Original Research

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Readiness of Nursing Profession Students Universitas Padjadjaran on Handling Emergency Patients in Emergency Department

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ABSTRACT

Nursing profession students need readiness to attend profession learning. Optimal readiness is directly proportional to optimal capabilities. The characteristics of emergency department tend to make nursing profession students the first and most frequent resource to deal with patients entering the emergency department. This study aims to determine the readiness of nursing profession students on handling emergency patients in emergency department.

This study uses quantitative descriptive methods through approaches cross sectional. The population in this   study was a nursing profession students of the Faculty of Nurisng, Universitas Padjadjaran as many as 66 respondents. The total sampling technique was used in this study. This research measuring instrument uses the READI-JV The results of the study were calculated using quantitative descriptive analysis using a cross-sectional approach.

The results showed that as many as 51 (77.3%) nursing profession students are not ready to handle emergency patients. The percentage of readiness obtained in the leadership and administrative support dimensions was 85.2%, the readiness obtained in the operational competency dimension was 63.9%, the readiness obtained in the establishment dimension was 63.1%, the readiness obtained in the stress handling dimension was 57.6%, the readiness obtained in the dimensions of group integration and identification of 57.5%, readiness obtained in the survival skills dimension was 56.6%, and readiness obtained in the clinical competency dimension was 47.2%.

The unpreparedness of nursing profession students is because most of the respondents have not attended emergency department training. So that it is necessary to optimize the learning methods during pre- profession by applying in accordance with emergencies and based on case studies as well as providing stress management to students to reduce stress levels in nursing profession students.

Introduction

The team work system by involving many professions or multidisciplinary knowledge applied in the emergency room is the main actor in the success in treating patients (Ministry of Health RI, 2012). Emergency Department as the main actor in the initial assessment of emergency cases, resuscitation and stabilization in the hope that it can reduce mortality and disability. The most handled cases in the emergency room are non-trauma cases and trauma cases, but in Indonesia trauma cases are the most frequently found cases in the emergency room (Takaendengan, Wowiling, & Wagiu, 2016). This is similar to the medical records of the Emergency Hospital Installation of Hasan Sadikin Hospital in 2016, which showed that the most common cases were trauma cases of 2644 cases.

According to the Decree of the Ministry of Health of the Republic of Indonesia Number 856 / Menkes / SK / IX / 2009 regarding Hospital Emergency Installation Standards that help must be given at the latest 5 minutes after the patient enters the emergency room. The good quality of emergency services can be achieved along with the quality of human resources, facilities, infrastructure and emergency department management. The human resources in the emergency room consist of sub specialist doctors, specialist doctors, PPDS doctors, general practitioners with emergency training certifications (GELS, ATLS, ACLS, etc.), chief nurses S1 or DIII with certification of emergency training (Emergency Nursing, BTLS, BCLS, etc.), nurses with Emergency Nursing emergency training certification, and non-medical personnel such as finance, security officers and employees (KEMENKES, 2009). Human resources at emergency department there are also young doctors and nursing profession students (Fadhilah, Harahap, & Lestari, 2015).

According to Skeet (1995, at Faridah, 2009) that the role of nursing profession students in the emergency department is to provide emergency services aimed at sustaining life, preventing deterioration and improving healing and providing nursing care before patients receive definitive care. According to Ristina in 2018 explained in the *Buku Panduan Program Profesi Ners Keperawatan Gawat Darurat dan Kritis* that professional student competencies that must be achieved in Emergency and Critical Nursing such as being able to foster interpersonal relationships by implementing effective communication, implementing holistic nursing care to clients who experience emergency care. and critically, carry out holistic nursing care to clients who face death's door. end of life), demonstrating nursing action on clients who experience interference with various systems with attention patient safety, legal and ethical aspects, providing culturally sensitive care, conducting health education for clients and families experiencing emergency and critical, and reviewing the results of research to improve the quality of emergency and critical nursing care.

Nursing profession students in realizing and carrying out their roles in the emergencies department require readiness. Readiness becomes one of the internal factors that influence learning (Slameto, 2003). According to Robert in 1986 explained that learning plays a role in determining the skills, knowledge, attitudes and values obtained by each individual, so that the results of learning create a variety of behaviors that can be called capabilities. Nurse readiness as a capability preparation needed to provide optimal care services (Maeda, Kotera, Matsuda, & Edwards, 2016). It is important for nursing profession students to do readiness because by doing readiness it is expected that the capabilities and competencies of professional students will be higher, so that professional students feel they are ready to take emergency actions in the emergency room. Readiness is related to the level of learning achievement (Mulyani, 2013). Professional students with high readiness, the results of learning achievement will be high.

