

Evaluation of the Public Health Center Management Information System (SIMPUS) in the City of Kediri

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ABSTRACT

Background It is necessary to evaluate the implementation of the Health Center Management Information System (SIMPUS). Concretely to improve the quality of service data results at the Puskesmas so that it can provide optimal service improvement results. The method used is descriptive analysis that uses qualitative research to identify the process of evaluating the implementation of the Puskesmas Management Information System (SIMPUS) with the Hot-Fit method approach. The results of the study identified aspects of the achievement of success for each element, namely, the human factor of achieving the target in terms of the intensity of SIMPUS implementation, mastery of HR, division of HR tasks and satisfaction that was above 50%, which means SIMPUS has been carried out but not maximized. In reporting the achievement of targets below 50% (10-20%) it means that there is a need for follow-up and improvement efforts in 9 Puskesmas. Organizational factors (organization) both in terms of structure, environment and training, the achievement of targets from 9 Puskesmas in Kediri City is more than 50%, it means SIMPUS has been implemented but has not been maximized. Technology (technology) factors are both system quality, information quality and service quality. The achievement of the target from 9 Puskesmas is more than 50%, which means SIMPUS has fulfilled all the elements but has not yet maximized the use of technology. Identification of the evaluation of aspects of the implementation of the Management Information System (SIMPUS) in accordance with the existing rules and procedures, but in its implementation it has not been carried out optimally. The conclusion is that the SIMPUS evaluation is one of the choices in decision making regarding the successful implementation of the Puskesmas Management Information System (SIMPUS) and the sustainability of the implementation of the Puskesmas Management Information System (SIMPUS).

Keywords: evaluation, information, SIMPUS

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INTRODUCTION

Technological progress in the 4.0 era and the high public appreciation for "High, low, lack of service" encourages service improvement in the public service sector, and regarding National Policy and Strategy for e-Government Development and the Concept of Smart City. Bringing Kediri City to become the main champion of the 2017 Indonesian Smart City Ranking (RKCI). The role of Public Health Center is very vital in implementing SIMPUS, and Public Health Center Sukorame is the first pilot project Public Health Center in the SIMPUS. necessary to evaluate the implementation of the

Health Center Management Information System (SIMPUS). Concretely to improve the quality of service data results at the 9 Puskesmas so that it can provide optimal service improvement results.

METHODS

Research focus in the thesis is how to evaluate the implementation of the puskesmas management information system(simpus) with the hot fit method in the city of Kediri. Descriptive analysis using qualitative for Identify the process of evaluating the implementation of the Health Center Management Information System (SIMPUS) in the City of Kediri. This research was carried out in 9 Public Health Centers in Kediri City : Mrican PHC, Sukorame PHC, Campurejo PHC, Balowerti PHC, Kota Wilayah Utara PHC, Kota Wilayah Selatan PHC, Pesantren 1 PHC, Pesantren 2 PHC, Ngletih PHC. When the research was carried out in Mei –Juli 2021. The sampling technique used in this study was purposive sampling with deep interview and observation, with informan he main triangulation consists of 9 officers at the registration counter unit, 9 Public Service Units & UGD, 9 Dental and Oral Health Unit, 9 Laboratory Units, 9 KIA Units, 9 units of medicine. Puskesmas triangulation informants consist of 9 reporting persons and 9 heads of health centers. DKK triangulation informants consist of Head of Health Department, Head of Section for Budgeting and Programming (Sungram), and Responsible for SIK-network. Journal has passed the ethical test and has passed the ethical test on August 18, 2021 number 2472/KEPK/VIII/2021.

