SCHOOL HEALTH ENTERPRISE MANAGEMENT

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Information

Abstract

School Health Efforts are part of the substance of special service management engaged in school health. Special service management in schools is implemented to support learning and can meet the special needs of students in schools. This study aims to determine (1) the planning of School Health Effort at SDS Budi Mulia Medan, (2) the implementation of School Health Effort at SDS Budi Mulia Medan, (3) the control and implementation of School Health Effort at SDS Budi Mulia Medan, and (4) the factors that influence School Health Effort management at SDS Budi Mulia Medan. This research used a qualitative approach and case study research design. Data were collected through interviews, observation, and documentation techniques. To obtain data validity, researchers used source triangulation by finding different resource persons to find similar information. This study aims to describe the management of UKS at SDS Budi Mulia Medan.
INTRODUCTION

Healthy living is a state of uninterrupted well-being in which everything works according to its function (Nainggolan et al., 2016). A healthy person can enable an individual to live a productive life. One of the efforts to improve the quality of Indonesian people is education and health (Halim et al., 2021). Education is the environmental conditioning of children to produce fixed or permanent changes in the behavioral habits, thoughts, and attitudes of a learner. The quality of education for learners is related to quality human resources (Pohan et al., 2023). Qualified resources are those that have a healthy body and mind. One of the efforts made in the educational environment at school in the form of health is through the School Health Effort (UKS) (Alim et al., 2022). UKS is part of the substance of special service management engaged in school health. Special service management in schools is made to facilitate or facilitate learning and can meet the special needs of students at school (A. E. L. Lubis et al., 2020). Considering that UKS is one of the units that provide health services to students, it is organized to improve the ability to healthy living of students in a healthy environment so that students can learn, grow, and develop harmoniously and optimally (Hendrawan et al., 2022). Thus, it is expected to make quality human resources (Setiawan et al., 2022). Special service management in schools is made to facilitate and facilitate learning and can meet the special needs of students at school. Special services are organized in schools to facilitate the implementation of teaching to achieve educational goals in schools. Education in schools, among other things, also tries to keep students always in good condition. Both here are meant to concern the physical and spiritual aspects (A. E. Lubis & Nugroho, n.d.).

School Health Effort (UKS) is a health program for children of school age (Hidayati, 2021). Children at school age are children aged 6 to 21 years, which by the growth and development process of students are divided into 2 sub-groups, namely pre-adolescents (6-9) years and adolescents (10-19) years (Lumbanraja et al., 2022). One of the activities to develop UKS is the existence of a small doctor program in schools. The small doctor program is an educational approach to realize healthy behavior including personal hygiene behavior, where students are involved and activated as implementers (Fatmawati et al., 2019). The purpose of the small doctor is to increase student participation to become a driver of healthy living at school, at home, and in the environment and students can help themselves, fellow students, and others to live healthy lives. So the existence of a small doctor program at school greatly helps the implementation of UKS special service management activities (Susana, 2018).

Researchers strongly agree if it is stated that school environmental factors and the health of school residents can affect the teaching and learning process (Ernawati et al., 2023). The risk factors of the school environment can be in the form of school environmental conditions, air, roof, walls, floors, toilets, canteens, and other aspects. The government launched the UKS program which is an effort to foster and develop healthy living habits carried out in an integrated manner through educational programs and health services in schools, efforts made in the context of fostering and maintaining health in the school environment. School health efforts were initiated in 1956 through Pilot Projects in Jakarta and Bekasi which were a collaboration between the Ministry of Health, the Ministry of Education and Culture, and the Ministry of Home Affairs. In 1980, it was upgraded to a Joint Decree between the Ministry of Education and Culture and the Ministry of Health on the UKS working group (Istaryatiningtias et al., 2021). To achieve stabilization and integrated development, a joint decree between the Minister of Education and Culture, the Minister of Health, the Minister of Home Affairs and the Minister of Religious Affairs was issued on September 3, 1980 on the Principles of UKS Policy and Development No. 408a/U/1984, No 3191/Menkes/ SKBVI/1984, No 74/th/1984, No 61/1984 (SALFIYADI & SKM, 2022).

