
Implementation of Health Operational Assistance Fund Management to Achieve Minimum Service Standards at Modo Health Center, Bukal District, Buol District

I Wayan Gara¹, Herlina Jusuf², Sylva Flora Ninta Tarigan³

^{1,2,3}Department of Public Health, Postgraduate, Gorontalo State University, Gorontalo City, Indonesia

ABSTRACT: Data collection techniques include observation, interviews, and documentation, which are then analyzed using qualitative data based on the Miles and Huberman concept. The research results show that the Implementation of Health Operational Assistance Fund Management in Achieving Minimum Service Standards at the Modo Community Health Center, Bukal District, Buol Regency, was studied from: a). Planning, b). Implementation, c). Monitoring and evaluation have been carried out but have yet to be optimal. In the planning aspect, it only involves some stakeholders. Apart from that, the elements of implementing cross-sector collaboration are not running well, program implementation is not based on characteristics of needs, so it has not yet achieved the SPM, and monitoring and evaluation are still low, which is limited to the quality of the presentation of financial reports. The determining factors for implementing the management of Health Operational Assistance Funds in Achieving Minimum Service Standards at the Modo Community Health Center, Bukal District, Buol Regency were studied from: a). Policy standards and targets, b). Communication, c). Resources, and d). Socio-economic conditions have been implemented but are still not optimal from policy standards and targets that are not per policy content as well as the absence of SOPs, the lack of quality of human resources related to the management of BOK funds, the aspects of communication, coordination, and socialization between cross-sectors are still lacking, and conditions socio-economic conditions are not yet optimally supported because the mindset of rural communities is still strongly influenced by the beliefs and customs of local communities.

KEYWORDS: Policy, Management of Health Operational Assistance Funds, Minimum Service Standards

INTRODUCTION

Health development is an integral part of national development to realize the President's vision and mission and implement the fifth Nawa Cita, namely improving the quality of life of Indonesian people. In this case, the Healthy Indonesia Program implemented by the Ministry of Health aims to increase the level of optimal public health through the creation of healthy living behavior by implementing individual health efforts and public health efforts using promotive and preventive media on an ongoing basis (Ministry of Health of the Republic of Indonesia, 2019) through improving the role and function of Puskesmas as basic health service facilities as well as Poskesdes and Posyandu in providing promotive and preventive health services as an effort to increase access and equity in public health services.

Puskesmas is a Community Health Center and regional technical implementation unit (UPTD) of the District/City Health Service. Puskesmas is a health unit that reaches communities in remote areas and large areas regarding community management and is actively tasked with raising public awareness about the importance of healthy living. Based on the total realization of BOK funds to achieve SPM indicators at the Modo Community Health Center, Bukal District, Buol Regency each year, 2019, it was 99.5%. In 2020 it was 97.4%. In 2021, it was 34.4%. And in 2022, it was 62.6%. Whether or not the Minimum Service Standard indicators are achieved will be separate from the DAK budget source. Special Allocation Funds for the Health Sector are funds sourced from the APBN which are allocated to improve access and quality of health services that are focused on reducing maternal, infant, and child mortality rates, overcoming nutritional problems, as well as disease prevention and environmental health, especially for health services for people with low incomes, and residents in underdeveloped, remote, border and island areas and areas with health problems.

The allocation of Health Operational Assistance Funds (BOK) is used to finance the program's running, which consists of 12 fundamental service indicators. The affirmative budget allocation for BOK funds in 2021 has increased. This is done to achieve SPM standards more effectively to 100%. This is reinforced by the issuance of Minister of Health Regulation Number 4 of 2019 concerning Technical Standards for Fulfilling Basic Service Quality in Minimum Service Standards in the Health Sector.