According to the results of previous studies by Diah (2017) conducted to 33 respondents explained that as many as 85% of nurses in the Emergency Department have moderate readiness. However, Hidayati's research results in 2008 explained that nurse readiness of 82% was categorized as having good readiness. It can be concluded that nurses have different readiness that

can be influenced by various dimensions of readiness. According to the results of Abdul's research in 2015 conducted to 31 nurse respondents showed that the readiness correlates with the level of competency possessed by nurses. Readiness is related to the level of learning achievement (Mulyani, 2013). According to Slameto (2003) explained that the factors that influence learning outcomes are divided into 2 factors, namely Internal Factors originating from within individuals and External Factors originating from the surrounding environment. So it is important to know the readiness of professional students early in an effort to improve the preparation made by nursing profession students.

Based on the results of the interview with nursing profession students Universitas Padjadjaran in Nursing Profession Program batch 34 got information that was one of the signs that the nursing profession students experienced a condition of being unprepared while in the emergency room. Students' feelings when taking action tended to experience confusion, feeling insecure, tremors, fear and panic. However, some students said that they were enthusiastic when carrying out emergency measures. So it is important for nursing profession students to prepare all their needs in carrying out emergency actions in the Emergency Department. In a previous study conducted by Syahreni and Waluyanti (2007) explained that the causes of anxiety that occur in nursing profession students came from several factors, one of which was the level of knowledge.

Method

The research design conducted by researchers is quantitative descriptive approach cross sectional. The population of this research is the nursing profession students of the Faculty of Nursing, Universitas Padjadjaran PPN 35. Sampling of this study uses a total sampling technique to obtain 66 respondents. Measuring instruments in this study adapted the READI-JV questionnaire (Readiness Estimate And Deployability Index Japanese Version) which

consists of 7 dimensions of preparedness in the form of 35 question items using a Likert scale with a score range of 1-5. The measurement results in this study use descriptive analysis which is then divided into 2 categories: Ready: $X \geq 60\%$ and not ready: $X < 60\%$.

Researchers do content validity to lecturers with expertise in critical nursing and emergencies. Result of content validity what has been done is suggesting changes in words and / or sentences on the instrument by adjusting to the ability limits of the research sample. In addition, researchers also do face validity to 10 students of the Faculty of Nursing Universitas Padjadjaran in 2014. The results showed that all students could understand the aims and objectives of all questions on the instrument. . In the reliability test of the READI-JV instrument Alpha Croncbach values were obtained 0,882.At the stage of data collection using the READI-JV instrument that is completed by respondents at one time. Then, the researcher along with the research assistant check the questionnaire sheet to make sure that no questions are missed and after the questionnaire is completed, the researcher analyzes the respondent's data.

The research ethics applied in this study are beneficence, respect for human dignity, and justice. Benefit includes Explanation to respondents about the purpose of the study, the benefits of the research and filling out the questionnaire in this study with the aim of getting optimal results and having benefits for the population. This principle is applied by researchers and research assistants by introducing themselves and doing informed consent to prospective respondents. Then, researchers distribute questionnaires in which there is an attachment sheet informed consent and respondent demographic sheets. Prospective respondents will be given time to decide whether to participate or not. If the prospective respondent is willing, the researcher will ask the respondent to fill out the questionnaire that has been provided, while there are prospective respondents who are not willing, the researcher will do drop out. After the respondent fills in the entire questionnaire, the researcher checks the questionnaire sheet again to

make sure that no questions are missed. If the questionnaire is complete, the researcher accepts the questionnaire and analyzes the respondent's data.

Principle respect for human dignity include data obtained only researchers who can access it as research data with the aim of respecting the dignity of respondents in obtaining clear information and have the right to make choices (autonomy) and confidentiality (confidentiality) respondents during being respondents in all procedures in this study. Justice include Researchers provide equal rights and opportunities to all samples as respondents in this study with the aim to provide benefits and burdens in a balanced manner in accordance with the needs, abilities, contributions and freedom. Ethical Exemption in this study already get approval from the Research Ethics Commission of Universitas Padjadjaran with efforts to protect the human rights and welfare of research subjects as well as to ensure that research using survey forms and other non-clinical forms is applicable and this research can be released.

Results

Based on the results of the data (Table 1) obtained that almost all of the respondents were 65 professional students (98.5%) aged 21-25 years, almost all of the respondents were 55 professional students (83.3%) were female, almost all of the respondents were 64 professional students (97%) are program A students, most of the respondents were 52 professional students (78.8%) had never attended emergency training, and very few of the respondents were 8 professional students (12.1%) had attended training Disaster Management.

