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STRATEGY OF NURSES' ATTITUDE CHANGE THROUGH TRAINING OF TEAM PROFESSIONAL NURSING PRACTICE MODEL IN PANCARAN KASIH HOSPITAL MANADO

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ABSTRACT

MPKP training activities related to the implementation of the pre-conference, handover, and post-conference, is a way to transform knowledge and skills. This research aims to know the influence of training towards the knowledge and skills of nurses. Research methods are pre-rendering design experiments with static group comparison. Samples obtained for purposive sampling, groups of as many as 20 cases nursing and controls as many as 25 nurses. The instruments used are shaped questionnaire and observation sheets. The t-test analysis indicate that the limit of konfidensi reception H_0 at 0.05, located between α -1.70818962 to 1,708 whereas the difference in the average 6.5, then the conclusion is there is a difference between knowledge of nurses who attend training by nurses who are not following the training. Limit konfidensi reception H_0 on α lies between 0.05-1,178 to 1,178 whereas the average difference between 9.79 then the conclusion there is a difference between the skill of nurses who attend training by nurses who are not following the training. The analysis of the test on the test rank signed α 0.10 T value between 52 to 158. Knowledge with a value of T = 1 result H_0 is rejected, the conclusion is there is a difference in knowledge of nurses before and after training. Variable skills showed the value of T = 0 result H_0 is rejected, the conclusion is there is a difference in the skills of nurses before and after training.

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INTRODUCTION

Management of patients' service in the in-patient room by the nurses was an important part because they who were directly in communication with the patients and their families during 24 hours in care. In doing the job and service, every nurse was demanded to give service to the patients professionally. This would increase the service quality in order that every customer, in this case the inpatient, got satisfaction.

Based on survey and interview carried out with the nurses who works in some care rooms of General Hospital of Pancaran Kasih GMIM Manado, on February 2016, it was found that the nurses hadn't done professional nursing practice model (MPKP). After being investigated, in fact many nurses hadn't well understood the professional nursing practice model, which was the service quality assurance in a hospital.

This research aimed to know the influence of training of team professional nursing practice model toward the nurses' knowledge and skills in General Hospital of Pancaran Kasih GMIM Manado.

A. Objectives

1. General Objective :

This research aimed to know the influence of training of Team Professional Nursing Practice Model (MPKP) toward the nurses' knowledge and skills in implementing *pre-conference*, *handover*, and *post-conference* in General Hospital of Pancaran Kasih GMIM Manado.

B. The Significant of Research

The significant of research was to improve nurses' knowledge and skills in implementing *pre-conference*, *handover*, and *post-conference* in General Hospital of Pancaran Kasih GMIM Manado.

THEORETICAL REVIEW

A. Training

Training is very important thing in the improvement process of nurses' knowledge and skills in implementing the measures in giving service to the patients. In this case, training is a learning experience which given to the nurses related with the improvement of their ability in giving well service.

According to Dessler, (2003) training is a process of skill teaching that is needed by new employees to do their job. Training could be meant teach and show the nurses how to implement activities of *pre-conference*, *handover*, and *post-conference*. According

to Mathis & Jackson (2002), Training is a process where people achieve certain competency in order to help achieving organization's goals. Therefore, this process is committed to any organization's goals; training can be seen narrowly or widely. Definitely, training prepares the employees with knowledge that was specific and can be known and also skills that used in their work.

B. Professional Nursing Practice Model

Professional Nursing Practice Model (MPKP) is a system (structure, process, and professional values), that facilitates professional nurses, manages the giving of nursing education, included the environment of the education given (Sitorus, & Yuli, 2006).

Team Nursing was improved in the early of 1950s when the directors of nursing decided that team approach could unite category difference of executor nurses and was as effort to decrease problems which caused by the using of functional model. At the team model, nurses collaborate to give nursing education for a group of patient under the direction/guidance of a professional nurse (Marquis & Huston, 2000). Some communication forms in MPKP *Handover* room are communication and handover inter shift that was directed by room leader. *Pre conference* is communication of team leader and executor nurses after finishing the shift. *Pre conference* is communication of team leader and executor nurses after finishing *handover* for the activities plan at that shift (Keliat, Dkk. 2006).

