

INTISARI

Latar belakang: Jumlah kasus kematian ibu di beberapa Kabupaten masih tinggi dan mengalami kenaikan seperti di Kabupaten Brebes dan Kabupaten Banyumas. Kasus kematian ibu di Kabupaten Brebes menempati urutan kedua terbanyak di Jawa Tengah pada tahun 2018 sebanyak 30 kasus namun mengalami penurunan setiap tahun. Kasus kematian ibu di Kabupaten Banyumas mengalami kenaikan dari tahun 2017 sebanyak 14 kasus menjadi 18 kasus pada tahun 2018. Kebijakan Audit Maternal Perinatal (AMP) di Kabupaten/Kota sebagai upaya menurunkan jumlah kematian ibu dirasa belum berhasil. Selain itu, seberapa besar penentu dan pelaksana kebijakan merespons atau menindaklanjuti hasil rekomendasi audit maternal masih menjadi pertanyaan besar.

Tujuan: Mengeksplorasi respons dan faktor yang mempengaruhi implementasi tindak lanjut rekomendasi audit maternal di Kabupaten Brebes dan Kabupaten Banyumas.

Metode: Penelitian ini menggunakan desain kualitatif dengan rancangan penelitian studi kasus. Teknik pengumpulan data dengan telaah dokumen, wawancara mendalam dan *focus group discussions* dengan jumlah informan sebanyak 14 orang.

Hasil : Respons segera tindak lanjut audit maternal di Kabupaten Brebes cukup dan di Kabupaten Banyumas baik. Respons terencana di kedua kabupaten tidak dilakukan analisis pada penelitian ini karena tidak mengkaji kerangka acuan kegiatan. Berdasarkan Karakteristik masalah Kabupaten Brebes sulit untuk dikendalikan karena masih banyak permasalahan di lapangan dan Kabupaten Banyumas mudah untuk dikendalikan. Berdasarkan Karakteristik Kebijakan kedua kabupaten termasuk dalam kategori baik dan berdasarkan lingkungan Kabupaten Brebes belum mendukung dan lingkungan Kabupaten Banyumas mendukung implementasi tindak lanjut rekomendasi audit maternal.

Kesimpulan : Respons kabupaten sangat tergantung dari kepemimpinan untuk mengambil keputusan dengan segera. Respons segera tindak lanjut audit maternal di Kabupaten Brebes cukup dan di Kabupaten Banyumas baik. Sebaiknya Dinas Kesehatan kedua kabupaten perlu membuat SOP tindak lanjut rekomendasi sampai pada pelaksanaan monitoring dan evaluasi dengan menambahkan sistem reward dan punishment serta Kabupaten Brebes sebaiknya mempercepat proses penambahan Rumah Sakit PONEK dan lebih memperhatikan prinsip respons dalam MDSR.

Kata Kunci: Audit Maternal, Respons tindak lanjut AMP, MDSR

FOLLOW-UP RESPONSE OF MATERNAL AUDIT RECOMMENDATIONS IN BREBES AND BANYUMAS REGENCIES

ABSTRACT

Background: The number of cases of maternal deaths in several districts is still high and has increased as in Brebes and Banyumas districts. The number of maternal deaths in Brebes Regency is the second highest in Central Java in 2018 with 30 cases but has decreased every year. The case of maternal mortality in Banyumas Regency has increased from 2017 to 14 cases to 18 cases in 2018. The Maternal Perinatal Audit Policy in the District / City as an effort to reduce the number of maternal deaths is felt to be unsuccessful. In addition, the extent to which policy makers and implementers respond to or follow up on the results of maternal audit recommendations is still a big question.

Objective: To explore the responses and factors that influence the implementation of follow-up maternal audits recommendations in Brebes and Banyumas Districts.

Method: This study used a qualitative design with a case study research design. Data collection techniques through document review, in-depth interviews and focus group discussions with a total of 14 informants.

Results: The immediate response to the follow-up to the maternal audit in Brebes Regency was adequate and in Banyumas District good. Planned responses in both districts were not analyzed in this study because terms of reference for activities is not reviewed. Based on the characteristics of the problems the Brebes Regency is difficult to control because there are still many problems in the field and Banyumas Regency is easy to control. Based on the Policy Characteristics of the two districts included in the good category and based on the environment the Brebes Regency has not supported and the Banyumas Regency environment supports the implementation of the follow-up to the maternal audit recommendations.

Conclusion: The response of the regencies is very dependent on leadership to make decisions immediately. The immediate response to the follow-up of the maternal audit in Brebes Regency was sufficient and in Banyumas District was good. It is recommended that the District Health Offices need to make a follow-up SOP on recommendations to the implementation of monitoring and evaluation by adding a reward and punishment system and Brebes Regency should accelerate the process of adding PONEK Hospitals and pay more attention to the principles of response in MDSR.

Keywords: Maternal Audit, AMP follow-up response, MDSR