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MODEL OF HOSPITAL SERVICE COMMUNICATION IN MULTI-ETNICAL COMMUNITIES IN RSUD Dr. H. SOEMARNO SOSROATMODJO KUALA KAPUAS

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ARTICLEINFO

ABSTRACT

Keywords: Communication Model, Health Services, Multi Ethnic Society

The hospital service communication model has a role in supporting the success of health services. A good and effective communication model in health services to patients in a hospital is the main thing in maintaining the quality and image of an institution that is engaged in health services. Application of appropriate communication model in multiethnic society in RSUD dr. H. Soemarno Sosroatmodio Kuala Kapuas has a challenge in terms of the use of various regional languages according to the ethnicity of the patient. This is what makes it unique in the implementation of the communication model for hospital services in multiethnic communities at RSUD dr. H. Soemarno Sosroatmodio Kuala Kapuas. The purpose of this study was to determine the Communication Model for Hospital Services in Multiethnic Communities in RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas. The research method used is a qualitative research method with a phenomenological study approach. Data collection techniques using observation techniques, interviews, and documentation. The results obtained from the research found that the communication model for hospital services in multiethnic communities in RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas is using King's Interaction Communication Model.

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1. INTRODUCTION

Since the formation of the Kalimantan Administrative Province in 1950, Kapuas Regency is one of the 3 (three) Oldest Regencies in Central Kalimantan, besides Kotawaringin Regency and Barito Regency which has a multi-ethnic diverse community. Until the division of the Regency area occurred on July 2, 2002 which resulted in the division of new district areas, into 13 (thirteen) Regencies and 1 (one) Municipality. Kapuas Regency, which is the oldest district, has a relatively large number of multi-ethnic or ethnic groups living in the Kapuas Regency area, including the Dayak, Banjar, and Javanese ethnic groups, as well as several other sub-ethnicities, this is because its area is directly adjacent to South Kalimantan Province. . There are also several sub-ethnic Dayak tribes in Kapuas Regency, including the Dayak Ngaju, Dayak Maanyan, Dayak Bakumpai, and Dayak Oot Danum, as well as a smaller number of other sub-ethnicities. These various multi-ethnic groups interact socially, including in obtaining health services in public service facilities for the community, such as health services in hospitals.

RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas is a local government-owned hospital located in Kapuas Regency, Central Kalimantan. This hospital is the only place for Advanced Level Health Facilities (FKTL), if there are people who need referrals for advanced health care or specialized services, they must go through referrals from the health center or First Level Health Facilities (FKTP). This hospital serves most of the health needs of the community in Kapuas Regency, and there are also many referral hospitals from other district hospitals in the vicinity. In practice, a multi-ethnic community living in

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Kapuas Regency with various health problems is of course a challenge for dr. H. Soemarno Sosroatmodjo Kuala Kapuas, thus requiring a communication model that is appropriate in providing good and quality health services at dr. H. Soemarno Sosroatmodjo Kuala Kapuas.

Good and quality hospital health services are health services that are able to provide a sense of comfort and satisfaction for patients or each user of health services in accordance with the satisfaction level of the average number of visitors and the implementation is in accordance with applicable health service standards and professional ethics. defined health. This is a challenge for health workers in this case the Regional General Hospital dr. H. Soemarno Sosroatmodjo Kuala Kapuas to always improve the quality of its services. In providing good health services, good communication is also needed, so that various communication skills are needed using different or multi-ethnic regional languages in intercultural communication interactions in hospitals.

Intercultural communication can be understood as a relationship or relationship between individuals of different cultures, for example ethnicity, ethnicity, race, language, and social (Kawung, 2014). The communication that takes place is basically verbal, so that the ideas conveyed are more direct and real (have more sense of communication). In communication, there is an important element that is a factor supporting the success of a communication, namely language. Language is an integral part of the culture of a society (Fauziyah M, 2015).

Based on the observations made by the author, there are some people from the interior of Kapuas Regency who are seeking treatment or undergoing inpatient health services experiencing problems or obstacles in terms of communicating with nurses related to the illness they are experiencing related to the use of the language they master. This certainly has a significant impact on the healing process of a patient who is hospitalized at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas. Solving the problems faced certainly requires a communication model that is in accordance with the real conditions of health services at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas.

