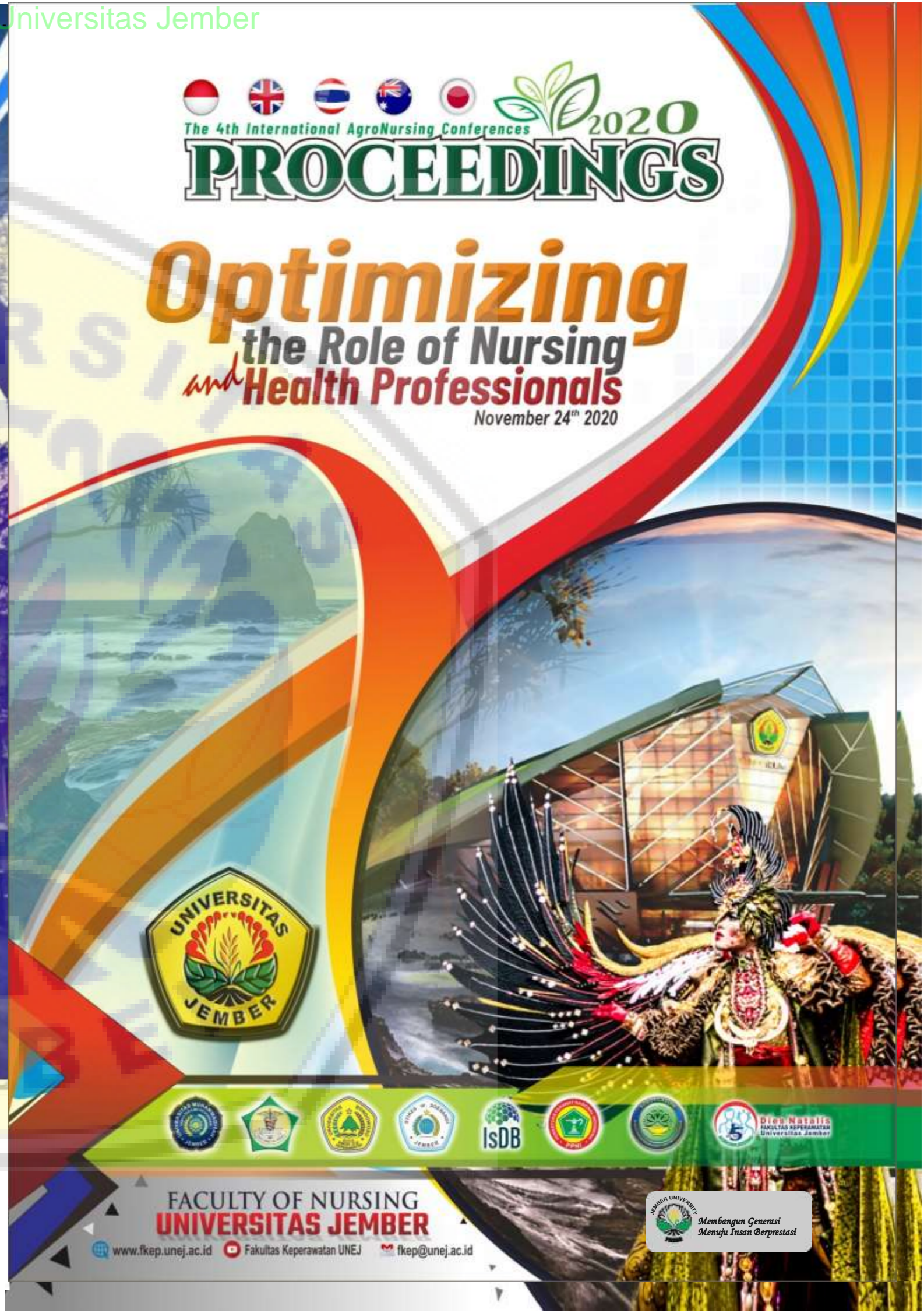


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**Optimizing**  
the Role of Nursing  
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**“Optimizing the Role of Nursing and Health Professionals to  
Enhance the Health Care Quality in  
The New Normal Era”**

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## GREETING MESSAGE

Bismillahirrohmanirrohim  
Assalamualaikum Wr Wb  
Good morning and best wishes

The Honorable, Rector of University of Jember  
The Honorable, Dean Faculty of Nursing, University of Jember  
The Honorable, All Speaker of the International Nursing Conference  
The Honorable, Guests  
The Honorable, Conference Committee  
Dear All, All Participants of the conference

Thank God we praise the presence of Allah SWT, because of the blessing and grace, we all can be present in this place, in order to attend the International Nursing Conference. Solawat and greetings may still be delegated to the Great Prophet Muhammad SAW.

Ladies and Gentlemen,  
As the beginning of this speech, I would like to say welcome to the third international nursing conference, with the theme " Optimizing the Role of Nursing and Health Professionals to Enhance the Health Care Quality in the New Normal Era".

In the era of globalization, nursing and healthcare are affected in a unique way. Although the important tenets of health remain unchanged, the evolutions of nursing knowledge are far beyond than previously thought to be. The advancement of technology has enabled human to find more curative possibilities and the latest in nursing process or medical therapy. Nevertheless, more work needs to be done due to new challenges in the era of industrial revolution and unstable economic climate. A more comprehensive approach is needed in order to adapt and improve the healthcare system. Today, health is not only the absence of illness but also the presence of wellness especially in the New Normal Era of COVID 19.

