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**The Effect Of Education To Nurses on The Implementation of Discharge  
Planning In Patients In The Edelweis Room**

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**ABSTRACT**

Discharge planning program is a process of preparing patients to get continuity in care and maintain their health status until the patient feels ready to return to his family environment, the process starts from the moment the patient comes to a health care place. The purpose of this study was to determine the effect of education on nurses on the implementation of discharge planning in patients in the Edelweiss Room, Bhayangkara Hospital Manado. This study used a Quasy Experimental Design using a Pretest-Posttest Control Group Design with 60 samples, which were divided into 30 respondents in the experimental group and 30 respondents in the control group. The sampling technique used is purposive sampling, this method uses the criteria selected by the researcher in selecting the sample. The measuring tools used are the Extension Program Unit of discharge planning and questionnaires. The statistical tests used were paired sample t-test and independent sample t-test. The results obtained from the statistical paired sample t-test and independent sample t-test with SPSS resulted in a sig (2-tailed) value of 0.002. This means that sig (2-tailed) < 0.05, so Ha is accepted. The conclusion shows that there is a significant difference between the pre-test and post-test of the experimental group who were given education to nurses about discharge planning. And there is a significant difference between the experimental group and the control group with sig values. (2-tailed) 0.000 means < 0.05. It is expected that nursing services carry out discharge planning according to the stages that have been made and patients are expected to be able to carry out the results of the discharge planning so that they can improve their quality of life.

## **Keywords: Abstract, Guidelines, Authors, Methods**

### **BACKGROUND**

At this time there are still many complaints reported by the public regarding health services in hospitals that are less than optimal. One of the service activities that have not been optimal is the implementation of discharge planning (Safrina, Putra 2019). Discharge planning programs can reduce the length of days of patient care, prevent recurrence, improve the patient's health condition, reduce the burden on the patient's family and reduce mortality and morbidity rates. Implementation of a good discharge planning will affect the improvement of the patient's health quality.

Ignorance or inability of patients and families regarding how to care at home has an impact on health problems or the patient's unpreparedness to face discharge after the patient is hospitalized. This causes an increased risk of complications and results in re-hospitalization (Safrina, Putra 2019).

One of the roles of nurses in nursing services is as an educator. Nurses provide health education to patients and help patients to improve their health through the provision of knowledge related to nursing and medical treatment received so that patients and families gain important knowledge. Nurses in carrying out their role as educators are also part of the discharge planning implementation.

Discharge planning education needs to be delivered to nurses through short courses or internal training as an effort to encourage awareness, willingness, and ability of patients to be more independent in handling their health status. In Indonesia, nursing services have designed various forms of patient discharge planning formats, the flow has been arranged in detail to make it easier for nurses to carry out their duties as well as possible, but only used in the form of documenting resumes of patients returning home, in the form of information that must be conveyed to patients who are going home such as medical and non-medical interventions that have been given, control schedules, and nutrition that must be met after being at home (Azimatunnisa, 2019).

Information is only given when the patient is declared allowed to go home, even though discharge planning begins on the first day the patient is admitted to the hospital. This cannot be said to be discharge planning, because it is given in a short time and the information is very limited so that it does not guarantee the achievement of a change in the behavior of the patient and family.

Based on research conducted by Safrina, et al (2019) regarding the implementation perception of the importance of discharge planning at the Banda Aceh Hospital, it shows that as many as 67.2% of respondents perceive discharge planning as important to implement. Another study conducted by Purnamasari (2012), regarding the evaluation of the implementation of discharge planning at the Tugurejo Hospital Semarang stated that 46.6% of respondents were in the sufficient category when carrying out discharge planning. This means that discharge planning at Tugurejo Hospital Semarang has not been carried out optimally.

Based on the results of an initial survey conducted on January 25, 2019 in the Edelweiss room of the Bhayangkara Hospital Manado, from interviews conducted with the head of the room and nurses in the Edelweiss room, it was known that discharge planning was carried out after the patient was allowed to go home and had been examined by a doctor. In providing discharge planning to patients, nurses provide education regarding control schedules and taking medication regularly to patients. Therefore, researchers are interested in conducting research on the effect of education to nurses on the implementation of discharge planning in patients in the Edelweiss Room Bhayangkara Hospital Manado.

## RESEARCH METHODS

This research uses Quasy Experimental Design by using Pre Test-Post Test Control Group Design. The independent variable (independent) in this study is education for nurses and the dependent variable is the implementation of discharge planning for patients.