There are several types of communication models including linear communication models, interactional communication models, and transactional communication models. The expected communication model is in accordance with health services to patients, especially in inpatient rooms at dr. H. Soemarno Sosroatmodjo Kuala Kapuas. The communication model studied is a communication model that is in accordance with the conditions in the field of health services, which are carried out by nurses or health workers in providing therapeutic communication in hospitals.

In the implementation of health services in Kapuas Regency, from the results of initial interviews with health workers at dr. H. Soemarno Sosroatmodjo Kuala Kapuas where nurses have experience interacting or communicating with various patients with different ethnic backgrounds, thus requiring an understanding of language in unifying perceptions of patient complaints, thus demanding the ability of health workers to find solutions in providing health information education so that patients or the visiting patient's family can understand the meaning of the communication conveyed.

Based on the various statements above, in general this paper tries to identify a Model of Hospital Service Communication in Multiethnic Communities at RSUD Dr. H. Soemarno Sosroatmodjo Kuala Kapuas.

2. METHOD

According to Sugiyono "using research methods is a scientific way to obtain data based on certain goals and benefits" (Sugiyono, 2017).

- 1) Type of Research
 - This research uses a type of qualitative research using a phenomenological study approach, which means research that focuses on finding facts that are in accordance with experience. Qualitative research is methods for exploring and understanding the meanings that are considered by a number of individuals or groups of people from social or humanitarian problems (Creswell, 2007).
- Data Collection Techniques
 Techniques in collecting data in this study using Interview, Observation, and Documentation Techniques.

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3) Data Analysis

Data analysis was carried out using Data Reduction analysis, Data Display, and conclusions were drawn

4) Data Validity

The data validation technique in this research is using triangulation techniques through Method Triangulation, Source Triangulation, and Theory Triangulation.

3.RESEARCH CONCEPT FRAMEWORK

1. Overview of Research Locations

Kapuas Regency has an area of around 14,999 km², which is divided into two large areas, namely the non-tidal area (in the north) in the form of rubber plantations belonging to the people and the tidal area (in the south) which has great potential in agriculture. In addition, the other area consists of wilderness areas with an area of 2,780,183 Ha, residential areas ranging in area of 3,553 Ha, rivers, lakes and swamps with an area of 584,280 Ha, while agricultural areas (gardens, rice fields, and fields) with area of approximately 132,264 Ha.

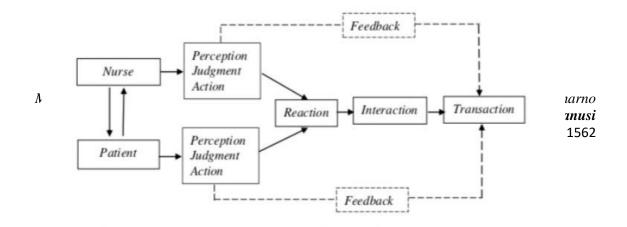
RSUD dr. Soemarno Sosroatmodjo as a health facility for advanced referral services for the community in Kuala Kapuas until 2022 is a General Hospital whose status is owned by the Regional Government of Kapuas Regency with the qualification of a Type C hospital, which means it has health service standards in the form of 4 (four) The types of Basic Specialist Services are Internal Medicine Specialist Services, Gynecology Specialist Services, Pediatric Specialist Services, and General Surgery Specialist Services. Coupled with additional specialist support services, namely Neurology/Neurology Specialist Services, Anesthesia Specialist Services, Radiology Specialist Services, Clinical Microbiology Specialist Services, Clinical Pathology Specialist Services, ENT Specialist Services, Eye Specialist Services, Medical Rehabilitation Specialist Services, Psychiatric Specialist Services, and Dental Conservation Specialist Dentist Services.

2. Characteristics of Informants

The informants in this study were the management of RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas and also an inpatient nurse who is in charge of serving inpatients at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas. Researchers interviewed the Head of the Medical Services Section Christine Pallangan, SKM, the Head of Communication and Education Management, dr. Erny Indrawati, Sari Setyawati Inpatient Nurse, S.Kep, Ns, and Hairesnita, S.Kep, Ns. All of these informants are members of the hospital who know about the daily use of the communication model implemented at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas.

