

**ANALISIS IMPLEMENTASI MANAJEMEN TERPADU BALITA SAKIT  
TERHADAP KUALITAS PELAYANAN MANAJEMEN TERPADU BALITA  
SAKIT DI PUSKESMAS KOTA PADANG**

UNIVERSITAS ANDALAS

Tesis

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PROGRAM STUDI KESEHATAN MASYARAKAT  
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ANALISIS IMPLEMENTASI MANAJEMEN TERPADU BALITA SAKIT  
TERHADAP KUALITAS PELAYANAN MANAJEMEN TERPADU  
BALITA SAKIT DI PUSKESMAS KOTA PADANG

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**Abstrak**

**Latar Belakang:** Salah satu tujuan pembangunan SDG'S (*Sustainable Development Goals*) tahun 2030 dan Program Nasional Bagi Anak Indonesia (PNBAI) adalah untuk menurunkan angka kematian bayi baru lahir, bayi dan anak balita. Salah satu upaya dalam menurunkan angka kesakitan dan kematian balita yaitu melalui pendekatan Manajemen Terpadu Balita Sakit (MTBS). Tujuan Penelitian ini untuk mengetahui dan menganalisis kualitas pelayanan MTBS di Puskesmas Nanggalo dan Puskesmas Lubuk Buaya.

**Metode:** Penelitian ini merupakan penelitian kualitatif dengan mengkaji aspek komponen input dan Proses. Pengumpulan data pada penelitian ini dilakukan melalui wawancara secara mendalam, observasi dan telaah dokumen.

**Hasil:** Kedisiplinan petugas dalam pengisian formulir MTBS belum optimal, masih terdapat sarana peralatan dan obat-obatan yang tidak tersedia dalam menunjang pelaksanaan MTBS, pendanaan masih terfokus pada pengaduan formulir MTBS, belum ada penilaian dari hasil supervisi. Monev dilakukan pada saat Lokmin dan tidak ada lembar *checklist* untuk Monev, belum tersedia mekanisme *punishment* dan *reward*. Aspek tatalaksana, pemanfaatan kartu nasihat ibu belum optimal digunakan sebagai mekanisme pemberian konseling pada ibu balita, pencatatan dan pelaporan rujukan balita sakit belum optimal dilaksanakan oleh Puskesmas Lubuk Buaya.

**Kesimpulan:** Pelaksanaan MTBS telah diterapkan di Puskesmas Nanggalo dan Lubuk Buaya akan tetapi terdapat aspek kepatuhan, sarana dan prasarana, pendanaan, supervisi, monitoring dan evaluasi, *punishment dan reward*, tatalaksana serta pencatatan dan pelaporan yang implementasinya belum optimal dilaksanakan.

**Kata Kunci :** MTBS, kesakitan balita, implementasi, puskesmas

FACULTY OF PUBLIC HEALTH  
POST GRADUATE PROGRAM OF ANDALAS UNIVERSITY

IMPLEMENTATION ANALYSIS OF INTEGRATED MANAGEMENT OF  
CHILDHOOD ILLNESS (IMCI) ON SERVICE QUALITY OF INTEGRATED  
MANAGEMENT SERVICES OF CHILDHOOD ILLNESS IN PADANG CITY  
PUSKESMAS

By : RIA ANGGRAINI (NIM 1820322005)

Under guidance (Dr. dr.Finny Fitri Yani, Sp.A (K) dan  
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**Abstract**

**Background:** One of the development goals of the SDG'S (Sustainable Development Goals) in 2030 and the National Program for Indonesian Children (PNBAI) is to reduce the mortality rate of newborns, infants and children under five. One of the efforts to reduce the morbidity and mortality rate of children under five is through the Integrated Management of Childhood Illness (IMCI) approach.

**Methods:** This research is a qualitative research with purposive sampling method which was carried out at the Padang City Health Center, namely at the Puskesmas of Nanggalo and Lubuk Buaya. By looking at the system components, namely input and process. Data collection in the study was carried out by conducting in-depth interviews.

**Results:** The discipline of officers in filling out IMCI forms is not optimal, there are still equipment and medicines that are not available to support IMCI implementation, funding is still focused on procuring IMCI forms, and there is no evaluation of the results of supervision. Monev is carried out during the Lokmin, and there is no checklist sheet for Monev, and there is no punishment and reward mechanism available. In the management aspect, the use of mother's advice cards has not been optimally used as a mechanism for providing counselling to mothers under five, the recording and reporting of referrals for sick toddlers has not been optimally carried out by the Lubuk Buaya Health Center.

**Conclusion:** The implementation of IMCI has been implemented in the Nanggalo and Lubuk Buaya Health Centers, but there are aspects of compliance, facilities and infrastructure, funding, supervision, monitoring and evaluation, punishment and reward, management and recording and reporting whose implementation has not been optimal.

**Keywords:** IMCI, toddler morbidity, implementation, puskesmas