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Policy Evaluation Of Minimum Service Standards For Hypertension Health Services At Mabelopura Health Center

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ABSTRACT

Hypertension is a chronic medical condition in which arterial blood pressure increases, causing the heart to work harder. At Puskesmas Mabelopura, hypertension has not yet reached the Minimum Service Standard (MSS) target with an achievement of only 68.61% of the 95% target. This study evaluated the SPM policy on hypertension services at the Mabelopura Health Center using a descriptive qualitative method with informants from Key Informants and Triangulated Informants. The results showed that the implementation of SPM Hypertension only reached 68.61% of the 95% target, indicating that the target has not been achieved. Health services are in accordance with SPM standards but not optimal, due to differences in central target data with Puskesmas data and limited human resources. The low number of community visits for hypertension screening, due to the community's lack of perceived importance of routine control, was also a major factor. This study concluded that to achieve SPM targets, intensive efforts are needed from Puskesmas Mabelopura and the Health Office of Palu City to establish better communication with Pusdasten and increase community awareness of the importance of routine check-ups. Thus, it is expected that Puskesmas Mabelopura can be more effective in achieving SPM targets and improving the quality of life of people with hypertension in the area.

Keywords: Evaluation; Hypertension MSS; Policy

INTRODUCTION

Public policy plays a central role in state administration, because through this policy the government can achieve development goals and public welfare. Government performance is often assessed based on the quality of policies produced. Effective, relevant, and targeted policies reflect a quality government that is committed to the progress of the people. A structured and systematic policy process, from problem identification, formulation, adoption, implementation, to evaluation, is crucial to ensure that policies are able to respond to existing problems and meet the needs of the community. Problem identification is an important first step where the government must be able to recognize issues that require policy intervention. At the formulation stage, the government designs policies by considering various alternative solutions to address the identified problems. Policy adoption involves approval from the authorities to implement the formulated policy. At this stage, it is important for the

government to gain support from various stakeholders so that the policy can be implemented effectively. Policy implementation is the stage where the policy is implemented in the field. Successful implementation is highly dependent on good coordination between various related parties, as well as the allocation of adequate resources. Policy evaluation is an important stage that evaluates the effectiveness and impact of policy implementation. This evaluation allows the government to make improvements to existing policies or develop new policies that are more effective.

Public policy is a continuous cyclical process where each stage is interrelated and influences each other. A good policy process is not only about formulating the right policy, but also about executing each stage well to achieve the desired results. A government that is able to manage the policy process effectively will be better prepared to face challenges and can improve people's welfare. Therefore, it is important for the government to continuously improve its capacity and competence in managing public policies in order to provide the best services for the community. Public policy is a vital instrument in governance to regulate and address general issues in society. The policy formulation process starts from careful problem identification, in-depth analysis of relevant data, to the formulation of appropriate policy alternatives. The next stage includes policy implementation and evaluation of the results of its implementation to assess its effectiveness and impact on public welfare. The main objective of public policy is to improve overall welfare by overcoming existing challenges and taking advantage of available opportunities. This process involves various parties such as the legislature, executive, judiciary, as well as public participation and consultation with experts and other related parties. Public policy not only sets the direction and regulations needed to maintain the stability and progress of a country or region, but also ensures that the interests of the entire society are considered in a fair and balanced manner.

Public services include all forms of services provided by the government or public institutions to fulfill the basic needs and rights of the people. Directly, these services cover crucial sectors such as health, education, transportation, licensing, and security, which significantly affect the quality of life and welfare of citizens. Good quality public services include effectiveness in providing solutions to various community problems, efficiency in the use of public resources, transparency in the policy process, and accountability for the results achieved. Minimum Service Standards (MSS) are a reference that sets quality standards that must be adhered to by every service provider, with the main objective of increasing public trust and satisfaction with the services provided. Continuous evaluation of public services is an important part of ensuring that policies and programs are relevant and have a positive impact on the social and economic progress of the community as a whole.

