

ANALYSIS OF THE IMPLEMENTATION OF THE HOSPITAL HEALTH PROMOTION PROGRAM (PKRS) AT ISLAMIC HOSPITALS IN THE MEDAN CITY REGION

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Abstract

This study aims to analyze the implementation of the Hospital Health Promotion Program (PKRS) at an Islamic Hospital in Medan City. PKRS is an activity that focuses on promotive and preventive efforts to increase awareness, knowledge, and community participation in maintaining and improving health. This study used a qualitative descriptive method with data collection techniques through in-depth interviews, observation, and documentation of PKRS officers. The results of the study indicate that the implementation of PKRS is carried out through two main approaches, namely direct and indirect promotion. Direct promotion is carried out through counseling activities, health lectures, and visits to various agencies, while indirect promotion is carried out through social media such as Instagram and Facebook to disseminate health information. Evaluation of activities is carried out routinely through activity reports, medical record data, and patient visits. The results of the study concluded that the implementation of PKRS at an Islamic Hospital in Medan City has been effective, supporting the improvement of service quality, and contributing to the achievement of hospital accreditation. This program also strengthens the positive image of the hospital as an institution oriented towards promotive and preventive efforts in health services.

Keywords: Hospital Health Promotion, PKRS, Health Promotion

Introduction

Hospital Health Promotion (PKRS) is an important part of the healthcare system. The goal of PKRS is to build awareness and skills among patients, families, and health workers, visitors, and the surrounding community to be active in maintaining, improving, and protecting their health. PKRS not only focuses on healing and recovery, but also emphasizes efforts to prevent and improving health in accordance with a healthy approach to national health development.

Based on Law Number 44 of 2009 concerning Hospitals and Minister of Health Regulation Number 44 of 2018 concerning the Implementation of PKRS, hospitals are required to conduct health promotion activities. These activities include planning, assessment, action, monitoring, and evaluation (Bewa Dangu Wole, 2025). The goal is to change behaviors and environments that support health through strategies such as advocacy, social support, and community empowerment. Despite continued scientific advances and increasing quality of health services, the implementation of PKRS in various hospitals still faces various challenges (Zakiyah, 2021).

Several studies have shown that the implementation of PKRS is less than optimal due to limited competent personnel, inadequate facilities and infrastructure, and insufficient budgets. Furthermore,

many hospitals still focus on curative services and have not prioritized health promotion activities. In fact, PKRS plays a crucial role in raising public awareness about the importance of healthy living, accelerating patient recovery, and preventing disease (Fitriati Wahyuni, 2024).

This program also serves as a means to evaluate the quality of hospital services and achieve optimal public health. To achieve these goals, policy strengthening, capacity building for PKRS staff through training, adequate budgeting and facilities, and collaboration between hospital units are required. Furthermore, regular monitoring and evaluation reports are crucial for assessing program progress and providing a basis for continuous improvement (Muhammad Arvid Suhada, 2021).

Thus, PKRS is not merely a counseling activity, but a crucial component of hospital management. Its goal is to create comprehensive, sustainable health services that are oriented toward prevention and community empowerment, leading to a hospital with a promotive and preventive perspective (Andri Baedowi, 2022).

The Hospital Health Promotion Program (PKRS) at an Islamic hospital in Medan is implemented through various activities, both direct and indirect. The goal is to raise public awareness of the importance of maintaining good health and support disease prevention efforts around the hospital and the community.

Direct Promotion Through Visiting Institutions

This activity is carried out by the PKRS team visiting various locations such as schools, companies, and government institutions. During the visits, officers provide lessons on healthy living, the importance of early disease detection, and steps to maintain health in the workplace and at home. This activity also helps strengthen collaborative relationships between health agencies and broadens public understanding of disease prevention.

Group Patient Promotion

This activity is held regularly in the patient waiting area of the hospital. PKRS staff provide health education to patients and their families. They use media such as brochures, bulletin boards, or short presentations. The material provided is tailored to patient needs, such as infection prevention, chronic disease management, balanced nutrition, and mental health. This activity is expected to help patients and their families understand the importance of maintaining good health and implement it at home.

