

Support Workshop Enhancement Readiness and The Response of The Nahdlatul Ulama Hospital Against Covid-19 and Infectious Diseases New Other

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Abstract

The number of confirmed cases of Covid-19 in the world as of October 2, 2021 is 234,110,530 cases with 4,788,697 deaths (Case Fatality Rate 2.0%). Government The Republic of Indonesia has reported 4,218,142 confirmed people positive for COVID-19 and there were 142,115 deaths (CFR: 3.4 %) related to COVID-19 reported and 4,042,215 patients have healed from the disease. Since Covid-19 was declared a pandemic, various efforts have been conducted by the government with Support cross-sectoral, as efforts increase knowledge power health in the environment Association House Islamic Hospital Nahdlatul Ulama, ARSINU together LETTERA Foundation organizes support workshop enhancement readiness and Nahdlatul Hospital response Ulama (NU) against Covid-19 and disease infectious new others, workshops held online and off this line followed by 183 participants held at the Surabaya Islamic Hospital Workshop involving 5 houses sick in ARSINU's shade grabbed enthusiastically by participants, workshops held with this hybrid method increase participants ' knowledge go on by 20%, expected through this workshop whole power health capable give good contribution on implementation daily officer power health walk right his job in giving service to patient covid 19 and capable control self for infected covid 19.

Keywords: Covid-19, Infectious Disease, Readiness, Response of the Hospital

1.Introduction

The number of confirmed cases of Covid-19 in the world as of October 2, 2021, as many as 234,110,530 cases with 4,788,697 deaths (Case Fatality Rate 2.0%) occurring in 204 infected countries and 151 Communities of Infecting Countries (Indrianingrum and Wiranta, 2021). Meanwhile, Indonesia has reported that 4,218,142 people have been confirmed positive for Covid-19 and there have been 142,115 deaths (CFR: 3.4%) and 4,042,215 patients have recovered from the

disease (Ikmal and Noor 2022). Since Covid-19 was declared a pandemic, various efforts have been conducted government with Support cross-sectoral (Wandra, Yaqub Cikusin, 2021). Covid-19 becomes a scary situation, with Dead power Health, availability of the place sleep that doesn't compare with suspects, as well as unpreparedness resources man and materials (Hairunisa and Amalia 2020).

Opening various facility isolation centralized, campaigns in the media and engagement religious leaders as well figure Public is effort Together done moment curve dip sharp (Levani *et al*, 2021). No possible existence situation similar caused by something else later day. situation dangerous infection including severe acute respiratory syndrome (SARS) to avian influenza A (H7N9), century twentieth one has to see appearance many diseases new, interesting attention many people. Diseases these called emerging infectious diseases (EIDs) became worries special in the health community.

Not only because the disease can cause Dead on man in amount big moment this spread out, but because disease also brings impacts on society and big economy in the world that has each other relate moment this. For example, the estimated direct costs of SARS in Canada and Asian countries are about 50 billion US dollars. Besides that, the impact of disease infection new this relatively big in countries develop who have sourced more power little. In 30 years last, have appeared more than 30 EIDs. Asia, unfortunately, often Becomes its epicentre (Arianto and Sutrisno, 2021).

EIDs are emerging diseases and attack something population for the first time, or has there is previously however increase with very fast, good in Thing amount case new in the something population, or spread to area new. Which too grouped in EIDs is disease ever happened in an area in time then, decrease or has controlled, however then reported again in increasing number. Sometimes an old disease appears in the form of clinical news, that can so more critical or fatal. Lots of accelerating factors appear convenience disease new because factors this cause agent infection develop Becomes form ecological new, so you can reach and adapt with a new host, and to spread more easy delivered hosts new (Princess, 2020).

Although system health strong society Becomes condition for fighting the outbreak of EIDs, this outbreak also could disturb system the significant. Because that strengthens preparedness, surveillance, assessment risk, communication risk, facility laboratory and capacity response in Region is very thing important (Nasution et al., 2021). Foundation Lantern Nusantara Health stands up in 2018. Focus main establishment Foundation this is in the sector Health. Since 2018, Foundation Lantern Nusantara Health has move-in the TB issue and Health Soul with wrong multi-donor support the only Give2Asia currently this already connecting 2,000 companies and 15,000 donors in 25 countries. Give2Asia support for Foundation Lantern Nusantara Health continues in handling Covid-19.

