



DEVELOPMENT OF STANDARD OPERATING PROCEDURES (SPO) FOR MANAGEMENT OF "DANGER" IN EMERGENCY PATIENTS WITH ANXIETY DISORDER

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ABSTRACT

The Emergency Unit is the first department to provide action to patients in emergencies to save lives, however patients with psychiatric anxiety disorder still receive general treatment. The Emergency Unit is the first department to provide action to patients in an emergency to save lives, however, patients with psychiatric anxiety disorders still receive general care. Therefore, this research aims to develop SOPs for handling emergency patients with anxiety disorders. Method: The research design was Research and Development carried out in 2 stages. The first phase population was 5 SOPs for emergency management. The first stage was FGD 1, divided into 3 groups, namely 17 executive nurses, 6 nursing management staff, and 2 experts (academics and practitioners). The population for the second stage of SPO development was filled by 5 nurses. The second stage was carried out FGD 2 with participants from 6 levels of nursing management. The sample used in this research was purposive sampling. The design developed is an SOP for the management of emergency patients with anxiety disorder. The analysis uses the CVI and KR20 tests. Results: There were no SOPs for handling emergency patients with anxiety disorders. The development of SPO combines psychiatric emergency management in the form of environmental manipulation, verbal de-escalation, mechanical fixation, and pharmacological intervention with medical emergency management procedures including primary survey (airway, breathing, circulation, disability). The validity results show the CVI test is 0.8-1 and the KR20 is 0.83. Research recommendations that the development of SPO can be applied in the treatment of emergency patients with anxiety disorder. Conclusion: The development of SPO is declared to be valid and reliable in categories both in terms of functionality, efficiency, and usability, so it is recommended that nurses use it to improve the quality of hospital services.

Keywords: anxiety; boisterous; emergency; spo

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INTRODUCTION

The Emergency Unit (ER) is the first department to provide action to patients with emergencies to save life and life (Chou & Tseng, 2020). ER, nurses have many challenges because they make the first contact and provide the most direct action to patients (Ryan et al., 2021). Emergency nurses provide nursing care to patients of all groups in complex settings. The majority of nurses working in the ER have general nursing education (Mulhearn et al., 2021). Patients with mental disorders come to the emergency unit to receive traditional medical-based treatment with different recovery beliefs (Perrone McIntosh, 2021). Thus,

nurses in providing treatment for psychiatric patients experience problems. Emergencies for psychiatric patients in the emergency unit have obstacles in terms of the environment, nurses, and patients. Professional orientation toward triage and understanding regarding patients with mental disorders influences optimal patient care outcomes (Broadbent, Moxham, and Dwyer, 2020). Standard operational procedures (SOP) for initial triage screening in the ER at RSUD Dr. Soetomo Surabaya have been implemented, but the initial screening SPO for ER triage is still generally not based on psychiatric emergencies, especially for anxious and noisy patients. Therefore, it is necessary to develop Standard Operating Procedures (SOP) for initial triage screening based on psychiatric emergencies for anxious, noisy patients.

Based on (RISKESDAS, 2018), around 450 million people suffer from mental disorders in the world. Chronic psychiatric patients in Taiwan increased to 125,932 in 2017 (Chou & Tseng, 2020). Research (Coates et al., 2019), explains the results of observations during 2016-2017 in Australian hospitals, patients seeking treatment in the emergency unit amounted to 3.44% of 4506 patients experiencing anxiety and stress, co-morbid alcohol and drugs, as well as suicide and perpetrators. violence. In 2021, research (Mulhearn et al., 2021) explained that 9 nurses admitted that they had obstacles in caring for psychiatric patients and needed special training. Research conducted by (Arisandy, 2018) in Palembang, stated that 63.3% of public hospital emergency nurses had sufficient knowledge regarding the management of noisy and restless psychiatric patients. Mental disorders are syndromes characterized by clinically significant disturbances in an individual's cognition, emotions, or behavior that reflect dysfunction in the psychological, biological, or developmental processes underlying mental functioning (Todorova et al., 2022). Emergency nurses are generally worried about treating patients with mental illness and worry about their safety (Ryan et al., 2021). Most nurses working in the ER have general nursing education (Mulhearn et al., 2021). This makes nurses provide emergency nursing care to patients using conventional methods. An open environment that lacks privacy causes patients to be exposed to external stimuli, increases the occurrence of violence, and increases difficulties and stress in caring for mental disorders among nurses (Chou & Tseng, 2020).

