ANALYSIS OF THE NEED FOR NURSE COMPETENCY TRAINING AT AHMAD YANI ISLAMIC HOSPITAL SURABAYA

Muhadi Muhadi¹, Ferry Efendi²

1. STIKES Yayasan RS. Dr. Soetomo, Surabaya, Indonesia
2. Faculty of Nursing, Universitas Airlangga, Surabaya, Indonesia

ABSTRACT
Nurse training is an important component of developing the quality of human resources in hospitals. To investigate the unachieved target of 20 hours of nurse training per year at Ahmad Yani Islamic Hospital Surabaya per year is the objective of the research. The aim of this research is to analyze the need for nurse competency training at Ahmad Yani Islamic Hospital Surabaya. In addition, this research explains the organizational analysis, conducts the operational analysis, gives details in the individual analysis of nursing staff and prioritizes the need for nurse training at Ahmad Yani Islamic Hospital Surabaya. This research is a quantitative research with descriptive analysis model. The population was 115 nurses at Ahmad Yani Islamic Hospital Surabaya. The number of participating respondents was approximately 55 nurses. It was found that five types of nurse training are the main priority that must be shortly executed by the hospital, including compulsory training, basic nurse training, accreditation needs of training, special competency training and nursing management. The current priorities on the need for training of nurses related to competency are as follows: Emergency Patient First Aid Training (PPGD), Basic Trauma Cardiac Life Support (BTCLS) Training, Basic Life Support (BLS) Training, the Infection Control and Prevention (PPI) Training, Training on Patient Screening, Pain Management, Disaster Management, Patient Safety, Medical Record Filling, and Modern Wound Care Training.

Keywords: Nurses, Need for Training, Hospitals

Corresponding Author : Muhadi Muhadi
Email : muhadi@stikes-ysds.ac.id

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INTRODUCTION

The government, through the Ministry of Health, has set a minimum service standard in the form of provisions regarding the type and quality of basic services in hospitals. This is a compulsory affair for hospitals to be obtained by every human resource as a minimum. The minimum service standard is the measurement of work performance in determining the type and quality of basic services for hospitals. The minimum service standard in the administration and management field regarding employee training is at least 20 hours per year (Kemenkes RI, 2008). In 2017, 82.13% of the 277 health workers surveyed in the sample had not completed the 20 hours of standard training; however, the remaining 17.69% of the workers had completed the 20 hours.

About 364 employees with an identified number of training hours until 2018 denoted that health workers with less than 20 hours’ standard training were at a percentage of 63.19%, while those with ideal training hours or 20 hours per year were at 36.81%. This is still not an ideal result because it does not achieve the standard for all hospitals combined till the end of 2018, which is still currently below 60%.

There is no standard number of health workers to participate in 20-hours-per-year-training, which in fact is currently held by less than 60% of the total number of employees (RSI, 2018). The training achievement of Ahmad Yani Islamic Hospital Surabaya in 2018, there were 115 nurses or around 74.2% of the 155 nurses in total who had not met the minimum standard training (20 hours per year). Therefore, this study aimed to analyze the need for nurse training at Ahmad Yani Islamic Hospital in Surabaya. It will also explain the organizational analysis, conduct operational analysis, give details on the individual analysis of nurse staff, and prioritize the need for nurse training at Ahmad Yani Islamic Hospital Surabaya.

METHOD

This research is a quantitative research with descriptive analysis model. It is necessary to describe the need of training for nurses at Ahmad Yani Islamic Hospital Surabaya. This research is also designed to describe the condition of organizations and individuals. Through this approach, researchers collect information, interact with respondents, and survey using questionnaires to strengthen and give details in the results of the research. The population of this research were all health workers at Ahmad Yani Islamic Hospital Surabaya, mainly focusing on its nurses which were about 115 people.

A sample of respondents was taken from the population using an accidental sampling technique to achieve a representative research objective. The number of respondents was 55 nurses. Data collection was conducted from October to December 2018. Questionnaires were used at the time to determine the organizational climate, individual performance, and competency review of nurses at Ahmad Yani Islamic Hospital Surabaya. Thus, this research includes quantitative data.

Researchers applied the technique of data analysis by collecting primary data and studying the data, which was specifically and systematically categorized into specific items according to the focus of the research. Secondary data was collected in the form of operational documents related to the need of training analysis. The secondary data was examined and classified into certain items. All data obtained was arranged and presented in the form of both tables and graphics related to the analysis of the need for training of health workers.

