

Gambaran manajemen program kesehatan jiwa di Kota Bandung tahun 2018 = Description of mental health program management in Bandung City 2018

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Abstrak

Skripsi ini membahas tentang manajemen program kesehatan jiwa di Kota Bandung. Penelitian ini adalah penelitian dengan pendekatan kualitatif, perolehan data melalui wawancara mendalam dan telaah dokumen. Penelitian dilakukan di Dinas Kesehatan Kota Bandung, dan empat Puskesmas di wilayah kerja dinas, dengan menggunakan kerangka sistem yang berfokus pada input kebijakan, SDM, dana, sarana dan proses manajerial perencanaan, pengorganisasian, pelaksanaan, pengawasan dan evaluasi.

Hasil penelitian menyarankan agar seluruh pemangku pemerintah daerah, dinas, puskesmas, lintas sektor menyamakan persepsi terkait program kesehatan jiwa untuk disepakati oleh seluruh pihak, sehingga setiap pihak mengetahui jelas batas kewenangannya masing-masing dalam pelaksanaan program kesehatan jiwa. Sinkronisasi kebijakan terkait ketersediaan dan kewenangan pemberian obat Psikofarma di Puskesmas khususnya diagnosa masalah kesehatan jiwa ringan-sedang. Segera dan rutin melakukan pelatihan SDM, membentuk TPKJM sehingga koordinasi antar lintas sektor dapat berjalan secara berjenjang dan lebih terfokus, intensif melakukan pengawasan dan evaluasi baik Dinas Kesehatan maupun Puskesmas, serta meningkatkan komunikasi serta motivasi bagi pelaksana program oleh Kepala Puskesmas dan Kepala Dinas.

.....This study discusses about the mental health program management in Bandung City. This study used qualitative approach, data collection is done by in depth interviews and document review. This research was conducted at the Dinas Kesehatan and four Puskesmas in Bandung City, using system approach framework, focusing on input policy, man, money, facilities and managerial processes that begin by planning, organizing, implementing and then monitoring and evaluating.

The results of the study suggest that all stakeholder Local government, Health Office, Puskesmas, Social Office Affair, and others that could involve to share common perception related to mental health programs to be agreed upon by all parties involved, so that each party knows clearly the role and authority in the implementation of mental health programs, there shpuld be synchronization of policies related to the availability and authority of Psychopharmaceutical drugs in Puskemas, especially the diagnosis of mild to moderate mental health problems. Training for program implementers program coordinator needs to be conducted immediately. The team of mental health TP KJM need to be formed, so that coordination between sectors can run in stages and be more focused. The government should meet the needs of the facilities be more intensive in conducting monitoring and evaluation, improve communication and motivation to program coordinators by head of health office and Puskesmas Bandung City.