

ANALYSIS BASIC EMERGENCY OBSTETRIC AND NEONATAL ON THE QA PROGRAM IN PONED PUBLIC HEALTH CENTER X BONDOWOSO REGENCY

Asti Nuris Mida Rahmawati^{1*}, Al Munawir² and Dewi Rokhmah³

¹Health Care Management, Magister of Public Health, University of Jember.

²Lecturer at Medical Faculty, University of Jember.

³Lecturer at Faculty of Public Health, University of Jember.

Received date: 04 February 2020

Revised date: 25 February 2020

Accepted date: 15 March 2020

*Corresponding author: Asti Nuris Mida Rahmawati

Health Care Management, Magister of Public Health, University of Jember.

ABSTRACT

Providing quality and satisfactory service to the patient is a claim that must be fulfilled by PONED Public Health Center as one of the government programs to reduce maternal and infant mortality. QA is a form of program to maintain the quality of a health center. The purpose of this research is to analyse the service of obstetric-basic emergency in the use of QA program. The research plan uses a qualitative approach with 4 informants comprising key informant, primary, and additional interviews. The results showed that QA's input variables have not been fulfilled and support the implementation of PONED. Service process variables have not been implemented according to guideline. Performance access output variables not optimal.

KEYWORDS: PONED, QA, quality.

1.0 INTRODUCTION

The quality of Basic Neonatal Obstetric Emergency Services (PONED) is one of the factors that can support and determine the degree of public health.^[1] The success of service is determined by the consistency of service quality provided and implemented by competent healthcare personnel.

PONED Public Health Center is required to provide quality service so that patients are expected to be satisfied with the services provided both in terms of infrastructure and officers. Quality services provided can reduce the expected can reduce maternal and infant mortality rates.^[2]

The death rate of mother in East Java in 2018 reached 91.45%^[3] while in Bondowoso district in 2018 there were 19 maternal deaths.^[4] PONED Public Health Center is an inpatient Public Health Center who is able to deliver and administer the service of obstetrics and neonatal level.^[5]

The handling of complications and emergency that can be handled in PONED Public Health Center will be one of the goals of the implementation of the service of poned determined by by inputs where the service system is going well if supported by adequate input.^[6]

QA in healthcare can be seen and assessed in terms of inputs, processes, and outputs. QA in terms of input is a necessary operational needs in support of services consisting of facilities and infrastructure, resources that support the expertise. QA in terms of process is a implementation of services provided adapted to the existing piracy. While QA in terms of output is the completeness of the officer in filling the medical record and satisfaction of patients who are perceived from the service that has been given by the health worker.

This study was conducted at Public Health Center X because in the last two years contributed to the most Maternal Death Rate are 4 people in Bondowoso district so that researchers are interested to do study related to his QA is already in accordance with the standards. This research is conducted with the aim of analyzing the service of obstetrics and neonatal basic emergency using QA approach.

2.0 MATERIALS AND METHODS

This study is a qualitative study with a descriptive approach. Collection of data through an indept interview or in-depth interviews and observations. The research was conducted in June 2019. The technique of determination of informant using purposive sampling. The main informant consists of 1 person namely the

Coordinator of Poned (midwives), the key informant 1 person is the head of health care, and additional informant 2 persons (patients).

3.0 RESULT AND DISCUSSION

3.1 Characteristics of the Informant

The main informant (MI) amounted to 1 person, female gender, and last education Diploma 4 obstetrics. The key informant (KI) is 1 person, male gender, the last education magister of health management. Additional informant (AI) are 2 person, female gender, the last education is high school.

3.2 Analysis results of indepth interviews and observations

1. QA based on input variables

a. Facilities and infrastructure

Facilities and infrastructures in Poned Public Health Center X not yet conform to the standard implementation guidelines Poned and incomplete. Based on the observation that there are some standard rooms that do not exist, special treatment room obstetrics case, special action room maternal and neonatal emergency, post-natal recovery room.

Based on the interview conducted with the main informant of which so far there is only VK maternity room. For the emergency action is done in the VK room likewise at the time of recovery after childbirth remains brada in the VK room. It is in accordance with the informant statement in the quotation:

"So far it's VK space maternity so multifunctional, from childbirth until the observation postpartum still in VK" (MI, 49 y.o.)

