

Strengthening Health Human Resources Planning Systems Through Partnership Programs as Efforts to Improve Strengthening National Health System

Aulia Bahrani Alfi

Faculty of Public Health, Universitas Airlangga, Mulyorejo, Surabaya, Indonesia
auliabahwanialfi@gmail.com

Keywords: Human health resources, Partnership approach, Health system.

Abstract: The WHO (2006) stated that health workers can contribute to successful health development by up to 80%. There are still many health service facilities that do not have the number and quality of Human Resources that is in accordance with the regulations and standards of the Ministry of Health of the Republic of Indonesia. The Australian Indonesia Health System Strengthening Program (AIPHSS) is an approach to strengthening the national health system in accordance with the Ministry of Health program focusing on Human Resources. The purpose of this study is to describe *Pendidikan Jarak Jauh* (PJJ) Program one of the programs AIPHSS in an effort to strengthen the Human Resource Planning system in Indonesia. The design of this research is a case literature study. The data analysis method used was descriptive analysis. The results of the study are PJJ program descriptions and the scope of the evaluation: 1) The effectiveness of distance education programs; 2) the application of ODL learning; 3) the accessibility of the learning system; and 4) the critical success factors for the continuation of the program. Conclusions from the research are that distance education is considered to be the best solution for answering the challenge of improving the qualifications of the health personnel in Indonesia due to its geographical setting and the limited human resources in health care.

1 INTRODUCTION

Human Health Resources is collects various efforts in relation to planning, education and training that is integrated and supports the other sub-divisions, in order to achieve the highest degree of public health possible (SKN, 2009). In health human resources, there are 3 main elements, namely planning, education and training, and utilisation. Health HR Planning is a process of estimating the number of human resources based on the place, skill, and behaviour needed to provide the appropriate health services. The education and training of health personnel is the effort of health procurement in accordance with the type, quantity and qualifications that have been planned and the improvement of the staff's capabilities in accordance with the needs of health development. The utilisation of health personnel is the effort involved in the equitable utilisation of coaching and the supervision of health personnel (SKN, 2009). HRH implementation

should be implemented properly because, based on the WHO report in 2006, it stated that health workers can contribute in the success of health developments by up to 80%.

Recent conditions prove that the number and quality of human health resources available is still far from ideal. There are still many health service facilities and institutions such as Puskesmas, District Health Offices and Hospitals that do not have the number and quality of Human Resources according to the rules and standards of the Ministry of Health of the Republic of Indonesia (Head of Planning and Budget Bureau, 2013). A study conducted by Guspianto in 2010 discussed the related 'Analysis of Health Policy Needs Planning Scheduling Health Center in Muaro Jambi District' and concluded that the preparation of health human resource needs planning in relation to the documentation part of the annual routine activities of Muaro Jambi District Health Office. Another study by Budiman in 2006 with the title of 'Health Planning HR Planning in

Pangkalpinang City 2006-2010' concluded that health human resource planning is often done without proper planning processes. This happens because of limited human resources, unallocated funds for planning and human resource information systems that have not been developed properly. There are no standard work procedures, as well as inadequate facilities.

The fundamental objectives of the National Health System (SKN, 2012) are to improve the degree of public health and the degree of government responsiveness while ensuring equity in the contribution of financing for the fulfillment of the community expectations related to basic health services. Some of the above problems are a challenge for the preparation of the National Medium Term Development Plan (RPJMN) 2015-2019 for the sector of public health. In response to the existing conditions, the Indonesian Australian Program for the Strengthening of the Health System (AIPHSS) is a new approach to strengthening the national health system in line with the Ministry of Health of the Republic of Indonesia's programs that focus on the following four building blocks: Human Health Resources, Health Financing, Governance and Leadership and Service Delivery. Based on the background of the problem, the objective of this research is to describe Pendidikan Jarak Jauh Program one of the programs of AIPHSS in an effort to strengthen the Human Resource Planning system in Indonesia.

2 METHOD

The design of this research is case-based literature study. The reference theory obtained through the research in to the main literature study serves as the basic foundation of the research implementation. The methods of collecting the research data is the documentation method and literature study. The documentation method is a method used to search for documents or important data related to the research, while the literature study method collects data or sources related to the topics raised in the study. The type of data used by researchers is secondary data, obtained from journals, books, documentation, and the internet. The method of data analysis used was a descriptive analysis design to describe the facts followed by analysis.

3 RESULT

Related to the background that discusses the health human resources available, the results of this study will focus on one of the work programs of the health human resources component of Far Distance Education (PJJ) as an effort to access better facilities, to improve participation, and to improve the quality of human resource health. From the literature search that has been done, the researcher has not found any studies that examine and discuss AIPHSS and the PJJ Program. The literature has only been derived from official bulletin articles issued by the government. Therefore, the result of this research is only able to describe PJJ Program and the evaluation that needs to be done.

In 2013, distance education programs for nursing and midwifery were conducted by the health polytechnic college at Kupang, Samarinda and Sorong. The Australian Government, through the Australia-Indonesia Partnership for Health System Strengthening (AIPHSS), provided support for distance education programs in the NTT Province conducted in South-West Sumba (SBD) for courses in obstetrics and in East Flores for nursing. The program was conducted for two semesters with 87 students enrolled. To improve the quality of the program, AIPHSS - in cooperation with the Jakarta State University - conducted a formative evaluation carried out over 3 months (May - July 2015).

The scope of the evaluation included assessing the:

1. Effectiveness of distance education programs.
2. Applications of ODL learning.
3. Accessibility of the learning system.
4. Critical success factors for the continuation of the program.