Modo Health Center, Bukal District, Buol Regency, is one of 11 Community Health Centers spread across various sub-districts in

Implementation of Health Operational Assistance Fund Management to Achieve Minimum Service Standards at Modo Health Center, Bukal District, Buol District

Buol Regency. Puskesmas's Modo Bukal District is a Community Health Service Center located in Buol Regency with an area of 355.5 KM², consisting of 14 villages, 38 hamlets, 76 RWs, and 95 RTs. Based on the results of observations made by researchers related to the management of BOK funds, it is considered that it has not been implemented well because, from a planning aspect, the Health Operational Assistance (BOK) budget allocated for each type of activity has not been implemented optimally. Minimum Service Standards (SPM) indicators coverage at the Modo Community Health Center Bukal sub-district, Buol district still needs to meet the national target. In the implementation aspect, the realization of Health Operational Assistance (BOK) funds has yet to reach 100%, even though with the existing budget ceiling value, the Minimum Service Standards (SPM) should be achieved. Monitoring and evaluation related to guidance and supervision have yet to be carried out optimally by the verification team Health Operational Assistance (BOK) funds. So, the annual report for Health Operational Assistance (BOK) funds is not accompanied by the achievement of Minimum Service Standards (SPM) because the activities that have been prepared in the monthly POA (Planning Of Action) do not lead to the achievement of Minimum Service Standards (SPM) as activity output.

It was implementing Health Operational Assistance Funds (BOK) management in achieving MSS at Modo District Health Center. Bukal Buol Regency can be managed optimally to finance 12 aspects of community service standards, considering that health is urgent and pressing. Hence, it needs to be handled theoretically and practically. To achieve public health, it is necessary to manage BOK funds optimally so that the minimum service standards are under the standards and targets of the Minister of Health Regulations. To achieve the expected minimum health service standards, theoretical and practical handling is needed to optimally manage Health Operational Assistance (BOK) funds. Optimally, at the Modo Community Health Center.

METHODS

This research was conducted at the Modo Community Health Center, Bukal District. The researcher chose the research location at the Modo Community Health Center because implementing basic service activities under the SPM indicators had yet to be achieved 100%. In contrast, the BOK budget allocation for essential services in 2020 had increased. The required research time is 1 month, from January 1 to April 1, 2023. The research will be carried out for 3 months because to obtain data regarding the problems to be researched, problem identification and models for handling the issues will be carried out, so it takes more time. Time to obtain a more in-depth study of the data.

The research method used by researchers is qualitative. This type of research is descriptive qualitative research. It is a research method used to examine the conditions of natural objects (as opposed to experiments) where the researcher is the key instrument, data collection techniques are carried out by triangulation (combination), and data analysis is inductive. The results of qualitative research emphasize meaning rather than generalization.

The research procedure describes the implementation of the management of Health Operational Assistance Funds (BOK) in achieving MSS at the Modo Community Health Center in the Buol Regency. The data was obtained from interviews, observations, and documentation. In qualitative research, the process is free, loose, and not rigid, so that during the research process, there may be new and widespread problems. As for the steps/procedures of qualitative research, researchers must determine the research problem, problem boundaries, focus and sub-focus, data collection, processing and meaning, generating theory, and reporting research results.

Data sources in this research come from documents, archival recordings, interviews, and direct observation. This data source can be used to clarify the research focus. The subjects of this research are informants who will provide various information needed during the research process. This research informant includes the following types: Data sources in this research are Key informants, namely those who know and have various basic information needed in the study. The key informants in this research are:

a. Informant: The key chosen in this research is the Head of UPT. Modo Community Health Center while other informants to conduct interviews were :

- 1) people manage the Puskesmas BOK
- 2) Power Health in Village 1 person
- 3) Program Responsible 5 people
- 4) Team Service BOK verifier Health District 1 person

b. Document Other data sources complement the primary data, namely Regulation Minister Health Republic Indonesia Number 4 of 2019 concerning Technical Standards Fulfillment of Basic Service Quality in Service Standards Minimal Field Health as a policy derivation _ as material for analysis of its implementation.

