



ANALYSIS OF HEALTH PROMOTION PROGRAM IMPLEMENTATION IN HOSPITAL

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ABSTRACT

Hospital must make efforts to improve the ability of patients, clients, and community groups, so that patients can be independent in accelerating healing and rehabilitation. The purpose of this study was to know in depth about the evaluation of the implementation of PKRS program at Sukadana Regional General Hospital. The type of this research is qualitative and the results of the study are presented in description. Subjects or informants were taken by purposive sampling. The number of informants is 8 people, Deputy Director of Sukadana Hospital, Human Resource Quality and Development Section, Maintenance of Facilities and Infrastructure Section, Hospital Managers, PKRS Coordinators, Heads of Rooms, and Hospital Visitors. Data collection techniques using in-depth interviews and observations, Data analysis is carried out by organizing the data obtained into a category, describing the data into units, analyzing important data, compiling or presenting data in accordance with the research problem in the form of conclusions that are easy to understand. Based on in-depth interviews with 8 informants there are 3 factors that influence the success of the Health Promotion program at the Hospital, namely input indicators (Commitment of Directors and All Staffs, Health Promotion in Hospital trained personnel, Health Promotion in Hospital Management, Funds Budget, Facilities and Infrastructure), Process indicators (Health Promotion in Hospital Activities Inside and Outside the Building), output indicators (Health Promotion in Hospital Activity Coverage), and output indicators (Hospital Visitor Knowledge). There is still a need for commitment between the hospital director and all staff, the allocation of funds is still insufficient for the implementation of Health Promotion in Hospital and the finding of facilities and infrastructure that support the implementation of Health Promotion in Hospital

Keywords: analysis; hospital health; implementation; promotion program

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INTRODUCTION

PKRS is very important to be implemented and provides its own benefits for the hospital. PKRS is a form of psychosocial services so that PKRS can improve the quality of the hospital because patients want physical and psychosocial services. The application of PKRS is realized by providing information about health, patient healing, at each hospital service point, so that it can give the impression to the patient and the patient's family that the hospital has good services, thereby enhancing the image of the hospital. From the experience of hospitals that have implemented PKRS, it is stated that the patient's recovery is shorter than before. PKRS means that it can shorten the days of patient care. The decrease in patient care days has an impact that the hospital is good, because patients who are treated recover quickly so that it increases the prestige of the hospital. This has an effect on increasing the hospital occupancy rate as a good RS indicator.

In order to provide more detailed guidance on Hospital Health Promotion activities, Permenkes No. 004 of 2012 concerning "Technical Guidelines for Hospital Health Promotion" as an elaboration of the Decree of the Minister of Health No.1114 / Menkes / SK / VIII / 2005 concerning Guidelines for Implementing Health Promotion in Regions. This is an important decision issued to cover hospital health promotion activities so that it must be carried out in hospitals in Indonesia. The implementation of PKRS at the Sukadana Regional General Hospital is the responsibility of the Service Sector. The service sector will coordinate with existing installations in Sukadana Regional Hospital in implementing the PKRS program. RSUD Sukadana already has a work plan related to the PKRS program, this can be seen from the work program of the head of the outpatient service section, health counseling is carried out on the second week of each month, while the main function of the work program for the head of the inpatient services section, there is health counseling carried out on the second week. four every month. In the implementation of health promotion at Sukadana Hospital, the HR appointed in the PKRS are those who are considered capable of and mastering the activities to be promoted, and adjusted to the activities to be carried out (Sukadana Hospital, 2017).

Based on the preliminary survey conducted by researchers, the implementation of Hospital Health Promotion at the Sukadana Regional General Hospital has been carried out, as can be seen from the existence of health promotion media through printed media such as the installation of posters, banners, banners, leaflets, and the existence of work duties in implementing the PKRS program. . The facilities in implementing PKRS are quite complete. However, the implementation of health promotion programs has not been as expected. There are still many patients who smoke in the Sukadana Hospital area, even though there is already written that the RSUD is a smoke-free area. Patients also lack good PHBS, where patients often litter, even though every corner of Sukadana Hospital has a trash can. The registration room where to take the queue has not been used properly as a place for implementing the PKRS program because there is no TV to deliver messages and health information, but there are already leaflets, posters, as printed media for delivering health information and PKRS is an important assessment in hospital accreditation. So that researchers are interested in analyzing the process of implementing PKRS at Sukadana Hospital. The purpose of this study was to analyze the implementation of the PKRS program at the Sukadana Regional General Hospital.

