## Implementation of Covid-19 Vaccination Policy At Bhayangkara Hospital Banjarmasin, As An Effort To Maximize The Role of Police In The Community

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### Article Info

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The critical role of the police in a pandemic situation, of course, makes the vaccine implementation program at Bhayangkara Hospital very crucial. The National Police is one of the spearheads in dealing with COVID-19. The protection of the apparatus is an important thing that needs to be considered, including implementing the vaccination policy at Bhayangkara Hospital Banjarmasin. The purpose of this study was to determine the implementation of the COVID-19 vaccination policy. The research focuses on the effectiveness and obstacles faced in implementing vaccinations to handle the COVID-19 Pandemic in South Kalimantan. This research uses a qualitative approach, with the basis of case study research, namely research that is carried out intensively, in detail, and in-depth on a problem that is the object of research. This research is a case study of the COVID-19 vaccination policy, including policy formulation and vaccination implementation. The qualitative approach was carried out using the desk study method, active observation participation, semi-structured interviews, and documentation. This study uses Weimer and Vining's theory because this theory can briefly summarize the various factors that influence policy implementation. These factors include the characteristics of the policy itself, its resources, and the policy environment. The theory can provide an overview for the government in formulating policies so that the established policies can be implemented because the implementation (implementation) of policies is an activity to generate results (output), impact (outcome), benefits (benefits), and impact (impact) that can be enjoyed. By the target group. Implementation of policies vaccines in RS Bhayangkara Banjarmasin already performing well. Even so, keep in mind that vaccines do not automatically mean that COVID-19 will disappear quickly. It takes time to vaccinate the entire population, and The realization of vaccine distribution will have its challenges with the geographical conditions of South Kalimantan, which have various typographical areas. The availability of the vaccine itself is also one of the keys related to its production capacity, affecting the timing of vaccine production for several residents in South Kalimantan.

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#### 1. INTRODUCTION

Coronavirus Disease 2019 (COVID-19) has become a serious concern for all countries since the end of 2019 until now. Even for the next few years. The virus that originated in one of the provinces in China has spread so fast and has a tremendous impact on all aspects of life (Ministry of Health, 2020). Since discovering the first case of COVID-19 in Indonesia on March 2, 2020, the increase in cases is still very massive. There is no sign of the end of this COVID-19 Pandemic. Even the number of cases infected with COVID-19 is increasing. Based on the COVID-19 Handling Task Force data, as of April 15, 2021, the number of positive COVID-19 infections reached 1,589,359. With the death toll reaching 43,073 people. Data on COVID-19 cases in South Kalimantan Province recorded 30,479 cases as of April 15, 2021 (South Kalimantan COVID-19 Task Force, 2021).

Meanwhile, community vulnerability is increasing due to the lack of public awareness of implementing health protocols. It is estimated that the spread of new cases will be increasingly out of control. Therefore, it is necessary to immediately intervene in implementing health protocols and other effective interventions to break the chain of disease transmission, namely through vaccination efforts. Various countries, including Indonesia, have made efforts to develop ideal vaccines to prevent SARS-CoV-2 infection with various platforms, namely inactivated virus vaccines, live attenuated virus vaccines, virus vector vaccines, and nucleic acid vaccines. Vaccines include viruses (virus-like vaccines) and protein subunit vaccines (Dirjen Juknis Kemenkes, 2021).

Responding to this fact, President Joko Widodo ratified the Presidential Regulation (Perpres) of the Republic of Indonesia Number 99 of 2020 concerning Vaccine Procurement and Vaccination Implementation in the Context of Combating the 2019 Coronavirus Disease (COVID-19) Pandemic. The Presidential Regulation regulates the implementation of vaccinations to protect the Indonesian people from hazardous COVID-19 infection. Furthermore, the government has set firm steps to implement COVID-19 Vaccination through Presidential Regulation Number 14 of 2021. Where it is stated that there are sanctions in the form of administrative sanctions to criminal sanctions for everyone who has been designated as the target recipient of the COVID-19 vaccine who refuses it (Rahman, 2021). ; Prastyowati, 2020). Vaccination is an effective measure in tackling disease transmission and protecting public health from the threat of COVID-19. Furthermore, in the long term, it is projected to reduce the social and economic impacts that currently arise due to the COVID-19 Pandemic (Yuningsi, 2020).