Data collection techniques and procedures used in this research are observation, interviews, documents, and literature study

RESULTS AND DISCUSSION

1. Implementation of Management of Health Operational Assistance (BOK) funds in achieving Minimum Service Standards at the Modo District Health Center. Bukal, Buol Regency

We are implementing Health Operational Assistance Funds (BOK) management in achieving MSS at Modo District Health

Implementation of Health Operational Assistance Fund Management to Achieve Minimum Service Standards at Modo Health Center, Bukal District, Buol District

Center. Bukal Buol Regency can be managed optimally to finance 12 aspects of community service standards, bearing in mind that health is a pressing aspect, so optimal theoretical and practical handling is needed at the Modo Community Health Center. However, the management of the BOK Puskesmas is still considered unable to finance all aspects of meeting minimum health service standards. To further deepen this research, a theoretical description of the research results was obtained, using Hasibuan's theory (2014) and confirmed by the Minister of Health policy which consists of:

a) Planning

Planning is the initial stage carried out in a policy product, which includes implementing resources involved, budget resources, target groups, and outreach carried out to optimize implementation policy. Planning BOK fund management begins with implementation socialization to the target group, as explained by the person in charge of the field BOK program Nutrition in Modo Health Center:

"At the planning stage, the management of BOK funds begins from making Annual Proposed Activity Plan (RUK) which will be included in the planning Community Health Center" (SN, March 8, 2023).

The following phrase originated from Responsible for Health programs Mother and Child, who also explained :

"Each program makes an annual Plan of Activity Proposals or RUK, but there is little involvement in program management. It is occasionally to monitor or confirm program activities rather than optimize the application following Permenkes. Then, in 2022, healthy mothers and children included in the SPM standards are contained in the document planning activity but not in the JUKNIS BOK. However, it is still accomplished. The socialization is only carried out through WA groups and mini-workshops or not all staff only across programs are involved" (K.Ei, March 10, 2023).

The following phrase originating from the power nurse explains that:

"Planning Public health center started from preparing a plan for proposed program activities, carry out a proposed program meeting sometimes No per JUKNIS BOK, this thing caused by lack of socialization management regarding the program that will be implemented" (Ei. H March 7, 2023).

The following phrase is emphasized by a person responsible for Immunization.

"In planning BOK fund program activities, the person in charge of the program proposes the RUK, which will later be included in the RAB Health Center per Minister of Health Regulation No. 4 of 2019, which started from implementation socialization by the BOK team only and not involve all staff" (SM, March 8, 2023).

"Planning done _ started from creating RUK and UKS and carrying out socialization by the BOK kei team is in charge of the program through meeting all staff are involved in the process planning Community Health Center" (M. March 11, 2023).

The BOK Treasurer emphasizes the above statement explained:

"BOK level funding planning Public health center started from a proposal from each person in charge of the program outlined into the RUK and RPK through internal meetings cross-program to customize with the available budget. The management of BOK has been contained in the document planning (RUK/RPK). But BOK planning sometimes accomplished No following desire, so No all planning per Technical guidelines for 2019 is still used until the second quarter. So far, This always done evaluation together with a person in charge" (JM, March 9, 2023).

The BOK operator emphasizes the following phrase:

"Drafting BOK fund planning is implemented in the middle of the previous year based on program proposals, sometimes all proposed program activities are not per technical guidelines and policy direction field applied health _ in Buol Regency, added Again with no socialization _ technical guidelines for 2022, by him planning with realization in the field becomes No in accordance Because The JUKNIS used is the previous year's JUKNIS and is prepared directly by treasurer" (Ei. O, March 7 2023).

The next phase emphasized the results of interviews with the Chairman of Department BOK TEAM Health:

"For the management of BOK funds in Public health center done through meetings with a program manager, and since 2022 the BOK budget has been transferred to the account Puskesmas, the budget function is adjusted to the available budget" (H. March 8, 2023).

