



Implementation of Dyadic Leadership in Total Quality Management Education in Indonesia

Teguh Trianung Djoko Susanto¹, Eliana Sari², Faiz Yazid³, Kalimah Thoyyibah⁴, Nadiah Raghdah⁵, Semuel Sekfamner Noriwari⁶

^{1,2}Lecturer at Educational Management Study Program, State University of Jakarta, Indonesia

^{3,4,5,6}Student of Post Graduated at Educational Management Study Program, State University of Jakarta, Indonesia

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ABSTRACT

This study investigates the application of Total Quality Management (TQM) in the Indonesian education system by highlighting a dual leadership approach as a possible solution to address quality management challenges. TQM is a management approach that focuses on improving overall quality by involving all members of the organization. Key trends in the implementation of TQM in education include a focus on student needs, continuous improvement, stakeholder participation, and the use of technology. However, the implementation of TQM faces challenges such as lack of resources, unequal access, and irrelevant curriculum. The dyadic leadership approach emphasizes strong interpersonal relationships between leaders and members to achieve common goals. This study shows that the two-party approach, which has been successfully implemented in various health care facilities, can improve administrative efficiency and service quality. This leadership model is suitable for adoption in the field of education because its characteristics are similar to other service organizations. The results of the study show that the implementation of TQM and the leadership approach can contribute to improving the quality of education in Indonesia. Implementing this approach requires strong commitment, communication, and collaboration between leaders and members of the organization. Therefore, dyadic leadership has the potential to improve accountability, efficiency, and quality of education, aiming for the satisfaction of all stakeholders.

Keywords: dyadic leadership, Indonesia, leadership, total quality management education

INTRODUCTION

The sustainability of education today continues to develop with the times, now in the world of education, there is the application of Total Quality Management (TQM) adopted from the business world. Total Quality Management (TQM) is a management philosophy that aims to improve customer satisfaction and organizational performance. TQM principles have been applied in the manufacturing sector for a long time but their application in the world of educational services is still relatively new (Asif, et al., 2011). In Indonesia, the implementation of TQM has also been implemented and its implementation is an important role to ensure that education in Indonesia can run in accordance with the expected standards and in accordance with the needs of the community. There are several important things about the existence of TQM in the world of education in Indonesia, such as improving educational standards, increasing global competitiveness, encouraging accountability and transparency, optimizing the use of resources, improving the quality of educators, and facing the development of the times.

However, in the process of implementing TQM, it is not always smooth. In improving the quality of education, there are several challenges faced. Some of the known challenges are: limited resources, low quality of teachers, inequality in access to education, less relevant curriculum, limited assessment process, inefficient education management, social and economic changes, and lack of motivation and support from parents. According to Baitanayeva (2020), improving the quality of education depends on teacher competence,

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experience, modern technology, and the implementation of quality management systems in universities.

One of the challenges faced in improving the quality of education management is related to an inefficient education management system. When you hear the word management, it is closely related to leadership. The important role of leadership and the implementation of Total Quality Management (TQM) in education in Indonesia can be seen from the positive influence of both on the quality of education services. Leadership contributes to improving the quality of educational services, while the implementation of TQM can improve the quality of educational services in schools. Both contribute to school competitiveness, student parent satisfaction, and graduate quality (Fauzi et al., 2023). However, there are several challenges that also occur in leadership in education management: lack of visionary leadership, resistance to change, poor managerial skills, and ineffective communication patterns.

Effective communication patterns are one of the challenges faced by most leaders, including in the field of education. In today's reality, many leaders have not been able to implement effective communication in the educational environment, especially in communicating with their members. With the lack of effective communication patterns, it can cause a negative impact on policy implementation and the involvement of all parties in the education process.

