

# The 3<sup>rd</sup> Jogja Rendezvous for Innovation and Transformation in Medical Education (Just in Time)

### **Excellence in Teaching and Learning in Health Professions Education**

Yogyakarta, 4th - 6th March, 2019

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Department of Medical Education Faculty of Medicine - Universitas Gadjah Mada

# The 3<sup>rd</sup> Jogja Rendezvous for Innovation and Transformation in Medical Education (Just in Time)

"Excellence in Teaching and Learning in Health Professions Education"

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## Welcome Message

The development of knowledge in the field of medicine and health as a result of demographic changes in the recent years, led to the shifting of disease burden and distribution. This phenomenon transformed health care systems and patients, including the need of high quality of care by health careprofessionals.

The increasing demand of health care professionals is followed by the increasing numbers of medical and health care professions education institutions. Consequently, the need for innovation in curricula, teaching and learning methods, and learning resources, become significant for the institutions to produce competent health care professionals. How the leaders and educators in health care professions education overcomethese challenges, is the key to a better health care system.

Jogja Rendezvous for Transformation and Innovation in Medical Education (JUST INTIME) held by the Faculty of Medicine, Public Health, and Nursing Universitas Gadja Mada, invites leaders and educators in Indonesia to join the national seminar discussing the Excellence in Teaching and Learning in Health Professional Education. This is an opportunity for leaders, educators and those who have the same vision, to connect and collaborate, to learn and update, for a better health care professions education in Indonesia.

#### Chairman

Mora Claramita, MD, MHPE, PhD

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## **AGENDA**

Day 1: Monday, 4 March 2019

Time	Agenda	PIC
12.30 – 13.00	Registration for participants	MC: Naya
13.00 – 13.10	Opening	Prof. Dr. Ir. Djagal Wiseso Marseno, M.Agr Vice Rector of Academic and Students Affairs UGM
13.10 – 13.15	Introduction of keynote speakers: CVs	Moderator: Prof. Gandes Retno Rahayu, MD, MMedEd, PhD
13.15 – 15.15	Preparing health professional education institution towards 4.0 era	Keynote speakers: Prof. Ali Gufron Mukti,MD. M.Sc, Ph.D (Ministry of Research, Technology and Higher Education Republic of Indonesia)
15.15 – 17.00	Establishing network and collaboration of health professional education institutions towards 4.0 era	Sugiyanto, S.Pd., M.App.Sc (Head of Board for Development and Empowerment Human Resource of Health, Ministry of Health Republic of Indonesia)
17.00-17.15	Wrap Up and Closing Remark	Moderator

## Day 2: Tuesday, 5 March 2019

Time	•		
08.00 - 12.00	Dies Natalis FK-KMK UGM	JIT Participant may join	
12.00 - 13.00	Lunch		
13.10 - 13.15	Introduction of keynote	Moderator:	
	speakers: CVs	Mora Claramita, M.D, M.H.P.E, Ph.D.	
13.15 – 13.45	Seminar: "FAIMER Institute: Fifteen	John J. Norcini, Ph.D. (President and CEO of the FAIMER	
	Years Educating the World –	Institute)	
	key leaderships in medical and health professions		

	education to approach SDGs."		
13.45 – 14.15	Seminar:	Prof. Ara Tekian, M.D., Ph.D., M.H.P.E.	
	"Improving Capacity of	(University Illinois Chicago	
	Health Care Workforce	Departement Medical Education)	
	Based on Evidence Based		
	Practice in Medical and		
	Health Professions		
	Education."		
14.15 – 14.45	Discussion	1oderator:	
		Mora Claramita, M.D., M.H.P.E., Ph.D.	
14.45 – 15.30	Break		
15.30 – 17.00	Short Communication	Moderator:	
	Free Papers	Yoyo Suhoyo, MD, M.Med.Ed., Ph.D.	
		Siti Rokhmah Projosasmito,	
17.00 – 17.30	Alumni Day	Yoyo Suhoyo, MD, M.Med.Ed., Ph.D.	
	(Launching of regional		
	training)		
17.30-18.00	Closing day I	MC	

## Day 3: Wednesday, 6 March 2019

Time	Agenda	PIC
08.00 - 08.30	Registration	
08.20 - 08.30	Opening Session	MC: Naya
08.30 – 09.30	Panel Discussion: Establishing effective multi- institutional network collaboration  Each panelist: 15 minutes speech	I. John J. Norcini, Ph.D. (FAIMER Institute)  2. Prof.Dr. Med. Tri Hanggono Ahmad, M.D. (Rector of Universitas Padjadjaran)  3. Sugiyanto, S.Pd., M.App.Sc (Head of BPPSDMK RI)  4. Prof Ova Emilia, MD, M.Med.Ed, Ph.D. Sp.OG(K) (Dean of FK-KMK UGM)  Moderator: Prof. Gandes Retno Rahayu, MD, MMedEd, Ph.D.

