RINGKASAN

Raisa Aprilia, 2026. **Implementasi Keputusan Menteri Kesehatan Nomor HK.01.07/MENKES/33/2025 Mengenai Petunjuk Teknis Pemeriksaan Kesehatan Gratis Hari Ulang Tahun di Puskesmas Kanigaran Kota Probolinggo.** Dr. Supriyanto,S.Sos., M.Si. Mastina Maksin, S.AP., M.AP, 153 hal + xiv

Penyakit tidak menular (PTM) seperti hipertensi dan diabetes terus meningkat di Indonesia. Sebagai respons, pemerintah menerbitkan Keputusan Menteri Kesehatan Nomor HK.01.07/MENKES/33/2025 tentang Petunjuk Teknis Pemeriksaan Kesehatan Gratis Hari Ulang Tahun (PKG), yaitu program pemeriksaan kesehatan gratis pada hari ulang tahun warga guna mendorong deteksi dini penyakit. Puskesmas Kanigaran Kota Probolinggo mengemban target sasaran terbesar di kota, yakni sekitar 23.000 orang pada tahun 2025.

Penelitian ini bertujuan menganalisis implementasi kebijakan PKG di Puskesmas Kanigaran serta mengidentifikasi faktor pendukung dan penghambatnya. Metode yang digunakan adalah kualitatif deskriptif melalui wawancara, observasi, dan dokumentasi, dengan analisis menggunakan teori implementasi Grindle (2018) yang mencakup dua dimensi: isi kebijakan dan konteks implementasi.

Hasil penelitian menunjukkan program PKG sudah berjalan, meskipun belum optimal. Masyarakat mendapat pelayanan kesehatan gratis yang lebih mudah dijangkau melalui posyandu ILP, dan deteksi dini PTM meningkat. Puskesmas mengembangkan strategi jemput bola ke posyandu, sekolah, dan kantor OPD sebagai inovasi atas rendahnya partisipasi masyarakat. Kolaborasi antar aktor berjalan kondusif: Dinas Kesehatan berperan sebagai fasilitator, kader posyandu menjadi penggerak masyarakat, dan seluruh staf menunjukkan komitmen tinggi meski beban kerja berlipat.

Kendala utama yang ditemukan adalah kekurangan tenaga kesehatan sehingga Puskesmas Pembantu (Pustu) sempat tutup sementara, beberapa komponen pemeriksaan belum terlaksana akibat ketiadaan reagen dan pelatihan, sebagian masyarakat enggan menindaklanjuti hasil abnormal, serta perubahan petunjuk teknis yang berulang dari Kemenkes menyulitkan penyesuaian di lapangan.

Kata Kunci: Implementasi Kebijakan, Pemeriksaan Kesehatan Gratis, Penyakit Tidak Menular, Teori Grindle, Puskesmas Kanigaran

SUMMARY

Raisa Aprilia, 2026. **Implementation of the Minister of Health Decree Number HK.01.07/MENKES/33/2025 on Technical Guidelines for Free Birthday Health Screening at Kanigaran Health Center, Probolinggo City.** Dr. Supriyanto,S.Sos., M.Si. Mastina Maksin, S.AP., M.AP, 153 page + xiv

Non-communicable diseases (NCDs) such as hypertension and diabetes continue to rise in Indonesia. In response, the government issued Minister of Health Decree Number HK.01.07/MENKES/33/2025 on Technical Guidelines for Free Birthday Health Screening (PKG) a program providing free health check-ups to citizens on their birthday to promote early disease detection. Kanigaran Health Center carried the largest target coverage in the city, approximately 23,000 people in 2025.

This study aimed to analyze the implementation of the PKG policy at Kanigaran Health Center and to identify its supporting and inhibiting factors. A qualitative descriptive method was used, with data collected through interviews, observation, and documentation. The analysis applied Grindle's (2018) implementation theory, covering two dimensions: content of policy and context of implementation.

The findings show that the PKG program has been running, though not yet fully optimal. The community received accessible free health services through integrated community health posts (posyandu ILPt. The health center proactively developed an outreach strategy visiting posyandus, schools, and government offices as a grassroots innovation to boost participation. Collaboration among actors was constructive: the District Health Office served as a facilitator, community health volunteers mobilized residents effectively, and all staff showed high commitment despite double workloads.

The main challenges included a shortage of health workers that caused sub-health centers (Pustu) to temporarily close, some examination components could not be carried out due to missing reagents and training, some community members remained reluctant to follow up on abnormal results, and repeated revisions to the technical guidelines from the Ministry of Health made it difficult for the health center to keep pace.

Keywords: Policy Implementation, Free Health Screening, Non-Communicable Diseases, Grindle's Theory, Kanigaran Health Center