

Hubungan efikasi diri dengan kesalahan pemberian obat oleh perawat = The relationship of self efficacy with the medication administration error by nurses

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Abstrak

Latar belakang: Insiden kesalahan pemberian obat terjadi karena kurang pengetahuan, kurang pengalaman dan kurang ketelitian dalam pemberian obat. Penulisan manuskrip ini bertujuan mengidentifikasi hubungan efikasi diri dengan kesalahan perawat dalam pemberian obat di rumah sakit.

Metode: Penelitian dengan desain deskriptif analitik cross sectional ini melibatkan 200 perawat.

Pengambilan sampel dengan teknik proporsionate stratified random sampling. Data dikumpulkan menggunakan Skala Efikasi Diri dalam Pemberian Obat dan Skala Kesalahan Pemberian Obat.

Hasil: Total efikasi diri perawat 74,4%, efikasi diri tertinggi adalah kompetensi klinis (79,16%) dan terendah komunikasi kolaborasi (70,83%) dan pengembangan profesional (70,83%). Faktor yang paling berpengaruh adalah unit kerja, pelatihan, kemahiran dan tanggung jawab profesional.

Kesimpulan: Efikasi diri berhubungan dengan kesalahan pemberian obat ($r = -0,295$, $p < 0,001$). Kesalahan pemberian obat disebabkan oleh berbagai faktor. Strategi yang diusulkan untuk mengurangi kesalahan adalah penghargaan kepada perawat yang melaporkan kesalahan, program pengembangan professional keperawatan melalui pelatihan, dan diskusi refleksi kasus, program bimbingan oleh preceptor dan model praktik keperawatan professional agar perawat mendapatkan dukungan dan bimbingan berkelanjutan tentang pemberian obat yang aman.

.....Background: Incidences of medication errors occur due to lack of knowledge, lack of experience and lack of accuracy in drug administration. The writing of this manuscript aims to identify the relationship between self-efficacy and nurses errors in administering medication at the hospital.

Method: The study was a cross sectional descriptive analytic design involving 200 nurses. Sampling using proportional stratified random sampling technique. Data was collected using the Scale of Self-Efficacy in the Provision of Medication and MAE self-reported questionnaire.

Results: Total nurse self-efficacy was 74.4%, highest self-efficacy was clinical competence (79.16%) and lowest collaboration communication (70.83%) and professional development (70.83%). The most influential factors are work units, training, professional skills and responsibilities.

Conclusion: Errors in drug administration are caused by various factors. The strategies proposed to reduce errors are awards to nurses who report errors, nursing professional development programs through training, and discussion of case reflection, guidance programs by preceptors and professional nursing practice models so that nurses get ongoing support and guidance on safe drug administration.