

Analisis Kinerja Pos Pembinaan Terpadu Penyakit Tidak Menular Dalam Adaptasi Kebiasaan Baru Puskesmas Penjaringan = Performance Analysis of Post Integrated Non Communicable Disease Development in Adapting New Habits at the Penjaringan Health Center

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Abstrak

Penyakit Tidak Menular menjadi kontributor tertinggi dalam kematian secara global. Proporsi 80% PTM hadir di negara berkembang, sehingga PTM juga menjadi penyebab kematian tertinggi di Indonesia. Cakupan pelaksanaan posbindu PTM hanya mencapai 50% dan belum diketahui penyebab pasti rendahnya cakupan skrining FR PTM pada triwulan pertama tahun 2022. Tujuan penelitian untuk mengetahui kinerja Posbindu PTM dalam adaptasi kebiasaan baru di Puskesmas Kecamatan Penjaringan. Penelitian ini menggunakan pendekatan kualitatif, yang bertujuan untuk mengetahui kinerja dan mendapatkan informasi dari beberapa informan mengenai suatu proses dan aktivitas di Posbindu PTM. Pengumpulan data menggunakan metode wawancara mendalam, observasi dan telaah dokumen, dilakukan di Puskesmas Penjaringan II, Puskesmas Kamal muara, Puskesmas Kapuk Muara pada bulan Mei-Juni 2022. Informan kunci dalam penelitian ini adalah pelaksana program posbindu, informan pendukung adalah koordinator kader, PJ program PTM, kepala puskesmas kelurahan, Kasie Kesra kelurahan dan peserta posbindu. Hasil penelitian didapatkan kinerja posbindu PTM belum sesuai standar. Sumber daya manusia sudah mencukupi disetiap posbindu, masih ditemukan posbindu dengan sarana dan prasarana kurang memadai, kepemimpinan yang sudah cukup baik. Faktor individu ditemukan kemampuan dan keterampilan kader dalam melaksanakan pelayanan posbindu yang masih kurang, faktor psikologis motivasi instrinsik sebagian besar sudah baik. Upaya perbaikan dengan peningkatan jalinan dengan lintas sektor, pengadaan pelatihan kader dan pengajuan kebutuhan sarana dan prasarana.

.....Non communicable disease is the highest contributor in terms of mortality globally. The proportion of 80% of PTM is present in developing countries, so that PTM is also the highest cause of death in Indonesia. The scope of the implementation of the PTM Posbindu only reached 50% and the exact cause of the low PTM FR screening coverage in the first quarter of 2022. The purpose of this study was to determine the performance of the PTM Posbindu in adapting new habits at the Penjaringan Subdistrict Health Center. This study uses a qualitative approach, which aims to determine the performance and obtain information from several informants regarding a process and activity at Posbindu PTM. Data collection using the deep interview method, observation, and document review, was carried out at the Penjaringan II Health Center, Kamal Muara Health Center, Kapuk Muara Health Center in May-June 2022. The key informants in this study were the Posbindu program implementer, the supporting informant was the cadre coordinator, the PJ program PTM, head of village health center, Head of Sub-district Welfare Section and participants of posbindu. The results showed that the performance of PTM posbindu was not up to standard. Human resources are sufficient in each posbindu, there are still posbindu with insufficient facilities and infrastructure, the leadership is quite good. Individual factors found the ability and skills of cadres in carrying out posbindu services were still lacking, psychological factors were mostly good. Improvement efforts by increasing cross sectoral relationships, providing cadre training and submitting requests for

facilities and infrastructure.