

The Effect of Hard Work in Completing Midwifery Practice Reports on STIKes Kesehatan Baru Students

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ABSTRACT

Currently the implementation of a competency-based curriculum in the Midwifery Diploma III study program has entered the professional education stage. This stage is a very important learning stage in midwifery education, where students begin to apply all the knowledge gained, oriented towards midwifery practice through midwifery services/care to clients with a midwifery approach. midwifery management. The DIII Midwifery Study Program in compiling the Midwifery Practice Report uses the CoC method, namely students starting in semester V compiling case reports taken from cases of continuing midwifery care (CoC) for mothers and babies which cover pregnancy, childbirth, newborns, postpartum and family planning. Where the Midwifery Practice Report or midwifery practice report is one of the requirements that must be met by midwifery level 3 students to get their degree. The main objective is that students graduating from the midwifery study program are expected to have knowledge, skills, attitudes and behavior in their professional field as midwives who are able to provide care within the scope of midwifery practice including independent/autonomous care for girls, young women and adult women before, during pregnancy and afterwards. This means that midwives carry out supervision, provide necessary care and advice to women during pregnancy, childbirth and the postpartum period. Methods: Data collection techniques were carried out by means of in-depth interviews with informants, namely stakeholders including study program leaders, COC coordinating lecturers, supervisors for final assignment reports, midwives at puskesmas as supervisors interviews, document review and participant observation. Research results: Implementation of the CoC method in this Midwifery Practice Report, students can demonstrate their competence to clients through the implementation of midwifery care. Clients are satisfied with the assistance provided by students. The implementation of the Midwifery Practice Report using the CoC method has a positive impact on educational institutions, clients and students can provide real experience of midwifery care. The attitude of hard work in students plays an important role so that competence can be achieved by students. This hard work attitude can be used as a reference in midwifery professional education so that the midwifery practice learning process goes well. Conclusion: With the influence of the students' hard work, the implementation of the Midwifery Practice Report using the CoC method in the D III Midwifery Study Program has been carried out well.

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INTRODUCTION

Midwives are a key profession in providing services to women throughout the life cycle and midwives have great authority over women's health welfare. So the professionalism of midwives is an important element in empowering women. Along with the development of science and technology, it has an impact on increasing the community's need for quality health services, especially midwifery services with indicators of success in significantly reducing the Maternal

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Mortality Rate (MMR) or Infant Mortality Rate (IMR). The quality of midwifery services is synonymous with competent midwives. Qualified midwives have comprehensive and professional capabilities that can only be produced through quality midwifery education institutions .

Midwife education standards from the International Confederation of Midwifery (ICM), state that the philosophy of midwifery education must be consistent with the philosophy of midwifery care. The philosophy of midwifery care is to believe that the female reproductive process is a natural and normal process experienced by every woman. Midwives in providing care must partner with women, give authority to women, individual care, continuous and sustainable care (continuity of care / CoC).

Study Program D III Midwifery STIKes KB in preparing Midwifery Practice Reports using the CoC method, namely students starting in semester V compiling case reports taken from cases of continuing midwifery care (CoC) for mothers and babies covering pregnancy, childbirth, newborns, postpartum and family planned. The application of the CoC method aims to equip graduates to become midwives who are able to work based on the philosophy of midwifery care. In preparing the final assignment report, hard work behavior plays a very important role in completing the student's final assignment report. Because hard work is a behavior show serious effort in overcoming various obstacles in order to complete the task or job as well as possible. So that with the influence of the hard work of preparing midwifery practice assignment reports it can be completed smoothly and well.

Previous research has shown that the Continuity of Care (CoC) model is an example of best practice, which allows midwifery students to develop partnership skills and be more confident as they experience the model of care by following women during pregnancy. childbirth. Based on the background above, the researcher is interested in researching the analysis of the implementation of the COC method as a model for preparing Midwifery Practice Reports for students in D III Midwifery STIKes KB Study Program.

