

The Role Of Stakeholders In Increasing Community Participation To Join As JKN-KIS Participants In Alam Barajo District In 2022

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ABSTRACT

The JKN-KIS program is a joint program so it requires the participation of all parties. From JKN-KIS participation in Jambi City it still has not reached UHC and the lowest participation data is in Alam Barajo District because there is still a lack of public participation in becoming JKN-KIS participants so that the role of stakeholders as decision makers is needed to consider the views of all influential constitutions. The purpose of this study is to analyze the role of stakeholders in increasing community participation to join as JKN-KIS participants in Alam Barajo District in 2022. This study uses a qualitative research method with a phenomenological approach. Data were obtained from 11 informants by conducting in-depth interviews and observations in the Alam Barajo District, Jambi City. In this study, data analysis used the help of NVivo software and used triangulation of sources and methods to generalize the data that had been obtained. The results of this study indicate that the role of stakeholders as facilitators, namely the BPJS has carried out outreach through sub-district and sub-district intermediaries who gather residents in the RTs that have been included. Then the role of the stakeholder as a coordinator is that the coordination has been carried out by the BPJS through the person in charge of each member during the activity and in its implementation it is the RT who conveys information to the public. Furthermore, the role of stakeholders as accelerators is that all parties are involved in accordance with their respective duties and functions and are given their respective authorities. Finally, the role of the stakeholder as an evaluator is that the implementation of the JKN-KIS program has been good, the RT has also submitted information but has not been able to solve the problem completely. This research shows that the role of stakeholders as facilitators, coordinators, accelerators and evaluators in the implementation of the JKN-KIS program is good, but good understanding is still needed between the government and the community. The head of the RT can convey information in a language easily understood by residents and invite the public to join JKN-KIS

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1. INTRODUCTION

In implementing the JKN-KIS program, BPJS Kesehatan cannot set its own directions and guidelines. Collaboration, participation, communication and synergy with stakeholders are absolutely essential for the optimal implementation of the JKN-KIS program and in line with government goals and the needs of participants and other stakeholders [1]. Stakeholder theory is at the heart of strategic management, because the role of strategic management is to identify the third parties involved and determine how to engage with those parties. [2]

The existence of BPJS for Health has had a significant impact on reducing household financial constraints. Meanwhile, there are still many participants who do not realize what the impact will be if there are arrears or non-compliance in paying BPJS Kesehatan contributions. Participants who are in arrears will be subject to sanctions in the form of fines and participation deactivation. Based on data from the Jambi City Health BPJS for 2022, it is known that UHC in Jambi City has reached 76.63%

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of the UHC target of 95%. Based on data from participants who receive contribution assistance per sub-district in the Jambi City Region in 2021, the lowest participation is in the Alam Barajo sub-district. Then, based on data from the Jambi Branch of the BPJS in strengthening the role of the promotive and preventive health centers for JKN-KIS participants, it is known that PBI and NON PBI participants at the Kenali Besar Health Center and Rawasari Health Center in Alam Barajo District have not fully participated in JKN-KIS membership. So that with the collaboration of all stakeholders, we can jointly create UHC and a healthy future. In the initial assessment, the researcher concluded that the role of stakeholders had been carried out but was not maximized because efforts were still needed to increase the enthusiasm of the community to participate in JKN-KIS. KIS in Alam Barajo District.

2. METHOD

This study uses qualitative research with a phenomenological methodology. The research was conducted in the Alam Barajo District, Jambi City from November 2022 to January 2023. In the research, data was collected from 11 informants through in-depth interviews, and supporting evidence from surveys and documentation. The instrument used in the research was the researcher himself using a list of questions as a guide for in-depth interviews with informants. The source triangulation method was used to generalize the data that had been collected and this study used NVivo qualitative data analysis. The analytical approach that the researchers realized in this study was to use content analysis.