However, in practice, schools in Indonesia at the primary, junior high, and senior high school levels have not implemented each UKS program optimally (Rahmawati & Soetopo, 2015). Some students know the KS only as a team that handles students who are sick while at school,
for example during the flag ceremony, then the UKS team only gives them eucalyptus oil medicine, and gives them breakfast (Mawardinur et al., 2022). Ideally, when the implementation of UKS is effective, it is not only a treatment effort, but UKS at every level of education is a government effort to focus on preventing risky behavior of school-age children (Azandi et al., 2022). According to the 2013 Riskesdas data, primary, junior, and senior high school-aged children, both male and female, are eating fewer fruits and vegetables and consuming unhealthy foods such as flavored foods, junk foods, or instant foods. This causes school-age children and adolescents to be affected by hypertension, diabetes mellitus (DM), and other non-communicable diseases (NCDs).

According to the 2015 Global School Health Survey (GSHS) data shows that 22.2% of school-age children have smoked, 11.6% currently smoke, and 4.4% have consumed alcohol. This shows the existence of health challenges, namely the increasing gap in the application of Clean and Healthy Living Behavior (PHBS) at school age. Based on data from the Ministry of Health in 2018, Indonesia ranks third largest in the world in terms of cigarette consumption after China and India. 38.3 percent of the Indonesian population are smokers, about 20 percent of whom are adolescents aged 13 to 15 years. The percentage of smokers aged 10 to 18 years continued to increase from 2013 at 7.2 percent to 9.1 percent in 2018. Among child smokers, 1.5 percent of smokers started smoking at a very young age of 5 to 9 years old, earning Indonesia the nickname baby smoker country. 56.9 percent of smokers started smoking at the age of 15 to 19 years according to Basic Health Research.

One of the schools that has a small doctor program is SDS Budi Mulia Medan. This small doctor program is part of the UKS service at SDS Budi Mulia Medan. The purpose of the UKS at SDS Budi Mulia Medan is to facilitate students to develop a healthy environment at school. It also aims to create a comfortable and conducive school environment. The existence of UKS is already common in various schools, especially in elementary schools. However, the existence of a small doctor program is one of the interesting things to be observed and revealed to be explained, because some of the existing elementary schools have not all implemented the small doctor program in UKS management. This encourages researchers to examine more deeply by the focus of the research set. Based on the explanation, the researcher chose and determined the UKS management at SDS Budi Mulia Medan. The success of this institution in managing school health services attracted researchers to conduct research. It can be seen from the researcher's preliminary study that the management of health services at SDS Budi Mulia Medan succeeded in winning the UKS at the national level of North Sumatra and the district/city level. Therefore, the special service management at SDS Budi Mulia Medan is a form of school health service management with a different model.

METHODS

The approach used in this research is a qualitative approach with a case study design. In qualitative research, researchers themselves collect data by asking, asking, listening, taking, observing, and processing data. Researchers can ask for help from others to collect data in a process called interviewing, in qualitative research, researchers themselves must collect data directly from the source (Abubakar, 2021). Data collection is carried out by the researcher himself as a key instrument, while complementary instruments include semi-structured interview guides, observation guides, member checks, and field notes. Meanwhile, to determine the source of human data using purposive sampling technique, Purposive sampling is a data source sampling technique based on certain considerations, for example, that person is considered to know the most about the information we need, or maybe he is the ruler so that it will make it easier for researchers to explore the object/social situation under study.

Data collection techniques were carried out using; (1) in-depth interviews, (2) participant observation, and (3) documentation studies. Researchers conducted direct interviews with the
For data analysis using descriptive techniques whose application is carried out in three streams of activities, namely data reduction, data presentation, and conclusion drawing or verification. To determine the credibility of the data, various techniques were used, namely (1) triangulation; (2) peer checking; and (3) member checking.

RESULTS & DISCUSSIONS

Results
The research findings consist of four aspects, namely the management of UKS at SDS Budi Mulia Medan and the factors that influence UKS management at SDS Budi Mulia Medan. Each of these aspects is described as follows: UKS management at SDS Budi Mulia Medan has 3 stages, namely UKS planning, UKS planning activities at SDS Budi Mulia Medan are objectives, activity programs, and financing. The purpose of UKS at SDS Budi Mulia Medan is to foster healthy living habits and increase health status, which includes: 1) Having the knowledge, attitude, and skills to implement the principles of healthy living and students actively participate in health improvement efforts; 2) Healthy, both physically, mentally and socially; and 3) Having resistance to the adverse effects of abuse of narcotics, drugs and hazardous materials, alcohol, cigarettes, and so on. While the activity program is summarized in the work program in the form of (1) health education and health services; (2) a healthy school environment; (3) training of tiwisada cadres or what is meant by small doctors; (5) school health coaching in the community; (6) procurement of UKS facilities and infrastructure. Meanwhile, the procurement of existing costs comes from school funds and self-help funds.

