

## Analisis sistem perencanaan tingkat puskesmas di kabupaten Karawang

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### Abstrak

Perencanaan Tingkat Puskesmas (PTP) merupakan suatu proses kegiatan yang sistematis untuk menyusun kegiatan pada tahun berikutnya untuk meningkatkan cakupan dan mutu pelayanan kesehatan kepada masyarakat dalam upaya mengatasi masalah-masalah kesehatan setempat. Pada pelaksanaannya menemui hambatan antara lain: kualitas dari PTP yang kurang memadai, belum terealisirnya PTP sebagai input perencanaan kesehatan Dinas Kesehatan (Din.Kes) Dati II, belum terjawabnya masalah-masalah kesehatan di wilayah kerja Puskesmas dengan adanya PTP, kurangnya pembinaan PTP oleh Dinas Kesehatan Dati II. Penelitian ini bertujuan menganalisis aplikasi Perencanaan Tingkat Puskesmas pada tiga Puskesmas di Kabupaten Karawang, dengan menggunakan pendekatan sistem dan dibahas dengan analisis SWOT (Strength, Weakness, Opportunity, Threats).

Menggunakan metode kualitatif dengan unit analisis Kepala Puskesmas, staf Puskesmas, Kepala Dinas Kesehatan Dati II Karawang, Kepala Seksi Din.Kes Dati II Karawang, Staf Urusan Perencanaan dan Informasi Din.Kes Dati II Karawang, Camat, dan Petugas Penyuluh Lapangan Keluarga Berencana Teknik pengumpulan data wawancara mendalam, diskusi kelompok dan kajian dokumen. Penelitian dilakukan secara deskripsi analitik untuk menjawab permasalahan dalam penyusunan Perencanaan Tingkat Puskesmas dengan pendekatan sistem dan dibahas dengan analisis SWOT.

Hasil penelitian menunjukkan pedoman PTP yang digunakan masih mengacu pada pedoman PTP "Micro Planning" tahun 1986 dan belum mengacu pada pedoman PTP tahun 1993. Kurangnya komitmen Kepala Puskesmas dan Din.Kes Dati II dalam mendukung PTP. Dukungan lintas sektor untuk berpartisipasi dalam kegiatan Puskesmas masih terbatas. Tidak adanya jadwal tertulis dan menyeluruh pada awal tahun anggaran dari Din.Kes Dati II mengenai pengelolaan PTP selanjutnya dan program-program yang harus dilaksanakan oleh Puskesmas. PTP sulit untuk menyelesaikan masalah kesehatan di wilayah kerja Puskesmas, bila dikaitkan dengan target yang terlalu tinggi. Tidak adanya pengaruh kebijakan PTP yang sejalan dengan Peraturan Mendagri No. 9 tahun 1982 sebagai kontrol dari pelaksanaan PTP di Puskesmas maupun pengelolaannya di Din.Kes Dati II.

Berdasarkan hasil penelitian tersebut diatas, dapat dikemukakan beberapa saran, antara lain: perlunya suatu evaluasi dari hasil pelatihan pada tahun-tahun berikutnya, adanya informasi jadwal pengelolaan PTP selanjutnya di Din.Kes Dati II, perlunya komunikasi yang lebih aktif antara Puskesmas dengan Din.Kes Dati II dan antara Kepala Seksi dengan Urusan Perencanaan Din.Kes Dati II., meningkatkan komitmen Kepala Puskesmas dan Din.Kes Dati III dalam mendukung PTP.

<hr><i>Community health center planning is a systematic activities process to arrange the activities and increase the quality of health services to the people in order to handle the health problems. In the execution, there are some obstacles for instance: the quality of the community health center planning is not good enough, there is no realization of community health center planning as an input of the health planning of health department (Dinas Kesehatan) Karawang regency, there are no solutions for health problems with the planning right now, least support for community health center planning by the department of health in

Karawang regency.

The aim of the research is to analyze the application of community health center planning on three community health centers in Karawang regency, by using the approaching system that will be talked over by SWOT (strength, weakness, opportunity , threats) analysis.

Using the qualitative method with the analysis unit are: the chief of community health center, the staffs of community health center, the chief of the health department in Karawang regency, the chief of the health department section in Karawang regency, the staffs of the planning affairs and information of the health department in Karawang regency, the head of the district (Cerat) and the officers of information of family planning. The techniques of collecting data are: in depth interview, focus group discussion, learning from the document. The research was done in descriptive analysis to solve the problems in managing the planning of community health center by the approaching system and will be discusses by SWOT analysis.

The results of the research shows the guide of community health center planning which is used still oriented to the guide of 1986 community health center planning, not to the 1993 guide. Least commitment of the chief of community health center and the department of health in Karawang regency in supporting community health center planning. Supporting from the sector to participate in the activities of it is still limited. There is no written schedule in the early budgetary year from the health department in Karawang regency on the planning management and the programs that must be done by the community health center. It is difficult to solve the health problems by the planning when it is connected to the high target. There is no effect of the policy of community health center planning refer to the minister of home affairs rule number 91 1982 as the controller of the execution in the public health center and in the management in the health department in Karawang regency as well.

Based on the result of the research, some suggestion can be brought forward, for instance: it needs an evaluation of the training results from the further years, there are some information about management schedule of further community health center planning, it needs more active communications, improving the commitment in supporting community health center planning.</i>