3. RESULTS AND DISCUSSION

1. Facilitator

In the facilitator aspect, the role of stakeholders is to guide and develop. Will be explained in the following description:

A. Guiding

In convincing prospective JKN-KIS participants to increase participation, the fact is that BPJS provides direct outreach by inviting the sub-district to attend a meeting with the BPJS, then there is no follow-up action by the sub-district, only informing the kelurahan and then an intermediary from the kelurahan who informs back to the RT-RT not the BPJS directly to society. Only the RT conveyed information to the public via wa groups and yasinan forums. Then the form of socialization related to BPJS program information is carried out by the puskesmas as a provider, meaning service providers who can be accessed through the JKN and CHIKA Mobile applications. The following are excerpts of the interview, among others:

"...The BPJS has a role through socialization to the community, there are direct and indirect forms of socialization. If not directly we can through the media, namely electronic media, print media. If we can go directly to the local government and the community directly..." (R.1)

"...Our role is an indirect role, we are only providers or people who provide services..." (R.2)

"...There is a BPJS PIC room that can inform BPJS programs that can be accessed on CHIKA and the Mobile JKN application..." (R.3)

"...We have no role in convincing the public, we only attend meetings from the BPJS where they provide information and outreach regarding BPJS..." (R.4)

"...We are only limited to administrative letters, at most we are invited to meet with the BPJS in Kota Baru. They socialize the BPJS program to us and later we will inform the RT..." (R.5)

"...The RT only came to meetings like those held by the government, sub-districts and health centers. Then, when you get the latest information regarding BPJS, you will share this information with your residents via the wa group and at yasinan or meeting on the street..." (R.6.1, R.6.2, R.6.3)

"...Maybe if we come directly to the BPJS office, we will serve them in a friendly manner and direct the people who come there. If the BPJS does not come directly socialize here. We know BPJS information only from RT and neighbors..." (R.7.1, R.7.2, R.7.3)

This is in accordance with the regulations of the Law of the Republic of Indonesia Number 24
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of 2011 concerning the Implementation of Social Security. In Articles 12 and 13 that in implementing the BPJS function as the JKN-KIS program, it is BPJS that is obliged to provide information to participants regarding the rights and obligations of participants [3]. This is reinforced by the Guidelines for the BPJS Health Information Service Center (2016), the ideal should be that BPJS is the one who socializes directly to the community to convince JKN-KIS participants, meaning that BPJS cooperates with the District for outreach. From the sub-district, it facilitated each sub-district to gather people so that socialization was given. So that the community is enthusiastic about participating in the JKN-KIS program[4].

Furthermore, the registration service procedure when registering for JKN-KIS membership is by coming directly to the BPJS Health office, bringing the BPJS card or KTP to the health facility, through the Mobile JKN application. However, even though there is a platform provided by BPJS, the community still does not understand the use of the Mobile JKN application and there are no cars traveling to the village to make it easier for people to register for this BPJS program. And people who don't know about services can go through CHIKA, PANDAWA. The following are excerpts from his interviews:

"...Service procedures can be directly at the BPJS Health office, the JKN Mobile Application, PANDAWA via the WA, CHIKA applications. PANDAWA is more concerned with administrative services via WhatsApp, while CHIKA (Chat Assistant JKN) is more concerned with questions and answers or information and complaint services via chat which is responded to by Artificial Intelligence (AI)..." (R.1)

"...In this puskesmas we serve, if you register for BPJS JKN-KIS membership, you can come directly to the BPJS office, or through the Mobile JKN online application. The Puskesmas provides services through the BPJS PIC which serves patient administration regarding BPJS..." (R.2)

"...You can go through the Mobile JKN application and check information through CHIKA..." (R.3)

"...You can access the JKN mobile application or if you want to seek treatment, bring your card to the health center..." (R.4)

"...Use the Mobile JKN application. Sometimes when you go to the health facility, the queues are longer..." (R.5)

"...You can go to the health center or health facility with your BPJS card. You can also use the JKN mobile application..." (R.6.1, R.6.2, R.6.3)

"...What we know is bringing a BPJS card or KTP to the health center or hospital. Then we don't understand how to use the Mobile JKN application..." (R.7.1, R.7.2)

"...Bring your KTP/BPJS Card to the puskesmas. Then, for those who travel by car, they are not in this village, maybe yes, there was one at the time near the new city, but they didn't bring their ID card/KK..." (R.7.3)

This is clarified by the regulation of the Ministry of Health of the Republic of Indonesia regarding the JKN-KIS Participant Service Guide (2020), which should ideally be for the BPJS to improve service quality easily and quickly, so that the BPJS Health service channel consists of the JKN Mobile Application, BPJS Health Care. Center 1500 400, Mobile Customer Service (MCS), BPJS Health Website, Public Service Mall, Branch Offices and Regency/City Offices, Joint Portal of BPJS Health and Employment BPJS. [5].

