

## ABSTRAK

**Latar Belakang:** Program Rujuk Balik (PRB) pasien Diabetes Melitus (DM) dalam sistem kesehatan di Indonesia menuntut peran puskesmas dalam implementasinya. Puskesmas Kecamatan Pancoran berupaya menjawab kebutuhan akan PRB dengan melakukan inovasi pengembangan layanan dalam bentuk strategi optimalisasi pelaksanaan PRB, mencakup peningkatan kepesertaan prolanis dan pengambilan resep PRB melalui telekonsultasi klinis. Berbagai macam faktor yang mempengaruhi keberhasilan program PRB, termasuk efektivitas inovasi yang diselenggarakan, masih belum dievaluasi secara mendalam.

**Tujuan:** Mengeksplorasi faktor-faktor yang mempengaruhi kontinuitas kunjungan pasien PRB, berikut mengevaluasi strategi optimalisasi pelaksanaan PRB di Puskesmas Kecamatan Pancoran.

**Metode:** Desain penelitian yang digunakan adalah *mixed-method*, eksplanatori sekuensial. Penelitian dilakukan di Puskesmas Kecamatan Pancoran dengan subjek penelitian kuantitatif adalah pasien DM yang berkunjung mengambil resep PRB tahun 2020-2021 sebanyak 69 orang. Subjek penelitian kualitatif adalah 10 orang pasien DM terdaftar peserta PRB tahun 2021-Maret 2022, dengan teknik *purposive sampling*. Pada penelitian kuantitatif, data sekunder diambil dari rekam medis, dianalisis secara deskriptif sederhana menggunakan *software* analisis statistik. Penelitian kualitatif, dilakukan wawancara mendalam, dianalisa melalui koding dan diinterpretasi secara deskriptif.

**Hasil:** Tidak ada hubungan antara peningkatan kontinuitas PRB 2020-2021 dengan kepesertaan prolanis maupun pengambilan resep PRB melalui telekonsultasi klinis. Peningkatan kontinuitas kunjungan pasien PRB tidak berhubungan dengan karakteristik jenis kelamin, usia, domisili, tingkat pendidikan dan pekerjaan pasien. Terdapat faktor pendukung dan penghambat dalam pelaksanaan PRB yaitu tingkat kepuasan pasien konsultasi dengan dokter umum, *hospitality* petugas, kemudahan akses layanan, informasi, komunikasi pasien-petugas, sarana prasarana, ketersediaan obat, dukungan keluarga dan pekerjaan, fleksibilitas anggaran, waktu tunggu dan kondisi kesehatan pasien.

**Kesimpulan:** Peningkatan kontinuitas kunjungan pasien DM mengambil resep PRB pada tahun 2020-2021 tidak berhubungan secara signifikan dengan strategi optimalisasi dan variasi karakteristik pasien. Teridentifikasi faktor pendukung dan penghambat pelaksanaan PRB berdasarkan persepsi pasien. Diperlukan langkah komprehensif dalam mengoptimalkan PRB dalam tahapan jangka pendek, menengah, dan panjang termasuk potensi pemanfaatan program-program baru berbasis persepsi pasien.

**Kata kunci:** Program Rujuk Balik, Prolanis, Telekonsultasi Klinis, Kontinuitas

## ABSTRACT

**Background:** The Referral Program for Diabetes Mellitus (DM) patients in the health system in Indonesia demands the role of the Community Health Center in its implementation. The Pancoran Community Health Center seeks to answer the need for Referral Program by innovating service development in the form of an optimization strategy for Referral Program implementation, including increasing *Prolanis* participants and taking Referral Program prescriptions through clinical teleconsultation. Various factors influencing the success of the Referral Program, including the effectiveness of the innovations implemented, have not yet been evaluated in depth.

**Objective:** Exploring the factors that influence the continuity of Referral Program patient visits, along with evaluating strategies for optimizing Referral Program implementation at the Pancoran Community Health Center.

**Methods:** The research design used is Mixed-Method, sequential explanatory. The research was conducted at the Pancoran Community Health Center with quantitative research subjects being DM patients who visited to take referral program prescriptions for 2020-2021 as many as 69 people. The qualitative research subjects were 10 patients who were registered as referral program participants in 2021-March 2022, using a purposive sampling technique. In the quantitative study, secondary data were taken from medical records, analyzed in a simple descriptive manner using statistical analysis software. Qualitative research, conducted in-depth interviews, analyzed through coding and interpreted descriptively.

**Results:** There is no relationship between increasing the continuity of Referral Program 2020-2021 and *prolanis* participation or taking Referral Program prescriptions through clinical teleconsultation. The increase in the continuity of Referral Program patient visits was not related to the characteristics of the patient's gender, age, domicile, educational level and occupation. There are supporting and inhibiting factors in the implementation of Referral Program, namely the level of satisfaction of patients consulting general practitioners, staff hospitality, easy access to services, information, patient-staff communication, infrastructure, drug availability, family and work support, budget flexibility, waiting time and health conditions patient.

**Conclusion:** The increase in the continuity of DM patient visits taking Referral Program prescriptions in 2020-2021 is not significantly related to optimization strategies and variations in patient characteristics. Supporting and inhibiting factors for Referral Program implementation were identified based on patient perceptions. Comprehensive steps are needed to optimize Referral Program in the short, medium and long term stages, including the potential for the use of new programs based on patient perception.

**Key words:** *Referral Program, Prolanis, Clinical Teleconsultation, Continuity*