

EVALUASI IMPLEMENTASI *CLINICAL PATHWAY SECTIO CAESAREA* PADA UNIT RAWAT INAP OBSTETRIK DAN GINEKOLOGI DI RSUD PANEMBAHAN SENOPATI BANTUL

Yurni Dwi Astuti¹, Merita Arini¹, Arlina Dewi¹

¹Program Studi Manajemen Rumah Sakit, Program Pascasarjana,
Universitas Muhammadiyah Yogyakarta

INTISARI

Latar Belakang : Peningkatan mutu pelayanan kesehatan menjadi isu global dalam pembangunan kesehatan. Di Indonesia penerapan *clinical pathway* (CP) terkait penerapan INA-DRG diharapkan akan tercapai efisiensi dan peningkatan mutu pelayanan kesehatan rumah sakit. Penelitian ini dilakukan untuk mengevaluasi implementasi CP *Sectio Caesareia* (SC) pada unit rawat inap Obsgyn di RSUD Panembahan Senopati Bantul. Kasus SC merupakan kasus yang *high volume* sehingga perlu dikendalikan.

Metode : Penelitian menggunakan *mix methode* dengan desain studi kasus pada unit rawat inap obsgyn di RSUD Panembahan Senopati Bantul. Data kuantitatif untuk melihat dokumentasi dan kepatuhan, serta mengevaluasi CP menggunakan ICPAT pada rekam medis pasien yang menjalani operasi SC elektif secara *total sampling*. Data kualitatif diperoleh dengan cara melakukan *deep interview* dengan metode *purposive sampling*.

Hasil dan Pembahasan : Berdasarkan penilaian menggunakan ICPAT, didapatkan dimensi 1 konten dan mutu dikategorikan *moderate*. Dimensi 2 konten dan mutu dikategorikan kurang. Dimensi 3 konten dikategorikan *moderate* dan mutu dikategorikan kurang. Dimensi 4 konten dikategorikan *moderate* dan mutubaik. Dimensi 5 konten dan mutu dikategorikan kurang. Dimensi 6 konten dikategorikan baik dan mutu dikategorikan *moderate*. Kepatuhan penggunaan CP SC sebesar 28.12%. Hambatan implementasi CP SC adalah kurangnya kesadaran terhadap pentingnya CP dan rendahnya kepatuhan pendokumentasian CP karena dianggap sebagai beban kerja tambahan bagi para staf.

Kesimpulan : Kepatuhan terhadap implementasi CP perlu ditingkatkan dengan mengadakan sosialisasi secara keseluruhan serta mengaktifkan peran *case manager*.

Kata Kunci : Hambatan implemmentasi CP, Kepatuhan implementasi CP, ICPAT

**THE EVALUATION OF SECTIO CAESAREA CLINICAL PATHWAY
IMPLEMENTATION IN OBSTETRIC AND GYNECOLOGIC WARD
IN PANEMBAHAN SENOPATI HOSPITAL**

Yurni Dwi Astuti¹, Merita Arini¹, Arlina Dewi¹

¹Hospital Management of Study Program, Magister Program,
Muhammadiyah University of Yogyakarta

ABSTRACT

Background : To improve the quality of health care is an issue of global health development. In Indonesia the implementation of clinical pathways (CP) related to the implementation of INA – DRG is expected to achieve efficiency and improving the quality of health service hospitals. This research tries to evaluate the CP sectio caesarea (SC) implementation in obsgyn unit room in Panembahan Senopati State Hospital in Bantul. Sectio Caesaria's cases is a high volume of cases that need to be controlled.

Method: : The research used mix method focusing in case study design at obsgyn unit room in Panembahan Senopati State Hospital in Bantul. The quantitative data's is to observe at the documentation and compliance, and to evaluate the CP using ICPAT on the medical records of patients who had been operated elective Sectio Caecaria with total sampling. The qualitative data were collected by doing deep interview with a purposive sampling methods.

Result and Discussion : Based assesment using ICPAT, The content and quality of first dimension are categorized as moderate. The quality and content of second dimension are categorized as less moderate. The content of third dimension is categorized moderate while the quality is less moderate. The content of fourth dimension is labelled moderate while the quality is good. The content and quality of fifth dimension are less moderate. The content of sixth dimension is good while the quality is labelled moderate. The obedience of using CP Sectio Caesarea is as much as 28,12 %. The obtacles of this CP Sectio Caesarea implementation are because the staffs lack of awareness and their low compliance in CP documentation for it means they have more additional jobs.

Conclusion : Compliances with the implementation of CP needs to be improved by conducting socialization and activating the role of care manager.

Key words : Obstacle implementation of CP, Compliance implementation of CP, ICPAT