# Nurse-patients Communication and Its Relation to Inpatients Satisfaction in Indonesia General Hospital at RSU Bina Kasih

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Keywords: Nurse, patients, communication, inpatients, satisfaction

Abstract: One of the things that affect patient satisfaction in hospital is nurse communication way. The purpose of this study is to determine the association of nurse communication in inpatient installation with patient satisfaction in Bina Kasih Hospital. This research conducted at Bina Kasih Hospital Inpatient Wards on January – April in 2018. The research is a mixed method. The sample used in the first phase was 100 inpatients, and in the second phase were 16 nurses who were divided into 2 FGDs and an in-depth interview with the Chairman of Bina Kasih Hospital Foundation. The results showed that the patient satisfaction at interaction communication stage has the lowest percentage stages (65% - 68%). The basic problem is the problem of assignment transfer between nurses, lack of knowledge about diagnosis, lack of local language skills, low caring level to patients and patient's family who indifferent toward the nurses, the work experience of nurses is still low which yielded to low self-confidence in giving services. It is recommended to Bina Kasih Hospital to evaluate and continuously improve the quality of communication through continuous communication training.

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## **1** INTRODUCTION

Satisfaction is the feeling of pleasure or disappointment of someone who emerges after comparing perceptions or impressions of the performance or outcome of a product and its expectations [Kotler, 2002].

Therapeutic communication is an interpersonal relationship between nurse and patient. It is then necessary for nurses to learn the best communication methods to reach the client's emotional experience [Stuart, 1998]. The results of the nurse communication survey of inpatients wards in RSU Bina Kasih General Hospital from October to December 2017 were 57% and the standard should be above 90%. This general purpose of the study aims is to determine the association of nurse communication with patient satisfaction at inpatient wards and specifically to identify the way of the nurse's communication manner in a general hospital

RSU Bina Kasih, and to analyze the nurse communication associated to patient satisfaction.

## 2 METHODS

This research study is a mixed method between quantitative research design and qualitative research designs with ultimately qualitative research design becomes as this study research priority.

### 2.1 The First Phase of Research

The design of quantitative data is cross-sectional and the data is to find the percentage of patient satisfaction to nurse communication in inpatient ward which will be presented in a frequency distribution table. The populations are all patients at RSU Bina Kasih inpatients ward around 150 patients per day in March 2018. The incidental sampling technique used is all patients who are being

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hospitalized in RSU Bina Kasih at the time of research and the research instrument is questionnaires.

## 2.2 The Second Phase of Research

The design of this phase is sequential explanatory that qualitative data is used to explain quantitative data. The sample of FGDs is nurses from RSU Bina Kasih inpatient ward with purposive sampling technique and homogenous sampling, and the total was 16 persons divided into 2 FGDs. The sample for the in-depth interview was the chairman of the RSU Bina Kasih Foundation. The main instrument research for this phase is the researcher supported with in-depth interview sheet and set topics for FGDs.

## **3 RESULTS**

## 3.1 Results of the First Phase

Table 1: The quality of the pre-interaction stage of nurse						
comm	unicatio	on				
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Nu.	Statement	Patient satisfaction	Frequency	%	
1.	Neatness and cleanliness of	not satisfied less	1	1	
S	nurse appearance	satisfied satisfied	$13 \\ 84$	13 84	
		very satisfied	2	2	ſ
2	Nurses are calm and able to	not satisfied less	2	2	
	control their feelings when	satisfied satisfied	23 73	23 73	
	meeting patients	very satisfied	2	2	
3	The nurse in completing the	not satisfied less	2	2	
	tool will be used	satisfied	23	23	-
	to perform the action	satisfied very	73 2	73 2	
		satisfied			

Table	2:	The	quality	of	the	interaction	stage	of	nurse
comm	unio	catior	1						

Nu.	Statement	Patient satisfaction	Frequency	%
1	The nurse	not satisfied	4	4
	greets and introduces	less satisfied satisfied	27	27
	himself when he first	very satisfied	68	68
	interacts with the		1	1
	patient/family			
2	Provide an	not satisfied	6	6
	opportunity for clients to	less satisfied satisfied	26	26
	describe their	very		
	opinions	satisfied	67	67
			1	1
3	Nurse	not satisfied	4	4
	attention listening	less satisfied satisfied very	29	29
1		satisfied	65	65
			2	2
4	The nurse asks me about my	not satisfied less satisfied	2	2
	readiness	satisfied	30	30
	before taking nursing action.	very satisfied	67	67
			1	1

Table	3:	The	quality	of	the	work	stage	of	nurse
comm	inic	ation							

Nu.	Statement	Patient satisfaction	Frequency	%
1.	The nurse	not satisfied	3	3
	explains	less satisfied		
	every action	satisfied	23	23
	to be	very		
	performed to	satisfied	73	73
	the patient			
	1		1	1
2	Nurses	not satisfied		
	explain and	less satisfied	0	0
	educate the	satisfied		
	patients and	very	36	36
	families about	satisfied		
	health		63	63
			1	1
3	The nurse	not satisfied	3	3
	offers help to	less satisfied		
	the patient	satisfied	24	24
	during	very		
	difficulty	satisfied	72	72
	announty		12	12
			1	1

