Zoelham Hospital’s Public Policy Strategy in Handing COVID-19 in Binjai City

M. Ramfauzan Simanjorang & Syahrul Abidin
Universitas Islam Negeri Sumatera Utara, Jl. Lapangan Golf, Kec. Pancur Batu, Kab. Deli Serdang, 20353, Indonesia

Abstract
The purpose of this research is to determine the public policy strategy at RSUD Dzoelham Binjai. The urgency of this research stems from the widespread COVID-19, which is destroying the world order. Given the issues raised above, RSUD Dzoelham must implement a public policy that allows patients exposed to COVID-19 to recover and reduces the number of spreads. Using a descriptive qualitative methodology based on observation, interviews, and documentation, this article examines Dzoelham Hospital’s public policy strategy in dealing with COVID-19 in Binjai City. The findings of this study indicate that the management of the Dzoelham Hospital follows the regulations of the Presidential Instruction through the Central Government and the Ministry of Health of the Republic of Indonesia by performing PCR tests on patients exposed to COVID-19. Dzoelham Hospital also provides outpatient and inpatient care and collaborates with other hospitals to maximize referrals.

Keywords: public policy, COVID-19, Dzoelham hospital, binjai city.

1. Introduction
The spread of COVID-19 in other parts of the world is extremely detrimental to the order of life, as evidenced by data (data of COVID people in the world). This very small virus changed the social fabric around the world, causing all countries to feel the impact of this virus, beginning with the economic and social aspects, and causing everything to change drastically. To adapt to this seemingly never-ending virus, the world has even implemented a new system of habits, or what is commonly referred to as the new normal.

The deadly virus is also having an effect in Indonesia. COVID-19, Corona virus Disease 2019, is an infectious viral disease caused by the coronavirus Sars-CoV-2. Furthermore, COVID-19 is classified as zoonotic due to its transmission via humans and animals. The virus, which is capable of actively spreading and is lethal to humans, first appeared in Wuhan, China, one of the country’s nine national central cities. It spread so quickly at the end of December 2019 and into January 2020 in all parts of the world that are also feeling the effects of this viral disease.

The corona virus, as one of the most dangerous and lethal diseases, has claimed many victims, had a negative impact, and has had a significant impact on society, affecting not only the health sector but also the economic, social, lifestyle, culture, education, psychology, politics, religion, and other aspects of life.

So far, studies on the impact of COVID-19 have included the impact of COVID-19 on work and education (Tuwu & Darwin, 2021), the risks and uncertainties of COVID-19 (Taufiqurakhman, 2014), psychological trauma (Muljanto & Agus, 2022), mental disorders in the community (Tuwu & Darwin, 2021), and COVID-19 sufferers being ostracized by residents (Taufiqurakhman, 2014). Writings on government policies in dealing with the COVID-19 pandemic (Tuwu & Darwin, 2021), the policy of implementing a lockdown in anticipation of the spread of COVID-19 (Yunus, N.R, 2020), and the government’s response in dealing with COVID-19 are among the studies on COVID-19 policies (Muljanto & Agus, 2022).

On March 2, 2020, the Indonesian government announced for the first time that the country had been infected with the COVID-19 virus. Not only is there a public health crisis, but the COVID-19 pandemic has also significantly disrupted
the community’s economy, causing a crisis. A variety of economic indicators, including economic growth, the Survey of Business World Activities (SKDU), the Manufacturing Index (PMI), the Retail Sales Index, the Consumer Confidence Index (IKK), and financial services, demonstrate this.

One of the countries affected by the corona virus is Indonesia. The first case was discovered at the time in Depok, West Java Province. President Joko Widodo personally announced this event on Monday, March 2, 2020, at the Presidential Palace. A 64-year-old mother and her 31-year-old daughter are the two residents who have contracted the virus. The mother and child are suspected of being infected due to direct contact with Japanese visitors to Indonesia.

According to the Ministry of Health, the child contracted the corona virus while dancing with a Japanese foreigner at a Jakarta club on February 14, 2020. The event was attended by 50 people, according to Achmad Yurianto (Yuri) of the Ministry of Health’s Directorate General of Disease Prevention and Control. On February 16, 2020, he went to the doctor because he had a cough and a low-grade fever. Following the incident, the Ministry of Health searched for anyone who had been dancing at the time. Following the announcement of the first case in Depok, Indonesian President Joko Widodo prepared international standard medical facilities and equipment for the government to treat patients, as well as a treatment budget.

