

The Analysis of Factors Associated with the Effectiveness of Nurse Communication to Patients in the Inpatient Room of Teungku Fakinah Hospital, Banda Aceh

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Abstract

The aim of this study is to find out the factors relating to the effectiveness of nurses communication in patient. The type of research in this study is quantitative analytic with cross sectional study approach. The research location is in the inpatient room of Teungku Fakinah Hospital in Banda Aceh. The result of the study are the effectiveness of nurse communication in patients at Teungku Fakinah Hospital is in the category of good at 89%, the value of the variables of openness, empathy, equality, audible (humble) and humble (humble) are in good category that is above 95%, factors that significantly affect the effectiveness of nurse communication in patients at Teungku Fakinah Hospital, namely the openness of empathy level, the level of equality of the audible level (right) and the level of humble (humble). The better the level of openness, the better the effectiveness of nurse communication in patients. The better the level of empathy, the better the communication effectiveness of nurses in patients. The better the level of equality, the better the effectiveness of nurse communication in patients. The better the level of audible (right), the better the effectiveness of nurse communication in patients. The better the level of humble (humble), the better the effectiveness of nurse communication in patients.

Keywords

effectiveness, nurse, communication, hospital



I. Introduction

The number of fundamental changes occur in the world of nursing and nursing services. Nurses who used to help carry out the duties of doctors, became part of efforts to achieve clinical service goals, now they want independent nursing services as an effort to achieve nursing care goals. Nursing services in various hospitals do not yet reflect the practice of professional services. The method of providing nursing care that is implemented is not entirely oriented towards efforts to meet the needs of patients, but rather is oriented towards the implementation of the routine duties of a nurse (Anas, 2014).

Communication plays a role in the healing of patients associated with collaboration between nurses and other health professionals, and also affects patient and family satisfaction. This makes communication needed in every form of service available at the Hospital (Suryani, 2014). Nurses are a profession that is focused on caring for individual families and communities so that they can achieve, maintain or restore optimal health and quality of life from birth to death (Aripuddin, 2014).

The quality of communication in interactions between nurses and patients has a big influence on the patient's healing. To support the development of effective nursing communication in clinical practice, a good understanding of what is communicating will be very helpful (Anjaswarni, 2016).

The effectiveness of communication is central to care services and this is considered a necessity from time to time. To be able to communicate effectively, we need to know the factors that influence it. Nurses must communicate effectively to carry out their roles as educators, case managers and active members of the health care team (Prasetyaningtyas, 2015).

Communication planning is the first step for all types of activities. Including starting development activities, communication planning is a very important part. Sean MacBride negates that communication becomes a cultural tool that causes social integration. With communication, attitudes and motivations someone will be encouraged or influenced to behave, and it will extend to other environments. That is why, individuals with their awareness will play a major role in development. (Kholil, 2019)

A nurse is required to have the ability to communicate well especially work activities carried out involving interactions with others. Communication is an important part of human life because we as humans interact with other humans through communication. We can see this from everyday how people communicate every day to exchange information or even find information and learn how to communicate well. Such as through verbal and nonverbal language (Damaiyanti, 2014).

1.1 Hypothesis

- a. Ha: There is an influence of openness with the effectiveness of nurse communication in patients in the inpatient room of the Teungku Fakinah Hospital in Banda Aceh
- b. Ha: There is an influence of empathy with the effectiveness of nurse communication in patients in the inpatient room of the Teungku Fakinah Hospital in Banda Aceh
- c. Ha: There is an effect of equality with the effectiveness of nurse communication on patients in the inpatient room of the Teungku Fakinah Hospital in Banda Aceh
- d. Ha: There is an audible influence (right) with the effectiveness of nurse communication on patients in the inpatient room of Teungku Fakinah Hospital, Banda Aceh
- e. Ha: There is a humble influence on the effectiveness of nurse communication in patients in the inpatient room of Teungku Fakinah Hospital in Banda Aceh

II. Review of Literatures

2.1 Definition of Communication

The term communication comes from the Latin language, namely *communicatus* which means sharing or shared. The adjective *communis* which means general or together. Thus communication according to Lexicographer (language dictionary expert), refers to an effort aimed at sharing to achieve togetherness (Fajar, 2009).