From various expressions of informants above, emphasized with results of interviews with the Head Modo Health Center that:

"Modo Community Health Center BOK planning was prepared based on JUKNIS BOK for 2022 in annual RUK and monthly RPK based on Regulation Minister Health No. 4 of 2019. Planning done No involve all elements are only responsible for the program, the items discussed later start from cross-program and monthly mini-workshops" (K. March 8, 2023).

The above statement is confirmed by the results of interviews with the person in charge of the TB/Leprosy program:

Implementation of Health Operational Assistance Fund Management to Achieve Minimum Service Standards at Modo Health Center, Bukal District, Buol District

“ Planning management of BOK funds is prepared by manager Because usually urged by time so No following desire program holder and I think implementation appropriate box management with Minister of Health Regulation That Not yet in accordance because there are several activities that are not loaded in the bok fund budget even though it is implemented socialization during the mini workshop in WA group by Service officials but No comprehensive and indeed in planning activity creating or preparing RUK involves only some of the staff are appointed as program manager ” (RA, March 8, 2023).

Interviews with several informants show that the management of BOK funds has begun from the program planning stage with proposed RUK, namely Activity Proposed Plans or respective Program Proposed Plans field following Service Standards Minimal health, where each program suggests its activities. Based on the results and observations made by researchers, BOK fund planning is only partially based on service standard requirements minimum Community Health Centers. There are also funded programs by BOK funds, which is not a program that is included in the SPM standards, so allotment from BOK funds follows the aim of allocating BOK funds. Besides, There needs to be more energy implementers involved in the socialization meeting. Plan Proposed Program Activities so that No all proposed program activities brought at the conference can be realized under hope.

b) Implementation

Implementation is one of the stages carried out. After the planning stage, we will see the extent of planning made with its performance in the field, in implementation policy management of BOK funds, the role of actors as executor policies are urgently needed, and the budget amount is adequate. It must refer to the Instructions Technical (Juknis) management of BOK funds as reference material. As explained by the person responsible for field programs nutrition:

"Program activities refer to the annual and monthly RUK, monthly RPK for activities included in the RUK and RPK funded by BOK funds. The efforts include setting program goals and targets by referring to the SPM for programs implemented, such as health promotion programs or health promotion health programs. Mother and child nutrition program, immunization program, non-communicable disease program, environmental health program, PB program, leprosy and HIV AIDS program. To achieve budget absorption of BOK funds, no Village-level meetings were held to discuss the implementation of health programs, but problems still arise. Obtained in the field during program implementation, such as not all programs that you enter according to the program SPM are funded through the BOK fund budget, then the activities included in the BOK fund budget are some of the activity volumes reduced so that the program SPM is not achieved so that the overall goal of BOS fund management cannot be achieved. "This is due to delays in the socialization of the existing JUKNIS, and the disbursement of the BOK budget is sometimes later in the middle of the year" (SN, March 8, 2023).

The following interview originates from the TB/Leprosy program, which also explains :

“Implementation appropriate program activities with RPK, the programs deployed are Diseases No infectious, Immunization, and nutrition, and to achieve budget absorption is not need a level meeting village. However, the problem is frequently faced. It's just like there are program activities that have been implemented but No budgeted in BOK funds, and there are activities that BOK funds fund but the budget is excess " (RA, March 8, 2023).

The following interview originated from a person in charge of the UKS program, who also explained :

“Implementation activity done based on the program's RUK and RPK and implemented programs in the form of a Health program for Mother and Child, Immunization, nutrition, UKS, Disease No infectious, TB, Health environment, HIV, and the soul. And so far, socialization is only internal in Community Health Center to discuss programs, and none have done so in level village ” (M. March 11, 2023).

The following interview originates from the person responsible for the disease program No Contagious, which also explains :

“Procedure implementation per RPK from verified BOK team to upgrade achievement of program targets such as KIA, nutrition, immunization, UKS, elderly, PTM, ODGJ, TB, and HIV programs. So, to achieve the whole program, we carry out socialization, but still, there is a constraint, like many activities are not contained in the 12 SPM indicators. By Because That's it, Department needs to do outreach to the Community Health Center related to SPM" (D. March 11, 2023).