Effective public services for the community are the main foundation of quality state administration, where the government bureaucracy functions as a responsive public service provider. To achieve this goal, Minimum Service Standards (MSS) are implemented as a guide for officials or employees in providing services within their authority. The purpose of SPM is to ensure that service quality is excellent, transparent, accountable, and meets the expectations and needs of the people receiving services. Health services are a clear example that continues to grow along with the complexity of modern society, involving various parties from the public sector, private sector, NGOs, and the general public in the decision-making process to improve the quality of life and public health (Reski, 2021). Government institutions such as Puskesmas play a strategic role as the main providers of public health services. They are responsible for providing equitable and quality services, regardless of social status, thus creating optimal public health conditions. This emphasizes the importance of the government's role in ensuring access, quality, and equity in health services for all citizens, in line with established MSS principles.

Government regulations on technical standards to ensure the quality of basic services in

the health sector, issued by the Ministry of Health of the Republic of Indonesia, play a central role in improving health service standards nationwide. These regulations apply not only to hospitals but also to puskesmas, which are a key component in the provision of public health services. The placement of a puskesmas in every sub-district is a government strategy to ensure easy access for all citizens to quality basic health services. The Minimum Service Standards (MSS) set out in this regulation provide clear guidance for service providers in performing their duties to a high standard. This provides certainty to the community that the services received are in accordance with established quality standards. SPM cover not only technical aspects of medical services but also managerial ones that are important for maintaining safety and transparency in the delivery of health services. SPM implementation not only aims to improve the quality of services provided, but also serves as an important evaluation tool for the government in assessing the effectiveness and success of the national health system. Although still in its early stages, this regulation has already provided a positive impetus in efforts to improve overall public health. As such, SPM is not just an administrative regulation, but a key foundation for achieving better and more equitable public health across Indonesia.

Regulation of the Minister of Home Affairs of the Republic of Indonesia Number 59 of 2021 on the Implementation of Minimum Service Standards emphasizes the obligation of local governments to implement Minimum Service Standards (MSS). The main objective of the MSS is to ensure that every citizen receives the standardized minimum type and quality of basic services. The implementation of SPM is very important because it emphasizes the importance of providing basic services that meet certain quality standards (Ministry of Home Affairs, 2021). Hypertension, as one of the common non-communicable diseases in Indonesia and worldwide, often shows no early symptoms but can have serious and potentially fatal consequences, making it a major risk factor in global health statistics (Muhammad Sadam, 2022). Based on data from the World Health Organization (WHO), the prevalence of diagnosed hypertension in various countries shows significant numbers, with variations in the management and control of this disease, reflecting the complexity in public health management (WHO, 2021). In Indonesia, the prevalence of hypertension also shows a significant rate, as reflected by health data in Palu City which recorded a prevalence of 24.30% of the population (Palu City Health Office, 2023). This highlights the importance of improving efforts to prevent, diagnose, and manage hypertension in accordance with SPM guidelines, to ensure that people receive timely and quality health services, and to reduce the negative impact of this disease on overall general well-being.

According to a report from the Palu City Health Office in 2023, hypertension was the main reason for patient visits at the Mabelopura Health Center, recording a rate of 68.61%. More detailed data showed that in Tatura Utara ward, the prevalence of hypertension reached 36.07%, while in Tatura Selatan ward it reached 32.54% (Palu City Health Office, 2023). The implementation of the Minimum Service Standard (MSS) for Palu City in 2023 confirms the commitment of the city government to provide standardized health services to all people with hypertension aged 15 years and above. The main focus is on secondary prevention efforts in the working area for one year, conducted by a medical team consisting of doctors, midwives, nurses, and community health workers. They are supported by information, communication and education (IEC) media, and use tools such as tensimeters and recording forms through the NCD information system application. Standards for the number and quality of health human resources such as doctors, midwives, nurses, and community health workers are strictly regulated to ensure quality services to people with hypertension. The targeting of hypertension patients is based on the latest health research data set by the Minister of Health, in accordance with the policies set by the local head (DHO Palu City, 2023). These measures are expected to improve the effectiveness and efficiency of hypertension management and

control in Palu City, while contributing to the overall improvement of public health.