The implementation of the vaccination policy regulated by Presidential Regulation (Perpres) of the Republic of Indonesia Number 99 of 2020 concerning Vaccine Procurement and Vaccination Implementation in the Context of Combating the 2019 Coronavirus Disease (COVID-19) Pandemic is faced with several obstacles that must be faced. These constraints, namely: 1) The vital role of the hospital bureaucracy and the health office in policy implementation. In this case, if the interests of the bureaucracy can be carried out properly, then the implementation of policies can be achieved; 2) Community demands. In this case, if the community's demands are not included or are ignored in the implementation phase. Then the objectives of the policy cannot be adequately achieved. 3) The absence of a standardized feedback system. Opinions from the community are not given a response from the party implementing the policy 4) The emergence of conflict due to too many actors involved in the implementation phase of the COVID-19 vaccination policy (Sugiono, 2006).

In South Kalimantan, vaccines have begun to be distributed to 10 districts in the second phase of the COVID-19 vaccination program. In the early stages in January 2021, as many as 30,905 registered health workers received the first phase of the COVID-19 vaccine in the province of South Kalimantan. Where the Vaccination was injected at 288 health facilities with 4,598 vaccinators. In the second stage in February 2021, 6940 vials of vaccine came per vial for ten doses. The Head of the South Kalimantan Health Service stated that the target for the elderly and public service officers to be vaccinated for the first term is around 39,000. With details of 21,543 for the elderly and 18,256 for good public services, police, TNI, journalists, to community leaders (Banjarmasin Post, 2021). Until the end of February 2021, based on data from the South Kalimantan Health Office, the realization of Vaccination for health workers in the first injection was 86.22 percent and the second injection was 51.28 percent.

The COVID-19 Vaccination that arrived in South Kalimantan, based on data from the Indonesian Ministry of Health, is in phase two and term two. South Kalimantan received 15,660 vials of vaccine, one

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vial for ten doses. Based on the Indonesian Ministry of Health data, the number of targets for South Kalimantan for the March 2 term is 77,000. Even so, the need for the number of vaccines in South Kalimantan is 155.832 doses. Most vaccine targets are in Banjarmasin, with a total of 59,077 people. The second highest is Tanahlaut with 2,189 people, and the smallest for Balangan with 852 people (Banjarmasin Post, 2021).

The number of vaccines in Banjarmasin is as many as 59,077 people; of course, this number is still tiny and has not met all targets. Because the shortage of vaccines from health workers will also be taken from the next vaccine, this condition is interesting to see how the implementation of the vaccination policy is carried out specifically in Banjarmasin.

On the other hand, there have been several vaccine rejections during a shortage of vaccines. One of the resistance to Vaccination revolves around the fear of the ingredients in vaccines. There is also a refusal to vaccinate for conspiracy theories, suspecting that Vaccination is a hidden agenda of one country to take advantage of other countries. Another reason for refusal is the assumption that the immune mechanisms formed after exposure to disease are more robust than the "artificial" immunity trained through Vaccination. In addition, there is also a rejection because Vaccination is considered a personal choice, not an obligation that must be carried out because of a government program (Chryshna, 2020).

One of the provinces with a reasonably high population density and the number of cases infected with COVID-19 is also relatively high. Therefore, South Kalimantan, in particular, the city of Banjarmasin, is essential to accelerate this vaccination program to reduce the increasing number of cases infected with COVID-19, which is increasingly massive. Of course, for this purpose, strategic policies are needed so that their implementation can run effectively and efficiently. The most important thing, in this case, is the extent to which each vaccination implementer can describe national policies in the form of strategic programs and effective and efficient resource management, as well as the extent of the ability to overcome various obstacles faced in the implementation of COVID-19 Vaccination, such as the incidence of vaccine rejection and the reluctance of vaccination targets to carry out vaccinations, which often occur in Indonesia.

