

EVALUASI IMPLEMENTASI *CLINICAL PATHWAY* PNEUMONIA DI RUANG RAWAT INAP BANGSAL ANAK RSUD PANEMBAHAN SENOPATI BANTUL

(Studi Kasus)

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INTISARI

Latar Belakang: Sejak 1 Januari 2014 pembiayaan kesehatan di Indonesia menjadi Jaminan Kesehatan Nasional. *Clinical pathway* (CP) adalah alat kendali mutu dan biaya pelayanan kesehatan di era BPJS. RSUD Panembahan Senopati Bantul sudah bekerja sama dengan BPJS. Kasus pneumonia pada anak banyak ditemukan di RSUD Panembahan Senopati Bantul. Tujuan penelitian ini adalah mengevaluasi implementasi CP pneumonia di bangsal Anggrek.

Metode: Penelitian *mix method* dengan pendekatan studi kasus. Data kuantitatif bersifat deskriptif sederhana dari dokumentasi CP dalam rekam medis pneumonia (Januari-Maret 2016, total sampling n=14) dan *checklist The Integrated Care Pathway Appraisal Tools* (ICPAT). Data kualitatif diperoleh dari *deep interview* dan observasi dengan purposive sampling n=7.

Hasil dan Pembahasan: ICPAT dimensi 1 (apakah benar sebuah CP) konten dan mutu moderat, dimensi 2 (dokumentasi) dan dimensi 5 (*maintenance*) konten dan mutu kurang, dimensi 3 (pengembangan) konten moderat dan mutu kurang, dimensi 4 (implementasi) konten moderat dan mutu baik, dimensi 6 (peran organisasi) konten baik dan mutu moderat. CP dimasukkan ke dalam seluruh rekam medis dengan kepatuhan pengisian 86,96%. Kendala implementasi CP adalah keterbatasan waktu dan kesadaran dokter mengisi CP, belum ada rasa memiliki, dan ada terapi yang tidak sesuai CP.

Kesimpulan dan Saran: Kepatuhan implementasi CP pneumonia perlu ditingkatkan. Perlu dilakukan evaluasi rutin, sosialisasi, dan peningkatan peran *case manager* di bangsal.

Kata kunci : Evaluasi, implementasi, *clinical pathway* pneumonia.

THE EVALUATION OF PNEUMONIA CLINICAL PATHWAY IMPLEMENTATION IN PEDIATRIC WARD RSUD PANEMBAHAN SENOPATI BANTUL

(Case Study)

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ABSTRACT

Background: Since January 1st 2014, health financing in Indonesia turned into the National Health Insurance. Clinical Pathway (CP) is a tool of quality and health care costs control in the era of BPJS. Panembahan Senopati Bantul Regional General Hospital has cooperated with BPJS. Many cases of pneumonia on children found in Panembahan Senopati Regional General Hospital. The purpose of this study is to evaluate the CP implementation of pneumonia in Anggrek Ward.

Method: Mix research method with a case study design. Quantitive data was a simple description from CP documentation in medical records of pneumonia (January until March 2016, total sampling n = 14) and checklist of The Integrated Care Pathway Appraisal Tools (ICPAT). Qualitative data was obtained from deep interview and observation with purposive sampling n=7.

Results and Discussion: First dimension of ICPAT (is a CP good?) showed us that both of content and quality were in moderate level, second dimension (documentation) and fifth dimension (maintenance) showed us that content and quality in low level, third dimension (development) showed us that content in moderate level and quality in good level, and sixth dimension (role of organization) showed us content in good level and quality in moderate level. CP was placed in all medical records with a filling obedience of 89.96%. The constraints of CP implementation were a limited time, an awareness from doctors to fill CP, there was no sense of belonging, and there were therapies that were not in accordance with CP.

Conclusion and Suggestion: Compliance of pneumonia CP implementation needs to be improved. Need to do a routin evaluation, socialization, and increasing the role of case manager in the ward.

Keywords : Evaluation, implementation, pneumonia clinical pathway.