The implementation of UKS at SDS Budi Mulia Medan consists of (1) health education and health services, which is one of the activities so that students know health science including how to live healthy and orderly. Meanwhile, health services in schools are carried out using counseling activities and skills training. The implementation is carried out through increasing knowledge, instilling values and positive attitudes towards the principles of healthy living, and increasing skills in carrying out matters related to health maintenance, assistance, and care. Health education materials consist of (a) maintaining personal hygiene; (b) recognizing the importance of immunization; (c) recognizing healthy food; (d) recognizing the dangers of diarrhea, dengue fever, and influenza; (e) maintaining environmental hygiene (school and home) and placed in physical education subjects; (2) a healthy school environment is a condition where the school environment can support the development of healthy living behavior of students. The development of a healthy school environment is carried out in many ways, including the presence of clean water in front of each room in the school. The existence of toga plants planted by students next to the school, as well as school cleaning carried out by school guards; (3) training of tiwisada cadres or what is meant by small doctors, these cadres are selected students who are chosen based on student abilities and then fostered by the UKS Pembina team from Medan City. The important role of tiwisada cadres or little doctors at school is to assist in the implementation of immunization activities, routine activities on Monday in charge of helping students who are sick, and providing examples to other students to live healthy at school; (5) school health coaching in the community, is an activity of fostering a healthy environment to the community. The process of fostering the community using a visit by the school UKS team to the community around the school to conduct socialization of healthy living properly; (6) procurement of UKS facilities and infrastructure, the facilities and infrastructure used in the UKS are complete, starting from the UKS room and health equipment already exists and can be used properly. The procurement of this tool was carried out since the early 2000s so now it is complete.

Control and implementation at SDS Budi Mulia Medan take the form of (a) supervision; (b) monitoring; (c) evaluation; and (d) reporting. Evaluation of the UKS managerial is conducted in the form of a written report by making reports in the mid-year and annual formats. The mid-year format reports activities that have been carried out in 6 months of activities, while the annual
format is an activity that reports activities that have been carried out in one year or 12 months. In addition to reports, the district health team also supervises UKS activities. In addition to supervision activities, there is also monitoring of the implementation of monitoring from the sub-district health team, monitoring activities check the UKS implementation activities that have been carried out by the school UKS implementation team. Assessing whether UKS activities are running well or not, this monitoring activity also serves as an evaluation of the school UKS in carrying out activities so that effective and efficient activities are established.

The process of UKS management activities at SDS Budi Mulia Medan can be carried out well due to several supporting and inhibiting factors. The main supporting factors are internal, namely the high awareness of each school community to create a healthy life in a good school environment, then the availability of complete and adequate facilities and infrastructure such as dental kits, first aid kits, little doctor clothes, thermometers, weight scales, height meters and so on that can be used for school UKS health service activities. Infrastructure that supports UKS activities is the availability of UKS rooms that have met UKS standardization. The supporting factors that come from external sources are the participation of the community, namely the parents of students who want to take part and participate in UKS activities such as participating in healthy environment development activities, as well as cooperation with outside parties such as health centers and school committees.

**Discussions**

One of the UKS planning activities is the formulation of the work program. The UKS work program at SDS Budi Mulia Medan includes (a) health education and health services; (b) a healthy school environment; (c) training of tiwisada cadres or small doctors; (d) school health coaching to the community; (e) procurement of UKS facilities and infrastructure. Planning activities are prepared based on the current condition of the UKS with the results of opinions from the teachers' council, principal, and school committee in the form of meetings held once a year. UKS planning is the first step in managing UKS services to facilitate subsequent activities.

Health education is one of the activities so that students know health science including how to live a healthy and regular life according to the activities carried out aiming to provide an understanding of everything related to health problems and instill the basics of healthy living habits and encourage students to actively participate in every effort for their welfare and their environment.

Health education activities in schools are carried out using counseling activities and skills training. Health education activities are carried out once a week and are included in one of the skills subjects, namely “pendidikan jasmani”. As explained in the Education Unit Level Curriculum (KTSP), especially in the content standards that have been regulated in the Minister of National Education Regulation number 22 of 2006, namely the implementation of health education through curricular activities in the implementation of lesson hours in Physical Education, sports and health subjects. The implementation is provided through increasing knowledge, instilling values and positive attitudes towards the principles of healthy living, and increasing skills in carrying out matters relating to maintenance, assistance, and health care. Health education materials consist of (a) maintaining personal hygiene; (b) recognizing the importance of immunization; (c) recognizing healthy food; (d) recognizing the dangers of diarrhea, dengue fever, and influenza; and (e) maintaining environmental hygiene (school and home).