4<sup>th</sup> IANC 2020 aims to enhance health care quality amongst healthcare professional, scientist, practitioners and students by being a platform to share and disseminate knowledge, updates, research findings and experience for the benefit of mankind.

4<sup>th</sup> IANC 2020 will focus on multiple range of topics in nursing, medicine, surgery, science, health management and alternative medicine. It will include but not limited to these major areas: 1). Nursing: Medical and surgical nursing (Adult), Emergency and critical nursing, Gerontological nursing, Community nursing, Family health nursing, Mental health nursing, Pediatric nursing, Maternity nursing, Nursing leadership and management, Complementary and Alternative Medicine (CAM) in nursing, Education in nursing. 2). Clinical Sciences: Dentistry, pharmacology, toxicology, immunology, medical and surgical nursing. 3). Health sciences Nutrition, population health, community health, epidemiology and health prevention, biostatics.

To answer that question on November 26, 2020, we will discuss enhance the Health Care Quality in the New Normal Era with speakers from 5 countries namely:

1. Prof. Rozzano Locsin, Ph.D, RN, FAAN (Tokushima University, Japan)

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2. Prof. Lin Perry, RN., MSc., Ph.D (University of Technology Sydney, Australia)
3. Assist. Prof. Dr. Samoraphop Banharak (Khon Kaen University, Thailand)
4. Dr Jane Brooks, PhD, RN SFHEA (The University of Manchester, UK)
5. Ns. Anisah Ardiana, M.Kep., PhD (Faculty of Nursing, Universitas Jember, Indonesia)

Ladies and Gentlemen

This conference is attended by students, health department delegates, academics, hospital and community clinic practitioners with a total of 350 participants.

This event can be held because of the support and efforts of all parties. Therefore, I would like to thank the Rector of University of Jember, Head of School of Nursing- University of Jember, Indonesian National Nurses Association (INNA) or PPNI, and all the committees who have worked hard to carry out this activity. I also thank to the sponsors who have worked with us so that this event run as expected. Amen.

We as the committee, apologize if there is any inconvenience during this event. Our hope that this activity can increase our knowledge that benefits all of us. Amen.

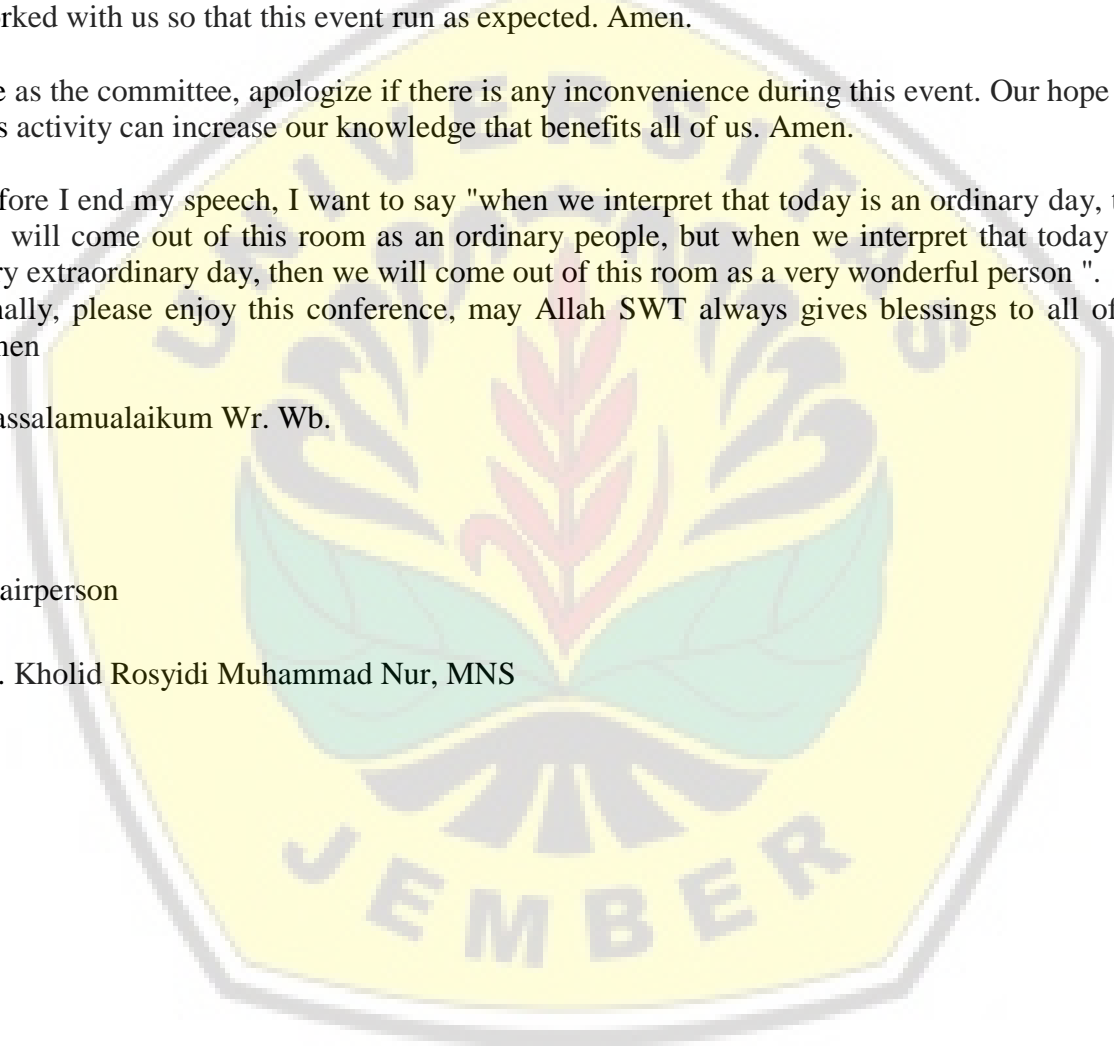
Before I end my speech, I want to say "when we interpret that today is an ordinary day, then we will come out of this room as an ordinary people, but when we interpret that today is a very extraordinary day, then we will come out of this room as a very wonderful person".

