

ABSTRACT

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Continuity of Care (COC) Midwifery Care for Mrs. "S" at the Independent Practice of Midwife "L" in Palembang in 2026

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The Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) in Indonesia remain significant public health challenges; in 2024, maternal deaths reached 4,150, while the IMR was recorded at 16.85 per 1,000 live births. These figures underscore that maternal and infant mortality rates are still categorized as high, posing a substantial hurdle in improving community health status. In Palembang specifically, 18 maternal and 120 infant deaths were documented in 2024. This final report aims to provide Midwifery Continuity of Care (CoC) for Mrs. "S," encompassing the periods of pregnancy, labor, newborn care, postpartum, and neonatal care, while integrating the Charitas Spirituality approach. The methodology employed was a case study conducted at Midwife "L" Independent Practice in Palembang from March 12, 2026, to May 01, 2026, utilizing primary and secondary data recorded via SOAP documentation (Subjective, Objective, Assessment, and Plan). The results of the care implementation indicated that Mrs. "S's" pregnancy progressed physiologically, although third-trimester anaemia and edema were identified and successfully managed within the scope of midwifery care. The labor process proceeded normally, resulting in a healthy newborn, and both the postpartum and neonatal periods were completed without complications. Based on these outcomes, it is concluded that the implementation of Midwifery Continuity of Care (CoC) through the Charitas Spirituality approach can be optimally executed to support maternal and infant health. It is recommended that midwives maintain and enhance the quality of CoC services as a strategy for the early detection of complications and the overall improvement of maternal and neonatal health quality.

Keywords: *Continuity of Care, midwifery care, pregnancy, labor, postpartum, neonate.*