



ABSTRAK

Penelitian ini dilatarbelakangi oleh kesulitan yang dialami oleh PAK Pusat di DIY dalam mendapatkan sertifikat CDAKB dari Kemenkes RI. Tujuan penelitian ini adalah untuk mengetahui tingkat kesesuaian pelaksanaan kegiatan distribusi PAK Pusat di DIY terhadap standar CDAKB dan memahami faktor yang memengaruhi tercapainya kesesuaian kegiatan distribusi PAK Pusat dengan standar CDAKB. Desain penelitian adalah deskriptif evaluatif pada 20 PAK Pusat secara purposive sampling di DIY selama 3 bulan penelitian. Pendekatan kuantitatif menggunakan instrumen kuesioner dan pendekatan kualitatif menggunakan pedoman wawancara kepada PJT Alkes. Analisa data kuantitatif dengan perhitungan persentase tingkat kesesuaian pelaksanaan 13 aspek standar CDAKB pada PAK Pusat, kemudian dikategorikan dalam katagori sesuai dan belum sesuai, sedangkan data kualitatif disajikan dengan menarasikan faktor yang memengaruhi tercapainya kesesuaian dengan standar CDAKB. Hasil penelitian menunjukkan tingkat kesesuaian kegiatan distribusi PAK Pusat di DIY terhadap standar CDAKB adalah 75%, sedangkan faktor yang memengaruhi kesesuaian kegiatan distribusi PAK Pusat dengan standar CDAKB adalah karakteristik PAK Pusat, faktor manusia, faktor sistem dan faktor lingkungan. Kesimpulan penelitian, masih terdapat ketidaksesuaian kegiatan distribusi PAK Pusat di DIY dengan standar CDAKB dan faktor yang memengaruhi kesesuaian perlu ditindaklanjuti dengan usaha melaksanakan kegiatan distribusi sesuai standar CDAKB baik dari sisi ketersediaan sarana-prasarana serta dokumen pendukung.

Kata kunci: CDAKB; PAK Pusat; Alat Kesehatan; Kesesuaian

ABSTRACT

This research was motivated by the difficulties experienced by the Central PAK in DIY in obtaining a CDAKB certificate from the Indonesian Ministry of Health. The aim of this research is to determine the level of conformity of the implementation of Central PAK distribution activities in DIY to CDAKB standards and to understand the factors that influence the achievement of conformity of Central PAK distribution activities to CDAKB standards. The research design was descriptive evaluative at 20 PAK centers using purposive sampling in DIY. The quantitative approach uses a questionnaire and the qualitative approach uses interview guidelines for PJT Alkes. Quantitative data analysis by calculating the percentage level of conformity to the implementation of 13 aspects of CDAKB standards in Central PAK, then categorized into categories of appropriate and not appropriate, while qualitative data is presented by narrating the factors that influence achieving conformity with CDAKB standards. The research results show that the level of conformity of Central PAK distribution activities in DIY to CDAKB standards is 75%, while the factors that influence the conformity of Central PAK distribution activities to CDAKB standards are the characteristics of Central PAK, human factors, system factors and environmental factors. The conclusion of the research is that there is still a discrepancy between Central PAK distribution activities in DIY and CDAKB standards and factors that influence conformity need to be followed up with efforts to carry out distribution activities according to CDAKB standards both in terms of the availability of facilities and supporting documents.

Keywords: CDAKB; Central PAK; Medical devices; Conformity