



## **A Public Health Centre as Means of Preventive Health Service Facility**

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### **Abstract**

*This article discusses a public health centre, which is a health service facility that organizes public health efforts and first-level individual health efforts, with a greater emphasis on promotive and preventive efforts, to achieve the highest public health status in its working area. The purpose of PKPA in Puskesmas is to increase the understanding of prospective pharmacists about the roles, functions, positions and responsibilities of pharmacists in pharmaceutical services, equip prospective pharmacists to have insight, knowledge, skills and practical experience to do pharmaceutical work, provide opportunities for prospective pharmacists to see and learn strategies and activities that can be carried out in the context of developing pharmaceutical practice, preparing prospective pharmacists to enter the world of work as professional pharmaceutical personnel, and providing a real picture of the problems of pharmaceutical work.*

## **Introduction**

In this era of globalization, the Indonesian people are increasingly aware of the importance of health (Hartini et al., 2018; Kurniawati & Savitri, 2019). They are increasingly aware because with a healthy body they can support the Indonesian people to a better standard of living. Health according to the Government rules state of health both physically, mentally, spiritually and socially which enables everyone to live productively socially and economically. It is through this definition that health itself is very important to note. Seeing the increased awareness of healthy living from the community has an impact on the increasing need for health services for the community (Rowe et al., 2018). The increasing need for health services has ultimately prompted the government to provide a unit or facility capable of serving the public in the health sector (Stacey, 2006). There are various kinds of facilities provided by the government to support public health, one of which is the Community Health Centre.

Public Health Centre (PUSKESMAS) according to Permenkes RI No. 74 of 2016 is a technical implementation unit of the district / city health office which is responsible for carrying out health development in a work area. Puskesmas is the first level health service and is the foremost in the health service system. It must provide compulsory health services and several selected health efforts that are tailored to the conditions, needs, demands, capabilities and innovations as well as local government policies (Satinsky et al., 2019). In addition, the puskesmas also has a duty to increase public awareness and healthy living behaviour as well as maintain a healthy environment by providing quality services (Darwis, 2019). Puskesmas is a health service facility that provides education on public health efforts to maintain and improve public health and prevent and overcome health problems in the community (Liu et al., 2020).

One of the health services at the Puskesmas is pharmaceutical services. Pharmaceutical services are services to patients related to pharmaceutical preparations, in the form of drugs, consumables, and medical devices, which can improve the quality of life of patients. Pharmaceutical services provided at the Puskesmas must meet the standard of pharmaceutical services as stipulated by the Minister of Health of the Republic of Indonesia (Larasanty et al., 2019). Pharmaceutical service standards at the Puskesmas include management of drugs and consumables and clinical pharmacy services. Pharmaceutical services are carried out by pharmacists and pharmaceutical personnel, with the pharmacist in charge (Menkes RI, 2014). The role of pharmacists as a profession that is responsible for providing health services is a lesson for prospective pharmacists in understanding the roles, functions and responsibilities of professionalism as pharmacists. As stated in PP. 51 of 2009 concerning pharmaceutical work states that drug delivery and services are based on a doctor's prescription and are carried out by pharmacists. A pharmacist must be able to work reliably and have a professional attitude so that self-readiness is needed in the form of knowledge in accordance with the responsibilities to be able to adapt to the world of work (Putro et al., 2019).

The Halu Oleo University Pharmacist Professional Study Program, Kendari collaborates with the Kemaraya Health Centre by holding Pharmacist Professional Work Practices (PKPA) on July 1 - July 12, 2019 so that prospective pharmacist students can apply knowledge, train themselves and understand services at the Puskesmas with supervision from authorized party (Gorton et al., 2019). Through practical work at the Puskesmas, prospective pharmacists are expected to understand the management and administration aspects of drug management, distribution aspects of pharmaceutical preparations, examination and recording of incoming and outgoing drugs, and evaluation (audit of pharmaceutical preparations, management SOPs, finance, distribution SOPs, and consumer satisfaction surveys) (Clauson et al., 2019).

## **Discussion**

Public Health Centre is a health service facility that organizes public health efforts and first-level individual health efforts, with a greater priority on promotive and preventive efforts, to achieve the highest public health status in its working area (Permenkes, 2014). Pharmaceutical Service Standards are benchmarks that are used as guidelines for pharmaceutical personnel in providing pharmaceutical services. Pharmaceutical service is a direct and responsible service to patients related to pharmaceutical preparations with the aim of achieving definite results to improve the quality of life of patients (Permenkes, 2016).

