

INTISARI

Proses pengelolaan obat di puskesmas, terutama tahap perencanaan dan pengadaan memiliki peran yang sangat penting untuk memastikan tersedianya obat serta penggunaan yang optimal di setiap unit pelayanan kesehatan. Penelitian ini bertujuan untuk mengevaluasi tingkat kesesuaian pengelolaan obat tahap perencanaan, pengadaan, dan pengendalian di Puskesmas yang diteliti di wilayah Kabupaten Kulon Progo dan Gunungkidul dibandingkan dengan indikator mutu pengelolaan obat di Puskesmas, serta menggali pengaruh faktor organisasi, karakteristik puskesmas, sistem informasi manajemen, sumber daya manusia, anggaran, dan regulasi pemerintah dalam proses perencanaan dan pengadaan obat di Puskesmas.

Penelitian ini merupakan penelitian deskriptif observasional dengan pendekatan kualitatif dan kuantitatif. Data kualitatif didapatkan melalui wawancara mendalam kepada pengelola obat dengan metode *purposive sampling*. Data kuantitatif didapatkan melalui penelusuran dokumen pengelolaan obat. Subjek penelitian dipilih berdasarkan kriteria yaitu puskesmas yang berada di Kabupaten Kulon Progo dan Gunungkidul, berstatus sebagai Badan Layanan Umum Daerah (BLUD), memiliki data laporan pengelolaan obat yang dapat diakses, dan bersedia ikut serta dalam proses penelitian. Data kualitatif diolah dalam bentuk transkrip, direduksi, dan disajikan dalam bentuk narasi. Selanjutnya data kuantitatif yang diperoleh dihitung menggunakan rumus untuk tiap indikator dan disajikan dalam bentuk tabel berupa nilai persentase yang dibandingkan dengan nilai standar.

Hasil penelitian menunjukkan bahwa indikator ketepatan perencanaan di Kabupaten Gunungkidul adalah $144,90 \pm 48,21\%$, sedangkan di Kabupaten Kulon Progo mencapai $180,67 \pm 66,25\%$. Kesesuaian jumlah pengadaan obat di Gunungkidul tercatat sebesar $125,65 \pm 69,69\%$, sementara di Kulon Progo $121,06 \pm 21,59\%$. *Inventory Turn Over Ratio* (ITOR) menunjukkan angka $7,45 \pm 0,78$ kali/tahun di Kabupaten Gunungkidul dan $7,97 \pm 0,29$ kali/tahun di Kulon Progo. Ketersediaan obat di Kabupaten Gunungkidul adalah $26,05 \pm 3,26$ bulan, dan di Kulon Progo $24,07 \pm 1,28$ bulan. Faktor organisasi, karakteristik puskesmas, sistem informasi manajemen, sumber daya manusia, anggaran, dan regulasi berpengaruh dalam proses perencanaan dan pengadaan obat, penentuan jumlah kebutuhan dan ketersediaan obat, serta ketepatan perencanaan. Penelitian ini mengindikasikan bahwa sebagian besar indikator masih belum memenuhi standar. Oleh karena itu, diperlukan upaya perbaikan, seperti peningkatan dan pelatihan sumber daya manusia, serta pengembangan metode perencanaan di puskesmas untuk menjamin ketepatan perencanaan obat dan meningkatkan kualitas layanan kesehatan di tingkat fasilitas primer.

Kata Kunci: Pengelolaan Obat, Perencanaan, Pengadaan, Ketersediaan Obat, Puskesmas.

ABSTRACT

The medication management process in community health centers (Puskesmas), especially in the planning and procurement stages, plays a crucial role in ensuring both the availability of medications and their optimal use across healthcare service units. This study aims to evaluate the compliance level of medication management, focusing on the planning, procurement, and control stages at selected Puskesmas in Kulon Progo and Gunungkidul regencies, measured against established quality indicators for medication management in Puskesmas. Furthermore, it explores the impact of organizational factors, Puskesmas characteristics, management information systems, human resources, budget allocations, and government regulations on the planning and procurement processes in these health centers.

This research is a descriptive observational study using both qualitative and quantitative approaches. Qualitative data were obtained through in-depth interviews with drug managers using purposive sampling. Quantitative data were collected through document reviews of drug management records. The research subjects were selected based on specific criteria, including Puskesmas located in Kulon Progo and Gunungkidul, operating as Regional Public Service Agencies (BLUDs), having accessible drug management reports, and willing to participate in the study. Qualitative data were processed into transcripts, reduced, and presented narratively. Quantitative data were calculated using formulas for each indicator and presented in tables comparing the percentages with established standards.

The results indicate that the planning accuracy in Gunungkidul was $144.90 \pm 48.21\%$, while in Kulon Progo, it reached $180.67 \pm 66.25\%$. The conformity of drug procurement in Gunungkidul was $125.65 \pm 69.69\%$, whereas in Kulon Progo, it was $121.06 \pm 21.59\%$. The Inventory Turnover Ratio (ITOR) was 7.45 ± 0.78 times/year in Gunungkidul and 7.97 ± 0.29 times/year in Kulon Progo. The drug availability in Gunungkidul was 26.05 ± 3.26 months, compared to 24.07 ± 1.28 months in Kulon Progo. Organizational factors, health center characteristics, management information systems, human resources, budget, and regulations significantly influence the planning and procurement processes, the determination of drug needs and availability, as well as planning accuracy. This study indicates that most indicators have not yet met the required standards. Therefore, improvements are needed, such as enhancing and training human resources, as well as developing planning methods at health centers to ensure accurate drug forecasting and improve the quality of healthcare services at the primary care level.

Keywords: Drug Management, Planning, Procurement, Drug Availability, Primary Health Center