

Pembuatan kebijakan kesehatan dengan pendekatan riset operasional : regulasi pelayanan kesehatan swasta di Kabupaten Bandung tahun 2007 = Making health policy with the help of operation research approach: private health services regulation

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Abstrak

Peraturan Pemerintah No.8 Tahun 2003 menyebutkan Dinas Daerah Kabupaten/Kota mempunyai tugas melaksanakan kewenangan menyelenggarakan fungsi perumusan kebijakan teknis, desentralisasi dengan pemberian perizinan dan pelaksanaan pelayanan umum. Di Kabupaten Bandung, sejak desentralisasi kebijakan yang lahir adalah Peraturan Daerah Nomor 18 tahun :2001 tentang Tarif Pelayanan Kesehatan pada Unit Instalasi Kesehatan Pemerintah Kabupaten Bandung di Iuar Rumah Sakii. Kondisi saat ini sarana pelayanan kesehatan di Kabupaten Bandung penyebarannya belum merata, belum semua wilayah terjangkau tenaga kesehatan dan masih ada kendala akses pelayanan masyarakat maka optimalisasi pelayanan kesehatan yang dilaksanakan oleh pemerintah maupun swasta dapat menjadi kunci pembangunan kesehatan. oleh karena itu dilakukan Riset Operasional pembuatan kebijakan terhadap penyelenggaraan sarana pelayanan kesehatan swasta dalam menerapkan prinsip-prinsip pemerataan (equity), akses (accessible) dan keterjangkauan (affordable) pelayanan kesehatan di Kabupaten Bandung Penelitian ini menggunakan metode analitik kualitatif dengan teknis pengumpulan data Wawancara Mendalam terdiri dari 4 informan unsur pemerintah dan 6 informan unsur sarana kesehatan swasta. Focus Group Discussion di pedesaan dan semi perkotaan serta check list data sekunder. selanjutnya dilakukan analisis isi. Peneliti terlibat secara operasional dalam tahapan proses pembuatan kebijakan tentang Rancangan Peraturan Daerah (Raperda) yang sedang disusun.

Hasil penelitian menunjukkan dasar pengaturan pelayanan kesehatan swasta masih mengacu pada kebijakan pusat yang bersifat umum, belum dijabarkan ditingkat lokal, akibatnya pelayanan kesehatan swasta belum berorientasi pada kebutuhan dan kekhasan pembangunan Kabupaten Bandung seperti meningkatkan indeks pembangunan manusia. Desentralisasi mampu meningkatkan daya guna pemerintah daerah dalam pembangunan dan pelayanan masyarakat, ditunjang dengan aspirasi masyarakat akan kebutuhan pelayanan kesehatan dan kesediaan Swasta untuk bermitra dengan pemerintah dalam melayani masyarakat. menjadi potensi faktor lingkungan untuk meJahirkan kebUakan di daerah. Faktor lainnya adalah lingkungan strategis Kabupaten Bandung dan pemahaman kesehatan bersifat universal menunjang kebijakan bidang kesehatan. Proses pembuatan Raperda saat ini dalam pembahasan DPRD Kabupaten Bandung mencerminkan kebijakan peJayanan kesehatan swasta dimasa yang akan datang diatur dalam Peraturan Daerah rentang penyelenggaraan pelayanan kesehatan swasta sebagai bentuk pengaturan dan penertiban.

Analisis Draf Raperda penyelenggaraan pelayanan kesehatan swasta di Kabupaten Bandung menunjukkan penyusunan Raperda mengakomodasi prinsip upaya pelayanan yang tercantum pada pasal 4 ayat (2) menyebutkan prinsip pelayanan kesehatan meliputi pemerataan, akses, keterjangkauan dan mutu pelayanan kesehatan, disebutkan juga bahwa akan menjamin kesempatan yang sama dan berpihak pada masyarakat

rentan.

Pembuatan Rancangan Peraturan Daerah perlu dilengkapi naskah akademik sebagai kajian akademik mengenai substansi, rumusan dan materi tentang Penyelenggaraan Pelayanan Kesehatan Swasta. Diharapkan proses pembuatan Raperda ini berlanjut sehingga menjadi Peraturan Daerah yang mampu melindungi penyelenggara dan masyarakat.

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Government Regulation No.5 Year 2003 mentioned that a district or city has an obligation to maintain decentralization. by doing function of formulation technique policy. giving permission. and to perform usual public services. At Bandung district, since decentralization the only policy made is District Law No. 15 Year 2001 about health service tariff at a unit or government district health installation in Bandung, outside hospital. The condition nowadays, health services inside district Bandung are not spread well enough meaning not all area is reached by paramedic and still there are obstacle in accessing of public services, therefore the optimization of health services which is done by the government or private sector can be the key factor to built up health issues. for that reason Operation Research has been conducted to make health policy about the implementation of health services by private sector in adapting the principles of equity, accessible, and affordable inside Bandung district. Method which are used in this Operation Research is analytical qualitative by using gathering data information technique that consists of 4 informants from government and 6 informants from private, focus group discussion in tbc: country and suburban city. and also secondary check list which will be analyzed afterwards. Researcher is involved operationally on every single step of the policy making process of District Law Draft (Rancangan Peraturan Daerah Raperda) which are being made.

The result shows that the basic structure of health services done by private sector still refer to the previous policy which is very common and haven't explored to the local district, as a result the private health service still not oriented to the needs and speciality of Bandung district such as increasing the Human Development Index (HDI) Desentralization is able to increase the competence of local government by means of building and serving the community that supported by the people wants and needs and of course willingness of private sector in conjunction with government serve people and could become a potential environmental factors to create a policy in the district. The other factors are the strategic place of Bandung district and an acknowledgement that health services is universal and support health policy. Been discussing Process of making the District Law Draft (Raperda) has within DPRD Kabupaten Bandung that reflects the policy of private health service in the coming years will be maintained by the District Law about arrangement private health service as a result adjacent and acknowledgement.

The analysis of Raperda draft arrangement private health services at Bandung district show that making of Raperda accommodates the principal of effort in services just like what is mentioned in pasal 4 ayat (2) that says, the principal of health services by private sector includes principles of equity, accessible, affordable, and the quality of health services. It's also mentioned that there will be a guarantee of equal chance treatment oriented to the weak community.

Making of Raperda needs to be supported and equipped by academical references regarding the substance,

formulation, and content for the Raperda about arrangement of private health service. It is expected that making Raperda will success and at the end become Raperda of Health Policy which will protect the actor such as private sector and the community.