Basic Health Services During a Pandemic: From Leadership to Innovation and Optimization of Public Health Degrees

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Abstract

This paperwork was done to get accurate information about the basics of public health services during a pandemic, from innovative leadership efforts to optimizing public services under challenging times. Our data were obtained from various health information sources published from 2010 to 2001. After that, we carried out various data coding studies, evaluating interpretations and drawing valid conclusions that we were able to answer the questions correctly. Based on the study and discussion of these findings, we can state that the Government must build innovative and optimal leadership when the community needs more prime and core public services. Thus, we believe that this study has answered the core problem. We sought the literature using electronic to several international publications that discussed this sues. Finally, after discussing the result, we can draw our finding is that the Government, through the Department of Health, has put strong leadership over the Covid-19 pandemic.

I. Introduction

Since the global health pandemic, the demand for public health services has increased in Manding (Gupta et al., 2020). Then automatically, every country makes policies instantly so that all resources, both funds, and human resources, are focused on solutions and give special attention to their citizens, which is proven to have been slandered by the team and the problems they are participating in despite limitations in all fields (Kartika & Oktariyanda, 2021). Many health services have to be circumvented in order to show to protect, treat and treat those who are exposed to it, including facilitating and overcoming the impacts other than the health aspect due to the emergence of demi (Muhazir, 2021). Doubts and fears of a deteriorating situation were especially felt at the pandemic's beginning. However, along with and in parallel with the pandemic for almost two years, the public has witnessed a very high commitment by the Government in tackling this disease, which goes beyond such doubts in handling measles, malaria, HIV, and coughing tuberculosis (Syakhsiyah, 2021). This looks indeed very special in handling it by utilizing all public health services, but still, deaths and losses cannot be counted; therefore, it is essential to ensure the Government's commitment through policies to balance public health services in efforts to prevent and treat to avoid exposure to Covid-19 more, and more possibilities will require solutions and adaptations of how governance systems deliver public services (Debajyoti et al., 2021). This is not only for Covid-19 patients but also for measures to prevent and control the impact of these conditions and efforts to reduce risks, both those who have been affected and those who have not,

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especially to the health staff themselves, who are the spearheads at the forefront of serving and providing services public health in this very worrying era (Qodir et al., 2020).

The Covid-19 pandemic caused everyone to behave beyond normal limits as usual. One of the behaviors that can change is deciding the decision to choose a college. The problem that occurs in private universities during covid 19 is the decrease in the number of prospective students who come to campus to get information or register directly to choose the department they want. (Sihombing, E and Nasib, 2020). The world health agency (WHO) has also announced that the corona virus, also called COVID-19, is a global threat worldwide. The outbreak of this virus has an impact especially on the economy of a nation and globally. These unforeseen circumstances automatically revised a scenario that was arranged in predicting an increase in the global economy. (Ningrum, P. et al. 2020)

The primary purpose of reviewing health service documents published during the pandemic is from the point of view of state leadership towards innovation services in optimizing public services when the country is hit by a pandemic which is still an issue for public consumption, both nationally and internationally (Dedeilia et al., (2020). it is considered essential to prepare a government leadership model, especially the ministry of health and public health-related agencies, and implementing partners to apply better strategies to avoid and reduce deaths during the COVID-19 pandemic, both for the general public and patients with non-COVID-19 injuries, particularly leadership in the governance of health care resources (Relly et al., 2022).

Activities to mitigate the impact of COVID-19 on health services. Several studies have shown that the negative impact of the Covid-19 pandemic has given rise to unhealthy individual behaviors, such as anxiety, anger, sadness, weak self-efficacy, easily ignited by emotions, increasingly widespread smartphone addiction, and others (World Health Organization, 2020). So, Indonesia needs disaster mitigation policies currently facing the Covid-19 pandemic. It will be seen how far the leadership function of government health services is from the center to the regions. Behavior due to pandemic anxiety occurs in small family environments and personal interactions and in larger communities such as workplaces, schools, and the general public (Block et al., 2020).

