

ABSTRAK

Latar Belakang: *Hip fracture* merupakan fraktur yang sering terjadi pada pria maupun wanita. Secara global, *hip fracture* menempati peringkat diantara 10 penyebab utama kecacatan. Sebagian besar pasien dengan *hip fracture* memerlukan tindakan pembedahan. Tujuan utama penanganan setelah operasi adalah mengembalikan ke tingkat fungsional sebelum fraktur. Perawat memiliki peran kunci selama pasien dirawat, pada saat dipulangkan dan tindak lanjut setelah pulang. Pemulangan pasien setelah operasi merupakan fase rentan dan pekerjaan kompleks. Diperlukan *discharge planning* yang dapat membantu meningkatkan pemulihan status fungsional dan mencegah komplikasi setelah berada di rumah. Jika tidak dipersiapkan dengan baik dapat menjadi mata rantai masalah untuk perawatan tahap berikutnya.

Tujuan: Mengetahui efektivitas model *discharge planning* terhadap status fungsional dan komplikasi pasien pasca operasi *hip fracture* di rumah.

Metode: Metode penelitian yang digunakan adalah metode campuran (*mixed methods*) dengan rancangan *sequential exploratory*. Penelitian ini dilakukan dalam 3 tahap: tahap 1 penelitian kualitatif untuk menggali pengalaman pasien, keluarga, dan multidisipliner serta *review literatur*; tahap 2 berupa pengembangan model *discharge planning* dan modul Edu-Hip; serta tahap 3 berupa penerapan *discharge planning* pada pasien pasca operasi *hip fracture*.

Hasil: Penelitian tahap 1 menghasilkan 3 tema penelitian yang dijadikan dasar pengembangan model dan modul Edu-Hip pada tahap 2. Pada penelitian tahap 3 didapatkan perbedaan yang signifikan status fungsional antara kelompok kontrol dan kelompok intervensi ($p=0,004$) dengan *moderate effect size* ($d=0,59$). Sebanyak 10,5% kelompok kontrol mengalami komplikasi, sedangkan kelompok intervensi 5,0%. Secara statistik tidak ada perbedaan yang signifikan kejadian komplikasi antara kelompok kontrol dan intervensi, tetapi kelompok kontrol berisiko 2,105 kali mengalami komplikasi dibanding kelompok intervensi ($RR=2,105$ 95% CI 0,409-10,834).

Kesimpulan: Model *discharge planning* Edu-Hip efektif meningkatkan status fungsional pasien pasca operasi *hip fracture* di rumah. Selain itu model Edu-Hip juga menurunkan risiko kejadian komplikasi pasien pasca operasi *hip fracture* di rumah.

Kata kunci: *hip fracture*, pasca operasi, *discharge planning*, status fungsional, komplikasi

ABSTRACT

Background: Hip fracture is a fracture that often occurs in men and women. Globally, hip fractures are ranked among the top 10 causes of disability. Most patients with hip fractures require surgery. The main goal of postoperative management is to return to the functional level before the fracture. Nurses have a key role during the hospitalization, at discharge and follow-up after discharge. Discharge of patients after hip fracture surgery is a vulnerable phase and complex work. Discharge planning is needed that can help improve functional status recovery and prevent complications after discharge. If not prepared properly, it can become a problem chain for treatment to the next stage.

Objective: To determine the effectiveness of the discharge planning model on functional status and complications in postoperative patients with hip fracture at home.

Methods: This study applied a mixed method with an sequential exploratory design. Overall, this study consisted of three stages: the first stage was a qualitative study exploring the experiences of patient, family, and multidisciplinary as well as literature review; the second stage was preparing the Edu-Hip discharge planning model and module; and the third stage was the application of discharge planning in postoperative patients with hip fracture.

Results: The first study revealed 3 themes that were used as the basis for developing the Edu-Hip model and module at second stage. In the third stage of the study, there was a significant difference in functional status between the control and intervention groups ($p=0.004$) with a moderate effect size ($d=0.59$). A total of 10.5% of the control group had complications, while the intervention group had 5.0%. $RR = 2.105$ 95% CI 0.409-10.834. Statistically there was no significant difference in the incidence of complications between the control and intervention groups, but the control group had 2.105 times the risk of experiencing complications compared to the intervention group ($RR=2.105$ 95% CI 0.409-10.834)

Conclusion: The Edu-Hip discharge planning model is effective in improving the functional status of postoperative hip fracture patients at home. In addition, the Edu-Hip model also reduces the risk of postoperative hip fracture complications at home.

Keywords: hip fracture, postoperative, discharge planning, functional status, complications

