**Universitas Diponegoro**

**Fakultas Kesehatan Masyarakat**

**Program Magister Ilmu Kesehatan Masyarakat**

**Konsentrasi Sistem Informasi Manajemen Kesehatan**

**2014**

**ABSTRAK**

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**Evaluasi Sistem Informasi Kesehatan Daerah (SIKDA) Kota Surakarta dalam Mendukung Penguatan SIKDA Generik**

**xv + 192 hal + 12 lampiran**

Sistem Informasi Kesehatan Nasional adalah sebuah model Sistem Informasi Kesehatan yang terintegrasi. Awal tahun 2012, Kementrian Kesehatan melalui Pusat Data dan Informasi telah meluncurkan aplikasi yang disebut “SIKDA Generik” yang diharapkan dapat berguna secara efektif sebagai alat komunikasi pengelola data/informasi di daerah, dapat saling tukar menukar agar selalu siap memberikan data kondisi kesehatan secara utuh dan *evidence based*. Dampak adanya SIKDA Generik, maka dituntut penyesuaian antara SIKDA Kota Surakarta dengan SIKDA Generik. Tujuan penelitian ini adalah mengevaluasi komponen *input*, proses dan *output* SIKDA Kota Surakarta dalam mendukung penguatan SIKDA Generik.

Penelitian ini adalah penelitian kualitatif menggunakan pendekatan waktu penelitian retrospektif. Metode pengumpulan data menggunakan triangulasi sumber, wawancara mendalam, dan dokumentasi. Objek yang diteliti adalah SIKDA Kota Surakarta dan SIKDA Generik, sedangkan informan utama adalah Kepala Seksi SIMKES, pengelola SIK di DKK, Koordinator SIK di Puskesmas Sibela dan Puskesmas Nusukan, sedangkan informan triangulasi adalah Kepala P2PL dan Kepala Binkesmas.

Hasil dari penelitian secara umum dari sisi *input*, proses dan *output* sudah mendukung penguatan SIKDA Generik, namun beberapa kelemahan yang ditemukan antara lain pengembangan sumber daya manusia untuk pengelolaan SIKDA belum dilakukan secara berkala, indikator *input* SIKDA Kota Surakarta dalam sistem kesehatan belum sesuai dengan SIKDA Generik, koordinasi lintas sektor belum berjalan, relevansi informasi belum sesuai kebutuhan dan diseminasi data secara *online* belum maksimal.

Berdasarkan hasil penelitian, peneliti dapat memberikan rekomendasi dan saran antara lain pelatihan teknisi aplikasi, teknisi *database*, teknisi *hardware* dan jaringan untuk pengelola SIK tingkat DKK dan pelatihan teknisi *hardware* dan jaringan untuk pengelola SIK tingkat puskesmas, adopsi SIMPUS dan SIM Dinkes dari SIKDA Generik, dibentuknya koordinasi lintas sektor dengan adanya Tim yang terdiri dari perwakilan dinas-dinas di lingkup Pemerintah Kota Surakarta, adanya informasi *excecutive summary* bagi kepala DKK dan memaksimalkan website DKK untuk diseminasi data kepada masyarakat dan pihak-pihak yang membutuhkan.

Kata Kunci : SIKDA Generik, Komponen SIK

Referensi : 47 (1999-2013)

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**Faculty of Public Health**

**Master’s Program in Public Health**

**Majoring in Health Management Information System**

**2014**

**ABSTRACT**

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**Evaluation of Regional Health Information System (SIKDA) in Surakarta City to Strengthen of Generic SIKDA**

**xv + 192 pages + 12 enclosures**

A National Health Information System is a model of integrated Health Information System (HIS). In early 2012, Ministry of Health through Data and Information Services Center released an application better known as “Generic SIKDA” which could be effectively used as a communication tool for data/information managers in a region. They could exchange it in order to provide data of health condition comprehensively and evidence based. Therefore, SIKDA of Surakarta City and Generic SIKDA need to be adjusted. This research aimed to evaluate components of input, process, and output of SIKDA of Surakarta City to strengthen Generic SIKDA.

This was qualitative research using retrospective approach. Data were collected using source triangulation, indepth interview, and documentation. Research objects consisted of SIKDA of Surakarta City and Generic SIKDA. Main informants encompassed Section Head of Health Management Information System, HIS manager at City Health Office (CHO), and HIS coordinators at Sibela and Nusukan Health Centers. In addition, informants for triangulation purposes were Head of P2PL and Head of Binkesmas.

The result of evaluation revealed that generally viewed from the aspects of input, process, and output had supported strengthening Generic SIKDA. However, some weaknesses existing there namely development of human resources to manage SIKDA had not been regularly done. The input aspect of SIKDA of Surakarta City in health system showed that it was not in accordance with Generic SIKDA, coordination with inter-sector had been implemented, information had not been relevant with necessities, and online data dissemination had not been maximal.

As a recommendation and suggestion, there needs to conduct some trainings of technicians for application, database, hardware and network for HIS managers at a health center level. In addition, Health Center Management Information System and Health Office Management Information System need to be adopted from Generic SIKDA. Coordination with inter-sector needs to be established by forming a team consisted of representatives from government offices in Surakarta City. Information of executive summary needs to be submitted to Head of Surakarta CHO and a website of Surakarta CHO needs to be optimized as a tool to disseminate data for those who need.

Key Words : Generic SIKDA, HIS Components

Bibliography : 47 (1999-2013)