

Pengembangan Alat Ukur Beban Kerja Mental Saat Interaksi Dalam Asuhan Keperawatan = Construction Of Mentally Workload Measurement Tool When Interaction In Nursing Care

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Abstrak

Pengembangan alat ukur menelaah perubahan psikologis, mental dan perilaku saat interaksi dalam konteks asuhan keperawatan melalui telaah hasil persepsi teruji, observasi pendamping, observasi dari penguji dan angket klien, sehingga dapat memberikan informasi diagnostik beban kerja mental. Selama interaksi perawat dengan klien dipengaruhi oleh jenis interaksi, kondisi klien, ketersediaan waktu, kemampuan berfikir kritis, kemampuan mengelola masalah, keseimbangan diri dan kontrol diri. Beban kerja mental saat interaksi dapat muncul apabila terjadi selisih kapasitas maksimum seorang perawat untuk dapat melakukan upaya fisik, mental, pengelolaan waktu, kinerja, upaya mengelola perasaan frustrasi dan effort dengan pengaruh yang muncul saat interaksi. Akibat terjadinya beban kerja mental dapat muncul perubahan fisik, perubahan perilaku dan perubahan psikologis. Pendekatan interpretasi menggunakan skala interval dan skala ordinal yang diisi oleh 596 partisipan dengan 11 case processing data. Penelitian dilaksanakan di provinsi Jawa Barat, Jawa Tengah, Sumatra Barat dan Sulawesi Selatan. Validitas dan reliabilitas variabel persepsi teruji ($\alpha=0,996$ sebelum interaksi dan $\alpha=0,993$ setelah interaksi), observasi ($\alpha=0,844$ sebelum interaksi, $\alpha=0,711$) orientasi ($\alpha=0,711$), identifikasi ($\alpha=0,769$), eksplorasi ($\alpha=0,773$), resolusi ($\alpha=0,820$), setelah interaksi ($\alpha=0,772$), angket klien ($\alpha=0,64$). Hasil pengujian model Confirmatory Factor Analisis (CFA) melalui program Lisrel menghasilkan p-value = 0,150 ($p>0,05$) dan RMSEA = 0,075 (RMSEA<0,1). Simpulan alat ukur ini valid dan reliabel yang fit karena telah menggunakan komponen-komponen yang menyebabkan model alat ukur fit sebagai informasi diagnostik pengukuran beban kerja mental. Saran diperlukan dukungan regulasi sebagai implikasi dalam penggunaan alat ukur.

.....Development of a measuring tool examines the psychological changes, mental and behavioral interactions in the context of nursing care through the study of perception results tested, companion observation, observation of testing and questionnaire client, so it can provide diagnostic information of mental workload. During the interaction of nurses with clients affected by the type of interaction, client conditions, availability of time, critical thinking skills, ability to manage the problem, the balance of self and self-control. Mental workload when interaction occurs when there is difference in the maximum capacity of a nurse to be able to perform physical effort, mental, time management, performance, efforts to manage feelings of frustration and effort to the effect that appears when the interaction. Due to the occurrence of mental workload may arise physical changes, changes in behavioral and psychological changes.

Interpretation approach using interval scale and ordinal scale completed by 596 participants with 11 case processing data. The experiment was conducted in the province of West Java, Central Java, West Sumatra and South Sulawesi. Validity and reliability perception variables tested ($\alpha = 0.996$ and $\alpha =$ before interaction after interaction 0.993), observation ($\alpha = 0.844$ before interaction, $\alpha = 0.711$) orientation ($\alpha = 0.711$), identification ($\alpha = 0.769$), exploration ($\alpha = 0.773$), resolution ($\alpha = 0.820$), after the interaction ($\alpha = 0.772$), client questionnaire ($\alpha = 0.64$). The results of model testing Confirmatory Factor Analysis (CFA) through lisrel program produces p-value = 0.150 ($p > 0.05$) and RMSEA = 0.075 (RMSEA<0.1).

Conclusions this measure valid and reliable fit for the use of components that cause the model fit as a measuring instrument diagnostic information measuring mental workload. Suggestions needed support as the regulatory implications of the use of measuring tools.