Policy Implementation of Online Learning at the Faculty of Medicine Hang Tuah University

(Case Study of Minister of Education and Culture Circular Letter Number 36962/MPK.A/HK/2020)

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Abstract—The occurrence of the COVID-19 Pandemic has changed the implementation of education, including Medical Education, which was originally face-to-face and turned into online learning. Not all learning at the Hang Tuah University Medical Faculty can be done online, especially skills learning materials. The purpose of this study is to describe and analyze implementation as well as to describe the factors that support and hinder the implementation of the Minister of Education and Culture Circular Letter Number 36962/MPK.A/HK/2020 concerning Online Learning at the Medical Faculty of Hang Tuah University. The research methodology uses a qualitative method with a case study approach. The research uses Merilee.S Grindle's implementation theory by paying attention to the factors that influence policy, namely policy content and policy context. The results of the study show that the implementation of online learning policies has been running but there are still problems using the Learning Management System, there have been changes to blended learning for medical skills material by adjusting to pandemic conditions.

Keywords—Policy, Implementation, Learning, Online COVID-19

INTRODUCTION

Education in medicine in general has objectives that cover three domains, namely affective, cognitive, and psychomotor. Affective attitude related to acceptance, responsiveness, assessment, organization, and characterization. Cognitive is the process of knowing abilities in the aspects of knowledge, understanding, application, analysis, evaluation and creation. Psychomotor is the movement behavior and coordination of motor skills including imitating, manipulation, precision, articulation and naturalization. These three aspects play a very important role and are closely connected in medical education. In the process all these aspects are intertwined in one series. Teaching methods for medical education in general are lectures, practicum, tutorials, medical skills, field activities, real work lectures, research, community service, thesis, extra-curricular activities, clinical rounds, and clinical guidance. (Kompas.com - 30/04/2020, 10:55 WIB)

According to the Regulation of the Minister of Law and Human Rights No. 34 of 2016 concerning criteria for districts/cities concerned with human rights, the target ratio for the number of general practitioners to the population is 1: 2,500, the number of doctors until the end of 2019 is 138 thousand general practitioners 20 thousand doctors specialist (detikhealth, 10 December 2020). The results of the Population Census (SP2020) in September 2020 recorded a population of 270.20 million people. From this data, 1 doctor serves 1,608,333 residents, there is still a very shortage of doctors in Indonesia. At the end of 2019 the outbreak of a disease that started in the Wuhan area of China, namely COVID-19 which was caused by Severe Acute Respiratory Syndrome Coronavirus 2 (SAR-CoV-2) which then in early 2020 affected the whole world, including Indonesia. Since March 11, 2020 WHO has declared it a pandemic outbreak (Kompas.com 12/3/2020). As of May 23, 2021 cases infected with covid in Indonesia were still very high, around 1,775,220 positive confirmed cases and 49,328 cases of death (Source: www.covid19.go.id) Since the pandemic hit until the end of January 2021 the number of doctors who died, doctors 161 doctors in general, 4 of whom are professors, 123 specialist doctors, 12 of whom are professors, five residents. So that a total of 289 doctors died, quoted from data on the number of deaths of Indonesian doctors by

profession from the IDI Mitigation Team survey, Sunday (sindonews.com 31/1/2021).

The consequences of the pandemic have brought lifestyle changes, including social and physical restrictions to prevent the spread of COVID-19. Education is one of those affected. The government through the Ministry of Education and Culture establishes a study from home policy. Learning from home can be carried out with Distance Learning (PJJ) through online learning, this learning is carried out without face-to-face but online using the internet network, in accordance with the SE of the Ministry of Education and Culture number 15 of 2020 concerning the implementation of learning from house during an emergency period of the spread of corona virus disease (covid-19). Based on SE No 36962/MPK.A/HK/2020 dated 17 March 2020 Online Learning and Working from Home in the Context of Preventing the Spread of Corona Virus Disease (COVID-19) issued by the Minister of Education and Culture. The government has asked to postpone holding events that invite many participants and replace them with video conferencing, online learning for students and students, employees, teachers, lecturers work teaching and giving lectures from home, unit leaders make guidelines for implementation. Circular Letter number 15 of 2020 dated 18 May 2020 issued by the Ministry of Education and Culture concerning guidelines for organizing learning from home during the emergency period of the spread of CORONA VIRUS DISEASE (COVID-19) with the aim of ensuring students' rights to education services, protecting educational units from the impact COVID-19 and preventing transmission.

