

REGULATION OF THE MINISTER OF HEALTH OF  
THE REPUBLIC OF INDONESIA  
NUMBER 14 OF 2024  
ON  
MAIN TEACHING HOSPITALS

BY THE BLESSINGS OF ALMIGHTY GOD

MINISTER OF HEALTH OF THE REPUBLIC OF INDONESIA,

Considering : that in order to implement the provisions of Articles 586, Article 589, and Article 876 of Government Regulation Number 28 of 2024 on Implementation of Law Number 17 of 2023 on Health, it is necessary to issue a Regulation of the Minister of Health on Main Teaching Hospitals;

Observing : 1. Article 17 section (3) of the 1945 Constitution of the Republic of Indonesia;

2. Law Number 39 of 2008 on State Ministries (State Gazette of the Republic of Indonesia of 2008 Number 166, Supplement to the State Gazette of the Republic of Indonesia Number 4916);

3. Law Number 17 of 2023 on Health (State Gazette of the Republic of Indonesia of 2023 Number 150, Supplement to the State Gazette of the Republic of Indonesia Number 6887);

4. Government Regulation Number 28 of 2024 on Implementation of Law Number 17 of 2023 on Health (State Gazette of the Republic of Indonesia of 2024 Number 135, Supplement to the State Gazette of the Republic of Indonesia Number 6952);

5. Presidential Regulation Number 18 of 2021 on Ministry of Health (State Gazette of the Republic of Indonesia of 2021 Number 83);
6. Regulation of the Minister of Health Number 5 of 2022 on Organization and Work Procedure of the Ministry of Health (State Bulletin of the Republic of Indonesia of 2022 Number 156);

HAS DECIDED:

To issue : REGULATION OF THE MINISTER OF HEALTH ON MAIN TEACHING HOSPITALS.

## CHAPTER I

### GENERAL PROVISIONS

#### Article 1

In this Ministerial Regulation:

1. Teaching Hospital means a hospital that functions as an integrated venue for education, research, and healthcare services in the fields of medical professional and health professional education, including multiprofessional continuing education.
2. Main Teaching Hospital (*Rumah Sakit Pendidikan Penyelenggara Utama*), hereinafter abbreviated to RSPPU, means a Teaching Hospital that serves as the primary organizer of higher education for medical professional and health professional specialists and subspecialists.
3. Educational Functional Unit (*Unit Fungsional Pendidikan*), hereinafter referred to as UFP, means a functional unit established by a hospital to manage education at an RSPPU.
4. Hospital Network (*Jejaring Rumah Sakit*) means hospitals utilized by the RSPPU to fulfil and/or enhance the competencies of medical professionals and health professionals.
5. Educational Venue means a Health service facility other than a teaching hospital that is used as a site for medical and/or health education practice.

6. Study Program means a unit of educational and learning activities with a specific curriculum and learning methods within a type of academic, professional, and/or vocational Education.
7. Curriculum means a set of plans and arrangements regarding objectives, content, and teaching materials, as well as the methods used as guidelines for learning activities aimed at achieving specialist and subspecialist education objectives.
8. Collegium means a group of experts from each health discipline that oversees a branch of health science, performs a duty and function independently, and serves as an organ of the council.
9. Professional Certificate means a document of recognition allowing a graduate of professional education to practice their profession.
10. Competency Certificate means a document of recognition of the competence of a medical professional or health professional who has passed a competency examination, allowing them to practice throughout Indonesia.
11. Minister means the minister administering government affairs in the field of health.
12. Medical Professional means any individual dedicating himself/herself to the field of health who possesses a professional attitude, knowledge, and skills acquired through medical or dental professional education and who requires authority to conduct health measures.
13. Health Professional means any individual dedicating himself/herself to the field of health who possesses a professional attitude, knowledge, and skills through higher education and, for certain types of work, requires authority to conduct health measures.
14. Beginner – Stage Resident means a Resident who can observe examinations, actions, or procedures relevant to a specialization under high-level supervision.
15. Intermediate-Stage Resident means a Resident who can conduct examinations, actions, or procedures relevant to

a specialization under moderate supervision by a clinical educator.

16. Independent-Stage Resident means a Resident who can conduct examinations, actions, or procedures relevant to a specialization under low or indirect supervision.

#### Article 2

This Ministerial Regulation serves as a guideline for RSPPU, Hospital Networks, Educational Venues, Collegiums, and/or ministries/agencies in organizing specialist/subspecialist education programs.

#### Article 3

An RSPPU organizing specialist/subspecialist education programs must be RSPPU that implements a non-profit principle in accordance with the provisions of legislation.

