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Caring Model Development in Improving Quality of Nursing Services in Tasikmalaya

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ABSTRACT

Background: Caring is needed to improve services for consumers, in this case, patients. The development of caring behavior models in hospitals is essential in improving the quality of nursing services so that it impacts the number of patients treated. Purpose: to identify the need for a caring model in improving the quality of nursing care at the Tasikmalaya Islamic Hospital, Indonesia Method: The research method uses a qualitative design with a phenomenological approach involving elements of management, nurses, and patients being treated. There were 13 participants consisting of 8 nurses as critical participants and five patients currently treated as validators. Data retrieval through in-depth interviews and focus discussions is then analyzed through content analysis. Results: The results obtained were four major themes and two sub-themes related to hospital development and the required caring model. A model of serving with "HEART" is obtained from the hospital's vision, nurse's, and patient's expectations of caring behavior. Conclusion: Nurses perceive caring behavior as wholeheartedly, prioritizing patient serving comfort, and communicating effectively and ethically. The caring model of serving with "heart" can be presented and implemented to improve nursing care services ..

Introduction

Caring behavior is the key to success for a nurse in carrying out her duties. Caring is the nurse's ability to feel what the patient feels regarding all events related to the patient, being able to analyze and interpret with feeling and being able to understand what the patient is experiencing. (Ikafah, 2017) Caring as one of the competencies of nurses is the heart of nursing, other terms say nursing is caring and caring is nursing (Watson, 2008) or nursing is a caring profession (Wilkes & Allis, 1998; Alpers, Jarrell, & Wotring, 2013). This means that caring differentiates the nursing profession from other professions. Caring is so important that it has become one of the components of accreditation assessments for hospitals (JCI, 2014) and has always been a hot topic for discussion according to the views of administrators of professional nursing organizations. (Kusumawaty et al, 2016)

Caring is central to nursing, explaining care that is based on a set of universal human values (kindness, caring, and the moral ideals of nursing, involving the desire and intention to care as well as caring actions. Caring actions include communication, positive things (eg helping patients and the patient's family), support, or physical intervention by nurses (Watson, 1985 in Kozier 2010). Morrison & Burnard (2009) say that caring behavior can increase the level of health or passion in undergoing treatment. Caring does not Absolutely healing, but caring is useful in improving the patient's self-image because the patient gets care, attention and affection, so the patient's psychology will not be disturbed.

Caring is really needed in efforts to improve services for consumers, in this case patients. Service according to development priorities, hospital staff all understand that satisfying customers is not easy, and to win customers' hearts it is necessary to develop by adding several new, more attractive types of services. It's just that development needs to be well planned in order to obtain optimum results. To get optimum service, a nurse, apart from having good knowledge, also needs to pay attention to ethics and humanitarian aspects (Haryanti, 2000).

Tasikmalaya Islamic Hospital is a private hospital that is committed to developing quality and providing excellent service to the community, this is relevant to one of its missions, namely providing excellent and Islamic service. This commitment certainly needs to be supported by quality of service, one of which is quality of care for patients. In an effort to improve the quality of nursing services, it is necessary to develop a care model that is in accordance with the hospital's vision and mission and is easy for nurses to implement so that it can satisfy the patients being treated. This will of course have an impact on the bed occupancy rate (BOR) in hospitals and will ultimately impact the rewards or incentives received by all employees, including nurses. The current phenomenon is that, although geographically the Islamic hospital is in a strategic position in the Tasikmalaya area which can be reached by patients from both the Regency and Tasikmalaya City areas, in reality very few patients seek treatment. Based on 2019 data, the BOR at Islamic Hospitals is around 23%, so efforts are needed to increase the marketability of hospitals by developing both infrastructure and soft skills. Developing a model of caring behavior in hospitals is important in improving the quality of nursing services so that it has an impact on the number of patients treated. This research aims to identify caring needs to improve the quality of nursing care.

Objective

This study is part of action research that aims to identify the needs of caring models in improving the quality of nursing care at Tasikmalaya Indonesia Islamic Hospital.

Method

This research used a qualitative design with a pilot study approach at the preaction research stage in the recovery phase which was carried out from September to November 2021. Data collection was carried out by means of in-depth interviews with 8 nurses and 5 patients in the internal medicine treatment room. The in-depth interview instrument uses semi-structural open questions developed by the research team. The results of interviews and discussions were then analyzed using content analysis.

