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Government Coordination in Implementing Digital Innovation-Based Health Malpractice Investigations in DKI Jakarta Province

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Abstract

Objective: This study aims to analyze governmental coordination in the investigation of medical malpractice specifically within the context of digital innovation in DKI Jakarta Province; to identify factors facilitating or hindering such coordination; and to formulate strategies to strengthen coordination and enhance the effectiveness of health law enforcement. **Theoretical framework:** The study employs George R. Terry's Coordination Theory, which emphasizes the importance of goal alignment, task distribution, communication, and inter-agency synchronization, alongside Digital Innovation Theory, which explains the use of digital technology to improve organizational governance effectiveness. **Literature review:** Previous research has generally addressed medical malpractice from the perspectives of criminal law, professional ethics, or patient protection; however, studies regarding the integration of governmental coordination with digital innovation in the investigation process remain limited. **Method:** This study utilizes a qualitative method with a descriptive approach based on a constructivist paradigm. Data collection involved primary sources (interviews, observations, and documentation) and secondary sources (laws and regulations, policy documents, and scholarly literature). **Results:** The study reveals that while governmental coordination is supported by adequate regulations, implementation faces obstacles such as fragmented authority, weak cross-sector communication, a lack of integrated information systems, and suboptimal use of digital technology to support investigations. **Implications:** The findings recommend regulatory harmonization, the development of cross-sector standard operating procedures, the establishment of a permanent coordination forum, the integration of digital platforms, and human resource capacity building to strengthen investigation effectiveness. **Novelty:** This study proposes the Digital Collaborative Investigation Model (DCIM), a digital innovation-based governmental coordination model that integrates regulations, institutional frameworks, digital information systems, and human resources to achieve medical malpractice investigations that are more effective, transparent, collaborative, and accountable.

Keywords: digital innovation, government coordination, medical malpractice, investigation, dki jakarta province.

INTRODUCTION

Health services are a fundamental right of every citizen guaranteed in Article 28H paragraph (1) of the 1945 Constitution of the Republic of Indonesia. The fulfillment of these

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rights is not only related to access to health services, but also to ensuring legal protection for patients and medical personnel [1], [2]. In this context, the government has the responsibility to build a law enforcement system that is able to ensure the professionalism of health workers while providing legal certainty against alleged malpractice [3]. Along with the development of digital technology, health service governance increasingly demands effective coordination between government agencies so that the law enforcement process can take place quickly, transparently, and accountably [4].

The investigation of alleged health malpractice is a complex process because it involves legal aspects, professional ethics, and the discipline of medical personnel. Based on Law Number 17 of 2023 concerning Health, investigations of medical personnel must be preceded by recommendations from the Professional Discipline Council (MDP). This condition causes the success of the investigation to depend heavily on coordination between the Police, the Ministry of Health, the Health Office, MDP, and health service facilities [5]. However, coordination that is not optimal still poses various obstacles, such as overlapping authority, delays in information exchange, differences in regulatory interpretations, and difficulties in obtaining medical evidence [6]. As a result, the law enforcement process is often slow and does not provide optimal legal certainty.

The urgency of this research is increasing as cases of alleged malpractice in Indonesia increase. Data from the Ministry of Health shows that during the period 2023 to mid-2025, there were 51 complaints of alleged malpractice, with 24 cases resulting in patient deaths (Kompas, 2025). Interestingly, most cases were identified through social media and mass media rather than through official reporting mechanisms. This phenomenon shows that there is still low public trust in the available complaint system and suboptimal coordination between agencies in responding to alleged violations of health services [7]. This condition has the potential to cause legal uncertainty as well as reduce public trust in health institutions and law enforcement officials.

Various cases of alleged malpractice that have come to the public's attention, such as surgical procedure errors, negligence in medical procedures, and unlicensed health practices, show that the investigation of health cases requires a more integrated coordination system [8]. One of the main obstacles faced by investigators is the difficulty of obtaining medical records and supporting documents due to lengthy administrative procedures and the lack of integration of interagency data exchange systems. This condition hinders the evidentiary process and slows down the settlement of cases, so that legal protection for victims and medical personnel has not been optimally realized [9]. Therefore, governance innovations are needed that are able to strengthen cross-sector coordination through the use of digital technology.