### CHAPTER II

#### PLANNING OF SPECIALIST/SUBSPECIALIST EDUCATION PROGRAMS

#### Article 4

- (1) The planning of specialist/subspecialist education programs by RSPPU is formulated based on the national needs for Medical Professionals and Health Professionals.
- (2) The planning of specialist/subspecialist education as referred to in section (1) aims to determine:
  - a. the types of specialist/subspecialist education programs; and
  - b. the number of quotas and qualifications of residents.
- (3) The planning of education programs as referred to in section (1) is determined by the Minister after coordination with the minister administering government affairs in the field of education.
- (4) In determining the education program planning as referred to in section (3), the Minister considers the capacity of the RSPPU in organizing specialist/subspecialist education programs.

CHAPTER III  
MECHANISM FOR ORGANIZING  
SPECIALIST/SUBSPECIALIST EDUCATION PROGRAMS

Part One

RSPPU

Paragraph 1

Function and Duties

Article 5

- (1) The RSPPU serves the function of organizing specialist/subspecialist education programs.
- (2) In carrying out the function as referred to in section (1), the RSPPU performs the following duties to:
  - a. develop curricula for specialist/subspecialist education programs in collaboration with the Collegium;
  - b. provide the necessary resources for organizing specialist/subspecialist education programs;
  - c. conduct specialist/subspecialist education programs;
  - d. organize competency examinations in collaboration with the Collegium;
  - e. cooperate with higher education institutions in organizing specialist/subspecialist education programs;
  - f. cooperate with Hospital Networks to fulfil, enrich, and/or enhance competencies;
  - g. prepare educational program plans and budget allocations;
  - h. implement quality assurance measures for the education program; and
  - i. conduct monitoring and evaluation of Hospital Networks.

Paragraph 2

Requirements and Standards for RSPPU

## Article 6

- (1) RSPPU must fulfil certain requirements and standards.
- (2) The requirements as referred to in section (1) include:
  - a. having a decision from the Minister designating the hospital as a Teaching Hospital;
  - b. having an application to become an RSPPU for specialist/subspecialist programs signed by the hospital leader;
  - c. having approval from the hospital owner to become an RSPPU for specialist/subspecialist programs; and
  - d. having a cooperation agreement document with a higher education institution.
- (3) In addition to the requirements as referred to in section (2), a Teaching Hospital intending to become an RSPPU must have:
  - a. a valid hospital operating license;
  - b. a hospital accreditation certificate at *paripurna* (excellent) level;
  - c. an academic paper, feasibility study, and Curriculum for each area of specialization in the specialist/subspecialist program;
  - d. a letter of commitment to comply with national/international study program accreditation standards; and
  - e. an integrity pact regarding the validity and authenticity of the documents, signed by the hospital director/leader.
- (4) The standards as referred to in section (1) include:
  - a. standards for education management and administration;
  - b. standards for human resources;
  - c. standards for educational support facilities; and
  - d. standards for the design and implementation of quality clinical education programs.
- (5) The standard instruments as referred to in section (4) are stipulated by the Minister.

#### Article 7

- (1) A Teaching Hospital intending to become an RSPPU submits an application to the Minister through a health information system integrated with the national health information system.
- (2) The application as referred to in section (1) is verified and evaluated by the Minister based on the requirements and standards as referred to in Article 6.
- (3) A Teaching Hospital that meets the verification and evaluation requirements as referred to in section (2) is designated as an RSPPU by the Minister.
- (4) An RSPPU that has been designated by the Minister as referred to in section (3) may apply for a permit to organize specialist/subspecialist education programs to the minister administering government affairs in the field of education.
- (5) The permit to organize specialist/subspecialist education programs issued by the minister administering government affairs in the field of education as referred to in section (4) is granted after fulfilling the requirements for establishing a Study Program in accordance with the provisions of legislation.
- (6) The permit to organize specialist/subspecialist education programs from minister administering government affairs in the field of education as referred to in section (5) may be granted for the independent establishment of a Study Program by a certain RSPPU that have met additional requirements in accordance with the provisions of legislation.

#### Part Two

#### Educational Program Network

#### Article 8

In conducting specialist/subspecialist education programs, the RSPPU may establish Hospital Networks and/or Educational Venues.

#### Article 9

- (1) In the event that the RSPPU establishes Hospital Networks and/or Educational Venues as referred to in Article 7, they are used to fulfil, enrich, and/or enhance the competencies of Residents that cannot be fulfilled within the RSPPU.
- (2) Hospital Networks and/or Educational Venues as referred to in section (1) are used for:
  - a. Beginner-Stage and Intermediate-Stage Residents to fulfil their competencies according to the Curriculum; and
  - b. Advance -Stage Residents to enhance competencies in accordance with performance targets.

