Relationship between Allocation of Health Operational Assistance Funds and Achievement of Minimum Service Standards at Regional Technical Implementation Unit Health Centers in Konawe Islands Regency

Kaharuddin, La Ode Saafi, Sartini Risky
Mandala Waluya University, Indonesia
Correspondence: kaharuddin.jabar.skm@gmail.com

ARTICLE INFO

Article history
Received: November 29th, 2023
Revised: December 17th, 2023
Accepted: December 30th, 2023

Keywords
Health Operational Assistance, Minimum Service System.

ABSTRACT

Introduction: Based on data from the Report of the Ladianta Public Health Center, most of the indicators for the health Minimum Service Standards that have been implemented by the Ladianta Public Health Center have not reached the predetermined target of 100% (one hundred percent) such as health of both mother and child. The purpose of this study was to analyze the relationship between the allocation of health operational assistance funds by achieving minimum service standards at Lansilowo Public Health Center and Ladianta Public Health Center in 2022.

Method: This type of research is analytic using a cross sectional approach. The population of this research is 53 people. The statistical analysis of the results used is the chi square test.

Result: The results of the study showed that there was a relationship between the allocation of health operational assistance funds by achieving minimum service standards for maternal and child health, health promotion, environmental health, nutrition and immunization at the Lansilowo Public Health Center and Ladianta Public Health Center in 2022.

Conclusion: Public Health Centers should further improve communication between leaders as budget managers and program holders, so that in managing the health operational assistance budget, the performance of health services for the community will increase.
Law Number 36 of 2009 articles 4 and 5 also states that everyone has the right to the same rights in obtaining access to resources in the health sector, the right to obtain safe, quality, affordable health services and each person has the right to independently and responsibly determine for himself the health services needed for himself. For this reason, comprehensive health development is carried out in order to realize the highest degree of public health (Ministry of Health of the Republic of Indonesia, 2011).

One form of implementing MSS in the health sector within the government is the application of MSS to basic health services organized by the Public Health Center as the first-level health facility unit of the regency/city regional government with the target of achieving local government performance in fulfilling the quality of service for each type of basic service in health MSS. 100% (one hundred percent) (Law No. 4 of 2019).

According to the data from the Lansilowo Public Health Center Health Center Minimum Service System report, it can be explained that most of the indicators for the health Minimum Service System that have been implemented by the Lansilowo Health Center have not reached the predetermined target of 100% (one hundred percent), even though from 2020 to 2021 there will be an increase in target achievement, but these achievements are still not in accordance with the target. Furthermore, in 2021, several performance indicators for MSS in the health sector are still below 100%, namely Mother and Child Health (MCH) have not reached the target set as in the last month of 2021 the KN2 targets achieved 119 while the achievements were only 105, health promotion in 2021 goals and achievements of the specified targets, Environmental Health based on 876 targets while the achievements are 445 of these, indicating that all have not reached the target of 100% of Environmental health activities during 2021, Nutrition based on the target of 278 while the achievements are only 250 this indicates not having reached targets, and immunizations such as: HB0, BCG, Polio 1, get 1, Polio 2, DPT 2, Polio 3, DPT 4, IPV, and Measles the target is 60 while the achievements are only 28, indicating that the target has not been reached.

Based on data from the Report of Ladianta Public Health Center that most of the indicators for the health Minimum Service System that have been implemented by the Ladianta Health Center have not reached the predetermined target of 100% (one hundred percent) such as MCH. Based on the data it shows that out of 127 pregnant women there are 0 pregnant women who are at risk 83 pregnant women were treated, 68 were live births, 0 were based on estimates of high risk/complication neonatal and 83 high risk/complicated neonatal treated. The Service Technical Implementation Unit Ladianta Health Center routinely conducts clean and healthy living behavior surveys every year to assess community behavior in relation to health problems. The assessment is carried out using 10 indicators of clean and healthy living behavior. The results of the assessment of each indicator are used to determine the classification of each household: Environmental Health, Nutrition and Immunization Coverage of DPT, HB - I, DPT HB - II and DPT HB - III. Based on the Village Working Area of the Public Health Center December 2021.

**Method**

This type of research is analytic using a cross sectional approach. The population of this research is the population of this research is all the staff of the Lansilowo Public Health Center, totaling 30 staff Ladianta Public Health Center totaled 30 people. The sample is 53 people. The statistical analysis of the results used is the chi square test.

