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RESEARCH ARTICLE

The Development of Nursing Diagnosis Based on Indonesian Nursing Diagnosis Standard of Patient with Schizophrenia in Hospital

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Abstract

Objective: Schizophrenia is the common diagnosis for the patient in the hospital who care for mental illness and need several weeks for hospitalization. An accurate nursing diagnosis must be a part of the clinical pathway for patients in a hospital setting to deliver the effective intervention of nursing care. This study aimed to develop a nursing diagnosis based on an Indonesian nursing diagnosis Standart on patients with a diagnosis of schizophrenia in the Surabaya Menur Mental Hospital. Methods: A research and development (R&D) design was employed in this study with a descriptive approach. The sample was 98 medical records documents obtained by purposive sampling. The respondents were selected by inclusion criteria: patients with schizophrenia who had been hospitalized and had experienced a recurrence. The instrument used an observational sheet. The data were analyzed using univariate analysis. Result: The results showed that six nursing diagnoses were formulated during the implementation of nursing care. They were violent behavior (41.8%), hallucinations (36.7%), social isolation (11.2%), self-care deficits (7%), delusions (2%), and risk of suicide (1%). Conclusion: The nursing diagnoses developed based on Indonesian Nursing Diagnosis Standart which were classified as a psychological, behavioral, relational, and environmental category. The nursing diagnoses can be developed in the clinical pathway as a result of evidence-based so they can improve the quality of nursing care.

Keywords: Schizophrenia nursing diagnosis, Clinical pathway, Indonesian Standard of Nursing Diagnosis.

Introduction

Hospitals in providing health services must be able to provide guarantees that the services provided are of high quality and affordable, including in the hospital which cares for patients with mental illness. The quality of nursing care services can be controlled through the application of clinical pathways which are pre-treatments that are formed based on standard procedures of each profession [1, 2].

The results of preliminary studies at the Menur Mental Hospital in Surabaya found that the most medical diagnosis was schizophrenia (F.20) and the clinical pathway form filled out by nurses was carried out in an integrated note but there was no nursing diagnosis component, so 80% of nursing actions were written in clinical pathway form

does not base on the nursing diagnosis that has been written in the patient's medical record. The interviews with the hospital Quality Assurance Board stated that the situation occurred because in the clinical pathway form there was no component of nursing diagnoses, so it could not be evaluated the suitability of nursing actions with nursing diagnoses. This phenomenon shows that the function of implementing a clinical pathway as a tool for monitoring and evaluating the quality of nursing services has the potential to not be implemented.

Nurses must be filled out the clinical pathway and write the nursing diagnosis and intervention based on Nursing Care Guidelines. The diagnosis can be referred of the Indonesian Nursing Diagnosis Standart (INDS) [3]. This study aims to develop a nursing diagnosis based on the INDS which can be applied to the clinical pathway for a schizophrenia diagnosis.

Material and Methods

The design of this research was a research and development (R&D) with a descriptive approach. The samples were ninety-eight medical records of patients with schizophrenia who treated at the Menur Mental Hospital, Surabaya, Indonesia from June-August 2019. The inclusion criteria were patients with a medical diagnosis of schizophrenia based on DSM-IV, treated at least once a time in the mental health services, and have experienced recurrence. The medical record was obtained purposive sampling. The research instrument uses an observational sheet and developed based clinical pathway guidelines [4].

The data collected was the nursing diagnoses of each patient in the medical records. The data were analyzed using univariate analysis and formulated as a strategic issue to develop nursing diagnosis based on INDS which being as a part of clinical pathway instruments. This research has obtained ethical approval from the Ethics Committee Board of Nursing Faculty, Airlangga University with the number: 1696-KEPK.

Results and Discussion

The research results as shown in table 1 can be explained if the majority of medical records were female patients (70.5%) which have a length of stay in the hospital for 28 days (range 2-49 days). Almost all of them experience recurrence once until fifteen times. The six most nursing diagnoses were violent behavior (41.8%), hallucinations (36.7%), social isolation (11.2%), self-care deficit (7.1%), delusions (2%), and risk of suicide (1%).