Table 1. Characteristics of Respondents (n = 66)

Characteristics of Respondents	Frequencies	Percentage (%)
Age		
21-25	65	98,5
26-38	1	1,5
Gender		
Male	11	16,7
Female	55	83,3
Student's Category		
Student Program A	64	97
Student Program B	2	3
Training Experience		
Ya	14	21,2
Tidak	52	78,8
Type of Training attended		
Emergency Nursing	1	1,5
Basic Trauma Cardiac Life Support (BTCLS)	3	4,5
Penanggulangan Penderita Gawat Darurat (PPGD)	6	9
Neonatal resuscitation	2	3
Disaster Management	8	12,1
Lainnya	4	6

Based on the results of the data (Table 2) obtained it is known that as many as 66 respondents most of the respondents were 51 nursing profession students (77.3%) at the unprepared level.

Table 2. Frequency Distribution of the Readiness Level of Nursing Profession Students of the Faculty of Nursing, Universitas Padjadjaran on Handling Emergency Patients in Emergency Departments (n = 66)

Readiness Category	Frequencies	Percentage (%)
Ready	15	22,7
Not ready	51	77,3

Based on the results of the data (Table 3) obtained show that the percentage of readiness in the dimensions of Leadership and Administration Support is (85.2%), the percentage of readiness in the Operational Competency dimension is(63.9%), the percentage of readiness in the Establishment dimension is (63.1%) , the percentage of readiness in the Stress Handling dimension is (57.6%), the percentage of readiness in the Group Integration and Identification dimension is (57.5%), the percentage of readiness

in the Survival Skills dimension is (56.6%), the percentage of readiness in the dimension Clinical Competence (47.2%). The higher percentage of readiness indicates the level of readiness on each dimension. In the category calculation results if the percentage of ≥60% is categorized as ready and the percentage results <60% are categorized as not ready.

Table 3. **Percentage of Readiness Frequencies from 7 Dimensions of Nursing Profession Students' Readiness of the Faculty of Nursing, Universitas Padjadjaran**

Dimension of Readiness	Percentage (%)	Information
Leadership and Administrative Support	85,2	Ready
Operational Competencies	63,9	Ready
Establishment	63,1	Ready
Stress Management	57,6	Not Ready
Group Integration and Identification	57,5	Not Ready
Survival Skills	56,6	Not Ready
Clinical Competence	47,2	Not Ready

Based on the results obtained (Table 4) shows that in the dimensions of leadership and administrative support of nursing profession students who are ready as many as 64 students (97%) and who are not ready as many as 2 students (3%). Operational Competencies dimension, nursing students are ready as many as 47 students (71.2%) and 19 who are not ready students (28.8%). Dimensions of the establishment of nursing profession students who are ready as many as 46 students (69.7%) and who are not ready as many as 20 students (30.3%). Stress Management dimension, nursing students were 38 students (57.6%) ready and 28 students (42.4%) were not ready. Dimensions of Group Integration and Identification of nursing profession students who are ready as many as 37 students (56%) and who are not ready as many as 29 students (44%). Survival Skills dimension, nursing students are 39 students (59%) ready and 27 students (41%) unprepared. Clinical Competency dimension, nursing students are ready for 6 students (9%) and 60 students (91%) are not ready.

Table 4. **Distribution of Readiness Frequencies from 7 Dimensions of Nursing Profession Students' Readiness of the Faculty of Nursing, Universitas Padjadjaran**

Dimension of Readiness	f	Percentage (%) Ready	f Not Ready	(%) Not Ready
Leadership and Administrative Support	64	97	2	3
Operational Competencies	47	71,2	19	28,8
Establishment	46	69,7	20	30,3
Stress Management	38	57,6	28	42,4
Group Integration and Identification	37	56	29	44
Survival Skills	39	59	27	41
Clinical Competence	6	9	60	91

Discussion

Nursing profession students are one of the human resources who are in the Emergency Department and are expected to be able to perform their roles optimally. Performing the role optimally, nursing profession students need preparation from several dimensions that can support the readiness of nursing profession students. Based on the results of research on 66 professional students of the Nursing Faculty of Universitas Padjadjaran batch 35 it is known that the majority of respondents are 51 professional students (77.3%) not ready to deal with emergency patients. Unpreparedness can occur from a variety of factors, one factor being the readiness is experience and training.

In the study of Woods et al in 2014 conducted to 235 research samples namely nursing students stated that the experience was very helpful in increasing student confidence, trust, and readiness in practicing. The same was done in the Nabolsi, Zumot, Wardam, and Abu-moghli (2012) which was conducted to 30 nursing students that training and experience can influence the level of knowledge and development of nursing skills.

According to Benner (2012) explained that there are 5 stages to becoming a competent, i.e.

Novice, Advanced Beginner, Competent, Proficient, and The Expert. At this stage nursing students can be assumed to be at that stage Novice This stage is a stage that shows that professional students do not have the experience to provide nursing care directly to patients. Based on this it can be said that professional students at this stage Novice still requires much more knowledge and experience as well as training in supporting the improvement of the competencies of nursing profession students.

