



PROFESSIONAL QUALITY OF LIFE NURSING DOES NOT IMPROVE DIRECTLY TO QUALITY OF NURSING SERVICES IN EMERGENCY DEPARTEMENT SIDOARJO REGIONAL HOSPITAL

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ABSTRACT

Background: Nurses are the largest component of health care. Emergency Departement nurses must provide excellent service and quality so that the achievement of Compassion satisfaction, but the nurses must also deal with the conditions that cause a stressor for him so that appears Compassion Fatigue. The charges charged to the nurse create a separate stressor that can cause Burnout. This study aims to determine the relationship of professional quality of life with nursing service quality nurses ED Sidoarjo regional hospital. **Methods:** The design of this study used observational analytics with crosssectional approach. Sampling approach using simple random sampling with a sample as much as 82 respondents consist of 41 nurses ED Sidoarjo regional hospital and 41 patients. Data analysis used spearman test. **Results:** The results showed that all respondents (100%) had high compassion satisfaction, 33 respondents (80.5%) experienced average burnout. and respondents (30.6%) experienced compassion fatigue on average. 23 respondents (56.1%) assessed the quality of good nursing service. Result of statistical test between compassion fatigue with quality of nursing service got p-value 0,028 ($p > 0,05$) and correlation coefficient (r) = 0,861. This means that there are a significant influence and positive correlation between the two. Test statistic between burnout with quality of nursing service got p-value 0,998 ($p > 0,05$) and correlation coefficient (r) = 0,000. This means there is no influence and also the correlation between the two. The correlation test between compassion satisfaction and nursing service quality cannot be done because all respondents have high compassion satisfaction. **Conclusion:** Professionalism is a reality that is expected by all parties working in the world of health services. Many obstacles to be able to realize the ideal conditions in an effort to realize the working climate.

Keywords: Compassion Satisfaction, Compassion Fatigue, Burnout, Quality of Nursing Service

INTRODUCTION

Nursing service is an integral part of health services in the Hospital, the quality of health services is determined by the quality of nursing services so that the need for attention to the quality of nursing services in the Hospital. The quality of nursing care can be a comprehensive nursing service that

includes the bio-psycho-spiritual-societies provided by professional nurses to patients (individuals, families, and communities) both sick and healthy, where care is provided in accordance with patient needs and service standards. But basically, the quality of the nursing service's definition can vary depending on the point of view of where the quality is



being viewed. (Rakhmawati, 2009). The indicator of nursing service quality is the achievement of patient satisfaction level as the customer (Nursalam, 2014).

For ED customers, satisfaction determined by the quality of nursing services provided by ED nurses. Research conducted in Jamaica says that of 142 respondents, 59.9% of them expressed satisfaction with the health services provided by ED nurses. They are satisfied that the ED nurses are capable of shows empathy, so they are not reluctant to visit the hospital if they need medical help (Buchanan, Dawkins, & Lindo, 2015). Empathy is very important to showed, but it is fatal if it involves too much emotion and empathy. Involving excessive emotion and empathy will cause excessive stressors for nurses, especially ED nursing (Hoskins, 2011; Wentzel & Brysiewicz, 2014; Wolf et al.).

One study showed that Professional quality of life (ProQOL) had a positive relationship with the clinical competence of a nurse. The higher the compassion satisfaction score and the lower the compassion fatigue score, the better the clinical competence of the nurse (K. Kim, Han, Kwak, & Kim, 2015). Unfortunately, another study says that 82% of emergency nurses experience burnout (Hooper et al., 2010). Other meta-analysis studies suggest that burnout has a positive relationship with an ambiguity of role, emotional exhaustion, workload, turnover of employees, and commitment to the organization (Alarcon, 2011). As a result of the above conditions, the nurse can not provide satisfactory service to the patient being treated (Wentzel & Brysiewicz, 2014). Problems

experienced by nurses IGD very diverse. ED nurses must provide excellent service and quality so that the achievement of Compassion satisfaction but on the one hand ED nurse must deal with the circumstances that cause a stressor for him that is the routine activities, high workload, and ambiguity of the role he experienced. So Compassion Fatigue occurs in nurses. The charges charged to the nurse create a stressor by themselves with the coping mechanisms that occur in it so that this can lead to Burnout. This study aims to determine the relationship Compassion Satisfaction, Compassion Fatigue, and Burnout With Nursing Care Quality at ED Sidoarjo regional hospital.