Many tertiary institutions have responded to the instructions from the Ministry of Education and Culture, one of which is Hang Tuah University, through SE Chancellor No. SE/686/UHT.A0/III/2020 dated 16 March 2020 regarding the implementation of learning activities within the Hang Tuah University environment in the context of preventing COVID-19, all learning activities are carried out online without face to face. Faculty of Medicine through the Dean's Decree No. Kep/3997.A/UHT.B0.03/III/2020 concerning online learning for even semester students for the 2019-2020 Academic Year of the Faculty of Medicine, Hang Tuah University. All learning activities starting from practicum lectures, medical skills and exams are all carried out online. The Faculty of Medicine, Hang Tuah University has two Study Programs, namely the Medical Study Program and the Doctor Professional Education Study Program. Learning in the Medical Study Program uses a block system. Student study load and graduate learning outcomes in the Medical Education process are expressed in a system of blocks and/or modules that can be equated with semester credit units. (Regulation of the Minister of Research Technology and Higher Education of the Republic of Indonesia Number 18 of 2018, n.d., p. 8)

The Medical Study Program, Faculty of Medicine, Hang Tuah University in one semester consists of 3-5 blocks, which are carried out 3-6 weeks, according to the number of credits. There are two forms of learning, the first is intracurricular which consists of lectures, guest lectures, tutorials, laboratory practicum, medical skills, independent study, field learning experiences, thesis. The second form of extracurricular learning is community service and student activities. (Academic Handbook for Medical Study Program, 2020). Tutorials are held three times a week, every Monday, Wednesday and Friday. The morning schedule is for semesters 1, 2, 7, while the afternoon schedule is for semesters 3,4,5 and 6. The division of tutorial groups (each group consists of 10-13 students) with 1 lecturer. The exam system implemented is semester exams, final block exams, practicum exams, Structured Objective Oral Case Analysis (SOOCA) exams, medical skills exams, and thesis exams. The final block exam is held three times, namely the main exam, remedial exam and remedial exam. The SOOCA exam is held twice, namely the main exam and remedial exam. Likewise, the medical skills exam is carried out twice, namely the main exam and the remedial exam. The final block grade consists of the block written test score, the SOOCA score and the practicum score with a predetermined percentage. Meanwhile, the scores for the medical skills exam stand alone, not included in the block scores.

For Professional Level Education it is carried out at the Main Teaching Hospital of RSPAL (Central Naval Hospital) and several network hospitals and other vehicles. There are 16 sections/stases that must be passed in professional education, namely the sections of Internal Medicine, Surgery, Pediatrics, Obstetrics and Gynecology, Public Health Sciences, Neurology, Psychiatry, Dermatology and Venereology, Diseases. ENT, Ophthalmology, Forensic Medicine and Medicolegal, Medical Pharmacy, Radiology, Medical Rehabilitation, Lakesla, Anesthesia. The forms of learning at the professional level are lectures, discussions, assignments, independent study, direct observation, demonstrations, practicing with standardized teaching aids or patients. Assessment is carried out by means of written and/or oral case completion exams, Objective Structured Clinical Examination (OSCE), Work-based Assessments such as mini-CEX, and logbooks. (Academic Handbook for Medical Professional Education Study Program, 2020)

So far, online learning has been carried out at the Faculty of Medicine using the Zoom application as well as the Watsapp Group, which is often constrained due to internet connection. Lectures, practicum, medical skills, exams all via zoom. Restrictions on physical activity only allow distance learning related to cognitive aspects online. Psychomotor and affective aspects are difficult to carry out so that practicum activities, field assignments, activities at the hospital, and research are difficult to carry out. This activity cannot be replaced with the online distance learning model. The psychomotor aspect at the academic level is the most important aspect affected by this disaster because it requires physical presence, for example

practical anatomy, histology, physiology, biochemistry, and medical skills. The exam is in the form of OSCE (Objectives Structured Clinical Examination) which aims to test students' motoric capacities. This exam is the main assessment system for doctors' competence regarding clinical skills, this is also done online, students cannot practice directly. This can be an obstacle when they later enter professional education. For further preparation for professional education, you need to be equipped with skills while taking previous education, namely during academic education, through offline practicum and medical skills selected for material that really has to be carried out offline but because the situation is still in a pandemic, these activities are not included in the assessment and time to adjust conditions.