In this study the readiness of the nursing profession students was measured using 7 dimensions of readiness according to READI-JV. Clinical competence is a clinical competency that can measure the readiness of aspects of attitudes and behavior that includes the ability to carry out clinical actions and communication (Reineck et al., 2001). The achievement of clinical competence is influenced by several factors such as skills, experience, personality, emotional condition, and motivation (Alifah & Rochana,2017). Based on research conducted by Mulyawan (2013) explained that experience and training are important factors in increasing knowledge, attitudes, skills and professional competence. Clinical competence in performing nursing care actions in accordance with statutory regulations such as determining diagnosis, nursing care, and physical examination has a level of competency achievement that is greater than clinical competence in performing nursing care actions based on changing patient conditions that require prompt and appropriate action or actions that accept accountability for professional practice (Alifah & Rochana, 2017). So that clinical competence becomes one of the dimensions that plays a big role in calculating the readiness of nursing students.

Operational competence is operational competency which is operational competency which includes the ability to carry out operational actions (C. Reineck et al.,2001). Knowing earlier the results of the examination will speed up the planning of actions taken, then prevent the deterioration of the patient's condition due to delays in receiving help. Survival skills are competencies in maintaining or preventing the danger that will occur to themselves and patients (Maeda et al., 2016; Reineck et al., 2001). Personal protective equipment is very important to note because on a day-to-day basis tends to use protective equipment as protective equipment for patients, compared to the protective equipment officers Darmadi in (Sari, Suprapti, & Solechan, 2014). In the results of this study, students tend to use the personal protective equipment in a balanced manner both for patients and themselves. This is because there are standard operating procedures that require every nursing profession student to use personal protective equipment to prevent the spread of decontamination between nursing profession students and patients.

In a study conducted by Anil (2010) explained that stress will affect the effectiveness and also interfere in carrying out activities, because in individuals who experience stress there will be psychological and physiological disorders. Factors that influence stress on nursing students such as final grades, excessive assignments, papers and the Kohn & Frazer exam in (Simbolon, 2015). Based on the results of data processing from this study shows the assignment that professional students get is one of the factors causing stress and influences the readiness level of nursing profession students in dealing with emergency patients.

In a study conducted by Alifah and Rochana (2017) to 177 nursing student respondents showed that most students perceive clinical counselors in good category and most of the respondents showed achievement in clinical competence. Other studies have shown a relationship between clinical counselors who have teaching abilities, nursing competencies, nursing evaluations, effective communication relationships, and personality with the achievement of Dewanti nursing profession students' competencies in (Alifah et al.,2017). The role of clinical advisors who are lacking in mentoring students of the nursing profession has a risk of 2.766 times greater for the occurrence of patient safety that is less than the role of good clinical supervisors (Lilis et al., 2015). Then there is the influence of clinical advisors in shaping the readiness of nursing profession students.

In Novieastari et al (2018) explained that important nurses have culturally sensitive competencies (cultural nursing) with the aim of giving nursing care to patients especially in accordance with the needs of patients relating to culture. Culture-sensitive competence is a nurse's ability to provide nursing care to patients in accordance with their cultural needs (Shearer & Davidhizar, 2003). In this study it can be interpreted that this dimension has a level of readiness to face the process of death or death, and readiness in dealing with a variety of cultural, religious, and other factors that are owned by the patient and the patient's family.

In this study, the level of readiness was not ready and understood the role of the task as a nursing profession student in the emergency room. Knowledge that must be possessed by students of the nursing profession is not only cognitively but understanding the role of the profession is also important. Nursing students often encounter problems such as the difference between theory and practice and sudden changes in the patient's condition due to limited knowledge related to the role of the profession which makes it difficult for professional students, Thorburn, & King in (Syahreni & Waluyanti, 2007). So understanding the role of professional students is very important in achieving the competencies that professional students must do and as a form of effort in increasing the readiness of professional students in dealing with emergency patients.

Conclusions

Based on the results of the study, it can be concluded that the majority of respondents in the nursing profession students have a level of readiness not ready in dealing with emergency patients. the leadership and administration support dimensions have a level of readiness ready, operational competency has a level of readiness ready, establishment has a level of readiness ready, handling stress has a level of readiness not ready, integration groups and identification have a level of unprepared readiness, survival skills have a level of unprepared readiness, and clinical competence has a level of unprepared readiness.

This is because most of the nursing profession students have never attended emergency department training. Not ready for students can also be influenced by Clinical Competence which has the lowest percentage of readiness and shows that respondents have a level of readiness not ready for clinical competence, because the clinical competency dimension measures the level of readiness of professional students in carrying out emergency actions.

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