



MINISTRY  
OF HEALTH  
REPUBLIC OF  
INDONESIA



THE 4<sup>th</sup> INTERNATIONAL SYMPOSIUM ON HEALTH RESEARCH  
AND 14<sup>th</sup> NATIONAL CONGRESS  
OF INDONESIAN PUBLIC HEALTH ASSOCIATION,  
BALI, 28-30 November 2019



**SCIENTIFIC EVIDENCE AND POLITICS IN HEALTH DEVELOPMENT**



# Strengthening Local Health Resource for Health (HRH) Capacity in 8 Remote Districts in Indonesia: Stakeholder's Perspective After 3 years Intervention of Pencerah Nusantara Program

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## Point

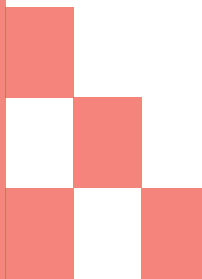
Recommendations

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# 1

## Introduction



# INTRODUCTION

**HUMAN  
RESOURCE  
HEALTH**

**PENCERAH  
NUSANTARA**

**SERVICE  
READINESS**

Health systems with a  
strong primary health care  
orientation tend to be  
more pro-poor, equitable  
and accessible

**WHO, 2004**



## CHALLENGE

HRH remains a key challenge for Indonesia's health sector that further impedes the Puskesmas ability to provide high-quality services



## EVIDENCE

Most Puskesmas did not meet all indicators of service readiness to provide good quality health care services (Risfaskes 2011, QSDS 2016)

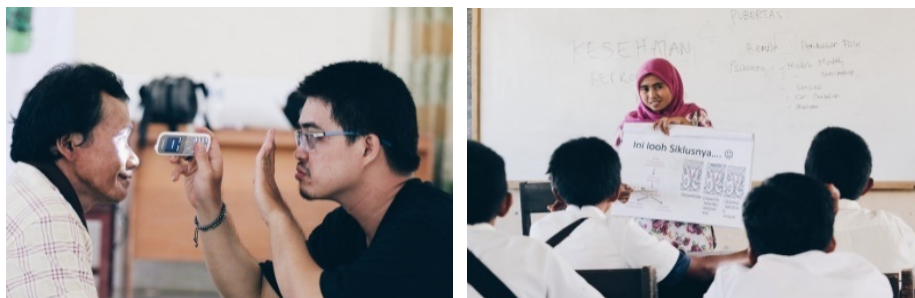


## CONCEPT

Pencerah Nusantara program delivered a day to day assistance and in-service training to the health workforce for 3 years.

