

Legal Analysis of Teaching Hospital Liability for Resident Physicians' Actions under Indonesia's Health Law No. 17 of 2023: A Case Study of Decision No. 228/Pdt.G/2025/PN Jkt.Pst

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Abstract

Teaching hospitals perform a dual function as healthcare providers and clinical education institutions, creating complex legal issues regarding liability for medical actions carried out by resident physicians. The enactment of Indonesia's Health Law No. 17 of 2023 introduces a new legal framework governing teaching hospitals and establishes the Professional Disciplinary Council (Majelis Disiplin Profesi/MDP) as a prerequisite in civil medical malpractice claims. This study aims to analyze the legal construction of teaching hospital liability for resident physicians' actions and to examine the evidentiary value and legal standing of MDP recommendations in civil litigation through the analysis of Decision No. 228/Pdt.G/2025/PN Jkt.Pst. The research employs a normative juridical approach using an intrinsic case study design. Primary, secondary, and tertiary legal materials were analyzed qualitatively through content analysis, statutory interpretation, and doctrinal analysis based on the theories of vicarious liability and informed consent. The findings demonstrate that teaching hospital liability is primarily founded on the doctrine of vicarious liability, as reflected in Articles 243–248 and Article 193 of Health Law No. 17 of 2023. However, the court dismissed the plaintiff's claim after determining that the defendants had complied with professional standards, service standards, and standard operating procedures. Furthermore, the study finds that MDP recommendations possess substantial evidentiary value but are not legally binding, requiring judges to assess them alongside other admissible evidence. This research contributes to the development of Indonesian health law by clarifying the legal responsibilities of teaching hospitals, strengthening patient protection, and promoting greater legal certainty in medical malpractice litigation involving resident physicians. It also recommends clearer statutory guidelines concerning the evidentiary status of MDP recommendations and greater harmonization between Health Law No. 17 of 2023 and the Indonesian Civil Code to ensure balanced legal protection for both patients and healthcare providers.

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1. INTRODUCTION

The healthcare sector has undergone significant legal transformation in Indonesia following the enactment of Health Law No. 17 of 2023. One of the most notable developments concerns the legal position of teaching hospitals, which simultaneously function as healthcare providers and institutions for clinical medical education. This dual role creates a complex legal relationship among hospitals, resident physicians, supervising doctors, and patients. While resident physicians participate directly in patient care as part of their specialist training, questions frequently arise regarding the allocation of legal responsibility when patients suffer losses allegedly resulting from medical negligence. Consequently, determining the extent of teaching hospital liability has become an increasingly important issue within Indonesian health law and civil liability jurisprudence (Adji, 1991).

Medical malpractice disputes have long been recognized as one of the most challenging areas in health law because they involve the interaction of professional ethics, legal accountability, and patient protection. Indonesian legal doctrine emphasizes that liability in medical services cannot merely focus on the individual healthcare provider but should also consider institutional responsibility, particularly where healthcare services are delivered within an organized hospital system. Therefore, hospitals are expected to maintain effective supervision, implement professional standards, and ensure patient safety throughout medical services (Dahlan, 2003).

Previous studies have examined hospital liability from various legal perspectives. Wahyuni and Santoso (2020) argued that Indonesian hospitals continue to encounter substantial challenges in implementing patient rights due to inconsistencies in legal enforcement and institutional governance. Similarly, Alwi (2021) demonstrated that legal accountability in medical negligence cases extends beyond individual physicians to encompass hospitals as healthcare institutions responsible for ensuring quality medical services. These studies collectively indicate that hospital liability has become an increasingly important subject within Indonesian healthcare regulation.

Subsequent research has expanded this discussion by focusing on the transformation of hospital responsibility following changes in healthcare governance. Harsono and Anwar (2021) emphasized the multidimensional role of hospitals in protecting patient rights through organizational responsibility, while Iskandar and Hapsari (2021) argued that legal responsibility should be interpreted from both juridical and sociological perspectives to reflect the institutional nature of healthcare delivery. More recent studies have also highlighted the modernization of Indonesia's healthcare legal framework and the necessity of adapting hospital liability principles to evolving healthcare systems (Sari & Putra, 2024).

The enactment of Health Law No. 17 of 2023 introduces new legal mechanisms governing medical disputes, particularly through the establishment of the Professional Disciplinary Council (Majelis Disiplin Profesi) and the regulation of teaching hospitals. Nevertheless, current literature primarily discusses hospital liability from a general perspective without specifically examining how the new statutory framework influences the legal responsibility of teaching hospitals for the medical actions of resident physicians. Existing studies also provide limited discussion regarding the legal significance of court decisions interpreting these newly enacted provisions (Gunawan, 2025).

