Proceedings of the International Conference on Nursing and Health Sciences, Volume 4 No 1, January - June 2023
e-ISSN 2774 – 5104, Global Health Science Group
http://jurnal.globalhealthsciencegroup.com/index.php/PICNHS

EFFICACY OF STOP INTEGRATED SERVICES IN CONTROLLING TUBERCULOSIS (TB) CASES IN THE PASURUAN CITY AREA

Mokh. Sujarwadi, Mukhammad Toha, Ida Zuhroidah*
DIII Nursing Study Program, Faculty of Nursing, Universitas Jember, Kampus Kota Pasuruan
Jl. KH. Mansyur No. 207 Pasuruan, East Java 67118, Indonesia
*ida.akper@unej.ac.id

ABSTRACT

One of the 2020-2024 National Medium-Term Development Plans (RPJMN) of the Ministry of Health is directed at increasing the control of Tuberculosis (TB). Several factors supporting the success of Tuberculosis (TB) treatment are a strong desire to recover. This motivation requires support from all components of health service providers in addition to family support. A friendly and uncomplicated healthcare environment provides comfort for patients. Innovation and modification of the health service model are needed, considering that treatment requires a relatively long time. One-door integrated health services are an alternative that needs to be implemented to achieve success in the treatment of Tuberculosis (TB). This research aims to describe one-stop integrated service innovation for Tuberculosis patients. Exploratory descriptive research design, purposive sampling technique, and a sample size of 50 respondents. The results of the study were all (100%) Tuberculosis patients came for treatment on time, no default cases were found (0%), all (100%) received fast service coverage in one place, all (100%) respondents were satisfied with the innovations provided, data normally distributed with p-value > 0.05. Friendliness of service can build trust between patients and staff, besides that service innovation is directed at providing convenience and speed in obtaining access to treatment so that it does not interfere with the patient's routine activities. One-stop integrated service is very effective in controlling tuberculosis cases. Innovations in the promotive and preventive fields are enhanced to prevent the addition of new cases.

Keywords: efficacy; integrated; tuberculosis

INTRODUCTION

Tuberculosis cases have become a global health problem to date. High mortality rates require special attention from policymakers. The World Health Organization (WHO) data for 2021 shows 9.9 million cases and 1.5 million deaths. Tuberculosis can be treated and cured, but the number of treatment failures that lead to death needs a solution. Indonesia is one of the countries contributing the most TB cases after India and China. In the 2020 data report, there were 824 thousand cases, and 93 thousand people had died. East Java is included in the title of the top eight contributors to tuberculosis cases in Indonesia in 2020 (Pralambang & Setiawan, 2021). Five hundred sixty-nine cases were found in the Pasuruan City area, and the treatment success rate has not yet reached the expected target. Several factors supporting the success of Tuberculosis (TB) treatment are a strong desire to recover. This motivation requires support from all components of health service providers and family support.

A friendly and uncomplicated healthcare environment provides comfort for patients. Innovation and modification of the health service model are needed, considering that treatment requires a relatively long time. One-door integrated health services are an alternative that needs to be implemented to achieve successful TB treatment (Andri et al., 2020). The type of service provided aims to provide convenience and comfort. One-door service means providing services needed by tuberculosis sufferers in one place, including doctor's examinations, laboratory examinations, nutritional services, pharmaceutical services, environmental health services, and easy access to

treatment without queuing to register at registration counters (Zainaro & Gunawan, 2019). This study aims to describe one-stop integrated service innovations for tuberculosis patients, including achievement of treatment success targets, default case findings, health service coverage, and satisfaction levels. The benefits of research include; increasing the quality of health services, increasing the provision of comprehensive health services, increasing the responsiveness of fast, precise, and accurate services, increasing the success of treatment, and controlling the spread of disease.

METHOD

The research design chosen was descriptive exploratory to answer the problem and describe the research objectives. The operational definition of the research assesses the ability of one-door integrated service innovation in efforts to control tuberculosis cases, including achievement of tuberculosis treatment success targets, findings of default cases, service coverage, and satisfaction levels. The study population was TB sufferers in the Pasuruan City area. Purposive sampling technique, the sample size of 50 respondents, research instrument using a questionnaire. Data collection techniques by interviewing and making observations. The data obtained were grouped and analyzed descriptively—presentation of data using tables and narration to provide a complete and clear picture.

