Characteristic Relationship of Nurses in Charge of Patients and Procedures for Patient Service Management by Case Manager with Performance of Nurses in Charge of Patients in the Inpatient Room of TGK Chik Ditiro Sigli Regional General Hospital

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Abstract: The presence of case managers in hospitals is important as part of patient-centered care and plays a role in helping to improve interprofessional collaboration. Case Manager collaborates with nurses in charge of patients related to nursing care provided to patients, so that the implementation of patient service management procedures by a good case manager will have an impact on the good quality of work of nurses in charge of patients. The general purpose of this study is to identify the characteristic relationship of nurses in charge of patients and the management of patient services by case managers with the performance of nurses in charge of patients in the Hospital Inpatient Room TGK. Chik Ditiro. The population in this study was 75 nurses in charge of patients. This study uses a descriptive design correlation with cross sectional approach, Researchers use total sampling techniques as sampling techniques so that the sample in this study amounted to 75 people, this study was housed in TGK Hospital. Chik Ditiro. The results illustrate that there is a relationship between age (p = 0.000), education level (p = 0.009), working life (p = 0.001), and patient service management procedures (p = 0.000) with the performance of nurses in charge of patients. Other results found that there was no relationship between sex (p=0.567) and the performance of the nurse in charge of the patient. The most dominant factor related to the performance of nurses in charge of patients is the management of patient services (EXP B = 19.981). A case manager must be able to carry out every service management procedure well so that nursing care can be provided optimally to patients. In addition, the case manager must also be able to conduct good communication with PPJP and with other interprofessionals so that it can provide optimal results related to the outcome of the care provided. Nursing managers are advised to pay more attention and evaluate the performance of nurses in charge of patients related to nursing care provided. Hospital leaders are expected to strengthen the case manager in the form of training programs on the management of patient services periodically.

Keywords: Case Manager, Nurse Characteristics, Nurse Performance.

1. INTRODUCTION

Hospitals as health care institutions become important in paying attention to the quality of services provided. Hospitals in carrying out their functions must minimize the risks both clinical and nonclinical that may occur during the health care process, therefore of all forms of activities that are organized in hospitals the main priority is patient safety (KARS, 2017). It is also a demand for accreditation for hospitals, where the quality assessment of hospital services is the leading point and recognition to meet accreditation standards.

The existence of a Patient Service Manager (MPP) in the hospital is now an important point in
improving quality nursing care. The presence of MPP in hospitals is important as part of the implementation of patient-centered care and plays a role in helping to improve interprofessional collaboration (Gunawan & Aungsuroch, 2017). Other MPP tasks are also related in facilitating the fulfillment of patient and family needs. MPP also has a role in increasing the involvement of patient empowerment and family related to patient care, so as to provide optimal results related to the outcome of care provided so as to increase patient satisfaction (Staheli, 2017).

Case managers are required to be able to systematically implement appropriate management to improve the achievement of results, affect the implementation of nursing services (Diane, 2017; Gunawan & Aungsuroch, 2017; Staheli, 2017; Tiderington et al., 2013). Patient involvement in the services carried out by case managers greatly affects the improvement of the implementation of case manager management (Eisenberg, 2013). The function and governance of case managers in accordance with the perception of nurses in Indonesia has not been comprehensively and statistically excavated because some related studies only emphasize research using qualitative methods (Kustriyani, 2016).

The problem faced by a case manager today as stated by You et al., (2016) is that case managers rarely conduct monitoring and evaluation activities in accordance with case manager procedures on the results of treatment compared to other case management activities. Case managers do not monitor adequately because they lack time, knowledge of goals/outcomes and goal setting, capacity and support of organizations, and case managers allocate the largest proportion of time for coordination (22.0%) and the smallest proportion to results evaluation (8.0%) (You et al., 2016).

The author also conducted interviews with 10 nurses in charge of patients in the inpatient room obtained information that the case manager is still less than optimal in doing his duties such as communication and coordination with the nurse in charge of the patient, because it is still a new thing and not so understanding related to his duties and responsibilities, so coordination with the nurse in charge of the patient is also still not directed. Suitability of theme and application of case manager at TGK Regional Hospital. Chik Ditiro made a fundamental reason in the selection of research sites.

