

Description of Knowledge Level of Nurses about Care of Covid-19 Patients in Tuan Rondahaim Hospital, Pematang Raya Simalungun Regency

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ABSTRACT**Keywords:**

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This study aims to describe the level of knowledge of nurses about covid-19 patient care. This research method uses a descriptive design. The sample used in this study were 38 nurses. The sampling technique was carried out using total sampling, which involved the entire population. The results showed that 31 (81.6%) people had good knowledge about covid-19 patient care, 6 (15.8%) people had sufficient knowledge and 1 (2.6%) people had less knowledge about treatment. covid-19 patients. Nurses have good knowledge about covid-19. However, the hospital still has to provide further information to medical staff for better control of infectious diseases.

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1. Introduction

The spread of Corona Virus Disease-2019 (Covid-19) is the most serious global health threat in recent decades. The spread of Covid-19 was first reported in Wuhan, Hubei Province, China on December 8, 2019, the virus outbreak which was later given another designation as Severe Acute Respiratory Syndrome Coronavirus 2 (SARSCOV2) and continues to spread widely in various countries. The World Health Organization (WHO) on March 11, 2020 declared Covid-19 to be a global pandemic considering the rapid spread of the Corona Virus to areas far from the center of the outbreak and many countries in various parts of the world have reported positive cases of Covid-19. Even as of April 10, 2020, WHO noted that 212 countries/regions had been affected by COVID-19 with a total of 1,439,516 positive COVID-19 cases and 85,711 deaths. (Tiodora Hadumaon Siagian, 2020) The number of Covid-19 cases continues to increase every day with reports of recovering, but not with a high mortality rate.

In August 2020 the World Health Organization reported 18,979,596 cases of Covid-19, 711,252 who died, 12,171,065 who recovered from Covid-19, 6,097,279 who were still under treatment. Data on Covid-19 cases in Indonesia on August 5, 2020 reported that there were 116,871 confirmed cases of Covid-19, 73,889 cases that were declared cured, 5,452 who died, 37,530 who were still being treated. (National Covid-19 Handling Acceleration Task Force, 2020) The data on Covid-19 cases in North Sumatra was updated on August 5, 2020, there were 4,391 confirmed cases of Covid-19, 1,791 cases that were declared cured, 211 who were declared dead, 2,389 who are still in treatment. maintenance. (Covid-19 North Sumatra) The data on Covid-19 cases in Simalungun Regency was updated on August 6, 2020 there were 26 suspected cases of Covid-19, 33 confirmed cases, 88 cases that were declared cured, 15 cases of Probable death, 7 confirmed deaths of Covid-19 , 12,312 travelers, 4 close contacts, 218 people completed isolation, 1 person Discarded. (Simalungun District Health Office, 2020).

The large-scale health crisis triggered the restructuring and reorganization of health care delivery to support emergency services, medical intensive care units and continuous care units. Health professionals are mobilizing all their resources to provide emergency assistance in a general climate of uncertainty. Concerns about the mental health, psychological adjustment, and recovery of health care workers caring for patients with Covid-19 are beginning to emerge. The disease characteristics of the Covid-19 pandemic, increase the atmosphere of general vigilance and uncertainty, especially among health professionals, due to various causes such as the rapid spread and transmission of Covid-19, the severity of the symptoms it causes within a segment, infected people, lack of knowledge about the disease, and mortality among health professionals. (El-Hage et al., 2020). In the case of the Covid-19 pandemic in Simalungun Regency, the number of cases infected with Covid-19 is increasing day by day.

Covid-19 is a new disease and the exact treatment that must be given is not yet known.

2. Research Methods

2.1 Place and Time of Research

- a. Research Place The location of this research is planned to be carried out at Tuan Rondahaim Hospital Pamatang Raya, Simalungun Regency in 2020, because the researcher works actively as an implementing nurse at Tuan Rondahaim Hospital.
- b. Research Time The research time is planned to be carried out in September-October 2020.

2.2 Population, Sample and Types of Data

a. Population

The population is the entire object of research or objects studied and determined by researchers to be studied and then drawn conclusions (Sugiyono, 2012). This study uses total sampling, namely research that involves a population that is not too large and usually the entire population is studied (Sandjaja & Heriyanto, 2011). The population of nurses in Tuan Rondahaim Hospital Pamatang Raya, Simalungun Regency, amounted to 38 nurses.

b. Sample

According to Sugiyono (2016) the sample is part of the number and characteristics possessed by the population, while the sampling technique is called sampling. According to Sugiyono (2009), the sampling technique in this study was total sampling. Total sampling is a sampling technique where the number of samples is the same as the population. The reason for taking total sampling was because the population was less than 100. So the sample in this study was 38 nurses at Tuan Rondahaim Hospital Pamatang Raya, Simalungun Regency.

