

LEGAL REVIEW OF HOSPITAL RESPONSIBILITY FOR MEDICAL ACTIONS CARRIED OUT BY DOCTORS

Zudan Arief Fakrulloh, Lubna

Universitas Borobudur, Indonesia

Email : cclsis@yahoo.com, lubnasadatali@gmail.com

KEYWORDS

legal aspects; public services; responsibility

ABSTRACT

Every person has the right and legal right to obtain health services, and the public is free to utilize government and/or regional government health resources. The organization of hospital administration services, medical services, supporting services, and nursing services, both inpatient and outpatient must be provided at a minimum by the hospital, by regional hospital service standards. This type of research is normative juridical research, that is, it is studied using a statutory approach, meaning that a problem will be seen from its legal aspect by examining statutory regulations. Based on Number 44 of 2009 concerning Hospitals, hospitals are legally responsible for all losses incurred due to negligence committed by health workers at the hospital. The hospital's legal responsibility in providing health services to patients can be seen in professional ethics, administrative law, civil law, and criminal law. Based on Law Number 25 of 2009 concerning Public Services, what is meant by public service is an activity or series of activities to fulfill service needs by statutory regulations for every citizen and resident regarding the goods, services, and/or administrative services provided by public service providers

Attribution-ShareAlike 4.0 International (CC BY-SA 4.0)



1. Introduction

Health is a human right and one element of welfare that must be realized by the ideals of the Indonesian nation as intended in Pancasila and the Preamble to the 1945 Constitution of the Republic of Indonesia, therefore, every activity and effort to improve the level of public health is implemented to the highest extent possible based on non-discriminatory, participatory, protective and sustainable principles which are very important for the formation of Indonesia's human resources, increasing the nation's resilience and competitiveness, as well as national development (Putra, 2022).

Every person has the right to access health services, this has been confirmed by Article 28 H paragraph (1) of the 1945 Constitution of the Republic of Indonesia. The provision of worthy health service facilities and public service facilities is the responsibility of the State, by Article 34 paragraph

(3). Hospitals, one of the organizations providing health services, are one of the health resources needed to support the implementation of health efforts. Providing health services in hospitals requires several complex organizational elements and procedures. Interaction of health professionals with related scientific tools. Hospital challenges are becoming increasingly difficult due to the need for health workers who must keep up with rapid advances in medical research and technology to provide high-quality services. The legal regulations that form the basis for hospital management are still at the ministerial level so they are no longer sufficient to meet needs. A legal document is needed that regulates hospitals as a whole in the form of statutory regulations, therefore Law Number 44 of 2009 concerning Hospitals (Hospital Law) was issued to provide legal clarity and protection to improve, direct, and provide convenience for the community framework (Triana et al., 2023).

Three factors, namely: the quality of services provided, who offers the services, and consumers (patients) who receive and evaluate the services they receive, have a significant influence on the hospital's ability to provide health services to patients. If a hospital can provide high-quality health services by trained professionals who comply with hospital service standards and patients who receive these services are satisfied according to their hopes and desires, then it can be said that the medical services have been certified by a hospital doctor (Abduh, 2021).

The legal relationship between a doctor or hospital and a patient in the context of health services makes the doctor or hospital a legal subject who is obliged to make every effort to provide the best possible health services based on his ability and expertise to implement the patient's rights, healing and/or restoration of health. The costs of treatment and recovery of the patient's health are the responsibility of the patient as a legal subject, not the doctor or facility (Suparman, 2020).

