

# Turnitin Originality Report

Processed on: 25-Apr-2020 12:41 WIB  
ID: 1307338598  
Word Count: 1296  
Submitted: 1

Similarity Index

12%

## Similarity by Source

Internet Sources: 9%  
Publications: 0%  
Student Papers: 13%

Implementation of Patient Safety Programs in Dr. Ramelan Hospital, Surabaya By Suriana Suriana

5% match (student papers from 27-Nov-

2019)

[Submitted to Universitas Hasanuddin on 2019-11-27](#)

4% match (Internet from 17-Sep-2017)

<http://www.damaacademia.com/issue2-6.html>

3% match (student papers from 20-Nov-2018)

[Submitted to iGroup on 2018-11-20](#)

[Implementation of Patient Safety Programs in Dr. Ramelan Hospital, Surabaya Suriana](#) Health Polytechnic of Ministry of Health in Surabaya, Indonesia Abstract Based on Motivati Content Theory, the need will encourage someone to take action in order to achieve their needs. The fulfillment of the need will make a person satisfied, so that training is run on the basis of the needs will enable the achievement of results. The purpose of this study was to describe the [implementation of the patient safety program in Dr. Ramelan Hospital, Surabaya](#), Indonesia. The subjects of this descriptive study was 47 nurses in selected units, in Dr. Ramelan Hospital, Surabaya, Indonesia. Data analysis technique applied was descriptive statistic method that was frequency distribution. Based on the results of the study concluded that the [implementation of patient safety programs](#) by nurses in [Dr. Ramelan Hospital, Surabaya](#) still has not met expectations. Keywords: Nurses, Patient safety program I. INTRODUCTION Currently, the quality of health services has entered the era of patient safety, so patient safety is a top priority in hospital services (Depkes RI, 2006). Implementation of patient safety program can not be separated from the quality of nursing service as part of health professionals. The nursing services provided to the patient will be different if the nurse's level of ability is also different. Nursing competency level in Indonesia based on the formulation of PPNI and Depkes RI (2006) is divided into 5 levels of Clinical Nurses namely CN I, CN II, CN III, CN IV, CN V (Surosa, 2011). This is in line with the "From Novice To Expert" theory proposed by Benner (1984) that nurses are distinguished 5 levels: (1) Novice, (2) Advance Beginner, (3) Competent, (4) Proficient, and (5) Expert (Alligood & Tomey, 2006). Provision of nursing tasks that are not appropriate to the level of ability can lead to errors that threaten patient safety. Increased patient safety incidents, the majority of which are attributable to nursing services, indicate that nurse abilities are needed in the implementation of patient safety programs. Nadler & Nadler (1991) states that improving the quality of human resources must go through three

aspects: education, training development. The purpose of this study was to describe the implementation of the patient safety program by nurses in Dr. Ramelan Hospital, Surabaya, Indonesia. II. METHODS [The population of this descriptive study was](#) all [nurses](#) in selected units, in Dr. Ramelan Hospital, Surabaya, Indonesia. The population size was 47 people, and all of them acted as research respondents (total population). Data analysis technique applied was descriptive statistic method that was frequency distribution, because using categorical data (Nugroho, 2014). III. RESULTS Table 1. Internal Encouragement of Nurses to Implement the Patient Safety Program

Internal Encouragement of Nurses	Frequency	Percentage
Very Good	30	63.9
Good	17	36.1
Moderate	0	0
Bad	0	0
Very Bad	0	0
Total	47	100

Table 2. Assessment of [the Implementation of](#) the [Patient Safety](#) Program by [the Nurse](#) (Knowledge, Implementation, Monitoring, Independence, Smoothness, Skills)

Implementation of the Patient Safety Program	Very Good	Good	f	%	f	%	Moderate	f	%	Bad	Very Bad	f	%
Knowledge	33	70	12	26	2	4	0	0	0	0	0	0	0
Implementation of Tasks	9	19.2	19	40.4	19	40.4	0	0	0	0	0	0	0
Monitoring	9	19.2	14	29.8	18	38.3	6	12.7	0	0	0	0	0
Independence	8	17	20	42.6	19	40.4	0	0	0	0	0	0	0
Smoothness	8	17	23	49	16	34	0	0	0	0	0	0	0
Skills	8	17	22	46.8	17	36.2	0	0	0	0	0	0	0

