

KESEHATAN DAERAH MILITER III / SILIWANGI
RUMAH SAKIT TK. II 03.05.01 DUSTIRA



GRAFIK PENCAPAIAN INDIKATOR MUTU RUMKIT TK. II DUSTIRA TRIWULAN II TAHUN 2019

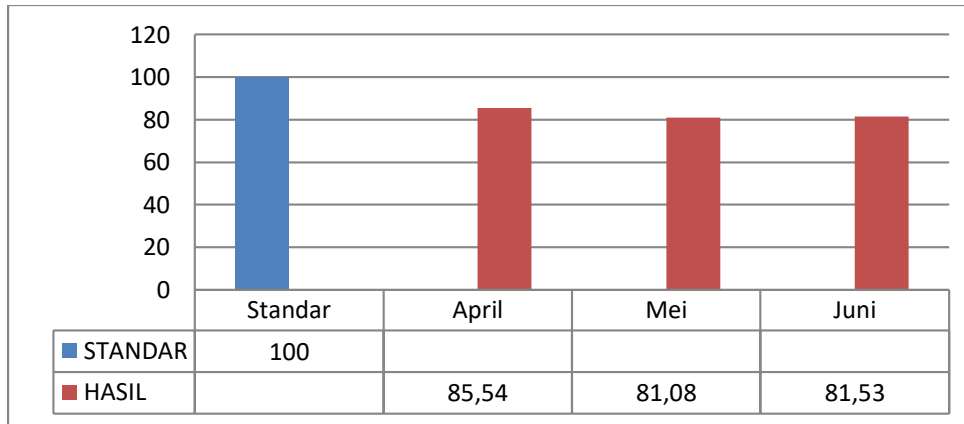
Jl. Dr. Dustira No.1 Cimahi

Telp. 6652207 Faks. 6652170 email : rsdustira@yahoo.com

INDIKATOR MUTU AREA PRIORITAS

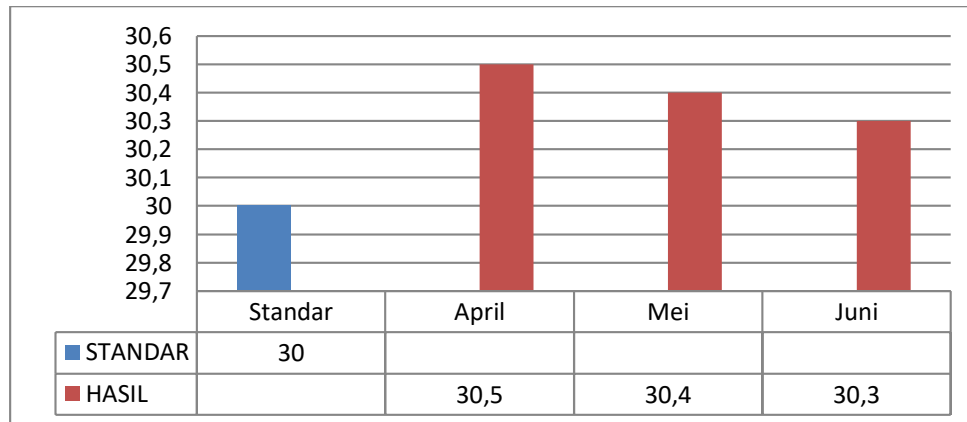
I. INDIKATOR MUTU AREA PRIORITAS

1. Assesment awal medis 24 jam setelah pasien masuk ruang Cakrabuana Rumah Sakit Tk. II Dustira

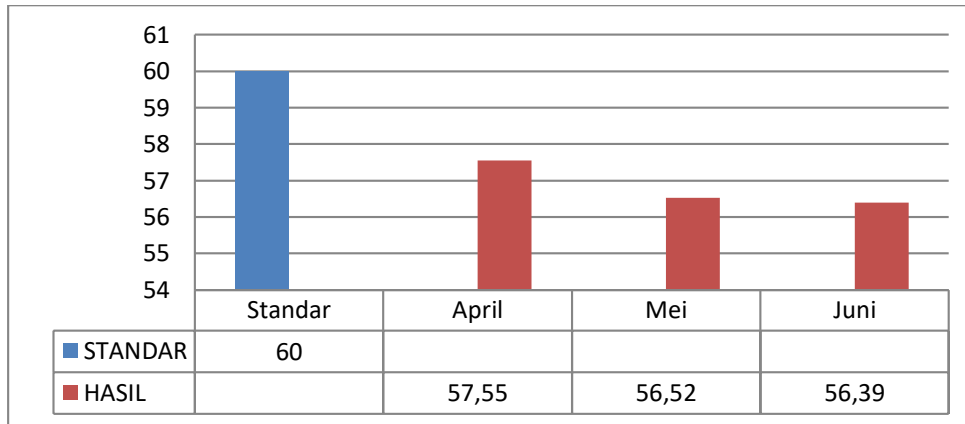


2. Farmasi

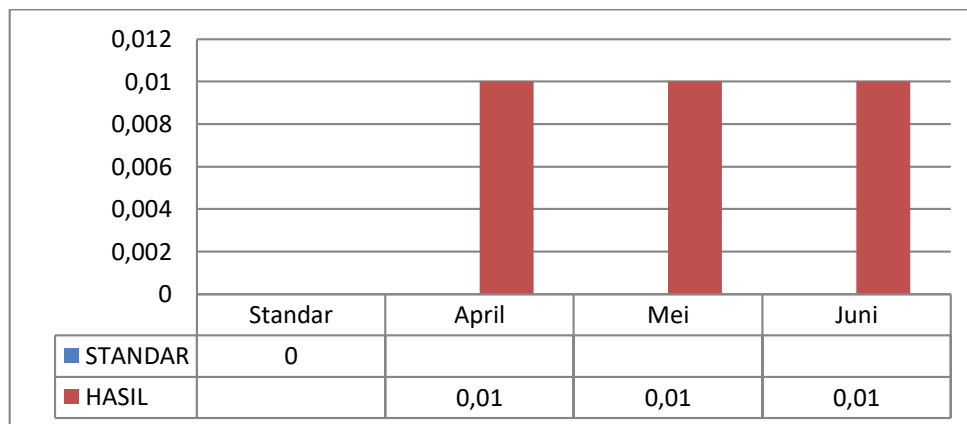
a. Waktu tunggu pelayanan Farmasi obat jadi



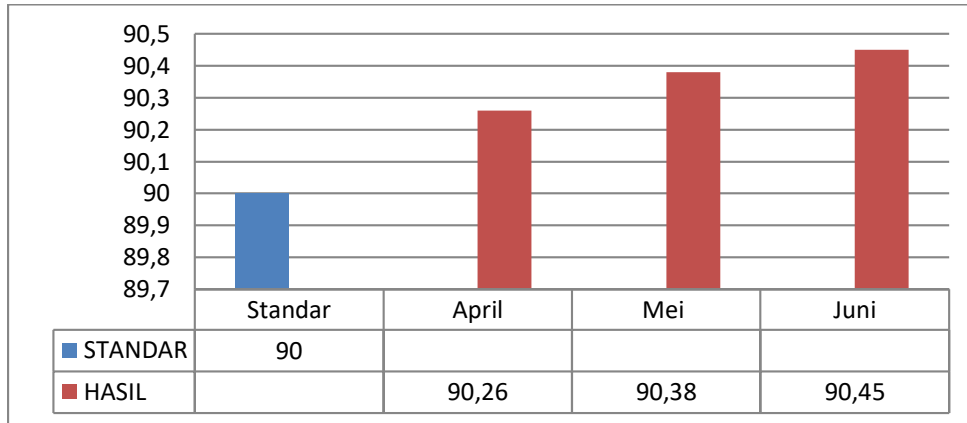
b. Waktu tunggu pelayanan Farmasi obat Racik



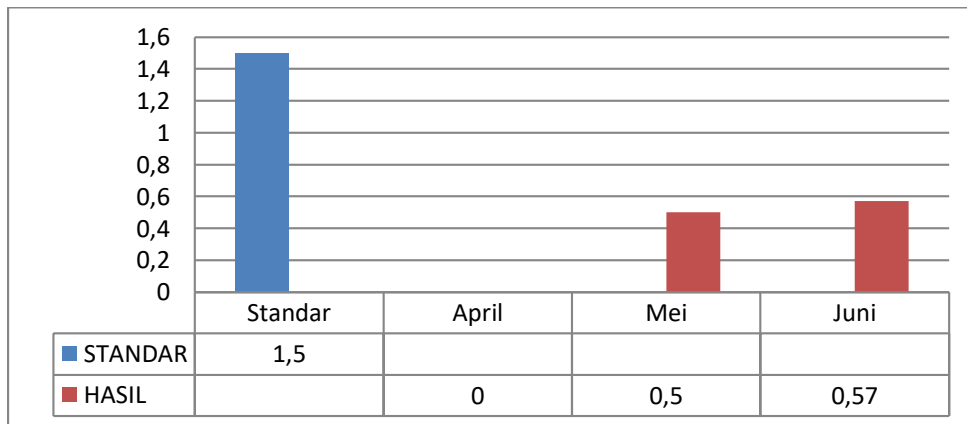
c. Tidak adanya kesalahan dispensing obat



