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ORIGINAL

Analysis of the Implementation of the Local Government Information System in the Health Sector at the Health Office of Teluk Wondama Regency, West Papua

Análisis de la implantación del sistema de información del gobierno local en el sector sanitario en la oficina de salud de la regencia de Teluk Wondama, Papúa Occidental

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ABSTRACT

Planning for programs in the health sector is the main focus in developing better human resources so that the implementation of every planning and budgeting in programs in the health sector can run very effectively and on target, starting from the recording system to reporting in the application of government information systems in the regions. The purpose of this study aims to analyze the implementation of the Regional Government Information System (SIPD) in the health sector at the Teluk Wondama Regency Health Office, West Papua. The results of the input research on Human Resources are still inadequate, the input has not been maximized due to the lack of understanding and training of program managers on the nomenclature of activities in the application, there is a difference between the proposed activity program from the field and the nomenclature of the program in the health sector, the delivery of information through meetings, letters and whatsapp groups, the Procedural Operational Standards for the program proposal process in OPD are not yet available, including the proposal for the Health sector program at the Health Office. The process still needs to develop the system, the appointment of bureaucracy affects the implementation of SIPD and does not have an impact on human resource incentives. The ouput element is still necessary in terms of meeting the needs and specifications of the SIPD design. Feedback related to Communication runs well and coordinates with each other. Conclusion. Improvement efforts are to increase the capacity of human resources both involved in the management and operation process of SIPD and fields and sections that should propose activity programs in the health sector, socialization to program managers if there are changes to the nomenclature of programs in the health sector in the SIPD application, conduct monitoring processes, and evaluate periodically and regularly the implementation of the SIPD application and provide special training for SIPD application users.

Keywords: Local Government Information System; Health Office; Policy; Human Resources; Regional Apparatus Organization.

RESUMEN

La planificación de programas en el sector sanitario es el eje central del desarrollo de mejores recursos

humanos, de modo que la implementación de todos los planes y presupuestos en los programas del sector sanitario pueda llevarse a cabo de manera eficaz y acorde con los objetivos, desde el sistema de registro hasta la presentación de informes en la aplicación de los sistemas de información gubernamentales en las regiones. El objetivo de este estudio es analizar la implementación del Sistema de Información del Gobierno Regional (SIPD) en el sector sanitario de la Oficina de Salud de la Regencia de Teluk Wondama, en Papúa Occidental. Los resultados de la investigación sobre los recursos humanos son aún insuficientes, ya que no se ha aprovechado al máximo la información disponible debido a la falta de comprensión y formación de los gestores de programas sobre la nomenclatura de las actividades en la aplicación. existe una diferencia entre el programa de actividades propuesto desde el terreno y la nomenclatura del programa en el sector sanitario, la transmisión de información a través de reuniones, cartas y grupos de WhatsApp, y las normas operativas de procedimiento para el proceso de propuesta de programas en la OPD aún no están disponibles, incluida la propuesta para el programa del sector sanitario en la Oficina de Salud. El proceso aún necesita desarrollar el sistema, la designación de la burocracia afecta a la implementación del SIPD y no tiene impacto en los incentivos de los recursos humanos. El elemento de salida sigue siendo necesario en términos de satisfacción de las necesidades y especificaciones del diseño del SIPD. La retroalimentación relacionada con la comunicación funciona bien y se coordina entre sí. Conclusión. Las medidas de mejora consisten en aumentar la capacidad de los recursos humanos que participan en el proceso de gestión y funcionamiento del SIPD y en los ámbitos y secciones que deben proponer programas de actividades en el sector de la salud, socializar con los gestores de programas si se producen cambios en la nomenclatura de los programas del sector de la salud en la aplicación del SIPD, llevar a cabo procesos de seguimiento y evaluar periódica y regularmente la aplicación del SIPD, así como impartir formación especial a los usuarios de la aplicación del SIPD.

Palabras clave: Sistema de Información del Gobierno Local; Oficina de Salud; Política; Recursos Humanos; Organización del Aparato Regional.

INTRODUCTION

The Regional Government Information System (SIPD) is useful in realizing One Data Indonesia where the Regional Government Information System (SIPD) becomes a forum for unifying Planning and Financial References throughout Indonesia, Connecting Development Planning data , Regional Financial Budgeting for Districts / Cities and Provinces , Facilitating Policy Synchronization at the Provincial level to Districts / Cities, Providing Access to Ministries or Institutions to be able to see the Direction of Development Policy in the Region.[1]

This further strengthens the position of SIPD as a reference material in the process of compiling regional development planning documents. However, the use of the SIPD application as a reference in compiling regional development planning documents is focused on the utilization of information generated based on data processing that has been inputted by the regional government.[2]

Basically, SIPD summarizes the process of compiling regional planning documents as a tool in providing data for data processing and information, evaluation of previous period achievements, RT/RW review, analysis of strategic issues, analysis of general description of regional conditions, analysis of regional financial economy. So that in the preparation of regional planning documents during preparation, initial drafts and designs can be guided by SIPD which will then be continued in musrenbang, final drafts, to regional regulations. The occupancy of SIPD in its implementation can be measured through the level of data occupancy.[1]

Relevant research that reveals the role of SIPD as part of regional planning has been conducted by [3] which concluded that the implementation of SIPD will be very important in supporting regional development planning which is carried out through various stages such as the initial design preparation stage, implementation of musrenbang, formulation of the final design and determination of the plan in the form of Regional Regulations (Perda).

This is also in line with the concept put forward by [4] stating that implementation is the operationalization of a series of activities in achieving certain targets and touches all levels of management, from top management to employees at the lowest level.