In today's modern era, the complexity of the relationship between leaders and members is getting higher and more dynamic, many leadership approaches emphasize the importance of interpersonal and interprofessional relationships. One of the leadership concepts with effective communication is didactic leadership. According to Bhal (2000) The concept of dyadic in the context of organizational leadership refers to an approach that considers the interaction between leaders and subordinates as a relationship that affects each other, not just as a one-way relationship. With effective communication, it can improve the managerial system of education and then improve the quality of education.

Based on this background, it is important to learn more about leadership with a dichotomy approach, this leadership model is seen from how leaders and members interpret each other's actions, which is then called attribution. It is hoped that this theory can also be implemented to overcome challenges in the application of TQM in education in Indonesia.

METHODS

This study uses a qualitative research method with a library research approach. This method is carried out to review, evaluate, and synthesize the results of existing research results and thinking.

Literature research is related to theoretical studies and other references related to cultural values and norms that develop in the situation being studied. In addition, this research cannot be separated from scientific literature. Data is obtained from data relevant to the problem to be researched by conducting other literature studies such as journals, articles, and previous research (Sugiyono, 2016).

RESULT

Total Quality Management (TQM) is a managerial approach that focuses on improving quality throughout an organization. In the context of education, TQM aims to improve the quality of educational services and student learning outcomes. TQM emphasizes the importance of the participation of all members of the organization, both from the management, teachers, and students, in an effort to improve quality. In this review, we will review the latest studies on the implementation of TQM in the world of education, including the main trends, methods used, and relevant research results.

Key Trends in TQM in the World of Education

1. Focus on Students: One of the key trends in TQM in the world of education is the emphasis on student needs and satisfaction. Research shows that educational institutions that implement TQM with a focus on students tend to produce higher levels of satisfaction among students (Yusof & Aspinwall, 2000).

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- 2. Continuous Improvement: TQM encourages a culture of continuous improvement. In the education sector, this can be seen in the institution's efforts to continuously update the existing curriculum, teaching methods, and facilities. Research by Al-Khaldi (2020) shows that institutions that apply the principle of continuous improvement are able to produce more competent graduates.
- 3. Stakeholder Participation: TQM emphasizes the importance of the involvement of all interested parties, including teachers, students, parents, and the community. According to research by Rahman (2011), institutions that involve stakeholders in the decision-making process tend to achieve better results in terms of education quality.
- 4. Use of Technology: In the digital era, the use of information and communication technology (ICT) is an integral part of TQM in education. Research by Ali and Alharbi (2021) shows that the integration of ICT in the learning process can increase the efficiency and effectiveness of teaching.

METHODS USED IN TQM RESEARCH

- 1. Case Studies: Many studies on TQM in education use a case study approach to explore the implementation of TQM in specific institutions. This method allows researchers to gain in-depth insights into the practices and challenges they face.
- 2. Surveys: Survey methods are often used to collect data from various stakeholders in educational institutions. Research by Zairi (2000) used a survey to evaluate the level of TQM implementation in various schools and universities.
- 3. Qualitative Analysis: Some studies also use qualitative analysis to understand individual perceptions and experiences related to the application of TQM. This approach helps researchers to explore the factors that affect the success or failure of TQM implementation.
- 4. Experimentation: Experimental methods are rarely used, but some studies attempt to measure the specific impact of TQM interventions on student learning outcomes by comparing the group that implements TQM and the control group.

RELEVANT RESEARCH RESULTS

- 1. Improving the Quality of Education: Research by Deming (1986) shows that the application of TQM principles can significantly improve the quality of education. Institutions that implemented TQM reported improvements in student academic outcomes and increased satisfaction among teaching staff.
- 2. Reduction of Dropout Rate: According to a study by Rahman and Nair (2004), the implementation of TQM in secondary schools is able to reduce the dropout rate of students. This is due to increased student involvement and better support from the school.
- 3. Stakeholder Satisfaction: Research by Sallis (2002) found that the implementation of TQM in educational institutions has a positive impact on stakeholder satisfaction. Teachers, students, and parents reported better experiences in the teaching and learning process.
- 4. Innovation in Learning: Research by Ali and Alharbi (2021) shows that the application of TQM encourages innovation in teaching methods. Institutions that implement TQM tend to be more open to the use of new and creative teaching methods.

