Increasing Job Satisfaction of Nurses through SBAR Communication in Handover of Nursing Tasks

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**Peningkatan Kepuasan Kerja Perawat Melalui Komunikasi SBAR Saat Timbang Terima Tugas Keperawatan**

**KATA KUNCI:**
Komunikasi efektif
Metode SBAR
Kepuasan Kerja
Perawat

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Introduction

A number of studies show that nurses are not satisfied with the working environment (LH Aiken et al., 2001; Staffing, 2002; Van Bogaert, Clarke, et al., 2013). As many as 33,659 nurses from 12 European countries, one in five nurses was dissatisfied with their job. Several studies stated that 46.3% to 63% of nurses were dissatisfied with the work being done (Nurfrida Pratomo Putri et al., 2018; Upik & Sartika, 2010; Wolo et al., 2008; Yanidrawati et al., 2012; Muarif, A., & Adiyanti, M. 2020).

The main causes of dissatisfaction reported by nurses were factors related to the work environment, such as workload, ineffective communication, wages, no opportunities for advancement and opportunities to improve education, as well as nurses’ employment status (LH Aiken et al., 2010; Linda H Aiken et al., 2001; Bogaert et al., 2012; Harless & Mark, 2010; Hayes et al., 2010; Lake, 2002). Ineffective communication between nurses and other health teams will affect the nurse services quality in providing quality patient care and affect patient safety (Muscedere et al., 2008; Wilmer et al., 2008).

The efforts that can be made to increase nurse satisfaction in the work environment are by conducting effective communication, giving praise, giving gifts, giving nurses the opportunity to make decisions, empowering nurses, and providing opportunities to develop skills (Gieter et al., 2010; Van Bogaert, Kowalski, et al., 2013).

The quality of nursing services is influenced by effective communication between nurses. One of the effective communications that can be used in a hospital is the SBAR communication (Situation, Background, Assessment and Recommendation). The SBAR can be used effectively to improve handover between shifts or between staff in the same or different clinical areas. SBAR involves all members of the health team (interprofessional) to provide input into the patients’ situation including providing recommendations (Langsa, 2015). Handover of patients is a method designed to provide relevant information to the nursing team at every shift change, as a practical guide to providing information about the patients’ current condition (Faisal et al., 2016; Rushton, 2010).

The phenomenon that occurs in Karanganyar Hospital is that the nurses’ dissatisfaction at the time of the handover occurs because the information provided by the previous shift nurse is unclear both orally and in writing. As a result of this unclear information, there have been several mistakes in carrying out tasks that risk causing medical errors or malpractice.

Method

Research Participant

The population in this study were nurses who worked in the inpatient room of Karanganyar Hospital as an intervention group and Sragen Hospital as a control group. The sampling using purposive sampling technique. The number of samples in this study was 32 nurses for each group

Research Method

This research is a quantitative study with a quasi experimental design pre and post test.

Research Procedure

The research in the experimental group began with the pretest step, the application of the SBAR method when doing handover and posttest. The pretest was carried out by measuring the job satisfaction of nurses before the application of the SBAR method using a job satisfaction questionnaire. The application of the SBAR method was begun with conducting training on the SBAR communication method. The training includes the presentation of material on the SBAR communication method and role play, the handover activity using the SBAR communication method. The SBAR communication method was implemented after training. The application of the SBAR method was carried out for 2 weeks and observations were made using the observation sheet. The posttest was carried out after the application of the SBAR communication method using a nurse job satisfaction questionnaire.

The research in the control group was carried out by implementing a pretest using a job satisfaction questionnaire. The posttest was carried out after respondents in the intervention group completed the application of the SBAR communication method. The posttest was conducted using a nurse job satisfaction questionnaire.

Instrument

The instrument used in this study was an observation sheet questionnaire to measure the handover process and effective communication using the SBAR method, and a job satisfaction questionnaire. The training for the handover implementation uses the SBAR communication method using a module compiled by the researcher which contains material on the SBAR communication method and the handover

Data Analysis

Data analysis used non-parametric statistics Wilcoxon and Mann-Whitney tests.

