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EVALUATION OF DRUG MANAGEMENT AT THE CAMBA COMMUNITY HEALTH CENTER UPTD, MAROS DISTRICT, 2024

EVALUASI PENGELOLAAN OBAT DI UPTD PUSKESMAS CAMBA KABUPATEN MAROS TAHUN 2024

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Abstract

Drug management is a series of pharmaceutical service activities involving aspects of planning, requesting, receiving, storing, distributing, controlling, recording, and reporting drugs. Drug management in CHCs is an important aspect because inefficiency will have a negative impact on health services. The purpose of this study was to evaluate drug management at the Camba Community Health Center UPTD so that it can be used as a reference material to improve the quality of drug management. This type of research is a non-experimental descriptive-observational study. The data used are data in the form of reports and documents on drug management at the community health center. The research instrument used an observation sheet with the references used being the Indonesian Minister of Health Regulation No. 74 of 2016 and the Indonesian Ministry of Health 2019 Technical Guidelines for Pharmaceutical Service Standards in CHCs. The results of the study indicate that drug management at the Camba Community Health Center UPTD is based on the Indonesian Minister of Health Regulation No. 74 of 2016 and the Indonesian Ministry of Health 2019 Technical Guidelines for Pharmaceutical Service Standards at CHCs in the planning aspect are included in the good category with a percentage value of 100%, the request aspect is 100% in the good category, the receipt aspect is 100% in the good category, the storage aspect is 87.5% in the good category, the distribution aspect is 66.7% in the sufficient category, the destruction and withdrawal aspect is 100% in the good category, the control aspect is 100% in the good category, the recording and reporting aspect is 100% in the good category. So it can be concluded that drug management at the Camba Community Health Center UPTD in 2024 has met the standards set by the Indonesian Ministry of Health.

Keywords : Drug Management, Camba Health Center, Evaluation

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Abstrak

Pengelolaan obat merupakan suatu rangkaian kegiatan pelayanan kefarmasian yang menyangkut aspek perencanaan, permintaan, penerimaan, penyimpanan, pendistribusian, pengendalian, pencatatan dan pelaporan obat. Pengelolaan obat di puskesmas merupakan aspek penting karena ketidakefisienan akan memberikan dampak negatif terhadap pelayanan kesehatan. Tujuan dari penelitian ini adalah untuk mengevaluasi pengelolaan obat di UPTD Puskesmas Camba sehingga dapat dijadikan bahan rujukan untuk meningkatkan mutu pengelolaan obat. Jenis penelitian ini adalah penelitian non-eksperimental bersifat deskriptif-observasi. Data yang digunakan adalah data-data berupa laporan dan dokumen pengelolaan obat di puskesmas. Instrumen penelitian menggunakan lembar observasi dengan acuan yang digunakan yaitu Permenkes RI No. 74 Tahun 2016 dan Kemenkes RI 2019 Petunjuk Teknis Standar Pelayanan Kefarmasian di Puskesmas. Hasil penelitian menunjukkan bahwa pengelolaan obat di UPTD Puskesmas Camba erdasarkan Permenkes No. 74 Tahun 2016 dan Kemenkes RI 2019 Petunjuk Teknis Standar Pelayanan Kefarmasian di puskesmas pada aspek perencanaan masuk dalam kategori baik dengan nilai persentase 100%, aspek permintaan 100% kategori baik, aspek penerimaan 100% kategori baik, aspek penyimpanan 87,5% kategori baik, aspek pendistribusian 66,7% kategori cukup, aspek pemusnahan dan penarikan 100% kategori baik, aspek pengendalian 100% kategori baik, aspek pencatatan dan pelaporan 100% kategori baik. Maka dapat disimpulkan pengelolaan obat di UPTD Puskesmas Camba pada tahun 2024 sudah memenuhi standar yang ditetapkan oleh KemenKes RI.

Kata Kunci : Pengelolaan obat, Puskesmas Camba, Evaluasi

1. INTRODUCTION

A Community Health Center (CHC) serves as a primary healthcare facility dedicated to delivering comprehensive, integrated, and sustainable primary health services. These services encompass both individual and community health interventions. The health efforts implemented are based on four fundamental pillars: promotive, preventive, curative, and rehabilitative measures (Ministry of Health, 2019). Functioning as a technical implementation unit under the district or city health office, it is responsible for executing health development programs within designated operational areas (Ministry of Health, 2016). Furthermore, it operates as a functional organization committed to providing equitable, accessible, acceptable, and affordable healthcare services. These services are characterized by active community participation and the integration of relevant scientific and technological advancements, with costs supported by both governmental and community resources (Haldane et al. 2019).