Data analysis in this study used frequency data and percentage based on findings in the field. Categorization was applied on variables functioned as the must-be-concluded representation. Researchers consider the analysis of suitability, decision making, and the verification of research output based on an understanding of the data presented. By doing this, researchers can draw conclusions while answering the problem statement. This research has an approval from the Education and Training Unit of Ahmad Yani Islamic Hospital Surabaya based on the statement of the hospital director.
The characteristics of nurses are as follows: relatively young, ranging from 24-29 years old (45.5%), and there were about 11 respondents above >42 years old working as nurses. In regards to marital status, 81.8% or about 45 nurses were married, and as many as 18.18% or 10 nurses were unmarried. Most of them are the permanent employees of the (hospital) foundation, which was around 52.7%, and 38.2% are contract workers. The nurses who had completed their education up to diploma level were 47.3%. Then, about 32.7% of them had taken their education to Ners level. The longer a person works, the more likely he or she is to gain experience and a large amount of training from the hospital. The number of nurses that had a working period of between 1-3 years was 47.3%.

### Table 1 Characteristics of Respondents

<table>
<thead>
<tr>
<th>Variables</th>
<th>Sub Variables</th>
<th>Freq</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age 18 - 23 years old</td>
<td>6</td>
<td>10.9</td>
<td></td>
</tr>
<tr>
<td>Age 24-29 years old</td>
<td>25</td>
<td>45.5</td>
<td></td>
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<tr>
<td>Age 30-35 years old</td>
<td>8</td>
<td>14.5</td>
<td></td>
</tr>
<tr>
<td>Age 36 - 41 years old</td>
<td>5</td>
<td>9.1</td>
<td></td>
</tr>
<tr>
<td>Age &gt; 42 years old</td>
<td>11</td>
<td>20.0</td>
<td></td>
</tr>
<tr>
<td>Marital status</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>45</td>
<td>81.8</td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>10</td>
<td>18.2</td>
<td></td>
</tr>
<tr>
<td>Job status</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Permanent worker</td>
<td>29</td>
<td>52.7</td>
<td></td>
</tr>
<tr>
<td>Contract worker</td>
<td>21</td>
<td>38.2</td>
<td></td>
</tr>
<tr>
<td>Educational level</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Senior High School</td>
<td>8</td>
<td>14.5</td>
<td></td>
</tr>
<tr>
<td>Nursing D3</td>
<td>26</td>
<td>47.3</td>
<td></td>
</tr>
<tr>
<td>D4 / S1</td>
<td>3</td>
<td>5.5</td>
<td></td>
</tr>
<tr>
<td>S1 Nursing (Ns)</td>
<td>18</td>
<td>32.7</td>
<td></td>
</tr>
<tr>
<td>Years of service</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>1-3 years</td>
<td>26</td>
<td>47.3</td>
<td></td>
</tr>
<tr>
<td>3.1 - 5 years</td>
<td>5</td>
<td>9.1</td>
<td></td>
</tr>
<tr>
<td>5.1 - 10 years</td>
<td>9</td>
<td>16.4</td>
<td></td>
</tr>
<tr>
<td>&gt; 11 years</td>
<td>15</td>
<td>27.3</td>
<td></td>
</tr>
<tr>
<td>Number of certificates</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>1-3 certificates</td>
<td>31</td>
<td>56.4</td>
<td></td>
</tr>
<tr>
<td>4-5 certificates</td>
<td>10</td>
<td>18.2</td>
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<tr>
<td>6-7 certificates</td>
<td>4</td>
<td>7.3</td>
<td></td>
</tr>
<tr>
<td>&gt;8 certificates</td>
<td>6</td>
<td>10.9</td>
<td></td>
</tr>
</tbody>
</table>