Rotation of clinical learning/stases at the professional level covering the sections of Internal Medicine, Surgery, Pediatrics, Obstetrics and Gynecology, and others is carried out online. E-learning and e-exam activities at home are limited to journal reading, responses and references. Cases that are usually found in Network Hospitals can no longer be given due to social restrictions, with online not all aspects of learning are achieved. With online learning, the method of rotating the clerkship stage (section round) in the hospital has changed, which was originally in 1 (one) time clerkship stage (section rotation) with half at the Main Teaching Hospital (RSPU), half at the Network Hospital (Network Hospital) then returned to the Main Hospital for exams and one clerkship station was completed, changed according to pandemic conditions. For professional students or so-called Junior Doctors (DM) there was once a temporary suspension of the clerkship station when the COVID-19 case increased, continuing the clerkship stage online. For Profession students who have just entered, the method is carried out online where the length of time is adjusted to conditions. At the time of online learning, half of one registrar's station was carried out online at RSPU and at Jejaring Hospital then moved stations while waiting for the pandemic to subside to continue the unfinished stages offline when conditions allowed. At the time of online learning there was resistance from several Network Hospitals to carry out online, which resulted in changing the station schedule and looking for a new network hospital and changing the learning system.

Even though there is a pandemic, medical education must still continue. To become a good doctor, competence must still be prioritized. For this, the participation of all relevant parties and the role of lecturers who are more innovative are needed. The professionalism aspect of the role of teaching staff and institutions is very important. The role of the institution, the right information, the ability of Human Resources in mastering technology, infrastructure, clear rules are very necessary and important, including network connections, devices owned by students while learning. This is a challenge in itself in fulfilling indicators in achieving aspects of medical education. Based on the description above, it is important to do research on the implementation of the policies of SE No. 36962/MPK.A/HK/2020 at the Hang Tuah Faculty of Medicine.

RESEARCH METHOD

The method used in this research is a qualitative method, a case study approach. This research is used to examine natural objects where the researcher is the key instrument and the research results emphasize generalizations and are carried out to describe a variable, either one or more (independent) without making comparisons or linking one variable to another. In this study, the data collected was in the form of explanatory sentences from the subjects which were conducted by interview (Sugiono, 2009).

The research was conducted at the Faculty of Medicine, with the consideration that the UHT Faculty of Medicine is one of the largest faculties at Hang Tuah University with the largest number of students spread throughout Indonesia. The learning system at the Faculty of Medicine is different from other faculties, namely the block system. To fulfill the professional aspect, learning at the Faculty of Medicine needs direct interaction between students and lecturers, teaching aids and patients. The location of the Faculty of Medicine is adjacent to the Central Naval Hospital (RSPAL) which is a Covid-19 referral hospital, and the conditions for the spread of Covid-19 are so great that activities at RSPAL will have an impact on UHT FK. The Infectious Care Building is right next to FK UHT. Most of the UHT Faculty of Medicine lecturers practice in hospitals which are very vulnerable to transmitting the virus to UHT Faculty of Medicine students and staff.

The data that has been collected through observation, interviews and recording is simplified descriptively according to needs so that it can be interpreted and then analyzed using the analytical theory of Miles Huberman and Saldana. Thus data analysis consists of three simultaneous streams, namely data condensation, data presentation and verification or drawing conclusions (Miles, Huberman, & Saldaña, 2014):

a. The data condensation stage, the process of selecting, focusing, simplifying, abstracting data from field notes, interviews and documents and then writing summaries, coding, exploring themes, regarding the implementation of online learning policies.

b. The data presentation stage, the presentation here can include matrix charts, all graphs collected are designed to collect organized information so that it is easy to understand and systematic so that the central theme, namely online learning analysis, can be clearly identified.

c. The stage of data verification or drawing conclusions, draws conclusions from various sources with certain theoretical comparison data and examines to see the truth of the analysis results so as

to produce conclusions that are reliable and relevant to the focus and objectives of the research.

RESULTS AND DISCUSSION

a. Academic Level (Medical Study Program) during a pandemic.

Due to the sudden outbreak of the COVID pandemic and changing the learning method from face-to-face to online, it is necessary to socialize online lecture preparation to students and lecturers, so that learning goes well and minimizes obstacles during learning.

Lectures and Practicum Courses

Lectures and practicum courses are conducted online. Lectures and practicum are carried out according to the block schedule that has been prepared by the semester coordinator and block coordinator. In the lecture, Komting acts as a host licensed by the Faculty and shares the Zoom ID and password link before the lecture begins. Practicum subject of the lecturer who is the host. For attendance, use a screenshot or Google form which will later be submitted to the faculty administration section to be entered into the SIA FK. Lecturers provide soft files of lecture materials to the committee and faculty admin.