Pharmaceutical service standards act as essential guidelines that assist pharmacists in delivering consistent and high-quality pharmaceutical care. Defined as direct and accountable services provided to patients involving pharmaceutical preparations, pharmaceutical care aims to achieve specific therapeutic outcomes that improve patients' quality of life (Ministry of Health of the Republic of Indonesia, 2016). Within the primary healthcare system, especially at CHCs (CHCs), pharmaceutical services are a vital part of healthcare delivery. These services play a key role in enhancing the overall quality and effectiveness of health interventions at the community level. Moreover, pharmaceutical care involves a coordinated set of activities intended to identify, prevent, and resolve problems related to drug therapy and other health-related issues (Radiah et al., 2024). Consequently, the quality and scope of pharmaceutical

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services at the community level are closely linked to patient outcomes and the overall efficiency of the healthcare system.

Preparation management involves a comprehensive series of activities including planning, requesting, receiving, storage, distribution, control, recording, and reporting. This process is an essential component of health services aimed at ensuring the continuous and timely availability of medicines and disposable medical materials. The management not only focuses on the technical aspects of inventory handling but also emphasizes the need for efficiency and effectiveness in resource utilization. Each stage, from planning to reporting, must be conducted systematically and in an integrated manner to prevent stock shortages or surpluses that could negatively impact overall healthcare delivery (Ministry of Health, 2019).

Furthermore, the primary objective of managing preparations and disposable medical supplies is to improve accessibility and affordability of these essential items for the community. This goal is achieved by enhancing the competence and capacity of personnel, implementing reliable management information systems, and consistently applying quality control measures in service delivery. By integrating information technology and quality assurance, management processes are expected to become more transparent, accountable, and adaptable to changing needs in the field. Thus, preparation management serves not only an administrative function but also a strategic role in realizing sustainable and high-quality healthcare services (Ministry of Health, 2016).

Medication management activities at CHCs encompass several critical stages, including planning, procurement, receiving, storage, and destruction of medications. Additionally, strict control measures as well as accurate recording and reporting are integral parts of the process. The primary goal of these management activities is to ensure optimal medication handling, so that the quantity and types of pharmaceutical supplies remain accurate and aligned with actual needs. This is essential to maintain timely availability of medicines and to prevent both shortages and overstocking, which could negatively impact healthcare services.

In carrying out medication management, CHCs make effective use of available resources such as skilled personnel, adequate storage facilities, sufficient funding, and supporting software for documentation and reporting. By utilizing these resources efficiently, each work unit within the center can achieve its established objectives for medication management. This approach not only enhances the efficiency of medication distribution but also helps ensure the safety and quality of medicines provided to the community, thereby supporting smooth and sustainable healthcare delivery.

Based on a preliminary survey conducted at the Camba Community Health Center (UPTD), it was found that no prior research has been carried out to evaluate the drug management system in place. This gap highlights the need for a thorough assessment, as effective drug management at community health centers is critical to ensuring uninterrupted healthcare services. Proper adherence to drug management procedures is essential because any failure or deviation can lead to significant issues such as reduced drug availability, accumulation of excess stock due to poor planning, overlapping or misallocated budgets, and increased risks of expired, damaged, or obsolete medications (Sariah et al., 2022).

These problems not only disrupt the supply chain but also jeopardize patient safety and the overall efficiency of health services. Addressing these challenges requires a comprehensive understanding of the current drug management practices, identifying weaknesses, and implementing improvements. By doing so, the Community Health Center can optimize

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resource utilization, minimize waste, and ensure that medications are available, safe, and effective for the community it serves. (Sariah et al., 2022).

2. RESEARCH METHOD

This type of research is non-experimental and descriptive-observational. Descriptive is a research method used to describe a situation objectively, while observation is a data collection technique by observing the object being studied.

The population of this study is one of the CHCs in Maros Regency, namely the UPTD Camba Community Health Center. The sample used in this study is data in the form of reports and documents on drug management in 2024 at the Camba Community Health Center UPTD. Data analysis in the study used descriptive analysis with the stages used, namely the data obtained was scored, the answer "Yes" got a value of 1, "No" got a value of 0, the results of the data that had been scored were added up and divided by the highest value then multiplied by 100% to calculate the average value obtained, from this value it can be concluded the category of drug management in the Pharmacy Installation of the Camba Health Center UPTD.

