Research of Service Administration Health and Sains Healthys
Vol. 6 No. 2 Desember 2025
*p-ISSN:*2830-4748 e-ISSN: 2830-4772
DOI: *10.58258/rehat.v6i2.9238/ http://ejournal.mandalanursa.org/index.php/Rehat*

Evaluation of Non-Medical Goods Logistics Management at El Syifa Kuningan General Hospital

Ihsan Haris Munandar[1], Arlette Suzy Puspa Pertiwi[2], Bambang Sukajie[3]
[1,3]Universitas Adhirajasa Reswara Sanjaya
[2]Universitas padjadjaran

Article Info
Article history:
Accepted: 21 July 2025
Publish: 1 December 2025

Keywords:
Non Medical Equipment;
Logistic Management;
Hospital Logistics;
Hospital Services;
Implementation Improvement.

Abstrak
In an organization that requires a lot of work, like a hospital, non-medical logistical management is essential. Hospital services in different sections run smoothly because to logistics management. Frequent stock shortages in storage warehouses are one example of how many hospitals fall short of logistics management standards, which eventually results in hospital losses and no additional implementation evaluation. According to the study's findings, the El Syifa Kuningan public hospital's logistics management implementation is still lacking. Starting with subpar planning, budgeting, procurement that takes too long due to lengthy procedures, storage, distribution, deletion, and monitoring that needs to be reviewed on a regular basis. In order to enhance hospital services, a logistics management evaluation was conducted based on the current issues in order to improve the logistics management procedure for non-medical commodities. Improvements to the logistics management system for non-medical commodities in line with the logistics management cycle are suggested by the research's findings in order to facilitate better implementation.

Corresponding Author:
Ihsan Haris Munandar
Universitas Adhirajasa Reswara Sanjaya
Email: harisihsan060294@gmail.com

1. INTRODUCTION

Hospitals are complex, labor-intensive organizations with a variety of integrated service functions, from medical services to administration and logistics. Within a hospital's operational structure, logistics management plays a crucial role as a key support for optimal healthcare delivery. Hospital logistics extends beyond medical devices and medications to non-medical items such as cleaning supplies, linens, office supplies, and other supporting facilities. These seemingly simple elements significantly impact overall service quality (Bachtiar et al., 2019; Syaiful et al., 2022).

In practice, non-medical logistics management often receives less attention than medical logistics. Hospitals' greater focus on managing medications and medical devices results in the neglect of non-medical logistics, even though shortages in these supplies can hamper service delivery, degrade the hospital's image, and even lead to patient complaints. According to Angesti & Dwimawati (2019), many hospitals experience challenges in the planning and procurement of non-medical logistics, characterized by empty or excess warehouse stock, which in the long term leads to budget inefficiencies and a decline in service quality.

This situation is also reflected in previous studies. Rahmatullah, Mahsyar, & Rahim (2020) found that at Sarolangun Regional Hospital, despite good planning for non-medical logistics procurement, implementation was still suboptimal due to weak coordination

between units. Similarly, a study by Aprilia, Ardiansyah, & Puspita (2023) reported discrepancies between the quantity of goods requested and those received by work units, as well as delays in the distribution process due to an overload of requests that were not handled efficiently. This indicates that non-medical logistics management faces not only technical challenges but also systemic issues involving procedural and managerial weaknesses.

Field observations conducted by the author at El Syifa Regional General Hospital, Kuningan, revealed similar conditions. Several service units complained about inadequate supplies of items such as bed linens, pillows, hygiene kits, and other equipment, which directly impacted patient comfort and the hospital's image. Furthermore, the monthly procurement process often fell behind schedule, and the quantities did not reflect actual demand from work units. The lack of a specific standard operating procedure (SOP) for non-medical logistics management led to inconsistencies in implementation processes within each unit, as well as difficulties in conducting comprehensive internal evaluations and controls. A preliminary survey even revealed that no comprehensive evaluation of the hospital's non-medical logistics system had ever been conducted.

