

## ABSTRACT

**Background:** Community health center produce medical waste and domestic waste. Medical waste need to be managed properly in order to prevent environmental pollutant. The amount of medical waste produced by community health centers continues to rise along with the increasing of health facilities and patients in Universal Health Coverage era. Based on the preliminary studies in community health center in Mojokerto Regency, the study assesse the volume of medical waste that were fluctuating in every tansport of around 50 kg to 80 kg. The volume of medical waste may increased up to 100 kg when there is an ORI program. Every community health center have medical waste management program, so they need an evaluation. In addition, research on medical waste management of community health center in Mojokerto Regency was limited. So, the objective of this research is to evaluate medical waste management of community health centers in Mojokerto Regency, using CIPP method.

**Method:** This was an observational research with qualitative method and case study design. The sample of this study involved 9 community health centers that were selected based on accreditation status and ownership of sanitary staff.

**Results:** Based on the result of this study, overall components of CIPP an medical waste management in 9 community health centers in Mojokerto Regency, the community health center N with middle level of accreditation status was the best medical waste management. While the lowest percentage of component of CIPP was community health center T which has not been accredited with the percentage of 51,2%. The range of the implementation components of the CIPP regarding medical waste management in 9 community health centers was from 51,2% to 75,6% with an average of 63,2%. The average of medical waste management in the best level accreditation status same as community health centers that have not been accredited, which is 61.0%. The status of the best level accreditation did not guarantee their implementation of medical waste management.

**Conclusion:** Implementation of the waste management component of CIPP in community health center in Mojokerto is good enough with an average of 9 community health centers was more than 50%. Based on the result from components of CIPP about medical waste management was not correlated with accreditation status in 9 community health centre in Mojokerto Regency.

Keywords: evaluation, medical waste, community health center, CIPP

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**Latar Belakang:** Puskesmas merupakan salah satu pelayanan kesehatan yang menghasilkan limbah medis. Jumlah limbah medis yang dihasilkan puskesmas terus meningkat seiring dengan bertambahnya jumlah pasien era Jaminan Kesehatan Nasional. Berdasarkan studi pendahuluan di puskesmas wilayah Kabupaten Mojokerto menyatakan bahwa volume limbah medis yang dihasilkan setiap kali pengangkutan sekitar 50 – 80 kg, sedangkan jadwal pengangkutan rutin yang dilakukan oleh pihak ketiga belum ada. Seluruh puskesmas sudah memiliki program pengelolaan limbah medis, sehingga perlu dilakukan evaluasi untuk meningkatkan keberhasilan program dan menjaga keamanan lingkungan, selain itu penelitian mengenai pengelolaan limbah medis puskesmas di Kabupaten Mojokerto masih terbatas. Maka, tujuan penelitian ini adalah untuk mengevaluasi pengelolaan limbah medis di puskesmas menggunakan metode CIPP.

**Metode:** Jenis penelitian kualitatif dengan rancangan studi kasus di 9 puskesmas di Kabupaten Mojokerto berdasarkan status akreditasi dan kepemilikan tenaga sanitarian.

**Hasil:** Berdasarkan hasil penelitian ini, dari keseluruhan komponen CIPP pengelolaan limbah medis padat di 9 puskesmas di Kabupaten Mojokerto menunjukkan bahwa puskesmas N dengan status akreditasi madya memiliki upaya pengelolaan limbah medis terbaik. Adapun puskesmas dengan persentase pelaksanaan komponen CIPP pengelolaan limbah medis padat terendah adalah puskesmas T yang belum terakreditasi dengan persentase sebesar 51,2%. Rentang pelaksanaan komponen CIPP pengelolaan limbah medis di seluruh puskesmas yaitu 51,2% - 75,6% dengan rata – rata 63,2%. Adapun rata – rata CIPP pengelolaan limbah medis puskesmas dengan status akreditasi utama sama dengan puskesmas yang belum terakreditasi yaitu 61,0%. Status akreditasi puskesmas yang baik tidak menjamin pelaksanaan komponen *context, input, process, product* pengelolaan limbah medis yang baik.

**Kesimpulan:** Pelaksanaan komponen CIPP pengelolaan limbah medis puskesmas di Kabupaten Mojokerto cukup baik dengan rata – rata pelaksanaan dari 9 puskesmas lebih dari 50%, namun pelaksanaan komponen CIPP pengelolaan limbah medis tidak berpengaruh terhadap status akreditasi 9 puskesmas di Kabupaten Mojokerto.

Kata Kunci : Evaluasi, Pengelolaan limbah medis, Puskesmas, CIPP