

# The Management of Food at Faisal Islamic Hospital Ujung Pandang

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**Abstract:** Institutional and industrial food administration is an integrated program consisting of planning, procurement, storage, processing of food ingredients and serving or serving food on a large scale. This food organization activity must be guided by PGRS to ensure quality food so that patients can speed up the process. the healing. This study aims to determine how the management of the implementation and service of food in the nutrition installation at the Faisal Islamic Hospital. This research is a type of qualitative research with a descriptive approach that describes the implementation of management in food service activities at the Nutrition Installation of Faisal Islamic Hospital. Implementation of management in food delivery activities at the Nutrition Installation of Faisal Islamic Hospital which includes the menu planning process, food budget planning, planning for food needs, procurement of food ingredients, receipt of food ingredients, storage of food ingredients, processing of foodstuffs and full distribution of food is not fully in accordance with the PGRS steps that have been set. Food service management at the Faisal Islamic Hospital has met all the requirements for food service management, even though the number of existing patients decreased during the pandemic which resulted in grocery shopping activities turning into a household shopping system.

**Keywords:** nutrition installation, management, food administration

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## 1. Introduction

Organization of Institutional Food is the organization of food carried out in large quantities, i.e. more than 50 servings per processing. To meet the needs of its consumers, food service institutions must apply the principle of food administration that meets consumer tastes, is healthy, safe, and at a reasonable price. Therefore, the purpose of this food organization must follow the principles that have been determined earlier. Food service is a system, which consists of several sub-systems. Each sub-system also has elements that are interrelated to achieve certain goals. The sub-systems include: input, process, application of hygiene and sanitation, control, feed back and environment. Each sub-system has elements that work together in carrying out their respective duties and activities well so that they can produce high-quality food and achieve customer satisfaction being served [1]. The provision of food in hospitals has been regulated in the Regulation of the Ministry of Health of the Republic of Indonesia Number 78 of 2013 concerning Guidelines for Hospital Nutrition Services [1]. Institutional and industrial food organization is an integrated program consisting of planning, procurement, storage, processing of food ingredients and serving or serving food on a large scale. Food preparation activities are part of food procurement activities. Several activities carried out in food preparation include are peeling, cutting, washing, mashing, and so on. Food preparation is the heart of food preparation. There is a direct and constant relationship between the method of preparation and the

nutritional value, palatability and attractiveness of food. According to the 2013 PGRS, food preparation is an activity carried out in order to prepare food ingredients, tools, and seasonings before cooking. Or in other words that preparation is an activity where the food ingredients are ready to be processed. Preparation activities are the earliest activities of the production process which will determine the final result of food production. Special activities for food management are the process of delivering food in large quantities for certain reasons, which is a series of activities related to achieving optimal nutrition through the provision of proper nutrition, such as recording, reporting, and evaluating, starting from menu planning to distributing food to consumers, and optimally through proper nutrition, health with proper nutrition (Kemenkes, 2018).

Research conducted by Sinamo [2] at the Salak Hospital showed that menu planning for the time of using the menu cycle had been used for three years so it was not in accordance with PGRS. For planning food needs and planning food budgets, it had been carried out in accordance with PGRS. Procurement of materials food is done twice a week which has been ordered through leveransi. Receipt of food ingredients and processing of food ingredients have been carried out in accordance with PGRS guidelines. Storage of dry food and wet food ingredients is separated but for temperature regulation of food ingredients storage is not in accordance with PGRS. and distribution has been carried out in accordance with the PGRS.

Research conducted by Muliawardani et al (2016) at the Grhasia Mental Hospital concluded that the planning of nutritional services at the Grhasia Hospital was well planned and in accordance with the PGRS. however, there are still multiple jobs. The implementation of nutrition services at Grhasia Hospital is in accordance with PGRS but nutritional care activities have not been carried out routinely. Supervision of nutrition services at Grhasia Hospital has been carried out according to plan. Evaluation of nutritional services at Grhasia Hospital is in accordance with quality target standards.

Research conducted by Jufri, et al. [3] at Lanto General Hospital with Pasewang, Jeneponto Regency concluded that the steps in menu planning were not fully in accordance with the PGRS steps. Food based on budget planning using direct financing, menu planning is done in a team with reference to the 10-day menu cycle, the calculation of food needs is carried out per day based on the number of patients per day, ordering and purchasing groceries, there is no system made for receipts. -storage-distribution of food ingredients, preparation of food ingredients is carried out in a team by preparing all necessities before processing food ingredients, processing is carried out by the cook, knowledge of the cook assigned to cook especially about very poor nutrition, food distribution is carried out after all processes in processing finished, the food is served in partitioned baskets and stainless bowls, the distribution process is divided into two systems, namely centralized and decentralized.