Nu.	Statement	Patient	n	%
		satisfaction		
1.	The nurse asks the	not satisfied	2	2
	patient's	less satisfied	24	24
	circumstances after	satisfied	72	72
	the nursing action	very satisfied	2	2
2	The nurse reminds	not satisfied	0	0
	and notifies the	less satisfied	17	17
	patient if there is	satisfied	81	81
	any further	very satisfied	2	2
	investigation			
3	The nurse makes an	not satisfied	1	1
	agreement for the	less satisfied	22	22
	next meeting with	satisfied	75	75
	the patient (the	very satisfied	2	2
	place, time and			
	purpose already			
	discussed)			
4	The nurse greets the	not satisfied	1	1
	patient and family	less satisfied	15	15
	when leaving the	satisfied	82	82
	patient's room	very satisfied	2	2

Table 4: The quality of the termination stage of nurse communication

## 3.2 Result of the Second Phase

Table 5: Results of first FGDs (problems summed up)

Informant	Keywords	Category
Nurses	<ul> <li>less mastering</li> <li>doctor diagnosisless mastering</li> </ul>	Mastering the knowledge
?????	•local language	Mastering the local language
?????	•not all been told during transfer	Transfer assignment process
?????	•patient's family indifferent	The attitude of the patient's family
	•low caring level	Nurse behavior

Table 6: Results of second FGDs (problems summed u	e 6: Results of second FGDs (pr	oblems summed up)
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Informant	Keywords	Category
Nurses	•we less familiar	Mastering the
	aboutside effect	knowledge
	•not familiar with	
	the disease	
	•his	
	thrombocytehas been explainednot	
	satisfy	
?????	•from ERhas not	Transfer
	been	assignment
	explainedbeen	process

	transferred •complained abdominal discomfort from ERat here become hypertension	
?????	there is a nurse promise the doctor will come earliermeanwhile, the doctor comes late	Nurse behavior

Table 7: Results of in-depth interview

	Keywords	Category
The chairman of RSU Bina Kasih	<ul> <li>experience is relatively low</li> <li>maybe fairly educated</li> </ul>	Mastering the knowledge
Foundation	<ul> <li>must know some of the medicines</li> <li>good masteryshe will no doubt communicate</li> </ul>	

# 4 **DISCUSSIONS**

The nurses play an important role in the process of caring for the patients because, in terms of service time, the since nurses have the longest service time to the patients compared to the medical doctors. Medical doctors in charge of the patient who generally visits the patient at least once a day and the duration of the visit ranges from 5 to 10 minutes per patient.

One of the processes of inpatient nursing is communication. Good communication can improve patient's compliance in terms of treatment and nursing process. As well as having a significant role in the satisfaction of patient who treated, otherwise will reduce patient satisfaction [Hadi, 2013]

Based on the first phase research is showed that patient satisfaction on interaction communication stage has the lowest satisfaction percentage around 65% - 68%. And those result also the same with other researchers that the implementation of therapeutic communication of polyclinics nurses on orientation (interaction) stage is around 35% because of some of the nurses do the implementation of therapeutic communication while some of them none [Kusumo, 2016].

According to the books of Science Nurse Communication for Nursing Students that the orientation (interaction) stage is the beginning meeting with the patient which aims to validate the accuracy of the data and plans that have been made in accordance with the current state of the patient. In starting a relationship, the main task is to foster trust, acceptance. understanding and opened communication with patients [Nurhasanah, 2010]. Analysis result of nurse communication problems in table 5 to table 7 also caused by the nurse violation against the standards that have been determined by RSU Bina Kasih internal regulations about effective communication policy, giving information and policy, education and the provisions of communication the standards by National Accreditation Standard of Hospital, the First Edition 2017 [Hospital Accreditation Commission,2017].

The orientation (interaction) stage is the introductory stage between the nurse and the patient, by introducing themselves to the patient means that the nurse has been open to the patient and gives a comfortable impression of the services provided to the patient [Suryani, 2016]. With a good therapeutic communication at the orientation (interaction) stage, the nurse will find the easier way to dig outpatient complaints (Reference).

Good attitudes and behaviors by nurses can often cover deficiencies in terms of facilities and infrastructure [4] it agrees with the statement from the Chairman of RSU Bina Kasih Foundation "..in management concept, human resources are a power, include infrastructure, management system, yes but, yaa that human resources. Yea if we sort between hospital infrastructure, management, and human resources, of course, human resources have the greatest role, haaa..but, if we think more, among human resources has the greatest role..."

## 5 CONCLUSIONS

Patient satisfaction of nurse communication in RSU Bina Kasih inpatients ward is not in accordance with the standard that has been determined by the Decree of the Minister of Health of the Republic of Indonesia number 129/Menkes/SK/II/2008 about Minimal Standards Hospital Appendix II Description Minimum Service Standards Inpatient Services point 10 Inpatient Customer Satisfaction where the specified standard is  $\geq$  90%.

Interaction stage of nurse communication is becoming the main priority in this study as a source of problems to patient satisfaction. There is a relationship between the low quality of nurse communication relates to the low level of patient satisfaction and is often caused by:

- Less mastering and lack of knowledge of diagnosis, medical treatments among nurses in the hospital
- The assignment patient transfer done by nurses is not in accordance with RSU Bina Kasih standard operational procedure.
- Lack of nurses' confidence while communicating with patient or patient's family that makes hesitation during services
- Lack of experience or length of work, and nurse communication training in the hospital
- The increased quality of nurses' communication to patients will have an impact on the quality of hospital services and increased patient safety at in hospitals.

Based on conclusions above, it is advisable for nurses and hospital management to improve the attitudes and behavior of nurses, especially raising the level of awareness for communication to patients or families of patients in hospitals professionally, care about the rule of law, hospital accreditation standard about communication to patients, always improve the knowledge of the mostly founded diagnosis in hospital, and always make internal or external trainings about nurse communication regularly.

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