



Determinants and Countermeasures Strategy of Stock out High on Drug Use in the Abepura General Hospital

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Abstract

This study aims to determine: (1) To determine the level of knowledge and engagement of staffs Abepura hospital pharmacy in the selection process of pharmaceuticals in Abepura IFRS. (2) To determine the level of knowledge and staffs engagement in installation Abepura hospital pharmacy in the planning process of pharmaceuticals in Abepura IFRS. (3) To know level of knowledge and engagement of staffs Abepura hospital pharmacy in the process of procurement of pharmaceuticals in Abepura IFRS. (4) To determine the level of knowledge and staffs engagement Abepura hospital pharmacy distribution process of pharmaceuticals in Abepura IFRS. (5) To determine the level of knowledge and employee involvement Installation Abepura hospital pharmacy in the evaluation process which includes recording and reporting in IFRS Abepura. (6) To know the strengths and weaknesses based on SWOT analysis in Abepura hospital pharmacy installation. (7) To determine the opportunities and threats based on SWOT analysis in Abepura hospital pharmacy installation. This study was conducted installed Abepura Hospital Pharmacy. Data taken with data collection by filling the questionnaire chief clerk pharmaceutical Installation Abepura Hospital, with the data needed for research and observation techniques done by observation and recording with a direct review of the factors internal and external to the Abepura hospital pharmacy installation. Analysis of the data used is descriptive qualitative analysis.

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The results showed that the pharmaceutical supply management process involves less labor Pharmacy Installation and knowledge of management of the drug in Abepura IFRS employee is still lacking and SWOT analysis states that the Abepura hospital pharmacy installation has been able to compete in the market competitive rivalry. Based on the SWOT analysis, Abepura Hospital Pharmacy Installation can take advantage of existing strengths and opportunities and minimize weaknesses and threats. Strategies that can be done consists of: (1) Strategy SO (Strength Opportunities) include market share, strengthen cooperation with institutions of health providers and governments. (2) Strategy WO (Weakness Opportunities) that increase customer loyalty and improve product quality and improve service procedures. (3) Strategy ST (Strength Treats) consists of cooperating with other hospitals, define your target market, and improve quality of service. (4) Strategy WT (Weakness Treats) is increasing promotion through various media and establishes quality of service to users or BPJS Jamkemas program.

Key words: Strategy of countermeasure; Stock Out; Drug Use.

1. Introduction

The planning process is one of the important functions in logistics management. decree (SK) Minister of Health no. 1333 / Menkes / SK / XII [1] on Hospital service standards is an integral part of the health care system Hospitals oriented patient care, the provision of quality drugs, including clinical pharmacy waitress who for all levels of society. Pharmacy services are support services and is a major revenue flashlight. It noted that more than 90% of health care in hospitals using pharmaceutical supplies (medicines, chemical, radiological, material medical device consumables, medical equipment and medical gas) and 50% of all income the hospital comes from management pharmaceuticals. Thus if the problem is not well managed pharmaceuticals and responsibilities, it can be predicted that the hospital revenue will decline. One of the problems often experienced in health care to patients in the hospital pharmacy installation environment is a high stock out. High stock out is a state of empty drug supply is needed. Stock empty is the same amount of stock remaining drug to zero. Drug stocks in warehouse experienced vacancies in available so that when a request cannot be fulfilled. If the number of requests or needs greater than the level of the reduced availability of existing supply shortages will occur called with Stock out. If the number of requests or needs greater than the existing inventory levels, there will be lack of inventory is called with Stock out, in this condition can occur two possibilities, namely:

1. Requests will be canceled altogether.
2. Goods are still vacant will be filled later

From the results of previous research citations while the factors - factors causing Stock out (blank stock) among others:

- a . No detection of drugs is low, it is associated with thoroughness in recording inventory clerk thinning
- b. There is only a small inventory for certain drug (slow moving) then when it runs out there is no inventory in the warehouse.

