AMY Y.S. RAHAYU. The empowerment of the Puskesmas based on measuring of performance. Under direction of BASITA GINTING, DJOKO SUSANTO, MARGONO SLAMET, AND AZHAR KASIM.

Public services related to health have become a barometer for people’s welfare level. In DKI-Jakarta Province, there has been a gap between the expected people’s health and the real situation. Puskesmas, which serves as people’s health center and is located in districts, plays an important role in improving both the degree and the status of people’s health.

Empowerment is required to enable Puskesmas empower people, while the base for such an empowerment is by measuring the performance of Puskesmas first. The equipment thought to be able to analyze Puskesmas’s performance systematically and in a dynamic way is Balanced Scorecard (BSC) combined with Sytem Dynamic (SD)

The questions in this research are: 1) How are the performance level and pattern of BSC Puskesmas performance ?; 2) How are the structure of Puskesmas’s performance ?; and 3) How is the model of empowerment for health service in Puskesmas based on the scenarios made ?

The population samples in this study are elite, moderate and slump Puskesmas in DKI-Jakarta except for Kepulauan Seribu. The paradigms use are both ‘positivist’ and ‘hard approach’. The total sample of customers in every quarter is 150, obtained periodically for four quarters in time series; whereas the sample of employees is 30 persons obtained quarterly for 4 quarters consecutively.

The result shows that elite Puskesmas has a better performance compared to the others, while the moderate is better than the slump. The pattern of performance trend moves to the direction to balancing feedback which means that all performances still required improvement. The study of structure of performance, it was revealed that: 1) service quality of elite, moderate, and slump is sensitive to the increase of medical patient ratio; 2) Customer satisfaction on the three Puskesmas is sensitive to medical patient ratio; 3) In the elite, employee’s satisfaction is sensitive to incentive ratio, while in the moderate, it is sensitive to patient potential increase, and in the slump, it is sensitive to the medical patient ratio; 4) ‘Swadana’ income in the three Puskesmas is sensitive to patient potential.

The model for the empowerment of the three Puskesmas are different: The elite requires on combination of internal process-learning-growth perspective and customer-internal process; the moderate needs empowerment in the combination of financial-customer perspective, and customer-learning and growth perspective; while the slump requires the one of combination of customer-internal process perspective and customers-learning and growth.