



## KNOWLEDGE, ATTITUDE AND SKILLS OF NURSES RELATED TO THE IMPLEMENTATION OF SAFEWARDS IN MENTAL HOSPITAL

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### ABSTRACT

Safewardis an approach to providing inpatient mental health services with the aim of minimizing the number of conflicts that arise between nurses and clients. This study aims to determine the characteristics of nurses including gender, age, education level, work experience, safewards training that has been attended and identify the description of nurse readiness including skills, perceived knowledge and attitudes. The study was conducted using a descriptive design with a sample of 124 nurses. The sample was selected using the total sampling method, namely nurses who provide direct services in the inpatient room and are willing to participate in the study. Data were collected from respondents using the primary method where respondents directly filled out the questionnaire online which was shared via google form. Univariate frequency and percentage analysis were used to analyze the collected data. The results of the study showed that 77.42% of respondents had a positive attitude towards safewards, 62.90% had good knowledge and 54.5% had high skills. The results of this study recommend the need for training on safewards at all levels of nurses to improve nurse readiness in implementing the safewards approach.

Keywords: knowledge; nurses; safewards; skills; skill attitudes

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## INTRODUCTION

The main challenge in psychiatric inpatient care is to create an environment that promotes patient recovery, patient safety and a good working environment for staff. Psychiatric nurses are responsible for providing a therapeutic environment as well as providing a safe and comfortable physical environment. Seclusion of agitated patients can reduce certain types of dangers, but it can also create new dangers or conflicts where the patient who experiences seclusion will feel afraid, angry, confused, helpless, punished, helpless, out of control, controlled by others, and afraid of the seclusion process (Happell & Koehn, 2011). Conflict can also cause injury to either the client or staff, damage the therapeutic relationship between the client and staff, increase the risk of running away, refusing treatment or being at risk of suicide (L. Bowers, 2014). Safewardis an approach to providing inpatient mental health services with the aim of minimizing the number of conflicts that arise between staff and clients in the use of restrictive and/or restraint interventions (Gerdtz et al., 2020). The success of implementing safewards cannot be separated from the knowledge, attitudes and skills of nurses. In a study conducted by Lee (2021) after being given training for 12 weeks and implementing it for 12 months, there were positive results where there was a reduction in conflict and an increase in patient safety. (H. Lee et al., 2021).

However lack of formal training results in limited knowledge of nurses in implementing safeguard interventions. This results in a lack of nurse skills in implementing it. In addition, one of the obstacles in implementing safeguards is the lack of staff and task-oriented practices so that nurses feel a lack of time to engage with clients (H. Lee et al., 2021). The attitude of nurses can also be a determinant in the success of safeguards. A pessimistic attitude that interventions can influence behavioral change, misunderstandings in perceiving interventions and skepticism can limit nurses in taking the approach (Whitmore, 2017).

Soeharto Heerdjan Mental Hospital is a mental health service facility that has implemented the safeguards approach. Safeguards itself was introduced at Soeharto Heerdjan Mental Hospital in October 2021 and was gradually implemented in November 2021. However, the absence of evaluation and supervision in each safeguards intervention has resulted in a lack of nurse confidence in implementing it. In addition, formal training on safeguards has not been provided comprehensively to all nurses. The purpose of this study was to determine the characteristics of nurses working at Soeharto Heerdjan Mental Hospital and to determine the knowledge, attitudes, and skills of nurses in implementing safeguards at the Mental Hospital.

## **METHOD**

This study uses a quantitative descriptive design where the survey was conducted at the same time. The instrument uses a questionnaire developed and modified from the implementation of safeguards. The instrument consists of 23 statements about attitudes, 16 questions about perceived knowledge and 22 questions about skills. The results of the validity and reliability tests obtained the range of values 0.373-0.895 with r table 0.335 and Cronbach's alpha value 0.936. The data collection process is carried out through administrative and technical stages. The administrative stage aims to obtain research permits from the educational institution of the Faculty of Nursing, University of Indonesia and the hospital used as the research site. The sampling technique used is total sampling where there are 137 nurses who provide direct services in the inpatient department. In its implementation, there were 124 respondents who were willing to participate in this study. Data were collected from respondents using the primary method where respondents directly filled out the questionnaire online which was shared via Google Form. Researchers conduct electronic processing using applications available on the computer. Data are analyzed using statistical quantitative analysis methods, namely frequency and percentage. The stages of the processing process consist of editing/editing data, coding data, entering data into the application, and cleaning data. This research has gone through an ethical test stage in accordance with the regulations in force at FIK UI, and has passed the ethical test with the statement number KET-209/UN2.F12.D1.2.1/PPM.00.02/2022

## **RESULT**

The results of the analysis using frequency and percentage showed that the majority of respondents were in the young adult category, the majority of respondents were female, the majority of respondents were at the DIII nursing level, the majority of respondents had > 10 years of work experience, and the majority had never attended safeguards training.

