

INTI SARI

Latar Belakang: Berdasarkan Undang-Undang Nomor 44 Tahun 2009 Pasal 36 tentang Rumah Sakit menyatakan bahwa rumah sakit harus menyelenggarakan tata kelola rumah sakit dan tata kelola klinis yang baik. RS Lestari Raharja Magelang menerapkan CP dalam rangka perwujudan pasal tersebut. Namun dalam pelaksanaannya masih ditemukan formulir CP yang tidak lengkap pengisiannya yang menyebabkan pelayanan pada pasien tidak seragam.

Tujuan: Mengetahui proses penyusunan CP, mengetahui pelaksanaan pendokumentasian CP, mengetahui kendala selama pelaksanaan pendokumentasian CP, dan mengetahui upaya yang telah dilakukan untuk mengatasi kendala pelaksanaan pendokumentasian CP di RS Lestari Raharja Magelang.

Metode: Jenis penelitian ini penelitian deskriptif kualitatif dengan rancangan studi kasus. Subjek penelitian ini adalah *case manager*, ketua komite keperawatan, dan sekretaris CP. Objek penelitian ini adalah formulir CP, berkas rekam medis, dan SPO CP Teknik pengumpulan data menggunakan wawancara, observasi, dan studi dokumentasi.

Hasil: Pelaksanaan CP di RS Lestari Raharja Magelang dimulai pada bulan Oktober 2019 dengan menerapkan 12 diagnosis prioritas yang disusun oleh tim CP. Dalam pelaksanaannya terdapat beberapa kendala diantaranya kurangnya koordinasi antar petugas dalam melengkapi CP, dokter hanya sebagai autentifikasi saja, banyaknya formulir rekam medis yang harus diisi, ketersediaan formulir CP yang sempat kosong, belum ada tindak lanjut pelaksanaan CP, dan CP dianggap sebagai syarat akreditasi RS saja. Upaya yang sudah dilakukan yaitu meningkatkan koordinasi antar petugas dan menunjuk petugas yang khusus bertanggung jawab terhadap formulir.

Kesimpulan: Pelaksanaan pendokumentasian CP belum maksimal karena CP belum menjadi panduan dalam melakukan tindakan medis kepada pasien. Diperlukan monitoring dan evaluasi terhadap pelaksanaan pendokumentasian CP.

Kata kunci: pelaksanaan, pengisian, *clinical pathway*

ABSTRACT

Background: Based on The Constitution Number 44 in 2009 Article 36 about Hospital declared that every hospital must organized a good hospital governance and clinical governance. Lestari Raharja Magelang Hospital implemented a clinical pathway to realization that article. But in the implementation there was a clinical pathway form which was incomplete to be filled out which cause difference services for patient.

Objective: To know the forming process of CP, to know the implementation of CP's documentation, to know the obstacles during the CP documentation implementation, and to know the efforts that have been made to resolve the obstacles in implementing CP's documentation in Lestari Raharja Magelang Hospital.

Methods: The type of this research was qualitative research with case study research design. Subject of this research was case manager, a head of the nursing committee, and secretary of clinical pathway's team. The object of this research was implementation of clinical pathway. The data was taken by interview, observation, and documentation studies.

Results: The implementation of CP in Lestari Raharja Magelang Hospital began in October 2019 by applied 12 priority diagnoses compiled by the CP's team. In the implementation there were several obstacles including lack of coordination between officers in completing CP, doctors were only as authentication, many medical record forms must be filled in, the availability of CP forms that were empty, there had been no follow-up of CP implementation, and CP was considered as a hospital accreditation requirement only. Efforts had been made to improve coordination between officers and appoint officers specifically responsible for forms.

Conclusion: Implementation of CP documentation has not been maximized because CP has not been a guide in conducting medical treatment to patients. Monitoring and evaluation of CP documentation is needed.

Keywords: implementation, fulfillment, clinical pathway