RESULTS AND DISCUSSION

TB treatment target achievement

Table 1.
Achievement of the target of treating tuberculosis cases (n=50

Achievement	f	%
Not achieved	0	0
Partially achieved	0	0
Completely achieved	50	100

Table 1 Achievement of the 100 percent treatment target through one-stop service innovation to control tuberculosis cases in the Pasuruan City area. There was no failure to reach the predetermined target..

Default case finding

Table 2
Findings of default cases of tuberculosis treatment programs (n=50)

Default	f	%
Not found	50	100
Found	0	0

Table 2**.** No default cases were found through the application of one-stop service innovations to control tuberculosis cases in the Pasuruan City area. One hundred percent of respondents seek treatment regularly and on time.

Health service coverage

Table 3.
Coverage of tuberculosis health services (n=50)

Coverage	f	%
Not covered	0	0
Partially covered	0	0
Completely covered	50	100

Table 3 Regarding the coverage of health services provided to tuberculosis sufferers, they all receive health services quickly in one place. There were no case findings that did not receive health services.

Tuberculosis patient satisfaction

Table 4.
Tuberculosis patient satisfaction level with one-stop service innovation (n=50)

Satisfaction	f	%
Not satisfied	0	0
Satisfied	0	0
Very satisfied	50	100

Table 4, all patients are delighted with the services provided. There was no dissatisfaction found from the developed service innovation because it makes it easy for patients to get access to treatment with a fast and friendly response. The data normality test by descriptive analytics showed a significance level of $p > 0.05$, meaning the data is normally distributed.

Friendliness of service can build trust between patients and staff; service innovation is directed at providing convenience and speed in obtaining access to treatment so that it does not interfere with the patient's routine activities (Arnas & Zulkarnaini, 2021). The success of the tuberculosis treatment program is influenced by many factors, including the patient's motivation to recover. The patient's enthusiasm needs to be supported by a healthcare system that can provide convenience and comfort while participating in the treatment program, considering the time required is relatively long and cannot be interrupted (Erawatyningsih & Purwanta, 2009). he synergy between health services and patient motivation needs to be fostered continuously so that the treatment program that has been set goes according to plan; besides that, a good relationship can be established between patients and health workers so that they can participate in preventing infectious diseases from spreading (Tukayo et al., 2020). Patient knowledge support is very significant for forming a cooperative attitude during the treatment period; adherence to carrying out the therapy program to completion guarantees the success and prevention of disease transmission in the community (Toha et al., 2022).

CONCLUSION

One-stop integrated service effectively controls tuberculosis cases in the Pasuruan City area. There needs to be innovation in the promotive and preventive fields to prevent the addition of new case.

REFERENCES

Andri, J., Febriawati, H., Randi, Y., Harsismanto, J., & Setyawati, A. D. (2020). Penatalaksanaan Pengobatan Tuberculosis Paru. *Jurnal Kesmas Asclepius*, *2*(2), 73–80.

Arnas, Y., & Zulkarnaini, Z. (2021). Inovasi Jemput Layani Penderita TBC (Jelita TBC) di

Puskesmas Rambah Samo I Kabupaten Rokan Hulu. *Cross-Border*, *4*(2), 656–672.

Erawatyningsih, E., & Purwanta, H. S. (2009). Faktor-faktor yang mempengaruhi ketidakpatuhan berobat pada penderita tuberkulosis paru. *Berita Kedokteran Masyarakat*, *25*(3), 117.

Pralambang, S. D., & Setiawan, S. (2021). Faktor Risiko Kejadian Tuberkulosis di Indonesia. *Jurnal Biostatistik, Kependudukan, Dan Informatika Kesehatan*, *2*(1), 60–71.

Toha, M., Sujarwadi, M., & Zuhroidah, I. (2022). Analisis Tingkat Pengetahuan Pasien TBC dalam Mengantisipasi Penularan Penyakit di Era Pandemi Covid-19. *Jurnal Keperawatan*, *14*(S1), 207–216.

Tukayo, I. J. H., Hardyanti, S., & Madeso, M. S. (2020). Faktor yang mempengaruhi kepatuhan minum obat anti tuberkulosis pada pasien tuberkulosis paru di Puskesmas Waena. *Jurnal Keperawatan Tropis Papua*, *3*(1), 145–150.

Zainaro, M. A., & Gunawan, A. (2019). Kualitas pelayanan kesehatan rawat jalan dengan tingkat kepatuhan minum obat penderita tuberkulosis paru. *Holistik Jurnal Kesehatan*, *13*(4), 381–388.