Regulations regarding the relationship between health workers (paramedics), hospitals, and patients are spread in various laws and regulations, namely the Hospital Law, the Health Law (which replaces Law Number 23 of 1992 concerning Health), and even this can be related to Law Number 8 1999 concerning Consumer Protection, Law Number 25 of 2009 concerning Public Services, Law Number 11 of 2009 concerning Social Welfare, however, due to the many regulations related to this matter, conflicts often occur between one regulation and another which then results in implementation being ineffective (Utami et al., 2022). As a type of health facility, hospitals are an important component of health resources needed to support the implementation of public health initiatives. The characteristics and organizational structure of providing health services in hospitals are quite complicated. Interaction between various health professionals and related scientific tools. Healthcare professionals must keep up with rapid advances in medical research and technology to provide high-quality services, which makes hospital problems increasingly difficult to solve. In essence, hospitals function as a place to treat disease and restore health, and this task implies that the government must be responsible for improving the level of community welfare (Susanto, 2013).

The government has an important role in providing excellent public services for all citizens by Law no. 25 of 2009 concerning Public Services in Article 1 states the following:

"Public Service is an activity or series of activities to fulfill service needs by statutory regulations for every citizen and resident for goods, services and/or administrative services provided by public administrators"

Service itself is essentially an effort to help prepare everything that other people need and can provide satisfaction by the wishes expected by consumers.(Abdul Aziz, 2022) The government was not created to serve itself, but to serve society and create conditions that enable every member of society to develop their abilities and creativity to achieve common goals.(Sirajuddin dkk, 2012) It is hoped that this development effort can realize an optimal level of community life, including improving health.

The existence of this law aims to provide legal protection and clarity to perfect, direct, and build the foundation for hospital management. Health professionals, especially paramedics, who are an important component in this process, have a direct impact on the provision of health services and the

quality of those services. In contrast, paramedics' capacity to perform medical interventions on behalf of others is determined largely by their knowledge, technological proficiency, and competence, all of which they have developed through education and training. Knowledge and scientific progress need to continue to be maintained and developed along with advances in science and technology. With the special equipment they have, health workers—especially paramedics—have different qualities (Wahyudi, 2011). The legal justification for carrying out medical operations on people to maintain and improve their health status provides evidence of this uniqueness. Non-health professionals who perform medical procedures on the human body also commit crimes. Public lawsuits are currently on the rise, public trust in medical professionals is declining (especially in paramedics), and services that do not comply with norms and procedures are often blamed and become medical arguments. On the other hand, the lack of understanding by the medical community (doctors, nurses, and hospitals) regarding the legal aspects of their profession is also a cause of medical disputes. This can be prevented if the medical community (and society) understands the limits of their respective rights and responsibilities when providing or obtaining health services. (Mas Isharyanto, 2021)

Every customer or service recipient certainly wants satisfaction in receiving a service. According to Aziz, the measure of success in providing a service is determined by the level of satisfaction of the service recipient. Service recipient satisfaction is achieved if the service recipient receives services by what is needed and expected. (A Aziz, 2021)

In providing medical services, one of the duties of a doctor towards his patients is to ensure that the patient is given a thorough explanation regarding the medical procedures that will be carried out by the doctor. A doctor must obtain permission before performing any medical procedure on a patient, and permission is only given after the patient is fully informed (Haryanto, 2018). However, it is also possible that doctors carry out wrong medical procedures and injure their patients. Both the doctor and the hospital where the doctor practices are responsible for any losses suffered by the patient due to the doctor's error. The purpose of this writing is to determine the form of responsibility given by hospitals for losses suffered by patients due to medical errors based on the relationship between the doctor and the hospital.

2. Materials and Methods

This research uses a normative juridical approach, which includes an assessment of secondary materials in the form of secondary legal documents and considers law as a set of norms or standards desired for the legal system that regulates human existence. Researchers attempt to highlight important events and circumstances without overemphasizing them. Therefore, this research uses secondary data research originating from the library. (Mamudji, 2001)

This research is considered normative legal research, so the type of data used is secondary data. The secondary data studied is as follows:

- a. Primary Data Source is a source of data or information that is data obtained directly from the first source based on field research. Primary data in this research was obtained through information and information obtained from the Community Health Center
 - 1) Law Number 36 of 2009 concerning Health,
 - 2) Regulation of the Minister of Health of the Republic of Indonesia Number 75 of 2014 concerning Community Health Centers (Puskesmas).
- b. Secondary data sources are data obtained through library materials. Primary data in the research carried out a book review, secondary data in the research came from:
- c. Tertiary legal materials, namely legal materials that provide instructions and explanations for primary and secondary legal materials in the form of encyclopedia dictionaries, materials from the internet, and so on.
 - 1) Indonesian Encyclopedia;
 - 2) Legal Dictionary;

3) Various legal magazines and journals.

