

INTISARI

LatarBelakang :Setiap orang berhak hidup sejahtera lahir dan batin, bertempat tinggal, dan mendapatkan lingkungan hidup.

Berdasarkan undang-undang Dasar 1945 pasal 28H ayat (1) tentang Hak Asasi Manusia juga telah dijelaskan bahwa setiap orang berhak hidup sejahtera lahir dan batin, bertempat tinggal, dan mendapatkan lingkungan hidup yang baik dan sehat serta berhak memperoleh pelayanan kesehatan. Dimana setiap orang itu meliputi seluruh warganegara Indonesia yang dilindungi hukumbaikbalita, orang dewasa, lansia (lanjut usia), tahanan, WBP (Warga Binaan Pemasarakatan / narapidana), dan lain-lain.

Pengguna informasi kesehatan ada dua pihak yaitu pihak internal maupun eksternal. Pihak internal yang biasa membutuhkan informasi kesehatan seperti direktur, dan unit lain dalam fasilitas pelayanan kesehatan (farmasi, keuangan, klinik, bangsal dan manajemen). Sedangkan pengguna informasi kesehatan di luar fasilitas pelayanan kesehatan (eksternal) meliputi yayasan, pemilik, asuransi, pasien, pemerintah, dan kepolisian dalam kaitannya dengan proses hukum. Pada kasus tersebut, yang peneliti ambil yaitu mengenai Pelaksanaan Pelaporan Internal dan Eksternal Balai Pengobatan Lembaga Pemasarakatan Klas II A Yogyakarta. Dengan demikian maka peneliti ingin mendalami kegiatan pelaporan mulai dari pengumpulan data, pengolahan data, hingga penyajiannya.

Tujuan Penelitian :Mengetahui bagaimana pelaksanaan pelaporan internal maupun eksternal Balai Pengobatan Lembaga Pemasarakatan Klas II A Yogyakarta.

Metode Penelitian Jenis penelitian ini dilakukan dengan pendekatan kualitatif dan menggunakan metode penelitian deskriptif.

Hasil :Pembuatan laporan di Balai Pengobatan Klas II A Yogyakarta masih dilakukan secara manual. Balai Pengobatan Lapas Klas II A Yogyakarta belum mempunyai petugas khusus pelaporan. Pembuatan laporan dilaksanakan bersama-sama oleh dokter umum, doktergigi, dan perawat. Format laporan yang digunakan sudah baku dari Kemenkumham, Dirjen Pemasarakatan, Dinas Kesehatan dan Komisi Penanggulangan AIDS. Laporan yang dibuat di Balai PengobatanKlas II A Yogyakarta antara lain adalah Laporan Bulanan Data KIE, Penyuluhan dan Pencehagan;Laporan Semester Sarana dan Prasarana Kesehatan dan Perawatan sesuaistandar; Laporan triwulan SaranaObat-obatan dan Alat Habis Pakai; Laporan Bulanan Jumlah Penghuni yang Melaksanakan Rekomendasi Medis Sesuai Standar; Laporan Bulanan Kesakitan (morbiditas) dan Kematian (mortalitas); Laporan Semester Pengelolaan Air Bersih, Limbah Sampah; Laporan Bulanan Data Jumlah Jenis Penyakit di Lapas/Rutan; Laporan Bulanan Data Pencegahan; Laporan Bulanan Keadaan Petugas dan Kebutuhan Petugas Rehabilitasi Medis dan Rehabilitasi Sosial; Laporan Bulanan Data Rehabilitasi Napsa; Laporan Bulanan Tindak Pidana Narkotika; Laporan Bulanan Kelompok Rentan; Laporan Bulanan Daftar Jumlah Penghuni Kelompok Resiko Tinggi; Laporan Bulanan Data warga binaan pemasarakatan atau Tahanan yang Menjalani Pendampingan Tenaga Profesional Sesuai Standar; Laporan Bulanan Pelaksanaan Rujukan Elektif dan Gawat Darurat; Laporan penerimaan,

pemakaian dan permintaan obat; Laporan Bulanan Data Kesakitan; Laporan HIV dan Laporan Triwulan Program Pengendalian TB.

