

Evaluation of Health Services System Process Based on Island Clusters (Case Study in Tanimbar Island District)

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Abstract

The Cluster Center in the island cluster strategy is a health facility that provides primary and secondary health efforts that oversee several sub-groups and/or satellite groups within an island group. The purpose of this study was to determine the process of the island cluster-based health service system in the Tanimbar Islands Regency. This type of research is qualitative research. There were 8 informants in this study, namely the head of health Office, and 7 Head of Public Health Center in the southern cluster of the Tanimbar Islands. Source of informants determined intentionally (purposive). The results showed that the planning process was still carried out by each health facility that was not following island cluster-based services. The organization is carried out by the head of the Public Health Center by monitoring the implementation including preparation and setting of strategies and evaluating the achievement of targets. The implementation of island cluster-based health services is divided into 2 systems, namely case referral and program referral. In the implementation of health services not yet running optimally. Supervision consists of internal supervision and off-site supervision conducted every three months. The evaluation was carried out to see the problems faced by the Public Health Center to be immediately handled, the evaluation showed several programs had not been implemented 100%.

Keywords: *Evaluation, Process, Island Clusters, Health Services, Tanimbar Island.*

Introduction

Healthy Indonesia 2025 contains the hope that the community can reach quality health services and obtain health insurance. Quality health services intended here are health services including disaster emergencies, services that meet the needs of the community, and are organized by professional standards and ethics. The achievement of UHC differs from country to country, depending on political will and state financial capacity. The richer the country, the easier the country is to ensure health services for its citizens¹.

As an archipelago, there are many islands in the Tanimbar Islands, both inhabited and untouched with a total of 113 (one hundred and thirteen) islands. The Tanimbar Islands Health Service is a regional work unit that is the main health service in the Tanimbar

Islands district. In charge of 13 Public Health Centers, 34 Pustu (Supporting Public Health Centers) and 19 Poskesdes (Village Health Post), 2 Public Hospitals, 1 Maternity Hospital, 1 RB, and 3 BP. The total number of employees is 437 spread across the health department, Public Health Center, Pustu, and Poskesdes². Conditions of a very wide range of control and frequent obstacles in service in various fields, more specifically in the health sector, have created a health service system known as the Cluster Island health services.

Looking at the condition of the Tanimbar Islands Regency which is also included in the DTPK BK area (Border Remote Areas and Health Troubled Islands) and bearing in mind the Maluku Governor Regulation on Island Cluster Health Services, West Southeast Maluku Regency Regulation number 9 of 2018 concerning Island

Cluster-Based Health Services and Technical Guidelines for Maluku Island Group Health Services, the purpose of this study is to find out the process of island cluster-based health service systems in the Tanimbar Islands Regency.

Material and Method

The type of research used is qualitative research. There were 8 informants in this study, namely the Head of Health Office, and 7 Public Health Center Heads in the southern cluster of the Tanimbar Islands. Source of informants determined intentionally (purposive). The study was conducted by conducting in-depth interviews with informants with the help of interview guidelines.

Results

There are several processes in island group-based health services, including planning, organizing, implementing, monitoring, and evaluating. The following are the results of each research variable in the health service process.

Planning at the Public Health Center is carried out to determine how the service process will be carried out in the future Public Health Center. The following are the results of the interview with the informant about the planning process at the Public Health Center.

“Prepare a work plan and put it into program planning for 1 year and then submit it to the Head of the Public Health Center after it has been approved and submitted to the Health Office. The design is based on the coverage results that were not reached and the problems that occurred in the previous fiscal year were included in the current year’s program plan”(YYH, 39 Years Old).

“If for program planning we sit together (every month) and then each presentation program if there are obstacles or problems then we sit and discuss after that a new plan is made” (SP, 57 Years Old).

“The program manager draws up a plan of proposed activities for each program after that, prepares a plan for implementing activities from the program to the Public Health Center planning team and then consults with the health department for implementation” (VO, 41 Years Old).