Data was collected through collection methods, analysis, and processing of library sources and related articles because secondary data was used in this research. The rules of recency and relevance are still taken into account when collecting secondary information regarding primary, secondary, and tertiary legal materials using library sources

3. Result and Discussion

Legal Regulations Regarding Health Services in Hospitals

Health care services are every person's right guaranteed in the 1945 Constitution to make efforts to improve the health status of both individuals and groups or society as a whole. (Abram David Levy S, 2015) According to the Ministry of Health of the Republic of Indonesia in 2009 (Depkes RI), what is meant by "health services" is any action carried out by a person or group of people who work together in an organization to maintain and improve health, prevent and treat disease, and restore health to individuals, families, groups, or communities. According to Article 52 paragraph 1 of the Health Law, there are two types of health services provided in general:

a. Personal health services (medical services)

To treat illnesses and improve the health of individuals and families, many of these health services are offered independently by individuals (self-care), families (family care), or groups of community members. These individualized service initiatives are conducted in medical facilities known as hospitals, birthing centers, and independent practices.

b. Public health services (public health services)

To maintain and improve health, communities and groups provide public health services which include promotive and preventive efforts. These community involvement activities are carried out at certain community health clinics, such as community health centers. Complete health service activities as referred to in paragraph (1) are regulated in Article 52 paragraph 2 of the Health Law, namely:

- Promotive health services are an activity and/or series of health service activities that prioritize health promotion activities.
- Preventive health services are an activity to prevent a health problem/disease.
- Curative health services, are an activity and/or series of treatment activities aimed at curing disease, reducing suffering due to disease, controlling disease, controlling disability so that the quality of sufferers can be maintained as optimally as possible.
- Rehabilitative health services, activities, and/or a series of activities to return former sufferers to society so that they can function again as members of society who are useful for themselves and society, as much as possible according to their abilities.

Based on the explanation above, the Health Law, which in Article 54 Paragraph 1 states that services are provided in a responsible, safe, quality, fair, and non-discriminatory manner, generally regulates health services provided in public health centers, infirmaries, clinics, and hospitals. By placing patient safety above all other considerations, every person or every patient can receive professional, safe, high-quality, non-discriminatory, and effective health services.

As society's need for health services increases, the role of law in encouraging progress in health services also increases. To improve health services that emphasize legal protection and predictability, this argument encourages governments and health service providers to use legal foundations and functions. Be patient. Article 53 of the Health Law states the legal basis for health services in general, namely:

a. Personal health services are aimed at curing disease and restoring the health of individuals and families.

b. Public health services are aimed at maintaining and improving health and preventing disease in a group and community.

c. The implementation of health services as intended in paragraph (1) must prioritize the safety of patients' lives over other interests.

Then, Article 54 of the health Law also regulates the provision of health services, namely:

- a. The provision of health services is carried out in a responsible, safe, quality, equitable, and non-discriminatory manner.
- b. The government and regional governments are responsible for the implementation of health services as intended in paragraph (1).
- c. Supervision of the implementation of health services as intended in paragraph (1) is carried out by the government, regional government, and the community.

The legal relationship between hospitals in this case and patients who receive health services arises because health services are also a legal act. This professional activity or activity includes activities in the field of preventive and curative services for the benefit of patients. Hospitals are obliged to prioritize patient needs by hospital service standards to provide safe, quality, anti-discriminatory, and efficient health services, by Article 29 paragraph (1) letter (b) of the Hospital Law.