Wheelock (2020) says that babies conceived and born during the pandemic were at higher risk of health and disability learning from the Spanish Flu pandemic. This is because these babies go through a crucial stage of development when the health system is focused on dealing with the pandemic (Singh et al., 2020). Therefore, in this situation, psychological studies are essential to be carried out in-depth and carefully to provide input on situation analysis and mitigation of the medium and long-term impacts of the Covid-19 pandemic, as an anticipatory step by formulating policy recommendations for the Government (Adamy & Rani, 2022). According to Prem et al., (2020), the existence of this policy is to support efforts to mitigate the medium and long-term impacts of the ongoing Covid-19 pandemic. Recommendations are made using a human development span approach that interacts with three critical social system sectors: family, school, and the workplace (Dwivedi et al., 2020).

Medium-term policy recommendations are developed for families, education, workplaces, and communities. For families, parents are expected to have the ability to meet the care needs of the first five years maximum for children born during the pandemic. This is important so that the community has the skills to assist children in accessing digital content so that the process of using it is right on target (Garbe et al., 2020). Likewise, in the education system, it is necessary to prepare a variety of curricula suitable for distance learning methods, face-to-face or a mix of the two. This, of course, needs to be balanced with increasing teacher capacity to design learning appropriately (Tadesse & Muluye,

2020). Likewise, it is essential to draft guidelines for working in the new average era in the workplace. This must be done to create a healthy work environment and achieve workers' psychological well-being (Carroll & Conboy, 2020).

Furthermore, at the level of the general public, it is necessary to identify the intergenerational potential that can improve the physical and mental health of all components involved, whether children, adolescents, adults, or the elderly, to become more empowered in dealing with a pandemic (Rogers-Jarrell et al., 2021). Meanwhile, the long-term recommendation is to strengthen primary services' mental health service system, namely puskesmas. In addition, we are strengthening the school-based mental health system (Ghislieri et al., 2021).

II. Research Methods

We repeat that this work is for us to get accurate information about the basics of public health services during a pandemic, from innovative leadership efforts to optimizing public services under challenging times. Our data were obtained from various health information sources published from 2010 to 2001 (Bavel et al., 2020). After that, we carried out various data coding studies, evaluating interpretations and drawing valid conclusions that we were able to answer the questions correctly. Based on the study and discussion of these findings, we can state that the Government must build innovative and optimal leadership when the community needs more prime and core public services. Thus, we believe that this study has answered the core problem (Sheng et al., 2021).

III. Results and Discussion

3.1 Sharing Communication and Information

Foster potential authority through a designated stream of correspondence and informational materials for use in all medical care settings concerning the adverse effects, prevention, and transmission of COVID-19 among patients and healthcare workers (Hossain et al., 2020). Contamination avoidance and control for medical care workers and patients. Develop a strategy for working with access to local area-based healthcare offices and administration by suppliers, patients, and their allies during development restrictions. Keep abreast of adequate supplies and goods to deliver benefits and reduce the risk of patients and medical personnel exposure to COVID-19 in all customer-facing transportation (Schiavone & Simoni, 2019). Ensure adequate supply and use of personal defense equipment, hand hygiene supplies (washer and water or hand sanitizer with at least 60% liquor), and cleaning and sanitizing supplies. Supervise and request multi-month medication administration (e.g., three or half-year division) for stable constant torment patients to reduce the period between center contacts. Telehealth can screen and support patients between in-person visits (Rahman, 2020).

This pandemic situation has become a problem that has implications for many problems, cases continue to increase and for whom and when it will subside, but at the end of 2021, when all provinces have been detected and known to have more and more impacts not only on health but on social life (Batubara, 2021).). In other cases, the Government is asked to anticipate by providing leadership to the community to limit their mobility. The movement of community mobility also increases the spread, but on the other hand, it is impossible to do, but the Government still provides quarantine if there is the monitoring of symptomatic and people who immediately feel hungry (Stannard, 2020).