#### Article 10

- (1) The requirements for Hospital Networks and/or Educational Venues for Beginner-Stage and Intermediate-Stage Residents as referred to in Article 9 section (2) point a include at least:
  - a. a designation letter as a Teaching Hospital or Educational Venue;
  - b. a cooperation agreement with the RSPPU;
  - c. a coordinator;
  - d. clinical educators according to the required competencies;
  - e. one secretariat staff member;
  - f. a sufficient number and variety of cases relevant to the required competencies; and
  - g. supporting facilities, infrastructure, and equipment.
- (2) The requirements for Hospital Networks and/or Educational Venues for Advance-Stage Residents as referred to in Article 9 section (2) point b include at least:
  - a. a cooperation agreement with the RSPPU;
  - b. a sufficient number and variety of cases; and
  - c. supporting facilities, infrastructure, and equipment.



#### Article 11

Hospital Networks and/or Educational Venues as referred to in Article 9 section (2) are designated by senior executive position (*pimpinan tinggi madya*) responsible for the formulation and implementation of policies in the field of health services.

#### Part Three

#### Cooperation

#### Article 12

- (1) The RSPPU cooperates with partner higher education institutions in organizing education.
- (2) The partner higher education institutions as referred to in section (1) may be more than 1 (one) in accordance with the necessity.
- (3) The partner higher education institutions as referred to in section (2) may be evaluated by RSPPU.
- (4) Based on the evaluation result as referred to in section (3), the RSPPU may replace or add partner higher education institutions.
- (5) The RSPPU designates one of the partner higher education institutions as referred to in section (2) as a higher education institution partner that co-signs the professional certificate with the RSPPU.

#### Article 13

- (1) The cooperation between the RSPPU and partner higher education institutions as referred to in Article 12 section (1) aims to:
  - a. improve effectiveness, efficiency, productivity, creativity, innovation, quality, and relevance of the implementation of the higher education institutions' three pillars (*tri dharma*) to improve national competitiveness;
  - b. enhance synchronization and harmonization of services, education, and research in the field of Health; and

- c. give the real contributions to education, research, and the development of science and technology in Health development within the region.
- (2) The cooperation as referred to in section (1) includes:
  - a. academic cooperation; and
  - b. non-academic cooperation.
- (3) The academic cooperation as referred to in section (2) point a at least is in the forms of:
  - a. health services within an academic Health system;
  - b. quality assurance of higher education in health; and
  - c. education, research, and community service.
- (4) Non-academic cooperation as referred to in section (2) point b at least includes cooperation in the field of:
  - a. human resources;
  - b. facilities and infrastructure; and
  - c. funding.

#### Article 14

- (1) The scope of cooperation as referred to in Article 13 is outlined in a cooperation agreement.
- (2) The cooperation agreement as referred to in section (1) at least contains the rights and obligations of the parties with due regard to the rights and obligations of residents in accordance with the provisions of legislation.
- (3) In addition to containing the rights and obligations of the parties as referred to in section (2), the cooperation agreement also includes:
  - a. organizing academic activities including co-signing of professional certificates and degree conferment;
  - b. organizing service activities, including work culture;
  - c. provision and quality of teaching staff;
  - d. quality of education and services;
  - e. research cooperation;
  - f. community service;
  - g. monitoring and evaluation; and/or
  - h. other relevant matters as needed.

#### Part Four

#### Residents Selection

Paragraph 1

General

Article 15

- (1) Admission of prospective residents to specialist/subspecialist education programs is conducted through a joint selection committee.
- (2) The joint selection committee as referred to in section (1) is established by a joint decision of the Minister and the minister administering government affairs in the field of education.
- (3) The joint selection committee comes from the element of:
  - a. the representatives of the ministry administering government affairs in the field of health;
  - b. the representatives of the ministry administering government affairs in the field of education;
  - c. the Collegium; and
  - d. the RSPPU.
- (4) The joint selection committee may also involve experts, other ministries/agencies, and/or higher education institutions.
- (5) The joint selection committee as referred to in section (1) has duties for:
  - a. recruiting and selecting Residents for specialist/subspecialist education programs at the RSPPU; and
  - b. compiling a list of selected Residents to be approved by the Minister.

