

THE RELATIONSHIP BETWEEN CARING NURSES AND NURSE COMPLIANCE IN IMPLEMENTING PREVENTION FOR PATIENTS AT RISK OF FALLING IN THE INPATIENT ROOM AT HOSPITAL X, SEMARANG CITY

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ABSTRACT

The incident of a patient falling which causes the patient to experience physical injury is one of the detrimental impacts on the patient. Caring nurses are needed in providing nursing services to patients where nurses increase their concern for patients in preventing the risk of falls. The aim of the research is to determine the relationship between caring nurses and nurses' compliance in implementing patient prevention at risk of falls in the Inpatient Room at Hospital X, Semarang City. Method: the research used a quantitative design with a cross sectional approach, the sample size was 60 people using purposive sampling technique. Data were collected using a questionnaire, analyzed using Spearman's Rang with a significance level of $p \text{ value} \leq 0.05$. The research results showed that caring data from nurses in the good category was 41 people (68.3%), compliance from nurses in the good category was 49 people (81.7%). The Spearman Rank test results obtained a $p \text{ value}$ of 0.000. This value is smaller than 0.05, which means there is a significant relationship between caring for nurses and nurses' compliance in implementing prevention for patients at risk of falls in the inpatient room at Hospital X, Semarang City. In conclusion, caring nurses and nurse compliance in preventing fall risk have a significant relationship, because caring nurses provide care directly and will respond to each patient's condition. The better the nurse's implementation of caring, the smaller the patient's risk of falling, as well as the nurse's compliance in assessing the risk of falling will prevent the occurrence of falls in patients.

Keywords: Caring; Compliance; Prevention; Patients; Risk of Falling

BACKGROUND

Patient safety is the hospital's main priority in providing health services to patients because it is related to the hospital's image and patient safety. The implementation of patient safety in hospitals is to prevent and reduce the occurrence of Patient Safety Incidents (IKP) in health services. (Departemen Kesehatan RI, 2008). Data in Indonesia recorded 197 cases of Near Injury Events (KNC), 330 cases of Unexpected Events (KTD) and 205 cases of Non-Injury Events (KTC), while incidents resulting in death were 29 cases, 9 cases of serious injury, 104 moderate injuries. cases, minor injury 132 cases and no injury 458 cases (Kemenkes, 2015). This makes the percentage of patient falls included in the top five medical incidents apart from medicine errors (Komariah, 2012). Implementation of patient safety programs in hospitals, with patient falls being an indicator of whether or not the implementation of this program is working. Hospitals have made efforts to reduce or prevent the incidence of patient falls and immediately act to reduce the risk of falls and reduce the risk of injury due to falls. (Fitriana, 2015)

Nurse compliance is the nurse's obedience to a predetermined goal (Bastable, 2016). Nurses' non-compliance in implementing the SOP for Prevention of Patient Fall Risk can increase the incidence of patient falls while being treated. According to the (World Health Organization in Vellyana & Budiarto, 2017) errors in identifying patients (for example, assessing the risk of falls) at the beginning of service will have an impact on service errors at the next stage. Research by (Setyarini, et al, 2013) regarding nurses' compliance with standard operational procedures to prevent patients from falling risk showed that almost all nurses were compliant in installing bed safety rails (96%). There is a study which concludes that the majority of nurses have implemented a fall patient management program well which includes screening, installing fall risk identification bracelets, educating patients and families about using educational leaflets, managing patients at risk of falling, handling and reporting incidents. Determination and policy of implementing procedures followed by supervision and monitoring ensures the implementation of the program. (Budiono, et al, 2014)

Nurses in providing nursing services to patients for the patient's security needs should apply the use of caring. Nurse behavior related to caring can be in the form of presence, affectionate touch and always listening to client complaints (Watson, 1994 in Potter 2009). The influence of caring can be demonstrated in the quality of nursing services provided by nurses to patients in nursing service practice. Caring appearance is important in increasing patient satisfaction with nursing services and avoiding patient liability (Laschinger, Gilbert & Smith, 2011). Caring nurses can

be realized in the form of actions with a caring attitude towards people, calming them, providing protection against harm, maintaining the dignity of other people. Caring behavior can be expressed as a feeling of providing security. (Duffy, 2009)

Based on the results of a preliminary study conducted at Hospital X Semarang City, data was found that six nurses did not comply with the SOP for preventing falls. This non-compliance with the implementation of fall risk prevention interventions, namely the inaccuracy of timing when assessing and implementing the patient's fall risk and not all nurses carrying out a fall risk assessment, both in the initial assessment and repeated assessments of patients so that patients who are at risk of falling do not use a fall risk label in the form of a sign. yellow bracelet. Researchers assume that the lack of caring nurses and the absence of media to remind patients of fall risk prevention resulted in the implementation of fall risk prevention not following the SOP. This is an example of nurses who do not care for patients in assessing the risk of falls which results in the nurse's inability to carry out assessments which will be detrimental to the patient.