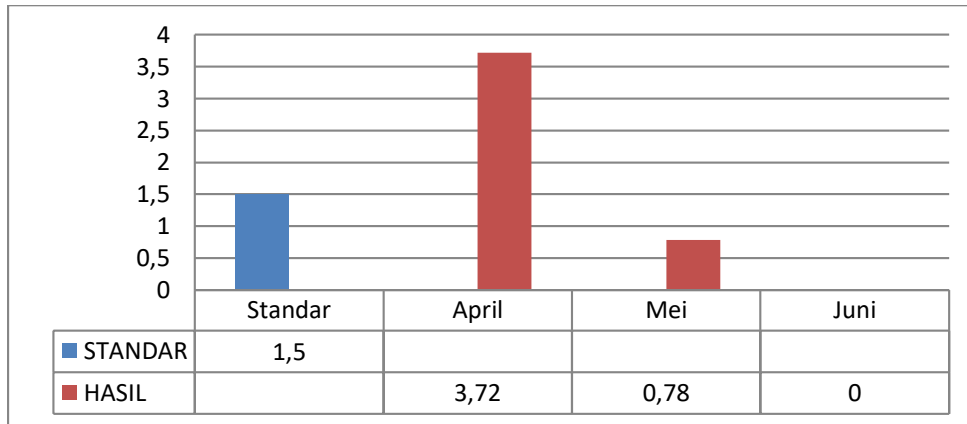
3. Waktu tunggu hasil pelayanan Laboratorium patologi klinik , pemeriksaan darah lengkap dan kimia klinik



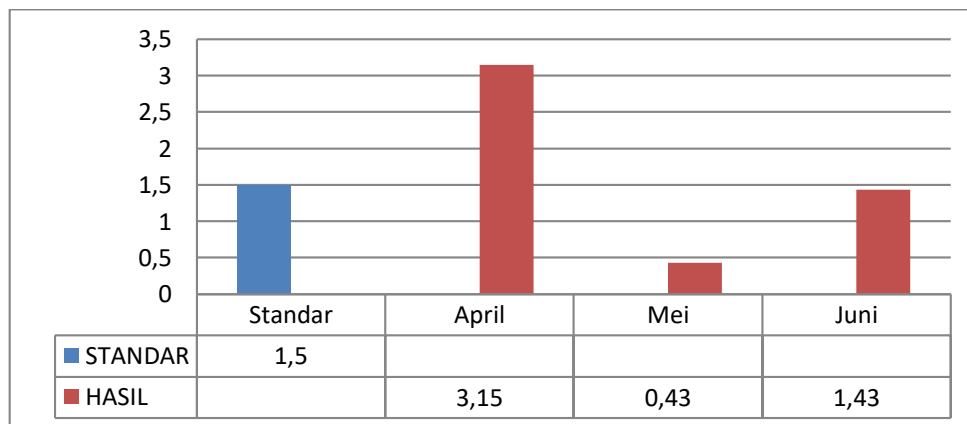
4. Pencegahan, pengendalian dan pengawasan serta pelaporan infeksi nosokomial :
a. Dekubitus



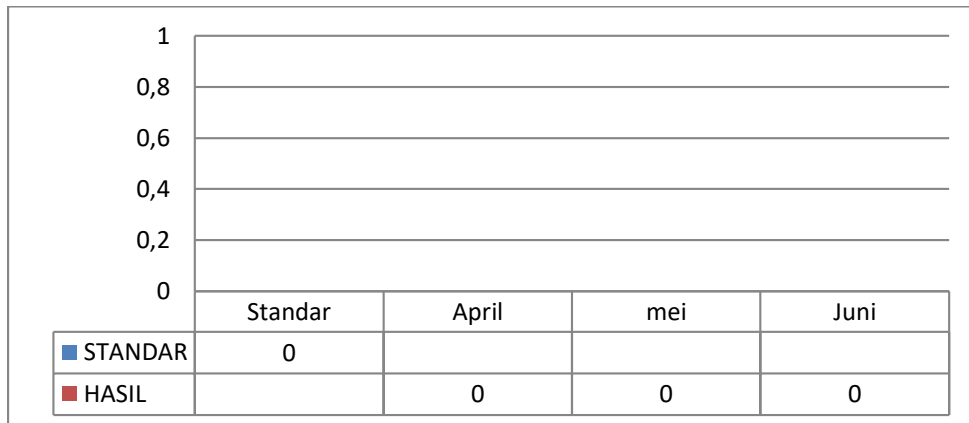
b. ISK



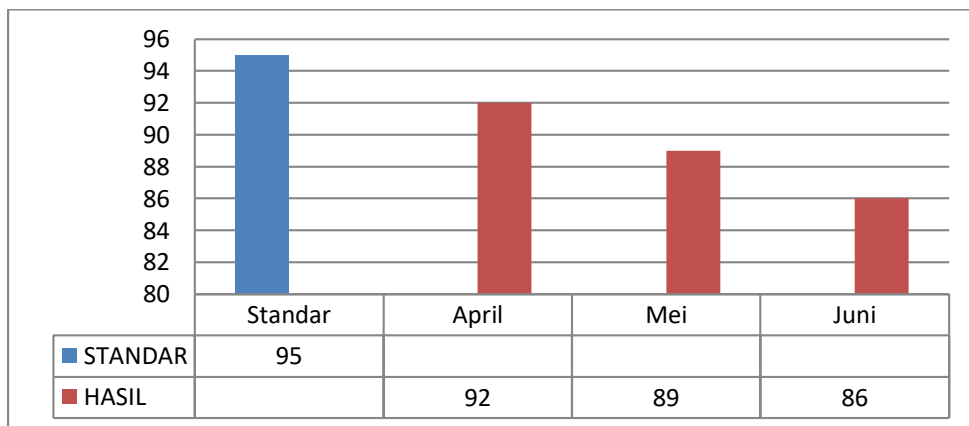
c. Phlebitis



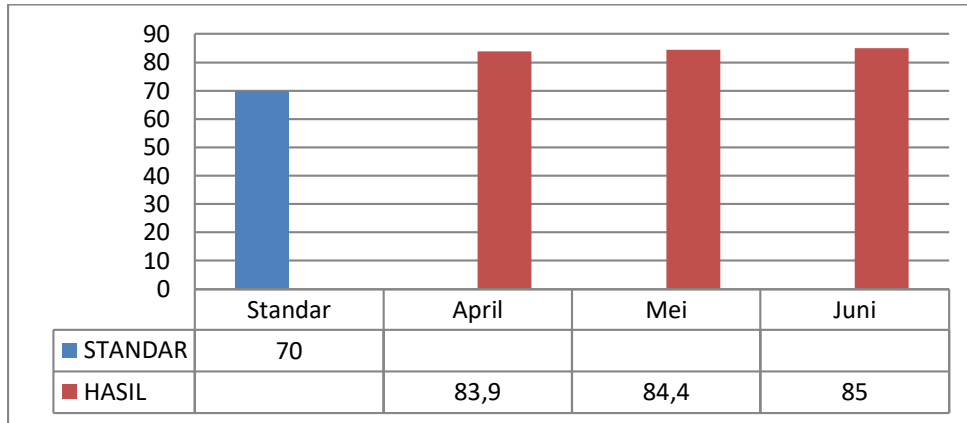
5. Pengurangan risiko jatuh pada pasien stroke : insiden pasien jatuh selama perawatan rawat inap



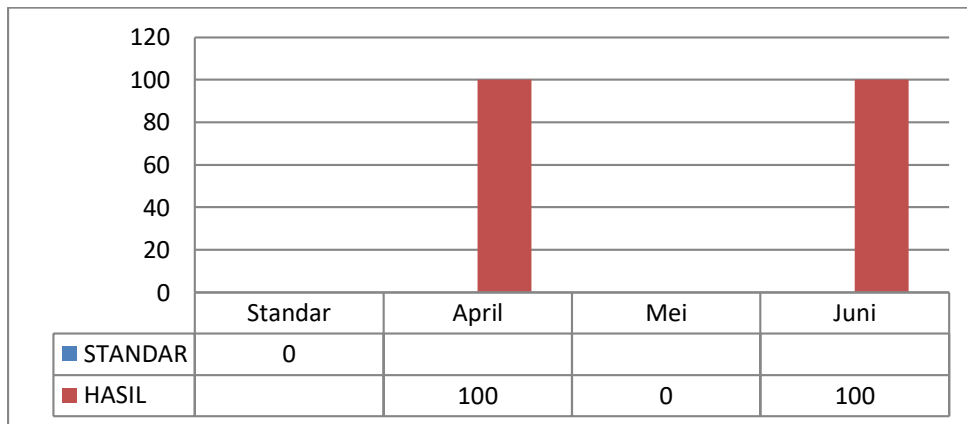
6. KLPCM (kelengkapan penulisan catatan medis)



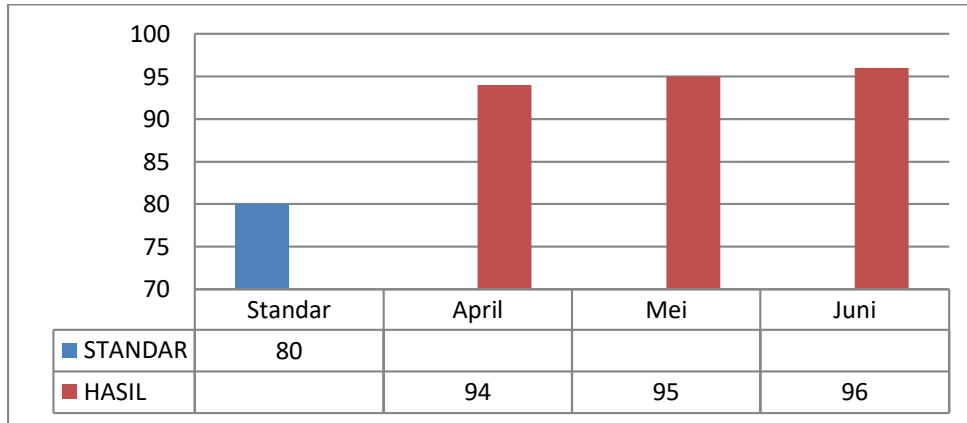
7. Angka edukasi pada pasien stroke pada pasien rawat inap