Paragraph 2

Selection

Article 16

- (1) Prospective Residents may participate in the selection process as referred to in Article 15 section (1) after meeting administrative requirements.
- (2) The selection process as referred to in section (1) consist of:

- a. a written test; and
  - b. an interview.
- (3) If necessary, the selection process as referred to in section (2) may be completed with portfolio assessment.
  - (4) Prospective Residents who are going to join the selection as referred to in section (1) conduct registration through an integrated information system connected to the national health and education information systems.
  - (5) The registration as referred to in section (4) is conducted to:
    - a. choosing the type of specialization and RSPPU; and
    - b. selecting the post-education placement area.
  - (6) The post-education placement area is determined by the Minister through senior executive position having duty in the formulation and implementation of policies in the field of Health Professional.

#### Article 17

- (1) The administrative requirements as referred to in Article 16 section (1) include documents of:
  - a. proof of graduation from medical education;
  - b. registration certificate;
  - c. practice license; and
  - d. other requirements as needed.
- (2) Additional requirements as referred to in section (1) point d are determined by the Minister and the minister administering government affairs in the field of education.
- (3) In the event that additional administrative requirements as referred to in section (1) are needed, the joint selection committee may determine them in accordance with the policy on selection and recruitment.
- (4) All required documents as referred to in section (1) are uploaded via the integrated national health and education information systems.

#### Article 18

- (1) The written test as referred to in Article 16 section (2) point a may be conducted using a computer-based system.

- (2) The types of written test are determined by the Minister and minister administering government affairs in the field of education.
- (3) The materials of the written test as referred to in section (1) are prepared by the joint selection committee.

#### Article 19

- (1) Residents who pass the written test as referred to in Article 18 proceed to the interview.
- (2) The interview as referred to in section (1) is organized through structured and objective method as well as may utilize information technology.
- (3) The interview as referred to in section (1) is conducted by a competent interview team.
- (4) The competent interview team as referred to in section (3) is appointed by the joint selection committee.

#### Paragraph 3

#### Determination of New Residents

#### Article 20

- (1) The determination of residents is conducted through a matching process and a plenary meeting held by the joint selection committee.
- (2) The matching process as referred to in section (1) considers:
  - a. alignment between selection results and chosen specialization;
  - b. quotas at the selected RSPPU; and
  - c. selected post-Education placement area.

#### Article 21

- (1) Prospective Residents who have passed the selection as referred to in Article 16 to Article 20 are designated as Residents by the joint selection committee on behalf of the Minister.
- (2) The Residents who have been designated as referred to in section (1) then are placed at the RSPPU.

#### Article 22

The technical guidelines for the Resident selection process are determined by the Minister together with the minister administering government affairs in the field of education.

#### Part Five

#### Matriculation

#### Article 23

- (1) The RSPPU may conduct matriculation for Residents based on needs.
- (2) The matriculation as referred to in section (1) aims to align the Residents' competencies with the minimum competencies required in the Curriculum for specialist/subspecialist education.
- (3) The technical guidelines for organizing matriculation as referred to in section (1) and section (2) are determined by the RSPPU leader.

#### Part Six

#### Deployment of Residents

#### Paragraph 1

#### General

#### Article 24

- (1) The Residents as referred to in Article 21 section (2) are deployed and appointed as staff in healthcare facilities or RSPPU in accordance with the provisions of legislation.
- (2) The health service facilities as referred to in section (1) are Hospital Networks that have cooperation agreements with the RSPPU.
- (3) The deployment stages as referred to in section (1) consist of:
  - a. deployment of Residents during education; and
  - b. deployment post-education.

## Paragraph 2

### Deployment of Residents During Education

#### Article 25

- (1) Deployment of Residents during education as referred to in Article 24 section (3) point a is carried out at the RSPPU and its Hospital Networks and/or Educational Venues.
- (2) Deployment of Residents as referred to in section (1) who are civil servants or other staff is carried out in accordance with the provisions of legislation.
- (3) Residents deployed at RSPPU and Hospital Networks and/or Educational Venues as referred to in section (1) must sign an integrity pact with performance targets.
- (4) Deployment of Residents as referred to in section (3) is conducted in accordance with competency achievement of Residents during education process assessed by the RSPPU.
- (5) In the event that Residents as referred to in section (1) are independent-stage Residents may be placed and deployed to other health service facilities as needed.
- (6) Deployed Residents as referred to in section (1) and section (5) are granted a practice license by the Minister.
- (7) Deployed Residents as referred to in (1) and section (5) are entitled to obtain service remuneration and/or incentives.
- (8) In addition to obtain service remuneration as referred to in section (7), residents deployed at other Health Service Facilities may also receive additional facilities depending on the capacity of the RSPPU, Hospital Network, Educational Venue, and/or other health service facilities needed.