METHODS

This research is an observational descriptive research with Cross-Sectional approach. The sample in this research was nurse and patient at ED Sidoarjo regional hospital. Sample size in this study was calculated from the total population of nurses ED Sidoarjo regional hospital is a number of 41 people and from patients also 41 people. This research was conducted in July 2017 at ED Sidoarjo regional hospital. The independent variables in this research are Compassion Satisfaction, Compassion Fatigue, and Burnout. All three were assessed using the Professional Quality of Life questionnaire. While the dependent variable in this study is the quality of nursing service reviewed by using the RATER questionnaire. The bivariate analysis in this study using speaman test with error rate (α) 5%



RESULTS

Table 1 Characteristics of Respondents by Age

	Mean	Median	Min-Maks	Dev Std.
Age	34,85	35	23-57	7,

Table 2 Respondent Characteristics

Characteristics	n	%
Gender		
Women	15	36.6%
Man	26	63.4%
Length of Work in the ED		
< 5 years	18	43.9%
≥ 5 years	23	56.1%
Employment status		
PNS	19	46.3%
BLUD	22	53.7%
Last education		
SPK	1	2.4%
Diplome	30	73.2%
Bachelor	10	24.4%
Marital status		
Married	34	82.9%
Single	7	17.1%
Number of children		
Do not have any	10	24.4%
One child	7	17.1%
Two children	14	34.1%
More than two children	10	24.4%
Ownership of training certificate		
BLS		
Have	41	100%
Do not have	0	0%
ALS		
Have	3	7.3%
Do not have	38	92.7%
BTLS		
Have	15	36.6%
Do not have	26	63.4%
ATLS		
Have	2	4.9%
Do not have	39	95.1%
PPGD		
Have	29	70.7%
Do not have	12	29.3%

Based on table 1, it is known that the average age of respondents is 34.85 years. This age is included in the middle adult age category. The youngest age of

respondents is 23 years, while the oldest age is 57 years old.

Based on table 2, obtained the data that the majority of respondents male sex. Of the total 41 respondents, 26 (63.4%) of respondents were male. A total of 23 respondents (56.1%) have experience working as nurses at ED Sidoarjo general hospital for more than or equal to five years. 19 respondents (46.3%) have status as the civil servant while 22 respondents (53,7%) status as employees of BLUD. As many as 30 respondents (73.2%) who work in ED Sidoarjo regional hospital last education diploma nursing. Of the 41 nurses, 34 people (82.9%) of them have married status. Of the 34 married respondents, 14 respondents (45.1%) had two children, 10 respondent (32.2%) had more than 2 children and 7 respondents (22.5%) had one child. While from 10 respondents who do not have children, there are 3 respondents whose status is married.

Based on the Decree of the Minister of Health of the Republic of Indonesia No. 856 / Menkes / SK / IX / 2009, states that an ED nurse must have a basic emergency certificate, namely BCLS certificate, BTLS, and other emergency medical certificates. In this study, researchers used the standard set by the Ministry of Health RI. The table above shows that of 41 respondents, all of them already have Basic Life Support (BLS) certificate. Another certificate that an IGD nurse must have is a BTLS certificate. Of the 41 respondents, 15 respondents (36.6%) of them already have a BTLS certificate. The table above also shows that of 41 respondents, 29 respondents (70.7%) have First Emergency Aid (PPGD) certificate. Other



supporting certificates include ALS already owned by 3 respondents (7.3%) and ATLS already owned by 2 respondents (4.9%).

Table 3. Respondent Characteristics Based on Compassion Satisfaction, Burnout, and Compassion Fatigue

Characteristics	Frequency	Percentage
Compassion Satisfaction		
Compassion Satisfaction high	41	100%
Burnout		
Burnout low	5	12.2%
Burnout average	33	80.5%
Burnout high	3	7.3%
Compassion Fatigue		
Compassion Fatigue low	34	82.9%
Compassion Fatigue average	7	17.1%

Table 3 illustrates the condition of the Professional Quality of Life nurses at ED Sidoarjo regional hospital. All respondents (100%) have high compassion satisfaction. Three respondents (7.3%) experienced high burnout and 33 respondents (80.5%) experienced average burnout. No respondents experienced high compassion fatigue. Only 7 respondents (17.1%) experienced compassion fatigue on average, while almost all respondents had low compassion fatigue, 34 respondents (82.9%).