METHOD

This type of research uses a quantitative design with a cross sectional approach, the sample size is 60 people using purposive sampling technique. Data were collected using a questionnaire, analyzed using Spearman's Rang with a significance level of $p \text{ value} \leq 0.05$.

RESULT

Univariate analysis in this study will describe the caring condition of nurses with nurses' compliance in implementing patient prevention at risk of falls in the inpatient ward of X Hospital, Semarang City.

Table 4.1 Frequency distribution of caring nurses.

Caring	Frequency	Percentage (%)
Good	41	68,3
Currently	15	25,0
Not enough	4	6,7
Total	60	100,0

Based on table 4.1 above, it is known that the majority of caring nurses in implementing prevention for patients at risk of falling are in the good category as many as 41 people (68.3%)

Table 4.2 Frequency distribution of nurse compliance

Compliance	Frequency	Percentage (%)
Good	49	81,7
Currently	8	13,3
Not enough	3	5,0
Total	60	100,0

Based on table 4.2 above, it is known that nurses' compliance in implementing prevention for patients at risk of falling was in the good category as many as 49 people (81.7%).

Table 4.3 Frequency distribution of the relationship between caring nurses and nurses' compliance in implementing prevention for patients at risk of falling

		Compliance			Total	<i>P</i> value
		Good	Currentl y	Not enough		
Caring	Good	40	1	0	41	,000
	Currently	8	7	0	15	
	Not enough	1	0	3	4	
Total		49	8	3	60	

Based on table 4.3, it is known that there were 40 respondents who had good caring and good obedience. The Spearman Rank test results obtained a p value of 0.000. This value is smaller than 0.05, which means that there is a significant relationship between caring for nurses and nurses' compliance in implementing prevention for patients at risk of falling in the inpatient room at Hospital X, Semarang City. This means that there is a significant relationship between caring for nurses and nurses' compliance in implementing prevention for patients at risk of falls in the inpatient room at Hospital X, Semarang City

Discussion

1. Caring Nurses in implementing prevention for patients at risk of falling

Based on the results of research on caring nurses in implementing prevention for patients at risk of falling in the inpatient ward at X Semarang Hospital, it is known that the majority of caring nurses in implementing prevention for patients at risk of falling are in the good category as many as 41 people (68.3%), caring in the moderate category is 15 people (25%), while caring nurses in the less category were 4 people (6.7%).

From the research results, it is known that nurses' caring when providing services to patients is in the good category. This result can be seen from statistical analysis as many as 41 people (68.3%) said that nurses' caring was in the good category. Nurses in improving service delivery to meet patient safety needs should apply caring. Caring nurses can help patients recover from illness, provide education about the illness they are suffering from, and build good relationships between nurses and patients. Caring nurses are able to create good communication in providing health services to patients, can provide a sense of comfort and security for patients. Caring forms of nurses in preventing the risk of falls are given to patients such as visiting and interacting with patients, introducing themselves to patients, listening to complaints, paying attention, accompanying, providing comfort, and involving families in patient care. This will make patients feel safer and more comfortable while receiving treatment at the hospital.

Caring is an action that aims to provide nursing care to patients and pay attention to patient emotions by providing a sense of security and safety to patients while receiving treatment in hospital. Natalina Rumapea et al., (2019) Forms of caring that nurses can provide to patients in providing Nursing care can take the form of presence, providing touch, listening to complaints, and understanding the patient. (Trisnawati, (2021)

Menurut Stuart & Laraia, (2005) dalam (Reni & Efendi, 2022) nurses' caring behavior towards patients can take the form of being an active listener, by patiently listening to patient complaints, motivating patients to express their positive or negative feelings as a strength they have, and explain the nurse's self-understanding of the patient's suffering.

The results of this research are also the same as the results of research by Edgar Ch. Q. Wuwung et al., (2020) stated that 53 nurses (58.9%) had good caring behavior because the nurses knew and knew the patient's family properly, were friendly, caring, empathetic, responsive and of course were always patient in caring for the patient. The results of this research are also in line with research by Trisnawati, (2021) which stated that the majority of nurses had good caring behavior, 43 people (68.3%). Nurses provide services quickly, precisely and if the patient needs information about their illness it is always explained well by the nurse. This makes patients and their families satisfied with the services provided by nurses.