## Paragraph 3

### Post-Education Deployment

#### Article 26

- (1) Post-education deployment as referred to in Article 24 section (3) point b is applied to Residents who complete their specialist/subspecialist education based on:

- a. the regency/municipality selected during registration; or
  - b. deployment needs as determined by the Minister.
- (2) The Residents as referred to in section (1) are obligated to be available for deployment according to the period specified by legislation.
  - (3) Deployed Residents as referred to in section (1) are granted a practice license by the Minister.
  - (4) The practice license as referred to in section (2) may only be used in the regency/municipality of deployment of Residents.

## Part Seven

### Educational Program Funding

#### Article 27

- (1) Funding for the performance of RSPPU functions and duties is jointly borne by the RSPPU owner and other lawful funding sources in accordance with the provisions of legislation.
- (2) The funding as referred to in section (1) is calculated based on:
  - a. unit cost for organizing education; and
  - b. service performance,as determined by the RSPPU.
- (3) Unit cost calculations as referred to in section (2) are stipulated by the Minister.
- (4) In determining unit cost as referred to in section (2), RSPPU refers to the unit cost calculations determined by the Minister as referred to in section (3).

## Part Eight

### Educational Funding Assistance

#### Article 28

- (1) Residents in specialist and subspecialist education programs at RSPPU are entitled to receive educational funding assistance.



- (2) Educational funding assistance as referred to in section (1) may be sourced from:
  - a. the state budget;
  - b. local budgets; and/or
  - c. other lawful sources,in accordance with in accordance with the provisions of legislation
- (3) The components and amount of funding assistance are regulated under cost standards set by:
  - a. the minister administering government affairs in the field of state finance; or
  - b. other institutions providing educational funding assistance.
- (4) Technical guidelines for granting educational funding assistance are determined by the Minister.

## CHAPTER IV CURRICULUM

### Part One General

#### Article 29

- (1) Specialist/subspecialist education programs are conducted in accordance with the Curriculum.
- (2) The Curriculum are developed by the RSPPU in collaboration with the Collegium based on national standards for specialist/subspecialist education in accordance with the provisions of legislation.
- (3) The Curriculum as referred to in section (2) are used as the guideline for the implementation of:
  - a. the learning process;
  - b. assessment;
  - c. research;
  - d. community service;
  - e. determination of study period; and
  - f. termination of study period.

Part Two  
Curriculum Implementation

Article 30

- (1) The learning process as referred to in Article 29 section (3) point a considers:
  - a. individual and public health issues as well as developments in science and technology;
  - b. patient, public, Resident, and educator safety in the form of interaction among educators, Residents, patients, the community, and other learning resources;
  - c. interprofessional health collaboration approach; and
  - d. Resident's study load and learning target.
- (2) The learning process as referred to in section (1) must be Resident-centered.

Article 31

- (1) The assessment as referred to in Article 29 section (3) point b is carried out in a structured manner at each stage of the learning process.
- (2) The assessment as referred to in section (1) covers all educational activities consisting of knowledge, skills and behaviors.

Article 32

- (1) The research as referred to in Article 29 section (3) point c is carried out in the form of clinical research.
- (2) The clinical research as referred to in section (1) is carried out within the scope of knowledge in the field of health in accordance with specialist medical services and/or other research by following the code of ethics and provisions of legislation.
- (3) The clinical research as referred to in section (2) must be documented by Residents and RSPPU.

### Article 33

- (1) The community service as referred to in Article 29 section (3) point d is carried out in the form of health services to the community.
- (2) The community service as referred to in section (1) is carried out within the scope of individual health efforts and public health efforts.
- (3) The community service as referred to in section (2) must be documented by Residents and RSPPU.

### Article 34

- (1) Determination of the study period as referred to in Article 29 section (3) point e is determined based on the Curriculum of each Study Program.
- (2) The study period as referred to in section (1) may be extended by a maximum of half the study period in accordance with the Curriculum.
- (3) The extension of the study period as referred to in section (2) is given to Residents with the approval of the RSPPU leader.

### Article 35

Termination of the resident's study period consists of:

- a. temporary termination of study period; and
- b. permanent termination of study period.

### Article 36

- (1) Temporary termination of study period as referred to in Article 35 point a may be in the form of suspension.
- (2) The suspension as referred to in section (1) is given to residents who violate the rules set by the RSPPU.