Online tutorials

Tutorial groups consist of 10-12 students with 1 tutor lecturer. For communication, a WhatApps Group (WAG) tutor was formed. When the tutorial is online, the block coordinator sends the material (student guide) in pdf format to the WAG before the meeting. Tutors also act as hosts and share zoom links to WAGs. In tutorial activities students determine the group leader and secretary, secretary 1 (writes the discussion results during the tutorial) and secretary 2 (compiles the final report in Word form) and sends it to the lecturer's email or WA at the end of the tutorial session. At the 2nd and 3rd meeting, the group leader delivered a resume from the previous meeting, students presented and discussed the results of self-study using PowerPoint. Each student makes a summary note of the discussion, takes a photo, and sends it to the tutor's email or WAG at the end of each tutorial session to be checked by the tutor. The practicum is carried out in waves and is divided into 4 groups, namely groups A, B, C and D (group divisions are prepared by laboratory assistants in each section).

Medical Skills (Tramed) Online

When studying medical skills, students are divided into groups according to the tutor group and 1 lecturer/instructor. Prior to the implementation of the activity, a briefing was carried out from the course administrators both for medical skills lecturers (Instructors) and for students. During the briefing, the admin section creates a WA group containing instructors to share materials and trammed checklists as well as attendance lists as well as being the host during the briefing. In the implementation of the tramed host is the instructor. Online trammed activities are filled with tramed video playback, question and answer sessions between students and instructors, as well as student activities (re-reading and memorizing tramed material checklists, and demonstrating them as much as possible).

Online Exam

Implementation of the block exam is carried out online with the same group division as the distribution of tutor groups with 1 exam supervisor. Students provide 1 laptop (for testing), 1 large mirror or cellphone to monitor student positions, as well as other cellphones for communication if there are network problems. The supervisor provides 1 laptop (for testing) and 1 mobile phone (for communication if there is a network problem). The SOOCA exam is carried out online, the distribution of exam waves has been determined the day before the exam is carried out and arranged by the admin as well as the admin because it is hosted and approved by the study program, in each wave will be divided into several breakout rooms, in each breakout room there are 2 examiners with 1 student who will tested, there is a backup teacher when there is trouble with the main tester. The examiner displays (share screen) the questions and gives 5 minutes for students to read, compile problems and set hypotheses, the examiner will ask questions and answer questions within 10 minutes. The Medical Skills Examination is carried out online, the distribution of exam waves has been arranged the day before the exam by the admin coordinator according to the study program's approval. Prior to the implementation of the activity, a briefing was carried out which had to be attended by lecturers, student examiners and admins. The location admin also acts as a host who regulates the entry and exit of examinees and examiners in the breakout room station according to the predetermined exam time allocation. The examiner provides 1 laptop for testing and 1 handpdone for communication if there is trouble. Students provide 1 laptop, 1 cellphone/mirror to monitor exam positions, and 1 other cellphone for communication when there is trouble.

Online Thesis Exam

For online thesis exams, after students have registered for the exam and the date has been agreed upon by all examiners, the exam can be carried out using the zoom application. Admin acts as the host in the exam. The exam assessment of the 3 examiners was submitted to the exam admin who had been appointed by the study program to be recapitulated.

b. Profession Level (Medical Professional Education Study Program) during a pandemic

Learning at the professional level is carried out at the Main Teaching Hospital (RSPU) and Network Hospitals as well as other educational vehicles. The occurrence of the COVID-19 pandemic has changed learning methods and rounds at the station. In March 2020 when the COVID-19 case was increasing and the Teaching Hospital was used as a referral for COVID-19 patients, learning was temporarily stopped and filled with additional online activities at the current station. From June 2020 to October 2020 learning is carried out online, in accordance with the results of the decisions of the UHT Faculty of Medicine coordination meeting with the teaching hospital as

outlined in the Decree of the Dean of the Faculty of Medicine number Kep./4383.A/UHT.B0.03/VI/2020 concerning learning online Junior Doctors batches 43 and 44. With the decision to learn online, the UHT Faculty of Medicine and RSPU along with 9 network hospitals coordinated to discuss learning and materials that had to be given online and materials that could not be given only online. Coordination is needed at each station for the distribution of materials and forms of learning that will be provided at RSPU and at network hospitals. The division of the week length at the station is changed into 2 types of learning, online and offline. Online/online learning is immediately carried out and offline learning when conditions allow. Lessons that can be provided for DM are journal reading, references and responses, so that there is a change in the length of the week at each stage during online learning. Week changes in online and offline stages to facilitate Young Doctors can still carry out learning offline when the pandemic subsides, this offline method is to fulfill achievements at the end of education in accordance with the Indonesian Doctor's Competency Standards (SKDI), in which there are various medical skills competencies and skills face-to-face clinic. During online learning each Young Doctor (DM) group is given a licensed account, to make it easier for the supervisor to provide material whenever needed.

