



## ACCELERATING DIGITAL ADMINISTRATIVE TRANSFORMATION TO ACHIEVE AGILE PUBLIC SERVICES AT DR. MOHAMMAD ZYN REGIONAL HOSPITAL

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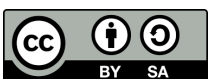
### Abstract :

*This study analyzes the strategies for accelerating digital administrative transformation to achieve public service agility at RSUD dr. Mohammad Zyn, Sampang Regency. In the era of technological disruption, shifting from conventional bureaucracy to progressive digital governance is essential to eliminate bureaucratic hurdles such as long queues and unclear medical schedules. The research focuses on evaluating how digital leadership and digital inclusivity transform the hospital into a more agile, responsive, and humanistic organization. Using a qualitative descriptive method, data were gathered through participatory observation, in-depth interviews, and documentation studies involving informants from management to service users. The findings indicate that the success of digital transformation is heavily determined by digital leadership's capacity to mitigate internal resistance. Leaders act as catalysts by transforming employee appreciation into support through re-skilling, psychological incentives, and debureaucratization that simplifies data input procedures. Furthermore, organizational agility improves when technology is positioned as a tool to refocus medical personnel on patient care rather than administrative burdens. Externally, the study highlights the importance of digital inclusivity in bridging the digital divide within the local community, addressing systemic barriers such as linguistic hurdles for agrarian populations, lack of accessibility for people with disabilities, and logistical challenges in rural areas. Ultimately, healthcare service agility at RSUD dr. Mohammad Zyn is achieved through a holistic approach that synchronizes technological sophistication with human resource readiness and inclusive design standards. Digitalization serves not merely as a physical modernization but as a primary driver for creating sustainable public value for all citizens.*

**Keywords:** Digital Transformation, Public Service Agility, Digital Leadership, Digital Inclusivity, RSUD dr. Mohammad Zyn

### INTRODUCTION

The dynamics of public services in the current era of information technology disruption require a paradigm shift, shifting from conventional, static bureaucratic patterns to more progressive and adaptive digital governance. The health sector occupies a central position in implementing this change, given its role directly intersecting with the human rights and safety of the wider community. Conceptually, the digitalization of public administration is not limited to converting physical documents to digital format, but rather represents a fundamental restructuring of the interaction between service providers and the public through the use of technology that prioritizes



efficiency, transparency, and accountability.(Herlina & Katuuk, 2023)In a government hospital environment, the need for fast and accurate procedures is a top priority to eliminate traditional bureaucratic obstacles, such as long queues, unclear medical operating schedules, and obstacles to accessing medical records that often interfere with the accuracy of emergency measures. Dr. Mohammad Zyn Regional General Hospital, as the main referral center in Sampang Regency, faces challenging geographic and demographic realities, where the public demands easy access to services that are not only offline, but also supported by a responsive online administration system.(Mustoha et al., 2025).

Accelerating digital transformation in hospitals is vital because public satisfaction now relies heavily on organizational agility in instantly processing patient needs. Empirical evidence shows that manual or unintegrated administrative systems often create functional bottlenecks that damage the institution's reputation. Therefore, accelerated innovation through the implementation of electronic medical records, online registration integration, and the digitalization of pharmaceutical logistics management is needed to significantly reduce waiting times.(Wahyuni et al., 2023). Various initiatives at Dr. Mohammad Zyn Regional General Hospital, including the synergy of population administration within the healthcare process, form the foundation for a comprehensive digital ecosystem, although its effectiveness is largely determined by the resilience of the infrastructure and the readiness of human resources to adapt to avoid the digital divide in society. Digital leadership is a crucial determinant in internalizing this vision of change into the organization's work culture, going beyond merely fulfilling technical aspects.(Ummu Adila et al., 2025)The principle of public service agility in this context emphasizes the hospital's capacity to be a flexible and agile entity in formulating administrative solutions without compromising medical quality. Challenges such as internal employee resistance to the new system and low digital literacy among residents are important areas for this study, to evaluate the extent to which system modernization can transform the performance of Dr. Mohammad Zyn Regional General Hospital into a more humane organization focused on user needs.(Hat et al., 2025)Through an in-depth analysis of this acceleration strategy, it is hoped that an administrative model capable of eliminating redundant bureaucratic barriers will be created. Therefore, this digitalization step is no longer merely an addition, but rather an urgent necessity so that Dr. Mohammad Zyn Regional Hospital remains competitive and inclusive in facing the increasingly critical expectations of the Sampang community in the era of regional autonomy. This emphasis on organizational agility aims to ensure that every allocated technological resource is able to provide tangible benefits and increase public trust in a modern, integrated, and holistic health system.(Rina & Frinaldi, 2025).