In the context of logistics management theory, the success of a logistics system depends heavily on the performance of all functions within the logistics management cycle, from planning and budgeting to procurement, storage, distribution, maintenance, disposal, and monitoring (Aditama, 2003; Bowersox, 2006). Failure in any one of these functions will directly impact the others, making integration and coordination between components key to creating efficient and responsive logistics management. Research by Liling, Citraningtyas, & Jayanti (2021) even states that the effectiveness of non-medical logistics management directly contributes to employee performance and the overall quality of hospital services.

From the literature review and empirical evidence, it is clear that a comprehensive scientific study evaluating the performance of the non-medical goods logistics management cycle in hospitals is still urgently needed. This is where the scientific novelty of this study lies. While previous research has focused on only one or two aspects of logistics (for example, procurement or distribution), this study systematically examines all components of the non-medical logistics cycle at El Syifa Kuningan Regional Hospital. This study aims not only to identify existing weaknesses but also to offer improvement solutions based on a comprehensive evaluation and logistics cycle management approach, so that the results can be used as strategic recommendations for strengthening the hospital's logistics system.

Thus, the research question to be answered in this study is: How is the implementation of non-medical goods logistics management at El Syifa Kuningan Regional Hospital, seen from the aspects of planning, budgeting, procurement, storage, distribution, maintenance, disposal, and supervision? The purpose of this study is to conduct a comprehensive evaluation of all aspects in the non-medical goods logistics management cycle at El Syifa Kuningan Regional Hospital, as well as to provide recommendations based on field findings to improve and optimize the performance of the non-medical logistics system to be more efficient and responsive to the needs of hospital services.

2. RESEARCH METHODS

This study uses a descriptive qualitative approach to gain a deeper understanding of the implementation of non-medical goods logistics management at El Syifa General Hospital, Kuningan. A qualitative approach was chosen because it is suitable for exploring the processes, mechanisms, and challenges faced in logistics management that have not been systematically documented. This study focused on gathering information through direct observation, in-depth interviews, and document review.

Location and Time of Research

This research was conducted at El Syifa General Hospital, Kuningan, from February to April 2025. This hospital was chosen as the research location because initial observations indicated a discrepancy between non-medical logistics management procedures and field practices, and a comprehensive evaluation of its logistics system had never been conducted.

Participants

Participants in this study were selected using purposive sampling, identifying informants based on their direct involvement in non-medical logistics management. Key informants included:

a. Head of General Affairs
b. Non-medical logistics unit staff
c. Head of maintenance installation
d. Related units directly related to the use of non-medical logistics

Data Collection Techniques

Data collection was carried out using three main techniques, namely:

1. In-depth interviews with relevant informants to gain an understanding of the processes, constraints, and perceptions of the current logistics system.
2. Participatory observation was conducted to directly record logistics management processes such as procurement, distribution, storage, and disposal of non-medical goods.
3. Document reviews, such as SOPs, requisition reports, purchase orders, stock books, and write-off forms, are used to verify compliance between implementation and administrative procedures.

Data Analysis Techniques

Data were analyzed using the interactive model of Miles and Huberman which includes three stages:

1. Data reduction: filtering information that is relevant to the research focus.
2. Data presentation: arranged in narrative form, matrices, and thematic tables.
3. Drawing conclusions: drawing findings from patterns, comparisons between informants, and process consistency.

Data validity is maintained through triangulation of sources and methods, namely comparing data from interviews, observations, and supporting documents. Validation is carried out by **member check**, namely confirming the results of data interpretation to informants to ensure accuracy.

Research Flow

The following figure presents the systematic flow of the implementation of this research:

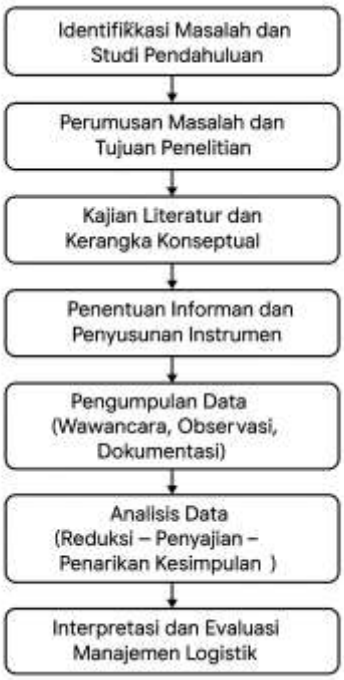

Figure 1. Research Flow of Evaluation of Non-Medical Goods Logistics Management

3. RESEARCH RESULTS AND DISCUSSION

This study was conducted to evaluate the logistics management of non-medical goods at El Syifa Kuningan Regional Hospital by reviewing all stages of the logistics cycle: planning, budgeting, procurement, storage, distribution, maintenance, disposal, and supervision. Data collected through interviews, observations, and document reviews revealed various obstacles at each stage that impact the effectiveness of non-medical logistics management.