Indirect Promotion through Social Media

In addition to face-to-face activities, the hospital also utilizes social media platforms such as Instagram, Facebook, and WhatsApp for health promotion. The content shared includes useful health information, hospital activities, and health campaigns aligned with national holidays such as World No Tobacco Day and World Heart Day. Social media is an effective way to reach the public quickly and interactively, especially the younger generation who are active in the digital world.

Through these three activities, the hospital strives to provide healthcare services that are not only curative, but also prevents disease and improves the community's quality of life. Sustainable implementation of the Hospital Health Promotion Program (PKRS) is expected to strengthen the hospital's image as an institution that cares about community welfare (Astried Angraeni Mirza, 2022).

Method

This study used a descriptive qualitative approach to understand and describe the implementation of the Hospital Health Promotion Program (PKRS) in an Islamic hospital in Medan City in depth, based on the experiences and perspectives of PKRS staff. This approach allowed researchers to explore the meaning and processes of activities taking place in the field (Luthfiyani & Murhayati, 2024). This study was conducted through in-depth interviews, observation, and documentation. Researchers interacted directly with PKRS staff to obtain information about activity implementation, targets, obstacles, and the form of evaluation used. The interview results were then analyzed thematically to identify patterns and meanings related to the effectiveness of PKRS program implementation (Safarudin et al., 2023). This research was conducted at an Islamic hospital in Medan City, specifically in the Hospital Health Promotion (PKRS) unit, from August to October 2025.

Results

Based on interviews with PKRS staff at an Islamic hospital in Medan City, the following information was obtained:

Implementation of Health Promotion and Education

“We conduct promotions not only through social media, but also by making several visits to institutions such as BSI (Indonesian Islamic Hospital Association), companies, doctors at community health centers (Puskesmas), and clinics. During these visits, we hand out brochures detailing hospital facilities, a list of doctors practicing at the clinic, and contact information. The goal is to make it easier for the public to visit the hospital.”

Based on interviews with PKRS staff, health promotion activities at Islamic hospitals in Medan City are conducted not only through social media but also through direct visits to various institutions such as companies, community health centers, and clinics. Social media is used to disseminate educational videos, publish activities, and provide information on hospital services, while direct promotion is carried out through brochure distribution, health lectures, and field outreach.

This indicates that the promotional strategy implemented by the PKRS unit at Islamic hospitals in Medan City is a combination of digital promotion and field promotion. This approach is effective in reaching two primary targets: the general public and specific target groups (e.g., companies or government agencies).

Implementing Promotional and Educational Activities

“Our activities usually take the form of health lectures. These health lectures are a form of outreach by hospital doctors, both general practitioners and specialists. For example, if we raise a specific topic, we will submit a request letter to the company or community health center to determine the activity schedule. Once approved, the educational activity will take place, with the doctor providing the material and holding a question-and-answer session with participants.”

In practice, health promotion is carried out through two main stages:

1. Preparation and Coordination Phase, which involves submitting a letter of request for the activity to the target institution (e.g., a company or community health center) to determine the schedule and topic of the activity.
2. Implementation Phase, which involves a health lecture delivered by a general practitioner or specialist from the hospital. This session includes an information session, a question-and-answer session, and the distribution of brochures and health information materials.

3. This activity reflects the application of the principles of public health education, where education is delivered through two-way communication between health workers and the community to encourage positive health behavior change.

Promotional Activity Targets

“Yes, health education is also aimed at the public. These activities can also be seen on our Instagram account, for example, visits to Bank Indonesia or BTN. We also create educational videos and upload them to social media. So, promotions can be done through social media or in person.”

Health promotion and education activities target two large groups:

1. Internal and Partners: such as Bank Indonesia, BTN, BSI, and other private companies.
2. The General Public, through activities at religious study groups, women's communities, and other community organizations.
3. This approach aligns with the principles of PKRS (Hospital Health Promotion), which emphasizes increasing knowledge and community involvement in maintaining their own health. Thus, hospitals function not only as curative facilities but also as educational and promotional institutions.

Objectives of Promotion and Education Activities

“This health education activity is actually also related to improving hospital accreditation. For example, we once conducted counseling for women attending religious studies (Quran recitation) regarding lung patients. So, in addition to providing health education, we also introduced the hospital's superior facilities and services.”