Parties related to every health service activity, whether in hospitals, health centers, clinics, or private practices, include:

a. Doctor

A doctor is someone who is legally qualified to provide medical services, including diagnosing and treating disease, as well as other services related to the healthcare industry. The definition of a doctor according to Article 1 Paragraph 11 of Law no. 29 of 2004 is work carried out by knowledge, competencies obtained through educational levels, and a code of ethics that serves the community.

A doctor must know the legal requirements relevant to the practice of medicine, including equality of rights and obligations within the profession.[11] Doctors' awareness of their legal obligations both towards themselves and towards others in carrying out their profession must truly be understood by doctors as bearers of rights and obligations.

b. Nurse

The essence of a nurse's work is always in situations involving people, where there is a process of mutual influence and contact that may affect everyone involved. Based on knowledge about comprehensive bio-psycho-social-spiritual services, aimed at individuals, families, and communities, both sick and healthy, the findings of the 1983 National Nursing Workshop showed that nursing is one type of professional service that is an important part of health. services that cover the entire human life cycle.

As a profession, nursing has a social contract with society, which means that society trusts nurses to continuously maintain and improve the quality of services provided. Minister of Health Regulation no. H.K. 02. 02 /MENKES /148 I /2010 concerning Licensing and Implementation of Nursing Practice. Article 1 paragraph (1) explains the definition of a nurse as someone who has passed nursing education, under statutory regulations. In the process of the relationship between the nurse and the patient, the patient expresses his problem to get help, which means the patient entrusts himself to the nursing care provided.

c. Midwife

At the national and international level, many professionals recognize midwifery as a profession. A midwife is someone who has completed a state-approved midwifery education program, obtained the necessary qualifications, and been granted a license to practice midwifery in that country, by the definition provided by the International Confederation of Midwives (ICM) in 1972. Midwives must be able to supervise, maintain, and give good advice. Women are expected to plan their births and care for babies and children during pregnancy, birth, and the postpartum period. To receive this treatment, a person must exercise caution, recognize any abnormalities in the mother and baby, seek medical assistance, and provide emergency care without the assistance of other medical professionals.

The definition of a midwife in Indonesia is a woman who has attended and completed midwifery education that has been recognized by the government and has passed an examination by applicable requirements and obtained qualifications for registration and obtaining a permit. Authentic Article 1 paragraph (1) Minister of Health Regulation no. H.K. 02. 02. /MENKES/149/2010 concerning Licensing and Implementation of Midwife Practice explains that what is meant by a midwife is a woman who has graduated from education and has been registered by statutory regulations. Midwives have an important task in health consultation and education, not only for women as their patients but also for their communities. This education includes antenatal, family planning, and child care.

d. Pharmacist

According to the provisions of Government Regulation No. 51 of 2009 concerning Pharmaceutical Work, a pharmacist is a pharmacy graduate who has graduated as a pharmacist and has taken the pharmacist's oath of office. The duties of a pharmacist in providing health services are regulated in PP 51 of 2009 concerning Pharmaceutical Work as follows:

- Carrying out pharmaceutical duties such as ensuring the quality of pharmaceutical preparations, maintaining security, obtaining, storing, and distributing pharmaceutical supplies, managing drugs, providing prescription services and drug information, as well as creating new drugs and conventional treatments.
- In the pharmaceutical business, develop and update SOP (Standard Operational Procedure).
- When carrying out pharmaceutical work in the distribution or distribution of pharmaceutical preparations, comply with the provisions on good distribution procedures stipulated by the minister, including recording everything related to the process of distributing or dispensing pharmaceutical preparations.
- As someone responsible in the pharmaceutical industry for quality assurance, production, and quality control.
- As the person in charge of pharmaceutical service facilities, namely in pharmacies, hospital pharmacy installations, health centers, clinics, drug stores, or joint practices.
- Implementing pharmaceutical services in pharmacies to answer the community's need for access to medicines in the context of public health promotion.
- Maintaining pharmaceutical confidentiality in the pharmaceutical industry and pharmacies regarding the production, distribution, and service processes of pharmaceutical preparations, including patient confidentiality.

