

THE EFFECT OF PATIENT IDENTIFICATION TRAINING SKILL IN THE APPLICATION OF PATIENT SAFETY BY UNDERGRADUATE MEDICAL STUDENTS ON PATIENT SATISFACTION IN PKU MUHAMMADIYAH GAMPING HOSPITAL

Khoirurrohmah Nuzula¹, Arlina Dewi²

¹Master Program of Hospital Management, Muhammadiyah University of Yogyakarta,

²Head Master of Study Program of Hospital Management of Graduate Program of Muhammadiyah University of Yogyakarta

Email: drnuzu@gmail.com

Abstrak

Patient safety is a top priority in health care today aimed at reducing the risk of medical error. Patient safety is an integrated system between all disciplines in the hospital including undergraduate medical students. Identification of patients is essential to the patient safety culture. But in reality, undergraduate medical students have not gained much knowledge about patient safety especially patient identification before running the stages in the hospital. This will obviously affect the patient's safety culture in the hospital. The safety culture of the patient will have an effect on patient satisfaction. Method: This research is a quantitative study with cross sectional study approach. The study group was divided into two groups: the control group were the patients who received health services by the undergraduate medical students who were not trained in patient identification and the experimental group were the patients who were given health services by the undergraduate medical students who had received patient identification training. Patient satisfaction was assessed using ServQual satisfaction survey which then analyzed data to know the difference of satisfaction between two groups. Results and discussion: Patient satisfaction in control and experiment group showed significant differences in several dimensions of patient satisfaction, namely empathy dimensions ($p = 0.001$), reliability ($p = 0.001$), responsiveness ($p = 0.001$) and assurance ($p = 0.002$). With the average value of satisfaction of patient on experimental group empathy dimension of 3.82 and control group of 2.82, on experiment group experimental dimension of 3.65 and control group of 2.82, experimental group responsiveness dimension of 3.46 and control group of 2.82 and experimental group experimental dimension of 3.38 and control group of 2.98. Conclusions: There were significant differences in patient satisfaction between patients who received health services from a undergraduate medical student who received training in patient identification and patients who received health services from a undergraduate medical student who did not receive patient identification training. There was an increase in patient satisfaction in the group of patients receiving treatment from a undergraduate medical student who received training in patient identification. This illustrates that patient identification training can improve patient satisfaction.

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Keywords : patient identification training, patient safety, undergraduate medical students, patient satisfaction.

BACKGROUND

Patient safety is a system where the hospital makes the patient's care safer. The system includes risk assessment, identification and management of matters relating to patients, accident reporting and analysis, learning ability of accident

and follow-up and implementation of solutions to minimize risks¹.

Given that patient safety is an important aspect of improving the quality of health services, especially individual health efforts, and that human resources play a fundamental role in improving these qualities, the

development of patient safety capability in physician education becomes a very strategic issue². Modern health care as it is today demonstrates real complexity so that it clearly increases the risk of mistakes and medical error coupled with the fact that knowledge of patient safety by undergraduate medical students is limited³.

Giving patient safety training has also been proven to improve the behavioral behavior of patients in the short term where it is possible to improve overall patient safety behavior. Undergraduate medical students seem to start building good patient safety culture from the time of training⁴.

In the previous study has shown that the quality of a good work environment in the hospital, including patient safety, will improve the quality of service in hospitals that will ultimately increase patient satisfaction⁵. Thus, researchers try to prove the effect of providing patient safety training to undergraduate medical students can improve patient satisfaction.

