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NURSE'S CHARACTERISTICS IN TRIAGE ROOM AT GENERAL HOSPITAL OF DR. SAIFUL ANWAR MALANG Introduction: Emergency services are services that require fast and appropriate services to prevent death and disability. In handling emergency patients, emergency room has a triage system in carrying out emergency actions.

Triage is a process of selecting patients according to the level of emergency and priority in handling patients. Triage is one of the nursing skills that must be owned by an emergency unit nurse, this is what distinguishes emergency department nurses from nurses in other rooms. The goal of this study is to find the characteristics of nurses in the Triage Room at General Hospital of dr. Saiful Anwar Malang.

Method: The research design is a descriptive quantitative approach. The population covers all nurses in the Triage Room at General Hospital of dr. Saiful Anwar Malang with the total of 13 people using total population. The data collection tool uses a questionnaire that has been tested for validity and reliability. The results of the research used univariate analysis using frequency distribution to know characteristics of nurses in the Triage Room at General Hospital of dr.

Saiful Anwar Malang. Results and Discussions: The results showed that more than half (55%) of respondents had good knowledge, more than half (54%) of respondents had a good experience index, and more than half (60%) of respondents had sufficient training indexes.

Conclusions: Based on the results of the study, it is expected to motivate nurses to increase their knowledge about triage and participate in all training related to emergencies. Keywords: characteristics, emergency, nurses, triage INTRODUCTION

Emergency Department (IGD) is always synonymous with accidents and various other emergency events related to the need for immediate relief.

Patients come to the emergency room with varying degrees of severity in large numbers and almost the same time so that in treating patients in the emergency room a triage system is applied. The word "triage" is derived from the French " trier" which means to filter or to sort (Ryan, 2008). Lossius et al. (2012) defines triage as the process of grouping patients according to the severity of the injury and determining priorities for further treatment .

Triage aims to determine patient priorities based on clinical circumstances. The aim is to reduce morbidity and mortality. The triage system identifies patients who on the one hand need immediate attention but on the other hand also to recognize patients who can safely wait or may not need emergency treatment at all (Moll, 2010). According to Ryan (2008) triage is used to identify, manage and evacuate the most injured to lighter injuries.

This is the method applied to get the right patient for the right treatment and at the right time. The principle in determining the priority of a triage decision is based on Maslow's Hierarchy of Needs in which the framework states the most basic needs must be met before the highest needs are starting from physiological needs, security, love and love, self-esteem, and self-actualization.

In the emergency department this is described in ABCD, which is meeting the needs of the airway (Breathing), breathing (Breathing), circulation (Circulation), disability (Disability) (Zimmermann & Herr, 2006). In addition to ABCD assessments that illustrate life threats, there are several other images assessed in determining priorities including complaints of pain, bleeding, level of consciousness, temperature, and acute conditions (Mackway et al., 2006).

**METHOD** This type of research is quantitative research using descriptive research design. The population in this study were nurses R money Triage IGD RSUD dr. Saiful Anwar Malang with a population of 13 people. Sampling in this study using total population techniques . Data collection tools use a questionnaire that contains general characteristics of triage care that includes age and last education.

The knowledge factor about triage is explored using a questionnaire consisting of 7 (seven) indicators, namely : a) principles, objectives, and triage process; b) assessment of the airway; c) respiratory evaluation; d) circulation assessment; e) assessment of disability; f) assessment of environmental factors; and g) assessment of symptom onset

with a total of 20 statements that have been tested for validity and reliability .

The validity test uses the Product Moment K correlation test with a value of  $r = 0.622-0.660$ . While the reliability test uses the K coefficient Kuder-Richardson Reliability (KR-20) obtained  $r = 0.678$  . Analysis of the data used is univariate analysis using frequency distribution.

Triage nurse experience factor p enilaian categorized into three categories: baik (  $\geq 4$  ), c scent ( 2-3 ) and kurang ( 0-1 ) where a score of experience working 6-60 months = 1 and  $\geq 60$  months = 2. While the triage nurse training factors were explored in the training that followed a maximum of the last three years including the Triage Officer Course (TOC) , Emergency Disaster Management (PPGD) , Basic Life Support (BLS) , Basic Trauma Life Support (BTLS) , ECG Resuscitation Course , and Ambulance Protocol .

Ratings are categorized into three categories: baik if indexes training  $\geq 4$  , c scent if the index trainings 2-3 , and kurang if indexes training 0-1 .

## RESULTS AND DISCUSSIONS

Overview of Research Locations General Hospital of Dr. Saiful Anwar Malang is a Class A General Hospital owned by the Regional Government of East Java Province. General Hospital of Dr.