Community Health Centers, Public and Private Hospitals, Clinics, and other institutions that provide health services are places where health activity services can be obtained; it is believed that these institutions will contribute in the best and most effective way possible. Several implementing institutions above must provide quality health services to the community or patients, in this case for the benefit of patients and their families. The current health service system is more complex because not all health service institutions meet the requirements for good, skilled health personnel and appropriate hospital facilities, which are needed to improve health services.

All public service delivery must comply with service standards and be transparent to provide trust to the recipients of the service. On July 18, 2009, the DPR RI and the President of the Republic of Indonesia unanimously passed Law Number 25 of 2009 concerning Public Services which calls for changes to protect every citizen and resident from abuse of power in the administration of government. public services to ensure the implementation of better public services.

According to Law No. 25 of 2009, service standards are benchmarks used as guidelines for providing services and as a reference for assessing service quality as an obligation and promise of providers to the community in the context of quality, fast, easy, affordable, and measurable services.

This law mandates that providers prepare and set service standards while still considering their capabilities, community needs, and the environment. The community and related parties are involved

in creating and enforcing service standards while still upholding the values of non-discrimination, prioritizing dialogue, and respecting diversity. A set of rules which are then regulated by government regulations are used in determining service standards. Minimum service standards consist of:

- a. Legal Basis, statutory regulations which form the legal basis for providing services.
- b. Requirements, and conditions that must be met in managing a type of service, both technical and administrative requirements.
- c. Systems, mechanisms, and procedures, namely the procedures for providing services to service providers and recipients.
- d. Completion time figures, the period required to complete the entire service process for each type of service.
- e. Costs/tariffs, which are charged to service recipients in administering and/or obtaining services from the provider, the amount of which is determined based on an agreement between the organizer and the community.
- f. Service products, results of services provided and received by established provisions.
- g. Facilities, infrastructure and/or facilities, equipment, and facilities needed to provide services, including equipment and service facilities for vulnerable groups.
- h. Competence, executor The abilities that the executor must have include knowledge, expertise, skills, and experience.
- i. Internal supervisor, control carried out by the work unit leader or the implementer's direct superior
- j. Handling complaints, suggestions, and input Procedures for implementing complaint handling and follow-up.
- k. Number of executors, availability of executors according to workload.
- l. Service guarantee that provides certainty that services are carried out by service standards. Quite clear
- m. Guarantee of service security and safety in the form of a commitment to provide a sense of security, free from danger and the risk of doubt. Certainty provides a sense of security and freedom from danger, risk, and doubt.
- n. Evaluation of implementing performance, assessment to find out how far the implementation of activities is by service standards.

The goals of the law are efficiency, certainty, and justice. In the real world, there are several examples of law enforcement procedures that conflict with justice and legal certainty. Legal certainty is firm and unambiguous, but justice is temporary, so there are times when the value of justice is not respected when a judge decides a case based solely on the law. Therefore, justice is the main consideration if there is a legal problem. Because law is not only understood from the perspective of written law, there are still many laws in society that have the power to regulate people's way of life. If the goal of the law is simply justice, then the difficulty is because justice is subjective and very dependent on the subjective intrinsic values of each person.

the legal relationship that exists between clients and the parties involved in providing health services (in this context hospitals, doctors, nurses, and midwives). The first is a legal relationship regulated by written and unwritten legal norms, while the second is a medical relationship regulated by medical rules. The agreement that underlies the legal relationship in the context of medical services seeks to provide patient services and treatment in the interests of the patient's recovery.

