ACCREDITATION PREPARATION ON STRESS LEVELS AND PERFORMANCE OF MEDICAL PERSONNEL

Hayatunufus[1*], Lia Idealistiana[2], Mariani[3]

[1-3]Abdi Nusantara Health Science High School

Email Korespondensi: hayatunufus98@gmail.com

ABSTRACT

The Ministry of Health of the Republic of Indonesia establishes an independent licensing body called hospital accreditation after verifying that the hospital meets the required hospital service standards. Nurses in hospitals have many duties and responsibilities determined by the hospital itself, so their work can pose a lot of pressure and responsibility. The results of initial research on nine nurses at RSIA Mutiara Bunda Cilegon showed that they experienced stress due to waiting for accreditation, which had an impact on their performance as nurses. This type of research is qualitative research. The research design used is the case control study method. Based on the results of statistical tests, no significant influence between accreditation preparation on stress levels and performance of medical personnel was analyzed. There is no influence between accreditation preparation and nurses' stress level. RSIA Mutiara Bunda Cilegon is expected to provide greater support to medical personnel during accreditation preparation, such as training, counseling, or welfare programs to reduce the level of stress experienced.

Keywords: Accreditation Preparation, Stress Level, Nurse Performance

INTRODUCTION

Hospital is a health institution that organizes individual health services such as promotion, prevention, treatment, and rehabilitation services by organizing hospital, treatment, and emergency services (Law of the Republic of Indonesia 44, 2009). WHO (2000) states that hospitals are an important part of social and health institutions whose mission is to provide comprehensive health services to the community in terms of treatment and rehabilitation. In carrying out their duties, hospitals must be able to provide quality services to the community. To improve service quality, hospitals must have accreditation. The Law of the Ministry of Health of the Republic of Indonesia No. 417 of 2011 on Hospital Accreditation Institution states that hospital accreditation is the recognition of a hospital by an independent licensing body of the Ministry of Health of the Republic of Indonesia that decides after verifying that the hospital meets the required hospital service standards. Improving the sustainable quality of clinical services.

According to Law Number 44 Year 2009, Article 40 paragraph 1 which states that efforts to improve

the quality of hospital services must always be accredited at least once every 3 (three) years. The hospital accreditation program in Indonesia began in 1996 as part of the implementation of the National Health System (SKN). SKN explains that hospital accreditation is a continuous assessment of the quality and range of hospital services that can be used to determine development or improvement policies (Kusbaryanto, 2010). Public concern about their health is increasing, which has an impact on their demands for the quality of health services provided by hospitals, especially in terms of nursing services. The quality of hospital services is influenced by many factors, the most important of which is human resources (Ministry of Health, 2012).

Human resources involved in providing services to patients are doctors, nurses, midwives and other supporting personnel. Nurses make up the majority of hospital workers, 49% more than other health workers (Ministry of Health of the Republic of Indonesia, 2017). Nurses are part of hospital human resources who have a significant influence on the quality of service, and the implementation of nursing care which is not only responsible for the patient's clinical condition but also provides education so that the quality of service for patients can improve (Widiastuti Y., & Yulihasri, 2021). Client satisfaction is a success factor for the hospital to carry out its function in providing optimal service. This can increase client satisfaction which is influenced by human resources with good competence (Sagala R, 2018).

Nurses play an important role in hospitals because nurses see patients more often than doctors. In a hospital, nurses have many duties and responsibilities determined by the hospital itself, so the work of nurses can cause their own workload due to existing tasks and pressures. The workload then puts pressure on nurses to affect the effectiveness of nursing staff. Job stress can also be triggered when the work performed by the caregiver exceeds the limits of their abilities, which in turn creates pressure that must be experienced by the caregiver. This of course greatly affects the performance of nurses. (Nursing, Nursing and Health, Technology, Magazine, 2017).