- c. Goods ordered not to come, it is associated with waiting time (lead time) than Pbf different.
- d. Pbf experienced a vacuum, sometimes -sometimes this happens because PBF experienced vacancies delivery of pharmaceutical industry, which resulted request cannot be met. which resulted in inventory in IFRS (Installation of Hospital Pharmacy) also empty.
- e. Booking delayed by PBF, it happen if the payment / repayment of debt to the PBF is delayed, usually PBF delay IFRS reservations. Until the debts are paid off, this delay results in IFRS experience Stock Empty.

According Junaidi [2], Stock out lost results in the form of inefficient and broken relationship with consumers. By avoiding stock outs efforts should be made - the following measures:

- a. Buying emergency, emergency purchases only do so in circumstances in which the inventory is in critical condition, in other words, the purchase of emergency should not be frequent. When high common stock out (eg, in a year occur 2 to 3 times) then it should be done another attempt.
- b. Conducting rescue Parts (safety stock).

2. Materials and Methods

This type of research is descriptive analytic which illustrates the high stock out in relation involvement pharmaceutical personnel in the pharmacy management system from January to December 2015 Installation Abepura Hospital Pharmacy. The sample used in this study were all staff pharmaceutical installation many as 50 people. Which fall into the category of high stock Out with the criteria as follows: Stock out high is the number of states required drug supply is empty, High objective criteria if the amount needed is greater in the first year runs from the amount provided in the first year running. Normal objective criteria if the needed amount less than the amount provided in the first year running [3].

3. Results

1. Analysis of the characteristics of the respondent

Analysis of the data characteristics of respondents. Intended to assess some common characteristics or the respondent data presented systematically in the following table;

Table 1: Distribution of respondent by gender in Hospital Pharmacy Installation 2015

Education Level	Number (n)	(%)
Male	9	18,0
Female	41	82,0
Number	50	100

Table 1. Provide information that most of the respondents were female 41 (82.0%), and only 9 (18.0%) were male gender.

Table 2: Distribution of respondents according to the type of work on the installation in Hospital Pharmacy 2015.

Occupation	(n)	(%)
PNS	47	94,0
Honorer	3	6,0
Number	50	100

Table 2 shows that the majority of respondents worked as a civil servant 47 (94.0%), while the rest are permanent employees 3 (6.0%).

Table 3: Distribution Respondents by education level in the installation Hospital Pharmacy 2015

Education	(n)	%
Senior HS	9	18.0
Diploma	13	26.0
Bachelor	12	24.0
Apothecary	16	32.0
Number	50	100.0

Table 3 distribution of a sample of respondents majority of educated research Pharmacists 16 (32.0%). With this level of education as the assessed worth giving an answer in accordance with the purpose of the interview through a questionnaire.

Table 4: Distribution of statistical variables of age and years of service Installation of respondents in hospital pharmacy in 2015

Variable	mean	Sd	Minimum	Maximum
Age	32,5	3.8	25	42
Work period	7,3	2.0	3	15

Table 4 shows the average age of respondents was 32.5 years and a standard deviation of 3.8 years. The youngest age 25 years old and the oldest 42 years old, while the average tenure of respondents was 7.3 years

with a standard deviation of 2.0 years. Respondents working lives youngest is 3 years old and the oldest was 15 years old.

2. Descriptive Analysis of Research Variables.

Descriptive analysis of the study variables, At this stage, the frequency distribution analysis research variables are presented as follows:

Table 5: Distribution of the respondents according to their knowledge and involvement of the respondents on drug management indicator in terms of the selection process of pharmaceuticals in Abepura Hospital pharmacy in 2015.

Farmachi selection process	(n)	(%)
Good	10	20,0
Less	40	80,0
Number	50	100,0

Table above shows that the majority of respondents have knowledge of, and involvement of drug management indicator in terms of the selection process of pharmaceuticals including unfavorable category is 40 (80.0%) and only 10 (20.0%) who said good.

Table 6: Distribution of the respondents according to their knowledge and involvement of the respondents on drug management indicator in terms of the selection process of pharmaceuticals installed Abepura Hospital pharmacy in 2015

Planning of farmachi	(n)	(%)
Good	14	28,0
Less	36	72,0
Number	50	100,0

Table 6. To show that the majority of respondents have knowledge and the involvement of drug management indicator in terms of the planning process of pharmaceuticals including unfavorable category, ie by 36 people (72%), and only 14 (28.0%) who said good.