The main objectives of implementing health promotion and education at Isam Hospital in Medan City are:

1. To increase public understanding of specific health issues.
2. To improve the hospital's image and accreditation, as PKRS activities are part of the national hospital accreditation assessment.
3. To introduce the hospital's superior services and facilities so that they are more easily accessible to the public.

Activity Evaluation

“We conduct evaluations through patient reports and records, such as patient summaries and medical records. From there, we can see the success of promotional activities. Therefore, visits cannot be conducted just once or twice, but rather alternately and scheduled regularly.”

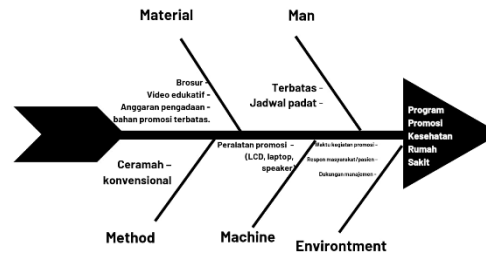
Activity evaluation is carried out through:

1. Promotional and educational activity reports compiled by PKRS staff.
2. Analysis of medical records and patient records to determine increases in the number of visits or service utilization after the activities are implemented.
3. Routine and scheduled monitoring to ensure that promotional activities are not temporary but sustainable.

This evaluation shows that the Islamic Hospital in Medan City has a fairly good monitoring system for measuring the effectiveness of PKRS activities. However, a more structured evaluation (for example, through participant or community satisfaction surveys) could further strengthen the results of the activity assessment.

Fishbone Analysis

The method used to identify the root cause of a problem is a fishbone diagram. The steps are: Write the problem at the head of the fish. Draw a horizontal line with an arrow pointing towards the head of the fish. Determine the main categories of causes. Draw a line with an arrow pointing towards the horizontal line. Brainstorm.



The fishbone diagram of the problem analysis is as shown in Figure 1

Problem solving data analysis

No	Problem	Alternative Problem Solving
1.	Man The limited number of PKRS officers, which is only two, results in limited time for carrying out promotional activities.	Increase the number of special PKRS personnel or appoint representatives from each unit as PKRS liaison officers.
2.	Method Promotion is still conventional, such as lectures and distribution of brochures, without digital innovation or participatory methods that can increase community involvement.	Developing digital-based educational methods such as Instagram Live, short educational videos, webinars, and health podcasts.
3.	Machine Promotional equipment such as LCDs, laptops, and speakers are not always available or in good condition, so educational activities sometimes experience technical constraints.	Provide and maintain promotional equipment regularly through the hospital's general and IT departments.
4.	Material Promotional media such as brochures, educational videos, and banners are still limited due to budget constraints for promotional materials procurement.	Allocate special funds for the production of promotional media on a regular basis.
5.	Environment Limited time for activities, low response from the community/patients, and less than optimal management support also influenced the success of the PKRS program.	<ol style="list-style-type: none"> 1. Establish PKRS activities as a priority hospital program, supported by policies and an annual budget. 2. Improve coordination between units through regular quarterly evaluation meetings. 3. Involve the community, agencies, and external communities (religious study groups, companies, schools) as partners in promotional activities.

Discussion

Based on interviews and analysis using a fishbone diagram, the Hospital Health Promotion Program (PKRS) at Islamic hospitals in Medan has been implemented but still faces several obstacles. The PKRS program is a crucial component of the strategy to improve service quality and hospital accreditation, as it serves as a health education platform for patients, families, and the community (Ministry of Health of the Republic of Indonesia, 2021).

Promotion is carried out in two forms: direct (face-to-face) promotion through lectures and counseling, and indirect promotion through social media and printed materials such as brochures. However, the effectiveness of both programs depends on human resources, methods, media, facilities, and environmental support.

Human Resources

Limited human resources are a dominant factor influencing the success of PKRS implementation. At an Islamic hospital in Medan City, promotional activities are carried out by two staff who also have responsibilities in other units, limiting time for educational activities. This situation results in a low frequency of promotional activities and a lack of innovation in their implementation. This finding aligns with research by Dewi & Hasanah (2020), which explains that limited staffing results in the PKRS program being inconsistent and poorly documented. Therefore, regular training and the addition of PKRS staff are priorities to ensure more efficient and creative promotional activities (Ministry of Health, 2022).