Teluk Wondama Regency Government is one of the Regional Government organizations for public health services with the most units in the government system so that it requires planning to implementation of each program very effectively and on target starting from the recording system to reporting in the government information system in the region. With the SIPD application, it can support the determination of priority problems in the Health Office in order to improve the quality of public policy products.[5]

Regulation of the Minister of Home Affairs (Permendagri) number 86 of 2017, concerning the procedures for Planning, Controlling, and Evaluation of Regional Development, Procedures for Evaluation of Draft Regional

Regulations for Regional Long-Term Development Plans and Procedures for Amendments to Regional Long-Term Plans, Regional Medium-Long Development Plans and regional government work plans, the Health Office must have a quality Strategic Plan (Renstra) and Work Plan (Renja) that refer to the Permendagri. Based on data from the Planning Bureau of the Ministry of Health of the Republic of Indonesia in 2023, Teluk Wondama Regency is one of the regencies that does not yet have data on the conformity between Renja, Renstra which refers to Permendagri 86 of 2017.

The process of preparing program activity planning at the Health Office begins with data and community proposals in the health sector. The village, district and regency level development planning meeting (Musrenbang) is discussed at the provincial level which is then combined with health program targets referring to the draft Renstra containing the vision, mission, goals and targets of the health program. Program planning proposals must be in accordance with the priority scale, in order to obtain an effective and efficient budget. In addition, the preparation of planning, determination, and realization of the budget experience constraints on the quality and quantity of human resources (HR).[6]

The elements that support the SIPD implementation process in the District/City Health Office are effective and targeted forms of communication, human resources involved in program implementation, clear top-down disposition, good bureaucratic structure in regulating each health-related program that can be accessed through digital or manual information systems.[7]

Although it has become a government program, in the implementation process, SIPD is still not optimal and its use is not yet effective, it can be seen that communication between superiors and subordinates regarding programs and reporting in the form of SIPD is not clear so that sometimes it does not run smoothly, in addition, the rigid bureaucratic structure makes the implementation of policies in the form of administration inflexible. The recruitment system for operators as human resources in the implementation of the SIPD use process is also a concern in the Health Office where performance improvement training should be carried out in the implementation of Job descriptions for program managers. Based on the problems above, the author intends to conduct research entitled Analysis of the Implementation of the Regional Government Information System (SIPD) at the Teluk Wondama Regency Health Office, West Papua.

METHOD

The type of research used in this study is qualitative research. The purpose of this study is to analyze the implementation of the Regional Government Information System (SIPD) in the Teluk Wondama Regency Health Office, West Papua. This study uses *purposive sampling* , namely the determination of data sources is selected based on consideration of certain objectives. The number of informants in the study was 8 (eight) people consisting of key informants and supporting informants.

RESULTS

In this study, the researcher used an in-depth interview technique. The informants in this study were those involved in the health budget planning process and the implementation of the Regional Government Information System (SIPD) in the Teluk Wondama Regency Government, West Papua, consisting of 8 people. The characteristics of the information in the study are as follows:

No.	Initials of Name	Gender	Position
Table 1. Informant Characteristics Based on Gender and Position			
1	HLM	Man	Head of Monitoring and Evaluation Control Section, Bappeda
2	CTR	Man	Head of Bappeda Monitoring and Evaluation Division
3	AMR	Man	Head of Bappeda
4	DW	Man	Head of Budget Division of BKAD
5	HZN	Man	Head of Budget Section of BKAD
6	ALF	Man	Head of Planning Sub-Division of Wondama Health Office
7	HBL	Man	Head of Wondama Health Service
8	SMS	Man	SIPD Operator
Source: Primary Data 2024			

Based on table 1 above, it can be seen that the informants in this study were 2 informants from the Health Service, 3 informants from Bappeda, 2 informants from BKAD, and 1 SIPD Operator.

Input
Resource
Staff

Staff in this case is the number of HR or policy implementing staff seen from the adequacy or even limitations, whether the number of HR who become Adequate Operators, whether HR has sufficient skills and competence in implementing and using the SIPD application and how the local government recruits HR in the implementation of SIPD so that later what must be done is to improve the skills/abilities of the implementers to carry out the program and there needs to be good HR management in order to improve program performance. The following is an excerpt from the interview results conducted in the study:

"Human resources are not appropriate or lacking, not only in the health service but also in other OPDs." (AMR, Head of Bappeda)

"Limited human resource mastery results in a lot of incorrect input." (DW, Head of Budget Division of BKD)

"So far, there has been enlightenment from the local government for operators, both regarding obstacles and sub-section heads, because it is indeed the job of the local government to provide enlightenment. Training is always available, this year it has only been implemented once. Every year there is, last year it was also once. The recruitment process is carried out by each OPD " (HLM, Head of Control Section for Bappeda Monev)

''Health human resources are still lacking because SIPD was indeed formed to be implemented during the Covid period so that coaching or training by both the local government and the Ministry of Home Affairs is still very limited and also tutorials on YouTube for independent learning are also lacking so that the use of SIPD in general OPD in Teluk Wondama Regency is minimal, it can be said that it is still below 20 %'' (DW , Head of Budget Division of BKAD)

The results of the informant interviews above show that there are shortcomings and incompatibilities in the existing human resources and that recruiting human resources is carried out by each OPD, then from the results of the interviews, the mastery of SIPD input in each OPD is still not optimal, even though training is carried out once a year periodically.

Information

The information in this study is related to the socialization of SIPD, the conformity between the information system in SIPD can be synchronized in the data of regional planning proposals, especially in the Health Office where the implementation of policies, information has two forms, namely: first, information related to how to implement policies. Second, information regarding compliance data from implementers to regulations and government regulations that have been set. The following is an excerpt from an interview with an informant:

"The process of delivering information is delivered in the form of a letter or via a WhatsApp group. Finance receives information from Bappeda regarding the readiness proposals that have been made. Planning proposal data through Bappeda, then in the finance section" (HZN, Head of Budget Section BKAD).