Nurses providing emergency nursing care to psychiatric patients have obstacles from the environment, staff, and patients (Dombagolla et al., 2019). Emergency department barriers include limited physical space, limited time, and overcrowding. Staff barriers included knowledge and education regarding acute psychiatric management, and negative attitudes towards and avoidance of this type of psychiatric presentation. Patient barriers include dual diagnosis, difficulty distinguishing between mental health problems and social disorganization, and presentation problems that complicate the history. Apart from that, standard operational procedures related to handling psychiatric patients in hospital emergency rooms are general. The role of the emergency nurse is not only to initially assess psychiatric patients but must be able to demonstrate willingness and understand aspects of mental illness patients (Holmberg et al., 2020). Professional orientation toward mental health triage and understanding regarding patients with mental disorders needs to be considered in the emergency room of public hospitals (Broadbent et al., 2020). Treatment of psychiatric patients in the emergency unit is the basis for determining further action. Implementation of emergency psychiatric care management influences optimal patient care outcomes. If the implementation of psychiatric nurse management is not good, it will result in less than optimal care. Treatment of psychiatric patients in the emergency unit is the basis for determining further action.

The implementation of emergency psychiatric care management through appropriate standard operating procedures influences optimal patient care outcomes (Broadbent et al., 2020). Emergency Unit (ER) nurses have the potential to treat noisy, restless patients, either due to the patient's general medical condition or the patient's mental (psychiatric) condition ((Todorova et al., 2022). Psychiatric emergency patients undergo an initial examination using vital signs, looking for a history of organic and psychiatric diseases along with the patient's previous treatment, consciousness, and cognitive examination, as well as other supporting examinations. After emergency patients receive a diagnosis from an immediate assessment, they can proceed to the psychiatric emergency management stage. Emergency management of noisy, restless patients can be carried out in the form of environmental manipulation, verbal de-escalation, mechanical fixation, and pharmacological intervention (Hidayati et al., 2018).

The development of Standard Operating Procedures (SPO) for initial screening for triage based on psychiatric emergencies for agitated and noisy patients can improve nurses' behavior in their ability to handle emergency cases for psychiatric patients. This is because the development of SPO based on psychiatric emergencies, helps the initial assessment process as a basis for guidance for providing appropriate services and care to patients This research aims to develop SOPs for handling emergency patients with anxiety disorders.

METHOD

The design in this research is descriptive research with a Research and Development (R & D) approach which consists of 2 stages. The first stage of the research was to evaluate the SPO, prepare the SPO, test the validity, and test the reliability of developing Standard Operating Procedures (SOP) for managing "danger" in emergency patients with anxiety disorder. The second stage was to conduct a focus group discussion to discuss recommendations for developing Standard Operating Procedures (SOP) for managing "danger" in emergency patients with restless noise disorders. The first phase population was 5 SPOs for emergency management. The first stage was FGD 1, divided into 3 groups, namely 10 executive nurses, 5 nursing management staff, and 2 experts (academics and practitioners). The population in the second stage was 10 nurses who carried out a trial assessment of the development of Standard Operating Procedures (SOP) for managing "danger" in emergency patients with anxiety disorder. In the second stage, FGD 2 was carried out with 6 participants from the hospital's nursing management team. The sample used in this research was purposive sampling. The independent variable is the development of Standard Operating Procedures (SPO) for the management of "danger" in emergency patients with restless noise disorders on the quality of nursing services at RSUD Dr. Soetomo Surabaya. Data was collected using observation sheets and validity and reliability assessment sheets. The analysis uses descriptive and CVI tests and KR20 tests. This research has received ethical permission from the Health Research Ethics Committee of RSUD Dr. Soetomo Surabaya with number 1228/LOE/301.4.2/II/2023.

RESULTS

The results of the development of the SPO for the management of "danger" in emergency patients with anxiety disorder were prepared to combine psychiatric emergency management in the form of environmental manipulation, verbal de-escalation, mechanical fixation, and pharmacological intervention with medical emergency management procedures including primary survey (airway, breathing, circulation, disability).

Table 1.
Development of SOP for managing "danger" in emergency patients with anxiety disorder.

