Analisis kecukupan sumber daya pelayanan antenatal di empat Puskesmas Kota Cilegon tahun 2004

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Abstrak

Sumber daya kesehatan yang terbatas dan cakupan yang rendah merupakan masalah kesehatan di Indonesia, hal ini disebabkan karena anggaran yang terbatas untuk kesehatan. Program-program kesehatan tidak dapat dilaksanakan dengan baik karena ketidakcukupan anggaran operasional. Pelayanan antenatal adalah bagian dari program KIA yang sangat penting untuk menurunkan angka kematian dan kesakitan ibu dan bayi serta mendeteksi secara dini komplikasi kehamilan. Cakupan pelayanan antenatal di Kota Cilegon rendah, yaitu K4 = 68,91%, Fe1= 77,4 %, Fe3 = 57,8 %, TT1 = 36,8 % dan TT2 = 28,7 %.

Tujuan umum penelitian untuk mengatasi kekurangan sumber daya pelayanan antenatal di Puskesmas, Puskesmas pembantu, Polindes dan Posyandu. Tujuan khusus untuk mendapatkan gambaran besarnya kecukupan tenaga, biaya operasional serta sarana pelayanan antenatal sesuai standar di Puskesmas, Pustu, Polindes dan Posyandu.

Penelitian ini menganalisa kecukupan sumber daya tenaga (beban kerja, tugas rangkap, jumlah tenaga bidan di desa), biaya operasional (biaya administrasi dan biaya transport) , sarana pelayanan antenatal yang dilaksanakan di Puskesmas Purwakarta, Citangkil, Ciwandan dan Jombang pada akhir Desember 2005 sampai awal Januari 2006. Penelitian memanfaatkan data sekunder tahun 2004 dan data primer dari bidan. Disain penelitian non eksperimental dan deskriptif. Instrumen pengumpulan data berupa kuesioner, format isian dan check list. Sumber daya pelayanan antenatal dari masing-masing Puskesmas, Puskesmas pembantu, Polindes dan Posyandu dianalisa dengan membuat perbandingan sumber daya aktual dengan normatif.

Hasil penelitian sumber daya tenaga pelayanan antenatal didapatkan bahwa semua bidan di Puskesmas dan bidan di desa beban kerjanya ringan. Bidan Puskesmas mempunyai kerja rangkap, sedangkan bidan di desa sebagian besar tidak mampunyai tugas rangkap. Tenaga bidan di desa di empat Puskesmas masih kurang. Biaya administrasi pelayanan antenatal yang dibutuhkan di seluruh jenis tempat pelayanan (Puskesmas, Puskesmas pembantu, Polindes dan Posyandu) berkisar antara Rp 18.255.000,00 – Rp 26.225.000,00. Kurangnya antara Rp 10.926.000,00 – Rp 19.844.500,00.

Biaya transport pelayanan antenatal yang dibutuhkan di seluruh jenis tempat pelayanan berkisar antara Rp 12.800.000,00 – Rp 19.680.000,00. Kurangnya berkisar antara Rp 6.862.000,00 – Rp 16.192.000,00.

Biaya biaya administrasi dan transport pelayanan antenatal di Puskesmas Kecamatan berkisar antara Rp 31.055.000,00 – Rp 45.905.000,00. Kurangnya berkisar Rp 19.097.500,00 – Rp 35.809.500,00.

Sarana pelayanan antenatal di seluruh Puskesmas, Puskesmas pembantu, Polindes dan Posyandu masih kurang, kecuali di Puskesmas pembantu Purwakarta sarana sudah cukup.

Saran untuk Puskesmas agar melaksanakan kunjungan K4 bersamaan dengan hari Posyandu, mengusulkan agar Dinas Kesehatan membuat kebijakan penggunaan dana pelayanan dasar PKPS-BBM untuk kegiatan pelayanan antenatal, mengusulkan retribusi 100 % dikembalikan ke Puskesmas serta membuat proposal ke pihak swasta.

Saran untuk Dinas Kesehatan agar membuat perhitungan kebutuhan tenaga bidan, menerapkan P2KT (Perencanaan dan Penganggaran Kesehatan Terpadu) untuk menyusun kegiatan program kesehatan sesuai kebutuhan, mengusulkan agar Depkes membuat kebijakan tertulis untuk penggunaan dana PKPS-BBM agar lebih fleksibel dan dapat disesuaikan dengan kegiatan di Puskesmas.

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The insufficiency of health resources and the low of health service coverage are health problems in Indonesia, which is caused by the limitation of health budget. Health programs cannot be carried out well because of the insufficiency of operational budget. Antenatal care is part of KIA program, which is very important to decrease mortality rate and morbidity rate of mother and infant, to early detect pregnancy complication. Antenatal care coverage in Cilegon City is low; many of the programs have not reached the targets, namely K4=68.91%, Fe1=77.4%, Fe3=57.8%, TT1=36.8%, and TT2=28.7%.

The general objective of this research are to address the lack of resources of the antenatal care at Health center, sub Health center, Polindes, and Posyandu. Particularly, this research is aimed at obtaining the description of the sufficiency rate of manpower, operational budget and antenatal care facilities in line with standards at Health center, sub Health center, Polindes, and Posyandu.

This research only analyze the sufficiency of manpower resources (workload, concurrent responsibilities, the number of midwives in villages), operational budget (administration budget and transport budget), and facilities for the antenatal care carried out at Health center of Purwakarta, Citangkil, Ciwandan, and Jombang from the end of December 2005 until the beginning of January 2006. The research uses secondary data from KIA at 2004 treasurer and primary data from the whole midwives.

The design of the research is non-experimental and descriptive. The instruments used to collect the data are questionnaires, forms, and check lists. The antenatal care resources from each Health center, sub Health center, Polindes, and Posyandu were analyzed by comparing the actual resources with the normative ones.

The result shows that all midwives at Health center and villages have mild workload. Health center midwives have concurrent responsibilities, whereas midwives at villages do not. The number of midwives in all villages still lack.

The administration budget for antenatal care needed in all type of service place (Health center, sub Health center, Polindes and Posyandu) ranging from IDR 18.255.000,00 to IDR 26.225.000,00, lack of ranging from IDR 10.926.000,00 to IDR 19.844.500,00.

The transport budget for antenatal care needed in all type of service place range from the IDR 12.800.000,00 to IDR 19.680.000,00. Lack of ranging from IDR 6.862.000,00 – IDR 16.192.000,00.

The administration and transport budget for antenatal care at Health center District range from the IDR 31.055.000,00 to IDR 45.905.000,00. Lack of range IDR 19.097.500,00 to IDR 35.809.500,00.

Facilities for antenatal care in all Health center, sub Health center, Polindes and Posyandu are still less, except in sub Health center of Purwakarta have enough.

It is recommended that Health center optimize home visit especially K4 for pregnant women at the same time with the day of Posyandu, proposing the Health Office to make the policy of elementary service fund usage of PKPS-BBM for the activity of antenatal care, proposing retribution 100 % returned to health center and also make the proposal to private sector.

It is recommended that Health Office to making calculation of requirement of midwives, implement P2KT (Integrated Health Planning and Budgeting) to compile the Health services activity of according to requirement, proposing Depkes to make the policy written by usage of to fund of PKPS-BBM more flexible

can be adapted for activity in Health Center.