### Table 2 Operational Analysis of Nurse General Competence

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Category</th>
<th>Semi Proficient</th>
<th>Proficient</th>
<th>Very Proficient</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conduct interpersonal communication to implement nursing measures</td>
<td></td>
<td>14</td>
<td>25.4</td>
<td>36</td>
<td>65.5</td>
</tr>
<tr>
<td>Applying the principles of ethics in nursing</td>
<td></td>
<td>14</td>
<td>25.4</td>
<td>34</td>
<td>61.8</td>
</tr>
<tr>
<td>Applying the principles for the prevention of nosocomial infection</td>
<td></td>
<td>18</td>
<td>32.7</td>
<td>32</td>
<td>58.2</td>
</tr>
<tr>
<td>Analyze, interpret data and documents accurately</td>
<td></td>
<td>15</td>
<td>27.2</td>
<td>31</td>
<td>56.4</td>
</tr>
<tr>
<td>Creating and maintaining a safe nursing environment through quality assurance and risk management</td>
<td></td>
<td>12</td>
<td>21.8</td>
<td>35</td>
<td>63.6</td>
</tr>
<tr>
<td>Measuring vital signs (physical examination)</td>
<td></td>
<td>7</td>
<td>12.7</td>
<td>30</td>
<td>54.5</td>
</tr>
<tr>
<td>Use precautions to prevent injury to patients or clients</td>
<td></td>
<td>11</td>
<td>20</td>
<td>31</td>
<td>56.4</td>
</tr>
<tr>
<td>Facilitating the fulfillment of oxygen needs</td>
<td></td>
<td>10</td>
<td>18.1</td>
<td>13</td>
<td>23.6</td>
</tr>
<tr>
<td>Facilitating the fulfillment of fluid and electrolyte needs</td>
<td></td>
<td>9</td>
<td>16.3</td>
<td>32</td>
<td>58.2</td>
</tr>
<tr>
<td>Giving medicine safely and precisely</td>
<td></td>
<td>11</td>
<td>20</td>
<td>30</td>
<td>54.5</td>
</tr>
<tr>
<td>Managing safe giving of blood and blood products</td>
<td></td>
<td>17</td>
<td>30.9</td>
<td>23</td>
<td>45.5</td>
</tr>
<tr>
<td>Providing actions in emergency situations in accordance with competence</td>
<td></td>
<td>10</td>
<td>18.1</td>
<td>33</td>
<td>60</td>
</tr>
<tr>
<td>Providing nursing consultations and</td>
<td></td>
<td>12</td>
<td>21.8</td>
<td>30</td>
<td>54.5</td>
</tr>
</tbody>
</table>

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The existence of a certificate is one of the requirements for a person to be recognized as having gained the ability and experience to develop themselves as a nurse. From the information obtained, most nurses with the number of certificates between 1-3 was 56.4%. There were still nurses (about 4 people) who had never received a certificate. The status of these nurses is possibly as honorary staff. Almost all nurses had conducted interpersonal communication in implementing nursing acts at Yani Islamic Hospital Surabaya. They adjust the principles of ethics in nursing. A total of 32.7% are able to apply the principles of prevention of nosocomial infection and 58.2% of them stated that they were capable of analyzing and interpreting data and documents accurately, as well as creating and maintaining a safe nursing environment through quality assurance and risk management.

About 32.7% of nurses revealed that they are very capable of measuring vital signs. These are including using precautions to prevent injury to patients or clients and facilitating the fulfillment of oxygen needs. As many as 58.2% of nurses are considered as being capable of facilitating the fulfillment of fluid and electrolyte needs, and also to give medicine safely and precisely. About 30.9% of nurses appraised that they are able to manage blood and blood products securely, perform actions in emergency situations in accordance with their competences, provide nursing consultations and collaborate with doctors. Overall, the general competence of nurses in Ahmad Yani Islamic Hospital Surabaya is good and the nurses fulfill their capabilities.

Training is an activity to improve the ability of employees by allocating training budgets as investments. It is also formulated that training is essentially a learning process. Therefore, training is defined as a process of teaching skills needed by the employees to do their jobs (Latham, G. and Wexley, 1991). Regarding the aspect of work quantity, the nurse's workload is classified as high by 27 nurses or about 49.1%. Most have applied a high work quantity aspect. For the aspect of work quality, most nurses have performed high tasks.

<table>
<thead>
<tr>
<th>Table 3 Priority Analysis of Nurse Competency Training Needs</th>
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<tbody>
<tr>
<td><strong>Training Dimensions</strong></td>
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<tr>
<td>Basic competencies</td>
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<tr>
<td>Hospital compulsory training</td>
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<td>Special competencies</td>
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<td></td>
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<tr>
<td>Nursing management &amp; accreditation</td>
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</table>
Based on the research results described in the previous individual analysis, there are 5 (five) types of training models that must gain attention for the development of nurses. Those five types of training, obtained from 55 sample nurses in this study, are related to basic competencies, compulsory trainings, accreditation needs, special competencies and nursing management. The intended training must be fulfilled after the first year of becoming a permanent staff member of the hospital.

The first training includes the Emergency Patient First Aid Training (PPGD). This training is a type of training that explains the system of nursing medical procedures, the system of stabilization, the system of transformation, the first treatment system for every patient who needs it precisely and quickly. About 54.5% of nurses have never followed the training, yet the degree of importance of this training is stated as important and very important by up to 85.5% of nurses. Meanwhile, the degree of necessity for this training is an extremely high need (up to 92.7% of nurses). Hence, this training is classified as a main priority.

