



THE ROLE OF DISCIPLINE IN FORMING THE PERFORMANCE OF THE DOCTOR IN RESPONSIBILITY FOR SERVICE (DPJP): SYSTEMATIC REVIEW

Rusyandini Perdana Putri

Sociology Study Program, Faculty of Social and Political Sciences, Universitas Brawijaya, Jl. Veteran No.10-11, Ketawanggede, Malang, East Java 65145, Indonesia

rusyandini@student.ub.ac.id

ABSTRACT

Optimal healthcare in hospitals relies heavily on the discipline and work quality of health professionals, crucial factors for patient experience and facility reputation, as supported by Indonesian regulations like Law No. 17 of 2023. The Doctor in Charge of Services (DPJP) plays a central role in coordinating patient care and upholding discipline within the medical team. Previous studies confirm the significant impact of work discipline on hospital employee performance. However, factors like poor communication between doctors and patients, identified as a primary cause of disciplinary violations by the Indonesian Medical Discipline Honor Council (MKDKI), also affect service quality. Challenges in Indonesia, such as resource scarcity and high workload, add complexity to the relationship between DPJP discipline and performance. Objective : This study regularly reviews literature from 2021-2025 to explore the role of discipline in shaping DPJP performance, identifying influencing factors and research gaps, aiming to enhance healthcare quality in Indonesia through optimizing DPJP roles. Method : A systematic review, conducted following the PRISMA framework, identified 20 articles out of an initial 1,348 that met the pre-defined inclusion criteria. These articles, published between 2021 and 2025, were retrieved from IJHPM, PubMed, ResearchGate, ScienceDirect, and Springer, with a specific focus on discipline and healthcare professional performance. The PEO framework guided the article search and selection process. Results : Discipline in healthcare management and professional learning positively influences efficiency, effectiveness, and competence. While compensation can boost discipline and performance, unrealistic targets and poor communication can hinder it. Systemic issues also affect discipline and performance. Conclusions : Discipline is vital for DPJP performance and overall healthcare quality, alongside communication and management effectiveness. Optimizing the DPJP role through improved discipline is crucial for enhancing healthcare in Indonesia.

Keywords: discipline; DPJP; healthcare quality; physician performance; systemic review

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INTRODUCTION

Hospital is a health service institution that provides comprehensive health services. The services provided include inpatient, outpatient, and emergency services. In order to achieve optimal health services, one of the keys that must be applied by the hospital in providing services is the discipline and quality of work of its health workers. These two factors are interrelated and have a significant impact on the patient experience and the reputation of the health facility. The need for discipline and quality of work is not only based on moral values or professionalism alone, but is also clearly stated in various regulations in force in Indonesia. One of them is Law Number 17 of 2023 concerning Health which regulates various aspects of the health system in Indonesia, including general provisions, rights and obligations, government responsibilities, health care delivery, health efforts, health service facilities, and health human resources. This regulation is the basis for accountable, quality, and patient safety-oriented health worker practices. These regulations not only regulate the obligations and rights of health workers, but also provide a mechanism for enforcing discipline through the Professional Discipline Council (formerly the Indonesian Medical Discipline Honorary Council-MKDKI) and various service quality indicators that must be met.

In the context of Human Resource Management (HRM), work discipline is not only about employee compliance with rules, but is also one of the key functions that determines the success of an organization in achieving its goals. Efficient human resource management is essential to achieve a harmonious balance between employee requirements and operational capacity and business expectations. This balance is essential for efficient and sustainable company growth (Fauziah et al., 2024). So in this case, work discipline is one of the priorities as an important component of success in improving employee performance. This achievement reflects the employee's ability to contribute to the company's goals or targets effectively. In addition, to achieve optimal performance, an employee must have the skills and information needed according to their profession. (Milliana et al., 2023) The Doctor in Charge of Services (DPJP) in a Hospital has a central and crucial role in shaping the discipline and performance of the entire medical team treating a patient. The DPJP is not just a treating doctor, but also a clinical leader who is responsible for the coordination, integration, and quality of the patient's medical care. The DPJP is a clinical leader who coordinates the entire patient care team. This role requires the DPJP to be a role model of discipline, ensure that each team member understands and implements the Standard Operational Procedure (SOP), and carefully supervise the implementation of the care plan. The DPJP is fully responsible for the clinical decisions taken, which directly affect the quality of patient care. He must ensure effective communication between professions, prevent duplication of actions, and lead the evaluation of care outcomes for continuous improvement. In other words, the DPJP is an orchestrator who ensures that all instruments in health services play in harmony, creating harmony that results in the best care for patients.

