

RINGKASAN

Pemerintah mendorong terciptanya program inovatif dalam upaya pelaksanaan pelayanan kesehatan jiwa, khususnya mengatasi permasalahan akses terhadap pelayanan kesehatan jiwa yang diutamakan di tingkat puskesmas. Seperti inovasi Manis Nan Jitu (Mekanisme Pelayanan Kesehatan Jiwa Terpadu) di Puskesmas Rakit 2 untuk mengatasi permasalahan pelayanan kesehatan jiwa agar seluruh pasien orang dengan gangguan jiwa memperoleh pengobatan secara teratur dan tidak ditelantarkan sehingga menurunkan kasus pasien mengamuk. Dalam hal ini, peneliti berusaha untuk mengkaji dan mendeskripsikan inovasi tersebut.

Inovasi tersebut akan dideskripsikan melalui perspektif inovasi pelayanan publik di bidang kesehatan. Peneliti berupaya untuk menggambarkan inovasi tersebut menggunakan teori inovasi yang dikembangkan oleh Rogers (1983) melalui lima aspek yaitu *relative advantage*, *compatibility*, *complexity*, *trialability*, dan *observability*.

Menggunakan kualitatif deskriptif, informan ditentukan secara *purposive* yaitu informan ditetapkan berdasarkan kriteria bahwa informan tersebut memiliki informasi yang mendalam mengenai permasalahan tersebut. Data dikumpulkan melalui wawancara, observasi, dokumentasi, dan dianalisis dengan metode interaktif Miles, Huberman, dan Saldana (2014). Hasil penelitian yang telah dilaksanakan menyatakan bahwa inovasi tersebut bermanfaat bagi tenaga kesehatan dan masyarakat. Inovasi dibuat dengan menyesuaikan kondisi dan kebutuhan masyarakat sehingga pelayanan menjadi lebih baik. Inovasi tersebut mudah dipahami oleh tenaga kesehatan dan masyarakat, serta tidak ada tahap uji coba dalam pelaksanaan inovasi tersebut. Pelaksanaan inovasi tersebut melibatkan lintas sektor dan layanan rujukan yang efektif dibanding sebelumnya. Inovasi dilaksanakan sesuai dengan tujuan yang telah ditetapkan dari dibuatnya inovasi tersebut. Ada kendala berasal dari keluarga pasien dan puskesmas sendiri. Inovasi tersebut diketahui memperbaiki pelayanan kesehatan jiwa dan pengobatan yang lebih tepat, serta menurunkan stigma yang berkembang di masyarakat. Capaian riil pasien berobat meningkat, tetapi kasus pasien mengamuk akibat masih ada, stok obat yang kosong di puskesmas, serta perilaku tertutup keluarga pasien terkait kondisi pasien.

Kesimpulannya, inovasi Manis Nan Jitu telah memenuhi aspek *relative advantage*, *compatibility*, *complexity*, *observability*, dalam pelaksanaannya tidak melewati tahap uji coba (*trialability*), tetapi pelaksanaannya berkoodinasi dengan lintas sektor dan memberikan pelayanan yang efektif. Implikasi dari hasil penelitian tersebut diharapkan dapat dilakukan pembaharuan dan evaluasi pada inovasi tersebut, melakukan survey kepuasan masyarakat secara khusus untuk inovasi, serta memasifkan edukasi yang dilakukan secara kolaboratif.

Kata kunci: Inovasi, Inovasi Pelayanan Kesehatan, Kesehatan Jiwa, Manis Nan Jitu

SUMMARY

The government encourages the creation of innovative programs in efforts to implement mental health services, especially to overcome problems of access to mental health services that are prioritized at the public health centre level. Such as the Manis Nan Jitu (Integrated Mental Health Service Mechanism) innovation at Puskesmas Rakit 2 to overcome mental health service problems so that all patients with mental disorders receive regular treatment and are not neglected to reduce cases of patients running amok. In this case, the researcher tries to examine and describe the innovation.

The innovation will be described from the perspective of public service innovation in the health sector. The researcher seeks to describe the innovation using the innovation theory developed by Rogers (1983) through five aspects, relative advantage, compatibility, complexity, trialability, and observability.

Using descriptive qualitative, informants were determined purposively based on the criteria that the informant has in-depth information about the problem. Data were collected through interviews, observation, documentation, and analyzed using the interactive method of Miles, Huberman, and Saldana (2014). The results of the research that has been carried out state that the innovation is beneficial for health workers and the community. Innovations are made by adjusting the conditions and needs of the community so that services become better. The innovation is easily understood by health workers and the community, and there is no trial stage in the implementation of the innovation. The implementation of the innovation involves cross-sectors and referral services that are more effective than before. The innovation was implemented in accordance with the predetermined objectives of the innovation. There were obstacles from the patient's family and the public health centre itself. The innovation is known to improve mental health services and more appropriate treatment, and reduce the stigma that develops in the community. The real achievements of patients seeking treatment have increased, but cases of patients having tantrums as a result still exist, empty drug stocks at the public health centre, and the closed behaviour of the patient's family regarding the patient's condition.

In conclusion, the Manis Nan Jitu innovation has fulfilled the aspects of relative advantage, compatibility, complexity, observability, in its implementation it does not pass the trialability stage, but its implementation coordinates with cross-sectors and provides effective services. The implications of the research results are that it is hoped that updates and evaluations can be carried out on these innovations, conducting community satisfaction surveys specifically for innovations, and intensifying education carried out collaboratively.

Keywords: Innovation, Health Service Innovation, Mental Health, Manis Nan Jitu