Finally, please enjoy this conference, may Allah SWT always gives blessings to all of us. Amen

Wassalamualaikum Wr. Wb.

Chairperson

Ns. Kholid Rosyidi Muhammad Nur, MNS



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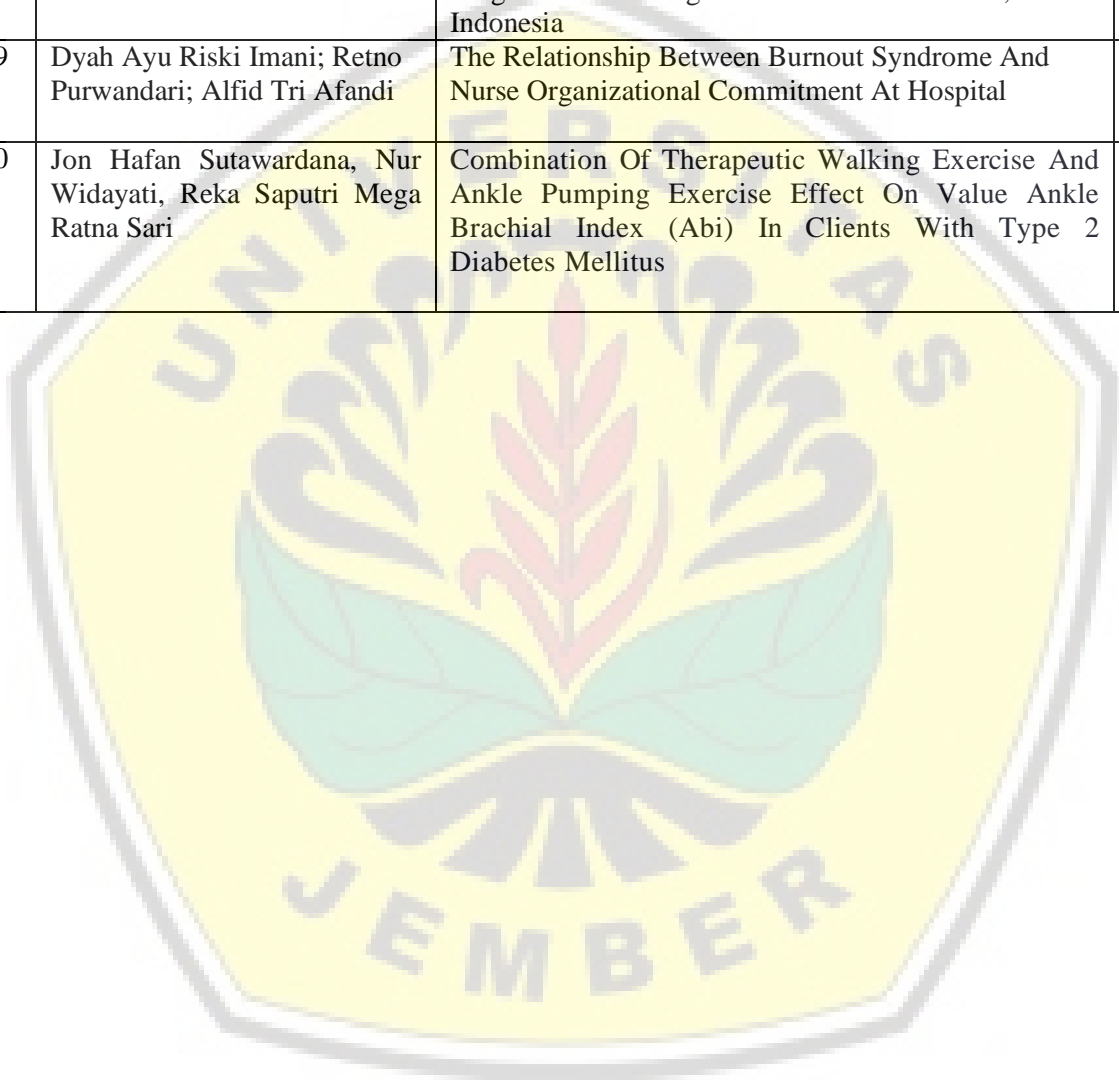


