

# Implementation of Hypertension Service Monitoring Policy at Siulak Gedang Community Health Center, Kerinci Regency

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## ABSTRACT

The regencies in Jambi Province with the highest prevalence of hypertension are Kerinci Regency with a figure of 37.74%, Sungai Penuh Regency 33.92%, and Tanjung Jabung Timur 33.82%. The incidence of hypertension in the elderly has increased over the past three years, according to data from the Siulak Gedang Health Center. According to data from January-May 2022, the prevalence of hypertension in the elderly increased significantly in 2022, reaching 1,501 people. The informants in this study were the Head of the Siulak Gedang Health Center, Hypertension Officers, and Hypertension Patients. This study was conducted in October-December 2023. From the triangulation data with informants through monitoring and evaluation carried out, it was found that the implementation of the monitoring and evaluation policy for hypertension services at the Siulak Gedang Health Center had been carried out properly and in accordance with the Regulation of the Board of Directors of the Health Social Security Administration Agency Number 0118 of 2014 concerning Clinical Guidelines for the Management of Hypertension Disease, however, the implementation of hypertension services has not been carried out optimally and of course still requires maximum monitoring and evaluation by related parties in the implementation of hypertension services, so that hypertension officers are able to carry out promotive efforts in hypertension services properly and optimally in order to improve the health welfare of hypertension sufferers.

## Keywords:

*Implementation, monitoring, and hypertension*

## INTRODUCTION

Human blood pressure can scientifically change at any time. Blood pressure will be problematic if it exceeds the (persistent) blood pressure limit or what is commonly called hypertension, and if this happens, the organs and circulatory system will get pressure towards the heart which becomes tense. A person is said to have hypertension if their blood pressure exceeds the provisions of 140 mmHg and diastolic exceeds 90 mmHg. In Indonesia, hypertension is included in the priority in terms of prevention (Alfeus, 2019). According to WHO (World Health Organization) data, cases of hypertension have shown that around 1.13 billion people in the world suffer from hypertension, which means that every 1 in 3 people in the world are diagnosed with hypertension, and only around 36.8% of them take medication. The number of people with hypertension in the world continues to increase every year. It is estimated that in 2025 there will be 1.5 billion people with hypertension and every year there are 9.4 million people who die due to hypertension (Purwono, 2020).

According to data obtained from Riskesdas in 2018, the number of hypertension based on measurement results in the population aged over 18 years and above based on Province reached 34.1%. This figure has increased since 2013, which was 25.8%. The largest

number is known to be in South Kalimantan Province at 44.1% and the smallest number in Papua Province at 22.2% (Riskesdas, 2018).

The incidence of hypertension in the elderly has increased over the past three years, according to data from the Siulak Gedang Health Center. In 2020, 879 elderly people were diagnosed with hypertension. The number of elderly people suffering from hypertension decreased to 791 in 2021. According to data from January to May 2022, the prevalence of hypertension in the elderly increased significantly in 2022, reaching 1,501 people (Siulak Gedang Health Center, 2022). In terms of hypertension services, the Government has issued Regulation of the Board of Directors of the Health Social Security Administration Agency Number 0118 of 2014 concerning Clinical Guidelines for the Management of Hypertension. The general objective of the regulation is to implement efficient and effective hypertension management in an effort to reduce morbidity and mortality due to hypertension and cardiovascular disease in general. And the specific objective of the regulation is to implement widespread promotive and preventive efforts for hypertension. Implementation of intensive early detection efforts for hypertension. The implementation of effective, efficient, up-to-date and based non-pharmacological and pharmacological management of hypertension for all hypertension patients in primary care. The availability of easily accessible and sustainable health services for hypertension patients throughout Indonesia. The availability of health services and health funders in making plans for hypertension control programs and chronic infectious diseases in general.

## LITERATURE REVIEW

The best alternative that influences a decision in various in-depth analysis results is the understanding of policy. The rules that serve as guidelines and basic references in the leadership process related to behavior (government or organization), goals, statements of ideals, principles used as a guide in business management that aims to achieve predetermined goals. A number of decisions are made and accounted for in certain fields, such as health, education and the environment (Gurning, 2018).

Policy analysis is a social applied science that is used as a way to carry out scientific approach methods, opinions that are created and maintained to produce information and transfer information wisely. Policy analysis is information in formulating policies or efforts to "find out" in depth matters related to how to make policies, such as activities to explore or find out specifically how the causes, impacts, and processes of policy making are then presented to people who make decisions and policies with the aim of being able to produce good policy analysis. This makes the means and application of analysis useful in policy making (Pratama, 2013).