The development of digital technology provides a great opportunity to increase the effectiveness of investigations of alleged health malpractices through data integration and collaboration between agencies. The concept of Digital Government explains that digital transformation is able to improve the efficiency of public services through the use of information technology, data interoperability, and simplification of bureaucratic processes. Meanwhile, the theory of Collaborative Governance emphasizes that the resolution of complex public problems can only be achieved through cooperation between stakeholders based on communication, trust, and clear sharing of responsibilities [10], [11]. In the context of the investigation of health malpractice, coordination between the Police, the Ministry of Health, the Health Office, the Professional Disciplinary Council, and health service facilities is the main factor to realize an effective, transparent, and accountable investigation process. The use of innovations such as electronic medical records (EMR), digital forensics, and integrated reporting systems has the potential to speed up the evidentiary process while strengthening the principles of good governance through increased transparency and accountability [12].

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Although various studies have discussed health law enforcement, medical malpractice, and digital transformation in the public sector, most studies still examine aspects of criminal law, professional ethics, or partial patient protection. Previous research has not integrated much of the perspective of government coordination with the use of digital innovation as the main strategy in the implementation of health malpractice investigations [13]. In addition, the implementation of Law Number 17 of 2023 concerning Health and Minister of Health Regulation Number 3 of 2025 still leaves various coordination problems, such as the lack of integrated data exchange, the lack of common operational standards, and the lack of optimal synergy between agencies in obtaining medical evidence. This condition shows that there is a research gap regarding the government coordination model that is able to connect aspects of regulation, institutions, and digital technology in an integrated manner in the process of investigating health malpractices [14].

Based on this gap, the novelty of this research lies in the development of the concept of government coordination based on digital innovation in the implementation of health malpractice investigations in DKI Jakarta Province. This research not only analyzes inter-institutional relationships in the investigation process, but also offers a strategy for integrating digital systems through electronic data exchange, the use of electronic medical records, and cross-sector coordination mechanisms that are more adaptive to technological developments. This approach is expected to be able to produce a coordination model that strengthens the effectiveness of investigations, accelerates the evidentiary process, increases legal certainty, and maintains a balance of legal protection for patients and medical personnel.

Based on this description, this study is directed to analyze the government's coordination mechanism in the implementation of digital innovation-based health malpractice investigations in DKI Jakarta Province, identify supporting and inhibiting factors of coordination, and formulate strategies to strengthen coordination that are more effective in supporting health law enforcement. The results of the research are expected to contribute to the development of collaborative governance theory from the perspective of digital governance, as well as become policy recommendations for the government, law enforcement officials, and health agencies in building a more integrated, responsive, transparent, and protection-oriented malpractice investigation system.

LITERATURE REVIEW

Government Coordination in the Implementation of Health Malpractice Investigations

Coordination is one of the management functions that plays an important role in harmonizing the activities of various individuals and organizations so that common goals can be achieved effectively. According to George R. Terry (1964), coordination is an effort to unite various activities so that each element of the organization works in harmony to avoid duplication of tasks, conflicts of authority, and inefficiencies in the implementation of work. In the context of government, coordination does not only take place at the individual level, but also between working groups and between institutions that have different authorities [15]. Terry distinguishes coordination into individual coordination, intergroup coordination, and external coordination, all of which are foundational in realizing effective governance. Through good coordination, each agency can carry out its functions according to its authority without neglecting the interests of the organization as a whole.

This theory is very relevant in the implementation of investigations into alleged health malpractices involving various institutions, such as the National Police of the Republic of Indonesia, the Ministry of Health, the DKI Jakarta Provincial Health Office, the Professional Disciplinary Council (MDP), the Prosecutor's Office, and health service facilities. The

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complexity of investigating health cases requires intensive communication, clear division of duties, and rapid exchange of information so that the law enforcement process can run effectively. However, various problems such as overlapping authority, delays in obtaining medical records, differences in regulatory interpretations, and suboptimal coordination mechanisms across sectors are still obstacles in resolving health malpractice cases [16]. Therefore, George R. Terry's coordination theory is a conceptual basis for analyzing how synergy between government agencies can be strengthened to increase the effectiveness of health malpractice investigations in DKI Jakarta Province.

