HOSPITAL MANAGEMENT’S ACCOUNTABILITY FOR ACCIDENT VICTIMS IN SERVICE EMERGENCY

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ABSTRACT

The victim of a traffic accident is one of the patients who need immediate medical treatment to avoid disability or death. Law No. 36 of 2009 concerning Health states that the obligation for every health service facility, both government and private, has an obligation to provide health services for the rescue and prevention of further disabilities. Emergency services risk a person's survival. Therefore from a juridical point of view, there are some exceptions that are different from ordinary circumstances. The novelty of this study is that it examines the Responsibility of Hospital Management toward Accident Victims in Emergency Services. This study aims to determine and analyze the fulfillment of the rights of accident victims and the responsibility of hospital management to accident victims in emergency services. This type of research is normative juridical legal research with descriptive research methods. The data secondary data used consists of primary legal materials, secondary legal materials, and tertiary legal materials. Data collection through literature studies. After the data is obtained, the data is then processed by means of data inspection, editing, and systematic data, which is then analyzed descriptively and qualitatively. The results of this study show that the fulfillment of the rights of accident victims in emergency services at the hospital is in accordance with laws and regulations. This is evidenced by the fulfillment of patient rights, including no discriminatory treatment and not asking for a down payment for patients with emergency situations. The conclusion of this study is that the responsibility of hospital management for handling accident victims in emergency services has been fulfilled by providing human resources and facilities in accordance with applicable laws and regulations.

Keywords: Accountability; Emergency Services
1. INTRODUCTION

Traffic is one of the means of community communication that plays a vital role in facilitating the development we carry out. The traffic problem is one of the problems on a national scale that develops in harmony with the development of society.

The problem faced today is the increasing number of road traffic accidents. The World Health Organization (WHO) noted that in 2011 there were more than 5.6 million people died due to traffic accidents and work accidents, traffic accidents in Indonesia were 25.9%, and the cause of death due to injuries was 6.5%. (1)

Indonesia is one of the ten countries that have the largest number of traffic accidents in the world, which is 62% of the total accidents in the world. In addition, Indonesia is one of the ten countries with the highest number of accident deaths in the world. The traffic accident death rate in developing countries reached 49.6%, the highest among developed and developing countries. (2)

In general, traffic accidents that occur are caused by several factors, such as human negligence, road conditions, vehicle airworthiness, and non-optimal enforcement of traffic laws. Based on the 2013 Outlook for Indonesian Transportation, there are four factors that cause accidents, namely the condition of transportation facilities and infrastructure, human and natural factors.

Nevertheless, among the four factors, human negligence is the main factor causing the high number of traffic accidents. Therefore, it is necessary to have good traffic awareness for the community, especially among the productive age. (3)

A toll road is a road devoted to vehicles with more than two vehicles and aims to shorten the distance and travel time from one place to another. An accident is an omission, whereas negligence is also a criminal act; of course, there is criminal liability. In principle, any violation of the rules of criminal law can be taken action by law enforcement officials without any complaints or reports from the aggrieved party.

There are still many transportation accidents that occur mainly related to land transportation. Almost every television medium conveys news of accidents, especially motorbike users and car users, along with the dense population coupled with the increase in vehicles. This makes accidents prone because there are not a few road users and special road users (Toll) who do not obey the existing traffic rules and drive their vehicles recklessly so that they can harm themselves and others.

The increasing number of victims in an accident is something that is not wanted by various parties, considering how precious a person’s life is, which is difficult to measure by a certain amount of unit money alone. The
person who caused the accident must be held accountable for his actions in the hope that the perpetrator can be deterred and more careful. Being careful is not enough to avoid accidents. The condition factor is very important in driving a vehicle, and also, the awareness of traffic laws must be obeyed as appropriate.

Based on the initial survey, the number of accident victims on the East Brebes Toll Road in the period June 2016-October 2017 was 55 accident cases, with five victims who died at the scene. Patients are referred to several hospitals located in the East Brebes Region for emergency services as soon as possible for the safety and prevention of disability of accident victims. The hospitals used as referrals for the victims of the accident consisted of Hospital A (Type B), Hospital B (Type C), and Hospital C (Type C) (East Brebes Toll Report, 2017).