Faktor yang mempengaruhi pelaksanaan pembuatan pelaporan di Balai Pengobatan Lapas Klas II A Yogyakarta berdasarkan 6M antara lain adalah kurangnya tenaga medis yang berkompeten di bidangnya yaitu apoteker, pengajuan dana untuk memperbaiki sarana dan prasarana dalam menunjang proses pelaporan yang belum ditindaklanjuti serta sarana dan prasarana yang tidak menunjang dalam proses pelaporan terutama dalam pengiriman laporan. Solusi dari hambatan pelaksanaan pembuatan laporan di Balai Pengobatan Lapas Klas II A Yogyakarta yaitu sudah ditambahkannya petugas apotek untuk pengelolaan serta pelaporan terkait obat dan sudah dilakukan koordinasi untuk pengajuan perbaikan sarana dan prasarana untuk menunjang proses pelaporan.
Kata Kunci: Pelaporan, Laporan internal, Laporan eksternal, Balai Pengobatan.

ABSTRACT

Introduction: It is the right of every person to live a prosperous life both in material and spiritual sense, to have adequate living place, to have proper living environment, and to have proper medical care. It is in accordance of 1945 Constitution (Undang-Undang Dasar 1945), Chapter 28H, Article 1, which stated: *Everyone shall be entitled to be prosperous, reside, and obtain proper and sound environment and medical services.*

The term 'everyone' above encompasses the entirety of the Indonesian citizenship under the protection of the law, regardless of age, gender, ethnicity, occupation, etc. This includes inmates in state correctional facilities or prison.

The use of medical information is divided into two spheres of interest: internal and external. Internal use is the use of medical information by medical establishments, their departments/units and personnel. External use is the use of medical information by parties outside of the medical establishments, such as the founding entities of said establishment or its owner, patient, insurance company, or law enforcement agency for various reasons, including investigative or litigation purpose.

In this regard, this research are focused on the Internal and External Reporting Conducts of The Health Care Service of State Correctional Facility Class IIA Yogyakarta. This research delves extensively into every aspect of the reporting, starting from the data collection, processing, and all the way to the presentation.

Purpose: To understand how the Internal and External Reporting of The Health Care Service of State Correctional Facility Class IIA Yogyakarta is conducted.

Method: This research is conducted using qualitative approach and descriptive research method.

Result: The reporting in The Health Care Service of State Correctional Facility Class IIA Yogyakarta is conducted manually. The Health Care Service have no specifically assigned personnel for this purpose. Reports are created as cooperative effort between doctors, specialists, and nurses. Reports are created using standard formatting specified by The Ministry of Law And Human Rights, General Directorate of Corrections, Office of Public Health, and AIDS Prevention Committee. The Health Care Service of State Correctional Facility Class IIA Yogyakarta produces, among others, these reports: KIE (Communication, Information, and Education) and Preventative Monthly Data Reports, Bi-Annual Reports on Health Care Facilities and Infrastructure, Quarterly Reports on Medicines and Disposable Supplies, Monthly Reports on Inmates Follow Troughs on Standard Medical Recommendation, Monthly Reports on Morbidities and Mortalities, Bi-Annual Reports on Clean Water and Waste Managements, Monthly Reports on In-House Medical Case and Care Data, Monthly Reports on Personnel Conditions and Requirements, Monthly Report in Substance-Abuse Patient Rehabilitation, Monthly Report on Drug-Related Crime, Monthly Reports on Vulnerable (High Risk) Group, Monthly Reports on Inmate Patients or Prisoner Under Professional Standard Care, Monthly Reports on Elective Reference and

Emergency Care, Medical Stock Reports, Monthly Case Reports, HIV Reports, and Quarterly Report on Tuberculosis Control.

The factors that influence the reporting conduct of The Health Care Service of State Correctional Facility Class IIA Yogyakarta are: lack of competent pharmacist for proper reporting; as of yet unapproved budget request for reporting infrastructure; and the inadequacy of existing facilities and infrastructure for reporting purpose, particularly for report dispatch.

The solution for the above problem that have been enacted are: the recruitment of competent pharmacist for medicinal supply-related management and reporting and renewed coordinated effort to push the proposal for the above budget request to approval.

Keyword: Reporting, Internal Report, External Report, Health Care Service.