"The process of delivering information is delivered to the planning sub-section head or representative during the implementation of socialization." (DW, Head of Budget Division of BKAD).

"Socialization is delivered in meetings, in the form of a WhatsApp group that we share, delivered when the planning process is underway. The proposed data is sometimes not appropriate because it follows the old Permendagri, but we fix it if a problem is found, delivered to each OPD." (HLM, Head of Bappeda Monitoring and Evaluation Control Section)

The results of the informant interviews above show that the process of delivering information was carried out well through meetings, in the form of letters and also distributed through WhatsApp groups. The information was delivered during the planning process even though the proposed data was not appropriate because it had not been updated.

Authority

The process of delegating inputting planning proposals to SIPD operators, how the verification of proposals is carried out by BAPPEDA and how the process of providing the Budget for the Health Service planning proposals. The following are the results of interviews with informants:

"The delegation process for input has not been carried out to SIPD, the verification process has not been entered because it has only entered the proposal input stage, then related to the provision of the budget has not been carried out by Bappeda, because the proposal stage is only for the DAK fund proposal." (AMR, Head of the Planning Sub-Division of the Wondama Health Office).

"The input process is carried out by the OPD directly or an operator appointed by the agency. The verification process is carried out by finance as a whole, but if there is a difference in data, the OPD is called and directed to make improvements. Determination of budget provision is carried out by Bappeda." (HZN, Head of Budget Section BKAD).

The results of the informant interviews above obtained that the process of delegating input was given authority to each OPD, for now the health office has not carried out the delegation process to SIPD for input, which is currently being carried out is the proposal input stage. Then for the verification process carried out by the finance department and the TAPD team. Furthermore, the provision of the budget is carried out by Bappeda based on the priority scale grate.

Facility

Facilities to implement policies/programs are there equipment available to support the implementation of SIPD (computer equipment, wifi, Internet, Software available or not). Without these facilities, it is impossible for the program to run. The following is an excerpt from an interview with an informant:

" In terms of facilities, we are actually online-based, not an application that requires us to sit in one place, no. For example, if you want to work anywhere, this is the advantage for SIPD, but for special facilities, for example those provided by the local government so far, there are none, because this application is online-based. That is from the center. From here, we provide wifi, for input. We do not budget for wifi separately, everything is centered in the budgeting infocom." (HLM, Head of Control Section for Bappeda Monev).

"Wifi network, internet, available from Kominfo." (AMR, Head of Bappeda).

"The available equipment is in the form of wifi, infocus, tables. The budget provision is specifically for coaching and during input activities it is attempted to be sufficient and adjusted to the regional financial conditions." (HZN, Head of Budget Section BKAD).

The results of the informant interviews above show that the availability of facilities to support the implementation of SIPD includes wifi and internet, the budgeting of these facilities is not budgeted separately or specifically, the budgeting of facilities is centered on Infokom. This can be seen in figure 1, as follows:
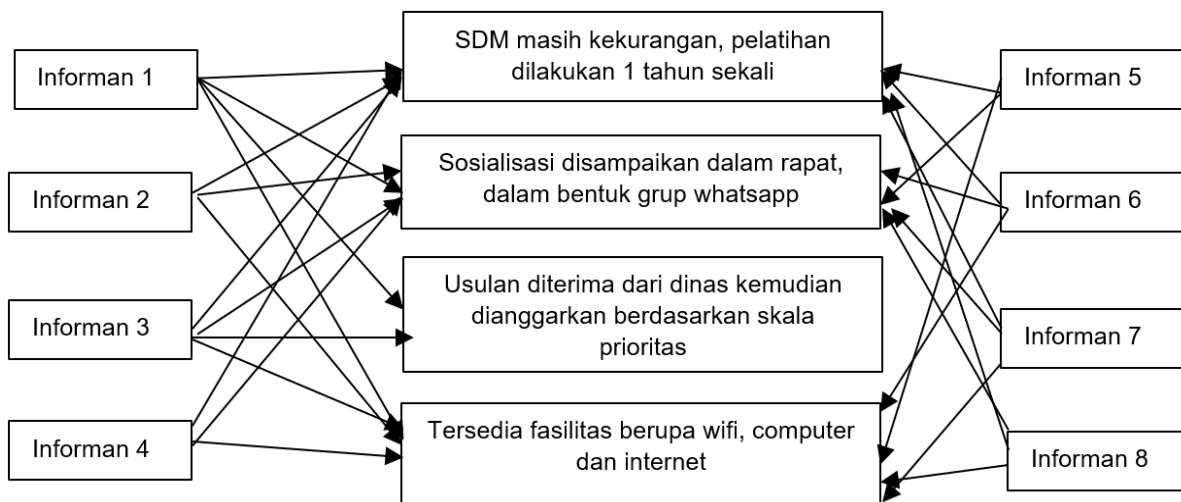

Figure 1. shows the results of the findings of Resource Input (Staff, Information, Authority, Facilities)

Based on figure 1, it is known that in the implementation of the Regional Government Information System (SIPD) at the Teluk Wondama Regency Health Office, West Papua, there are still obstacles where there is still a lack of personnel or human resources in its implementation, training also needs to be considered. Budgeting is carried out based on proposals from the office and then prioritized based on the needs and available budget.

Bureaucratic Structure

Bureaucratic structure is the characteristics, norms, and patterns of relationships that occur repeatedly - executive bodies have both potential and real relationships with what they have in implementing policies.