Information on the suitability of planning at the Public Health Center with the strategic plan in the health

department was obtained from the following informants

“Yes, it was stated in the strategic plan”(JCR, 46 Years Old)

“It is appropriate and stated in the work plan of the health service because if it is not there it will be rejected by the system”(DB, 48 Years Old)

“It’s appropriate, because always consult with the health department” (YYH, 39 Years Old)

Based on the results of the interview with informants, it is known that the planning carried out at the Public Health Center is in accordance with the health department’s strategic plan because in the preparation of the plan it always consults with the health department and all forms of service are contained in the health department’s work plan.

Organizing is done so that every plan that has been made to get arrangements so that it is ready to be implemented to achieve common goals. The results of interviews with informants regarding the organizing process at the Public Health Center are shown in the following excerpt.

“Before starting the program, the head of the Public Health Center gathers program holders to see the preparation and timing of the program. After the program in the field has been completed, a re-evaluation is made of the obstacles in implementing the program. (LL, 39 Years Old)

“The person in charge of UKM (public health efforts) conduct briefing with program holders before going to the field ...”(VO, 41 Years Old)

“Based on management functions, ranging from planning, implementation to evaluation. The Head of the Public Health Center performs the function of direct control over the implementation of the program.”(SF, 46 Years Old)

Based on the results of interviews with informants about the organization conducted by the Head of the Public Health Center it is known that the head of the Public Health Center always monitors the implementation carried out at the Public Health Center including organizing by looking at the preparation and setting of strategies that will be used before the implementation of health services and re-evaluating after implementation health services to see the extent of achieving targets.

After the planning and organizing are done, then what needs to be done is to realize the plan by implementing or implementing it. Information about island group health services was obtained from the following informants.

“There are 2 systems, case referral and program referral ...”(JCR, 46 Years Old).

“Shortening the range of control in handling health care in the cluster area. The capabilities of health workers in the Public Health Center of the cluster center are the same as those in other Public Health Centers. The island cluster system is quite helpful in handling health problems.”(SOL, 45 Years Old).

“The island cluster is one of the solutions to complete the control range of health services in the Tanimbar Regency, both in terms of funding, logistics, and human resources.”(JK, 45 Years Old).

“The island cluster system has a very good purpose. But in the development of island cluster-based health services, only symbols and extinctions.”(IM, 44 Years Old).

Based on the results of interviews with informants it was noted that the implementation of island group-based health services was carried out with 2 systems namely case referral and program referral, where case referral was intended for those who were sick and then referred to health facilities with higher levels. While the program reference is a report that is carried out in stages. Supervision is one of the most important aspects when it is important to implement island cluster-based health services. Supervision is carried out so that early irregularities can be known so that they can be addressed as soon as possible. The following are the results of interviews with informants regarding the supervision process in the implementation of island group-based health services.

“Supervision is divided into two, namely Public Health Center internal supervision through an internal audit team and off-site supervision every three months by involving internal audit and program holders”(LL, 39 Years Old).

“Supervision every 3 months in the Pustu and also Posyandu independently and integrated with the team related to the performance of services in the pustu. Coordinate with the village head to monitor services in the pustu due to island-based service areas. In the

supervision, if there are obstacles in service in the pustu such as lack of medicines or consumables, they will be funded with available funds.” (IL, 43 Years Old).

The interview results show that the supervision process by the health department for each Public Health Center is conducted by SIDAK (inspection) and conducts discussions about the problems being experienced by the Public Health Center, but the implementation of supervision is more often done in cross-sector mini-workshops. Whereas the supervision conducted by the Public Health Center is divided into two types namely internal supervision and off-site supervision which is conducted every three months in collaboration with the village head.

The following are the results of interviews with informants about the evacuation process carried out by the Tanimbar Islands Health Department on the Public Health Center in the southern cluster.

