RINGKASAN

PENGEMBANGAN MODEL KESELAMATAN PASIEN BERBASIS *CARING* SEBAGAI UPAYA MENURUNKAN *ADVERSE EVENT* DI RUMAH SAKIT UMUM DAERAH (RSUD) KABUPATEN LOMBOK BARAT DAN LOMBOK TIMUR PROVINSI NTB

Keselamatan pasien merupakan salah satu komponen utama dari kualitas pelayanan rumah sakit tetapi secara umum belum memenuhi standar. Kondisi tersebut ditunjukkan oleh data bahwa 54,48% rumah sakit di Indonesia dan 58,49 rumah sakit di Provinsi Nusa Tenggara Barat belum memenuhi standar akreditasi dan standar keselamatan pasien (Kemenkes RI, 2012). Banyak kasus *adverse event* (AE) yang terjadi di rumah sakit tetapi belum dilaporkan. Menurut WHO (2004), jumlah pasien yang mengalami AE di beberapa rumah sakit di dunia adalah 3,2% - 16,6%. Demikian juga *Department of Health and Human Services (Office of Inspector General)* melaporkan bahwa klien yang mengalami *adverse events* dan *temporary harm events* sebesar 13,5% (Daniel, 2010). Hasil survei kepuasan pasien terhadap pelayanan keperawatan di Rumah Sakit Umum Provinsi Nusa Tenggara Barat dan di beberapa Rumah Sakit Umum Daerah di Lombok pada tahun 2010 adalah 65% (RSUP NTB, 2011), lebih rendah dari standar minimal kepuasan pasien yaitu 80% (Kemenkes, 2010). Kepuasan pasien tersebut berkaitan dengan aspek sikap dan perilaku serta kepatuhan terhadap standar prosedur operasional dan aspek tersebut berkaitan erat dengan keselamatan pasien. Kondisi itu hampir sama dengan yang disampaikan oleh *Agency for Healthcare Research and Quality* (AHRQ) pada tahun 2011 bahwa hampir 50% keluhan *(complaints)* dari klien berkaitan dengan komunikasi, sikap dan perilaku, kurangnya rasa kasih *(lack of compassion)* serta sikap kurang peduli (*uncaring)*.

Tujuan penelitian ini adalah menyusun model keselamatan pasien berbasis *caring* dalam keperawatan sebagai upaya mengurangi *adverse event* di Rumah Sakit Umum Daerah Kabupaten Lombok Timur dan Rumah Sakit Umum Daerah Kabupaten Lombok Barat. Konsep model tersebut mengacu kepada *Swanson's Caring Theory* dan *International Patient Safety Goals* dari JCI. *Swanson's Caring* terdiri atas 1) *maintaining belief;* 2) *knowing;* 3) *being with;* 4) *doing for;* 5) *enabling* (Caroline, 2011). *International patient safety goals* atau Sasaran Keselamatan Pasien (SKP) dari *Joint Commossion International* (JCI, 2011) merupakan variabel keselamatan pasien terdiri atas: 1) ketepatan dalam identifikasi pasien; 2) komunikasi yang efektif; 3) terjaminnya tepat lokasi, tepat prosedur dan tepat pasien dalam tindakan operasi/tindakan invasif; 4) keamanan obat *high alert*; 5) pengurangan risiko infeksi nosokomial; 6) pengurangan risiko pasien jatuh.

Metode penelitian ini dirancang menjadi dua tahap yaitu tahap pertama eksplanasi *(explanatory research)* untuk menjelaskan hubungan kausal antara variabel karakteristik perawat dengan perilaku *caring* dan sasaran keselamatan pasien berdasarkan jawaban responden. Isu strategis yang dihasilkan dari tahap *explanatory research* ini dibahas dalam *focus group discussion* (FGD) dengan melibatkan pakar untuk menyusun Model Keselamatan Pasien Berbasis *Caring.* Tahap kedua adalah eksperimen dalam bentuk pelatihan untuk penerapan model keselamatan pasien berbasis *caring* dalam asuhan keperawatan di ruang rawat inap dan menganalisis pengaruhnya terhadap penurunan *adverse event (AE)* .yang terdiri atas *medication error*, flebitis, dekubitus, infeksi daerah operasi dan risiko pasien jatuh sebagai indikator keselamatan pasien.

