**Universitas Diponegoro**

**Fakultas Kesehatan Masyarakat**

**Program Magister Ilmu Kesehatan Masyarakat**

**Konsentrasi Kesehatan Ibu dan Anak**

**2014**

**ABSTRAK**

**Sugiarti**

**Evaluasi Manajemen Supervisi Fasilitatif Bidan Koordinator Puskesmas Kepada Bidan Desa di Wilayah Kerja Dinas Kesehatan Kabupaten Banjar 2014**

**85 halaman + 5 tabel + 4 gambar + 9 lampiran**

Di Kabupaten banjar K1 dan K4 sudah melebihi target yang ditentukan, tapi AKI masih tinggi dan sebagai penyumbang terbesar dari AKI Provinsi Kalimantan Selatan. Manajemen supervisi fasilitatif bidan koordinator kepada bidan desa masih belum dilakukan dengan baik. Tujuan penelitian ini adalah mengevaluasi manajemen supervisi fasilitatif bidan koordinator Puskesmas kepada bidan desa dari aspek masukan, proses dan keluaran.

Penelitian ini bersifat kualitatif disajikan secara deskriptif eksploratif*.* Subjek penelitian terdiri dari 2 orang Bidan Koordinator dari Puskesmas dengan kematian ibu dan 2 orang bidan koordinator dari Puskesmas tidak ada kematian ibu, informan triangulasi adalah 1 orang Kepala Puskesmas dan 2 orang bidan desa tidak ada kematian ibu dan 1 orang Kepala Puskesmas dan 2 bidan desa dengan kematian ibu, serta kasie KIA DKK Banjar. Data dikumpulkan dengan *indepth interview.* Pengolahan data dengan metode analisis isi *(content analysis).*

Hasil penelitian menunjukkan bahwa dari aspek masukan terdapat perbedaan antara Puskesmas tidak ada kematian ibu dan Puskesmas dengan kematian ibu, masih ada bidan koordinator yang belum mendapatkan pelatihan, alat transportasi yang tidak layak, metode yang digunakan dengan memanggil bidan desa ke Puskesmas. Aspek proses: pelaksanaan pencatatan dan pelaporan belum lengkap dan belum tepat waktu, penilaian dilakukan dengan memanggil bidan desa ke Puskesmas.Aspek keluaran masih ada bidan koordinator yang belum melakukan supervisi fasilitatif sesuai dengan SOP

Disimpulkan bahwa manajemen supervisi fasilitatif di kabupaten Banjar masih belum berjalan dengan baik. Hal ini disebabkan karena keterbatasan sumber daya manusia, dana, sarana prasarana dan metode. Perencanaan,pengorganisasian,pelaksanaan dan penilaian belum sesuai. Bidan koordinator dalam pelaksanaan supervisi fasilitatif masih ada yang belum sesuai SOP.

Kata Kunci : Evaluasi. Supervisi Fasilitatif, Aspek masukan, Aspek proses,

Aspek keluaran

Kepustakaan : 24 (1993 -2011)

**Diponegoro University**

**Faculty of Public Health**

**Master’s Program in Public Health**

**Majoring in Maternal and Child Health**

**2014**

**ABSTRACT**

**Sugiarti**

**Management Evaluation of Facilitative Supervision of Coordinator Midwife of Health Center to Village Midwife at Work Areas of Banjar District Health Office in 2014**

**85 pages + 5 tables + 4 figures + 9 enclosures**

Coverage K1 and K4 in District of Banjar was higher than the target. However, Maternal Mortality Rate (MMR) was high and the biggest contributor of MMR in Province of South Borneo. Management of facilitative supervision of coordinator midwife to village midwife had not been well implemented. This research aimed to evaluate management of facilitative supervision of coordinator midwife of health center to village midwife which encompassed aspects of input, process, and output.

This was qualitative research presented using descriptive-explorative. Main informants were divided into two groups namely 2 coordinator midwives worked at health centers with maternal mortality cases and 2 coordinator midwives worked at health centers without maternal mortality cases. Head of health center and 2 village midwives from each group and head of maternal and child health section at Banjar District Health Office were selected as informants for triangulation purpose. Data were collected using a method of indepth interview. Furthermore, data were analyzed using content analysis.

The result of this research showed that regarding the input aspect, there was any difference between health centers with and without maternal mortality cases. In addition, there were any untrained coordinator midwives. Transportation was not feasible. As a consequence, village midwives had to come to health centers. Regarding the process aspect, recording and reporting were not complete and not timely. The process of assessment was conducted by asking village midwives to come to health centers. Regarding the output aspect, there were any coordinator midwives who had not implemented facilitative supervision in accordance with Standard Operating Procedure (SOP).

In conclusion, management of facilitative supervision in District of Banjar had not been well implemented. This was due to limitation of human resources, funds, means, and methods. Planning, organizing, implementing, and assessing were not appropriate. In addition, there were any coordinator midwives who had not followed the SOP in implementing facilitative supervision.

Key Words : Evaluation, Facilitative Supervision, Input Aspect, Process

Aspect, Output Aspect

Bibliography : 24 (1993 – 2011)