According to Ayuningtyas (2014), in formulating a policy, policy makers must be able to distinguish between the policy process and policy content analysis. This is because the two have differences, where the policy process only focuses on the policy framework alone, while policy content analysis is more directed at the material that will be formulated in the policy and links it to various previous policies or policies related to it and ensures that the policy has an impact that leads to the creation of good health status.

Basically, the implementation of a policy is an action that is expected so that the policy can achieve its goals. According to Nugroho (2014) there are two steps in implementing a public policy, namely the first step is to implement it directly through the channels of established programs, while the second step is through the formulation of derivative policies, namely derivatives of the public policy.

Monitoring and Evaluation, consist of two different words and have different meanings. Monitoring is the process of supervising the implementation of a policy which includes the relationship between implementation and its results. Monitoring is an activity carried out to see the series of implementation of an activity which is then identified with the aim of taking preventive measures against problems that arise or have the potential to arise (Solihin, 2015). According to Sudirman (2019) Monitoring provides feedback to program managers regarding efforts to improve operational plans and to take corrective action. Indicators can be used to measure target achievement, measure changes/trends in health status compared to achievement levels between

work areas or project environments.

Evaluation in this case can be interpreted as a form of activity to collect information related to certain performance. In addition, evaluation actions are activities that aim to analyze and measure activities that have been carried out, systematically and objectively. Without evaluation, it is certain that a policy will not be able to run effectively (Arikunto and Cepi, 2014).

Hypertension is a disease with signs of systolic and diastolic blood pressure disorders that rise above normal blood pressure. Systolic blood pressure (top number) is the peak pressure reached when the heart contracts and pumps blood out through the arteries. Diastolic blood pressure (bottom number) is taken when the pressure drops to its lowest point when the heart relaxes and refills with blood. Diastolic blood pressure is recorded when the sound is not heard (Masriadi, 2016).

Blood pressure is influenced by stroke volume and total peripheral resistance. If there is an increase in one of these variables that is not compensated, it can cause hypertension. The body has a system that functions to prevent acute changes in blood pressure caused by circulatory disorders and maintain long-term blood pressure stability. The blood pressure control system is very complex. Control begins with a rapid reaction system such as cardiovascular reflexes through the nervous system, chemoreceptor reflexes, ischemia responses, the central nervous system originating from the atrium, and pulmonary artery smooth muscle (Nuraini, 2015).

## METHODS

This study is a mixed methods study, according to Sugiyono (2019) mixed methods. The location of the study was carried out in the Siulak Gedang Health Center Working Area, Siulak District, Kerinci Regency, conducted in October-December 2023. The qualitative population in this study were all people who were considered to know about the implementation of hypertension service policies in the Siulak Gedang Health Center Working Area, Siulak District, Kerinci Regency. While the quantitative population is data on visits by hypertension patients at the Siulak Gedang Health Center, Siulak District, Kerinci Regency. The sample in this qualitative study was the head of the Health Center and the person in charge of implementing the hypertension service policy.

## RESULTS

**Table 1. Characteristics of Research Informants**

No.	Informant	Gender	Last education	Position
1	Informant 1	Male	S1	Head of health center
2	Informant 2	Female	S1	Officer hypertension service
3	Informant 3	Male	Elementary school	Sufferer of Hypertension I
4	Informant 4	Male	High school	Sufferer of hypertension II

Data collection was conducted using interview guidelines for informants who were used as research sources. The number of informants in the study was 4 people. The informants were, 1 Head of the Siulak Gedang Health Center, 1 Hypertension Service Officer and 2 Hypertension Patients.

**Table 2. Interview Results Regarding SK and Training on Monitoring and Evaluation of Hypertension Services**

Informant	Statement
Informant 1 head of center	Not a Certificate, but a certificate. That is a certificate of health center management training, not hypertension services. Monitoring hypertension services is indeed my obligation as a leader here so that officers carry out their duties properly.

Informant 2 Hypertension Officer	As for the SK that you received in hypertension services, there is none, and you have never participated in hypertension service training. So far, I have only been an officer because of instructions from my superiors, so I just carry out the instructions.
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Siulak Gedang Health Center is led by a doctor who has worked for 12 years. The holder of the hypertension service program is a doctor who is the holder of the Non- Communicable Disease (PTM) program. The personnel who act as hypertension officers are also holders of the Non-Communicable Disease (PTM).