The results of an interview with the head of the emergency installation at the hospital said that based on the classification of emergency departments (ER), the hospital has a classification of type C. In addition, the hospital has the certification of ATLS health workers (doctors) and BTCLS (nurses). The problem that has been found in the field is the rejection of hospitals and complicated administration.

Medical emergency services are a continuation of care and services that also include services outside the hospital (4). Prehospital services include support, instructions, services, and actions provided from the moment of commencement of the request for emergency services until the patient is sent to the receiving service center. Services outside the hospital include all aspects of services and actions provided by emergency services, including patient transfers, responses and actions to mass disasters that have befallen the community and other community emergencies, and preparing medical support for integrated medical emergency services.

According to Law No. 44 of 2009 concerning Hospitals, a hospital is a health service institution that provides plenary individual health services that provide inpatient, outpatient, and emergency services. Plenary health services are health services that include promotive, preventive, curative, and rehabilitative. (5)(6) Hospitals must be responsible for carrying out their obligations aimed at providing good health services and prioritizing patient safety.

Based on Article 32, paragraphs 1 and 2 of Law No. 36 of 2009 concerning Health, in particular, regulates the obligation for every health service facility, both government and private, to have an obligation to provide health services for the rescue and prevention of further disabilities. The government is obliged to ensure that its citizens do not get sick and is also obliged to fulfill the right of its people to a healthy life.
and the implementation of conditions that determine the Health of the people because Health has become part of the life of citizens. (7)

In accordance with Article 59 paragraph 1 of Law No. 36 of 2014 concerning Health Workers, it is explained that health workers who practice in health service facilities are required to provide first aid to recipients of health services in emergencies and/or in disasters for life-saving and prevention of disability.

Health workers must have knowledge and skills through education in the field of Health and, for certain types, require the authority to carry out health efforts. Nurses as one of the closest health workers in relation to the patient's healing efforts. According to Article 35 paragraph 1 of Law No. 38 of 2014 concerning Nursing that in an emergency to provide first aid, nurses can carry out medical actions and drug administration in accordance with their competence.

Based on these descriptions, health workers are authorized to provide health services in all areas of expertise, but in its implementation, every health worker must have a permit from the government so that the public as service users will get safe, secure services and the community and health workers themselves also receive legal protection. (8)(9).

Article 1 of Law Number 29 of 2004 concerning the Practice of Medicine reads that the practice of medicine is a series of activities carried out by doctors and dentists on patients in carrying out health efforts. (10) In accordance with his authority, the doctor will carry out his actions by referring to Article 51 points (a) and (b), the doctor or dentist, in carrying out the practice of medicine, has an obligation to: (a) provide medical services in accordance with professional standards and standard operating procedures and medical needs of the patient, (b) refer the patient to another doctor or dentist who has better expertise or ability, if unable to carry out an examination or treatment.

In the last three months, data from the police obtained the number of accidents in the East Brebes Toll Road Area, as many as 14 accident cases. Accidents with two deaths, and among the victims who died, there were those who were late in getting emergency treatment at the hospital.

Based on preliminary observations, there are hospitals that refuse to treat emergency patients on the grounds that no one bears the costs. Such refusal can lead to delays in the service of emergency patients. Another complaint that is often found in emergency patients is the hospital administration which is still complicated and convoluted with long queues.
Rejection of patients can cause harm to emergency patients such as traffic accident patients and other emergency patients who need immediate treatment. One of the cases was baby Dera who left the world after being rejected by ten hospitals. In addition, the case of baby Tiara Debora also died who was suspected of not getting medical treatment in the PICU (Pediatric Intensive Care Unit) room due to a lack of down payment.

Medical malpractice committed as a result of negligence has been regulated in the Criminal Code. In the Criminal Code, acts that cause others to be seriously injured or die that are carried out accidentally are formulated in Article 359, which reads, "Whoever because of his negligence causes the death of another person, is threatened with imprisonment for a maximum of five years or confinement for a maximum of one year."