After failing to control the rate of transmission of COVID-19 in the last ten months, the government seems to have made the mass vaccination policy hope for victory against the coronavirus. There is an impression that the vaccine is expected to make up for the failure of previous unsuccessful control efforts. This failure is more due to inappropriate policies or inconsistent implementation (Chryshna, 2020).

As one of the Vaccine provider hospitals in Banjarmasin, Bhayangkara Hospital has a strategic function as a Tk III hospital in Banjarmasin, which provides health services to the National Police members. Civil Servants and their families. The vital position of the police as law enforcement officers and protectors of the community during the Pandemic is essential in providing health support for police operational tasks at the South Kalimantan Regional Police and improving public and public health services for the police. The vital position of Bhayangkara Hospital in providing vaccines for officials and their entire families in South Kalimantan was not running optimally. The number of permanent members of the South Kalimantan Regional Police is around 5000 people, plus the number of family members and retired police officers. Availability of a limited number of vaccines is one of the obstacles. So far, until early June 2021, data on the total number of vaccines received was 605 vials, with a total of 588 vials used. There are nine vials (less dose) and eight vials (change of expiry date) that cannot be used (Dokkes Polda Kalsel, 2021).

While on the other hand, the National Police, especially the South Kalimantan Police, is responsible for breaking the Covid-19 Transmission Chain to provide protection and ensure the safety and security of the community, not only that but also assist the process of National Economic Recovery, namely by making the Covid-19 Vaccination program a success by providing Education on the importance of Vaccines. In addition, the vital role of the National Police is to work together with the Health Service and the TNI to assist the duties of health workers by preparing COVID-19 tracers and vaccinators to the village level. The preparation of tracing and vaccinator personnel is a follow-up to President Joko Widodo's instructions to accelerate the control of the COVID-19 Pandemic in the country through strengthening 3T and 3M. 3M and 3T efforts are the primary keys to break the chain of transmission of COVID-19. To carry out these two programs, a large number of skilled human resources are needed.

In addition, the Regional Police has also prepared Bhabinkamtibmas personnel spread throughout South Kalimantan to carry out tracers. The Kapolda instructed Bhabinkantibmas to continue to foster cooperation with Babinsa and the Health Service in their respective areas. It is hoped that the link between the three can accelerate the decline in the rate of transmission of COVID-19—babinkamtibmas functions as the frontline in socializing, overseeing distribution, and carrying out vaccinations. A similar role was successful when Indonesia held a polio vaccination program several years ago. Massive, comprehensive, and strategic communication strategy, including rejection because vaccines are halal and haram.

Seeing the vital role of the National Police, of course, the vaccine implementation program at Bhayangkara Hospital is very crucial. Vaccination policy for police members can also be seen as an exemplary factor (apparatus) to the community so that they can indirectly socialize the positive impact of vaccines for the community. The National Police is one of the spearheads in dealing with COVID-19, so that the protection of the apparatus is an important thing that needs to be considered, including how to implement the vaccination policy at Bhayangkara Hospital Banjarmasin.

The explanation above is an important topic that must be raised in the research. This research topic has a novel value because research on vaccination policy, specifically in South Kalimantan, has not been done much. Let alone explicitly targeting the critical role of the Indonesian National Police as one of the crucial aspects in resolving the Pandemic in Indonesia. Based on this description, the authors were interested in researching the implementation of the COVID-19 vaccination policy. The research focuses on the effectiveness and obstacles faced in implementing vaccinations to handle the COVID-19 Pandemic in South Kalimantan.

#### 2. METHOD

This research is a case study of the COVID-19 vaccination policy, which includes policy formulation to Vaccination. This research uses a qualitative approach based on case study research, namely research that is carried out intensively, in detail, and in-depth on a problem that is the object of research. The qualitative approach was carried out using the desk study method, active observation participation, semi-structured interviews, and documentation. This method was chosen because it relates to the research objective, namely to obtain detailed information regarding policy formulation activities at Bhayangkara Hospital Banjarmasin. This study aims to produce a comprehensive picture of the effectiveness of implementing the COVID-19 vaccination policy and the obstacles faced, and the developing opinions related to the COVID-19 vaccination policy and its comprehensive implementation.