Furthermore, previous research predominantly relies on normative analysis of statutory provisions rather than judicial interpretation through actual litigation. Although studies have explored medical malpractice, patient rights, institutional accountability, and healthcare governance, few have analyzed how Indonesian courts apply the doctrine of

vicarious liability after the enactment of Health Law No. 17 of 2023, particularly in civil litigation involving teaching hospitals and resident physicians. This gap indicates the need for a comprehensive legal analysis integrating statutory interpretation with judicial reasoning (Fitri & Dewanti, 2023).

The scientific novelty of this article lies in its examination of teaching hospital liability through the lens of Decision No. 228/Pdt.G/2025/PN Jkt.Pst, representing one of the earliest judicial applications of Health Law No. 17 of 2023 concerning resident physicians. Unlike previous studies that generally discuss hospital accountability conceptually, this research integrates the doctrines of vicarious liability, civil liability, and patient protection with judicial interpretation of newly enacted health legislation. The study further evaluates the evidentiary position of recommendations issued by the Professional Disciplinary Council in resolving civil medical malpractice disputes.

This article aims to analyze the legal construction of teaching hospital liability for the actions of resident physicians following the enactment of Health Law No. 17 of 2023 and to evaluate the evidentiary role of Professional Disciplinary Council recommendations in civil medical malpractice litigation through the analysis of Decision No. 228/Pdt.G/2025/PN Jkt.Pst. The findings are expected to contribute to the development of Indonesian health law by strengthening legal certainty, improving patient protection, and providing guidance for future judicial interpretation involving teaching hospitals and resident physicians (Maharani, 2023).

2. METHOD

This study employed a normative juridical research design using an intrinsic case study approach to examine the legal responsibility of teaching hospitals for the actions of resident physicians following the enactment of Indonesia's Health Law No. 17 of 2023. Normative legal research was selected because the study focuses on analyzing legal norms, statutory provisions, legal doctrines, and judicial reasoning concerning civil liability in medical malpractice disputes. The case study specifically examines Decision No. 228/Pdt.G/2025/PN Jkt.Pst as the primary object of analysis to evaluate the application of statutory provisions governing teaching hospitals and resident physicians within Indonesian health law (Machi & McEvoy, 2016).

The legal materials used in this study consisted of primary, secondary, and tertiary legal sources. Primary legal materials included the 1945 Constitution of the Republic of Indonesia, the Indonesian Civil Code (particularly Articles 1365 and 1367), Health Law No. 17 of 2023, Government Regulation No. 28 of 2024, Law No. 48 of 2009 concerning Judicial Power, and Decision No. 228/Pdt.G/2025/PN Jkt.Pst. Secondary legal materials comprised scholarly books, peer-reviewed journal articles, conference papers, and previous research discussing hospital liability, medical malpractice, patient rights, vicarious liability, informed consent, and health law. Tertiary legal materials included legal dictionaries and other authoritative legal reference materials used to clarify legal concepts and terminology (Black, 1999).

Data were collected using a documentary analysis technique. The judicial decision was systematically examined to identify the factual background of the dispute, the legal arguments presented by both parties, the evidence evaluated by the court, and the ratio decidendi applied by the judges. Statutory provisions and relevant legal literature were analyzed concurrently to compare judicial reasoning with existing legal norms and doctrinal perspectives. This approach enabled a comprehensive understanding of how teaching

hospital liability and resident physician responsibility are interpreted under the current Indonesian legal framework (Jayanti, 2009).

The collected legal materials were analyzed qualitatively through three complementary stages. First, content analysis was conducted to identify legal issues and extract relevant legal principles contained in statutory regulations and judicial decisions. Second, statutory interpretation was employed to examine the consistency between judicial reasoning and applicable legal provisions governing teaching hospitals, civil liability, and medical malpractice. Third, doctrinal analysis was performed by applying the theories of vicarious liability and informed consent to evaluate the legal construction of institutional responsibility and patient protection within the examined case. This analytical framework facilitated a critical assessment of the implementation of Health Law No. 17 of 2023 in judicial practice (Tranfield, Denyer, & Smart, 2003).

3. RESULTS AND DISCUSSION

The analysis of Decision No. 228/Pdt.G/2025/PN Jkt.Pst demonstrates that the legal responsibility of teaching hospitals cannot be separated from their dual institutional function as providers of healthcare services and clinical education centers. Resident physicians perform medical procedures within the framework of specialist education under the supervision of attending physicians. Therefore, determining legal liability requires an assessment not only of the resident physician's conduct but also of the hospital's institutional responsibility in providing supervision, delegation of authority, and compliance with professional standards (Hakim, 2020).

