

Relationship of Therapeutic Communication with Inpatient Satisfaction at the Martha Friska Hospital, Pulau Brayan in 2018

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ABSTRACT

Keywords:

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Communication is an individual effort in maintaining and maintaining individuals to keep interacting with others and is an important component in nursing practice. Communication is an effective tool to influence human behavior, so that communication is developed and maintained continuously. Objectives In Research on Therapeutic Communication Relationships with Inpatient Satisfaction at Martha Friska Hospital, Brayan Island, 2018. This study used a cross-sectional research design. The population in this study were all inpatients on the 3rd floor, amounting to 20 nurses, with a total sampling technique, the number of samples in this study was 20 people. The data analysis technique was performed using univariate and bivariate statistical analysis. The statistical test in this study used the chi square formula (kai squared) to estimate or evaluate the frequency under investigation has a significant relationship or not, with a 95% degree of confidence. Based on the results of the study, there is a significant relationship between therapeutic communication and satisfaction of inpatients at the Martha Friska Hospital, Pulau Brayan in 2018, with a p value = 0.001 (p < 0.05). For research sites, therapeutic communication training is one of the efforts that must be continuously carried out in maintaining or even further improving the quality of service to patients or the community.

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1. Introduction

Communication is an individual effort in maintaining and maintaining individuals to keep interacting with others and is an important component in nursing practice. Communication is an effective tool to influence human behavior, so that communication is developed and maintained continuously [1].

As health workers who have the longest interaction with clients, nurses are expected to be psychologically “drugs”. The presence and interaction of the nurse should bring comfort and longing to the client. For this reason, nurses need special skills that include intellectual and technical skills that are reflected in therapeutic communication behavior with other people. Nurses who have therapeutic communication skills will not only easily build a trusting relationship with clients, but also prevent legal problems, provide professional satisfaction in nursing services, and improve the image of the profession and the image of the hospital [2].

Therapeutic communication is communication that is planned and carried out to help the client's healing or recovery [3]. Therapeutic communication is a professional communication for nurses [4]. Therapeutic communication is an effective way to influence human behavior and is useful in implementing health services in hospitals, so communication must be developed continuously [5]. The therapeutic relationship between nurse and client can be realized by the existence of therapeutic interactions between the two [6].

Research on therapeutic communication carried out, including research on the relationship between individual characteristics of nurses and organizations with the application of therapeutic communication in the inpatient room of the Friendship Hospital Jakarta to 147 nurses on duty, shows that the application of communication is still relatively lacking (46.3%), both (35.2%), and sufficient (18.5%) [7]. This is supported by Windu (2006) with research on the application of nurse therapeutic communication in providing nursing actions at Undata Hospital Palu, Central Sulawesi, from 68 samples that respondents communicate well (13.24%), sufficient (38.23%), less good (26.47%), not good (22.06%). Meanwhile, according to Jamilatun (2015) in a study of nurse-client therapeutic communication with motivation to recover in inpatients in the Cempaka II room RSD Kudus Regency with a sample of 96 people, respondents in the good category (68.9%), moderate (5, 2%), and bad (25.0%).

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Purwanto (2017), there are several possibilities of the lack of success in therapeutic communication of nurses to clients, including that it is influenced by the nurse's lack of knowledge in therapeutic communication of nurses' attitudes. The level of education, experience, environment, less number of personnel and others. The low therapeutic communication carried out by nurses has an impact on patient dissatisfaction [8], [9].

This is supported by Jakson (2015). The Satisfaction Level of Inpatient Towards Nursing Services at Estomihi General Hospital Medan, it is found that inpatient satisfaction is quite satisfied (52.5%), patients who are satisfied (35%), and less satisfied. (12.5%). Sitorus (2000) regarding client and family satisfaction shows that the level of satisfaction is in the good category (16.9%), medium category (81.5%) and poor category (1.55%). Nina (2008) with research on the analysis of the level of patient satisfaction at prime nursing services at the H. Adam Malik Central General Hospital Medan. Showed very satisfying (18.5%), satisfying (74.3%), unsatisfactory (6.8%). Dermawan (2009), the relationship between the implementation of therapeutic communication and client satisfaction in obtaining nursing services at the emergency department of Dr. Soedarso Hospital, Pontianak, West Kalimantan. Respondents as many as 108 people obtained client satisfaction while being treated, the client was satisfied (66.7%) [10].