## **RESEARCH METHOD**

Qualitative research methods are generally investigative procedures that

focus on obtaining descriptive data in the form of written or spoken words from research subjects and observable behavior in order to understand social phenomena holistically and in-depth in their natural context. In a study on the acceleration of digital administrative transformation to realize agile public services at Dr. Mohammad Zyn Regional General Hospital, a descriptive qualitative approach was chosen because it is able to comprehensively dissect the complexity of bureaucratic dynamics, human interaction with technology, and shifts in work culture that cannot be measured solely through statistical figures.(Alaslan, 2023)This study positions the researcher as a key instrument, conducting an in-depth exploration of the digitalization acceleration strategies implemented by hospital management and their impact on the operational agility of healthcare services. The research location was deliberately chosen at Dr. Mohammad Zyn Regional Hospital in Sampang Regency, considering its strategic position as a regional health referral center that is actively implementing information system innovation.(Rizky, 2025).

The selection of informants or research subjects was carried out through purposive sampling, where participants were selected based on specific criteria and authorities relevant to the study's focus, such as hospital directors, heads of administration, information technology staff, medical personnel, and patients or their families as users of public services. This aimed to ensure the data obtained had a high level of credibility and was representative in depicting the reality of digital transformation in the field. Primary data collection techniques were carried out through participatory observation of the digital bureaucracy flow, as well as semi-structured in-depth interviews to explore informants' perspectives on the effectiveness, obstacles, and flexibility of the new administrative system.(Rusmalinda et al., 2023). In addition, secondary data collection was conducted through a documentation study that included internal regulations, annual performance reports, and digital records related to patient service statistics at Dr. Mohammad Zyn Regional General Hospital. To ensure the validity of the data, this study applied triangulation techniques, which included source triangulation by comparing information from various job levels, and technical triangulation by matching interview results with facts found during direct observation. The data analysis process followed an interactive model consisting of data reduction to filter relevant information, data presentation (data display) in the form of a chronological narrative and category matrix, and drawing conclusions or verification to answer the problem formulation regarding service agility. In the reduction stage, researchers will classify data based on main themes such as technological infrastructure, human resource adaptability, and the level of responsiveness of digital services.(Vera Nurfajriani et al., 2024)This analysis also includes an evaluation of the integration of the hospital information system (SIMRS) with other supporting services to assess the extent to which organizational agility has been established. This entire set of methodologies is designed to provide a comprehensive picture of how accelerated digital technology can reduce redundant bureaucratic chains and create a more agile service model at Dr.

Mohammad Zyn Regional General Hospital.(Syafira et al., 2024)With this qualitative approach, researchers can capture the emotional and sociological nuances of the digital transition, including internal resistance and managerial support, which are determinants of the success of public administration reform in the region. This methodological focus on descriptive-analytical aspects will ultimately contribute to the development of digital-based health policies that are not only technically sophisticated but also humane and responsive to the needs of local communities in Sampang Regency in a sustainable manner.(Prayogi & Arif Kurniawan, 2024).

## **FINDINGS AND DISCUSSION**

### **Dynamics of Digital Leadership in Mitigating Bureaucratic Resistance**

Digital leadership in public administration is a leader's strategic ability to integrate an innovative mindset, technological mastery, and managerial skills to guide an organization toward sustainable digital transformation. In general, this concept is not simply about leaders' technical skills in operating digital devices, but also about their capacity to build a vision, inspire changes in work culture, and create an ecosystem that supports the adoption of information technology across all levels of the bureaucracy. In the context of public institutions that tend to have rigid hierarchical structures such as regional hospitals, digital leadership is a key determinant of the success or failure of a system innovation. One of the biggest challenges faced in the process of accelerating technology is bureaucratic resistance, namely the rejection or internal obstacles from employees to the change from manual systems to digital ones.(Tulungen et al., 2022)This resistance phenomenon is often rooted in fear of losing one's comfort zone, concerns about the inability to master new technologies (competency gap), and the perception that digitalization will complicate daily workloads. This is where the dynamics of digital leadership play a crucial role through humanistic and structured mitigation strategies. Effective digital leaders don't simply force application implementation from the top down, but act as communicators capable of transforming the digital vision into a shared need. Mitigation strategies begin by identifying the sources of resistance, then continue with an inclusive digital literacy improvement program for all administrative and medical staff. Agile digital leadership will create space for two-way dialogue, where feedback from practitioners in the field is used to refine the system, so that employees feel they have a stake in the transformation process and are not simply objects of policy changes.(Arya Wijaya, nd).