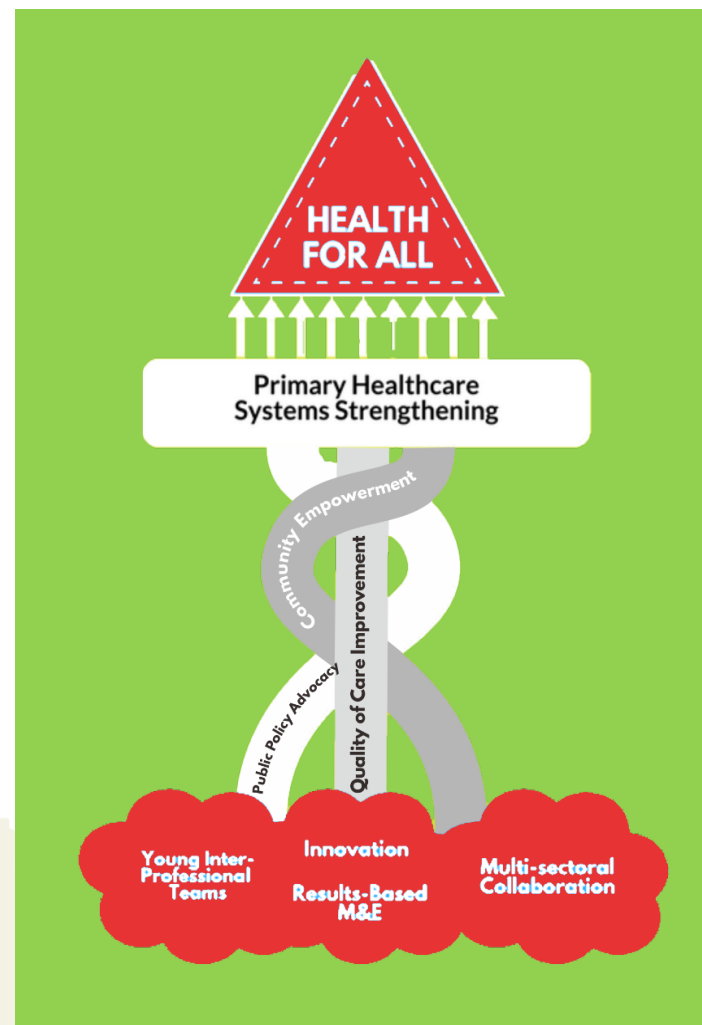


# PENCERAH NUSANTARA

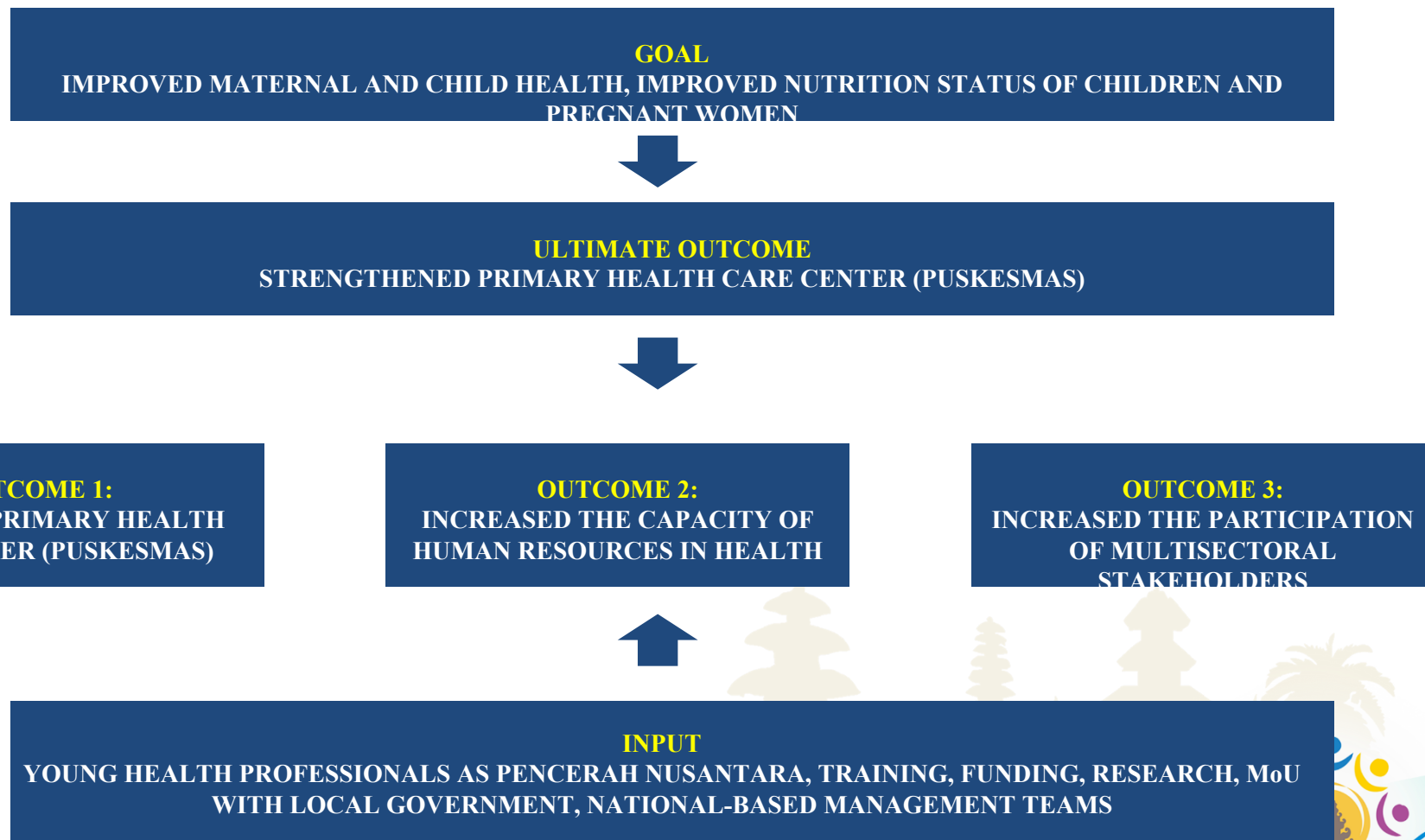


## PENCERAH NUSANTARA

1. Pencerah Nusantara is represented by interprofessional collaboration team dedicated their expertise to strengthen PHC centre (Puskesmas) and the capacity of communities in designated peripheral areas
2. Pencerah Nusantara program delivered a day to day assistance and in-service training to the health workforce for 3 years.

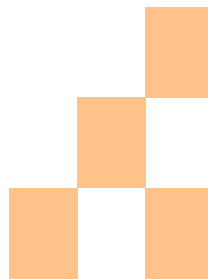


# PENCERAH NUSANTARA



# 2

## Objectives



# OBJECTIVES



How is stakeholder's perspective on Puskesmas management after 3 years intervention of Pencerah Nusantara Program ?

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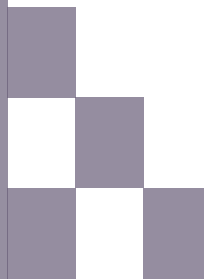
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# 3

## Methodology



# METHODOLOGY



## Method

**Qualitative Research**



## Technique

**In-depth Interview**



## Target

**24 Key Informants**

1. Head of Puskesmas
2. Quality team of Puskesmas
3. District health officers



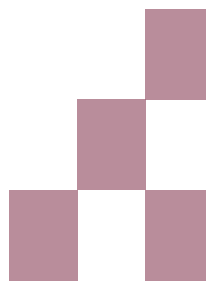
## Period & Location

- February-March 2019
- 8 Deployment area of PN



# 4

## Key Findings



# KEY FINDINGS

## Quality Assurance

PN provides assistance especially to the program holders, quality team and patient safety team

## Data and Reporting

The quality of program reports and documentation increases with PN