A client who is dissatisfied, will result in an attitude or behavior that is not compliant with all nursing procedures and medical procedures such as refusing to have an IV, refusing to take medication, refusing to use hot or cold compresses, and so on. Finally the client will leave the hospital and look for quality services in another place. Therefore, it is time for client satisfaction to become an integral part of the mission and goals of the nursing profession because of the increasing intensity of global and domestic competencies, as well as changing preferences and behavior of clients to seek quality nursing services (Haryanti, 2015).

Client satisfaction is the main thing that hospitals need to prioritize in order to survive, compete and maintain the existing market because hospitals are business entities engaged in health services (Irawan, 2013)

The world health agency (WHO, 2013) has determined that health is an investment, the right and obligation of every human being. The quotation is also contained in article 28 paragraph 3 of the 1945 Constitution and Law No. 36 of 2009 concerning health, which stipulates that everyone has the right to health services. Therefore every individual, family and society has the right to obtain that everyone has the right to get satisfaction in carrying out services with therapeutic communication.

In Indonesia to solve this problem, the government in 2004 issued Law No.40 on the patient satisfaction system. Law 40/2004 mandates that social security is mandatory for all Indonesians. one of the programs with the pharmacy therapy communication program through a social security administering body (inpatient).

Based on data from the Ministry of Health of the Republic of Indonesia in 2015 in receiving and serving patients as consumers with various characteristics, hospitals must equip themselves to always listen to consumers' voices and have the ability to respond to every wish, expectation of consumers and demands of health service users. This is closely related to health workers who always accompany and serve patients as their customers. Every hospital has a minimum service standard. Minimum service standards are provisions for the type and quality of basic services which are mandatory regional affairs that are entitled to a minimum of each citizen. Also a technical specification regarding the benchmarks for minimum services provided by the Public Service Agency to the community (Kepmenkes R.I, 2017).

According to the National Census data report (2016) health services for inpatients that are widely used are government hospitals (37.1%) and private hospitals (34.3%) the rest are maternity hospitals and hospitals, while for communication services Therapeutic concludes that dissatisfaction with the therapeutic communication services of government hospitals and private hospitals for inpatient and inpatient care is increasing. The satisfaction of therapeutic communication services in government hospitals is generally lower than that of private hospitals.

Martha Friska Pulo Brayan Hospital is a privately owned hospital which is classified as class C and is a quality, inexpensive, and affordable health service for all levels of society in North Sumatra. Based on the results of a preliminary survey conducted by researchers on September 20 2018 by conducting interviews with 10 Inpatient users of the Martha Friska Pulau Brayan Hospital, it was stated that nurses rarely pay attention to therapeutic communication to inpatients and the lack of

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hospitality of nurses to patients in care Hospital Martha Friska Brayan Island. Expressions of patient dissatisfaction with nursing care services include: nurses rarely take time to listen to patient complaints about the pain they feel, nurses do not provide an explanation of nursing actions taken to patients, nurses cannot give confidence that the nursing actions given are for healing, The nurse seems to leave the patient without any attention and will come to the patient's care room when the patient's family comes to the guard post to call for example changing the infusion, making complaints.

2. Method

This study used a cross-sectional research design. The population in this study were all inpatients on the 3rd floor, amounting to 20 nurses, with a total sampling technique, the number of sampel in this study was 20 people. The data were analyzed using univariant and bivariant statistical analysis. The statistical test in this study used the chi square formula (kai squared) to estimate or evaluate the frequency under investigation has a significant relationship or not, with a 95% degree of confidence.

2.1 Respondent Characteristics

Based on the results of research at the Martha Friska Hospital, Pulau Brayan in 2018, it is known that the data on the characteristics of respondents based on age, gender, education and occupation were obtained from 20 respondents. The results of the respondent characteristics data are presented in table form below:

Table 1.