Hospital health efforts begin with fundamental connections in the form of therapeutic exchange. When a patient engages in a therapeutic transaction, it becomes a legally enforceable agreement between the service provider and the service recipient. According to Article 1320 of the Civil Code, the parameters of an agreement in a therapeutic transaction must contain the following things for a legal relationship agreement including health services to be considered valid:

- a. There is agreement from those who bind themselves.
- b. There is skill between the parties to create an agreement.
- c. A certain thing is permitted.
- d. For a legitimate reason.

The implementation and application of the agreement itself must be carried out in good faith by the provisions of Article 1338 and Article 1339 of the Civil Code and the agreement is based on a business agreement based on the precautionary principle. The relationship between health service providers and patients can be divided into two forms of agreement, namely:

- a. Treatment agreement, where there is an agreement between the hospital and the patient that the hospital provides a treatment room and care workers carry out healing actions.
- b. Medical service agreement, where there is an agreement between the hospital and the patient that the medical personnel at the hospital will make maximum efforts to cure the patient through medical procedures.

The process of providing health services begins when patients and their families decide to visit a doctor and hospital for treatment. A patient's visit can be seen as an invitation to ask a doctor for help in dealing with their health problems. Assuming the patient and his family agree to seek treatment there and the hospital is willing to provide the necessary medical services to the patient, the rights and obligations of the patient and the hospital begin from the moment the patient enters the hospital and agrees to receive health services.

Patients have the right to health services according to the symptoms they experience, and all their obligations are determined by the hospital. Hospitals are required under these agreements to provide the necessary care facilities, including physicians, medical staff, and equipment, to provide the best care to patients.

Healing efforts usually take the form of a business agreement (*inspanningsverbintenis*) which is as maximum as possible and is based on the precautionary principle of unknown results, not a results agreement (*resultaasverbintenis*), in the legal relationship between health care providers and patients. On the other hand, patients must also share with the doctor all their knowledge about the disease they are both facing. In this way, misunderstandings between the two parties can be avoided and health services can be provided more effectively.

As regulated in Article 40 of Law Number 25 of 2009 concerning Public Services, complaints are made against providers who do not carry out their obligations and/or violate prohibitions and/or implementers who do not provide services by existing service standards. The public (reporters) are required to submit a complaint no later than 30 days after the public service organizer and/or implementer commits a service violation so that an investigation can be carried out. If the planner or implementer is determined to have violated service standards, the individual concerned may be subject to punishment by applicable laws and regulations. Several types of sanctions received by violators of public services are as follows:

- a. Written warning.
- b. Release from office.
- c. Salary reduction equal to one periodic salary increase for a maximum of one year.
- d. Demotion.
- e. Dismissal with honor at your request.
- f. Dishonorable dismissal.
- g. Revocation of permission.

In addition to the administrative sanctions above, service organizers and implementers may also be subject to criminal sanctions. As regulated in the public service law, organizers and implementers can be given criminal sanctions because violations of the services provided result in injury, permanent disability, or loss of life to other parties.[1] For actions/negligence that result in injury, permanent disability, or loss of life, a person may be subject to criminal sanctions under

Articles 359 and 360 of the Criminal Code and is not exempt from paying compensation for the victim (Article 1365 of the Criminal Code) based on a court decision.

The most important requirement in filing a complaint is that the person submitting the complaint must have information or evidence of errors or violations committed by the person who organizes or carries out public services. In addition, the reporter must comply with standards which include: submitting the complaint in writing and including the complainant's full name, address, details of the complaint, and wishes for resolution. If losses occur due to service abnormalities, in certain circumstances the reporter can also include a request for reimbursement of costs in the complaint letter. The identity of the reporter will be kept confidential under certain circumstances.

Apart from imposing sanctions, it would be good to also monitor public services. Supervision of public services can be carried out by anyone, including the public. The main aim of this supervision is to ensure and control that public services have been implemented by existing service standards. To improve the service oversight function, the government of the Republic of Indonesia in 2008 established a kind of public service oversight body through Law Number 37 of 2008 called the Ombudsman. The Ombudsman is a state institution that has the authority to supervise the implementation of public services whose funding sources come partly or entirely from state finances. One of the aims of establishing the Ombudsman is to improve the quality of state services in all fields so that every citizen and resident obtains justice, a sense of security, and better welfare. The function of the Ombudsman is to supervise the implementation of central and regional services, including BUMN/D, and private bodies that are tasked with providing certain public services.