The next is the Cardiac Life Support Basic Trauma (BTCLS) Training. It is an action to provide assistance to the victims of disasters or emergencies in order to prevent death or damage to organs, so that their productivity can be maintained equally before a disaster or emergency event occurs. There are six phases in its training performances, such as detection phase, suppression phase, pre-hospital phase, hospital phase and rehabilitation phase. In detection phase, it can be predicted about the frequency of events, causes, victims, places that are prone to the quality of events and their impacts. For example, for training related to traffic accidents, it can be predicted the frequency of traffic accidents, the poor quality of motorcycle helmet used, the infrequency of safety belts utilization, the most frequent places for accidents on heavy roads, and so on.

The suppression phase aims to push the lessening of emergency victims that can be carried out in some ways, such as by repairing the road construction, increasing knowledge of traffic regulations, and increasing security patrols. About 72.7% of nurses have never attended this training, while the degree of importance of this training was stated as both important and very important by up to 83.6% of the sample. The degree of necessity for this training is highly needed as stated by up to 89.1% of the sample.

This training is an absolute requirement for every health worker, especially nurses in various hospitals. This training helps the nurses to gain more skills and knowledge in responding to emergency events. Those are for several reasons, which are as follows: firstly, the frequency of traffic accidents and natural disasters that require first aid before going to hospital are increasing. Secondly, the data on emergency incidences in the field do not always show death on the spot usually, but more death on the way to the hospital because of a lack of blood or a delay in giving the first aid. Thirdly, is the lack of skilled health workers in handling emergency problems. Therefore, this training is classified as a major need.

Other training is the Basic Life Support (BLS) Training. BLS training is needed by all nurses to provide appropriate and proper nursing care for victims of accidents, thus they are able to save the lives of victims wherever there are nurses. This training is not only for nurses, but also for all workers in the hospital since it is compulsory according to the direction of the hospital accreditation.

### Training Dimensions

<table>
<thead>
<tr>
<th>Name of Training</th>
<th>Degree of Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Quality Control and Quality Assurance Training</td>
<td>Third priority</td>
</tr>
<tr>
<td>Nurse Planning and Evaluation Training</td>
<td>Second priority</td>
</tr>
<tr>
<td>Data Management Training</td>
<td>Second priority</td>
</tr>
<tr>
<td>Clinical Pathway Training</td>
<td>Third priority</td>
</tr>
<tr>
<td>Disaster Management Training</td>
<td>Second priority</td>
</tr>
<tr>
<td>Patient Safety Training</td>
<td>Main priority</td>
</tr>
</tbody>
</table>

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A total of 29.1% of nurses have never attended BLS training, yet the degree of importance for this training is stated as important and very important by 83.7% of the sample. Also, the degree of necessity for this training is greatly needed as stated by up to 92.7% of nurses. Hence, this training is a main priority as well.

Further to this is the Infection Control and Prevention (PPI) Training. Healthcare Associated Infection (HAIs) is the current global issue. The impact of HAIs could increase the morbidity and mortality rate of patients, which is detrimental to both patients and the hospitals and other health facilities. It can even be a hospital demand. According to the Law number 36 of 2009 and Law number 44, every patient admitted to a hospital and other health facilities must be provided with a safe service. One of required efforts is to make patients safe by applying Patient Safety. The fifth objective of Patient Safety is to reduce the risk of HAIs. According to the Decree of the Minister of Health in 2007, each hospital must implement the Prevention and Control of Infection and hold IPCN, with a comparison of IPCN and beds around 1: 100-150 classified as bad.

Based on the results obtained, about 29.1% of nurses have never attended this training, while the degree of importance is stated as important and very important by 83.7% of the nurse sample. The degree of necessity for this training is highly needed by up to 90.9% of nurses. This training also is a main priority.

Types of Training with Special Competencies include Modern Wound Care Training. After completing this training, participants are capable of providing nursing care to wounded patients holistically according to the standard authority determined by the organization. People with Diabetes Mellitus (DM) are at high risk due to having wounds that are difficult to heal. In fact, it is often a wound that is large and causes an unpleasant smell. One complication in diabetes patients is the pain nerve disorders at limbs, such as legs. Therefore, people with Diabetes Mellitus infrequently feel any injuries in their legs. Their wounds can potentially become infected. It is very important for Diabetes Mellitus patients to not get hurt and to always use footwear. About 72.7% of nurses have never attended this training, while the degree of importance of the training is stated as important and very important by 90.9% of the sample. The degree of necessity for this training is an extremely high need, stated by up to 92.7% of the nurse sample. This training is a main priority.