The following interview originated from power. The nurse also explained :

“Implementation BOK fund management refers to the planning that has been done proposed at the planning stage Because it's to optimize implementation of BOK funds in achieving the SPM needed to collaborate or create an agreement with cross-sector and department Education. Some elements are deployed in optimizing policy through promotional and preventive with related elements like the sub-district head and village head. We are carrying out socialization programs Good at Posyandu Posbindu or cross-sector since he took it out policy This until now _ find various obstacles then it should be Service more increase socialization to Community Health Center - Community Health Center related with policies so that the management of BOK funds can be right on target though

Implementation of Health Operational Assistance Fund Management to Achieve Minimum Service Standards at Modo Health Center, Bukal District, Buol District

No on time and yet fulfill SPM achievements " (D. March 7, 2023).

The following interview originated from the field BOK program manager health mother and child, who also explained :

“ BOK fund management is implemented following Instruction Technical (JUKNIS) and RUK/RPK programs. Implementation activities are also appropriate with main tasks and functions and RPK, as well as coordination in a way cross-program. They funded programs by appropriate BOK funds with SPM standards, namely the Health program Mother and Child, nutrition, Immunization, UKS, TB, disease No infectious, health programs psychiatry, HIV, Health environment, and PKPR. However, in implementation, BOK fund management is still an available problem as in the application No directed so that there is more spending budget of the actual budget, as well there are several changes that must be adjusted to with The usual JUKNIS experience delay, so we the BOK team had to do revision return related with existing programs budgeted at the start. However, whole BOK fund management is on target but not on time, and the SPM indicators have not been met in a way overall ” (K.Ei, March 10, 2023).

The following interview originated from a person in charge of the Immunization program, who also explained :

“Mechanism management of BOS funds referring to the RPK on this matter used to achieve the SPM the person in charge of the program carries out various efforts such as social targets and annual targets for program implementation must be appropriate with those in the RPK and to optimize the course of the program as it should be done socialization at the device level but until now Not yet Once implemented ” (SM March 8, 2023).

The results of interviews with the BOK Operator strengthened the next phase:

“Implementation procedure management of Operational Assistance Funds health in achieving MSS in Public health center Not yet in accordance Because SPM achievements are made more standard tall than Community Health Center program standard achievements, By Because That need cross meetings were held sector. The elements that are moved together are the Leader of KUA District and the Sector Police Chief in the region Bukal subdistrict. The programs the village community requires will provide 10% of the total village budget to support activity field health. Still, until now, the target of SPM achievements has Not yet been achieved but was on target but not on time because of program delays in depositing reports" (Ei. O, March 7, 2023).

The results of interviews with Chairman Kim BOK Department of Health strengthened the next phase:

“Implementation management of BOK funds, of course, through Careful planning through RUK will then see the feasibility level. If the planned program must be implemented immediately, it will be implemented without waiting for the BOK budget to be disbursed. After thorough verification, several programs for interim activities are not included in the BOK budget. This has been implemented by Because That's it, Department need do acceleration publishing technical guidelines so that No happen errors in budgeting” (H. March 8, 2023).

The above expression is then emphasized by Head Modo Health Center, which explains that:

“ Mechanism implementation management of BOK funds, namely started from cross meetings sector Then made an appointment with management Community Health Center in January for program management and provision to cross industries and indicators program achievements in one SPM year, then the efforts made by Team BPK in evaluating the previous month's SPM and those for the following month implementation In management, there are 12 SPM indicators that will be assessed, the first of which is health mother and second child field nutrition third immunization for 4 diseases No infected 5 school-age children who got it health services Student 6 is elderly and sick infectious HIV as well as other programs until now _ This No meeting has been held yet level Village So the BOK Fund is considered to be on target but not yet on time as well SPM achievements have not yet been achieved " (K. March 8 2023).