09.30 - 10.00	Discussion	Moderator:
		Prof. Gandes Retno Rahayu, MD, MMedEd, PhD
10.00 - 10.30	Coffee break	
10.30 - 11.30	Panel discussion:	I. Prof. Ara Tekian, MD, Ph.D, MHPE
	Improving Teaching and	(University Illinois Chicago
	Learning in Postgraduate Clinical Education	Departement Medical Education)
	(Residency) Curriculum	2. dr. Ardi Findyartini, Ph.D (Universitas Indonesia)
	(Residency) Carriculant	3. Prof. Dr. Nancy Margarita Rehatta,
	Each panelist: 20 minutes	MD, Sp. An-Sp. An. KIC. KNA. KMN
	speech	(Universitas Airlangga)
		Moderator:
		Yoyo Suhoyo, MD, M.Med.Ed., Ph.D.
11.30 – 12.00	Discussion	Moderator:
12.00 – 13.00	Break	Yoyo Suhoyo, MD, M.Med.Ed., Ph.D
13.00 - 14.45	Workshop range of	
13.00 – 14.43	selection:	I. Dr. Heny Suseani Pangastuti, SKp,
	I. Workshop practical	MKes
	guide of Nursing	
	2. Workshop practical	2. dr. Yoyo Suhoyo, MMedEd, PhD
	guide of workplace- based assessment	
	3. Workshop practical	3. dr. Titi Savitri Prihatiningsih, MA,
	guide of Entrustable	MMedEd, PhD
	Professional Activity	
	Parallel with IAM-HPE	
	meeting	
14.45 – 15.30	Break	
15.30 – 17.00	Workshop range of	
	selection:	I. dr. Hikmawati Nurokhmanti, MSc
	<ol> <li>Workshop practical guide of OSCE</li> </ol>	
	2. Workshop practical	2. dr. Ide Pustaka Setiawan, MSc,
	guide of Facilitating	Sp.OG
	clinical skills training	
3. Workshop practical		
	guide of IPE	<ol><li>dr. Amandha Boy Timor Randitha, MMedEd</li></ol>
17.00 – 17.30	Closing	MC

# Curriculum Vitae

in Medical Education (Just in Time) 2019

Kedokteran Universitas Sam Ratulangi. Jurnal e-Biomedik 4(1): 7-9. I. Ranti, M.G., Budiarti, I., Trisna, B.N. 2017. Pengaruh Kemandirian Belajar (Self Regulated Learning) Tarhadap Hasil Belajar Mahasiswa Pada Kuliah Mata Struktur Aljabar. Jurnal Pendidikan Matematika 3(1):7.

## Tracer study of midwivery departement poltekkes kemenkes bandung

Yulinda, Dewi Purwaningsih, Sri Mulyati Jurusan Kebidanan Bandung Poltekkes Kemenkes Bandung yulindaaja@yahoo.com, mulyatisri66@yahoo.com

#### **ABSTRACT**

Background: There are increasing number of Midwifery Study Departement in Indonesia. So, there are needed to improve the quality of alumni. One such effort is through research on the exclusion of alumni. Alumni evaluation can be a corrective method for the policies implemented by the Bandung Midwifery Department of Health Ministry of Health Bandung Polytechnic. The purpose of this study was to determine the description of work history, relevance of education with work, learning experience, indicators of competency and competitiveness.

**Summary of works**: The design of this study is a descriptive study. The research sample consisted of alumni and alumni users. Alumni numbered 123 alumni from the Bandung midwifery department of the Bandung Ministry of Health Polytechnic in 2014-2016. The side technique used is total sampling. Data analysis used is frequency distribution.