METHOD

This type of research is qualitative using the Indept Interview method (in-depth interviews) and observation. Subjects or informants were taken by purposive sampling. The informants in this study were the Deputy Director of Sukadana Hospital, Human Resource Quality and Development Section, Maintenance of Facilities and Infrastructure Section, Hospital Managers, PKRS Coordinators, Heads of Rooms, and Hospital Visitors. To obtain valid data, researchers used source triangulation and data triangulation. This research was conducted at Sukadana Hospital in July 2020.

RESULTS

From the results of the study, there were 8 informants who conducted in-depth interviews, namely the Deputy Director of Sukadana Hospital, the Quality and Human Resources Development Section, the Maintenance of Facilities and Infrastructure Section, the Hospital Manager, the PKRS Coordinator, the Head of the Room, and Hospital Visitors. Of the 8 informants who had the lowest education was SMA and the highest education was S2 and in this study the youngest age was 30 years and the oldest was 56 years old.

Table 5.
Characteristics of Informants

Informants	Informant Code
Deputy Director of RSUD	01
Quality and Development Section SDM	02
Maintenance of facilities and infrastructure	03
Manager Hospital	04
Coordinator PKRS	05
Head of The Room	06
Room Visitors	07
Pengunjung Rumah Sakit	08

Commitment of the Director and all levels of the hospital

Director's commitment is the director's commitment which is reflected in the support and participation in the implementation of PKRS with health promotion operations in the hospital. The following is the answer from each informant:

Informant 1: "... Yes, by activating the PKRS and providing funds for these activities ..."

Informant 5: "... it seems that all parties have not been involved in the activity ..."

PKRS trained personnel.

PKRS personnel who are trained are people who have the ability, potential, skills, which can be used in developing an activity and are responsible for PKRS activities. The following is the answer from each informant:

Informant 1: "... There is, 1 Promkes staff as coordinator. Others are nurses, midwives .. "

Informant 6: "... As long as I don't exist, it's just in each room ..."

PKRS Management

PKRS personnel who are trained are people who have the ability, potential, skills, which can be used in developing an activity and are responsible for PKRS activities. The following is the answer from each informant:

Informant 1: "... There is, 1 Promkes staff as coordinator. Others are nurses, midwives .. "

Informant 6: "... As long as I don't exist, it's just in each room ..."

Budget Funds

Fund Budget is an estimate or calculation in the allotment of existing financial planning resources for the implementation of PKRS activities and sources of funds that can be used for the implementation of PKRS activities at Sukadana Hospital. The following is the answer from each informant:

Informant 1: "... Yes, bro, entered DAK ..."

Informant 3: "... It is very important to add facilities and infrastructure that support PKRS ..."

Facilities and infrastructure

Facilities and infrastructure are a collection / anything that can be used as tools that support / are needed in the implementation of PKRS activities such as rooms, media in delivering information. The following is the answer from each informant:

Informant 3: "... Every facility and infrastructure made has been adjusted to standards, but the management is still not good ..."

Informant 5: "... There is already a place for washing hands, there is a DVD player, posters and leaflets too ..."

PKRS Activities Inside and Outside the Building

PKRS activities inside and outside the building are health promotion activities such as counseling, distribution of leaflets, counseling for hospital patients and the installation of banners for all officers and the community inside and outside the building. The following is the answer from each informant:

Informant 1: "... Health promotion is being carried out, for example smoking is prohibited, but it's not routine ..."

Informant 2: "... I've never seen it, I just gave away leaflets ..."

Output Indicator

The scope of PKRS activities is the result of an assessment of PKRS activities for 1 year which is measured based on target achievements. The following is the answer from each informant

Informant 5: "... Has not reached the 80% target ..."

Impacts Indicator

Hospital visitor knowledge is the increase of patient, patient family and community information outside the hospital building about PKRS activities. The following is the answer from each informant:

Informant 8: "... It is important to broaden my knowledge ..."

Informant 7: "... There was a counseling on no smoking in this hospital ..."

DISCUSSION

Impacts Indicator

Based on the answer to the in-depth interview with Informant 1: "... Already, by activating the PKRS and providing funds for these activities ..." The commitment of the Sukadana Hospital director that was shown was in the form of reactivating PKRS and providing funds for PKRS activities at Sukadana Hospital, although it might These funds are not sufficient for PKRS activities in accordance with Technical Guidelines¹⁰ standards.