Tabel 1. Hasil Hipertensi Tahun 2023

Puskesmas	Kelurahan	Penduduk Usia > 15 Tahun			Total Capaian		Total Capaia n	%
		Laki- Laki	Peremp uan	Jumlah	Laki- Laki	Perempu an		
Mabelopura	10.708	10.94 0	21.648	1.865	1.744	3.609	68,61	10.7 08
	Tatura Utara	6.577	6.834	13.411	1.000	916	1.916	36,0 7
	Tatura Selatan	4.131	4.106	8.237	865	828	1.693	32,5 4

Source: Data from the Health Office of Palu City, 2023

Based on the latest data, North Tatura Village recorded 1,916 cases of hypertension, while in South Tatura Village there were 1,693 cases. Regulation of the Minister of Health of the Republic of Indonesia Number 4 of 2019 mandates local governments to provide basic health services that include promotive and preventive efforts for all citizens. These efforts include health promotion, special protection, early detection, appropriate treatment, and programs to prevent disability and rehabilitate (Permenkes, 2019). In the context of Minimum Service Standards (MSS) implementation, the Minister of Home Affairs Regulation of the Republic of Indonesia Number 59 of 2021 emphasizes the importance of local governments in implementing the provisions contained in the Governor Regulation on the Implementation of Minimum Service Standards for 2023, which was officially announced on 24 May 2023. This implementation involves implementation, monitoring, evaluation, as well as overcoming challenges that may arise in its implementation in the regions, in accordance with Governor Regulation No. 23 of 2022 (Pergub, 2023). The implementation of this policy still faces a number of significant challenges, mainly related to the low level of public compliance with antihypertensive treatment. This adherence is a major determining factor in the success of the blood pressure control program. In the context of this research, the focus is on conducting a critical evaluation of the implementation of the Minimum Service Standard policy at the Mabelopura Health Center, especially for hypertension patients. The evaluation aims to identify barriers and provide rigorous recommendations to improve the effectiveness and sustainability of health care practices in the future.

RESEARCH METHOD

This study applied descriptive methods to investigate the implementation of Minimum Service Standards (MSS) in health services to hypertensive patients at the Mabelopura Health Center. The descriptive approach aims to provide a systematic, factual, and accurate description of the phenomenon under study (Nasir, 2003: 24). The location of this research was at the Mabelopura Health Center, which is located at Jalan I Gusti Ngurah Rai No. 18, South Tatura Village, South Palu District, Palu City. The research schedule was adjusted to ensure efficiency and effectiveness in the process. Respondents were purposively selected, including puskesmas heads, health workers, and SPM program implementers. Additional informants such as SPM holders, NCD programmers, and hypertensive patients were also involved to ensure a comprehensive understanding (Moleong, 2000). The research data came from two sources: primary and secondary data. Primary data was obtained through in-depth interviews using purposive sampling and snowball sampling techniques with stakeholders

directly involved in SPM implementation at the Mabelopura Health Center. Meanwhile, secondary data was obtained from documents such as Central Sulawesi Province SPM achievements, Palu City SPM achievement reports, and hypertension health service data from Puskesmas in Palu City. Data collection methods included direct observation of activities and behaviors in the field, in-depth interviews to gain a deeper understanding, and documentation related to the profile of Puskesmas Mabelopura, the condition of human resources, the SPM implementation process, and other relevant documents. Data analysis was conducted interactively through three main stages: data condensation, data presentation, and conclusion drawing or verification (Sugiyono, 2014: 337). Data condensation involved the process of grouping, filtering, and structuring data to reach accurate conclusions. The collected data is presented in narrative form to visualize the findings and conclusions obtained. Drawing conclusions or verification is done by testing the truth of the findings and conclusions from the point of view of the main informants, so as to produce valid and accountable research results.