2.3 Data Collection

a. Data processing

Data processing is basically a process to obtain data or summary data based on a group of raw data using a certain formula so as to produce the required information (Setiadi, 2013). Data processing aims to obtain a good presentation of data and conclusions, the data obtained from the research is still raw, cannot provide information, it is necessary to process data (Notoatmodjo, 2010). Some of the activities carried out in data processing by researchers, namely: editing, coding, tabulating, and scoring.

1) Editing

This activity is carried out by checking the data from the answers from the questionnaires that have been given to respondents and then making corrections whether they have been answered completely or not. Editing is done in the field so that if there is a shortage or inappropriateness, it can be completed immediately. In this study, the researcher edited after receiving the questionnaire that had been filled out by the respondent, checked for correctness and completeness. If there are respondents who are incomplete in filling out the questionnaire, the researcher asks the respondent to complete it.

2) Coding

This activity gives a number code on the questionnaire to the stages of the respondents' answers to make it easier for further data processing. Coding in this study was carried out by providing a number code for each answer to facilitate data processing and analysis.

3) Tabulating

This activity is carried out by calculating the data from the respondents' answers to the questionnaires that have been coded, then entered into the table. Tabulating was done after the answers to the questionnaires were coded, then the researchers calculated the data and entered them into the table.

4) Scoring

Next, assign a score to the questionnaire or questionnaire. In this study, the pattern is used if the correct answer is given a value of 1 and if the wrong answer is given a value of 0.

b. Data Analysis

After all the data has been collected completely, the next step is to analyze the data. Data analysis is a very important part of scientific research methods, because data analysis will provide useful meaning for solving problems in research. This research uses descriptive data analysis technique which is a data processing procedure by describing and summarizing the data in a scientific way in the form of tables or graphs. Descriptive analysis functions to summarize, classify, and present data (Sugiyono, 2011). The results are presented by scoring and interpreted using the following criteria: (Arikunto (2010),

- 1) Knowledge is good if the respondent can answer 76-100% correctly of the total answers to questions.
- 2) Knowledge is sufficient if the respondent can answer 56-75% correctly of the total answers to the question.
- 3) Knowledge is lacking if the respondent can answer <56% of the total answers to the question.

3. Results and Discussion

3.1 Interpretation and Discussion of Research Results

a. Demographic characteristics of nurses

Age affects a person's perception and mindset. The older a person gets, the more their grasping power and mindset will develop so that the knowledge gained will be better (Notoatmodjo, 2007). Where the age of 20-40 years entering the stage of young adulthood. At this age individuals are required to take on new roles in the workplace, home, and society, and develop interests, values, and attitudes related to these roles. At this stage a person has a level of maturity and a deeper ability to think and work. While the age of 41-65 years is the age of middle adulthood. At this stage cognitive and intellectual abilities do not change much. At this stage cognitive and intellectual abilities do not change much. Reaction time does not decrease, memory and problem-solving skills remain the same, and the learning process continues and can be developed with increasing motivation (Kozier, 2010). And the results of the study showed that respondents aged 20-40 years as many as 30 (83.3%) respondents had a good level of knowledge about the care of COVID-19 patients, while as many as 5 (13.9%) respondents had a sufficient level of knowledge about treatment. Covid-19 patients, and as many as 1 (2.8%) respondents had a low level of knowledge about the care of Covid-19 patients. Respondents aged 41 - 65 years who have a good level of knowledge about the care of COVID-19 patients are 1 (50%) respondents, and 1 (50%) respondents have a sufficient level of knowledge about the care of COVID-19 patients. Based on the data obtained, it shows that this research is in line with the theory stated by Astutik (2013) and Triyani (2012) that age affects a person's perception and mindset.

After passing middle age (40-60 years), a person's perception and mindset will decrease. From the results of the study, it was found that 4 (100%) of the respondents were male who had a good level of knowledge about the care of COVID-19 patients. A total of 27 (79.4%) female respondents have a good level of knowledge, while 6 (17.7%) female respondents have a sufficient level of knowledge, and 1 (2.9%) female respondents have lack of knowledge about the care of COVID-19 patients. Based on the data obtained, it shows that this research is in line with the theory stated by Moekijat (1998), the gender factor has a direct or indirect relationship with a person's level of knowledge about a thing. It is known that men tend to have better knowledge than women. This is due to various things, such as men having wider activities and knowledge, being able to socialize better and having greater opportunities to get information due to the activities that accompany them.