The population in this study were all nurses in the Edelweiss room with a total of 18 nurses and patients in the last 1 month who were hospitalized in Edelweiss Room and Internal Surgery with a total of 298 patients. The sample size in this study used the Arikunto formula, namely  $298 (\text{population}) \times 20\% = 59.6$  rounded up to 60 samples, which were then divided into 30 patients in the Edelweiss room as the experimental group and 30 patients in the Internal Surgical room as the control group.

The instrument used in this study is the Extension Program Unit for education to nurses and a questionnaire given to patients to measure the implementation of discharge planning carried out by nurses. Univariate analysis produces frequency distribution and percentage of each variable, and bivariate analysis for data obtained if normally distributed, the researcher uses the T test, with  $\alpha \leq 5\%$ , assisted by the SPSS (Statistical Product and Services Solutions) version 25 program for Windows.

## RESULTS AND DISCUSSION

### A. Research results

#### 1. Univariate Analysis

##### a. Characteristics of respondents

Table 1. Distribution of Respondents by Age in the Edelweiss Room and Internal Surgery

Age	Experimental Group		Control Group	
	N	%	N	%
15-25 Age	7	23.3	8	26.7
26-35 Age	5	16.7	6	20.0
36-45 Age	3	10.0	3	10.0
46-55 Age	9	30.0	7	23.3
56-65 Age	6	20.0	6	20.0
Total	30	100.0	30	100.0

Table 1 shows that of the 60 respondents in the experimental group and the control group, based on age the most in the experimental group were aged 46-55 years as many as 9 people (30.0%) and the most age in the control group was aged 15-25 years as many as 8 people (26.7 %).

Table 2. Distribution of Respondents by Gender in the Edelweiss Room and Internal Surgery

Gender	Experimental Group		Control Group	
	N	%	N	%
Male	12	40.0	17	56.7
Female	18	60.0	13	43.3
Total	30	100.0	30	100.0

Table 2 shows that of the 60 respondents in the experimental group and the control group, based on the sex of the experimental group there were 12 males (40.0%) and 18 females (60.0%). While in the control group there were 17 males (56.7%) and 13 females (43.3%).

b. Discharge Planning Implementation

Table 3. Distribution of Respondents Based on the implementation of discharge planning in patients before and after being given education to nurses in the Edelweiss room

Variable	Category						Total	
	Good		Enough		Less		N	%
	N	%	N	%	N	%		
<i>Pre-test</i>	5	16.7	20	66.7	5	16.7	30	100.0
<i>Post-test</i>	21	70.0	5	16.4	4	13.3	30	100.0

Table 3 shows that the implementation of discharge planning of respondents before being given education to nurses on the implementation of discharge planning in patients in the poor category was 5 people (16.7%) and the implementation of discharge planning of respondents after being given education to nurses was mostly in the good category, there were 21 people (70.0%).

Table 4. Distribution of Respondents Based on Test results in the Internal Surgery Room.

Variable	Category						Total	
	Good		Enough		Less		N	%
	N	%	N	%	N	%		
Test Result	3	10.0	4	13.3	23	76.7	30	100.0

Table 4 shows that the test results of respondents as a control group in the poor category were 23 people (76.7%).

2. Results of bivariate analysis
  - a. Normality test results

Table 5. Normality Test Results for the Experimental Group and the Control Group

Statistical test	Significance value	Meaning
Kolmogorov-Smirnov Test		
Experiment Group and Control Group	0.200	Normal distribution

Table 5 shows that the normality test in the experimental group and the control group has a significant value of  $0.200 > 0.05$ , so the normality test is normally distributed.

- b. Homogeneity test

Table 6 Test of Homogeneity of Experimental Group and Control Group

Statistical test	Significance value	Meaning
Experiment Group and Control Group	0.818	Homogen

Table 6 shows that the homogeneity test in the experimental group and the control group has a significant value, namely  $0.818 > 0.05$ , then the data distribution is homogeneous or the same.

- c. The results of the analysis of respondents before and after being given education to nurses on the implementation of discharge planning in patients can be seen in table 7.

Table 7. Results of Analysis of the Implementation of Discharge Planning in Pre-Test and Post-Test Patients in the Experimental Group Using the Paired Sample T-Test

		T	Df	Sig.(2-tailed)
<i>Pair 1</i>	<i>Pre test-post test</i>	-3.459	29	.002

Table 7 shows that the value of sig. (2-tailed)  $0.002 < 0.05$ , it can be concluded that there is a significant difference between the pre-test and post-test of the experimental group who were given education to nurses on the implementation of discharge planning in patients.

