



## THE DIFFERENCES OF PATIENT'S FAMILIES PERCEPTIONS WITH BPJS INSURANCE AND GENERAL ABOUT RESPONSE TIME NURSE'S BASED ON TRIAGE IN THE EMERGENCY ROOM

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ABSTRACT	Keywords
<p><b>Introduction:</b> Many families of BPJS patients assume that nurses' response time was slower compared to general patients. The purpose of this study was to determine differences in patient's family perceptions with BPJS insurance and general about nurse's response time based on triage in emergency room. <b>Method:</b> The design in this study is comparative approach. The population were the family of patients with BPJS insurance and general patient in the emergency room. The sampling method used was consecutive sampling technique, so to got 80 respondents consisting of 40 respondents with BPJS insurance and 40 general respondents. Data is collected through questionnaires and observations were used to strengthen the data from the questionnaire results. <b>Result:</b> the analysis using paired t-test showed no differences in BPJS and general patients' family perceptions of the response time of nurses based on triage in emergency room with the data <math>p = 0.649</math> <math>\alpha = 0.05</math> so that <math>p &gt; \alpha</math>. Most have negative perceptions, but observation results showed that most of the nurses' quick response time in BPJS patients in the yellow triage category were 16 respondents (80%) and general patient families as many as 18 respondents (90%). <b>Conclusion:</b> The factors that influence this outcome are the patient's family ignorance about the nurse's response time, age, education and occupation.</p>	<p><b>Family of patients, perception, respond time</b></p>

### INTRODUCTION

Increasing health costs make it difficult for people to obtain health services. One method that can be used to alleviate the burden of health financing using insurance. Efforts have been made by the government to provide health insurance for the community such as the existence of a National Health Insurance (Firri, Eka, & Yuli, 2011). But there are still many problems that occur in hospitals related to patient care especially those using BPJS, including patients and families of patients

participating in BPJS health complaining that health services provided by health workers have not gone well so that it often triggers problems and commotion caused by negligence of health workers as providers of health services (Wafom, 2012).

Patients who participated in the BPJS considered the response time of nurses to be different in general patients, whereas basically the response time given was the same as the patient's triage category but the patient felt that there was a slightly different response time because the response time

given by the nurse must be based on the category triage in emergency room, giving rise to negative perceptions in patients using BPJS, while for general patients there were no problems and perceptions of response time given by officers were good (Resha, 2016).

*World Health Organisation* (2012) explain the hospital as a social and health organization that has a function as a service, including comprehensive services (curative) healing of diseases (curative) and also as disease prevention (preventive) to the community. It is intended that patients get care with high quality and on time (Hinchley G, 2011). Emergency Room Installation is one of the service units in the hospital that provides first aid and as the first way for patients to be in an emergency, where patients need quick medical help to save lives and further disability (Depkes RI, 2006). Timeliness in emergency services is an important concern in countries around the world (Bowen J, 2007). Perceptions of patients or the public at this time often assess the performance of nurses is less independent and less rapid in handling patients in the emergency department so that it becomes a problem and can affect the quality of the hospital (Hamidiyah, 2016).

The diversity of patients in emergency room who come from various backgrounds in terms of socio-economic, cultural, educational an experiential experiences makes the perceptions of patients or society different. Ignorance about the management of emergency patients by nurses in the emergency room influences positive and negative patient perceptions (Qureshi, 2010). Positive patient perceptions if the nurse service in the emergency room is in accordance with patient expectations, such as fast, responsive, and optimal service. Patients who come to the emergency department make nurses have to sort patients

quickly and precisely according to priority, not based on queue numbers (Jufri, 2010).

According to research Hamidiyah (2016), about the quality of service with interest in revisiting in the emergency room shows that the percentage of patient perceptions about negative service responsiveness is equal to 43.3%, the positive is 56.7% and patients complain about the care services provided are not in line with expectations, waiting times relatively long, existing facilities and tools and employees are still lacking. Research conducted by Maatilu (2014) *response time* in the handling of emergency patients on the emergency room RSUP PROF. Dr.R.D. Kandou Manado found that the response time of nurses was on average (> 5 minutes) by 17 (56.7%). Furthermore, research conducted by Mahrur (2015) in IGD Panembahan Senopati Hospital Bantul showed that nurses had a fast response time (<5 minutes) as many as 12 people (60%) and slow response time (> 5 minutes) as many as 8 people (40%). Research carried out by Rahmawati (2017) in the surgical and non-surgical emergency installation of Dr. wahidin sudirohusodo research shows that the accuracy of the response time is 8 minutes with the handling of surgical emergency room cases which is 67.9% on time and 32.1% is incorrect. Non-surgical IGD is 82.1% correct and 17.9% is incorrect.

