Pre-Triage System: A Solution to Facing Surge of Patient during of Covid-19 Pandemic

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Emilda Yuvita¹, Nikma Fitriasari², Nofita Dwi H³
¹ Sumber Sentosa Hospital Tumpang Malang
² Department of Master Hospital Management Faculty of Medicine Universitas Brawijaya Malang
³ Mitra Delima General Hospital Bululawang Malang

ABSTRACT

It is difficult to predict the end of Covid-19 pandemic. This requires good planning to facing the risk of surge of patients in the hospital. The emergency department (ED) as the main access for health services in the hospital has the highest risk of infection and overwhelmed by surge of patients. Modification of the emergency service system by implementing a pre-triage system can be a solution to dealing with surge of patients. The results of the preliminary study succeeded in forming a pre-triage system model. The pre-triage system model was carried out by identifying patients with the risk of Covid-19 in ED and modification of the emergency service flow. The implementation of the pre-triage system requires the readiness of the emergency department’s team. Team’s readiness is influenced by the level of their knowledge about the pre-triage system, age, length of work, and previous experience and hospital support. The research objective was to determine the level of knowledge about the pre-triage system and its relationship with the readiness of the ED staff in implementing the pre-triage system. This research is a quantitative study with a cross sectional approach. The research was conducted at X Hospital, one of the type C private hospitals in Malang Regency, in November 2020. The sample used was all staff of emergency department of X Hospital which total 30. The research instrument was a questionnaire. Data analysis was performed by descriptive analysis and Chi-Square analysis with p value <0.05. The results showed that 23.3% of respondents had good category knowledge, 56.67% respondents had sufficient category knowledge, and 20% had less knowledge. The level of readiness found that 90% of respondents are ready for implementation of the pre-triage system. The Chi-Square test result showed that the level of knowledge of the pre-triage system is not related to readiness to implement the pre-triage system.

Keywords: pre-triage, knowledge, readiness, implementation

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Correspondence: Emilda Yuvita. Sumber Sentosa Hospital, Jl. Raya Kebonsari No.221, Kebonsari, Tumpang, Kec. Tumpang, Malang, Jawa Timur 65156, Malang Tel. +6282133944389 Email: emildayuvita@gmail.com

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