C. Pre-conference

Pre-conference activity is done by the team leader and executor nurses to talk about activity result during the *shift*. This activity is done routinely as part of communication between team leader or team care-taker and executor nurse before doing nursing education at the running shift. *Pre conference* is communication of team leader and executor nurses after finishing the shift for the activities planning at that shift which was directed by team leader or team care-taker. If there is only one person who is in duty, so that pre conference is excluded. The substance of *pre conference* is planning of each nurse (daily planning), and additional planning from team leader and team care-taker (Keliat, dkk, 2006).

The purpose of *pre conference* is to help in identifying patients' problems, planning the education and result evaluation, and also preparing things that will be met in the field and giving chance to discuss about patients' condition.

D. Handover

Transfer of patients is one of communication form of nurses inter shift in doing nursing education at the patients. Transfer of patients is planned as one method to give relevant information for the nurses team in every shift turning, as practice guideline to give information about the patients' recent condition, treatment purpose, nursing plan, and decides the service priority (Rushton, 2010).

Transfer of patients or handover is done in order to communicate the patients' condition and give important information which is needed to be followed up by the next duty, give information about condition or general condition of the clients and arrange the work schedule for next duty. Well arranged handover can help to identify error and facilitate the continuity of patients' care Keliat, dkk (2006).

E. Post Conference

Post-conference is done by team leader or team care-taker and executor nurses to communicate the activities result during the shift done. This activity is done routinely as part of communication between team leader or team care-taker with executor nurses after doing nursing education at that shift.

According to Keliat, Dkk (2006) *post Conference* is communication of team leader and executor nurses about activities result during the shift and before turning to the next shift. The purpose of *post conference* is to give chance to discuss the problem solving and compare the problem faced, and it was done before the shift turning.

F. Hypothesis

1. There was respondents' knowledge difference before and after joining the training of Team Professional Nursing Practice Model.
2. There was respondents' skill difference before and after joining the training of Team Professional Nursing Practice Model.
3. There was knowledge difference of respondents who joined and who did not join the training of Team Professional Nursing Practice Model.
4. There was skill difference of respondents who joined and who did not join the training of Team Professional Nursing Practice Model.

METHODS

A. Research Design

This research used quasi experiment method with design of *static group comparison* where there were case group which would be given the training and control group.

B. Population and Sample

The populations of the research were nurses who worked in the inpatient service room of Pancaran Kasih Hospital Manado. Samples who were used in this research were 20 persons for case group and 25 persons for control group. Sampling determination was done by *Purposive sampling* where the samples were decided based on certain criteria.

C. Instrument/Material and Procedure

Instrument that used in this research was questioner which consisted of questioner sheet for knowledge and check list sheet for nurses' skill about *pre-conference, handover, and post-conference*.

D. Data Collecting Procedure

Data collecting about nurses' knowledge was done at 20 persons before and after getting the training and the other 25 persons who didn't get training, by answering the questioner. Whereas, data collecting about nurses' skill was done through observation by giving check mark when they did the practice before and after the training and also to the control group.

E. Data Analysis

Univariate analysis was used to find frequency distribution and percentage of average value (mean), variant, and deviation standard about nurses' knowledge and skill in implementing Professional Nursing Practice Model before and after the training and to the control group. Analysis of nurses' knowledge and skill difference before and after the training of Professional Nursing Practice Model was using statistical test of Wilcoxon sign rank test with reliance degree (CI) 95%, $\alpha = 0,05$. Analysis of nurses' knowledge and skill difference between case group and control group was using t-test with reliance degree (CI) 95%, $\alpha = 0,05$.

RESULTS

Professional service is critical to success the work quality of nurses which focused on professionalism, such as the implementation of *pre-conference, handover, and post conference*. This research was done by giving training included nurses'

knowledge and skill in implementing *pre- conference*, *handover*, and *post conference*.

Table 1. Respondents' Characteristic Based on Gender in general Hospital of Pancaran Kasih GMIM Manado Year 2016

Gender	Case		Control	
	Number	%	Number	%
Male	3	15	5	20
Female	17	85	20	80
Total	20	100	25	100

In Table 1, generally, respondents' characteristic of case group and control group was female.

Table 2. Respondents' Characteristic Based on Education Background in general Hospital of Pancaran Kasih GMIM Manado Year 2016

Education	Case		Control	
	Number	%	Number	%
Diploma III	14	70	22	88
Sarjana/ Ners	6	30	3	12
Total	20	100	25	100

In Table 2, generally, respondents' characteristic of case group and control group had Diploma III degree.