According to Onong Cahyana Effendi (2003), communication is the process of delivering a message by someone to someone else to tell, change attitudes, opinions, or behavior, either by oral (direct) or indirect (through the media). Meanwhile, according to Anjaswarni (2016) communication is the overall exchange of behavior from the communicator to the communicant, whether realized or not realized, verbal or written speech, movements, facial expressions, and everything in the communicator with the aim to influence others. Communication is a dynamic process and always changes according to the changing circumstances and environmental conditions.

2.2 Communication Process

The development of communication science, a component in the communication process was introduced by David K Berlo (1960) and quoted by Cangara H. (2004). The concept is famous for the concept of "SMCR" which is source (sender), message, channel (media-channel), and receiver (receiver). The latest development is the emergence of the views of Joseph de Vito, et al who value that environmental factors are an important element in supporting the communication process. So that the complete elements in communication include Source, Message, Channel, Receiver, effects, and environment. The relationship between these elements is illustrated in the following chart:

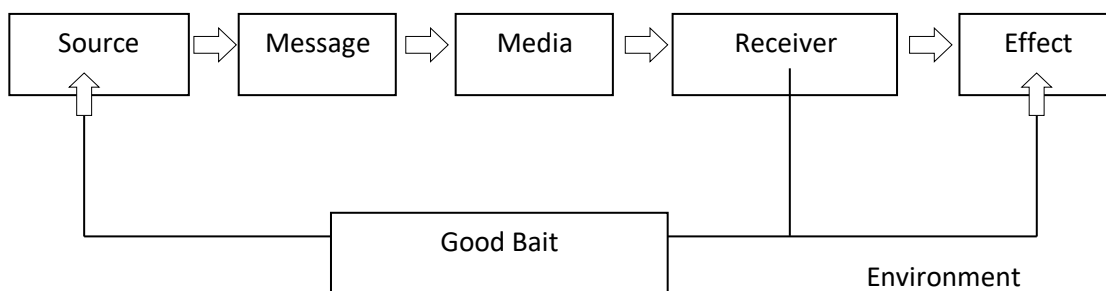


Figure 1 David K Berlo Communication Process (1960)

Based on Figure 1, it can be explained that the Berlo model emphasizes communication as a process and emphasizes the meaning of messages sent to people who receive messages rather than the words of the message itself. In other words, that message interpretation mainly depends on the word or message interpreted by the sender or the recipient (Cangara, 2004).

2.3 Therapeutic Communication

Therapeutic communication is the basis of interactive relationships between health teams and their patients that provides opportunities to build relationships, understand patient experiences, formulate patient interventions and optimize health care resources (Younis, 2015).

Patient nurse therapeutic communication is a mutually beneficial learning experience, a humanitarian based experience between nurses and patients with mutual respect and mutual social-cultural differences between the two. In this relationship, nurses use themselves and communication techniques in the nursing care they provide to change the patterns of thought and behavior changes in clients (Sarfika et al., 2018).

Therapeutic is an adjective associated with the art of healing (Anas, 2014). So here it means that therapeutic is anything that facilitates the healing process. So that therapeutic communication itself is a planned and carried out communication to help the patient's healing / recovery. Therapeutic communication is a professional communication for nurses.

Therapeutic communication is communication that is carried out or designed for therapeutic purposes. A therapist can help clients overcome the problems they face through communication (Damaiyanti, 2014).

Therapeutic communication is communication that is carried out or designed for therapeutic purposes. A helper or nurse can help clients overcome the problems they face through communication (Suryani, 2005).

A nurse is responsible for more than just conveying information to patients, he is also responsible for recognizing, acknowledging, and validating patient feelings. The ability to

develop therapeutic relationships and utilize therapeutic communication skills with patients is an important skill for every nurse (Miles et al, 2014).

Patient safety must be a priority in the modern health care system. According to Redley et al (2017), poor communication poses a risk to patient safety. However, some patients only want to buy their medication as quickly as possible while others want information and / or consultation about their treatment (Olsson, 2014).

Therapeutic communication skills are very important for the success of every nurse. Therapeutic communication skills are in the ability of nurses to use their communication skills to develop and maintain therapeutic relationships with clients. Although there are many methods currently used to teach the skills and therapeutic communication techniques of nursing students, the authors of this project have chosen to focus on the use of standardized client simulations to promote student learning in the field of therapeutic communication.