In form empathy world, many companies that want to contribute to Covid-19 control, wrong only Qualcomm. Qualcomm is a company incorporated in the country America precisely in San Diego, America. Qualcomm focused on the development of technology like semiconductors, device soft until technology wireless Nahdlatul Cleric as organization Public religion-based with amount largest in Indonesia, occupying position strategic for contribute build preparedness at the facility NU Health.

Through Association House Islamic Hospital NU (ARSINU), Nahdlatul cleric strengthen their competence To do counselling for power his health. NU cooperates with Lantern Nusantara Health and organizes Improving preparedness and response to Covid-19 in Nahdlatul Ulama (NU) Hospital. An implementation program series, Foundation Lantern National Health will facilitate training and various activity development competence. Implementation of the program will take place in Surabaya Islamic Hospital, NU Tuban Islamic Hospital, Unisma Islamic Hospital, Siti Hospital beat Sidoarjo and the NU Islamic Hospital in Demak. For starting the program, LKNU and ARSINU will carry out the kick-off in Hybrid remembering still in the Covid-19 pandemic situation. Objectives (1) Launch the “Support program Enhancement readiness and Nahdlatul Hospital response Ulama (NU) against Covid-19 and disease infectious new others” for NU Hospital (2) Compile commitment together with an implementation of programs for 5 Output Hospitals Availability introduction and deal-related program “Support Enhancement readiness and Nahdlatul Hospital response Ulama (NU) against Covid-19 and disease infectious new other”.

2. Method

Outbreaks can disrupt systems significantly, even if public health systems are strong. Therefore, this community service activity seeks to coordinate and strengthen preparedness, supervision, risk assessment, communication risk, laboratory facilities and capacity response in the Region in handling outbreaks.

Through the NU Islamic Hospital Association (ARSINU), NU collaborated with Lantern Nusantara Health and organized an increase in preparedness and response to Covid-19 at the Nahdlatul Ulama Hospital (NU). The program will take place at the:

- a. Surabaya Islamic Hospital,
- b. NU Tuban Islamic Hospital,
- c. Unisma Islamic Hospital,
- d. Siti Hajar Sidoarjo Hospital, and
- e. NU Demak Islamic Hospital.

The implementation of this program is an effort to support the increasing preparedness and response of the Nahdlatul Ulama Hospital (NU) against Covid-19 and other New Infectious Diseases.

In the implementation of community service activities in the form of workshops, several things that are of concern are:

- a. Steps to be taken
 - 1) Conduct a preliminary survey
 - 2) To do an analysis situation and problem
 - 3) Create and design learning modules related to strengthening preparedness, supervision, risk assessment, communication risk, laboratory facilities and capacity response
- b. Participation partner in program implementation
Organizers Support Workshop on Increasing Preparedness and Response of Nahdlatul Ulama Hospital (NU) to Covid-19 and Other New Infectious Diseases, namely Surabaya Islamic Hospital, NU Tuban Islamic Hospital, Unisma Islamic Hospital, Sitiuhajar Sidoarjo Hospital and NU Demak Islamic Hospital.
- c. How to evaluate program implementation and program continuity after activity devotion to the Public is finished.
Improved pre and post-test participants with google forms (Hanik et al. 2021).

3.Results and Discussion

The results of the implementation of community service activities in the form of workshops are as follows.

Table 1.Characteristics Workshop Participants Realize Boarding school Healthy

No	Characteristics	Frequency	Percentage
Gender			
1	boy _ _	71	38.80%
2	Woman	112	61.20%
Age			
1	<25 Years	45	24.59%
2	25 - 35 Years	32	17.49%
3	35 Years >	106	57.92%
Profession			
1	Pharmacist	5	2.73%
2	Nurse	102	55.74%
3	Midwife	22	12.02%
4	Doctor	13	7.10%
5	Non-Medical	41	22.40%

Table 1 gives information characteristics of workshop participants online and offline, total number of participants the most is a woman with age > 35 years with a professional Nurse.



Figure 1. Support Workshop Flyer Enhancement Readiness and The response of the Nahdlatul Hospital Ulama (NU) Against Covid-19 and disease infectious new other.



Figure 2. Support Seminar Speaker's Readiness and NU Hospital's response to Covid 19 and Disease Infectious Other



Figure 3. Seminar participants were divided into 2 online and offline



Figure 4.
Composing commitment together program implementation for 5 hospitals



Figure 5.
Directors and PIC 5 Houses Sick of the NU involved in a program

In this webinar, it is explained that the Taxonomy of Viruses (ICTV) has given the official name of the new coronavirus that is endemic in China, namely severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). However, the World Health Organization (WHO) has set its official name, COVID-19. COVID-19 is the name given by WHO to describe the disease caused by the new coronavirus. Meanwhile, SARS-CoV-2 is a coronavirus that causes the respiratory infection COVID-19. The naming of the virus and the disease is usually different,

for example, acquired immune deficiency syndrome (AIDS) is the name of a disease caused by the human immunodeficiency virus (HIV) (Hastuti & Djanah, 2020).