This article requires a statement of novelty from the research conducted, which is supported by a review of previous research. The purpose of this article is to explain whether the public policy strategy for dealing with COVID-19 is appropriate or even less appropriate for dealing with the problem of dealing with COVID-19 at the Dzoelham Hospital in Binjai City. Based on the problem’s background, the problem can be formulated as follows: What is Dzoelham Hospital’s public policy strategy in dealing with COVID-19 in Binjai City?

2. Literature Review

2.1. Overview of Public Policy

Definition of public policy

The scope of the study of public policy is very broad because it covers various fields and sectors such as economics, politics, social, culture, law and so on. In addition, seen from the hierarchy, public policies can be national, regional or local, government regulations, presidential regulations, ministerial regulations, regional/provincial government regulations, governor decisions, district/city regional regulations, and regent/mayor decisions.

Robert Eyestone as quoted by Leo Agustino defines public policy as “the relationship between government units and their environment”. Policy can be defined as a form of program plan, activity, action, decision, attitude, to act or not to act by the parties, as a stage for solving the problems encountered (Taufiqurakhman, 2014).

Fundamentally, public policy includes government policies in managing people’s lives in various aspects, which are policies that are oriented to the interests of the community. In the preparation of the order of every public policy formulation, it begins with the formulation of problems that have been identified and then the implementation of these policies is aimed at overcoming various problems that occur in people’s lives.

According to Said Zainal Abidin, public policy is broad and strategic rather than specific and narrow. The purpose of making public policy is essentially to:

1) create order in society.
2) Defending people’s rights
3) Promoting social peace and tranquility.
4) Achieving community well-being (Taufiqurakhman, 2014)

2.2. The Urgency Of Public Policy

Policies and public information disclosure are critical to ensuring public access to information. The evaluation of public policy, which is one of the functional elements of policy-making activities that can determine the success of a program or government policy with the goal of obtaining the best possible results in the most efficient way and in the development of society, falls under the category of urgency (Mustari, 2015).

The attitude of policy implementers will have a significant impact on policy implementation. If the implementer has a positive attitude, he will be able to carry out the policy as intended by the policymaker; on the other hand, if his attitude is negative, the implementation will not be carried out properly. As a result, the success of policy implementation is dependent on the behavior of the bureaucracy as the implementer of public policy.
The importance of public policy urgency in the governance structure, both social and health, cannot be overstated. The Presidential Regulation governs the central government’s public policies, about which the provincial and district/city governments must be kept informed and accountable.

2.3. Overview of COVID-19 in Indonesia

On December 31, 2019, a case of unknown etiology pneumonia was reported in Wuhan City, Hubei Province, China. China identified it as a new type of coronavirus, or COVID-19, on January 7, 2020. Fever, cough without phlegm, weakness, lethargy, and dizziness are common symptoms of COVID-19 patients.

Other common symptoms include a sore throat, diarrhea, red eyes, headache, loss of taste and smell, and red rashes on the skin. If the symptoms worsen, a person may experience difficulty breathing, chest pain, and even loss of mobility.

People over the age of 60 who have co-morbidities such as hypertension, heart and lung disease, diabetes, being overweight, or cancer are at a higher risk. The virus spreads through the splash of saliva produced by an infected person when coughing, sneezing, or even when the person exhales.

Because droplets cannot float in the air, they fall to the ground and adhere to other surfaces. Transmission can also occur when inhaling virus-infected air. Touching a contaminated surface can also result in transmission, and the virus spreads when you touch your eyes, nose, or mouth (Kurniawan & Putri, 2021).

2.4. Handling Strategy The Ministry of Health’s COVID-19

Indonesia is one of the countries in the world with a slanted COVID-19. Cases are expected to decrease systematically after the Christmas holiday season, around January - February. The government has consistently, measuredly, and systematically promoted 3T efforts, maintained 3M discipline in the community, and carried out the COVID-19 vaccination program. This was stated by Dante Saksono Harbuwono, Deputy Minister of Health of the Republic of Indonesia, at the National Coordination Meeting for Internal Supervision in 2021.

The Ministry of Health’s strategy for preventing COVID-19 is to use tracing methods ranging from PCR to rapid antigen tests. Since early 2021, COVID-19 can be prevented using rapid antigen tests in areas with limited PCR access.

Another strategy for dealing with COVID-19 is to provide vaccinations to people all over Indonesia (Muljanto & Agus, 2022).

Vaccine injection is performed as an active effort to provide immunity, so that if they are exposed to COVID-19, they do not become ill or only have mild illness. Vaccination has been implemented since early 2021, beginning with health workers, the elderly, and public services. The vaccines administered are safe and effective, in accordance with Italian recommendations, and have been approved by the BPOM.