IV. DISCUSSION The nurse's knowledge level of the majority patient safety program was in very good category. This may be due to: (1) the nurse has attended training on patient safety, (2) internal motivation from the nurse, (3) age, and (4) work experience. In this case, the nurse's knowledge will be good and excellent if: (1) the nurse is trained on the patient's safety program, (2) the nurse has high internal motivation, (3) the old work experience, and (4) the age. The implementation of the patient's nurse safety program was still at a moderate level. This shows that the optimization of patient safety program implementation has not materialized as a perfect performance. Patient safety program training that has been done has not been able to completely change the performance of nurses into safety behavior. The above interpretation is based on the function of education and training according to Hamalik (2007) which is improving the work performance of the trainees. Nurses who get a lot of monitoring during the execution of tasks fall into the bad category. There are 6 (12.7%) nurses fall under this category. The results of poor supervision are in nurses with a working period of 2 to 4 years. Poor assessments are given because there is an incomplete implementation of a patient safety program such as (1) increased high-alert medication, (2) assessment of risk reduction for health-care related infections, (3) assessment of risk reduction for injured patients. Nurse independence [in the implementation of patient safety](#) program is still [in the](#) medium category. Nurses with educational background SPK (senior high school level) are on independent criteria because by chance many duties in the outpatient unit with a minimal patient safety program, while nurses with diploma education background are in the criteria not independent because the majority of them have a short working period. The smoothness of the nurses [in the implementation of patient safety](#) program is still [in the](#) medium category. Smoothness is limited to the 3rd and 6th objectives of improving the safety of drugs that need to be watched and the risk reduction of injured patients. The smoothness of nurses in performing nursing actions determines the speed with which nursing outcomes are achieved. This is in accordance with the third nursing standard that is the identification of the results, with one of the measurements that is the estimated time of achievement. Skills [of nurses in the](#) implementation [of patient safety](#) program [is](#) still in [the](#) moderate category. Skills are a major aspect in the implementation of nursing care. The above is based on the fifth standard of the nursing standard that nursing actions should be carried out safely and appropriately. V. CONCLUSION Based on the results of the study concluded that the [implementation of patient safety programs](#) by nurses [in Dr. Ramelan](#)

[Hospital, Surabaya](#) still has not met expectations. REFERENCES 1. Alligood, M.R., Tomey, AN., 2006. Nursing Theorists And Their Work, seventh edition, Mosby Elsevier, Philadelphia. 2. Depkes RI, 2006. National Free Hospital Patient Safety (Safety Pasien) <http://www.scribd.com/doc/49308683/KPRS>, downloaded stairs January 25, 2012. 3. Hamalik, O., 2007. Employment training management integrated approach: the development of Human Resources. Jakarta: Earth Literacy. 4. Nadler, L., Nadler, Z., 1991. Developing Human Resources. 3rd ed. San Francisco: Jossey-Bass. 5. Nugroho, H. S. W., 2014. Analisis Data Secara Deskriptif untuk Data Kategorik. Ponorogo: Forum Ilmiah Kesehatan (Forikes) 6. Surosa, J., 2011. Structuring Career Based Competence to improve job satisfaction and nurse at the Hospital Performance, explanation Journal Volume 6 No. 2 Issue September 2011. [Dama International Journal of Researchers \(DIJR\), ISSN: 2343-6743, ISI Impact Factor: 0.878 Vol 2, Issue 6, June, 2017, Pages 43 - 45, Available @ \[www.damaacademia.com\]\(http://www.damaacademia.com\)](#) [Dama International Journal of Researchers \(DIJR\), ISSN: 2343-6743, ISI Impact Factor: 0.878 Vol 2, Issue 6, June, 2017, Pages 43 - 45, Available @ \[www.damaacademia.com\]\(http://www.damaacademia.com\)](#) Dama International Journal of Researchers (DIJR), ISSN: 2343-6743, ISI Impact Factor: 0.878 Vol 2, Issue 6, June, 2017, Pages 43 - 45, Available @ [www.damaacademia.com](http://www.damaacademia.com) [Dama International Journal of Researchers, \[www.damaacademia.com\]\(http://www.damaacademia.com\), \[editor@damaacademia.com\]\(mailto:editor@damaacademia.com\)](#) 43 Dama International Journal of Researchers, [www.damaacademia.com](http://www.damaacademia.com), [editor@damaacademia.com](mailto:editor@damaacademia.com) 44 Dama International Journal of Researchers, [www.damaacademia.com](http://www.damaacademia.com), [editor@damaacademia.com](mailto:editor@damaacademia.com) 45