RESULTS

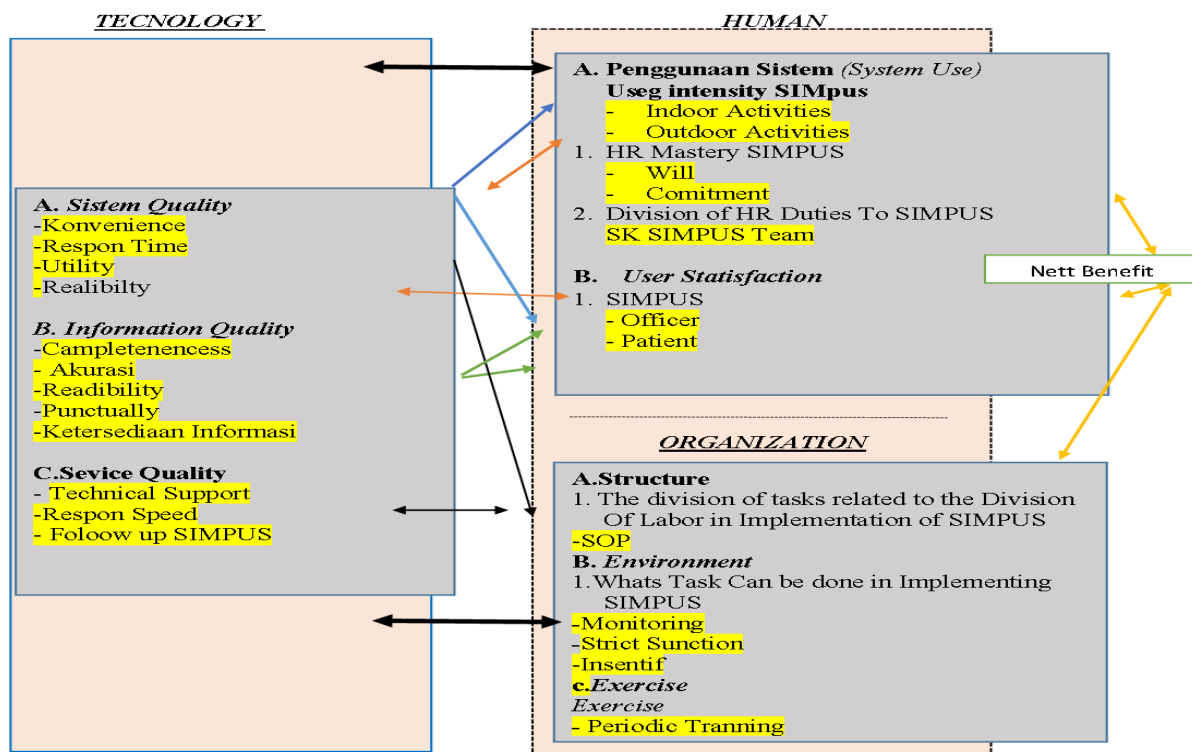
Kediri City area is located between 111 05-112 03 East longitude and 7 45-7 55 south latitude with a land area of 63.40km. Total population of the City Kediri in 2019 amounted to 287,409 people, the number of households as many as 79063 households or an average of 3.6 people per household. As much 46 Kelurahan which is divided into 3 districts. the working area of the health department of the city of Kediri for SIMPUS at 9 Public Health Center.

The results of the evaluation can be seen from the identification of aspects of the achievement of the success of each element, as follows:

No	PHC	Human				Organization			
	%	System Use (Intensity of use)	System Use (HR Mastery)	System Use (HR Duties)	User Satisfaction	Struktur (Division of labor in application)	Structure (Service Monitoring)	Structure (Training)	Structure(Any Task)
1.	Mrican, Balowerti, Kota Wilayah Selatan, Kota wilayah Utara, Ngletih	(75) Not realtime all unit with time of entry after service and report at the end of the month	(100) HR has mastered SIMPUS	(100) based on SIMPUS team decree	Officers (65) while the level of Patient Satisfaction (70). (50) Reporting	50 with the results of the SIMPUS implementation SOP still being one with the reporting SOP	(100) once a year	(100) once a year	(75) Service (10) Reporting
2.	Sukorame	(85) Realtime at the registration unit counter, UPU & UGD and KESGILUT	(100) HR has mastered SIMPUS	(100) based on SIMPUS team decree	Officers (75) while the level of Patient Satisfaction (80). (50) Reporting	50 with the results of the SIMPUS implementation SOP still being one with the reporting SOP	(100) once a year	(100) once a year	(85) Service (20) Reporting
3.	Campurejo, Pesantren 2	(80) Realtime at the registration unit counter, UPU & UGD	(100) HR has mastered SIMPUS	(100) based on SIMPUS team decree	Officers (70) while the level of Patient Satisfaction (75). (50) Reporting	50 with the results of the SIMPUS implementation SOP still being one with the reporting SOP	(100) once a year	(100) once a year	(80) Service (15) Reporting
4.	Pesantren 1	(70) Not realtime all unit with time of entry after report at the end of the month	(100) HR has mastered SIMPUS	100 based on SIMPUS team decree	Officers (80) while the level of Patient Satisfaction (70). (50) Reporting	(50) with the results of the SIMPUS implementation SOP still being one with the reporting SOP	(100) once a year	(100) once a year	(70) Service (10) Reporting

No	PHC	Tecnology		
	%	System Quality(Ease of use, response time, usability and reliability of SIMPUS)	Information Quality (Completeness, accuracy, legibility, timeliness and availability of SIMPUS information)	Service Quality (Ease of use, response time, usability and reliability of SIMPUS)
1.	Mrican, Balowerti, Kota Wilayah Selatan,Kota wilayah Utara, Ngletih	(75) elementally fulfilled, not optimally executed	(75) elementally fulfilled, not optimally executed	(75) elementally fulfilled, not optimally executed
2.	Sukorame	(85) elementally fulfilled,not optimally executed	(85) elementally fulfilled,not optimally executed	(85) elementally fulfilled,not optimally executed
3.	Campurejo, Pesantren 2	(80) elementally fulfilled,not optimally executed	(80) elementally fulfilled,not optimally executed	(80) elementally fulfilled,not optimally executed
4.	Pesantren 1	(70) elementally fulfilled, not optimally executed	(70) elementally fulfilled, not optimally executed	(70) elementally fulfilled, not optimally executed

