REKAP INDIKATOR MUTU NASIONAL TAHUN 2025

NO	NAMA INDIKATOR	STANDAR	Januari	Februari	Maret	April	Mei	Juni	Juliu	Agustus	Septembe	Oktober	November	Desember
1	Kepatuhan Kebersihan Tangan (INM)	≥85%	93.8%	92.8%	93.2%	93.6%	94.3%	94.3%	94.0%	91.4%	93.0%	94.0%	93.1%	92.5%
2	Kepatuhan Penggunaan Alat Pelindung Diri (APD) (INM)	100%	86.3%	92.4%	93.4%	93.4%	92.6%	93.4%	93.0%	93.9%	93.9%	94.1%	93.7%	93.9%
3	Kepatuhan identifikasi pasien (INM)	100%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100%	100%	100%
4	Waktu Tanggap Operasi Seksio Sesarea Emergensi	≥ 80%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100%	100%	100%
5	Penundaan Operasi Elektif (INM)	<5%	0.0%	2.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
6	Kepatuhan Jam Visite Dokter Spesialis (IMP IRI)	<80%	100%	100%	100%	100%	100.0%	99.3%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
7	Pelaporan Hasil Kritis Laboratorium	100%	99.0%	99.0%	99.0%	99.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%
8	Kepatuhan Penggunaan Formularium Nasional	<80%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
9	Kepatuhan Upaya Pencegahan Risiko Pasien JatuH	0.5%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
10	Kepuasan Pasien	>76.61%	88.20%	88.20%	88.20%	88.40%	88.40%	88.40%	88.71%	88.71%	88.71%	88.71%	88.71%	88.71%
11	Waktu Tunggu Rawat Jalan (IMP-RS dan IMP Instalasi/Unit)	> 80%	83.3%	84.0%	83.7%	84.4%	82.4%	80.9%	82.5%	82.6%	75.9%	82.8%	82.9%	82.8%
12	Kecepatan Waktu Tanggap Komplain	>75%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
13	Kepatuhan Terhadap Alur Klinis (Clinical Pathway)	≥ 80%												

Ketua Komite mutu Keselamatan Pasien
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