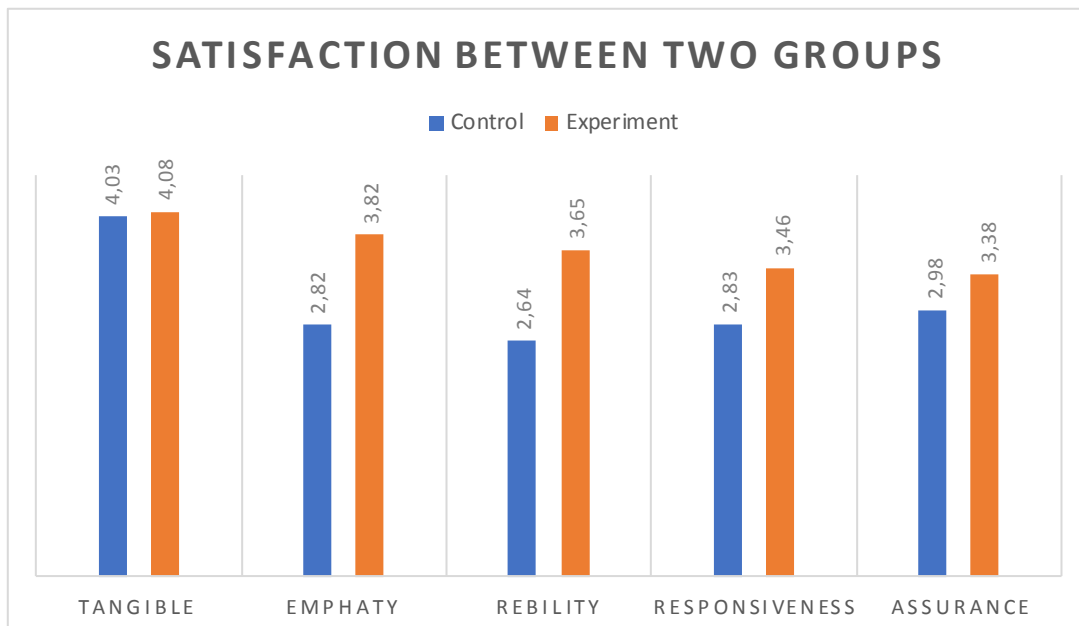
MATERIAL AND METHOD

This research is a quantitative study with cross sectional study approach. the study group was divided into two groups: the control group were the patients who received health services by the undergraduate medical students who were not trained in patient identification and the experimental group were the patients who were given health services by the undergraduate medical students who had received patient identification training. Patient satisfaction was assessed using ServQual satisfaction survey which then analyzed data to know the difference of satisfaction between two groups.

Patient identification training is provided through mini lecture with module followed by discussion and role play. The mini lectures are given for approximately 60-90 minutes. The module were adopted from WHO Patient Safety Curriculum Guide for Medical Schools.

RESULT

The graph below shows that there is an increase in the average value of patient satisfaction in four dimensions namely empathy, reliability, responsiveness and assurance.



Indicating the average patient satisfaction (tangible dimension) to the identification of patients in the experimental group was 4.08 with a standard deviation of 0.42. The average patient satisfaction in the control group was 4.03 with a standard deviation of 0.15. The statistical test results showed no significant difference in the level of satisfaction (the dimensions of real evidence) on the identification of patients in the experimental group with control with a 5% error rate ($p = 0.678 > \alpha = 0.05$).

Showing the average patient satisfaction (emphaty dimension) to the identification of patients in the experimental group was 3.82 with a standard deviation of 0.39. The average patient satisfaction in the control group was 2.82 with a standard

deviation of 0.55. The results of statistical tests showed that there was a significant difference in the level of satisfaction (empathy dimension) to the identification of patients in the experimental group with a control with a 5% error rate ($p = 0.001 < \alpha = 0.05$).

Indicates the average patient satisfaction (the dimensions of reliability) to the identification of patients in the experimental group was 3.65 with a standard deviation of 0.45. The average psien satisfaction in the control group was 2.64 with a standard deviation of 0.34. The statistical test results showed that there was a significant difference in the level of satisfaction (the dimension of reliability) on the identification of patients in the experimental group with the control with error rate of 5% ($p = 0.001 < \alpha = 0.005$).

No	Dimension	Group	Mean (%)	SD (%)	(95% CI)
1	<i>Tangible</i>	Experiment	4.08	0.42	0.678
		Control	4.03	0.15	
2	<i>Empathy</i>	Experiment	3.82	0.39	0.001
		Control	2.82	0.35	
3	<i>Reliability</i>	Experiment	3.65	0.45	0.001
		Control	2.64	0.34	
4	<i>Responsiveness</i>	Experiment	3.46	0.45	0.001
		Control	2.83	0.44	
5	<i>Assurance</i>	Experiment	3.38	0.32	0.002
		Control	2.98	0.30	

Indicating the average patient satisfaction (dimension responsiveness) to the identification of patients in the experimental group was 3.46 with a standard deviation of 0.45. The mean psien satisfaction in the control group was 2.83 with a standard deviation of 0.44. The results of statistical tests showed that there was a significant difference in the level of satisfaction (dimension ketanggapan) on the identification of patients in the experimental group with control with error rate of 5% ($p = 0.001 < \alpha = 0.005$).