3.2 Sharing Useful Information

The condition of the COVID-19 pandemic in Indonesia is still not recovered; specific drugs or vaccines are not yet available, and this requires the awareness of every community to remain vigilant in trying to reduce the risk of transmission, including own health. To avoid and break the chain of transmission of COVID-19 and take care of one's health, here are some tips to stay healthy during the COVID-19 pandemic, which can be done without involving any other parties; Washing Hands with Soap (CTPS). The proper way to wash hands is to use soap and clean hot water, rub hands until soap bubbles appear, clean hands and fingers to the bottom of nails, wash for at least 20 seconds. Wash hands before eating, after using the bathroom and toilet, after changing diapers, after playing with animals, and before and after being around sick people (Harapan et al., 2020).

Then, wear a mask and avoid sick people. Always try to wear a mask in every activity. If people know someone is sick, even an important person, friends, or family, then stay away from them; wear a mask and use health protocols unless it is essential. Moreover, if people interact with them, do not stand too close. Be sure to wash hands before and after being around sick people. Clean up immediately if there are sick people around who sneeze or cough. Keep distance and stay away from crowds. Always keep a distance of more than 1.5 meters to avoid transmission. The COVID-19 virus spreads more easily in places with heavy traffic, such as schools, public transportation, offices, and other public places. If possible, avoid prolonged stays in these places, staying at home if not essential (Coşkun et al., 2921).

The nest information relevant to share is to clean all surfaces around objects using a disinfectant, such as walls, floors, tables, chairs, other furniture, car keys, cell phones, etc. Avoid using items that allow viruses or microorganisms to survive, such as carpets, mats that are not cleaned, old masks. Then avoid touching the face. Viruses and microorganisms are most often spread when hands touch something contaminated with germs and then continue to touch the face, such as the eyes, nose, or mouth. Thus reducing the frequency of hands touching the face; and making sure hands are clean when touching the face (Jones et al., 2020). Eating healthy foods can help boost the immune system and keep healthy. Try to follow the guidelines for Balanced Nutrition eat lots of fruits and vegetables. Avoid unhealthy foods and do not smoke, and do not drink alcoholic beverages.

Make time to exercise about three to four times a week. In moderation, physical activity in aerobic exercise, jogging, cycling, and the like can help increase the body's defenses against viruses and bacteria. Washing hands is still seen as a more effective way to prevent the COVID-19 virus and other diseases, but hand sanitizer will be helpful and can help if it is not possible to wash hands (Rahman et al., 2020). Trying to stay calm and think positively is very important to avoid illness. With reasonable stress control, Cortisol, namely hormones released when a person is stressed, will be controlled and help the body fight inflammation and disease. Strive to remain calm in various ways, among others, by taking the time to pursue a hobby. Aim to get at least seven hours of sleep each night, and if people start to feel sick, increase rest time (Greenwood-Hickman et al., 2020). Do not share personal items with anyone; because there is a possibility of being contaminated with viruses or other microorganisms, such as eating utensils, bath utensils, and other utensils. Conditions like this should be improved if people are in the environment of sick people.

3.3 Building Truth to public

Working to provide services to the public about the pandemic is indeed a very challenging and troublesome job. So working sincerely and with a high terrace of what is for the sake of is the type of person the Government should show (Rudolph et al., 2021). Because of such discreet information about infidels, the Government has failed to serve the public in difficult times. Therefore, the Government must see that coffee has not only left such a severe problem, but this is an opportunity for the Government to work with eggs and terraces where every critical information must be imported from the Government, lest the public drags away the information against the wishes of the public and Government with accurate Information (Carayannis et al., 2019).

Therefore, the impact of this coffee is the spread of hoax information where this is a murder rather than a core of information about subjectivity is not a political and democratic dilemma; therefore, the Government must prioritize and deal with issues related to the pandemic. Errors in providing information are at the top when the state is administering. Therefore the Government must have a high terrace in conveying information because the public today has approved various information from various sources which they are increasingly accessible and convey information themselves (Wardman, 2020) so that the Government has lost the opportunity to convey information that is skewed to the people so that finally the Government has lost the terrace that should have been built and maintained so that people are interested in the Government's existence in terms of handling conflicts during the pandemic.