“The evaluation was carried out by first conducting a presentation from the heads of the Public Health Center related to the implementation of activities in the months that have not yet been evaluated, if non-budgetary activities can be completed as soon as possible. and then it is evaluated by telephone for an unreachable Public Health Center and then calls every three months for us to complete and discuss in evaluation meetings.”(JCR, 46 Years Old).

The evaluation process is carried out with a presentation related to the implementation of activities that are already running and for Public Health Centers that cannot be reached by evaluating via telephone. Then the problem is identified and made an effort as soon as possible to resolve the problem, but for problems that can not be solved is postponed for the following year. From the evaluation results, it was found that there are still some programs that are not 100% implemented.

Discussion

Program planning carried out at the Public Health Center is following the strategic plan of the health department and all forms of service are contained in the health service work plan. However, this planning process is not following the planning of the island cluster system where planning should be arranged together through one-door planning so that it can be properly accommodated.

Research conducted by Habibi et al. shows the

results that planning is arranged through the process of identifying problems, determining priority issues and formulating work programs in the P2M program at Tamangapa Public Health Center³. Another study conducted by Setiowati and Budiono showed the results that the PMT Recovery program planning activities for toddlers in the work area of the East Tegal Public Health Center went well, there were no obstacles⁴. Planning is considered important because it is the process of determining goals or objectives to be achieved and determining the paths and resources needed to achieve that goal as efficiently and effectively as possible⁵.

The organizing process carried out at the South Cluster Public Health Center in Tanimbar Islands Regency is always monitored. Research conducted by Habibi et al., found that the division of tasks, determination of resources, and arranging workgroups in the Communicable Disease Eradication program at Tamangapa Public Health Center was determined based on the discipline or competency of each health worker³. While research conducted by Abdullah et al. shows the results that the organization of workgroups was not arranged according to the SDIDTK activity guidelines, the division of tasks to teachers and cadres was still limited to height and weight measurements, the use of KPSP was still carried out entirely by officers⁶.

Other research conducted by Arifuddin et al⁷ shows the results that the organization of Public Health Center employees refers to applicable government laws and regulations. Lembaga Public Health Center in the search for responsibility or authority is still not going well.

This study is in line with the study of Jambormias et al., which shows that the formation and implementation of island-based maternity hospital waiting policies is one form of innovation in an effort to shorten the range of control and affordability of health services for pregnant women. Access to health services for pregnant women will be easier to obtain because it is still in a single unit or group of islands⁸.

Research conducted by Utami et al found that internal control functions in the HIV-STI LKB were carried out by the Head of the Public Health Center and service manager while for external supervision conducted by the Semarang City Health Office was carried out by direct field observation and checking monthly reports from Public Health Centers, hospitals, and NGOs⁹. Research

conducted by Habibiet al³ note that the leadership in conducting supervision is usually only via telephone.

There are several indicators of the health service program in the South Cluster of the Tanimbar Islands Regency Public Health Center which are not optimally realized. For programs that have not been realized, education is carried out by working across sectors and endeavoring to create regulations in the form of regulations or decisions by village heads¹⁰⁻¹². In line with the research conducted by Purnomo¹³, the results show that hospitals have not been able to handle emergency cases with 100% live saving as standard.

Conclusion

This study concludes that the planning process is still being carried out by each health facility that is not compatible with island cluster-based services. The organization is carried out by the head of the Public Health Center by monitoring the implementation including preparation and setting of strategies and evaluating the achievement of targets. The implementation of island cluster-based health services is divided into 2 systems, namely case referral and program referral. In the implementation of health services not yet running optimally. Supervision consists of internal supervision and off-site supervision conducted every three months. Evaluation is carried out to see the problems faced by the Public Health Center for immediate treatment. Evaluation results show that some programs have not been implemented 100%. Planning should be adjusted to the guidelines for the implementation of island-based health services in order to achieve the desired goals of health services.

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