

RINGKASAN

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Judul : Analisis Implementasi *Handover* Metode *Bedside* SBAR dengan Kepuasan Pasien dan Kepuasan Perawat di Graha Amerta RSUD Dr. Soetomo Surabaya

Pengembangan proses *handover* secara tradisional menjadi *bedside handover* SBAR oleh perawat masih belum terlaksana dengan optimal, hal ini penting untuk meningkatkan kepuasan pasien dan kepuasan perawat. Penerapan metode SBAR dalam *handover* dipengaruhi oleh pelaksanaan komunikasi efektif dan perilaku perawat (Shahid and Thomas, 2018). Namun, perawat masih ada yang kurang puas karena merasa terbebani dengan adanya penerapan *handover* metode *bedside* SBAR. Hal tersebut berdampak pada mutu pelayanan keperawatan yang mempengaruhi kepuasan pasien dalam menerima asuhan keperawatan (Lestari, Rizany and Setiawan, 2021). Kegiatan timbang terima dapat berjalan dengan lancar jika perawat telah menerapkan komunikasi efektif. Komunikasi efektif saat timbang terima adalah dengan menerapkan komunikasi SBAR (*Situation, Background, Assessment, Recommendation*) yakni komunikasi yang dilakukan dengan menggunakan alat yang logis untuk mengatur informasi sehingga dapat ditransfer kepada orang lain secara akurat dan efisien. (Muller, 2018). Berdasarkan hasil *Root Cause Analysis* (RCA) yang dilakukan di Australia, komunikasi menjadi salah satu kontributor teratas pada kesalahan medis yang berhubungan dengan kepuasan pasien (Marshall et al., 2019).

Berdasarkan hasil observasi di RSUD dr. Soetomo pada bulan Januari, perawat telah menerapkan *handover* menggunakan teknik SBAR namun belum ditemui teknik *bedside handover*. Perawat cenderung melakukan *handover* saat pergantian shift yang dilakukan di *nurse station* dan tidak di dekat pasien. Hasil studi pendahuluan menunjukkan bahwa pada tahun 2022, terjadi ketidaksesuaian identifikasi pasien saat timbang terima antar perawat karena tidak dilakukan disamping pasien tapi dilakukan di *nurse station*, dimana hal ini sebenarnya bisa dihindari apabila *bedside handover* dilakukan.

Desain penelitian ini yaitu korelasi dengan pendekatan *cross sectional*. Populasi penelitian yaitu seluruh pasien dalam satu bulan dan seluruh perawat di Instalasi Graha Amerta lantai 4 dan 5 RSUD Dr. Soetomo Surabaya sebanyak 300 pasien dan 52 perawat. Sampel diambil dengan tehnik *consecutive sampling* untuk

pasien sebanyak 40 responden dan tehnik *purposive sampling* untuk perawat sebanyak 40 responden. Data dikumpulkan dengan instrument kuesioner dan diuji secara univariate dan multivariate analisis.

Hasil penelitian menunjukkan bahwa Hasil uji statistik *Spearman Rho* didapatkan nilai $p = 0,006$ atau $p < 0,05$ dapat diartikan bahwa ada hubungan antara implementasi *handover* metode *bedside* SBAR terhadap kepuasan pasien. Hasil uji statistik *Spearman Rho* didapatkan nilai $p = 0,022$ atau $p < 0,05$ dapat diartikan bahwa ada hubungan antara implementasi *handover* metode *bedside* SBAR terhadap kepuasan perawat. Implementasi *handover* metode *bedside* SBAR yang optimal meningkatkan kepuasan pasien dan kepuasan perawat. Hasil penelitian ini sejalan dengan yang dilakukan oleh Dahm et al (2022) yang menunjukkan bahwa hasil bahwa responden yang digunakan sebanyak 16 orang yang dipilih dengan menggunakan metode penelitian kualitatif dengan hasil perubahan penting setelah intervensi termasuk pergeseran untuk melibatkan pasien dalam serah terima di samping tempat tidur, peningkatan komunikasi dan budaya tingkat bangsal, dan penurunan terkait dalam komplikasi yang didapat di rumah sakit yang dilaporkan.