Thus, the commitment of the director of RSUD Sukadana is inversely proportional to the theory of Hartono B, 2010, namely that the highest leadership in the hospital must realize the importance of implementing PKRS, so that if the leader is aware of the importance of PKRS, then he should hold board meetings to get support from all stakeholders. After that, it is hoped that he will immediately improve the quality of the PKRS Team's performance so that the Health Promotion program at this Hospital runs well⁴.

In in-depth interviews with informants, there is only one health promotion person who fits the competency as a coordinator. Informant 1: "... There is, 1 Promkes staff as the coordinator. Others are nurses, midwives ". According to PMK no 44 of 2018 concerning the Implementation of PKRS The main resources needed for the implementation of PKRS are professional human resources, having Health Promotion competencies by having attended the required training⁵.

In terms of PKRS management, this is a health promotion activity in hospitals that is related to hospital accreditation assessments. Most of the informants said that health promotion activities were very important in the assessment of accreditation to improve the quality and quality of hospitals and services to patients. "... It is important in the accreditation assessment, because it improves the quality of service and the quality of the hospital ..." (Informant 2). Management of health promotion activities in a good and structured hospital can improve the hospital accreditation assessment which can make hospital services better. According to PMK 2018, examples of PKRS activity management include planning, educational activities or counseling for patients and hospital visitors, counseling, monitoring and evaluation of PKRS activities.

The budget for funds is a very important component in the implementation of PKRS. Based on the results of in-depth interviews, several informants said that the budget came from the Special Allocation Fund (DAK) and the Regional Revenue and Expenditure Budget (APBD). .. Funds for this program are from the hospital budget ... "(Informant 5). The budget used does not yet cover all PKRS activities that are in accordance with the PKRS Technical Guidelines for Implementation standards. This is due to the absence of PRS activity planning made by the PKRS Team. As a result of the limited funds available, health promotion programs do not run well, such as trainings, family visits, provision of facilities and infrastructure and others.

Facilities and infrastructure are equipment that support PKRS activities. Based on in-depth interviews, the informant said that the management was still not good "... Every facility and infrastructure made had been adjusted to standards, but the management was still not good ..." (Informant 3). and infrastructure is damaged and unsuitable. Like a DVD player, it is placed in the waiting room of the registration counter, but it cannot be used and some banners have also been torn. One of the factors that greatly supports the success of the PKRS program is the facilities and infrastructure, namely printed media (leaflets). , Banners, banners, brochures) and audiovisual media (DVD player, LCD projector, Videotron).

Process Indicators

According to PMK No. 44 2018 concerning the Implementation of PKRS, the implementation must be done inside and outside the hospital building. Inside the building, namely at the registration counter, for outpatients, for inpatients and hospital visitors who need medical support services 5. Based on interviews with informants, PKRS activities are carried out by education and distribution of leaflets only. health promotion is always reminded to wear masks ". However, these activities are only carried out in the building. Only banners and billboards are posted outside for people outside the building to see and read.

Output Indicators

The scope of PKRS activities are PKRS activities that are assessed based on standard technical guidelines for health promotion programs in hospitals. Based on in-depth interviews with informants, the coverage of PKRS activities at Sukadana Hospital in 2018 was 45%. "... the coverage in 2018 is still 45% ..." (informant 5). The coverage has not reached the target number as conveyed by the informant "... Not yet, the target is 80% ..." (Informant 1). If an activity is not carried out with careful planning, problems that arise cannot be identified so that the program is not implemented properly⁸.

Impact Indicators

Based on in-depth interviews the notion of health promotion is counseling and the existence of a health banner. "... Counseling is that ..." (Informant 7), "... That is a banner that is put up about health ..." (Informant 8). Whereas the implementation of Health Promotion should be carried out in the context of changing risky behavior by increasing knowledge, fostering attitudes and willingness of individuals and communities so that they can behave in a clean and healthy life and a healthy environment⁵. Health promotion is very influential in increasing patient knowledge so that they can understand how to prevent disease and behave in a clean and healthy life.