Summary of results: The results showed 95.1% of alumni had worked, 76% of alumni worked in private institutions (services), length of work <3 months (75%), allied employment positions with midwifery (90.2%), income of I-3 million (54.5%), had changed jobs (82%), important learning experiences for alumni, alumni had the perception of being able to be competitive (61.8%).

Take-home messages: It is hoped that educational institutions will actively find jobs for alumni, through user forums, invite users to educational institutions to promote job vacancies, improve learning facilities and student activities according to Education standards, through updates to classroom conditions, laboratories and tools, infrastructure for student activities to build soft student skills and leadership, development and updates for Practice Learning, through the expansion of midwifery practice in hospitals, preparation of competent clinical advisers in guiding midwife students.

For policy makers it is expected that there will be an increase in action on increasing midwives' motivation and retention in Primary Services, and increasing the ability for midwives in secondary and tertiary services. Improvement of basic facilities for health workers and their families including transport of educational facilities for sons and daughters of health workers, revisions of remuneration in health care packages, and health equipment. Transparent evaluation. Training that is equitable and sustainable on practical land.

Keywords: tracer study, alumni

#### Introduction

Law No. 36 of 2009 concerning Health mandates integrated and comprehensive health efforts in the form of individual health efforts and public health efforts, with a promotive, preventive, curative, rehabilitative approach that is carried out in an integrated, comprehensive and sustainable manner. Midwives are one of the categories of health workers who can participate in an effort to realize optimal achievement of public health, especially maternal and child welfare, this is in line with the achievement Sustainable Development Goals (SDGs). In Higher Education Reform where Law No. 12/2012 and NawaCita 2014-2019 compile a health education system as part of higher education needs to be strengthened to produce

competent health workers to provide plenary services

Quality midwife is produced by midwifery education institutions that are managed by taking into account the development of science, technology and regulation. Midwives' education in Indonesia is currently at the D-III Midwifery level with qualifications as an executive midwife, who has the competence to carry out good practices in service institutions and individual practices (Kepmenkes Number 369/Menkes/SK/III/2007 Concerning Midwife Professional Standards). Alumni are expected to have knowledge attitudes and skills in accordance with national standards so that they can meet the needs and be absorbed by the world of work.

Bandung Midwifery Department of Health Polytechnic of Bandung. as one of the health education institutions has a role to produce professional alumni and can be absorbed in the world of work in accordance with the competence of midwives. At present the challenge for midwifery alumni from the Bandung Midwifery Department in the world of work is increasing because the number of Midwifery Study Programs in Indonesia in general and in West Java in particular is quite high. This can higher competition between alumni of educational institutions on the job field. Therefore, it is necessary to improve the quality of alumnifrom the Bandung Midwifery Department.

One of the efforts to improve the quality of alumni is through evaluating the role of alumni of universities (PT), through alumni searches (Tracer Study). Tracer Study is an alumni tracking study to find out alumni activities after graduating from the transition from the world of higher education to the world of work, work situations, acquisition of competencies, and the use of competencies in work and career travel. Tracer Study is

useful for planning and decision making in educational institutions, planning for allocation of human resources both government and private institutions and industry circles, to find out the compatibility between the results of education and the field of work, to obtain information about the work atmosphere and conditions of the respondents at work. In addition, alumni search is also useful for evaluating university outcomes / outcomes, obtaining information on alumni success in careers. status, income, and relevance between knowledge and skills with responsibility work. as a (accountability) of PT in preparing their students to face the world of work in the future, as a basis for further institutional development in the context of accreditation, as a basis for making improvements in process the learning educational institutions (Rachmi N, 2015). Based on the description researcher above. the was interested in conducting an alumni study of Bandung tracing Midwifery Department.

### Research Methodology

The design of this study was descriptive to determine the description of tracing alumni from

Bandung midwifery department. The target population in this study were all Bandung midwifery alumni from 2014-2016. The number of samples that should be taken is the total sampling of 123 alumni respondents. The way to collect alumni sampling is by total sampling.

The data used is primary data. Primary data was collected directly

from respondents through filling out the questionnaire after being given explanation and giving giving approval. The instrument for this study was a questionnaire by online, mail or telephone.

This study uses univariate analysis to analyze frequency distribution using SPSS for Windows 12.

