

Studi kasus evaluasi pemanfaatan program kompensasi pengurangan subsidi bahan bakar minyak (PKPS-BBM Bidkes) di RSUD Wonogiri. tahun 2001-2003

Dwi Rini Setyawati, author

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Abstrak

Krisis ekonomi di Indonesia yang terjadi pada tahun 1997 berdampak terhadap persoalan makro, seperti kemiskinan, pengangguran, juga mempengaruhi mutu hidup manusia, baik dari sisi pendidikan maupun terhadap aspek kesehatan. Akibat krisis tersebut membuat harapan masyarakat umum menjangkau pusat-pusat pelayanan kesehatan milik pemerintah ataupun swasta, untuk mendapatkan jasa pelayanan kesehatan dan obat yang bermutu serta terjangkau semakin jauh. Hal ini disebabkan kebutuhan masyarakat akan pelayanan kesehatan semakin meningkat sejalan dengan makin meningkatnya kesadaran mereka akan arti hidup sehat.

Upaya pemerintah untuk dapat menanggulangi berbagai masalah di atas adalah mengambil kebijakan darurat dalam mengurangi berbagai dampak yang ditimbulkan oleh krisis terhadap masyarakat, karena itu pemerintah meluncurkan Program Kompensasi Pengurangan Subsidi Bahan Bakar Minyak Bidang Kesehatan (PKPS-BBM Bidkes), yang bertujuan untuk mengurangi dampak negatif dari program pengurangan subsidi energi bagi masyarakat miskin.

Salah satu rumah sakit yang mendapatkan dana PKPS-BBM Bidkes di propinsi Jawa Tengah adalah RSUD Wonogiri. Pada tahun 2003 penyerapan dana PKPS-BBM Bidkes sebesar 52,2%. Rendahnya penyerapan tersebut menarik penulis untuk melakukan penelitian di rumah sakit tersebut. Variabel yang diteliti meliputi input, proses, dan output. Variabel input meliputi persepsi, pengorganisasian, prosedur pelayanan, mutu layanan, sosialisasi. Variabel Proses terdiri dari penetapan sasaran, pencairan, penggunaan dan pertanggungjawaban keuangan, keterbukaan dan keikutsertaan masyarakat. outputnya Gakin yang berobat dan mendapatkan dana PKPSBBM Bidkes serta pengaduan masyarakat.

Analisis yang digunakan dalam penelitian ini adalah studi kasus. Data penelitian diambil dengan cara wawancara, pengamatan, dokumen, kesan dan pernyataan orang mengenai kasus tersebut.

Dari hasil penelitian diperoleh informasi bahwa pelaksanaan PKPS-BBM Bidkes di kabupaten Wonogiri dilengkapi dengan Surat Keputusan Bupati Wonogiri Nomor: 399 Tahun 2003 tanggal I Oktober 2003 yang didalamnya memuat tujuan, sasaran, jenis pelayanan/kasus, persyaratan pasien Gakin, dan ruang perawatan. Prosedur pelayanan untuk pasien Gakin disusun dalam rangka peningkatan mutu dan cakupan pelayanan, selain itu juga dilengkapi alur pelayanan yang bertujuan mempercepat dan memudahkan pelayanan. Tidak ada perbedaan mutu pelayanan antara pasien Gakin dan umum. Sosialisasi PKPS-BBM Bidkes di Kabupaten Wonogiri berjalan dengan baik. Sosialisasi dilakukan secara lintas sektoral dengan melibatkan aparat terkait dan masyarakat. Jumlah gakin yang berobat di RSUD Wonogiri tahun 2001 sebanyak 208 kasus, tahun 2002 sebanyak 2906 kasus, tahun 2003 sebanyak 750 kasus. Pengaduan dari masyarakat

mengenai pelaksanaan PKPS-BBM Bidkes di RSUD Wonogiri karena ketidaktahuan pasien mengenai prosedur pelayanan yang telah ditetapkan.

Daftar bacaan : 45 (1985-2003)

<hr><i>Case Study of Utilization Evaluation for Program of Oil Fuel Subsidy Reduction Compensation in Health Division at RSUD Wonogiri Year 2001-2003Economic crisis in Indonesia that happened in the year 1997 affecting to macro problem such as poverty, unemployed, also influenced the quality of human life, both education and also health aspect. The crisis impacted to the access of government and private health center to get health service and certifiable drug seemed so far. It was caused by the need of society for health care progressively increased in line with the increasing of their awareness about healthy life.

Governmental effort to overcome various problem above is to take an emergency policy in lessening the various impact generated by the crisis to society. In consequence, the government had launched the Program of Oil Fuel Subsidy Reduction Compensation in Health Division (PKPS-BBM Bidkes) that aimed to decrease the negative impact of program of energy subsidy reduction for poor society.

One of the hospitals in which got the fund of PKPS-EBM Bidkes in Central Java Province was RSUD Wonogiri. The absorption of such fund in 2003 was 52.2%. The lower absorption of that fund attracted the writer to conduct the study at that hospital. Variables that included in the study consisted of input, process, and output. Variable of input consisted of perception, organizing, service procedure, service quality, and socialization. Variable of process consisted of determining of target, liquefaction, financial accountability, community participation and openness. Variable of output included the number of poor family in which got health care and fund of PKPS-BBM Bidkes and also condemnation of society.

Analysis that used in this study was case study. Data was taken by conducting interview, observation, document, impressive and statement of people that concerning about the case.

The study resulted hat implementation of PKPS-BBM Bidkes in the District of Wonogiri provided with Decree of Regent of Wonogiri Number: 399 Year 2003, dated October 1, 2003 in which contained objectives, target, type/case of service, requirement of patient from poor family, and treatment room. Service procedure for the poor family patient was made in order to increase service quality and coverage, besides was also equipped by service path that aimed to facilitate the service. There was no difference of service quality between poor family patient and common patient. Socialization of PKPSBBM Bidkes in the District of Wonogiri worked out. It was conducted as inter-sector by involving related government officer and community. Number of poor family in which got the health care in RSUD Wonogiri in 2001, 2002, and 200 respectively were 208 cases, 2906 cases, and 750 cases. Denunciation of community that concerning the implementation of PKPS-BBM Bidkes in RSUD Wonogiri due to the ignorance of patient about service procedure which have been specified.

References: 45 (1985-2003)</i>