Results

1. Analysis of needs for developing quality of care

The research respondents consisted of management elements, in this case represented by the Head of Administration and Personnel (M1), Head of Nursing Section (M2), executive nurse (P) and patient (PS). The characteristics of the respondents are as follows: Respondent "M1" is a representative of the leadership element where at that time the Director was sick and needed a long rest, respondent "M1" had only joined Islamic Hospital for two years; Respondent "M2" is the Head of the Nursing Section who has joined RSI since 2000; Respondent "P" is an executive nurse who works in the treatment room, polyclinic and emergency room; Respondents "PS" were male and female patients who were being treated for 2-6 days, the patient's age was in the range 31-50 years. The information gathering method was carried out using in-depth interviews and focused discussions using field notes.

2. Results of in-depth interviews and focused discussions

Based on the results of interviews with elements of management and patients as well as discussions focused on nurses, 4 themes were obtained. These themes are interrelated and describe the need to improve the quality of nursing services seen from the perspective of management elements, implementing nurses and patients.

The following is an explanation of the themes obtained:

a. Caring competency based on digital information and technology.

One effort to increase hospital competitiveness is by developing infrastructure, adding facilities that support services, especially patient care services (Sodik, M.A., Suprapto, S.I., Pangesti, 2018). This is because patient demands for care services are increasing every day, supported by increasing purchasing power and awareness of the high cost of health care. From the results of interviews with management, it can be seen that currently Islamic Hospital is planning to add supporting facilities and infrastructure for treatment.

M1	<i>In the next 2 years there are plans related to the construction of emergency room building facilities and medical support services</i>
M2	the development of specialist doctor services is also being increased
M1	an increase in higher quality human resources has also been planned. We plan to increase human resources that match the criteria in SOTK
M1	The information system at RSI has also been changed to a Hospital SIM which is more in line with this hospital system and is in the process of implementing the application.
M1	In terms of marketing, we are starting to be more structured and there is already progress.
M2	the bed capacity has just reached 40 TT and will be increased according to the standard.

	<i>Our BOR is still below 20%, meaning the number of patients treated per day and the proportion of nurses are not ideal. "So we centralize one nursing service unit."</i>
M2	maybe because ancient habits were functional so they fit.
M2	ICU, NICU and HCU rooms are provided even though the HCU has incomplete
	equipment and facilities.

b. Make nursing reward to decrease turn over.

Human resources as one of the supports are very necessary in providing synergistic efforts to improve the quality of service in a hospital. Likewise, the Tasikmalaya Islamic Hospital currently requires competent human resources in terms of quality. The following interview results were obtained:

M1	The director forms a special team to plan these things, then what is needed is capital
	such as getting sponsors who are truly ready to be responsible.
P1	Adequate facilities and infrastructure, a solid and unified team
P2	Quality human resourcesteamwork and adequate infrastructure facilities"
P3	Requires training
P4	Colleagues with good ethics Maximum health facilities
P5	Quality human resources and facilities
P6	Competent nursing team
P7	Nursing must be legal

 Sub theme: There are factors inhibiting the progress of services in hospitals A study of the factors inhibiting the progress of services at the Islamic Hospital showed that the results were facilities, inadequate human resources, communication and mindset factors, as listed in the following table.

tabic.	
M1	the obstruction may be due to leadership problems because the director himself still
	has PLT status, so it is difficult to consult and there is often miscommunication
	between work units and the foundation."
M1	the obstruction may be due to leadership problems because the director himself still
	has PLT status, so it is difficult to consult and there is often miscommunication
	between work units and the foundation."
M1	Nurses' wages are not yet the minimum wage standard.
M2	employees' mindset is sometimes arbitrary, not yet ideological.
M2	often the doctor's and nurse's diagnoses are not in sync.
M2	Some employees, especially nurses, sometimes question what their main
	duties are

2) Sub theme: Nurses' expectations of management

In order to improve the quality of service at the Tasikmalaya Islamic Hospital, information was obtained that the implementing nurses had hopes that they could be more advanced and provide services in accordance with existing SOPs, meanwhile the management was also making efforts to realize these hopes.