Based on the results of interviews with several informants above, it can be seen that the management of BOK funds is carried out following Instruction Technical (JUKNIS) via various stages, beginning from the Proposed Plan of Activities for each program field per the existing SPM program set by Regulation Minister Health through Service Health Buol Regency.

The proposed plan is carried out per each field and fixed refers to 12 Service Standard indicators Minimum (SPM) applicable. Entire program/ activity SPM indicators in Public Health Center Bukal District carried out the following main tasks and functions. However, implementing the SPM program is only something the Operational Assistance budget can finance. Health matters caused by delays out JUKNIS is a reference in managing Operational Assistance Health so that gives rise to inadequate financing _ value on increase degrees public health as in activities preventive measures are taken Community Health Center in health efforts Mother and Child (KIA) namely in the form activity companion class Mothers and toddlers, health efforts service nutrition namely in the form of surveillance and tracking malnutrition, health efforts service health babies who are still underdeveloped in a way continuous every month.

Implementation of Health Operational Assistance Fund Management to Achieve Minimum Service Standards at Modo Health Center, Bukal District, Buol District

Based on results observations made _ by researchers, indeed, implementation management of Operational Assistance funds Health in Modo Community Health Center is still constrained by resources and understanding technical guidelines. This happens almost in all public health service programs such as Health Mother Pregnant, birth mother services, services for newborn babies, ODGJ patients, and services for Health sufferers with Diabetes and Hypertension.

c) Monitoring and evaluation

Monitoring and evaluating the management of Health Operational Assistance (BOK) at the Bukal Community Health Center still needs to be higher. This is because the implementation of the control function of the Head of the Community Health Center still needs to be more profound. After all, they still need to gain more knowledge about BOK. Technically, the implementation of monitoring and supervision is only limited to the quality of report presentation finances and not paying attention to the outcomes of programs financed by Health Operational Assistance (BOK) funds. Hence, the Community Health Center needs help to achieve the expected SPM. At the monitoring and evaluation stage of managing Health Operational Assistance (BOK) funds at the Modo Community Health Center, Bukal District, factors were found that supports and hinders the implementation of BOK management so that it is not optimal, including:

1. Communication

The communication factor is one of the crucial factors in supporting the successful management of Health Operational Assistance (BOK) funds at the Modo Community Health Center, which is not implemented well, resulting in many errors and information asymmetries between implementing agents at the district level and the technical level, in this case, the Community Health Center. The lack of communication factors is also triggered by the lack of human resources who understand the technical guidelines for Health Operational Assistance (BOK) and not involving other cross-sectors in supporting the successful implementation of public health programs through increasing socialization and education to the community in realizing the level of public health so that it can achieve the expected human resource targets.

2. Resource

Resource factors are one of the supporting factors in successfully managing Operational Assistance funds. Health (BOK) in Modo Health Center is considered good because it is supported by resources- reliable resources from background aspects, appropriate education with standards, and budget factors that are considered sufficient to support service public health. However, in the order of implementation in the field, the BOK Puskesmas team still doesn't understand JUKNIS Operational Assistance Health (BOK), because of the irrelevance discipline knowledge possessed _ with the tasks and functions assigned, so several programs that are not included in the Operational Assistance funded program Health (BOK).

CONCLUSION

Based on the research results and discussion in the previous chapter, the following research conclusions can be drawn:

1. BOK fund management planning in achieving Minimum Service Standards has been implemented. However, it is not yet optimal because standards and policy targets are inappropriate, communication elements, and there are still limited human resources.
2. Implementation of management of BOK funds by Modo Community Health Center, Bukal District, has been implemented but has not been optimal to achieve the expected SPM targets due to limited human resources in understanding BOK, elements of cross-sector communication and socialization, as well as socio-economic conditions which also support and hinder the implementation of health programs.
3. Monitoring and evaluation of BOK fund management is still less than optimal due to the low understanding of human resources, in this case, technical officers, regarding the reference standards used due to socialization carried out by the relevant agencies.