Table 1: Distribution of respondents

Variable	Criteria	Min	Max	Mean	
Length of stay	day	2	49	22.8	
Relapse Frequency	In time	1	15	2.7	
Variable	Criteria		f(%)		
Gender	Male	29 (29.5)			
	Female	69 (70.5)			
	Total	98 (100)			
Medical Diagnosed: Schizophrenia	F20.0	23 (23.5)			
	F20.1	10 (10.2)			
	F20.2	5 (5.1)			
	F20.3	44(44.9)			
	F20.4	3 (3.1)			
	F20.5	4 (4.1)			
	F20.6	9 (9.2) 98 (100)			
	Total			0)	
Nursing Diagnosed	Violence		41 (41.8)		
	Hallucination	36 (36.7)			
	Social isolation	11 (11.2)			
	Self-care deficit	7 (7.1)			
	Delusion	2 (2)			
	Risk of Suicide	1 (1)			
	Total	98 (100)			

The results of the analysis were formulated into 3 strategic issues, 1) the patient has a long length of stay for hospitalization. 2) The frequency of relapses of patients is very high. 3) The nurse writes one diagnosis for each patient and also write the major interventions.

The issue then analyzed based on INDS and the nursing diagnosis can be classified into four categories and four subcategories. The categories are psychological, behavioral, relational, and environmental and the Sub Category are ego integrity, self-care, social interaction also safety, and protection (Table 2).

Table 2: The development of nursing diagnosis for patients with a medical diagnosis of

schizophrenia

Medical Diagnosis	Nursing Diagnosis based on INDS	Classification	Category	Sub Category
Schizophrenia	Sensory perception alteration	Actual	Psychological	Ego integrity
	Delusion	Actual	Psychological	Ego integrity
	Self-care deficit	Actual	Behavior	Self-care
	Social isolation	Actual	Relational	Social interaction
	Violence	Actual	Environment	Safety and protection
	Risk of Suicide	Risk	Environment	Safety and protection

The nursing diagnoses in a hospital which care for mental illness focussed in the category of psychological, behavioral. relational, and environment. The psychological category emphasizes the disturbance of integrity with ego manifestations of perception disturbances (hallucinations) and thought processes (delusions). Hallucinations are sensorv perception disturbances about an object that occurs without any external stimulation that can cover all sensing systems, but patients feel hallucinations as something very real, at least at a certain moment [5, 6]. dilution is a client's belief that is not following reality but is maintained [7].

Hallucinations and delusions are symptoms that occur after a person has failed in achieving the integrity of his ego in the past. Research data shows 36.7% of patients experience hallucinations and 1% experience delusions. Patients with hallucinations and delusions experience problems in the past that attack the ego's defenses so that the inability to cope with and utilize sources of support causes symptoms to appear that affect perceptions and thought processes.

Patients who suffered schizophrenia experienced behavior change. The patient is not able to carry out personal hygiene. They faced problems in cognitive function and mood so that they are unable to think about fulfilling their needs, difficult to plan his life, hard to make a decision, including self-fulfillment [8].

Nurses establish a diagnosis of self-care deficit to be able to provide self-hygiene management intervention in patients with schizophrenia. The self-care management approach guides patients toward a sense of meaning and purpose even while living with the challenges of mental health alteration [9].

Nurses help increase understanding of the importance of personal hygiene in patients' lives by guiding patients directly, so they can feel the benefits, feeling comfort, and gradually want to advance independently. Self-care and self-management strategies are tailored to maximize the individual's capacity to care for him or herself [10]. Patients with schizophrenia are also categorized into relational problems.

They cannot carry out the function of interacting with others or social isolation [11]. Patients suffer from a lack of selfconfidence to interact with others and the environment, failing to build cooperative and fun relationships so they tend to withdraw [12], [13]. Nurses can establish diagnoses of social isolation and provide interventions to help patients recognize the causes of decreased willingness to interact with others, train gradually, and motivate them to do independently. Patients need time and support to regain their relationship abilities slowly, due to a decrease in the way of thinking experienced by patients due to schizophrenia [14].

Schizophrenia patients experienced low awareness of the environment. They cannot estimate a safe environment and protect themself against injury. The patients were diagnosed with violent behavior and the risk of suicide. The tendency of patients to take aggressive actions that can harm others, the environment, and even their self is strongly influenced by the disease.

Various symptoms that affect the perception and mindset of patients must be considered by health professionals when making a diagnosis [15]. It is hoped that the management of violent behavior in crisis and post-crisis situations can help patients understand the correct way to express the emotion and not potentially cause harm to the others, environment, and themselves.

Conclusion

The nursing diagnoses developed based on Indonesian Nursing Diagnosis Standart which were categorized as psychological, behavioral, relational, and environmental. The nursing diagnoses can be developed in the clinical pathway as a result of evidence-

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based so they can improve the quality of nursing care.

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