3. RESULTS AND DISCUSSION

1. Planning

Based on the observation results at the Camba Community Health Center, the implementation of planning is categorized as good (100%). Based on the Regulation of the Minister of Health of the Republic of Indonesia Number 74 of 2016 concerning Pharmaceutical Service Standards in CHCs and Technical Instructions for Pharmaceutical Service Standards in CHCs in 2019, the purpose of drug planning is to obtain estimates of the type and number of drugs that are close to the needs, increase drug needs rationally and increase the efficiency of drug use. To avoid drug shortages, the community health center uses the consumption method, which is based on drug needs in the previous year and the morbidity method, which is drug needs based on disease patterns in the community health center area and looking at the remaining stock of drug supplies at the community health center.

2. Request/Procurement

The research findings indicate that demand at the Camba Community Health Center is in the good category (100%). The monthly drug request period is once a month. The drug request process is submitted by the drug management officer at the community health center, which has been approved by the head of the community health center, to the health office through the District Pharmacy Installation (IFK) using the LPLPO format. The time required for the drug request to be received is approximately 1-3 days.

3. Acceptance

The observation results on drug receipt at the Camba Community Health Center are in accordance with the percentage value obtained, namely 100%, which means it is included in the good category. In the process of receiving drugs at the Camba Community Health Center, it is carried out based on requests submitted to the District Health Office. At the time of receipt, there is a proof of goods leaving the district pharmacy installation and a drug check is carried out at the health center. Officers conduct checks that include the name of the drug, drug packaging, quantity and type of drug, drug dosage form, physical condition, and expiration date of the drug. The drug receiving officer confirms to the sending officer if there is a shortage of drugs that do not comply with the LPLPO. If it is in accordance with the LPLPO, the drug recipient signs the receipt form.

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4. Storage

Based on the results of the study on the aspect of drug storage in the Camba Health Center drug warehouse, it is in accordance (87%) with the requirements set by the Indonesian Minister of Health Regulation Number 74 of 2016 and the Technical Instructions for Pharmaceutical Service Standards at the Health Center in 2019 listed in Table 4.4. The drug warehouse is separate from the service room and is equipped with a double lock, there is a special storage rack for drugs, drugs stored using the FIFO and FEFO systems have a special cabinet for storing Narcotics and Psychotropics with a double lock, drugs are arranged on drug shelves alphabetically in each dosage form, liquid drug preparations are separated from solid drug preparations, have adequate ventilation and light, the availability of temperature and humidity measuring devices because high humidity can damage the quality of stored drugs.

5. Distribution

The purpose of distribution according to the Minister of Health Regulation Number 74 of 2016 and according to the Minister of Health's 2019 technical instructions is to meet the need for pharmaceutical supplies in the health service sub-units within the community health center's working area with the right type, quality, quantity, and time. Based on distribution observations conducted by the Camba Community Health Center, it has been very good (67%) in accordance with the Minister of Health Regulation Number 74 of 2016 and the Minister of Health's 2019 technical instructions.

6. Destruction and Withdrawal

Based on the research results obtained, it shows that at the Camba Health Center, the aspect of drug control is included in the good category (100%) for the destruction of drugs in health service facilities, the destruction of expired or damaged drugs is carried out in accordance with applicable laws and regulations.

7. Control

Based on the research results obtained, it shows that in the Camba Health Center, the aspect of drug control is included in the good category (100%), which means it is in accordance with the standards set by the Regulation of the Minister of Health of the Republic of Indonesia Number 74 of 2016 and the Technical Instructions for Pharmaceutical Service Standards in Health Centers in 2019. The purpose of control in the health center is to prevent excess and empty drugs in the health center or service network. In controlling damaged or expired drugs carried out by drug management officers at the Camba Health Center by placing the drug in a special place separate from other drugs.

8. Recording and Reporting

Based on the results of observations at the Camba Community Health Center, it was found that drug recording and reporting obtained a good value (100%), as listed in Table 4.7. Recording of drug stock at the community health center is carried out routinely when there are drugs coming in or going out of the community health center's drug warehouse. Officers record stock cards during storage by recording drug mutations or distribution and use at the community health center and other service units so that the drug available in the storage area can be known with certainty the stock of drugs. On each stock card sheet, only one type of drug is recorded alphabetically to facilitate drug recording and reporting, and each row of data only records one drug mutation event.