Berdasarkan hasil penelitian diketahui bahwa dari 40 responden, sebagian besar yakni 85% telah melakukan implementasi *handover* metode *bedside* SBAR. Hanya sebagian kecil responden 15% yang tidak sesuai dalam melakukan implementasi *handover* metode *bedside* SBAR. Peneliti berpendapat adanya sebagian kecil implementasi yang tidak sesuai bisa berkaitan dengan kurangnya kepatuhan perawat, kurangnya pemahaman perawat yang bertugas, ada situasi yang mendesak sehingga tidak dapat dilakukan seperti kondisi kegawatdaruratan. Berdasarkan hasil penelitian diketahui bahwa dari 40 responden, sebagian besar yakni 25 responden atau 62,5% telah melakukan implementasi *handover* metode *bedside* SBAR serta mendapatkan tingkat kepuasan pasien dalam kategori sangat puas. Melalui pelaksanaan komunikasi SBAR dan bedside handover maka program keselamatan pasien akan dapat dilaksanakan dengan baik serta meningkatkan keterlibatan pasien dalam mengambil keputusan terkait kondisi penyakitnya secara *up to date*. Berdasarkan hasil penelitian diketahui juga bahwa dari 40 responden, sebagian besar yakni 27 responden atau 79,4% telah melakukan implementasi *handover* metode *bedside* SBAR serta memiliki kepuasan perawat dalam kategori tinggi.

SUMMARY

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Title : Analysis of the Implementation of the SBAR Bedside Handover

Method with Patient Satisfaction and Nurse Satisfaction at Graha Amerta RSUD

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The development of the traditional handover process into a SBAR bedside handover by nurses is still not implemented optimally, this is important to increase patient satisfaction and nurse satisfaction. The application of the SBAR method in handover is influenced by the implementation of effective communication and nurse behavior (Shahid and Thomas, 2018). However, there are still nurses who are dissatisfied because they feel burdened by the implementation of the SBAR bedside handover method. This has an impact on the quality of nursing services which influences patient satisfaction in receiving nursing care (Lestari, Rizany and Setiawan, 2021). Acceptance activities can run smoothly if nurses have implemented effective communication. Effective communication during consideration is by implementing SBAR (Situation, Background, Assessment, Recommendation) communication, namely communication that is carried out using logical tools to organize information so that it can be transferred to other people accurately and efficiently. (Muller, 2018). Based on the results of Root Cause Analysis (RCA) conducted in Australia, communication is one of the top contributors to medical errors related to patient satisfaction (Marshall et al., 2019).

Based on the results of observations at RSUD dr. Soetomo in January, nurses had implemented a handover using the SBAR technique but had not yet found a bedside handover technique. Nurses tend to carry out handovers during shift changes at the nurse station and not near the patient. The results of the preliminary study show that in 2022, there will be discrepancies in patient identification during weigh-ins between nurses because they are not carried out beside the patient but are carried out at the nurse station, where this could actually be avoided if bedside handovers were carried out.

The design of this research is correlation with a cross sectional approach. The research population was all patients in one month and all nurses at the Graha Amerta Installation on the 4th and 5th floors of Dr. Soetomo Surabaya as many as 300 patients and 52 nurses. Samples were taken using consecutive sampling technique for patients as many as 40 respondents and purposive sampling technique for nurses as many as 40 respondents. Data was collected using a questionnaire instrument and tested using univariate and multivariate analysis.

The research results showed that the Spearman Rho statistical test results obtained a value of $p = 0.006$ or $p < 0.05$, which means that there is a relationship between the implementation of the SBAR bedside handover method and patient satisfaction. The results of the Spearman Rho statistical test obtained a value of $p = 0.022$ or $p < 0.05$, which means that there is a relationship between the implementation of the SBAR bedside handover method and nurse satisfaction. The optimal implementation of the SBAR bedside handover method increases patient satisfaction and nurse satisfaction. The results of this study are in line with those carried out by Dahm et al (2022) which showed that the results used were 16 respondents who were selected using qualitative research methods with the results of important changes after the intervention including a shift to involving patients in handover at the bedside. , improved ward-level communication and culture, and an associated reduction in reported hospital-acquired complications.

Based on the research results, it is known that of the 40 respondents, the majority, namely 85%, have implemented the SBAR bedside handover method. Only a small percentage of respondents, 15%, were not suitable for implementing the SBAR bedside handover method. Researchers are of the opinion that a small number of inappropriate implementations could be related to a lack of nurse compliance, a lack of understanding of the nurses on duty, there are urgent situations that cannot be carried out, such as emergency conditions. Based on the research results, it is known that of the 40 respondents, the majority, namely 25 respondents or 62.5%, have implemented the SBAR bedside handover method and obtained a level of patient satisfaction in the very satisfied category. Through the implementation of SBAR communication and bedside handover, patient safety programs can be implemented well and increase patient involvement in making up-to-date decisions regarding their disease conditions. Based on the research results, it is also known that of the 40 respondents, the majority, namely 27 respondents or 79.4%, have implemented the SBAR bedside handover method and have nurse satisfaction in the high category.

BINA SEHAT PPNI