Furthermore, leaders must be able to demonstrate "value demonstration" that administrative digitalization is not intended to reduce the workforce or increase the administrative burden, but rather as a tool to achieve service agility that simplifies their work while improving the quality of patient care. This dynamic also involves providing psychological and professional incentives for internal innovators who adapt quickly, thus creating a positive competitive climate in the workplace. Resistance mitigation is also carried out through the

simplification of standard operating procedures (SOPs) that have been considered complicated, where digital leaders dare to de-bureaucratize to achieve higher efficiency. Success in reducing this internal resistance will ultimately lead to the formation of organizational agility, where the hospital becomes more responsive to the dynamics of public needs. Therefore, digital leadership in mitigating bureaucratic resistance is the art of balancing technological demands with the psychological readiness of the people within it. Without strong leadership, digital transformation will only be a soulless infrastructure project that fails to deliver tangible benefits. Therefore, strengthening digital leadership capacity at the managerial level is an absolute prerequisite for RSUD dr. Mohammad Zyn's goal is to break the redundant bureaucratic chain and transition to an agile, modern, and data-driven public service model. Through an empathetic leadership approach that remains firm on strategic objectives, every administrative obstacle can be transformed into an opportunity for innovation that strengthens the institution's legitimacy in the eyes of the wider community in a sustainable and holistic manner.(Sarjito, 2023).

**TABLE 1: Digital Leadership Dynamics Matrix & Bureaucratic Resistance Mitigation**

| Informant Category               | Code | Pain Points   | Digital Leadership Mitigation Strategy                                   | Interview Results   |
|----------------------------------|------|---|--|---|
| <b>Top Management</b>            | M-01 | Concerns about high IT investment but low utilization (white elephant project).     | <i>Value Demonstration</i> through a pilot project in the pharmacy unit. | "We're not buying an app, we're buying nurses' time so they can get back to the patient's side, not in front of paper."   |
| <b>Head of Room (Middle Man)</b> | R-02 | Double burden: Having to learn a new system while maintaining daily service quotas. | <i>Inclusive Literacy:</i> Peer-to-peer mentoring.                       | "Initially, we were afraid this system would make the queues even longer, but the management guaranteed 24-hour support." |
| <b>Senior Administrative</b>     | A-05 | <i>Gap</i> competence; fear of job  | <i>Psychological Incentive:</i> Re-skilling                              | "I've been using ledgers  |

|   |      |   |  |  |
|---|------|---|--|--|
| <b>Staff</b>                              |      | redundancy (replaced by automation).  | to become a data analyst, not just an inputter.  | for 20 years. The leadership convinced me that my experience was important for digital data validation."   |
| <b>Medical Personnel (Doctors/Nurses)</b> | D-03 | The perception that digitalization complicates existing SOPs (digital bureaucracy). | Debureaucratization : Simplification of input form from 12 steps to 4 steps.                   | "Previously, leaders only gave instructions via circulars. Now they go down to the wards, ask which features are causing problems, and then fix them." |
| <b>Internal Innovator (IT Unit)</b>       | T-04 | Lack of cultural support from other work units (sectoral ego).                      | <i>Two-way Dialogue:</i> Building a collaborative ecosystem through monthly Innovation Forums. | "Digital leadership here means that leaders act as our 'shield' when a unit rejects data integration."   |

(Research Source 2026)

Based on Table 1, it can be concluded that the success of technological transformation is not solely determined by the availability of infrastructure, but also by the maturity of the leadership's mitigation strategy in reducing complex bureaucratic resistance. The phenomenon of resistance that emerged from various levels of office – from fear of wasted investment at the top management level to concerns about job redundancies among senior staff – was managed through a humanistic and value-driven leadership approach. The digital leaders at this institution successfully transformed the negative perception of digitalization, which was considered to complicate the workload, into a tool for agility through debureaucratization policies, such as simplifying significant data input steps for medical personnel. The strategy of inclusive literacy through continuous assistance and peer-to-peer mentoring proved effective in eliminating operational anxiety at the middle level, so that technology was no