Emergency care providers require adequate knowledge and recognition of injuries and diseases, immediate action, stabilization and consultation, and disposition for patients. All communities are entitled to emergency, preventive, primary, specialist, and chronic health care.

2. METHODS

The approach method used in this study is the normative juridical method, which is a research that refers to legal norms or principles by studying and researching problems using various literature in the form of library materials or what is called secondary data.

This study was conducted to test and review the applicable legal provisions regarding the responsibility of hospital management for the handling of accident victims on the East Brebes Toll Road in emergency services based on Law No. 36/2009 concerning Health.

3. RESULTS AND DISCUSSION

The study was conducted at Bhakti Asih Hospital, Brebes Regency, to find out and analyze the fulfillment of the rights of accident victims and the responsibility of hospital management for handling accident victims on the East Brebes Toll Road in emergency services.

1. Fulfillment of the Rights of Accident Victims in Emergency Services

Patients must be guaranteed equal rights in health services provided by hospitals as stipulated in Article 32 letter c of Law No. 44 of 2009 concerning Hospitals; namely, patients have the right to: "obtain humane, fair, honest, and non-discriminatory services."

In accordance with this, here, the patient must be treated equally or not discriminatory. Based on the results of interviews with doctors or health workers in hospitals, almost all of them stated that there were no discriminatory actions taken by doctors or health workers and the hospital to patients. This is indeed not allowed, as stated
by one of the doctors, "A," who said: "There is no difference in carrying out health services, where doctors and officers work in accordance with the SOP. Discriminatory actions should not be taken by health workers to patients."

In addition, based on the results of interviews with patients mentioned that he was treated well, as "P1" said: "I am treated well here and not discriminated against."

Based on the researchers' findings, discriminatory actions could have occurred to the patient as it has been explained that the perceived person is the patient himself. As one of the nurses, "C," said: "of course, those who feel the patient, so about that, I don't know."

The legal responsibility of hospital management in health services is any effort that ensures legal certainty to provide protection to patients. This means that there are efforts regarding the existence of legal certainty by providing legal protection to patients.

Legal protection of patients is considered necessary to be regulated more deeply and broadly in the Law relating to patients as patients so as to create a legal certainty regarding the legal protection of such patients. The legal relationship between doctors and patients has been going on for a long time. Doctors as someone who provide treatment to people who need it. This relationship is a very personal relationship because it is based on the trust of the patient in the doctor, which is called a therapeutic transaction.

A therapeutic transaction is a transaction between a doctor and a patient to determine or seek the most appropriate therapy for the patient. The transaction between the doctor and the patient gives rise to good rights and obligations, and if those rights and obligations are not fulfilled by one of the parties who have agreed to enter into the transaction, then it is only natural that the aggrieved party makes a lawsuit.

The relationship between health workers and patients seen from the legal aspect is the relationship between legal subjects and legal subjects. Legal relations always give rise to reciprocal rights and obligations. The rights of health workers (doctors or other health workers) are the obligations of patients, and the rights of patients are the obligations of health workers. The relationship between health workers and patients is a relationship in health service delivery services. Health workers as health service providers and patients as recipients of health services.

The legal protection of patients as patients is indeed regulated in Law No. 36 of 2009, which is clearly regulated regarding the rights of patients and the obligations of patients, the rights of health workers, and the obligations of health workers themselves so that in it there is a pattern of relationships...
between patients and health workers as providers of services to patients which will eventually lead to legal protection of the patients themselves.

Researchers made direct observations to Bhakti Asih Brebes Hospital to examine the legal protection of patients in health services, examine whether legal protection for patients already exists or not and how it is implemented, especially in fulfilling the rights of patients themselves.

Article 56 of Law Number 36 of 2009 concerning Health reads:

1) Everyone has the right to accept or reject part or all of the relief measures to be given to him after receiving and understanding the information regarding such actions in full. The right to accept or reject as referred to in paragraph (1) does not apply to:
   a. people with diseases whose diseases can be rapidly transmitted into the wider community;
   b. severe mental disorders.

