

Analisis faktor-faktor yang mempengaruhi penerapan komunikasi SBAR saat serah terima dirumah sakit = Analysis of factors affecting the application of SBAR communication during handover at the hospital

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Abstrak

Penerapan komunikasi SBAR perawat diruangan saat serah terima belum optimal, kurang lengkapnya informasi saat operan dapat menyebabkan terjadinya miskomunikasi. Penelitian ini bertujuan untuk mengetahui faktor-faktor yang mempengaruhi perawat dalam menerapkan komunikasi SBAR saat serah terima diruangan. Penelitian cross sectional ini dilakukan terhadap 161 responden dengan teknik pengambilan sampel menggunakan purposive sampling. Hasil analisis menunjukkan bahwa ada hubungan yang signifikan antara usia (p-value 0,006), lama kerja (p-value < 0,037), sikap (p-value 0,002) dan lingkungan fisik (p-value 0,007) terhadap penerapan komunikasi SBAR diruangan. Kesimpulan penelitian adalah terdapat hubungan faktor usia, lama kerja, sikap, dan lingkungan fisik dengan penerapan komunikasi SBAR. Tidak terdapat hubungan antara faktor tingkat pendidikan dan dukungan pemimpin dengan penerapan komunikasi SBAR. Sikap positif perawat merupakan faktor yang paling dominan dan paling berkontribusi dalam menerapkan komunikasi SBAR yang efektif (OR 2,916). Penelitian ini merekomendasikan pelaksanaan sosialisasi rutin mengenai format SBAR, peningkatan pengawasan dan supervisi ketua tim atau kepala ruangan terhadap perawat pelaksana saat serah terima pasien. Manajemen rumah sakit juga dapat memberikan reward atau penghargaan bagi perawat yang memiliki sikap positif terhadap penerapan komunikasi SBAR. Tersedianya format SBAR yang memadai sehingga mengurangi hambatan dalam pelaksanaan komunikasi.

.....The application of SBAR communication for nurses during handover is not optimal, incomplete information during passes can cause miscommunication. This study aims to determine the factors that influence nurses in implementing SBAR communication during handover. This cross-sectional study was conducted on 161 respondents with a sampling technique using purposive sampling. The results of the analysis showed that there was a significant relationship between age (p-value 0.006), length of work (p-value 0.037), attitude (p-value 0.002) and physical environment (p-value 0.007) to the application of SBAR communication. The conclusion of the study is that there is a relationship between age, length of work, attitude, and physical environment with the application of SBAR communication. There is no relationship between education level and leadership support factors and the application of SBAR communication. The nurse's positive attitude is the most dominant and most contributing factor in implementing effective SBAR communication (OR 2.916). This study recommends the implementation of routine socialization regarding the SBAR format, increased supervision and supervision of the team leader or head of the room to the implementing nurse during patient handover. Hospital management can also provide rewards or rewards for nurses who have a positive attitude towards the implementation of SBAR communication. The availability of an adequate SBAR format so as to reduce obstacles in the implementation of communication.