Research on Educational Leadership in Several Hospitals

As far as we know, many hospital institutions use dyadic leadership in developing management quality. This is considered effective and has resulted in many significant changes in terms of managerial effectiveness, service quality, and budget efficiency. The following are references that the author can get from website sources and several journals that discuss the application of dyadic. leadership in hospitals.

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SCP Health on its website explains that there are 2 components in running a hospital institution, maximizing effective and efficient service and managerial functions. The two components must go together. Physicians perform duties as clinical stewards, including enforcing quality standards, while administrators operationalize physician visions with business acumen through resource management, strategic planning, and fiscal responsibility. The practice of dichotomous leadership in question is that the two leaders (managerial and medical leaders) must communicate regularly, relationships must be built with a sense of trust, respect, and a shared vision for the organization.

The advantages of dyadic leadership are complementary practices, mainly; Better decision-making, improved patient care, improved communication, and greater efficiency and savings. From the practice, patients as well as clinicians will get satisfaction, as clinicians can participate in decision-making, and their needs are considered, as dyadic leadership also provides opportunities for clinicians to be involved at the management table, which contributes to a culture of mutual trust, collaboration, and mutual respect.

Susan M. Koethe and Steven H. Kroft (2013) presented the results of their research on laboratory leadership and Dyadic's management model, the research concluded that in laboratory management, the involvement of the medical director is required, it concerns regulation and shared responsibility for product quality. Previously, the director of the laboratory was directly responsible to the hospital leadership.

Dyadic's organizational model is based on the concept of Shared Accountability, this model has been applied by Minnesota (State of the United States) with the "Fairview" integrated approach system model. In "Fairview" the dialysis approach relies on a team approach, where a hospital manager or administrator is paired with a medical director.

In this study, Susan and Kroft (2013) explained that the clinical laboratory is an ideal environment for the application of the traditional management model. The dyadic model encourages consensus creation and provides continuous insight into each other's perspectives (Laboratory and medical).

They then adopted and developed a model in their workplace, at first the partners only talked about the inclusion of tasks, but in the end they switched to a common goal, which is to build better quality. At this point, the core of the contract becomes a shared responsibility that demonstrates our shared vision, values and mission. The responsibilities of each partner then become clear and focused on supporting shared responsibility. Warren (2016) stated that Oregon Health & Science and Doembecher Children's Hospital conduct team-based interprofessional work to improve patient care now and in the future.

The quality improvement that took place in the neonatal intensive care unit (NICU) of Doembecher Hospital could not be separated from the contribution of facts; 1. a history of quality improvement work in our NICU and in the field of neonatology, 2. the "didactic leadership" structure on which our operations in the NICU are based, and 3. Our growing understanding of the concept of "Team Intelligence".

The development of leadership in the NICU Doernbecher unit is carried out by collaboration between leaders, nurses, and doctors who already have an awareness of the same goals and vision. Such mature collaboration is not that easy to set up, it takes several years to create an environment where the entire team strives to provide the best care, as well as leaders who have the expertise and position to influence different teams to participate in quality and safety improvement. Dyadic leadership according to Warren (2016) is cohesive leadership that is able to execute and sustain unit-based improvement projects by increasing the morale, involvement, and investment of all NICU health care providers towards a common goal.

A new case that is being developed is how neonatal infant patients diagnosed before birth have abnormalities, such as respiratory function in the heart, can be treated as quickly as possible. At least, 50% of babies can be carried by their parents in the first 30 minutes after giving birth. The interprofessional approach encourages neonatologists, nurse practitioners, bedside and resuscitation nurses, nursing leadership, respiratory therapists, clinical psychologists, and parent educators to think together about these innovation strategies by combining specialized knowledge, as well as individual roles and workflow issues in order to achieve this mission together.