Digital Innovation in Strengthening Government Coordination in Health Malpractice Investigation

The development of information technology has encouraged the birth of digital innovation as a new approach to improving the effectiveness of organizations, including government organizations. Hukal, Göbeler, and Henfridsson define digital innovation as a co-creation process in producing new services or products through the recombination of digital and physical components. Furthermore, Nambisan et al explained that digital innovation is the process of creating business models, services, and organizational processes that utilize digital technology to generate added value [17]. Meanwhile, Hund et al emphasized that digital innovation does not only include the creation of new technologies, but also the adoption and implementation of digital solutions that are able to increase organizational effectiveness. Thus, digital innovation is understood as a transformation process that integrates digital technology into organizational governance to create more efficient, transparent, and adaptive services [18].

In the investigation of alleged health malpractices, digital innovation is a strategic instrument to strengthen coordination between government agencies through the use of electronic medical records (EMR), digital forensics, integrated reporting systems, and electronic data exchange platforms. The characteristics of digital innovation that are non-linear, democratic, and flexible allow the coordination process to no longer depend on conventional bureaucratic mechanisms, but to be carried out in real time through an integrated information system [19]. The implementation of digital innovations is expected to be able to accelerate the process of verifying medical evidence, increase transparency, minimize overlap of authority, and strengthen accountability in the investigation of health malpractice. Therefore, digital innovation theory is an important foundation in this study to explain how digital transformation can support more effective government coordination in realizing responsive, integrated, and protection-oriented health law enforcement.

METHODOLOGY

This study employed a qualitative research design with a descriptive approach grounded in the constructivist (interpretivist) paradigm to explore the dynamics of intergovernmental coordination in digital innovation-based health malpractice investigations in DKI Jakarta Province [20]. A qualitative approach was considered appropriate because the research focuses on understanding complex institutional interactions, coordination practices, and stakeholders' perspectives rather than measuring causal relationships through quantitative indicators [21].

Primary data were collected through in-depth interviews with key stakeholders, direct observations, and documentation of coordination processes involving the Indonesian National Police, the DKI Jakarta Provincial Health Office, the Ministry of Health, the Professional Disciplinary Council, and healthcare facilities. Secondary data were obtained from relevant legal and policy documents, including Law Number 17 of 2023 concerning Health, Minister of Health Regulation Number 3 of 2025, government reports, judicial decisions, and related scientific literature.

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The collected data were analyzed using descriptive qualitative techniques through data reduction, data categorization, interpretation, and thematic analysis to identify patterns of coordination, institutional challenges, supporting factors, and the contribution of digital innovation to improving the effectiveness of malpractice investigations. This methodological approach enables a comprehensive understanding of the governance mechanisms underlying cross-sector collaboration while generating practical recommendations for strengthening institutional coordination, integrating digital information systems, and enhancing transparency and accountability in health malpractice investigations in DKI Jakarta Province.

RESULTS AND DISCUSSION

Government Coordination in the Investigation of Health Malpractices

Government coordination is the main factor in supporting the effectiveness of investigations into alleged health malpractices because the handling process involves various agencies with different authorities [22]. Based on Law Number 17 of 2023 concerning Health, investigations of medical personnel and health workers are not only the authority of law enforcement officials, but also require the involvement of the Professional Disciplinary Council (MDP) as a recommender before the legal process is continued. In addition, the Jakarta Provincial Health Office, health service facilities, professional organizations, and the Police have interrelated functions in the process of proving a case [23]. The involvement of many of these actors shows that the success of investigations is highly determined by the government's ability to build planned, integrated, and sustainable coordination. According to George R. Terry (1964), coordination is the process of harmonizing various organizational activities so that all parties move towards the same goal effectively and efficiently [24]. Thus, coordination is not just communication between agencies, but also includes common perceptions, division of authority, and synchronization of task implementation.

Judging from George R. Terry's coordination theory, the implementation of health malpractice investigations in DKI Jakarta Province shows that coordination has been carried out at the internal and external levels, although its effectiveness is still not optimal. At the internal level, each institution already has a working mechanism according to its main tasks and functions [25]. The police carry out the investigation and investigation process, the Health Office carries out the function of coaching and supervision, while the Professional Discipline Council conducts an examination of alleged violations of medical personnel discipline based on the Regulation of the Minister of Health Number 3 of 2025. However, when the process involves more than one institution, coordination still tends to take place administratively and based on the needs of a particular case [26]. This condition shows that inter-agency relations have not been supported by a permanent coordination system, so the investigation process often relies on personal communication and bureaucratic mechanisms that take a relatively long time.