**Result**

Table 1 showed that the results of the Chi-square statistical test, the value of $p = 0.001 < \alpha = 0.05$ and $X^2$ count is greater than $X^2$ table $(8.897 > 3.841)$ then $H_a$ is accepted and $H_0$ is rejected, the phi coefficient is 0.410.

Table 2 showed that the results of the Chi-square statistical test, the value of $p = 0.001 < \alpha = 0.05$ and $X^2$ count is greater than $X^2$ table $(7.300 > 3.841)$ then $H_a$ is accepted and $H_0$ is rejected, the phi coefficient is 0.371.
Table 3 showed that the results of the Chi-square statistical test, the value of $p = 0.001 < a = 0.05$ and $X^2$ count is greater than $X^2$ table (8.433 > 3.841) then $H_a$ is accepted and $H_0$ is rejected, the phi coefficient is 0.399.

Table 4 showed that the results of the Chi-square statistical test, the value of $p = 0.001 < a = 0.05$ and $X^2$ count is greater than $X^2$ table (6.273 > 3.841) then $H_a$ is accepted and $H_0$ is rejected, the phi coefficient is 0.344.

Table 5 showed that the results of the Chi-square statistical test, the value of $p = 0.001 < a = 0.05$ and $X^2$ count is greater than $X^2$ table (6.273 > 3.841) then $H_a$ is accepted and $H_0$ is rejected, the phi coefficient is 0.344.

### Table 1

<table>
<thead>
<tr>
<th>Allocation of Health Operational Assistance Health Promotion Funds</th>
<th>Achievement of Minimum Service System Standards</th>
<th>Amount</th>
<th>Statistic Test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Not achieved</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Achieved</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$n$</td>
<td></td>
<td>$n$</td>
</tr>
<tr>
<td>Not enough</td>
<td>28</td>
<td>52.8</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>$X^2$ count = 8.897</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$X^2$ table = 3.841</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$phi$ = 0.410</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Table 2

<table>
<thead>
<tr>
<th>Allocation of Health Operational Assistance Environmental Health Funds</th>
<th>Achievement of Minimum Service System Standards</th>
<th>Amount</th>
<th>Statistic Test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Not achieved</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Achieved</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$n$</td>
<td></td>
<td>$n$</td>
</tr>
<tr>
<td>Not enough</td>
<td>24</td>
<td>45.3</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>$X^2$ count = 7.300</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$X^2$ table = 3.841</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$phi$ = 0.371</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Table 3

<table>
<thead>
<tr>
<th>Allocation of Health Operational Assistance Health of Both Mother and Child Funds</th>
<th>Achievement of Minimum Service System Standards</th>
<th>Amount</th>
<th>Statistic Test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Not achieved</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Achieved</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$n$</td>
<td></td>
<td>$n$</td>
</tr>
<tr>
<td>Not enough</td>
<td>21</td>
<td>39.6</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>$X^2$ count = 8.433</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$X^2$ table = 3.841</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$phi$ = 0.399</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Kaharuddin et al. (Relationship between Allocation of Health Operational Assistance Funds and Achievement of Minimum Service Standards at Regional Technical Implementation Unit Health Centers in Konawe Islands Regency)
Table 4.
Analysis of the Relationship between Allocation of Health Operational Assistance Nutrition Funds with the Achievement of Minimum Service System Standards

<table>
<thead>
<tr>
<th>Allocation of Health Operational Assistance Nutrition Funds</th>
<th>Achievement of Minimum Service System Standards</th>
<th>Amount</th>
<th>Statistic Test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Not achieved</td>
<td>Achieved</td>
<td></td>
</tr>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Not enough</td>
<td>22</td>
<td>41.5</td>
<td>8</td>
</tr>
<tr>
<td>Enough</td>
<td>9</td>
<td>17.0</td>
<td>14</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>58.5</td>
<td>22</td>
</tr>
</tbody>
</table>

\[ \chi^2 \text{count} = 6.273 \]

\[ \chi^2 \text{table} = 3.841 \]

\[ \phi = 0.344 \]

Table 5.
Analysis of the Relationship between Allocation of Health Operational Assistance Immunization Funds with the Achievement of Minimum Service System Standards

<table>
<thead>
<tr>
<th>Allocation of Health Operational Assistance Immunization Funds</th>
<th>Achievement of Minimum Service System Standards</th>
<th>Amount</th>
<th>Statistic Test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Not achieved</td>
<td>Achieved</td>
<td></td>
</tr>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Not enough</td>
<td>22</td>
<td>41.5</td>
<td>8</td>
</tr>
<tr>
<td>Enough</td>
<td>9</td>
<td>17.0</td>
<td>14</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>58.5</td>
<td>22</td>
</tr>
</tbody>
</table>

\[ \chi^2 \text{count} = 8.433 \]

\[ \chi^2 \text{table} = 3.841 \]

\[ \phi = 0.399 \]