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## **NURSES' EXPERIENCES IN CARING FOR COVID 19 PATIENTS**

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### **ABSTRACT**

**Background:** In the COVID pandemic era, nurses are required to have competence in caring for COVID patients in isolation rooms. Challenges invaluable services in carrying out treatment can occur due to limited references because there is still not much research related to COVID-19, little equipment and isolation rooms for treatment, and personal fears as a human being infected with this virus. Research still needs to be done to increase nurses' knowledge in caring for COVID-19 patients. Advanced knowledge of nurses in caring for COVID patients is expected to improve the quality of nursing services. **Purpose:** This study explores the experience of nurses in caring for COVID-19 patients at Referral Hospitals. **Methods:** The research design used was a phenomenological interpretive qualitative approach—in-depth interviews using semi-structured questions involving six nurses in the COVID-19 isolation room at the Lumajang Regency Hospital. Data were collected and analyzed using a thematic analysis approach based on Krueger, R., and Casey, M .. **Results:** the results of the interviews resulted in five major themes, namely Dedicated Themes as professional nurses, Providing Therapeutic Communication Touches, Modifying Interventions, Conducting Care with Human Principles and Improve the Health Belief of COVID-19 Sufferers. **Conclusion:** Treatment of COVID-19 patients requires professional knowledge and skills of nurses. Nurses need to encourage their ability to the maximum by exerting empathy, humanism, and critical thinking to provide holistic services to patients.

**Keywords:** COVID-19, nursing, caring



## BACKGROUND

An outbreak of COVID-19 disease in mainland China has been declared a public health emergency (PHE) by the World Health Organization (WHO) (WHO, 2020). Coronavirus Disease 2019 (COVID-19) is a new type of disease that has become itself in humans. The virus causes COVID-19 to be called Sars-CoV-2. Coronavirus is again zoonotic (transmitted between animals and humans). Meanwhile, the animals that are the source of COVID-19 transmission are still not known. Based on scientific evidence, COVID-19 can be transmitted from human to human through droplets; the people who contract this disease are in close contact with COVID-19 patients, including those treating COVID-19 patients (KEMENKES RI, 2020).

Indonesia is the fourth most populous developing country globally, thus expected to suffer much and over a more extended period. When the SRAS-CoV2 romance coronavirus hit China most severely from December 2019 – February 2020. On January 27, 2020, Indonesia issued travel restrictions from Hubei province, which was the center of global COVID-19, while also evacuating 238 Indonesians from Wuhan. President Joko Widodo first reported finding two cases of COVID-19 infection in Indonesia on March 2, 2020 (Djalante et al., 2020)

Indonesia has implemented many policies in the control and prevention of COVID-19. However, the policy should also be supported by public awareness and a sound health system (Putri, 2020). Transmission of SARS-CoV-2 through aerosols and direct contact is possible because the virus can live in aerosols for hours and on the surface for days. Thus, there is a risk of transmission of nosocomial disease to other patients and health workers. Therefore, patients suspected of COVID-19 should be isolated from arriving at the hospital. The appropriate distance between patients with suspected or confirmed SARS-CoV-2 is at least 1 meter. In patients receiving various oxygen therapy types, protective equipment should be carried within 2 meters of the patient. It is recommended to use a surgical mask for symptomatic abnormally affected patients during the examination and transport, although the sufferer's transport should be minimized. Patients suspected of being infected with SARS-CoV-2 should be placed in one isolation room. If the diagnosis has been confirmed, cohort isolation is possible. Sequestration can be stopped if the patient does not show symptoms for 48 hours. However, it has been suggested that patients (Nielsen Jeschke et al., 2020).

The health crisis was large-scale, triggering a restructuring and reorganization of healthcare provision to support emergency services, medical intensive care units, and ongoing care units. Health professionals deploy all their resources to provide emergency assistance in a general climate of uncertainty. Concerns about mental health, psychological adjustment, and the recovery of health care workers treating patients with COVID-19 are beginning to emerge. Disease characteristics of the COVID-19 pandemic increase the general atmosphere of alertness and uncertainty, especially among health professionals, due to various causes such as the rapid spread and transmission of COVID-19, the severity of symptoms it causes in a segment, infected people, lack of knowledge about the disease, and death among health professionals (El-Hage et al., 2020). Health workers are the most vulnerable to this. Stress-related reactions include changes in concentration, irritability, anxiety, sleeplessness, reduced productivity, and interpersonal conflict. Health workers will experience more severe psychiatric conditions, separation from families, abnormal situations, increased exposure, fear of COVID-19 transmission, feelings of failure in dealing with poor prognosis, inadequate technical facilities, PPE, tools, and equipment to help care for patients. Health workers have difficulty maintaining physical and mental health conditions at risk of psychological disorders such as depression, anxiety, severe stress, and fatigue. The need for interventions and approaches that will stir feelings, concerns about personal health, catacutaneously carry infections and pass them on to family members or others, isolation, feelings of uncertainty, social stigmatization, excessive workload, and feeling unsafe when providing care and health

services to COVID-19 patients, as support for those at the forefront of treating and treating patients (Rosyanti & Hadi, 2020)

Long-term psychological changes in nurses require regular follow-up. Therefore, the nurse's psychological problems need to be addressed immediately and take action as quickly as possible to relieve the nurse's psychological pressure. A nurse's experience can be a valuable reference when designing psychological health interventions for nurses in large-scale public health emergencies in the future (Shen X, Zou X, Zhong X, Yan J, & Li L, 2020). Caring is an essence of nursing, and many studies enlighten about caring for various populations and settings. In Islamic nursing, caring is based on well-being improvement and healing, and concentration on all nursing care domains and relationships between different dimensions of human (bio-psycho-social-spiritual dimensions). (Ismail, Hatthakit, & Chinawong, 2015).