The results of Mantiri et al.'s (2022) research on the Influence of Discipline and Work Motivation on Hospital Employee Performance show that doctors have good performance (97.6%), good work discipline (94.4%), and good work motivation (77.0%), so it can be concluded that work discipline has a significant effect on the performance of employees at Dr. Sam Ratulangi Tondano Hospital (Mantiri et al., 2022). This shows that in efforts to improve the quality of service through DPJP, it cannot only be seen from a discipline perspective, there are other factors that help provide a strong influence on patient satisfaction, so that several other indicators must also be met, including waiting time, number of human resources, communication, knowledge, organizational culture, workload, compensation, and managerial support play an important role in supporting the improvement of service quality.

The Indonesian Medical Discipline Honorary Council (MKDKI) has handled cases of disciplinary violations committed by doctors or dentists, and showed that 80% of reported violations were related to a lack of communication between doctors and patients (Purba et al., 2024) so that in this case, communication also plays a role in efforts to improve patient care. On the other hand, indiscipline, such as absenteeism or violations of professionalism, can trigger serious consequences, including increased risk of malpractice and decreased public trust in the health system. In Indonesia, challenges such as lack of resources, high work pressure, and variations in organizational culture in hospitals add complexity to understanding the relationship between discipline and DPJP performance. This study aims to explore how discipline plays a role in shaping DPJP performance through a systematic review approach to literature published between 2021 and 2025. By analyzing 20 articles from various databases such as IJHPM, PubMed, ResearchGate, ScienceDirect, and Springer, this study identifies factors that support or hinder discipline, its implications for DPJP performance, and research gaps that can be the basis for future studies. Through this approach, it is hoped that in-depth insights can be obtained to improve the quality of health services in Indonesia, especially through optimizing the role of DPJP.

METHOD

The method employed in this literature review is a Systematic Review, utilized to map existing literature and identify research gaps within the studied area. The systematic review was compiled referencing the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) framework, a method specifically chosen to enhance the quality assurance of the structure and process completeness of a systematic review. Researchers selected PRISMA due to its detailed guidance in systematic review preparation. (Khoiriyah & Ismarwati, 2023) A systematic review, conducted following the PRISMA framework, identified 20 articles out of an initial 1,348 that met the pre-defined inclusion criteria. These articles, published between 2021 and 2025, were retrieved from IJHPM, PubMed, ResearchGate, ScienceDirect, and Springer, with a specific focus on discipline and healthcare professional performance. The PEO (Population, Exposure, Outcome) framework guided the article search and selection process. The collected articles were analyzed using a thematic approach with categorization techniques based on the focus and main findings of each study. This process involved iterative in-depth reading and recording of recurring patterns to identify key themes related to health worker discipline and performance. Data analysis was carried out using the PRISMA Technique for systematic review including several steps, namely: (1) Identification of Search Results (2) Selection of articles based on title and abstract (3) Assessment of article eligibility based on full text (4) Critical appraisal (5) Combining data, summarizing and presenting results

RESULT

In this literature review, the article search uses the PEO (Population, Exposure and Outcomes) framework. This framework helps identify aspects of situations and populations that have specific conditions and desired outcomes related to interventions.

Table 1.
The description for the PEO framework

Framework	Information
Population	DPJP
Exposure	DPJP Performance
Outcome	Discipline

The data search was conducted using the IJHPM, PubMed, ResearchGate, ScienceDirect, and Springer journal databases using the Universitas Brawijaya access account. From the five websites, the author obtained 20 articles that focused on the discipline of doctors/health workers in various countries with various movement patterns. The selection of these 20 articles was based on the following criteria: (1) published between 2021–2025 to ensure temporal relevance, (2) using an empirical research design (quantitative, qualitative, or mixed-methods) to provide strong evidence, (3) available in full text in English or Indonesian, (4) explicitly discussing aspects of discipline and/or health worker performance, and (5) covering various geographic contexts and health service organizations to obtain a comprehensive picture. The author used two main keywords in finding articles on discipline, namely "discipline" and "health worker performance".