METHOD

Data collection techniques were carried out by means of in-depth interviews with informants, namely stakeholders including study program leaders, COC coordinating lecturers, supervisors for midwifery practice reports, health center midwives as field supervisors for midwifery practice reports and students and clients as COC subjects; conduct a document review, namely collecting data sourced from documents and archives related to the implementation of midwifery practice report preparation activities using the COC method; conduct participatory observation, namely the researcher participates in the implementation at each stage of the COC method. After the data has been collected, a data trust test is carried out through triangulation, extension of participation and member checks.

RESULTS AND DISCUSSION

The results of the study show that the CoC model is applied to LTA in the D III Midwifery STIKes KB Study Program, namely students accompany one client and then provide comprehensive care from pregnancy, childbirth, the postpartum period, newborns to family planning (KB). Students in semester V have been able to start compiling Midwifery Practice Reports using the CoC method, but the results of interviews conducted with students found that they had difficulty starting CoC implementation in preparing Midwifery Practice Reports because students were still participating in midwifery clinical practice activities in semester V due to the location of the clinical practice which is far from the campus so that it hinders the preparation of proposals, consulting with supervisors, finding CoC subjects (clients) and accompanying clients.

D III Midwifery Study Program FK UNS meform of education that educates students to become professional midwives, one of which is by applying the Continuity of Care (CoC) model in the preparation of student midwifery practice reports. This CoC model has been running for 3 years since 2017, where students will accompany one client and then provide comprehensive care from pregnancy, childbirth, the postpartum period, newborns to family planning (KB). The implementation of the preparation of this midwifery practice report is not provided for a special time but is carried out integrated together with the implementation of the teaching and learning process in semester V (five). However, this Midwifery Practice Report has a position as a subject in semester VI (six) which is carried out in an integrated manner as part of the program's final examination to complete education.

The next implementation is to monitor care for subjects carried out since pregnancy, childbirth, newborns, postpartum and family planning within a period of 4 months, but in reality the implementation from the results of interviews and observational studies shows that the length of implementation of care ranges from 3-6 months, because there were several students whose subject of care gave birth not in accordance with the expected day of birth, besides that there were students who said that they had changed the subject of care because the subject of care was not willing to get further care and the baby the subject was carrying died in the womb. The frequency of providing care was 11 times with details of 2 times when the subject (mother) was pregnant in the third trimester, 1 time during childbirth, 3 times during childbirth, 3 times during neonates and 2 times during family planning.

Delivery care is expected that students can participate, but in its implementation based on data collection through interviews with students and supervisors there are students who cannot participate directly in providing delivery care to clients. This is because, among other things, the client wants to give birth in a hospital/clinic or the client has a pathological delivery so they have to give birth at the hospital and the students are practicing outside the city so that during the delivery process the students cannot attend or are late. Students can still continue care after delivery and for documentation of delivery care students can look at the client's medical records or conduct interviews with the midwife or doctor on duty during the delivery. As for the implementation of postpartum care,

The results of this study indicate that the influence of hard work on STIKes KB students during the preparation of midwifery practice reports has a very positive impact, so that midwifery student reports to fulfill their final assignments can be completed smoothly. The implementation of the Midwifery Practice Report using the CoC method also has a positive impact on educational institutions, clients and for students to provide real experience of midwifery care. The attitude of hard work in students plays an important role so that competence can be achieved by students. This hard work attitude can be used as a reference in midwifery professional education so that the midwifery practice learning process goes well.

CONCLUSION

The results of the analysis of the implementation of the CoC from the research that has been carried out are first that the D III Midwifery Study Program STIKes KB has carried out the CoC model in preparing Midwifery Practice Reports, second: students can increase their abilities and competencies with the hard work behavior in providing direct and continuous care to clients through the model CoC, third: the client as the subject of the CoC learning model is satisfied and happy with the assistance provided by students, fourth: the CoC model that has been implemented in D III Midwifery Study Program STIKes KB can be developed as another learning model, so as to improve the skills of students and graduates.

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