However, research related to the application of the COVID-19 patient care model is still scarce. Therefore, this study aims to explore nurses' experience in treating COVID-19 patients to compile a model of treatment of patients with high infection rates.

## METHODS

This research is a qualitative study with an interpretative phenomenological approach (Polit & Beck, 2014; Schneider, Whitehead, Elliott, Wood, & Haber, 2007; Carpenter, 2007). The research was conducted in the Zoom meeting room. The participants selected in this study were six nurses who worked in the particular isolation room of COVID 19 Referral Hospital in Lumajang Regency who met the inclusion criteria of having a minimum education diploma of three nursing, at least working in a particular isolation room one month before the implementation of the study, and willing to be participants. After the participant signed the willingness form to be a participant, the researchers and participants agreed on the time and link zoom meeting for the interview. Data is collected through interviews using open-ended interviews with semi-structural questions for 30 – 60 minutes. Each participant was given time to express their ideas freely about their experiences and personal views. The main question posed to participants was, "how do you experience treating COVID 19 patients". All participants' interviews were verbally scripted and phrases derived from data collected and researched repeatedly to ensure consistency, then coding and composing in developed themes; the study used inductive content analysis in analyzing thematic analysis data based on Krueger, R. and Casey, M.

The process of analyzing data by coding openly and creating categories after all the material is written and read more than once to understand all aspects and content, classes are grouped based on similarities, and there are three main themes produced to maintain the validity and reliability of the data analysis research results are conducted independently by researchers and articles are discussed until there are saturated data results. In determining the final theme, the researchers did also analyze with peer review. Furthermore, the writing of participants' results is abbreviated to the letter "p." Has obtained approval from the Faculty of Dentistry ethics committee, the University of Jember, with 933/UN25.8/KEPK/DL/2020.

## RESULTS

### Participant Characteristics

Participants in this study were nurses who worked in the Special Isolation room of COVID 19 Referral Hospital and experienced treating COVID 19 patients for at least one month.

Table 1 Characteristics of Respondents (n=6)

Characteristics	Frequency (person)	Percentage (%)
Gender		
Man	4	67



	Female	2	33
Age	20-25 years	1	17
	26-30 years	4	67
	> 30 years	1	17
Long time working in COVID 19 Special Isolation room	> 2 Months	0	0
	2-5 Months	2	33
	> 5 Months	4	67

Table 1 shows that of the 6 participants working in the COVID-19 room, the majority had a male gender of 4 people (67%). Age Participants, the majority of young adults with an age range of 26 – 30 years as many as four people ( 67%). More than five months of work experience in the COVID-19 isolation room (67%).

### **Theme Dedicated as a professional nurse theme**

Working with Sincerity means nurses in work based on self-encouragement/ motivation of Sincerity, willingness, and empathy towards others despite knowing the high risk of harming themselves and their families and facing severe physical and psychological challenges. Participant statements relating to this can be found below:

*“saya berfikir siapa lagi yang mau berperan, kita harus menjalankan sumpah profesi kita , saya terdorong rasa empati terhadap sesama, ya wis bismillah saya jalankan ” (p1)*

*“kita sudah angkat sumpah profesi bu sebagai perawat.. jadi pantang mundur sudah.. kita jalankan tugas kita sebagai perawat... kasian juga klo ndak ada yang merawat lalu siapa lagi yang mau bantu...” (p2)*

*”ilmu nya ikhlas untuk ibadah, semangat untuk menhandle beliau beliau nya( pasien covid19) untuk bisa memberikan yang lebih baik dari sebelum nya ...” (p3)*

The participant's statement described a high impulse derived from their conscience to help others and take on the role according to the oath of the profession they held, and what is not less high is the motive as a human being to worship without expecting anything from others only the urge to be the best human being in the eyes of God by doing good to others.

