

ABSTRAK

Latar Belakang: Dinas kesehatan berperan untuk memastikan mutu layanan di seluruh fasilitas kesehatan sesuai kebutuhan masyarakat. Peningkatan mutu memerlukan arah kebijakan yang dapat menguatkan fungsi Dinas Kesehatan sebagai penata layanan (*stewardship*) kepada fasilitas pelayanan kesehatan, sehingga dapat mencapai kinerja layanan dan program kesehatan yang optimal dan komprehensif.

Tujuan: Penelitian ini bertujuan untuk melakukan analisis situasi kebijakan dan strategi manajemen mutu dan menganalisis peran Dinas Kesehatan dalam melaksanakan fungsi penata layanan mutu pelayanan kesehatan di Kabupaten Berau.

Metode: Penelitian ini dengan rancangan studi kasus. Pemilihan responden menggunakan teknik *purposif sampling*. Jenis data yang dikumpulkan meliputi data primer, dengan wawancara mendalam menggunakan panduan, dilengkapi dengan data sekunder berupa telaah dokumen yang relevan. Analisis data adalah analisis deskriptif yaitu data ditampilkan dalam matriks yang berisikan data ringkasan hasil wawancara mendalam, kemudian dilakukan interpretasikan data serta menghubungkannya dengan teori dan hasil penelitian yang terkait dan menarik sebuah kesimpulan.

Hasil: Prioritas kesehatan daerah sesuai dengan prioritas kesehatan secara Nasional sehingga dinilai sudah baik, pemahaman terhadap konsep mutu pelayanan belum mengarah pada dimensi mutu sehingga dinilai belum baik, keterlibatan pemangku kepentingan terhadap mutu pelayanan kesehatan cukup baik, pencapaian mutu pelayanan kesehatan memerlukan peningkatan sarana dan prasarana fasilitas dinilai cukup baik, tata laksana dan organisasi mutu cukup baik, metode dan intervensi sudah baik, sistem informasi kesehatan belum dilaksanakan secara optimal, Indikator mutu penetapan pada standar pelayanan minimal bidang kesehatan yang merupakan kewajiban bagi Pemerintah sehingga dinilai sudah baik.

Kesimpulan: Kebijakan dan strategi mutu pada prioritas kesehatan daerah yaitu pada kesehatan ibu dan anak, serta akses dan mutu pelayanan kesehatan dasar dan rujukan, pemahaman definisi mutu pelayanan kesehatan belum mengarah kepada dimensi mutu pelayanan kesehatan, memiliki anggaran pada peningkatan mutu, perjanjian kerja belum dimanfaatkan untuk *reward* dan *punishment*, mutu pelayanan kesehatan memerlukan peningkatan sarana dan prasarana terutama pada Poned di Puskesmas. Metode pengembangan mutu yaitu *continous quality improvement*, sistem informasi kesehatan belum terlaksana secara optimal dan belum dimanfaatkan untuk peningkatan mutu, Indikator mutu sesuai dengan kebutuhan secara Nasional.

Kata Kunci: Analisis Situasi Kebijakan dan Strategi Mutu, *Stewardship*, Fasilitas Pelayanan Kesehatan.

ABSTRACT

Background: The health office plays a role in ensuring the quality of services in all facilities, according to the needs of the community. Quality requires policies that can strengthen Health Services as stewardship for health care facilities, so as to achieve optimal and comprehensive health service and program performance.

Objective: This study aims to analyze the situation of quality management policies and strategies and analyze the role of the Health Office in carrying out the function of managing the quality of health services in Berau Regency.

Methods: This research is a case study design. The selection of respondents using purposive sampling technique. The types of data collected include primary data, with in-depth interviews using a guide, supplemented by secondary data in the form of reviewing relevant documents. Data analysis is descriptive analysis, namely the data are displayed in a matrix containing summary data from in-depth interviews, then interprets the data and relates it to the theory and related research results and draws a conclusion.

Results: Regional health priorities are in accordance with national health priorities so that they are considered good, understanding of the concept of service quality has not led to the quality dimension so it is considered not good, stakeholder involvement in the quality of health services is quite good, achieving quality health services requires improving facilities and infrastructure facilities are considered quite good, management and organization quality is quite good, methods and interventions are good, health information systems have not been implemented optimally, quality indicators are set on minimum service standards in the health sector which are an obligation for the government so that they are considered good.

Conclusion: Quality policies and strategies on regional health priorities, namely on maternal and child health, as well as access and quality of basic and referral health services, understanding the definition of health service quality has not led to the dimensions of health service quality, has a budget for quality improvement, work agreements have not been utilized for rewards and punishments, the quality of health services requires improvement of facilities and infrastructure, especially for Poned at the Puskesmas. The quality development method is continuous quality improvement, the health information system has not been implemented optimally and has not been used for quality improvement, quality indicators are in accordance with national needs.

Keywords: Policy Situation Analysis and Quality Strategy, Stewardship, Health Service Facilities.