Aspect	Old Standardization	Guide to Preparing SOPs (KARS, 2015) and actions for managing restless noise	Development of SOP for Management of "Danger" in Emergency Patients with Anxiety Disorders
Title	The title of the SPO is in accordance with the procedure, however the SOP related to the management of noisy, restless patients is still general	The title of the SPO must be in accordance with the procedures contained therein	SPO was developed by focusing on management actions for emergency patients with restless noise disorders
The definition	The definition of SPO is in accordance with procedures	The definition is adjusted to the ICD code	The definition of restless noise is adjusted to ICD R45.0-R45.8
Objective	Goals already contain the benefits of the action	Goals should explain the benefits of a given action	The aim is to explain the benefits of management measures for emergency patients with anxiety disorders
Procedure	Procedures include preparation of tools and materials, implementation, and things that need attention	Procedures must include preparation, action, and evaluation. Procedures include preparation of tools and materials, implementation, and things that need attention	Danger management added: Self-safety: minimum 5 helpers Environmentally safe: patients are separated Victim-safe: verbal de-escalation, fixation Still pay attention to primary survey including airway, breathing, circulation, disability

Testing the validity of the development of SPO for the management of "danger" in emergency patients with noise and anxiety disorders was carried out by assessing 5 nurses who carried out trials implementing the SPO. The validity test uses CVI and the reliability test uses KR20. The results of the validity and reliability test for SPO development are as follows:

Table 2.
SPO Development Instrument Validity Test Results

Statement	CVI	Description
Title Aspect	1	Valid
Aspects of Understanding	0,8	Valid
Aspects of Goals	1	Valid
Action Procedure Aspects	0,8	Valid
SPO Development	0,8-1	Valid

Table 2 shows the results of the validity of the CVI test with respondent 5's r table being 0.8-1, all questions were valid.

Table 3.
Reliability Test Results of SOP Development Instruments

Statement	KR20	Description
SPO Development	0,83	Reliable

Table 3 shows the results of the KR20 reliability test with respondent 5's r table being 0.83. Thus, the SPO development instrument was declared reliable.

DISCUSSION

Evaluation of the SOP for managing emergency patients with restless noise disorder is carried out by observation (KARS, 2015) and the contents of the action procedures in the SPO. standard action procedures are not yet by standards. However, the title standards, understanding standards, and objective standards in the SOPs used in screening and management of anxious, noisy emergency patients at Dr. Soetomo Surabaya are by accreditation standards. This is because the emergency SOPs applied are still general in general hospitals. Standard Operational Procedures (SPO) are guidelines or references for carrying out work tasks by hospital performance assessment functions and tools based on technical, administrative, and procedural indicators in line with the work procedures of the hospital in question (Wiraya & Haryati, 2022). Emergency nursing is the care of individuals of all ages with real or perceived physical, emotional, or psychological health changes, which may be undiagnosed or require further intervention (Manik et al., 2022). Emergency Unit (ER) nurses have the potential to treat noisy, restless patients, either due to the patient's general medical condition or the patient's mental (psychiatric) condition (Todorova, Johansson, and Ivarsson, 2022). Emergency management of noisy, restless patients can be carried out in the form of environmental manipulation, verbal de-escalation, mechanical fixation, and pharmacological intervention (Hidayati et al., 2018).

Development of SPO for "danger" management in emergency patients with anxiety disorder was developed through focus group discussions (FGD) and expert discussions based on the results of the evaluation of SOP for emergency and psychiatric management. Development of SPO for Management of "danger" in Emergency Patients with Anxiety Disorders was developed in the format of title, meaning, objectives, and action procedures. The title aspect contains related procedures for emergency management actions with restless noise disorders. The understanding aspect includes the meaning of emergency and restless noise. The goal aspect contains the benefits of the action procedure. The action procedure aspect contains a flow of actions starting from equipment preparation, patient and nurse preparation, implementation, and evaluation. The development of SPO for the management of "danger" in emergency patients with restless noise disorder is a combination of medical emergency management procedures including actions for managing anxious noisy patients including environmental manipulation, verbal de-escalation, mechanical fixation, and pharmacological intervention, and primary survey (airway, breathing, circulation, diability).

