

INTISARI

Latar Belakang : Tuberculosis atau TB masih merupakan masalah kesehatan masyarakat yang menjadi tantangan global. Tuberculosis merupakan suatu penyakit menular yang disebabkan oleh *Mycobakterium Tuberculosis* . Penyebaran penyakit ini melalui *droplet* orang yang telah terinfeksi Basil tuberculosis . Kira kira lima sampai lima belas persen orang yang terkena Tuberculosis akan menularkan penyakitnya selama hidup mereka. Upaya pengendalian Tuberculosis (TB) di Indonesia sudah dimulai sejak sebelum kemerdekaan. Program Pengendalian TB dalam strategi nasional diarahkan menuju akses universal terhadap layanan TB yang berkualitas, hal ini dapat dicapai dengan melibatkan semua fasilitas layanan kesehatan. *Public-Private Mix / PPM* (bauran layanan pemerintah – swasta) merupakan pelibatan semua fasilitas pelayanan kesehatan dalam upaya ekspansi layanan TB dan kesinambungan program TB dengan pendekatan komprehensif . Dalam Standar Kompetensi Dokter Indonesia yang dikeluarkan oleh Konsil Kedokteran Indonesia (KKI) disebutkan bahwa penanganan Tuberculosis paru tanpa komplikasi masuk dalam tingkat kemampuan 4 A yang berarti lulusan dokter mampu membuat diagnosis klinik dan melakukan penatalaksanaan penyakit tersebut secara mandiri dan tuntas.

Tujuan Penelitian : Diketuainya pelaksanaan pengobatan TB strategi DOTS di tempat dokter praktek mandiri di Kabupaten Kebumen. Diketuainya hambatan hambatan pelaksanaan pengobatan TB strategi DOTS di tempat dokter praktek mandiri di Kabupaten Kebumen. Diketuainya pelaksanaan dan hambatan pengobatan TB strategi DOTS di Puskesmas. Tersusun bentuk pola kolaborasi pelaksanaan pengobatan TB strategi DOTS antara dokter praktek mandiri dan puskesmas sebagai bentuk kerja sama dalam *Public- Private Mix* di Kabupaten Kebumen.

Metode Penelitian: Penelitian ini merupakan studi kasus dengan pendekatan deskriptif kualitatif . Sampel diambil secara purposive sampling dari puskesmas dan dinas kesehatan. Jumlah sampel sebanyak 25 orang responden yang terdiri Dokter Praktek Mandiri 4 orang , dokter kepala puskesmas 5 orang, petugas TB puskesmas 5 orang, petugas pengelola TB puskesmas 5 orang, pejabat Dinas Kesehatan Kabupaten Kebumen 3 orang dan penderita TB sebanyak 3 orang.

Hasil Penelitian : Dari responden yang diwawancarai menyampaikan bahwa dokter praktek mandiri dalam melakukan pengobatan TB sebagian besar dengan diagnosis gejala klinis TB dan sebagian dibantu foto toraks. Semua puskesmas sudah melaksanakan penatalaksanaan TB dengan strategi DOTS. Hasil capaian program TB di puskesmas masih rendah, hal ini karena jumlah suspek TB yang didapat masih rendah. Jejaring puskesmas belum berjalan dengan baik, terutama dokter praktek mandiri belum berkontribusi dalam penjarangan suspek dengan puskesmas. Semua responden menyatakan perlunya kerjasama antara puskesmas dengan dokter praktek mandiri dalam penanganan penderita TB strategi DOTS.

Kesimpulan: Terbentuknya kerja sama antara dokter praktek mandiri dengan puskesmas untuk penatalaksanaan TB strategi DOTS di Kabupaten Kebumen,

dalam program *Public Private Mix* . Dalam kolaborasi ini tersusun peran dari masing masing pihak antara puskesmas dan dokter praktek mandiri.

Kata Kunci : Public Private Mix, DOTS , suspek TB, kerjasama.

ABSTRACT

Background: Tuberculosis or TB is still a public health problem that poses a global challenge. Tuberculosis is an infectious disease caused by *Mycobacterium Tuberculosis*. The spread of this disease through *droplets* of people who have been infected with tuberculosis bacilli. Approximately five to fifteen percent of people affected by Tuberculosis will transmit the disease during their lifetime. Efforts to control Tuberculosis (TB) in Indonesia have been started since before independence day. The TB Control Program in a national strategy is directed toward universal access to quality TB services, this can be achieved by involving all health-care facilities. National strategies are directed towards universal access to a good quality TB services, this can be achieved by involving all health-care facilities. *Public-Private Mix / PPM* (collaboration between government services and private services) is the inclusion of all health service facilities in an effort to expand TB services and TB program continuity with a comprehensive approach. In Standar Kompetensi Dokter Indonesia issued by Konsil Kedokteran Indonesia (KKI) mentioned that the treatment of uncomplicated pulmonary tuberculosis included in the level of ability 4 A which means the graduates doctor are able to make clinical diagnosis and manage the disease independently and thoroughly.

Research Method: This research is a case study with qualitative descriptive approach. Samples were taken by purposive sampling from puskesmas and health department. The number of samples are 25 respondents consisting of Self Practice Doctor 4, Doctor heads of puskesmas 5, 5 officers of TB puskesmas, 5 officers of TB control puskesmas, 3 placeman of Kebumen District Health Office and 3 people of TB.

Objective: To know the implementation of TB treatment of DOTS strategy in place of independent practicing doctor in Kebumen District. To find out the obstacles to the implementation of TB treatment of DOTS strategies in place of independent practicing doctor in Kebumen District. To know the implementation and constraints of TB treatment of DOTS strategy in Puskesmas. Establish collaboration pattern of TB treatment implementation of DOTS strategy among self-employed doctor and puskesmas as a form of collaboration in *Public Private Mix* in Kebumen District.

Results: From 25 samples of respondents who have been interviewed stated that the Self Practice Doctor in doing TB treatment mostly with diagnosis of clinical symptoms of TB and partially assisted with chest radiograph. All puskesmas have implemented TB management with DOTS strategy. The results of the TB program at the puskesmas are still low, this is because the number of suspected TB is still low too. Puskesmas network has not been running well, especially the Self Practice Doctor have not contributed in the suspect networking with puskesmas. All respondents stated the need of collaboration between puskesmas with Self Practice Doctor in the treatment of TB patients with DOTS strategies.

Conclusion: Collaboration between the Self Practice Doctor with the puskesmas for the management of TB with DOTS strategy in Kebumen District is very necessary, which is framed in Public Private Mix. In this collaboration will be arranged the working pattern of each party between Puskesmas and Self Practice Doctor.

Keywords: Public Private Mix, DOTS, suspect TB, Collaboration