Standard Operating Procedure (SOP)

Determination and establishment of Standard Operating Procedures (SOP) in implementing SIPD. The following are the results of interviews with informants:

"There is no SOP in the department itself, we only follow the RAB. But regarding the schedule, we follow Bappeda." (SMS, SIPD Operator)

"There is, but it is given in the RKPD Rawal (AMR, Head of Bappeda)

" We have Ranwal, planning schedule, SOP. Yes, everything is planned based on time limits set by Bappeda, for example, the collection of Renja documents is given a time limit, the time for inputting in SIPD also has a time limit. There is an SOP. The one who determines/makes the SOP is the head of Bappeda/DAPD." (HLM, Head of Bappeda Monitoring and Evaluation Control Section)

Based on the results of the informant interviews above, it is known that the SOP (Standard Operating Procedure) in each OPD is not yet available, but there is an SOP from Bappeda which is used as a reference for input rules and time limits. The SOP was given in the Rawal RKPD meeting.

Fragmentation

Bappeda plays a role in delegating SIPD Implementation to related Agencies (Health Office, BKAD or Other Agencies), Bappeda's role in determining the budget policy for agency program activity planning, and Bappeda's role in determining the Renja value that has been inputted into the SIPD Application. The following are the results of interviews with informants:

"If the OPD is not proactive, then Bappeda (TAPD) takes over, the delegation is clear in the SOTK of each OPD." (CTR, Head of Bappeda's Monitoring and Evaluation Division).

"The amount of the budget is determined by Bappeda where Bappeda also requests analysis. The amount of the available budget is requested from finance." (HZN, Head of Budget Section BKAD).

"The delegation of authority from Bappeda asked for a letter of assignment related to the SIPD operator. Then the Bappeda role policy follows its own Juknis according to the provisions that have been set." (HLM, Head of Bappeda Monitoring and Evaluation Control Section).

"We always consult with Bappeda, according to needs, if there is a problem we consult with Bappeda." (SMS, SIPD Operator).

Based on the results of the informant interviews above, it is known that the Delegation is clear and is in the SOTK of each OPD, delegation of authority from Bappeda including asking for a letter of assignment related to SIPD operators. The amount of the budget is determined by Bappeda, the amount of the budget has been regulated from within the planning, the amount of the budget has its own technical instructions and regulations. This can be seen in figure 2, as follows:
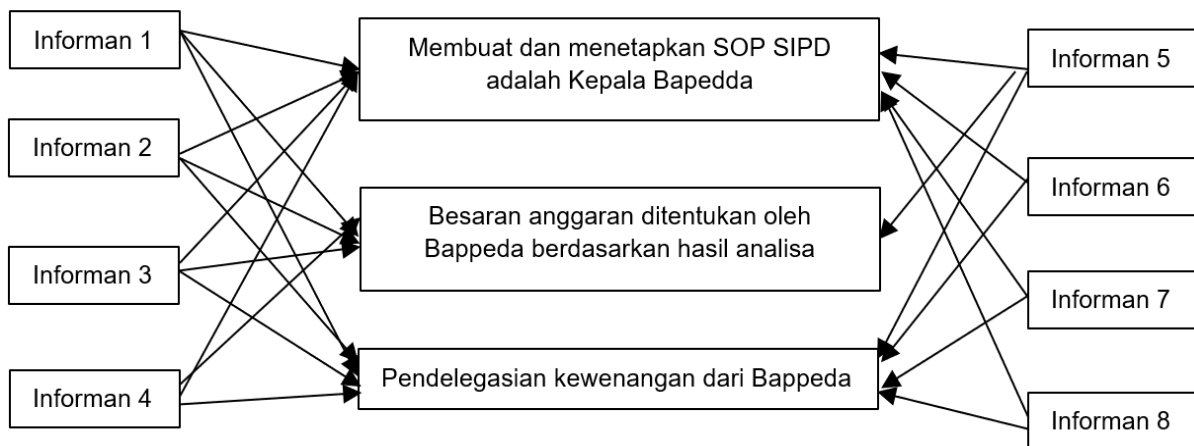

Figure 2. Schematic of findings of bureaucratic structure input (Standard Operating Procedure, Fragmentation)

Based on figure 2, it is known that the implementation of the Regional Government Information System (SIPD) at the Teluk Wondama Regency Health Office, West Papua, in terms of bureaucratic structure, where the one who creates and determines the SOP and delegation of authority is determined by the Bappeda, and the amount of the budget is determined by the Bappeda which was previously analyzed to determine the amount of the budget to be issued and according to its needs.

Process

System Development

System Development looks at 3 aspects, first System Design, namely the creation of an information system design that meets the needs and specifications that have been determined. Second Development looks at the implementation of the information system in accordance with the agreed design. Furthermore, third Comprehensive testing to ensure system performance and reliability. The following is an excerpt from the interview results with the informant:

"There are still many shortcomings, even now SIPD has undergone changes up to 3 times, so SIPD is still being refined. SIPD is not in accordance with the funding sources of each province. Regarding system testing, a letter from the Regent will be issued if the budget is insufficient and a budget refocusing will be carried out." (DW, Head of Budget Division of BKAD).

"For health, there are many sources of funding, but it will be prioritized based on the priority scale that has

been determined by the relevant agencies with budget availability. Bappeda will return it back. " (HLM, Head of Bappeda Monitoring and Evaluation Control Section).