Coordination problems are increasingly seen in the process of exchanging information and collecting evidence. In practice, investigators still face obstacles to obtaining medical records, examination results, and health service documents because each agency has different administrative procedures. In addition, the absence of common operational standards causes the process of delivering information to be often repetitive and requires clarification from various parties. This condition results in the investigation running more slowly and has the potential to cause differences in perception regarding the limits of the authority of each institution. This finding is in line with the opinion of Bossert (1998), who stated that government coordination will experience obstacles if the authority structure is not followed by clear communication and integration mechanisms. Similarly, Frederickson et al emphasized that the success of public governance is greatly influenced by the ability of organizations to build cross-sector collaboration in dealing with complex problems [27]–[29].

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From the perspective of modern governance, the coordination pattern that is still conventional needs to be directed towards a more adaptive system through the use of digital innovation. The use of Electronic Medical Record (EMR), electronic reporting systems, and digital interagency data exchange can accelerate access to information needed in the investigation process. According to Yuliastuti et al, digital innovation is not only related to the use of technology, but also changes in organizational processes to generate more effective value [30]. This opinion is strengthened by Metris et al, who state that digital innovation is able to increase collaboration through the integration of technology with organizational activities [31]. Therefore, digitizing coordination will reduce bureaucratic barriers, speed up the evidence verification process, and increase transparency and accountability in the investigation of health malpractices.

Based on the results of the analysis, it can be understood that government coordination in the investigation of health malpractices in DKI Jakarta Province has a strong legal foundation, but its implementation still faces various structural and administrative obstacles. The absence of an integrated coordination mechanism causes communication between agencies to take place partially, while the development of digital technology has not been optimally utilized to support the investigation process. Thus, strengthening coordination needs to be directed at the development of a collaborative system that integrates regulations, institutions, human resources, and digital technology in one integrated work mechanism. This approach is expected to increase the effectiveness of law enforcement, provide legal certainty for the community, and strengthen the quality of health services in DKI Jakarta Province.

Table 1. Analysis of Government Coordination in the Investigation of Health Malpractices

Dimensions	Current Conditions	Problems	Strengthening Efforts
Internal Coordination	Each agency carries out its duties according to its authority	Not yet connected systematically	Strengthening internal SOPs and periodic coordination
Inter-Agency Coordination	Carried out when there is a case report	Incidental and sectoral	Permanent cross-agency coordination forum
Information Exchange	Still using administrative procedures	Slow processes and unintegrated data	Data integration and Electronic Medical Record (EMR)
Decision Making	Requires MDP recommendations	Potentially prolonging the investigation process	Standardization of coordination flows and service deadlines
Governance	Guided by Law No. 17 of 2023 and Permenkes No. 3 of 2025	Implementation is not yet fully integrated	Strengthening governance based on digital innovation

Government coordination in the investigation of health malpractices in DKI Jakarta Province has been supported by a clear regulatory framework, but its implementation is still not fully effective because coordination between agencies tends to be administrative and not yet integrated. Based on the coordination theory of George R. Terry, the effectiveness of coordination requires common goals, clear division of authority, continuous communication, and synchronization of task implementation [32]. Therefore, the use of digital innovation is a strategic step to build faster, transparent, and accountable coordination so as to improve the quality of investigations and strengthen legal protection for patients and medical personnel.

Obstacles and Supporting Factors for Government Coordination in the Investigation of Health Malpractices

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Government coordination in the investigation of health malpractice is a process that is influenced by various institutional factors, regulations, resources, and inter-agency communication mechanisms. In practice, the investigation of health malpractice cases is not only the responsibility of law enforcement officials, but also involves the DKI Jakarta Provincial Health Office, the Professional Disciplinary Council (MDP), the Ministry of Health, professional organizations, and health service facilities. The involvement of many of these institutions shows that the success of the investigation depends heavily on the ability of each institution to establish effective coordination. According to George R. Terry, coordination will run optimally if there is a common goal, clear division of tasks, continuous communication, and harmonious working relationships between implementers [33]. However, the results of the study show that the implementation of coordination in the investigation of health malpractices still faces various obstacles that cause the law enforcement process to not take place optimally, even though it has been supported by Law Number 17 of 2023 concerning Health and Regulation of the Minister of Health Number 3 of 2025.