#### Result

### 1. Characteristics and Work history

Table I.I Characteristics and Work History of Alumni

Category	20	014	2	015	2	016	Total	
	f	%	F	%	f	%	f	%
Age								
21-25 years Old	48	98	39	100	35	100	122	4.9
26-30 years Old	I	2	3	0	0	0	I	95.1
Alumni Work History								
Not work	- 1	2	3	7.7	2	5.7	6	4.9
Work	48	98	36	92.3	33	94.3	117	95.1
Waiting Time for works <3 mounth								
3-6 mounth	34	69.4	23	59.0	18	51.4	75	61.0
6-12 mounth	6	12.2	6	15.4	H	31.4	23	18.7
>12 mounth	7	14.3	5	12.8	4	11.4	16	13.0
	- 1	2.0	2	5.1	0	0	3	2.4
Institution Types								
Central government	4	8.2	5	12.8	- 1	2.9	10	8.1
Local government	20	40.8	3	7.7	5	14.3	28	22.8
Government (BUMN, BHMN)	0	0	- 1	2.6	0	0	- 1	8.0
Private (Services)	24	49.0	26	66.7	26	74.3	76	61.8
Private Manufacturing	0	0	0	0	0	0	0	0
entrepreneur	0	0	- 1	2.6	- 1	2.9	2	1.6
Others	0	0	0	0	0	0	0	0
Position in the Job								
Allied with midwifery	46	93.9	33	84.6	32	91.4	111	90.2
Not allied with midwifery	2	<b>4</b> . I	3	7.7	I	2.9	6	4.9
History of changing jobs								
Yes	36	73.5	27	69.2	19	54.3	82	66.7
no	12	24.5	9	23.1	14	40.0	35	28.5

Based on the table above a number of 123 alumni (95.1%) are around 21 to 25 years old. A total of 117 (95.1%) alumni reported working and 6 alumni (4.9)% did not work, with the reason that they

continued to study as many as 3 people, preparing to go to college, not working because they continued a family-owned business, wanting to take a break from the midwifery world and

taking care of children and families. Where alumni work, spread in several agencies both central government (8.1%), regional government 22.8%, BHMN 8%, self-employed 16% and most work in private institutions such as private hospitals and independent practice midwives by 61.8%.

The longest waiting time for work is less than 3 months (61%), waiting 3-6 months as much as 18.7%. The income of alumni who work is between 1-3 million /

month as much as 54.5%, the amount of salary is 3-5 million / month as much as 27.6%. Alumni work in the private sector (services) much as 61.8%. local (22.8%),central government government (8.1%), government (BUMN, BHMN) (1.6%). Graduates have worked in allied fields with midwifery (90.2%), this shows that alumni have internals with jobs as midwives. There are also alumni who are not allied in the field of midwifery 4.9%. 66.7% alumni have history of changing jobs.

## 2. Experience learning and input for Educational Institution

Table 1.2 of Experience learning and input for Educational Institution

	How important is the learning experience in work						
	ltem	Very important	Important	Less Important	No Important		
_	Class learning	73,2	26,8	niiportant n	0		
	experience	73,2	20,0	· ·	J		
2	Learning experience in the laboratory	82,9	18,15	0	0		
3	Study learning in the community	93,5	6,5	0	0		
4	Study learning in Internship	86,2	13,8	0	0		

Based on the above table, most alumni stated that the learning experience in the classroom (73.2%), in the laboratory (82.9%),

in the community (93.5%), the internship (86.2%) was a very learning important experience.

## 3. Competitiveness indicators (Alumni Perceptions of Their Competitiveness and Competency)

Table 1.3 Competitiveness Indicators

					- N. I
		Very		Less	Not
		Competen	Competen	Competen	Competen
		(%)	(%)	(%)	(%)
1	General knowledge	9,8	81,3	8,9	0
2	English Lesson	<b>4</b> , I	55,3	32,6	8
3	Computer	7,3	77,2	7,5	8
4	Research	8	47,7	36,3	8
	Methodology				
5	Team Work	22,8	77,2	0	0
6	Oral Communication	23,6	74,0	2,4	0
	Skills				
7	Written	16,3	79,6	<b>4</b> , I	0
	Communication Skills				
8	Society	11,4	78,8	9,8	0
	Empowerment				
9	Specific theoretical	12,2	86,2	1,6	0
	knowledge	•	ŕ	•	
10	Specific practical	8,9	85,4	5,7	0
	knowledge	,	,	,	
П	Organizational	8,1	72,4	19,5	0
	Management	,	,	,-	
12	Leadership	7,5	68,4	16,1	8
	=======================================	.,-	, .	, .	