B. Building

In addition to the role of stakeholders through socialization in increasing JKN-KIS participation, in increasing the quality of stakeholder understanding in an agency, it is necessary to provide employment training for staff employees who have different competency backgrounds and fields with education and training for BPJS Kesehatan employees, then through workshops. puskesmas, internal meetings and evaluation of staff performance results. Reinforced by the community that employment training for staff is usually through meetings with leaders. The following are excerpts from his interviews:

"...Each employee has a different competency background, in their work they have different fields as well. For improvement, there is the name Corporate University as an education and training

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center for BPJS Kesehatan employees. Apart from that, education and training are also conducted offline (live meetings/training) or online via zoom..." (R.1)

"...Through mini health center workshops, through monthly meetings, as well as routine meetings..." (R.2)

"...In the form of internal socialization among one another..." (R.3)

"...From our point of view, the sub-district has an internal meeting and continues to evaluate staff on the performance of each staff..." (R.4)

"...the most internal meeting among staff..." (R.5)

"...Maybe a meeting among them..." (R.6.1)

"...From the leadership to the staff there is an evaluation of the results of their performance..." (R.6.2)

"... Eee... maybe the results of their performance reports are monitored and then evaluated by the superiors..." (R.6.3)

"...Eee..maybe a meeting like that with the leader. Kek we gathered with the RT to get information..." (R.7.1, R.7.2, R.7.3)

In line with Husaini's research (2017) that human resources are very important and very decisive. All the potential possessed by human resources greatly influences the organization's efforts to achieve its goals [6]. This is reinforced by BPJS Health Info (2020) regarding the 2020 Health BPJS Performance, it should be ideal that in the Basic education and training program (Diklatsar) employees must be equipped with adequate competencies which include basic competencies, behavioral competencies and technical competencies which are the foundation in provide services to the community [7].

2. Coordinator

In the coordinating aspect, the role of stakeholders is to accompany, direct and coordinate. Will be explained in the following description:

A. Accompanying

The form of assistance efforts by the BPJS is through the performance results of the achievements of each member, while according to the heads of the RTs and the community, the assistance efforts carried out by stakeholders should be leaders who participate directly in the community so that they can see the work of their members. The following are excerpts from his interviews:

"...The coordinator will see the results of his performance can be in the form of the achievements given. Apart from that, it is also necessary to monitor and evaluate how the performance of the work period is..." (R.1)

"...In the Recognize Besar Health Center, they opened services at the Pustu, so the nurses, doctors and medical staff are in the 2 Pustu. Then there is a mobile health center at least once a week according to the schedule..." (R.2)

"...From the puskesmas side holding a meeting outside the scope of the puskesmas by inviting cross-sectors..." (R.3)

"...By the way the leader also attends the meeting along with the staff concerned about this BPJS program..." (R.4, R.5)

"...The leader looks at the results of the performance of his staff, then the leader evaluates it later..." (R.6.1)

"...By the way the leader participates in the activities carried out..." (R.6.2)

"...The leader monitors and participates with the staff in the activity. Until later there is an evaluation from the leader..." (R.6.3)

"...Leaders may have to participate in these activities, so they can see and evaluate directly the implementation of the work of their members..." (R.7.1, R.7.2, R.7.3)

This is clarified by Syauqi AZ's research. (2020), the ideal should be that the coordinator has the obligation to act as a mediator or mediate for the conditions caused by members. When members have different views, the coordinator makes a joint agreement on the idea that has the most good

goals. In order for the work program to be carried out optimally or smoothly in every implementation, leaders must participate in activities so that they can evaluate each time the activity is completed. Evaluation has the impact of making a community in carrying out subsequent activities even better. Because with evaluation, the goals of a community or organization will be easily achieved [8].