Implementation of Online Learning Policy

Online learning is the main choice of learning when the COVID-19 pandemic is spreading throughout the world, including Indonesia. All activities are carried out by changing face-to-face learning to learning from home, postponing activities that invite many people and replacing them with video conferencing. The Faculty of Medicine organizes learning activities in accordance with the circular of the Minister of Education and Culture, with all the advantages and disadvantages. In the Faculty of Medicine education there are several learning materials that cannot be replaced by online learning such as clinical skills, practicum as well as experience with direct patients, this also has an impact on the abilities or skills of prospective doctors. Even though during a pandemic the ability of a doctor's skills should not be reduced, other learning innovations are needed which certainly do not endanger the safety of students during a pandemic.

In this study, researchers focused on implementing online learning policies with the Minister of Education and Culture Circular Letter Number 36962/MPK.A/HK/2020 concerning Online Learning and Working from Home in the Context of Preventing the Spread of Corona Virus Disease (COVID-19). In implementing the policy, it is necessary to set indicators in the implementation process, so that the implementor knows the successes and obstacles in the implementation process. In this chapter, the researcher discusses the implementation of online learning policies using Merilee S. Grindle's theory with dimensions: 1) Policy objectives. 2) Action Program.

3) Policy Content and Policy Context. 4) Outcomes. 5) Measurement of success.

1. Dimensions of the Objectives of the Online Learning Policy

Learning during the pandemic through online began with the publication of the Minister of Education and Culture Circular number 36962/MPK.A/HK/2020 followed by the Chancellor's Circular Letter of Hang Tuah University number SE/686/UHT.A0/III/2020 concerning Implementation of learning activities in the environment Hang Tuah University in the context of preventing Corona Virus (COVID-19) and the Dean of the Faculty of Medicine issued a Decree of the Dean number Kep./3997.A/UHT.B0.03/III/2020 concerning online learning for even semester students of the 2019-2020 Academic Year of the Faculty Hang Tuah University Medicine. With the pandemic conditions and the issuance of a Circular Letter regarding online learning, the aim is to ensure the continuity of the teaching and learning process, fulfill students' rights to obtain educational services during the Covid-19 emergency, and protect education unit residents from the adverse effects of the spread of Covid-19. In principle, the safety and health of student lecturers and education staff is important in considering implementing learning from home or online learning. From the results of the interviews that have been stated above in both the Medical Study Program and the Professional Education Study Program, the researcher interprets that on the dimensions of policy goals according to Merilee S. Grindle the objectives of online learning are in accordance with the Circular Letter of the Minister of Education and Culture that has been implemented, namely learning continues without leaving student safety.

2. Dimensions of the Action Program

The action program is a program that is planned and designed to facilitate the implementation of online learning:

a. Availability of Learning Management System (LMS)

Online learning is inseparable from the maximum use of the internet, which is supported by information and communication technology. An example of an online learning service is an e-learning management system or Learning Management System (LMS) (Rusman, 2018) in (Kornelius Bastanta Surbakti, 2021). E-learning, which is often referred to as LMS, is a learning process virtualization for administration, documentation, all features related to the management of the teaching and learning process such as class management, creating content and materials, discussion forums, assessment systems and online exam systems that are accessible on the internet. The implementation of e-learning is the same as the conventional learning process, namely lecturers who teach, students as students and administrators who manage teaching and learning administration (Hartono, 2016) in (Muqorobin & Rais, 2020). The benefits of LMS in the learning process are saving time, better organization of learning materials, evaluation of student abilities can be carried

out effectively, increased availability of time to interact with students (Murniarti E & Sairwono, 2020) in (Kornelius Bastanta Surbakti, 2021) .

b. Hospital Availability

To fulfill the curriculum for achieving competence in the field of medical education, a hospital is needed as a place of practice, which is called a teaching hospital. The teaching hospitals consist of the Main Teaching Hospitals, Affiliated Teaching Hospitals and Satellite Teaching Hospitals. Main Teaching Hospital is a hospital used by the Faculty of Medicine or the Faculty of Dentistry to fulfill all or most of the curriculum to achieve competency. Affiliated Teaching Hospitals are Special Hospitals used by Educational Institutions to fulfill the curriculum in order to achieve specialist competence. Satellite Teaching Hospital is a general hospital that is used by educational institutions to achieve the competence of health workers in the fields of medicine, dentistry or other health (Ministry of Health of the Republic of Indonesia, 2022).