By having therapeutic communication skills, nurses will more easily establish a trusting relationship with clients, so that it will be more effective in achieving the goals of nursing care that has been applied to provide professional satisfaction in nursing services and will improve the profession (Damaiyanti, 2014).

Dwidiyanti (2008) states that a professional nurse always strives to behave in a therapeutic manner, which means that every interaction carried out has a therapeutic effect that allows clients to grow and develop.

According to Purwanto (1994) quoted in Damaiyanti (2014) the purpose of communication are:

- a. Help patients to clarify and reduce the burden of feelings and thoughts and can take action to change the situation if the patient believes in what is needed.
- b. Reducing doubts, helping to take effective action and maintaining the strength of his ego.
- c. Influencing others, the physical environment, and himself.

Jin, et al (2017) state in their research that the effectiveness of communication skills in improving health service delivery. This study found that communication training in health education is an efficient way to improve health service delivery and competence. In the same vein, Rajah, et al (2017) found that gaps in the practice of health communication between health professionals require educational intervention. According to research, nurses, doctors, and pharmacists fail to use simple language to communicate with patients. In this case, Rajah et al. (2017) found that almost 19.0% of health practitioners admitted to being examined in this study did not often use simple language and avoided medical jargon during communication with patients.

Therefore, ineffective nurse-patient communication can cause dissatisfaction with treatment, misdiagnosis, misunderstanding, uncertainty and frustration for both parties. Therefore information about communication barriers is needed to identify possible causes for the fall in nurse-patient communication. Several studies have reported positive results when communication is effective, consequently leading to adherence to treatment and the involvement of patients in their own care (Kullberg et al, 2015).

2.4 Factors Related to Communication Barriers

Communication between health care providers and patients is very important in achieving the desired satisfaction of patients and improving treatment and care outcomes. Efficient, motivating and purposeful communication is one of the most important tools. Communication is an important means of ensuring effective and better treatment (Olsson et al, 2014). Resolving communication problems prevents health problems from getting worse and disrupts workflow or dissemination to include other health problems. Poor

communication occurs at every level in health care delivery arrangements. This phenomenon in medical practice turns out to be one of the most common causes of errors (Shitu et al, 2018).

According to Manojlovich (2017) one of the main problems that cause medication errors is ineffective communication between patients and health care workers. To produce relevant information based on an understanding of the importance of communication in the treatment process, this paper aims to examine communication problems in the health care environment and how medication errors can be corrected for effective communication.

It is important to highlight the problem of errors in the delivery of health services to raise awareness about the need to improve patient safety (World Health Organization, 2016). Interrupted communication can jeopardize the safety and quality of health services and ultimately lead to medication errors and disruption of patient safety and satisfaction (Ghahramanian et al., 2017)

The main communication error is to assume communication has occurred and successfully passed. Professionals tend to use technical language at work because they assume the tone of communication is always professional. Communication intended for the executive must be concise and appropriate because the executive does not have the time to explore it. However, communication between patients and health care workers must be simple and clear because health care practitioners must assume the responsibility to communicate according to the patient's health knowledge (Rajah et al, 2017).

Miscommunication between patients and health care providers is an important concern. This contributes to the use of unsafe drugs, bad practices, and puts patients at risk of medication errors (Wang, 2017).

III. Research Method

The type of research is quantitative analytic with cross sectional study approach. The research location is in the inpatient room of Teungku Fakinah Hospital in Banda Aceh. Timing of the study will be carried out from February to March 2020.