B. Directing

In an effort to provide direction or view that the form of effort is to contribute to giving directions or view the facts, the BPJS conducts direct outreach by inviting the sub-district to attend a meeting with the BPJS. Then the follow-up action of the sub-district informs the kelurahan, so that the sub-district conveys the information to the RT. So that the RT appeals to and invites its community members to participate either through the activities of the puskesmas or pustu in the success of the BPJS program. Then the form of socialization is through print and online media, wa groups and education at health centers and pustu. The BPJS also carries out the process of supervision, compliance and views so that local governments are registered as BPJS participants and their staff and coordinates with local governments. The following is a quote, among others:

"...By disseminating registration procedures, rights and obligations as participants to the public, both directly and through the media (print/online). Then carry out the supervisory process, check compliance with the company so that it registers its workers/employees. As well as coordinating with the regional government in registering workers..." (R.1)

"...Through outreach, inviting, appealing. In addition, the puskesmas is involved in the wa RT group to socialize the services available at the puskesmas..." (R.2)

"...Usually by conducting socialization and education at this puskesmas and pustu..." (R.3)

"...If the sub-district doesn't have a role in giving directions, at best tell the information obtained during the meeting with BPJS..." (R.4)

"...the Kelurahan does not have the authority to give directions or views, we only convey information from the sub-district or from meetings to the RT..." (R.5)

"...We give views or directions to the community in the form of appealing and inviting community members to participate in the BPJS program..." (R.6.1, R.6.2, R.6.3)

"...We only participate in the success of government programs related to BPJS..." (R.7.1)

"...At least get information related to the BPJS program from the RT..." (R.7.2)

"...Only participate in activities if invited by the puskesmas activities that are conveyed by the RT..." (R.7.3)

This is clarified by Syauqi AZ's research. (2020) that in the activity process, the coordinator serves as a supervisor for members when they are doing well in carrying out activities.[8]. Reinforced by the research results of Rukman AT. (2019) found that the importance of the role of coordination is by monitoring coordination indicators. In other words, through communication in two ways, namely oral and written.[9]

C. Coordinate

The form of the coordinator's role in encouraging community participation in the JKN-KIS program is the fact that all stakeholders coordinate, namely the BPJS cooperates with the puskesmas, then the puskesmas coordinates with cross-sectors through musrenbang activities involving sub-districts, sub-districts and RTs. It's just that the community gets information directly from the RT and the BPJS does not work directly with the community. The sub-district coordinates with the kelurahan. Then the kelurahan coordinated with the RT who facilitated the letter of introduction, namely the SKTM, and the RT was only limited to the kelurahan which recorded data on its community members and then gave the data to the kelurahan which was known by the sub-district. So that the sub-district sends it to the social service through the sipaten application, it is submitted to the health office up to the BPJS.

"... Establishing cooperation with all related stakeholders..." (R.1)

"...Coordinate with cross-sectors and be attended by BPJS through meetings, formal and informal meetings..." (R.2)

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"...With the Musrenbang routinely carried out with the lurah, sub-district head, RT and the community..." (R.3)

"...Efforts to coordinate with the village administration, health centers, social services. And our party is involved in the flow of activities of the policy holders..." (R.4)

"...Starting from the RT which facilitated the letter of introduction, it continued to us in the sub-district, it was known by the sub-district, then the social service through an application, the name sipaten was submitted to the health office and then to BPJS..." (R.5)

"...the head of the RT facilitates a letter of introduction, namely a Certificate of Inadequacy (SKTM) and then records the residents of the community. Then the data is given to the village. So that our RT is only limited to kelurahan..." (R.6.1, R.6.2, R.6.3)

"...Maybe all the cooperation is concerned, but we can only get information or anything directly from the RT..." (R.7.1, R.7.2, R.7.3)

This was clarified by Wardani IP. (2022), coordinators should have to work together between agencies, agencies, the smallest units in carrying out certain tasks so that they complement each other, help and complement each other. Thus, coordination as a business capable of aligning the implementation of tasks and activities within an organization. The coordinator also coordinates all community health service efforts and health centers in achieving health goals through collaboration with cross-programs and cross-sectoral. [10]

3. Accelerator

A. Contribution

The form of efforts to accelerate the process of working partners or across sectors is the fact that BPJS only contributes to health facilities that cooperate with each other's obligations to work together through a written agreement. The BPJS does not contribute directly to the community. Then the puskesmas made joint contributions across sectors by participating in formal and informal meetings and meetings as well as building commitment through cross-sectoral coordination meetings so that people could take advantage of services at health facilities using the BPJS card. The sub-district and kelurahan parties contributed by attending invitations to cross-sectoral joint meetings. Then it is the RT who appeals, invites and directs the community members to join the BPJS program. With residents living in the RT area who are the BPJS party or the puskesmas, it makes it easier for RTs to ask for information related to BPJS. And it is the community who will later look for information regarding the BPJS program again through the RT or from neighbors. The following quotes include:

"...There is a written cooperation contract with health facilities, the contract also conveys each other's obligations. Apart from that, we also hold meetings with health facilities..." (R.1)

"...By contributing together across sectors through meetings, formal and informal gatherings..." (R.2)

"...Conducting cross-sector commitment and holding cross-sectoral coordination meetings..." (R.3)

"...The sub-districts contribute together across sectors by participating in attending invitations to cross-sectoral meetings..." (R.4)

"...We at the kelurahan contribute together with the RT and sub-district and attend meetings..." (R.5)

"...You, as the head of the RT, help convey information and urge your residents to join the BPJS program..." (R.6.1)

"...By contributing to helping the BPJS program, such as inviting the community..." (R.6.2)

"...You contribute by directing your residents, then if you have problems contacting the BPJS or the health center that lives in your RT..." (R.6.3)

"...Maybe stakeholders have contributed to each other through the RT which conveys that the community must join the BPJS program to the community. But BPJS does not contribute directly to the community..." (R.7.1)

"...Maybe a contribution by asking the neighbors or the RT for information. If there is no BPJS direct contribution here..." (R.7.2)

"...contributions made by utilizing services at health facilities using the BPJS card..." (R.7.3)

This is reinforced by the research of Widya Nalarita et al. (2017), it should be ideal that in planning expansion, it is better to involve key stakeholders, namely BPJS in all stages of the partnership, including in planning. The forum held by BPJS Health should involve the main stakeholders, namely the community in it. Another thing included in partnership planning is whether the partnership uses or does not use an agreement. The written agreement with the partner puskesmas outlines what contribution each member will make and what the partner will receive. The partnership in expanding JKN membership has an MoU and SK. [11]

B. Collaboration

The form of stakeholder cooperation through BPJS is to enter into cooperation agreements with health centers and collaborate with local governments such as sub-districts and urban villages which provide information obtained during meetings. Kelurahan collaborates with RT to RT collaborates with the community. Strengthened according to the community regarding the form of stakeholder cooperation through participating in the success of the policies set and being involved in activities. The following are excerpts from his interviews:

"...Through a cooperation agreement with the rules that have been set. Then collaborate with the regional government so that the extensions of the regional government, such as the sub-district and sub-district, must really understand that when an agreement is reached, the direction of the regional government must be carried out..." (R.1)

"...There is a contractual cooperation agreement with BPJS regarding what will be done and what will be achieved in the next year. And involve other cross-sectors in activities..." (R.2)

"...Involve stakeholders in running a puskesmas program. The BPJS and the puskesmas always have a cooperation agreement once a year..." (R.3)

"...The sub-district only attends meetings which are often invited by the health and social services. Then the information obtained is conveyed to the kelurahan and continues to be distributed to the RT and the community..." (R.4)

"...Kelurahan collaborates with RTs and the government that supports these activities. The lurah's relationship with the RT is an extension of the hand. So the role of the lurah to the RT is only an administrative letter..." (R.5)

"...RT collaborates with the kelurahan, because from the RT they get information and report their community data to the kelurahan so that from the kelurahan it is submitted to the social service..." (R.6.1, R.6.2)

"...Participate in supporting BPJS program activities carried out with other relevant governments. The government must be able to collaborate and cooperate with small parties because all of them will need each other..." (R.6.2)

"...At least we participate in the success of the policies set and participate in activities if we are involved by the government..." (R.7.1, R.7.2, R.7.3)

This is inconsistent with Saputra's research (2020) which states that collaboration must involve collaboration between stakeholders who have an interest so that the implementation does not face challenges or fail. Problems in the development of tourist villages occur because there is no good collaboration between the government and the community. [12] This is in accordance with the research of Kurhayadi et al. (2020) that the collaboration process at BPJS is through face-to-face dialogue by holding meetings between stakeholders, Commitment in the collaboration process and Having a shared understanding between the government and the community. [13]

4. CONCLUSION

This research shows that the role of stakeholders as facilitators, coordinators, accelerators and evaluators in the implementation of the JKN-KIS program is good, but good understanding is still needed between the government and the community. The head of the RT can convey information in a language easily understood by residents and invite the public to join JKN-KIS.

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