2) Provisions regarding the right to accept or refuse, as referred to in paragraph (1), are regulated in accordance with the provisions of the laws and regulations.

Law No. 29 of 2004 concerning the Practice of Medicine is also an Act that aims to provide protection for patients. Article 52 of Law No. 29 of 2004 concerning the rights of patients is regulated in:

1) Get a complete explanation of medical actions as referred to in article 45 paragraph (3);
2) Ask for the opinion of a doctor or other doctor;
3) Obtaining services according to medical needs;
4) Refusing medical treatment;
5) Obtain the contents of the medical record.
6) Researchers conducting research

Using the interview method with patients, doctors/health workers, and hospital management, as planned from the beginning, the researcher conducted interviews with 5 (Six) Informants as resource persons, namely 1 (one) doctor, 1 (one) hospital management, 1 (one) nurse and 2 (two) patients/families of patients residing in Brebes.
2. Hospital Management’s Responsibility for Accident Victims in Emergency Services

a. Standards for Emergency Health Care Facilities

Hospitals, as individual health service facilities, are part of the health resources that are indispensable in supporting the implementation of health efforts. In accordance with Article 5 of Law No. 44 of 2009 concerning Hospitals, it states that hospitals have the function of providing medical services and health recovery in accordance with hospital service standards.

Article 7 of Law No. 44 of 2009 concerning Hospitals states that hospitals must meet the requirements of location, buildings, infrastructure, human resources, pharmaceuticals, and equipment. Article 10 states that the Emergency Room is one of the required rooms in the hospital building, which is a special service room that provides comprehensive and continuous services for 24 hours.

In order to realize an Emergency Room that meets service standards and quality requirements, security and safety need to be supported by buildings and infrastructure (utilities) that meet technical requirements. The standards of emergency health services in hospitals are regulated in the Regulation of the Minister of Health of the Republic of Indonesia Number 129 / Menkes / SK / II / 2008 concerning Minimum Service Standards for Hospitals.

The problems that exist at Bhakti Asih Brebes Hospital are indicators of emergency service providers who are ATLS certified, ACLS, PPGD the standard is 100%, the results of observations at the emergency department of Bhakti Asih Brebes Hospital who have training certificates are only seven people out of 27 health workers (7 doctors and 20 nurses) in the unit including ATLS 2 people (2 doctors), ACLS 3 people (1 doctor and two nurses), and PPGD 2 people (2 nurses).

Bhakti Asih Brebes Hospital is a type C hospital with 24-hour emergency services. The emergency room consists of a triage room, a resuscitation room, a surgical procedure room, a non-surgical procedure room, and an observation room. The equipment available in the emergency room refers to the emergency department's emergency service manual for the Indonesian Department of Health to support service activities for emergency patients. The tools that must be available are life-saving for cardiac distress cases, such as monitors and defibrillators.
The results of the researcher's observations about the speed of doctors in providing services when patients show that delays in services in the unit are caused by a large number of patients while the doctors are still lacking, so there is an imbalance that causes delays in receiving services, but it will happen when there are many patients who visit.

The involvement of the hospital management function is also very necessary in the implementation of standards for emergency health care facilities because it will be able to form a budget that is needed to meet incomplete facility standards. So that if the availability of funds can be met, then the existing facility standards can be held according to the standards of emergency health service facilities.

Supervision from the government, local governments, and the community are very necessary regarding the establishment of quality standards in this case in order to support services. So that hospitals can also carry out their duties directly by providing adequate, safe, and disability-free equipment.

b. Get Information When Given Emergency Health Services

One of the most important factors to see the extent to which there is legal protection in a hospital is the fulfillment of patient rights, one of which is the right to obtain information (11). The right to information is in line with the development of human rights.

The essence of this right to information is the right of the patient to obtain information from the doctor about matters related to his Health. In the event of the relationship between the doctor and the patient, it is a good course of action when the doctor informs the patient about his Health.

