

## EVALUASI IMPLEMENTASI *SURGICAL SAFETY CHECKLIST* (SSC) DI IBS RSUD PANEMBAHAN SENOPATI

### INTISARI

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**Latar Belakang :** *World Health Organization* (WHO) memperkirakan sekitar 234 juta operasi dilakukan setiap tahun di seluruh dunia. pencegahan terhadap Kejadian Tidak Diharapkan (KTD) di kamar bedah merupakan bagian penting dalam peningkatan mutu dalam tindakan pembedahan. Berdasarkan peraturan PERMENKES Nomor 1691 Tahun 2011 tentang keselamatan pasien, Komite Akreditasi Rumah Sakit (KARS) menuntut pelaksanaan SSC di kamar operasi harus 100%. SSC WHO diterapkan di bagian bedah untuk meningkatkan kualitas dan menurunkan kematian dan komplikasi akibat pembedahan

**Tujuan Penelitian :** Mengenalisis implementasi SSC pada proses *sign in, time out*, dan *sign out* di IBS RSUD Panembahan Senopati.

**Metode Penelitian :** Penelitian ini merupakan penelitian analisis deskriptif dengan pendekatan kuantitatif dengan desain *cross sectional*. Penelitian ini telah dilaksanakan pada bulan Januari 2018 Populasi studi penelitian ini adalah pasien yang menjalani bedah umum IBS RSUD Panembahan Senopati. Sampel penelitian yang diambil adalah 86 orang. Analisis data yang digunakan adalah analisis deskriptif persentase.

**Hasil Penelitian :** Implementasi SSC pada proses *sign in* telah terlaksana optimal sesuai SOP, kecuali pelaksanaan pada jenis observasi alergi, pemeriksaan kesulitan bernafas (16,28%), dan pemeriksaan risiko kehilangan darah >500 ml sebanyak (6,98%). Implementasi SSC pada proses *time out* telah terlaksana dengan baik (100%), kecuali jenis observasi pengecekan alat-alat khusus (98,8%), dan pelaksanaan foto rontgen/CT scan dan MRI (14%). Implementasi SSC pada proses *sign out* semua telah dilaksanakan 100%, kecuali pada indikator konfirmasi label pada spesimen (81,4%).

**Kesimpulan :** Diperlukan evaluasi penerapan SSC secara berkala dan berkelanjutan untuk memastikan terselenggaranya keselamatan pasien secara maksimal.

**Kata Kunci :** *implementasi, surgical safety checklist, sign in, time out, sign out*

***Evaluation of the Implementation of Surgical Safety Checklist (SSC) in Central Surgery Installation of Panembahan Senopati Regional General Hospital***

**ABSTRACT**

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**Background :** *The World Health Organization (WHO) estimated that about 234 million operations were performed annually worldwide. Prevention against the incidence of adverse events in the surgical room was an important part in improving quality in surgery. Surgical safety checklist from WHO was applied in the surgical section to improve quality and reduce the death and complication of surgery.*

**Objective :** *To identify the implementation surgical safety checklist which contains sign in, time out, and sign out in Central Surgery Installation of Panembahan Senopati Regional General Hospital.*

**Method :** *This research was descriptive analysis research with quantitative approach with cross sectional design. This study was conducted in January 2018. The population of this were patients operated in Central Surgery Installation of Panembahan Senopati Regional General Hospital. Samples were taken 86 people. Data analysis used descriptive analysis percentage.*

**Result :** *The implementation of SSC in sign in process had been performed optimally according to SOP, except the implementation of allergic observation type (15,12%), difficulty breathing examination (16,28%), and risk factors for blood loss > 500 ml (6,98%). Implementation of SSC in time out process had been performed optimally according to SOP, except the type of observation checking specialtools (98,8%), and the implementation of X-ray / CT scan and MRI (14%). The implementation of SSC in sign out process all had been implemented optimally according to SOP, except on label confirmation indicator on specimen (81,4%).*

**Conclusion :** *A periodically and continuously evaluation of the SSC implementation was needed to ensure maximum patient surgical safety.*

**Kata Kunci :** *Implementation, surgical safety checklist, sign in, time out, sign out*