Table 2.
Relevant Articles by Database and Keywords

No	Keywords	Filter	Available Articles	Relevant Articles
IJHPM				
1	Discipline and physician performance	Year 2021-2025, Free full text, Type: Journal and articles	329	2
2	Doctor discipline and hospital service performance	Year 2021-2025, Free full text, Type: Journal and articles	41	1
Total IJHPM Articles			3	

No	Keywords	Filter	Available Articles	Relevant Articles
Pubmed				
3	Discipline and physician performance	2021-2025, Free full text	267	6
4	Doctor discipline and Hospital Service performance	2021-2025, Free full text	60	1
Total Pubmed Articles			7	
Researchgate				
5	Discipline and physician performance	2021-2025, Type: Articles and Literature Review, Only full-texts	368	2
6	Doctor discipline and hospital service performance	2021-2025, Type: Articles and Literature Reviews, Only full-texts	170	2
Total Researchgate Articles			4	
Sciencedirect				
7	Discipline and physician performance	2021-2025, Research articles, Subject areas: social science, Access: open access	58	3
8	Doctor discipline and hospital service performance	2021-2025, Research articles, Subject areas: social science, Access: open access	33	2
Sciencedirect Articles Total			5	
Springer				
9	Discipline and physician performance	2021-2025, Open Access, Content type: Articles	18	1
10	Doctor discipline and hospital service performance	2021-2025	4	0
Total Springer Articles			1	

At this stage, the articles obtained were then screened based on the number of duplicates, the suitability of the article related to the research objectives by paying attention to the title and abstract, analyzing the full text article according to the criteria. The search results obtained 20 out of 1,348 articles that met the criteria. The search results obtained amounted to 20 studies and were then entered into a data charting table with the criteria of author, title, country, sample, method and research results.

DISCUSSION

Health Services Management and Organization

Discipline in health care management and organization affects the efficiency and effectiveness of care. (Waitzberg et al., 2022) found that visit-based payment encouraged physician discipline in improving service efficiency in Germany and Israel, especially when clinical and economic considerations were aligned. However, the misalignment between the two requires better care management to maintain discipline. Meanwhile, (Das et al., 2022) in India revealed that unrealistic performance targets encouraged counterproductive behavior, such as data manipulation, indicating that discipline can be disrupted by poor management systems. (Ubels & van Raaij, 2023) in the Netherlands showed that financial sanctions in hospital contracts were quite effective in improving physician discipline, although the type of contract was not always a major factor in the doctor-hospital relationship. One type of public satisfaction indicator in public service efforts in the health sector is the Discipline of service officers. Based on the Decree of MENPAN No. 63 of 2003, service providers must meet several principles, namely simplicity, clarity, certainty of time, accuracy, security, responsibility, completeness of work facilities and infrastructure, ease of access, discipline, politeness, friendliness and comfort. However, in its implementation according to Meter and Hort (Satrianegara, 2009) discipline is also influenced by the nature of the policy to be implemented, changes and compliance with action are important concepts in the implementation procedure.

Management is also responsible for upholding rational-legal authority. This means that decisions made, whether regarding resource allocation, policy development, or patient case management, must be based on technical knowledge, applicable rules, and established procedures. Health care organizations, through their management, strive to eliminate elements of traditional or charismatic authority that may interfere with the consistency and objectivity of services. They ensure that qualifications, competence, and performance are the basis for staff placement and promotion, and are the primary benchmarks for evaluating service effectiveness. (Ali et al., 2023)

Health Worker Performance and Behavior

Work discipline directly plays a role in the performance and behavior of health workers. (Fauziah et al., 2024) reported that work discipline together with motivation explained 81.7% of the variation in employee performance in the health industry in Bandung, Indonesia. (Zhenyu Cui & John Zysman, 2021) found that compensation increased the discipline and performance of doctors and nurses in the United States, with discipline acting as a mediating variable. In contrast, (Angell et al., 2023) in Serdang Bedagai, Indonesia, concluded that work discipline had no significant effect on the performance of medical employees through work communication, indicating variations in the influence of discipline based on context. (Kovacs & Lagarde, 2022) in Senegal showed that discipline in high workload management did not reduce the quality of care, confirming that disciplined health workers can maintain optimal performance. (Naher et al., 2022)

