



The Evaluation of Goods/Services Procurement Implementation in Coronavirus Disease 2019 (Covid-19) Emergency at Sleman Hospital

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Abstract

Introduction: RSUD Sleman is a referred hospital for COVID-19 patients. RSUD Sleman as a hospital belonging to the Sleman Regency Government carried out procurement activities after the Sleman Regent's Decree regarding the Confirmation of the Emergency Response Status for the Coronavirus Disease 2019 (COVID-19) Disaster in Sleman Regency. COVID-19 was not yet in the Budget Implementation Document (DPA) 2020. The implementation of COVID-19 procurement activities at the Sleman Hospital was adjusted to the existing funds.

Objective: Evaluating the implementation of goods/services procurement activities during the emergency period to fulfill the service needed for COVID-19 patients at the Sleman Hospital

Method: This study used a qualitative method, which to evaluate the implementation of the procurement of goods/services during the COVID-19 emergency at the RSUD Sleman in the period April-December 2020 by the Regulations for the Procurement of Goods/Services in Handling Emergency Situations (LKPP Regulations no. 13 of 2018). The research subjects were Commitment-Maker Officers (PPK), Budget User Authorities, Procurement Officers, Technical Implementation Committee Activities, and Users)

Result: RSUD Sleman carried out goods/services procurement activities during the COVID-19 emergency in 3 stages, namely planning, implementation, and completion of work. The implementation of the procurement of goods/services was carried out by the Commitment-Maker Officers (PPK) and the Procurement Officers. The procurement implementation used several procurement methods such as direct appointment, direct procurement, e-purchasing through the LKPP e-catalog, and quick tender/auction. RSUD Sleman in carrying out goods and services procurement activities followed the LKPP Regulations no. 13 of 2018 concerning Procurement of Goods/Services in Handling Emergency situations and (Government Regulations no. 16 of 2018) concerning Government Procurement of Goods/Services. Goods/services procurement activities that use pure APBD funding sources have good achievement, namely above 70%.

Conclusion: The implementation of goods/services procurement activities at Sleman Hospital during the COVID-19 emergency was based on emergency special procurement regulations, namely LKPP Regulation no 13 of 2018 and General Procurement regulations on Government procurement of goods/services, namely Government Regulation no 18 of 2018. Realization of activities Procurement sourced from the Regional Budget showed lower results compared to procurement sourced from the original Regional Revenue and Expenditure Budget. Goods/services procurement activities that use pure APBD funding sources have good achievement, namely above 70%.

Keywords: COVID-19, emergency, procurement

1. Introduction

Procurement of goods/services during an emergency is an activity of procuring goods/services carried out by ministries/agencies/regional apparatuses financed by the Regional Budget or State Budget which starts from the identification of needs, the handover of the work, and the fulfillment for the needs of goods/services during the emergency situation for the safety of the public or Indonesian citizens residing in the country or abroad whose implementation cannot be delayed and must be carried out *immediately*¹.

Goods and services that can be provided through procurement in handling COVID-19, fundamentally, all goods/services in the context of handling COVID-19 which are urgent, must be fulfilled during an emergency situation, and the process of procurement and utilization of goods/services can be carried out, even though the budget is not yet or not sufficiently available. The procurement of goods/services in handling Covid-19 does not require HPS, a guarantee of implementation, nor limit to the value of the procurement of goods/services, therefore the amount of value is adjusted to the needs of the implementation of the work, and payments can be done in installments or all a lump sum².

The function of procurement activities in hospitals is truly crucial. Activities start with serious planning, implementation, and evaluation.

Duties as Commitment-Maker Officers (PPK) and procurement officials at Sleman Hospital are additional tasks outside of the authorities' main duties and functions so that the results of activities are sometimes less than optimal. Significant procurement is one of the most important functions in every organization, both private sector and public sector, unfortunately until now, procurement, especially in government organizations, has not received adequate attention. One proof is that procurement functions are currently still handled on an ad-hoc basis by a committee that is formed and works on a temporary (non-permanent) and part-time basis³.

The COVID-19 pandemic emerged when the fiscal year was already running, so a special budget for Covid-19 handling activities was not yet included in the 2020 Budget Implementation Document (DPA). Therefore, the existing budget needs to be fulfilled immediately. The overall budget for goods/services procurement activities in 2020 is Rp. 89,312,000,000 (54.93%) of the total hospital budget. Meanwhile, the budget for the procurement activities to fulfill Covid services at the Sleman Hospital is allocated a fund of Rp. 16,884,869,182 (18.90%) of the total budget for procurement activities in hospitals (consisting of several budget expenditure accounts). This paper is part of thesis⁴.