### Article 37

Permanent termination of study period as referred to in Article 35 point b is applied if the residents:

- a. do not achieve competency at any stage of the education process;
- b. have exceeded the maximum number of study periods;

- c. have been proven to commit ethics violation and/or severe bullying conduct;
- d. have been proven to commit professional/disciplinary violations and/or criminal offenses after being proven criminal; and
- e. quit at their own request.

#### Article 38

Technical instructions regarding the Curriculum implementation as referred to in Article 30 to Article 37 are determined by the RSPPU leader.

#### Part Three

#### Certificate of Profession, Certificate of Competency, and Degree

#### Article 39

- (1) At the end of the education period, Residents of specialist/subspecialist programs at RSPPU must take a national standard competency test.
- (2) The competency tests as referred to in section (1) are organized by the RSPPU in collaboration with the Collegium.
- (3) Residents who pass the competency test as referred to in section (1) obtain a Certificate of Competence, Professional Certificate, and degree.
- (4) Competency Certification as referred to in section (3) is issued by the Collegium not later than 1 (one) month after passing the competency test.
- (5) Professional Certificates and degrees as referred to in section (3) are awarded by the RSPPU together with higher education institutions partners.

#### CHAPTER V

#### HUMAN RESOURCES

Article 40

- (1) Human resources for specialist/subspecialist education programs at RSPPU consist of:
  - a. educators and administrative staff who are not Medical Professionals and Health Professionals;
  - b. Medical Professionals and Health Professionals;
  - c. researchers and/or engineers; and
  - d. other personnel as needed.
- (2) Educators and administrative staff as referred to in section (1) point a include lecturers and education personnel at higher education institutions.
- (3) Medical Professionals and Health Professionals as referred to in section (1) point b include Medical Professionals and Health Professionals both as clinical educators and not clinical educators.
- (4) Medical Professionals and Health Professionals as clinical educators as referred to in section (3) provide health services at the RSPPU and carry out educational duties, and can carry out research and / or community service.
- (5) Medical Professionals and Health Professionals who are not clinical educators as referred to in section (3) who provide health services at RSPPU may carry out educational, research, or community service duties.
- (6) The number, type, and qualifications of Human Resources as referred to in section (1) are adjusted to the needs based on the educational standards of each type of specialist/subspecialist education.

CHAPTER VI

UFP

Article 41

- (1) In order to coordinate the entire clinical learning process at the Teaching Hospital and / or organize specialist / subspecialist program education at RSPPU, the head of the teaching hospital or the RSPPU leader forms UFP.
- (2) UFP as referred to in section (1) consists of at least:
  - a. the field of education;

- b. the field of education quality assurance; and
  - c. the field of education support.
- (3) UFP as referred to in section (1) is led by a chairperson who is responsible to the RSPPU leader.
- (4) UFP as referred to in section (1) has functions to:
- a. organize education of hospital-based specialist/subspecialist programs;
  - b. carry out education coordination; and
  - c. conduct quality assurance of education.
- (5) In carrying out the functions as referred to in section (4), UFP carries out the following duties to:
- a. provide administrative support for the clinical learning process at the Teaching Hospital or RSPPU;
  - b. develop annual activity and budgets plans for clinical learning as needed;
  - c. prepare the planning of means and infrastructures needed by Residents;
  - d. establish an integrated information system to support the performance of service functions, education, and research in the fields of medical research, dentistry, and other health;
  - e. coordinate in order to facilitate all Residents who carry out clinical learning, as well as lecturers and supervisors who guide and supervise the clinical learning process of Residents at the Teaching Hospital or RSPPU;
  - f. supervise and coordinate the performance assessment of teaching staff for the entire service process carried out, including those carried out in the teaching Hospital Network or RSPPU and/or those related to the referral system;
  - g. conduct monitoring and evaluate the implementation of the clinical learning process of learners; and
  - h. report works results periodically to the leader of the teaching Hospital or the RSPPU leader.

- (6) In addition to carrying out the duties as referred to in section (5), UFP also carries out the preparation and development of curriculum together with the Collegium.
- (7) Technical guidelines regarding the organizational structure, authority, obligations, functions, and duties of UFP as referred to in section (2) to section (6) are determined by the Minister.

## CHAPTER VII EDUCATION QUALITY ASSURANCE SYSTEM

### Article 42

- (1) RSPPU implements education quality assurance efforts coordinated by the field of UFP education quality assurance.
- (2) The education quality assurance system as referred to in section (1) consists of:
  - a. internal quality assurance system; and
  - b. external quality assurance system.
- (3) The internal quality assurance system as referred to in section (2) point a is a systemic activity of education quality assurance by each RSPPU by involving partner higher education institutions to control and improve implementation in a planned and sustainable manner.
- (4) The external quality assurance system as referred to in section (2) point b is followed by the RSPPU by following the national or international accreditation system in accordance with the provisions of legislation.

