

Knowledge, Attitudes Of Nurses With Implementation Of Patient Safety In Undata General Hospital Of Central Sulawesi Province

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ABSTRACT: The American Hospital Association (AHA) Board of Trustees stated that patient safety is a strategic priority. In 2004, the World Health Organization (WHO) launched the World Alliance for Patient Safety, a joint program with various countries to improve patient safety in hospitals. **The purpose** of this study is to know the relationship between knowledge and attitudes of nurses with the implementation of patient safety in Undata General Hospital of Central Sulawesi Province. **The type** of this research is quantitative with cross sectional approach-based analytical design. The population in this study was the team leaders and implementing nurses in the rooms of Teratai and Catelia pavilions as many as 52 people. **The results** of Chi Square test with a confidence level of 95% showed the result of statistical test on the knowledge of nurses concerning the implementation of patient safety was $p=0.021$ (p value <0.05) and the result of statistical test on the attitudes of nurses concerning the implementation of patient safety was $p=0.025$ (p value < 0.05). **The conclusion** obtained is that there is a relationship between knowledge and attitude of nurses with the implementation of patient safety in Inpatient Wards of Central Sulawesi Province's Undata General Hospital. The hospital is expected to continuously carry out socialization, organizing better in-depth training on the concept of patient safety by emphasizing the importance of the patient safety system.

Keywords: -Knowledge, Attitude, Nurse, Patient Safety

I. INTRODUCTION

The American Hospital Association (AHA) Board of Trustees identified that patient safety is a strategic priority. A report from the Institute of Medicine stated that there were around 3-16% of adverse events in the service of inpatients in hospitals. WHO launched the World Alliance for Patient Safety, a joint program with various countries to improve patient safety in hospitals. Patients, as the users of health services, have the right to obtain security and safety for themselves while in the hospitals [1]. But there are aspects that also affect the quality of services in a hospital, and it should be a big concern for the hospital as a service provider. Those aspects are patient safety. Patients not only need quality services but also an assuring condition in which the services provided are safe and do not endanger themselves [2].

One of the patient safety cultures is communicating mistakes, reporting errors by sticking to patient safety and learning from mistakes and redesigning a better patient safety system. To solve the occurring problems, an idea of a proactive analysis system was initiated as a strategy to prevent errors. Safety culture is the dominant factor in the effort to succeed in safety and the key to realize quality and safe services. Almost every medical action holds potential risks. The large types of drugs, examinations and procedures, as well as the large number of patients and hospital staffs are potential factors for the occurrence of medical errors. The occurring errors in the process of medical treatment will result in or potentially cause injury to the patient, it can be in the form of Near Miss or Adverse Events [3].

Undata General Hospital of Central Sulawesi Province is a government-owned hospital. It is a top referral hospital or central hospital which getting a Perfect Pass accreditation for Type B Education hospital. This hospital is able to provide specialist and limited subspecialist medical services. This hospital also accommodates referral services from district hospitals. Preliminary studies conducted in Inpatient Wards of Central Sulawesi Province's Undata General Hospital on 29 April to 10 May 2016 found the number of nurses in catalia ward was 26 people, and the number of nurses in teratai ward was 28 people. As the results of interview with ward chiefs and team leaders, in terms of knowledge about patient safety, the respondents stated that: patient safety is to save patients from adverse events, two respondents stated to maintain patient safety at the hospital, three respondents stated patient safety is the safety of a patient while being treated at the hospital and it must be identified first. In terms of patient safety goals: they stated that it is to avoid unwanted things to happen in order to ensure the patient's condition is safe, but the three respondents have not yet mentioned the overall objectives of patient safety.

Whereas in terms of attitude: one respondent stated that he/she had begun to implement even though not as a whole yet, two people stated that they had tried to perform but sometimes forgot the way to implement it, the others stated that they had started to improve but there were those who still did not carry it out due to the lack of understanding, so that continuous socialization is needed.

II. RESEARCH METODHS

2.1 Operational Definition and Objective Criteria

2.1.1 Knowledge is everything that is known, understood and applied by nurses starting from the understanding of the goals and objectives of patient safety regarding the implementation of patient safety in Undata General Hospital. The knowledge falls into 'good' category if the score of respondents' answer is > 76%.