Article 56, paragraph 1 of Law Number 36 of 2009 concerning Health reads: "Everyone has the right to receive or reject part or all of the relief measures that will be given to him after receiving and understanding information about these actions in full."

The information provided must be clear and honest. In this case, the information provided by the doctor or health worker in the hospital must be understandable to the patient, and from the results of the interview with the hospital management, "B" states that: "Regarding the information of the order, it has been clearly stated in every corner of the hospital, namely with the existence of an information board for anyone who comes to the hospital and can be read by hospital visitors, for example, smoking is prohibited in hospital areas."

The rights and obligations of the patient are listed on the wall of the
hospital so that the patient can read them clearly. From the interview conducted with the management of the hospital, they must ask the patient about it as a person who is given health services, and from the results of the interview with the patient, almost all patients understand what is explained by the doctor because the doctor uses language that is understood by the patient so that the patient can understand what is explained. Information before medical action is always provided to the patient, family, or responsible person using language that is easy for the patient or his family to understand.

In relation to patient information, it is also required to know the rules of conduct in the hospital as stated in Law Number 44 of 2009 concerning Hospitals, namely, patients have the right to:

"Obtaining information regarding the rules and regulations that apply in the hospital. Regarding the information on the rules of conduct, this has been clearly stated in every corner of the hospital, namely with an information board for anyone who comes to the hospital and can be read by hospital visitors, for example, regarding the provision that minors cannot enter the patient's room or about the patient's visiting hours besides that if there is a patient's family staying there will be a permit to stay and it will be informed to the patient's family”.

The researcher's findings regarding hospital rules or regulations already exist or are provided by the hospital by sticking them in every corner of the hospital or can be called an information board, and according to the researcher's assessment, it is enough to provide information to patients about hospital rules, but it would be nice for the rules or regulations to be explained back to the patients who are treated even if it is only the point, this is to avoid misunderstandings from patients and health workers so that patients understand that the order must be fulfilled and not offend the patient and the patient does not feel that his rights are disturbed.

Doctors or health workers are required to provide true, clear, and honest information. In its implementation, the provision of correct, clear, and honest information is indeed difficult to implement, although, in reality, the doctor or health worker feels that he has done this, but not necessarily this has been felt by the patient because what the doctor or health worker thinks is enough does not mean enough for the patient.

Overall, patient health services related to the patient's right to get true,
clear, and honest information in health services are good and can be fully implemented. This can be proven by information from doctors and other health workers who have carried out their duties properly and patients who state that doctors/health workers at the time of providing health services have provided the information needed by a patient.

Based on the results of the study shows that the patient's right to information when given emergency health services is well implemented by health workers at Bhakti Asih Brebes Hospital.

c. Security, Comfort, and Safety of Emergency Health Services

Security, comfort, and safety of health services are the rights of patients that must be fulfilled by doctors or health workers, and the most important role is, of course, from the hospital because the hospital must provide guarantees of security, comfort, and safety when providing health services and when the patient is hospitalized.

In the activities of medical services carried out by hospitals, of course, there are rules or rules that regulate, especially regarding responsibilities, both hospital management and voluntary personnel, doctors, nurses, and other matters related to health services carried out by hospitals.

In line with this in Article 32 letter n of Law No. 44 of 2009 concerning Hospitals, the patient has the right to: "obtain his own security and safety while in hospital treatment"

The researchers' findings show that the hospital has indeed provided guarantees of security, comfort, and good safety to its patients because it is an obligation of the hospital and is a standard operating procedure (SOP) that must be implemented as a guideline for hospitals in carrying out health services to their patients. In this case, the hospital has implemented the standard operating procedures well.

This is stated in Article 32 letter i of Law No. 44 of 2009 concerning Hospitals, namely, patients have the right to: "obtain privacy and confidentiality of the disease suffered including their medical data."