This type of research is a case study research type. Qualitative research with a case study approach is considered the most relevant to describe conditions related to implementing detailed vaccine policies. The case study at Bhayangkara Hospital was also chosen for several reasons: Bhayangkara Hospital has a strategic function as a Tk III hospital in Banjarmasin, which provides health services to the National Police Civil Servants and their families. The critical position of the police as law enforcement officers and protectors of the community during the Pandemic is essential in providing health support for police operational tasks at the South Kalimantan Regional Police and improving public and public health services for the police. The vital position of Bhayangkara Hospital in providing vaccines for officials and their entire families in South Kalimantan makes this hospital a research case study location.

The location was chosen at Bhayangkara Hospital Banjarmasin because it is one of the hospitals that carry out COVID-19 vaccination activities in Banjarmasin. The selection of this hospital is also following the author's place of work to carry out research using the observation active participation approach. So it is hoped that the research results can be scientifically validated through a literature study, which then verified the data and analysis through interviews and direct observations in the field.

In addition, in determining the research location, the best way was chosen by considering substantive theory and exploring the field to find conformity with the reality on the ground (Moleong, 2012). This condition focused on practical involvement based on document and data analysis and carried out daily in detail, considering time, cost, and geographical environment.

#### 3. FINDINGS AND DISCUSSION

Hospital is one of the health facilities where health efforts are carried out. Health efforts are every activity to maintain and improve health to realize optimal health degrees for the community (Husin & Awaliyah, 2020). Bhayangkara Hospital (RSB) Hoegeng Iman Santoso is one of the hospitals in the city of Banjarmasin. Rs Bhayangkara is a public hospital owned by the government in this case, under the control of the Polri institution. His job is to serve the extended family of the National Police in South Kalimantan and serve the general public. In addition to providing public services, Bhayangkara Banjarmasin Hospital also has unique capabilities to support police operational tasks or *scientific crime investigations*. Bhayangkara Hospital was initially established only as a Temporary Treatment Place (TPS) in 1992, located on Jalan A

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Yani Km 3.5 Banjarmasin flanked by the Banjarmasin Police StationBuilding andLanal Banjarmasin (Rahman, 2019).

#### **3.1 Hospital Internal and External Conditions**

#### 1. Internal Conditions

Condition of the hospital. Bhayangkara Banjarmasin, seen from the conditions of service, Finance, organization, and human resources, as well as facilities and infrastructure, can be described as follows: a. Services

In-hospital services, Bhayangkara Banjarmasin, has the advantage that it can provide health services to patients and compete with other public hospitals. These advantages include:

1) RS. Bhayangkara Banjarmasin is a hospital owned by the National Police with complete services, namely inpatient, outpatient, DOKPOL/DVI, pharmacy, Midwifery, surgical installation Central, Medical Check-Up, Hemodialysis, and Virology Laboratory.

2) Through the Decree of the Head of the Regional Police of South Kalimantan number: 25/II/2013 dated February 25, 2013, concerning the Appointment of the Banjarmasin Level III Bhayangkara Hospital as an Integrated Service Center for the Handling of Victims of Drug Abuse (*One-Stop Service Center Harm Reduction*) for members of the National Police/PNS Polda South Kalimantan.

2) Bhayangkara Hospital Level III Banjarmasin was confirmed as a Class C Hospital through a Certificate of Hospital Class Determination by the Ministry of Health of the Republic of Indonesia Number: HK.02.03/I/2252/2013 concerning Improvement of the Bhayangkara Hospital of the Indonesian National Police.

4) Bhayangkara Hospital Level III Banjarmasin began to fully implement the financial management of the Public Service Agency in 2014 based on the Decree of the Minister of Finance of the Republic of Indonesia number 203/KMK.05/2014 dated September 9, 2014, regarding the Designation of Level III Hospital Bhayangkara Banjarmasin at the State Police of the Republic of Indonesia Indonesia as a Government Agency Implementing the Financial Management of Public Service Agencies.