RESULTS AND DISCUSSION

This study revealed that implementation of the Minimum Service Standards (MSS) for hypertension health services at the Mabelopura Health Center showed an achievement of 68.61%, indicating a significant gap from the national target of 95%. This achievement highlights the challenges in achieving the expected standards in an effort to provide optimal care for hypertension patients at the puskesmas level. One of the main problems faced is the low level of adherence of patients to regular antihypertensive treatment, which is a key factor in the success of blood pressure control programs. This study emphasizes the importance of policy evaluation to identify factors that support and hinder SPM implementation at puskesmas. Recommendations include the need for more intensive educational campaigns to the community on the importance of consistency in treatment, increasing the number and training of health workers involved in hypertension services, and expanding coordination between Puskesmas, local government, and relevant stakeholders to ensure effective policy implementation.

The results of this evaluation make an important contribution in the context of public health policy development. By analyzing SPM achievements and challenges faced, this study can serve as a foundation for developing more effective policies to improve the quality of basic health services, particularly in addressing hypertension problems at Puskesmas Mabelopura. The proposed measures are expected to help address existing problems and improve the overall quality of life of the community in the long term.

Puskesmas Mabelopura plays a pivotal role in the implementation of the Minimum Service Standards (MSS) in the health sector, which aims to ensure that health services provided to the entire population in its area reach the set standards. SPM serve as a tool to facilitate local governments in providing effective, efficient, and equitable public services, as well as an instrument to monitor and evaluate government performance in meeting community health needs. In practice, SPM implementation in the health sector requires the development of detailed technical standards to guide the steps to achieve SPM targets at the local level. These technical standards cover aspects of human resource management and health infrastructure, including necessary medical facilities and equipment. Puskesmas as first-level health service providers play a central role in realizing these SPM by providing basic medical services, such as routine health check-ups, treatment of common diseases, and

health promotion and disease prevention. The role of puskesmas is not only limited to medical services, but also includes health education to the community, monitoring of community health conditions, and early intervention of emerging health problems. Thus, SPM at puskesmas are not only intended to meet minimum standards, but also to improve the overall quality of life of the community by ensuring affordable, quality, and equitable health services in all puskesmas working areas.pelayanan kesehatan Puskesmas Mabepolura

No	Type of Health Service Target	Target	Achievement
		(%)	(%)
1	Health services for pregnant women	100	100
2	Maternal Health Services	100	100
3	Newborn Health Services	100	100
4	Health services for toddlers	100	100
5	Health services at primary education age	100	98,26
6	Health services at productive age	100	87,64
7	Health services for the elderly	100	100
8	Health services for people with hypertension	95	68,61
9	Health services for people with diabetes mellitus	100	85,36
10	Health services for people with mental disorders	100	83,97
11	Health services for people suspected of tuberculosis	100	92,17
12	Health services for people at risk of HIV	100	86,34

Source: UPTD Puskesmas Mabelopura Profile Table 2023

This study examined various dimensions of the implementation of the Minimum Service Standards (MSS) policy at Puskesmas Mabelopura. The evaluation covers five main aspects: effectiveness, efficiency, adequacy, equity, and responsiveness. Each aspect was thoroughly analyzed to understand the extent to which SPM policies have been implemented and their impact on the quality of health services at Puskesmas Mabelopura. This study investigated various aspects of Minimum Service Standard (MSS) policy implementation at Puskesmas Mabelopura. The evaluation covered five main aspects:

A. Effectiveness

This study evaluated the achievement of minimum service standards (MSS) policy targets implemented at Puskesmas Mabelopura. Field observations showed that a focus on improving service quality has been a key indicator of successful SPM implementation at the puskesmas. This evaluation aims to assess the extent to which Puskesmas Mabelopura is able to provide services in accordance with established standards, as well as identify constraints that limit efforts to optimally improve service quality. Based on interviews with informants, it was revealed that the services provided by Puskesmas Mabelopura have met SPM standards. However, implementation still requires greater support from the community as well as close cooperation among staff to ensure services are delivered at optimal levels. From the evaluation results, it can be concluded that Puskesmas Mabelopura has succeeded in providing services in accordance with SPM requirements, although there are still some inhibiting factors that need to be overcome so that these services can run optimally. Findings from the interviews also indicated that some people with hypertension were less consistent in monitoring or following directions from the puskesmas, according to responses from

informants involved in SPM policy implementation. Nevertheless, SPM policies still play an important role in improving the quality of health services provided by health workers to the community. Thus, it is expected that the Mabelopura Health Center continues to strive to overcome existing obstacles and achieve more optimal results in providing quality health services to the entire population served.