**Table 3. Interview Results Regarding Resources (Special Officers) in Monitoring and Evaluation of Hypertension Services**

Informant	Statement
Informant I Head of Health	Center The person responsible for hypertension services is the person who holds the PTM program.
Informant 2 Hypertension Officer	Yes, as the person who holds the PTM program, here you also serve as a hypertension officer
Informant 3 Hypertension Sufferer	Hypertension Sufferer There is a woman who checks my father, but my father doesn't know her name
Informant 4 Hypertension Sufferer	What is her name? She is the one who checks my blood pressure when my father is at the Health Center. She is also the one who gives me medication to lower my blood pressure.

From the results of the interviews conducted, it is known that the Siulak Gedang Health Center has provided Health Workers for hypertension services. However, in its implementation, Non-Communicable Disease Program Holders (PTM) also act as hypertension officers. And if observed, this will have an impact on patient knowledge regarding how to prevent hypertension.

**Table 4. Interview Results Regarding Resources (Special Officers) in Monitoring and Evaluation of Hypertension Services**

Informant	Statement
Informant I Head of Health	The facilities and amenities include blood pressure monitors, medicines. And that has indeed been provided by the relevant party, in terms of inventory, it is still being carried out by the assigned team.
Informant 2 Hypertension Officer	As for the facilities, what are they, most likely the blood pressure monitor, bench, table, medicines.
Informant 3 Hypertension Sufferer	The blood pressure monitor is a regular one, but it's not like the old ones. It's a bit sophisticated, the officer no longer measures your blood when you're being examined, but the device is there directly.
Informant 4 Hypertension Sufferer	Yes, the blood pressure monitor is a bit damaged, you just have to press it

Based on the results of the interviews conducted, information was obtained that the provision of

facilities and infrastructure in hypertension services was good.

**Table 5. Interview Results for Inventory of Hypertension Services Facilities and Infrastructure**

<b>Informant</b>	<b>Statement</b>
Informant 1 Head of Health	Usually, inventory or recording of the use of facilities and infrastructure is carried out by the inventory team, the aim is to make it clear which facilities need to be repaired. So input is also so that we care more about visitor comfort.
Informant 2 Hypertension Sufferer	For inventory recording, we usually report this to the Head of the Health Center, so that damaged facilities and infrastructure can be repaired. But so far we have not reported anything because according to what you see, the facilities and infrastructure in hypertension services are still fairly good.

Based on the results of the interviews conducted, it can be seen that recording of the use of facilities and infrastructure has been carried out properly, however, the recording and reporting process is still carried out manually, so that hypertension services are hampered.

**Table 6. Interview Results Regarding Resources (Special Officers) in Monitoring and Evaluation of Hypertension Services**

<b>Informant</b>	<b>Statement</b>
Informant I Head of Health	In terms of monitoring, I don't always participate in it. At most, if there are no other events or activities, I will monitor. Have the activities carried out been carried out according to procedure or not? If not, I will give instructions to the officers to carry out their duties properly. But so far I think it's been quite good.
Informant 2 Hypertension Officer	Yes, Sis, it's not always the case that the Head of the Health Center participates, because he is busy with other matters, so it's only natural. You could say that I and my other colleagues are the ones who monitor this hypertension service more often. And if there are any obstacles that we experience, then we report it to the Head of the Health Center.
Informant 3 Hypertension Sufferer	No, Sis, I have never seen the Head of the Health Center visiting the hypertension service activities. There was only the officer.
Informant 4 Hypertension Sufferer	I have, but that was a long time ago. I forgot when, but at that time the Head of the Health Center gave input to the officer.

Based on the results of in-depth interviews conducted, it is known that the Monitoring carried out by the Head of the Health Center has been carried out quite well. However, in the implementation of monitoring it is still carried out haphazardly, this is due to the busyness of the Head of the Health Center in monitoring other activities at the Health Center.