5) Bhayangkara Hospital Level III Banjarmasin succeeded in achieving accreditation at the Plenary level (five stars) from the 2012 accreditation version from KARS.

6) RS. Bhayangkara Banjarmasin is a hospital with a Virology Laboratory in the 2nd Floor Dokpol Compartment building in collaboration with the South Kalimantan Provincial Government, PT. Pamapersada, and Polda South Kalimantan

However, several things need to be considered, especially in applying "zero cost" for services to patients, members of the police, and their families, which still cannot be carried out optimally so that a better restructuring of the management system is needed. b.Finance

Hospital. Bhayangkara Banjarmasin has implemented the SAK Reporting System under the National Police Chief Regulation number 3 of 2010 so that cash flow control is better and more adequate and carried out in a professional, transparent, and accountable manner.

c. Organizational Structure and Human Resources

The organizational structure of the hospital Bhayangkara Banjarmasin, which the National Police have designated as the Technical Implementation Unit (UPT), has made it more explicit about the existence and stability of the hospital organization within the National Police. The number of human resources owned by the hospital. Bhayangkara Banjarmasin is currently sufficient to carry out organizational activities regarding the number of medical, paramedical, and non-medical personnel in providing services to patients. Personnel in charge of Finance are still minimal, especially those with an accounting education background. d. Facilities and Infrastructure

Condition of facilities and infrastructure owned by the hospital. Bhayangkara Banjarmasin is quite adequate, especially in inpatient and outpatient facilities, but many health facilities in the form of medical devices are not suitable because they are constrained by the scarcity of spare parts available in the market. Some of the conditions of the buildings have to be renovated to improve the quality of service to patients.

#### 2. External Conditions

#### a. Service Aspects

In order to improve service quality, RS Bhayangkara Banjarmasin has opened direct access from the main road A. Yani and is located in the area downtown of Banjarmasin.

#### b. Aspects of Facilities and Infrastructure

The technology of medical devices in hospitals Bhayangkara Banjarmasin is adequate, although private hospitals still leave behind some medical equipment. The purchase of medical equipment depends on currency exchange rates and inflation rates.

#### c. Financial Aspects

The financial management system of the Public Service Agency provides the authority to directly manage the income obtained from patients as well as from the results of collaborations and grants. It is possible to improve the quality of health services to patients with the flexibility of financial management based on economic principles, productivity, and sound and professional business practices (Suryoguryanto, 2014).

#### d. Organizational and Human Resources Aspects The

regulations that apply to hospitals that implement BLU financial management provide legality and organizational flexibility in carrying out their operations. The number of human resources is no longer on the list of personnel determined by the police because of the hospital. Bhayangkara Banjarmasin can appoint non-PNS employees, especially paramedics recruited from the Nursing Academy (Akper), as well as the strategic location of the hospital in the Banjarmasin area so that the sources of general practitioners and specialists are relatively easy to obtain. However, the demands on salary standards and benefits for non-staff PNS (BLU employees) cannot be fulfilled optimally because of the hospital's financial condition. Bhayangkara Banjarmasin, which is not yet possible.

#### 3.2 Implementation of Vaccination Policy at Bhayangkara Hospital Banjarmasin

Vaccination is given to stimulate the body's immune system to form specific antibodies to protect the body from diseases that vaccines can prevent. There are several types of vaccines, but regardless of the type, the goal is the same: to stimulate an immune reaction without causing disease. Social responsibility in the health sector is expected to build a good relationship between the government and the related community.

COVID-19 Vaccination aims to reduce the transmission/transmission of COVID-19, reduce morbidity and mortality due to COVID-19, achieve group immunity in the community (*herd immunity*) and protect the community from COVID-19 in order to remain socially and economically productive. Herd immunity can only be formed if vaccination coverage is high and evenly distributed throughout the Region. Prevention efforts through the provision of vaccination programs, if assessed from an economic point of view, will be much more cost-effective when compared to treatment efforts.