Calculation of the number of samples using the Slovin formula, ie:

$$n = \frac{N}{(1+Ne^2)}$$

Information:

n = number of samples

N = total population

e = significance level (this research uses 0,05)

Thus the number of samples of this study is

$$\begin{aligned} n &= \frac{300}{(1+300 \times 0,05^2)} \\ &= 171,43 \\ &= 171 \text{ (rounded off)} \end{aligned}$$

To avoid bias, an additional 10% sample is added so that the samples obtained are:
 $171 + (171 \times 10\%) = 188$ people

3.1 Operational Variables and Definitions

To make it easier to understand the meaning of the variables in this study, it will be explained in the operational definitions in table 1 and table 2:

Table 1. Definition of Operational Dependent Variables

Dependent Variable	Operational definition	The Way to Measure	Measuring instrument	Measure Results	Measuring Scale
Openness	Willingness to respond happily to information received in dealing with interpersonal relationships.	Interview	Questionnaire	1. Good \geq middle score 2. Not good $<$ middle score	Ordinal
Empati	The ability of a person to know what is happening to another person at a certain time, from the other person's perspective, through the eyes of other people.	Interview	Questionnaire	1. Good \geq middle score 2. Not good $<$ middle score	Ordinal
Equality	There is a tacit acknowledgment that both parties value, are useful, and have something important to give	Interview	Questionnaire	1. Good \geq middle score 2. Not good $<$ middle score	Ordinal
Dependent Variable	Operational definition	The Way to Measure	Measuring instrument	Measure Results	Measuring Scale
Audible	The message we convey must be clear so that it does not lead to different interpretations.	Interview	Questionnaire	1. Good \geq middle score 2. Not good $<$ middle score	Ordinal
Humble	Humility is a service that is full of service, an attitude of respect, willing to listen and accept criticism, not arrogant, does not look down on others, dare to admit mistakes, willing to forgive, gentle and full of self-control, and prioritizes greater interests.	Interview	Questionnaire	1. Good \geq middle score 2. Not good $<$ middle score	Ordinal

Table 2. Definition of Operational Independent Variables

Variabel Independent	Definisi Operasional	The Way to Measure	Measuring instrument	Measure Results	Measuring Scale
Effectiveness of nurse communication on patients	The exchange of information, ideas, feelings that results in a change in attitude so that a good relationship exists between the nurse provider and the patient.	Interview	Questionnaire	1. Good $>$ middle score 2. Not good $<$ middle score	Ordinal

Analysis of the data in this study will use bivariate and multivariate tests, namely:

a. Univariate test

Univariate analysis aims to explain or describe the characteristics of the respondents under study. This data is primary data collected through filling out a questionnaire.

b. Bivariate Test

The bivariate test used was the chi square test. This test will look at the relationship between the dependent variable (nurse communication to patients) and the independent variables (openness, empathy, equality, audible (right) and humble (humble)).

The Chi Square formula is:

$$\chi^2 = \sum \frac{(O - E)^2}{E}$$

Information:

O = frequency of observations

E = expected frequency.

Score E = (Number of inline x Number of Sekolom) / The amount of data

df = (b-1) (k-1)

To answer the hypothesis then reject the null hypothesis (H0) if the significance value of chi-square <0.05 or the calculated chi-square value is greater (>) than the value of the chi-square table.

c. Multivariate test

The multivariate test that will be used is the logistic regression test. The requirements for this test are:

1. Dependent variables must be dichotomous (2 categories)
2. Independent variables do not have to have the same diversity between groups of variables.
3. Categories in the independent variables must be separate from each other or exclusive.
4. Samples are needed in relatively large quantities, a minimum of up to 50 data samples is required for a predictor variable (independent).

Logistic Regression Equation Formula

$$\ln\left(\frac{\hat{p}}{1-\hat{p}}\right) = B_0 + B_1X$$

Ln = Natural logarithm

B0 + B1X = Equations commonly known in regression models.

The value of Exp (B) can be interpreted as follows:

Value Exp (B) the effect of openness, empathy, equality, audible (right) and humble (humble) on the effectiveness of communication.

IV. Discussion

This research was conducted in the inpatient room of Teungku Fakinah Hospital in Banda Aceh. This research was conducted in the period March 2020 to May 2020. Data collection was conducted in the period March 2020 to April 2020.

This study was to determine the factors associated with the effectiveness of nurse communication in patients in the inpatient room of Teungku Fakinah Hospital. This research was conducted by obtaining the results of quantitative research by filling out questionnaires by patients and taking data from hospital medical records. Primary data collection was collected by distributing questionnaires to 188 respondents. This study uses 5 independent variables, namely openness, empathy, equality, audible (right), and humble (humble).