One of the main obstacles found is the fragmentation of authority between institutions. Although each agency has its duties and functions that have been regulated in laws and regulations, implementation in the field still shows that there is an overlap between ethical examinations, professional discipline, and criminal investigation processes. Investigators must wait for recommendations from the Professional Disciplinary Council before proceeding with the legal process, while on the other hand, health care facilities must also complete internal administrative processes before providing the necessary documents [34]. As a result, the investigation process often experiences delays because each institution works based on its own procedures. This condition shows that the formal division of authority has not been fully followed by an integrated coordination mechanism. These findings are in line with the opinion of Widjaja, who explains that coordination will be difficult to realize if the organizational structure is not supported by effective communication and integration mechanisms [35].

In addition to the fragmentation of authority, this study also found that communication and information exchange are still quite dominant obstacles. The process of submitting medical records, medical audit results, and recommendations from the Professional Discipline Council is still carried out through different administrative procedures in each agency. The unavailability of operational standards for cross-sector procedures causes coordination to be carried out more in a casuistic manner and depending on the initiative of each official. This condition has an impact on the slow process of verifying evidence and has the potential to cause differences in perceptions in the handling of cases. According to Frederickson et al. (2018), the effectiveness of public governance is greatly influenced by the ability of organizations to build collaboration through open communication, rapid exchange of information, and inter-agency trust [36]. Therefore, weak communication mechanisms are one of the main causes of suboptimal government coordination in the investigation of health malpractices.

On the other hand, this study identifies a number of supporting factors that can strengthen government coordination. The existence of Law Number 17 of 2023 concerning Health provides certainty regarding the division of authority of each institution, while Regulation of the Minister of Health Number 3 of 2025 is a guideline in enforcing professional discipline for medical personnel and health workers. In addition, the government's commitment to accelerating digital transformation in the health sector through the implementation of Electronic Medical Record (EMR) and the development of a national health information system opens up opportunities for the creation of more effective coordination. Another supporting factor is the increasing awareness among institutions about the importance of collaboration in providing legal protection to patients and medical personnel [37]. However, these various potentials still require strengthening through the integration of information

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systems, increasing the capacity of human resources, and the establishment of a permanent coordination forum so that it does not depend only on the resolution of certain cases.

Based on the results of the analysis, it can be understood that the effectiveness of government coordination in the investigation of health malpractice is influenced by the balance between supporting and inhibiting factors. Obstacles in the form of fragmentation of authority, lack of integration of information systems, and weak communication across sectors are still the main challenges in realizing effective investigations. On the contrary, the existence of regulations, support for digital transformation policies, and increased inter-agency commitment are important capital to improve the quality of government coordination. Therefore, it is necessary to strengthen governance through regulatory harmonization, the preparation of joint operational standards, the development of a digital coordination platform, and the capacity building of apparatus so that coordination does not only run administratively, but also develops into a collaborative system that can support the health law enforcement process in a fast, transparent, and accountable manner [38].

Table 2. Obstacles and Supporting Factors for Government Coordination

Indicator	Supporting Factors	Inhibiting Factors	Implications for Investigations
Regulation	Law No. 17 of 2023 and Permenkes No. 3 of 2025	Interpretation of regulations that are not yet uniform	The coordination process has not been running optimally
Institutional	Task division has been established	Fragmentation of authority between institutions	Investigation takes longer
Communication	There is coordination in each case	There is no permanent coordination forum yet	Information is often received late
Information Systems	The implementation of EMR and digitization of services	Data has not been integrated between agencies	Less efficient evidence collection
Human Resources	Increased commitment to collaboration	Digital competence is not even	The use of technology has not been optimal

The results of the analysis show that government coordination in the investigation of health malpractices in DKI Jakarta Province is influenced by the interaction between supporting and inhibiting factors. Existing regulations, the division of institutional authority, and digital transformation policies are important capital in supporting coordination. However, its implementation still faces challenges in the form of fragmentation of authority, weak communication across sectors, and unintegrated information systems. Based on the theory of George R. Terry (1964), this condition shows that coordination has not fully fulfilled the principles of unity of goals, synchronization of implementation, and organizational integration. Therefore, it is necessary to strengthen governance through regulatory harmonization, permanent coordination forums, and digital technology integration so that health malpractice investigations can take place more effectively, transparently, and provide legal certainty for all parties.