Based on Muhith's quote (Musdalifah & Dirdjo, 2021) excessive workload greatly affects the productivity of health workers and will affect the productivity of nurses. If nurses feel that the amount of work that must be completed to serve patients is not proportional to the amount of energy available, it can lead to the emergence of work stress. Work pressure is the amount of work, feelings of stress and emotions that can affect work performance due to changes in organizational conditions such as instructions, policies and plans, the economy, work requirements, work and work procedures. and negative changes and conflicts between colleagues (Khoirunisa, GA, Nurmawaty, D., Handyaani, R and Vinalita, G, 2021).

Work stress has become a global issue in the current era where it has affected all types of professions and jobs, both in developed and developing countries. Not only that on individuals, but also has an impact on organizations to the social environment. The high incidence and adverse effects make work stress a serious problem that needs to be handled quickly and appropriately. The health sector is at the highest risk of experiencing work stress (Budiyanto, Ratu, A.J., & Umboh, J.M. 2019). Quote from

(Basrowi, R.W., & Marsen Isbayuputra, 2020). Work stress can occur due to the high aspects of work that are not proportional to the characteristics of workers and the talents or advantages possessed by workers can minimize the number of occurrences of stress in the workers themselves (Aldi, Y & S.F., 2019).

Workload can occur if the tasks assigned to workers are too many and result in not maximizing work results. A high level of loading requires excessive energy so that it can cause overstress, on the other hand, the intensity of loading that is too low allows boredom and saturation or understress. (Sutisnawati & Syaroni, 2019). Performance is the result of individual achievement in carrying out the tasks assigned in the organization. (Prasakhti and Ekhsan, 2022). Success is a reflection of a person's abilities and capabilities, not individual characteristics. (Soeprodjo et al., 2017). Performance is the role that a person plays in an organization based on behavior, ethics and duties and responsibilities such as the established SOP (Rahaman et al., 2017). Direct assessment of nursing performance reflects clinical strategies, which are used to develop nursing strategies that serve to improve nurse performance in hospitals. (Hafizurrachman and EMI Putri, 2020).

Ernawaty (2005) defines occupational stress as a form of stress caused by work that arises due to the interaction between humans and work which is characterized by changes in the organization that cause deviations from normal functioning. Job stress experienced by nurses working in four provinces in Indonesia according to the results of a survey conducted by PPNI (2006) was 50.9%. Based on research conducted by Urip (2015) on nurses at Prof. Dr. H. Aloei Saboe Hospital, Gorontalo City, it shows that 55.1% of nurses have severe stress levels. The results of Wahyu's research (2015) on inpatient nurses at PKU Muhammadiyah Yogyakarta Hospital showed that 80.3% of nurses had high levels of work stress (Wahyu, 2015). Research that conducted in the inpatient room of Hermana Lembean Hospital showed high nurse stress 82.6% (Wagiu, 2017), and research conducted previously by rositoh (february 2023) to inpatient nurses of RSIA mutiara bunda the results of univariate analysis showed 40.0% of nurses experienced work stress so that 40.0% of other nurses had poor performance. From some of the above studies it can be concluded that the work stress of a nurse in Indonesia today is still quite high.

Based on the results of a preliminary study conducted on 9 nurses at RSIA Mutiara Bunda Cilegon, it was found that they experienced stress due to accreditation preparation and affected their performance as nurses. Therefore, the author is interested in conducting research to determine the effect of accreditation preparation on stress levels and health worker services at RSIA Mutiara Bunda Cilegon.

LITERATURE REVIEW

Stress is a response or reaction from a person to mental or physical stressors (Mawardi & I; Jaiz, 2020). Stress is a disturbance in the body and mind caused by changes and demands in life, which are influenced by both the environment and the individual's appearance in that environment (Erlina, 2022). Giordano et al (2006) in (Nuraini, 2016) divide 3 types of sources of stress, including:

1. Psychososocial stress is stress caused by pressure in terms of

relationships with surrounding social conditions. Things that can cause psychosocial stress include being in a new environment, discrimination related to legal cases or because of economic conditions.