Based on the interview results above, it was obtained information that there are still many deficiencies in the system, so system development is needed. Another thing is that the funding sources of each province are not yet appropriate, related to system testing being carried out if the funds are sufficient. This can be seen in figure 3, as follows:
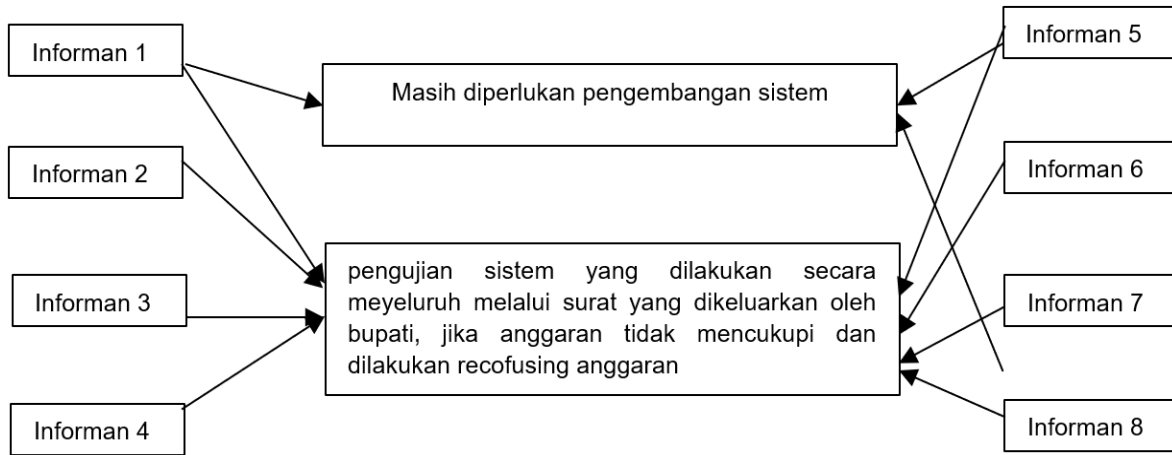

Figure 3. Scheme of Findings of the Process (System Development)

Based on figure 3. it is known that in the process of implementing the Regional Government Information System (SIPD) in the Teluk Wondama Regency Health Office, West Papua, system development is still needed by considering that the current system is still very lacking so that a better system development is needed. In terms of system testing, it is carried out comprehensively by looking at the existing budget, if the budget is insufficient, budget refocusing is carried out.

Disposition

Appointment of Bureaucrats

In the disposition there is an attitude or response of the implementer to the policy; namely the awareness of the implementer, and instructions for the implementer to respond to the program towards acceptance and rejection, as well as the intensity of the response).

There are three forms of implementer attitudes/responses to policies, implementer awareness, implementer instructions/directions to respond to the program towards acceptance or rejection, and the intensity of the response. Implementers may understand the intent and objectives of the program but often fail to implement the program properly because they reject the objectives contained therein so that they secretly divert and avoid program implementation. In addition, the support of implementing officials is very much needed in achieving program targets.

In this study, information was obtained that the change of authorized officials did not affect the implementation of SIPD at the Teluk Wondama District Health Office, the following is information from the Informant

''It's still the same, the important thing is that the account is replaced with a new one, from the old one' (SMS, SIPD Operator)

However, this is different from the information obtained by other informants who stated that the appointment of bureaucracy affected the implementation of SIPD at the Health Service, Teluk Wondama Regency, the following is information from the informant

''It really affects the apology for the change of officials, if the new one is suitable or can do it, it's not a problem, he understands the SIPD flow, but if the official who is lacking apologizes, it means that we have to provide guidance from the budget again from the beginning until the person understands''

"There are several OPDs that we are providing special coaching because we consider that these OPDs are not yet capable, so we will provide what is called special coaching compared to other OPDs."

Incentive

Incentives are used as an instrument to assess whether the implementation of SIPD has an impact on the incentives received by HR, so that information is obtained that the implementation of SIPD has no effect on the incentives received by HR at the Teluk Wondama Regency Health Service. The following are the results of interviews with informants.

''In the health service there is none yet, but actually this is the treasurer's job I think, so the treasurer gets the incentive because he is the one who has to do the work, well the goal is not us who are operators, inputting the budget should also be done by echelon IV, who are required to input the activity plan so there is no special incentive for operators" (SMS, SIPD Operator).

So far there is none" (DW, Head of Budget Division).

Based on information from informants, it was found that the implementation of SIPD did not have an impact on HR incentives at the Teluk Wondama Regency Health Office. This can be seen in figure 4, as follows:
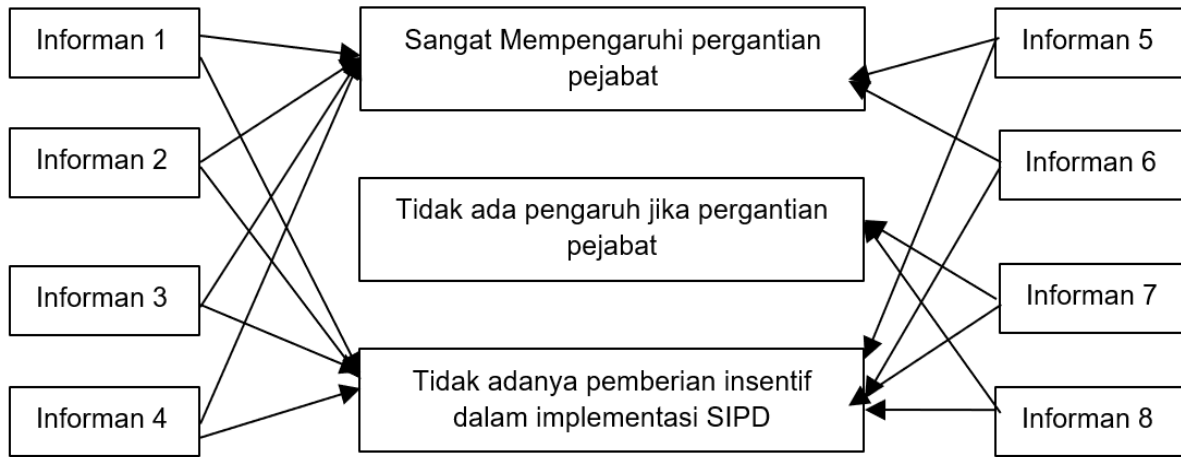

Figure 4. Scheme of Findings of the Process (Appointment of Bureaucrats, Incentives

Based on figure 4, it is known that in the process of implementing the Regional Government Information System (SIPD) at the Teluk Wondama Regency Health Office, West Papua, in terms of changing the appointment of bureaucrats, there is an influence on its implementation, however, several informants assume that there is no influence on SIPd if there is a change of bureaucrats, and there is no influence of incentives on the implementation of SIPD.