Table 7 Shows that the majority of respondents have knowledge and the involvement of drug management indicator in terms of the procurement process of pharmaceuticals including category unfavorable, ie by 36 people (72%), and only 14 (28.0%) who said good.

Table 7: Distribution of respondents according to their knowledge and involvement of the respondents on drug management indicator in terms of the procurement process of pharmaceuticals in Abepura Hospital pharmacy in 2015.

Farmachi procurement process	(n)	(%)
Good	14	28.0
Less	36	72.0
Number	50	100.0

Table 8: Distribution respondents according to their knowledge and involvement of the respondents on drug management indicator in terms of the distribution of pharmaceuticals in Abepura Hospital pharmacy in 2015.

distribution of pharmaceuticals	(n)	(%)
Good	13	26
Less	37	74
Number	50	100,0

Table 8 show that the majority of respondents have knowledge and involvement of management indicator in terms of the process of distributing drugs, pharmaceuticals including unfavorable category, estimated at 37 people (74%) and 13 patients (26%) who say good.

Table 9: Shows that the majority of respondents have knowledge and the involvement of drug management indicator in terms of the evaluation process, recording, and reporting of pharmaceuticals in Abepura Hospital pharmacy in 2015.

evaluation process, recording, and reporting of pharmaceuticals	(n)	(%)
Good	26	52
Less	24	48
Number	50	100,0

Table 9 Shows that the majority of respondents have knowledge and the involvement of drug management indicator in terms of the evaluation process, recording, and reporting of pharmaceuticals including both categories namely: by 26 votes (52%) and 24 (48%) who say less good.

C. SWOT Analysis

SWOT Analysis Installation Farmasi of Abepura hospital

a. Strength (strength)

Installation Abepura Hospital Pharmacy has several strengths that can be used to market its products. The strength is as follows:

1) Brand image

Broadly Abepura Hospital Pharmacy Installation name already widely known by the public, especially the Abepura and surrounding communities. This is because the hospital pharmacy installation. Abepura hospital is the first to stand in Abepura town. The brand image factors that simplify installation Abepura Hospital Pharmacy to market its products.

2) Support the Government

Without the support of the Government, in particular the Government of Papua Province Abepura Hospital will not stand in Abepura. With the support of government to hospital pharmacy installation can Abepura developments up to now.

3) Networking

Installation Abepura Hospital Pharmacy already has a working network with private institutions and the Government in the Papua region. The institutions include, PMI, Department of Health, Hospital Jayapura, and other bodies concerned with the implementation of public health services as well as other hospitals in the area of Papua.

b. Weakness (weakness)

1) The service procedure is still too long.

Patient care procedure is still too long in Abepura Hospital Pharmacy Installation become one of the shortcomings that need to be considered. Because people demand quick service on the use of services supplied Installation Abepura Hospital Pharmacy.

2) Lack of service quality or BPJS Jamkesmas program.

JAMKESMAS health programs or BPJS a free health program for the poor and cannot afford the government. But in Abepura Hospital Pharmacy Installation fact that there is a user program or BPJS JAMKESMAS often discriminated against and got poor service even though the payment has been guaranteed by the government.

3) Lack of socialization

Lack of socialization to the community create new products not yet widely known by the public. People are still very new to the health terms used by Installation Abepura Hospital Pharmacy.

As an example of the services that are new, namely the existence of clinical pharmacy at Abepura Hospital Pharmacy Installation is not widely known by the public.

c. Opportunities (opportunities)

1) The market share is still well

In Abepura competition between hospitals is still not visible. Therefore Abepura Hospital Pharmacy Installation should be able to take these opportunities.

2) Disaster Response

Abepura is Prone areas such as demos. Therefore Abepura Hospital Pharmacy Installation must be responsive.

3) Cooperation

During this installation Abepura Hospital Pharmacy has been working to institutions existing agency in Abepura. For example Abepura Hospital Pharmacy Installation cooperating with the health department, some of the existing campus in Abepura area.

b. Treats (threat)

Serious threat here include internal factors and external factors. Internal factors which could pose a threat is the inability of institutions in utilizing the strengths and opportunities that exist. So what happens strengths and opportunities that can turn into a major threat to the institution.