**Table 7. Interview Results Regarding Barriers in Monitoring and Evaluation of Hypertension Services**

<b>Informant</b>	<b>Statement</b>
Informant 1 Head of Health	The obstacle in hypertension services is that many people do not want to come routinely to check their blood pressure and they seem lazy to get regular treatment.
Informant 2 Hypertension Officer	So far, there are no obstacles, patients come routinely and we always do check-ups. We also give them medicine. But sometimes there are still many hypertension sufferers who rarely want to get treatment and check their blood pressure.
Informant 3 Hypertension Sufferer	You don't understand how to prevent hypertension, so you go to the Health Center for treatment if you feel your blood pressure has increased. If you take medicine, your blood pressure will return to normal.
Informant 4 Hypertension Sufferer	There are no obstacles, but sometimes you are not satisfied with the treatment, because the medicine is always the same, and you are also confused by what the officer says, you don't understand. But even so, you still get treatment routinely, because you want to save your life

Based on the results of the interview, it is known that obstacles in the implementation of hypertension services still occur, such as hypertension sufferers who do not understand how to prevent hypertension. This is because the information provided by hypertension officers is considered unclear by hypertension sufferers.

**Table 8. Interview Results Regarding Examination For Possible Complications**

<b>Informant</b>	<b>Statement</b>
Informant 2 Hypertension Officer	As a hypertension officer, you have conducted a complication examination, but it is not always done because it is done if the situation is urgent. For example, if the patient is experiencing excessive complaints. Well, that's when we will



	conduct a complication examination.
Informant 3 Hypertension Sufferer	Never before, so far I have only had regular blood tests. Then I was given blood-lowering medication.
Informant 4 Hypertension Sufferer	Sorry, I don't understand what a complication examination is. I know that when you seek treatment, you only have your blood checked, and if you are already sick, the officer will give you a referral to be treated at the hospital.

Based on the results of in-depth interviews conducted by several informants, it was discovered that examinations for possible complications had been carried out, but in practice they had not been carried out optimally.

**Table 9. Interview Results Regarding Hypertension Service Process (ECG and Thorax X-ray Examination)**

Informant	Statement
Informant 2 Hypertension Officer	For EKG examinations, it is not necessarily done often once every 3 months, looking at the condition. For example, if the patient is really close to experiencing complications. If not, then just check the blood and give regular medication.
Informant 3 Hypertension Sufferer	Never, for the handling of blood pressure checks that I have received so far, it is only checking blood pressure using a blood pressure device, when the blood pressure is finished, then wait for a call from the pharmacist to be given medication.
Informant 4 Hypertension Sufferer	Never been checked like that, maybe because the high blood pressure is not too severe. So, so far, you just come, check, give medication, then go home.

From the results of the interviews that have been conducted, it was found that in the implementation of a program, various activities need to be carried out. The things that are done during hypertension services at the Siulak Gedang Health Center include registration, examination, and administration of medication to patients. However, in terms of EKG and Thorax X-ray examination services, so far they have been carried out, but in determining the time of implementation, it is still less certain.

Based on the results of in-depth interviews conducted by several informants, it was discovered that examinations for possible complications had been carried out, but in practice they had not been carried out optimally.

**Table 10. Interview Results Regarding Physical Examination Before Performing Blood Pressure Test**

Informant	Statement
Informant 2 Hypertension Officer	Yes, so far in terms of physical examination, it is done during the blood pressure check process, there is no other physical examination. Using a blood pressure monitor, if the blood pressure is high we give blood pressure lowering medication.
Informant 3 Hypertension Sufferer	The doctor checked his blood, using a sophisticated blood pressure monitor that is not like a regular blood pressure monitor, but sometimes I am a little hesitant to have my blood pressure checked using that device because I trust the manual blood pressure monitor more.

Informant 4	The examination was just a normal examination,
Hypertension Sufferer	but that day my father had been treated, the doctor just gave him medication and didn't check his blood pressure again, maybe because my father's blood pressure had often gone up, that's why they were like that. And at that time the health center was also busy, so the doctor was busy. Yes, my father understood that

Physical examination before performing blood pressure check has been done every time hypertension service is intended using a sphygmomanometer, however it has not been done properly and must be supervised more by superiors so that this does not happen again.

**Table 10. Interview Results Regarding the Results of Hypertension Service Monitoring and Evaluation**

<b>Informant</b>	<b>Statement</b>
Informant I Head of Health	Our hope is that the number of hypertension sufferers will decrease, and that hypertension sufferers will be healthy.
Informant 2 Hypertension Officer	Regarding the results of this hypertension service, the monitoring that we do is like giving medication, in giving medication we recommend that hypertension sufferers diligently check their blood pressure, at least 3 times a day. And so far, the community, especially those suffering from hypertension, are willing to go to the health center for treatment. However, in terms of evaluation, we have not done that
Informant 3 Hypertension Sufferer	Your blood pressure has indeed decreased after checking and taking medication. But sometimes you are lazy to get treatment.
Informant 4 Hypertension Sufferer	Anyway, if you start to feel severe dizziness, then go to the health center for treatment and check-up, because if you take medication, your blood pressure will continue to drop. You don't understand how to prevent this disease, so you just get a headache and a little bit of a heavy neck and then get treatment. Because you don't know how, if you know, maybe you can try it at home, so you will be healthy. Sometimes you are tired of taking medication all the time.