3.1.Planning

The research results show that logistics planning for non-medical goods has not been carried out in a structured and systematic manner. Requests for goods from each unit are not based on actual data on previous usage but are instead estimates (rough estimates) without proper projection methods. This leads to a mismatch between requested goods and actual needs. Consequently, there is excess stock of some goods and shortages of others.

Scientifically, the weaknesses in this planning stage indicate the absence of a logistics forecasting system based on historical data. As explained by Bowersox (2006), effective logistics planning must be based on periodic analysis of demand and inventory turnover. Irregular planning will disrupt operational efficiency and increase the risk of budget overruns.

3.2.Budgeting

The budgeting process remains centralized and does not take into account the fluctuations in actual needs of service units. The finance department determines allocations without involving logistics staff or relevant technical units, resulting in frequent discrepancies between available budgets and field needs. This indicates an information gap between needs planning and budget preparation.

This phenomenon aligns with Ardianti's (2014) findings, which state that budgeting that does not involve operational stakeholders tends to result in inaccurate targets and inefficient budget realization. In the context of logistics management theory, budgeting should be a coordinating instrument, not merely an administrative one.

3.3.Procurement

The procurement process is a critical step in the logistics system at El Syifa Kuningan Regional Hospital. Procurement through third parties (vendors) is time-consuming due to the complex administrative process, from document preparation and vendor evaluation to fund disbursement. This delay results in delayed supplies to service units.

Scientifically, slow procurement reflects low efficiency in the supply chain management system. According to Handoko (2013), effective procurement requires procedures that are simple, flexible, and responsive to sudden requests. This finding is further supported by Aprilia et al. (2023), who stated that an excessively lengthy procurement process can hamper the smooth operation of hospital services, particularly in units requiring non-medical support equipment on a daily basis.

3.4. Storage

The storage of non-medical items at El Syifa Regional Hospital, Kuningan, does not adhere to good warehouse management principles. There is no integrated inventory information system, record keeping is still done manually, and many items are not clearly labeled. Furthermore, the warehouse layout does not adhere to the FIFO (First In, First Out) principle, resulting in older items often being left unused.

These findings indicate weaknesses in inventory control. According to Syaiful et al. (2022), a poor storage system increases the likelihood of damaged, expired, or unmonitored items. In the context of modern logistics systems, hospitals should implement information technology-based warehouse management systems for greater efficiency and accountability.

3.5.Distribution

Distribution of goods to service units is done manually based on urgent requests. There is no fixed schedule or distribution rotation system to regulate the planned delivery cycle. This makes the distribution process reactive, rather than proactive. Furthermore, there is no formal documentation of the transfer of goods between units.

Unsystematic distribution results in a lack of control over the flow of goods and can potentially lead to loss or improper use. This is consistent with research by Rahmatullah et al. (2020), which states that distribution without a control system disrupts a hospital's internal supply chain and creates a dependency on emergency solutions.

3.6.Maintenance and Deletion

Non-medical items such as linens and damaged work equipment are not immediately disposed of or maintained. The disposal process still requires large-scale applications for administrative efficiency. Meanwhile, damaged items remain in the unit, piling up, potentially confusing staff regarding their use.

This practice is inconsistent with the principles of logistics lifecycle management, which states that every item has a lifespan that must be monitored. Failure to maintain or dispose of items in a timely manner can impact space efficiency, operational costs, and even service quality. Research by Bachtiar et al. (2019) shows that hospitals with clear disposal procedures tend to have more accountable and sustainable logistics systems.

3.7.Supervision

Oversight of non-medical logistics implementation is unstructured. No dedicated team is assigned to conduct regular audits of the logistics cycle. Evaluations are only conducted when deficiencies are identified or complaints are received from service

units. This results in various procedural errors going undetected early and becoming recurring problems.

