Ethicolegal Aspect for Nurse in Implementing Nursing Care in Respiratory and Critical Case

Jajang Rahmat Solihin

Chairman of DPW PPNI DKI Jakarta

BACKGROUND

TB as one of the respiratory tract infectious disease is transmitted very vulnerable. Tuberculosis (TB) is an infectious disease that can be transmitted directly from person to person through droplets caused by the bacteria Mycobacterium tuberculosis is tuberculosis (MoH RI, 2011). TB disease becomes a problem the world and become a global commitment in handling. This is because every year there are 2 million people in the world infected with tuberculosis (WHO, 1994). Since 1993 the World Health Organization (WHO) has declared TB a global emergency. TB disease is also one of the targets of the MDGs. 1995 Pulmonary tuberculosis eradication program implemented DOTS strategy (Directly Observed Treatment, Shortcourse) or short-term treatment with the direct supervisor recommended by the WHO.

TB control programs with DOTS strategy has a high cure rate. The World Bank said the DOTS strategy is the health strategy of the most cost-effective in the prevention of tuberculosis (WHO, 1997). DOTS strategy in Indonesia applied using the Supervisory Swallowing Drugs (PMO). Cambodia is one of the countries that have successfully implemented the DOTS strategy. That success is reflected in the deterioration in the prevalence of 45% in the last 9 years, namely from 1,500 cases in 2002 to 820 cases per 100,000 population in 2011. Furthermore, the discovery rate in the case of Cambodia in 2005 by 70% and the recovery rate reached 85% and the prevalence is down (WHO, 2012).

TB disease is a chronic infectious disease and vulnerable. Conditions vulnerable (vulnerable) is defined if a person or group dealing with the disease, danger, or harm. The population of smear positive TB cases are particularly vulnerable to the weakness of high risks of physical, psychological, social and economic health (Swanson and Nies, 1997). Internal and external factors can cause a person or group experienced adverse health effects to deteriorate (Stanhope and Lancaster, 2004). TB clients are vulnerable populations (IUCN), which is defined as a group of individuals who are at greater risk of weakness or disability, psychological, social and economic. Vulnerable populations are more susceptible to health issues associated with health outcomes of the previous experience and resources that clients have. for the improvement of conditions experienced health-related problems (Pender, Murdaugh and Persons, 2002; Swanson and Nies, 1997). Another opinion Maurer and Smith (2005), a vulnerable population group or a group more prone to health problems, more difficult to get health care,

As one of the health workers, nursing is a leader in health care substation, then contribute to health development. Penyelengaraan health development is realized through the provision of services including nursing care. Implementation of nursing services should be responsible, accountable, quality, safe and affordable by nurses who have the competence, authority, ethics and high morals. It is expected that with the setting comprehensively in law can provide protection and legal certainty to the nurses and the public.

The nurse as a profession dealing with clients directly have an obligation to apply the law as well as the ethical and legal full responsibility for any actions of nursing care provided to clients. Responsibility given by a nurse to clients is not only a moral responsibility in a concrete, but also the responsibility under the law governing as stated in the regulations of legislation governing nursing. Nursing actions must and good and right in doing activities that can be categorized as good if goodness is considered an obligation, and the implementation of these obligations a person regardless of condition or for any reason should be pure without considering the consequences or cause and effect which will be action (Tschudin 2003).

ETHICAL AND LEGAL NURSE

The legal basis is the reference the nursing profession in the State of Indonesia has been stated in Law No. 38 Year 2014 on Nursing and also the laws governing health workers. This law was made as the two sides of the blade which on the one hand can be used as a legal protection to nurses, but on the other hand can be used against nurses

who act outside the law of ethics and nursing. Nurses who are not professional nursing care and human rights violations such as acts of malpractice and Negligence, can be prosecuted and penalties imposed criminal offense.

Nursing services is a professional services which form an integral part of health care that is based on nursing science and troubleshooting addressed to individuals, families, groups or communities either healthy or diseased. The shape of nursing practice is a service organized by the nurses in the form of nursing care

The nurse is someone who has graduated high nursing education both in the country and abroad are recognized by the government in accordance with the provisions of the legislation. In Article 4 of Law No. 38 2014 was composed Nurses nurse professions (nurses and nurse specialists) and vocational nurses. In Act 36 of 2014, the grouping of health professionals including medical personnel, personnel of clinical psychology, nursing personnel, personnel midwifery, public health personnel, environmental health personnel, personnel of nutrition, teknnician physical, personnel medical engineering, power engineering biomedical, health workers traditionally and other health personnel. As nurses with nurses among other types of public health nurses, child health nurse, maternity health care, medical surgical nursing, geriatric nurses and mental health nurses. Meaning of words among others, that could develop other types of nurses.