So if the patient is a lot then lack of room and it becomes a constraint for Public Health Center in providing services and it causes the patient to feel dissatisfied with the condition of limited means. It was conveyed by the informant in the quotation:

"The only way to fit the patient is a lot of it confused the room so coordination with the emergency room if possible to borrow the room is even sometimes rejected and advised to go to next Public Health Center" (MI, 49 y.o.).

"The room is too narrow so stuffy and less comfortable" (AI 1, 25 y.o.)

Likewise for cases of obstetrics that are hospitalized during this time so one with hospitalization patients general nursing because there is no special room for hospitalization cases. So during this time Public Health Center X make use of the existing room. It was conveyed by the informant in the quotation:

"If the room is not complete and did not conform to the standard but so far try to conditioned well the room there" (KI, 51 y.o.)

Adequate facilities and infrastructures become one of the important factors in supporting services. Complete facilities can also provide satisfaction for patients and families who are visiting and who are getting the service.^[7] A Public Health Center X how to provide quality services while facilities and infrastructures do not support and inadequate. Equipment and also medicines in Poned Public Health Center X not yet complete. There are some tools that have been damaged and not worth wearing so that Poned Public Health Center X should conduct planning on procurement of goods, tools, and medicines to support the quality service. Equipment and medicines are also important factors in providing quality services so that patients get the right service and action according to guideline.^[8]

b. Human Resources

Poned Public Health Center in providing services should be supported by adequate resources, according to qualifications and competency standards.^[6]

The minimum education of healthcare personnel involved in the implementation of Poned is Diploma 3 health for midwives and nurses. As for doctors minimum bachelor degree.^[5]

The core team at Public Health Center X consists of the head of Public Health Center in charge, 1 general practitioner, 2 midwives, and 1 nurse who has obtained SK (Decision Letter) from the head of Bondowoso District Health Office. As for the support team consists of 19 midwives who get the SK (Decision Letter) from head of health care which is also scheduled alternately with 3 shifts per day.

The availability of the amount of energy is sufficient and in accordance with the qualification that the midwives and nurses have been at least Diploma 3 obstetrics and nursing and for general practitioner who entered the Poned team has also fulfilled the qualification standard of bachelor degree medicine. It was given the informant in the quotation:

"If the education has qualified all the doctors, midwives, and nurses. All also have a complete STR and SIP" (MI, 49 y.o.)

Based on the results of the interview with the informant there are several obstacles although the number and qualifications meet the standard that is for doctors who enter the team Poned not guard 24 hours in Public Health Center but there is only when the morning shift guard For its readiness is still less and not fast if at any time there are emergency patients who require the treatment and/or consultation of the doctor is delivered the informant in the quotation:

"We have 3 shifts but the doctor standby only morning shift, the more via telephone. And so far the role of midwives a lot, but 1 team there are doctors and nurses also" (IU, 49 years)

Health workers who meet the qualifications and competency standards are indicated by the registration letter and the practice permit letter so that it has high legality in providing services.^[10]

A quality health care service is also supported by competent healthcare professionals who are supposed to be ready 24 hours both doctors, midwives, and nurses. During this time that has a lot of role in the service of Poned is a midwife so Poned Public Health Center X need to socialize the task description of each of the health staff that join in the Poned team.

2. QA based on process variables

The process based QA is an implementation in obstetric and neonatal emergency services implemented according to existing piracy. Based on the observation that the action taken by the health worker there are some who have not yet conform to the existing piracy.^[9]

At the time of study there are cases of maternity mothers with HPP (hemorrhage) so that should be done the right and left infusion to replace the blood that comes out a lot so it is needed to abocath 18 size but it abocath with the size of 18 empty so from the unavailability of the apparatus is already not in accordance with the supposed piracy and it can harm the patient so that the death of the mother is feared because it is not well-helped.