Table 1. Budget Data for Procurement Activities at Sleman Hospital in 2020

No	Budget Type	Procurement Activities	Procurement Activities specified for Covid 19
1	BLUD	Rp. 46.690.000.000	Rp. 8.298.360.000
2	APBD	Rp. 42.622.000.000	Rp. 8.586.509.182
Total		Rp. 89.312.000.000	Rp. 16.884.869.182

Source: Sub Division of Planning and Evaluation of RSUD Sleman

2. Materials and Methods

This research is qualitative research. The research was started from June to July 2021 at the Sleman Hospital, Yogyakarta. The research subjects were Commitment-Maker Officers (PPK), Technical Implementation Officers (PPTK), Procurement Officers, and Users of goods resulting from procurement activities. The data used were procurement activities for April-December 2020. Data analysis was carried out through data reduction, data presentation, and withdrawal.

3. Results

The procurement of goods/services during an emergency situation at the Sleman Hospital was carried out to fulfill the service needs of

COVID-19 patients. This activity began in April 2020 after the disaster emergency response period in Sleman Regency was ordered through the Decree of the Sleman Regent number: 23/Kep. KDH/A/2020 dated March 24, 2020, regarding the Confirmation of the Emergency Response Status for the Corona Virus Disease 2019 (COVID-19) Disaster in Sleman Regency. This was in line with the Confirmation of the Sleman Hospital as a referral hospital for COVID-19 patients, through the Decree of the Governor of the Special Region of Yogyakarta, number: 61/KEP/2020 dated March 17, 2020, concerning Designation as a Referral Hospital for the Management of Certain Emerging Diseases.

Table 2. Source of Budget for Covid-19 Procurement Activities at Sleman Hospital in 2020

No	Type of Activity	Source of Funds	Budget
1	Procurement of medical equipment	APBD	581.950.000
2	Procurement of medical equipment	APBD (Tax)	1.936.399.182
3	Procurement of BMHP (reagent)	APBDP	2.851.200.000
4	Procurement of medical equipment (hepa filter)	APBDP	3.216.960.000
5	Procurement of medical equipment	BLUD	968.660.000
6	Procurement of nonmedical equipment	BLUD	2.678.700.000
7	Rehabilitation and maintenance of buildings	BLUD	1.051.000.000
8	Procurement of drugs, consumable medical supplies, BMHP	BLUD	3.600.000.000
		Total	16.884.869.182

Data source: Subsection of Planning and Evaluation

The implementers of the procurement of goods/services at RSUD Sleman have applied the principles of efficiency, effectiveness, transparency, openness, competition, fairness, and accountability in each stage. The implementation of the procurement of goods/services at the Sleman Hospital consists of the following stages:

a. Planning

The planning stage at the Sleman Hospital began after the confirmation from the state of emergency with the decision of the Sleman Regent number: 23/Kep. KDH/A/2020 dated March 24, 2020, regarding the Confirmation of Emergency Response Status for Corona Virus Disease 2019 (COVID-19). Evaluation of the planning stage can be seen in table 4.

Activities carried out in the planning stage include:

- 1) Identification of needs in RSUD Sleman was carried out by Commitment-Maker Officers (PPK), mostly based on suggestions from users.
- 2) Analysis of Resources Availability at RSUD Sleman showed that the existing resources

were not able to carry out self-managed procurement.

- 3) The confirmation of the procurement method at the Sleman Hospital was carried out by each PPK. There were several procurement methods selected, namely: e-purchasing, direct procurement, direct appointment, and quick tender.

Table 3. Evaluation of Procurement of Goods/Services in the Planning Stage

No	Activity	Standard	Evaluation Result
1	Needs identification	<ul style="list-style-type: none"> – Done by PPK. – Set by KPA. – Data collection simultaneously 	<ul style="list-style-type: none"> – Done by PPK and goods users – Confirmed by PPK. – Data collection was not simultaneously
2	Resources Identification	<ul style="list-style-type: none"> – PPK and PP have competency certificates (Provider) – Planning team, Implementation team, supervisor team (self-management) 	<ul style="list-style-type: none"> – Certificate of competence procurement exists – No team for self-managed activities
3	Confirmation of procurement method	Done through Self-management and Provider	By Provider

b. Implementation

The stages of implementation started with the selection, which was the owner of the activity. The selection at the Sleman Hospital was carried out by the Commitment-Maker Officer (PPK) and the Procurement Officer through electronic

procurement (e-procurement) and non-electronic procurement (manual). At this stage, a contract was signed. The procurement method can be seen in table 4. Evaluation of the implementation phase can be seen in table 5.