Table 4 Quality of nursing care at ED Sidoarjo regional hospital

Characteristics	Frequency	Percentage
Quality of nursing service		
Less	2	4,9%
Enough	16	39,0%
Good	23	56,1%

Table 4 above illustrates the assessment of the quality of nursing services at ED Sidoarjo regional hospital by service users. From the table, it is concluded that from 41 respondents 23 (56,1%) assess the quality of nursing service good, whereas that rate less there are only 2 respondents (4,9%) and the rest give enough appraisal.

Based on table 5, the result of correlation test using spearman test between compassion fatigue with nursing service quality got p- value 0,028 ($p > 0,05$) and correlation coefficient ($r = 0,861$). This shows that there are significant influence and positive correlation between compassion fatigue with a quality of nursing service in ED Sidoarjo Regional Hospital. Result of correlation test using spearman test between burnout with quality of nursing service got p-value 0,998 ($p > 0,05$) and correlation coefficient ($r = 0,000$). This indicates that there is no correlation and also there is no correlation between burnout with a quality of nursing service at ED Sidoarjo Regional Hospital. While for correlation test between compassion satisfaction with nursing service quality cannot be done because all respondents have high compassion satisfaction.

Table 5 Results of Correlation Test Variable compassion satisfaction, burnout and compassion fatigue with nursing service quality

Independent Variables	Quality of nursing service	
	Correlation coefficient (r)	P value
Compassion satisfaction	1,000	-
Burnout	0,000	0,998
Compassion fatigue	0,861	0,028



DISCUSSION

Research on 12 hospital nurses in Antwerp, Belgium also stated that there is a relationship between personality type D and burnout. Personality D tend to have a weak affective, easy to stress, angry, irritated, do not have a wide social connection, and tend to be alone. This very strong relationship is shown by $r = 0.525$, and $p < 0.0001$ (Geuens, Braspenning, Van Bogaert, & Franck, 2015).

In the life cycle, women are more likely to experience stress than men. More stressors come from individual environments and another from the work environment. Stressors come from multiple roles as mothers, wives, children, and nurses working in the ED. Women's hormonal cycles also have an effect on the stress experience they have. Because it has the same hormonal trigger every month, a woman will more easily adapt to the multiple roles and stressors that accumulate. In employment, women more often rely on mothering instincts, so that emotions are also heavily involved while doing the work. Therefore, the stress experienced by female nurses is more likely to cause compassion fatigue. Unlike women, men are more likely to experience burnout. Men tend to calculate every action taken in the work and relate it to the role of the source of the breadwinner in the family. As far as possible men will complete the task as much as possible with good and achievement. Every decision taken by men is based on rational and thought-provoking results. This condition causes overwhelming and triggers the emergence of burnout.

A study says that the number of

children also affect the burnout nurses at ED. Nurses who already have children regardless of the number of children will potentially experience a higher burnout than single or married with no child nurses (Cañadas-De la Fuente, 2015). Every nurse who is married and has children must have multiple roles in his life. Unequal division of tasks can lead to the conflict of interest between work and family. Not infrequently the family is also a source of enthusiasm in work, but under certain conditions, there are limitations on individuals who already married in doing their work as nurses.

Yoder in his qualitative research, stating that any stimuli of stress source, is the cause of burnout and compassion fatigue. To cope with the stress they feel, there are various coping mechanisms that are done, both in the long term and short term. In the short term, caregivers tend to collaborate with other medical personnel when dealing with complicated cases. It is very helpful in overcoming the physical and emotional fatigue that is felt (Yoder, 2010).

In the face of stress, nurses are expected to have positive coping mechanisms. Coping response to stress is a combination of cognitive abilities and attitudes displayed by nurses. Nurses who work more than five years at the EDs have more experience in facing problems that arise. This results in a positive job satisfaction on the nurse. Positive coping mechanisms used by senior nurses need to be further studied and serve as role models for inexperienced nurses. Opening up to science and constantly developing oneself is also an alternative way to lower stress levels and improve individual performance and job satisfaction. When



the nurse does not want to develop the knowledge, the nurse will also not be able to keep up with the increasingly varied consumer needs. This disability will certainly increase the nurses' work stress.