According to Iffada (2010) there is no significant relationship that can be associated between a person's level of knowledge and gender, but research conducted by Yohani (2006) obtained the results that male and female sexes have the same level of knowledge, this is because they are in the same environment. Knowledge is also influenced by education. From the results of the study, it is known that respondents with a D-III Nursing education who have a good level of knowledge about the treatment of Covid-19 patients are 25 (80.7%) respondents, while respondents who have a sufficient level of knowledge are 5 (16.1%) respondents. , and as many as 1 (3.2%) respondents had a low level of knowledge about the care of COVID-19 patients. There are 6 (85.7%) respondents with a bachelor's degree in Nursing education who have a good level of knowledge about treating Covid-19 patients and 1 (14.3%) of respondents who have a sufficient level of knowledge about the care of Covid-19 patients. This is in line with what Notoatmodjo (2007) said that the higher a person's education, the easier it is for that person to receive information, and the more knowledge he gains about health. Knowledge is very closely related to education, so someone with higher education is expected to have more extensive knowledge. Research conducted by Sudrajat (2008) shows that nurses with a bachelor's degree in Nursing education can fulfill their patient's rights better than nurses with a D-III Nursing background.

b. The level of knowledge of nurses about the care of Covid-19 patients

Notoatmodjo (2005) suggests that knowledge is the result of a person's sensing of objects through their senses. This study shows the results that 31 (81.6%) respondents have good knowledge about the care of covid-19 patients, while 6 (15.8%) respondents have a sufficient level of knowledge, and those

who have less knowledge about the care of covid-19 patients. as many as 1 (2.6%) respondents. The results of this study indicate that the level of knowledge of nurses about the care of COVID-19 patients is good, but in practice it is not optimal. This may be because some nurses are concerned about their work and its impact on personal life. In addition to the risk of infection, fear of transmitting to family members, stigma and limitations in interacting with others are the things that nurses think the most about (Hope et al., 2011)

3.2 Research limitations

This study has limitations where this study uses a knowledge questionnaire for nurses which was prepared by the researcher based on a literature review. Filling out the questionnaire by each respondent is not done on the same day, this allows the provision of information between nurses.

a. Nursing services

Nurses are the largest healthcare professionals at the forefront of the health system responding to the pandemic. Because nurses are in close contact with infected people, they are a major part of the chain of transmission of infection and their knowledge of Covid-19 prevention and protection procedures can help prevent the chain of transmission. Covid-19 is a very new infectious disease, policy modifications and guidelines are constantly being revised rapidly, which creates confusion with each latest update. This confusion also exacerbates the nurse's anxiety and perception of risk. Communication of information is often felt difficult and not concise so that it adds to the confusion and distress of nurses who are already busy with services. Therefore, it is important for nurses to have knowledge about the care of Covid-19 patients in order to carry out nursing services properly and provide correct information about the care of Covid-19 patients to patients and their families. The results of this study can be used as a reference for nurses to increase their knowledge, especially in the implementation of the treatment of COVID-19 patients. And for local hospitals, it is hoped that they can increase the knowledge of their nurses by holding regular and continuous trainings

4. Conclusion

Based on the research that has been carried out on respondents regarding the description of the level of knowledge of nurses about treating COVID-19 patients, the researchers can conclude that:

- a. Respondents involved in this study amounted to 38 people. They had an average age of 30 years, with the youngest being 25 and the oldest being 54.
- b. Respondents involved in this study 34 female and 4 male.
- c. Respondents involved in this study were dominated by respondents who had a D-III Nursing education as many as 31 people while 7 people had an undergraduate Nursing education.
- d. Respondents aged 20-40 years as many as 30 people have a good level of knowledge about the care of covid-19 patients, while as many as 5 people have a sufficient level of knowledge, and as many as 1 person have a low level of knowledge. Respondents aged 41 – 65 years who have a good level of knowledge are 1 person, and 1 person has a sufficient level of knowledge about treating COVID-19 patients.
- e. A total of 4 male nurses who have a good level of knowledge about treating COVID-19 patients. 27 female nurses have a good level of knowledge, while 6 female nurses have a sufficient level of knowledge, and 1 female nurse has a low level of knowledge about treating COVID-19 patients.
- f. Respondents with a D-III Nursing education who have a good level of knowledge about treating COVID-19 patients are 25 nurses, while respondents who have a sufficient level of knowledge are 5 nurses, and 1 nurse has a low level of knowledge about care. covid-19 patient. Respondents with a Bachelor of Nursing education, 6 nurses have a good level of knowledge about the care of COVID-19 patients and 1 nurse has a sufficient level of knowledge about the care of COVID-19 patients.
- g. Of the 38 nurses working at the Tuan Rondahaim Hospital, it was found that 31 people had good knowledge about treating COVID-19 patients, while 6 people had a sufficient level of knowledge, and 1 person had less knowledge about treating COVID-19 patients.

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