

## ABSTRAK

**Latar Belakang:** *Clinical Pathway* memberikan pendekatan pelayanan rumah sakit dengan mengurangi variasi proses klinis dan meningkatkan kualitas pelayanan dengan tetap menjaga lama rawatan dalam batas minimal. Angka tindakan SC di RSBL tahun 2019 sebesar 79,53% dan tahun 2020 sebesar 85,79% dari total seluruh persalinan pertahunnya. Tindakan SC memenuhi kriteria *high volume* dan *high cost*, sehingga RSBL memberlakukan *Clinical Pathway* Seksio Sesarea pada tahun 2018. Sejak diberlakukan *Clinical Pathway* Seksio Sesarea menunjukkan hasil kepatuhan dibawah target yang ditentukan oleh KMKP (target >80%). Rata – rata nilai kepatuhan dari bulan Januari - Agustus 2020 yaitu 49,34%. Hasil evaluasi juga didapat adanya variasi dalam pemberian terapi dan pemeriksaan penunjang.

**Tujuan:** Untuk meningkatkan kepatuhan terhadap *Clinical Pathway* Seksio Sesarea di RSBL.

**Metode:** Metode penelitian *action research*, dengan melakukan FGD sebanyak 2 kali pertemuan. Pertemuan pertama untuk mengetahui hambatan dan pertemuan kedua untuk menentukan intervensi. Untuk menjaga kredibilitas penelitian melakukan triangulasi dengan membandingkan data kualitatif, kuantitatif dan observasi.

**Hasil dan pembahasan:** Ditemukan adanya hambatan pada faktor personal (pengetahuan dan sikap), faktor panduan (design kurang baik dan akses kurang jelas), dan faktor eksternal (organisasi, sumber daya serta kolaborasi). Untuk mengatasi hambatan dilakukan intervensi berupa revisi *Clinical Pathway*, pembuatan alur, sosialisasi dan pendekatan personal. Hasil kepatuhan terhadap *Clinical Pathway* Seksio Sesarea  $\geq 80\%$  yaitu 5 dari 8 pasien.

**Kesimpulan dan saran:** Dilakukan sosialisasi berkala, melakukan audit dan *feedback*, meningkatkan pengawasan terhadap pelaksanaan *Clinical Pathway* Seksio Sesarea dan melakukan penilaian dengan ICPAT.

**Kata Kunci:** *Clinical Pathway*, *Action Research*, Seksio Sesarea, Kepatuhan *Clinical Pathway*.

## ABSTRACT

**Background:** Clinical Pathway provides a hospital service approach by reducing variations in clinical processes and improving service quality while maintaining a minimum length of stay. SC rate at RSBL in 2019 was 79.53% and in 2020 was 85.79% of the total number of deliveries per year. SC meets the criteria for high volume and high cost, so RSBL applies the Clinical Pathway for Cesarean Section in 2018. Since the Clinical Pathway for Caesarean section was implemented, the results of compliance are below the target set by KMKP (target >80%). The average compliance value from January to August 2020 is 49.34%. The results of the evaluation also found that there were variations in the provision of therapy and supporting examinations.

**Objective:** To improve adherence to the Clinical Pathway Cesarean Section at RSBL.

**Method:** Action research method, by conducting 2 FGD meetings. The first meeting is to find out the obstacles and the second meeting is to determine the intervention. To maintain the credibility of the research, triangulation was carried out by comparing qualitative, quantitative and observational data.

**Result and discussion:** It was found that there were barriers to personal factors (knowledge and attitudes), guiding factors (poor design and unclear access), and external factors (organization, resources and collaboration). To overcome the obstacles, interventions were carried out revision the Clinical Pathway, making Clinical Pathway flow, socialization and personal approach. The results of adherence to the Clinical Pathway Cesarean section were above 80% namely 5 out of 8 patients.

**Conclusion and recommendation:** Periodic socialization, conducting audits and feedback, increasing supervision on the implementation of the C-section Clinical Pathway and conducting assessments with ICPAT.

**Key words:** Clinical Pathway, Action Research, Cesarean Section, adherence to Clinical Pathway.