From the preliminary study conducted on January 29, 2019, at the emergency room with direct interview methods to BPJS patient families and general yellow and green triage categories, as well as conducting direct observation methods to nurses regarding response time to patients. When conducting interviews with 3 of the 5 respondents in the yellow triage category and green triage, BPJS patient families had a negative perception about the response time of nurses in the emergency room, because the time in

providing services such as services was delayed because there were victims of accidents that arrived. While the results of observations by researchers at that time, new patients received treatment for about 6 minutes. 1 out of 5 respondents in the green triage category of the general patient's family also had a negative perception, because they wanted hospitalization but the emergency room suggested outpatient care. 4 out of 5 respondents in the yellow and green triage category of the general patient's family had a positive perception because there were no problems regarding the nurse's response time as long as his family came to the emergency room.

In fact, there are many delays in nurse response time, namely the response time of more than 5 minutes, this indicates that emergency room has not fulfilled the standard (Kepmenkes, 2009). One of them in the yellow priority that requires a response time of more than 30 minutes and the green color of the response time needed can be more than 60 minutes, of course this problem will arise in the families of patients who do not know about the triage system services in emergency room, for example, service, angry and might decide to move to another hospital.

This research is important to do in general to know patient perceptions of nurse response time based on triage in the emergency room, so the results can describe the service in the emergency room that actually changes perceptions related to the response time given to patients. As for health workers this must be truly understood and applied because it is related to community satisfaction with services in hospitals.

Based on the description above, researchers are interested in conducting research on "Differences in Family Perception of BPJS Patients and General about Response Time of Nurses Based on Triage in emergency room".

## **MATERIALS AND METHODS**

The research method used in this study was a comparative study, comparing the family perception of BPJS patients and the general patients about response time. The population in this study were all families of BPJS patients and the public who were in the category of yellow and green triage in the Emergency Room at Mojokerto General Hospital. The sampling technique used in this study was non probability sampling technique, namely consecutive sampling technique. Consecutive sampling technique is the selection of samples by specifying subjects that meet the research criteria included in the study until a certain period of time, so that the number of patients needed is met (Nursalam, 2017). The number of samples in the yellow and green triage category was 40 people and generally in the yellow and green triage category were 40 people in the Emergency Room. The instrument used in this study was a questionnaire. The questionnaire consisted of 3 components and had been tested for validity through expert judgment and analyzed with Product Moment ( $r$ ), then performed a reliability test with cronbach alpha obtained  $0.336 > 0.06$ . To strengthen the data obtained from the questionnaire, observations were made with reference to the triage standard according to the Ministry of Health 2018.

## RESULTS

Table 1 Distribution of Frequency of Characteristics of Respondents in Emergency Room February 2019

No	Variable	BPJS		Umum	
		n	%	n	%
<b>Age</b>					
1	17-23 Age	5	12,5	3	7,5
2	24-30 Age	10	25	8	20
3	31-37 Age	19	47,5	20	50
4	> 38 Age	6	15	9	22,5
<b>Education</b>					
1	Elementary school	3	7,5	5	12,5
2	Yunior High School	6	15	4	10
3	Senior High School	28	70	26	65
4	College	3	7,5	5	12,5
<b>Work</b>					
1	Student	3	7,5	1	2,5
2	Entrepreneur	28	70	20	50
3	Farmer	3	7,5	7	17,5
4	House wife	5	12,5	5	12,5
5	Civil/Soldier/Police	1	2,5	7	17,5
<b>Gender</b>					
1	Man	10	25	22	55
2	Woman	30	75	18	45
<b>Triage</b>					
1	Yellow	20	50	20	50
2	Green	20	50	20	50
<b>Insurance</b>		<b>F</b>		<b>P</b>	
1	BPJS	40		50	
2	General	40		50	

Source: Primary data, February 2019

Table 1 above shows the respondent characteristics based on the age of almost half the respondents aged 31-37 years as many as 20 respondents (50%). The results of the characteristics of the respondents based on the latest education were mostly high school education with 28 respondents (70%). Obtained the characteristics of respondents based on the type of work mostly Entrepreneurs as many as 28 respondents (70%). Obtained the characteristics of respondents based on sex are mostly women as many as 30 respondents (75%). The characteristics of respondents were obtained based on the method of payment, half of which was using BPJS (50%) and half of them were family of general patients (50%). The characteristics

of respondents based on triage in the emergency room were obtained, namely yellow and green triage, half using BPJS (50%) and half yellow and green triage using Public (50%).

Table 2 Tabulation of Differences in Family Perception of BPJS Patients and General about Response Time of Nurses Based on Triage in Emergency Room February 2019

No	Perception	BPJS		General	
		Yellow	Green	Yellow	Green
		n	n	n	n
		%	%	%	%
1	Positive	6	7	8	9
		30	35	40	45
2	Negative	14	13	12	11
		70	65	60	55
Total		20	20	20	20
		100	100	100	100

Source: Data Primer, February 2019

Table 2 shows that there are differences in BPJS and General patients' family perceptions about nurse response time based on triage in emergency room, where there are still many BPJS patients who have negative perceptions of yellow triage as many as 14 respondents (70%) and green triage as many as 13 respondents (65%). In the majority of the general patient's family had a negative perception of yellow triage of 12 respondents (60%) and negative perceptions of green triage by 11 respondents (55%). The results of the analysis showed no differences in BPJS and General Patients' Family Perceptions of the Response Time of Nurses Based on Triage in emergency room with the data  $\rho = 0.649$   $\alpha = 0.05$  so that  $\rho > \alpha$ .

