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**ANALISIS IMPLEMENTASI STANDAR PELAYANAN MINIMUM (SPM) PESERTA
AKTIF KB (CONTRCETIVE PREVALENCE RATE/CPR) DI KECAMATAN
SANGIR KABUPATEN SOLOK SELATAN TAHUN 2012**

xviii+112 halaman, 35 Tabel, 2 gambar, 12 lampiran

Abstrak

Pelayanan KB merupakan salah bentuk Pelayanan Kesehatan Reproduksi Esensial (PKRE) dan perlumen dapatkan perhatian yang serius, karenad engan mutu pelayanan KB berkualitas diharapkan akan dapat meningkatkan tingkat kesehatan dan kesejahteraan. Tujuan penelitian ini adalah untuk mengetahui implementasi kebijakan SPM yang meliputi input, proses, output dalam pencapaian cakupan peserta aktif KB di kecamatan Sangir.

Penelitian in imenggambarkan dan menganalisa proses manajemen KB dengan pendekatan sistem, mulai dari input yang meliputi dana, Sumber DayaManuasia (SDM),petunjuktekis (juknis), kemudian proses meliputi perencanaan, pengorganisasi, pelaksanaan dan pengendalian serta output yang meliputi pencapaian peserta aktif. Data penelitian ini didapatkan melalui observasi, telaah dokumen, wawancara mendalam dengan pengelola KB yang ada di KabupatenSolok Selatan, kemudian hasil penelitiannya di sajikan dalam bentuk narasi.

Pada penelitian ini didapatkan bahwa sumber dana kegiatan KB ini berasal dari APBD Solok Selatan, tidak ada bantuan/hibah pihak lain, sehingga mengakibatkan kurang sinkron langkah kegiatan CPR dengan pendanaan yang ada. Untuk SDM kuantitas dan kualitasnya masih kurang sehingga pengelola KB masih belum optimal dan professional dalam menjalankan tugas. Ketersediaan juknis di kecamatan Sangir juga masih terbatas sehingga pelaksanaannya belum sesuai dengan juknis SPM.Perencanaan KB berdasarkan arah kebijakan yang ada pada Rencana Pembangunan Jangka Menengah Daerah tahun 2010-2015 diimplementasikan pada rencana kerja KB. Pengorganisasian menyangkut kelembagaan KB, lintas sektor, dan SDM. Pada penelitian ini didapatkan bahwa ketiga unsur ini masih kurang koordinasi dan sosialisasi dalam memberikan pelayanan KB. Pelaksanaan kegiatan untuk pencapaian CPR menurut SPM masih rendah .Monitoring danevaluasi (monev) dilakukansekalisebulan dengan melakukan penilaian terhadap aspek layanan KB serta aspek sarana dan prasarana di setiap puskesmas. Pencapaian peserta aktif KB di kecamatan Sangir masih rendah.

Dari penelitian ini dapat kita ambil kesimpulan bahwa kurangnya ketersediaan dana, kualitas dan kuantitas SDM yang rendah, kurangnya pemahaman terhadap juknis, perencanaan yang belum sesuai dengan langkah kegiatan SPM, belum ada unit UPTD, pelaksanaan pelayanan KB secara lintas sektor belum optimal dan kurang koordinasi, pengendalian monev belum melibatkan lintas sektor, serta rendahnya pencapaian target CPR.Untuk mencapai target CPR maka perlu penambahan anggaran yang signifikan dari APBD untuk membiyai kegaiatan KB, meningkatkan kualitas SDM dengan memberikan pelatihan, menambah jumlah PLKB sebanyak 3 orang lagi, adanya perencanaan kegiatan KB sesuai SPM CPR, mengoptimalkan pemahaman lintas sektor, monev yang bersifat lintas sektor serta meningkatkan komunikasi, inforamasi dan edukasi kepada PUS .

DaftarBacaan : 33 (1996-2013)

Kata Kunci :Implementasi SPM, peserta aktif KB, Pencapaian Peserta Aktif KB

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**Analalysis Implemantazion of Standar Service Minimum Contraceptive Prevalence Rate In Sangir Village Region South Solok Year 2012
xviii+112, 35 tables, 2 Graph, 12 attachments**

Abstract

Family Planning services is one from of Essential Reproductive Health Services and need serious attention, because the quality of family planning service is expected to improve the health and wellbeing.

This research describes and analyzes the process of with the family planning management systems approach, starting from the input which includes funding, human resources, technical guidance, then the process includes planning, organizing, actuating, controlling, as well as output which include the achievement of active participants. This research data obtained through observation, review of documents, in-depth interview with exiting family planning manager in South Solok Regency and then the results of the research presented in the form of narrative.

In the resource of funding family planning activities is derived from the budged of South Solok, no help/grant other parties, there by resulting in less synchronous step CPR activities with exiting funding. For the quantity and quality of human resources are lacking so that manages family planning still not optimal and professional in carrying out task. Availability of technical guidance in Sangir distric also still limited so that its implementation is not accordance with the minimum service standard. In understanding guidelines by managing workforce family planning are still low, because there is no socialization.Planning of family planning based on exiting policy direction on the Medium Term Development Plan for year 2010-2015 work plan is implemented of family planning. Organizing related to family planning, cross sector and human resources. In this research it was found that third elements are still lacking coordination and socialization in providing family planning services. Implementation activities for the achievement of CPR according to the minimum service standards are still low. Monitoring and evaluation is done once a month to conduct an assessment of the aspects of family planning services and infrastructure aspects in each health center. Achievement of an active participant in the district family planning Sangir still low.

From this study we can take the conclusion that the lack of availability of funds, the quality and quantity of human resources are low, a lack of understanding of the technical guidelines, planning activities not in accordance with the steps of minimum service standards, there is no technical implementation unit office units, the implementation of family planning services across sectors is not optimal, control monitoring and evaluation not involving cross-sector, and the low achievement of CPR. To achieve the target of CPR it needs a significant budget increase of budget revenues to fund kegiaitan family planning, improve the quality of human resources, increase quantity by increasing the number of field staff for 3 person family planning, family planning activities of planning appropriate minimum service standards, optimize cross-sector understanding, monitoring and evaluation of cross-sector and to improve communication, inforamasi and education to couples of childbearing age.

The reading List : 33 (1996-2013)

Keywords : Implementation, Contraceptive Prevalenci Rate, achieving CPR Villages