CONCLUSION

There is only 1 health promotion staff, the supporting staff are nurses and midwives so that the implementation of PKRS has not been going well. PKRS activities at Sukadana Hospital

are not in accordance with the standard PKRS Implementation Technical guidelines. In the management and implementation of PKRS activities, this is only carried out by officers in each room who are assisted by a team under the Hospital Accreditation Working Group, namely the Patient Safety Target Working Group (SKP) and the Prevention Working Group, Disease Control (PPI) and the Patient Safety Team. The budget used does not yet cover all PKRS activities that are in accordance with the PKRS Technical Guidelines for Implementation standards. This is due to the absence of PRS activity planning made by the PKRS Team. The facilities and infrastructure in the RSUD are focused on health promotion media such as leaflets, banners and posters. In addition, litter boxes and wash basins are only available in a few places. So that the facilities and infrastructure are incomplete and some have been damaged. PKRS activities in the building are only in the form of counseling and distributing leaflets to patient visitors waiting at the registration counter. The knowledge of hospital visitors about health promotion is only about counseling and the existence of health banners. So that the purpose of PKRS activities is to get health information and they understand how to maintain their own health, their families and the environment have not been fulfilled.

REFERENCES

- Dinas Kesehatan Provinsi Lampung. 2018. *Profil Dinas Kesehatan Lampung Timur Tahun 2017*. Lampung
- Kemendes . 2012. Undang – Undang Republik Indonesia Nomor 44 Tahun 2009 tentang Rumah Sakit. Jakarta.
- RSUD Sukadana. 2018. *Profil Rumah Sakit Umum Daerah Sukadana Tahun 2018*. Sukadana.
- Hartono, Bambang.2010. *Promosi Kesehatan di Puskesmas & di Rumah Sakit*. Jakarta: Rineka Cipta
- Peraturan Menteri Kesehatan Republik Indonesia. 2018. *Penyelenggaraan Promosi Kesehatan di Rumah Sakit*
- Hidayati, Istiaji. 2016. *Gambaran Pelaksanaan Promosi Kesehatan Pada Instalasi rawat jalan Di tinjau dari Pendekatan PRECEDE – PROCEDE Fase Lima dan Enam*.
- Larasanti Adi. 2017. *Pelaksanaan Promosi Kesehatan Rumah Sakit Di RSU Haji Surabaya*.
- Rochjati, Poedji. 1998. *Program PKMRS Di RSUD Dr. Soetomo. Penyuluhan Kesehatan Masyarakat Rumah Sakit Edisi IV*.
- Tiraihati, Windari, Zelbi. 2017. *Analisis Promosi Kesehatan Berdasarkan Ottawa Carter di Rs Onkologi Surabaya 2012*. Peraturan Menteri Kesehatan Republik Indonesia Nomor 004 Tahun 2012 tentang Petunjuk Teknis Promosi Kesehatan Rumah Sakit. Jakarta.
- Setyabudi, R. G. (2017). *Analisis strategi promosi kesehatan dalam rangka meningkatkan kesadaran hidup sehat oleh rumah sakit jiwa daerah Dr. RM. Soedjarwadi Provinsi Jawa Tengah*.
- Alhamda, S. (2012). *Analisis kebutuhan sumber daya promosi kesehatan di rumah sakit umum daerah Solok, Sumatera Barat*. *Jurnal Manajemen Pelayanan Kesehatan*, 15(02), 77-85.

- Febrian, M. R., Permatasari, P., Nurrizka, R. H., & Hardy, F. R. (2020). Analisis Implementasi Penyelenggaraan Promosi Kesehatan Rumah Sakit di Era Jaminan Kesehatan Nasional. *Jurnal Ilmiah Kesehatan Masyarakat: Media Komunikasi Komunitas Kesehatan Masyarakat*, 12(1), 20-26.
- Simamora, H. V. (2017). Analisis Pelaksanaan Program Promosi Kesehatan Rumah Sakit (PKRS) di RSUD Tarutung Tahun 2016.
- GUMILANG, B. (2016). *Analisis Faktor yang Memengaruhi Implementasi Kebijakan Promosi Kesehatan Rumah Sakit (PKRS) di Rumah Sakit Universitas Airlangga* (Doctoral Dissertation, Universitas Airlangga).
- Syahliza, H. S. (2020). Analisis Pelaksanaan Program Promosi Kesehatan Rumah Sakit (PKRS) di RSUD DR. H. Kumpulan Pane Kota Tebing Tinggi Tahun 2018.