In addition to health education activities, another UKS activity is to create a healthy school environment. A healthy school environment is a condition where the school environment can support the growth and development of healthy living behavior of students. A healthy school environment does not only mean having safe physical facilities, equipment, water supplies, and other good needs, where students can enjoy a pleasant atmosphere, which of course means a lot for mental and social development. Thus, the efforts carried out include, among others: a) Providing guidance and supervision and maintenance of school buildings and in the environment;
b) Paying attention to and providing advice on school buildings that fulfill health requirements and their equipment; c) Good and harmonious relationships between teachers, students, parents/guardians of students, other school officials, and health workers.

Healthy school environment activities are carried out in the form of fostering a healthy school environment for school residents. Such as fostering the UKS room, and school canteen, the use of clean water sources, garbage, planting toga plants planted by students, and the bathrooms used must be healthy. This activity is also the same thing as health education, which is included in the subject of physical education and then practiced directly in daily activities in the school environment. The purpose of this activity is to familiarize healthy living at school and at home, as well as to create a clean and beautiful environment. Those involved in this activity are not only students but also the principal, teachers, school staff, school committee, and the surrounding community. The community here are residents who live around the school, the guardians of students at SDS Budi Mulia Medan who take an active role in UKS activities.

In addition to school environment coaching activities, coaching activities are also carried out in the family environment and the surrounding community. The coaching process in the community is using a visit from the school UKS team to the surrounding community to socialize and healthy living properly. By the Directorate of Special Education and Special Services for Primary Education in 2013, the development of the family environment can be carried out, among others, with home visits conducted by UKS implementers and health lectures that can be held at school in collaboration with the school council, or combined with activities in the community.

The result of coaching activities in the school environment is the awareness of healthy living in each school community. This is because there are different conditions from the previous situation, namely that there is still no awareness in each of them to live healthily such as littering, lack of personal hygiene such as rarely washing hands after eating. However, since the socialization and guidance on healthy living, the school has become tidier, and more beautiful and created awareness in each school community.

School equipment management is a process of utilization whose target is educational equipment, such as school office equipment, library equipment, teaching media, and other equipment. In carrying out UKS activities at SDS Budi Mulia Medan, supporting facilities and infrastructure are needed. Not only that, good and usable facilities are also needed in UKS activities at school. The facilities and complete UKS equipment at school are very good, making UKS management activities run effectively and efficiently, existing equipment such as beds, thermometers, curtains, body scales, trash cans, cupboards, wheelchairs, tables, chairs, bloom stamps, and many others. Equipment held in the UKS includes p3k manuals, triangular pads, regular pads, sterile gauze, cotton wool, neverland, plasters, grips, splints, scissors, tweezers, tissues, soap, towels/flannels, whistles, flashlights, knives, pipettes, gloves, blankets, pencils, stretchers, safety pins, clips, tape, body scales, and height meters.

Every UKS activity has an activity implementer or what is called the UKS implementation team. One of the implementers is the tiwisada cadre team or school little doctors. Little doctors are students who meet the criteria and have been trained to carry out efforts to maintain and improve health for themselves, friends, family, and the environment. The requirements for schools as a UKS implementation team are the existence of tiwisada cadres 10% of the number of students available. UKS implementers must fulfill the requirements that must be met, namely: a) Having a Decree of the UKS Implementation Team from the Principal; b) Having a teacher who has been trained in UKS; c) Having a UKS room and its equipment; d) Having a KKR (Youth Health Cadre) that has been trained with a minimum number of 10% of all students; e) Implementing TRIAS UKS in daily life.

The tiwisada cadres were then trained and coached by the Medan City UKS implementation team. The existing tiwisada cadres are a combination of students from grades 3, 4, and 5. The form of activities of these tiwisada cadres is the existence of daily pickets, guard duty on Monday, routine activities such as weighing body weight, and height, and first aid in accidents. In their
duties, these tiwisada cadres have a very important role in the implementation of UKS managerial in schools. To keep managerial activities conducive, it is certainly inseparable from obstacles that come from internal and external sources. Especially in UKS activities, there are obstacles in the management of costs used for UKS development, the existing costs are very minimal. To minimize these obstacles, the UKS coach uses his costs such as buying medical equipment and books for UKS needs.