In carrying out patient care activities, health workers are required to use complete PPE. Personal protective equipment or better known as PPE is needed by medical personnel, especially in dealing with the current coronavirus outbreak. must be adjusted to the place of health services, profession, and activities of medical personnel. PPE is designed to be a barrier against the penetration of free particulate matter, liquid or air and to protect the wearer against the spread of infection. The use of good PPE is a barrier against infections produced by viruses and bacteria (Indrayani & Sukmawati, 2019).

According to WHO, the Southeast Asia region has conditions that invite the emergence of Emerging Infectious Diseases (IE). For example, the circulation of various types of influenza viruses in areas that have large poultry farms as well as pig farms that are not managed according to health standards, thus allowing for mixing/contamination of animal products, becomes a suitable medium (incubator) for the mixing of several influenza viruses and has the potential to generate strains. new viruses or even new viruses (WHO, 2020).

Some factors accelerate the emergence of new diseases, namely those that allow infectious agents to develop into new ecological forms to react and adapt to new hosts, and to spread more easily between new hosts (Marbawati & Pramestuti, 2017). These factors include urbanization and destruction of natural habitats (allowing humans and animals to live closer together); climate and ecosystem change; changes in reservoir host populations or intermediate insect vectors; and microbial genetic mutations. Emerging Infectious Diseases are diseases that appear and attack a population for the first time or have existed before but are increasing very rapidly, either in the number of new cases in a population or in their spread to new geographic areas (re-emerging infectious diseases) (Dewi, 2017)

A person can be infected by a person with COVID-19. This disease can spread through small droplets (droplets) from the nose or mouth when coughing or sneezing. The droplets then fall on nearby objects. Then if someone else touches an object that has been contaminated with these droplets, that person touches the eyes, nose or mouth (triangle of the face), then that person can be infected with COVID-19. Or it could be that someone is infected with COVID-19 when they accidentally inhale droplets from an infected person. This is why we need to maintain a distance of at least one meter from people who are sick.

Until now, experts are still conducting investigations to determine the source of the virus, the type of exposure, and the mode of transmission (WHO, 2020). Continue to monitor accurate and official sources of information regarding the development of this disease (Kuswoyo, 2021). The main mode of transmission of this disease is through small droplets released when someone coughs or sneezes

(Yanti et al., 2020). The WHO currently assesses that the risk of transmission from someone who has no symptoms of COVID-19 is very unlikely. However, many people identified with COVID-19 only experience mild symptoms such as a mild cough or do not complain of pain, which may occur in the early stages of the disease (Mohammad Fatkhul Mubin, Livana PH, Putri Septiani, 2021). Until now, experts are still conducting investigations to determine the transmission period or incubation period of COVID-19. Continue to monitor accurate and official sources of information regarding the development of this disease (Yanti et al., 2020).

The final evaluation of the implementation of this community service activity can be summarized in the following table.

Table 2. Results Pre and Post Test Measurement of Workshop Participants in Effort Realize Boarding school Healthy

No	Knowledge	Pre Test	Post Test
1	Knowledge SARS -CoV-2 outbreak	63%	90%
2	PPE in service	71%	92%
3	Emerging Deasis	70%	83%
4	Source Transmission Covid 19	67%	84%
5	Enforcement Diagnosis Covid 19	63%	88%
6	CT parameters in the diagnosis of Covid 19	58%	90%
7	Transmission Process	71%	81%
8	Behavior Life Clean and healthy	74%	85%
9	Role Active and Awareness	73%	84%
10	Concern Public Related New Variants	72%	81%
Average		68%	86%

From Table 2 we get information that occurs enhancement knowledge with an average of 20%.

4.Conclusion

A workshop involving 5 houses sick in ARSINU 's shade grabbed enthusiastic participants, workshops held with this hybrid method increased participants' knowledge go on by 20%, expected through this workshop whole power health capable give a good contribution to the implementation of daily officer power health walk right his job in giving service to patient covid 19 and capable control self for infected covid 19. Activities such as this workshop can be scheduled regularly to refresh knowledge and increase understanding of health workers in health care facilities.

5. Acknowledgement

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