Based on the results of the interviews conducted, it is known that the results obtained from hypertension services have been running quite well. However, it is still necessary to carry out maximum monitoring so that hypertension sufferers better understand the risks of hypertension and diligently check their blood pressure at the Health Center.

## DISCUSSION

Guidelines for the implementation of monitoring and evaluation of hypertension services are one form of reference for health workers or other medical personnel who have the responsibility to reduce the number of morbidity and the number of cases due to hypertension in accordance with the provisions of laws and regulations. Guidelines for the implementation of monitoring and evaluation as stated clearly in the attachment which is an inseparable part of the Regulation of the Board of Directors of the Health Social Security Administration Agency Number 0118 of 2014. In this case, coaching and supervision in the implementation of monitoring and evaluation of hypertension services are carried out by related parties such as the Ministry of Health Apparatus,



Provincial Health Office, and Regency/City Health Office in accordance with their respective functions, authorities and duties.

The implementation of the Hypertension Service Monitoring and Evaluation Policy at the Siulak Gedang Health Center has not gone as expected due to the minimal number of Health Workers and Training for Health Workers in handling hypertension patients, especially monitoring and evaluation of hypertension services. In this case, the Siulak Gedang Health Center has carried out monitoring and evaluation, but evaluation activities are only carried out 4 times in 1 year.

The process is an activity that functions to change an input into the expected result. Input can also be interpreted as steps that must be taken to achieve the goals that have been set. This process is known as the function of administration. In general, the process or function of administration is the responsibility of the leader. The process of hypertension services at the Siulak Gedang Health Center is considered not to have met the established standards, where in hypertension services it is still found that the implementation of hypertension services has not maximized promotive efforts. Obstacles in hypertension (counseling) that occur because the counseling provided by health workers is not clear and detailed, and EKG and Thorax X-ray examinations are not necessarily carried out once every 3 months. This greatly affects public knowledge about the dangers of hypertension risk. because if the counseling goes well, then it is certain that sufferers will understand the process of preventing hypertension and will be diligent in checking their blood pressure at the Health Center (Gurning, 2018). In monitoring and evaluation services, it is appropriate for officers to carry out a good and responsive process, in order to improve health services.

Output is the result of a process. In the health service system, the results can be in the form of quality, effective and efficient health services that can be reached by all levels of society. However, at the Siulak Gedang Health Center, the results were not satisfactory, where there were still many hypertension sufferers who did not even know how to prevent hypertension and what risks would arise. This was due to the lack of promotive personnel in efforts to prevent hypertension when hypertension counseling was carried out (Gurning, 2018). If the implementation of hypertension services is good, then it is certain that officers will provide hypertension services in a quality manner and will produce good and professional services.

Impact is the result of a system (output), for example the impact that will become a healthy society and reduce morbidity and mortality rates due to affordable health services for the community. This increase in health levels can only be achieved if the needs and demands of individuals, families, and groups in health services can be met. At the Siulak Gedang Health Center, the impact that was produced was the failure to achieve the target hypertension index that had been set (Gurning, 2018). The impact resulting from monitoring and evaluation of hypertension services is the target hypertension index.

## CONCLUSION

The input in monitoring and evaluation of hypertension services at the Siulak Gedang Health Center has been seen to be quite good. However, communication and information conveyed by officers still experience errors so that hypertension sufferers do not understand how to prevent and control the risk of hypertension. The process of monitoring and evaluating hypertension services at the Siulak Gedang Health Center has been carried out well following the hypertension service guidelines, but it has not been implemented optimally due to several specific things. The results of monitoring and evaluating hypertension services at the Siulak Gedang Health Center, hypertension sufferers have received good hypertension services, but not according to standards. Where there is still a lack of promotive efforts from officers related to the risks and prevention of hypertension. The impact resulting from monitoring and evaluating hypertension services at the Siulak Gedang Health Center is the lack of achievement of the hypertension index target, where the expected index is 100%, but the Siulak Gedang Health Center only gets 70%. This is known based on the fact that there are still many sufferers who do not routinely perform a blood pressure check.

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