

INFLUENCES OF THERAPEUTIC COMMUNICATION ON MODEL OF STRUCTURAL REFLECTION ON PARENTS OF PATIENTS SATISFACTION

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ABSTRACT

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Therapeutic communication with reflection is a process of learning from experience, recapturing practical experience and reflecting on it critically to gain new understanding, tends to involve individual practitioners to become self-aware of the situation. However, at the Hospital in Dili Timor Leste the nurse does not explain the procedure of giving medication to the patient's parents. The general purpose of the study is to know the effect of therapeutic communication with the model of structural reflection on patient parent satisfaction. In this study, use a posttest-only control group design with a sample of 126 people, Purposive sampling method, and the intervention using the MSR module, using Mann Whitney analysis. This study's results obtained a value of $p = 0,000$ which means that there is a significant influence between the control group in the perinatology room and the intervention group in the pediatric room on the satisfaction of patients' parents in the Pediatric Department of Hospital Dili Timor Leste. Therapeutic communication with the model of structural reflection (MSR) has a positive influence on the parents of patients at HNGV Dili Timor Leste, parents of patients are very satisfied with the communication made by nurses, with therapeutic communication.

BACKGROUND

Therapeutic communication is one of the essential tools that nurses must have to build relationships or trust. Effective communication is an important part of the nursing profession and is one of the most important tools a nurse must have to support patients and their family members. However, in the Dili East Timor Hospital, nurses have not used therapeutic communication effectively.

Based on the results of a preliminary study through interviews and observations with 15 parents of patients obtained information that 85% of parents of patients are not satisfied with the communication made by nurses. This is because the hospital itself does not yet have a policy or operational standards for the therapeutic communication.

Research that has been done in several hospitals in the world states that 51.4% of patients are quite satisfied with nurse communication (Omorogbe

& Amiegheme, 2016). But according to research (Younis, Mabrouk, & Kamal, 2015) there are 71% of health service providers accustomed to poor communication, as well as incomplete culture and information exchange. Based on research by (Agustin, Kusananto, & Sulistiawati, 2017), that with providing training interventions interventions to nurses using MSR has a positive effect in influencing changes in empathy in the communication made by nurses to the patient's family. The practice of reflection gives better results when done explicitly (Saunila & Ukko, 2015).

Effective communication is an important part of the nursing profession and is one of the most important tools a nurse must have to support patients and their family members (Hadi, Prabowo, & Yulitasari, 2013). The ineffectiveness of nurse communication can be influenced by several causes such as lack of motivation, lack of knowledge, unbalanced workload, other causes such as, perception, culture,

language barriers, unclear messages, language style or speech style, physical limitations.

This will have an impact on the patient's recovery, so the parents of patients complain, ask for forced discharge, no trust, disobedience, so that the purpose of the Hospital to improve patient health is less than optimal (Sarfika, Maisa, & Freska, 2018).

In this study using the model of structural reflection (MSR) approach where MSR is a process of looking back at the experiences that have been undertaken, being able to reflect on themselves with experience and generating new knowledge, and encouraging nurses to remember to re-evaluate their past experiences, which aims to make someone ready for a new experience. This model consists of a description of experiences, reflections of influencing factors, actions and learning, this model also makes practitioners reflect on themselves before taking action, can adjust to new situations. Research with this MSR approach can help nurses to learn from experience and use for further communication with parents of patients. This research is expected to be part of activities to help improve services in hospitals and increase the trust of patients' parents and provide satisfaction to patients' parents.

METHOD

The study design was a posttest-only design control group (Dharma KK, 2015) at the Dili Hospital of Timor Leste, from 6 January 2020 to 27 January 2020. The population was all elderly patients in the Department of Pediatrics, who met the inclusion criteria and exclusion (Nursalam, 2017), the number of samples was 126 parents of patients in each group of 63 people, using purposive sampling.

The researcher gives an explanation to the respondent regarding the purpose of the study; Respondents who are willing to sign informed consent are willing to become respondents. In the experiment group, interventions using the MSR Module for three consecutive days and on the third day of the two groups were carried out post-tests using a questionnaire questionnaire for the patient's parents (Nursalam, 2007), which had been tested for validity (Sugiyono, 2012), and reliability (Sujarweni, 2015). Measurement of patient parent satisfaction in the control group and the experiment group using Mann Whitney analysis. Previous research has also been passed an ethical test by the Ethics Committee of the Dili de Timor National Institution of Timor Leste with reference number 02 / MS-INS / DE / I / 2020.

