

Faktor-faktor yang berhubungan dengan kunjungan pasien rawat jalan puskesmas se-kota Metro Propinsi Lampung

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Abstrak

Berlakunya Undang-Undang Nomor 22 tentang Pemerintah Daerah, dengan isu Desentralisasi Kesehatan, kemudian adanya Undang-Undang Nomor 25 tahun 2000 tentang Program Pembangunan Nasional Tahun 2000-2004 dengan isu pemerataan dan mutu upaya kesehatan dasar (puskesmas), selanjutnya diterbitkan Peraturan Pemerintah Nomor 25 Tahun 2000 tentang Kewenangan Propinsi sebagai Daerah Otonom dan selanjutnya ditegaskan dalam Surat Edaran Menteri Kesehatan tentang Kewenangan Minimal yang wajib dilaksanakan oleh Kabupaten dan Kota, dengan isu penyelenggaraan upaya/sarana kesehatan puskesmas.

Permasalahan yang terjadi adalah menurunnya kunjungan rawat jalan puskesmas rata-rata perbulan (3,26 % dari jumlah penduduk) di Kota Metro Propinsi Lampung tahun 2003 dibandingkan kunjungan rata-rata perbulan (5,3 % dari jumlah penduduk) di Kota Metro Propinsi Lampung tahun 2002.

Tujuan secara umum penelitian ini adalah mendapatkan informasi faktor-faktor yang berhubungan dengan trend kunjungan pasien rawat jalan puskesmas Se-kota Metro Propinsi Lampung dengan objek penelitian masyarakat Kota Metro yang menggunakan jasa pelayanan puskesmas di Kota Metro dan lokasi di 5 puskesmas rawat jalan Kota Metro.

Farasuraman dan kawan-kawan yang meliputi, Tangible, Reliability, Responsiveness, Assurance dan Empathy ditambah dengan Preference serta faktor Confounding (usia pasien, jenis kelamin pasien, pekerjaan pasien, pendidikan pasien dan status sosial ekonomi pasien).

Desain penelitian meliputi jenis penelitian Cross sectional, dengan uji Reliabilitas dan Validitas menggunakan rumus Corelalian Product Moment dari Pearson. sampel ditentukan dengan rumus Lemeshow dan kawan-kawan dengan demikian didapat jumlah sampel 100 orang. Uji hubungan variabel Dependent dengan variabel Independent memakai rumus Anova dan uji variabel Dependent dengan variabel Confounding memakai rumus Chi Square.

Hasil penelitian analisis Univariat; variabel Independent didapat rata-rata nilai terbanyak yang diberikan oleh responden sedang untuk variabel Independent (Preference, Tangible, Reliability, Responsiveness, Assurance dan Empathy) adalah nilai 7 dan 8.

Sampel responden variabel Confounding ((usia pasien, jenis kelamin pasien, pekerjaan pasien, pendidikan pasien dan status sosial ekonomi pasien) seluruhnya secara proporsional sama dengan populasinya di Kota Metro, sehingga data dikatakan cukup merepresentasikan populasinya.

Hasil penelitian bivariat untuk variabel Independent adalah variabel Kebersihan tempat dari Tangible didapat p Value 0,020, variabel Waktu pelayanan dari Responsiveness didapat p Value 0,013 dan variabel kompetensi petugas dari Assurance didapat p Value 0,042 lebih kecil dari Alpha 0,05.

Dengan demikian disimpulkan Kebersihan tempat, Waktu pelayanan dan Kompetensi petugas mempunyai hubungan yang signifikan.

Disaran bagi petugas kesehatan dipuskesmas untuk lebih mempercepat waktu pelayanan kepada pasien dan lebih menjaga kebersihan tempat pelayanan serta meningkatkan kecakapan dan kesanggupan dalam memberikan pelayanan kepada pasien di puskesmas.

Daftar Bacaan 42 (1972-2002)

*Factors Related to Out-Patient Visits of Metro City's Public Health Centers in Lampung Province*The prevailing of Law no. 22 on the subject of Local Government, with the issue of Health Decentralization, and the availability of Law no. 25 year 2000 on the subject of National Health Development 2000-2004 with the main issue of health quality wide spreading and basic health efforts (Public health Centers), and then by issuing Government's Regulation No. 25 year 2000 on the subject of Province's Authority as Autonomous Region, which is clarified then by Health Minister's Decree on the subject of Minimum Authority that must be carried out by Regency and City with the issue of health efforts/facilities administration.

The current problem is the decrease of out-patient visits, where their average is 3.26 % from the whole number of population in Metro City of Lampung Province in 2003, if compared with monthly average visit. 5.3 % the whole number of population in 2003.

The general aim of this study was to obtain information on factors related to public health center out-patient visits trend of Metro City of Lampung Province. The object of the study was population of Metro City who used the service of the centers. The location of the study was five out-patients public health centers in Metro City.

The study acquired in formation by using Servqual dimension 1'arasuraman, which involved: tangible, reliability, responsiveness, assurance and empathy and added by preference and confounding factor (patients' age, sex, education, and social and economic status).

Design of the study was included in cross sectional type. Test of reliability and validity is by using Correlation Product Moment formula from Pearson. Samples were determined by using the formula from Lemeshow, Cs. The number of sample acquired was 100 samples. Test of relation of dependent variable and independent variable was by using Anova formula, whereas test of relation of dependent variable and confounding variable was by using Chi Square.

The result of univariat analysis showed that independent variable obtained higher scores that were provided by the respondents, while the independent variable (preference, tangible, responsiveness, assurance and

empathy) obtained 7 and 8 scores. Respondent samples of confounding variables are all proportionally similar with the population in Metro City, therefore the data were representative of their population.

The result of bivariate analysis for independent variable was the place cleanliness of tangible obtained p Value 0.020, while service time of responsiveness obtained p Value 0.013 and staff competency variable of assurance obtained p Value 0.042, which is smaller than alpha 0.05. To sum up, place cleanliness, service time and staff competency variable were significantly related.

It is suggested to the public health centers staff to shorten time of services process to the patients, to keep the place cleaned, and to improve their competence and ability in providing services to the patient.

References: 42 (1972-2002)