

Penilaian Pelayanan Terapi Pencegahan Tuberkulosis Di Kota Depok

Runtu, Yeremia Prawiro Mozart

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Abstrak

<div style="text-align: justify;">Eliminasi Tuberkulosis (TB) di Indonesia pada tahun 2030 dapat dicapai dengan cakupan pemberian terapi pencegahan tuberkulosis (TPT) yang optimal. Namun cakupan pemberian TPT Kota Depok sebesar 8,57% dari target 50% di tahun 2023. Penilaian pelayanan TPT dilakukan untuk mengetahui tingkat kepatuhan layanan TPT berdasarkan komponen input dan proses serta mengetahui masalah utama yang menghambat layanan TPT di kota Depok. Penelitian mixed method didahului fase kuantitatif menilai tingkat kepatuhan puskesmas terhadap standar layanan TPT komponen input dan proses melalui kuesioner yang diisi mandiri oleh tim TB puskesmas. Tingkat kepatuhan dikategorikan baik (>81%), cukup (60%-80%), dan kurang (<59%). Lalu diikuti fase kualitatif dengan wawancara mendalam kepada penanggungjawab program TB puskesmas. Dari 15 puskesmas, 87% (13) puskesmas tidak mencapai target nasional cakupan pemberian TPT. 60% (9) puskesmas mendapatkan skor cukup pada komponen input dan 27% (4) puskesmas mendapatkan skor cukup pada komponen proses. Tingkat kepatuhan terendah dari komponen input antara lain tidak tersedia logistik TST (85,7%), analisis laboratorium dan tenaga farmasi belum dilatih program TPT (85,7%), tidak tersedianya alat TCM TB di dalam Puskesmas (73,3%), tidak tersedia logistik obat TPT untuk 1 tahun (63,7%). Tingkat kepatuhan terendah dari komponen proses adalah penemuan kasus TBC Laten tidak dilakukan dengan menggunakan rontgen dada di dalam Puskesmas (100%) dan tidak adanya kunjungan oleh Dinas Kesehatan untuk bimbingan teknis program TPT (46,7%). Persepsi tenaga kesehatan dianalisis secara tematik menunjukkan bahwa keterbatasan logistik dan tenaga kesehatan yang belum dilatih program TB dan TPT, kegiatan investigasi kontak belum dilakukan pada kasus indeks milik rumah sakit, kurangnya KIE dari tenaga kesehatan kepada keluarga pasien serta kurangnya supervisi dari dinas kesehatan menjadi hambatan layanan TPT di kota Depok. Program TB nasional perlu menetapkan standar layanan TPT. Dinas Kesehatan Kota Depok melakukan pelatihan kepada tim TB puskesmas dan monitoring ketersediaan logistik TPT. Puskesmas melakukan edukasi tujuan dan manfaat TPT kepada populasi berisiko.</div><hr /><div style="text-align: justify;">Elimination of Tuberculosis (TB) in Indonesia by 2030 can be achieved by providing optimal coverage of tuberculosis prevention therapy (TPT). However, the coverage of providing TPT in Depok is 8.57% of the target of 50% in 2023. The TPT service assessment was carried out to determine the level of TPT service compliance based on input and process components and to find out the main problems that hamper TPT services in Depok. This mixed method research was preceded by a quantitative phase assessing the level of compliance of puskesmas with TPT service standards for input and process components through a questionnaire filled out independently by puskesmas TB team. The Level of compliance is categorized as good (>81%), sufficient (60%-80%), and poor (<59%). This was followed by a qualitative phase with in-depth interviews with the person in charge of the puskesmas TB program. Of the 15 puskesmas, 87% (13) of puskesmas did not reach the national target for TPT coverage. 60% (9) puskesmas got a sufficient score on the input component and 27% (4) puskesmas got a sufficient score on the process component. The lowest levels of compliance from input components include unavailability of

TST logistics (85.7%), laboratory analysts and pharmaceutical personnel not having been trained in the TPT programs (85.7%), unavailability of TB GenXpert in the puskesmas (73.3%), no TPT drug logistics available for 1 year (63.7%). The lowest level of compliance with the process components was that latent TB case detection was not carried out using chest x-rays in puskesmas (100%) and there were no visits by the Depok District Health Office for supportive supervision on the TPT program (46.7%), The perception of health workers analyzed thematically shows that limited TPT logistics and health workers who have not been trained in TB and TPT programs, contact investigation activities have not been carried out in index cases belonging to hospitals, lack of IEC from health workers to the patient's family and lack of supervision from the health service are barriers to service TPT in Depok. the national TB program sets TPT services standards. The Depok District Health Office conducted training for puskesmas TB team and monitored the availability of TPT logistics. Puskesmas educates the aims and benefits of TPT to at-risk populations.