RESULTS

Characteristics of Respondents Satisfaction of Patient Parents

The number of patients or parents of patients who were respondents of this study each in the pediatric room as many as 63 people and in the perinatology room as many as 63 people who met the criteria for inclusion and exclusion. The results of data processing on the characteristics of respondents' parents of patients on the square test results based on sex, education in Pediatrics and perinatology Hospital Dili Timor Leste can be seen in the Table below:

Based on Table 1, it can be seen in the paediatric room (intervention group) that the majority of parents of female patients are 36 people (57.1%), and in the perinatology room (control group) parents of female majority patients are 44 people (55.7%).

Based on the educational background category of the majority of patients in the pediatric room, the majority have a high school education background of 31 people (49.2%), the educational background of the parents of patients in the perinatology room of the majority of high schools is 30 people (38.0%).

Patient Parent Satisfaction

The results of processing the patient's parent satisfaction can be seen in the table 2.

Based on the results of the Mann Whitney test in Table 2 obtained values in the treatment group of parents of patients who were satisfied with the communication made by nurses about drug administration as much as 7.9%, and those who were very satisfied as much as 92.1%, whereby in the parental control group patients who were very dissatisfied with the communication made by nurses about giving drugs, which were 33.33%, parents of patients who were satisfied as much as 33.33%, parents of patients who were very satisfied were as many as 33.33% and p-value = 0.000, so it can be concluded that there is a significant influence between the control group in the perinatology room and the intervention group in the pediatric room on the satisfaction of the parents of patients in the Department of Pediatrics Hospital Dili Timor Leste.

DISCUSSION

The Level of Satisfaction of the Patient's Parents

The results showed that the patient's parents were satisfied with the therapeutic communication of the nurse, where the patient's parents were satis-

Table 1: Characteristics of Patient Parent Respondents by Sex and Education

| Characteristics of the patient's parents | | MSR group | | Standard Group | |
|--|--------------------|-----------|------|----------------|------|
| | | n | % | n | % |
| gender | Male | 26 | 41.1 | 19 | 24,1 |
| | female | 36 | 57.1 | 44 | 55,7 |
| education | primary school | 7 | 11.1 | 4 | 5,1 |
| | secondary school | 12 | 19.0 | 19 | 24,1 |
| | Senior High School | 31 | 49.2 | 30 | 38,0 |
| | College | 13 | 20.6 | 10 | 12,7 |

Table 2. Satisfaction of Parents of Patients in the Department of Pediatrics Hospital Dili Timor Leste

| Parents' satisfaction | Experiment group | | Control group | | p |
|-----------------------|------------------|------|---------------|-------|-------|
| | n | % | n | % | |
| very dissatisfied | 0 | 0 | 21 | 33,33 | 0,000 |
| satisfied | 5 | 7,9 | 21 | 33,33 | |
| very satisfied | 58 | 92,1 | 21 | 33,33 | |
| Total | 63 | 100 | 63 | 100 | |

fied with the stage of the action taken by the nurse, because at this stage of the action began a meeting with the patient's parents in starting a relationship, the main action that is building trust, acceptance and understanding, open communication with the patient's parents. This stage of action also nurses often interact with parents of patients during their child undergoing treatment, one of the things nurses do is help overcome the patient's parents' problems in communicating, maintain good cooperative relations, nurses can hear the feelings of the patient's parents and can explain nursing action procedures/drug administration procedures. The better the implementation of therapeutic communication is carried out, the more satisfied the patient's parents are with the therapeutic communication carried out by the nurse.

According to Pohan patient satisfaction is a level of feeling that arises as a result of the performance of health services obtained after patients compare what is expected. Nurses in providing nursing care are inseparable from the attitudes and behaviors in communication with patients that can affect

patient satisfaction, although service facilities and infrastructure are often used as a quality measure by customers but the main measure of assessment remains the attitudes and behavior of services displayed by nurses / health workers. Good attitudes and behaviors by nurses can often cover deficiencies in terms of facilities and infrastructure. Communication by nurses in conveying information is very influential on patient satisfaction.

The results obtained, that the patient's parents' satisfaction depends on nurses' therapeutic communication, from the overall results of the nurses' therapeutic communication at the Dili Timor Leste Hospital, the respondents were very satisfied with the nurses' therapeutic communication at the action stage, because in this stage of the action nurses and people The patient's parents begin with a trusting relationship, where the nurse explains the procedure of giving medication to the patient's parents, so that the patient's parents understand the nursing care given to their child. Therapeutic communication properly applied will provide comfort to the patient's parents

so that the patient's parents feel satisfied with the services provided, especially in terms of therapeutic communication.