HRD	maybe one of them is the hospital, trying to ensure that the employees or health
	workers here can have fun
HRD	The potential of the hospital is actually quite large, the location is strategic, it just needs
	improvement
HRD	Cooperative restructuring is also one form of enabling employees to be more independent
	in managing their finances. "Then, with a cooperative grant, you can create a business
	that can increase your income."
HRD	Holding trainings such as AOC.

P1	The quality of nursing services at the Islamic Hospital is in accordance with
	the SOP,hopefully it can be more advanced
P2	This Islamic Hospital has complied with the SOPhopefully the actions are
	accompanied by good ethics.
P3	This Islamic Hospital has complied with the SOP and in terms of patient
	service, they are quite satisfied
P4	It is in accordance with the SOP as proven by the patient satisfaction
	scorehopefully the service can be improved.
P5	In accordance with the SOPthere is a questionnaire that shows patient
	satisfaction.
P6	The service is in accordance with the SOPhopefully there is a solid and compact
	health worker team
P7	In accordance with the SOPhopefully the service at the RSI can be truly
	excellent.

c. Creating caring environment to improve nurses caring attitude based on Islamic perspective caring environment.

Based on the results of the focus group discussion, the nurses already know in general and implement caring behavior according to their respective perceptions as stated in the following table:

P1	I understand about caring that caring prioritizes patient recovery, makes patients
	more comfortable
P2	Serving with all my heart
P3	Providing motivation, a sense of security and comfort
P4	Good communication and skills
P5	Already acting caring as proven by patient satisfaction scores
P6	Already caring enough, but training is needed to be more caring
P7	Caring behavior is actually often done consciously or unconsciously, such as taking
	invasive actions, for example, during an IV, I inform and prioritize patient comfort.
	This is also proven by the patient satisfaction questionnaire

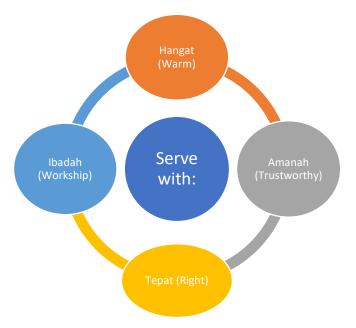
d. Patient perception of nurses' caring behavior

Based on in-depth interviews with patients, it was found that during their care, most of the nurses had implemented the caring behavior. The following are the results of interviews with patients regarding nurses' caring behavior:

icounto	of interviews with patients regarding nurses caring behavior.
PS1	If there is a complaint that is conveyed, usually the nurse will come directly if you
	want to get an injection, the nurse will also inform you beforehand that it will hurt,
	so you can be prepared. If there is nutritional information, usually you are reminded
	to take medicine in the morning, afternoon, evening, like that
PS2	if you are going to have an IV drip and then continue with an antibiotic injection
	or medicine to be taken, usually the nurse will provide an explanation, the effects of
	the medicine are also explained.
	overall it's good, thank God, friendly, neat, needs are immediately responded to
	and fulfilled.
	But I would like there to be ablution facilities in the room.
P2	good good actually, it's quite good, every time there is an explanation first.
	The nurse's skills are quite good, their attitude is also friendly
P3	Last night the IV drip was removed, but that night it was immediately reinstalled,

	she said she was worried that she wouldn't be able to get fluids in, she said she also
	had to get medicine. There are families who also have to sign they said it was for
	consent to the action
	The service here is good, friendly
P3	Alhamdulillah it is good, polite
	<i>The service is rated 8, trustworthy</i>
P5	in terms of speed of service it is good, when there is a complaint they come
	immediately, communication is good, friendly, to the patient is also nice like that
	often checked like blood pressure also 3 times a day
	There is still a lack of information given to patients, at most if asking the patient it
	is often like that, only information that is not known from the doctor is like this
	and this and this is still lacking, there is still not much that is conveyed, only told
	this what, asking the patient's condition is not told why.
	yes if it is medicine I like it directly, I am given the treatment immediately, told
	the name of the medicine
	<i>I think the service here is already used to it (not rigid in action)</i>
	at most if there is something difficult that needs help from the nurse, ask for help
	when I want to help to the toilet/to the prayer room there is direction
	concern for patients in my opinion the value is 8
	if what is felt here is the nurse nice, so not awkward and caring