Results and Discussion

Twenty-three (71.9%) nurses in the control group were female, 9 (28.1%) were male. The highest number of nurses was in the age group 36-45 years as many as 16 people (50.0%), while the rest were spread in the age group <25 years 1 person (3.1%),> 45 years 10 people (31.3%), and 26 - 35 years 5 people (15.6%). 36 - 45 years old was the age category with peak productivity supported by sufficient maturity and experience. The number of nurses in the experimental group based on age in the 36-45 years age group was 14 people (43.8%), the 26-35 years age group was
3 people (9.4%). In the age group <25 years 4 people (12.5%), and ≤ 45 years 11 people (34.4%).

18 people (56.3%) nurses in the control group had a bachelor’s degree (S1), 14 people (13.8%) had a Diploma (D3) nursing education. 22 people (68.8%) nurses in the control group had a work period of > 10 years, 8 people (25.0%) had a work period of 5 - 10 years, and 2 people (6.3%) had a work period of <5 years.

19 nurses (59.4%) in the experimental group were female, while 13 (40.6%) were male. As many as 18 people (62.1%) had a work period of <5 years. 8 people (27.6%) with a work period of > 10 years, and 3 people or (10.3%) with a work period of 5 - 10 years. 23 people (71.9%) had a Bachelor degree (S1), 9 people (28.1%) had a Diploma (D3) Nursing education. 23 people (71.9%) nurses in the experimental group had a work period of > 10 years, 6 people (18.8%) had a work period of <5 years, and 3 people (9.4%) had a work period of 5 - 10 years.

Gurbuz (2017) reports that education level is positively correlated with job satisfaction. The job satisfaction of employees with a lower level of education tends to be higher than that of employees with a higher level of education.

The research by Kollman et al., (2019) states that the age category affects the level of job satisfaction. Workers/nurses react differently to factors related to their work. Younger

Table 1

| Group    | Pre-Test Mean | p     | Note     | Post-Test Mean | p     | Note     |
|----------|---------------|-------|----------|----------------|-------|----------|
| Control  | 33.33         | 0.721 | Not Significant | 24.91         | 0.001 | Significant |
| Experiment | 31.67         |       |          | 40.09          |       |          |

There are many factors that affect job satisfaction, one of which is effective communication. The communication factor itself can lead to a “feeling of satisfaction” in the perpetrator/nurse which is called “communication satisfaction”. If communication runs smoothly and effectively, communication satisfaction will arise, and vice versa if communication is not effective it will cause dissatisfaction. According to Vermier (2017), communication satisfaction consists of three dimensions, namely (i) the dimensions of the relationship (vertical and horizontal): supervisor / doctor-nurse, among fellow nurses, and patient caregivers; (ii) Dimensions of information flow: climate of communication, one-way or two-way, feedback; and (iii) Dimensions of information content: structure, systematics, clarity, accuracy. The emergence of communication satisfaction will have a positive effect on job satisfaction (Vermier, 2017).

Shahid and Thomas (2018) state that compared to other tools, the SBAR method is the most effective communication tool to apply when handover nursing assignments in hospitals. The SBAR method is valid and reliable because it contains a series of information in the form of: Situation related to the patient’s background, Assessment of the situation and background, and Recommendations regarding treatment plans, therapy, and examinations. needs to be done, or changes in the patient’s condition that must be monitored. The exchange of this series of information at the time of receiving the assignment will make the communication process efficient, smooth, clear and accurate so that the risk of errors is reduced (Shaneela & Sumesh, 2018).

In the context of the nursing work-life where the SBAR method is practised when handover the assignments, the interaction between performance and job satisfaction can occur simultaneously. When the handover process runs smoothly and efficiently because of the effective communication, the task implementation becomes easy, the risk of errors is low, and the success rate is high so that performance is good. The good performance brings a sense of satisfaction in the nurse because he/she is successful in carrying out a job well. Conversely, the emergence of job satisfaction will motivate nurses to maintain their performance and if possible it will even improve.

Conclusions and Recommendations

The SBAR communication method which applied at the time nursing handover assignments has an effect on increasing nurse job satisfaction. The SBAR method has an influence on the job satisfaction of nurses. So, this method can be applied in hospitals as a standard communication tool accompanied by training to improve nurses' skills in using the SBAR communication method.

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