One of the activities in the framework of UKS guidance and development is control and implementation activities. This implementation control includes supervision, evaluation, monitoring, and reporting activities. Evaluation of the UKS managerial at SDS Budi Mulia Medan is conducted verbally in the form of a written report by making reports in the mid-year and annual formats. The mid-year format reports activities that have been carried out in 6 months, while the annual format reports activities that have been carried out in one year or 12 months. Supervision of UKS activities by the district health team was also conducted. The function of this activity is to obtain an overview of the successful implementation of the UKS program, the target of this monitoring activity is the form of UKS management and all components in it such as facilities and infrastructure, tiwisada cadres, and UKS activity programs.

Evaluation is the process of obtaining and presenting information that is useful for considering decision-making alternatives. With this control and implementation, the UKS at SDS Budi Mulia Medan can run well because there are improvements in every activity in the form of evaluation. Along with the implementation of School Health Business (UKS) activities at SDS Budi Mulia Medan, it is certainly inseparable from several supporting and inhibiting factors, including: a) Internal factors: (1) the high awareness of each school community to create a healthy life in a good school environment; (2) the availability of complete and adequate facilities and infrastructure that support UKS activities. Adequate facilities and infrastructure are one of the managerial processes. School equipment management is a process of utilization whose target is educational equipment, such as school office equipment, library equipment, teaching media, and other equipment. So that equipment is needed, if there is no UKS equipment, there is no UKS managerial utilization process. b) External factors: (1) the Education Unit Level Curriculum (KTSP) in the content standards stipulated in the Minister of National Education Regulation number 22 of 2006, namely the implementation of health education through curricular activities, namely the implementation of education during physical education, sports, and health lessons; (2) the existence of cooperation with outside parties, the cooperation is carried out with the school committee and the local sub-district health center. The form of cooperation that is carried out starts from the existence of health counseling and socialization to schools and referrals from schools to the puskesmas. Forms of cooperation with outside parties are commonly referred to as public relations (PR). Public relations is a management function that is held to assess and conclude public attitudes, adjust the policies and procedures of agencies or organizations with the public interest, as well as, carry out a program to gain public understanding and support. With the existence of public relations in the UKS, the UKS management process can be carried out well because of cooperation with external parties which will bring benefits to the UKS and the parties concerned. c) inhibiting factors affecting UKS management activities are constrained by inadequate costs from the school. So management activities are sometimes stalled due to the lack of existing costs.

Empowerment of supporting factors is to improve the quality of awareness about the culture of clean living among school residents through daily activities at school and home. With this increase, it is expected that the culture of clean living will become more qualified and the process of UKS management activities can run by the predetermined objectives. In addition, the availability of complete facilities and infrastructure so that UKS managerial activities can run effectively. Meanwhile, empowerment from external parties is the existence of the Education Unit Level Curriculum (KTSP) in the content standards stipulated in the Minister of Education
Regulation number 22 of 2006. With the KTSP curriculum policy, the UKS activity process can run according to the flow that has been determined in the existing regulations.

Suggestions that can be made are first, for the head of SDS Budi Mulia Medan, it is expected to improve coordination in UKS management to create an effective atmosphere by holding regular meetings to discuss UKS between the school principal and UKS coach. Second, teachers of SDS Budi Mulia Medan create a clean environment in the classroom and teach students to live a healthy life at school and at home. Third, for students or learners as a material to develop talents and a forum for learning, especially about UKS for students. Fourth, for UKS Supervisor of SDS Budi Mulia Medan, is expected to always maintain the process of cooperation between schools and stakeholders in UKS activities and is expected to always enrich knowledge about UKS by studying UKS materials and references related to UKS management. Fifth, for the Department of Educational Administration as a study, especially related to Education Management Science in general and specifically in Special Service Management in the field of School Health Efforts (UKS). Sixth, for other researchers as reference material that can be used as a basis for conducting similar research or further research by developing science, especially those related to special service management.

CONCLUSION

Based on the research focus, data exposure, and research findings and discussion, the results of this study can be concluded as follows (1) UKS management at SDS Budi Mulia Medan starts from (a) UKS planning at SDS Budi Mulia Medan, (b) UKS implementation at SDS Budi Mulia Medan includes health education and health services, healthy school environment, training of tiwisada cadres or small doctors, school health coaching in the community, procurement of UKS facilities and infrastructure, (c) UKS implementation control at SDS Budi Mulia Medan, this implementation control includes supervision, evaluation, monitoring and reporting activities. (2) Factors influencing the management of UKS at SDS Budi Mulia Medan consist of: (a) Supporting factors are: 1) Internal: high awareness of each school community, complete facilities, and infrastructure; 2) External: the existence of community participation, the existence of the KTSP curriculum in the regulation of the Ministry of National Education. (b) Inhibiting Factors: The lack of funding for UKS development.

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