These four assessment points were mapped within the scope of the six evaluation components: 1) Implementation management; 2) Lecturers; 3) Educational personnel; 4) Curriculum; 5) Method and learning media; 6) Evaluation of the learning outcomes.

4 DISCUSSION

Based on the results of the case studies that have been conducted related to the scope of the evaluation of the PJJ Program - one of the AIPHSS programs as an effort to strengthen human health resources, the program consists of 1) The effectiveness of distance education programs; 2) Application learning; 3)

Accessibility of learning system; and 4) critical success factors for program continuity. The explanations related to the scope of each evaluation are as follows:

1. *Effectiveness of distance education programs*

The implementation of the PJJ program is expected to be an effective way of overcoming the problems of quality human resources in Indonesia today. The concept of effectiveness in learning in the PJJ program includes several things. Among them is that the implementation of the delivery method of education is done flexibly, with good teaching materials and a powerful module that can enable self-learning. Learning by this method makes face-to-face meetings a support process only when the students have difficulty understanding the modules or teaching. This is done on the initiative of the students. This is because the weight of distance learning is independent learning 50%, 30% face to face and online 20%. The face-to-face learning methods undertaken by the tutor may include lectures, discussions and formative evaluations. Online learning is done in two ways: 1) teleconference and 2) email. Effectiveness in this program is an important point in order to achieve the program objectives.

2. *Process Quality and Its Impact on Health Services (Learning Applications)*

The program's implementation requires the students to have higher motivation and initiative compared to other students. High motivation and initiative in completing the learning will make the students better able to complete the evaluations and exam module. Associated with the impact of the implementation of the program is a variety of behavioural changes due to the program such as the initiative to form a learning group based on geographical proximity. This allows them to discuss concepts, complete joint tasks and to exchange information. In fact, this was often not only done with fellow students who are involved in the program but also their colleagues and doctors in the workplace. Another observed effect is the improvement in their communication skills with the patient. The additional knowledge gained during the program is considered to be a helpful source of information in answering the patient's questions. The evaluation process related to motivation and initiative and the process and

impact of the subsequent behavioural changes should be a concern.

3. *Online Learning Accessibility*

The beginning of the learning program begins with an introduction to and training in information technology as a learning medium that is accompanied by a guide book. In the training process, there is a phase of adjustment by the students. They assume that the use of the technology is more confusing, unfriendly or complicated. In addition, another access problem is bad internet access. This affects the ability to access websites, video conferences and other online learning materials. Skills in using online media and online systems need to be provided not only for the students but also lecturers and committees. Some students complain of difficulty in understanding the practical material presented using animations, videos and power point. This shows that the technique of delivering the material has not been mastered properly by the tutors and lecturers, and also the limited availability of learning media materials. Therefore, quality improvement is not only given to the students but also to tutors or lecturers who should get intensive training and repair the poor internet access.

4. *Determinants of Success and Prerequisites for Expansion*

The PJJ Program is a solution for health workers to be able to continue working while studying. Therefore in order for the learning system to run consistently, there are several areas that need to be improved in terms of:

- a. Program management; the different levels of experience between the tutors and students can actually be used to combine theory and practice during the classroom discussions. The tutors should have the skills to facilitate classes in adult education settings and make use of student experiences to strengthen the learning experience.
- b. Lecturers and educational staff; improving the academic standards of tutors through continuous training is required.
- c. Curriculum; some general subjects can be modified into one independent study subject that does not take a semester, and in which the evaluation can be given independently online when students have completed a module. The conversion system into a number

of credits based on student experience is necessary, in order to take into account their previous experience. This can shorten the duration of the program and can bring efficiency in relation to costs and increase the probability of replication in other areas.

- d. Instructional and media methods: tutors need to improve their creativity in creating innovative teaching methods (micro teaching). This innovation can better develop if there is regular discussion and sharing within the teaching team.

Indonesian Ministry of Health, 2013. Kabar AIPHSS Edisi III : Agustus 2013. Kementerian Kesehatan Republik Indonesia . Agustus 2013;Edisi III:1-4

5 CONCLUSIONS

Distance education programs are the best solution to answer the challenge of increasing the number of qualified health personnel in Indonesia, because of geographical location and the limited human resources in health care. Based on the results of the evaluation, there are several challenges in terms of implementation and teaching management. There are also some components that have been implemented well and give hope that the program can continue and be applied in other areas with similar characteristics. Distance education not only affects students positively, but also stimulates the emergence of community learning in the health field by encouraging discussion among friends who can facilitate knowledge transfer.

REFERENCES

- Australian Departement of Foreign and Trade. Australia Indonesia Partnership for Health Systems Strengthening (AIPHSS). Australian Departement of Foreign and Trade. July 2015;Fifth Six Monthly Progress Report:117-120
- Australian Departement of Foreign and Trade. Penguatan Sistem Kesehatan Agenda Reformasi. Australian Departement of Foreign and Trade. September 2014.
- Budiman. 2006. Analisis Perencanaan Sumber Daya Manusia Kesehatan di Puskesmas di Kota Pangkalpinang 2006-2010. Universitas Indonesia.
- Depkes RI. Sistem Kesehatan Nasional Bentuk dan Cara Penyelenggaraan Pembangunan Kesehatan. 2009. Departemen Kesehatan RI: Jakarta.
- Guspianto. 2011. Analisis Penyusunan Rencana Kebutuhan Sumber Daya Manusia (SDM) Kesehatan Di Kabupaten Muaro Jambi. Prosiding Seminar Nasional Kesehatan. Jurusan Kesmas FKIK UNSOED