Bandung midwifery alumni stated that they mastered the theoretical knowledge of the study program

86.2%, and mastered knowledge about 85.4% of knowledge.

#### 4. The ability of alumni was needed by employment

Tabel I.4 Alumni Ability

Input for Poltekkes						
		Very	Needed	Less	Not	
No	Category	needed	(%)	Needed	Neede	
		(%)		(%)	d (%)	
T	General knowledge	52,8	45,5	1,6		
2	English Lesson	40,7	55,3	3,3	8	
3	Computer	27,6	48,8	22,8	8	
4	Research	27,6	48,8	22,8	8	
	Methodology					
5	Team Work	78,9	21,1	0	0	
6	Oral Communication	86,2	13,8	0	0	
	Skills					
7	Written	58,5	41,5	0	0	
	Communication Skills					
8	Society Empowerment	65	34, I	8	0	
9	Specific theoretical	62,6	35,8	1,6	0	
	knowledge					
10	Specific practical	65	34, I	8	0	
	knowledge					
П	Organizational	37,4	51,8	8	0	
	Management					
12	Leadership	58,5	39,3	8	8	

Specific knowledge currently needed by alumni for services is Oral Communication Skills (86.2%), teamwork (78.9%), Written Communication Skills (58.5), Leadership (58.5%).

#### Discussion

Based on the results of the study there were alumni who worked and did not work. A total of 117 (95.1%) alumni reported working and 6 alumni (4.9%) did not work. These results show that midwife graduates are very much needed and absorbed in the workforce to date. For those who do not work, many factors influence it, for example, continuing their studies, preparing for college, continuing a family-owned business, taking care of the family. Midwifery Alumniare women who are mothers if they are married, so there are those who

choose to take care of their children because they are married rather than working.

Job search is obtained through several sources of job information including information from friends, relatives, the internet and other sources. The longest waiting time for work is less than 3 months (61%), waiting 3-6 months as much as 18.7%. This shows that midwifery alumni are quickly absorbed to work, more than 50% of alumniare absorbed in work less than 3 months.

Where alumni work, spread in several agencies both central government (8.1%),regional government 22.8%, BHMN 8%, self-employed I 6% and most work in private institutions such as private hospitals and independent practice midwives by 61.8% . Position is a set of jobs that contain tasks that are the same or related to one another, and whose implementation requires the same knowledge, skills, skills abilities even though they are spread in various places. Alumni work more in the field of private services, such as the practice of independent midwives in the West Java region. The choice of type of work in the private sector by reason of selection can be carried out at any time, unlike in government

agencies for employee recruitment for a certain period.

Graduates have worked in allied fields with midwifery (90.2%), this shows that alumni have internals with jobs as midwives. There are also alumni who are not allied in the field of midwifery 4.9%, namely admin at the BPJS Office. Understanding of the profession is a job or field of work that requires the education of high intellectual expertise and independent ethical responsibility in practice. While the definition of a profession in Good's Dictionary of Education defines the profession as "a job that requires preparation of relatively long specialties in Higher Education and is controlled by a special code of ethics ", In the Large Dictionary of Language, Indonesian profession is defined as" a field of work that is based on special (such education as vocational and so on). "In this sense, it can be confirmed that the profession is work to be done with capital of expertise, certain skills and specialties. Alumni who work in accordance with the midwifery family in accordance with the education prepared Bandung Department of Education.