Table 4. Procurement Method for the COVID-19 Emergency period at Sleman Hospital in 2020

No	Activity	Procurement Method
1	Procurement of medical equipment	<i>e-purchasing</i> e-catalog LKPP
2	Procurement of medical equipment (tax)	<i>e-purchasing</i> e-catalog LKPP
3	Procurement of BMHP (reagent)	Direct appointment
4	Procurement of medical equipment (hepa filter)	Direct procurement through E-SIKAP and quick tender
5	Procurement of medical equipment	<i>e-purchasing</i> e-catalog LKPP and direct procurement
6	Procurement of nonmedical equipment	Direct procurement and direct appointment
7	Rehabilitation and maintenance of buildings	Direct appointment

Table 5. Evaluation of the Procurement of Goods/Services in the Implementation Stage

No	Activity	Standard	Evaluation Result
1	Procurement Authorities	KPA and PPK	KPA, PPK, and PP
2	Selected Provider	– Provider with similar experience – Provider with close chain supply	– Provider with similar experience – Provider with close chain supply
3	Selection process	As soon as possible	Some done well
4	Selection method	Direct appointment	Direct appointment, direct procurement, e-purchasing, quick tender
5	Price quote entry	According to the set schedule	Some activities according to the set schedule
6	Price reasonability	There is a price fairness letter	Different letter formats
7	Determination of SPPBJ	On time, the day after the winner was selected	Done well
8	Contract signing	– Can be done until the completion stage. – Can be done before the budget is available	– Performed on-stage work implementation. – Done after budget available
9	Contract control	– Conducted a meeting monitoring – Checked working result	– Communication via Whatsapp, telephone, e-mail, and letter. – Checked working result

c. Work Completion

This was the final stage of procurement at RSUD Sleman. The goods arrived, the rehabilitation of the space was completed, and the contract was completed. The payment process was carried out when the physical result of the work was achieved 100% and carried out function tests and training for users of medical devices. In addition, the requirements for payment administration documents must be completed. The payment method did not use

installment but a lump sum payment after the work was declared complete. The Commitment-Maker Officer submitted the goods to the Budget User Proxy with a Minutes of Handover. Furthermore, the hospital waited for an audit process from the inspectorate and from the Financial and Development Supervisory Agency (BPKP) for the implementation of the procurement of goods/services during the COVID-19 emergency. Evaluation at the completion stage can be seen in table 6.

Table 6 Evaluation of the Procurement of Goods/Services in the Completion Stage

No	Activity	Standard	Evaluation Result
1	Submission of results	On-time, specifications matched	On-time, specifications matched
2	Submission of payment	– Written request provider – BAST Evidence payment request exists	– Written request provider – BAST Evidence payment request exists
3	Payment method	Monthly down payment, term, lump sum	Lump sum

2. Financial Realization of Goods/Services Procurement Activities during the COVID-19 Emergency

The achievement of the financial realization of goods/services procurement in the COVID-19

emergency period at the Sleman Hospital in 2020 can be seen in table 7.

Table 7. Realization of the Covid-19 Procurement Budget at Sleman Hospital in 2020

No	Activity	Budget	Realization	%
1	Procurement of medical equipment	581.950.000	576.360.453	99
2	Procurement of medical equipment	1.936.399.182	1.872.436.064	97
3	Procurement of BMHP (reagent)	2.851.200.000	720.000.000	26
4	Procurement of medical equipment (hepa filter)	3.216.960.000	138.232.600	5
5	Procurement of medical equipment	968.660.000	933.943.325	97
6	Procurement of nonmedical equipment	2.678.700.000	2.193.791.335	82
7	Rehabilitation and maintenance of buildings	1.051.000.000	1.006.938.756	96
8	Procurement of drugs, consumable medical supplies, BMHP	3.600.000.000	2.525.221.896	71
Total		16.884.869.182	9.966.924.429	59

Data source: Subsection of Planning and Evaluation

The table above shows the physical and financial realization of goods/services procurement activities during the COVID-19 pandemic. Some may be high but some are very low so overall the results are 59%.

4. Discussion

Implementation of Goods/Services Procurement during the COVID-19 Emergency at Sleman Hospital

Sleman Hospital as a government-owned agency carrying out goods/services procurement activities during the COVID-19 emergency followed Presidential Regulation no. Emergency. Activities were carried out through 3 stages, namely planning, implementation, and completion of work. "There are significant changes related to the e-procurement mechanism by the OPD involved in handling the COVID-19 outbreak in the Magelang City Government.