Method Factor (Promotion Implementation Method)

Health promotion implementation methods in Islamic hospitals are still dominated by health lectures and brochure distribution. Although these methods are easy to implement, they are less effective in attracting active community participation.

Some activities are conducted through visits to companies, community health centers, or specific communities, but these are not routinely conducted quarterly as targeted by the PKRS. According to Lestari et al. (2021), the use of one-way methods such as lectures is less effective in improving community health behaviors compared to two-way methods such as discussions, simulations, and interactive media. Furthermore, the WHO (2020) emphasizes the importance of a digital approach in health promotion so that messages can reach a wider audience at a more cost-effective rate.

B3 waste management at Mental Hospital X is generally suboptimal and shows critical non-compliance with Minister of Environment and Forestry Regulation No. 6 of 2021. The process for managing hazardous and toxic medical waste at Mental Hospital X, as observed at the sorting, storage, and transportation stages, does not fully comply with standards. This is evident in the incomplete sorting stage based on waste type, where all types of B3 medical waste (sharp, soft, and pharmaceutical) are still mixed in one container without clear labeling. Significant non-compliance was also found at the storage stage, as the B3 medical waste disposal site (TPS) does not meet design requirements: the building is not fully enclosed, is not watertight, lacks symbols and labels, and is not equipped with emergency facilities. Although the transportation stage collaborates with a licensed third party (PT X), risks remain because the transported waste is still mixed in one container without proper sorting and labeling. Therefore, Mental Hospital X needs to immediately make fundamental improvements, especially in terms of separating waste at the source and improving the quality of the TPS, in order to reduce the potential for contamination, occupational safety hazards, and negative impacts on the environment.

Material Factors (Media and Promotional Materials)

Health promotion materials and media play a crucial role in supporting the success of PKRS activities. Research shows that RSI Malahayati uses media such as brochures, leaflets, and educational videos, but their availability is still limited and they are not regularly updated. Limited media procurement budgets are a major obstacle to creating engaging and communicative content.

Research by Widodo et al. (2022) shows that visual promotional media such as videos and infographics can increase the understanding of health messages by up to 70% compared to text media.

Machine Factors (Supporting Facilities and Equipment)

The implementation of health promotion activities is also hampered by limited facilities and equipment, such as LCDs, laptops, and speakers, which are not yet adequately available in all units. PKRS staff often have to borrow equipment from other parts of the hospital, potentially hindering educational activities. According to Astuti & Wulandari (2019), supporting facilities such as audiovisual media are crucial for increasing the appeal and retention of information during promotional activities. Furthermore, providing electronic information screens in patient waiting rooms can be utilized to continuously display educational videos.

Environmental Factors (Environment and Management Support)

Support from the hospital environment and management is a crucial factor in the success of PKRS. Based on interviews, promotional activities often have to be scheduled according to partner agencies such as companies or community health centers, so they are not always carried out routinely. Furthermore, policy and budgetary support from management is still limited, and participation

Community involvement in educational activities has also been suboptimal. These results align with research by Seruni & Purwaningsih (2024), which states that the success of the Hospital Health Promotion Program (PKRS) is highly dependent on management commitment and cross-unit collaboration within the hospital.

Conclusion

At the Islamic Hospital in Medan City, the Hospital Health Promotion Program (PKRS) has been implemented successfully through two main approaches: direct and indirect promotion. Direct promotion is conducted through health lectures, outreach, and field visits involving the community and medical personnel. Indirect promotion is conducted through social media, which can reach a wider audience, especially young people. These two approaches demonstrate the need for hospitals to adapt to community demands and information technology. The implementation of PKRS also helps hospitals achieve accreditation and improve service quality.

Promotional activities not only focus on disseminating health information but also on enhancing the hospital's reputation and increasing public trust in the services provided. Activity reports, medical record data, and patient visits are routinely used to evaluate the program, which serves as the basis for continuous improvement. Therefore, PKRS at the Islamic Hospital in Medan City has reflected the preventive and promotive principles that are the basis of contemporary health services.

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