Indicates the average patient satisfaction (assurance dimension) to the identification of patients in the experimental group was 3.38 with a standard deviation of 0.32. The average patient satisfaction in the control group was 2.98 with a standard deviation of 0.30. The results of statistical tests showed that there was

a significant difference in the level of satisfaction (the dimension of reliability) on the identification of patients in the experimental group with control with a 5% error rate ($p = 0.002 < \alpha = 0.005$).

DISCUSSION

Application of the patient safety concept involves a continuous program to improve the health care provider's management system, culture and behavior and awareness of the patient and his family. In accordance with article 18 of the Law on Education Law 20/2013, learners have the right to engage in services in educational hospitals and educational vehicles under the guidance and supervision of lecturers. Given that patient safety is an important aspect of improving the quality of health services, especially individual health efforts, and that human resources play

a fundamental role in improving these qualities, the development of patient safety capabilities in physician education becomes a very strategic issue⁶.

Modern health care as it is today demonstrates real complexity so that it clearly increases the risk of mistakes and unintentional events coupled with the fact that knowledge of patient safety by undergraduate medical students has proven to be limited⁷. Thus formal training on the concept and principles of patient safety can serve as a solution to this problem⁴. This supports the researcher's decision to provide formal training to undergraduate medical students about patient safety.

In 2009, WHO has launched "WHO Patient Safety Curriculum Guide for Medical Schools" as a reference to provide patient safety training to medical students. Based on these references the researcher has developed a simple module on patient safety as a training material for patient safety of undergraduate medical students in this study.

A retrospective study conducted by Paxton J.H in 2009 showed that the provision of educational training interventions in the form of materials and mini lectures had a significant effect on improving students' understanding of patient safety. This is a reference for researchers to use module and mini lecture methods given to undergraduate medical students within 60- 90 minutes followed by discussion and role-play.

Mini lecture is given face to face with the module. At the discussion session, undergraduate medical students can ask questions about the unknown about patient safety. Role-play is performed in turns between each undergraduate medical student where the researcher serves as a patient. Researchers also believe that a basic understanding of the concept of patient safety and medical error is crucial in order to prevent medical errors or medical negligence.

The provision of patient safety training has also been proven to improve the behavioral behavior of patients in the short term where it is possible to improve overall patient safety behavior. Medical students or undergraduate medical students seem to start building good patient safety behaviors from the time of training⁸.

Patient identification is essential in the patient's safety culture. The implementation of the patient identification process correctly prevents the occurrence of medical negligence where the negative effects are not easily corrected⁹. Errors in the patient identification process are potentially harmful to the patient as they may lead to erroneous administration of disease in the wrong patient¹⁰.

The identification process of this patient is like an opening gate in doctor-patient relationship so any errors at this stage will affect the quality of health services provided. Undergraduate medical students at any clinical rotation activity carried out

during the stages will always be in contact with the patient so that the identification of these patients is fundamental and must be well understood by undergraduate medical students.

In some previous studies mentioned that patients reacted positively to the presence of young medical / physician students in their service ¹¹. Patient perceptions of the quality of care they receive from the patient physician have improved in some aspects when the physician involves a medical student or young physician in his service ¹⁰. In harmony with previous research, in our study, the health services provided by experienced undergraduate medical students experienced increased patient satisfaction scores compared to the group of patients receiving services from undergraduate medical students who had not received patient identification training. This illustrates that patient satisfaction increases as a result of the provision of patient identification training given to undergraduate medical students

CONCLUSION

There were significant differences in patient satisfaction between patients who received health services from a undergraduate medical student who received training in patient identification and patients who received health services from a undergraduate medical student who did not receive patient identification training. There was an increase in patient satisfaction in the group of patients receiving treatment from a

undergraduate medical student who received training in patient identification. This illustrates that patient identification training can improve patient satisfaction.

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