

EVALUASI IMPLEMENTASI MANAGEMEN RANTAI DINGIN VAKSIN DENGAN VIABILITAS VAKSIN DI SUKU DINAS KESEHATAN JAKARTA TIMUR DAN JAJARANNYA

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INTISARI

Latar Belakang : Tahun 2017 Indonesia mengalami KLB difteri di 20 provinsi. Selain difteri, penyakit menular yang terus mengalami peningkatan kasus selama lima tahun terakhir di Indonesia adalah campak dan Rubella. Dari hasil studi penilaian Effective Vaccine Management (EVM) yang dilakukan oleh kemenkes RI bersama UNICEF tahun 2011 dan 2012 diketahui banyak peralatan rantai vaksin yang tidak dikelola dengan benar sehingga banyak terjadi kerusakan vaksin (EVM Kemenkes, 2012). Kegagalan dalam menyediakan rantai dingin atau *cold chain* yang baik menyebabkan kerusakan hampir 50% vaksin diseluruh dunia, setiap tahun. Maka diperlukan penerapan manajemen rantai dingin vaksin yang baik, sejak vaksin diturunkan dari penyedia (pabrik) sampai vaksin digunakan di layanan kesehatan untuk menjaga viabilitas vaksin. Sejauh mana penerapan pengelolaan rantai dingin vaksin sejak dari Dinkes provinsi DKI Jakarta hingga vaksin digunakan di Fasilitas kesehatan tingkat pertama di Jakarta timur belum pernah dilakukan penelitian.

Tujuan: Untuk mengevaluasi dan mendapatkan gambaran input, proses, dan output implementasi manajemen rantai dingin vaksin di sudinkes Jakarta Timur dan jajarannya

Metode : Penelitian kualitatif deskriptif observasional dengan rancangan studi kasus, tehnik pengambilan data adalah dengan pengambilan data primer dan data sekunder. Data primer diperoleh dengan observasi terlibat implementasi rantai dingin vaksin pada tiap titik distribusi, dan viabilitas vaskin di tiap titik distribusi, serta viabilitas vaksin untuk imunisasi rutin yang diikuti sejak dari Dinkes provinsi sampai puskesmas kecamatan Duren sawit, viabilitas vaksin untuk imunisasi

massal yang diikuti sejak dari Dinas kesehatan provinsi, sampai puskesmas kecamatan Cipayung. Data primer juga didapat dengan FGD, wawancara mendalam 34 responden dan daftar tilik observasi.

Hasil : Input dalam implementasi manajemen rantai dingin vaksin sejak dari Dinas Kesehatan provinsi, ke Sudinkes Jakarta timur hingga 10 puskesmas kecamatan dan 8 sampel bidan praktek mandiri belum dapat sepenuhnya dikatakan baik

Kesimpulan : Implementasi manajemen rantai dingin vaksin di Dinas kesehatan provinsi, Sudinkes Jakarta timur, serta 10 puskesmas kecamatan sudah cukup baik, tapi perlu dimaksimalkan terutama dalam pemantauan suhu, revisi SOP rutin dan monitoring evaluasi ke puskesmas kelurahan serta faskes swasta, sedangkan implementasi manajemen rantai dingin vaksin pada bidan praktek mandiri (BPM) sangat jauh dari standar. Masih ditemukan 25 % vaksin dengan VVM C dan D serta vaksin *expired* di BPM.

Kata kunci : Implementasi rantai dingin vaksin, viabilitas vaksin, puskesmas, bidan praktek mandiri

**EVALUATION OF IMPLEMENTATION
MANAGEMENT COLD CHAIN WITH VACCINE VIABILITY
IN EAST JAKARTA HEALTH SERVICES OFFICE**

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ABSTRACT

Back ground : Difteri and measles out break again in some area of Indonesia. These disease still occur in some area of Jakarta especially east Jakarta. Inappropriate handling of vaccine may result in the occurrence of diseases which can be prevented by immunization (PD3I). Vaccine are biological product and their efficacy is affected by storage conditions. Failures in immunization programmes often times blamed on disruption in vaccine cold chain.

Ojective : This study is to assess the practice of cold chain management among health workers in health service office, and primary health care facilities in East Jakarta.

Metode : The research used qualitative design with systematical approach. It was conducted at East Jakarta community health center and midwife health care under east Jakarta health service offices. The data sampling technique which was used on the research was *purposive sampling* with compatibility principle. The data was collected through deep interview, focus discussion group, observation, documentation and document study.

Result and Discussion : A total of 34 respondents and 20 health centers participated in this study. The result showed there was enough facilities to support cold chain management vaccines in Jakarta community health center, east Jakarta health services offices, there was enough budget, for buy cold chain facilities. Almost of the vaccine managers educate, but they really not enough competency of management cold chain. Among the 20 health centers, Vaccine vial monitor stage III (C) and VVM D was found of the public health center especially midwife primary care, indicating weakness in the cold chain mechanism especially at midwife primary health care.

Conclusion

The logistic management of cold chain immunization had been handled in accordance with the guidelines even though it was still found out some problems available in the field. A lot of problem about storage happened, especially storage vaccine in midwife primary health care at East Jakarta. It is also expected that there improvement in controlling system and in increasing quality of management cold chain at East Jakarta public health, and at midwife primary care.

Keyword : cold chain, logistic management system, viability vaccine, public health center, midwife primary health care.