These changes included simplifying the process of procurement of goods/services (PBJ) from 6 (six) stages to 3 (three) stages following the Regulation of the Public Procurement Policy Institute (LKPP) number 13 of 2018 following the Procurement of Goods/Services in Handling Emergency Situations" ⁵.

The stages of procurement of goods/services carried out at the Sleman Hospital are:

a. Planning

The period of procurement in the planning stage at the Sleman Hospital was appropriately done after the determination of the state of emergency began with the decision of the Sleman Regent number: 23/Kep. KDH/A/2020 dated March 24, 2020, regarding the Confirmation of the Emergency Response Status for the CoronaVirus Disease 2019 (COVID-19) Disaster." The procedure for the goods/services procurement in handling an emergency applied in an emergency situation based on the confirmation of the status of an

emergency determined by the authorized official and/or certain circumstances " 6.

The identification of the need for goods at the Sleman Hospital was carried out by the Commitment-Maker Officer (PPK), which was also carried out by each PPK according to the existing budget. The type of procurement carried out in the procurement of goods is to fulfill the service needs of COVID-19 patients. "Goods and services that can be provided through procurement in handling COVID-19, fundamentally, all goods/services in the context of handling COVID-19 which are urgent, must be fulfilled during an emergency situation"

Analysis of resources availability conducted at RSUD Sleman showed that the RSUD did not have the resources to carry out self-managed procurement, so that procurement was conducted through suppliers. "If the Commitment Maker Officer (PPK) sees that it is managed independently, it is necessary to hold coordination between various concerned parties to be able to carry out inspections, emergency handling, preparatory meetings, as well as the implementation and handover of work. On the other hand, if it is through a provider mechanism, then PPK appoints and selects the right provider to then carry out various jobs"⁷.

b. Work Implementation

Referring to article 59 of Presidential Regulation number 16 of 2018, the method of selecting a provider of goods/services in an emergency is a direct appointment. However, RSUD Sleman in carrying out this procurement, in addition to using the direct procurement method, also used other methods, namely e-purchasing, direct procurement, and fast tender. These were done as a follow-up that PPK chose the closest

provider who was procuring similar goods/services, and other providers that were considered capable and met the qualifications to carry out the procurement of similar goods/services.

As the priority was the speed in making decisions considering the status of an emergency, the procurement parties involved were minimized to only the Budget User (PA)/ Budget User Authorization (KPA) and PPK.PA/KPA instructed the Commitment Maker Officer to carry out the procurement of goods/services following the Letter of Intent. Circular no. 3 of 2020 regarding the explanation of the implementation of the procurement of goods/services in the context of Handling the Coronavirus Disease 2019 (COVID-19). The administrator of goods/services procurement at the Sleman Hospital was PPK and the procurement official. Procurement officials were involved to accelerate the implementation of procurement in large quantities and there were procurement applications that could only be accessed by the procurement officials." Therefore, the use of generally accepted procurement procedures is not prohibited in an emergency. As long as these general procedures do not impede the speed and accuracy of emergency response are relevant. For example, direct procurement is carried out in emergency management by procurement officials, as long as it does not cause delays in handling and does not violate the regulations"⁸.

The procurement system at the Sleman Hospital was carried out through electronic and non-electronic methods. The non-electronic was done manually through a direct appointment and direct procurement. Meanwhile, E-procurement was carried out through e-purchasing LKPP e-

catalog and E-Provider Performance Accountability System (e-SIKAP) through the Electronic Procurement Agency (LPSE) of Sleman Regency. "E-procurement makes the process of procuring goods and services more effective, efficient and transparent, therefore the procurement process is faster, more precise and transparent"⁹.

The stage of carrying out the work ends when the goods have arrived at Sleman Hospital and have gone through function tests. Submission of work results using the acceptance of the order (goods).

After the provider was selected, PPK RSUD Sleman issued a Letter of Appointment for a Provider of Goods/Services (SPPBJ) as well as a Letter of Order (SP) if the procurement carried out in the procurement of goods/services; and a Work Start Order (SPMK) by the PPK for construction work. The period of the work implementation varied depending on the agreement made by each PPK at the Sleman Hospital. The stages of implementation ended when the goods arrived at the Sleman Hospital and went through a function test and submission of work results using the Handover Report (BAST).

c. Work Completion

LKPP Regulation No. 13 of 2018 concerning the Procurement of goods/services in handling circumstances states that the contract is in the completion stage. However, at RSUD Sleman, the signing of the contract was carried out during the execution of the work, after the issuance of the Letter of Appointment for the Provider of Goods/Services (SPPBJ). Contracts made at the beginning were an attitude of prudence, a sense of calm and security for procurement parties, and

the work carried out had a contract, as is the case when procuring goods/services in general. This attitude was in line with the opinion (2011) in Arsana (2016) that prudence, independence, integrity, and good corporate governance are the basic principles of procurement.