Effects of Therapeutic Communication with Model of Structural Reflection (MSR) on Patient Satisfaction

The findings in this study indicate that by using the MSR approach in the treatment group that the patient's parents are delighted with the therapeutic communication about drug administration compared with the control group using hospital standard communication, so it was concluded that there was a significant influence between the control groups in the room perinatology with the treatment group in the pediatric room of the Hospital Dili Timor Leste. The provision of MSR interventions to the patient's parents' satisfaction can influence the patient's parents in the intervention group, and the intervention can be carried out with the following mechanism, implementation in Phase Description of the patient's parents' experience describes previous experiences of nurses, skilled nurses and the right time to give drugs, explain the benefits, contraindications, dosages, side effects of the drug so that the patient's parents can understand it. The nurse tries to help the patient's parents build a correct understanding of treatment. The nurse can identify what the patient's parents have not / needed by the patient's parents to increase satisfaction.

Reflection Stage Nurses are able to identify the patient's parents' feelings about communication during drug administration. Some reactions include the patient's parents being angry because when they intervene the nurse fails to give the drug according to time, frequency, other reactions are panic, disappointment, or anxiety when seeing their child in pain/ crying, so it is very important that nurses can provide an appropriate and fast response so that patients feel protected and satisfied with nursing care performed. Nurses remain calm, do good communication, do not use high notes, do not make the patient's parents offended, polite and always care about the feelings of the patient's parents, so that the patient's parents can accept the intervention by the nurse, if the action is carried out successfully by the patient's parents feel happy, calm, smiling and friendly. It is expected that in this case nurses respond to patient needs in a timely manner.

Factors influencing Nurses choosing communication techniques that are appropriate to the background of the patient's parents, the nurse is able to identify the cultural background and language used by the patient's parents. The nurse is able to explain

alternative actions/treatments when the patient's parents reject the previous action.

The action stage is the longest stage in therapeutic communication because in it the nurse is required to help and support the patient to convey his feelings and thoughts and then analyze the response, in this action phase the nurse listens actively and attentively so as to help the patient to define the problem being faced by patients, looking for problem solving and evaluating it. This action phase nurses first introduce themselves, explain the act of giving drugs and provide opportunities for patients' parents to ask questions, this makes the patient's parents establish a good relationship of trust between the nurse and the patient's parents. The learning phase Nurses adjust culture and change therapeutic communication techniques to suit the needs of parents.

This study is in line with research conducted by (Agustin et al., 2017), it is evident that providing training interventions to nurses using MSR has a positive effect in influencing changes in empathy in the communication made by nurses to patients' families. According to research conducted by (Lau & Wang, 2013) that communication skills are very important for health care professionals who work with their patients. Effective communication skills are one of the most important tools by which health professionals can transfer knowledge into implementation, empower patients to find solutions to their health challenges, and increase trust. According to Boud and Walker, the reflective process has three stages: namely, returning to and rewinding the experience, presenting the feelings generated by the experience, re-evaluating the experience gained (Octaria, 2015).

The assumptions in this study, the implementation of MSR interventions in the treatment group that the patient's parents are very satisfied with the communication carried out by nurses this has a significant impact in influencing changes in therapeutic communication made by nurses to the patient's parents, the patient's parents can describe their experiences, expressing their hearts freely, reflection makes people aware of past mistakes, and wants to change for the better in the future. Nurse communication at HNGV Dili Timor Leste respondents felt very satisfied at all stages of the MSR, this means that most nurses had good communication with each patient's parents.

Limitations in this study, there is high number of patients with insufficient nurses, patients entering the room at night, interventions carried out in the morning so that there are delays in coding, bed limitations so patients must move, move from one room

to another, so the intervention time is delayed.

CONCLUSION

All in all, better implementation of therapeutic communication, the more satisfied the patient's parents are, whereby nurses are the key that can affect the satisfaction of the patient's parents, this is because nurses often interact with the patient's parents, helping to overcome the patient's parents' problems in communicating, maintaining good cooperative relationships. Therapeutic communication with the model of structural reflection (MSR) has a positive influence on the parents of patients at the Dili Timor Teste Hospital because by reflection it can restore the mind, allow learning from previous experiences, make us aware of past mistakes and want to correct them in the future. Will come to make it even better. Next researcher further research needs to be done with methods related to the relationship between the description of experience and reflection on the level of patient satisfaction.

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