Based on the results of the study showed that alumni had changed jobs (66.7%). According to Shah,

S.M., Zaidi, S., Ahmed, J., Rehman, S.U 2016. Motivation and retention of workplaces are important for the function and quality of health services in a country. Some things that affect a person to move to work are caused by individual factors, external environment and organizational environment in the workplace. Individual / Personal factors include: I) Gender. women's gender is difficult to move due to husband and child reasons. including in Pakistan where culture does not make it easy to move work, 2) Marriage status, 3) Nature of the Job, in emergency conditions must be ready to be called, 4) Absenteeism: senior employees are more often absent from junior employees, 5) Residence and facilities from the workplace. The second factor that affects motivation and retention: I) Work Environment: motivation collaboration with employees. Unsupportive and apprehensive staff causes non-conducive work. The third factor is the Organization is 1) Remuneration, 2) Professional Growth and Training, limited opportunities for continuous professional development (CPD), this training is needed because the staff gets old and keeps it updated on innovation and technology in health. 3) **Promotions** Transfers: workplace promotions and convictions are the cause of

employee retention. Especially transfer to peripheral areas. 4) Supplies and Medical Facilities: lack of accommodation medical devices in carrying out procedures, irregular supply, time consuming, bottlenecks in supply chain management, causing health workers to frequently move to work 5) Performance Appraisal and lob Descriptions: the reward and mechanism must be clear, and proper supervision of physicians was attributed to nonexistent job descriptions. 6) Human Resource Management Strategies: supported by data to make revisions and solutions to health problems in the workplace. According to WHO, 2010 recommends education. regulation, financial, personal and professional support for health workers according to priorities based on relevance, acceptability, affordability, effectiveness and impact.

According to Bonenberger in 2014, the factor that influences a staff to change jobs is the age of health workers working in health facilities, Bonenberger explained, the age of employees less than 30 years is more likely to change jobs with social reasons, compared to staff over 38 years of age, this has an effect on retention and attraction as professionals. Duration of more than 5 years (OR = 0.12, 95% CI: 0.06-0.26) in

health facilities can reduce the rate of transfer of work compared to staff who have only worked I year.

This study states alumni move to work on the grounds: Looking for new experiences, want to find a better and wider place in terms of knowledge and skills, add insight into pathology, want to work in a hospital, add experience and wages given, because only as volunteers without get paid, want to be an ASN, because they are far from relatives, want to work in a hospital or workplace with a shift work system. Motivation and job satisfaction have a significant effect on changing jobs, are career development (OR = 0.56, 95% CI: 0.36-0.86), workload (OR = 0.58, 95% CI: 0.34-0.99), management (OR = 0.51.95% CI: 0.30 to 0.84),organizational commitment (OR = 0.36, 95% CI: 0.19 to 0.66), and burnout (OR = 0.59, 95% CI: 0.39 to 0.91).

Dissatisfaction working in health facilities is related to the availability of technical and medical equipment at work. Agyepong et al. Mentioning stress due to lack of tools that support midwives work is a major problem in the workplace. This means that factors that stimulate workers' motivation, besides absenteeism. are also external rewards. Intrinsic

job satisfaction has an impact on motivation.

The Learning Process carried out in Midwifery Education Department of Midwifery in Banadung is held with a minimum study load of 108 credits with a normal student learning load of 8 hours per day (48 hours / week equivalent to 18 credits / semester) to 9 hours per day (54 hours / week equivalent to 20 SKS / semester) and taken in the study period 6-8 semesters. Comprising Compulsory Courses as many as: 8 credits and courses for midwifery DIII for 80 credits. The Study Load is described in the learning outcomes which are the formulation of the minimum criteria regarding the qualifications of graduates' abilities which include the attitudes and values, knowledge and skills that have been taken by a student while taking certain studies.

#### Conclusion

Alumni of midwivery Departement Poltekkes Kemenkes Bandung are very needed and absorbed in the workforce. The most alumni absorbed in work less than 3 months, work in private institutions such as private hospitals and independent practice midwives, had changed jobs. Based on the research learning experiences is important for alumni. The most of

alumni had the perception of being able to be competitive.

#### Take Home Message

It is hoped that educational institutions will actively find jobs for alumni, through user forums, users to educational institutions to promote job improve vacancies. learning facilities and student activities according to Education standards, through updates to classroom conditions, laboratories and tools, infrastructure for student activities to build soft student skills and leadership, development updates for Practice Learning, through the expansion of prakik midwives in hospitals, preparation of competent clinical advisers in guiding midwife students.

For policy makers it is expected that there will be an increase in action on increasing midwives' motivation and retention Primary Services, and increasing ability for midwives secondary and tertiary services. Improvement of basic facilities for health workers and their families including transport of educational facilities for sons and daughters of health workers. revisions remuneration in health care packages, and health equipment. Transparent evaluation. Training

that is equitable and sustainable on practical land.

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