Table 1.  
Distribution of Respondents based on demographic characteristics (n=124)

| Characteristics           | f  | %    |
|---------------------------|----|------|
| <b>Age</b>                |    |      |
| Young Adult               | 66 | 53.2 |
| Middle Adulthood          | 58 | 46.8 |
| <b>Gender</b>             |    |      |
| Man                       | 38 | 30.6 |
| Woman                     | 86 | 69.4 |
| <b>Education</b>          |    |      |
| DIII Nursing              | 74 | 59.7 |
| Nurse                     | 50 | 40.3 |
| <b>Length of work</b>     |    |      |
| <1 year                   | 7  | 5.6  |
| 1-10 Years                | 50 | 40.3 |
| >10 years                 | 67 | 54.1 |
| <b>Safewards Training</b> |    |      |
| No                        | 94 | 75.8 |
| Yes                       | 30 | 24.2 |

Table 2.  
Respondents' attitudes towards safewards (n = 124)

| Attitude | f  | %     |
|----------|----|-------|
| Positive | 96 | 77.42 |
| Neutral  | 28 | 22.58 |

Results of analysis using frequency and percentage

Table 3.  
Overview of Respondents' Knowledge Level Regarding Safewards (n = 124)

| Knowledge | f  | %     |
|-----------|----|-------|
| Not good  | 46 | 37.10 |
| Good      | 78 | 62.90 |

Table 4.  
Overview of Respondents' Skills towards Safewards (n = 124)

| Skills     | f  | %     |
|------------|----|-------|
| Not enough | 15 | 12.10 |
| Enough     | 42 | 33.90 |
| Tall       | 67 | 54.00 |

## DISCUSSION

### Age

Research result, frequency distribution of age characteristics of nurse respondents is within the limits of young adulthood, namely. This means that nurses are in the age range of 40-60 years. According to the developmental tasks of young adulthood according to Erik Erikson, namely intimacy or familiarity with others and isolation, where individuals at this stage will try to be independent, interact at work, do positive things and have high motivation. In terms of receiving information, individuals at the young adult stage can easily receive information and be able to produce new ideas because they have maturity in thinking (Keliat et al., 2019). So at this stage, individuals have high enthusiasm and have the ability to think clearly and critically.

### **Gender**

Based on the research conducted, data was obtained that respondents were dominated by female nurses. According to the 2021 Indonesian health profile, the number of nurses in Indonesia was 511,191, consisting of a majority of women, namely 356,889 (69.8%), while for male nurses in health services there were 154,302 (30.2%) (Ministry of Health of the Republic of Indonesia., 2021). Almost every hospital and other health service facilities are dominated by women, this is because the number of women interested in pursuing education in the field of nursing is much greater than men. Regarding the abilities and attitudes of nurses, male and female nurses have the same opportunity in self-development efforts in improving the quality of nursing care (Sitohang, 2017). In terms of determining attitudes, women tend to use their feelings more, but researchers have not found similar studies that link gender to having a significant relationship in determining attitudes. This is in line with Daulay's research (2021) that there is no relationship between gender characteristics and attitudes in implementing Patient Safety (Daulay, 2021)

### **Level of education**

Nursing Law no. 38 of 2014 states that the level of nursing education in Indonesia consists of vocational education or D3 nursing, academic education namely bachelor's, master's, and doctoral nursing and nursing profession. In the nursing competency standards for personnel and professional development areas, a nurse must be aware of the need to maintain and improve Nursing competency through continuous professional development programs (Kep Menkes RI, 2020). This shows that in order to improve nursing education, this is done through recruitment of nursing staff with a nursing background, and nursing staff who are not yet nurses are gradually given the opportunity to continue their education so that it is hoped that nurses working in the treatment room are professional and competent staff and are able to provide quality nursing care.