### **Theme Gives A Touch of Therapeutic Communication**

Improving the touch of communication is the third theme successfully identified in this interview. The theme has the immediate need that COVID 19 patients need is their existence as human beings, as social beings who need others to pour out a sense of being buried in the chest. The fear of death due to the influence of the information they have received so far and more psychological stressors due to the pressures of news in the media at times that make them more worried about their social condition and families being isolated, shunned, and not accepted in the future because of the length of time of care in the hospital without being accompanied by family so that they need friends to share their taste. Participants' statements on this theme can be seen below:

*“Efek sekali komunikasi nya , tanpa kita sadari beliau beliau nya lebih semangat , rasa stres terdefresing lebih ke menyebarkan kasih semangat , komunikasi lebih eketif bener bener kita bisa*

*mendengar , cerita bisa sampai 1 jam dengan 1 pasien dari pasien nya butuh meluapkan yang difikirkan , akhir nya menjadi tantangan tersendiri untuk menemani mereka ngobrol baik langsung atau lewat vidiocall.....”(p3)*

*“Psikologis , perasaan terabaikan , denail , kenapa saya yang kena , perlu beberapa hari untuk bisa menerima keadaaan ini , sebenar nya untuk pasien saat ini butuh dukungan , moril , karena waktu disiolasi saya itu pembawa virus , nanti teman teman ndak bisa gabung lagi dengan kita , masih di cap , 3-4 hari setelah memberi semangat , edukasi , harus memberikan , lambat laun menerima keadaaan nya , karena di cap sebagai vires , netizen agak kurang bisa menerima keadaan teman tetangga kita yg terkonformasi positif, teman sulit untuk menerima aktivitas lagi “ (p5)*

*“ iya saat pasien banyak yang usia remaja, banyak yang curhat sama saya, mereka ndak ingin penyakit ini menimpa mereka, apalagi dirawat lama seperti ini sampai 1 bulan lebih.. mereka bingung sedih.. bagaimana jika lingkungan ndak nerima lagi , dianggap sumber yang bisa menularkan ke orang lain.. sedih rasanaya ... “ (p4)*

The participants' statement revealed that they have a practical communication approach to fostering confidence in COVID 19 patients towards nurses, as participants believe that stressor can worsen COVID 19 patients' condition. Providing psychological support with communication can give calm and confidence and grow the patient's confidence to heal, thus allowing patients to communicate the pent-up feeling in the blind chest of the patient more relaxed and comfortable and increase immunity and accelerate the healing process of COVID 19 patients.

### **The theme of Modifying Interventions**

Modifying interventions is the third theme successfully explored by participants. This third theme means that nurses have an unyielding soul to provide COVID 19 patient nurses with maximum limitations of literature and equipment because this case is still new, and there are not many sources to refer to. It is a disaster that not many adequate tools are available. This encourages nurses to think critically about the results of evaluations carried out during the treatment of patients. This can be seen from the participant's excerpt below:

*“Kita fikirkan ...ektra hiburan , setelah jalan 3 bulan awal , kok sampai sepeti ini kok jadi nya malah ndak bagus , kita buat senam , kita kasih fasilitas olahraga , dlll , untuk menghilangkan rasa jenuh pasien ... ya kita posisikan diri kita lah ... (p3)*

*“ ya sebelum kita ditunjuk jadi RS Rujukan Covid ya belum ada ventilator masihan itu... iya baru baru aja kita sdh punya.. sebelum nya saat RS rujukan sdh full ya terpaksa kita merawat pasien covid juga .. ya harus pinter pinter modifikasi fasilitas seadanya contoh nya krn kita ndak punya ventilator kita pakai double oksigen .. pakai nasal dan pakai masker.. alhamdulillah dapat efektif meningkatkan saturasi oksigen pasien ...”(p1)*

*“ krn nebul ndak bisa .. mengajarkan batuk efektif juga tidak disarankan ... ya dilakukan untuk menghindari penyebaran virus... yak lo yang secret nya banyak ... kita sarankan minum air hangat, pakai plosa..clapping.. dan pengaturan posii... apa aja sdh kita cari alternative nya agar pasien malah ndak tambah sesek ... “(p4)*

The interview results above mention we think we modify, which shows they use the facilities as

much as possible to provide the top service and products for patients. There is no word on giving up because of the lack of reference, facilities, or support; these nurses continue to think critically to provide the best COVID-19 patients' best service.

## Themes of Conducting Care with Humanity Principles

Conducting treatment with humanitarian principles is the fourth theme successfully identified in this interview. The theme means that COVID 19 patients are also human beings whose basic needs must also be met. A sense of security, comfort, special needs, and other needs must also be met, even in isolated conditions from the outside world. Participants' statements on this theme can be seen below:

*“ya .. saat ini covid itu membuka sifat asli nya manusia sudah .. awal nya sebelum hasil swab positif, keluarga mau ngerawat.. anak merawat ibuk nya, istri merawat suami nya, lah setelah tau pasien positif.. malah mereka ndak mau lagi merawat ... kasian .. mereka pasrah sama perawat nya..akhirnya setiap kali datang selalu saya saapa, saya ajak ngobrol,, saya ganti pempersnya saya dulang makan nya... bahkan ada yg sampek nangis.. mas .. jenengan bukan anak saya tapi ikhlas merawat saya... anak anak ku banyak ndak ada yg mau setelah tau aq positif... terima kasih ya mas ( sambil menangis) “(p5)*

*“Pakai apd itu butuh apd iti itu butuh pakai kaca mata google , pakai tindakan 1 jam 2 jam itu mengembun , dan benar benar ndak kelihatan , handcoen rangkap 3 , wis pakai patokan anaomi sudah... Sejak awal kita sdh bilang sebelum kita pasang infus , mhn maaf jika tidak bisa langsung dapet mungkin ... akhir nya mereka nerima dan menyadari krn kita sdh minta maaf sebelum nya.. mereka merasa dihargai dan diperhatikan .....” (p3)*

