

ABSTRACT

**Recommendation In Increasing Nutritional Services Based On Gap Analysis
In Lowering Food Wastages In Wahidin Sudiro Husodo Mojokerto Public
Hospital**

The high rate of food wastages in Wahidin Sudiro Husodo Public Hospital by 24,5% in 2015 indicates inefficiency in hospital diet management and low nutrition intake to the patients. The goal of this research was to recommend in decreasing food waste in WSH hospital wards through gap analysis method. This research was observational research, with cross sectional design. The data collected October 2016 until August 2017. The data were collected by conducting surveys to patients, hospital management, hospital nutritionist, and employee responsible for cooking. The results of this research showed that there was a gap between patient expectation and hospital management perception of patient expectation (knowledge gap), there was a gap between hospital management perception of patient expectation with staff perceptions of nutritional standards (standard gap), there was a gap between staff perceptions of nutritional standards with service delivery (delivery gap), there was a gap between the expectations of patients with food received (service gap). Recommendations of this research were adding some spices and seasoning of non meat side dish from mild taste to stronger taste, adjustment of food serving time, more premium selection of rice, usage of pressure cooker for meat side dish, reduced the portion of rice and convert into other form, add the portion of non meat dish and vegetable, digging information about taste, aroma, texture, portion and temperature of patient's preference food by survei, *focused group discussion* (FGD), and *meal round*, patient's education about diet obtained from hospital, wighing patient's food wastages periodically, standarization of hospital food service, evaluation of food chain distribution and eliminates its delay, evaluation of cooker's competences, adjusment of kitchen worker's shift form 2 work shift to 3 work shift, labelling food expiration hour maximum 3 hours form food being ready to served.

Keywords : food waste, gap analysis, hospital nutritional service

ABSTRAK

**REKOMENDASI PENINGKATAN MUTU PELAYANAN GIZI
BERDASARKAN *GAP ANALYSIS* UNTUK MENURUNKAN SISA
MAKANAN (*WASTE*) DI RSU. WAHIDIN SUDIRO HUSODO
MOJOKERTO**

Tingginya angka sisa makanan di RSU Wahidin Sudiro Husodo (RSU WSH) Mojokerto sebesar 24,5% pada tahun 2015 menunjukkan bahwa terdapat inefisiensi dalam penyelenggaraan diet RS dan rendahnya asupan gizi kepada pasien. Tujuan penelitian ini ialah memberikan rekomendasi penurunan angka sisa makanan di rawat inap RSU WSH melalui metode *gap analysis*. Penelitian ini merupakan penelitian observasional, dengan rancang bangun *cross sectional*. Waktu penelitian ini dilakukan antara bulan Oktober 2016 sampai dengan Agustus 2017. Pengambilan data dilakukan dengan melakukan survei kepada pasien, manajemen RS, dietisien RS, serta petugas yang bertanggung jawab memasak masakan. Hasil penelitian menunjukkan bahwa terdapat kesenjangan antara harapan pasien dengan persepsi manajemen akan harapan pasien (*knowledge gap*), terdapat kesenjangan antara persepsi manajemen akan harapan pasien dengan persepsi petugas terhadap standar pelayanan gizi (*standard gap*), terdapat kesenjangan antara persepsi petugas akan standar pelayanan gizi dengan penyampaian pelayanan (*delivery gap*), terdapat kesenjangan antara harapan pasien dengan makanan yang diterima (*service gap*). Rekomendasi dari penelitian ini antara lain penambahan bumbu dan *seasoning* lauk nabati dari *mild* ke rasa yang lebih kuat, penghatian kembali makanan yang telah jadi, penggunaan *trolley warmer*, pengubahan waktu penyajian makanan, pemilihan jenis beras yang lebih premium, penggunaan *pressure cooker* untuk lauk hewani, pengurangan porsi nasi dan dialihkan ke bentuk lain, penambahan porsi lauk nabati dan sayur, penggunaan *rice warmer*, penggalan informasi tentang preferensi rasa, aroma, tekstur, porsi dan temperatur makanan pasien dalam bentuk survei, *focused group discussion* (FGD), dan *meal round*, edukasi pasien mengenai diet yang akan didapat di RS, penimbangan sisa makanan berkala, pembuatan standar pelayanan gizi RS, evaluasi rantai distribusi makanan dan eliminasi *delay* yang ada, evaluasi kemampuan teknis petugas masak, perubahan sif kerja dari 2 sif menjadi 3 sif, pemberian jam kadaluarsa makanan 3 jam setelah pemorsian per pasien.

Kata kunci : sisa makanan, *gap analysis*, pelayanan gizi RS