8. Kelengkapan pengisian borang etik penelitian non intervensi klinis



9. Kepatuhan penerapan clinical pathway pasien stroke infark rawat inap di ruang Cakrabuana

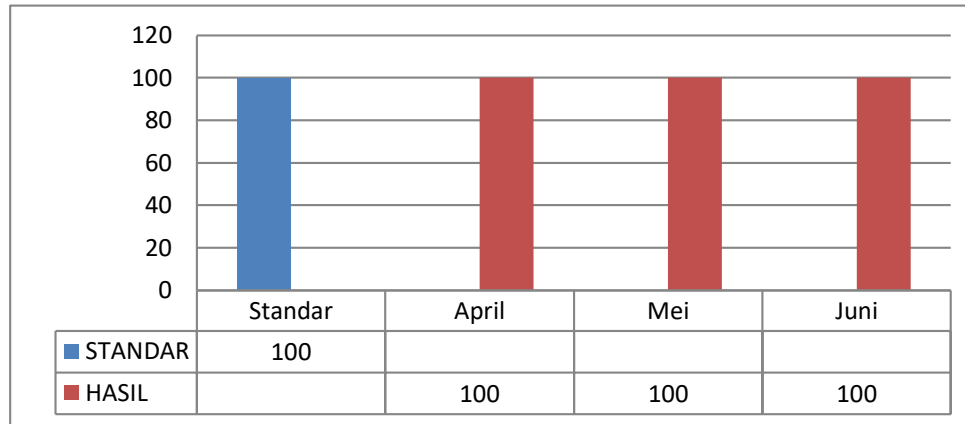


INDIKATOR MUTU UNIT KERJA

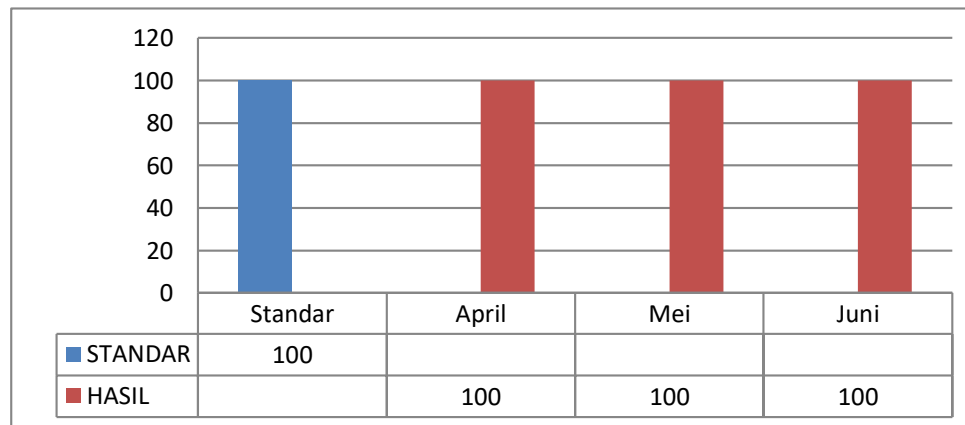
II. INDIKATOR MUTU UNIT KERJA

1. INSTALASI KAMAR BEDAH

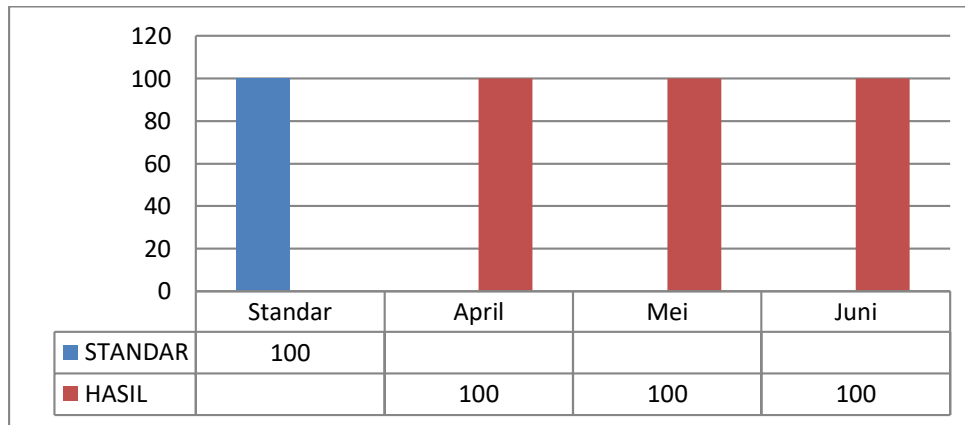
a. Monitoring evaluasi assesment praanestesi



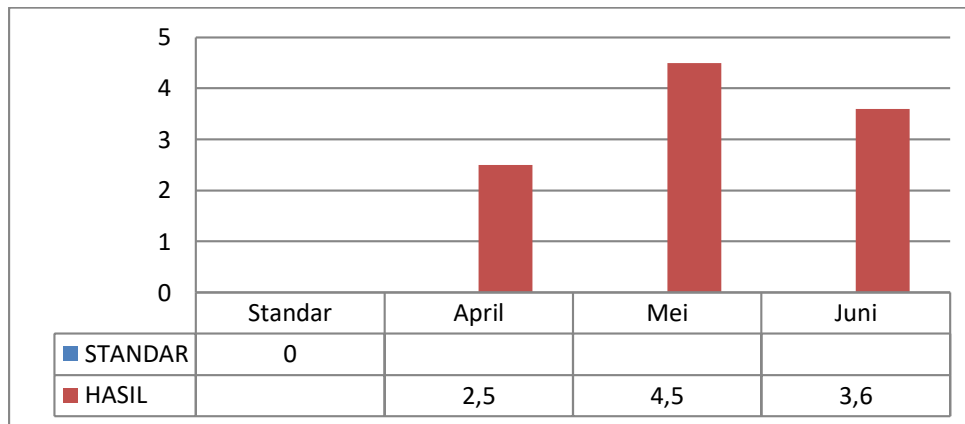
b. Monitoring status fisiologis selama anestesi



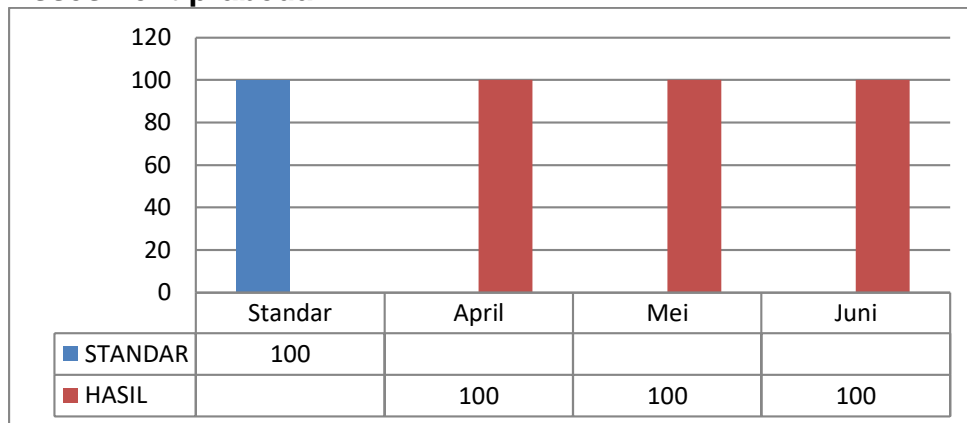
c. Monitoring evaluasi proses pemulihan anestesi



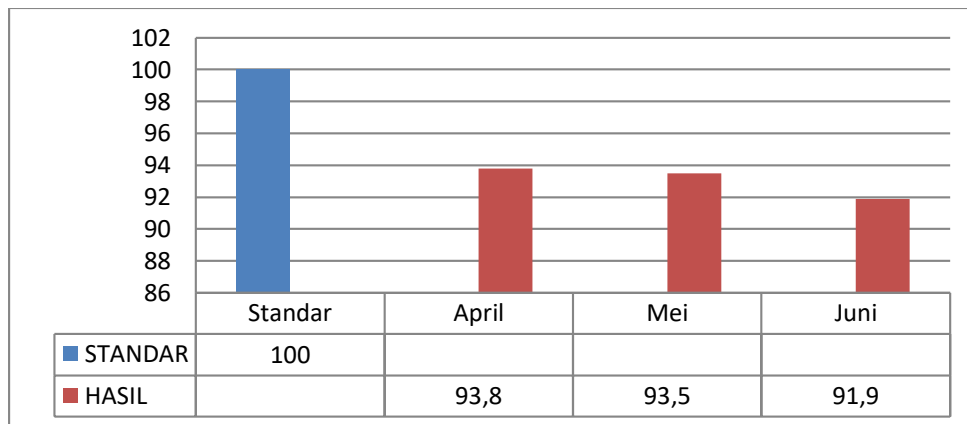
d. Monitoring evaluasi konversi regional ke general