As one of the Vaccine provider hospitals in Banjarmasin, Bhayangkara Hospital has a strategic function as a Tk III hospital in Banjarmasin, which provides health services to the National Police members. Civil Servants and their families. The critical position of the police as law enforcement officers and protectors of the community during the Pandemic is essential in providing health support for police operational tasks at the South Kalimantan Regional Police and improving public and public health services for the police. The critical position of Bhayangkara Hospital is in providing vaccines for officials and their entire families in South Kalimantan.

Studying policy implementation problems means trying to understand what happened after a program was implemented or formulated. Namely, the events and activities that occurred after the ratification process at both the central government levels and local (Mazmanian and Sabatier in Abdul Wahab, 1989). Furthermore, to obtain a good understanding of implementation, attracting behavior from institutions, agencies or hospitals, and clinics. Those are responsible for a program and its implementation towards target groups (target groups/society). However, we also need to examine the various networks of social and economic forces carefully. That directly or indirectly affects the behavior of the various parties involved in the program and ultimately impacts the program (Abdul Wahab, 1989).

In the view of Weimer and Vining (1999: 396), there are three major groups of variables that can affect the successful implementation of a program, namely: (1) policy logic; (2) the environment in which the policy operates; and (3) the ability of policy implementers. A complete explanation of Weimer and Vining's theory is as follows:

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#### 1) The logic of a policy The

the logic of a policy is intended so that a policy applied is *reasonable* and has theoretical support. We can think of the logic of a policy as the logical relationship of a hypothesis. Example: a policy or program from the central government in implementing vaccinations in the context of dealing with the Pandemic Coronavirus Disease 2019 (COVID-19)through Presidential Regulation (Perpres) of the Republic of Indonesia Number 99 of 2020. This policy will be successful if the following hypothesis supports it: first, there is a vaccine that is effective in the types and criteria of vaccines that can be used in the implementation of COVID-19 Vaccination; second, the public has a good understanding of the functions and benefits of vaccines; third, the funds that have been disbursed are used for the stated purposes; fourth, the results achieved can be proven validly; and fifth, COVID-19 Vaccination is carried out in several stages considering the availability, arrival time and safety profile of the vaccine. This means that the content of a policy or program must include various aspects that can enable the policy or program to be implemented at a practical level.

In the hospital Bhayangkara Banjarmasin, the logic of the vaccine policy for members of the National Police is very reasonable. The National Police, especially the South Kalimantan Police, is responsible for breaking the Covid-19 chain of transmission to provide protection and ensure the safety and security of the community. Not only that but also to assist the process of National Economic Recovery, namely by making the Covid-19 Vaccination program a success by providing Education on the importance of Vaccines. In addition, the critical role of the National Police is to work together with the Health Service and the TNI to assist the duties of health workers by preparing COVID-19 tracers and vaccinators to the village level. The preparation of tracing and vaccinator personnel is a follow-up to President Joko Widodo's instructions to accelerate the control of the COVID-19 Pandemic in the country through strengthening 3T and 3M. 3M and 3T efforts are the primary keys to break the chain of transmission of COVID-19. To carry out these two programs, a large number of skilled human resources are needed.

In addition, the Regional Police has also prepared Bhabinkamtibmas personnel spread throughout South Kalimantan to carry out tracers. The Kapolda instructed Bhabinkantibmas to continue to foster cooperation with Babinsa and the Health Service in their respective areas. It is hoped that the link between the three can accelerate the decline in the rate of transmission of COVID-19—babinkamtibmas functions as the frontline in socializing, overseeing distribution, and carrying out vaccinations. A similar role was successful when Indonesia held a polio vaccination program a few years ago. Massive, comprehensive, and strategic communication strategy, including rejection because vaccines are halal and haram.

Seeing the critical role of the National Police, of course, the vaccine implementation program at Bhayangkara Hospital is very crucial. Vaccination policy for police members can also be seen as an exemplary factor (apparatus) to the community so that they can indirectly socialize the positive impact of vaccines for the community. The National Police is one of the spearheads in dealing with COVID-19, so that the protection of the apparatus is an important thing that needs to be considered, including how to implement the vaccination policy at Bhayangkara Hospital Banjarmasin.