Output

The Regional Government Information System is increasingly strengthening its function, with increasingly accurate data presentation, thanks to the support of integrated information technology in e-government. In regional development planning, the need for accurate, fast data and information, and meeting the interests of various aspects and stakeholders , can produce quality development planning. This means that all aspects of development can be met, the involvement of many parties is increasingly prioritized, and the goal of "inclusive democracy" can be achieved. In the process of finding and solving various development problems, determining the carrying capacity and capacity of the region, and criticizing existing development factors, it is very possible to do it quickly and accurately thanks to the existence of adequate information technology today. This can be done by providing training to users and system administrators to ensure a good understanding of the system, installing and distributing information systems to all parts of the local government, and transferring data from the old system to the new system if necessary. However, this has not been done properly. This is evidenced by the results of interviews with informants, as follows:

"There are several obstacles that we face where we do input and training has not been provided optimally (SMS, SIPD Operator)"

This is supported by the following interview statements from other informants:

"The human resources do not understand the application well, which affects the data transfer process" (HLM, Head of Monitoring and Evaluation Control Section, Bappeda).

Based on the interview results above, it was found that input was carried out on the SIPD application, but the implementation was not optimal, and additional training was needed so that HR could understand the contents of the SIPD application which could affect the data transfer process and data distribution at the health office. This can be seen in figure 5, as follows:

Based on figure 5, it is known that in the implementation of the Regional Government Information System (SIPD) at the Teluk Wondama Regency Health Office, West Papua, there are several obstacles where input and training have not been provided optimally, as well as the lack of trained human resources, which hampers the process of implementing SIPD.
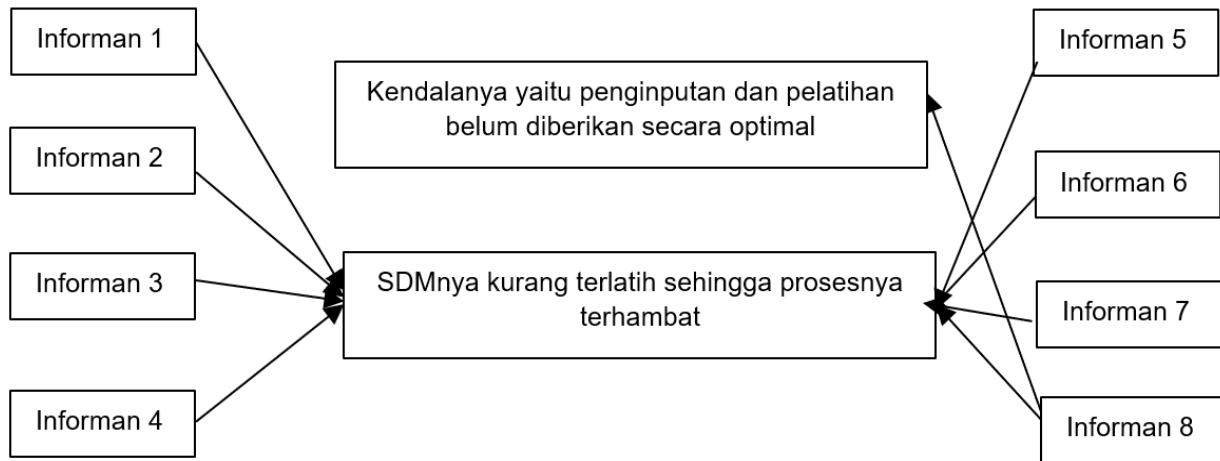
Figure 5. Output Findings Scheme

Feedback

The feedback referred to is communication, which is defined as "the process of conveying information from the communicator to the recipient".

''The health department is among the top 3 that are the most difficult for us to obtain data, slow to respond, but the fact is that it is difficult to obtain technical data, where the lack of data or invalid data certainly affects the quality of work, that is my experience., (AMR, Head of Bapeda)

''For now, both are running and we hope that when it is safe because according to the letter, the main point is that everyone is not allowed to use applications outside of SIPD, so for the time being we are using both of them after the budgeting process we direct it to OPDs. For the migration of disbursements, we direct it to SIPD again. So far, communication has been proactive as long as we call to make improvements'' (DW, Head of Budget Division).

Based on the information from the informant, it shows that when viewed from the Transmission, Clarity and Consistency aspects, everything is in line, seen from the Transmission aspect. How to make level I communication Communication between superiors and subordinates, namely communication between (the head of the health service) and the head of the planning sub-section, is carried out. How is communication between Health Service Agency with the District Bappedda and Level III Communication (Communication between the Health Office and agencies) Financial Agency and related regional assets) especially to the target group of policy makers and other interested parties, both directly and indirectly. Then Clarity requires clarity of level 1 communication (between superiors and subordinates/between the Head of the Service and the Head of the Planning Sub-Section), clarity of level II communication (between the Health Service and the District Bappeda) and level III communication (communication between the Health Service and the BKAD) so that the policies transmitted to the implementers, target groups and other interested parties clearly know what the intent, purpose, targets and substance of the public policy are so that each will know what must be prepared and implemented to make the policy a success effectively and efficiently, also seen from Consistent is needed so that How is the consistency of level 1 communication (between superiors and subordinates/between the Head of the Service and the Head of the Planning Sub-Section), How is the consistency of level II communication (between the Health Service and the District Bappeda) and the consistency of level III communication (communication between the Health Service and the BKAD) so that the policies taken are not confusing so as to confuse policy implementers, target groups and interested parties.

