

Intisari

Latar belakang : Pengelolaan obat puskesmas meliputi 4 tahap kegiatan, yaitu tahap perencanaan, penyimpanan, distribusi sampai pada pencatatan dan pelaporan. Dari hasil supervisi yang dilakukan terhadap puskesmas yang ada di Kabupaten Gorontalo pada tahun 2001, 2002, dan 2003, pengelolaan obat puskesmas di Kabupaten Gorontalo belum terlaksana dengan baik. Untuk itu perlu dilakukan pendekatan intervensi edukatif dalam hal ini adalah intervensi *face to face*. Tujuan penelitian ini untuk melihat dampak intervensi *face to face* terhadap pengelolaan obat puskesmas.

Metode : Penelitian ini merupakan penelitian kuasi eksperimen dengan *pre-post with control design*. Subyek penelitian adalah petugas pengelola obat puskesmas berjumlah 18 orang yang dibagi dua kelompok, masing-masing kelompok berjumlah 9 orang. Kelompok Pertama diintervensi dengan metode intervensi *face to face*, kelompok kedua tidak ada perlakuan apapun. Dilakukan uji-t terhadap pengukuran hasil intervensi antara sebelum intervensi dan sesudah intervensi yang dilakukan terhadap indikator pengelolaan obat yang diadopsi dari indikator pengelolaan yang dikembangkan oleh Pudjaningsih dan indikator oleh departemen kesehatan.

Hasil : Yang merupakan faktor penyebab masalah pengelolaan obat puskesmas di Kabupaten Gorontalo belum terlaksana dengan baik adalah pelatihan dan supervisi yang dilaksanakan selama ini belum dapat memperbaiki pengelolaan obat puskesmas, petugas belum memahami dan bertanggung jawab atas tugas yang diembannya dan pembangunan puskesmas belum memperhatikan persyaratan gudang penyimpanan obat. Hasil penelitian, dengan uji-t menunjukkan penurunan rata-rata persentase obat bukan DOEN [dengan membandingkan ke 2 kelompok didapatkan perbedaan yang bermakna ($t=4,033$, $p=0,001$)], penurunan rata-rata persentase penyimpangan antara obat yang direncanakan dengan kenyataan pemakaian [dengan membandingkan ke 2 kelompok didapatkan perbedaan yang bermakna ($t=7,784$, $p=0,001$)], peningkatan rata-rata persentase kecocokan antara obat yang ada dengan kenyataan pemakaian [dengan membandingkan ke 2 kelompok didapatkan perbedaan yang bermakna ($t=3,361$, $p=0,002$)], penurunan rata-rata persentase obat mati [dengan membandingkan ke 2 kelompok didapatkan perbedaan yang bermakna ($t=3,339$, $p=0,04$)]. Persentase obat rusak dan kadaluarsa serta persentase obat yang dilayani tidak menunjukkan perubahan, hal tersebut disebabkan karena waktu pengambilan data yang sempit serta sistem yang ada di puskesmas.

Kesimpulan : Intervensi *face to face* dapat memperbaiki pengelolaan obat puskesmas di Kabupaten Gorontalo.

ABSTRACT

Background: The drug management at public health center consists of 4 activities, i.e. planning, storage, distribution, reporting and recording. The result of supervision conducted to public health center in Gorontalo District on 2001, 2002, and 2003, showed that public health center drug management in this district has not been held properly. Therefore educational intervention needs to be done.

Objective: The study was meant to identify the impact of face to face intervention to public health center drug management.

Methods: This was a quasi experiment study which used pre-post with control design. The subject were staffs in charge of drug management of public health center. There were 18 persons divided into two groups, each consist of 9 persons. The first group treated with face to face intervention method, whereas no such treatment was done to the second group. T-test was conducted to measure the intervention result prior and after intervention which are applied to drug management indicator adopted from management indicator developed by Pudjaningsih and the Ministry of Health. Those indicators are the availability percentage of non National Essential Medicine List (DOEN) drugs, deviation between the planned drug and its actual use, relevance between the actual drug availability and stock card, no longer produced drugs, damaged and expired drugs, provided drugs.

Results: The factors why drugs management had not been implemented properly are the current training and supervision have not been able improve drugs management, the staffs are lack yet of understanding and responsibility of their jobs, and public health center building has not comply with drugs warehouse requirements. The result of the study using t-test showed declinment of average percentage of non DOEN drug [comparison between the two groups showed significant difference ($t=4,033$, $p=0,001$)], declinment of average percentage of deviation between the drug planned and its actual use [comparison between the two groups showed significant difference ($t=7,784$, $p=0,001$)], increase of average percentage of relevance between the actual drug availability and stock card [comparison between the two groups showed significant difference ($t=3,361$, $p=0,002$)], declinment of average percentage of drug no longer produced [comparison between the two groups showed significant difference ($t=3,339$, $p=0,04$)]. The percentage of damaged and expired drugs and provided drugs did not significantly change because of limited time in data collection and the current system off public health centers.

Conclusion: Face to face intervention could improve drug management of public health center at Gorontalo District.

Keywords: Drug management, face to face intervention, drug management staff, drug management indicator.