From a managerial perspective, this reflects a malfunctioning quality control system within the logistics cycle. According to Aditama (2003), supervision must be an integral part of every logistics stage to ensure processes meet standards and ensure continuous improvement.

4. CONCLUSION

This study shows that non-medical goods logistics management at El Syifa Kuningan Regional Hospital has not been optimally implemented and integrated into every stage of the logistics cycle. An evaluation of the eight main stages of planning, budgeting, procurement, storage, distribution, maintenance, disposal, and supervision revealed that each still faces various structural and procedural weaknesses.

Scientifically, it was found that the lack of integrated logistics systems and the absence of standard operating procedures (SOPs) were the root of the problems in non-medical logistics management at this hospital. Planning was carried out without a real-time database, budgeting did not directly involve technical units, procurement was slow due to bureaucratic processes, and storage did not follow efficient inventory management principles. Distribution was reactive without a documentation system, while maintenance and disposal of goods were not systematically scheduled. Furthermore, internal oversight of the entire logistics process was not implemented as part of the quality control system.

Thus, the findings of this study emphasize the importance of reformulating the non-medical goods logistics management system at El Syifa Kuningan Regional Hospital to make it more responsive, efficient, and data-driven. This comprehensive evaluation of the logistics cycle not only addresses the research objectives but also provides a scientific basis for designing sustainable and adaptive logistics policies to meet the operational needs of modern hospitals.

5. ACKNOWLEDGEMENT

The author expresses his gratitude to the presence of Allah SWT for the abundance of His grace and gifts, so that the author can complete this research well. The author's deepest gratitude is addressed to Mr. Prof. Dr. Purwadhi, M.Pd as the Chancellor of Adhirajasa Reswara Sanjaya University (ARS University), Mr. Prof. Dr. A. Rohendi, M.M., M.H as the Director of Postgraduate Studies and supervisor who has provided guidance and input in the preparation of this thesis, and Mrs. Dr. Rian Andriani, M.M as the Head of the Master of Management Study Program at ARS University. The author also expresses sincere gratitude to Mrs. Prof. Dr. Arlette Suzy Puspa Pertiwi, drg., Sp.KGA and Mr. Dr. Bambang Sukajie, M.M., M.H for their time, energy, and thoughts as supervisors who patiently guided the author.

Appreciation is also given to Mrs. Yanti Nuryanti, SKM as Head of General Affairs of El Syifa Hospital, Kuningan, who has provided permission and assistance during the data collection process. The author also expresses his gratitude to his beloved parents, wife, and beloved children who have provided prayers, encouragement, and time throughout the process of compiling this scientific work. Finally, to all lecturers, staff of the ARS University Postgraduate Program, colleagues at El Syifa Hospital, and class 12C friends who have provided moral and technical support, the author expresses his gratitude for all the help and togetherness that has been established so far.