Table 1 Results of Observations on Drug Planning at the Camba Community Health Center UPTD, Maros Regency

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Drug Planning Standards in CHCs	Standard Compliance		Point
	Yes	No	
Selection process by considering pattern disease	✓		1
Consumption patterns	✓		1
Combination pattern	✓		1
Previous period pharmaceutical preparations	✓		1
Pharmaceutical preparation mutation data	✓		1
Development plan	✓		1
Drug selection refers to DOEN	✓		1
Drug selection refers to the National Formulary	✓		1
Percentage	**100%**	**0%**	

Table 2 Results of Observations on Drug Demand at the Camba Community Health Center UPTD, Maros Regency

Drug Request Standards at CHCs	Standard Compliance		Point
	Yes	No	
Make LPLPO regularly every month	✓		1
Sumbit LPLPO to the District Health Office	✓		1
Percentage	**100%**		

Table 4.3 Results of Observations on Drug Receipts at the Camba Community Health Center UPTD, Maros Regency

Drug Acceptance Standards at CHCs	Standard Compliance		Point
	Yes	No	
Reception by Pharmacist/TTK/Person in Charge Pharmacy Room	✓		1
Drug name	✓		1
Checking drug expiration dates	✓		1
Amount of inventory	✓		1
Physical form of the preparation	✓		1
Batch number	✓		1
Medicine packaging	✓		1
Percentage	**100%**	**0%**	

Table 4 Results of Observations on Drug Storage at the Camba Community Health Center UPTD, Maros Regency

Drug Storage Standards in CHCs	Standard Compliance		Point
	Yes	No	

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The drug storage area is not used to store other items	✓		1
Using the FIFO method	✓		1
Using the FEFO method	✓		1
Storage of Narcotics and Psychotropics		✓	0
Storage based on the form and type of preparation	✓		1
Storage room temperature ensures drug stability	✓		1
Storing drugs alphabetically	✓		1
Storage of drugs according to therapeutic class/efficacy	✓		1
Percentage	**87.5%**	**12.5%**	

Table 5 Results of Observations on Drug Distribution at the Camba Community Health Center UPTD, Maros Regency

Drug Distribution Standards in CHCs	Standard Compliance		Point
	Yes	No	
Health service sub-units within the community health center environment	✓		1
Sub-district health center	✓		1
Mobile health center	✓		1
Posyandu	✓		1
Polindes		✓	0
Administering medication according to the prescription received (individual prescribing)	✓		1
Administering medication according to the prescription received (floor stock)		✓	0
Administer medication according to the prescription received (one daily dose)	✓		1
Administration of medication per dose (dispensing dosis unit)		✓	0
Percentage	**66.7%**	**33.3%**	

Table 6 Observation Results of Drug Destruction and Withdrawal at the Camba Community Health Center UPTD, Maros Regency

Standards for Drug Destruction and Withdrawal at CHCs	Standard Compliance		Point
	Yes	No	
Expired or damaged products are destroyed according to the type and form of the preparation.	✓		1
Withdrawn from circulation, returned to the pharmacy installation accompanied by a return event	✓		1
The withdrawal of medical devices and BMHP is carried out on products whose distribution permits have been revoked by the Minister	✓		1

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Prepare a destruction report and then report it to the district/city health service.	✓		1
Percentage	**100%**	**0%**	

Table 7 Results of Drug Control Observations at the Camba Community Health Center UPTD, Maros Regency

Drug Control Standards in CHCs	Standard Compliance		Point
	Yes	No	
Card stock	✓		1
Recording of lost, damaged and expired drugs	✓		1
Recording the incoming and outgoing medication	✓		1
Carry out optimum stock calculations	✓		1
Performing safety stock calculations (safety stock)	✓		1
Conducting an evaluation of the suitability of drug requests and receipts	✓		1
Judging from the remaining stock and previous usage	✓		1
Percentage	**100%**	**0%**	

Table 8 Results of Observations on Drug Administration at the Camba Community Health Center UPTD, Maros Regency

Standards for Recording and Reporting of Drugs in CHCs	Standard Compliance		Point
	Yes	No	
Record all receipts and dispensing of drugs at the health center.	✓		1
Stock cards are available in the medicine room.	✓		1
A daily summary of medication use is available in the medication room.	✓		1
Each stock card sheet records only one type of drug from one budget source.	✓		1
Each stock card sheet records only one type of drug from one budget source.	✓		1
Report damaged or expired medication	✓		1
Persentase	**100%**	**0%**	

4. CONCLUSION

The conclusion of the research results on drug management at the UPTD Camba Health Center, Maros Regency, in the planning aspect is in the good category with a percentage value of 100%, the drug request aspect is 100% in the good category, the drug receipt aspect is 100% in the good category, the drug storage aspect is 87.5% in the category, the drug distribution aspect is 66.7% in the sufficient category, the drug destruction and withdrawal aspect is 100% in the good category, the drug aspect is 100% in the good category, and the drug aspect is 100% in the good category.

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