B. Efficiency

This study also examined the efficiency of the SPM policy for hypertension treatment at Puskesmas Mabelopura, particularly in addressing challenges that arose during the service delivery process. The research focused on the concrete steps taken to overcome these obstacles. Based on information from informant IU 1, steps taken by Puskesmas Mabelopura staff included the implementation of a regular evaluation system to ensure clear communication between staff, thus avoiding misunderstandings or missing vital information. In addition, it is important to provide direction to the community to always include complete identity documents when registering at the Puskesmas, given the requirements that apply both at the Puskesmas and at the hospital. This is expected to minimize administrative errors and expedite the service process. These identity documents also play an important role in determining the patient's BPJS membership status and address, which is crucial in emergency situations that require direct visits to the homes of patients who are unable to come to the Puskesmas themselves.

C. Adequacy

SPM policy implementation for hypertension treatment at the Mabelopura Health Center is a systematic effort to ensure satisfactory health services for the community and meet government expectations for public service quality. This study evaluates the extent to which this policy is implemented in accordance with its stated objectives. The importance of adequate facilities and infrastructure in this context became the focus of the study, with researchers asking whether the facilities at the Mabelopura Health Center were in accordance with the SPM Hypertension standards. According to responses from informants, although basic facilities are met, there is still a need for improved facilities to improve community comfort. The analysis also included an assessment of the number of health workers available, which is key in the smooth implementation of this policy. Although the health workers at Puskesmas Mabelopura are considered sufficient, some of them face multiple workloads that can affect the effectiveness of services, as stated by relevant informants.

D. Equity

The distribution of information on SPM Hypertension implementation to the community is critical to ensure that all components of the community have equal access to and understanding of this policy. This study questioned whether Puskesmas Mabelopura has conducted adequate socialization to all health workers regarding SPM Hypertension. Interpretation of the results showed that the SPM Hypertension guidelines have been explained to all employees and health workers at Puskesmas Mabelopura. The focus of this socialization is more focused on improving the quality of employee performance, by emphasizing the importance of a deep understanding of the service standards that must be

met to provide optimal service to the community. Responses from informants IU 2 and IT 1 confirmed that the services provided must be in accordance with the applicable regulations and standards. However, the successful implementation of this policy largely depends on the ability and awareness of each employee to apply these provisions consistently, to ensure the best service for the community. Efforts to improve employee understanding and competency are critical to ensure the effectiveness and success of SPM Hypertension policy implementation at Mabelopura Health Center. This also underscores the need for good coordination among employees in meeting minimum service standards and optimizing established performance outcomes.

E. Responsiveness

This study investigates the level of community participation and response to services provided by the Mabelopura Health Center. The research questioned the extent to which Mabelopura Health Center receives and responds to input and criticism from the community. Based on the results of the interviews, it was concluded that Puskesmas Mabelopura shows a responsive attitude to the feedback received, by providing responsive and adequate services. Puskesmas Mabelopura has established various means of communication both offline and online, which can be accessed by various age groups, ranging from adolescents to the elderly, according to the needs of each individual. This reflects their commitment to improving services based on feedback provided by the community, which is an important step in realizing better health services. Based on the analysis of responsiveness in SPM implementation at Puskesmas Mabelopura, it was found that service outcomes were satisfactory with a good level of responsiveness from the Puskesmas. This evaluation confirms the importance of maintaining and improving responsiveness in public health services. The hope is that Puskesmas Mabelopura can continue to innovate and improve their service standards to meet the needs and expectations of the communities they serve.