In order for the Public Health Centre to manage health efforts properly and sustainably in achieving its goals, the Public Health Centre must compile an activity plan for a period of 5 (five) years which will then be further detailed into the Public Health Centre annual plan according to the regional budget planning cycle. All activity plans, both 5 (five) years and annual plans, apart from referring to district / city health development policies, must also be prepared based on the results of an analysis of the current situation (evidence based) and future predictions that may occur. The next process is the mobilization and implementation of activities in accordance with the activity / program plans that are compiled, then supervising and controlling followed by corrective action and ending with the implementation of an assessment of the results of activities through performance appraisal of Public Health Center (Permenkes, 2016). Improving the performance of basic health services at Puskesmas is carried out in line with the development of existing policies in various sectors. The existence of regional autonomy and decentralization policies was also followed by the strengthening of regional authority in making various policies. So far, the implementation and implementation

of health efforts in the basic policies of existing Puskesmas varies greatly from region to region, but as a whole has not shown optimal results (Permenkes, 2014).

Pharmaceutical services at Public Health Centre are an integral part of the implementation of health efforts, which play an important role in improving the quality of health services for the community. Pharmaceutical services at the Puskesmas must support three main functions of the Puskesmas, namely as a centre for driving development with a health perspective, a community empowerment centre, and a first-tier health service centre which includes individual health services and community health services (Permenkes, 2014). In order to fulfil health services that are based on the needs and conditions of the community, Puskesmas can be categorized based on the characteristics of the work area and the ability to provide services (Permenkes No.75, 2014):

### **Urban Public Health Centre**

Urban area Public Health Centre as referred to in Article 21 letter a is a Puskesmas whose working area includes an area that meets at least 3 (three) of 4 (four) criteria for urban areas as follows; (1) Activities of more than 50% (fifty percent) of the population are in the non-agricultural sector, especially industry, trade and services; (2) Has urban facilities, including schools with a radius of 2.5 km, a market with a radius of 2 km, a hospital with a radius of less than 5 km, a cinema, or a hotel; (3) More than 90% (ninety percent) of households have electricity; (4) There is road access and transportation to urban facilities as referred to in letter b. The implementation of Health Services by Puskesmas in urban areas has characteristics such as prioritizing SME services, serving SMEs carried out by involving community participation and UKP services carried out by Puskesmas and health service facilities organized by the government or the community.

### **Public Health Centre in Rural Areas**

Public Health Centre in rural areas as referred to in Article 21 letter b is a Puskesmas whose working area includes areas that meet at least 3 (three) of 4 (four) criteria for rural areas, namely activities of more than 50% (fifty percent) of the population in the agricultural sector, have facilities include schools with a radius of more than 2.5 km, markets and cities with a radius of more than 2 km, a hospital with a radius of more than 5 km, no facilities in the form of cinemas or hotels, households with less than 90% electricity and access to roads and transportation to the facilities as referred to in letter b.

The implementation of health services by Puskesmas in rural areas has characteristics such as SME services carried out by involving community participation, UKP services carried out by public health and health service facilities organized by the community, optimization and enhancement of the capacity of the Puskesmas service network and health service facility network and service approaches provided are adjusted with the pattern of rural community life (Cheng, 2005).

Public Health Centre in remote and very remote areas as referred to in Article 21 letter care Public Health Centre whose working areas include areas with characteristics of being in areas that are difficult to reach or prone to disasters, small islands, island clusters, or coastal areas, access to routine public transportation once a week, the round-trip distance from the district capital takes more than 6 hours, and the available transportation can be hindered by climate or weather, difficulty in fulfilling basic commodities and unstable security conditions, the provision of health services by Puskesmas in remote and very remote areas has the following

characteristics as well as providing UKM and UKP services with the addition of competence of health workers.

### **Job and Function**

Carrying out basic health services in a comprehensive, sustainable and quality manner, organizing health services that prioritize promotive and preventive efforts, organizing health services that are oriented towards individuals, family groups and the community, organizing health services that prioritize the safety and security of patients, officers and visitors, organizing health services with the principle of coordination and cooperation between and between professions, carrying out medical records, carrying out recording, reporting, and evaluating the quality and access of Health Services, enhancing the competence of Health Workers and coordinating and carrying out fostering of first-level health service facilities in their working areas as well as carrying out referral screening according to with medical indications and a referral system (Permenkes, 2016).

### **Duties and Responsibilities of Pharmacists**

Pharmaceutical service is a direct and responsible service to patients related to pharmaceutical preparations with the aim of achieving definite results to improve the quality of life of patients (Engström, 2020). A pharmacist is a bachelor of pharmacy who has graduated as a pharmacist and has taken the oath of position as a pharmacist (Permenkes, 2014). Pharmaceutical Technical Personnel are personnel who assist Pharmacists in carrying out Pharmaceutical Work, consisting of Bachelor of Pharmacy, Associate Pharmacy, Pharmacy Analyst, and Pharmacy Intermediate / Assistant Pharmacist (Permenkes, 2014). Medicine is a material or combination of materials, including biological products that are used to influence or investigate physiological systems or pathological conditions in the context of determining diagnosis, prevention, cure, recovery, health improvement and contraception, for humans (Permenkes, 2014). Medical Consumables are medical devices intended for single use, whose product list is regulated in statutory regulations (Permenkes, 2016).