REFERENCES

- 1) Aridewi, dkk, 2018. Analisis Pemanfaatan BOK dalam upaya Peningkatan Kesehatan Ibu dan Anak di Puskesmas Wilayah Kerja Dinas Kesehatan Kabupaten Kudus. Volume 1 No. 1. April 2018
- 2) Dapamudang, F. U. ., Wulandari, D. A., & Lesmana, T. C. (2021). Implementasi Bantuan Operasional Kesehatan Puskesmas Wairasa untuk Pencegahan Stunting. *Jurnal Kesehatan Masyarakat*, 14(1).
<https://doi.org/10.47317/jkm.v14i1.319>
- 3) Evelyn, dkk. 2017. Evaluasi Implementasi Kebijakan Bantuan Operasional Kesehatan Di Tiga Puskesmas Kabupaten Ende Provinsi Nusa Tenggara Timur Tahun 2011. *Jurnal Kebijakan Kesehatan Indonesia*, Vol. 01, No. 3 September 2017
- 4) Endang Sutisna. 2020. *Manajemen Kesehatan: Teori dan Praktik di Puskesmas Edisi Revisi* ISBN: 978-602-386-866-7
- 5) Evelyn, dkk. 2017. Evaluasi Implementasi Kebijakan Bantuan Operasional Kesehatan Di Tiga Puskesmas Kabupaten Ende Provinsi Nusa Tenggara Timur Tahun 2016. *Jurnal Kebijakan Kesehatan Indonesia*, Vol. 01, No. 3 September 2017
- 6) Hardani, dkk. 2020. *Metode Penelitian Kuantitatif dan Kualitatif*. Yogyakarta: CV. Pustaka Ilmu Group Yogyakarta

Implementation of Health Operational Assistance Fund Management to Achieve Minimum Service Standards at Modo Health Center, Bukal District, Buol District

- 7) Irwan. (2021). *Metode Penelitian Kesehatan*. Cetakan Pertama. ISBN: 978-623-6398-26-5. Yogyakarta: Zahir Publishing
- 8) Kementerian Kesehatan Republik Indonesia. 2019. *Profil Kesehatan Indonesia Tahun 2019*
- 9) Naftalin, F., Ayuningtyas, D., & Nadjib, M. (2020). Analisis Implementasi Bantuan Operasional Kesehatan (Bok) Dengan Cakupan Penanganan Komplikasi Kebidanan Di Puskesmas Kota Bekasi Tahun 2019. *Jukema (Jurnal Kesehatan Masyarakat Aceh)*, 6(2), 154–164. <https://doi.org/10.37598/jukema.v6i2.906>
- 10) Peraturan Menteri Kesehatan Republik Indonesia Nomor 11 Tahun 2015 Tentang Petunjuk Teknis Bantuan Operasional Kesehatan
- 11) Peraturan Menteri Kesehatan Republik Indonesia Nomor 4 Tahun 2019 Tentang Standar Teknis Pemenuhan Mutu Pelayanan Dasar Pada Standar Pelayanan Minimal Bidang
- 12) Usman Husaini. 2017. *Manajemen Teori,Praktik, Dan Riset Pendidikan*. Jakarta: PT Bumi Aksara
- 13) Wahab, Solichin Abdul 2017. *Analisis Kebijakan: Dari Formulasi ke penyusunan Model-Model Implementasi Kebijakan Publik*. Jakarta: PT. Bumi Aksara
- 14) Zuhra, A. 2018. *Analisis Implementasi Bantuan Operasional Kesehatan (BOK) Dalam Upaya Peningkatan Kesehatan Ibu Dan Anak (KIA) Di Puskesmas Samalanga Kecamatan Samalanga Kabupaten Bireuen Tahun 2018*. Tesis.
- 15) Johns Hopkins University, Armstrong Institute for Patient Safety and Quality. *Improving the Emergency Department Discharge Process: Environmental Scan Report; Technical report*; Johns Hopkins University: Baltimore, MD, USA, 2014