6. BIBLIOGRAPHY

Aditama, T, Y. 2003, Manajemen Administrasi Rumah Sakit, Jakarta : UI Perss. Bowersox J. D, 2006,Manajemen Logistik Integrasi Sistem-sistem Manajemen
Distribusi Fisik dan Manajemen Material, Jakarta: Bumi Aksara.
Subagya M S, 1994, Manajemen Logistik, cetakan keempat Jakarta : PT Gunung Agung
Sugioyono, 2019. Metode penelitian kuantitif dan kualitatif, Bandung: Alfabeta Sabarguna, B. S, 2005, Logistik Rumah Sakit dan Teknik Efisiensi, Jawa Tengah
dan Daerah Istimewa Yogyakarta: Kasorsium Rumah Sakit Islam.
Bachtiar, M. A. P., Germas, A., & Andarusito, N. (2019). Analisis Pengelolaan Obat di Instalasi Rawat Inap Rumah Sakit Jantung Bina Waluya Jakarta Timur Tahun 2019. Manajemen Dan Administrasi Rumah Sakit Indonesia (MARSI), 3(2), 119–130.
Syaiful, M., Al Yunus, B., & Maharani, C. (2022). Analisis Manajemen Logistik Obat Di Instalasi Farmasi Dinas Kesehatan Kabupaten Demak. Jurnal Kesehatan Masyarakat (Undip), 10(4), 423–430. https://ejournal3.undip.ac.id/index.php/jkm/article/view/33686
Makmur, AI., Ayomi, AFM., Rahmayati, A., Purwadhi, Widjaja, YR. (2025). Strategi Manajemen Logistik Obat-Obatan di Instalasi Farmasi Rumah Sakit.INNOVATIVE: Journal Of Social Science Research, 5 (2), 416-428.: https://j-innovative.org/index.php/Innovative
Febriawati, H 2013, Manajemen Logistik Farmasi Rumah Sakit, Gosyen Publishing, Yogyakarta.
Seto, S, Nita, Y & Triana, L 2015, Manajemen Farmasi 2: Lingkup Apotek, Farmasi Rumah Sakit, Pedagang Besar Farmasi, Industri Farmasi, Edisi 4, Airlangga University Press, Surabaya.
Wirawan G. Analisis Pengelolaan Logistik Non Medis Di Gudang Rspau Dr. S. Hardjolukito Yogyakarta. Prima Ekonomi. 2019: 5(1).
Angesti D., Dwimawati E. Gambaran Perencanaan Barang Logistik Non Medik Di Sub Bagian PPTK Rumah Sakit Umum Daerah Leuwiliang Kabupaten Bogor Provinsi Jawa Barat Tahun 2019. Promotor. 2020: 3(4): 334.
Mokalu G., Maramis, F., Tucunan AAT. Sistem Penyimpanan Dan Pendistribusian Logistik Non Medis Di Rumah Sakit Jiwa Prof. Dr. Vl Ratumbuysang Provinsi Sulawesi Utara. Kesehatan Masyarat. 2019: 8(7).
Hermayanti, S., Pertiwi, D I., & Hanafie, A. (2023). Analisis Strategi Instalasi Pengelolaan Logistik Pada Jasa Pelayanan Kesehatan XYZ. Prosiding SEMANIS : Seminar Nasional Manajemen Bisnis 1 (1). ISSN: 2985-3109
Rahmatullah, M., Mahsyar, A. and Rahim, S., 2020. Manajemen Logistik Non Medis Di Rsud Salewangan Maros. Journal Unismuh 1(3), pp.834–847. Available at: .
Liling, Y., Citraningtyas, G., & Jayanti, M., 2021. Analisis Pengelolaan Logistik Obat Di Instalasi Farmasi Rs Elim Rantepao Toraja Utara. Pharmacon, 10(1), p.684.Diambil dari URL : https://doi.org/10.35799/pha.10.2021.32755.
Junus, D., & Ambo, Z. (2020). Profil Perencanaan Logistik Non Medis Rumah Sakit Haji Makassar. Jurnal Penelitian Kesehatan Pelamonia Indonesia 3
(2). pISSN 2620-9683, eISSN 2654-9921
Aprillia, S., Adriansyah, A A., & Puspita, P N.(2023). Analisis Pengelolaan Logistik Sub Bagian Perbekalan Umum dan Inventaris di RSI Surabaya Jemursari. Jurnal Cakrawala Ilmiah 2 (11).
Irawan, Y G., & Lestari, D I. (2024). Manajemen Sistem Logistik Barang Non Medis di Rumah Sakit Andimas Kabupaten Merangin. Jurnal Administrasi Rumah Sakit 1 (1).
Rachman, A., Yochanan, E., Samanlangi, A. I., & Purnomo, H. (2024). Metode Penelitian Kuantitatif, Kualitatif, dan R&D (1st ed.). Saba Jaya Publisher

Indrawan, R., & Yaniawati, P. (2017). Metodologi penelitian: Kuantitatif, kualitatif dan campuran untuk manajemen, pembangunan, dan pendidikan. 105-107

Purwadhi, Yadiman. (2020). Teori Organisasi. Bandung: PT Refika Aditama Komara, E., Syaodih E., & Andriani , R. (2022) Metode Penelitian Kualitatif dan

Kuantitatif. Bandung : PT Refika Aditama

Hadian, A.H., Raksanagara, A. (2022) Pengantar Epidemiologi. Bandung : UPT. Publikasi Ilmiah UNISBA

Tawarma, Nelly., & Marlina, Hastuti.(2023). Analysis of Non-Medical Logistics Management in the Equipment and Household Sub-Divison of Bangkinang Hospital in 2023. Riwayat : Educational Journal of History and Humanities. 6 (3), 2023, 1574-84.P-ISSN: 2614-3917, E-ISSN: 2775-5037.