Table 3 Distribution of the Response Time Frequency of Nurses to the Family of BPJS Patients and the General Based on Triage in Emergency Room February 2019

No	Response time nurses	BPJS		General	
		Yellow	Green	Yellow	Green
		n %	n %	n %	n %
1	Fast	20 100	16 80	20 100	18 90
2	Slow	0 0	4 20	0 0	2 10
Total		20 100	20 100	20 100	20 100

Source: Data Primer, Februari 2019

Table 3 shows that most of the fast response time of nurses in BPJS patients in the yellow triage category was 16 respondents (80%). Most of the response time of nurses is fast in the general patient's family. The yellow triage category is 18 respondents (90%).

Observation results showed that most of the nurses' quick response time in BPJS patients in the yellow triage category were 16 respondents (80%) and general patient families as many as 18 respondents (90%).

## DISCUSSION

### Family Perception of BPJS Patients regarding Response Time of Nurses Based on Triage in Emergency Room

Respondents of this study indicated that there were still many BPJS participants who thought that the response time in emergency room was still not good, including many respondents who considered the response time of BPJS participants to be slower, and patients who had come from earlier in the emergency department still not received treatment by the medical team.

The patient's family often complains about the attitude of the nurse who is not dexterous in handling patients who are new to the emergency room. There are also families of patients who consider that the

response time of nurses at the emergency room is unfair compared to general patients. This patient's family perception occurs because it is influenced by several factors including age, education, and work.

Delay in handling patients in Emergency Services can result in deaths which, according to Maatilu (2014) in their research prove that nurse response time in handling emergency patients are is prolonged can reduce patient rescue efforts and worsen the patient's condition.

### General Patient's Family Perception about Response Time of Nurses Based on Triage in Emergency Room

The results showed that the majority of 57.5% of general patient families had negative perceptions about the nurse's response time in the emergency room. The patient's family perceives that the nurse's response time during the emergency room is not fast enough, so that the patient and the patient's family feel they are receiving very long treatment.

However, observations show that the patient received an average response time of 5 minutes for the green triage category and 3 minutes for the yellow triage. Patients 'families often complain about nurses' attitudes that are not dexterous in handling patients who have just arrived at the emergency room. There is also a patient's family who considers that the nurse's emergency room response time is unfair, even though it is public. It can be concluded that the families of public patients have negative perceptions due to ignorance of the emergency priority emergency room and not according to what they expectancy.

### Differences in Family Perception of BPJS and General Patients about Response Time of Nurses Based on Triage in Emergency Room

The results showed that there were no differences in the family perceptions of BPJS and General patients about the response time of nurses based on triage in the emergency room, where there were still many BPJS patients who had a negative perception of 62.5%. The family of BPJS and General patients have many negative perceptions about nurse response time which is felt to be slow and not in accordance with the patient's family's expectations. However, the results of observations on response time carried out using a stopwatch showed the response time or response time of the nurse when the new patient received treatment with the right time of 5 minutes as many as 72 people (90%) and an inappropriate time of 8 people (10%).

This shows that the ignorance of the BPJS patient's family and the general about the response time of nurses in the emergency department makes many patient families have negative perceptions. This is consistent with the study of Pardede, Chriswardani, & Wigati (2016) that there were no differences of opinion from the two groups of patients. It can be seen that there was no difference in services provided by puskesmas to patients with PBI and Non-PBI.

The results of the inauguration of observation data with the results of the questionnaire regarding perceptions, namely 6 respondents (7.5%) were appropriate, due to factors limiting the number of nurses to the number of patients who entered, changing shift guard and inadequate infrastructure with the number of patients entering, and some arriving at the same time at the emergency room so that the nurse prioritizes the most emergency problems.

Delay in handling patients in Emergency Services can result in deaths which, according to Maatilu (2014) in their research prove that nurse response time in handling emergency patients who are prolonged can reduce patient rescue efforts

and worsen the patient's condition. While 74 respondents (92.5%) results of insulation of observation data with the results of the questionnaire are not the same, this is due to the ignorance of the patient's family about nurse response time based on triage in the emergency room, this can be seen from questionnaires number 1, 4, 15 and 17 The mean results for each indicator of perception, namely awareness of 14.68 experiences 21.90 views 12.89.

## CONCLUSIONS

BPJS patients' family perceptions about nurses' response time based on the emergency room triage are no different, most have negative perceptions. While observations regarding the response time of nurses showed that patients received treatment with the right time <5 minutes more than slow. The factors that influence these results include the ignorance of the patient's family about the nurse's response time, age, education and employment factors.

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