#### 2) The environment in which the policy is operated The

the environment in which the policy is operated will affect the successful implementation of a policy. What is meant by this environment includes the social, political, economic, defense, and security environment and the physical or geographical environment. A policy can be successfully implemented in a particular area, but it fails to be implemented in other areas due to different environmental conditions.

This policy determined the number of targets per group of vaccine recipients carried out through the consideration of the Committee for the Handling of COVID-19 and the National Economic Recovery (KPC-PEN). The determination of the number of targets per group of vaccine recipients at the provincial and district/city levels will be the basis for determining the allocation and distribution of vaccines and vaccination logistics by also considering reserves as needed (Ministry of Health, 2021).

The environment where the vaccine policy is implemented is very supportive, namely facilities and the infrastructure healthcare complete and support vaccine implementation activities in-hospital services. Bhayangkara Banjarmasin has the advantage that it can provide health services to patients and can compete with other public hospitals. These services include the following:

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	Table 1. KS Bhayangkara Banjarmasin Health Service					
~	Medical Check-Up Service Bhayangkara Hospital Banjarmasin	~	24 Hour	~	Laboratory PCR Virology Laboratory	
~	Inpatient Reception 24 hours	~	Emergency Room (IGD) 24 hours	~	Radiology 24 hours	
~	Outpatient Polyclinic:	~	Operating Room 24 hours	~	Nutrition Consultation	
~	Specialist PolyclinicNerves	~	Dokpol Service: Forensic (VER/Autopsy)	~	Retrieval Body	
~	Internal Medicine Specialist Polyclinic	~	Integrated Service Center (PPT)	~	Lobby/Waiting Room	
~	Polyclinic Surgical	~	Treatment Prisoners	~	SWAB Test	
~	Dental Specialist Polyclinic	~	Drug-Free Certificate	~	PCR Test	
~	Polyclinic Urology Specialist	~	Medical Check-Up	~	Ambulance	
~	Polyclinic Gynecologist	~	Treatment	~	laundry room	
~	Polyclinic ENT Specialist	~	Inpatient Adult / Child	~	General Kitchen	
~	Ophthalmology Specialist	~	Clinic Maternity Hospital Inpatient	~	Prayer Room	
~	Cardiologist	~	ICU	~	24-hour CCTV	
~	Polyclinic Psychiatric Specialist	~	Hemodialysis	~	Parking Area Guarded Parking	
~	Polyclinic Pediatrician	~	Support Services	~	Virology Laboratory PCR	
~	Polyclinic Specialist Dermatology	~	Medical Record	~	Radiology 24 hours	
~	Polyclinic Medical Rehabilitation (Physiotherapy)	~	Pharmacy / Pharmacy 24 hours	~	Nutrition Consultation	

#### Table 1. RS Bhayangkara Banjarmasin Health Service

Source: Data processed by researchers

In addition to the facilities and infrastructure, health is very completed's support activities vaccine implementation—work culture in the hospital. Bhayangkara Banjarmasin strongly supports the implementation of the vaccine. Work culture is also is a thing very essential in favor of the vaccine policy for all police members—hospital Culture. Bhayangkara Banjarmasin is influenced by two things: the hospital's culture as a health service to all civil servants at the National Police and families and the general public. With the BLU financial management system (Public Service Agency) at the hospital. Bhayangkara Banjarmasin requires a change in organizational culture that leads to corporate culture and learning new management patterns. Hospital Culture. Bhayangkara Banjarmasin is embodied in the embodied values, namely: 1. Togetherness of

Hospital Performance. Bhayangkara Banjarmasin does not depend on individuals, but the implementation is carried out in collaboration with each of its personnel.

2. Empathy for

every hospital personnel. Bhayangkara Banjarmasin has a sense of responsibility, cares about the assigned tasks, and feels the problems of others in their working environment.

3. Respond to

each hospital personnel. Bhayangkara Banjarmasin must be sensitive and responsive to its environment work to provide the best quality service.

#### 1

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#### 4. Polite

every hospital personnel. Bhayangkara Banjarmasin must have excellent and humble attitudes and behavior towards patients and colleagues to improve the quality of health services.