Data on the Characteristics of Respondents at the Martha Friska Hospital in Brayan Island in 2018

No	Data Demografi	Frekuensi	Presentase (%)
1	Umur		
	20-30 thn	5	25,0
	31-40 thn	10	50,0
	> 40 thn	5	25,0
	Jumlah	20	100
2	Jenis Kelamin		
	Laki-laki	9	45,0
	Perempuan	11	55,0
	Jumlah	20	100
3	Pendidikan		
	SMP	5	25,0
	SMA	11	55,0
	D III/ S1	4	20,0
	Jumlah	20	100
4	Pekerjaan		
	IRT	6	30,0
	Pegawai Swasta	2	10,0
	Petani	4	20,0
	PNS	1	5,0
	Wiraswasta	7	35,0
	Jumlah	20	100

Based on table 1 above, the data on the characteristics of the majority of respondents aged 31-40 years are 10 respondents (50.0%), 11 respondents (55.0%) are female, with 11 respondents (55%) with secondary education level (SMA).) and work as housewives as many as 7 respondents (35%).

3. Results & Analysis

3.1 Results

a) Inpatient Therapeutic Communication at Martha Friska Hospital, Pulau Brayan, 2018

The frequency distribution of inpatient therapeutic communication at Martha Friska Hospital, Pulau Brayan in 2018 can be seen in the following table:

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journal homepage: www.midwifery.iocspublisher.org**Tabel 2.**

Frequency Distribution of Inpatient Therapeutic Communication at Martha Friska Hospital, Brayan Island, 2018

No	Komunikasi Terapeutik	Frekuensi	Persentase (%)
1	Baik	6	30,0
2	Cukup	11	55,0
3	Kurang	3	15,0
	Jumlah	20	100

Based on table 2 above, it is known that inpatient therapeutic communication at the Martha Friska Hospital in Brayan Island, which was given by the majority of nurses, was quite good, namely as many as 11 respondents (55%).

b) Satisfaction of Inpatient at Martha Friska Hospital in Brayan Island in 2018

The frequency distribution of inpatient satisfaction data at the Martha Friska Hospital in Brayan Island in 2018 can be seen in table 3 below:

Tabel 3.

Distribution of frequency of inpatient satisfaction data at Martha Friska Hospital, Pulau Brayan in 2018

No	Kepuasan Pasien Rawat Inap	Frekuensi	Persentase (%)
1	Puas	5	25,0
2	Cukup Puas	13	65,0
3	Kurang Puas	2	10,0
	Jumlah	20	100

Based on table 3 above, it is known that the satisfaction of inpatients at the Martha Friska Hospital on Brayan Island was mostly satisfied as many as 13 respondents (65.0%).

3.2 Analisis Bivariat

a) Therapeutic Communication Relationship With Inpatient Satisfaction At Home Sick Martha Friska Pulau Brayan in 2018

Data analysis of the relationship between therapeutic communication and satisfaction of inpatients at the Martha Friska Hospital, Pulau Brayan in 2018 can be seen in table 4 below:

Tabel 4.

Cross Tabulation of Therapeutic Communication Relationship with Inpatient Satisfaction at Martha Friska Hospital, Pulau Brayan in 2018

Komunikasi Terapeutik	Kepuasan Pasien						Total	X ² _{hitung}	p value	
	Puas		Cukup Puas		Kurang Puas					
	f	%	f	%	f	%				
Baik	4	20,0	2	10,0	0	0,0	6	30,0	19,888	0,001
Cukup	1	5,0	10	50,0	0	0,0	11	55,0		
Kurang	0	0,0	1	5,0	2	10,0	3	15,0		
Total	5	25,0	13	65,0	2	10,0	20	100,0		

Based on table 4 above, it is known that nurse therapeutic communication with patient satisfaction shows that nurses who have good therapeutic communication skills and patients are satisfied as many as 4 people (20%) and are quite satisfied as many as 2 people (10.0%). There were 1 nurse (5%) who had good therapeutic communication skills, but 10 (50%) felt satisfied. Meanwhile, there were 1 nurse (5%) who had poor therapeutic communication skills but felt quite satisfied and 2 (10%) felt dissatisfied.

The results of the chi square statistical test showed that the p value = 0.001 (p < 0.05) means that the Alternative Hypothesis (H_a) is accepted, which means that there is a significant relationship between therapeutic communication and inpatient satisfaction at Martha Friska Hospital, Brayan Island in 2018.