In carrying, nurses provide nursing care nurse is a series of interactions with clients and environment to achieve the goal of fulfilling the needs and client independence in caring for him. Registration Certificate, hereinafter abbreviated as STR is written evidence given by the Council of Nursing to nurses who have been registered. Practice Nurse License letter, hereinafter called SIPP is written evidence given by the local government district / city to the nurse as granting authority to run the Nursing Practice.

Article 2 of Law No. 38 of 2014 states that nursing practice should basic on humanity, scientific values, ethics and professionalism, benefit, justice and health and safety of clients. In carrying out the practice nurse must have a Certificate of Registration (STR) and License Practice Nurse. SIPP).

STR nurse will be valid for 5 years. The requirements have STR include:

- a. Have a higher education diploma Nursing
- b. Has a Certificate of Competence or Certificate of Profession
- c. Have a certificate of physical and mental health
- d. Have an affidavit has to take an oath / pledge profession
- e. Make statements comply with and implement the provisions of professional ethics.

Requirements for Re-registration includes:

- a. STR
- b. Certificate of Competence or Certificate of Profession
- c. Certificate of physical and mental health
- d. Make statements comply with and implement
- e. Has devoted itself as a power profession or vocation in the field
- f. The adequacy in service activities, education, training, and / or other scientific activities
- g. Provision of professional ethics

In carrying out the practice of nursing, nurses are required to have a permit. Forms nurses licensed to practice in the form of License Practice Nurse (SIPP) is given by the local government district / city on the recommendation of the health authorities in the district / city where the nurse running practice. To get a SIPP, Nurses should attach:

- a. STR copy is still valid
- b. Recommendation of Nurses Professional Organization
- c. Letter had a practice statement or a letter from the head of Health Care Facilities.

SIPP only valid for one (1) place of practice. Nurses to at most for two (2) places. For nurses who run independent practice must signboards Nursing Practice. Furthermore, in conducting Nursing Practice, Nurse served as:

- a. Nursing care givers
- b. Educator and counselor for the Client
- c. Nursing service manager
- d. Nursing researchers

- e. Executing tasks based on devolution authority
- f. Executing tasks within a certain limited circumstances

In their duties as nursing care providers in the field of individual health efforts, Nurses have the authority:

- a. Nursing assessment holistically
- b. Nursing diagnosis
- c. Nursing action plan
- d. Nursing implementation
- e. Evaluate the results of the actions of Nursing
- f. Referral
- g. Provide emergency action in accordance with competence
- h. Provide nursing consultation and collaboration with a doctor
- i. Conduct health education and counseling
- j. Management of drug delivery to the Client in accordance with the prescriptions of medical personnel or free drugs and free drug is limited.

In their duties as nursing care providers in the field of public health efforts, Nurse authorities:

- a. assessing public health nursing at the family level and community groups
- b. establish community health nursing issues
- c. aid in the discovery of cases of disease
- d. public health nursing action plan
- e. implement measures of public health nursing
- f. referral of cases
- g. evaluate the results of the actions of public health nursing
- h. community empowerment
- i. advocating on public health care
- j. a partnership in public health care
- k. conduct health education and counseling
- l. manage cases
- m. Nursing perform complementary and alternative management

In article 29 of Law No. 38 In 2014, execution of duties by delegation of authority can only be given in writing by the medical personnel to the nurse to do something medical action and evaluate its implementation. The delegation of authority can be either discretionary or mandates. Delegation of authority is discretionary to do something medical treatment provided by medical personnel to the nurse, accompanied the delegation of responsibility. Delegation of authority by delegate only be granted to professional nurse or trained vocational nurses who have the necessary competence. The Delegation of authority by the mandate given by the medical personnel to the nurse to do something under the supervision of medical action. Nursing Act also set execution of duties by delegation of authority, Nurse authorities:

- a. perform medical procedures in accordance with the above delegation of authority discretionary competence of medical personnel;
- b. perform medical procedures under the supervision of devolution mandate; and
- c. providing health services in accordance with government programs.

In Article 33 of Law 38 of 2014, implementation of tasks in certain limited circumstances as described in Article 29 paragraph (1) f is the assignment of the Government carried out in the absence of medical and / or pharmacy personnel in an area where nurse on duty. The absence of medical and / or pharmacy personnel in an area where nurse on duty as referred to in paragraph (1) shall be determined by the head of the regional work units held a joint bears a government affairs in the health sector setempal. Implementation of duties on certain limited circumstances as described in paragraph (l) carried out by observing the competence of nurses. In carrying out the duties on certain

limited circumstances as described in paragraph (1), Nurse authorities:

- a. treatment for common diseases in the absence of appropriate medical personnel;
- b. refer accordance with the provisions patient referral system; and
- c. pharmacy services is limited in power there is no pharmacy ha1.

In emergency cases, to provide first aid, Nurses can perform medical procedures and medication in accordance with comptence. First aid referred Client aims to save lives and prevent further disability. A state of emergency is a lifethreatening situation or disability clients. A state of emergency is determined by the nurse in accordance with the evaluation results based on science.