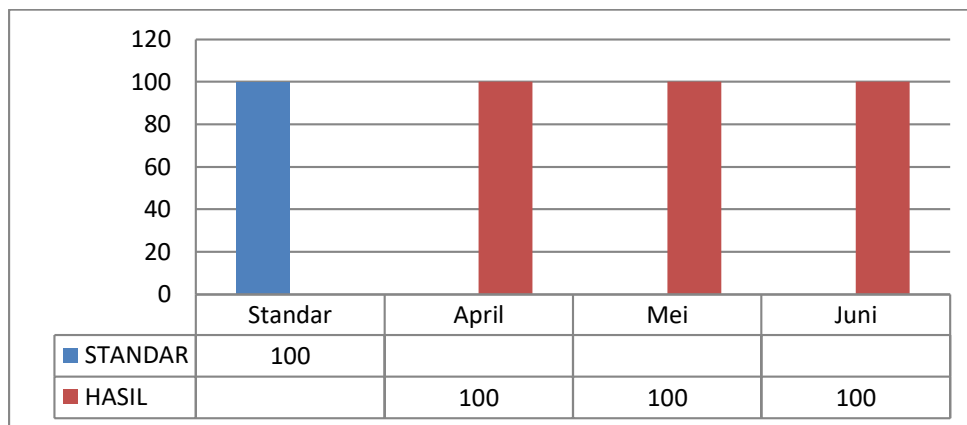
e. Assesment prabedah



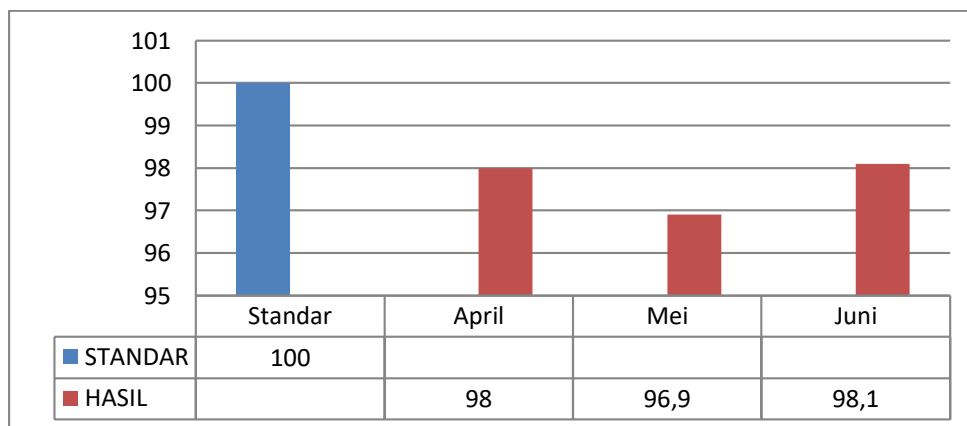
f. Penandaan daerah operasi



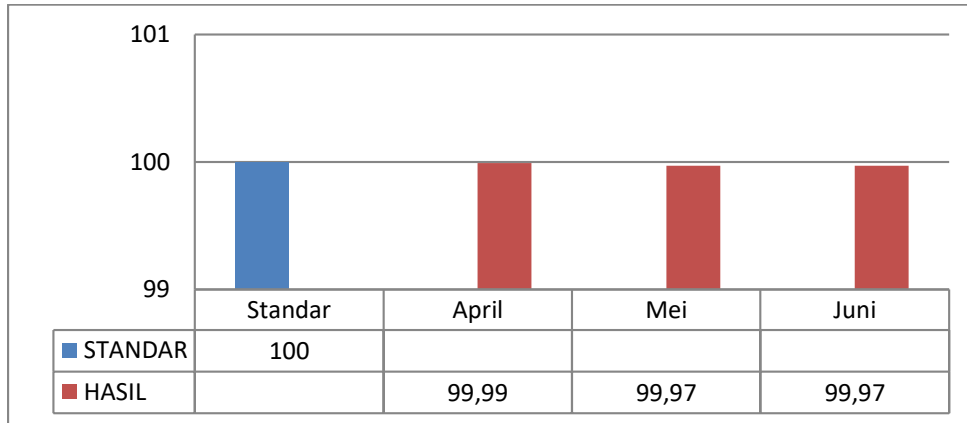
g. Surgical safety check list



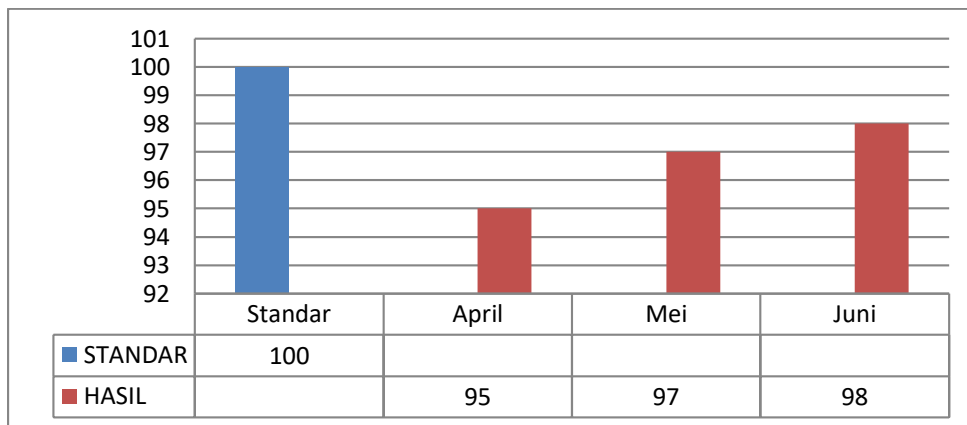
h. Diskrepansi pre dan post operasi



2. LAUNDRY

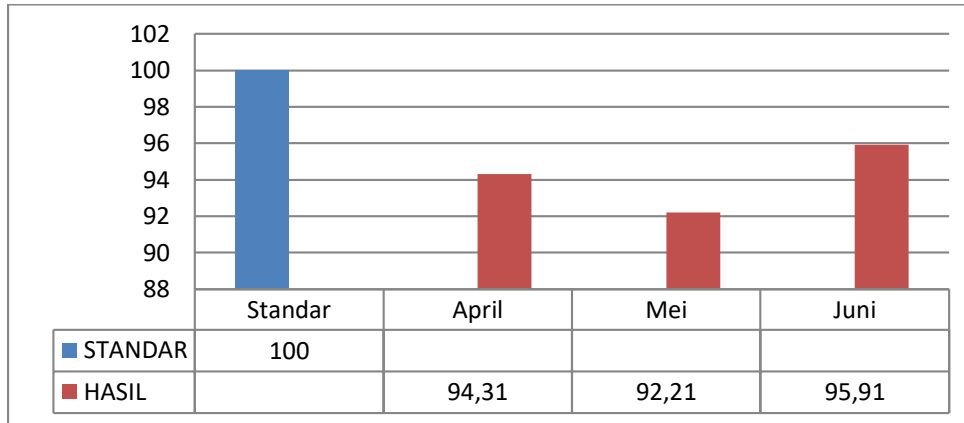


3. ANGKUTAN

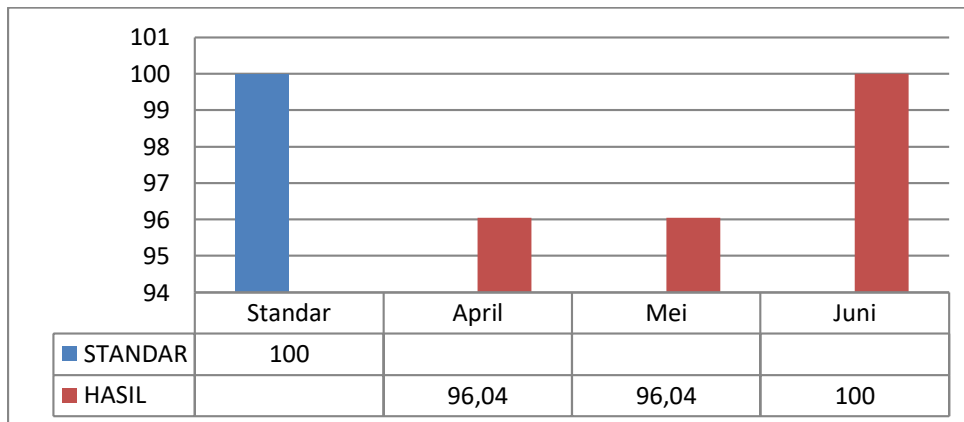


4. INSTALASI RAWAT JALAN

a. Kepuasan Pasien Rawat Jalan

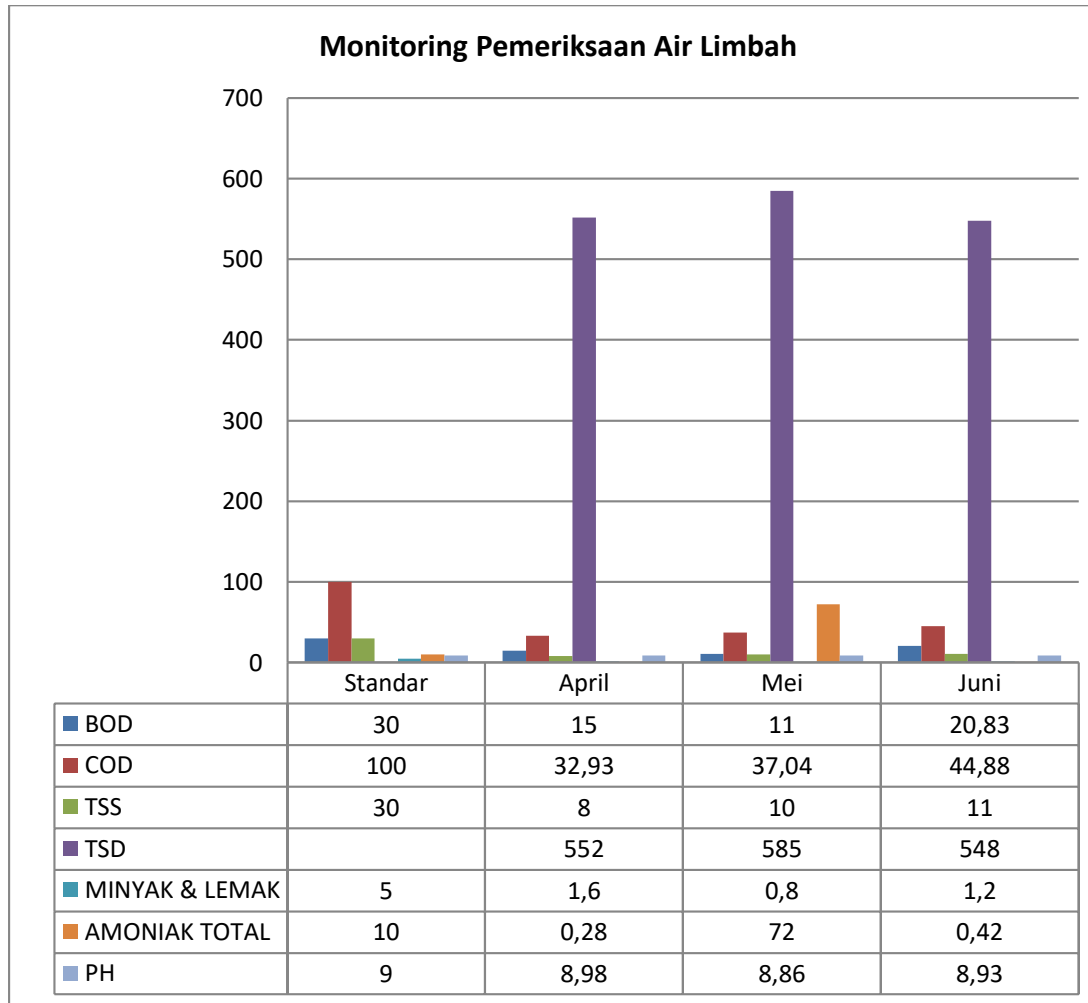


b. Kepatuhan petugas RS dalam melakukan identifikasi



