

## ABSTRACT

Labuan Bajo Public Health Center (Puskesmas Labuan Bajo) is one of nursing stay Puskesmas in Resident of Manggarai. Labuan Bajo Public Health Center (Puskesmas Labuan Bajo) is located which so far from Hospital, it is 129 km. In 1998-2000, there were 49 patient who did not want refer to Hospital and keep staying in Puskesmas' nursing stay room , there were 100% patients die in Puskesmas' Nursing Stay Labuan Bajo. Patients were not reconciled, may be caused some reason which related to community behavior.

This research have purpose, such as 1). Identify patient mortality characteristic and related factors with (disease type, age, case condition), 2). Study possibly of recovery, 3). Identify patients' behavior factors and family (ability, conviction, economy, distance between hospital and transportation), 4). Study competence of Puskesmas' Nursing Stay Room (health staff power and facility), 5). Determine service model in Puskesmas' Nursing Stay Room Labuan Bajo that agree with diseases characteristic and circumstance of community.

This research was realized with 40 patients who has dead in Puskesmas' Nursing Stay Room Labuan Bajo who did not want reconciled to the Hospital. This research was carried out in May until July, 2002 by *retrospective* approach.

Result of this research were 1). Patients' mortality characteristic was  $\leq 2$  days 62,5% and patient' mortality  $> 2$  days 37,5%. The children disease type was 45 %, intern disease was 42,5%, midwife & uterus disease was 7.5 %, surgical disease was 5%. Patients' age  $\leq 55$  years old was 80% and age  $> 55$  years old was 20 %. General condition of patient in good condition was 7,5%, weak general condition was 90% and unaware patient was 2,5%. 2) Recovery possibly was 82,5% that most possibly could be helped, and less possibly could be helped was 17,5 % and slow behavior was 20%. Knowledge of patients' family were at well knowledge was 27,5% and adequate knowledge was 65% and less knowledge was 7,5%. Families conviction were 82,5% patient's conviction who certain could recover and 17,5% patient's conviction who uncertain could recover. Family earning  $< \text{Rp } 4.000.000$  annual was 72,5% and family earning  $\geq \text{Rp } 4.000.000$  was 27.5 %. The family who told distance of Hospital was far 72,5% and too far was 27,5% . The family did not have time to call vehicle was 55 % and vehicle was available 37,5% and there was no available vehicle 7,5%, 4) Medical staff in Puskesmas' Nursing Stay Room were 8 people who doubled in other task, all of them never carried out children's disease treatment training, internal disease, surgical treatment and midwife & uterus treatment. Building facility and rooms, telephone, communication radio, adequate car vehicle. Medical equipment of Labuan's Bajo Puskesmas was not adequate.

Conclusion from this research are 1). Mortality characteristic that is most of patient mortality  $\leq 2$  days, children's disease type and internal disease, weak condition, age  $< 55$  years old. 2) the patient's possibly could be helped if was served by medical personil and adequate equipment. 3). The community hope that patient would recover just only by treatment in Puskesmas' Nursing Stay Room in Labuan

transportation is too far. 4). Personil competency from number side is adequate, from training aspect dan doubled task is not adequate. The competency of Supporting Facility include building and rooms are adequate, from medical equipment is not adequate.

According patient characteristic, community and Labuan Bajo Public Health Center ( Puskesmas Labuan Bajo) competency, then service that was needed exist in Puskesmas's Nursing Stay Room Labuan Bajo is "The Specific Village or primitive Puskesmas Nursing Stay Service Model" (Rawat Inap Puskesmas Terpencil").

**Key words : Mortality Characteristic, Community Characteristic, Public Health Center Competency . "The specific village or primitive Puskesmas Nursing Stay Service Model.**