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Finally, the research of Anurag Saxena et al. (2018). carried out at one health care organization (HCO), namely the Saskatoon Health Region (SHR). SHR is a regional health authority and academic HCO in the Canadian province of Saskatchewan. Research on the roles and responsibilities as well as the reporting structure of the existing leadership model. The practice of the institution is carried out at the first and middle level leadership, the senior leadership level, such as the CEO, the board of health authorities, is responsible for the overall duties of the institution.

The study has identified that the hybrid dyadic model with responsibilities in the shared domain and individuals is consistent with the theoretical foundations of shared leadership and has practical implications for articulating roles and responsibilities for dyadic partners. Shared responsibility is in a large number of areas that reflect the intersection of processes and expertise in the administrative and professional domains. It covers the domains of leadership (global portfolio performance, system transformation, strategy, culture, continuous quality improvement and stakeholder relations) and management (human resources, some aspects of the budget, e.g. preparation, analysis and forecasting, resource management, service delivery, critical incident review, education delivery and research improvement).

Non-medical employees (DCLs) are responsible for operations management, finance, supply chain, ancillary services and staff and capital planning, while medical employees (PLs) are responsible for patient care management, physician performance management and advocacy for education and research. Mutual relationships between dyadic partners that need to be fostered and shared accountability are key characteristics of the proposed hybrid model and are essential for addressing potential conflicts and contradictions in the system and achieving coherence and synergy.

Saxena et al. (2018) revealed in their article Many studies also revealed that dyadic leadership or dyadic management models can encourage maximum performance in health institutions. Intermountain Health is highly regarded as a high-performance healthcare system (Baker et al., 2008) and has a shared leadership/management structure for its clinical programs — which includes a physician, nurse administrator and in many areas an administrative leader, at the regional and central/system levels (Baker et al., 2008; IOM: Institute of Medicine, 2007). The leaders of the physician medical group and the health plan leaders at Kaiser Permanente are required to work together for the success of the entire organization (Crosson et al., 2004).

Linkage with Education Quality Management

The development of quality assurance in educational institutions refers to professional managerial practices in education. The management model in the Company is developing very rapidly, the model can be adopted by Educational Institutions, although it must be adjusted to the characteristics and needs of the Educational Institution.

Dyadic leadership practices that are applied to health institutions and have also been proven to improve quality, can be considered as a model that can be applied in educational institutions. The reason is, there are several similarities between Educational Institutions and Hospitals, the Institution is both engaged in the field of services, customers are also included in the production object (students and patients), a long process (in the case of hospitals are chronic disease patients), customers are not only students or patients but also parents, siblings, husbands/wives.

The organizational structure model of the two institutions is also not too different, the structure in the organization can be divided into 2 large groups, namely managerial professionals and substance professionals (medical and academic). In addition to having the main leader, the educational institution also has several leaders at the middle level who have the authority to help the main leader, their duties will be adjusted to their expertise.

Quality Assurance Problems in Indonesia

David Lim (1999) provides an overview of the problems that occur in the quality assurance of universities in developing countries, including:

