a problem with the method or standard operating procedure for distributing food at Tampan Mental Hospital, Riau Province, namely the lack of food distribution officers, so that the ones distributing the food are patients.

In order for food services to run optimally, the room, equipment and supplies need to be planned properly and correctly. Generally, there are two ways to distribute food in hospitals, namely centralized food distributors. This method is commonly referred to as the "centralized" distribution method. This provision, patient food is distributed and served in cutlery at the food processing area. Then, non-centralized food distributors. This method is commonly referred to as the "decentralized" distribution system. Patient food is brought from the processing area to the kitchen of the patient's nursing room, in large quantities, to then be served in each patient's cutlery according to the food request (Familta et al., 2019).

Nutrition Service Supervision Management at Drs. Haji Amri Tambunan Deli Serdang Regional General Hospital

Supervision (controlling) is setting standards, creating changes in achieving goals, developing accountability structures and processes, and evaluating performance. Supervision is carried out with the aim that the implementation of activities is in accordance with the plans and policies set, knowing as early as possible the progress and deviations that occur in the implementation and if there are deviations, implementing early improvements and if there are deviations and obtaining new materials that can be used for the preparation of the next program (Marmin et al., 2020).

Based on the results of the researcher's interviews with informants in this study, it was found that the management of nutritional service supervision has been running well at the Drs. Haji Amri Tambunan Deli Serdang Regional General Hospital. This can be seen from the fact that all implementations of the provision and distribution of food served to patients are supervised and controlled by nutritionists who collaborate or are assisted by nutritionists in each patient's inpatient room. If there are problems, obstacles or complaints from patients regarding the food served, then this will be discussed to find a solution directly on the same day. For outpatients, nutritional supervision is carried out by a nutritionist. For internal audits, it is included in the internal meeting.

The results of this study are in line with research Muliawardani et al., (2016), that supervision of nutritional services at Grhasia Mental Hospital is carried out by the supporting party by receiving input and conducting direct observations of all activities in the nutritional installation. Supervision is also directly supervised by the head of the nutritional installation where each officer has their own evidence for each job they do. The results of the supervision will be brought to the supporting part and the head of the nutritional installation himself is directly supervised by the supporting part. Supervision is also carried out by internal audits which are carried out every six months. Internal audits are carried out by the hospital. In addition, there is also complaint handling and internal meetings which are held once a month.

The function of supervision is very important without supervision, the other functions will not run effectively and efficiently. Supervision does not only take place during implementation, but also during planning and organizing. Basically, in the function of supervision there is also an evaluation process to ensure that all activities do not deviate from the goals to be achieved (Familta et al., 2019).

This is reinforced by Manullang's statement (2012) in Sriantara et al., (2023), that the existence of supervision can be expected that the implementers limit their actions so that they

do not deviate too much from what they have obtained. Supervision can be interpreted as a process to implement what work has been carried out, assess it, and if necessary correct it with the intention that the implementation of the work is in accordance with the original plan. So with supervision it can be used as an assessment and correction of the implementation of ongoing activities. In addition, supervision can prevent deviations in the use of authority and funding, and can strengthen the sense of responsibility to all components involved in the organization.

CONCLUSIONS

The results of research regarding the management of nutrition services at Regional General Hospital Drs. Haji Amri Tambunan Deli Serdang showed that planning, organizing, implementing and supervising had gone well. Nutrition service planning ensures that the menu served is in accordance with the patient's diet and is updated every 10 days per three months. Organization has been effective with staff assigned according to their respective competencies. Implementation also went well, with the menu adjusted to the patient's diet and medical history, as well as scheduled food distribution. Supervision is carried out strictly, with control by nutritionists, nutritionists and nurses, as well as handling problems or complaints directly on the same day.

It is recommended to the Nutrition Installation of the Drs. Haji Amri Tambunan Deli Serdang Regional General Hospital to increase human resources to avoid double work for staff. Families of patients who will be hospitalized should provide information on their medical history and daily diet to the doctor or nutritionist so that the food can be adjusted. In addition, the food menu in the nutrition installation should be changed less than 10 days to avoid patient saturation.

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