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CONCLUSIONS

Implementation of the Minimum Service Standards (MSS) for managing hypertension cases at the Mabelopura Health Center indicates that the current achievement is only 68.61% of the government target of 95%. The main factors leading to this low achievement include differences in projection data between the central government and those used locally at the puskesmas, as well as the lack of community participation in conducting routine examinations. This suggests that there is an urgent need to conduct an in-depth evaluation of data and information management at the puskesmas level to ensure consistency and accuracy in recording and reporting. In addition, there is also a need to optimize human resources through intensive training for health workers to be able to provide better services and be responsive to community needs related to hypertension. Another solution that can be implemented is to increase socialization to the community about the importance of early detection, management, and control of hypertension. This step is important to increase public awareness of the importance of keeping blood pressure within normal limits and regularly checking their health conditions. In addition, closer cooperation with clinics and hospitals also needs to be strengthened to improve the recording system and coordination in hypertension case management between primary and secondary health facilities. By taking these steps in a comprehensive and integrated manner, it is hoped that the Mabelopura Health Center can improve its performance in implementing SPM for hypertension, thereby achieving the targets set by the government and providing more optimal services to the community.

REFERENCES

Abidin, Said Zainal (2006), Kebijakan Publik. Jakarta: Suara Bebas

Adib, M. (2009). Cara Mudah Memahami dan Menghindari Hipertensi, Jantung, dan Stoke. Yogyakarta: Dianloka

Agustino, Leo (2012), Dasar-Dasar Kebijakan Publik. Bandung: Alfabeta.

Alamsyah, D., & Wati, R. M. (2013). Pilar Dasar Ilmu Kesehatan Masyarakat. Yogyakarta: Nuha Medika.

Azwar, A. (2010). Pengantar Admonistrasi Kesehatan (Edisi Ketiga). Jakarta: Binarupa Aksara.

Bridgman & Davis G (2000), Australian Policy Hanbook. Edited by Allen & Unwin. NSW

Bustami. (2011). Penjaminan Mutu Pelayanan Kesehatan & Akseptabilitasnya. Jakarta: Erlangga.

Dinas Kesehatan Kota Palu (2022). Profil Dinas Kesehatan Kota Palu. Profil Dinas Kesehatan Kota Palu, 5(3), 248–253.

Dunn, William N (2003), Pengantar Analisis Kebijakan Publik. Edisi Kedua. Yogyakarta : Gajah Mada University Press.

Dye, Thomas R (2007), Understang Public Policy. New Jersey: Englewood Clitts

Hardiyansyah. (2011). Kualitas Pelayanan Publik Konsep, Dimensi dan Implementasinya. Yogyakarta: Gava Media

Howlett, Michael & M Ramesh (1995), Studying Public Policy: Policy Cyles and Policy Subsystem. Oxford: Oxford University Press.

Huberman, Milles Mathew (2014), Analisis Data Kualitatif. Jakarta: Universitas Indonesia Press

Isnia Nur Maula. Evaluasi Pelaksaan Standar Pelayanan Minimal (SPM) pada Penderita Hipertensi di UPTD Puskesmas Mayong IKabupaten Jepara. Universitas Negeri Semarang 2019.

James P Lester & Joseph Stewart (2000), Public Policy : An Evaluationary Approach. Belmont : Wadworth.

Jones, Charles O. 1991. Public Policy. Jakarta: PT. Rajawali

Keban, Yeremas T (2008), Enam Dimensi Strategis Administrasi Publik Konsep, Teori dan Isu. Yogyakarta : Gavamedia.

Kemenkes RI . (2013). Riset Kesehatan Dasar 2013. Jakarta: Badan Penelitian dan Pengembangan Kesehatan .

Kementerian Kesehatan Republik Indonesia. (2017). Perubahan Standar Pelayanan Minimal (SPM) Bidang Kesehatan. Jakarta: www.depkes.go.id.

Kementerian Kesehatan RI. Pusat Data dan Informasi Kementerian

Kesehatan RI 2014. Jakarta; 2014.

Kurniati, Poni Sukaesih, Dosen Program Studi Ilmu, Universitas Komputer Indonesia, Provinsi Jawa Barat, Kota Cimahi and Evaluasi Kebijakan. N. d "Di Kota Cimahi (Suatu Tinjauan Evaluasi Kebijakan Berdasarkan Kriteria Komitmen Institusi),"

Kuzairi, U. Implementasi Standar Pelayanan Minimal (SPM) pada

Pelayanan Publik Bidang Kesehatan (Studi Kasus Pada Rumah Sakit Umum dr. H. Koesnadi Bondowoso).Jurnal Politico.Vol:17.No:184- 205.

