



Factors Related to Nurse Respond Time on Handling of Emergency Patient in IGD Room at Sawerigading Hospital

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Keywords

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Abstract

The services of emergency patients play a very important role based on the principle of 'time saving is life saving'. This means that all actions taken during an emergency condition must be truly effective and efficient. This is reminiscent of the condition that people can lose their lives just in minutes. Response time depends on the speed available as well as the quality of providing assistance to save lives/prevent disability. There are many factors that influence nurses' response time which are education level, knowledge, length of work, and training. To know factors related to nurse-responded time on handling of emergency patient in IGD Room at Sawerigading Hospital. The research design used was cross-sectional analytic correlation. The respondents were all nurses implementing in IGD Room at Sawerigading Hospital. The population in this study were 31 nurses in IGD Room at Sawerigading Hospital and were selected using total sampling method. Data analysis used chi-square test. There is a long working relationship with nurse respond time on emergency patient handling (value $p = 0,014 < \alpha = 0,05$). There is no relationship of education with nurse time responder (value $p = 0,729 > \alpha = 0,05$). There is no relationship of gadar training with nurse respond time (value $p = 0,307 > \alpha = 0,05$). Factors related to nurse respond time on handling of emergency patient in IGD Room at Sawerigading Hospital that is long work. Therefore, the quality of service in the ER should also be improved through improvement efforts concerning with resources, facilities, procedures, services, and other technical aspects.

Introduction

Emergency handling is philosophy, which 'Time saving is Live Saving'. This means that all actions taken during an emergency condition must be truly effective and efficient. This is reminiscent of the condition that patients can lose their lives just in minutes. Stopping breath for 2-3 minutes in humans can cause fatal death (1). One indicator of the success for managing medicinal emergency patients is the speed of providing adequate assistance to emergency patients both in their daily routine and during disasters. The efficiency in the emergency room at Sawerigading Palopo Regional Hospital, which lack of response time was acknowledge from a number of patients who visited the emergency room. The claimed that when they arrived at the emergency room, they were not immediately served and let them arrive. The lack of nurse's time response time is caused by the rotation of nurse staffs who are not in accordance with their competence.

This significant amount then requires considerable attention to emergency patient services. The increasing number of patient visits which is not supported by an increase of infrastructure can affect the response time where patients have to wait to get a bed or stretch. While waiting for the bed, some patients sometimes choose to leave before being examined by a doctor (2). Emergency patient services are services that require immediate help, namely fast, precise and accurate to prevent death and disability, or emergency patient services play a very important role (remember: *time saving is life saving*) that time is life. Respond time service is a combination of response time when the patient arrives in front of the hospital door until he gets a response or response from the emergency room installation staff with the service time which is the time that the patient needs to complete. Respond time service can be calculated by counting minutes and is very influenced by various good things regarding the number of personnel and other supporting components such as laboratory, radiology, pharmacy, and administration services. With a measure of success, respond time is 5 minutes and the time is definitive ≤ 2 hours (3).

Respond time is said to be on time or not too late if the time required does not exceed the average standard time available. One indicator of the success of the medical emergency response of emergency patients is the speed of providing adequate assistance to emergency patients both in the daily routine or during a disaster. The success of response time highly depends on the available speed and the quality of providing help to save lives or prevent disability from the scene, on the way to hospital help (4).

Musliha (2010) suggested that internal and external factors that influence delays in handling emergency cases include patient characteristics, staff placement, stretcher availability and health workers, patient arrival time, management implementation and selected examination, and treatment strategies. This can be a consideration in determining the concept of responding to handling cases in a hospital emergency room.

According to Ilyas (2009), health workers, especially nurses, where the analysis of workload can be seen from aspects such as tasks carried out based on its main function, as well as additional tasks are done the number of patients who must be treated, their work capacity in accordance with the education he get, work time used to do the work in accordance with the working hours that take place every day, as well as complete facilities that can help nurses complete their work properly. The increase in the number of visits without the addition of personnel and with the assignment of delegates or overflowing authority. The nurses were carried out too much so that the nurses' workload would increase which resulted in a decrease in the respondent's response time. This causes the patient's family to complain because the patient is not given immediate action or being ignored by the nurse (5).