3. Field Research Results

Researchers used phenomenological studies based on events or facts found in the field with the aim of exploring how the types of health service communication models in multiethnic communities at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas. Based on the results of data analysis in the field in the form of interviews, observations, and documentation of the research process obtained at dr. H. Soemarno Sosroatmodjo Kuala Kapuas, researchers found a communication model that was applied to health services in multiethnic communities at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas is the King Interaction Communication Model.





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Figure Flow Interaction Communication Model King

King's Interaction Communication Model is a set of concepts that are clearly interconnected and observable in nursing practice. The concept of human relations according to King consists of Action, Reaction, Interaction, and Transaction. In implementing the King Interaction Communication Model at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas is useful in adjusting any changes, and can be used to explain or predict most of the phenomena or events experienced in nursing services.

Based on the results of interviews and observations of the management and inpatient nurses at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas, the phenomenon found in the field was at dr. H. Soemarno Sosroatmodjo Kuala Kapuas, the king interaction communication model is used by health workers or nurses in interacting with patients, using therapeutic communication, starting with an approach to the patient in the form of interaction and self-introduction, then asking the patient about the background or chronology of events so that the patient needs inpatient health services so as to form a perception that is the same or agree. Furthermore, the nurse in charge consults with the doctor in charge of the service based on the patient's previous complaints so that the type of disease or health problem experienced by the patient is known and consideration of the health service action that must be taken (judgement). Then the service action can be carried out if the entire series of perceptions, judgments, between the health worker or nurse and the patient has agreed on the next type of service to be provided. In this case, a sheet of informed concern form or an action consent form will usually be given in advance for the type of medical action that is quite risky, and the consent sheet must be signed in advance by the patient or the accompanying patient's family, then only then can medical action be carried out according to the illness he is suffering from. by patients based on regular procedures and health service standards in hospitals.

After the flow stage of the king interaction communication model in the form of perception, judgment, and action, the next stage is that health workers or nurses and also patients who are hospitalized will give each other reactions or responses related to the results of the actions (actions) that have been given, also interact with each other if there is something -things that need to be discussed in order to accelerate the patient's healing, so that in the end a transaction will be obtained in the form of an agreement on health services according to applicable local regulations, related to feedback from the results of health services that have been provided at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas.

In terms of the application of the King Interaction Communication Model in multiethnic communities at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas has challenges in terms of using a variety of regional languages which vary according to the ethnicity of the patient. This is what makes it unique in the implementation of the King Interaction Communication Model at dr. H. Soemarno Sosroatmodjo Kuala Kapuas.

4. Discussion

The use of a communication model that is appropriate to hospital services in a multiethnic community at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas serves as a guide for health workers or nurses in providing methods of delivering communication media used in conveying information from health workers such as therapeutic communication or health communication from nurses to patients.



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The results of the interviews show that basically every health worker, especially in the inpatient service room at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas has been trained to master the King Interaction Communication Model using therapeutic communication or health communication to patients, of course using understandable language to be given to a patient, of course, adjusted to the patient's situation and condition. The effectiveness of communication based on the regional language that patients understand is highly dependent on the ability of each officer to understand the patient individually. Communication using local languages that are understood plays a role in the smooth delivery of information and creates a feeling of comfort, familiarity, and trust from patients and minimizes suspicions that occur in the relationship between health workers and patients.

The results of observation and documentation show that the use of regional languages in the application of the King Interaction Communication Model from health workers or nurses who are in charge of providing health services to multi-ethnic communities at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas, namely by using Dayak Ngaju, Banjar, and Javanese in conveying communication from nurses to patients who have received health services at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas obtained quite good results, this was obtained from the observation of statements from several inpatients who felt helped by the communication model of the health workers who treated these patients.

This comparison of source triangulation is in accordance with previous research according to (Susiati, 2020) which explains that most people in Indonesia make their regional language their mother tongue. Apart from that, language also functions as a cultural language, an intra-ethnic unifying language, to strengthen intimacy and kinship, and to know history to evidence of heritage from ancestors in a form of speech device. Regional languages play an important role as identity, characteristics, communication tools, and instruments for centuries to thousands of years through spoken and written.