2.1.2 Attitude is the response of acceptance given by nurses in the implementation of patient safety in Undata General Hospital. The attitude falls into 'good' category if the score of respondents' answer is > 76%.

2.1.3 Implementation of patient safety is an effort carried out by responsible nurses related to the implementation of patient safety in Undata General Hospital. Implemented if the answer score is 100.

2.2 Data Collection Techniques

Data was collected by giving questionnaires to research respondents. The questionnaire in this study consisted of: Knowledge questionnaires using 6 points (32 question items) based on gutmen scale, correct answer was given a score of 2 and wrong answer was given a score of 1. Attitude questionnaires consisted of 15 statements based on Likert scale, the answer choices are SS = Strongly Agree, S = Agree, TS = Disagree, STS = Strongly Disagree. Scoring for respondents' answers was: given a score of 4 if answering SS, score 3 if answering S, score 2 if answering TS and score 1 if answering STS. The patient safety implementation questionnaires consisted of 5 questions using the checklist sheet, observation techniques were done according to the answers of the nurses related to their activity in the room.

III. RESULTS

3.1 Relationship between Level of Knowledge and Implementation of Patient Safety

Data collection was carried out for 10 days in Inpatient Wards, namely Teratai Ward and Catelia Ward of Central Sulawesi Province's Undata General Hospital. Data collection used the technique of filling out questionnaires and observation sheets. This study used chi square test with 95% confidence level. The results of the research, according to the data collected, are presented in table 1.

Table 1. Relationship between Knowledge and Implementation of Patient Safety in Inpatient Wards of Central Sulawesi Province's Undata General Hospital

Level of Knowledge	Implementation of <i>Patient Safety</i>				Total		<i>p value</i>
	Not Implemented		Implemented		f	%	
	f	%	f	%			
Lacking	4	80	1	20	5	100	0.021
Good	11	23.4	36	76.6	47	100	
Total	15	28.8	37	71.2	52	100	

Table 1 shows that 80% (4 people) of respondents with lack of knowledge and 23.4% (11 people) of respondents with good knowledge did not implement patient safety. If analyzed based on the percentage, there were more respondents with lack of knowledge who did not implement patient safety than those with good

knowledge. The statistical test results obtained $p=0.021$ (p value < 0.05), so that H_a is accepted. It means that there is a significant relationship between the level of knowledge and the implementation of patient safety.

3.2 Relationship between Attitudes and Implementation of Patient Safety

Table 2. Relationship between Attitudes and Implementation of Patient Safety in Inpatient Wards of Central Sulawesi Province's Undata General Hospital

Attitudes	Implementation of Patient Safety				Total		<i>p value</i>
	Not Implemented		Implemented		f	%	
	F	%	f	%			
Lacking	7	58.3%	5	41.7%	12	100	0.025
Good	8	20.0%	32	80.0%	40	100	
Total	15	28.8	37	71.2	52	100	

Table 2 shows that 58.3% (7 people) of respondents with lack of good attitudes and 20.0% (8 people) of respondents with good attitudes did not implement patient safety. If analyzed based on the percentage, there were more respondents with lack of good attitudes who did not implement patient safety than those with good attitudes. The statistical test results obtained $p=0.025$ (p value < 0.05), so that H_a is accepted. It means that there is a significant relationship between the attitudes and the implementation of patient safety.

IV. DISCUSSIONS

4.1 Relationship between Knowledge and Implementation of Patient Safety in Inpatient Wards of Central Sulawesi Province's Undata General Hospital

Table 1 shows that the knowledge of nurses regarding patient safety in inpatient wards was already good, as shown by the results of the study, in which the knowledge of each respondent has been good with a total of 76.6%. The results of the statistical test using the chi square test obtained the value of $p=0.021$ (p value < 0.05), which means that there is a significant relationship between the level of knowledge and the implementation of patient safety.

The results of the study showed that, out of 52 respondents, only 5 people (9.6%) had low knowledge about patient safety. Knowledge is an important factor for someone in making a decision, but someone's knowledge cannot always avoid them from the occurrence of adverse events. For example, a nurse who has a good knowledge does not always carry out patient safety properly because all actions that will be taken are at risk of errors.