3.3 Discussion

Based on table 4 above, it is known that inpatient therapeutic communication at the Martha Friska Hospital in Brayan Island which was given by nurses was quite good, namely as many as 11 respondents (55%). Adequate therapeutic communication is probably due to the staff lack of understanding of their duties and responsibilities in providing health services by building good therapeutic communication with patients.

Good therapeutic communication is probably due to the fact that the nurse understands how to communicate well. This ability can be obtained by nurses through education taken by

nurses or trainings on therapeutic communication, so that nurses have good skills about therapeutic communication.

Therapeutic communication is needed to convey messages from nurses to patients so that it can facilitate postoperative care. This is in accordance with the opinion which states that the benefit of therapeutic communication is to encourage and encourage cooperation between nurses and patients through the nurse-patient relationship. Identify, reveal feelings and assess problems and evaluate the actions taken by nurses (Indrawati, 2003).

During therapeutic communication, nurses use themselves as therapeutic tools to build therapeutic relationships with clients, helping clients grow, change and recover (Videback, 2008). Therapeutic communication includes interpersonal communication with a starting point of mutual understanding between nurses and patients.

The basic problem and this communication is the mutual need between nurses and patients, so that it can be categorized into the realm of personal communication between nurses and patients, nurses helping and patients receiving assistance (Indrawati, 2003).

According to the researcher's assumption that therapeutic communication is very beneficial for nurses because it can get information about the patient's condition and for patients this communication can help in conveying patient complaints so that proper diagnosis and appropriate nursing care can be made in accordance with the patient's illness so that patients can get a cure. .

Based on table 3 above, it is known that the satisfaction of inpatients at the Martha Friska Hospital on Brayan Island was mostly satisfied as many as 13 respondents (65.0%). Patient satisfaction who feels quite satisfied is probably due to communication services provided to patients can be done quite well, by paying attention to patient complaints. One of the factors that influence satisfaction is service. This is in accordance with the opinion which states that one of the factors that influence patient satisfaction is the quality of service, namely the quality of service plays an important role in the service industry. Customers in this case the patient will feel satisfied if they get good service or as expected (Budiastuti, 2002).

Patient satisfaction who is satisfied with the services provided by nurses can influence patients to return to the Martha Friska Pulau Brayan Hospital when they are sick or even invite their family or friends to use nursing services at the Martha Friska Hospital on Brayan Island.

The factors that influence patient satisfaction are health care experience, quality of language interpretation and waiting time. The power of word of mouth indicates that friends or relations have an important influence in choosing a hospital (Cateora & Graham, 2007).

The results showed that respondents with a lower level of education would feel more satisfied. A person's education level will tend to help him to form a knowledge of his attitudes and behavior towards something. With good knowledge, a person can evaluate the ability to justify or assess a specified material or object. The higher the level of education of a person, the power to criticize everything will increase. So that someone with higher education should be more critical in determining whether the services provided can provide a sense of satisfaction or not. an increase in patient dissatisfaction with the services of doctors or hospitals or other health workers can occur as a result of the higher average education of the community, making them more knowledgeable about their rights and more assertive (Lestari, et al, 2009).

Every patient who is operated on is in a certain psychological state as a result of his illness. The patient knows that he is being operated on and treated. Therefore, he deserves clear information about the course of the surgery that will be facing him. This requires the openness of the surgeon. Personality and background of the patient must be known by the surgeon while being the object of surgery. Patients put certain expectations on the surgery that will be undergoing, and this affects their psyche for the days leading up to the surgery. This situation can be minimized by providing good therapeutic communication services to patients, especially after surgery because in this condition the patient does not know what to do with him, especially the surgical wounds he has suffered. Communication made to postoperative patients can be done by touch. This is appropriate with the opinion of Tasmuri (2006) which states that communication in the postoperative phase can be carried out immediately after the client is in the recovery room. Verbal communication begins to be carried out by nurses even though the client is not fully aware. Non-verbal communication techniques such as using touch.

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According to Anoraga (2009) there is a tendency for older consumers to be more satisfied than consumers who are relatively younger. It is assumed that older consumers have experienced so that they are able to adjust to the actual service conditions, while young consumers usually have ideal expectations about the services provided, so that if their expectations are with the reality of services there are gaps, or imbalances it can cause them to become not satisfied.

