

## INTISARI

Kabupaten Gunung Kidul memiliki frekuensi kejadian bencana yang cukup tinggi maka kesiapsiagaan apoteker berperan penting dalam upaya memenuhi kebutuhan dasar obat dan perbekalan kesehatan sebagai unsur vital ketika bencana. Penelitian bertujuan untuk mengetahui gambaran kesiapsiagaan apoteker dan ketersediaan obat serta perbekalan kesehatan dalam penanggulangan bencana pada Dinas Kesehatan dan fasilitas kesehatan di Kabupaten Gunung Kidul. Pendekatan kualitatif *cross-sectional* dilakukan melalui observasi lembar *checklist* ketersediaan dokumen pendukung kesiapsiagaan apoteker serta wawancara Kepala Instalasi Farmasi Dinas Kesehatan Kabupaten, 15 tenaga kefarmasian di 8 Puskesmas serta 2 Kepala Instalasi Farmasi di 2 Rumah Sakit (IFRS). Pendekatan kuantitatif retrospektif diperoleh melalui data obat dan perbekalan kesehatan yang tersedia untuk penggunaan rutin pada tahun 2018.

Hasil observasi dan wawancara kesiapsiagaan apoteker menunjukkan bahwa dokumen pendukung 25% tersedia di Dinas Kesehatan namun di 8 Puskesmas belum tersedia (0%) sedangkan di 2 IFRS 52% tersedia. Ketersediaan dokumen berdasarkan jenisnya masing-masing adalah 27% dokumen pengorganisasian, 18% Sumber Daya Manusia (SDM), 0% obat dan perbekalan kesehatan dan 2% perencanaan kesiapsiagaan. Kesesuaian obat dan perbekalan kesehatan rutin yang tersedia di masing-masing institusi dengan daftar 110 item penanggulangan bencana adalah 72 item sesuai (65%) di Dinas Kesehatan namun hanya 67 item (60%) di 8 Puskesmas dan 74 item (67%) di 2 IFRS. Rata-rata ketersediaan obat dan perbekalan kesehatan rutin sesuai daftar item dalam penanggulangan bencana di Dinas Kesehatan, 8 Puskesmas dan 2 RS adalah 31, 30 dan 31 (bulan). Puskesmas H dan RS B berada dalam kategori aman.

Kesimpulan penelitian ini adalah dokumen pendukung kesiapsiagaan masih perlu dilengkapi pada masing-masing institusi. Obat dan perbekalan kesehatan untuk bencana masih belum tersedia, namun rata-rata ketersediaan obat dan perbekalan kesehatan rutin sesuai daftar item penanggulangan bencana berada dalam kategori berlebih dan beberapa item esensial masih belum tersedia (kuinin, klorokuin, primakuin, nalokson). Kebijakan *stakeholder* dan upaya pelatihan bagi apoteker sangat diperlukan sebagai perencanaan kesiapsiagaan bencana.

**Kata Kunci:** Kesiapsiagaan Apoteker, Bencana, Gunung Kidul, Tingkat Ketersediaan

## ABSTRACT

Gunung Kidul Regency has a high enough frequency of disasters, pharmacist preparedness plays an important role in efforts to meet the basic needs of medicines and health supplies as a vital element when disasters. The study aims to determine the description of pharmacist preparedness and availability of drugs and health supplies in disaster management at the Health Office and health facilities in Gunung Kidul Regency. A cross-sectional qualitative approach was carried out through observation of the checklist sheet availability of supporting documents for pharmacist preparedness as well as interviews of the Head of Pharmacy Installation at the District Health Office, 15 pharmacy workers at 8 Primary Healthcare and 2 Heads of Pharmacy Installations at 2 Hospitals. A retrospective quantitative approach was obtained through drug data and health supplies available for routine use in 2018.

The results of observations and interviews related to pharmacist preparedness showed that 25% supporting documents were available at the Health Office but at 8 Primary Healthcare were not yet available (0%) while at 2 IFRS 52% were available. The availability of documents based on each type is 27% of organizing documents, 18% of Human Resources (HR), 0% of medicines and health supplies and 2% of preparedness planning. The suitability of drugs and routine health supplies available in each institution with a list of 110 disaster management items is 72 appropriate items (65%) in the Health Office but only 67 items (60%) in 8 Primary Healthcare and 74 items (67%) at 2 IFRS. The average availability of drugs and routine health supplies according to the list of items in disaster management at the Health Office, 8 Primary Healthcare and 2 Hospitals is 31, 30 and 31 (months). Primary Healthcare H and Hospital B are in the safe category.

The conclusion of this study is that supporting documents still need to be completed at each institution. Drugs and medical supplies for disasters are still not available, but the average availability of drugs and routine health supplies according to the list of disaster management items is in the excess category and some essential items are still not available such as quinine, chloroquine, primakuin, naloxone. Stakeholder policies and training for pharmacists are urgently needed as disaster preparedness planning.

**Keywords:** Pharmacist Preparedness, Disasters, Gunung Kidul, Level of Availability