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- 1. Formal qualifications of academic staff; Formal qualifications refer to the level of Education and academic degrees that teachers in colleges have. Many universities, especially in the regions, have lecturers with a low percentage of doctoral degrees where lecturers are expected to have S3 qualifications to be able to conduct more in-depth teaching and research. In addition, many academic staff have qualifications but lack experience and competence in certain fields so that there is a gap that has an impact on the relevance of teaching materials.
- 2. Lack of library facilities; Book collections in libraries are often less relevant and up-to-date, uncomfortable reading suggestions, and inadequate supporting technology. For example, libraries do not have sufficient access to digital academic journals or adequate computer facilities for research and learning.
- 3. Inter-staff does not have a dedicated room; Limited infrastructure and facilities cause staff to have to share a workspace. This leads to a lack of privacy and disruption to productivity. For example, lecturers who want to compile lecture materials are busy with administrative activities that take place in the same room. In addition, internal communication can also be disrupted.
- 4. Pay gap; the salaries received by permanent, contract, and honorary teaching staff are very different. Teachers with contract status receive salaries far below the standard, while teachers still earn relatively better incomes. This causes dissatisfaction, low work motivation, and even triggers an increase in turnover among contract teachers who feel disappreciated.
- 5. Patron-client practice and academic cronyism; There are still many cases where teacher promotions are more influenced by personal proximity than competence. This practice lowers the quality of education and research because potential talents do not get fair opportunities. For example, talented young teachers find it difficult to move up the ladder because they do not have a strong connection with their superiors.
- 6. Lack of support to improve the quality of staff to support the needs of universities; The lack of funding needed to support training and development makes staff work with skills and knowledge. This has a long-term impact on the institution's ability to compete academically and improve its reputation. It is recommended to conduct a survey related to the training and development needed by staff in each section.
- 7. Lack of research work for academic staff: A number of institutions place a heavy emphasis on teaching tasks on teachers, so the time and energy to conduct research are very limited. The applicable policy also emphasizes more on teaching. In addition, the lack of financial support exacerbates the situation so that scientific publications and contributions are still minimal both at the national and international levels.

David Lim noted that the above problems rarely occur in elite universities and are in urban areas.

Implementation of Dyadic Leadership in Integrated Quality Management in Indonesia

David Lim (1999) emphasized in quality assurance in universities in developing countries, quality assurance programs must be modified to suit the prevailing conditions in developing countries to ensure relevance and realism, must start with political will in carrying out quality assurance to improve the situation, establish systematically, various activities must be interrelated for a common goal.

The leadership model is in accordance with David lim's suggestion to start the implementation of quality assurance in educational institutions, starting with the political commitment of all staff to achieve common goals, then communication and mutual trust between leaders to design a systematic program to improve quality by combining expertise between staff to produce mutually supportive procedures. The involvement of all elements of staff in policy-making will certainly form a high commitment in the organization, then how leaders can exercise their leadership skills in managing members.

Henriette Lucander & Cecilia Christersson (2020) offer a process quality assurance assessment (PQAA) model to support the technical implementation of quality assurance changes, consisting of five fese; inventory, analysis, evaluation, change planning, and change realization. The inventory is carried out by involving all

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stakeholders in discussions to identify things that develop a culture of quality. After that, a survey was conducted to get input related to quality improvement. After getting input, the team conducts an evaluation and designs a change plan. After the change plan is made and then for long-term improvement, it is necessary to discuss together how to realize the change.

CONCLUSION

The introduction of Total Quality Management (TQM) in the world of Indonesian education aims to improve the quality of education by focusing on overall improvement. TQM's focus is on student needs, continuous improvement, stakeholder engagement, and the use of technology. Although the implementation of TQM can help improve quality, there are still several challenges that hinder it, such as limited resources, teacher quality, and curriculum relevance.

Dyadic leadership, adopted from the healthcare facility management model, provides solutions to address these challenges. This leadership emphasizes reciprocity between leaders and members, improving collaboration, communication, and effectiveness within the organization. This model has been proven to improve quality control in the field of medicine and can be applied to educational institutions by adjusting to the unique characteristics of the institution. In an educational environment, dyadic leadership can overcome challenges by increasing commitment and cooperation between leaders and employees to achieve common goals. This approach fosters shared responsibility, transparency, and collaborative decision-making.