After the auction process and the auction winner were determined, the issuance of SPPBJ by PPK was an initial series of procurement of goods/services. After the PPK issued the SPPBJ, therefore when the official contract was prepared and enforced, the SPPBJ acted as a binding contract. The position of SPPBJ was crucial because contracts may have been canceled or transferred due to refocusing of activities and budget relocation due to the impact of the current COVID-19 pandemic¹⁰.

Payments for work results at RSUD Sleman mostly used the lump sum payment method for work performance, not installments. According to the PPK, it would be more efficient as payment administrative documents are not required often. So that payment was made when the provider completed the work with 100% physical realization and carried out function tests and training for users of medical devices.

Financial Realization of Goods/Services Procurement Activities during the COVID-19 Emergency

The data obtained in this study showed that the achievement of physical and financial realization of goods/services procurement activities varied during the COVID-19 pandemic. Some may be high but some are very low, therefore the overall results are 59%.

The achievement figure for financial realization from the goods/services procurement for COVID-19 service activities at the Sleman

Hospital is 59%. This figure stated that the category of financial realization was not done well. "If the score is less than 60 (sixty), it means that the criteria for the absorption of the category budget are not good. The results of his research found that the spread of covid-19 influenced budget absorption"¹¹.

The majority of the slow absorption of the budget occurred due to the tender process which took several months. As there were technical and non-technical processes that had been carried out and had to go through the procedures stipulated in the law. The slow pace of the auction process and the added conflicts that occurred during the tender process further exacerbated the length of time required for budget implementation"¹².

Two procurement activities that financial relaxation was done poorly were the procurement of BMHP (reagents) with a financial realization of 26%; and the procurement of medical devices (Hepa filter) with a financial realization of 5%. Judging from the source of funds, both activities were funded by the Revised Regional Revenue and Expenditure Budget (APBDP).

The causes of the low achievement of financial realization from the above activities were:

- a. Procurement of BMHP (reagent), caused by:
 - 1) The Amendment Budget Determination Document (DPA) was set at the end of September 2020, so that new procurement activities only could be carried out after the DPA was established.
 - 2) The provider for COVID-19 laboratory examination reagents, was the sole provider in Indonesia.

- 3) The COVID-19 pandemic condition also occurred in the country of origin of the reagent purchase (America) causing a decrease in production. The ordered goods could not be fulfilled according to the order quantity.
- b. Procurement of medical equipment (hepa filter)
 - 1) The Amendment Budget Determination Document (DPA) was set at the end of September 2020, so that new procurement activities only could be carried out after the DPA was established.
 - 2) The procurement method chosen was a quick auction, so through the Goods/Services Procurement Agency (BPBJ), the Sleman Regional Government had to go long process through predetermined stages, starting from the delegation of authority from the Commitment Maker Officer (PPK) to the chosen winner.
 - 3) There was a failed auction as the provider could not carry out the work until the deadline. Therefore, there was not enough time to conduct a re-auction as it had entered the end of the fiscal year (December 2020).

Judging from the causes of the low achievement of financial realization in the details of each procurement activity, it can be explained that procurement activities sourced from the Revised APBD funds has a low achievement of financial realization as not carrying out optimal procurement activities. This was influenced by the limited time for carrying out the work as it was already at the end of the fiscal year, so there was no opportunity to conduct a re-auction.

5. Conclusion

Based on the results of the study, it could be concluded that the Sleman Hospital carried out the procurement of goods/services during the COVID-19 emergency through guidance from the regulations for the procurement of goods/services, namely the Regulation of the Government Goods/Services Procurement Policy Institute (LKPP) No. 13 of 2018 concerning the Procurement of Goods/Services. In Emergencies and regulations for the procurement of general goods/services, namely Presidential Regulation No. 16 of 2018 concerning Government Procurement of Goods/Services to speed and accuracy in handling emergencies. The procurement method used is the direct appointment method, direct procurement, e-purchasing through the LKPP e-catalog, and quick tender/auction.

Realization of activities Procurement sourced from the Regional Budget showed lower results compared to procurement sourced from the original Regional Revenue and Expenditure Budget because of limited time to implementation.

The advice conveyed in this research is that careful consideration is needed during the procurement process, specifically when choosing a provider of goods/services procurement activities during the COVID-19 emergency. Further research is needed for the evaluation of the procurement of goods/services implementation in an emergency period as the pandemic is still ongoing and there might be changes to new regulations regarding the procurement of government goods/services that would take effect starting in 2021.

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