The speed and accuracy of the assistance provided to patients who come to the emergency room require a standard in accordance with their competence and ability, so that they can guarantee an emergency treatment with fast response time and appropriate handling. This can be achieved by improving facilities, infrastructure, human resources and hospital emergency management according to standards (2).

Girsang's (2012) study of factors related to response times of health workers concluded 67.5% of respondents stated that their duties in emergency areas felt the burden was heavier than the officers in other work unit/units. There are 80.0% of respondents said supporting facilities and facilities are available in the medium category, because there are still facilities and equipment that are below of the standard number and quality, while 77.5% of respondents stated that the standard service procedure is in the medium category because the task and field recognition orientation for new officers has been done, regular meetings between all medical personnel, as well as discipline for work time.

As the spearhead in hospital nursing services, the ED must serve all cases that enter the hospital. With the complexity of work in such a way, the nurse in charge in this room is required to have more skills than the nurse who serves patients in another room. The role of the emergency nurse is as a nursing care provider. This role can be performed by nurses by taking into account the state of human basic needs needed through providing nursing services as well as coordinators. This role is exercised by directing, planning and organizing health services from the health team so that health care providers can be directed and in accordance with patient needs and collaborate with other health teams. If the nurse and other health team neglect the response time, it will result in death. Based on 2016 data from the Hospital of Sawerigading Hospital in Palopo City, the number of nurses in the Emergency Room (IGD) room were 31 patients, in which 10 civil servants and 21 non-PNS students were educated, worked long, and nurse training was different. Data on patient visits in the ED from October to December 2016 received 2,585 patients. Based on the results of observations conducted by researchers for 2 weeks in the emergency room at Sawerigading Regional Hospital, the respondent's response time when the patient arrived in the room was still insufficient. Therefore, the researcher was interested in examining the factors related to nurses' response time in the handling of emergency patients in the emergency room of Sawerigading Regional Hospital, Palopo City.

Method

The research design in this study is a cross-sectional study which is an analytical research design that aims to determine the factors associated with nurses' response time in the handling of emergency patients in the emergency room of Sawerigading Regional Hospital in Palopo City identified in one unit of time. This research was carried out in the Emergency Room of Sawerigading Palopo Hospital during March – June period in 2017. The population in this study were 31 nurses in the ER Room of RSUD Sawerigading Palopo. In this study, the samples were taken using total sampling, namely the number of samples taken were the same as the number of existing populations.

Data analysis used/employed computerized system SPSS version 23 and processed using chi-square. Test statistical test, the hypothesis is accepted with a significance level ρ - value $<$, 05 (there is a

relationship).

Results

The number of respondents who fulfilled the requirements as a sample of the study was 31 respondents. The presentation of the respondent's characteristics will be described in the general data covering the respondent's age, gender, employment status and marital status.

Table 1 Distribution of Respondents by Age

NO	Characteristics of Respondents	frequency	Percentage (%)
1	Age		
	23-30 year	17	54,8
	> 30 year	14	45,2
2	Gender		
	Man	12	38,7
	Women	19	61,3
3	Employment status		
	PNS	10	32,3
	Volunteer	21	67,7
4	Marital status		
	Marriage	16	51,6
	Single	15	48,4
5	length of work		
	Long	19	61,3
	New	12	38,7
6	Education		
	Profession	17	54,8
	Vocation	14	45,2
7	Emergency training		
	Advanced	13	41,9
	Basic	18	58,1
8	Nurse Response Time		
	Fast	22	71
	Slow	9	29

Source: 2017 Primary Data

b. Bivariate analysis

1) Duration of Relationship with Nurse Time Respondents.

Table 2 Relationship between Work Duration and Respondent Time of Nurse in Handling Emergency Patients

Old work	Nurse Response Time				Total		ρ
	Fast		Low		F	%	
	F	%	f	%	F	%	
Long	17	54,8	2	6,5	19	61,3	0,014
New	5	16,1	7	22,6	12	38,7	
Total	22	71	9	29	31	100	

Source: 2017 Primary Data

2) Education Relationship with Nurse Time Respondents

Table 3 Education Relationship with Respond Time Nurses in Handling Emergency Patients in the

Education	Emergency Room						ρ
	Nurse Response Time						
	Fast		Low		Total		
	F	%	F	%	F	%	
Profession	13	41,9	4	12,9	17	54,8	0,729
Vocation	9	29	5	16,1	14	45,2	
Total	22	71	9	29	31	100	