The Head of the Pharmacy Room at the Puskesmas has the duty and responsibility to ensure the proper management of Medicines and Consumables. Drug management activities and consumable medical materials include (Permenkes, 2016), namely planning the need for Drugs and Consumable Medical Materials, which is a process of selecting Drugs and Consumable Medical Materials to determine the type and amount of Drugs in order to meet the needs of the Puskesmas. The purpose of planning is to obtain an estimate of the type and amount of Drugs and Medical Consumables that are close to the need, to increase rational use of Medicines, to increase the efficiency of the use of Medicines.

Planning for the need for Drugs and Medical Consumables at the Puskesmas for each period is carried out by the Pharmacy Room at the Puskesmas. The selection process for Drugs and Medical Consumables is carried out by considering disease patterns, drug consumption patterns in the previous period, drug mutation data, and development plans. The selection process for Drugs and Medical Consumables must also refer to the National List of Essential Medicines (NLEM) and the National Formulary. This selection process must involve health workers at the Puskesmas such as doctors, dentists, midwives and nurses, as well as program managers related to treatment.

The planning process for drug needs per year is carried out in stages (bottom-up). Puskesmas are asked to provide data on drug use using a Drug Usage Report and Request Sheet (LPPO) (PERMENKES, 2014). Subsequently, the Regency / City Pharmacy Installation will compile and analyse the need for Puskesmas drugs in its working area, adjust to the available budget and take into account drug vacancies, buffer stock, and avoid excess stock.

### **Acceptance and Request for Drugs and Medical Consumables.**

The purpose of requesting Drugs and Medical Consumables is to meet the needs of Drugs and Medical Consumables at the Puskesmas, according to the planning needs that have been made. Requests are submitted to the District / City Health Office, in accordance with the provisions of laws and regulations and local government policies.

Acceptance of Drugs and Consumable Medical Materials is an activity in receiving Drugs and Consumable Medical Materials from the Regency / Municipal Pharmacy Installation in accordance with the requests that have been submitted. The goal is that the drugs received are in accordance with the needs based on requests submitted by the Puskesmas. All officers involved in management activities are responsible for orderly storage, transfer, maintenance and use of Drugs and Consumable Medical Materials and accompanying notes. The admissions officer is obliged to check the Drugs and Consumable Medical Materials submitted, including the number of packages / boxes, the type and quantity of drugs, the form of the drug according to the contents of the document (LPPO), signed by the receiving officer, and acknowledged by the Head of the Puskesmas. If it does not meet the requirements, the receiving officer can file an objection. The minimum expiration period of the received Medicine is adjusted to the management period at the Puskesmas plus one month.

### **Storage and Distribution of Drugs and Medical Consumables.**

Storage of Drugs and Consumable Medical Materials is an activity to regulate received Drugs so that they are safe (not lost), protected from physical and chemical damage and their quality is guaranteed, in accordance with stipulated requirements. The aim is that the quality of drugs available at the health centre can be maintained in accordance with the stipulated requirements (Weaver, 2021).

The distribution of Drugs and Consumable Medical Materials is an activity of dispensing and delivering Medicines and Consumables evenly and regularly to meet the needs of the sub-unit / satellite pharmacy of the Puskesmas and its network. The aim is to meet the need for drugs in the health service sub-unit in the working area of the Puskesmas with the right type, quality, quantity and time. The sub-units in the Puskesmas and their networks include, among others, the sub-units of health services within the puskesmas, auxiliary puskesmas, mobile puskesmas, post integrated service and polindes. Distribution to sub-units (inpatient rooms, emergency room, etc.) is carried out by administering drugs according to the received prescription (floor stock), administering drugs per one drink (dispensing unit dose) or combination, while distribution to the Puskesmas network how to deliver drugs according to need (floor stock).

### **Control of Drugs and Medical Consumables**

Control of Drugs and Consumable Medical Materials is an activity to ensure the achievement of the desired targets in accordance with the predetermined strategies and programs so that there is no excess and deficiency / lack of drugs in the basic health service unit. The goal is to prevent excess and empty drugs in the basic health service unit. Drug Control consists of controlling inventory, controlling the use and handling of lost, damaged, and expired drugs (Ventola, 2011).

### **Recording, reporting and archiving**

Recording, reporting, and archiving are a series of activities in order to manage Drugs and Medical Consumables in an orderly manner, both Medicines and Consumables that are received, stored, distributed and used at the Puskesmas or other service units. The purpose of recording, reporting and archiving is evidence that the management of Drugs and Medical

Consumables has been carried out, data sources for managing and controlling and data sources for reporting (Ogada, 2020).