4.1 Characteristics of Respondents

Characteristics of respondents are a variety of backgrounds that are owned by respondents themselves. From the results of filling out the questionnaire by the patient obtained the following patient characteristics:

Table 3. Characteristics of Respondents

No	Characteristics	total	Percentage (%)
1	Gender		
	Male	87	46
	Female	101	54
	Total	188	100
2	Age		
	18-40	103	55
	41-60	85	45
	Total	188	100

Based on table 3 above, this study used respondents as many as 188 patient samples where from the sample selected in terms of sex as a whole the sample was female as much as 54% and the remaining male as much as 46%. In terms of age, most respondents aged 18-40 years were 55% and the remaining 45% respondents were aged 41-60 years.

4.2 Univariate results

Univariate test was conducted to find out the distribution of each variable studied. The variables studied include the effectiveness of communication, openness, empathy, equality, audible (right) and humble (humble).

There were 188 patients who met the inclusion criteria during the months of March 2020 to April 2020. The distribution of the subjects of this study is in table 4

Table 4. Frequency Distribution of Respondents Based on the Effectiveness of Communication, Openness, Equality, Empathy, Audible (right) and Humble (humble) in Patients

No	Variable	Frequency	Percentage (%)
	Communication Effectiveness		
1.	Good	168	89
2.	Not Good	20	11
	Total	188	100

Openness			
1.	Good	169	90
2.	Not Good	19	10
Total		188	100
Empathy			
1.	Good	186	99
2.	Not Good	2	1
Total		188	100
Equality			
1.	Good	187	99
2.	Not Good	1	1
Total		188	100
Audible			
1.	Good	178	95
2.	Not Good	10	5
Total		188	100
Humble			
1.	Good	185	98
2.	Not Good	3	2
Total		188	100

Based on the table above shows that the level of effectiveness of nurse communication in patients in the inpatient room of Teungku Fakinah Hospital is in the category of good that is 89%. The level of openness is good at 90%. The level of empathy is 99% good. The level of equality is 99% good. Audible rate (right) is in the good category of 95%. And the humble rate is at a good 98%.

4.3 Bivariate Results

a. The Relationship between Openness and the Effectiveness of Nurse Communication

Table 5. The Relationship between Openness and the Effectiveness of Nurse Communication

Openness	Effectiveness of nurse communication				Total	p Value	α
	Good		Not good				
	n	%	n	%			
Good	167	99	2	10	169	0,00	0,05
Not Good	1	1	18	90	19		
Total	168	100	20	100	188		

The 169 respondents who stated the level of openness was good, it appeared that most of the effectiveness of nurse communication was also in the good category at 99%. Of the 19 respondents who stated the level of openness was not good it turned out there was also a level of effectiveness of nurse communication in the good category at 1%.

Statistical test results show that the value of p value is 0.00 meaning that it is smaller than the value of α . It can be concluded that there is a relationship between openness and the level of effectiveness of nurse communication among patients at Teungku Fakinah Hospital.

b. Relationship between Empathy Attitude and Nurse Communication Effectiveness

Table 6. Relationship of Empathy with the Effectiveness of Nurse Communication

Empathy	Effectiveness of nurse communication				Total	p Value	α
	Good		Not Good				
	n	%	n	%			
Good	168	100	18	90	186	0,00	0,05
Not Good	0	0	2	10	2		
Total	168	100	20	100	188		

The 186 respondents who stated that the level of empathy was good, the effectiveness of nurse communication in the good category was 100%. Of the 2 respondents who stated the level of empathy was not good, the level of effectiveness of nurse communication in the good category was 0%.

Statistical test results show that the value of p value is 0.00 meaning that it is smaller than the value of α . It can be concluded that there is a relationship between empathy and the level of effectiveness of nurse communication in patients at Teungku Fakinah Hospital.

c. Relationship of Equality with the Effectiveness of Nurse Communication.

Table 7. Relationship of Equality with the Effectiveness of Nurse Communication

Equality	Effectiveness of nurse communication				Total	p Value	α
	Good		Not Good				
	n	%	n	%			
Good	168	100	19	95	187	0,04	0,05
Not Good	0	0	1	5	1		
Total	168	100	20	100	188		

The 187 respondents who stated the level of equality was good it turned out that the effectiveness of nurse communication in the good category was 100%. From 1 respondent whose equality is not good, the level of effectiveness of nurses' communication is good in the category of 0%

Statistical test results show that the value of p value is 0.04, which means it is smaller than α value. It can be concluded that there is a relationship between equality with the level of effectiveness of nurse communication in patients at Teungku Fakinah Hospital.

d. Relationship Audible (Right) With the Effectiveness of Nurse Communication.