## Implementation of SOP

The existence of PN increased the discipline of health workers in implementing SOP

## Multi-Stakeholder Collaboration

Multi-stakeholder collaboration is getting better with PN both in terms of quantity and quality

## Health Service Delivery

PN can improve the technical abilities of program holders

## Puskesmas Accreditation

Until April 2019, 7 out of 8 Puskesmas were accredited



# IN-DEPTH INTERVIEW

Head of Puskesmas



**Hasna**

**Kapus Bambalamotu**

"The training and assistance provided by PN to health workers make health workers more responsible and disciplined"



**Agus**

**Kapus Kradenan I**

"The presence of PN has a significant effect on the application of SOP. Awareness of employees has increased"



# OBSTACLES

Several factors that hinder the improvement of Puskesmas officer

Mutation and  
rotation



Health worker  
resistance



Lackness  
supervision from  
DHO

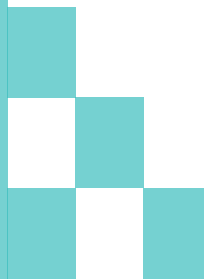


Shortfall of data  
management



# 5

## Conclusion & Reccomendation



# CONCLUSION AND RECCOMENDATION



## CONCLUSION

Technical assistance and on-the-job training by Pencerah Nusantara offer a promising solution to fill the capacity gap in HRH at the underdeveloped area.



## RECCOMENDATION

Further intervention on developing the leadership capacity and multi-stakeholder collaboration for puskesmas HRH is needed







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# THANK YOU