Some of the suggestions provided by the researcher are: a) introduce dual leadership: educational institutions can adopt a dual leadership model to improve management efficiency and improve communication and collaboration between employees and managers; b) special training related to dyadic leadership must also be provided to improve the understanding and skills of leaders; c) Teacher Capacity Building: In addition to implementing a leadership model, educational institutions must focus on improving the quality of teachers through periodic training, provision of facilities and improvement of the welfare of teaching staff; d) Strengthen stakeholder engagement: It is important to involve all stakeholders in the decision-making process and create a shared commitment and sense of ownership of the changes made; and e) the use of technology: to support the implementation of TQM, it is necessary to develop an effective technological infrastructure to improve the quality of education and the efficiency of the educational process.

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REFERENCES

- 1. Ali, A. & Alharbi, A. (2021). The Role of Technology in Total Quality Management in Education. International Journal of Educational Management
- 2. Al-Khaldi, A. (2020). Continuous Improvement in Education: A TQM Approach. Journal of Quality in Education
- 3. Anurag Saxena, Maura Davies, Don Philippon, (2018) "Structure of health-care dyad leadership: an organization's experience", Leadership in Health Services. https://doi.org/10.1108/LHS-12-2017-0076
- 4. Asif, M., Awan, M. U., Khan, M. K., & Ahmad, N. (2013). A model for total quality management in higher education. Quality and Quantity, 47(4), 1883–1904. https://doi.org/10.1007/S11135-011-9632-9
- 5. Baitanayeva, B., Aubakirova, Z., Aitbembetova, A., & Sansyzbayeva, A. (2020). Problems of improving the quality of education. E3S Web of Conferences. https://doi.org/10.1051/e3sconf/202015909002.
- 6. Bhal, K., & Ansari, M. (2000). Managing Dyadic Interactions in Organizational Leadership. Global Business Review, 3, 312 312. https://doi.org/10.1177/097215090200300214.

ISSN No. 2321-2705 | DOI: 10.51244/IJRSI | Volume XI Issue XI November 2024



- 7. Deming, W. E. (1986). Out of the Crisis. MIT Center for Advanced Educational Services
- 8. Fauzi, A., Suryapermana, N., Wahyuni, A., & Gofur, R. (2023). Indonesian Education Services Quality: The Influence of Leadership and Total Quality Management. Pedagogika, 149(1), 105–122. https://doi.org/10.15823/p.2023.149.5
- 9. Henriette Lucander & Cecilia Christersson (2020): Engagement for quality development in higher education: a process for quality assurance of assessment, Quality in Higher Education. https://doi.org/10.1080/13538322.2020.1761008
- 10. J. B., & Wiggins, N. (2016). Shared Decision Making in Neonatal Quality Improvement. The Journal of Perinatal & Neonatal Nursing, 30(3), 237–239. https://doi.org/10.1097/jpn.000000000000194
- 11. Koethe, S. M., & Kroft, S. H. (2013). Hospital Laboratory Leadership and the Dyad Model of Management. Laboratory Medicine, 44(2), 168–171. https://doi.org/10.1309/lmu6eor26cdvvlvs
- 12. Lim, D. (1999). Quality Assurance in Higher Education in Developing Countries. Assessment & Evaluation in Higher Education, 24(4), 379–390. https://doi.org/10.1080/0260293990240402
- 13. Rahman, S. & Nair, C. (2004). Total Quality Management in Education: A Review of the Literature. International Journal of Educational Management
- 14. Rahman, S. (2011). Stakeholder Participation in TQM: A Case Study of Educational Institutions. Total Quality Management & Business Excellence
- 15. Sallis, E. (2002). Total Quality Management in Education. Kogan Page Publishers
- 16. Sugiyono. (2016). Metode Penelitian Kuantitatif Kualitataif dan Kombinasi (Mixed Methods). Bandung: Alfabeta
- 17. Yusof, S. & Aspinwall, E. (2000). Total Quality Management in Higher Education: A Review. International Journal of Educational Management
- 18. Zairi, M. (2000). Managing Excellence in Education: The Role of TQM. International Journal of Educational Management