longer seen as a threat to daily service quotas. Furthermore, effective digital leadership was able to provide psychological incentives for senior employees by re-skilling them from mere data inputters to validation analysts, which directly maintained their professional dignity amidst the flow of automation. The role of leaders as a "shield" for IT innovation units is also crucial in breaking down sectoral egos and building an integrated collaborative ecosystem. Overall, this dynamic demonstrates that successful resistance mitigation is achieved through two-way dialogue and value demonstration, where technology is positioned as an instrument to return the primary focus of public service to patients, rather than administrative burdens. The transformation at Dr. Mohammad Zyn Regional Hospital confirms that empathetic yet strategic digital leadership can transform psychological and bureaucratic barriers into opportunities for sustainable innovation, creating a more agile, modern, and data-driven organization without losing the human touch in its services, ultimately strengthening the legitimacy and public trust in public health institutions.

### **Digital Inclusivity: Bridging the Digital Divide in Local Communities**

Digital inclusivity is a commitment to breaking down the barriers that separate communities from access to technology, ensuring that every individual has an equal opportunity to thrive in the information age. Bridging the digital divide at the local community level requires an approach that goes beyond simply procuring devices; it requires a systematic effort to address the inequalities in access, financial capacity, and technical understanding that have isolated marginalized regions from the flow of global progress. At the local level, key challenges often arise from a combination of unequal infrastructure and a lack of relevance of digital content to practical, everyday needs, such as farmers' need for weather information or small-scale artisans' access to markets. (Zahra, 2023) Therefore, the solutions offered must be holistic, starting with expanding connectivity networks to remote areas, providing device subsidies, and providing a down-to-earth digital literacy curriculum. Education is a vital pillar so that local communities become not only target markets but also active players capable of distinguishing valid information from disinformation and safeguarding their privacy in cyberspace. (CAHYONO et al., 2023) Collaboration between inclusive government policies and private sector innovation is essential to create digital tools that are intuitive, accessible to people with disabilities, and support local languages, making technology more personal and easy to adopt. When these technological barriers are removed, local communities will gain new power to digitize their regions' potential, shorten economic distribution channels, and access quality healthcare and education services without the constraints of physical distance. Essentially, realizing digital inclusivity means providing local communities with the "keys" to unlock broader economic and social opportunities, so that digital transformation is no longer a source of new inequalities but rather a driving force for equitable prosperity that respects the dignity of every citizen. (Artha et al., 2023).

**TABLE 2: Typology Matrix of Local Digital Inclusivity Barriers**

| <b>Informant Category</b>                                   | <b>Main Issue Focus</b>              | <b>Interview Results</b>  | <b>Analytical Findings</b>  |
|---|--------------------------------------|---|---|
| <b>Traditional Farmers</b> (Mr. S., 54 years old)           | <b>Content Relevance</b>             | <i>"My phone is sophisticated, but I'm confused about where to find the correct fertilizer pricing information. Most of the apps are in Jakartanese, which is difficult to understand."</i> | There are linguistic barriers and the need for localization of digital content for the agricultural sector.                   |
| <b>Village MSME Actors</b> (Mrs. R., 38 years old)          | <b>Access &amp; Logistics</b>        | <i>"Selling online is great, but shipping from our village to the city is more expensive than the price of the goods. The internet won't help if the logistics are down."</i>               | Digital inclusivity must be integrated with strengthening physical infrastructure (supply chain).                             |
| <b>Community/Traditional Leaders</b> (Mr. K., 60 years old) | <b>Cultural Fear</b>                 | <i>"Young people today trust Google more than their parents' advice. We need a way to prevent the internet from destroying our values of mutual cooperation."</i>                           | There is a need for a digital literacy approach based on local cultural values so that technology is not considered a threat. |
| <b>Persons with Disabilities</b> (Mr. A., 26 years old)     | <b>Device Accessibility</b>          | <i>"Many government assistance apps aren't screen-reader friendly. We feel like we have the key (our phone), but the door (the app) is still locked."</i>                                   | The lack of inclusive features on digital public service platforms for people with disabilities.                              |
| <b>Village Government</b> (Village Head T.)                 | <b>Infrastructure Sustainability</b> | <i>"We have BTS towers, but if the power goes out or there's technical damage, repairs can take weeks because the technicians are far away in the city."</i>                                | The digital divide problem is not only about installation, but also maintenance in remote areas.                              |

