

INTISARI

Latar belakang: Pelayanan *antenatal* bermanfaat dalam mendeteksi risiko dini yang terjadi selama kehamilan, persalinan dan masa nifas. Untuk meningkatkan kualitas layanan antenatal di puskesmas diperlukan penilaian kinerja khususnya pelayanan *antenatal care* (ANC). Fenomena yang terjadi saat ini di Kota Palangka Raya adalah masih banyaknya petugas kesehatan khususnya bidan yang belum menerapkan standar pelayanan. Hal ini diketahui dari banyaknya keluhan pasien terhadap pelayanan yang diberikan. Selain itu belum adanya penilaian kinerja puskesmas berdasarkan BSC baik di puskesmas yang berada di daerah perkotaan maupun di pedesaan.

Tujuan Penelitian: menilai kinerja pelayanan antenatal antara Puskesmas Pahandut (perkotaan) dan Puskesmas Tangkiling (pedesaan) dengan menggunakan pendekatan BSC.

Metode Penelitian: Jenis penelitian observasional dengan rancangan *cross-sectional*. Penelitian ini dilakukan di dua Puskesmas dengan kategori perkotaan (Puskesmas Pahandut) dan pedesaan (Puskesmas Tangkiling). Pemilihan lokasi berdasarkan *purposive sampling* dengan inklusi puskesmas PONE. Sampel penelitian adalah Kepala Puskesmas, Bidan koordinator dan pelaksana di ruang KIA serta ibu hamil trimester III. Jumlah responden ibu hamil sebanyak 72 orang. Pengujian data dilakukan dengan analisis univariat, bivariat, dan analisis kinerja pelayanan berdasarkan BSC.

Hasil: Dana operasional berdasarkan BSC tidak ada perbedaan. kepuasan pasien berdasarkan uji independet test ($p=0,000$; Δ mean= 13,17; 95%CI=9,93-16,40) menunjukkan ada perbedaan Puskesmas Pahandut dengan Puskesmas Tangkiling. Kepatuhan petugas dalam melaksanakan standar menunjukkan tidak ada perbedaan ($p=0,378$; Δ mean= 0,32; 95%CI= -1,38-2,02). pendidikan dan pelatihan Puskesmas Pahandut lebih baik dari Puskesmas Tangkiling ($\chi^2=5,04$ $p=0,024$ PR= 1,8 95%CI= 1,00-3,31)

Kesimpulan: Tidak ada perbedaan biaya operasional dan kepatuhan petugas dalam melaksanakan standar pelayanan. Ada perbedaan kepuasan pasien, pendidikan dan pelatihan serta kualitas kunjungan *antenatal*.

Kata kunci: Pelayanan antenatal; Penilaian kinerja puskesmas perkotaan dan pedesaan; *Balanced Scorecard*.



ABSTRACT

Background: Antenatal service is beneficial in detecting early risk during pregnancy, childbirth and parturition period. To improve quality of antenatal service in health centers performance evaluation particularly antenatal service is required. Phenomena presently happen at Palangka Raya Municipality is large quantity of health staff especially midwives do not implement standard service. This is indicated from lots of patients' complaints over the service provided. Besides there is no performance evaluation on health centers based on Balanced Scorecard (BSC) of health centers either in urban or rural areas.

Objective: To evaluate performance of antenatal service of health centers in Pahandut (urban) and Tangkiling (rural) areas using BSC approach.

Method: The study was observational with cross sectional design undertaken at two health centers in Pahandut Health Center urban area and in Tangkiling Health Center (rural area). Selection of location was based on purposive sampling with inclusion criteria of Basic Emergency Neonatal Obstetric Training (Pelatihan Obstetri Neonatal Emergensi Dasar/PONED) Health Center. Samples consisted of head of health centers, midwives coordinator, staff in charge of mother and child health and pregnant mothers at trimester III. There were 72 respondents. Data analysis used univariate, bivariate, and service performance analysis based on BSC.

Result: There was no difference in operational budget based on BSC; patient satisfaction based on independent test ($p=0.000$; Δ mean=0.32; 95% CI=9.93-116.40) showed that Pahandut Health Center was better than Tangkiling Health Center. Compliance of staff with standard operation showed no difference ($p=0.378$; Δ mean=0.32; 95% CI=-1.38-3.02); education and training at Pahandut Health Center was better than at Tangkiling Health Center ($\chi^2=5.04$; $p=0.024$; PR=1.8 95% CI=1.00-3.31).

Conclusion: There was no difference in operational budget and compliance of staff with service standard. There was difference in patient satisfaction and education of training and antenatal performance between Pahandut Health Center and Tangkiling Health Center.

Keywords: antenatal service, performance evaluation, Balanced Scorecard, health centers