2. METHOD

The study used a quantitative approach with an analytic descriptive design conducted at Pidie Regional General Hospital. This study used total sampling, i.e. researchers used the entire population as a sample of 75 nurses in charge of patients. The place and time of the study was conducted at Tgk. Chik Ditiro Sigli Regional General Hospital conducted in December 202. KARS Instrument (2017) consisting of 30 statement items, consisting of: identification, selection / screening of patients amounting to 3 statements. Assessment amounted to 3 statements, identification of problems and opportunities amounted to 3 statements, planning amounted to 3 statements, monitoring amounted to 3 statements. Facilitation, coordination, communication, and collaboration amounted to 4 statements, advocacy amounted to 2 statements, service results amounted to 2 statements, Cultural Competence MPP (Cultural Competence MPP) amounted to 1 statement, resource management amounted to 3 statements, termination amounted to 3 statements and measured the performance of nurses in charge of patients using nursing performance instruments.

3. STATISTICAL ANALYSIS

Multivariate analysis in this study uses logistic regression because the dependent variables in this study are categorical types. Multivariate analysis begins by conducting a bivariate analysis of each showing a p-value (sig.) ≤0.25 then the research variable can enter into multivariate analysis modeling. Conversely, if the results of bivariate analysis show a p-value (sig.) > 0.25, then the variable cannot enter into multivariate modeling.

4. RESEARCH RESULTS

| Variabel            | Frekuensi (n) | Persentase (%) |
|---------------------|--------------|----------------|
| Gender              |              |                |
| Female              | 15           | 20,0%          |
| Male                | 60           | 80,0%          |
| Level of Education  |              |                |
| DIII                | 40           | 53,3%          |
| D4/S1               | 10           | 13,3%          |
| Ners                | 25           | 33,3%          |

Describing that ppjp in TGK Chik Ditiro hospital, sigli majority female sex as much as 60 (80.0%). Ppjp education level at TGK Chik Ditiro Hospital, Sigli majority educated D III Nursing is as much as 40 (53.3%).

5. DISCUSSION

The results of the analysis obtained that the most dominant factor that affects the performance of PPJP is the management of patient services. PPJP is a professional who is able to become a team leader and
lead the managing nurse in providing optimal nursing care to patients. PPJP perception of activities carried out by case managers can affect PPJP work motivation.

The implementation of MPP implemented by the case manager perceived by PPJP becomes important because ppjp assessment of case manager indicates that the quality of work of the case manager is the focus of PPJP, because in nursing care given to patient case managers always collaborate with PPJP, and this becomes one of the determining factors in the quality of coordination and collaboration of case managers with other nurses. Case manager is a nurse manager whose existence is very important for the organization to achieve goals (Robbins &Judge, 2017). Less case manager competence will affect the results of services in the form of transfer delays, home delays, cost and quality control, lengthening of stay, readmitsi patients with improved bad conditions (Cesta, 2017).

The role of the patient care facilitator is firmly attached to the role and function of the case manager. The case manager has basic data on the overall course of the patient’s disease. This makes the case manager very important in directing the flow of care journey to other nurses (Gray & White, 2012). The nurse in charge of the patient can consult and get information about the basic patient data he manages, so that it can be an extension of the case manager (Hankey, 2017; A.C. Smith & Larew, 2013). Therefore, ppjp’s performance in nursing care in patients is strongly influenced by its perception of case manager management of services, so case managers need to improve and optimize their roles and functions and the management of patient services implemented on patients.

6. CONCLUSION

The most dominant factor affecting PPJP performance is the management of patient services by case managers perceived by PPJP. A case manager must be able to carry out every service management procedure well so that nursing care can be provided optimally to patients. In addition, the case manager must also be able to communicate well with PPJP, The Doctor in Charge of Patients (DPJP) and the Professional Care Team (PPA), by setting intervention goals and prioritizing patient needs, as well as determining the types of services and resources available to achieve the set goals or desired results.

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