Planning is done for the medicines and equipment so that the cases of the above are not repeated in the day. It is also necessary to evaluate the personnel skills in order to be more obedient in carrying out actions according to the existing piracy. It is according to the informant quote:

"The error we do not take into account the needs of drugs and tools every year correctly so that is out of stock" (MI, 49 y.o.)

The actions taken as a piracy will reduce the number of pain and death for mothers and infants and give satisfaction to pasien.^[11] It was given the informant in the quotation:

"Yes it is important if my baby is born healthy and safe, the staff act patiently so satisfied me" (AI 2, 30y.o.)

3. QA based on output variables

QA based on variable output is seen from the performance of the unoptimal Poned. Based on the observation results that for performance achievement is still low. The scope of the patients referred from the working area only reaches 65%, the coverage of patients who can be addressed in Poned Public Health Center X to 85%, the coverage of patients referred to hospital

reached 70%, the coverage of childbirth helped by shamans in 2018 is high enough of 56 childbirth which was helped by 10 of the shamans. This indicates that the performance of Poned has not been fully optimal. So it is necessary to be evaluated gradually and carried out coaching against shamans and raising public awareness.

4.0 CONCLUSION AND RECOMMENDATION

Overall that the implementation of QA in Poned Public Health Center X has not been optimally running and there are still some shortcomings to be repaired are:

1. QA inputs variables have not fully fulfilled the standards of Poned service implementation.
2. QA process variables have not fully performed the appropriate piracy action.
3. QA output variables of Poned performance is not optimal.

ACKNOWLEDGEMENT

Our sincerest appreciation is dedicated to all the informant who has been willing to become a respondent. We would also like to show our gratitude to Poned Public Health Center X who have been pleased to give permission to the implementation of this study.

REFERENCES

1. Departemen Kesehatan RI. Peraturan Presiden RI Nomor 72 tahun 2012 tentang Sistem Kesehatan Nasional, Jakarta; Departemen Kesehatan Republik Indonesia, 2012.
2. Trihono. Arrimes Manajemen Kesehatan Puskesmas Berbasis Paradigma Sehat, Jakarta; Sagung Seto, 2006.
3. Kementrian Kesehatan RI. Profil Kesehatan Indonesia, Jakarta; Badan Penerbit Kemenkes RI, 2018.
4. Dinas Kesehatan Kabupaten Bondowoso. Profil Dinas Kesehatan Bondowoso, Bondowoso; Badan Penerbit Dinas Kesehatan Bondowoso, 2018.
5. Kementrian Kesehatan RI. Pedoman Penyelenggaraan Puskesmas Mampu Poned, Jakarta; Badan Penerbit Kemenkes R, 2013.
6. Valentine, Suparwati, A., & Suryoputro, A. Analisis Pelaksanaan Sistem Pelayanan Obstetri Neonatal Emergensi Dasar (Poned) di Puskesmas Sitanggal Kabupaten Brebes. Jurnal Kesehatan Masyarakat, 2016; 4(4): 154-161.
7. Walyani. Asuhan Kebidanan Kegawatdaruratan Maternal Neonatal, Yogyakarta; Pustaka Baru Press, 2015.
8. Rachmawati, T & Suprpto, A. Inovasi Implementasi Puskesmas Poned dalam Upaya Akselerasi Penurunan Angka Kematian Ibu dan Bayi di 3 (Tiga) Kabupaten di Jawa Timur. Buletin Penelitian Sistem Kesehatan, 2010; 13(02): 8-15.
9. Sukma, S., Sudiro, S., & Fatmasari, E. Analisis perencanaan *Quality Assurance* ditinjau dari aspek input pelayanan keperawatan rawat inap pasca areditasi paripurna RS Swasta X Kota Semarang.

- Jurnal Kesehatan Masyarakat, 2017; 5(4): 1-10.
10. Peraturan Menteri Kesehatan Nomor 75 tahun 2014. Pusat Kesehatan Masyarakat, Jakarta; Kemenkes RI, 2014.
 11. Al Jebore,H., Khaleel,M., & Hussein,K. Quality assurance of Essential Primary Health Care Service at Primary Health Care Centers in Al-Najaf Al-Ashraf Goveporate. Journal of Global Pharma Techinology, 2018; 10(03): 900-907.