Identification of aspects of the implementation of the Management Information System (SIMPUS) by procedurs, as follows:



DISCUSSION

Based on the results of research related to the evaluation of the Health Center Management Information System (SIMPUS) in the City of Kediri, data obtained that the evaluation was carried out using the Hot-Fit method, namely on the basis of human, organization and technology approaches. The results of the evaluation can be seen from the identification of aspects of the achievement of the success of each element and the identification of aspects of the implementation of the Management Information System (SIMPUS). The identification of these two aspects will later answer how the results of implementing SIMPUS in Kediri City in 2020. These results will later be repaired or followed up so that the success of SIMPUS in Kediri City can be read and also as a basis for decision making in terms of SIMPUS sustainability in Kediri City in next budget.

Human

Use System (intensity of use)

The achievement obtained by the Mrican PHC, Balowerti PHC, Kota Wilayah Utara PHC, Kota Wilayah Selatan PHC and Ngletih PHC related to the intensity of SIMPUS implementation in Kediri City is 75% with the result that the use of the Health Center Management Information System (SIMPUS) has not been carried out optimally that data entry at the Registration Unit counter is not real time with entry time after service, UPU and ER Units, Dental Health and Mouth, KIA Laborat, Routine drugs are not real time with time of entry after still rappel at the end of the month. The scope of entry is still the main service data (activities in the building).

The achievement obtained by the Sukorame PHC with the result that the use of the Puskesmas Management Information System (SIMPUS) 80% has not been carried out optimally, that data entry at the Registration Unit counters, UPU and ER, Dental and Oral Health has been carried out in real time. Unit KIA Laborat, Medicines are not real time with entry time after service and or once every 5 days. The scope of entry is still Parent service data (internal activities building).

The achievement obtained by the Campurejo PHC and Pesantren 2 80% with the result that the use of the Puskesmas Management Information System (SIMPUS) has not been carried out optimally that data entry at the Registration Unit counters, UPU and ER has been carried out in real time. and or every 5 days. The scope of entry is still the main service data (activities in the building).

The achievement obtained by the Pesantren 1 Health Center related to the intensity of SIMPUS implementation in Kediri City is 70% with the result that the use of the Puskesmas Management Information System (SIMPUS) has not been carried out optimally that data entry at the Registration Unit counters is not real time with entry time after service or a maximum of 5 days. UPU and ER Units, Dental and Oral Health, KIA Laborat, Routine medicines are not real time with entry time after service or a maximum of 5 days.

Use System(Use HR Mastery)

The achievement obtained by the The achievements obtained by 9 Public Health Center in Kediri City regarding Mastery of HR on SIMPUS in the City of Kediri 100% with results All officers / staff of PKM Mrican already able and mastering the SIMPUS application Repair or follow-up Procurement regular training from the Health Office.

Use System(HR Duties)

The achievement obtained by the The achievements obtained by 9 Public Health Center in Kediri City regarding the Division of HR Tasks to SIMPUS in Kediri City are 100% with the results of the division of HR tasks related to the implementation of SIMPUS based on the SIMPUS team decree. monitoring and evaluation are recorded and reported.

User Satisfaction

The achievements obtained by the Mrican PHC, Balowerti PHC, Kota Wilayah Utara PHC, Kota Wilayah Selatan PHC and Ngletih PHC are related to satisfaction in the implementation of SIMPUS in the city of Kediri on services from the level of staff satisfaction 65% while the level of patient satisfaction is 70%. At 50% reporting. The result is that the service becomes fast, precise, accurate and in reporting that can be seen in patient visit reports and reports of the top 10 diseases.

The achievements obtained by the Sukorame Public Health Center are related to satisfaction in implementing SIMPUS in the City of Kediri on services from the staff satisfaction level of 75% while the patient satisfaction level is 80%. At 50% reporting. The result is that the service becomes fast, precise, accurate and in reporting that can be seen in patient visit reports and reports of the top 10 diseases.

The achievements obtained by the Campurejo and Pesantren 2 Public Health Center are related to satisfaction in implementing SIMPUS in the City of Kediri on services from the staff satisfaction level of 80% while the patient satisfaction level is 75%. At 50% reporting. The result is that the service becomes fast, precise, accurate and in reporting that can be seen in patient visit reports and reports of the top 10 diseases.