This is also in line with research conducted by (Yanto, 2014) regarding Language Politeness in Nurse Therapeutic Communication at Dr. Wahidin Sudiro Husodo Mojokerto: Pragmatic Study, which examines and analyzes the purpose of therapeutic communication from nurses to expedite the healing process in patients. Politeness and politeness in nursing therapeutic communication is manifested in attitudes and language spoken politely, politely, and friendly in nursing care. The application of King's Interaction Communication Model using language that is appropriate or understood by patients and their families in therapeutic communication or health communication can play a role in accelerating the healing process of patients who are hospitalized.

In comparison to tirangulation theory, this is in line with the Communication Theory of Self Disclosure by (DeVito, 2016) which states that self-disclosure is a form of communication when someone conveys information about himself that is usually stored. Individuals are able to disclose personal information or self-disclosure appropriately, proven to be adaptable, more self-confident, more competent, reliable, more able to be positive, trust others, more objective and open. In the implementation of the King Interaction Communication Model at the perception, judgment, and action stages, the use of regional languages that are understood by patients in communicating plays a role in the smoothness and conveyance of information and creates a sense of calm, a sense of familiarity, kinship, and trust from patients in expressing feelings or complaints. complaints to health care workers who understand the language they communicate, and minimize the suspicions that occur in the relationship between health workers and patients.

Based on the overall implementation of this research, the authors obtained a communication model that is very consistent with the research results and can be applied to dr. H. Soemarno Sosroatmodjo Kuala Kapuas is the King Interaction Communication Model. King's Interaction Communication Model is a set of concepts that are clearly interconnected and observable in nursing practice. The concept of human relations according to King consists of Action, Reaction, Interaction, and Transaction. In implementing the King Interaction Communication Model at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas is very useful in adjusting to any changes in situations and conditions in the provision of health services to patients, and can be used to explain and predict most phenomena in nursing services. Health workers or nurses who want to apply the King's Interaction Communication Model to health services or nursing services to patients at RSUD dr. H. Soemarno Sosroatmodjo Kuala



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Kapuas is required or must have prior knowledge such as the ability to apply therapeutic communication implementation for goal attainment and have the ability to make nursing plans for patients so as to encourage patients to actively participate in communication interactions.

4.CONCLUSION

The model of hospital service communication in a multiethnic community at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas is the King Interaction Communication Model. King's Interaction Communication Model is a set of concepts that are clearly interconnected and observable in nursing practice. The concept of human relations according to King consists of Action, Reaction, Interaction, and Transaction. In implementing the King Interaction Communication Model at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas is useful in adjusting any changes, and can be used to explain and predict most phenomena in nursing services. King's Interaction Communication Model in multiethnic society at dr. H. Soemarno Sosroatmodjo Kuala Kapuas plays a very important role as a guide for the interaction of the flow of health services in the delivery of effective media or communication tools, especially therapeutic communication from nurses to patients. In the phenomenon found, the use of local languages, namely Dayak Ngaju, Banjar, and Javanese in the application of the King Interaction Communication Model in the form of therapeutic communication from nurses to patients, has resulted in quite good appreciation from patients who have received inpatient services at RSUD dr. H. Soemarno Sosroatmodjo Kuala Kapuas. Innovation in making communication media in the form of health communication brochures or leaflets in Dayak Ngaju, Banjar, and Javanese is a solution for solving communication barriers in the form of written communication media products needed to deliver maximum health information, because if the therapeutic communication that has been given by nurses are somewhat forgotten by patients, they can re-read the contents of the material that has been given. The role of communication in handling various languages in health services at dr. H. Soemarno Sosroatmodjo Kuala Kapuas has done well. Each officer is equipped with the skills to provide effective communication, try to communicate with patients in a good way, starting with getting to know the patient by studying or reading the patient's history and identity, being friendly and polite, and communicating according to what the patient understands by trying to provide information use the language that is mastered by the patient so as to minimize or avoid errors when administering health service actions in order to achieve the goal of healing the patient.

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