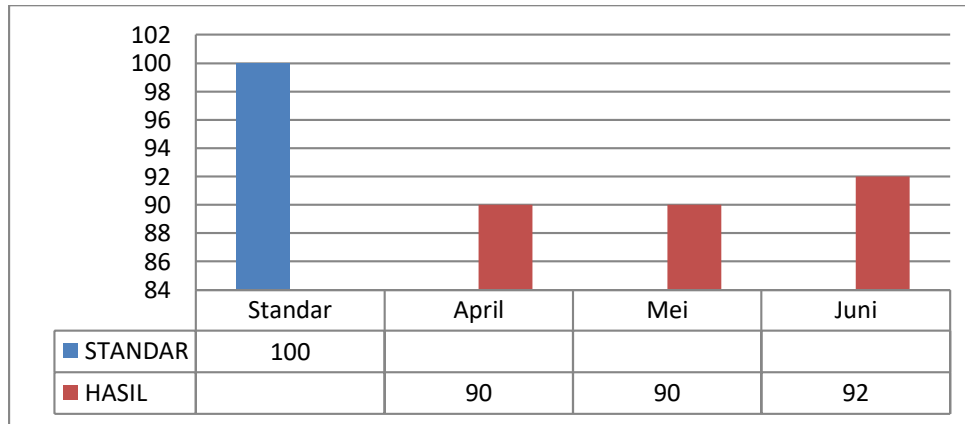
5. K3RS

a. Monitoring pemeriksaan Limbah



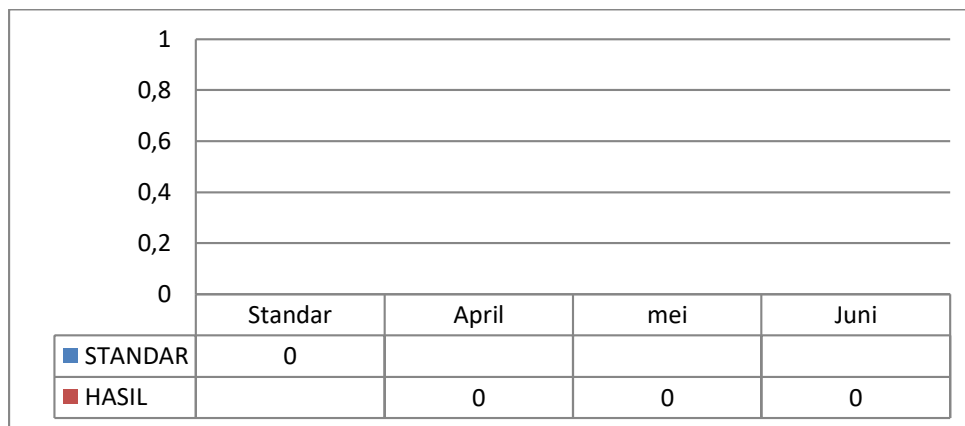
6. CSSD

a. Respon time pelayanan CSSD dalam pelayanan sterilisasi dan disinfeksi (≤ 24 jam)



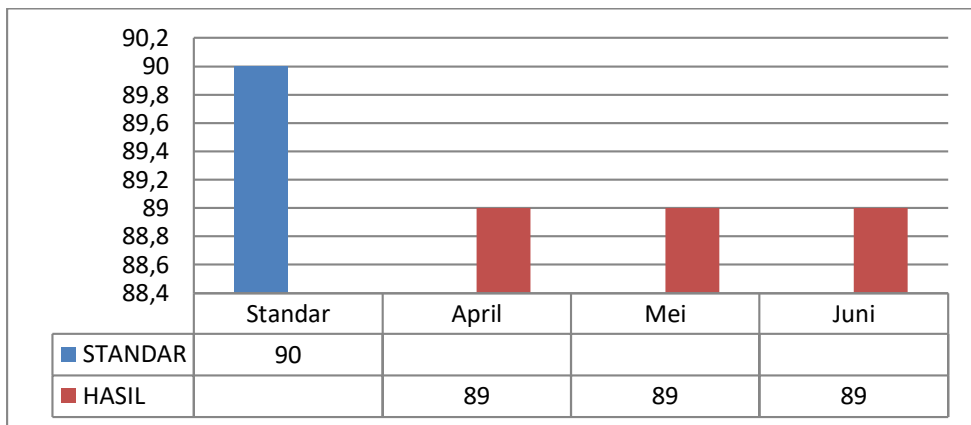
7. INSTALASI REHAB MEDIK

a. Prosentase Insiden KTD pada pasien karena terpapar alat fisioterapi di Instal Rehab Medik

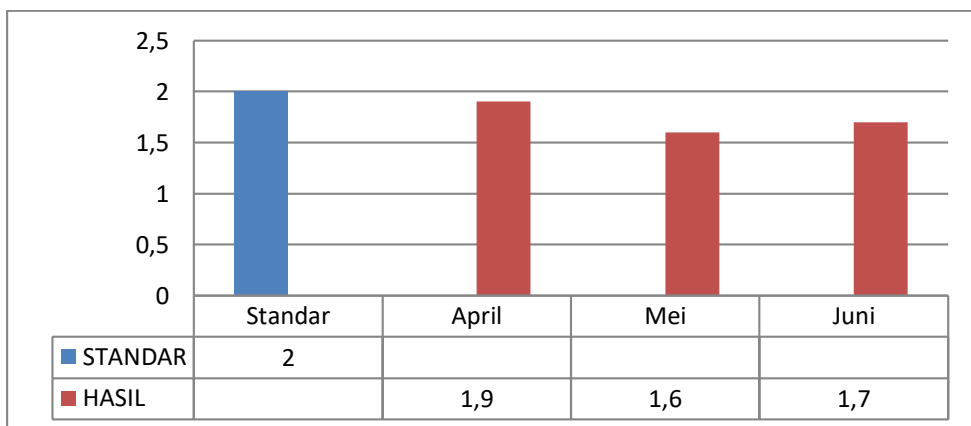


8. RADIOLOGI

a. Waktu tunggu pelayanan thorak foto rawat jalan sesuai standar (≤ 3 jam)