Based on previous research researched by Nasir, et al (2015) concluded from 10 questions regarding food processing facilities in No. 1204/Menkes/SK/X/2004 the storage of food ingredients and ready-to-eat food must meet food storage requirements. From the observations, it was found that the serving place is relatively close to the food processing kitchen. This is because the construction of the building is built in such a way as to make it easier for cooking and after the food is finished being processed, it is served directly into the patient's food container and then transported to the inpatient room. Before the food is served, a test should be carried out. organoleptic and laboratory tests, but in fact some organoleptic tests are carried out such as tasting while laboratory tests have not been carried out. This shows that there is no clarity/don't know who is in charge of this problem. Each type of food is served in a separate container. Nutritional installations that meet the requirements 6 questions and does not meet the requirements of 4 questions. When viewed

from the Decree of the Minister of Health of the Republic of Indonesia No. 1204/Menkes/SK/X/2004, it can be said that it does not meet the requirements. Of the 7 questions regarding the requirements for food handlers in the Nutrition Installation, 5 questions were met and 2 questions did not meet the requirements. When viewed from the Decree of the Minister of Health of the Republic of Indonesia No. 1204/Menkes/SK/X/2004, it can be said that it does not meet the requirements. 3. Of the 7 questions regarding the requirements for tableware in the Nutrition Installation, 4 questions met the requirements and 3 questions did not meet the requirements. When viewed from the Decree of the Minister of Health of the Republic of Indonesia No. 1204/Menkes/SK/X/2004, it can be said that it does not meet the requirements. Of the 10 questions on the requirements of food ingredients in the Nutrition Installation, 7 questions that meet the requirements and 3 questions that do not meet the requirements. Kepmenkes RI No. 1204/Menkes/SK/X/2004 it can be said that it does not meet the requirements.

Based on the previous survey, information was obtained that the management of food administration at the Faisal Islamic Hospital is still not good. Therefore, this study aims to analyze and re-observe the management of food administration (budget planning, food menu planning, food needs, food purchases, processing). foodstuffs, food storage, preparation of food ingredients, distribution and presentation of food) in the Faisal Islamic Hospital.

## **2. Methods**

This research is a type of qualitative research with a descriptive approach that describes the implementation of management in food delivery activities at the Nutrition Installation of the Faisal Ujung Pandang Hospital which includes the menu planning process, planning food needs, procurement of food ingredients, receipt of food ingredients, storage of foodstuffs, processing of foodstuffs and food distribution. This research was conducted at the Islamic Hospital Faisal Ujung Pandang. The time of the study began on May 23 – May 28, 2022.

The data collection method used in this study involved in-depth interviews for officers at the Faisal Ujung Pandang Islamic Hospital and examination of documents/archives, some secondary data on food management at the Faisal Ujung Pandang Islamic Hospital, and observations of a number of informants. which is the source of data mining for this research.

The selection of informants in this study used a purposive sampling technique, which is a technique used to select informants who know the problem clearly, are able to express opinions properly and correctly, can be trusted to be a good source of data and are willing and able to provide information related to research topics regarding food management at Faisal Islamic Hospital.

## **3. Result**

Menu planning is a series of activities to compose and combine dishes in harmonious, harmonious variations that meet nutritional adequacy, tastes according to consumer/patient tastes and institutional policies. adjust to the available costs, save the use of time and energy and a well-planned menu can be used as an extension tool. In health service facilities, menu planning is the activity of preparing menus that will be processed to meet consumer tastes and meet nutritional needs that meet the principles of balanced nutrition. The purpose of menu planning in health care facilities is the availability of menu cycles according to the classification of existing services. In menu planning activities there are steps that must be taken in accordance with the PGRS [1], based on the results of interviews and direct

observations at the nutrition installation of RSI Faisal, the steps have been fulfilled including, form a work team, determine the type of menu, determine the menu pattern. , Determine the length of the menu cycle and the period of use of the menu, Set the portion size, Collect various kinds of dishes for morning, afternoon, and evening in one menu cycle including types of snacks, Designing menu formats, conducting menu assessments, menu revisions and initial menu tests.

*"Yes, to determine the menu planning, we have a meeting with the staff here, the chef and the waiter about the menu to be set, the menu cycle at RSI Faisal we use a 10-day menu cycle, so we will revise it every 6 months, there we will see if there is a change in the menu or what. We also determine the menu cycle, usually there is a patient request, we at the nutrition installation are assisted by the nurse, so the nurse conveys, if there is a patient who for example does not eat porridge and is diagnosed with a disease, he can eat rice so it is replaced with rice" (Informant 1 )*

Planning for food needs is a series of activities to determine the type and amount of food ingredients with a specified quality within a certain period of time. This planning is carried out by calculating the food needs needed in terms of quality and quantity (Kemenkes, 2018). All food needs at the Faisal Islamic Hospital in Makassar are directly handled by the head of the nutrition installation, the purchase of wet food ingredients per day is adjusted to the patient's needs and for dry food supplies are needed for one week's needs. In planning food ingredients, it is very necessary for nutritional installations so as not to hinder the process of feeding.