At the time of running the practice of nursing, the nurse is entitled

- a. obtain legal protection throughout the duties in accordance with service standards, professional standards, standard operating procedures, and the provisions of Laws and regulations
- b. obtain correct information, clear and honest representation of the Client and / Alau family
- c. receive a fee for Nursing Care has been given
- d. resist the desire of clients or other parties against the code of ethics, standards of service, professional standards, standard operating procedures, or provisions of legislation
- e. acquire working facilities in accordance with the standards

In Act Nursing, Nursing Practice Nurse in implementing the obligation:

- a. complementary facilities and infrastructure in accordance with the standards Nursing Care Nursing Care and Regulation Legislation
- b. provide nursing services in accordance with the code of ethics, standards of Nursing Services, professional standards, standard operating procedures, and the provisions of Laws and Regulations
- c. refers to customers who can not be addressed to nurses or other health professionals are more appropriate to the scope and level of competence
- d. Nursing documented in accordance with the standards
- e. provide complete, truthful, correct, clear, and easy to understand the action of Nursing to the Client and / or their families in accordance with its authority
- f. implement actions delegation of authority from other health personnel in accordance with the competence of Nurses
- g. carry out special assignments specified by the Government

In Law 36 of 2009 Article 63, paragraph 2 stated that the healing of disease and recovery cases. Do with control, treatment and / or care. Article 63, paragraph 3 Control, treatment, and/or maintenance can be performed based medicine and nursing or other means that can be accounted for usefulness and safety. Article 63 paragraph 4 mentions implementation of treatment, and / or treatment by medicine or nursing science can only be done by health workers who have the expertise and authority to do so. Furthermore, Article 63, paragraph 5 and local governments to provide guidance and supervision of the implementation of the treatment and/or care or by other means that can be accounted for. Hospitals have the task of providing personal health services are complete (health services which include promotive, preventive, curative and rehabilitative). It tersbut stipulated in Law No. 44 of 2009 on the hospital. Organizations least Hospital consists of the Head Hospital or the Hospital Director, Medical service element, the element of nursing, medical support element, a medical committee, the internal investigation unit, as well as public administration and finance.

ISSUES IN THE MATTER OF CONDUCT AND DISCIPLINE

Various issues of ethics and professional discipline that often mumcul Critical dilayanan include:

- 1. Standard Operating Procedure
- 2. Qualification; must be certified
- 3. Rights of patient autonomy; informed consent (adults, children).
- 4. The obligation to prevent injury

- 5. Liabilities give goodness in patients (pain, save)
- 6. The obligation to secrecy (ethical and legal)
- 7. A death certificate

Nursing care clients have a Care nursing process methodology, then should: be

- 1. guided by the standards of nursing
- 2. based on professional ethics
- 3. the scope, authority and responsibilities of nursing
- 4. covers the entire process of life with a holistic approach holistic and comprehensive service

As for the principle of care treatment in Critical Care

- 1. Assessing carefully, listening to the complaints in earnest
- 2. Establishing the diagnosis / problem kep properly before acting
- 3. Implement the action / care appropriately and accurately
- 4. Carefully evaluate patient progress

As a nurse in critical services, the role and function of nurses in nursing care Critical

- 1. As Managing care: care givers, health educator, coordinator, advocate, collaborator, facilitator and environmental modifications
- 2. As a business: a case manager, consultant, coordination
- 3. For Educators: in education / in service
- 4. For Researchers

Another thing that is not important in the care of his paper. A nurse must be able to provide Caring Behavior (J. Watson) Honest & Patient, to be responsible, provides comfort, listening with attention and caring, a touch of, show caring, show respect, gived information clearly, call patient with her name

References

Stanhope, M., & Lancaster, J. (2000). Community Health Nursing: Promoting the Health of Aggregats Families And Individuals, 4th Edition. St. Louis: Mosby-Year Book, Inc.
Stanhope, M., & Lancaster, J. (2004). Community and Public Health Nursing 6th Edition. Missouri: Mosby Elsivier Inc.
Tschudin, V. (2003). Ethics in nursing: The caring relationship. London: Elsevier Science Limited.
UU RI No. 36 tahun 2014 tentang Tenaga Kesehatan
UU RI No. 38 tahun 2014 tentang Keperawatan
WHO. (1994). TB - A Global Emergency, the WHO report on the tuberculosis epidemic

(1997). Treatment of Tuberculosis: Guidelinesfor National Programs, Second Edition.
 (2008). TB Management of MDR-TB: A guide filed a companion document to the Guidelines for the programmatic management of drug-resistant tuberculosis

_____(2008). Guidelines for the programmatic management of drug-resistant TuberculosisEmergency Update 2008, Geneva

____ (2009). TB - A Global Tuberculosis Control, WHO report 2009

_____. Tuberculosis, Strategy & Operations, Monitoring & Evaluation, Publication on DOTS. http://www.who.inf/gtb/dots/whatisdots.htm. Accessed on September 26, 2011.