

ABSTRAK

Latar Belakang: Pencatatan dan pelaporan pada Puskesmas di Dinas Kesehatan Kabupaten Bener Meriah masih dilakukan secara manual sehingga sering menyebabkan tidak adanya sinkronisasi laporan antara pengelola data dengan pengelola program, proses yang demikian juga membuat kegiatan pelaporan terlambat dan data yang dilaporkan tidak akurat sehingga berdampak terhadap proses perencanaan dan pengambilan keputusan. Dinas Kesehatan Kabupaten Bener Meriah merencanakan implementasi aplikasi SIKDA Generik pada tahun 2020. Dengan implementasi SIKDA Generik, diharapkan data dan informasi yang diperoleh dapat terintegrasi dari tingkat Puskesmas ke Dinas Kesehatan, serta dapat lebih meningkatkan efisiensi dan efektifitas dari program kerja Dinas Kesehatan.

Tujuan: Untuk mengeksplorasi kesiapan Dinas Kesehatan Kabupaten Bener Meriah dalam implementasi SIKDA Generik ditinjau dari infrastruktur, kualitas SDM, perencanaan dan kebijakan pimpinan serta ketersediaan anggaran.

Metode penelitian: Penelitian ini merupakan penelitian kualitatif dengan rancangan studi kasus, penelitian dilaksanakan pada 4 Puskesmas *pilot project* dari 13 Puskesmas yang ada dalam wilayah kerja Dinas Kesehatan Kabupaten Bener Meriah. Subjek dalam penelitian ini berjumlah 15 orang ditentukan dengan teknik *purposive sampling*. Pengumpulan data dilakukan dengan wawancara mendalam, observasi dan telaah dokumen, analisa data menggunakan teknis analisis data kualitatif.

Hasil : Infrastruktur untuk implementasi SIKDA Generik berada pada range III dari penilaian kesiapan berdasarkan panduan DOQ-IT, ini mengindikasikan bahwa ketersediaan infrastruktur sangat siap dalam mendukung implementasi SIKDA Generik. Sumber daya manusia berada pada range II yang artinya kualitas SDM sudah cukup siap untuk implementasi SIKDA, petugas yang bertanggung jawab mampu mengoperasikan komputer dan sebagian petugas sudah mempunyai pengetahuan mengenai SIKDA. Perencanaan dan kebijakan berada pada range II, ini menunjukkan bahwa telah ada pemahaman tentang manfaat dari implementasi SIKDA Generik dan pimpinan berkomitmen terhadap implementasi sistem informasi kesehatan ini. Kesiapan anggaran berada pada range II, dukungan anggaran untuk pengadaan infrastruktur, pelatihan, sosialisasi dan bimbingan teknis sudah tersedia. Namun anggaran untuk pemeliharaan perangkat masih terbatas, sedangkan anggaran untuk operasional seperti honorarium petugas belum tersedia.

Kesimpulan : Secara keseluruhan kesiapan Dinas Kesehatan Kabupaten Bener Meriah untuk implementasi SIKDA Generik berada pada range II dengan nilai 30 dari 50 nilai maksimal. Ini mengindikasikan bahwa Dinas Kesehatan dan Puskesmas *pilot project* cukup siap untuk implementasi SIKDA

Kata kunci ; SIKDA Generik, Kesiapan implementasi, Sistem Informasi Kesehatan Masyarakat.

ABSTRACT

Background: Documentation and reporting activities at Public Health Centers in the Health Office of Bener Meriah Regency are still manually performed which often leads to asynchronous reports between data manager and program manager. Moreover, such process makes reporting process delayed and the reported data inaccurate which affect the process of planning and decision making. A work unit responsible for managing the health information system, the Health Office of Bener Meriah Regency, plans for the implementation of *SIKDA Generik* application in 2020. It is expected that the implementation of such application will help the Health Office to integrate data and information obtained from the Public Health Centers to the Health Office. Furthermore it will improve efficiency and effectiveness of the Health Office's work programs.

Objective: To explore the readiness of Bener Meriah Regency Health Office in the implementation of *SIKDA Generik* in terms of infrastructure, quality of human resources, planning and policies of leaders as well as budget availability.

Methods: This research employed qualitative method using a case study design. It was conducted at four Public Health Centers as the pilot projects of the *SIKDA* implementation within the working area of the Bener Meriah Regency Health Office. There were 15 informants involved in the study. Data were collected using in-depth interviews, observations and study available documentations. Data were analyzed using a qualitative data analysis technique.

Results: The infrastructure for the *SIKDA Generik* implementation was at range III of readiness assessment based on DOQ-IT, indicated that the availability of infrastructure was ready to support the implementation of *SIKDA Generik*. Human Resources was at range II, meaning that the quality of human resources was adequately ready for the implementation of *SIKDA Generik*, the officer in charge was competent to operate computer and some officers already had knowledge about *SIKDA*. Planning and Policies was at range II, indicating that there had been understanding of the benefits of implementing *SIKDA Generik* and the leaders were committed to the implementation of this health information system. Budget readiness was at range II; budget support for providing infrastructure, training, socialization and technical guidance were available. However, budget for equipment maintenance was still limited, while the budget for operational matters such as staff honorarium was not yet available. Decision makers were committed to increase the budget for maintenance and would allocate budget for the staff honorarium.

Conclusion: Overall, the readiness of the Health Office of Bener Meriah Regency for the implementation of *SIKDA Generik* was at range II with a score of 30 out of 50. This indicates that the Health Office and Public Health Centers for pilot project are ready enough for the implementation of *SIKDA Generik*.

Keywords: *SIKDA Generik*, Readiness of Implementation, Public Health Information System