An emergency is an urgent condition that is felt by the patient and requires immediate medical or surgical evaluation or treatment. Emergency nursing is the care of individuals of all ages with real or perceived physical, emotional, or psychological health changes, which may be undiagnosed or require further intervention (Manik et al., 2022). Psychiatric emergencies are conditions of acute disturbances related to thoughts, feelings, and behavior that require immediate therapeutic intervention (Ryan et al., 2021). Emergency management of noisy, restless patients can be carried out in the form of environmental manipulation, verbal de-escalation, mechanical fixation and pharmacological intervention (Hidayati et al., 2018). The validity of the development of SPO for the management of "danger" in emergency patients with anxiety disorders is carried out using the CVI test. The CVI test results show that all question items in the SPO Development instrument for the Management of "danger" in Emergency Patients with Anxiety Disorders are valid. Reliability of SPO Development Management of "danger" in Emergency Patients with Anxiety Disorders is carried out with

KR20. The results of the KR20 test show that the development of SPO for the management of "danger" in emergency patients with noise and anxiety disorder was carried out reliably. The preparation of instrument development must adhere to the principles of validity and reliability (Sukrisno et al., 2023). The principle of validity is the principle of instrument reliability in data collection. The principle of reliability is the similarity of the results of measurements or observations that are used to measure and observe many times at different times. Validity places greater emphasis on measurement tools or observations. Determining validity measurements must meet the relevance of the content of the instrument the relevant means of the subject and the method of measurement. Recommendations for research regarding the development of SOPs for the management of "danger" in emergency patients with restless noise disorders. Based on the results of FGD 2, it was found that the development of SOPs can be applied in the management of emergency patients with anxiety disorders. This recommendation is based on the results of socialization regarding the opinions of nurses and the nursing management team. Most respondents thought that the functionality, efficiency, and usability aspects were in the good category. The development of SPOs for the management of "danger" in Emergency Patients with Anxiety Disorders has been adapted to the Clinical Practice Guidelines and SPOs (KARS, 2015).

Recommendations for the development of SOPs for the management of "danger" in emergency patients with restless noise disorders. In the standard procedure section, there is management of noisy, anxious patients and emergency patients. The SOP for the Management of "Danger" in Emergency Patients with Anxiety Disorders is prepared by the management of emergency patients and restless noise patients. Implementation of SOP for "Danger" Management in Emergency Patients with Anxiety Disorders can be implemented at Dr. RSUD. Soetomo. Hospital management and nursing staff accepted the SPO format for "Danger" Management for Emergency Patients with Anxiety Disorders which was developed in accordance with the drafting guidelines (KARS, 2015).to improve the quality of nursing services.

Law Number 38 of 2014 concerning Nursing emphasizes that nursing practice must be guided by codes of ethics, service standards, professional standards, and standard operational procedures. According to Law Number 36, article 36 of 2014 concerning health workers, it is stated that professional standards and professional service standards for each type of health worker are determined by professional organizations in the health sector and ratified by the minister. Article 66 states that every health worker in carrying out practice is obliged to comply with professional standards, professional service standards, and standard operational procedures. Nursing practice is based on a code of ethics, service standards, professional standards, and standard operational procedures in accordance with Law no. 38 of 2014 concerning Nursing Article 28 (UU No. 38, 2014). The Indonesian National Nurses Association (PPNI) as a professional nursing organization is nationally responsible for the professionalism of nurses and the quality of nursing care. Guidelines for Preparing Clinical Practices and SOPs in Integrated Care by Hospital Accreditation Standards (KARS, 2015).explain that SPOs consist of standard titles, meanings, objectives, and action procedures.

The development of this SPO is in accordance with the standards set by the 2015 KARS regulations. It is hoped that the development of the SOP for the management of "danger" in emergency patients with anxiety disorders can be implemented in providing action to patients. The development of SPO for the management of "danger" in emergency patients with restless

noise disorder can be recommended for use in hospitals and can improve the quality of service to patients.

CONCLUSION

Standard action procedures for emergency SOPs are based on evaluations at RSUD Dr. Soetomo still has no focus on managing emergency patients with restless noise disorders. Development of SPO for the management of "danger" in emergency patients with restless noise disorder, designed to combine psychiatric emergency management in the form of environmental manipulation, verbal de-escalation, mechanical fixation, and pharmacological intervention with medical emergency management procedures including primary survey (airway, breathing, circulation, disability). Testing the validity and reliability of the development of SPO for managing "danger" in emergency patients with anxiety disorder has been declared valid and reliable in terms of functionality, efficiency, and usability. The development of SPO for "danger" management in emergency patients with restless noise disorder is generally in the good category in terms of functionality, efficiency, and usability, so it can be recommended for use by nurses and can improve the quality of hospital services.

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