Discussion

Relation to the Allocation of Health Operational Assistance Funds by Achieving Minimum Health Service Standards for Health Promotion

Based on the results of the Chi-square statistical test, the value of \( p = 0.001 < \alpha = 0.05 \) and \( \chi^2 \text{count} \) is greater than \( \chi^2 \text{table} \) (8.897 > 3.841 ) then \( H_a \) is accepted and \( H_0 \) is rejected, the phi coefficient is 0.410 which means the relationship is quite strong. Thus it can be concluded that there is a fairly strong relationship between the allocation of health operational assistance funds by achieving minimum health service standards for Health Promotion in the Lansilowo Public Health Center and the Ladianta Public Health Center.

Promotive effort is a health service activity that prioritizes health promotion activities provide direct awareness to the public in order to live a healthy life, for example, such as counseling 3M plus in areas prone to DHF, nutrition counseling for pregnant and lactating women. Meanwhile, preventive efforts are activities to prevent a health/disease problem in the environment and community, for example immunization of children before they occur polio disease.

Relation to the Allocation of Health Operational Assistance Funds by Achieving Minimum Environmental Health Service Standards

Based on the results of the Chi-square statistical test, the value of \( p = 0.001 < \alpha = 0.05 \) and \( \chi^2 \text{count} \) is greater than \( \chi^2 \text{table} \) (7.300 > 3.841 ) then \( H_a \) is accepted and \( H_0 \) is rejected, the phi coefficient is 0.371 which means a moderate relationship. Thus it can be concluded that there is a moderate relationship between the allocation of health operational assistance funds with the achievement of minimum environmental health service standards in the Lansilowo Health Center and the Ladianta Health Center.

This did not happen in the district, especially in our Public Health Center, in fact it was the funds Regional Revenue and Expenditure Budget and Health Operational Assistance may not double financing an activity, meaning funds activities that have been funded by the APBD may not be funded by the Health Operational Assistance, and the same is true on the contrary. In addition, Health Operational Assistance funds according to their function are still allocated to each activity that increase the achievement of MSS.
and MDGs, for example decreasing maternal and infant mortality rates, community nutrition improvement, etc. Environmental health program namely vaporization of water, home visits health, outreach, counselling, etc.

**Relation to the Allocation of Health Operational Assistance Funds by Achieving Minimum Service Standards for Maternal and Child Health**

Based on the results of the Chi-square statistical test, the value of $p = 0.001 < \alpha = 0.05$ and $X^2$ count is greater than $X^2$ table ($6.273 > 3.841$) then $H_a$ is accepted and $H_0$ is rejected, the phi coefficient is 0.399 which means a moderate relationship. Thus it can be concluded that there is a moderate relationship between the allocation of health operational assistance funds by achieving minimum service standards for maternal and child health.

For the Health of Both Mother and Child program milk for pregnant women, provision of vitamin A capsules for toddlers, etc. When the uptake of utilization of funds reaches a standard of 90%, and compared straight with an increase in program achievement based on the activity ready implemented.

**Relation to the Allocation of Health Operational Assistance Funds by Achieving the Minimum Nutrition Service Standards**

Based on the results of the Chi-square statistical test, the value of $p = 0.001 < \alpha = 0.05$ and $X^2$ count is greater than $X^2$ table ($6.273 > 3.841$) then $H_a$ is accepted and $H_0$ is rejected, the phi coefficient is 0.344 which means a moderate relationship. Thus it can be concluded that there is a moderate relationship between the allocation of health operational assistance funds by achieving Minimum Nutrition service standards in the Lansilowo Health Center and the Ladianta Health Center.

For the Health of Both Mother and Child program milk for pregnant women, provision of vitamin A capsules for toddlers, etc. When the uptake of utilization of funds reaches a standard of 90%, and compared straight with an increase in program achievement based on the activity ready implemented.

**Conclusion**

Based on the research results show that there is strong relationship between allocation of health operational assistance funds by achieving minimum service standards for Health Promotion, maternal and child health, Environmental Health, Nutrition and Immunization at the Lansilowo Public Health Center and the Ladianta Public Health Center in 2022.

**Reference**


5. Konawe Islands City Health Office, 2020, *Konawe Islands Health Profile*.