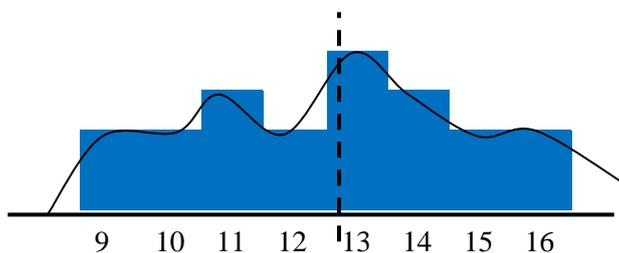


Figure 1. Data of Case Group's Knowledge before being Given Training in General Hospital of Pancaran Kasih GMIM Manado Year 2016

Figure 1, showed that case group before being given the training had knowledge with mean 12,55, deviation standard 2.164, lowest value 9 and highest value 16.

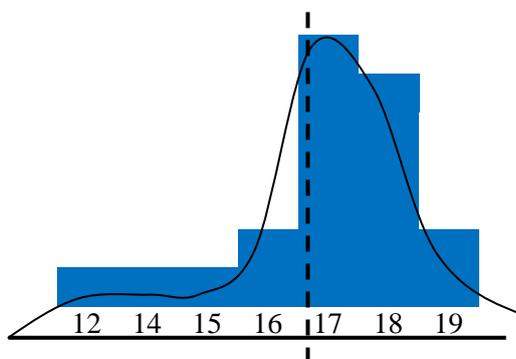


Figure 2. Data of Case Group's Knowledge after being Given Training in General Hospital of Pancaran Kasih GMIM Manado Year 2016

Figure 2, showed that case group after being given the training had knowledge with mean 16,9, deviation standard 1.683, lowest value 12 and highest value 19.

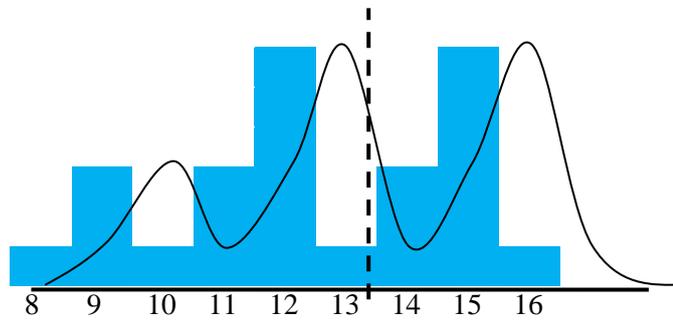


Figure 3. Data of Control Group's Knowledge in general Hospital of Pancaran Kasih Pancaran Kasih GMIM Manado Year 2016

Figure 3, showed that control group had knowledge with mean 12,44, deviation standard 2.279, lowest value 8 and highest value 16.

Table 3. Data of Case and Control Group's Knowledge in general Hospital of Pancaran Kasih Year 2016

Knowledge	Mean	Variant (S ²)	SD	Highest	Lowest
Case (Pre Test)	12.55	4.681579	2.164	9	16
Case (Post Test)	16.9	2.831579	1.683	12	19
Control	12.44	5.191667	2.279	8	16

Table 3, showed that average (mean) of case group's knowledge after training was higher than before training, and control. Deviation standard of control respondents was relatively same with case respondents before training.

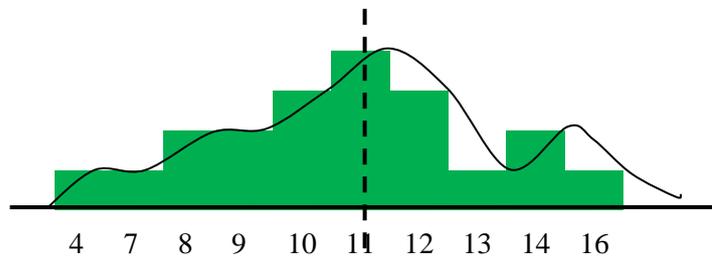


Figure 4. Case Group's Skill before Training in General Hospital of Pancaran GMIM Manado Year 2016

Figure 4, showed that case group before training had mean 10,6, deviation standard 2.638, lowest value 4 and highest value 16.