Overall, the provision of security, comfort, and safety guarantees for patients while getting health services has been carried out with good implications and can be accepted by patients, and this can be proven from the statements of doctors/health workers and hospitals stating that the provision of security, comfort, and safety to patients has been carried out as there are security officers
provided by the hospital to maintain patient safety, and to maintain the comfort and safety of patients, the hospital provides a special room for patients who have infectious diseases. From the information given by the patient during the patient's health service, the patient feels that he has been given security, comfort, and safety while being treated at the hospital.

d. Equal Rights in Emergency Health Services

Patients must be guaranteed equal rights in health services provided by hospitals as stipulated in Article 32 letter c of Law No. 44 of 2009 concerning Hospitals, namely, patients have the right to: "obtain services that are humane, fair, honest, and without discrimination".

Based on the researchers' findings, discriminatory actions could have happened to the patient, as it has been explained that the perceived is the patient himself. Therefore, what has been mentioned by Article 32 letter c of Law No. 44 of 2009 concerning Hospitals is that patients have the right to: "obtain services that are humane, fair, honest, and without discrimination."

In accordance with this, here, patients must be treated equally or not discriminatory; the hospital states that there is no discriminatory action carried out by doctors or health workers on patients.

e. Freedom of Choice over Emergency Nursing Services

Freedom of choice over health services is the right of patients. There are 3 (three) things that are the main thing to choose for health services, namely refusing or accepting health services or treatment recommended by doctors, choosing doctors and treatment classes, and obtaining approval when given health services.

Although basically every doctor is considered to have the same ability to perform medical actions in their field, patients still have the right to choose the doctor or hospital they want. This right can be exercised by the patient, of course, with various consequences that he has to bear, for example, the issue of costs.

As contained in Article 56 number (1) of Law Number 39 of 2009 concerning Health which reads: "Everyone has the right to receive or reject part or all of the relief measures that will be given to him after receiving and understanding the information about these actions in full."

Article 52 letter d of Law No. 29 of 2004 concerning the Practice of Medicine patients have the right to: "refuse medical action."
Article 32 letter g and k of Law No. 44 of 2009 concerning Hospitals, namely: g) choosing doctors and treatment classes in accordance with their wishes and the regulations applicable in the Hospital; h) give consent or refuse the action to be taken by the health worker against the disease he suffers from”.

This freedom of choice over health care is related to the right to self-determination. The right to self-determination is closer in meaning to that which is intended by personal rights, namely the right to security that is related to life, body parts, Health, honor, and the right to personal freedom.

The findings of the researchers, the doctor or health workers, and hospital management are indeed in accordance with what the patient says. For doctors, it is usually rarely asked about whose doctor will treat them unless there is a recommendation that requires the patient to be treated by a certain doctor or the patient has indeed previously been consulted and given treatment by the doctor, and the hospital usually allows it.

Overall, the guarantee of freedom of choice over health services has been fully implemented and is acceptable to patients with good implications. This can be proven by the consent of the patient to be provided with health services by doctors/health workers. With the consent of the patient, it proves that the patient is free to choose health workers and the class of care he wants, and the hospital does not act unilaterally to the patient at the time of the provision of health services, and the statement of doctors/health workers, hospital management and the same, namely the patient is asked for his consent to be given health services or treatment.

f. Freedom to Demand the Rights of the Aggrieved

The freedom to sue for the rights of the aggrieved is the right of the patient, and this is very important because it concerns the right of the patient if harmed by doctors/health workers and hospitals, Article 32 letter q and r of Law No. 44 of 2009 concerning Hospitals which reads: q) sue and/or use the Hospital if the Hospital is suspected of providing services that are not in accordance with standards both civilly and criminally; and r) complain about hospital services that are not in accordance with service standards through print and electronic media in accordance with the provisions of laws and regulations.

From the Law, it is clear that there is a right for patients who feel aggrieved to claim their rights. This is when asked
doctors/health workers if there are complaints from patients where patients can complain about it and how to respond to complaints from these patients. Doctors/health workers and hospital officials provide mixed responses.

According to Article 1 of Law 44 of 2009 on hospitals, it says that: "if there are complaints from patients, then here is provided a suggestion box to accommodate complaints from patients and from patient complaints which are received from the suggestion box will later become evaluation material for the hospital. In addition, the patient can also complain to the staff concerned".