Populasi dalam penelitian ini adalah seluruh perawat dan pasien di semua unit rawat inap di Rumah Sakit Umum Daerah (RSUD) A di Kabupaten Lombok Barat dan RSUD B di Kabupaten Lombok Timur Propinsi Nusa Tenggara Barat (NTB). Unit rawat inap di RSUD A dan RSUD B berjumlah 16 unit. Kapasitas unit rawat inap yang tersedia adalah 342 tempat tidur. Tenaga perawat yang ada berjumlah 281 orang (Profil RSUD A dan RSUD B, 2013). Sampel adalah unit rawat inap yang memenuhi kriteria inklusi yaitu menerapkan manajemen asuhan keperawatan profesional dan merawat pasien dengan tindakan pembedahan/operasi. Besar sampel yang diperoleh dari RS A dan RS B pada tahap eksperimen berdasarkan ketentuan di atas adalah 8 orang kepala ruangan, 48 orang perawat pelaksana, sedangkan besar sampel pada tahap eksplanasi sebanyak 82. Variabel penelitian ini terdiri atas variabel indpenden dan variabel dependen beserta sub variabel yaitu Karakteristik Perawat, *Caring*, *Safety Caring Model,* Sasaran Keselamatan Pasien dan *Adverse Event*

Instrumen pengumpulan data terdiri atas kuesioner dan lembar *check list* yakni kuesioner *caring dimension inventory* (CDI), pedoman wawancara c*aring professional scale* (CPS), *carative factors* untuk meneliti pengetahuan perawat, kuesioner *International Patient Safety Goals,* lembar observasi *(check list) Norton Scale* untuk Dekubitus (*Decubitus Ulcer Rate*), *Vip Score (Visual Infusion Phlebitis Score)* untuk *Phlebitis, Southampton Scoring System* untuk Infeksi Daerah Operasi (IDO), *Morse Fall Scale* dan *Humpty Dumpty Scale* untuk risiko jatuh, dan NCC MERP indeks *for Categorizing Medication Error.*

Analisis data secara deskriptif untuk memperoleh gambaran mengenai karakteristik responden dan distribusi karakteristik perawat yaitu pengetahuan (X1), sikap (X2) dan pengalaman (X3) serta distribusi pelaksanaan *caring* (Y1) dan Y2 yaitu sasaran keselamatan pasien (SKP). Metode analisis *partial least square* (PLS) yaitu analisis persamaan struktural berbasis varian yang secara simultan dapat melakukan pengujian model pengukuran sekaligus pengujian model struktural yang dilakukan menggunakan *software Smart*PLS.

Hasil dan kesimpulan penelitian. Nilai *outer loading* dan AVE > 0.5, nilai *composite reliability* 0. > 6 dan T statistik > 1,96 menunjukkan bahwa uji hipotesis adalah valid dan signifikans. Nilai uji R^2 adalah 0.490, maka dapat disimpulkan bahwa Model Keselamatan Pasien Berbasis *Caring* telah memenuhi persyaratan sebagai sebuah model yang baik.

Temuan baru yang dihasilkan adalah Model Keselamatan Pasien Berbasis *Caring* yang dinamakan Model *Safety Caring Model* (SCM). Komponen dari *caring* yang melandasi keselamatan pasien dalam pelaksanaan asuhan keperawatan dan pelaksanaan *caring* yang berorientasi serta memiliki indikator keselamatan pasien secara terukur dalam menurunkan AE membedakan SCM dengan model lain. Kontribusi SCM terhadap keilmuan yakni menambah dan melengkapi Bidang Ilmu Keperawatan, Manajemen Rumah Sakit *(Clinical Management)* dan Teori Manajemen Mutu .

Direkomendasikan untuk menggunakan Model Keselamatan Pasien Berbasis *Caring* sebagai salah upaya meningkatkan mutu pelayanan RS dan perlu penelitian lebih lanjut mengenai keselamatan pasien ditinjau dari *clinical pathway* keperawatan. Untuk Institusi Pendidikan Keperawatan perlu menambah muatan kurikulum tentang *caring* dan keselamatan pasien maupun keselamatan kerja bagi perawat

SUMMARY

MODEL OF PATIENT SAFETY BASED ON CARING AS EFFORTS TO REDUCE ADVERSE EVENT IN DISTRICT GENERAL HOSPITAL OF WEST AND EAST LOMBOK, WEST NUSA TENGGARA PROVINCE

Patient safety is one of the main components of the quality of hospital services but generally not meet the standards because 54.48% of all hospitals in Indonesia and 58.49 hospitals in the province of West Nusa Tenggara (NTB) has not met the accreditation standards and patient safety standards (MoH RI, 2012) Many problems of adverse event (AE) or unexpected events but not yet reported. WHO (2004) noted that based on the results of the study, 3.2% - 16.6% of patients experienced AE in hospitals. The same is delivered by the Department of Health and Human Services (Office of Inspector General) that a client who experienced adverse events and temporary harm events by 13.5% (Daniel, 2010). The patient satisfaction survey department of NTB and in some hospitals in Lombok in 2010, patient satisfaction with hospital services, especially nursing services was only 65% (RSUP NTB, 2011), lower than the minimum standard of patient satisfaction was 80% (Ministry of Health, 2010) , The problem of low rates of patient satisfaction is related to aspects of the attitudes and behavior as well as adherence to standard operating procedures and the conditions closely related to aspects of patient safety. It was in line with the Agency for Healthcare Research and Quality (AHRQ) that deliver research results in 2011 that almost 50% of complaints from clients related to communication, attitudes and behavior, lack of compassion and uncaring.