DOIs:https://doi.org/10.24815/jr.v6i3.33955.

Zaharani, Fatima., (2023). Gambaran Pengelolaan Logistik Umum di Rumah Sakit X Tahun 2022. ISJMHS 2 (5). DPOAJ. e-ISSN 2807-7539, p-ISSN

2807-7547

Amalia, Momen., & Musyawir, Andi Khaerul. (2022). Non-Medical Logistic Management at Syekh Yusuf Hospital of Gowa in 2021. JURNAL IJHS 2

(1). E-ISSN : 2827-8372 P-ISSN : 2827-8364

Daeli, Jernih Hati. (2023). Gambaran Pengelolaan Logistik Non Medis Di Rumah Sakit Umum Daerah Pasar Rebo Tahun 2022. ISJMHS 2 (5). DPOAJ. e- ISSN 2807-7539, p-ISSN 2807-7547.

Hia, Yubilate. (2023) . Gambaran Sistem Pengelolaan Logistik Barang Non Medis Di Rumah Sakit Umum Daerah Tarakan Jakarta Tahun 2021. ISJMHS 2 (4). DPOAJ. e-ISSN 2807-7539, p-ISSN 2807-7547.

Lando, Hands. (2022). Analisis Determinan Sistem Manajemen Logistik Alat Kesehatan di Rumah Sakit Umum Daerah Wamena Kabupaten Jaya Wijaya. Diambil dari URL : https://repository.unhas.ac.id/id/eprint/16995/2/K012191087_tesis_07-06- 2022%201-2.pdf

Meriam, Andi. (2022). Gambaran pelaksanaan manajemen logistik alat kesehatan di Rumah Sakit Umum Daerah Haji Makassar tahun 2022. Fakultas Kedokteran dan Ilmu Kesehatan, UIN Alauddin Makassar.

Ardiyanti, R. (2014). Gambaran pelaksanaan sistem manajemen logistik barang umum RSUD Kota Depok tahun 2014. Depok: Universitas Indonesia.

Barus, M. (2015). Sistem pelaksanaan manajemen logistik alat kesehatan di Puskesmas Kabupaten Deli Serdang tahun 2015. Medan: Universitas Sumatera Utara.

Alam, H. S., Sudiro, & Purnami, C. T. (2016). Pengembangan sistem informasi pemantauan alat kesehatan untuk mendukung penjaminan mutu pelayanan kesehatan di Balai Kesehatan Indera Masyarakat (BKIM) Provinsi Jawa Tengah. Jurnal Manajemen Kesehatan Indonesia, 4(3), 187-195.

Dey, S., & Chattopadhyay, S. (2018). Assessment of quality of primary healthcare facilities in West Bengal. International Journal of Research in Geography. 4(2), 22-33.

Ishida, K., Hirose, M., Fujiwara, K., Tsuruta, H., & Ikeda, N. (2014). Analysis of medical equipment management in relation to the Mandatory Equipment Safety Manager (MESM) in Japan. Journal of Healthcare Engineering, 5(3), 329-346.

Lestari, P. B., & Haksama, S. (2017). Analisis fungsi manajemen logistik di Badan Pemberdayaan Masyarakat dan Keluarga Berencana Kota Surabaya. Jurnal Administrasi Kesehatan Indonesia, 5(1).

Moumaris, M., Bretagne, J.-M., & Abuaf, N. (2018). Hospital engineering of medical devices in France. The Open Medical Journal, 6, 10-20.

Pokharel, S. (2005). Perception on information and communication technology perspectives in logistics: a study of transportation and warehouses sectors in Singapore", Journal of Enterprise Information Management. 18(2). 136- 49.

Dembińska-Cyran I., 2005. Internal and external supply chain of hospital. LogForum, 1, 1, 5. Diambil dari URL: http://www.logforum.net/vol1/issue1/no5