

## INTISARI

### ANALISIS KUALITAS PELAYANAN PALIATIF DI KOMUNITAS BERDASARKAN PERSPEKTIF TENAGA KESEHATAN: *A MIXED METHODS STUDY*

Desi Dwi Siwi Atika Dewi<sup>1</sup> Christantie Effendy<sup>2</sup> Ariani Arista Putri Pertiwi<sup>3</sup>

<sup>1</sup>Master of Nursing, Faculty of Medicine, Public Health, and Nursing, Universitas Gadjah Mada, Yogyakarta, Indonesia

<sup>2</sup>Department of Medical Surgical Nursing, Faculty of Medicine, Public Health, and Nursing, Universitas Gadjah Mada, Yogyakarta, Indonesia

<sup>3</sup>Department of Basic Nursing and Emergency, Faculty of Medicine, Public Health, and Nursing, Universitas Gadjah Mada, Yogyakarta, Indonesia

**Latar belakang :** Pelayanan paliatif belum secara eksplisit dinyatakan, namun berbagai upaya untuk meningkatkan kualitas hidup pasien dan keluarga dengan kebutuhan paliatif telah dilakukan di pelayanan primer. Sebagai bagian integral dalam upaya peningkatan pelayanan paliatif, perlu dilakukan evaluasi untuk menilai pelaksanaan pelayanan paliatif di komunitas melalui Puskesmas.

**Tujuan Penelitian :** Menilai kualitas pelaksanaan pelayanan paliatif berbasis komunitas di 34 Puskesmas di Daerah Istimewa Yogyakarta.

**Metode :** Penelitian ini menggunakan desain *mixed method convergent parallel*. Penentuan sampel didasarkan pada *proportionate stratified* dan *purposive sampling*. Pengukuran kualitas pelayanan paliatif menggunakan dua instrumen yaitu “Kualitas Perawatan Paliatif” dan “Persepsi dan Kinerja Perawatan Akhir Hayat”. *In depth interview* dilakukan untuk mendapatkan data kualitatif. *Joint display* digunakan untuk mengintegrasikan data kuantitatif dan kualitatif.

**Hasil :** Penelitian ini melibatkan 290 responden perawat dan 3 dokter dari 34 Puskesmas di DIY. Hasil analisis menunjukkan kualitas perawatan paliatif dengan *mean* ( $4.10 \pm 0.38$ ), serta gambaran persepsi akhir hayat ( $3.17 \pm 0.35$ ) dan kinerja perawatan akhir hayat dengan *mean* ( $2.90 \pm 0.45$ ). Berdasarkan analisis kualitatif, didapatkan lima tema yaitu : 1) Persepsi perawat tentang pelayanan paliatif, 2) Pelaksanaan pelayanan paliatif di dalam dan luar Gedung, 3) Dukungan dan hambatan dalam pelayanan paliatif, 4) Harapan untuk peningkatan layanan paliatif, 5) Pengembangan sistem RKE sebagai solusi dalam keberlanjutan pelayanan paliatif.

**Kesimpulan :** Pelayanan paliatif di komunitas melalui Puskesmas di DIY telah berjalan dilihat dari perawatan paliatif, akhir hayat, dan persepsi tenaga kesehatan. Meskipun begitu, diperlukan berbagai upaya peningkatan pelayanan paliatif di komunitas melalui berbagai dukungan, kebijakan, dan kompetensi tenaga kesehatan Puskesmas.

**Kata Kunci :** Perawatan paliatif, perawatan terminal, Puskesmas

## ABSTRACT

### ANALYSIS OF THE QUALITY OF PALLIATIVE CARE SERVICES IN COMMUNITY SETTING BASED ON THE PERSPECTIVES OF HEALTH PERSONNEL: A MIXED METHODS STUDY

Desi Dwi Siwi Atika Dewi<sup>1</sup> Christantie Effendy<sup>2</sup> Ariani Arista Putri Pertiwi<sup>3</sup>

<sup>1</sup>Master of Nursing, Faculty of Medicine, Public Health, and Nursing, Universitas Gadjah Mada, Yogyakarta, Indonesia

<sup>2</sup>Department of Medical Surgical Nursing, Faculty of Medicine, Public Health, and Nursing, Universitas Gadjah Mada, Yogyakarta, Indonesia

<sup>3</sup>Department of Basic Nursing and Emergency, Faculty of Medicine, Public Health, and Nursing, Universitas Gadjah Mada, Yogyakarta, Indonesia

**Background:** Palliative care has not been explicitly stated, but various efforts to improve the quality of life for patients and families with palliative care needs have been implemented at primary care. As an integral part of efforts to improve palliative care, evaluations are needed to assess the implementation of palliative care in the community through community health centers (Puskesmas).

**Objective:** To assess the quality of implementation of community based palliative care in 34 community health center in the Special Region of Yogyakarta.

**Methods:** This study used a mixed-methods convergent parallel design. The sample was determined based on proportionate stratified and purposive sampling. We measure the quality of palliative care using two instruments are "Quality of Palliative Care" and "Perceptions and Performance of End-of-Life Care.". We conducted in depth interview for qualitative phase. Data integration was performed using Joint Display.

**Results:** This study involved 290 nurse respondents and 3 doctors from 34 community health centers (Puskesmas) in the Special Region of Yogyakarta. The analysis results showed a mean score of  $4.10 \pm 0.38$  for the quality of palliative care,  $3.17 \pm 0.35$  for the perception of end-of-life care, and  $2.90 \pm 0.45$  for the performance of end-of-life care. The qualitative analysis revealed five themes: 1) Nurses' perceptions of palliative care, 2) Implementation of palliative care inside and outside the building, 3) Support and barriers to palliative care, 4) Expectations for improving palliative care, and 5) Development of an RKE system as a solution for sustainable palliative care.

**Conclusion:** Community palliative care services through community health centers in Yogyakarta have been implemented, as seen from the perspective of palliative care, end-of-life care, and perceptions of healthcare workers. However, various efforts are needed to improve community palliative care through various forms of support, policies, and the competence of community health center healthcare workers.

**Keywords:** Palliative care, terminal care, community health center