### **Work experience**

In order to improve a higher professional career level, a clinical nurse must go through continuous professional development and recognition of abilities based on work experience and nursing practice performance, and meet the requirements of education level, clinical nursing work experience according to the area of specialty and the competency requirements that have been determined (Permenkes no. 40, 2017). The abilities of experienced nursing staff will be different from the abilities of newly graduated nursing staff. This is influenced by several factors including the situation and conditions in the health service location. The time spent by nursing staff in dealing with situations and conditions in the service location can affect the way a nurse thinks in serving patients. This means that the length of service has a positive effect on the productivity of nurse performance (Tarmansyah, 2017)

### **Safewards Training**

One of the factors that can influence knowledge is education, both formal and informal education. With the training that has been attended, it is expected that an individual will increase their knowledge so that the stages of knowledge start from knowing, understanding, applying, analyzing, synthesizing and evaluating an object (Budiman & Riyanto, 2013). The comparison between respondents who have attended training and those who have not attended training is not balanced, but the transfer of knowledge from nurses who have attended training can increase the knowledge of nurses who have not attended training. This study is in accordance with the standards of the nursing profession where a nurse must be able to follow the development of science and technology in the field of Nursing to support the quality of Nursing Services.

### **Overview of Attitudes towards Safewards**

Based on the research results obtained, as many as 96 respondents (77.42%) have a positive attitude towards the implementation of safewards. This means that more than half of the respondents have a positive attitude towards the implementation of safewards. Young adulthood is an age that has an open attitude and has high motivation, so that nurses will be more committed to being able to implement the safewards approach. This is in line with research conducted by Fletcher in 2019 which conducted research on consumers in acute inpatient wards in Victoria, Australia. Where the results of positive attitudes were shown by consumers with an average age of 40 years (Fletcher et al., 2019). The development of a person's attitudes can be hampered by a person's lack of education. The ability to assess can be done if someone has a foundation of understanding or concept. Safewards training can provide a foundation and concept for respondents. The results of data analysis showed that respondents had more positive attitudes. This is in line with research (H. Lee et al., 2021) where nurses showed a positive attitude after training on safewards interventions. The next component in assessing attitudes is behavior. Behavior or tendencies in acting can be formed from work experience (Budiman & Riyanto, 2013). This is in line with the results of the study where respondents with a work period of more than 10 years were more in proportion than respondents with a work period of less than 10 years so that it is expected that more positive attitudes will be formed.

### **Knowledge Overview of Safewards**

In general, the level of knowledge of respondents is in the good category. As many as 78 respondents (62.90%) have a good level of knowledge. Knowledge is a person's cognitive construction of objects, experiences, or their environment (Budiman & Riyanto, 2013). The ability to develop comprehension and thought patterns is influenced by age factors so that the knowledge gained will be better. Intellectual abilities, problem solving and verbal abilities develop in middle age or middle adulthood. This study is in line with Fletcher (2019) where a study was conducted on consumers who were given safewards interventions. The average respondent was 40 years old and respondents remembered various safewards interventions (Fletcher et al., 2019).

### **Skill Overview towards Safewards**

In the nursing competency standards, nursing skills can be improved through continuing education and training in order to absorb developments in nursing science and technology organized by professional organizations or other accredited institutions in accordance with the provisions of laws and regulations (Kep Menkes RI, 2020). In Baumgart's (2019) study, positive changes in implementing safewards skills were obtained through appropriate periodic training, team meetings and supervision (Baumgardt et al., 2019). Meanwhile, in Lee's study in 2021, where the improvement of safewards skills was obtained by directly involving staff or implementing nurses. (H. Lee et al., 2021). This is in accordance with the nursing competency standards, where improving skills is obtained through the stages of understanding, understanding and explaining, implementing under supervision and implementing independently (Kep Menkes RI, 2020). In this study, data was obtained that 24.2% of respondents had received training and 75.8% had not received training. The initial stage of implementing safewards training was given to nurse managers, where during the training safewards were introduced, challenges, expected results and how to make safewards a success. So it is expected that nurses who have received safewards training can introduce safewards interventions to nurses who have never received training.

## **CONCLUSION**

This study was conducted to identify the description of knowledge, attitudes, and skills of nurses in implementing the safewards approach. This study concluded that most respondents had a positive attitude towards safewards, had good knowledge regarding perceived safewards and had fairly high skills in implementing safewards. The results of this study can be used to improve the quality of nursing care, especially in creating a safe space and fostering positive relationships between clients and nurses. With the results of this study, it is expected to be used as a consideration to provide training to all levels of nursing so that the implementation of safewards can be carried out optimally. In addition, this study can be used as a basis for further research.

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