Table 8. Independent Test Results Sample T-Test in the Experimental Group and Control Group t-test for Equality of Means

		T	Df	Sig.(2-tailed)
Result	<i>Equal variances assumed</i>	7.424	28	.000
	<i>Equal variances not assumed</i>	7.424	57.385	.000

Table 8 shows that the value of sig. (2 tailed)  $0.000 < 0.05$ , it can be concluded that there is a significant difference between the experimental group which was given education to nurses on the implementation of discharge planning and the control group which did not educate the nurses.

## B. Discussion

The results of the study are presented based on the research objectives, namely knowing the implementation of discharge planning in patients before educating nurses, knowing the implementation of discharge planning in patients after educating nurses and analyzing the differences in the implementation of discharge planning between before and after education for nurses in the Edelweis Room Manado Hospital Bhayangkara.

1. Implementation of discharge planning in patients before and after nurses were given education in the Edelweiss Room.

Based on the research conducted, it was found that the implementation of discharge planning of respondents before being given education to nurses from 30 respondents based on table 6 was in the less category with a presentation of 16.7% or 5 respondents and after educating nurses on the implementation of discharge planning in patients, the category with the highest presentation high category is either 70% or 21 respondents.

The results of statistical tests in this study used a paired t-test with a significant value of 0.002. This means that the significant value  $< 0.05$ . Because the significant value is  $< 0.05$ , it can be concluded that  $H_0$  is rejected and  $H_a$  is accepted. So it can be said that there is an effect of education on nurses on the implementation of discharge planning in patients in the Edelweiss Room Bhayangkara Hospital Manado.

Another study conducted by Hidayat (2018) concluded that there was an effect of providing discharge planning on increasing patient and family knowledge about post-cataract surgery.

Another study conducted by Nurjanah and Irwan (2019) also concluded that there was a significant difference in self-efficacy between the treatment group and the control group with a p value of  $0.002 < 0.05$ .

According to researchers, discharge planning education for nurses is very important to increase nurses's knowledge about the implementation of discharge planning. The implementation of discharge planning must always be carried out by nurses to assist patients and their families in preparing for the patient's return. The implementation of discharge planning must be given to the person closest to the patient starting when the patient enters until the patient is ready to return to his environment.

2. Differences in the implementation of discharge planning in patients in the Edelweiss Room and the Internal Surgery Room.

The effect of education to nurses on the implementation of discharge planning in patients in the Edelweiss Bhayangkara Hospital Manado. The calculation of the results using post-test data of the experimental group and control group data that have been analyzed statistically states that there are differences in the results of the experimental group and the control group. The average post-test value of the experimental group was 68.77 while the average value of the control group was 39.60.

The results of statistical tests in this study used an independent sample test with a significant value of 0.000. This means that the significant value  $< 0.05$ . Because the significant value  $< 0.05$ , it can be concluded that  $H_0$  is rejected and  $H_a$  is accepted. So that it can be said that there is a significant difference between the experimental group that was educated on nurses and the control group that did not educate the nurses.

The results of this study are supported by the research of Wijayanti et al. (2019), there is a difference in the average value of patient readiness in facing discharge between the control group and the intervention group, the significant value of  $p = 0.000$  is lower than the P Value (0.05). So it was concluded that there was an effect of discharge planning on the patient's readiness to face discharge.

This study is supported by research conducted by Ernita, et al (2017) It was concluded that there was a significant difference between the readiness of pulmonary TB patients to face discharge in the experimental group before and after being given discharge planning by nurses at ArifinAchmad Hospital with statistical test results  $p < 0.05$ . In this study, there were differences in the experimental group and the control group after being given education to nurses.

According to researchers, education for nurses is important to increase nurses's knowledge about the implementation of discharge planning, nurses who have good knowledge about discharge planning will be able to carry out discharge planning implementation in patients well, so that they can help families and patients to prepare patients to go home. Meanwhile, nurses who have less knowledge about discharge planning will carry out less than optimal discharge planning.

## CONCLUSION AND RECOMMENDATION

There are differences in the implementation of discharge planning to patients before and after the nurse provides education and there are also differences in the implementation of discharge planning to patients between the experimental group and the control group, so it is recommended that after the nurse is given training on discharge planning, it can maximally encourage awareness and willingness and ability of the patient to handle health after returning home, and for hospitals to improve health services that are integrated in the implementation of the discharge planning implementation process provided by nurses to patients and families, and can conduct further research.

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