3.4 Conveying Care for pandemic

Build strong leadership in difficult times of a pandemic; the Government must involve all parties to assume that the Covid-19 disease suffered by a person will become a disease for all (Bol et al., 2021). The pandemic has reminded us to care for others. Illness suffered by someone by someone for everything that is monitored virtually. The Covid-19 pandemic will never be resolved if it is resolved privately—the only way to deal with a pandemic. "With a culture that always cares for each other and shares, this complex problem can be more easily resolved. In resolving the pandemic, Bavel et al. (2020) said all parties remained firm in the values of tolerance, Bhinneka Tunggal Ika, Gotong Royong, and Pancasila. According to Fay & Ghadimi, 2020). This must exist in the life of society, nation, and state. Jokowi also reminded that the Indonesian nation must pass the pandemic and other tests after it—steadfastly accompanied by sincere prayers and commitments. "We take care of our health, discipline ourselves in health protocols, and take care of and help each other. No one can be safe from the threat of Covid-19 as long as someone is still suffering from it (Asmundson & Taylor, 2020).

3.4 Maintain essential services

Separate patients by keeping no less than two arm's lengths apart (approximately 2 meters) when the situation permits (e.g., moving holding areas outside) and limiting the number of individuals in the office at any one time, especially in small spaces, e.g., drugstores and foyer holding area was essential (Gelter, & Puaschunder, 2020). Consider adapting and reusing the living room or assigning a dedicated office for COVID-19 considerations while others are assigned to basic non-COVID-19 administration. Change underutilized space in the office near further developed water sources (water provided through family associations, common standpipes, boreholes, protected wells, protected springs, or water assortments) and good ventilation (e.g., function properly and expand the external airflow as much as can be expected) to be used as a disconnection area for a

hypothetical or positive COVID-19 patient (Blay & Asekere, 2021). Ensure separate rooms for physical transfers are accessible for critically ill assessments and essential non-COVID-19 administrative deliveries.

Limit patient contact with health care workers and other patients to reduce the hazard of exposure or contamination; the Longtime between settings for stable and solid patients (Ippolito et al., 2020). Use telemedicine visits (video, calls, SMS (short message administration) for screening, follow-up, and drug reordering. Administer three or half years of medication for healthy and stable patients. Provide incremental arrangements to reduce the number of people on hold area and implement and endorse regulatory planning frameworks for decongestion centers Provide intense and constant fast-track administration to patients to reduce contact with multiple suppliers (e.g., lines drawn, medication prepared, the patient may see supplier if necessary, one supplier seeing a patient through all administrations) (Stawicki et al., 2020). Limit the number of guests who may go with patients to local area-based facilities or administrations. Migration administrations in each local area and medical services office should find out which option best suits their condition and accessible resources. The decision is subject to change according to the number of COVID-19 cases locally. Health offices with a small number of possible or positive COVID-19 patients can designate areas within the office where COVID-19 patients can be segregated (Cinar et al., 2020).

In places with higher COVID-19 cases, workplaces might consider: Shifting non-COVID-19 entire organization outside the workplace to neighborhood spaces (e.g., schools, temples, or void public spaces) to lessen hazard receptiveness in the workplace, guaranteeing these patients stay in care and treatment as some might fear becoming sick accepting they return to the office and diminishing groups in focuses, so they are better prepared to zero in on COVID-19 patients (Jacinta et al., 2020). Move organization for COVID-19 patients with gentle or prompt appearances to neighborhood centers around sticking to office space for the entire non-COVID-19 organization—advance neighborhood contemplations for COVID-19 patients with gentle or quick signs who can securely separate at home. Offer unique "contactless" drug choices for patients with ongoing ailment: Scheduled prescriptions are accessible at neighborhood pharmacies or focus or nearby buying communities (e.g., love places or schools) (Kopelovich et al., 2021). Consider changes to restrict up close and personal contact and the risks of receptiveness. Elective correspondence strategies might consolidate telemedicine calls, SMS, or online media. Completing three or a half years is a medication help for solid, stable patients. Stay in contact with stable patients. Give complete contact to new patients and patients at risk for disaster for follow-up—shift and deal tasks dependent upon the situation (Moutier, 2021).

