

Peningkatan Mutu Pelayanan PIK RSCM Melalui Analisis Integrasi SWOT dan FMEA Tahun 2018

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Abstrak

Latar Belakang: Pusat implan koklea (IK) merupakan salah satu pelayanan unggulan Rumah Sakit Umum Pusat Nasional Dr. Cipto Mangunkusumo (RSCM). Pelayanan implan koklea ini dapat dibagi menjadi 3 tahap, yaitu tahap preoperasi, tahap operasi, dan tahap postoperasi (habilitasi). Sebagai pusat IK, pelayanan tersebut belum berjalan secara maksimal serta belum memiliki tahap postoperasi yang lengkap berupa audio verbal therapy (AVT). Penelitian ini bertujuan untuk menganalisis model kegagalan yang ada sehingga mengganggu mutu pelayanan implan koklea di RSCM dan memberikan rekomendasi terbaik agar pelayanan implantasi koklea di RSCM dapat menjadi yang terbaik dan paripurna.

Metode Penelitian: Penelitian ini dilakukan secara kualitatif dengan metode pengumpulan data melalui rekam medis, observasi, dan wawancara mendalam serta focus group discussion. Penelusuran rekam medis dari pasien yang pernah menjalani implan koklea di RSCM dalam periode 3 tahun pada 2015-2017 memberikan gambaran mengenai karakteristik pasien, diagnosis, hasil pemeriksaan preoperasi, dan data operasi pasien. Selain itu, dilakukan pula observasi nonpartisipatif untuk melihat proses layanan implantasi koklea selama 3 bulan. Wawancara mendalam dan focus group discussion dilakukan untuk mencari dan mengkonfirmasi faktor kegagalan beserta masukan untuk mengatasinya. Failure Mode and Effect Analysis (FMEA) yang diintegrasikan dengan analisis SWOT (Strength, Weakness, Opportunity, and Threat) dapat memberikan corrective action terbaik bagi pelayanan IK di RSCM.

Hasil Penelitian: Dari penelitian ini, didapatkan bahwa sebagian besar pasien IK di RSCM berusia 1-3 tahun dan mayoritas berasal dari luar Jabodetabek. Durasi pemeriksaan konsultasi praoperasi terlama ditemukan di bagian ilmu kesehatan Anak RSCM. Focus group discussion menggunakan FMEA menemukan beberapa masalah dalam proses pelayanan IK dan merumuskan corrective action berupa pengadaan pelayanan AVT, pembuatan buku komunikasi untuk pasien, dan pengadaan case manager. Dari corrective action yang ada, telah dihitung preference score menggunakan koefisien korelasi dengan SWOT, dan didapatkan corrective action dengan nilai tertinggi adalah mengadakan pelayanan AVT di RSCM.

Kesimpulan: Alternatif corrective action yang terpilih untuk meningkatkan mutu pelayanan IK di RSCM agar menjadi paripurna adalah menyediakan pelayanan AVT di RSCM.

Kata kunci: Failure Mode and Effect Analysis, FMEA, SWOT, pelayanan implan koklea, AVT

Background: As a national referral hospital, Cipto Mangunkusumo National Center General Hospital (RSCM) provides several excellent services, one of which is cochlear implantation center. The cochlear implant service in RSCM is a complete implant cochlear service that performs integrated cochlear implant services in one hospital. The cochlear implant services were divided into three stages, pre-operative stage, operative stage, and post-operative stage (habilitation). However, this program had not run optimally due to the absence of habilitation process such as audio verbal therapy (AVT). This study aimed to analyze the failure mode that might affect the quality of the cochlear implant services in RSCM and to give the best recommendation to create the best and holistic cochlear implant services.

Methods: This research was a qualitative study using data from the

medical records, observation, and in-depth interview as well as focus group discussion. Medical records searching was done in 3 consecutive years from 2015 until 2017 to provide data regarding the characteristic of patients, diagnosis, the pre-surgical examination results, and the surgery. Additionally, non-participative observation was performed to discern the process of cochlear implantation services. In-depth interview and focus group discussion was done to identify and confirm the failure mode also inputs to overcome the situation. Failure Mode and Effect Analysis (FMEA) integrated with Strength, Weakness, Opportunity and Threat (SWOT) proposed the best corrective actions to improve the quality of cochlear implant services in RSCM.

Results: This study showed that most patients underwent cochlear implant surgery in RSCM were aged 1-3 years old and the large proportion of patients were from out of Jakarta and its surrounding area. The longest duration of pre-surgical examination was in the Department of Pediatric Health RSCM. Focus group discussion using FMEA had identified some problems during the process of cochlear implant services and had determined three corrective actions, which were to establish AVT in RSCM, to create a liaison book, and to provide a case manager. From these corrective actions, we counted the preference score using correlation coefficient and SWOT and we found that the corrective action with the highest score were to establish AVT in RSCM.

Conclusion: The chosen corrective action for quality improvement in Cochlear Implant Center RSCM was to conduct AVT in RSCM.

Keywords: Failure mode and effect analysis, FMEA, SWOT, cochlear implant center