According to Article 1 of Law 44 of 2009 on hospitals says that it says that:

1. A hospital is a health service institution that provides plenary individual health services that provide inpatient, outpatient, and emergency services.
2. Emergency is a clinical condition of a patient who requires immediate medical treatment to save lives and prevent further disability.
3. Plenary Health Services shall mean health services that include promotive, preventive, curative, and rehabilitative.
4. Patients are everyone who consults their health problems to obtain the necessary health services, either directly or indirectly, in the hospital.
5. The Central Government, hereinafter referred to as the Government shall mean the President of the Republic of Indonesia who holds the power of the government of the Republic of Indonesia as referred to in the 1945 Constitution of the Republic of Indonesia.
6. Local Government shall mean the Governor, Regent, or Mayor and regional apparatus as an element of local government administration.
7. The minister shall be the minister who administers government affairs in the field of Health.

The patient's complaint was responded to properly, and after there was a complaint, an approach was made to the patient and what the patient complained about became the material for evaluation and later for the quality assurance of the Hospital in the future.

Statements from doctors/health workers, hospital management, and patients are very diverse. When viewed from the responses or statements given by doctors/health workers, hospital officials, and patients, it can be concluded here there are 3 (three) ways patients complain about health services that have been provided, namely with
advice boxes, complaining directly to the doctor or nurse who handles them and to the field of service.

Based on the results of interviews with patients, almost all of them usually complain directly to the nurse or doctor who treats them. From this statement, it can be seen that usually, they do complain directly to the nurse who takes care of them, but when they see the statement said by the patient, "there is a response from the nurse and the hospital that treats them."

g. Hospital Legal Responsibility in Emergency Health Services

Responsibility is man's awareness of his intentional or unintentional behavior or deeds. Responsibility also means doing as a manifestation of the awareness of its obligations. In carrying out any work, any activity must have risks and be responsible for errors or omissions, as well as hospitals or health workers, most of whom have a great responsibility for the sustainability of human life and those related to human life.

Hospitals must be responsible for carrying out their obligations aimed at providing good health and protection of good services to patients. If the hospital violates its obligations, the hospital is legally responsible.

Article 46 of Law No. 44 of 2009 concerning Hospitals states the legal responsibility of the Hospital for all losses incurred due to negligence committed by health workers in the Hospital. So, everything that is done or caused by health workers on the basis of negligence or negligence is responsible is the Hospital.

Response from the management of the hospital "B" who said: "The hospital guarantees legal protection for health workers so as not to cause medical errors in dealing with our patients. also, the doctors have explained to the patient before the action that the disease he suffers is like this and will take action like this and the patient will also get legal protection from a responsibility of the hospital and doctor if something goes wrong".

Legal protection can be carried out properly if there is a good relationship between health workers and patients. Based on the interview, it can be explained that a good relationship between health workers and patients is needed in the implementation of legal protection for patients. The hospital is a legal subject meaning that the hospital can carry out legal relations with other legal subjects in carrying out health services. Therefore the hospital is obliged to bear all legal consequences
arising as a result of its actions or the actions of others who are its responsibility. The legal responsibility includes three aspects, namely civil law, administrative law, and criminal law. In terms of civil law, hospital liability is related to the legal relationship that arises between patients and hospitals in health services.

a. Civil

This legal relationship concerns two kinds of agreements, namely treatment agreements and medical service agreements. A treatment agreement is an agreement between a hospital to provide care with all its facilities to patients. Meanwhile, a medical service agreement is an agreement between a hospital and a patient to provide medical procedures according to the needs of the patient.

If something goes wrong in health services, then according to the civil law mechanism, the patient can sue the doctor based on unlawful acts. Meanwhile, a lawsuit against a hospital can be made based on default (breaking a promise), in addition to unlawful acts.

b. Punishment

Liability from the aspect of criminal law occurs if the losses incurred for negligence committed by medical personnel in the hospital meet three elements. The three elements are errors and unlawful acts and other elements listed in the relevant criminal provisions. It should be stated that in the criminal law system, in the event that a criminal act is committed by a corporation, then its management can be subject to imprisonment and fines. As for corporations, they can be sentenced to fines with weights.