As an effort, the Ministry of Health’s budget has three budgeting principles in 2021:

1) Move down the epidemic curve as quickly as possible by prioritizing prevention efforts through diagnostic and vaccination strategies.
2) Prioritize the protection of the health system and human resources by implementing a strategy to increase hospital capacity, the availability of health workers, medical equipment, and drugs.
3) To meet national vaccine needs while expanding domestic research capabilities.

3. Methodology

This study employs descriptive qualitative methodology, specifically technology that provides an overview of the phenomenon to be studied in order to obtain a broad picture. The goal of descriptive research, according to Milly and Huberman in (Sugiyono, 2013), is to make the preparation more structured, real, and correct.

Interviews, observation, and documentation were used to collect data for this study. The primary data obtained from this study are the results of hospital observations. Dzoelham. In this study, the following people were interviewed: first, dr. David, Sp. Ok. Second, there are six hospital doctors. Dr. Khalid Sp.PD (Internal Medicine), Dr. Alfred Spp (Internal Medicine), Dr. Efriandy Spp (Lung), Dr. Budi SpA (Child), Dr. Destika SpN (Neural), Dr. Roni Spp (Internal Medicine) (Internal Disease).

Researchers gathered secondary data from a variety of sources, including journals, books, and other scientific studies. It is hoped that this will assist researchers by providing guidelines and references for direct observations. Fundamentally, the COVID-19 problem includes its impact on the decline in people’s incomes and economic
difficulties. While the government’s policies in dealing with COVID-19 itself, one of which is the existence of the Social Safety Net (JPS) program, as well as preventative and promotional policies. The method used is qualitative research, which is a library study in which books and other literature are used as the primary material related to the object of research or as the beginning of library data.

4. Result and Discussion

4.1. Result

In preparation for the arrival of COVID in March 2020, the Mayor formed a special COVID task force, which included the Regional Secretary, BPBD, TNI, Polri, and health workers who set up command posts and training. Binjai City residents were still fearful and concerned in March, particularly about COVID-19 patients being referred to the Zoolenham Hospital, Binjai City.

There is no uniformity in the service procedure, and there is no PPE or handling instructions. The central and provincial governments established COVID alert areas, and Zoolenham Hospital, as well as regional hospitals that accept COVID-19 patients, formed a PIE (Emergency Infectious Disease) team. The hospital plans a special procedure in accordance with the SOP (Standard Operating Procedure).

COVID-19 patients were first admitted to Dzoelham Hospital in May 2020. All colognes (Internal Diseases, Lungs, etc.) prepared preparations in accordance with Ministry of Health procedures, beginning with Per and Antigen. Dzoelham Hospital continues to follow regulations in accordance with Ministry of Health policy. In the absence of a government statement stating that COVID-19 has been completed, the previous policy is still in effect.

At Dzoelham Hospital, instructions and regulations for handling COVID-19 are still being followed, such as wearing masks, reducing crowds, washing hands, maintaining a minimum distance of 1m, and performing COVID-19 screening. Due to the current looseness of the COVID-19 number, Dzoelham Hospital no longer requires visitors to wear PPE, as it did previously when the peak of COVID-19 was sloping.

COVID-19 is still being handled, but being given leeway according to SOP remains in hospitals where it was previously a pandemic, endemic, and common disease. Previously, the first to fourth floor rooms were full for handling COVID-19 patients because they were loose and patients were no longer being treated at Dzoelham Hospital, and 1 floor was left for COVID-19 patients, although no more patients were exposed to COVID-19 at this time, and 3 floors for general patients, but must remain vigilant if COVID-19 escalates again.

Dr. David Sp.Ok (Internal Medicine), Dr. Khalid Sp.PD (Internal Medicine), Dr. Alfred Spp (Internal Medicine), Dr. Efriandy Spp (Lung), Dr. Budi SpA (Child), Dr. Destika SpN (Nerve), Dr. Roni Spp (Internal Medicine) (Internal Medicine). Regarding the government’s budget for dealing with COVID-19, 15 million specialist doctors, 10 million general practitioners, 7 million nurses, and 5 million other health workers treat and treat COVID-19 patients on a daily basis.

The policy strategy of Dzoelham Hospital in dealing with COVID-19 by providing inpatient, outpatient, and referral services. Rusid Dzoelham, a regional hospital in Binjai City, was designated as a referral hospital in accordance with Ministry of Health, Inpres, and Ministry of Home Affairs regulations. The patient’s strategy is to undergo an examination using a Pcr test to determine whether the patient’s sample is positive or negative.

Dzoelham Hospital recently assisted in the administration of immunizations and other services to COVID-19 patients. With few tools to treat COVID-19, Dzoelham Hospital is collaborating with USU Hospital and H. Adam Malik Hospital on Pcr equipment. For the past two years, hospital policy has prioritized COVID-19 patients over general patients; as a result, the majority of COVID-19 patients and general patients were transferred to other hospitals.