Planning for food needs at the nutrition installation at the Faisal Islamic Hospital in Makassar is differentiated based on the need for wet food ingredients for each day and dry food ingredients for a period of once a week. Planning for both wet and dry food ingredients is carried out by referring to the menu cycle that has been prepared, the frequency of feeding, the standard portion used, the specifications of the food ingredients that have been determined and the average number of hospitalized patients.

After planning the menu, the next activity is planning for food needs. Planning for food needs at the Faisal Islamic Hospital Makassar is guided by the PGRS, namely the need for food is made based on the average number of patients and determines the period of time for food needs. This is in line with the research of Sinamo [2] at Salak Hospital regarding the planning of wet and dry foodstuffs and based on the average number of patients.

*"Our food needs have been differentiated between wet food ingredients and dry foodstuffs and it is based on our menu standards. Every day I check the demand for groceries according to the menu cycle and every day they are given to partners after entering new items, the food requisition paper is taken and checked again according to the order. If the dry ingredients are once a week while the wet ingredients are every day. So the plan is according to the average number of patients yesterday and we also look at the trend in the number of patients and we add 5 to 10 portions of the number of patients. Yes, there are rules for giving food, depending on the diagnosis of the patient, and that distinguishes the diet menu from the patient depending on the diagnosis of the disease and that is also the standard of the portion."*

Food ingredients budget planning is the activity of compiling the costs required for the procurement of food ingredients in the context of providing food for a certain period of time in the form of a Food Expenditure Budget Plan (RAB-BM). For hospitals, in this case, it is for the procurement of food for patients and employees served (Ministry of Health, 2018). The budget is a detailed plan that is formally stated in quantitative terms, usually expressed in

units of money to obtain and use an organization's resources. a certain period of time, usually one year. The purpose of food budget planning is the availability of sufficient budget proposals to meet the needs of the type and amount of food for consumers in accordance with established nutritional adequacy standards (Kemenkes, 2018).

In planning the budget for food expenditure at the RSUD, the responsibility for this is the head of the nutrition installation and the management team. The budget plan at the Nutrition Installation of the Faisal Islamic Hospital was prepared in advance by the head of the nutrition installation and administrative officers then it would be discussed again with the nutrition staff at the Faisal Hospital then if the budget plan compiled had been mutually agreed through an internal meeting, the head of the nutrition installation would bring the budget plan along with the menu and food needs that have been prepared in the budget submission meeting at the Faisal Islamic Hospital. When the budget is submitted, it is not approved immediately, but is processed first by the hospital, then knocks on the budget.

In the previous stage, the nutrition installation had calculated the need for food for one year based on the specifications of the existing food ingredients and the menu cycle that had been prepared. Then the planned food needs will be converted into prices based on the estimated food prices so that the average patient food price index can be determined per day.

Food procurement activities include ordering and purchasing food ingredients. Ordering groceries is the preparation of requests (orders) for food ingredients based on menu guidelines and the average number of consumers/patients served, according to the established ordering period (Kemenkes RI, 2018).

Procurement of foodstuffs (orders and purchases) of wet and dry foods at the Faisal Islamic Hospital in Makassar using a household ordering and purchasing system. Where for the procurement of wet foodstuffs (fish, chicken, vegetables, fruits) it is carried out every day while for dry foodstuffs (spices) the procurement is carried out on a weekly basis. In the procurement of foodstuffs, there are also no partners so that the ordering and purchasing of foodstuffs is carried out on a moving basis and there is no cooperation with each supplier.

In procuring food ingredients, the nutrition installation must first place an order with the supplier. Ordering food is the preparation of requests for food ingredients based on menu guidelines and the average number of consumers/patients served, according to the specified ordering period (Ministry of Health, 2018).

The frequency of ordering foodstuffs at the nutrition installation of the Faisal Islamic Hospital in Makassar is divided into two, namely ordering dry food and ordering wet food. ordering the nutrition installation in advance to calculate the need for food ingredients based on the menu that has been set, the types of food and their specifications, and the number of hospitalized patients each day. to the supplier and some food ingredients are delivered directly by the supplier to the nutrition installation.