3.5 Central Information

Welfare workers who come into contact with and care for COVID-19 patients have a higher risk of contamination than everyone else (Boettke & Powell, 2021). Mitigating and reducing this risk is the principle to protect their growth and reduce the spread of COVID-19. Accessible rationale evidence recommends that safe use of personal items, best practices of hand hygiene, implementation of the unavoidable hijab program in the workplace clinical considerations, and pleasant Pollution prevention and control (IPC) planning and guidance are linked to reduced risk of COVID-19 among welfare workers (King et al., 2020). Neutralizing SARS-CoV-2 disease in welfare workers requires a multi-pronged joint system that combines word-related prosperity and safety (OHS) measures and IPC. All clinical judgment workplaces must deploy or withhold and carry out (a) IPC

duties and (b) Occupational Health and Safety programs with performances to ensure HW prosperity and thwart HW contamination while in the work environment (Nwafor & Walker, 2020). It is recommended to ensure adequate levels of clinical staff to prevent the transmission of clinical benefits related to defilements.

Early disclosure of SARS-CoV-2 contamination among welfare workers can be fostered through syndrome perception. Research focuses on testing and is the basic methodology for restraining rescuer transmission from welfare workers to patients, between welfare workers in general through clinical judgment settings from well-being (Settembre) (Blundo et al., 2021). Workers to contacts outside the workplace prosperity. Public and environmental perceptual and testing frameworks should be created and finalized. A system for managing exposures that consider hazard evaluation should be established to promote and support related word and non-verbal welfare worker statements regarding COVID-19 exposures or outcomes.

A system for managing suspected pollution, including measures for the well-being of workers who test positive for SARS-CoV-2 and those whom Health workers are described by WHO as all people busy with training with the underlying motivation behind the further development of well-being, including characteristics and pessimistic tests for SARS-CoV-2, should be present (Kekeh & Akpinar, 2021). A transparent model for returning to work should be deployed following WHO guidelines for continued recall for COVID-19. Welfare systems and workplaces must maintain a culture free of COVID-19 infection in welfare workers. WHO has provided several tools for surveillance and research to more likely assess disease rates and risk factors for SARS-CoV-2 transmission among welfare workers (Kantele et al., 2021).

IV. Conclusion

At the end of this section, we will raise several essential points, described as findings in the results and discussion section. The critical points we got were, among other things, that in order for the Government to be able to build a strong future for this, there are several things they need to do. Must do, among other things, share information and communication that is right on target by prioritizing the critical information and has power for the community to continue to survive in difficult times such as a pandemic. So in terms of asking for helpful information for the community, the Government must build on research findings that can be scientifically justified because the situation today is where every individual can obtain free and more accurate information than what is conveyed by the Government. Therefore, the Government must have strong principles to absorb information from the public again. Next is what is described in which helpful information must be conveyed in the form of accurate and reliable information because wrong information will make the Government lose power and not get maximum attention from the public.

Next is building this public Trans that can be done by providing innovative standard services that build trust with news that is easy to digest and does not cause people who hear it to be more difficult but inspired to survive in difficult times such as a pandemic. Then we also explained how important it is to carry out caring for anything for the sake of where the Government here must build something substantial for a period where the Government can involve many groups, especially to eradicate mini and solve its effects, the Government must be able to invite all levels of society to obey implementing the various forms of security and regulations that their community provides. The next thing is how public information can be accessed with the correct system and can be played and at

any time and turn off public services, both transparent and easy to digest, so that is why the Government must have an internal and more secure information system for civil rights which today is areas where access to information is no longer restricted or pre-cooked. Next is what we mention here, namely how the Government becomes a source of information to convey helpful information accurately and precisely because when the information is submitted, it will impact the Government on the community.

This handling can be carried out with a system of approach to building public trust through community governance in terms of appropriate service-based health services where the Government must convey their leadership through an innovative model to optimize public services. Thus, this finding has many weaknesses, shortcomings, and limitations. Therefore, we hope for assistance and in-depth support so that this study can be carried out correctly in the future.

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