Based on the results of observation, such condition was influenced by the compliance of a nurse with the Standard Operating Procedure (SOP) that had been given, leadership role of the leader (Head of Hospital Nursing Division) who continued to monitor and evaluate the actions taken by each implementing nurse, as well as good communication between the ward chief and implementing nurses and also among the implementing nurses in each inpatient ward.

Knowledge is the result of "knowing" and it happens after someone has sensed a certain object. Knowledge is the dominant thing that is very important in the formation of one's actions. According to the experience of several studies, it turns out that actions which are not based on a good knowledge will not produce good results [4]. Knowledge is obtained from a collection of information that is systematically connected to each other, so that it has a meaning. Information obtained from data that has been processed (sorted, analyzed and displayed in a form that can be communicated through words, graphics or tables), so that it has meaning. Furthermore, this data will be owned by someone and will be stored in the neurons (becoming a memory) of their brain.

In accordance with previous research by Bawelle [5], there is a relationship between knowledge of nurses and the implementation of patient safety in inpatient wards of Tahuna City's Liun Kendage Hospital with ($p=0.014$). According to the research, knowledge is an important factor for someone in making a decision. The results of another study, which also concerning the relationship between knowledge of nurses and the application of JCI standards regarding patient safety by Ginting (2014), showed a significant relationship between those variables, namely knowledge of nurses and the application of JCI standards regarding patient safety with research results of $p=0.001$ [6].

4.2 Relationship between Attitudes and Implementation of Patient Safety in Inpatient Wards of Central Sulawesi Province's Undata General Hospital

The results of the study in Table 2 show that the attitudes of nurses related to patient safety in inpatient wards have been good, as shown by the results of the study where the attitudes of each respondent has been good with an overall number of 80.0%. The results of statistical test using the chi square test obtained the value of $p=0.025$ (p value < 0.05), which means that there is a significant relationship with the implementation of patient safety.

According to the analysis results, 80.0% of nurses have a good attitude towards the implementation of patient safety in the hospital. According to the researcher, there is a relationship between attitude and implementation of patient safety because it can be seen in the results of the study, in which less than half of the respondents or only 12 people (23.1%) had a good attitude regarding patient safety. Based on researcher' observation, this condition is influenced by the compliance and responsibility of each implementing nurse over the patient's safety itself.

An attitude does not necessarily manifest in an action (overt behavior) automatically. To actualize an attitude into a real action, it needs supporting factors or allowing conditions, among others is the facility [4]. According to Bogardus in Azwar, attitude is a kind of readiness to react to an object in certain ways. The readiness in question is a potential tendency to react in a certain way if an individual is faced with a stimulus that requires a response [7]. Allport in Azwar explained that attitude has 3 main components, namely: Belief in ideas and concepts of an object, emotional life or evaluation of an object, and a tendency to behave. These three components together form a total attitude. This complete attitude determination, including knowledge, thoughts, beliefs, and emotions, plays an important role [7].

Patient safety is a procedure or process in a hospital that provides safer patient services. It is influenced by the knowledge and application of the implementing nurses who prioritize the interests and safety of the patients. This patient safety procedure greatly guarantees quality improvement of a hospital because a hospital can be assumed to be good if the service for patient safety is also good [8]. The first step to improve quality services is safety, while the key to quality and safe services is by developing a patient safety culture [9]. According to Mitchell in Hughes, nurses are a key in developing quality through patient safety. The effort to build patient safety requires commitment which is influenced by knowledge of the nurses [9]. Nurses who have good knowledge of patient safety certainly have a good attitude in improving quality of health services. This is supported by Majid (2011) who argued that knowledge is the basis of attitude, while attitudes will lead to one's actions [10].

V. CONCLUSION AND RECOMMENDATIONS

A conclusion section must be included and should indicate clearly the advantages, limitations, and possible applications of the paper. Although a conclusion may review the main points of the paper, do not replicate the abstract as the conclusion. A conclusion might elaborate on the importance of the work or suggest applications and extensions. (10) This study concludes that there is a relationship between knowledge, attitudes and implementation of nurses with the implementation of patient safety in Central Sulawesi Province's Undata General Hospital, in which all of them fall into 'good' category. The hospital is expected to continuously carry out socialization, organizing better in-depth training on the concept of patient safety by emphasizing the importance of the patient safety system. In addition, the responsible nurses are expected to be able to apply the procedures of patient safety targets in accordance with the Operational Standards of the hospital.

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