While external factors that pose a threat of Hospital Pharmacy Installation Abepura hospital is the others who have stood up and have a waiter IFRS that have a better standing in Abepura town. Therefore, the Abepura Hospital Pharmacy Installation should continue to anticipate and evaluate and define the right marketing strategy in order to get a position at the heart of existence of society.

2. Interpretation SWOT Analysis for Development

To know the steps that need to be done by the hospital pharmacy installation Abepura in determining marketing strategies required policy bias SWOT matrix shows the factors strengths, weaknesses, opportunities, and threats that are owned by the agency.

Based on the SWOT matrix can clearly illustrate the results of a SWOT analysis Abepura Hospital Pharmacy Installation in marketing their products is as follows:

Table 10: SWOT Installation Matrix of Farmasi RSUD Abeपुरa

Internal	Strengths (S) - Brand image	Weakness (W) - Lack of socialization
External	- government support - net working	- Procedure long service - Lack of services for Jamkesmas program, Jamkesda and BPJS
Opportunities (O) - Market share - Cooperation with the agency	SO strategy - Expanding market share - Strengthening cooperation with related agencies. - Improve the relationship with government	WO strategy - Improve patient loyalty - Improved product quality - Improve procedures Service
Treats (T) - The inability of institutions in utilizing S and O - Networking - Market competition	ST strategy - To collaborate with other institutions - Define the target market - Improving Quality Service	WT strategy - Increase in the promotion through various media - Establish effective marketing strategies and efficient - Improving the quality of service to patients Program JAMKESMAS and BPJS

4. Discussion

Health is a human right, every person has the right to a decent life, both personal and family health concerns, including the inside to food, clothing, and health care and other necessary services social. Health efforts aimed at preserving and improving the health and place that used to organize so-called health facilities .. The health facilities serve to make efforts to basic health or health efforts referral and / or supporting health efforts. In addition, health facilities can also be used for education, training and research, development of science and technology in the health sector. One of the health facilities that conduct health efforts are hospitals [4].

Management of pharmaceutical and medical devices is a process that is the cycle of activities from the planning, procurement / production, receipt, distribution, monitoring, maintenance, removal, monitoring, administration, reporting and evaluation requirements necessary to service activities. The management goal of pharmaceutical and medical devices that would provide pharmaceutical and medical device quality in the amount and at the right time according to specifications and functions defined by the committee pharmaceuticals and therapies are efficient and effective [5].

From the results of research conducted in the hospital pharmacy installation abepura concerning about factors affecting the stock out high on the use of drugs associated with drug management that includes:

1. Selection of pharmaceuticals.

Determining the type of pharmaceutical that is used in pharmaceutical installations visible from the respondents that the pharmacy staff is not fully involved in the selection process improve pharmacy. it is seen on the answer response that is equal to 40 (80.0%) categorized as poor, and only 10 (20.0%) who said good.

2. Planning

In the planning stage pharmaceutical supplies the hospital pharmacy abepura, seen from the respondents that the pharmacy staff is not fully involved in the planning process of pharmaceuticals. it is seen on the answer response that is equal to 36 (72.0%) categorized as poor, and only 14 (28.0%) who said good. According to Gomes, the budget is a document that seeks to reconcile the priorities of the program with the sources of projected revenues. Budget incorporates an announcement from the organization's activities or purposes for a period of time determined by the information on the funds needed for the event or to achieve these goals. According to muninjaya [7], the budget is a plan of work that expressed quantitatively measured in monetary units and units of measurement standards covering a period of one year.

According silalahi [8], budgeting is a corporate financial planning as a basis for the control (supervision) of financial companies for the coming period [7]. Thus, the drug budget is a plan that is prepared based on the need for drugs to be held in a pharmacy .

Planning is a process in the maintenance activity type, amount and cost of pharmaceutical and medical equipment that suits your needs and budget in order to avoid any lack of procurement of drugs with methods that can be accounted for and the basics of operation which have been determined. Planning guided by DOEN (National Essential Drugs List), formulary RS, RS standard therapy, medical record data, the budget available, priority setting, the disease cycle, the remaining inventory, usage data last period and the development plan. Planning objectives of pharmaceuticals is to set the type and amount of pharmaceuticals in accordance with the pattern of disease and the need for health services in the hospital [9].