Reactive antigens are not necessarily negative patients, which states that patients exposed to COVID are Pcr, Pcr as a determining tool for patients exposed to COVID-19. The Dzoelham Hospital’s policy toward patients If someone dies and it is not proven that COVID cannot be done, they will still be buried according to the procedures at the COVID cemetery to prevent virus transmission to the community and the patient’s family.

4.2. Discussion

Those who have received one injection of the Janssen vaccine (J&J) are eligible for a booster vaccination. 1 Janssen vaccine injection is equivalent to 2 doses of primary vaccination. The recipients of the Janssen vaccine (J&J) can receive
the Moderna type booster vaccine in accordance with the circular letter of the Director General of Disease Prevention and Control of the Ministry of Health of the Republic of Indonesia number SR.02.06/II/1188/2022 regarding the addition of a further dose of the COVID-19 Vaccine regimen (Khierunnisa & Rizky, 2022).

Dr. Siti Nadia Tarmizi, M.Epid, spokesperson for the Indonesian Ministry of Health’s COVID-19 Vaccination, stated that people who have received one dose of Janssen (J&J) vaccine have received a complete vaccination. “So one J&J dose is equivalent to two doses of other vaccines,” he said during a virtual press conference in Jakarta. The booster vaccine is administered three months after the initial J&J injection.

After 3 months, you can get a Moderna ticket for a booster vaccination. Moderna will also receive a booster vaccine certificate from Peduli Protect after being vaccinated. As we can see, the rule for this J&J is that one vaccination is sufficient. As a result, you can continue to receive booster vaccines (Kurniawan & Putri, 2021).

The Indonesian Ministry of Health, through the Directorate General of Disease Prevention and Control, issued a circular directing provincial, district, and hospital health offices throughout the country to begin administering booster vaccinations. The circular letter HK.02.02/II/252/2022 concerning the COVID-19 vaccination in advanced doses (Booster).

Dr. Maxi Rein Rondonuwu, Director General of Disease Prevention and Control, stated that the study results showed a decrease in antibodies 6 months after receiving a complete primary dose of COVID-19 vaccination, indicating that additional or booster doses were required to increase individual protection, particularly in vulnerable groups of people.

Booster vaccinations are recommended by the National Immunization Expert Advisory Committee (ITAGI) to improve the effectiveness of a vaccine whose effectiveness has declined (Ikmal et al., 2021). A booster vaccination is a COVID-19 vaccination administered after a person has received a complete primary dose of vaccination with the goal of maintaining immunity and extending protection (Kurniawan & Putri, 2021).

The government organizes booster vaccinations for people aged 18 and up, with a priority for the elderly and immunocompromised patients (Sjoraida & Fatma, 2017). Booster vaccination for non-elderly targets is carried out in districts/cities that have achieved a minimum dose 1 coverage of at least 70% and a dose coverage of 1 elderly of at least 60%. Those receiving the booster vaccination must be at least 18 years old and have received a complete primary dose of vaccination at least 6 months prior.

The President of the Republic of Indonesia decided to extend the implementation of the PPKM level 4 restriction until August 2, 2021. In response to the presidential decree, Minister of Home Affairs Muhammad Tito Karnavian issued three (three) Instructions from the Minister of Home Affairs (Inmendagri). The three Ministers of Home Affairs, namely Minister of Home Affairs Number 24 of 2021 in Sumatra, Kalimantan, Sulawesi, Nusa Tenggara, Maluku, and Papua, concerning PPKM level 4 and level 3 COVID-19 (Ikmal et al., 2021).

Inmendagri Number 26 of 2021 pertaining to PPKM levels 3, 2, and 1, Village and Sub-District levels in order to control the spread of COVID-19. This PPKM has been extended until August 2 in accordance with the President of the Republic of Indonesia’s directive (Ikmal et al., 2021). We have issued three Inmendagri, numbers 24, 25, and 26, the substance of which was created by a joint team from the Coordinating Ministry for Maritime Affairs, the Coordinating Ministry for the Economy, the Minister of Health, and the Head of the COVID Task Force.

5. Conclusion

According to the research, the writer concludes that students’ perceptions of news on the Indonesian Ministry of Health’s Facebook account received a lot of positive responses. Many students applaud the Indonesian Ministry of Health’s policy of disseminating information on the development of COVID-19 on the account. Based on the use of the Indonesian Ministry of Health’s Facebook account, the author concludes that social media now has advantages when used properly. So it is not surprising that social media has now become a very effective new media for the global community because it has advantages over other media, such as being easy to use and giving the account owner complete control over his account.
References