Forms of Responsibility Given by Hospitals for Losses Experienced by Patients Due to Doctor's Negligence

A hospital is a public service delivery organization that has responsibility for every public health service it provides. This responsibility is to provide affordable quality health services based on the principles of safe, comprehensive, non-discriminatory, participatory, and protecting the community as users of health services (health recipients), as well as for health service providers to achieve the highest level of health.

As a center for providing public services, hospitals as an organization are required to provide quality medical services for the community. According to the Decree of the Minister of Health of the Republic of Indonesia Number 722 / Menkes/SK/XII/2002 concerning Guidelines for Internal Hospital Regulations (Hospital By-Laws), a hospital is something that can be grouped into medical services in a broad sense involving promotive and preventive activities, curative and rehabilitative education and training of medical personnel, research, and development of medical science. Based on these provisions, there are four parts relating to the responsibility of hospitals as medical services, namely:

- a. responsibility for personnel;
- b. professional responsibility for quality;
- c. responsibility for facilities/equipment; And
- d. responsibility for building safety and maintenance

Hospitals are legally responsible for all losses arising from the carelessness of medical personnel, as stated in Article 46 of Law of the Republic of Indonesia Number 44 of 2009 concerning Hospitals. The hospital's legal obligations in providing health services to patients can be understood from the perspective of administrative law, civil law, criminal law, and professional ethics.

Hospitals' obligations in providing health services to patients can be seen from several points of view, including professional ethics, administrative law, civil law, and criminal law. Additionally, hospitals can be held legally responsible for medical errors made by doctors in one of the following ways:

a. Hospital Responsibility in Administrative Law;

The implications of administrative law in the hospital-patient legal relationship are related to policies or provisions which are health service administration requirements that must be fulfilled to provide quality health services. Violations of administrative policies or legal provisions can result in administrative legal sanctions which can take the form of revocation of business permits or revocation of legal entity status for hospitals, while for doctors and other health workers, this can take the form of verbal or written warnings, revocation of practice permits, periodic salary delays or promotion to a higher level.

b. Hospital Liability in Civil Law;

In civil law responsibility, responsibility is regulated in Article 1367 of the Civil Code as a further explanation regarding who and what is under their responsibility. This civil legal responsibility has the consequence that the person at fault (i.e. the one who caused harm to another party) must pay compensation. In civil terms, patients who feel they have been harmed can ask for compensation based on Article 1365 j.o 1367 of the Civil Code.

c. Hospital Liability in Criminal Law

In criminal law, the principle of "no crime without fault" is adhered to. Furthermore, Article 2 of the Criminal Code states, "Criminal provisions in Indonesian legislation are applied to every person who commits an offense in Indonesia". The formulation of this article determines that every person within the jurisdiction of Indonesia can be held criminally responsible for the mistakes they make. Based on this provision, the profession of health workers who work in hospitals is also inseparable from the provisions of this article.

Fulfill the requirements of the code of ethics, professional standards, health service consumer rights, service standards, and standard operational procedures by Article 23. By their profession, health workers have demands for compensation and legal protection. while doing their job. Based on Article 29, if a health worker is accused of negligence in carrying out his work duties, then the problem must be resolved first through mediation, which doctors should take to prevent lawsuits. The purpose of compensation is to protect each person from the impact of a health professional's error or carelessness.