Discipline in Bangladesh identified that doctor absenteeism, as an indicator of indiscipline, is triggered by systemic factors such as poor work facilities. Krijghseld et al. (2022) highlighted that health worker performance includes dimensions of work tasks and behaviors, with discipline as the main driver. This is in line with research (Andayani, 2021) which shows that there is a significant influence between service quality and employee performance. The foundation of this superior performance lies in something fundamental, namely a solid internal power structure. The power structure is an invisible web that binds each individual, determines who has authority over what, and ultimately shapes the discipline and performance of each employee. According to Weber, the concept of power structure includes many components, such as the hierarchy that determines who is responsible and has authority within the organization (Irawan, 2019) The flow of instructions and decisions within the organization is managed by a hierarchical structured structure. In addition, authority within the framework of the power structure includes the rights of individuals or units within the organization to make decisions, provide instructions, or manage resources. Sources of authority can come from various sources, such as their position in the hierarchy, laws, or established regulations (Ali et al., 2023).

Issues of Professionalism and Ethics

Discipline is closely related to professionalism and ethics in medical practice. (Lewis, 2023) found that interprofessional incivility disrupts medical team performance and patient safety, indicating that discipline in maintaining professional interactions is essential. (Mattes & Ferrari III, 2022) reported that disciplinary action against medical students in the United States increased the risk of failure to enter a residency program, confirming the long-term impact of indiscipline. (Hyman et al., 2021) in Illinois revealed that a small proportion of doctors with repeated disciplinary violations accounted for the majority of malpractice claims, highlighting the importance of discipline to prevent legal consequences. (Peteet et al., 2023) emphasized that discipline in fostering an attitude of responsibility as a moral virtue improves the quality of care and the welfare of medical personnel. The professionalism of a doctor, from Weber's perspective, is a manifestation of rational-legal authority rooted in specialized knowledge and verified competence.

Issues surrounding professionalism directly affect how physicians behave, interact with patients, and fulfill their ethical and legal obligations. When a physician demonstrates high levels of professionalism, this is reflected in empathy, effective communication, integrity, and a commitment to lifelong learning. They are responsible not only for providing the best medical care based on the latest scientific evidence, but also for respecting patient autonomy, maintaining confidentiality of information, and acting in the best interests of the patient regardless of social or economic status. (Richard Frimpong Oppong & Ian Wooton, 2020) Through Max Weber's lens, discipline is the essence of rational-legal bureaucracy, a system in which actions are based on objectively and impersonally established rules, rather than on personal preferences or traditional authorities. In the medical context, this means that doctors are expected to adhere to clinical protocols, practice guidelines, and codes of ethics that have been standardized and legalized by professional authorities and health institutions. (Mohamad Borut, 2021) Discipline in adhering to a code of ethics ensures that medical practice is not only efficient but also moral and accountable. Failure in ethical discipline, such as malpractice or conflict of interest, will undermine the legitimacy of the profession's rational-legal authority and erode public trust. Therefore, for Weber, discipline is not just about blind obedience, but the foundation for bureaucratic efficiency and the enforcement of professional values and ethics that underpin the credibility of the modern health system. (Ali et al., 2023)

Health System Issues

Health system issues also play a significant role in health worker discipline and performance. (Angell et al., 2023) in Nigeria found that top-down approaches to address absenteeism were less effective than interventions that took into account health worker preferences, suggesting that discipline depends on supportive system design. Systemic factors such as inequity in access and corruption can undermine discipline, ultimately affecting the performance of DPJPs in providing equitable and quality services. One of the crucial issues in Indonesia is equal access to health services, especially for people in remote areas and islands. Although there have been massive efforts through the National Health Insurance (JKN) or BPJS Kesehatan, geographical constraints, limited facilities, and a shortage of specialist medical personnel in the regions are still significant obstacles. (Noor et al., 2021) On the other hand, developed countries like the United States are grappling with high healthcare costs that burden both citizens and governments, even with sophisticated private insurance systems. While access to advanced medical technology is easier, economic disparities create large gaps in access, with millions still lacking adequate healthcare coverage. (Tamblyn et al., 2022) Meanwhile, countries with universal healthcare systems like Canada often face long waits for certain medical procedures or budget pressures from aging populations and rising chronic diseases. (Richard Frimpong Oppong & Ian Wooton, 2020)