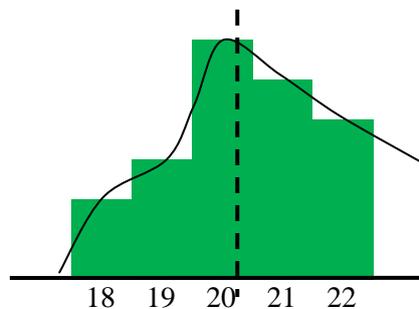


Figure 5. Case Group's Skill after Training in General Hospital of Pancaran GMIM Manado Year 2016

Figure 5, showed that case group before training had mean 20,3, deviation standard 1.261, lowest value 18 and highest value 22.

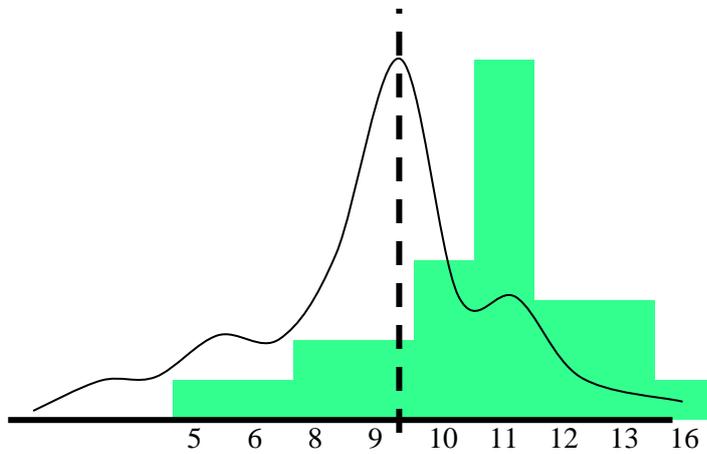


Figure 6. Respondents' Skill of Control Group in General Hospital of Pancaran Kasih GMIM Manado Year 2016

Figure 6, showed that control group had skill with mean 10,52, deviation standard 2,347, lowest value 5 and highest value 16.

Table 4. Data of Case Group and Control Group Skill in general Hospital of Pancaran Kasih Pancaran Kasih GMIM Manado Year 2016

Skill	Mean	Variant (S ²)	SD	Highest	Lowest
Case (Pre Test)	10.6	6.96	2.638	4	16
Case (Post Test)	20.3	1.589474	1.261	18	22
Control	10.52	5.51	2.347	5	16

At table 4, it can be seen that average (mean) of skill for case respondents after training was higher than before training, and control. Deviation standard at the respondents who did not join the training was relatively similar with case respondent before training.

Table 5. Analysis of Knowledge Difference between Case Group and Control Group in General Hospital of Pancaran Kasih GMIM Manado Year 2016

n_1	20	\bar{X} case	16.9
n_2	25	\bar{X} control	10.4
S^2 Case	2.69	S^2 control	12.6176
S^2	7.937553	S	2.8174
$S(\bar{X}_1 - \bar{X}_2)$	0.84522	t dk 43 α 0.05	2.021
Limit			
Confidences	-1.70818962	Average Difference	6.5
	1.70818962		

At table 5. it was analyzed by using t-test which showed that at confidences limit, Ho acceptance with n 43 at α 0.05 after being analyzed, between -1.708 to +1.708 whereas the average difference 6,5, so Ho rejected. It concluded that there was knowledge difference between nurses who joined training and who did not join the training.

Table 6. Analysis of Respondents' Skill Difference Between Case Group and Control Group in General Hospital of Pancaran Kasih GMIM Manado Year 2016

n_1	20	n_2	25
\bar{X} case	20.3	\bar{X} control	10.52

S ² case	1.589473684	S ² control	5.51
S ²	3.777674419	S	1.9436
S($\bar{X}_1 - \bar{X}_2$)	0.58308	t dk 43 α 0.05	2.021
Confidences limit	-1.17840468		
`	1.17840468	Average Difference	9.78

At table 6. it was analyzed by using t-test which showed that at confidences limit, Ho acceptance with n 43 at α 0.05 after being analyzed, between -1.178 to +1.178 whereas the average difference 9.79 so Ho rejected. It concluded that there was skill difference between nurses who joined training and who did not join the training.

