

Analisis implementasi kebijakan Dana Alokasi Khusus (DAK) fisik subbidang pelayanan kefarmasian tahun 2018 = Analysis implementation of specific allocation grant (DAK) for pharmaceutical services in 2018

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Abstrak

ABSTRAK

Kebijakan DAK Fisik Subbidang Pelayanan Kefarmasian bertujuan untuk membantu daerah dalam pencapaian target prioritas nasional, dalam hal ini mencapai ketersediaan obat dan vaksin di Puskesmas serta Instalasi Farmasi yang memenuhi standar manajemen pengelolaan obat. Tesis ini bertujuan untuk menganalisis implementasi DAK Fisik Subbidang Pelayanan Kefarmasian Tahun 2018. Penelitian dilakukan secara mix method, penelitian kuantitatif dilanjutkan dengan penelitian kualitatif menggunakan kerangka teori Chemma-Randinelli. Kuesioner dikumpulkan menggunakan aplikasi online dari 212 Kab/Kota di seluruh Indonesia. Wawancara mendalam dilakukan kepada para pembuat kebijakan di pusat dan pelaksana DAK di daerah. Hasil penelitian menyatakan bahwa Implementasi DAK Fisik Subbidang Pelayanan Kefarmasian Tahun 2018 telah berjalan baik namun masih terkendala dalam kualitas data dukung, penyaluran dan pemanfaatan DAK, kepatuhan dan ketepatan pelaporan serta realisasi anggaran yang belum optimal. Pada kondisi lingkungan kebijakan masih terdapat permasalahan pada pelaksanaan pengadaan obat melalui e-catalog serta aplikasi pelaporan yang kurang fleksibel dan sering bermasalah. Komunikasi dan koordinasi antar organisasi di daerah serta jejaring pusat dan daerah masih perlu ditingkatkan. Sosialisasi kebijakan terkait DAK masih bersifat sektoral. Standarisasi prosedur perencanaan, pelaksanaan serta evaluasi telah tersedia. Dukungan Pemda dan Pemerintah terhadap DAK sangat baik. Adanya PMK terkait penyaluran DAK secara bertahap yang disesuaikan dengan kinerja masih dianggap menyulitkan daerah. Sebagian besar responden telah memiliki sarana dan prasarana yang terdapat di Juknis. Untuk itu perlu ditelaah kembali menu yang dapat diadakan melalui DAK. Alokasi DAK masih dirasa tidak sesuai dengan kebutuhan daerah. Karakteristik organisasi pelaksana berhubungan signifikan berkekuatan lemah dan berpola positif dengan kinerja implementasi DAK. Komunikasi internal Dinkes serta komitmen pelaksana terhadap DAK sangat baik. Namun sebagian besar pelaksana masih merasa kesulitan melaksanakan DAK. Terdapat hubungan yang signifikan antara kondisi lingkungan, hubungan antar organisasi, sumber daya kebijakan serta karakteristik organisasi pelaksana dalam implementasi DAK Subbidang Pelayanan Kefarmasian Tahun 2018. Hal yang perlu ditingkatkan adalah kualitas pelaksana melalui pelatihan, jejaring pusat dan daerah serta perbaikan pengadaan obat melalui sistem e-catalog.

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ABSTRACT

Specific Allocation Grant (DAK) for Pharmaceutical Services aims to support districts in accordance with the national priority targets, in this case achieving the availability of medicines and vaccine in Puskesmas as well as Pharmaceutical Installations that should meet the drug management standards. This thesis aims to analyze the implementation of DAK for Pharmaceutical Services in 2018. This study was a quantitative research followed by a qualitative research using the framework of the Chemma-Rondinelli theory. Questionnaires were collected using online applications from 212 districts throughout Indonesia. In-depth interviews were conducted with policy makers and DAK implementers. The results of the study state that DAK Implementation for Pharmaceutical Services in 2018 was performed well but still constrained in the quality of supporting data, distribution and utilization of DAK, compliance and accuracy of reporting as well as the budget realization that has not been optimal. In the environmental conditions, there are some problems in the implementation of drug procurement through e-catalogs and reporting applications that are not flexible. Communication and coordination between organizations in the districts are need to be improved. Policy dissemination related to DAK is still sectoral. Standardization of planning, implementation and evaluation procedures are available. The effectiveness of the central and regional networks still needs to be improved. The local and central government are supporting DAK. Regulation related to DAK distribution is considered difficult for the districts. Most of the respondents were reported already have facilities and infrastructure from DAK. The DAK allocation is not in accordance with districts needs. The characteristics of implementing organizations are significantly correlated with positive and weak strength with the DAK implementation. Internal communication and implementers commitments to DAK are very good. However, most implementers found that DAK implementation is difficult. There is a significant correlation between environmental conditions, relationships between organizations, policy resources and characteristics of implementing organizations. Things that need to be improved are the quality of the implementers through training, the network between the central and local government and drug procurement through the e-catalog system.