The health system issues above highlight that each health system has its own unique set of problems, but many are rooted in imbalances between resources, population needs, resource discipline and policy effectiveness. Weber emphasized that modern societies are dominated by rationalization and the emergence of bureaucratic structures. In the context of health systems, this means that efforts to manage resources (doctors, nurses, drugs, facilities) and meet population needs are often done through formal rules, procedures and hierarchies. Policy effectiveness in this case directly reflects the success or failure of rational-legal authority in the health system. Policy is an expression of laws and regulations that are made rationally to achieve certain goals. If the policy is ineffective, it indicates that the process of forming or implementing the policy is not entirely rational or fails to create uniform compliance. This failure can be exacerbated by resistance to change, lack of technical expertise in the bureaucracy, or even corruption that undermines the rational purpose of the policy. Thus, these issues are not only practical problems, but also a reflection of the challenges in achieving bureaucratic rationality and efficiency in the health system. (Mohamad Borut,

Professional Learning

Discipline in professional learning improves competence and performance. (Daniëls et al., 2024) in Belgium concluded that doctors who are disciplined in workplace learning activities are better able to face clinical challenges, which supports adaptive performance. This discipline includes a commitment to following training, learning new technologies, and participating in clinical discussions, all of which are relevant to the role of DPJP in maintaining high standards of care. In Indonesia, this effort is realized through various Continuing Medical Education (CED) programs required by professional organizations such as the Indonesian Doctors Association (IDI) and specialist colleges. CED includes seminars, workshops, clinical skills training, and scientific symposiums, all of which aim to update knowledge, hone skills, and improve doctors' clinical practices (Iffat, 2025). This increase in competence is directly correlated with better quality of service, more appropriate clinical decision-making, and ultimately, improved patient health outcomes. However, the challenge in Indonesia often lies in the accessibility and equity of CED, especially for doctors who practice in remote areas with limited facilities and resources, as well as high workloads that hinder active participation.

In the United States, *Continuing Medical Education (CME)* or *Continuous Professional Development (CPD)* is not only mandatory, but is often a requirement for license renewal. (Tamblyn et al., 2022) In addition, clinical research and scientific publications are also an integral part of professional learning, encouraging physicians to become not only consumers of knowledge, but also producers. As a result, physicians in these countries tend to have wider access to the latest innovations and evidence-based practices, which in turn encourages higher performance standards and more adaptive services to changing health needs. This is in line with research (Vilender et al., 2023) reported that physicians were more responsive to informal feedback from patients, suggesting that discipline in following up on feedback can improve the quality of care. Continuous professional learning plays a crucial role for physicians, especially when viewed through the lens of Max Weber's theory of resources and organizations. Weber emphasized the importance of rational-legal authority and bureaucracy in modern organizations. In the context of medicine, this means that a physician's expertise and knowledge are the primary resources that provide their legitimacy and authority. Hospital bureaucracies and the health system as a whole operate on rational procedures and standards, where qualifications and competence are the foundation (Ali et al., 2023)

CONCLUSION

Based on a systematic review of the literature published between 2021 and 2025, this study concludes that discipline has a significant role in the performance of the Doctor in Charge of Services (DPJP) and the overall quality of health services. Discipline is key to achieving optimal health services in hospitals, along with the quality of health workers' work. The importance of this discipline is supported by regulations in Indonesia, such as Law Number 17 of 2023 concerning Health, which regulates aspects of the health system and is the basis for accountable and quality health worker practices. In the context of human resource management, discipline is not only about compliance with rules, but also a determining factor in the success of the organization in achieving its goals. DPJP has a central role as a clinical leader who is responsible for the coordination, integration, and quality of patient medical care, as well as being a role model of discipline for the medical team. Although discipline generally has a positive impact on performance, there are other factors that influence it. Poor management, such as unrealistic performance targets, can interfere with discipline. On the other hand, good compensation can improve discipline and performance. Cases of disciplinary violations handled by the Indonesian Medical Discipline Honorary Council (MKDKI) show that lack of communication between doctors and patients is the main cause of violations.

Therefore, effective communication also plays an important role in improving patient care. Challenges such as lack of resources, high work pressure, and variations in organizational culture in hospitals in Indonesia add to the complexity of the relationship between discipline and DPJP performance. However, this study identified that disciplined health workers can still maintain optimal performance under high workloads. Overall, optimizing the role of DPJP through improving discipline is expected to improve the quality of health services in Indonesia.

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