2. Bioecological stress consists of two sources, namely 1) ecological stress and 2) biological stress. Ecological stress is stress caused by environmental conditions. Meanwhile, bioecological stress is stress caused by the physical condition of the body.

3. Personality stress is stress caused by problems experienced by oneself (Firnandi, 2020).

Indicators are variables that can be used to reveal circumstances or the possibility of measuring changes that occur from time to time. There are 3 dimensions and indicators, namely:

1. Environmental Stress

Environmental uncertainty affects organizational design, so that uncertainty becomes a burden for employees, especially when organizational change takes place. The environmental dimension is economic uncertainty, technological uncertainty and political uncertainty causing work stress because they feel that their energy is no longer needed

2. Organizational Stress

The organizational dimension relates to situations where employees experience task demands, role demands, and personal demands. Task demands related to the amount of work that must be completed make employees feel tired from completing their work.

3. Individual Stress

These dimensions regarding the personal life of each employee are family problems, personal economic problems and employee personality (Simbolon, 2024).

RESEARCH METHODS

The type of research this time is qualitative research. The research design used is a cross sectional study method. The focus of this study was to evaluate the effect of accreditation preparation on stress levels and health worker services at RSIA Mutiara Bunda Cilegon. The location of this research was at RSIA Mutiara Bunda Cilegon. The data source in this study is primary data obtained directly from the research subject by using measurement tools or data collection tools directly from the subject as the information sought. The population taken in this study were all nurses who worked at RSIA Mutiara Bunda Cilegon as many as 20 respondents. The sampling technique used was total sampling. This study used a questionnaire as a data collection technique. The analysis method used is univariate analysis and bivariate analysis using SPSS 20. The distribution used is the Chi-square distribution used to see whether two classifications of the same data are independent of one another.

RESEARCH RESULTS

Frequency distribution of accreditation preparation based on two categories, namely "Less Good" and "Good." A total of 4 respondents (20%) rated accreditation preparation as "Poor." A total of 16 respondents (80%) rated accreditation preparation as "Good".

Frequency distribution of stress levels among health workers, which was divided into two categories: "Moderate Stress" and "Mild Stress". A total of 7 health workers (35%) experienced moderate levels of stress. A total of 13 health workers (65%) experienced mild stress. frequency distribution of health worker performance, which was divided into two categories: "Poor" and "Good". A total of 11 health workers (55%) were rated as having "Poor" performance. A total of 9 health workers (45%) were rated as having "Good" performance. In the good accreditation preparation category, the majority (62.5%) experienced mild stress. The p-value (P) was 1.000, meaning there was no statistically significant difference between stress levels based on accreditation preparation (poor and good).

The confidence interval (95% CI) for the odds ratio was 0.047 to 6.629, which includes a value of 1, indicating that the observed difference was not significant. Overall, based on the statistical test results shown in the table, there was no significant effect of accreditation preparation (good or poor) on the stress levels of the individuals analyzed. In the good accreditation preparation category, 62.5% of nurses had good performance. The p-value (P) was 0.285, meaning there was no statistically significant difference between the performance of medical personnel based on accreditation preparation (poor and good). The confidence interval (95% CI) for the odds ratio was 0.017 to 2.386, which includes a value of 1, indicating that the observed difference was not significant. Overall, based on the results of the statistical tests shown in the table, no significant effect of accreditation preparation (good or poor) on medical staff performance was analyzed.

DISCUSSION

Overall, based on the results of statistical tests, there was no significant effect of accreditation preparation (good or poor) on the stress levels of the individuals analyzed. According to Mealer (2007), conditions that are stressors for nurses include dealing with critical conditions, grief and death experienced by patients and their families. Violence and unpleasant treatment from both patients and their families include stressors for nurses (Hayes and Bonner, 2010). Nurse stress is also caused by problems with colleagues, with superiors or supervisors and with the organization where they work (Konstanttinos and Cristina, 2008).