In accordance with the themes that have been described above, researchers can develop a caring model that is combined with the vision of the Islamic Hospital, existing theories and based on patient needs as follows: Serving with "HATI/ Heart" which is warm, trustworthy, precise and worship (Bastaman, 2020). The description of the model is as follows:



Model explanation

Services carried out with the heart will be oriented towards customer satisfaction in this case the patient and of course can provide happiness for the nurse (Bastaman, 2020). The following is an explanation of each of the caring components:

- 1. Serving with "H = Warm"
 - a. Warmth in service begins with greetings. In accordance with the hospital's vision, namely providing excellent Islamic service, the greetings conveyed are in accordance with Islamic law, namely Assalamu alaikum warrohmatullohi wabarokaatuh. Greetings are basically giving prayers and friendship to the person you are talking to or the person you are greeting, with greetings the patient will feel appreciated and accepted.
 - b. Smile, a sincere smile from a nurse can make patients feel happy and even be a pleasant medicine. The smile that is suggested is a symmetrical smile, by pulling the upper lip 1 cm, the lower lip 1 cm and the edge of the lip 3 cm (Bastaman, 2020).
 - c. Dear, love our patients as we love ourselves and our own families.
 - d. Sorry, humans are not free from mistakes and errors, therefore apologizing is a commendable act for nurses if they make mistakes with patients.
 - e. Eye contact, maintain eye contact when speaking
 - f. Listening, when patients talk about their complaints, nurses should listen patiently and not interrupt. Try to get the patient to finish talking before the nurse responds.
- 2. Serving with "A = Amanah"
 - a. Honest, nurses are always honest with patients
 - b. Fair, impartial, do not discriminate against patients based on social class, gender or position and position
 - c. Discipline, obedient and comply with applicable regulations
 - d. Responsible, work according to rights and obligations
- 3. Serving with "T = Right"
 - a. On time, serve customers at the right time, quickly and accurately, not slowly according to the specified time
 - b. Right information, provide information that is accurate and easy to understand
 - c. Right action, take action correctly according to applicable SOPs
 - d. Right on target, our target is the patient, try to get to know the patient so as not to make mistakes.
- 4. Serving with "I = Worship"
 - a. Patient, nurses are always patient in receiving complaints, criticisms and suggestions from patients
 - b. Gratitude, nurses are always grateful to be able to work and serve patients well
 - c. Sincere, always sincere in providing services to patients

Discussion

Based on the description above, researchers obtained 4 themes and 2 sub-themes related to the need to improve nursing services, namely:

- 1. Improvement of infrastructure and facilities supporting services
- 2. There are competent resources to support service quality
- 3. Caring behavior has been implemented in nursing care for patients.
- 4. Perception of caring behavior according to the patient

The sub themes obtained are as follows:

- ✓ The factors inhibiting the progress of services at Islamic Hospital are facility factors, inadequate human resources, communication factors and employee mindset
- ✓ Nurses' expectations of management

From the results of the analysis it was found that currently the Tasikmalaya Islamic Hospital is in the process of improvement towards the next stage of development. Efforts have been made by the management both in terms of facilities and infrastructure. In the thematic analysis, implementing nurses only need reinforcement of caring behavior. Nurses have the perception that caring behavior is serving wholeheartedly, prioritizing patient comfort, communicating effectively, and being ethical. However, there are also nurses who still need training in order to strengthen the caring behavior they already have. From this theme, the researcher raised important points that will be conveyed in training activities related to strengthening caring behavior (Taylor, 1995) (Munawaroh, 2000). A caring model was obtained that combines the vision and mission of an Islamic hospital, the expectations of nurses and patients as well as existing theoretical concepts, namely the Serving Model with "HEART". It is hoped that this model can be implemented as a form of effort to improve care services in terms of methods.

Conclusion

Nurses have the perception that caring behavior is serving wholeheartedly, prioritizing patient comfort, communicating effectively, and being ethical. The caring model of serving with "heart" can be presented and implemented as a form of effort to improve nursing care services. In future research, this model can be implemented and measured quantitatively to obtain accurate data on increasing patient satisfaction.

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