Table 8. Relationship Audible (Right) With the Effectiveness of Nurse Communication

Audible	Effectiveness of nurse communication				Total	p Value	α
	Good		Not Good				
	n	%	n	%			
Good	167	99	11	55	178	0,00	0,05
Not Good	1	1	9	45	10		
Total	168	100	20	100	188		

The 178 respondents who stated that the audible (right) was good it turned out that most of the effectiveness of nurse communication in the good category was 99%. Of the 10 respondents who are audible (right) are not good, the level of effectiveness of nurse communication in the good category is 1%

Statistical test results show that the P value of the Values is 0.00 which means it is smaller than the α value. It can be concluded that there is a relationship between audible (right) with the level of effectiveness of nurse communication in patients at Teungku Fakinah Hospital.

e. Humble Relationship with the Effectiveness of Nurse Communication.

Table 9. Humble Relationship with the Effectiveness of Nurse Communication

Humble	Effectiveness of nurse communication				Total	p Value	α
	Good		Not Good				
	n	%	n	%			
Good	168	100	17	85	185		
Not Good	0	0	3	15	3	0,00	0,05
Total	168	100	20	100	188		

The 185 respondents who stated humble (good humility) turned out to be effective communication nurses in the good category that is 100%. Of the 3 respondents who are humble (humble) are not good, the level of effectiveness of nurse communication in the good category is 0%

Statistical test results show that the value of p value is 0.00 meaning that it is smaller than the value of α . It can be concluded that there is a relationship between humble and the level of effectiveness of nurse communication among patients at Teungku Fakinah Hospital.

4.3 Multivariate results

The tool used in testing this hypothesis is logistic regression. This analysis is used to measure the strength of the relationship between the independent variables and the dependent variable, and to show the direction of the relationship of these variables. This analysis will form an equation that can explain the results below:

Table 10. Logistic Regression Analysis Results

Variable	Coefficient β	Standard Error
A constant	-21.152	3035.248
Openness	22.943	3035.249
Empathy	18.542	26029.426
Equality	19.411	40192.969
Right	21.845	3035.249
Humble	18.898	21986.687

Based on table 10 above shows the coefficient β value is a form of a regression equation that can be generated as follows:

Effectiveness of nurse communication = constant + β level of openness + β level of empathy + β level of equality + β level of audible (exact) + β level of (humble) = -21,152 + 18,898 (openness) + 21,845 (empathy) + 19,411 (equality) + 18,542 (right) + 22,943 (humble)

The results of this regression also get results that the number of samples that have good nurse communication effectiveness is 168 people. There are 166 people who really have effective nurse communication effectiveness and there should be 2 people who don't have good nurse communication effectiveness. While the number of samples that have less effective communication nurses $0 + 20 = 20$ people. There were 20 people who actually had poor nurse communication effectiveness, and those who should have had poor nurse communication effectiveness but had 0 nurse communication effectiveness. The accuracy of this research model is 98.9%.

V. Conclusion

Based on the data and discussion, conclusions can be drawn:

1. The effectiveness of nurse communication in patients at Teungku Fakinah Hospital is in the category of good at 89%.
2. The value of the variables of openness, empathy, equality, audible (humble) and humble (humble) are in good category that is above 95%.
3. Factors that significantly affect the effectiveness of nurse communication in patients at Teungku Fakinah Hospital, namely the openness of empathy level, the level of equality of the audible level (right) and the level of humble (humble).
 - a. The better the level of openness, the better the effectiveness of nurse communication in patients.
 - b. The better the level of empathy, the better the communication effectiveness of nurses in patients.
 - c. The better the level of equality, the better the effectiveness of nurse communication in patients.
 - d. The better the level of audible (right), the better the effectiveness of nurse communication in patients.
 - e. The better the level of humble (humble), the better the effectiveness of nurse communication in patients.

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