There are three kinds of methods of planning, namely consumption, epidemiology, and the combination of both that is adapted to the local budget. Planning with consumption method is based on the data at a time when drug use, whereas the epidemiological method performed by a data rate of disease incidence and standard treatment for the disease. Data usage time ago for drug consumption method should be accurate. This consumption method can cause irrational use of drugs will continue to occur in contrast to the case of epidemiological methods that assume that the treatment adapted to the existing disease or occurs at a particular moment [9] Planning procurement of pharmaceutical and medical devices into account the funds available. To achieve efficiency in the preparation of the list of drug use needs a combined two ways of analysis, ie the analysis of VEN and ABC. VEN analysis classifying drugs based on the level of emergency for the treatment of patients. VEN division are as follows:

- a. Category V is vital that a small amount of drugs, but should always be provided to save lives (life-saving drug), such as insulin, heparin, adrenaline, atropine sulfate, albumin and drugs are the standard of health care, for example snake serum.
- b. Category E is an essential drug that is commonly used in public health services, such as a heart medication, hypertension medication, diabetes medication.
- c. Category N is a non-essential drugs which may be provided or may not be provided because not endanger if not available, for example, food supplements and vitamins [10].

Analysis ABC / Pareto classify drugs based on volume and value of consumption of drugs, which are as follows:

- a. A group is a valuable medicine is expensive and often written by prescription, absorb the funds of $\pm 80\%$ of the total fund by the number of items of $\pm 20\%$ of the total item existing drugs.
- b. Group B is the drug is needed in many cases and often go out, absorb the funds of $\pm 15\%$ of the total fund by the number of items $\pm 60\%$ of the total item existing drugs.
- c. Group C is a group of drugs only as a supplement only. Absorb the funds of $\pm 5\%$ of the total fund by the number of items of $\pm 20\%$ of the total existing drug items.

3. Procurement

At this stage of the procurement of pharmaceuticals abepura the hospital pharmacy, seen from the respondents that the pharmacy staff is not fully involved in the process of procurement of pharmaceuticals. it is seen on the answer response that is equal to 36 (72.0%) categorized as poor, and only 14 (28.0%) who said good. Procurement is an activity for implying needs that have been planned and approved, through:

1. Purchase
2. The production or manufacture of pharmaceutical preparations
3. Donations / drooping or grant

Purchases competitive bidding (tender) is an important method for reaching the right balance between quality and price, if there are two or more suppliers, the pharmacist should be based on the following criteria:

Quality p

product quality, reputation of the manufacturer, the price, the terms, timeliness of delivery, quality of service suppliers, trustworthy, policy on returned goods, and packaging.

The purpose of procurement is to obtain pharmaceuticals at a decent price, with good quality, and guaranteed delivery on time, the process was smooth, and does not require excessive energy and time.

1. Purchase

Purchasing is the sequence of procurement process to obtain pharmaceuticals. This is in accordance with the presidential decree of Republic of Indonesia No. 94 of 2007 on supervision and control over procurement and distribution of medicinal materials, specific drugs and medical devices that function as drugs and regulatory president of Indonesia No. 95 of 2007 on changes to seventh on the presidential decree No. 80 of 2003 on guidelines for the implementation of government procurement of goods or services.

There are four methods of the purchase process:

- b. Open tender, apply to all registered partners, and in accordance with predetermined criteria.
- c. Tender limited, often mentioned auction is closed. Only performed on certain partners who are already registered and have a history of good
- d. Purchases with bargaining, done when the item is not important, it is not much, and usually do a direct approach to a particular item.
- e. Direct purchase, the buyer a small amount, it should be immediately available. Certain price, relatively somewhat more expensive.

2. Production

Production of pharmaceuticals in hospitals is an activity to make, change shape, and the repackaging of pharmaceutical preparations sterile or non-sterile to meet the needs of health care in hospitals.