*“ ya padahal klo pakai hazmard, google, masker 3 lapis .. masker bedah.. masker N95 lalu dilapisi lagi masker bedaah ... yaaaa rasanya jelas lah buk sumuk.. panas.,, sesak hahahahahah ( sambil tertawa lepas) .. kita memang disarankan untuk membatasi bicara ... lapi saya ndak tega ngelihat mereka ... klo mereka curhat... mereka merasa tertekan dengan kondisi nya.. mereka butuh teman untuk bicara.. ya akhirnya saya lawan rasa ketidaknyamanan saya pakai hazmard lengkap dengan duduk nemani mereka ... ngobrol ngasih penguatan ngasih semangat... hilang rasa sesak , sumuk pakai hazmard ..(p6)*

The participant's statement revealed that they took an intervention approach by promoting the principle of humanity. They realize these patients are full of severe stressors, and there is a sense of loss of existence as human beings. It is revealed that participants continue to apologize if there was any wrongdoing by them despite the patient's position in what circumstances but still respected their right as a human being to be respected. Participants put aside their personal needs. Discomfort with level three APD does not prevent them from caring by promoting a sense of humanity, still managing with the heart, with a sense of empathy and altruistic.

## Improving The Health Belief of COVID-19 Sufferers

Improving Health Belief is the fifth theme successfully identified in this interview. The theme means that nurses need to foster optimism in patients to recover and succeed against COVID 19; by growing their confidence, the patient will have a high fighting spirit to heal. Participants' statements on this theme can be seen below:



*“ini saya belum neliti hanya memperhatikan saja.. pasien pasien yang semangatnya tinggi.. sejak awal masuk gampang dikasih pengertian .. dan mau melakukan apa saja yang kita ajarkan .. setiap hari mau olah raga.. mau ngobrol sama saya .. mau makan..meski dengan comorbid malah cepet negative hasil swabnya .”(p5)*

*“saya seneng klo ada pasien yang mau mendengarkan kita.. kita sampaikan ke beliau beliau .. klo mau pingin cepet sembuh.. ayo mau makan yang banyak.. ndak usa difikir berat berat.. mau aktivitas.. mau ngobrol sama orang lain .. nah terbukti itu hasil swabnya lebih cepet negatif 1 minggu dari swab awal dariada yang isolasi diri menarik diri,.. stresss ndak mau apa apa.. hasil swab nya sampai 6 kali malah belum negatif negatif “ (p3)*

*“Mekanisme coping kita kebanyakan kita berfikir , kita masih bisa diterima tidak , penyakitnya nya sdh membaik tidak , tetapi untuk pulang ke rmh nya , tidak diterima untuk kembali ke masyarakat ... nah pikiran pikiran itu tambah memperlama masa perawatan.. dibandingkan yang cepet nerima keadaan dia malah cepet negatif hasil swab nya (p1)*

The participants' statement revealed that they had to cultivate confidence that they could recover; this was done with the word patience, accept the condition, think to heal, the word busy can give confidence to patients that they can recover, and that it can increase immunity and faster to get negative swab results.

## **DISCUSSION**

### **Theme Dedicated as a professional nurse theme**

The role of nurses is vital in providing health care for patients. Some studies have suggested that nurses' professional behavior is related to the recovery of patients (Gaghiwu & Babakal, 2013). Caregivers are currently caring givers, counselors, counselors for clients, nursing care managers, nursing researchers, and professional executors (Herawati, Hariyati, & Afifah, 2017). Professionalism is an orientation and work attitude that is competent in doing work accompanied by functional and moral responsibilities following the professional code of ethics (Harjani Hefni, 2008). Several factors affecting work commitment to nurses themselves include the interest in work in the field of service, having a positive attitude to the job, even the opinion that the value of worship is more important than the financial income it receives, and the social support, the factor that most affects the nurse's work commitment is the interest in work in the field of social services (Puspitasari & Asyanti, 2011). Loyalty is an important point to have to stay in the job. they feel obliged to do their job and based on a belief in what is right and related to moral issues (Ruvina, 2007)

Professionalism in work is the essential thing in the aspect of the job so that nurses, as one of the health workers, are required to have a high totality of work in expertise, professional responsibilities, aggregate, discipline and adhere to the rules and ability to establish good relationships with patients. This is in line with Mukti & P, 2017, where the meaning of nurse professionalism itself is those who can provide quality services by the standards, are sincere in caring for patients, have ethics in working and communicating, and coordinating and working together in achieving the goals (Mukti & P 2017)

### **Theme Gives A Touch of Therapeutic Communication**

Communication in nursing is both fundamental and the key to a nurse in carrying out her

duties. Communication is a process to create relationships between nurses and clients and other health workers. In the absence of communication, a person will feel alienated, and nursing measures to meet the needs of the client will experience significant difficulties or experience chaos (Riyadi, 2016)

As health workers who are directly related to the patient, nurses should have a lot of skills. One of them has interpersonal skills that are skilled in communicating with patients. Communication is a complex process that involves behavior and allows a person to connect with others and their environment. Nurses who have skills in communicating therapeutically do not quickly establish trust relationships with clients, prevent illegal problems, provide professional satisfaction in nursing services to improve the image of hospitals and nursing professions (Nugroho & Aryati, 2009)