DISCUSSION
Input
Resource

The resources referred to are the number of staff, the expertise of the implementers or staff, clear and relevant information sufficient to implement policies and the provision of related resources in implementing the program, the existence of authority that guarantees that the program can be carried out. directed to as expected, and the existence of supporting facilities that can be used to carry out program activities such as funds and infrastructure) are important requirements for an implementation or organization to run well. Staff are the main actors in implementing the policies that are applied and staff or employees are also the main factor in the failure of policy implementation. Based on information from informants that the SIPD HR recruitment process is carried out by each OPD, then from the results of the interview, the mastery of SIPD input in each OPD is still not optimal, although training is carried out once a year periodically. in line with research from [7]

which states that Staff are the main actors in implementing the policies that are applied and staff or employees are also the main factor in the failure of policy implementation. This is due to the lack of adequate staff or employees and the lack of skills possessed by staff or employees in their fields. To solve the problem of policy implementation, it is not only necessary to increase the number of employees. But also competent employees or staff (who have expertise and abilities) in their fields are needed.[8]

Information in policy implementation, information has two forms, namely: information related to how to implement the policy. Implementors must know what they should do 20 when they are given orders to take action. and information regarding compliance data from implementers to government regulations and regulations that have been set. Implementors must know whether other people involved in implementing the policy comply with the law. The results of this study indicate that the process of conveying information is carried out properly through meetings, in the form of letters and also distributed through WhatsApp groups. This information is conveyed when the planning process is underway.

In general, authority must be formal so that orders can be implemented. Authority is the authority or legitimacy for implementers in implementing policies that are determined politically. When that authority is nil, the power of the implementers in the eyes of the public is not legitimized, so that it can thwart the policy implementation process.[9] Based on the results of interviews with informants, it can be seen that the process of delegating input is given authority to each OPD, for now the health office has not carried out the delegation process to SIPD for input, which is currently being carried out is the proposal input stage. Then the verification process is carried out by the finance department and the TAPD team. Furthermore, the provision of the budget is carried out by Bappeda based on the priority scale grate.

Physical facilities are also an important factor in policy implementation. Implementers may have sufficient staff, understand what they have to do, and have the authority to carry out their duties, but without supporting facilities (facilities and infrastructure) the implementation of the policy will not be successful.[3] Based on information from informants, the results of this study related to facilities indicate the availability of facilities to support the implementation of SIPD including wifi and internet, the budgeting of these facilities is not budgeted separately or specifically, the facilities are centered on Infokom.

Bureaucratic Structure

Based on information obtained from informants, the SOP (Standard Operating Procedure) in each OPD is not yet available, but there is an SOP from Bappeda which is used as a reference for input rules and time limits. The SOP is given in the Rawal RKPD meeting. Policy implementation becomes ineffective if the bureaucratic structure is not conducive to the implementation of the policy. This will also hinder the implementation of the policy as expected. The existence of this SOP is highly expected by policy makers so that policy implementers can utilize the time available in this study, information was obtained that the results of the interview with the informant above, it is known that the SOP (Standard Operating Procedure) in each OPD is not yet available, but there is an SOP from Bappeda which is used as a reference for input rules and time limits. The SOP is given in the Rawal RKPD meeting.

Fragmentation of SIPD (Regional Government Information System) refers to the separation or division of data and information in this system into smaller and separate parts. This can happen when there are several systems or applications used by the local government that are not well integrated, causing data and information to be spread across various places without any unity or effective connectivity. Fragmentation is the distribution of responsibilities given to organizational units that are still within one policy scope. However, in fact many bureaucratic institutions state that this fragmentation actually creates a narrow view.

This is a consequence of the successful implementation of the policy that failed and was not implemented properly. The results of the interview obtained that the Delegation was clear and existed in the SOTK of each OPD, delegation of authority from Bappeda including asking for a letter of assignment related to the SIPD operator. The amount of the budget is determined by Bappeda, the amount of the budget has been regulated from within the planning, the amount of the budget has its own technical instructions and regulations. This is in line with research conducted by [9] which states that data spread across various systems may have different formats or standards, complicating the process of data processing and analysis, Without integration between systems, coordination between regional government agencies becomes more complicated, hindering workflow and decision making, Data processing spread across various systems can reduce efficiency, because a lot of time is wasted accessing and combining information from various sources, Fragmentation increases the risk of duplication, inconsistency, or errors in data because there is no system that controls data quality as a whole. [10] Things that can be done to handle SIPD fragmentation are by implementing System Integration, namely building an integrated platform so that data from various agencies or applications can be interconnected and managed centrally, establishing standard formats and procedures for data processing and storage across all local governments and improving information technology infrastructure at the regional level to support efficient data integration and management.

Process

System Development

The purpose of developing the Regional Government Information System (SIPD) is to improve efficiency, transparency, and accountability in the management of administration and public services at the regional government level.[11] An effective SIPD can support various government activities, such as planning, budgeting, implementation, and supervision, while facilitating coordination between agencies in the regional government. [4] System development. The selection and appointment of policy implementers must be people who have high dedication in supporting the policies to be implemented, especially policies that prioritize the interests of their citizens. Because, if the people who are implementing this policy do not carry out their duties in implementing the policy. Then, it will cause real obstacles and constraints.

The results of the study showed that the development of the SIPD system in Teluk Wondama Health Office was not optimal and the funds related to system testing were indeed insufficient. This is in line with research conducted by [12] which stated that no less important is also related to sources of state revenue, both those that are usually obtained through taxes, foreign investment, and potential new sources of revenue. Effective SIPD development requires careful planning, collaboration between various agencies, and a commitment to technology integration and transparency. With good SIPD, local governments can improve the quality of public services, better budget management, and encourage greater community participation in government.