In addition, the high number of compassion satisfaction in nurses is also influenced by financial factors. As said in Zareifar's research, Haghpanah, Beigipour. et. al (2017) that the financial income, job security, the environment and the infrastructure and the impact of work on personal life was affected to the level of stress and job dissatisfactions.

For analysis of Professional Quality of Life score results, can use

interpretation individually or group. In this interpretation, researchers use interpretation in groups. By looking at the scores obtained, it generally indicates that nurses experience high average compassion satisfaction, low average burnout and compassion satisfaction. These results indicate a good Professional Quality of Life condition of the ED nurses (Stamm, 2010). Quality of nursing service is the result of performance shown by the nurse. Several factors that influence nurse's performance in nursing service are internal and external factors. Internal factors include age, education level, gender. External factors include work environment, and leadership style (Suryabrata, 2008). If the service received by the patient meets the patient's expectations, then the quality of care provided by the nurse is good. Conversely, if the service received by the patient is lower than the patient's expectation, then the service quality given by the nurse is bad. Poor service quality can cause patients to feel dissatisfied with what

they receive. This is in accordance with research conducted by Suryawati et al (2006) stating that the quality of service is one indicator of patient satisfaction. Quality of service is very important for the hospital.

Based on research results Agonwardi (2013) states that overall variable dimensions of reliability, responsiveness, assurance, empathy, and tangible can explain a positive correlation between the level of patient satisfaction. These results indicate that the majority of service users of IGD RSUD Sidoarjo stated that the quality of service received either. Some of the things that indicate the quality of the service at the emergency room starting from the nurses provide services immediately when the patient comes, the nurse skillfully and nimble in providing services, nurses are always ready and responsible for the patient's situation, communication between nurses, patients and families well, nurses provide services regardless of the patient's social status, and the nurse always looks neat and clean.

In the research can be concluded that there is no correlation significantly and directly between the professional quality of life with quality of nursing service. It is considered that the psychological aspect of the nurse does not have a direct impact on the performance of the nurse as a whole. It could be in a psychological condition that is not good a nurse still have a good coping mechanism. According to research conducted by Hersch (2016), there are two things that are very dominant in nurse stress, namely work environment and coping system used by nurses. Both of these if can be improved maximally, can



reduce the nurse stress level. In another study by Gibson (1997), theoretically, there are three groups of variables that influence work behavior and performance, ie individual variables, organizational variables and psychological variables. These three groups of variables influence work behavior and ultimately affect the performance of personnel.

In another study by Poghosyan et al (2010) revealed a high level of burnout associated with low self-care quality by nurses residing in community service settings. In this research, the average burnout rate is 33 respondents (80.5%) and high burnout of 3 respondents (7.3%). So the number is feared will reduce the performance of nursing service that will ultimately reduce the quality of nursing service. With these findings, it is hoped that the management will be able to reduce the burnout level of the nurses so that those who had previously assessed the quality of service in the fewer conditions (2 respondents or 4.9%) can be reduced or even eliminated.

According to Amin and Wahba (2003), employee satisfaction, hospital facilities, and market factors are factors affecting hospital performance and this has an impact on patient satisfaction, clinical service quality and hospital income. Other contributing factors are leadership and management factors as well as labor and workload factors (Griffiths et al, 2008). Compassion satisfaction in this study, in fact, showed a significant dominance as a positive aspect in the professional study of quality of life nurses ED Sidoarjo regional hospital. So the performance of nurses remains in the appropriate competence to meet customer

needs. Another research conducted by Atihuta, Pasinringi and Bahar (2010) says that the role of nursing management with planning, organizing, implementation and supervision factors and clinical governance variables with nursing standard factors, nursing indicators, and nursing audits affect the quality performance of services with indicators of phlebitis and wound infections surgery. So from the research raises many other variables that affect the quality of nursing services.

CONCLUSION

A good professionalism and work ethic is a reality that all parties working in the healthcare world expect. Many obstacles are found to be able to realize the ideal conditions.

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