In this case, the hospital must be able to give responsibility to patients in the service and protection of patients. The hospital must not abdicate responsibility for something it violates and results in the loss of patients. In addition to being responsible for patient protection, the hospital is also responsible for maintaining the confidentiality of the patient's history and the hospital also has the right to protection if the patient commits an unlawful act.

c. Administration

Hospital liability from the aspect of administrative law relates to administrative obligations or requirements that must be met by hospitals, especially in hiring health workers in hospitals.

Law No. 36 of 2009 concerning Health determines, among others, the obligation to have minimum qualifications and have permission from the government to provide health services. In addition, the Health Law
specifies that health workers must meet the code of ethics, professional standards, rights of health service users, service standards, and standard operating procedures.

If the hospital does not fulfill these administrative obligations or requirements, then based on Article 46 of Law No. 44 of 2009 concerning Hospitals, the hospital may be sentenced to administrative sanctions in the form of reprimands, written reprimands, non-renewal of operational permits, and/or fines and revocation of permits.

This needs to be paid to the attention of all parties in the hospital and is related to the implementation of professional ethics and hospital ethics so that the implementation of ethical services will greatly facilitate all parties in enforcing the rules of law. The responsibility of hospitals in Chapter XX of Law No. 36 of 2009 concerning Health has a relationship with criminal provisions, Article 190, namely:

a. Leaders of health service facilities and/or health workers who practice or work in health service facilities who deliberately do not provide first aid to patients who are in an emergency, as referred to in Article 32 paragraph (2) or Article 85 paragraph (2) shall be sentenced to a maximum of 2 (two) years in prison and a maximum fine of Rp. 200,000,000.00 (two hundred million rupiahs).

b. In the event that the act as referred to in paragraph (1) results in disability or death, the head of the health service facility and/or health worker shall be sentenced to a maximum imprisonment of 10 (ten) years and a maximum fine of Rp. 1,000,000,000.00 (one billion rupiah).

c. Based on the results of an interview with the management of Bhakti Asih Hospital, "B" said: "So far, there have been no cases of patient rejection carried out by medical personnel. Emergency patients will be immediately given help in the emergency room".

The refusal of patients by the hospital includes acts of civil malpractice because it has caused injury or death to a person allegedly caused by negligence, mistakes, and violations of the law by the hospital. Malpractice liability is not only due to agreements between patients and hospitals or defaults but also due to non-performance of obligations that should be carried out according to applicable laws or standards in carrying out medical services.
The head of a health care facility can be charged with an act against health services committed by the hospital for a criminal offense. Previously, the articles in the Criminal Code did not benefit the victim because the punishment was not proportional to the loss borne by the victim as the aggrieved party. In accordance with the above problems is to use Article 190, paragraphs (1) and (2) of Law Number 36 of 2009 concerning Health because the Health Law is more burdensome for punishment for perpetrators who have committed criminal acts.

The hospital is obliged to fulfill the rights of the patient, and so is the patient obliged to fulfill the rights of the hospital. If there is a failure of the hospital in fulfilling the rights of patients, which results in harming the patient, this can be sued civilly, as stipulated in Article 58 paragraph (1) of Law Number 36 of 2009 concerning Health, namely: "Everyone has the right to demand compensation against a person, health worker, and/or health administration that causes losses due to errors or omissions in the health services he receives."

The researcher's findings regarding the legal responsibility of the hospital are well implemented. This can be proven by the good cooperation between hospital management, health workers, and patients regarding the legal rules in the hospital, for example, when health workers ask for patient approval before action.

4. CONCLUSIONS

The responsibility of hospital management for handling accident victims in emergency services has been fulfilled by providing human resources and facilities in accordance with applicable laws and regulations.

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REFERENCE


5. Undang-Undang No. 44 Tahun 2009 tentang Rumah Sakit.