The results of research conducted on nurses at Polkes Jajaran Denkesyah 05.04.01 Madiun show that most nurses have stress levels in the normal range and a small proportion have moderate stress levels. Environmental, organizational, and individual factors are some of the causes of work stress, according to Robbins (Febriana, 2016). The results showed that variables such as gender, educational background, accreditation preparation time, and marital status can affect the different stress levels experienced by nurses during accreditation. The results of Irkhami's (2015) research on the causes of work stress. Irkhami found that respondents' work stress levels were lower if the respondents' age was higher (Irkhami, 2015). This is due to the fact that older workers have more flying time, which allows them to better understand the

various problems that arise in the workplace and how to solve them, so they have a lower risk of work stress compared to younger workers.

The results of research conducted by Historyana (2016) showed that 97.4 percent of nurses experienced mild stress, which means they have good coping skills and mechanisms. They were also supported by individual factors such as good social relationships (94.7%), the ability to adapt to the environment (81.6%), 37 of the respondents (97.4%) did not experience personal crisis, and 32 of the respondents (84.2%) did not experience financial difficulties. Support and appreciation from the hospital leadership (60.5%) was one of the mitigating factors. The researcher's assumption regarding the results of this study is that accreditation preparation, whether it is done well or poorly, does not have a significant impact on individual stress levels. In other words, the accreditation preparation factor does not directly affect the level of stress felt by the individuals analyzed in this study, according to the results of the statistical tests conducted.

Based on the results of statistical tests, there was no significant influence between accreditation preparation (good or less good) on the performance of the analyzed medical personnel. This is in line with research conducted by Ensha, the performance of health workers is not only influenced by Puskesmas Accreditation but also influenced by Public Health Service Management. The same thing was conveyed by Almoajel (2012), there is no direct relationship between accreditation and service quality indicators. The results of the analysis test using Chi-Square conducted by Putri1 and Sureskiarti (2020) obtained a p value of 0.535,

indicating that there is no significant relationship between accreditation and the performance of health workers. According to this description, there are many factors that influence the performance assessment of health workers, including leadership, organizational culture, communication, human resources, and supporting facilities at the health service center. This study only looked at respondents' opinions on accreditation of health worker performance.

This study is also supported by Alhawajreh (2023) that there is little evidence on how effective accreditation is in improving health care quality and outcomes. In addition, the findings provide a better understanding of the critical components that can influence the implementation of hospital accreditation and improve understanding of its potential consequences. Using the NPT demonstrates how important it is to enact the accreditation process and how it can improve healthcare quality. However, little attention was paid to the impact of accreditation on the roles and responsibilities of healthcare professionals, methods to engage healthcare professionals in its implementation, and ensuring that the objectives and potential benefits of accreditation are made clear and obvious through ongoing evaluation and feedback from all healthcare professionals involved in the process.

The researcher assumes that the variables analyzed (accreditation preparation) may not fully reflect the factors that can influence the performance of medical personnel. There may be other more relevant or dominant variables that were not included in the analysis. In addition, the effect of accreditation preparation on the

performance of medical personnel may take longer to show up, so it may not be detected within the period of the study. Also, the specific environmental conditions or context at the time of the study (such as policies, organizational culture, or external situations) may influence the results, so that accreditation preparation does not show a significant influence on medical staff performance.

CONCLUSION

A total of 80% of respondents rated accreditation preparation as "good". Nearly 65% of respondents experienced mild levels of stress. 45% of respondents rated their performance as "good". There is no influence between accreditation preparation and nurses' stress level. There is no influence between accreditation preparation and nurses' performance. RSIA Mutiara Bunda Cilegon is expected to provide greater support to medical personnel during accreditation preparation, such as training, counseling, or welfare programs to reduce the level of stress experienced. Encourage students to conduct further research on the impact of accreditation on various aspects of health care, including psychological aspects and medical staff performance.

Consider adding other variables that may affect stress levels and medical staff performance, such as workload, social support, or leadership style. Use more diverse research methods, such as longitudinal studies or a mix of quantitative and qualitative methods, to gain a deeper understanding of the influence of accreditation preparation on medical staff.

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