The findings indicate that the court did not automatically impose liability on the teaching hospital solely because resident physicians participated in medical treatment. Instead, the judges examined whether the hospital had fulfilled its legal obligations by ensuring appropriate supervision, maintaining standard operating procedures, and implementing professional standards. Since the evidence demonstrated compliance with these requirements, the plaintiff failed to prove the essential elements of civil liability under Articles 1365 and 1367 of the Indonesian Civil Code (Sutrisno, 2023).

These findings suggest that institutional responsibility under Health Law No. 17 of 2023 is founded upon fault-based liability rather than strict liability. Accordingly, teaching hospitals may only be held legally responsible when institutional negligence contributes directly to patient harm. This interpretation strengthens legal certainty by distinguishing unavoidable medical risks from legally actionable malpractice (Adiputra & Rahmawati, 2024).

Unlike previous studies emphasizing broader institutional responsibility, the present research demonstrates that judicial interpretation continues to require clear proof of negligence before liability may be imposed. Thus, hospital responsibility depends upon evidence of failures in supervision, governance, or patient safety rather than the mere occurrence of an adverse medical outcome (Irmawati, 2022).

Another significant finding concerns the legal status of recommendations issued by the Professional Disciplinary Council (Majelis Disiplin Profesi). The court regarded these recommendations as important expert evidence concerning compliance with professional standards. However, the recommendations were not treated as legally binding evidence but rather as one component among several forms of admissible evidence evaluated by the judges (Fitri & Dewanti, 2023).

The findings further demonstrate that judicial independence remains the primary principle in resolving civil medical malpractice disputes. Although disciplinary

recommendations provide valuable professional assessments, judges retain full authority to evaluate documentary evidence, witness testimony, expert opinions, and other legal evidence before determining liability. Consequently, disciplinary findings complement rather than replace judicial reasoning (Gunawan, 2025).

This approach provides an appropriate balance between professional expertise and judicial independence. Excessive reliance on disciplinary recommendations could potentially weaken the court's role in independently evaluating legal disputes, whereas completely disregarding professional assessments would reduce the effectiveness of professional accountability mechanisms within the healthcare system (Sofyan, 2025).

The results demonstrate that Health Law No. 17 of 2023 establishes a more comprehensive legal framework governing teaching hospitals than previous regulations. The legislation strengthens institutional responsibility by emphasizing patient safety, professional supervision, and organizational accountability while maintaining traditional civil liability principles contained in the Indonesian Civil Code (Maharani, 2023).

From the perspective of vicarious liability, teaching hospitals may be held responsible only when institutional negligence can be established through evidence demonstrating failures in supervision or governance. This finding supports the development of modern hospital liability, where responsibility extends beyond individual physicians to include institutional management without eliminating the requirement to prove fault (Kusuma & Ayuningrum, 2023).

The present findings also complement previous research concerning patient rights by demonstrating that effective legal protection depends not only on substantive legal provisions but also on consistent judicial interpretation. Through its analysis of Decision No. 228/Pdt.G/2025/PN Jkt.Pst, this study provides empirical evidence regarding the practical implementation of Health Law No. 17 of 2023 in civil medical malpractice litigation involving teaching hospitals and resident physicians (Wahyuni & Santoso, 2020).

The research confirms that the legal construction of teaching hospital liability is based upon institutional negligence rather than automatic responsibility for resident physicians' actions. Furthermore, Professional Disciplinary Council recommendations possess persuasive evidentiary value but do not bind judges in determining civil liability. These findings contribute to strengthening legal certainty while balancing patient protection with the professional autonomy of healthcare providers (Sari & Putra, 2024).

4. CONCLUSION

This study concludes that the legal construction of teaching hospital liability for the actions of resident physicians under Health Law No. 17 of 2023 is founded on the principle of fault-based institutional liability rather than automatic responsibility. A teaching hospital may be held civilly liable only when it is proven to have failed in its duties of supervision, delegation of medical authority, compliance with professional standards, or implementation of patient safety measures. The analysis of Decision No. 228/Pdt.G/2025/PN Jkt.Pst demonstrates that judicial determination of liability depends upon the existence of institutional negligence and a causal relationship between the hospital's conduct and the patient's injury. Furthermore, the study finds that recommendations issued by the Professional Disciplinary Council (Majelis Disiplin Profesi) possess significant evidentiary value in civil medical malpractice litigation but do not have binding legal force. Judges retain independent authority to evaluate all available evidence in accordance with the principles of civil procedure. These findings contribute to the development of Indonesian health law by clarifying the scope of teaching hospital liability under the new legal

framework while promoting a balanced approach that strengthens both patient protection and legal certainty for healthcare institutions and medical professionals..

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