Saiful Anwar Malang is located in the middle of Malang city, precisely on Jalan Jaksa Agung Suprpto 2 Malang, which is a strategic location that is easily accessible to the community both by surrounding communities and from outside the city. The Emergency Room (ER) is located at the northern front door of General Hospital of Dr. Saiful Anwar Malang.

ER has a triage room, Resuscitation / Priority 1 room, Priority 2 general cases, Priority 2 cases of Neonates, Priority 2 cases of Obstetrics and Priority 3. In addition, ER also has a nurse room, doctor's room, operating room, Information and Education Room (KIE), Decontamination Room, Administration Room, pharmacy depot, X-Ray room, CT Scan and toilet.

Characteristics of Nurses in the Triage Room The characteristics of the care in the Triage Room include age , sex, last education, knowledge, experience, and training. Table 1

Frequency Distribution of Respondent Characteristics (n = 13)

Characteristics	Category	n	%
Age	$37 \pm 8.25$ $\geq 37$ years old	8	61.54
	$<37$ years old	5	38.46
Gender	Man	6	46.15
	Girl	7	53.85
Last education	Bachelor's degree	2	15.38
	Diploma	11	84.62
Knowledge	well	7	53.85
	enough	6	46.15
Experience	0.00		
	Experience in the ED $\geq 60$ months	11	84.62
Experience in the Triage Room	$\geq 60$ months	6	46.15
	$<60$ months	7	53.85
Training	0.00		
	PPGD training yes	8	

61.54 not 5 38.46 BLS training yes 13 100.00 BTLS training yes 12 92.31 not 1 7.69 ECG resuscitation training yes 12 92.31 not 1 7.69 Training index enough 8 61.54 less 6 46.15 Age Based on Table 1 note that the nurses had a mean age of 37 years (SD = 8).

25) where the age at this time is in the category of middle adulthood (35-64 years) (Wong, et al, 2008). U mur is one of the things that influences knowledge. With increasing age someone will change the physical and psychological aspects (mental), where the psychological aspects of this level of thinking someone is more mature and mature (Notoatmodjo, 2003).

Numerous studies have examined the effect of age and clinical experience on nurses' attitudes, but the results are not conclusive. McLaughlin (1994) in McCann, et al. (2007) investigated attitudes toward patients and found that the attitudes of older and more experienced nurses were more favorable than younger and less experienced colleagues. Gender More than half (53.85%) nurses are female.

Most nurses are women because the world of nursing reflects the figure of a woman in providing nursing care, affection, and assistance to her patients (Priharjo, 2008). Last education Most (84.62%) of nurses had an education D III Nursing. Higher education makes it easier for someone to make decisions and act. Education means guidance given by someone to others so that they can understand.

It is undeniable that the higher a person's education, the easier it is for them to receive information, and in the end the more knowledge they have (Notoatmodjo, 2003). The level of education also influences one's perception of accepting new ideas and technologies. Education is also one of the factors that influence perception because it can make someone to more easily make decisions and act (Walgito, 2002).

Knowledge of triage Based on research results more than half (53%) of respondents have good knowledge. Penelitian previously showed that the main factors related to the skills of the triage nurse is knowledge (Andersson et al., 2006; Considine et al., 2007) and education and ongoing training is the cornerstone of a system of triage that contribute in decision making triage (Qureshi, 2010).

Nurses' knowledge is supported by the participation of several trainings related to triage decision making including PPGD, BLS, BTLS, and ECG resuscitation training. In addition, more than half of the subjects of nurses have D III Nursing education (84.62%) where education is one of the factors that influence perception because it can make a person to more easily make decisions and act (Walgito, 2002).

Triage knowledge refers to the level of factual and procedural knowledge that emergency nurses need to conduct rapid assessments, patient categorization, and patient allocation (Fathoni et al., 2010). Previous research has shown that the main factor associated with triage skills of triage nurses is knowledge (Andersson et al., 2006; Considine et al., 2007).

Factual knowledge seems to be more important than the length of triage experience in the accuracy of triage decisions (Considine, et al. 2007). The nurse's decision based on the patient's problem, clinical history, signs, symptoms, general condition and physical condition are important parameters. Nurses consider knowledge as an important tool when prioritizing patients.

In some areas where knowledge may be lacking, nurses give higher priority (Andersson et al., 2006). Skills in triage decision making are very important for nurses, through initial assessment, nurses must be able to prioritize patient care on the basis of appropriate decision making for each emergency (Smith & Cone, 2010; ENA, 2011).

Past medical history is the most frequently recorded criterion to assist in initial assessment (74%) (Tippins, 2005). Work experience Based on a history of work experience more than half (54%) of respondents have a good experience index which includes experience working in the ED ? 60 months (84%), in the Triage Room ? 60 months (54%) .

