

## ABSTRAK

**Latar Belakang:** Daerah Istimewa Yogyakarta merupakan peraih penghargaan peringkat pertama untuk Program Kesehatan Ibu dan Anak pada tahun 2012. Namun demikian jumlah kematian ibu pada tahun 2013 justru terjadi peningkatan. Berdasarkan hal tersebut maka perlu adanya upaya yang lebih keras agar terjadi percepatan penurunan jumlah kematian ibu dengan melakukan upaya-upaya inovasi yang memiliki daya ungkit yang tinggi diantaranya dengan perbaikan manajemen dan pelaksanaan Audit Maternal Perinatal dan pentingnya respon segera dan respon terencana dari semua pihak untuk menindaklanjuti rekomendasi Audit Maternal Perinatal.

**Metode:** Penelitian ini merupakan penelitian deskriptif dengan rancangan studi kasus kualitatif. Subyek penelitian adalah Kepala Dinas Kesehatan, Kepala Bidang, Kepala Seksi dan Staf Bagian Kesehatan Ibu dan Anak di Dinas Kesehatan. Pengumpulan data dengan cara wawancara mendalam, observasi dan telaahan dokumen.

**Hasil:** Perumusan rekomendasi Audit Maternal Perinatal belum secara terperinci menyebutkan sasaran rekomendasi, *Plan of Action* (POA) maupun *form* untuk pemantauan tindak lanjut rekomendasi Audit Maternal Perinatal belum ada dan masih terdapat rekomendasi yang berulang serta manajemen Audit Maternal Perinatal masih menekankan manajemen birokrasi. Komunikasi dan koordinasi pelaksanaan Audit Maternal Perinatal sudah berjalan dengan baik tetapi komunikasi dan koordinasi dalam rangka pelaksanaan tindak lanjut rekomendasi Audit Maternal Perinatal tidak terkoordinasi dengan baik. Pelaksanaan Audit Maternal Perinatal di Kabupaten Kulon Progo juga telah membahas kasus-kasus *nearmiss* dan melakukan audit sosial di tingkat masyarakat sedangkan di Kabupaten Gunungkidul belum melaksanakannya. Kepala Dinas Kesehatan Kabupaten Kulon Progo sangat berkomitmen terhadap pelaksanaan Audit Maternal Perinatal maupun tindak lanjut rekomendasi Audit Maternal Perinatal dibanding Kepala Dinas Kesehatan Kabupaten Gunungkidul. Tindak lanjut rekomendasi Audit Maternal Perinatal di Dinas Kesehatan Kabupaten Gunungkidul maupun di Dinas Kesehatan Kabupaten Kulon Progo sebagian besar telah ditindaklanjuti sedangkan tindak lanjut rekomendasi Audit Maternal Perinatal di luar lingkup dinas kesehatan seperti rumah sakit tidak diketahui karena belum ada laporan ataupun pemantauan.

**Kesimpulan:** Manajemen Audit Maternal Perinatal di Kabupaten Gunungkidul maupun di Kabupaten Kulon Progo tidak hanya menekankan pada manajemen birokrasi tetapi juga menekankan pada manajemen *problem solving*. Komunikasi dan koordinasi dalam pelaksanaan Audit Maternal Perinatal berjalan dengan baik namun dalam tindak lanjut rekomendasi Audit Maternal Perinatal kurang baik. Pelaksanaan Audit Maternal Perinatal dan komitmen Kepala Dinas Kesehatan Kabupaten Kulon Progo lebih baik dibanding Kabupaten Gunungkidul. Tindak lanjut rekomendasi Audit Maternal Perinatal di Dinas Kesehatan Kabupaten Gunungkidul maupun Kabupaten Kulon Progo sebagian besar telah ditindaklanjuti sedangkan tindak lanjut di luar lingkup dinas kesehatan tidak diketahui.

**Kata Kunci:** Audit Maternal Perinatal, Manajemen Audit Maternal Perinatal, Rekomendasi Audit Maternal Perinatal, Respon Segera dan Respon Terencana.

## ABSTRACT

**Background:** Special Region of Yogyakarta was the first of award-winning for Maternal and Child Health Program in 2012. However, the number of maternal mortality in 2013 actually increased. Under these conditions, needed harder effort to enable the acceleration of decline in maternal mortality and infant mortality, by made many innovations that have a high leverage including improved management and implementation of Maternal Perinatal Audit and the importance of an immediate response and the planned response from all parties to implement the recommendations of Maternal Perinatal Audit.

**Methods:** This study was a descriptive study with qualitative case study design. Subjects were Head of the Health Department, Head of Division, Head of Section and Staff of Maternal and Child Health Division in the Health Department. Data collection using in-depth interviews, observation and document research paper.

**Results:** Formulation of recommendations Maternal Perinatal Audit have not been detailed targets of recommendations, Plan of Action (POA) and the form for monitoring the follow-up recommendation on Maternal Perinatal Audit available yet and there were repeated recommendation and Maternal Perinatal Audit management still emphasizes bureaucratic management. Communication and coordination implementation of Maternal Perinatal Audit has been going well, but communication and coordination within the framework of the implementation of the follow-up recommendations Maternal Perinatal Audit not well coordinated. Implementation of Maternal Perinatal Audit in Kulon Progo have discussed the cases nearmiss and conduct social audits at the community level while in Gunungkidul have not implemented. Head of Health Department in Kulon Progo very committed to the implementation of the Maternal Perinatal Audit and follow-up recommendation of Maternal Perinatal Audit compared head of Health Department in Gunungkidul. The follow-up recommendation of Maternal Perinatal Audit in Gunungkidul and in Kulon Progo Health Department has largely been followed up while the follow-up of Maternal Perinatal Audit outside the scope of health department such as hospitals unknown because there were no reporting or monitoring.

**Conclusion:** Maternal Perinatal Audit Management in Gunungkidul or in Kulon Progo were not only focused on bureaucratic management but also emphasized problem solving management. Communication and coordination in the implementation of the Maternal Perinatal audit had been running well but in the follow-up of Maternal Perinatal Audit had not running well. Implementation of Maternal Perinatal Audit and commitment Head of Health Department Kulon Progo better than Gunungkidul. Follow-up recommendation of Maternal Perinatal Audit in Health Departmen of Gunungkidul and Kulon Progo largely had been followed up while the follow-up outside the scope of the health department unknown.

**Keywords:** Maternal Perinatal Audit, Maternal Perinatal Audit Management, Maternal Perinatal Audit Recommendation, Immediate Response and Planned Response.