The results of cross tabulation between nurse therapeutic communication and patient satisfaction showed that there were 4 nurses with good therapeutic communication skills and satisfied patients (20%) and 2 people (10.0%) quite satisfied. This is the same as research conducted by Istafiyana R. 2013, which states that the therapeutic communication of nurses is 100% in the very good category, the level of client satisfaction with the therapeutic communication of nurses illustrates that 41 respondents (85.4%) are very satisfied, 5 clients are satisfied (10.4%) and the client was less than 2 respondents (4.2%) dissatisfied, so the results of the study show that although therapeutic communication is good, there are still patients who are still not satisfied with the therapeutic communication of nurses even in a small number.

This study also found that nurses whose therapeutic communication skills were not good but the patients felt quite satisfied were 1 person (4%) and 2 people were less satisfied (10%), this means that there were still patients who were satisfied even though the nurse's therapeutic communication was lacking, the results of this study are the same as research by Asrin 2006, in the results of this study indicate that ineffective communication still occurs in the daily practice of nurses at Prof. Dr. Margono Soekarjo Purwokerto, but the majority of patients were satisfied with the conversations they had with the nurses. Based on the demographic group, female patients tend to be more satisfied than male patients with nursing communication and patients with low education tend to give positive responses in communicating with nurses.

As for 1 person who is satisfied even though the skills of the nurses are quite good, it is influenced by factors where their education level is still lacking (SD), which is difficult to absorb what the nurse says if the nurse uses high or difficult language to understand. Apart from that it is influenced by ethnicity, various kinds of respondent ethnicity, where the character of the self will be in accordance with their ethnic culture, in this study all Javanese respondents were more satisfied in receiving therapeutic communication services for nurses, besides that it was also influenced by the gender of the respondent where women were more likely satisfied compared to men, this is supported by the research conducted.

Therapeutic communication is part of providing information between nurse and patient. The nurse obtains the information needed to make a diagnosis and nursing care, while the patient obtains information related to the process of treating and healing the patient's disease so that patient satisfaction is formed. This is consistent with the statement of Leonard (1996) which shows that providing patients with information about management and care is a very effective strategy in terms of patient satisfaction with care and cost savings (Morrison & Burnand).

This study is in accordance with the research conducted by Nursahid (2009), where the results of the chi square bivariate correlation test showed a p value of 0.000. The value of 0.000 is far below the alpha value of 5% (0.05). So it can be said that there is a significant relationship between the implementation of therapeutic communication with the level of patient satisfaction.

This result is in accordance with the theory put forward by Dwidiyanti (2008). One of the factors that influence patient satisfaction is providing services with therapeutic communication. Nurses who have therapeutic communication skills will not only build a relationship of trust in the patient, prevent legal problems, provide professional satisfaction in nursing services and improve the image of the nursing profession and the image of the hospital.

Nursing services in the hospital are a major part of the health services provided to clients. Therefore, the quality of health services is very much determined by the quality of nursing services and the quality of nursing services is influenced by the effectiveness of nurses in providing nursing care to clients. The need for nurses to build a relationship of trust with clients through a therapeutic communication, which is useful as a support in the implementation of nursing care, so that they can find out what is being felt and what is needed by the client. Therapeutic communication itself is a way to provide accurate information and build a trusting

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relationship with clients so that clients will feel satisfied with the nursing services they receive (Nursahid, 2009).

Based on the above, it can be concluded that therapeutic communication plays an important role in helping patients solve the problems they are facing. Therapeutic communication is defined as communication that is planned consciously, aims and activities are centered on the patient's recovery. So that it affects the level of patient satisfaction during the treatment period.

4. Conclusions

Based on the description of the results and discussion, it can be concluded that the therapeutic communication of inpatient nurses at the Martha Friska Pulau Brayan Hospital in 2018 the majority have sufficient therapeutic communication skills as many as 11 respondents (55%), the majority of Inpatient Satisfaction at Martha Friska Pulau Brayan Hospital in 2018 the majority 13 respondents (65.0%) were quite satisfied and there was a significant relationship between therapeutic communication and inpatient satisfaction at Martha Friska Hospital, Pulau Brayan in 2018, with a p value = 0.001 ($p < 0.05$).

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