

## INTISARI

Kendala-Kendala Penerapan Manajemen Keselamatan dan Kesehatan Kerja  
Bagi Tenaga Medis dan Tenaga Kesehatan di Klinik Sosromiharjo

Oleh:

Suriadi Budiman Sipayung.<sup>1</sup> Ari Hernawan.<sup>2</sup>

Tujuan dari penelitian ini adalah untuk mengetahui dan menganalisis faktor penyebab penerapan manajemen K3 bagi tenaga medis dan tenaga kesehatan serta untuk mengetahui dan menganalisis kendala-kendala dalam penerapan manajemen K3 bagi tenaga medis dan tenaga kesehatan di Klinik Sosromiharjo Sleman.

Penelitian ini merupakan penelitian normatif empiris. Penelitian normatif dilakukan melalui penelitian kepustakaan atas berbagai bahan hukum baik primer, sekunder, maupun tersier dengan mempergunakan teknik studi dengan cara studi dokumen. Penelitian lapangan dilakukan dengan melakukan wawancara terhadap responden dan narasumber dengan mempergunakan panduan daftar pertanyaan atau pedoman wawancara. Responden adalah pemilik klinik, tenaga medis dan tenaga kesehatan di Klinik Sosromiharjo. Narasumber terdiri dari *stakeholder* Dinas Kesehatan, Dinas Ketenagakerjaan dan Transmigrasi Daerah Istimewa Yogyakarta. Data dari penelitian kepustakaan dan lapangan di analisis secara kualitatif dan hasilnya disajikan secara deskriptif.

Hasil penelitian menunjukkan, *pertama*; hal-hal yang menyebabkan penerapan manajemen K3 bagi tenaga medis dan tenaga kesehatan di Klinik Sosromiharjo belum sesuai dengan standar K3 karena: (1). Klinik Sosromiharjo tidak mempunyai kebijakan khusus penerapan manajemen K3. (2). Keterbatasan sarana dan fasilitas penunjang penerapan K3. *Stakeholder* tidak melakukan monitoring dan evaluasi penerapan K3 secara berkala. (3). Kesadaran dan budaya pentingnya pencatatan dan pelaporan insiden K3 serta kepatuhan penggunaan APD petugas masih belum seluruhnya terpenuhi sesuai standar K3. *Kedua*; Kendala-kendala penerapan manajemen K3 bagi tenaga medis dan tenaga kesehatan di Klinik Sosromiharjo adalah: (1) Tidak ada anggaran khusus untuk penerapan K3 dari pengelola klinik, Dinas Kesehatan, dan Dinas Ketenagakerjaan. (2). Belum menerapkan *reward* dan *punishment* dalam proses penerapan K3 di Klinik Sosromiharjo.

Kata kunci : Kendala-Kendala Penerapan K3, Tenaga medis dan Tenaga Kesehatan, Klinik.

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<sup>1</sup> Mahasiswa Magister Hukum Kesehatan Fakultas Hukum Universitas Gadjah Mada

<sup>2</sup> Dosen Fakultas Hukum Universitas Gadjah Mada

## ABSTRACT

Constrains In The Implementation Of Occupational Health And Safety  
Management For Medical And Health Personel In The Sosromiharjo Clinic

By:

Suriadi Budiman Sipayung,<sup>3</sup> Ari Hernawan.<sup>4</sup>

The purpose of this. Research is to find out and analyze the factors that cause the implementation of occupational health and safety management for medical and health workers in the Sosromiharjo Sleman Clinic.

This research is a normative – empirical study. Normative research is conducted through library research on various primary, secondary and tertiary legal materials using study techniques by means of document studies. Field research is carried out by conducting interviews with respondents and resource persons by using a questionnaire or interview guide. Respondents are the owner of the clinic. Resources persons consisted of stakeholders from the health department employment department and transmigration of the Special Region Of Yogyakarta. Data from library and field research are analyzed qualitatively and the results are presented descriptively.

The result showed that, *first*; the things that caused the implementation of occupational health and safety management for medical personnel and health workers in the Sosromiharjo Clinic were not in accordance with the K3 standards, because; (1). Sosromiharjo Clinic does not have a specific policy on the application of K3 management (2). Limited facilities for supporting the implementation of K3. Stakeholders do not monitor and evaluate the application of K3 periodically. (3). Awareness and culture of the importance of recording and reporting K3 incidents and compliance with the use of PPE officers is still not entirely met according to K3 standards. *Second*; the constraints in applying K3 management for medical and health workers in the Sosromiharjo Clinic are (1) there is no specific budget for K3 application from the clinic manager, health department and employment department. (2) it has not applied reward and punishment in the process of applying K3.

Key words : Contraints in the implantation K3, Medical and Health Workers,  
Clinic

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<sup>3</sup> Student Master's Degree Program in Health Law Faculty of Law Universitas Gadjah Mada

<sup>4</sup> Lecturer Faculty of Law Universitas Gadjah Mada.