## CHAPTER VIII PATIENT SAFETY AND RESIDENT WELL-BEING

### Part One Patient Safety

### Article 43

RSPPU, Hospital Network, and/or Education Venue in organizing specialist/subspecialist education programs are

obligated to implement patient safety standards in accordance with the provisions of legislation.

Part Two  
Resident Well-Being

Article 44

- (1) RSPPU is responsible for the resident well-being in specialist/subspecialist education programs.
- (2) The resident well-being as referred to in section (1) is at least in the forms of:
  - a. determination of workload;
  - b. working hour arrangements;
  - c. granting of leave; and
  - d. provision of social security in accordance with the provisions of legislation.

Article 45

- (1) Determination of workload for Residents as referred to in Article 44 section (2) point a is adjusted to the workload provisions in RSPPU and Hospital Network.
- (2) The workload as referred to in section (1) is a maximum of 80 (eighty) hours per week by considering:
  - a. learning activities;
  - b. shift duty;
  - c. on call duties; and
  - d. performance targets.
- (3) Under certain conditions, residents can be given an additional workload of a maximum of 10% (ten percent) per week.
- (4) Additional workload as referred to in section (3) is given by the chairperson of the UFP with the knowledge of the RSPPU leader and the person in charge of patient services.

Article 46

- (1) Working hour arrangements as referred to in Article 44 section (2) point b are carried out in accordance with the provisions determined by the RSPPU and its network.



- (2) Working hour arrangements as referred to in section (1) consider the educational tasks and competency achievement of residents.

#### Article 47

- (1) Granting leave as referred to in Article 44 section (2) point c consists of:
  - a. annual leave;
  - b. maternity leave;
  - c. sick leave; and
  - d. important reason leaves.
- (2) Annual leave as referred to in section (1) point a is granted for a maximum of 12 (twelve) workdays per year which cannot be carried out consecutively.
- (3) Maternity leave as referred to in section (1) point b is implemented in accordance with the provisions of legislation.
- (4) Sick leave as referred to in section (1) point c may be granted for a maximum of 3 (three) workdays or a maximum of 20% (twenty percent) of the learning period.
- (5) The important reason leaves as referred to in section (1) point d may be granted if:
  - a. fulfilling the scientific task of Education; or
  - b. having other reasons in accordance with the provisions of legislation.

### CHAPTER IX

#### RECORDING AND REPORTING

#### Article 48

- (1) RSPPU records and reports the implementation of specialist/subspecialist education programs periodically to the Minister and the minister administering government affairs in the field of education.
- (2) Recording and reporting of the implementation of specialist/subspecialist education programs as referred to in section (1) is carried out through the RSPPU information system.

- (3) The RSPPU information system as referred to in section (2) is integrated with the national health information system and higher education database.
- (4) Data and information in the RSPPU information system that is integrated into the higher education database at least includes data on residents, educators, and learning records.

## CHAPTER X GUIDANCE AND SUPERVISION

### Article 49

- (1) Guidance and supervision of the implementation of specialist/subspecialist education are carried out periodically by the Minister and the minister administering government affairs in the field of education.
- (2) Guidance and supervision as referred to in section (1) are carried out through:
  - a. advocacy, dissemination, and technical guidance; and
  - b. monitoring and evaluation.
- (3) In organizing guidance and supervision as referred to in section (2), it may involve the RSPPU, collegium, and other related parties.

### Article 50

- (1) Monitoring and evaluation of the implementation of specialist/subspecialist education programs is carried out prospectively, periodically, and continuously.
- (2) Monitoring and evaluation are conducted on:
  - a. residents;
  - b. learning process;
  - c. educators; and
  - d. education providers.
- (3) The monitoring and evaluation of residents, learning processes, and educators as referred to in section (2) point a, point b, and point c are carried out by the RSPPU and may involve the Collegium.

- (4) The monitoring and evaluation as referred to in section (2) are conducted by involving residents.
- (5) The monitoring and evaluation of education providers as referred to in section (2) point d are conducted by the Minister and the minister administering government affairs in the field of education.