### **Monitoring and evaluation of the management of Drugs and Medical Consumables**

Monitoring and evaluation of the management of Drugs and Consumable Medical Materials is carried out periodically with the aim of controlling and avoiding mistakes in the management of Drugs and Consumable Medical Materials so that they can maintain the quality and equal distribution of services, continuously improve the management of Drugs and Consumable Medical Materials and provide an assessment of the achievement of management performance.

### **Planning and Supplier Selection, Evaluation and Revaluation (ISO 9001: 2000)**

The drug procurement planning system is planned by itself in terms of last year's remaining medicines (involving all doctors, pharmacists, pharmacist assistants in sub-district and sub-district puskesmas). The source of the budget is from the Regional Budget (APBD) and BLUD funds as a reserve in the event of a shortage of drugs than budgeted for. The method of planning goods is carried out by the consumptive method with the data used are the number of drug use in one year and the drug stock. Planning includes the process of selecting and evaluating suppliers. What is meant by selection here is a process of searching or selecting to get the best supplier. Meanwhile, evaluation is the process of assessing the performance of suppliers who are invited to cooperate. Revaluation is an assessment or periodic review, a maximum of once a year. The system used here is an open auction. The process of procurement of goods is carried out by the goods procurement officer. The officer for the procurement of goods is appointed by the head of the public health centre. (Padmanaban, 2009). Collect the required items from each unit needed for the operation of the health centre services (Scott, 2019).

### **Receipt and Storage of Goods (ISO 9001: 2000)**

Receipt and storage of pharmaceutical goods (materials) or supplies aims to ensure that pharmaceutical goods or supplies received comply with the provisions or documents stipulated by the procurement department and ensure the quality of pharmaceutical supplies during the storage process. Receipt and storage of Public Health materials is described in the quality procedures for receiving and storing materials. In this case, materials are materials or goods used for the operation of Puskesmas services (Yasin, 2020). The implementation procedure includes; 1) Information on the plan for material arrival, the procurement department informs the planned arrival of the materials purchased to the person in charge of the warehouse. In this case, the person in charge of the warehouse is held by the pharmacist; 2) Material receipt, material is received directly by the person in charge of the warehouse who is a pharmacist (pharmacist) (Fabregat Corominas, 2010). The procedure for receiving materials includes the person in charge of the warehouse receiving materials in accordance with the travel documents and purchase orders, the person in charge of the warehouse to check the quality and quantity of materials according to the travel documents, the person in charge of the warehouse informs the procurement department and returns to the supplier if the materials sent are not suitable with a travel certificate and purchase order, the person in charge of the warehouse makes proof of receipt of goods if the checked material is in accordance with the purchase specifications, the documents involved in the receiving process are a pass and a list of material receipt. All documents on the activity of receiving the material are documented (complete drug receipt archive and there is a stamp and receipt).

## Material distribution

Distribution is the activity of distributing goods or materials needed for operations according to the needs of each family unit or community health centre. The distribution of materials aims to meet the needs of each unit of the puskesmas and puskesmas in the village (Seuring, 2019). The distribution of materials is carried out by the person in charge of the warehouse to the sub-district or to the relevant policeman. Where, the distribution of materials to urban villages is carried out every two months. Drug dispensing is carried out with the FEFO (First Expired First Out) system. The distribution procedure includes the process of distributing materials from large sub-district warehouses to each sub-district unit and community health center (Leslie, 2020).

## Recording and Reporting

Documents included in the recording and reporting section are stock cards, usage reports and drug request sheets (LPPO), and reports on the use of narcotics and psychotropic substances. The stock card is placed near the drug (in a pharmacy cabinet). Columns to be filled in the stock card include date, amount of addition (remaining stock), total expenditure, name of issuing facility, remaining inventory, origin of drug factory, no. batch, and expires. Stock cards are made for each drug. Reports on the use of narcotics and psychotropic substances are sent directly to the office every month, but not later than the 10th of the following month. Clinical pharmacy services are part of Pharmaceutical Services that are direct and responsible to patients with regard to Drugs and Medical Consumables with the aim of achieving definite results to improve the patient's quality of life (Wal, 2013).

## Conclusion

Health Centre has met health service standards according to Public Health 74 of 2016. In terms of pharmacy services, the Kemaraya health centre pharmacy is carried out by a pharmacist. Providing prescriptions by pharmacists where the pharmacist provides Drug Information Services to patients, if possible, the pharmacist can also provide counselling to certain patients. Public Health has an organized organizational structure and has a vision and mission that prioritizes public health. Public Health has several work programs, including post integrated service, counselling and clinic for the elderly. Where the program is carried out in order to improve the patient's quality of life.

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