This is in accordance with previous research which mentions nurses who have worked in the emergency room for more than five years are considered better in triage decision making than those who have worked for five years or less (Tippins, 2005; Zimmermann & Herr, 2006). In this study more experienced nurses use triage decision making strategies through deductive reasoning and intuition while for less experienced nurses use inductive reasoning. This is consistent with Davidoff, 1981 in Walgito, (2002) which states perceptions are influenced by feelings, thinking abilities, and individual experiences.

Nurses who have work experience in cases that they have met are more secure in deciding on a patient's priorities. Experienced nurses have more ability in triage skills than novice nurses. Intuition is developed through a long experience that helps decide the actual condition of the patient (Andersson et al., 2006).

The length or length of nurses' work experience affects the triage decision. Nurses with more than 20 years of clinical experience are more likely to do independent triage than nurses with less than 10 years of clinical experience (O'Cathain, et al., 2004). Whereas

Chung (2005) found that emergency nurses who have at least one year of experience will have triage skills.

Several studies in the United States and Australia conclude that triage nurses have wide variability in experience, preparation and orientation in the role of triage nurses and not enough education and training. The researchers recommend that a triage nurse must meet several criteria: a minimum of 3 (three) months experience in the ER; have ACLS certificate; have a certificate of emergency or critical care; complete triage competencies and guidelines (Qureshi, 2010).

The Emergency Nurses Association (ENA) recommends that triage nurses have a minimum of 6 (six) months of nursing in the emergency department in addition to completing triage training which includes a didactic component and clinical orientation with experienced instructors (Hoyt <[https://translate.google.com/translate?hl=en&prev=\\_t&sl=id&tl=en&u=http://www.ceufast.com/courses/viewcourse.asp%3Fid%3D249%23Triage\\_Nurse\\_Qualifications](https://translate.google.com/translate?hl=en&prev=_t&sl=id&tl=en&u=http://www.ceufast.com/courses/viewcourse.asp%3Fid%3D249%23Triage_Nurse_Qualifications)> & Selfridge, 2007).

Emergency training Based on training history over half (60%) of respondents have an index enough training that includes getting training PPGD (62%), BLS (100%), BTLs (92%), and ECG resuscitation (92%). The training followed by nurses is always renewed for a maximum of three years to improve the ability to make triage decisions. This is consistent with the statement that skills in triage decision making are very important for nurses, through initial assessment, nurses must be able to prioritize patient care on the basis of making the right decision for every emergency (Smith & Cone, 2010; ENA, 2011).

Another opinion states factual knowledge seems to be more important than the length of triage experience in the accuracy of triage decisions (Considine, et al., 2007). General nursing education does not adequately prepare emergency nurses for the complexity of the role of triage nurses. Emergency nurses must complete standard triage education or courses before being assigned to the triage section to improve triage knowledge.

Many triage education programs are supported by the assumption that knowledge acquisition will result in an increase in triage decision making (Considine, et al., 2007). Some training that must be owned by a triage nurse include cardiopulmonary resuscitation (CPR) courses and Advanced Life Support (ALS) standards, Emergency Nurse Pediatric Course (ENPC) course, Trauma Nurse Core Course (TNCC) course, Geriatric Emergency Nurse Education (GENE) and Certified Emergency Nurse (CEN®) or Certified Pediatric Emergency Nurse (CPEN™) (ENA, 2011).

In Indonesia some training related to patient emergency is Prevention of Emergency Patients (PPGD), Basic Life Support (BLS), Basic Trauma Life Support (BTLS), Advanced Cardiac Life Support (ACLS), Advance Trauma Life Support (ATLS), ECG Resuscitation Course and Ambulance Protocol (Fathoni et al ., 2010). Several studies report that continuing education and training is the foundation of a triage system and contributes greatly to true triage decision making (Qureshi, 2010). It is important to increase and broaden insights about new knowledge and can be used in improving the quality of triage nurses .

In addition to education programs and courses, some of the additional qualities that triage nurses must possess are having good communication skills, critical thinking skills, being able to work in situations of high stress intensity, and being able to provide education for patients during the triage process (ENA, 2011). CONCLUSIONS Based on the results of the study can be described the characteristics of triage nurses in the Triage Room of RSUD Dr.

Saiful Anwar, among others, have a mean age of 37 tah un , more than half of nurses are women , s ost nurses had an education on the last D III Nursing , more than half of the nurses had good knowledge , more than half of the nurses have indexes good experience covering experience working in the ED ? 60 months (84%) and in the Triage Room ? 60 months (54%) , and more than half of nurses have a sufficient training index which includes having attended PPGD training (62%), BLS (100%), BTLS (92%), and ECG resuscitation (92%) .

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