Another type of Training with Special Competencies is Hypnotherapy Training. It teaches the basics of hypnosis and hypnotherapy, stage hypnosis, and self-hypnosis with successfully proven learning methods. This training is designed for beginners who want to directly practice hypnosis for games and therapy for simple psychological problems for patients. About 90.9% of nurses have never attended this training, and the degree of its importance is important and very important (at 89.1% of the sample). The degree of necessity for this training is highly needed by up to 83.6% of the sample Thus, this training is also a main priority.

The last training is on Patient Safety Training. Patient Safety Training is a process in hospitals to provide safer care for patients. This includes Risk Assessment, Risk Management Identification of patients, Incident Reporting and Analysis, as well as the ability to learn and follow up on incidents and implement solutions to minimize the risk arising. A Law concerning Hospital No.44 article 43 of 2009 states that a hospital is required to apply Patient Safety Standards. Currently, the demand for service quality and the guarantee of hospital security services are increasingly prominent, thus any efforts are needed to standardize the services. One of them is the implementation of International Patient Safety Standard goals that ultimately could raise the public trust in hospital services (Putri, 2017).

About 43.6% of nurses have never attended this training, while the degree of its importance is stated as important and very important (SP) at 94.5%. The degree of necessity for this training is greatly needed (up to 98.2%). Therefore, this...
training is classified as the main priority for nurses.

**DISCUSSION**

In some contexts, analysis of necessity holds very important benefits (Dedy Kurniadi, 2007). First, in changing the work system or work method for new expectations, this training is often needed. Hospitals must have a good service principle where each service is patient-oriented. At this case, the need for staff training is possibly identified to enable them to appropriately adapt the changes on the health service model introduced. Second is the introduction of new technologies, which refers to a working environment for hospitals that adopt a new or a certain technology. It usually comes with its own method of instruction that must be included as one training subject. The use of hospital technology requires nurses to be more advanced and make adjustments to the tools. Thus, learning to operate specific new technologies requires the acquisition of additional skills or knowledge, which can vary between various groups of staff and encourage their questioning on the various use of technologies. Therefore, analysis of the need for training is appropriate to be conducted to determine training necessity on each of these groups related to the use of a new technology. Third is the introduction of new operational standards namely revised or new standards. It is a usual required training for professionals whose practices are influenced by this change. This is the best way to ensure compliance to the new standards. At this case, analysis of the need for training would enable skill definitions to be developed to allow for the good implementation of this new standard (Noe & Ramond A, 2001).

The fourth is a decrease in the quality of work or performance in the unit. Many factors contribute to the decreasing of work quality or unit performance, both inpatient and outpatient services including high nurse workloads. Analysis of the need for training among the various involved groups of professionals will show whether training is one way to improve the achievement of established goals. The fifth are about departmental meetings and opinion surveys studied in the analysis on the need for organizational training that will then provide the possibility of determining whether the needs are common to all staff. The sixth reveals the lack of nurses’ skills and knowledge. Skills and knowledge are important to the services provided by the nurses in hospitals (Helda, 2015).

Knowledge is the processing and organizing of information to obtain understanding, learning, and accumulated experience, and this can then be applied to a particular problem or process. All work requires several types of knowledge, including general knowledge and knowledge about work procedures. In Job analysis, a list of assignments must be created. When it is analyzed, it will refer to important knowledge requirements in order to succeed fulfilling a job or position. In this case, the workers have to understand all general knowledge related to nursing. Seventh is about the lack of employee motivation. Motivation affects work performance. Two factors increasing the proportion of work motivation include the value attached to working and the level of performance (Blanchard, P.N., 2004).

A proactive approach must be designed in hospitals to respond to the perception that the current work reflects an inability to meet the hospital standards or expectations. This type of approach can be proactive on a number of phenomena directed to represent the ability of employee performance in accordance to the standards and expectations that possibly change in the future (Pallavi, 2013).

**CONCLUSION AND RECOMMENDATION**

In general, the analysis of organizations related to the organizational climate at Ahmad Yani Islamic Hospital Surabaya is described as being in good condition by the nurses. There are a number of things needed to be considered, including self-development guarantee for nurses through training, work protection for nurses, and the improvement of nurse remuneration. Operational analysis related to the general
competence of nurses in the nurse law is quite well functioning and most nurses have already taken action. Operational analysis related to the need for nurse training is a main priority, such as the emergency patient first aid training, the basic trauma cardiac life support training, the basic life support training, the infection control and prevention training, the disaster management, the patient safety, and the modern wound care training.

REFERENCES