The purpose of this study was to develop a model-based patient safety caring in nursing as an effort to reduce adverse event (AE) at Hospital B in East Lombok district and hospital A in West Lombok, West Nusa Tenggara Province. The concept of the model refers to Swanson's Caring Theory and International Patient Safety Goals (IPSG) from JCI. Swanson's Caring consists of five (5) components, namely 1). maintaining belief; 2) knowing; 3) being with; 4) doing for; 5) enabling (Caroline, 2011). International patient safety goals (IPSG) from Joint Commossion International (JCI, 2011) was a hospital patient safety variables consist of: 1) accuracy in the identification of patients; 2) effective communication; 3) the right-location, right-procedure, right-patient surgery; 4) high drug safety alerts; 5) reduction in the risk of nosocomial infection; 6) reduction in the risk of patient falls

Methods this study was designed in two phases: the first explanation (esplanatory research) to explain the causal relationship between the variable characteristics caring nurses with the implementation of the targeted patient safety based on respondents' answers. Strategic issues resulting from phase explanatory research is discussed in the focus group discussion (FGD) with the involvement of experts to draw up Model-Based Patient Safety Caring. The second stage was an experiment in the form of implementation of the new model in nursing care in the inpatient unit and analyze the effects on reduction in adverse event (AE) which was composed of medication errors, phlebitis, pressure sores, infections operating area and the risk of patient falls as indicators of patient safety.

The population in this study was all nurses and patients in all inpatient units at Regional General Hospital (Hospital) in West Lombok A and Hospital B in East Lombok, West Nusa Tenggara. Inpatient units in hospitals A and Hospital B amounted to 16 units. Inpatient unit capacity available is 342 beds. There were nurses who totaled 281 people (Profile of Hospital A and Hospital B, 2013). Samples were

inpatient units that meet the inclusion criteria that apply professional nursing care management and care of patients with surgery / operation. Sample size obtained from hospital A and hospital B in the experimental stage were 8 peoples of head room, 48 nurses and sample size in the explanatory stage were 82. Variables of this study consisted of indpenden variables and the dependent variable and its sub variables were Characteristics of Nurse, Caring, Safety Caring Model, Patient Safety Goals and Adverse Event

Data collection instruments consisted of a questionnaire and checklist sheets namely questionnaire of caring dimension inventory (CDI), interview caring professional scale (CPS), carative factors to examine the knowledge of nurses, questionnaires International Patient Safety Goals, the observation sheet (check list) Norton Scale for pressure sores (Decubitus Ulcer Rate), Vip Score (Visual Infusion phlebitis Score) for phlebitis, Southampton Scoring System for Infectious Regional Operations, Morse Fall Scale and Humpty Dumpty Scale for fall risk, and NCC MERP index for categorizing Medication Error.

Descriptive analysis of the data to get a picture of the characteristics of respondents and distribution characteristics of nurses that is knowledge (X1), attitude (X2) and experience (X3) and the distribution of caring implementation (Y1) and Y2 is patient safety goals. The method of analysis partial least square (PLS) is a variant based analysis of structural equations that can simultaneously test the measurement model once the structural model testing performed using software SmartPLS. Results and conclusions of the study. Value of outer loading and AVE > 0.5, composite reliability values > 0.6 and T statistics > 1.96 indicates that the test of hypothesis was valid and significance. Value of goodness-of-fit R2 test was 0.490, it can be concluded that Safety Caring Model (SCM) has met the goodness-of-fit

The new findings generated was caring based patient safety safety model, called Safety Caring Model (SCM). Components of caring that underlying for patient safety in the implementation of nursing care and caring implementation oriented and has a measurable indicator of patient safety to reduce AE was distinguish SCM with other models.