#### Article 51

- (1) The monitoring and evaluation of residents as referred to in Article 50 section (2) point a include:
  - a. learning hours and performance of resident; and
  - b. service hours and performance of resident.
- (2) The monitoring and evaluation of the learning process as referred to in Article 50 section (2) point b ensure the suitability of the teaching and learning process with the learning plan.
- (3) The monitoring and evaluation of educators as referred to in Article 50 section (2) point c include:
  - a. teaching hours and performance of educators;
  - b. compliance with regulations and ethics during the education process; and
  - c. ability to transfer, apply, and develop evidence-based knowledge and skills.
- (4) The monitoring and evaluation of education providers as referred to in Article 50 section (2) point d include:
  - a. admission selection;
  - b. quality of education;
  - c. education facilities;
  - d. Education system; and
  - e. utilization of education graduates.

#### Article 52

- (1) Residents who do not carry out the obligations as referred to in Article 26 section (2) are subject to administrative sanctions by the authorized official in the forms of:
  - a. written warning;
  - b. refund of education funding assistance fees;

- c. disallowance for registering specialist/subspecialist education programs at RSPPU; and/or
  - d. revocation of registration certificate in accordance with the provisions of legislation.
- (2) Residents who get permanent termination of study period as referred to in Article 37 are subject to administrative sanctions by authorized officials in the forms of:
  - a. written warning;
  - b. refund of education funding assistance; and/or
  - c. disallowance for registering specialist/subspecialist education programs at RSPPU.
- (3) Residents who violate the provisions regarding learning hours and performance of residents as well as service hours and performance of residents as referred to in Article 51 section (1) are subject to administrative sanctions by the RSPPU leader in the forms of:
  - a. written warning;
  - b. disallowance for taking part in learning evaluations; and/or
  - c. suspension.
- (4) Educators who violate the provisions of teaching hours and performance of educators, as well as compliance with regulations and ethics during the Education process as referred to in Article 51 section (3) point a and point b, are subject to administrative sanctions by the RSPPU leader in the forms of:
  - a. written warning;
  - b. termination as an educator; and/or
  - c. termination as an employee in accordance with the provisions of legislation.

#### Article 53

- (1) RSPPU is required to organize specialist/subspecialist education programs in accordance with the provisions on education as regulated in this Ministerial Regulation.
- (2) RSPPU that does not carry out the obligations as referred to in section (1) are subject to administrative sanctions by the authorized official in the forms of:

- a. written warning;
- b. temporary termination of new resident enrolment activities;
- c. temporary termination of education implementation activities; and/or
- d. revocation of education implementation license.

#### Article 54

- (1) Authorized officials and procedures for imposing administrative sanctions as referred to in Article 52 section (1) and section (2) are determined by senior executive position who organizes the task of formulating and implementing policies in the field of health professionals.
- (2) Authorized officials and procedures for imposing administrative sanctions as referred to in Article 52 section (3) and section (4) as well as Article 53 section (2) point a, point b, and point c are determined by senior executive position who organizes the task of formulating and implementing policies in the field of health services.
- (3) Authorized officials and procedures for the imposition of administrative sanctions in the form of revocation of education implementation licenses as referred to in Article 53 section (2) point d are implemented in accordance with the provisions of legislation.

### CHAPTER XI

#### CLOSING PROVISIONS

#### Article 55

- (1) RSPPUs that have received license to open study programs from the minister administering government affairs in the field of education in the context of assignments must meet the requirements in accordance with the provisions of legislation within a maximum period of 2 (two) years from the time the license to open the study program is granted.
- (2) Before the period of 2 (two) years ends, the minister administering government affairs in the field of education evaluate the fulfilment of the requirements by the RSPPU

as referred to in section (1) and follow up the evaluation results in accordance with the provisions of legislation.

- (3) The evaluation and follow-up of the evaluation results by the minister administering government affairs in the field of education as referred to in section (2) must involve the Minister.

#### Article 56

This Ministerial Regulation comes into force on the date of its promulgation.

In order that every person may know it, it is ordered to promulgate this Ministerial Regulation by its placement in the State Bulletin of the Republic of Indonesia.

Issued in Jakarta  
on 10 October 2024  
MINISTER OF HEALTH OF THE  
REPUBLIC OF INDONESIA,

signed

BUDI G. SADIKIN

Promulgated in Jakarta  
on 14 October 2024  
DIRECTOR GENERAL OF LEGISLATION AD INTERIM  
OF THE MINISTRY OF LAW AND HUMAN RIGHTS OF THE REPUBLIC OF  
INDONESIA,

signed

ASEP N MULYANA  
STATE BULLETIN OF THE REPUBLIC OF INDONESIA OF 2024 NUMBER 679

Jakarta, 20 August 2025  
Has been translated as an Official Translation  
on behalf of the Minister of Law  
of the Republic of Indonesia  
DIRECTOR GENERAL OF LEGISLATION,



DHAHANA PUTRA