Lasswell (1948), The Analysis of Political Behavoir : An Empirical Approach. London : Kegan Paul.

Nasir, Mohammad (2003), Metode Penelitian. Jakarta: Ghalia Indonesia.

Nugroho, Riant (2012), Public Policy: Dinamika Kebijakan, Analisis Kebijakan, Manajemen Kebijakan. Jakarta: PT. Elex Media Komputindo.

Nurul. (2019). Diskresi dalam Pelayanan Kesehatan Kota Makassar (Studi Kasus pada Pelayanan Home Care di Puskesmas Kassi kassi) (Skripsi, Universitas Hasanuddin, Makassar).

Peraturan Menteri Kesehatan Nomor 4 Tahun 2019 Tentang Standar Teknis Pemenuhan Mutu Pelayanan Dasar Pada Standar Pelayanan Minimal Bidang Kesehatan.

Peraturan Menteri Dalam Negri Republik Indonesia Nomor 59 Tahun 2021 Tentang Standar Pelayanan Minimal

Peraturan Gubernur Sulawesi Tengah Tahun (2023). Tentang Tim Penerapan Standar Pelayanan Minimal.

Pasolong, Harbani (2011), Teori Administrasi Publik. Bandung: Alfabeta

Parson, Wayne (2011), Public Policy: Pengantar Teori & Praktik Analisis. Jakarta: Kencana. Profil UPTD Puskesmas Mabepolura Tahun 2023.

Profil Kesehatan Kota Palu. Provinsi Sulawesi Tengah Tahun 2023

Reski. (2021). Implementasi Program Home Care (Dottorotta) saat Pandemi Covid 19 di Puskesmas Kassi kassi Kota Makassar (Skripsi, Universitas Hasanuddin, Makassar).

Sawicki, C.V. Patton & D (1986), Basic Method of Policy Analysis and Planning. Prentice Hall: Michigan University.

Sudjana, D (2006), Evaluasi Program Pendidikan Luar Sekolah Untuk Pendidikan Nonformal dan Pengembangan Sumber Daya Manusia. Bandung: PT. Remaja Rosdakarya.

Sugiyono (2007), Metode Penelitian Sosial. Bandung: Kencana Prenada Media Group.

(2007), Metode Penelitian Kualitatif. Bandung: Alfabeta.

(2007), Metode Penelitian Kuantitatif, Kualitatif dan R & D. Bandung: Alfabeta.

Suharto, Edi (2012), Analisis Kebijakan Publik. Bandung: Alfabeta.

Suparman, Purwanto & Atwi (1999), Evaluasi Program Diklat. Jakarta : Setia LAN Press Undang-Undang Nomor 36 Tahun 2009 Tentang Kesehatan.

- Undang-Undang Nomor 25 Tahun 2009 Tentang Standar Pelayanan Publik.
- Undang-Undang Nomor 23 Tahun 2014 Tentang Pemerintah Daerah.
- WHO.Hypertension [Internet].2021 [cited 2024 Februari 20]. Available from: https://www.who.int/news-room/fact-sheets/detail/ hypertension#
- Wibawa, Samudra (1994), Evaluasi Kebijakan Publik, Jakarta: Raja Grafindo Persada
- Widiyani, R. (2013, April 5). Penderita Hipertensi Terus Meningkat. Life Style.https://lifestyle.kompas.com/read/2013/04/05/1404008/Penderita.Hipertensi.Te rus.Meningkat
- Winarno, Budi (2002), Toeri Dan Proses Kebijakan Publik. Yogyakarta: Media Pessindo.
- Weiss, Carol (1972), Evaluation Research : Methods of Assessing Program Effectiveness. Englewood Cliff : Prentice Hall.
- Yulia Astri Nurul A. Capaian Standar Pelayanan Minimal (SPM) Bidang Kesehatan Kasus Hipertensi dan Diabetes Mellitus di Kota Bandung Tahun 2020.Jurnal Ilmu Pemerintahan Widya Praja. Vol:46 No:2. 2020