Recommended for use Safety Caring Model as an effort to improve the quality of hospital services and the need for further research on the safety of patients in terms of clinical nursing pathway. For Nursing Education Institutions need to increase the curriculum of caring and patient safety as well as safety for nurses

ABSTRAK

Latar belakang. Keselamatan pasien merupakan komponen utama dari kualitas pelayanan rumah sakit tetapi secara umum belum memenuhi standar karena 54,48% rumah sakit di Indonesia dan 58,49 rumah sakit di Provinsi Nusa Tenggara Barat (NTB) belum memenuhi standar akreditasi dan standar keselamatan pasien (Kemenkes RI, 2012) sehingga banyak masalah *adverse event* (AE) tetapi belum dilaporkan seperti yang disampaikan WHO (2004) bahwa 3,2% - 16,6% pasien di rumah sakit mengalami AE. Kepuasan pasien terhadap layanan layanan keperawatan di rumah sakit hanya 65% (RSUP NTB, 2011), lebih rendah dari standar minimal (80%) dan hal itu berkaitan erat dengan aspek keselamatan pasien serta sekitar 50% keluhan klien berkaitan dengan komunikasi, sikap dan perilaku *uncaring.*

Tujuan penelitian ini adalah menyusun model keselamatan pasien berbasis *caring* dan menguji pengaruhnya terhadap penurunan *adverse event.*

Metode penelitian yang digunakan adalah eksplanasi *(esplanatory research)* untuk menjelaskan hubungan kausal antar variabel dan eksperimen berupa penerapan Model Keselamatan Berbasis *Caring* di ruang rawat inap dan menganalisis pengaruhnya terhadap penurunan *adverse event* (AE) .Populasi dalam penelitian ini adalah seluruh perawat dan pasien di semua unit rawat inap di Rumah Sakit A Kabupaten Lombok Barat dan RS B di Kabupaten Lombok Timur sebanyak 16 unit, 342 tempat tidur, 281 orang perawat. Besar sampel untuk tahap eksplanasi adalah 82 dan untuk tahap eksperimen 56. Analisis deskriptif dilakukan untuk memperoleh gambaran mengenai karakteristik responden dan distribusi frekwensi variabel. Metode analisis *partial least square* (PLS) untuk pengujian model pengukuran dan pengujian model struktural.

Hasil penelitian dan kesimpulan. Nilai *outer loading* dan AVE >0.5, nilai *composite reliability* >0. 6 dan T statistik > 1,96 menunjukkan bahwa uji hipotesis adalah valid dan signifikans. Nilai uji *goodness-of-fit* R^2 = 0.490, maka dapat disimpulkan bahwa Model Keselamatan Pasien Berbasis *Caring* telah memenuhi *goodness-of-fit*

Direkomendasikan untuk meningkatkan keselamatan pasien menggunakan Model Keselamatan Pasien Berbasis *Caring* dan kepada institusi pendidikan perlu manambah muatan kurikulum tentang *caring* dan *patient safety*. Penelitian ini perlu dilanjutkan dengan ruang lingkup yang lebih luas.

Kata kunci: Perawat, Caring, Model keselamatan pasien, Adverse event

ABSTRACT

Background. There were many adverse events in hospitals globally (3.2% - 16.6%), patient satisfaction with nursing care at the General Hospital of West Nusa Tenggara and the District General Hospital in Lombok is still low (65%) and about 50% of patients complaints related to communication, attitude and uncaring behavior. The issues are closely related to patient safety. **This study aimed** to develop a Model of Patient Safety Based on Caring and was tested its effect for reducing adverse events in District General Hospital of East and West Lombok.

The design of this study in first stage was explanatory research with descriptive and partial least square (PLS) analysis to formulate model of Patient Safety, while in second stage was used experimental method with risk reduction analysis to test its effect to reduce the adverse events. The population was nurses and patients in all inpatient units and sample size for first stage was 82 nurses and for the experimental phase of 60 nurses and 41 patients was drawn by simple random sampling. Data were collected by questionnaire and observation.

Results of descriptive research, all elements of caring more dominant (35% - 50%) categorized sufficient and less, except the elements knowing more (51.2%) were categorized good. Knowledge about caring majority (78%) considered good, while the attitude and experience 64% and 48% were categorized sufficient. All elements of patient safety more than 50% were categorized sufficient except the elements reduction in infection. PLS analysis, generating outer loading value and AVE value > 0.5, composite reliability value > 0. 6 and *t*- statistics > 1.96 indicates that the hypothesis test is valid and significance. R^2 value of caring was 0411 and Patient Safety was 0.490, the value of Q^2 was 0.700 indicated the model had proven to qualify goodness. From the risk reduction analysis had proven that adverse events decreased significance (35% - 45%).

Conclution and recomendation. It is concluded that Model of Patient Safety Based on Caring is a good model for reducing adverse event. It is recommended to implement this model on broader scope and services quality improvement more focused on patient safety. Educational institutions is recomended to increase caring and paient safety in curriculum safety to produce a double effect on the health sector.

*Keywords: Nurse, Caring, Model of Patient Safety, Adverse even*t