In implementing the Education function, Primary Teaching Hospitals and Educational Institutions can form a Hospital network with Affiliated Hospitals or Satellite Hospitals. The Main Teaching Hospital of the Hang Tuah Faculty of Medicine is a Type A Hospital, therefore a network of hospitals with type B or even type C is needed because the variety of cases for training Junior Doctors is more found in these types of Hospitals. Currently, UHT Faculty of Medicine has several hospital networks, including Bhayangkara Surabaya Hospital, Dr. Soewandhie, Surabaya Hajj Hospital, Lawang Hospital, Soedono Madiun Hospital, Sampang Hospital, Sumber Glagah Hospital in Mojokerto and additional hospitals are needed to accommodate the increasing number of DM. From the results of the interviews stated above in both the Medical Study Program and Professional Education Study Program, the researcher interprets that in the Action Program dimension, it has been partially implemented, namely the availability of hospitals for professional student practice has been implemented and filled with additional new hospitals, while the LMS program in The Faculty of Medicine has not run as expected and there are still many obstacles.

3. Dimensions that affect Implementation
a. Policy Content

1). Interests affected by the program (Inters affected)

Interest affected relates to the various interests that affect the implementation of a policy, in practice it must involve many interests, and the extent to which these interests influence the implementation. According to Merilee S. Grindle, a policy will be successful if it has the support of the wider community as the target group. There is clarity of the target target. In the implementation of online learning, the target group is lecturers. The program that the government calls for in stopping the spread of the pandemic is Work From Home (WFH). This WFH also means that the learning process is carried out from home using an online system.

Lecturers work and teach from home

Lecturers are the spearhead, a very important component in the education system in Higher Education. The roles, duties and responsibilities of lecturers are very meaningful in realizing learning during this pandemic. Lecturers carry out teaching activities as usual, only carried out in separate rooms with students, such as at their respective homes using laptops or cellphones. Hang Tuah University Medical Faculty uses Zoom and WhatsApp applications in learning. At first glance this activity is easy to do, over time there are several obstacles encountered in the field. The existence of these obstacles will certainly hinder the process of teaching and learning activities, and it can be interpreted that online learning systems are suddenly not fully effective. (Tamara, 2000)

The clinical skills materials presented were not fully understood by students because they required direct interaction with teaching aids such as mannequins. Lecturers must have creativity in conveying learning materials. From the results of the interviews that have been stated above in both the Medical Study Program and the Professional Education Study Program, the researcher interprets that in the content dimension, policies related to interests are influenced by the existence of programs, according to Merilee S. Grindle, the policy targets are right, namely lecturers, and lecturers support the implementation of learning policies online.

2). Type of Benefit (type of benefit)

At this point, the contents of the policy, according to Merilee S. Grindle, seek to show or explain that a policy must have benefits for many people or collectively, it will be easy to implement because it has the support of the target group. During the COVID-19 outbreak in Indonesia, there was a Minister of Education Circular Letter to avoid crowds and physical contact which is known as social distancing. The implementation of social distancing to break the chain of transmission of COVID-19 has forced the implementation of the learning process to be carried out entirely online. Online learning creates a flexible learning process that is not limited by distance and time. With the availability of a variety of applications and platforms to accommodate students' learning styles that vary (Zhafira, et al, 2020). The use of technology in the learning process can encourage lecturers and students to be more aware of technology thereby increasing basic technological knowledge and skills (Pangondian, et al., 2019) it is stated that technological awareness, knowledge and basic technological skills and motivation to utilize the e-learning system are included in the factors important factors that affect the successful use of online learning, in (Lestariyanti, 2020)

With the condition that the UHT Faculty of Medicine is adjacent to the Naval Central Hospital which is a COVID-19 referral, online learning is most likely to be used to implement government regulations with all its benefits. From the results of interviews conducted in both the Medical Study Program and the Professional Education Study Program, the

researcher interprets that in the Content dimension, policies related to Types of Benefits, according to Merilee S. Grindle, have benefited the target group and institutions.

3). The desired change (extend of change envision)

Each policy has a target to be and want to achieve. The content of the policy to be explained must have a clear scale. In online learning, what is achieved is mastery of technology to help learning and professionalism as a doctor is still fulfilled. COVID-19 has brought changes to the process of learning, initially it did not use technology too much, but during the COVID-19 pandemic, learning was carried out using full technology so that students needed to adapt. again with learning methods during the COVID-19 pandemic. Online learning avoids the lower risk of exposure to COVID-19 because you don't gather with many people, so you stay safe at home but lectures can continue, the time is more flexible, students find it easier to access existing material.

The solution given is by making videos to support practicum activities. As was done at the Faculty of Medicine, Hang Tuah University, there are videos on medical skills that are made to support learning. Students have different levels of intelligence in understanding the material provided by the lecturer, not all students can understand the skills and practicum material delivered via video, but it would be better to have direct interaction with friends or together with practicum lecturers and medical skills, because Skills are things that are emphasized that must be mastered by students of the Faculty of Medicine. but in the online learning process during the Covid-19 pandemic it could not be carried out so that in the end it would affect the professionalism of a doctor.