The achievements obtained by the Pesantren 1 Public Health Center are related to satisfaction in implementing SIMPUS in the City of Kediri on services from the staff satisfaction level of 60% while the patient satisfaction level is 65%. At 50% reporting. The result is that the service becomes fast, precise, accurate and in reporting that can be seen in patient visit reports and reports of the top 10 diseases.

Organization

Structure (Service Monitoring)

The achievement obtained by the The achievements obtained by 9 Public Health Center in Kediri City 50% with the results of the SIMPUS implementation SOP still being one with the reporting SOP

Environment (Training)

The achievement obtained by the The achievements obtained by 9 Public Health Center in Kediri City (100) once a year.

Exercise (Any Task)

The achievement obtained by the The achievements obtained by 9 Public Health Center in Kediri City (100) once a year.

Tecnology

System Quality (Ease of use, response time, usability and reliability of SIMPUS)

The achievements obtained by the Mrican PHC, Balowerti PHC, Kota Wilayah Utara PHC, Kota Wilayah Selatan PHC and Ngletih PHC 75% elementally fulfilled, not optimally executed.

The achievements obtained by the Sukorame Public Health Center 85%elementally fulfilled, not optimally executed.

The achievements obtained by the Campurejo and Pesantren 2 Public Health Center 80%elementally fulfilled, not optimally executed.

The achievements obtained by the Pesantren 1 Public Health Center 70%elementally fulfilled, not optimally executed.

Information Quality (Completeness, accuracy, legibility, timeliness and availability of SIMPUS information)

The achievements obtained by the Mrican PHC, Balowerti PHC, Kota Wilayah Utara PHC, Kota Wilayah Selatan PHC and Ngletih PHC 75% elementally fulfilled, not optimally executed.

The achievements obtained by the Sukorame Public Health Center 85%elementally fulfilled, not optimally executed.

The achievements obtained by the Campurejo and Pesantren 2 Public Health Center 80%elementally fulfilled, not optimally executed.

The achievements obtained by the Pesantren 1 Public Health Center 70%elementally fulfilled, not optimally executed.

Service Quality (Ease of use, response time, usability and reliability of SIMPUS)

The achievements obtained by the Mrican PHC, Balowerti PHC, Kota Wilayah Utara PHC, Kota Wilayah Selatan PHC and Ngletih PHC 75% elementally fulfilled, not optimally executed.

The achievements obtained by the Sukorame Public Health Center 85%elementally fulfilled, not optimally executed.

The achievements obtained by the Campurejo and Pesantren 2 Public Health Center 80%elementally fulfilled, not optimally executed.

The achievements obtained by the Pesantren 1 Public Health Center 70%elementally fulfilled, not optimally executed.

CONCLUSION

Based on the results of the research and discussion that have been described, the following conclusions can be drawn:

Human factors for achieving the target of 9 Puskesmas throughout the City of Kediri in terms of the intensity of SIMPUS implementation, mastery of human resources, division of HR tasks and satisfaction are already above 50%, which means SIMPUS has been implemented but not maximized. In reporting on the achievement of the target below 50% (10-20%) it means that there is a need for follow-up and improvement efforts in 9 Puskesmas throughout the City of Kediri. The findings of the existing data show that there are still some human factors (human) HR that do not have the will to accept technological advances in assisting service tasks, then it is necessary to make an agreement or joint commitment in carrying out SIMPUS. Data entry in 9 health centers throughout Kediri City has not yet all units entered data in real time, data entry is still carried out after service and or a maximum of 5 days or even there are still rapists at the end of the month. Data entry is still in the main activity, which is centered on care roads, for pustu and outdoor activities have not been maximized in entry. Reports have not been optimally executed where the results of reports from the SIMPUS application are only in the archives at each health center, in other words, reporting at the Kediri City Health Office is still done manually. the impact of less than the maximum level of satisfaction from both staff and patients.

Organizational factors, both in terms of structure, environment and training, the achievement of targets from 9 Puskesmas in Kediri City is more than 50%, which means that SIMPUS has been implemented but has not been maximized. The findings of the existing data are procedural. There is already a SIMPUS team SK related to the distribution of human resources, but there is no SOP regarding the implementation of SIMPUS, where the SOP is still one with the reporting SOP. In this case, it is necessary to have regular monitoring and evaluation from both the Puskesmas and the Health Office of the City of Kediri, if necessary there are strict sanctions and the possibility of providing incentives in the implementation of SIMPUS to improve officer compliance in carrying out SIMPUS.

Technological factors (technology) both from the quality of the system, the quality of information and the quality of service, the achievement of the target of 9 Puskesmas throughout the City of Kediri is more than 50%, it means that SIMPUS has fulfilled all the elements in the procedure and has fulfilled the elements of both system quality, information quality and quality. service but in its implementation it is not optimally executed.

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