3) The ability of the policy implementor

The ability of the implementor in the success of a policy can be influenced by the level of competence and skills of the implementer's policy. The District/City Health Office collects data on health service facilities that will be the place for implementing COVID-19 vaccination services through coordination efforts with all health service facilities. The District/City Health Office then conducts an assessment of health service facilities and makes determinations through the Decree of the Head of the District/City Health Office and inputs the data into the Vaccination Pcare application.

The Health Service Facilities that carry out the COVID-19 Vaccination are as follows:

1. Puskesmas, sub-health centers;

Clinic;

3. Hospitals; and

4. Health service unit at the Port Health Office (KKP).

Health service facilities that are implementing COVID-19 vaccination services must meet the following requirements:

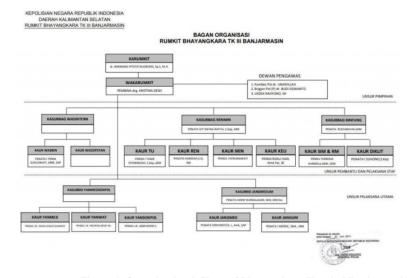
1. have health personnel implementing COVID-19 Vaccination;

2. have a cold chain facility by the type of COVID-19 vaccine used or by the provisions of the legislation; and

 $\overline{3}$ . has an operational permit for Health Service Facilities or is determined by the Minister by the provisions of the legislation.

Health service facilities that cannot meet point 2 can be a place for COVID-19 vaccination services but are coordinated by the local puskesmas. COVID-19 vaccination activities include the planning, implementation and monitoring, and evaluation stages, where all these stages will be assessed whether the policy's implementation follows the set targets.

To maximize its role and function as a Hospital in Banjarmasin, specifically in supporting the policy of implementing Vaccines for members of the Police in South Kalimantan, the following is the organizational chart of Bhayangkara Hospital:



#### Figure 1. Organizational Chart of Bhayangkara Hospital Banjarmasin Source: Bhayangkara Hospital Website, 2021

In the organizational chart, the leadership element consists of the Head of the Hospital. Bhayangkara Banjarmasin (Karumkit Bhayangkara) and Deputy Head of the Hospital. Bhayangkara Banjarmasin (Wakarumkit Bhayangkara). Meanwhile, the auxiliary elements of the leadership and staff implementing

staff consist of the Head of the sub-section of internal control (Head of Sub-section of Wasintern), Head of sub-section of planning and administration (Head of Sub-section of Renmin), and Head of sub-section of function development (Head of Sub-section of Binfung). The implementing element consists of police medical services (Yanmedokpol) and the field of medical and general support (Jangmedum).

Vaccines are one way that is considered capable of accelerating the normalization of conditions to live life back to normal. Even so, that does not mean there are no other solutions. Vaccination is one of the other efforts that can be carried out, namely by providing immunity to diseases, including COVID-19. With more and more people becoming immune to the virus, it is hoped that in the future, there will be herd immunity or group immunity where everyone already has immunity and no longer transmits the virus to others.

#### 4. CONCLUSION

1

This study uses the theory of Weimer and Vining because this theory can briefly summarize the various factors that influence the implementation of a policy. These factors include the characteristics of the policy itself, its resources, and the policy environment. The theory is expected to be able to provide an overview for the government in formulating policies so that the established policies can be implemented because the implementation (implementation) of policies is an activity to generate results (*output*), impact (*outcome*), benefits (*benefits*) and impact (*impact achieved*) that can be enjoyed them.

The implementation of vaccine policies in general at Bhayangkara Hospital Banjarmasin has been carried out well. Even so, keep in mind that with a vaccine, it does not mean that COVID-19 will automatically disappear quickly. It takes time to vaccinate the entire population, of which Indonesia alone consists of more than 230 million people. The realization of vaccine distribution will have its challenges with the geographical conditions of South Kalimantan, which have various typographical regions. The availability of the vaccine itself is also one of the keys, which is related to its production capacity, which will also affect the timing of vaccine production for several residents in South Kalimantan

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