

Socialization And Education Of Patient Safety Goals For Nurses At Melati General Hospital Perbaungan

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Abstract. Patient safety is a global health concern, with the primary objective of preventing harm to patients and addressing unavoidable side effects. Key patient safety goals include effective patient assistance, clear communication, safe medication practices, ensuring accurate procedures and patient identification, minimizing infection risks, and reducing the likelihood of injury from falls. The Service Team at Melati General Hospital implemented a method to socialize these safety goals to nurses through lectures and interactive Q&A sessions. The results indicated a significant improvement in nurses' knowledge about patient safety goals, with a post-test increase to 94%. This enhanced understanding is expected to be applied in patient care, such as accurate patient identification, adherence to the five moments of hand hygiene, and further minimizing injury risks, thereby improving overall service quality.

Keywords: Education, Nurses, Patient Safety Goals

INTRODUCTION

1 Patient safety is a way to prevent events that have a negative impact on patients that can cause defects or complications [1], utilizing quality practices that produce optimal health services [2]. Patient safety has become a world issue in various countries [3], around 10-25% of inpatients experience patient safety injuries [4]. Patient safety is a health care discipline that occurs with the development of systems of care and increasing major patient hazards in health institutions. The aim is to avoid and reduce risks, errors and losses that occur to patients during the provision of health services [3].

In addition, the main goal of patient safety is to prevent preventable adverse events related to health services from occurring and to overcome unavoidable side effects [5]. It is critical to offer quality critical healthcare services. There is clear agreement that quality health services worldwide must be effective, people-centered and safe. For successful implementation of a patient safety approach, skilled care professionals, leadership capacity, clear policies, data to drive safety improvements and effective involvement of patients in their care are necessary [3].

5 Safety related to nursing care may originate from individual or system level factors, however, nurses are the main potential contributors to improving patient safety because they constitute the majority of health workers and work 24 hours next to the patient while the patient is being cared for [6]. The most common nursing errors in hospitals are falls, pressure

sores, infections, medication errors, documentation errors, and equipment injuries [7]. Failure to maintain patient safety significantly increases care costs, morbidity, and mortality [8].

An organizational and multidisciplinary approach, in which nurses play a fundamental mental role, is essential for patient safety. Nurses, the largest group of direct health care providers, are indispensable members of the health care system; therefore, they bear the responsibility of patient safety in hospitals. The implications of medical errors impact the health care system as a whole, including nursing professionals [9]. Socialization is an important thing that can increase the knowledge and skills of nurses in carrying out patient safety. Based on the analysis of the Service Team at the Melati Perbaungan General Hospital, it is important to provide outreach on patient safety targets using face-to-face methods for direct interaction.

METHODS

The method used is outreach to nurses at the Melati Perbaungan General Hospital regarding patient safety targets, in the following ways:

1. Observations of nurses regarding patient safety goals.
2. The socialization was carried out in the hall of the Melati Perbaungan General Hospital. Socialization of patient safety targets to nurses at the Melati Perbaungan General Hospital, this activity includes:

a. Stage I (Observation)

Observe nurses regarding patient safety goals. The findings, patient identification was less than optimal, meaning the nurse did not match the patient's identity with the bracelet used, at 5 moments of hand washing 80 - 100% of nurses said that sometimes they did not wash their hands in the 2 moments before touching the patient, and patients who were at risk of falling did not use it. fall risk bracelet.

b. Stage II (Licensing)

Write to the director of the Melati Perbaungan General Hospital regarding issues and outreach activities, write to the head of the inpatient room at the Melati Perbaungan General Hospital, regarding the time of the activity

c. Stage III (Socialization activities)

The socialization activity took place on Thursday, June 6 2024, at the Melati Perbaungan General Hospital hall.

The socialization activity was attended by 35 nurses, this activity could not be participated in by all inpatient ward nurses, because some of the nurses were on temporary shift in the ward.

RESULT AND DISCUSSION

The method used in this activity is lecture and question and answer to increase nurses' knowledge in implementing patient safety targets. The activity went smoothly with the main target being nurses in the inpatient ward at the Melati Perbaungan General Hospital. The preparation stage is a fairly long stage in order to obtain good results and this activity can run smoothly.

Based on the findings of young nurse students when conducting observations at the Melati Perbaungan General Hospital regarding patient safety, it was found that patient identification was less than optimal, meaning the nurses did not match the patient's identity with the bracelet used, the target was to reduce the risk of infection in the 5 moments of washing hands 80 - 100% of nurses said sometimes they don't wash their hands at 2 moments before touching the patient (before contact with the patient and before aseptic procedures), and patients who are at risk of falling do not use a fall risk bracelet. This is closely related to the lack of nurse compliance in carrying out patient safety.

Nurses' knowledge is dominant in the good category, this is because the Melati Perbaungan General Hospital carries out patient safety outreach and infection control every month by the hospital sector. Knowledge is dominant in the good category (pre-test 86% and post-test 94%) but implementation is not optimal, this can be related to nurses' non-compliance. The results of research related to Sinaga et al., (2021), show that the level of nurse compliance in washing hands reaches 20% - 40%. Nurse non-compliance in washing hands includes lack of knowledge, nurse motivation and nurse workload. The results of research by Agustin et al (2020) show that nurses' lack of compliance is due to not having practiced hand hygiene before contact with patients for the reason that nurses think the risk is small. The more often you do not perform hand hygiene moments, the risk of contamination to patients will increase. According to WHO 2016 in Indrayadi et al (2022), hand hygiene is the most important intervention to prevent HAIs (Healthcare-Associated Infections), but many health workers still do not comply with recommended hand hygiene procedures.

Astuti et al (2021) with efforts to prevent the risk of falls show that the majority of nurses do not take preventive measures even though the hospital has provided SOPs for measures to prevent falls in nursing care. There are many factors, including knowledge and skills in improving safety in care, availability of facilities such as the absence of bells for patients. Indrayadi et al (2022), the role of the head of the room also has an effect on the implementation of patient safety.

Activity Evaluation

Educational outreach activities on patient safety targets for nurses can be said to have run smoothly and well. Starting from this understanding of each individual, it is hoped that this can be implemented in patient nursing care in identifying patients correctly, reducing the risk of infection by complying with 5-moment hand washing and reducing the risk of injury by using a wrist bracelet (risk of falls), even better to improve quality. Melati Perbaungan General Hospital services.

CONCLUSION

Community service in the form of educational outreach activities on patient safety targets for nurses to increase knowledge with the aim of obedient nurses implementing it in nursing care for patients. There were 35 nurses who took part in this activity, this was because some of the nurses were on shift in the room. Post-test knowledge about patient safety, dominant knowledge is good. It is hoped that this understanding of each individual can then be implemented in patient nursing care in identifying patients correctly, reducing the risk of infection by complying with 5-moment hand washing and reducing the risk of patients falling by using a wrist bracelet (risk of falls), even better in order to improve the quality of service.

SUGGESTION

It is necessary to follow up on the implementation of patient safety in the room by the relevant departments, and there is a need for an active role for the head of the room in implementing patient safety targets.

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