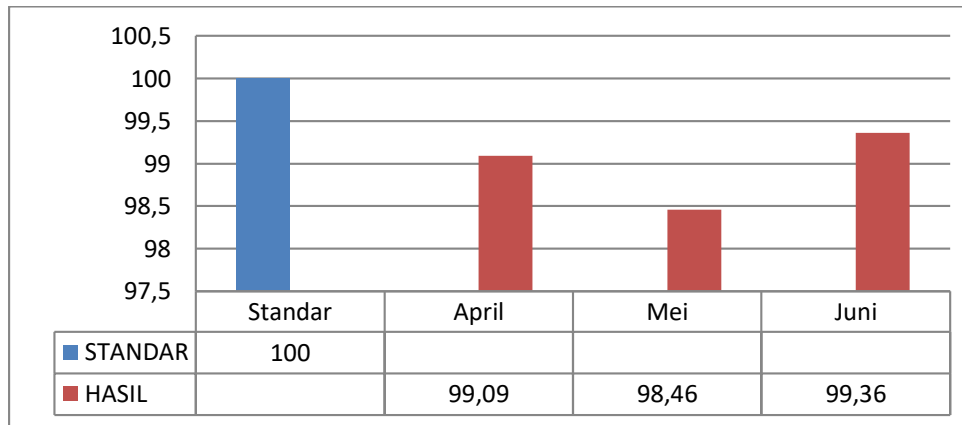


b. Kejadian kegagalan pelayanan radiologi

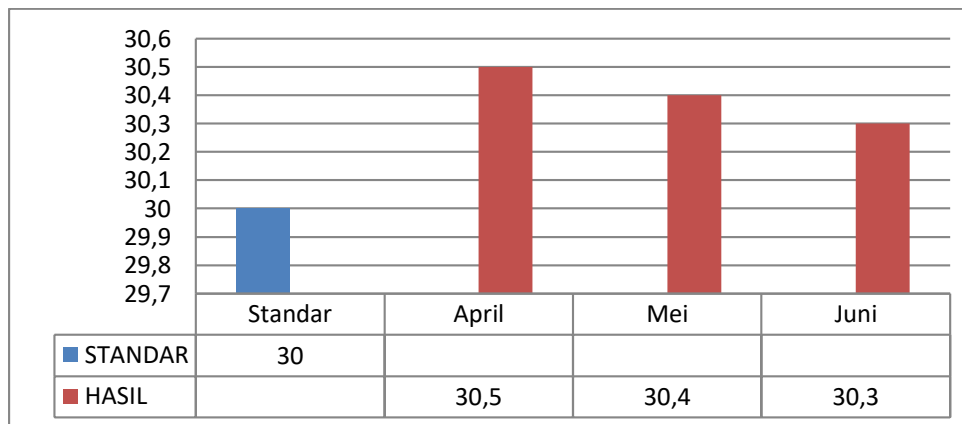


9. INSTALASI FARMASI

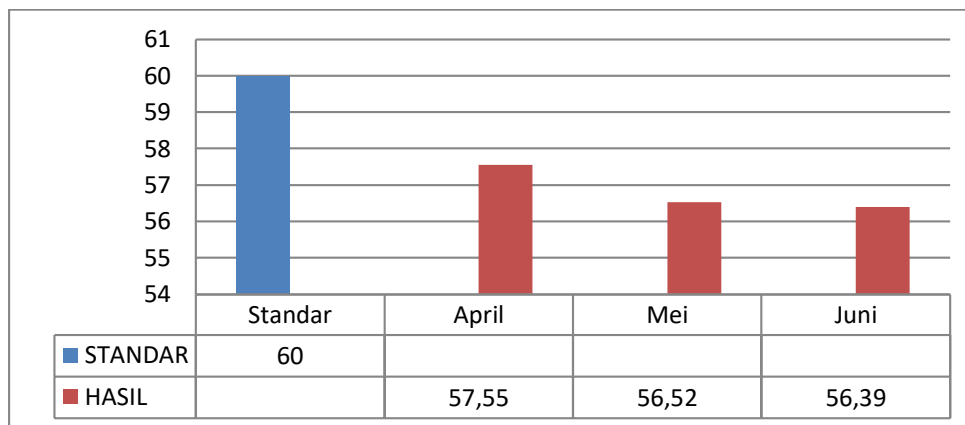
a. Penulisan resep obat sesuai formularium



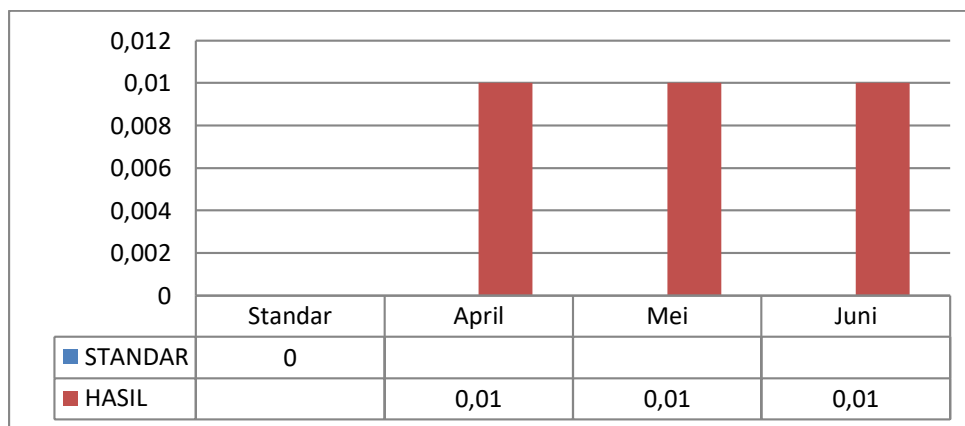
b. Waktu pelayanan farmasi obat jadi



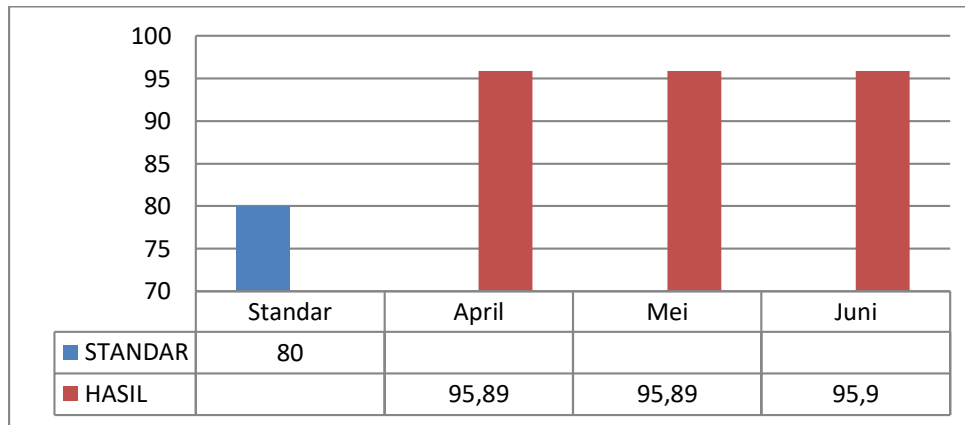
c. Waktu tunggu pelayanan farmasi obat racik



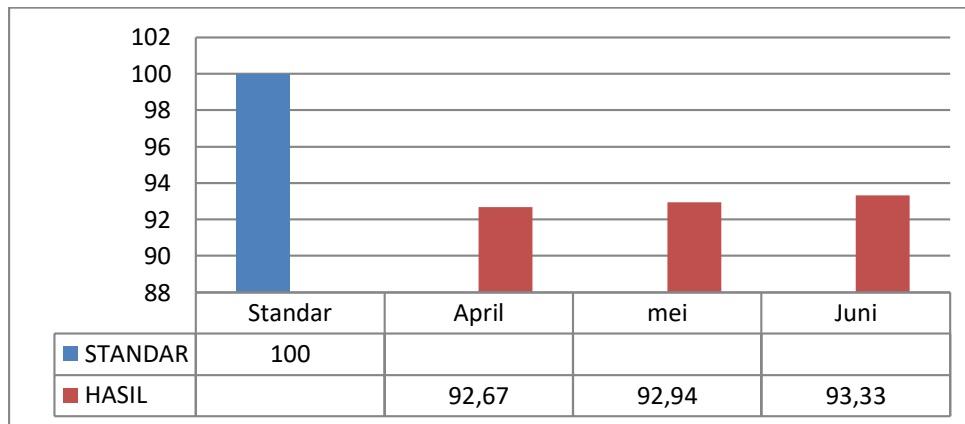
d. Kesalahan dispensing obat oleh Farmasi