Source: 2017 Primary Data

3) The Relationship of Mindfulness Training with Nurse Time Respond

Table 4. The Relationship of Gadar Training with Respond Time for Nurses in Handling Emergency Patients

Emergency training	Nurse Response Time						ρ
	Fast		Low		Total		
	F	%	F	%	f	%	
Advanced	11	35,5	2	6,5	13	41,9	0,307
Basic	11	35,5	7	22,6	18	58,1	
Total	22	71	9	29	31	100	

Source: 2017 Primary Data

Discussion

1. Relationship between working duration and nurse's response time

The results showed that of the 31 respondents surveyed, 19 of whom had a long working period (61.3%), including 17 people (54.8%) had a quick response time and 2 people (6.5%) had respond time is slow. While the respondents whose working period was still new were 12 people (38.7%), of whom there were 5 people (16.1%) had a quick response time and 7 people (22.6%) had a slow response time. From the results of chi-square test analysis obtained the value of $\rho = 0.014 < \alpha = 0.05$, meaning that H_a is accepted and H_0 is rejected, so that it can be said that there is a relationship between the length of work and the respond time of the nurse in the handling of emergency patients in the Emergency Room of Sawerigading Hospital Palopo in 2017. The experience and working period factors of nurses indirectly influence the implementation of respond time. According to Nursalam, the longer working period that the nurse has the more experienced the nurse to provide care in accordance with applicable standards or procedures. The duration of work of nurses in a hospital is mostly in line with high productivity. This is supported by the theory of Robbins that argues that people who have been in a job longer are more productive and highly motivated than those with lower seniority (6).

The work period is related to experience related to one's performance. The period of work determines a person in carrying out a task, the longer a person works more skillfully and the faster he/she completes the task, so the length of work will provide the experience of the nurse to hone his skills. Senior nurses are also considered more experienced in handling problems that occur in the field and it is a strong predictor of commitment and job satisfaction, so that directly or not will affect the nurses' performance. This reflects that senior nurses are seen as having a broader knowledge of the organization's operations, as well as having stronger commitment and loyalty, so that they are expected to have higher compliance and willingness.

Compared to younger ones, for a nurse, the clinical experience that has been passed is an empirical learning process in improving his skills, so that it has an impact on improving the quality of services provided. This statement refers to Gillies that the longer a person goes through the work period the better his performance. The results of this study are also line with the research conducted by Ahmad Faizin and Winarsih concerning the Relationship between Education Levels and Nurses' Working Time with Nurse Performance in Pandan Arang General Hospital, Boyolali Regency (7). Stating the existence of a relationship between length of work and nurse performance. The result of this study is supported also by Wahyudi who shows that these performance of hospital nurses has a meaningful relationship with work experience in year (7). According to the assumption of the researcher, there were still respondents with long working periods but had an inappropriate response time. This happens because longer work experience does not guarantee that senior nurses will respond more precisely to time compared to junior nurses, this is greatly influenced by the ability to develop their competence by the development stages of

nursing science and technology and the supervision and supervision system of nurse compliance and the application of nursing care standards.

2. Education relationship with nurse's response time.

The results showed that of the 31 respondents studied, 17 of them were professional nurse educators (54.8%), of whom 13 (41.9%) had responding fast time, and 4 people (12.9%) had a response slow time. While 14 respondents (45.2%) had vocational nurse education, 9 of whom (29%) had a quick response time and 5 (16.1%) had a slow response time. From the results of chi-square test analysis obtained the value of $p = 0.729 > \alpha = 0.05$, meaning that H_a is rejected and H_0 is accepted, so that it can be said that there is no educational relationship with the respond time of the nurse at emergency patient handling in the Emergency Room of Sawerigading Regional Hospital Palopo City in 2017.

Education influences individual thinking patterns. Whereas the thinking pattern influences a person's behavior, in other words the mindset of someone with a low education will be different from the mindset of someone who is highly educated. Logically, the level of education of a person will be closely related to other abilities, also indirectly will affect a nurse in acting, thinking, and behaving. The breadth of insight and knowledge gained during the education process greatly determines how a nurse works (Asmadi, 2011). Education not only adds knowledge in carrying out tasks but also, the basis for developing themselves and the ability to use the facilities that are around us. In addition, the level of education greatly affects a person's personality, with education someone will broaden his horizons, knowledge, and skills so that he is able to deal with problems faced in his profession (8).

