Evaluasi Perencanaan dan Distribusi Obat Program TB di Dinas Kesehatan Provinsi Maluku Utara

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INTISARI

Indonesia memiliki target utama pada skala nasional untuk penanggulangan TBC yaitu eliminasi Tuberkulosis tahun 2030 dan bebas Tuberkulosis tahun 2050. Keberhasilan Program Penanggulangan TBC membutuhkan ketersediaan dan keterjangkauan Obat Anti Tuberkulosis, sehingga diperlukan manajemen pengelolaan Obat Anti tuberkulosis yang baik. Tujuan penelitian ini untuk mengetahui alur, efektifitas dan efisiensi proses perencanaan dan distribusi obat program TB tahun 2022 di Dinas Kesehatan Provinsi Maluku Utara serta faktor pendukung dan penghambatnya.

Penelitian ini bersifat deskriptif dengan pengamatan yang bersifat observasi dan wawancara dilakukan mulai bulan September-Oktober 2023. Data kuantitatif diperoleh secara retrospektif melalui penelusuran data dokumen perencanaan dan distribusi Obat Program TB di Dinas Kesehatan Provinsi Maluku Utara tahun 2022. Data kualitatif diperoleh melalui wawancara secara mendalam kepada 4 narasumber yang menguasai perencanaan dan distribusi obat program TB yang dipilih secara *purposive sampling*. Analisis data kuantitatif yang diperoleh diukur menggunakan indikator perencanaan dan distribusi serta dibandingkan dengan hasil penelitian, data kualitatif dianalisis isi wawancara dan disajikan dalam bentuk narasi.

Hasil evaluasi menunjukan alur perencanaan menggunakan sistem *bottom up* dengan diadakan pertemuan secara langsung antara 10 Kabupaten/Kota dengan Provinsi dan alur pendistribusian dilakukan secara *top down* dengan sistem distribusi *Pull* dan *Push*. Hasil evaluasi indikator perencanaan dan distribusi yaitu terdapat 5 indikator yang memenuhi standar dalam evaluasi yaitu indikator ketersediaan obat dalam kategori aman dengan rata-rata ketersediaan obat Program TB 12,8 bulan, tidak terdapat obat Program TB yang rusak atau kadaluarsa, obat terdistribusi seluruhnya ke 10 Kabupaten/Kota dengan nilai presentase 100%, tidak ditemukan stok obat mati dan sistem penataan obat menggunakan *First Expaired First Out* (FEFO). Adapun 5 indikator yang harus dilakukan perbaikan karena belum memenuhi standar dalam evaluasi perencanaan dan distribusi obat Program TB yaitu indikator ketepatan perencanaan dengan rata-rata 113%, indikator peyimpangan perencanaan 44,3%, indikator penyimpangan jumlah obat yang terdistribusi 1,13%, ITOR 1,33 kali/tahun dan waktu kekosongan obat selama 30 hari. Aspek pendukung yaitu tersedia TPOT tingkat Provinsi, Provinsi memiliki SDM Farmasi yang tercukupi dan tersedianya sistem informasi. Aspek penghambat terdiri dari kurangnya ketersediaan SDM Farmasi di Kabupaten/Kota, pencairan dana operasional mengalami keterlambatan, mobil box untuk distribusi obat terlalu kecil, jaringan internet yang tidak merata dan adanya keterlambatan *dropping* obat dari pusat.

Kata Kunci : Evaluasi, Perencanaan, Distribusi, Tuberkulosis, Maluku Utara

Evaluation Of Tuberculosis Medicines Program Planning and Distribution in The Provincial Health Office of North Maluku

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ABSTRACT

Indonesia has set national targets for tuberculosis (TB) control, namely TB elimination by 2030 and TB-free status by 2050. The success of the TB Control Program relies on the availability and affordability of Anti-Tuberculosis Medicines, thus requiring effective management of their distribution. The aim of this research is to understand the flow, effectiveness, and efficiency of the planning and distribution process of TB program medicines in 2022 at the North Maluku Provincial Health Office, as well as identifying supportive and inhibiting factors.

The interviews were conducted from September to October 2023. Quantitative data were obtained retrospectively through tracing the planning and distribution document data of the TB Program Medicines at the North Maluku Provincial Health Office in 2022. Qualitative data were obtained through in-depth interviews with 4 informants who were purposively sampled for their expertise in planning and distributing TB program medicines. The quantitative data analysis was measured using planning and distribution indicators and compared with research findings, while qualitative data were analyzed through interview content and presented in narrative form.

The evaluation results show that the planning process follows a bottom-up system, with direct meetings held between 10 districts/cities and the Provincial, while the distribution process follows a top-down approach using both Pull and Push distribution systems. Regarding the evaluation indicators for planning and distribution, there are 5 indicators that meet the standards in the evaluation. These include the availability indicator, categorized as safe with an average availability of TB Program medicines for 12.8 months, absence of damaged or expired TB Program medicines, complete distribution of medicines to all 10 districts/cities with a 100% distribution percentage, absence of dead stock, and the use of the First Expired First Out (FEFO) method for arrangement. However, there are 5 indicators that need improvement as they do not meet the standards in the evaluation. These include the accuracy of planning indicator with an average of 113%, planning deviation indicator at 44.3%, deviation indicator of the distributed medicines amount at 1.13%, Inventory Turn Over Rate (ITOR) at 1.33 times/year, and the occurrence of a 30-day medicines stockout period. Supportive aspects include the availability of Provincial Level Medicines and Medical Supplies Warehouse (TPOT), sufficient pharmaceutical human resources at the provincial level, and the availability of an information system. Inhibiting factors include the lack of pharmaceutical human resources at the district/city level, delays in operational fund disbursement, inadequately sized box trucks for medicines distribution, uneven internet connectivity, and delays in medicines dropping from the central level.

Keywords: Evaluation, Planning, Distribution, Tuberculosis, North Maluku