

# Analisis keterlambatan pelayanan preoperasi cito pasien cerebrovaskular hemorrhagic stroke disease menggunakan pendekatan lean hospital di instalasi gawat darurat RSUP Fatmawati = Analysis of delays emergency preoperative for patient with cerebrovaskular hemorrhagic stroke disease using lean hospital approach in emergency instalation RSUP Fatmawati

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## Abstrak

RSUP memiliki standar Emergency Respon Time<sup>2</sup> (ERT<sup>2</sup>) yang merupakan waktu yang dibutuhkan untuk pasien untuk mendapatkan tindakan operasi cito yaitu < 120 menit (2 jam), yang diharapkan dapat dicapai sebagai dasar penilaian kinerja unit IGD dan kinerja Dirut RSUP Fatmawati. Data bulan januari-juni 2015, menunjukkan terjadinya keterlambatan pelayanan preoperasi cito yaitu pasien dengan Cerebrovaskuler Stroke Hemorrhagic Disease (CVD SH) hingga 7 jam 28 menit. Penelitian ini dilakukan secara kualitatif menggunakan pendekatan lean hospital dengan melihat alur proses tahapan preoperasi cito. Sampel berdasarkan Purposive Sampling.

Hasil penelitian dengan value assessment yang dipetakan dengan value stream mapping (VSM) menunjukkan value added activity (VA) sebesar 10%, non value added activity (NVA) sebesar 90%.

Analisis waste teridentifikasi enam jenis masalah yang dikelompokkan kedalam Fishbone Diagram menjadi empat yaitu man, material, metode dan environment.

Rekomendasi perbaikan dilakukan dalam 2 tahap yaitu jangka pendek serta jangka menengah-panjang untuk mengeliminasi pemborosan (waste) dan membentuk skema future flowchart. Penelitian ini menunjukkan penyebab keterlambatan berdasarkan hasil analisis kegiatan berdasarkan waktu dalam setiap tahapan.

RSUP has a standard Emergency Response Time 2 (ERT<sup>2</sup>) which is taken for patients to get emergency surgery service. The standart time is < 120 minutes (2 hours), which is expected to be achieved as a basis for performance assessment and emergency unit RSUP Fatmawati CEO's performance. Based on data in January-June 2015 shows emergency service time that patients with preoperative cerebrovascular Hemorrhagic Stroke Disease (CVD SH) up to 7 hours 28 minutes. with the longest time is 9 hours 28 minutes. This research uses qualitatively using a lean approach to by observing preoperative each step of emergency process. This research uses purposive sampling methode.

Results of research with value assessment with value stream mapping (VSM) activity shows the value added (VA) by 10%, non-value added activity (NVA) by 90%. Waste analysis identifies six types which are grouped into four Fishbone Diagram such as man, material, method and environment.

Recommendations for improvements carried out in two stages: short-term and medium-long term to eliminate waste and form a flowchart futures scheme. This research shows causes of delay based on the results of the analysis of time-based activities in each phase.