

ABSTRAK

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Analisis Kinerja Bidan Desa dalam Pelayanan Nifas di Wilayah Puskesmas Kabupaten Bone

110 halaman + 4 tabel + 2 gambar + 22 lampiran

Cakupan pelayanan nifas di Kabupaten Bone selama dua tahun terakhir masih dibawah target MDGs yaitu 90%. Tahun 2009 cakupan KF lengkap 60% dan tahun 2010 cakupan KF lengkap 65%. Berdasarkan survei pendahuluan didapatkan bahwa kinerja bidan desa dalam pelayanan nifas belum sesuai standar, pencatatan hasil pelayanan nifas belum dilaksanakan dengan baik, fasilitas/alat belum dimanfaatkan secara maksimal dan supervisi dilakukan berdasarkan laporan hasil kegiatan. Tujuan penelitian ini adalah menjelaskan bagaimana kinerja bidan desa dalam pelayanan nifas di Kabupaten Bone .

Jenis penelitian ini adalah deskriptif kualitatif dengan pendekatan *cross sectional*. Informan penelitian adalah bidan desa di wilayah Puskesmas Kabupaten Bone. Data dikumpulkan dengan wawancara mendalam (*indepth interview*) dan selanjutnya dilakukan pengolahan data menggunakan metode analisis isi (*content analysis*)

Hasil penelitian menunjukkan bahwa kinerja bidan desa dari aspek kualitas belum dilaksanakan sesuai standar pelayanan nifas, dari segi kuantitas didapatkan cakupan kunjungan yang menurun. Ketepatan waktu juga belum sesuai dengan penerapan jadwal pelayanan nifas. Efektivitas sumber dana Jampersal dan Jamkesmas belum dimanfaatkan secara optimal dan ketersediaan fasilitas belum merata, serta kelengkapan alat pemeriksaan nifas dilakukan secara mandiri. Pengawasan belum sesuai dengan kebutuhan bidan desa, Serta jalinan kerja sama belum dilaksanakan secara maksimal dan menyeluruh.

Disarankan kepada Dinas Kesehatan untuk Memberikan bekerja sama dengan Pemda Kab. Bone untuk memberikan reward/penghargaan kepada bidan yang pencapaian cakupan pelayanan nifas tinggi agar dapat memotivasi bidan yang lain yang belum mencapai target. Pengadaan alat untuk pelayanan nifas secara merata kepada seluruh bidan desa. Meningkatkan pelayanan administrasi Jampersal dan Jamkesmas sehingga dana dicairkan tepat waktu. Sedangkan untuk Puskesmas disarankan untuk melakukan supervise ke desa sesuai jadwal yang telah ditetapkan. Melibatkan Kepala puskesmas dan bidan coordinator dalam sosialisasi tugas dan pengenalan bidan desa.

Kata Kunci : Pelayanan Nifas, Bidan Desa, Kinerja

Jumlah Pustaka : 48 (1993 – 2011)

ABSTRACT

A. Fatimah Jamir

Analysis on the Performance of Village Midwives in Post Natal Care Services at Primary Healthcare Centers in Bone District, South Sulawesi Selatan, 2012
110 pages + 4 tables + 2 figures + 22 enclosures

Post delivery service coverage in Bone district for the last 2 years was still below the MDGs target (90%). In 2009, coverage of complete KF was 60%, and in 2010 it was 65%. Based on a preliminary survey, it was shown that village midwives work performance in post delivery service was not fit with the standard; post delivery service recording was not done properly; facilities were not used maximally; and supervision was only done based on the results of activity reports. The objective of the study was to explain the work performance of village midwives in post delivery service in Bone district.

This was a descriptive-qualitative study with cross sectional approach. Study informants were village midwives in the primary healthcare centers of Bone district. Data were collected through in-depth interview. Content analysis method was applied in the data management. Results of the study showed that viewed from the quality aspect, work performance of village midwives was not done according to the post delivery service standard; and viewed from the quantity aspect, visit coverage decreased. Service time accuracy was not suit with post delivery service time schedule. Funding resources of Jampersal and Jamkesmas were not utilized maximally, availability of facilities was not distributed evenly, and completeness of post-delivery examination instruments was done by self-funding. Supervision was not done according to village midwives needs. Collaboration was not done maximally and comprehensively. Suggestions for the head of district health office are to make collaboration with Bone district government in giving rewards to midwives who attain high service coverage in order to motivate other midwives who have not attained target; to provide post delivery service instruments to all village midwives; to improve jampersal and jamkesmas administration services in order to receive funding on time. Suggestions for primary healthcare center are to do supervision in the village according to the established time schedule; to involve the head of primary healthcare center and coordinator midwives in task socialization and introduction of village midwives.

Keywords : Post delivery service, village midwives, work performance

Bibliography : 48 (1993-2011)