

INTISARI

Pengelolaan obat dimulai dari tahap seleksi, perencanaan, permintaan, penerimaan obat, penyimpanan obat, pendistribusian obat, pengendalian obat, pencatatan, pelaporan, pengarsipan, pemantauan dan evaluasi pengelolaan obat. Tujuan penelitian ini untuk mengetahui gambaran pengelolaan obat, gambaran *management support* serta faktor-faktor yang memengaruhi pengelolaan obat di Dinas Kesehatan Kabupaten Kolaka Timur selama tahun 2020-2021.

Penelitian ini bersifat *deskriptif-evaluatif*. Data kuantitatif didapatkan melalui observasi langsung dan data *retrospektif* tahun 2020-2021, data dianalisis melalui perhitungan indikator dan dibandingkan dengan standar oleh Satibi *et al.*, 2021, data kualitatif diperoleh melalui wawancara dengan metode *purposive sampling*, data dianalisis menggunakan analisis isi dan disajikan dalam bentuk narasi, dari data yang diperoleh dilakukan *Basic Priority Rating Scale* (BPRS) untuk menilai skala prioritas permasalahan dalam proses pengelolaan obat di Dinas Kesehatan Kabupaten Kolaka Timur

Hasil penelitian yang diperoleh yaitu dari 25 indikator yang dievaluasi terdapat 7 indikator yang memenuhi standar dan beberapa indikator yang belum memenuhi standar pada tahun 2020 dan 2021 yaitu kesesuaian dengan fornasi (85,28%;81,2%), kesesuaian pola penyakit (78,33%;75,58%), kecukupan dana (176,89%;230,3%), ketepatan perencanaan (433,36%;324,64%), kesesuaian jumlah permintaan (98,87%;300,07%), penyimpanan prekursor 85,71%, penyimpanan psikotropika 85,71%, penyimpanan LASA dan *High alert* 0%, ketepatan jumlah distribusi (72%;139,15%), ITO (0,47;0,74), ketersediaan obat (26,24 bulan;33,96 bulan), stok kosong tahun 2021 4,7%, stok obat kurang (5,28%, 7,04%), stok obat aman (35,84%;32,55%), stok obat berlebih (27,54%; 17,11%), stok mati (30,94%;38,59%) obat kedaluarsa (4,17%;9,89%) dan kesesuaian fisik obat 91,42%. *management support* belum seluruhnya berjalan optimal, faktor yang Memengaruhi pengelolaan obat yaitu SDM, Kurangnya koordinasi, ketersediaan obat, perubahan pola penyakit dan kurangnya sarana prasarana. Berdasarkan *Basic Priority Scale* (BPR) dapat dilakukan pelatihan dan pembinaan SDM; peningkatan koordinasi dan komunikasi; evaluasi perencanaan, pengadaan dan penggunaan obat; sosialisasi Formularium Nasional kepada puskesmas; evaluasi tren penyakit; dan penyediaan sarana dan prasarana yang menunjang pengelolaan obat.

Kata Kunci : Pengelolaan Obat, Dinas Kesehatan, Kabupaten Kolaka Timur

ABSTRACT

Drug management starts from selection, planning, requesting and receiving drugs, storing drugs, distributing drugs, controlling drugs, recording, reporting, archiving, monitoring and evaluating drug management. The purpose of the research is to evaluate drug management, an overview of management support and factors that influence drug management at the Kolaka Timur District Health Office during 2020-2021.

This research is descriptive-evaluative research. Quantitative data were obtained through direct observation and retrospective data for 2020-2021. Data analysis was carried out through indicator calculations and compared with standard by Sati'bi et al. (2021) and analyzed descriptively, qualitative data were obtained through interviews based on purposive sampling then analyzed using content analysis, data presented in narrative form, from the data obtained the Basic Priority Rating Scale (BPRS) was carried out to assess the priority scale of problems in the drug management process at the Department Kolaka Timur District Health

The research results obtained were that of the 25 indicators evaluated, there were 7 indicators that met the standards and several indicators that did not meet the standards in 2020 and 2021, namely conformity with the National Formulations (85,28%;81,2%), suitability of disease patterns (78,33%;75,58%), adequacy of funds (176,89%;230,3%), accuracy of planning (433,36%; 324,64%), suitability of the number of requests (98,87%;300,07%), storage of precursors 85,71%, storage of psychotropics 85,71%, storage of LASA and High Alert 0%, accuracy of distribution (72%;139,15%), ITOR (0,47;0,74), availability drugs (26,24 months; 33,96 months), empty stock in 2021 5%, drug stocks lacking (5,28%;6,71%), safe drug stocks (35,84%;32,55%), excess stock of drugs (27,54%;17,11%), dead stock (30,94%;38,59%), ED drugs (4,17%;9,89%) and physical suitability of drugs 91,42%. management support has not run optimally, factors that influence drug management are human resources, lack of coordination, availability of drugs, changes in disease patterns and lack of infrastructure. Based on the Basic Priority Scale (BPR), HR training and development can be carried out; improved coordination and communication; evaluation of planning, procurement and use of drugs; socialization of the National Formulary to health centers; evaluation of disease trends; and provision of facilities and infrastructure to support drug management.

Keywords: Drug Management, Health Office, Kolaka Timur