2. Compliance in implementing patient fall risk prevention

Based on the research results, it is known that nurses' compliance in implementing prevention for patients with a fall risk was in the good category as many as 49 people (81.7%), in the medium category as many as 8 people (13.3%) and in the poor category as many as 3 people (5.0%). The research results show that nurses' compliance in implementing patient prevention measures against the risk of falling is in the good category. Fall risk assessment is part of the duties and responsibilities of nurses in carrying out identification related to patient fall risks, reporting and analyzing incidents which are part of nurses' compliance in carrying out Standard Operating Procedures (SOP) in hospitals. Nurses' compliance in carrying out falls risk assessments is demonstrated by the results of observations made by nurses such as carrying out good care, identifying fall risks in yellow, maintaining environmental safety, monitoring patient needs, providing education to prevent falls, accompanying patients to the bathroom, and re-assess the risk of falls every shift

This research is also in line with research by Nurhayati et al., (2020) which stated that nurses' compliance in implementing fall risk prevention was 36 people (81.8%). Nurses' compliance in preventing the risk of falls that can be done includes nurses wearing a fall risk identification bracelet, installing a yellow identification label, arranging the position of the bed and installing a patient safety fence, and installing a call bell within reach of the patient. In the research of Wijayanti et al., (2022) which showed that the majority of nurses had compliance with

fall risk management as many as 14 people (70%), this was a form of compliance with nurses' duties in carrying out fall risk assessments. The results of research by Nada Rizky Dwi Faridha & Milkhatun, (2020) showed that nurses' compliance in implementing fall prevention was 36 people (70.6%). Assessing patients at risk of falling is part of the duties and responsibilities of nurses. The patient's fall risk assessment is carried out from the moment the patient is admitted to the hospital until they are in the treatment room to identify any changes in the patient's condition, either in the form of worsening or improving conditions

3. Nurses' caring relationships are significantly related to nurses' compliance in implementing patient prevention at risk of falls

Based on the results of statistical tests using the Spearman Rank Test, a p value of 0.000 was obtained with a Rho value of 0.635. These results indicate that caring for nurses is significantly related to nurses' compliance in implementing patient prevention at risk of falls in the Inpatient Room of Hospital X, Semarang City. The results of this research are in line with research by Sri Lestari, (2020) which states that there is a significant relationship between nurses' caring behavior and compliance with fall risk prevention. These results indicate that good caring behavior will improve nurse compliance. On the other hand, if caring behavior is not good, then nurse compliance will also be poor.

This research is also in line with research by Youlanda Sari, (2023) which stated that 20 people (70.5%) of nurses had compliance in carrying out the SOP for fall risk. It is very important for nurses to assess the risk of falls so that the risk of injury to patients can be prevented. If a fall risk problem has been discovered, the nurse needs to take steps to prevent the risk of falling in accordance with standard procedures that have been prepared by the hospital. Providing education about the risk of falls by nurses to patients is very necessary to prevent patients from falling while receiving treatment in hospital. The research results of Sekartari et al., (2021) show that there is a difference in the level of nurses' compliance in carrying out fall risk reassessments before and after fall risk management education with the Wilcoxon test results showing that the Z value is -4.796 and a significance value of p-value = 0.000 is obtained. is smaller than the α value ($\alpha = 0.05$), then it is concluded that H1 is accepted and H0 is rejected. Based on the results of the research above, it is known that the relationship between caring nurses and nurses' compliance in implementing patient prevention at risk of falls in the Inpatient Room at Hospital X, Semarang City is relatively strong. This means that if the care provided by the nurse is good, the nurse's compliance will also be good. On the other hand, if the nurse's caring is not good, then the nurse's compliance will also be poor.

CONCLUSION

Caring nurses and nurse compliance in preventing fall risk have a significant relationship, The Spearman Rank test results obtained a p value of 0.000. This value is smaller than 0.05 so the hypothesis is accepted. This means that there is a significant relationship between nurse concern and nurse compliance in implementing patient prevention at risk of falls . Caring by nurses in preventing the risk of falls can be realized in the form of attention, empathy, listening to patient complaints and providing touch. The better the nurse's implementation of caring, the smaller the patient's risk of falling, as well as the nurse's compliance in assessing the risk of falls will prevent falls in patients.

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