Criteria pharmaceuticals in production:

- a. Pharmaceutical preparations with a special formula.
- b. Pharmaceutical preparations in accordance with the quality standards at a cheaper price.
- c. Pharmaceutical preparations that require repackaging.
- d. Pharmaceutical preparations that are not available on the market.
- e. Perfomed pharmaceutical research.
- f. The preparation of parenteral nutrition.
- g. Reconstitution sitostasika dosage pharmaceuticals.
- h. Pharmaceutical preparations that should always create a new one

3. Donations / grants / dropping

In principle, pharmaceutical supply management of grants / donations, follow the general rules of pharmaceuticals regular management. Pharmaceuticals remains can be used to support health care when normal situation [11,12].

Reception

The reception is to receive pharmaceuticals activities that have been conducted according to the rules of pharmacy, through direct purchases, tender, consignment or donation. Acceptance of pharmaceuticals should be done by the responsible officer. Officers involved in the reception should be well-trained in their responsibilities and duties, as well as the need to understand the essential nature of pharmaceutical supplies. In the reception team there must be a pharmacy staff.

The purpose is to ensure the acceptance of pharmaceuticals adopted in accordance with good contract quality specifications, quantity and time of arrival. Pharmaceuticals received must be in accordance with contract specifications have been set. Another thing to note in the reception:

- a. Must have Materials, Safety, Data Sheet (MSDS) for hazardous materials.
- b. Especially for medical devices must have certificate of origin.
- c. Certificates of analysis products

Storage

Warehouse is a temporary storage area of pharmaceutical preparations and medical devices prior to distribution. Warehouse function is to maintain the conditions of pharmaceutical preparations and medical devices that is stored in order to remain stable up to the patient's hand

The purpose of storage is:

- a. Maintaining the quality of pharmaceutical preparations.
- b. Avoiding the use of irresponsible
- c. Maintain availability.
- d. Facilitate search and surveillance [12,13]

Stacking stock items that are outdated and damaged can be avoided by setting a storage system such as the first expired first out (FEFO) and the first in first out (FIFO). FEFO system is where the drug has a shorter expiry time out first, while the FIFO system first entered drug is a drug which first came out. Medications should be

stored in accordance with the terms of storage conditions of each drug. Storage conditions referred to include temperature / ambient temperature of 20-25°C, humidity or light exposure. Storage area used may be a separate room or building, cabinets, locked cabinets, refrigerator, freezer, or a cool room. Storage area depending on the nature or characteristics of each drug [9].

Settings can be grouped drug warehouse with 7 ways by:

- a. Group pharmacology / therapeutic
- b. indications clinics
- c. alphabetical groups
- d. level of use
- e. dosage forms
- f. Random bin
- g. Item code.

Besides of temperature stored in appropriate, items should be stored in a state that is easily drawn and remain protected from damage [9]. Permenkes 28 / Menkes / PER / I / 1978 [14] concerning the storage of narcotics mentioned that the hospital should have a special place to store narcotics, where the venue should be entirely made of wood or other material that is strong, in addition to the storage of the drugs should have strong locks and storage area is divided into 2 parts, each with a different key.

- rationing

At this stage of the distribution of pharmaceuticals in the hospital pharmacy abepura, seen from the respondents that the pharmacy staff is not fully involved in the process of procurement of pharmaceuticals. It is seen on the answer response that is equal to 37 (74.0%) categorized as poor, and only 13 (26.0%) who said good.

- Distribution of hospitalization

Distribution of pharmaceutical and medical devices is one of the main tasks of hospital pharmacy services. Distribution plays an important role in the delivery of pharmaceutical preparations and medical devices needed to units of each section, including the hospital pharmacy to the patient. The most important thing to note is the development of a process that ensures the provision of pharmaceutical preparations and medical devices that correct and appropriate to the patient, in accordance with what is written on recipe cards or drugs or Card Instruction Drugs (KIO) and equipped with sufficient information. Purposes of distribution: the availability of pharmaceuticals in care units in a timely manner the exact type and amount [12]. Pharmaceutical hospitalization running the distribution of pharmaceuticals to meet the needs of inpatients in the hospital, which was held in

centralized or decentralized system with a complete inventory of all subjects, individual prescription system, the system of dosage units and combination systems by satellite pharmacy. There are three kinds of inpatient distribution system, namely:

1. Detailed inventory system (Floor stock system), includes all supplies of drugs and medical devices needed in room. Services in one of the room inventory system is the provision of emergency kits (emergency medicine containers) used for emergency purposes [9].
2. Prescription individual (individual prescribing) is a way of distribution of drugs and medical devices based on the demand in the prescription drug card or inpatients. This system has the advantage of their assessment of the patient by a pharmacist prescribing their drug use opportunities of professional interaction more controllable and easier billing drug costs for patients. Disadvantage is the possibility to be able to delay the drug to patients [9]
3. The unit dose dispensing system (UDD) is defined as the drug is prepared and given to the patient in a single dose unit containing drugs for a drink. UDD concept is not a new innovation in the pharmaceutical and medicine. The unit dose dispensing is the responsibility of pharmaceutical that cannot run an institution hospital without cooperation with nurses and other health staff. UDD advantage among other patients pay only drug course use, reduce medication errors, increase the pharmacist-physician communication between nurses, and pharmacists can carry out a review of drug use. Limitation is the number of pharmacists needed higher [9, 13]

SWOT analysis

From the above SWOT matrix can be seen that the power factor of greater than a factor of weakness which is owned by Abepura Hospital Pharmacy Installation and chance factor is also greater than the factor of threat. Therefore the condition of Abepura Hospital Pharmacy Installation should be quite able to compete with agencies - other institutions engaged in the same field. Here is the development of a marketing strategy SWOT analysis Abepura Hospital Pharmacy Installation:

a. Strategy (Strengths Opportunities)

The strategy is based on the strengths and opportunities of the Abepura hospital pharmacy installation, as follows:

1. Expanding market share

Abepura Hospital Pharmacy Installation could expand the market share that has been there, of course, it must go through the planning process in order to enter the market which will not be misplaced. In addition, the expand of market share do have to look at the capabilities of the Abepura hospital pharmacy installation. Installation Abepura Hospital Pharmacy can see market share outside Abepura, for example in the city of Jayapura Jayapura Hospital Pharmacy eg installation or installation Dian Harapan Hospital Pharmacy is located not far from Abepura hospital pharmacy installation.

2. Strengthening cooperation

A network of cooperation that has been built with, PMI, Public Health Service, and other agencies related to health service delivery and other hospital needs to be maintained. Installation Abepura Hospital Pharmacy can see great opportunities that can be exploited from this agreement with these institutions.

3. Improving relations with the Government

The government is very influential with the progress of Abepura hospital pharmacy installation. The role of government has been less optimized pharmacy installation Abepura Hospital. Abepura Hospital Pharmacy Installation should be able to foster a sense of kinship, because the installation Abepura Hospital Pharmacy is a partnership of mutual need and mutual benefit.

b. Strategy WO (Weakness Opportunities)

WO Strategy set of factors weaknesses and opportunities, WO strategies to do is:

1. Increase customer loyalty

The role of the consumer in this case the patient is very influential on the progress of Abepura hospital pharmacy installation. Rational if there are no patients there would be no hospital pharmacy installation. Installation need to increase Abepura Hospital Pharmacy customer loyalty by means of fostering and maintaining a sense of familiarity and trust by providing excellent service and superior satisfying facilities.

2. Improved product quality

The products offered by the Abepura Hospital Pharmacy Installation should be in accordance with the needs and wishes of the patient and the doctor. Keep in mind also that a product has a life cycle that is born, grows or overcooked and die. Therefore Abepura Hospital Pharmacy Installation should be able to sustain the development of its products and not to die, with do innovations to its products in order to continue to have a sale value to consumers ,

3. Improve service procedures

Abepura Hospital Pharmacy Installation should be able to improve service flow is still too long. This can be done by providing administrative services that are easy to understand, obviously.

c. ST Strategy (Strengths Treats)

ST strategy is a strategy that is based on a factor of strength and threat, this strategy include:

1. To collaborate with other hospitals that there are several hospitals in Papua who can be invited to cooperate with the Abepura hospital pharmacy installation. The hospital pharmacy installation there

should not be a competitor which would hamper the development of Abepura Hospital Pharmacy installation, but can be used as a partner. Abepura Hospital Pharmacy Installation should make approaches persuasive that other hospital pharmacy installation hospital also intends also intends to become a partner.