4. Conclusion

The service function is one of the primary functions that the government must carry out to achieve the goals of the Indonesian State. Service means providing a service needed by society in all fields. Community service activities are one of the duties and functions of state administration. Based on Law Number 25 of 2009 concerning Public Services, what is meant by public service is an activity or series of activities to fulfill service needs by statutory regulations for every citizen and resident regarding the goods, services, and/or administrative services provided by public service providers. The right to health services is legally protected based on Law Number 36 of 2009 concerning Health. Everyone has the legal right to receive medical care, and the general public is free to use federal, state, or local government health resources. Because the hospital is obliged to be responsible for everything that happens there, and because the hospital accepts responsibility for all errors made by doctors during medical procedures, the hospital is responsible for all losses suffered by the patient as a result of these actions. the validity of the actions carried out by the doctor. There are three types of accountability: moral, professional, and legal. Civil legal obligations, administrative legal responsibilities, and criminal legal responsibilities are three types of legal responsibilities

5. References

- Abduh, R. (2021). Kajian Hukum Rekam Medis Sebagai Alat Bukti Malapraktik Medis. *De Lega Lata: Jurnal Ilmu Hukum*, 6(1), 221–234.
- Abram David Levy S. (2015). *Tinjauan Yuridis Perlindungan Pasien Dalam Pelayanan Kesehatan Yang Menggunakan Alat Kesehatan Di Rumah Sakit (Skripsi) Program Sarjana, Fakultas Hukum Universitas Lampung, Lampung.*
- Aziz, A. (2021). Retail Store Effectiveness in Affecting Purchase Decisions. *International Journal of Economics, Business and ...*, 2021(4), 371–378.
- Aziz, Abdul. (2022). *Marketing strategy in creating the competitiveness of Ngudi Waluyo University (Perspective strategic management m ichael porter ' s) Strategi pemasaran dalam menciptakan daya saing Universitas Ngudi Waluyo (Perspektif manajemen strategis michael porter. 2(1).*
- Haryanto, N. D. (2018). *Tanggung Gugat Rumah Sakit terhadap Kerugian yang Diderita oleh Pasien Akibat Tindakan Tenaga Medis dalam Perjanjian Terapeutik.*
- Mamudji, S. S. dan S. (2001). *Penelitian Hukum Normatif.* Raja Grafindo.
- Mas Isharyanto. (2021). *Sekelumit Tentang Hubungan Hukum Pasien, Rumah Sakit, dan Tenaga Medik.*
- Putra, G. S. (2022). Implikasi Tanggungjawab Hukum Atas Tindakan Malpraktik yang Dilakukan Oleh Tenaga Medis Di Indonesia. *Muhammadiyah Law Review*, 4(2), 120–131.
- Sirajuddin dkk. (2012). *Hukum pelayanan Publik berbasis Partisipasi dan Keterbukaan Informasi.* Setara Press.
- Suparman, R. (2020). Perlindungan Hukum Dan Tanggung Jawab Rumah Sakit Terhadap Dokter Dalam Sengketa Medis. *Syar Hukum: Jurnal Ilmu Hukum*, 17(2), 188–215.
- Susanto, D. S. (2013). Tinjauan Malpraktek Medik Di Indonesia (Kaitan Tanggung Jawab Antara Teori Hukum Kedokteran Dan Praktek Kedokteran). *Jurnal Widya Medika*, 1(1), 58–68.
- Triana, Y., Winarsi, S., Khairul, F., & Ningsih, N. (2023). Tinjauan Hukum Pelimpahan Wewenang Dokter Kepada Profesi Perawat Dalam Tindakan Medis. *Jurnal Pendidikan dan Konseling (JPDK)*, 5(1), 768–777.
- Utami, G. A., Tajuddin, M. A., Klau, R. G., & Fahmi, M. S. (2022). Tinjauan Hukum Rekam Medis Sebagai Alat Bukti Malpraktik. *Jurnal Komunitas Yustisia*, 5(3), 498–503.
- Wahyudi, S. (2011). Tanggung Jawab Rumah Sakit Terhadap Kerugian Akibat Kelalaian Tenaga Kesehatan Dan Implikasinya. *Jurnal dinamika hukum*, 11(3), 505–521.