However, in this study it turned out that the level of education was not related to nurses' response time in handling emergency patients. This is because of the supporting factors, namely the awareness and willingness of nurses to respond precisely to the time. Awareness is a motivation that arises from within a person that is not caused by coercion from others. This can foster behaviors that can meet one's needs so that the person feels satisfied. This motivation does not need external stimulation, because it already exists from one's conscience, so that it can meet needs and self-satisfaction. Those who are motivated will act to do their work from their inner self not because of outside exposure such as gifts, salaries and pressure (9). In addition, formal institutions of education do not teach the learning process in an increase in real will. Willingness is a basic inner drive that is higher than instinct, reflex, automatism, craving, habits, tendencies and lust. It is this willingness that causes arousal arising from the conscious world to consider the mind and the feelings and the whole person, so as to lead to activities aimed at achieving certain goals related to the needs of his personal life. This gives the conclusion that the desire and awareness come from the personal process of someone. Willingness and awareness cannot be learned from formal institutions such as schools and colleges. This is what these nurses might have. Although their level of education varies, the implementation of nurses' response time is mostly in the right category.

The results of this study are in line with the research of Diwa Agus Sudrajat with the title Relationship between Characteristics and Knowledge of Nurses Implementing the Legal Aspects of Nursing Practices with the Fulfillment of Patient Rights in Jakarta Islamic Hospital Pondok Kopi (10). Statistical test results obtained $p\text{-value} = 0.302$ ($p\text{ value} > \alpha = 0.05$) showing that there is no significant relationship between the level of education of implementing nurses with the fulfillment of patient rights. According to the assumption of the researcher, there is no significant relationship between nurse education and nurses' time response to the handling of emergency patients can be influenced by other factors. This situation depends on the motivation of the nurse in practicing the work skills gained from her education. Many factors influence work performance. These factors include: ability factors and motivational factors. Motivation is the will or desire that always encourages a person to take action.

3. Relationship between training and response time of nurses

The results showed that of the 31 respondents surveyed, 13 of them received advanced training (41.9%), 11 (35.5%) of them had a quick response time, and 2 (6.5%) had slow time respond. Meanwhile, the respondents who received basic gadar training were 18 people (58.1%), of whom 11 (35.5%) had a quick response time and 7 people (22.6%) had a slow response time. From the results of chi-square test analysis obtained the value of $p = 0.307 > \alpha = 0.05$, meaning that H_a is rejected and H_0 is accepted so that it can be said that there is no relationship between gadar training with respond time of nurses in emergency patient handling in the Emergency Room of Sawerigading Regional Hospital in Palopo City 2017.

Based on the results of statistical tests showed that there was no significant relationship between nurse training and nurses' time response to the handling of emergency patients. It happened because the abilities obtained by nurses from training cannot be practiced properly because they are not supported by existing infrastructure or the environment. Based on the research of Yoon et al, (2013) on the analysis of factors that influence the length of response time at the Emergency Room (11), it was found that internal and external factors that affect the delay in handling emergency cases include the availability of stretchers. There are several factors that need to be considered and play a role in training, including the accuracy and suitability of facilities (12). The results of this study are not in line with the research conducted by Lontoh

(2013) on the effect of basic life assistance theory training on the knowledge of cardiac pulmonary resuscitation stating that there is a relationship between training and knowledge (13).

According to the assumption of the researcher, there was no relationship between the gadar training and the respondent's time response to the handling of the emergency patient in the Emergency Room of Sawerigading City Hospital. Palopo can be caused by several factors that need to be considered and play a role in training including the accuracy and suitability of facilities.

Conclusion and Suggestion

Based on the results of data analysis and discussion of the results of research Factors Associated with Respond Time Nurses in Handling Emergency Patients in the Emergency Room of Sawerigading Regional Hospital it can be concluded that;

1. There is a relationship between the length of work and the respond time of the nurse in the handling of emergency patients in the Emergency Room of Sawerigading Hospital at Palopo in 2017.
2. There is no educational relationship with nurses' response time on emergency patient handling in the Emergency Room of Sawerigading Hospital at Palopo in 2017.
3. There is no relationship between gadar training and respondent's time response to emergency patient handling in the Emergency Room of Sawerigading Hospital at Palopo in 2017.

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