2. Setting a target marketing, Abepura Hospital Pharmacy Installation must be precise in defining the target market and marketing targets through strategic planning and defensive, do not let the wrong target marketing target. Abepura Hospital Pharmacy Installation must also have the ability to see the opportunities that exist.
3. Improve the quality services should be improved to attract sympathetic consumers and potential consumers. Hospital Pharmacy Installation should be able to service members who have more than the value of the services provided by the installation of another hospital pharmacy. So the sense of consumer confidence in Abepura hospital pharmacy increases which will further increase consumer loyalty.

d. WT Strategy (Weakness Treats)

This strategy is a strategy to minimize the weaknesses and threats. This strategy consists of:

1. Increasing the promotion through various media step that should not be left out is the promotion. Promotional activities need to be improved to promote a product or program Abepura Hospital Pharmacy Installation in this particular product or a new program. Abepura Hospital Pharmacy Installation can take advantage of print media or electronic media to pass up promotions.
2. Establish appropriate marketing strategies. Abepura Hospital Pharmacy Installation should be able to set strategy pemasaran effective and efficient in order to avoid threats and minimize weaknesses. In establishing marketing strategies tailored to the power. Do not let the power and opportunity that has posed turned into a threat to the Abepura hospital pharmacy installation itself.
3. Improving patient care program or BPJS JAMKESMAS Abepura Hospital Pharmacy Installation should be able to improve service to patients or BPJS users Jamkesmas program. It is that lack that one of the weaknesses of Pharmacy Installation Abepura Hospital does not turn into a threat to the pharmacy installation.

5. Conclusion

From the results of research conducted in the hospital pharmacy installation on the management drug resistant selection which includes pharmaceuticals, planning, procurement, distribution, evaluation, reporting and record keeping below the involvement of pharmacy:

- a. In the selection process of pharmaceuticals, showing that involves less labor and energy installations

Installation Pharmacy pharmacy still have less knowledge about the selection of procurement of pharmaceuticals in accordance with the answers to the response that is equal to 40 (80.0%) categorized as poor, and only 10 people (20.0%) who said good.

- b. In the planning process of pharmaceuticals, showed that less energy installation involves Pharmaceuticals, pharmaceutical and energy installations still have less knowledge of the plan of pharmaceuticals in accordance with the answers to the response that is equal to 36 (72.0%) categorized as poor, and only 14 people (28.0%) who said good.
- c. In the procurement process of selection of pharmaceutical, noted that less energy installation involves pharmacist. pharmaceutical procurement and installation personnel still have less knowledge appropriate answer to the response that is equal to 36 (72.0%) categorized as poor, and only 14 (28.0%) that says either.
- d. In the process of distribution of pharmaceuticals still lacking power installation involving pharmaceuticals and pharmacy personnel still have less knowledge about the distribution, look at the answers to the response that is equal to 37 (74.0%) categorized as poor, and only 13 (26.0%) that says either.
- e. In the evaluation process of recording and reporting, it appears that almost all personnel involved pharmaceutical installations and quite knowledgeable about the evaluation and reporting and record-keeping according to the answer to the response that is equal to 24 (48.0%) categorized as poor, and only 24 people (52, 0%) that says either.
- f. Based on the SWOT analysis, Abepura Hospital Pharmacy Installation can take advantage of existing strengths and opportunities and minimize weaknesses and threats. Strategies that can be done consists of:

1. Strategy SO (Strength Opportunities)

Covering market share, strengthen cooperation with agencies and government health providers.

2. Strategy WO (Weakness Opportunities)

Namely improving customer loyalty and improve product quality and improve service procedures.

3. Strategy ST (Strength Threat)

Consisting of a partnership with another hospital, set the target market, and improve quality of service.

4. Strategy WT (Weakness Treats)

Namely increasing promotion through various media and establish effective marketing strategies and efficient and to improve quality of service to users or BPJS Jamkesda program.

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