

ABSTRAK

Latar Belakang : Berdasarkan wawancara dengan salah satu petugas rekam medis, di RSUD Bagas Waras akan melakukan persiapan akreditasi pada tahun 2017, yang sebelumnya belum pernah terakreditasi. Peneliti mengambil tema akreditasi terkait APK.1 tentang *screening* pasien IGD. Di RSUD Bagas Waras, kebijakan tentang pelaksanaan skrining dan alasan pasien diterima, dipindahkan atau dirujuk belum ada, sehingga selama ini pelaksanaannya dilakukan tanpa pedoman. Sedangkan pendokumentasiannya sudah di lembar skrining, tetapi kebijakan tentang pengisiannya belum ada. Kebijakan tersebut masih dalam tahap penyusunan dan proses pengesahan.

Tujuan : Mengetahui persiapan akreditasi rumah sakit dalam memenuhi standar akreditasi APK.1 tentang *screening* pasien IGD di RSUD Bagas Waras Klaten.

Metode : Jenis penelitian ini adalah penelitian deskriptif dengan pendekatan kualitatif, dan rancangan penelitian secara *cross sectional*. Subjek yang diteliti dalam penelitian yaitu petugas rekam medis, dokter IGD, dan perawat IGD. Objek penelitian yaitu berkas rekam medis.

Hasil : Item data formulir skrining pasien IGD di RSUD Bagas Waras Klaten sudah sesuai dengan standar APK.1. Presentase kelengkapan item data lembar skrining awal yaitu sebesar 66 % lengkap dan 34% tidak lengkap. Presentase kelengkapan tertinggi yaitu nama sebesar 99% dan presentase kelengkapan terendah yaitu status akhir pasien dan kondisi pasien saat pulang sebesar 100%. Skrining awal yang dilakukan di IGD RSUD Bagas Waras sudah sesuai dengan standar akreditasi. Serta SPO dan kebijakan pelaksanaan skrining awal dan alasan pasien diterima, dirujuk atau dipindahkan masih dalam tahap pengesahan.

Kata Kunci : evaluasi, *screening*, standar akreditasi 2012

ABSTRACT

Background: According to the interviews with medical record officer, there will be accreditation in 2017 at RSUD Bagas Waras thus they make preparations for it. The researchers took the theme of accreditation related to APK.1 on the patients screening in Emergency Instalation. In RSUD Bagas Waras, there was no guidance about policies on the screening and the accepted, transferred or referred for patient's. While the documentation was already on the screening sheet, but the policy about the filling is not available yet. The policy was still under the preparation and approval process.

Objective: To describe the preparation of hospital accreditation in fulfilling the accreditation standard of APK.1 about patient's screening in Emergency Instalation at RSUD Bagas Waras Klaten.

Method: This is a descriptive research with qualitative approach, and cross sectional research design. The subjects were medical record officer, Emergency Installation doctors and nurses. The object of research is medical record file.

Result: The item data of screening form of Emergency Installation patient at RSUD Bagas Waras Klaten is in accordance with the standard of APK.1. The item completeness percentage of the initial screening data form is 66% complete and 34% incomplete. The highest completeness percentage is the name of 99% and the lowest completeness percentage is the patient's final status and the patient's condition when they get home of 100%. Preliminary screening conducted at emergency unit of RSUD Bagas Waras is in accordance with the accreditation standard. The SPO and the initial screening policies and the reasons for the patient being accepted, referred to or transferred are still in the approval stage.

Keywords: evaluation, screening, 2012 accreditation standard