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Pengembangan Indikator Kualitas Perawatan Paliatif pada Pasien Kritis sebagai Ukuran Derajat Mutu Perawatan Paliatif di Intensive Care Unit
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ABSTRAK

Tingginya mortalitas pasien kritis di ICU menekankan kebutuhan integrasi perawatan paliatif. Namun, indikator kualitas yang ada sebagian besar dikembangkan di luar negeri dan belum mempertimbangkan budaya, spiritual, serta karakteristik ICU di Indonesia, maupun diuji validitas dan reliabilitasnya. Penelitian ini bertujuan mengembangkan indikator kualitas perawatan paliatif pada pasien kritis di ICU Indonesia yang valid, dan reliabel.

Penelitian menggunakan desain *Exploratory Sequential Mixed Methods*. Tahap 1 merupakan penelitian kualitatif dengan 43 partisipan, dilanjutkan uji *face validity* menggunakan *Modified Delphi Method* dua putaran (putaran 1: 42 ahli; putaran 2: 38 ahli). Tahap 2 meliputi uji validitas konten (n=9), reliabilitas antar penilai (n=4), *internal consistency reliability*, dan *feasibility study* (n=40). Tahap 3 melakukan *psychometric testing*, termasuk uji validitas konstruk dengan *Confirmatory Factor Analysis* (CFA) dan reliabilitas internal menggunakan Amos 29 dan SPSS 26.

Hasil *psychometric testing* menunjukkan bahwa seluruh item instrumen melalui *Confirmatory Factor Analysis* (CFA) memiliki *factor loading* tinggi (0,767–0,998), *Composite Reliability* (CR) 0,91–0,96, dan *Average Variance Extracted* (AVE) 0,79–0,85, mengindikasikan reliabilitas internal dan validitas konvergen yang sangat baik. Setiap indikator secara signifikan merepresentasikan domainnya, dan *marginal fit model* instrumen (SRMR = 0,000–0,082; CFI = 0,632–1,000) menegaskan bahwa instrumen PaCE-ICU valid dan reliabel.

Instrumen PaCE-ICU yang dikembangkan terbukti valid, reliabel, dan sesuai konteks, sehingga dapat digunakan untuk menilai dan meningkatkan mutu perawatan paliatif pada pasien kritis di ICU.

Kata kunci: *Intensive Care Units*; Perawatan Paliatif; Indikator Kualitas.

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ABSTRACT

The high *mortality rate of critically ill patients in intensive care units (ICUs) highlights the need for integrating palliative care. However, existing quality indicators are mostly developed abroad and do not fully consider the cultural, spiritual, and ICU-specific characteristics in Indonesia, nor have they been comprehensively tested for validity and reliability. This study aimed to develop valid and reliable palliative care quality indicators for critically ill patients in Indonesian ICUs.*

This research employed an Exploratory Sequential Mixed-Method design. Phase 1 involved qualitative research with 43 *participants, followed by face validity assessment using a two-round Modified Delphi Method (round* 1: 42 *experts; round* 2: 38 *experts). Phase* 2 *included content validity testing (n=9), inter-rater reliability (n=4), internal consistency reliability, and a feasibility study (n=*40*). Phase* 3 *conducted psychometric testing, including construct validity using Confirmatory Factor Analysis (CFA) and internal reliability testing with Amos* 29 *and SPSS* 26*.*

Psychometric testing results indicated that all instrument items in the CFA had high factor loadings (0,767–0,998), *Composite Reliability (CR) of* 0.91–0.96*, and Average Variance Extracted (AVE) of* 0.79–0.85*, reflecting excellent internal reliability and convergent validity. Each indicator significantly represents its domain, and the marginal fit of the instrument model (SRMR =* 0.000–0.082*; CFI =* 0.632–1.000*) confirms that the PaCE-ICU instrument is valid and reliable.*

The developed PaCE-ICU instrument is valid, reliable, and contextually appropriate, supporting its use to assess and improve the quality of palliative care for critically ill patients in ICUs.

Keywords: *Intensive Care Units; Palliative Care; Quality Indicators.*