Analysis of Strengthening Government Coordination Based on Digital Innovation in the Investigation of Health Malpractices

The results of the analysis in the previous discussion show that government coordination in the investigation of health malpractices in DKI Jakarta Province still faces various obstacles, both from institutional, regulatory, and information governance aspects. This condition indicates that improving regulations alone is not enough to increase the effectiveness of investigations, but needs to be supported by the transformation of the coordination system that utilizes digital innovation. The development of information

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technology provides opportunities for the government to build a faster, transparent, and integrated coordination mechanism through the use of digital information systems. According to Metris et al, digital innovation is a process of creating new value through the integration of digital technology into organizational processes so as to increase decision-making effectiveness and service quality [39]. Meanwhile, Widjaja et al explained that digital innovation is not only related to the use of technology, but also includes changes in organizational governance that allow for more adaptive cross-sector collaboration [40]. Therefore, strengthening government coordination in the investigation of health malpractices needs to be directed at the development of a digital ecosystem that connects all stakeholders in one integrated system.

One form of strengthening that can be done is through the construction of a digital coordination platform that integrates data from the Police, the DKI Jakarta Provincial Health Office, the Ministry of Health, the Professional Disciplinary Council (MDP), and health service facilities. So far, the process of exchanging information is still carried out through an administrative mechanism that takes a relatively long time, which has an impact on the delay in investigations. With an integrated digital platform, all agencies can access the same information in real time, ranging from community reports, electronic medical records, medical audit results, to recommendations from the Professional Disciplinary Council. The integration will reduce administrative duplication, speed up the evidentiary verification process, and increase accountability at every stage of the investigation. This approach is in line with the characteristics of boundaryless innovation proposed by Widjaja et al, namely the ability of digital technology to eliminate the boundaries of coordination between institutions so that the collaboration process becomes more effective [41].

In addition to the development of digital infrastructure, strengthening coordination also requires harmonization of institutional governance. According to George R. Terry (1964), effective coordination is determined not only by the availability of technology, but also by the clarity of the division of tasks, the common goals of the organization, continuous communication, and an integrated monitoring mechanism. Therefore, the government needs to develop a cross-sector Standard Operating Procedure (SOP) that regulates the coordination flow starting from the receipt of reports, professional discipline examinations, electronic data exchange, to the completion of the investigation process. In addition, the establishment of a permanent coordination forum involving all relevant agencies is a strategic step to strengthen communication, resolve differences in regulatory interpretations, and evaluate the implementation of investigations periodically. Thus, coordination is no longer reactive after a case arises, but develops into a collaborative mechanism that takes place continuously.

Strengthening coordination based on digital innovation must also be supported by increasing the capacity of human resources. Digital transformation will not provide optimal results if government officials, investigators, and health workers do not have adequate competence in utilizing information technology. Therefore, integrated training is needed on the use of Electronic Medical Record (EMR), health data security, digital forensics, and electronic system-based investigation governance [42]. This step will improve the ability of the apparatus to coordinate more effectively while strengthening the collaborative work culture between institutions. In addition, strengthening digital literacy will also reduce administrative errors, improve the quality of decision-making, and accelerate the resolution of health malpractice cases. In other words, the success of digital transformation depends not only on technology, but also on the readiness of the organization and the quality of the human resources that operate it.

Based on the results of the analysis, this study offers a conceptual model, "Digital Collaborative Investigation Model (DCIM)," as a novelty in strengthening government coordination in the investigation of health malpractices. This model integrates four main components, namely harmonious regulation, institutional coordination, digital information

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system integration, and strengthening human resource capacity. The four components interact with each other to create an investigation process that is faster, transparent, accountable, and oriented towards legal protection for patients and medical personnel. In contrast to previous research that focused more on aspects of criminal law or professional ethics, this study develops a new perspective by connecting the Coordination Theory of George R. Terry (1964) and the Theory of Digital Innovation from Metris et al. (2026) and Widjaja et al. (2025) in one comprehensive analytical framework. The model is expected to be a reference for the government in building a government coordination system that is more adaptive to digital transformation while strengthening the effectiveness of health law enforcement in Indonesia [43].