*"For ordering food ingredients, it is daily for wet food ingredients and ordering dry food ingredients is done once a week. In receiving food ingredients, the nutrition installation team combines with the seller in taking food ingredients. For example, for wet ingredients such as vegetables, the nutrition installation takes direct food ingredients, while for wet foodstuffs such as fish and chicken, direct sellers bring the food ingredients to the nutrition installation. However, there is no SOP with him, no cooperation, no partners." (informant 1)*

Food receipts activities carried out by the nutrition installation of the Faisal Food Islamic Hospital guided by the PGRS Based on the results of direct observations, after cross-checking the food ingredients that are not in accordance with the order list, the reception

manager will contact the ordering manager, namely the Head of the Nutrition Installation of Faisal Islamic Hospital Makassar, then the ordering manager will contact the store to ask the incompatibility of the orderer with the food that arrived. So one of the nutrition installation staff came to the store to take food ingredients or suppliers who brought in directly lacking materials. For the implementation of food receipts that were not in accordance with PGRS. Receipts were carried out in the food ingredients warehouse to check and measure.

Food storage at Faisal Islamic Hospital is more or less in accordance with existing SOPs and PGRS guidelines. There is a warehouse for wet and dry food, both of which have complied with the standard operating procedure (SOP) of the Hospital. Wet food ingredients that are received and do not want to be processed immediately will be put into the storage warehouse while dry foodstuffs are purchased every 2-3 days. Foodstuffs in the warehouse have a stock card that records the entry and exit of these foodstuffs. Each food is placed in groups and does not mix well and for materials that are easily scattered, such as sugar, flour, are placed in a storage container so that they do not contaminate the floor. The application of the FIFO (First In First Out) and FEFO (First Expired First Out) system by looking at the records of when the goods were entered and when the goods expired

Food storage at the Faisal Islamic Hospital is in sufficient condition with PGRS. However, the pandemic conditions have resulted in the purchasing system and equipment maintenance in the storage room being not well taken care of. Such as checking the room temperature not functioning due to lack of warehouse activity during the Covid-19 pandemic where some installation staff employees Many nutrition are being laid off. Including the pj warehouse manager.

Food processing. Based on direct observations at the Nutrition Installation of the Faisal Islamic Hospital, the cook who prepares the food ingredients has prepared the food ingredients according to the standard portion. For example, when cutting fish or meat, the cook has done it according to the hospital portion standards. In addition, the nutrition installation also conducts seasoning compounding, according to seasoning standards, where the seasoning is provided in how many grams per serving. If there are no spice standards and recipe standards that guide the preparation of food ingredients, the accuracy in taste cannot be guaranteed to be the same for every processing.

Processing activities at the nutrition installation of the Faisal Islamic Hospital are carried out by 2 cooks. The processing of patient food is carried out by referring to the standard menu that has been prepared and the patient food order form received by the nutrition installation from the room nurse. nutrition knows patients who require special diets and patients who do not require special diets.

Prepare meals for patients with special dietary needs and patients No special dietary requirements are made by the same staff. Because food processing for hospital patients who require a special diet must be converted first by the cook, then food processing is usually carried out according to a fixed menu. If the patient only needs a Soft diet (ML) according to the type of disease, the nutritional settings are permanent using the same menu as inpatients who do not have a special diet (receiving regular food), the only difference is processing processed rice into porridge.

Food handlers also always use personal protective equipment such as: hats, masks, aprons and gloves. These food quality are safe for patients to consume. This study is consistent with the Hygiene Principles of the Directorate General of Food Hygiene PPM and PLP of the Indonesian Ministry of Health (2000) which states that to avoid contamination, all food processing operations must be carried out in such a way as to avoid direct contact with the body, one of which is the use of PPE such as aprons, hair covers. , disposable plastic gloves (disposable), nose and mouth cover (frame and nose)

The distribution of food in the nutrition installation of RSI Faisal is carried out in a centralized manner, namely food is divided and served in cutlery in the nutrition installation room before being distributed to patients. At the nutrition installation of the Faisal Hospital, the food processing officer is also a food distribution officer. Seeing the number of patients at RSI Faisal can be controlled by the nutrition installation officer. The food distribution schedule at the nutrition installation of the Faisal Hospital is in the morning at 06.00-07.00 WITA, lunch at 12.00-13.00 WITA, dinner at 18.00-19.00 WITA, and distribution for snacks at 09.00-10.00 WITA and 15.30-16.00 WITA. . This is in line with Esterina's research (2019) which states that the nutrition installation of Salak Hospital distributes food to patients by the waiters themselves.

*"At the Faisal Islamic Hospital, we have little staff, so the distribution of food to patients is done by the same person, he is the one who prepares it, he serves it, he also distributes it to the patient. After that he also went back to the patient's room to take the patient's place to eat when he finished eating. Incidentally, there are not many patients here, only around 60-70 people" (Informant 1).*

#### **4. Conclusion**

Based on the results of observations regarding the administration of food at the Nutrition Installation of the Faisal Ujung Pandang Hospital, it can be concluded that most of the flow of the institution's food administration has been fulfilled according to standards although there are some things that are not working properly due to the Covid-19 pandemic.

#### **Conflicting Interest**

All authors declare no conflict of interest.

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