e. Kepuasan pasien rawat jalan non dinas terhadap pelayanan farmasi

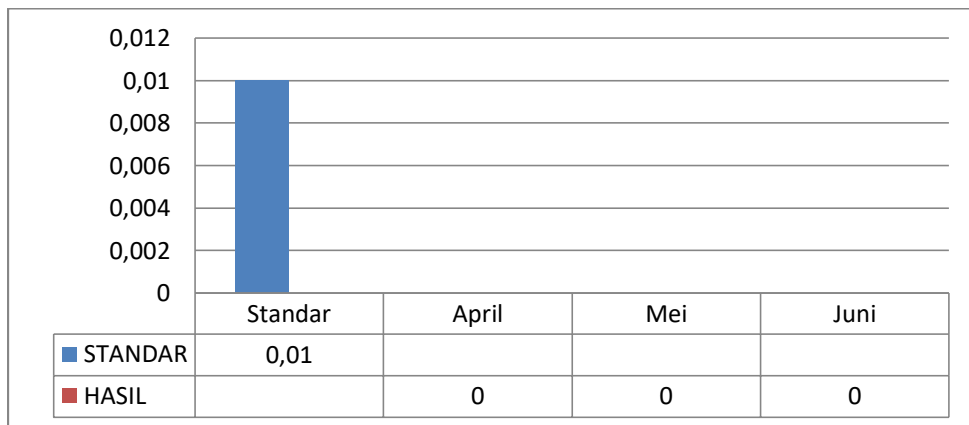


f. Kelengkapan resep rawat jalan

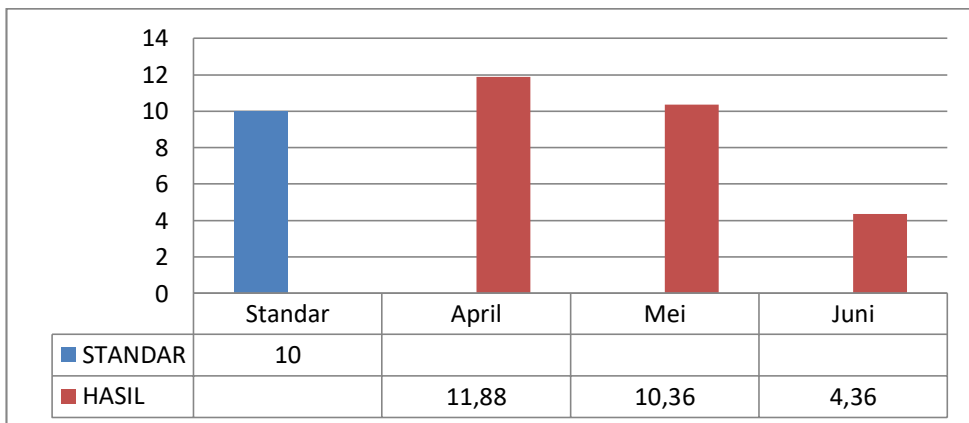


10. BANK DARAH

a. Kejadian reaksi transfusi pada saat kegiatan transfusi darah

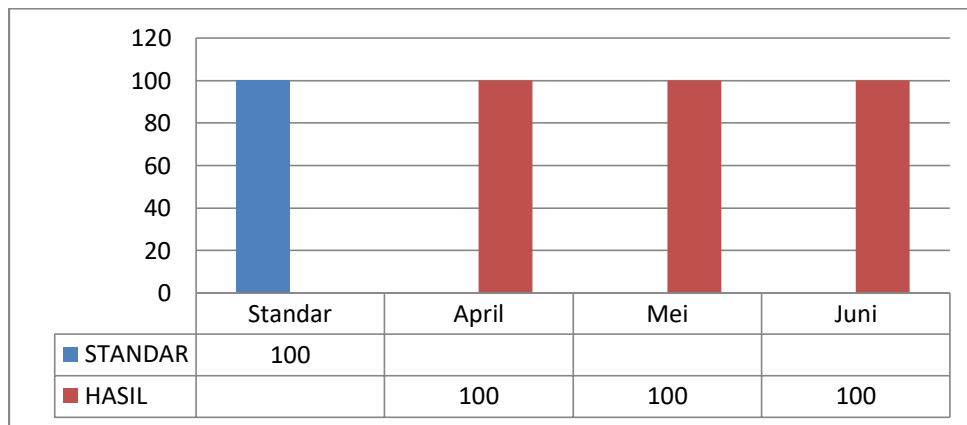


b. Monitoring tidak terpakainya produk darah yang sudah di order



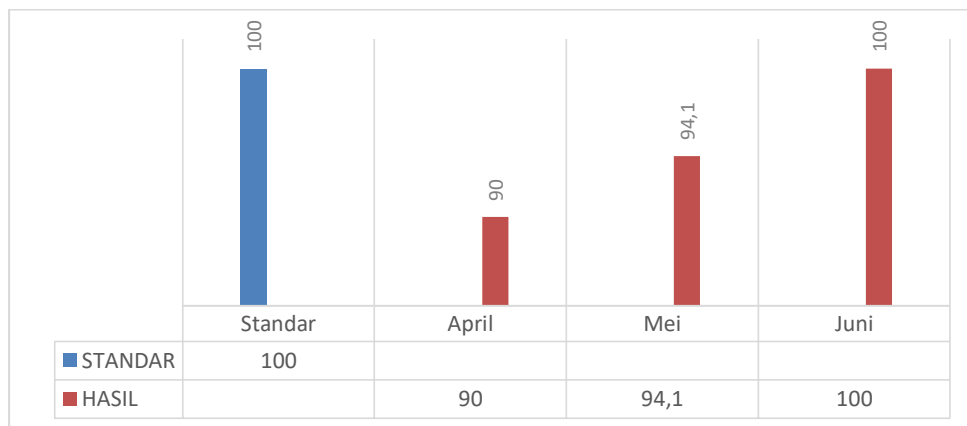
11. INFOKES

a. Ketepatan waktu pengiriman laporan bulanan ke Kemenkes RI setiap tanggal 10



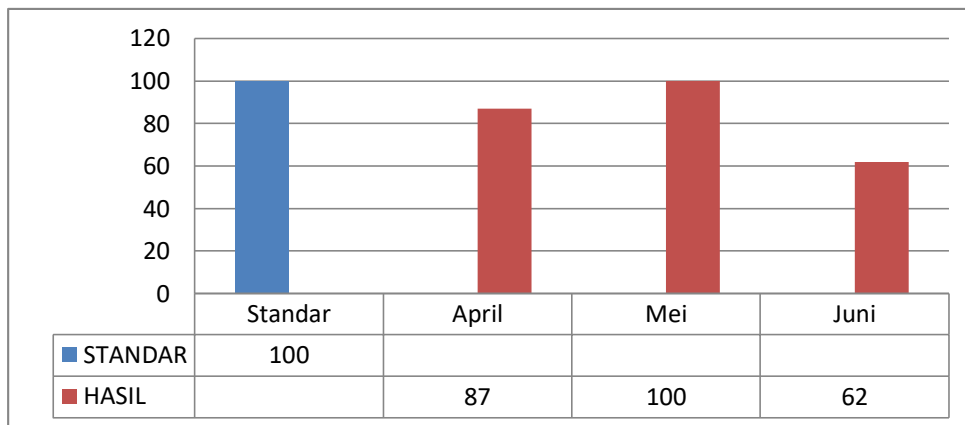
12. UNIT INFORMASI DAN TIM KOMPLAIN

a. Kecepatan respon terhadap komplain



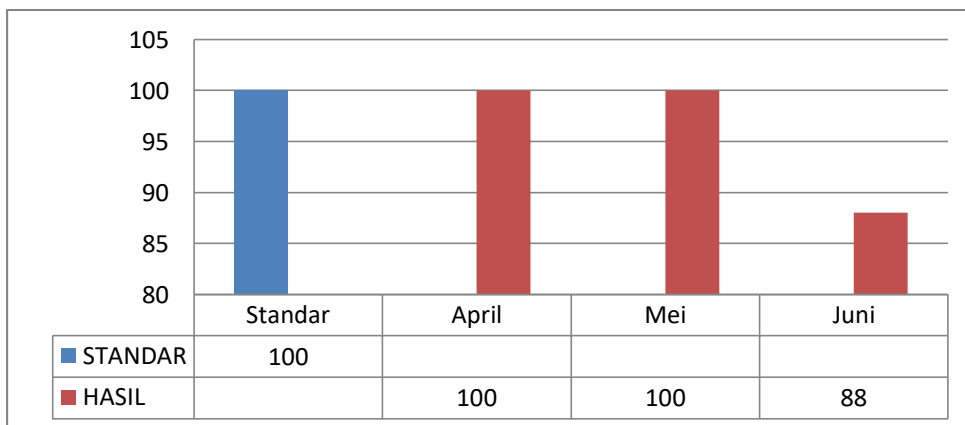
13. JANGWAT

a. Ketepatan waktu pemberian makan pasien rawat inap



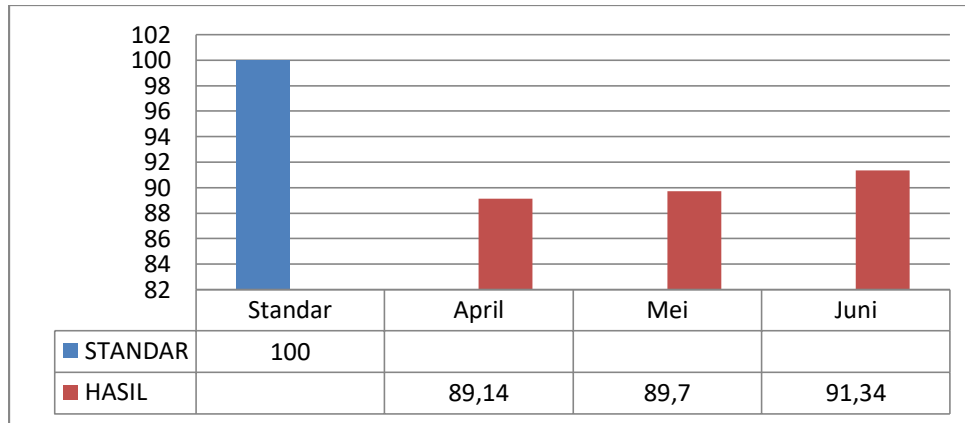
14. JANGMED

a. Monitoring kalibrasi alat ukur medis dan pemeliharaan alkes

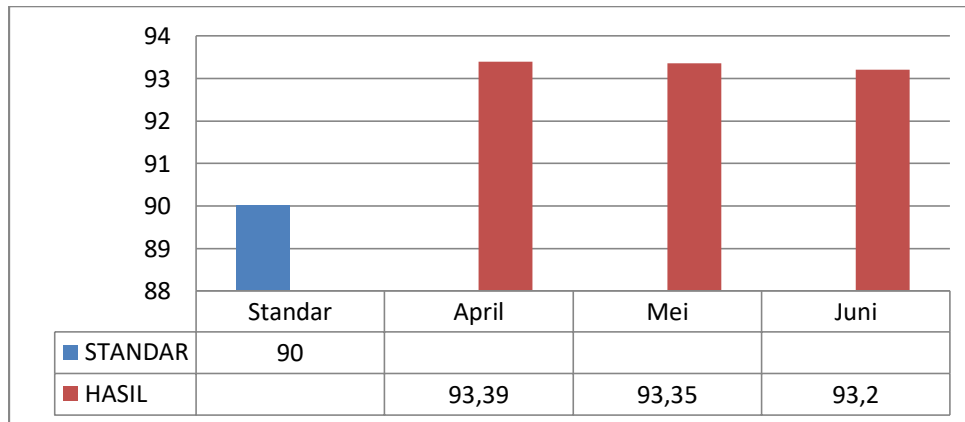


15. INSTALASI RAWAT INAP