Table 3. Digital Innovation-Based Government Coordination Strengthening Model

Strategic Components	Existing Conditions	Proposed Reinforcement	Expected Impact
Regulation	Not yet fully harmonious	Preparation of cross-sector SOPs and policy harmonization	Legal certainty and uniformity of procedures
Institutional Coordination	Sectoral and casuistic in nature	Permanent inter-agency coordination forum	Synergy and acceleration of investigations
Information Systems	Data spread across various agencies	Integrated digital coordination platform, EMR, and digital forensics	Real-time data exchange and faster proofing
Human Resources	Digital competence is not even	Integrated training and digital literacy enhancement	Apparatus professionalism and coordination effectiveness
Innovation Model	There is no digital coordination model yet	Digital Collaborative Investigation Model (DCIM)	Collaborative, transparent, and adaptive investigation governance

The analysis shows that strengthening government coordination in the investigation of health malpractices requires a transformation that not only focuses on improving regulations, but also on developing governance based on digital innovation. The integration of digital coordination platforms, harmonization of cross-sectoral procedures, the establishment of permanent coordination forums, and the increase in the capacity of human resources are strategic factors to increase the effectiveness of investigations. As a scientific contribution, this research offers a Digital Collaborative Investigation Model (DCIM) that integrates the dimensions of government coordination and digital innovation in a single conceptual framework. The implementation of this model is expected to accelerate the investigation process, strengthen inter-institutional accountability, increase legal certainty, and support the realization of a more responsive, transparent, and fair health law enforcement system in DKI Jakarta Province.

Furthermore, the practical implementation of the Digital Collaborative Investigation Model (DCIM) necessitates a robust governance architecture that addresses both technical interoperability and legal safeguards. Beyond mere software integration, successful deployment depends on establishing standardized data-sharing protocols that respect patient confidentiality under Law Number 17 of 2023 while providing law enforcement officials and the Professional Disciplinary Council (MDP) with immediate, verifiable evidence. Inter-agency trust remains a pivotal determinant; thus, clear operational guidelines must delineate

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data access levels, ensuring sensitive medical records are retrieved solely for legitimate investigative inquiries.

Additionally, institutional resistance to procedural change requires proactive change management strategies, including joint simulation exercises and regular supervisory workshops involving police officers, health office administrators, legal experts, and medical ethics practitioners. From a policy standpoint, provincial regulations in DKI Jakarta must formally recognize digital evidentiary workflows to eliminate legal ambiguity during judicial proceedings. By embedding continuous feedback loops within the DCIM framework, regulatory bodies can dynamically adjust coordination protocols to match evolving digital health technologies. Ultimately, transitioning from a reactive administrative model to an integrated, tech-enabled collaborative ecosystem guarantees that health malpractice investigations achieve optimal judicial efficiency without compromising professional integrity or patient rights, thereby setting a sustainable benchmark for national health law enforcement.

CONCLUSION

This study demonstrates that government coordination in digital innovation-based health malpractice investigations in DKI Jakarta Province is supported by a well-defined legal framework and institutional mandates; however, its implementation remains suboptimal due to fragmented authority, sectoral coordination practices, limited interoperability of digital information systems, inconsistent operational procedures, and insufficient human resource capacity in digital governance. Although regulatory support, the government's digital transformation agenda, and the implementation of electronic medical records provide a strong foundation for institutional collaboration, these initiatives have not yet been fully integrated into a unified investigative framework. To address these challenges, the study recommends strengthening cross-sector governance through regulatory harmonization, the establishment of a permanent inter-agency coordination mechanism, standardized investigation procedures, integrated digital information platforms, and continuous capacity building for relevant stakeholders. As its primary theoretical and practical contribution, this research proposes the Digital Collaborative Investigation Model (DCIM), a conceptual framework that integrates regulatory, institutional, technological, and human resource dimensions to enhance coordination, transparency, accountability, and legal certainty in health malpractice investigations. The proposed model offers a strategic reference for improving digital governance and health law enforcement in Indonesia and provides a foundation for future studies examining the implementation and effectiveness of collaborative digital investigation systems in other regions or public service sectors.

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Author Contribution

The author solely conceived the research idea, designed the study, collected and analyzed the data, interpreted the findings, prepared the manuscript, revised the article critically, and approved the final version for publication without external writing assistance.

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Conflicts of Interest

The author declares that there are no financial, institutional, professional, or personal conflicts of interest that could have influenced the research design, data collection, analysis, interpretation of findings, or publication of this manuscript.

Use of Artificial Intelligence (AI)

The authors used AI tools solely for language editing and grammar improvement. All scientific content, analysis, and conclusions were developed, verified, and approved by the authors, who take full responsibility for the manuscript.

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