

## ABSTRAK

**Latar Belakang:** Data profil kesehatan Kabupaten Bantul menunjukkan bahwa masih terdapat rumah sakit yang belum melakukan akreditasi dan terdapat Puskesmas status tingkat akreditasi dasar. Hal ini tentu dapat menyebabkan menurunnya mutu dan keselamatan pasien di Kabupaten Bantul. Menurut Permenkes 34 Tahun 2017 dan Permenkes 46 Tahun 2015 peran Dinas Kesehatan adalah pembinaan dan pengawasan dalam akreditasi. Dalam pelayanan Kesehatan di Indonesia, upaya keselamatan pasien masih rendah, dampaknya adalah Insiden Keselamatan Pasien yang masih tinggi, tidak terkecuali di Kabupaten Bantul terdapat Rumah Sakit yang belum terakreditasi dan terjadi kesenjangan tingkat Akreditasi Puskesmas. Sehingga dalam penelitian ini peneliti ingin meneliti peran dinas Kesehatan dalam akreditasi Puskesmas dan Rumah Sakit di kabupaten Bantul.

**Tujuan:** Menggali peran Dinas Kesehatan Kabupaten Bantul dalam Akreditasi Puskesmas dan Akreditasi Rumah Sakit.

**Metode:** Penelitian ini merupakan penelitian kualitatif dengan jenis penelitian deskriptif menggunakan riset implementasi.

**Hasil:** Peran Dinas Kesehatan dalam pendampingan pasca akreditasi puskesmas belum dilaksanakan secara rutin. Evaluasi Tim pendamping perlu dilakukan oleh Dinas Kesehatan Kabupaten Bantul. Peran dalam akreditasi rumah sakit, proses pendampingan akreditasi Dinas Kesehatan sebatas perizinan rumah sakit, izin operasional, izin sarana dan prasarana serta audit sumber daya manusia di rumah sakit. Pembinaan dan pengawasan dalam akreditasi tidak dilakukan oleh dinas Kesehatan kabupaten Bantul. Pengawasan dan Pembinaan perlu dilakukan rutin dan berkesinambungan. Minimnya peran yang dilakukan Dinas Kesehatan dalam akreditasi Rumah Sakit karena Puskesmas sebagai unit pelaksana teknis kesehatan di bawah supervisi Dinas Kesehatan Kabupaten/Kota. Minimnya anggaran dan SDM Dinas Kesehatan Kabupaten Bantul menjadi kendala dalam akreditasi rumah sakit selain itu rumah sakit sungkan untuk meminta pendampingan dan pengawasan akreditasi rumah sakit dikarenakan persepsi bahwas SDM dinas Kesehatan yang kurang memadai.

**Kesimpulan:** Peran Dinas Kesehatan Bantul dalam pendampingan dan pengawasan pasca belum maksimal, dari 7 komponen implementasi dinas Kesehatan Bantul menerima peran tersebut diperlukan evaluasi tim pendamping oleh dinas Kesehatan. Peran Dinas Kesehatan Bantul dalam Akreditasi Rumah Sakit sebatas izin operasional, izin birokrasi, penggunaan sarana dan prasarana dan SDM. Pendampingan dan pengawasan dalam akreditasi belum dilakukan. Anggaran dan kurangnya SDM menjadi kendala selain Perbup. Hal ini terbukti dari 7 komponen penerimaan hanya komponen sikap afektif yang mendukung peran tersebut, selain peraturan bupati diperlukan pengadaan SDM dan anggaran untuk pendampingan dan pengawasan akreditasi rumah sakit. Penguatan Dinas kesehatan sebagai regulator diperlukan untuk mutu pelayanan Kesehatan yang lebih baik

**Kata Kunci:** Implementasi, Peran Dinas Kesehatan, Akreditasi Puskesmas, Akreditasi Rumah Sakit.

## ABSTRACT

**Background:** Bantul district health profile data shows that there are hospitals that have not yet accredited and there are health centers with basic accreditation level. This of course can lead to decreased quality and patient safety in Bantul Regency. According to Permenkes 34/2017 and Permenkes 46/2015 the role of the Health Office is guidance and supervision in accreditation. In health services in Indonesia. Patient safety efforts are still low, the impact is the incidence of patient safety which is still high, including in Bantul Regency there are hospitals that have not been accredited and there is a gap in the level of Community Health Center Accreditation. So that in this study the researcher wanted to examine the role of the Health Office in the accreditation of Community Health Center and Hospitals in Bantul district

**Objective:** Exploring the role of the Bantul District Health Office in Accreditation of Community Health Center and Accreditation of Hospitals.

**Method:** This research was a qualitative research with descriptive research using implementation research.

**Result:** The role of the Health Office in post- Community Health Center accreditation assistance has not been carried out routinely. The evaluation of the counterpart team needs to be carried out by the Bantul District Health Office. The role in hospital accreditation, the process of accreditation assistance from the Health Office is limited to hospital licensing, operational permits, facilities and infrastructure permits and human resource audits in hospitals. The guidance and supervision of accreditation is not carried out by the Bantul district health office. Supervision and guidance need to be done regularly. The lack of role played by the Health Office in hospital accreditation because the Community Health Center is located as the UPT of the Health Service, besides that the budget and human resources are small, is an obstacle to the Bantul District Health Office in mentoring and monitoring hospital accreditation.

**Conclusion:** The role of the Bantul Health Office in post-mentoring and supervision has not been maximal, of the 7 components of the implementation of the Bantul Health Office to accept this role, an evaluation of the companion team by the Health office is required. The role of the Bantul Health Service in Hospital Accreditation is limited to operational permits, bureaucratic permits, use of facilities and infrastructure and human resources. Assistance and supervision in accreditation has not been carried out. Budget and lack of human resources are obstacles besides the regent regulation. This is evident from the 7 components of acceptance, only the affective attitude component that supports this role, in addition to the regent regulation, it is necessary to procure human resources and personnel for assistance and supervision of hospital accreditation

**Keywords:** Implementation, Role of Health Service, Health Center Accreditation, Hospital Accreditation