a. Asesment medis 24 jam setelah pasien MRS

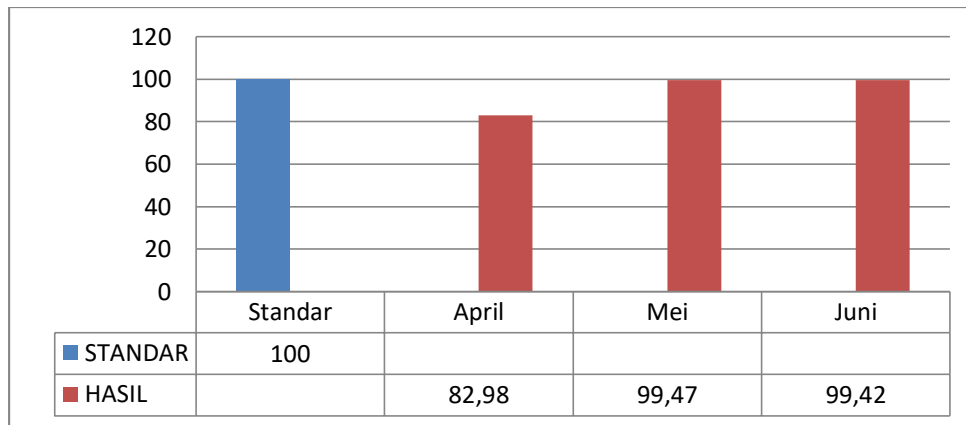


b. Kepuasan pasien rawat inap

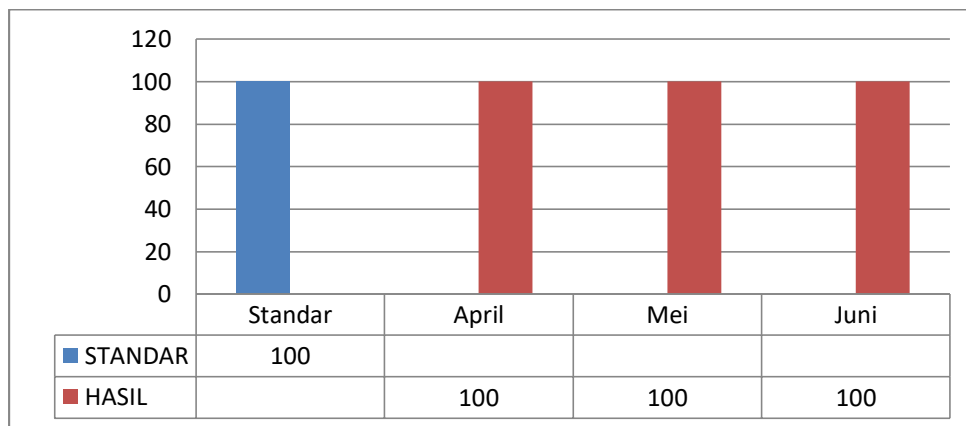


c. Indikator Mutu Keselamatan Pasien

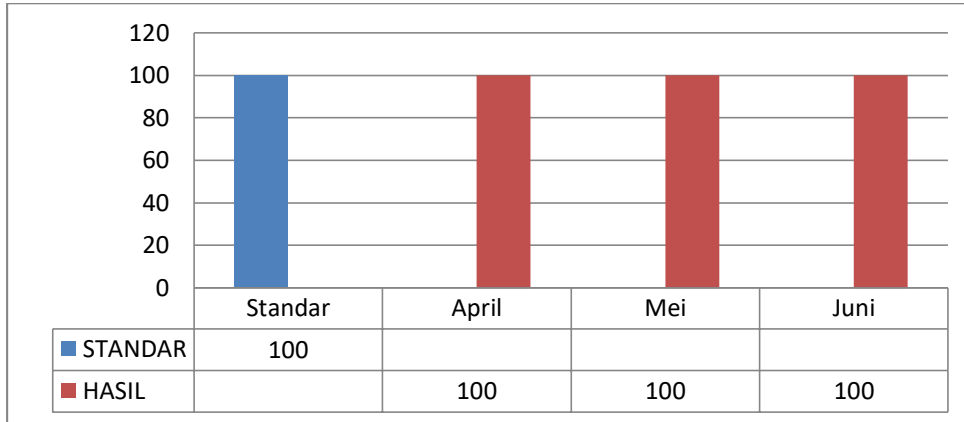
1) Kepatuhan petugas Rumkit dalam melakukan identifikasi pasien secara benar



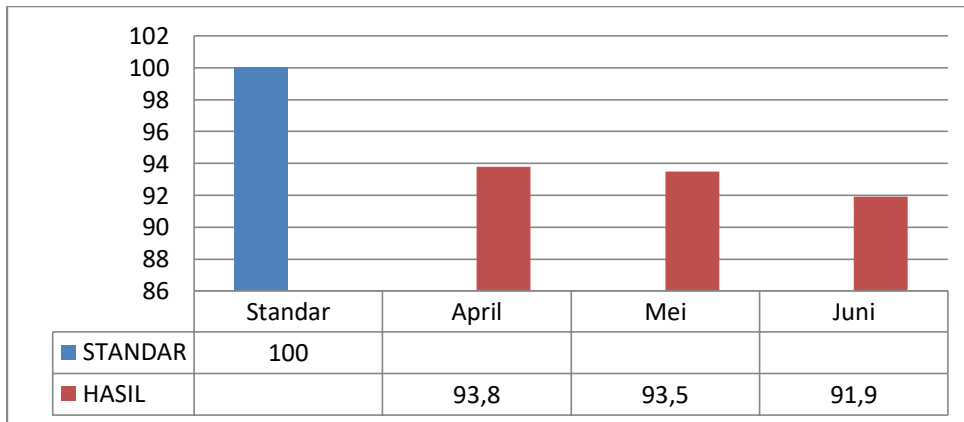
2) Kepatuhan prosedur pemberian obat/instruksi medis lain dengan teknis read back



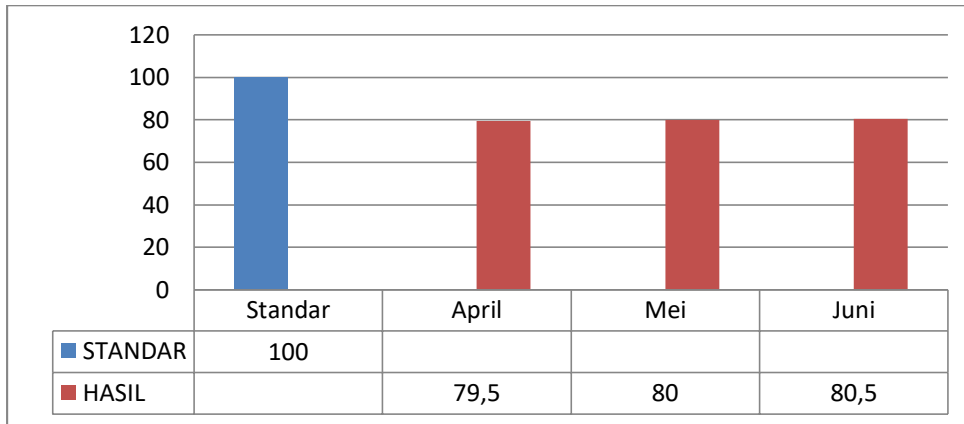
3) Kepatuhan pemberian label obat high alert oleh Farmasi



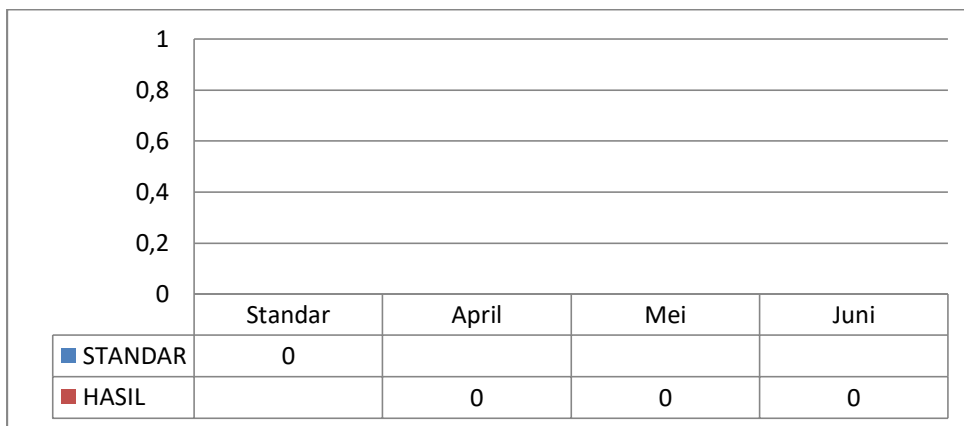
4) Kepatuhan pelaksanaan prosedur site marking pada pasien yang akan dilakukan tindakan operasi



5) Persentase kepatuhan petugas kesehatan dalam melakukan metode enam langkah dan lima moment cuci tangan



6) Menurunkan angka insiden pasien jatuh selama perawatan rawat inap di rumah sakit



16.IGD

a. DOE pasien di Unit Gawat Darurat