The resulting study from Transyah & Toni, 2018 indicates a link between the implementation of therapeutic communication and the level of satisfaction caused by therapeutic touch performance that causes the patient to feel comfortable and appreciated, which will eventually lead to fulfillment in the patient (Transyah & Toni, 2018b). This is following the theory from Lukman Hadi et al., 2013 that one of the factors that affect satisfaction in nursing care is the communication of the procedures for the delivery of information provided by the service provider and the response to complaints from patients and how service providers, especially nurses quickly receive patient complaints in response to patient complaints (Lukman Hadi, Prabowo, & Indah Yulitasari, 2013).

The role of nurses in therapeutic communication to patients is crucial to help patients with physical and psychological problems, according to the study Transyah & Toni, 2018 said that one of the factors in providing service satisfaction is to use the procedures of speech or delivery of information from the nurse itself, by responding to various complaints from patients as well as how nurses can quickly receive patient complaints in responding (Transyah & Toni, 2018a).

Sasmito et al., 2018 also revealed at the patient stage with complaints, medical personnel, especially nurses as the vanguard, can help patients explore patient feelings such as stress, lack of spirit, or fear (Sasmito, Majadanlipah, Raihan, & Ernawati, 2018). Identification of personal strengths and resources can help patients overcome problems physically and psychologically and actively participate in nursing care implementation. This is by the research Transyah & Toni, 2018, where therapeutic communication plays a vital role in patient trust and satisfaction where nurse communication skills are needed (Transyah & Toni, 2018a).

## **The theme of Modifying Interventions**

In carrying out complete and adequate Treatment in Covid-19 patients is necessary for recovery and reducing the disease's spread. In this case, health officials have an essential role in the preparedness to deal with Covid-19 patients (Li, 2020).

One of the health workers was a nurse. The involvement of nurses who are at the forefront of dealing with Covid-19 patients must have adequate and appropriate knowledge and control of infection prevention and control, and nurses should always be updated or aware of the latest developments regarding Covid-19. Thus, the involvement of nursing management in dealing with Covid-19 to prevent transmission and treatment of patients in the treatment room is urgently needed (Aggarwal et al., 2012)

It is like in research Musyarofah et al., 2018 revealed that to be critical should nurses get out of their routine zone, and develop skills through various briefings and training and be consistent in the use of ideas and ideas and creativity and also study the development of the latest nursing world so that when experiencing limitations in various conditions can be handled in other alternative

ways (Musyarofah, Muliawati, & Mushidah, 2018).

## **Themes of Conducting Care with Humanity Principles**

Social stigma and social discrimination can be attributed to COVID-19, for example, to people who have been infected, their families and other health workers, and frontline officers who have been caring. Measures must be taken to deal with stigma and discrimination in every phase of the COVID-19 emergency response. Proper attention should be paid to assist with the integration of people who have been affected by COVID-19. Some of these fears and reactions arise from the dangers that do exist, but many also occur from a lack of knowledge, rumors, and misinformation (MHPSS, 2020)

The nurse in charge of providing nursing care must develop caring behavior; a nurse who has a caring demeanor means that the nurse can reduce stress or trauma when undergoing hospitalization. (Mulyaningsih, 2011). Hospitalization stress, in addition to being influenced by the caring behavior of nurses, is also influenced by several other factors such as developmental age, previous experience with disease or hospitalization, coffee skills possessed and obtained, invasive procedures, the severity of diagnosis, and support system that there is a sense of safety, comfort, and satisfaction in clients and families as well as bringing a positive impact to the patient's recovery (Gaghiwu & Babakal, 2013)

## **Improving The Health Belief of COVID-19 Sufferers**

The increasing incidence of COVID 19 cases with a wide range of information that sometimes dissingena about this disease can cause panic in the community. Therefore, nurses also play an active role in providing specific, targeted, and valid information so as not to miss the news and can improve the behavior of prevention efforts against COVID 19 (Moudy & Syakurah, 2020)

Nurses also need to cultivate an optimistic attitude towards themselves and their patients because, according to research Hairina & Saniah, 2020, Providing a sense of optimism in the form of happiness will unconsciously increase the immune power in each other (Hairina & Saniah, 2020). For example, in terms of spirituality in Islam explained, the situation experienced must bring benefits because God does not hold a disease to play. Therefore the nurse can also take the initiative to convey to the patient that the best attitude towards disaster or disaster is sincere to accept, think positively, patiently and the best attitude to be happy is always grateful. When a nurse has a caring attitude, it is most likely to reduce stress levels in patients undergoing hospitalization (Gaghiwu & Babakal, 2013).

This shows that nurses are providers of nursing care. Still, nurses can also play a role in the holistic fulfillment of the patient's health needs through emotional support, technical, psychological, social, and even spiritual support. (Gaghiwu & Babakal, 2013)

## **CONCLUSION**

Treatment of COVID-19 patients requires professional knowledge and skills of nurses. Nurses need to encourage their ability to the maximum by exerting empathy, humanism, and critical thinking to provide holistic services to patients.

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