In addition, if you only watch videos and don't practice it directly, students will quickly forget the material provided. Indeed, face-to-face learning is still more effective, but with the conditions of the pandemic, social distancing must still be paid attention to, for this there needs to be a different learning method, for example with blended learning. The blended learning method is learning that combines face-to-face and online. Blended learning is also known as hybrid learning. This term implies a mix, mix or combination of learning (Nurhikmah, 2018) in (Ferdiansyah, N, Jacob, & H, 2021). Another definition of blended learning is learning that combines learning delivery strategies with face-to-face activities, computer-based learning (offline), and online computers ((Idris, 2018). Materials that really require direct interaction can be facilitated with blended learning methods, of course only selected for very crucial subjects. From the results of interviews in both the Medical Study Program and the Professional Education Study Program, the researcher interpreted that on the content dimension of the policy related to the desired Degree of Change according to Merilee S. Grindle it has been implemented, namely increasing the ability to master technology and changing

methods learning with blended learning for learning skills in order to maintain professionalism as a doctor.

4). The location of the decision maker (site of decision maker)

Decision makers are fundamental and very important in policy implementation. In the learning from home policy during the COVID-19 pandemic, the policy makers are from the government, in this case the Minister of Education and Culture. In its implementation at Hang Tuah University, the Chancellor makes policies at UHT and Deputy Chancellor I who has authority in the field of education encourages and monitors and supports the implementation of learning policies from home through online learning. Policies At the Faculty level The Dean plays an important role in decision making in the implementation of online learning, because the learning system at the Faculty is different from other faculties at UHT, and the policies implemented in implementation are also adjusted to the conditions at the Faculty. From the results of interviews in both the Medical Study Program and the Professional Education Study Program, the researchers interpreted that on the dimensions of policy content related to the location of policy makers according to Merilee S. Grindle it had been implemented, decision makers had.

5). Program executor

Policy implementation will be successful if program executors have strong ability and commitment. The success of implementation can be measured by clear implementing structures and clear communication. At the Hang Tuah Faculty of Medicine, the head of study program is the Head of Study Program. To support the implementation of the study program's policy, the head of study program proposes the preparation of SOP (Standard Operating Procedures) or procedures for implementing online learning which are then coordinated in the dean's and study program meetings which are then ratified by the Dean in the form of a Dean's Decree. SOPs or procedures for implementing online learning are used as a guide for the implementation of learning implementation and disseminated to the entire FK UHT academic community. From the results of interviews in both the Medical Study Program and the Professional Education Study Program, the researcher interpreted that in the Content dimension the policies related to the Program Implementer according to Merilee S. Grindle had been implemented, it was clear that the implementing structure was that the head of study program had implemented the program in accordance with the SOPs made and enforced in a pandemic situation that is happening to be a reference for the implementation of learning.

Resources involved (resources committed)

Resources are a factor that influences the success of policy implementation because policy implementation requires the support of resources to implement the policy. If a policy that is rolled out does not have the support of resources, it will be impossible

to implement it properly, as well as implementing online learning policies, optimal resources are needed to support the implementation of learning policies through online or online media as was done during a pandemic. The resources referred to in implementation according to Merilee S. Grindle include labor or human resources, funds and facilities.

Human Resources

In implementing online learning policies at the Faculty of Medicine, the role of human resources, both support staff and lecturers, is very important. Lecturers as spearheads, the main actors in the process of learning activities must be able to apply their role to the fullest for online teaching and learning activities. In online learning, lecturers are also required to be able to build two-way communication, to be agents of change for student behavior. (Toisuta, 2021). A lecturer must be able to use existing technological facilities, master internet media, must have accuracy in selecting media and teaching and learning methods so that the online learning process can be accepted by students and runs optimally and effectively. From the results of interviews in both the Medical Study Program and the Professional Education Study Program, the researcher interprets that in the content dimension the policies related to human resources are sufficient, the lecturers master technology even though there are some obstacles the lecturers do not master technology but overcome with the help of supporting staff, lecturers have innovation by making learning videos.

Infrastructure and Funds

One of the supporting factors for online learning is facilities and infrastructure, which can be in the form of laptops, cellphones, internet packages/quotas and various platforms supporting online learning. In accordance with Sobron's statement (2019), adequate facilities and infrastructure such as internet quota, computers/laptops, projector screens, applications, media or online learning platforms are the most important infrastructure facilities in online learning so that the information or knowledge conveyed can be well received. .(Nina Sriwarthini, Syazali, & Sutisna, 2020). Availability of technology support facilities, information systems can run properly according to the needs of online learning. In line with this, according to Handarini & Wulandari (2020) revealed that online learning facilities have supporting facilities such as smartphones, laptops or tablets that can be used to access extensive learning information anywhere and anytime (Rahayu, 2021).