Analysis of respondents' knowledge difference before and after training, after being analyzed by using test of Sign Rank Test Wilcoxon with n 20 at α 0.05, T value at the table was between 52 to 158. Result of statistical showed T value = 1 meant Ho rejected. The conclusion, there was difference of respondents' knowledge before and after training.

Analysis of respondents' skill difference before and after training, after being analyzed by using test of Sign Rank Test Wilcoxon with n 20 at α 0.05, T value at the table was between 52 to 158. Result of statistical showed T value = 0 meant Ho rejected. The conclusion, there was difference of respondents' skill before and after training.

DISCUSSION

The importance of training to change nurses' knowledge in implementing professional nursing practice model is especially for the activities of *pre conference*, *handover*, and *post-conference*. Training is a process where people achieve certain competency in order to help achieving the organization's goals (Mathis & Jackson, 2002).

The research result at case and control groups for knowledge variable, showed that confidence limit of Ho acceptance with n 43 at α 0.05 between -1.708 to +1.708 whereas the average difference was 6,5, so it concluded that there was knowledge difference between nurses who joined the training (case group) and nurses who did not join the training (control group).

Training is an activity of improving the employees' or workers; competency in an institution. So, training is a process which will produce a behavior change of the employees (Notoatmodjo, 2009). Training is very important for nurses, not solely, because it is useful for themselves, but also make it worth a while for the hospital because the improvement of nurses' knowledge and skill will impact to the improvement of service quality and customers' satisfaction, in this case nurses, patients, and their family.

The importance of knowledge was also seen where there was significant difference of the nurses before and after training. The data showed: at n 20 with α 0.05 t value in the table was between 52 to 158. The result showed t value = 1 meant Ho rejected. The conclusion, statistically, there was knowledge difference before and after training.

Knowledge about professional nursing practice model might be they got during the education process. The implementation of knowledge will be more important than if the knowledge was not implemented in the hospital. As quoted by Siagian (2011), educationist stated that in fact, all information, which had been received by someone, was saved in his brain. However, in order to be able to be used, those information need to be raised. The way to raise the information received is through repetition (Siagian, 2011). In fact, when it was conducted an observation post-training, the room nurses had implemented that statement in their institution.

Analysis of skill difference between case and control group showed that confidences limit of Ho acceptance with n 43 at α 0.05 between -1.178 to +1.178 whereas the average difference 9.79 so $\alpha < 0.05$. It concluded that there was skill difference between nurses who joined training (course) and who did not join the training (control group).

The importance of training related to result of wilcoxon test with α 0.05 t value at the table was between 52 until 158. The result shows t value = 1 meant Ho rejected. The conclusion, there was respondents' skill difference before and after training.

Professional personnel included the nurses, are the best and the most important resources in an organization, so the improvement of their professionalism becomes very important in an institution. Training and improvement are important infestation for human resources. Training involves all human resources in order to get knowledge and skill so that they will be able to implement it in their work (Wibowo, 2011).

Training is a process which teach knowledge and certain competency and attitude in order that the employees become increasingly skilled and were able to do their responsibility appropriate with ethic standard. Commonly, training refers to the developing of work competency (vocational) that can be used immediately (Mangkuprawira, 2008).

Training is a method that important to be highlighted because by doing training it may be possible to change someone's character in the case of knowledge and skill or behavior. This research proved that both case group with pre-test and control group had average value or mean that was relatively similar, and both of them had a mean that there was difference before and after training, or at the case group which got the training and at the control group which did not get the treatment.

CONCLUSION

1. There was difference knowledge of respondents who joined and who did not join the training of team professional nursing practice model.
2. There was difference skill of nurses who joined and who did not join the training of team professional nursing practice model.
3. There was difference knowledge of respondents before and after joining the training of team professional nursing practice model.
4. There was difference skill of respondents before and after joining the training of team professional nursing practice model.

Suggestion

1. Training of team professional nursing practice model needs to be implemented for all nurses who work in the hospital in order to improve their knowledge and skill in giving service to the customers.
2. Institution of nursing college needs to give dedication to the society by giving training of team professional nursing practice model for the nurses who work in the hospital.
3. The next researcher is hoped to investigate about supervision, nursing round or discharge planning in implementing professional nursing practice model in the hospital.

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