

Analisis pelaksanaan PKRS (Promosi kesehatan di rumah sakit) di pelayanan kesehatan Sint Carolus Jakarta th.2003

Agustin, Mieke

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Abstrak

<div style="text-align: justify;">Promosi Kesehatan adalah upaya pemberdayaan masyarakat untuk memelihara, meningkatkan dan melindungi kesehatan diri dan lingkungannya. Program unggulan promosi keehatan adalah PHBS yang mencakup lima tatanan diantaranya tatanan Institusi Kesehatan yang disebut PKRS, dengan sasaran masyarakat rumah sakit dan lingkungan sekitarnya. Tujuan PKRS adalah mengembangkan pemahaman pasien dan keluarganya tentang penyakit yang diderita serta hal-hal yang perlu dilakukan oleh keluarganya, dalam membantu penyembuhan dan mencegah terserang kembali oleh penyakit yang sama. Apabila dilaksanakan dengan baik PKRS dapat memberikan kontribusi terhadap peningkatan mutu dan citra pelayanan kesehatan. PK Saint Carolus merupakan salah satu rumah sakit swasta tipe utama yang telah melaksanakan program PKRS, dirintis sejak tahun 1991 hingga saat ini, namun pelaksanaannya masih dalam pembenahan. Jenis penelitian ini adalah kualitatif, dengan menggunakan metode wawancara mendalam, FGD dan analisa data sekunder. Dengan informan penentu kebijakan, ketua pelaksana PKRS, koordinator bidang, petugas di rawat inap dan pasien. Hasil dan Kesimpulan dari penelitian dapat diketahui bahwa: Jumlah tenaga PKRS di PK Saint Carolus untuk tingkat rumah sakit berjumlah 15 orang dan cukup memadai, dengan pendidikan minimal S1 di Bidang Kesehatan dan telah mengikuti lokalatif tentang PKRS. Selain sebagai panitia PKRS, seluruhnya telah mempunyai tugas pokok dan fungsi utama. Untuk PKRS tingkat pasien, petugas belum terlatih dan jumlahnya dirasa masih perlu ditambah. Dana untuk pelaksanaan PKRS dibebankan pada anggaran Direksi P.K. Saint Carolus. Sarana dan prasarana, telah ditetapkan SK Panitia PKRS dan telah tersedia ruang sekretariat, lengkap dengan peralatan meja, kursi, lemari buku, media cetak dari beberapa sumber, komputer, OHP, Wireless, VCD berada di Unit kebidanan serta multimedia berada di biro direksi, box-box PKRS terletak di setiap bidang. Televisi yang ada di setiap ruang tunggu dan ruang perawatan belum digunakan secara maksimal. Perencanaan kegiatan PKRS, menggunakan sistem bottom up, yaitu unit-unit kerja membuat rencana kemudian dibicarakan dengan seluruh panitia dan diusulkan kepada Direksi. Pengorganisasian PKRS dalam bentuk kepanitiaan, dilengkapi dengan uraian tugas yang belum dapat dilaksanakan sepenuhnya, PKRS di unit perawatan dilakukan secara perorangan antara petugas dan pasien, jarang diadakan penyuluhan kelompok, kecuali unit kebidanan. Di tingkat Rumah Sakit PKRS dilaksanakan berupa penyuluhan, seminar, lokalatif dan telah direncanakan studi banding PKRS di RS Dr. Soetomo Surabaya. Belum pernah dilakukan tindak lanjut penilaian/evaluasi, baik dari manajemen RS, Depkes. maupun Dinkes provinsi DKI. Langkah-langkah pengelolaan kegiatan PKRS, jika dilihat dalam buku Panduan Promosi Kesehatan, pada umumnya PKRS PK Sint Carolus telah melaksanakan sesuai tahapan. Saran penulis untuk meningkatkan kualitas PKRS di PKSC yaitu Sarana televisi agar dimanfaatkan lebih maksimal sebagai sarana PKRS dengan menambah alat berupa sentral audio, PKRS diusulkan mendapat dukungan dari pihak pengelola program yaitu Depkes khususnya Ditjen Yanmed dan Pusat Promosi Kesehatan serta rencana PKRS masuk sebagai salah satu komponen akreditasi RS supaya ditindak lanjuti. Bagi peneliti lain, agar bisa menindaklanjuti penelitian ini khususnya

untuk pelaksanaan PKRS yang di luar rumah sakit.

Analysis on Implementation of Health Promotion in Hospital at Saint Carolus Health Service, Jakarta 2003

Health Promotion is an empowerment effort of community in preserving, increasing, and protecting their health and environment. The prime program of health promotion is PHBS that covers 5 (five) arrangements: among others is Health Institution which called Health Promotion in Hospital (HPH), with the community of hospital and its surrounding as the targets. The objective of HPH is to develop the comprehension of patients and their families regarding the disease suffered and things that need to be done by the families themselves in helping the recovery and preventing the relapse condition of the same disease. If it is done well, HPH can give its contribution towards the increase of quality and health service image. Saint Carolus Health Service is one of prime-type private hospital that has conducted the program of HPH. It has begun in 1991 up to now; nevertheless the implementation is still in straightening-up. It is a qualitative research using in-depth interview method, FGD and secondary data analysis. By the informant of policy maker, the chief of Implementation HPH, the officers for hospital treatment, and patients. Based on the result and conclusion of this research, it can be found that: The amount of HPH officers at Saint Carolus is 15 people for the hospital level, which it is quite sufficient. They have minimum education of Master Degree majoring in health and have followed HPH training. Besides as committee of HPH, they all have had main duties and functions. For HPH in the patient level, the officers have not been trained yet, and the amount is felt need to be added. The budget for implanting HPH is from Saint Carolus Direction Board budget. The equipment and infrastructure have been determined in Decree Letter of HPH committee; they are a secretariat room which is completed with table, chairs, book shelf, printed-media from several sources, computer, OHP and wireless, VCD which is in obgin Unit, multimedia that is direction bureau, boxes HPH located in every field, and television that exists in each waiting room and nursery room used in maximal yet. The planning of HPH uses bottoms-up system which is each working units has made the plan that will be discussed next entire committee and will be proposed to the Direction. The organization of HPH is in the form of committee that is completed by the job description that has not been fully conducted. HPH in nursery unit is done personally between officer and patient. It is rarely done in-group expect for obgin unit. In the hospital level of HPH is done education, seminar, training and has been planned a comparison study on HPH at Dr. Soetomo Hospital in Surabaya. It has never been done an evaluation follow up from Ministry of Health (MOH), Hospital management or provincial Health Office of DKI. The organizing steps of HPH can be seen in the Health Promoting Guideline which Saint Carolus generally has been done based on its steps. The suggestion of the writer to increase the quality of HPH in Saint Carolus Health Service is the means of television is better to be used in maximal as the means of HPH by adding audio central. HPH is proposed to get support from program implementers which is MOH, especially Directorate General of Medical Service and Central of Health Promotion as well as the plan of HPH that is included as one of hospital accredited component so that it can be followed up next. Other researchers need to pay their attention in following up this research particularly the implementation of HPH that is done Outreach hospital.