At the Faculty of Medicine, the platform used in learning is using Zoom, Whatsapp. UHT Faculty of Medicine also provides quota assistance for students and lecturers, support staff who are directly related to learning, lends laptops to support staff which can be used to support the administration of online learning. Facilitating zoom accounts for students and lecturers. Funds for financing are in the Faculty's work program, there is an easy transfer of the budget to support sudden online learning due to the pandemic. From the results of interviews in both the Medical Study

Program and the Professional Education Study Program, the researchers interpreted that in the content dimension, policies related to infrastructure and funds have received full support for the implementation of online and blended learning policies.

b. Policy Context

1) Power, interests and strategies of actors

In the context of implementing a policy, what powers, interests and strategies are applied by actors in order to facilitate implementation must be taken into account in order to achieve what is expected.

2) Characteristics of the Institution

Hang Tuah University, FK UHT is an Educational Institution that has the function of preparing students to become human beings who have the behavior, values and norms according to the applicable system so as to create a complete and independent human totality in accordance with the nation's way of life, to carry out the task of developing and improving human resources . In implementing UHT Education, it follows Government regulations. Likewise in the implementation of online learning, Hang Tuah University and the Faculty of Medicine follow the rules from the government through a Circular of the Minister of Education and Culture.

3) Compliance and responsiveness

With the issuance of the Minister of Education and Culture Circular Number 36962/MPK.A/HK/2020, UHT as an educational institution responded quickly by issuing Circular No. SE/686/UHT.B0/III/2020 dated 16 March 2020 signed by the Chancellor of UHT, referring to the circular letter of the Minister of Education and Culture and the circular letter of the Chancellor of UHT, the Dean of the Faculty of Medicine issued a decree regarding online learning No. Kep/3997.A/UHT.B0.03/III/2020. In implementing the online learning policy, UHT issued online learning SOPs and was followed by the Faculty of Medicine to issue online learning procedures according to what was conveyed in the circular of the Minister of Education, that the heads of work units make online learning guidelines adapted to local needs. Fakulas forms a COVID task force team to anticipate if someone is exposed to the virus and coordinate handling procedures.

4. Policy Outcome Dimensions

a. Impact on society and groups

The impact of the implementation of the Minister of Education Circular Letter policy regarding online learning in the Faculty of Medicine, there are two positive impacts and negative impacts.

b. Change and acceptance

With the issuance of the Minister of Education Circular Letter Number 36962/MPK.A/HK/2020 concerning online learning, because the aim is to prevent the spread of COVID-19, maintain the safety of students, lecturers, and conditions do not allow face-to-face learning.

5. Dimensions of Success Measurement

In this dimension, measuring the success of online learning policies is carried out by evaluating learning

outcomes. From the results of the interviews above, the researcher interprets that the measure of success in implementing the Ministry of Education and Culture's policy regarding online learning is through evaluating student scores.

CONCLUSION

The implementation of the Circular Letter of the Minister of Education and Culture Number 36962/MPK.A/HK/2020 concerning online learning and working from home has been carried out well by the program implementer, namely the Head of Study Program. The Chancellor and Dean support the policy by providing assistance and facilitation in implementation. In the implementation there are obstacles encountered in the field such as unstable signals, lack of mastery of technology and learning that cannot be done online and requires face-to-face meetings.

The results of data analysis as described in the previous chapter on the implementation of online learning policies can be underlined that:

a. The aim of the Policy is to continue the teaching and learning process according to a predetermined schedule while still paying attention to safety and preventing the spread of COVID-19

b. Action program:

- Realized by the existence of LMS but has not been fully applied in the Faculty of Medicine

- Availability of adequate Hospital

c. The contents of the policy have been implemented, the decision makers are right, the policies issued are appropriate and bring benefits to the target group, namely lecturers. There is an increase in the ability to master technology and supporting resources.

d. Policy Context, as an educational institution has carried out according to its duties and functions while continuing to carry out the learning process

e. Policy results, there are positive and negative impacts of policy implementation as:

- Positive impact: learning can be flexible in time and place, cost-effective, increased mastery of technology, more concerned about health with the implementation of PHBS (Clean and Healthy Behavior).

- Negative impact: student attitude is not good, discipline is lacking, manners are lacking, mastery of material skills is lacking.

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