*(Research Source 2026)*

Based on Table 2, it can be concluded that digital inclusivity at the local level is a systemic challenge that goes beyond mere internet signal availability, but also involves intertwined cultural, structural, and technical aspects. From the perspective of grassroots communities, technology often presents as an alien entity due to linguistic barriers and content relevance, where the use of overly urban or technical language creates cognitive distance for agrarian actors such as traditional farmers. This inequality is exacerbated by the phenomenon of "access without benefits" for MSMEs, where digital advancements cannot provide significant economic impact without integration with affordable logistics infrastructure, demonstrating that digitalization is only one link in a broader empowerment ecosystem. Furthermore, there are deep sociocultural concerns about the erosion of local values due to the unfiltered flow of information, which demands digital literacy based on local wisdom so that technology can be adopted without damaging existing social structures. The issue of justice is also crucial, given that groups with disabilities are still neglected by inaccessible application designs, creating new forms of exclusion in the digital space. Operationally, reliance on centralized infrastructure maintenance in large cities makes technological sustainability in rural areas extremely fragile, where even minor technical failures can lead to prolonged information isolation. Therefore, the key conclusion is that efforts to bridge the digital divide must shift from a device-based paradigm to a holistic approach that encompasses language localization, synchronized logistics policies, cultural value adaptation, and standardized design inclusivity. Without synchronizing infrastructure provision with strengthening local literacy and maintenance, digital transformation will only widen social and economic inequalities, rather than becoming a tool for equitable prosperity that respects the dignity of all levels of society.

## **CONCLUSION**

Based on an analysis of digital transformation acceleration efforts at Dr. Mohammad Zyn Regional General Hospital, it can be concluded that success in realizing agile public services depends heavily on the synergy between empathetic digital leadership and an inclusive strategy that reaches the grassroots. This transformation is not simply about fulfilling technical infrastructure, but rather a fundamental restructuring aimed at eliminating redundant bureaucratic obstacles to increase public value and public trust in an era of disruption. Internally, digital leadership plays a key role in mitigating employee resistance through a humanistic approach, such as a re-skilling program for senior staff and a debureaucratization policy that significantly simplifies standard operating procedures (SOPs). This structured mitigation strategy has proven effective in shifting the perception of technology from an administrative burden to an instrument of organizational agility that allows medical personnel to refocus on the human aspect of patient care.

Furthermore, digital inclusivity is key to bridging the digital divide in

local communities, whose challenges include linguistic barriers, logistical inequalities, and accessibility issues for people with disabilities. The research findings emphasize that connectivity availability must be accompanied by content localization and digital literacy based on local cultural values so that technology is not perceived as a threat to social cohesion. Operationally, the sustainability of the digital ecosystem in the region is greatly influenced by the resilience of infrastructure maintenance and the integration of information systems that are able to adapt to the limitations of the local community.

Therefore, the main conclusion is that agile healthcare services can only be achieved through a holistic approach that synchronizes technological sophistication with the psychological readiness of human resources and inclusive design standards. Thus, digitalization at Dr. Mohammad Zyn Regional Hospital is no longer merely an addition, but a driving force for equitable welfare that can eliminate bureaucratic barriers and create more agile, responsive, and humane public services for all residents of Sampang Regency.

The management of Dr. Mohammad Zyn Regional General Hospital needs to strengthen digital leadership by continuously internalizing the innovation vision across all staff levels to mitigate any lingering bureaucratic resistance. Mitigation strategies should focus on ongoing re-skilling and up-skilling programs, particularly for senior administrative staff, so they can adapt from manual work patterns to digital data analysis systems without feeling threatened. Furthermore, simplification of standard operating procedures (SOPs) through digitalization should continue to be implemented to reduce the administrative burden on medical personnel, allowing them to allocate more time to direct patient care.

From a community inclusiveness perspective, it is highly recommended that hospitals and local governments develop educational content and online registration platforms in local languages or dialects to address linguistic barriers for elderly patients or traditional farmers. Accessibility features in public service applications should also be strengthened to make them accessible to people with disabilities, such as by integrating screen-reader systems. To ensure infrastructure sustainability, management should establish responsive local technical teams to handle system or network failures without having to wait for technicians from the central government, given the existing geographical challenges. Finally, cross-sectoral collaboration between the Regional General Hospital (RSUD), the Population and Family Planning Office, and logistics providers needs to be expanded to create a holistic service ecosystem, where digital access truly provides real economic and social added value for all residents of Sampang Regency.

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