Disposition

The selection and appointment of the implementers of this policy must be people who have high dedication in supporting the policies to be implemented, especially policies that prioritize the interests of their citizens. Because, if the people who are included in the implementers of this policy do not carry out their duties in implementing the policy. Then, it will cause real obstacles and constraints. Appointment of Bureaucrats in this context Edward III requires that policy implementation must also be seen in terms of bureaucratic arrangements. This refers to the appointment and appointment of staff in the bureaucracy that are in accordance with their abilities, capabilities, and competencies. In addition, bureaucratic arrangements also lead to the formation of an optimal public service system, personnel assessment in working, to the personnel by-passing method.[13]

The results of the study found that the appointment of bureaucrats affected the implementation of SIPD in the Health Office, Teluk Wondama Regency, where the current officials understand and comprehend the flow of SIPD. This is in line with research conducted by [11] which stated that overall, the appointment of bureaucrats can affect the effectiveness, management, and development of the SIPD system in the region, depending on the vision and competence of the bureaucrats in managing the regional government information system. Implementation is the development of activities that adapt to each other through interactions between goals and steps to achieve them, and requires an efficient network of implementers and bureaucracy.

Incentives are a driving factor in the disposition variable. This is because, increasing the benefits (rewards) for policy implementers will make the implemented policies run as expected. And policy makers The existence of bureaucracy in government, organizational, private, or other structures greatly influences policy implementation, because the bureaucracy will be the implementer of activities as a whole.[14] Even in certain cases, bureaucracy is created only to implement a particular policy. Incentives state that one of the suggested techniques to overcome the problem of implementer tendencies is to manipulate incentives. In general, people act according to their own interests, so manipulating incentives by policy makers influences the actions of policy implementers. By increasing certain benefits or costs, it may be a driving factor that makes policy implementers carry out orders well. This is done as an effort to fulfill personal interests *(self-interest)* or organizations. The results of this study indicate that the Implementation of SIPD has no impact on HR incentives at the Teluk Wondama Regency Health Office. This is not in line with the research conducted by [15] which stated that the disposition in terms of the attitude and behavior of the work performance of the implementers is still low, this is due to the lack of budget and incentives for the implementers of SIPD implementation in Bengkulu City, especially for Administrators (Admins) in SKPDs of Bengkulu City. Incentives are a form of reward, namely increasing certain benefits or costs so as to encourage policy implementers to implement SIPD.

Output

Intermediate results *(output)* are parts or elements of the system that are produced from the transformation/ conversion process in system.[16] Output is reviewed from the aspect of Training how the government provides training to users and system administrators to ensure a good understanding of the system. Dissemination by installing and distributing information systems to all parts of the local government. Data Migration by transferring data from the old system to the new system if necessary in this study, information was obtained from informants that training was only carried out once a year periodically so that the training was still lacking, and Human Resources who did not understand the application so that it had an impact on the data input and transfer process. According to the Ministry of Health of the Republic of Indonesia, every employee or officer on

duty at the hospital is expected to receive a minimum of 20 hours of training each year. On this basis, every medical recorder working in the hospital needs to undergo training in accordance with the minimum standards that have been set. This training is one of the steps to increase the efficiency of the implementation of medical records by improving the abilities and skills of officers.[17,18]

Human resource training in SIPD (Regional Government Information System) is very important to improve the competence and ability of human resources in using the system effectively and efficiently.[19] This training ensures that SIPD users can access, process, and analyze data accurately, and implement local government policies and programs in accordance with applicable standards. With adequate training, human resources will be better prepared to face the challenges of managing government data and information, which can ultimately improve the quality of public services and transparency in managing regional budgets. Regional development must be based on the capacity and needs of each region. Therefore, development planning is needed that is in accordance with regional needs, on target, comprehensive, and systematic.

Feedback

Communication is an indicator of the success of achieving the objectives of policy implementation. Effective implementation occurs when decision makers already know what they are going to do.[20] Knowledge of what they are going to do can run if communication runs well so that every policy decision and implementation regulation must be transmitted (or communicated) to the right personnel section.[21] Based on the information provided by the informant, it can be concluded that in terms of transmission, clarity, and consistency, all of these things go hand in hand. In terms of transmission, it is important to ensure clear communication between superiors and subordinates, such as between the head of the health office and the head of the planning sub-section. In addition, communication between the Health Office and the District Bappeda and communication between the Health Office and the Regional Finance and Asset Agency also needs to be carried out properly, especially to the target group of policy makers and interested parties, both directly and indirectly.

Clarity in communication is also very important, including communication between superiors and subordinates (level I), between the Health Office and the District Bappeda (level II), and between the Health Office and the BKAD (level III). This aims to ensure that policies conveyed to implementers, target groups, and related parties can be clearly understood, including the intent, purpose, targets, and substance of the policy, so that each party knows what to prepare and do to support the policy effectively and efficiently. This is in line with research conducted by [13] which states that the Manado City Regional Planning and Research Development Agency has used this website-based application and for smooth communication in the implementation of the regional development information manifestation system, this SKPD forms a team, for example in the Manado City Regional Planning and Research Development Agency, the head of the agency is given the obligation to be responsible.

In addition, consistency of communication is also very much needed so that the policies taken remain clear and do not cause confusion among policy implementers, target groups, and stakeholders. Consistent communication at every level (I, II, and III) will ensure that the policies delivered do not lead to uncertainty or differences in interpretation.

CONCLUSIONS

Resources in the implementation of SIPD in the Teluk Wondama District Health Office are still not optimal in terms of mastery of SIPD input, training is carried out once a year periodically, the health office has not carried out the delegation process to SIPD for input, what is currently being done is the input stage of proposals and SOPs (Standard Operating Procedures) in each OPD are not yet available, System development and bureaucratic appointments are needed to influence the implementation of SIPD as well as in terms of fulfilling the needs and specifications of the SIPD design, the implementation of SIPD in accordance with the draft agreement, System testing is carried out comprehensively , and additional training is needed so that HR can understand the contents of the SIPD application which can affect the data transfer process and data distribution in the Teluk Wondama District Health Office and communication that is established in the Health Office is well established.

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FINANCING
None.

CONFLICT OF INTEREST
Authors declare that there is no conflict of interest.

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