



Health Services for Elderly In Panti Werdha Karitas Cimahi

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ABSTRACTS

The nursing home is one of the health services for the elderly, but not all nursing homes have adequate facilities and human resources to provide optimal services in improving the welfare of the elderly. The purpose of this community service is to provide health services to the elderly which include health checks, activity therapy, massage therapy, and health consultations. The method of activity is community services from nurse to elderly. Elderly know their health status and feel relaxed after being given health services by nurses. The elderly will benefit from the implementation of this activity and hope that the activities will be carried out in an orderly manner every month. It takes cooperation and coordination with the manager of the nursing home and also the puskesmas as primary health service providers.

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1. INTRODUCTION

The number of elderly people is 18.1 million. Life expectancy in Indonesia has increased from 68.6 years (2004) to 69.8 years (2010) according to BPS. In 2014, according to data, Susenas reached 20.24 million people (8.03% of the total population). Indonesia is among the top 5 with the largest number of elderly people in the world. Elderly with a healthy condition in Indonesia is less than 2 percent of the total elderly population. Most of the elderly suffer from joint disease, hypertension, cataracts, stroke, heart disease, mental emotional disorders, and diabetes. According to data from the central statistics bureau (2012), in Indonesia the population of 60 years and over (elderly) according to districts/cities with a sufficient health condition is 15,454,360, with a good health condition 39%, a fairly large health condition 43% and with health condition is less by 18%. Since 2010, non-communicable diseases have become the biggest cause of death and disability for strokes, accidents, heart disease, cancer and diabetes).

The elderly are healthy adults who undergo a process of physiological changes caused by a reduction in most of the physiological system reserves and an increased susceptibility to various diseases and deaths (Darmawati, Purnama, & Lindayani, 2019). Elderly is a phase where there is a move from late adulthood to old age which is often called the aging process, at the adult stage the body reaches the maximum development stage, besides that the body starts to shrink due to the reduced number of cells in the body, as a result the body will also experience a decline in function slowly (Purnama & Suhada, 2019). Aging or the process of aging is a process of slowly disappearing the ability of the tissue to repair itself or replace and maintain its normal function so that it cannot survive infection and repair the damage it has suffered.

One of the problems currently faced in health development including padalansia is a double burden of disease, namely on the one hand there are still many infectious diseases that must be handled, on the other hand the increasing number of non-communicable diseases. One of the non-communicable diseases is a problem that is often related to the psychological and degenerative diseases of the elderly which are the effects of the aging process (Darmawati & Dulgani, 2019). The elderly, in particular, often experience mild depression or anxiety which results in decreased quality of life for the elderly. In addition, there are several other changes, such as changes in the appearance of the face, hands and skin. Changes in parts of the body such as the nervous system: brain, stomach contents such as spleen, liver. Changes in the five senses such as sight, hearing, smell, taste, and motor changes include reduced strength, speed and learning new skills. These changes generally lead to a deterioration in their physical and psychological health, which in turn will also affect their economic and social activities. So that in general it will affect the welfare and independence of the elderly in carrying out their daily life activities.

Efforts to improve the welfare of the elderly and control non-communicable disease (NCD) are built on the joint commitment of all elements of society who are concerned about the threat of NCD through Posbindu NCD. NCD handling can be carried out based on NCD problems in the community and includes various promotional and preventive efforts as well

as referral patterns. The nursing home is one of the health services for the elderly, but not all nursing homes have adequate facilities and human resources to provide optimal services in improving the welfare of the elderly, such as the *panti werdha karitas*.

Panti werdha Karitas, founded in 1980 by a nun from the Netherlands who devoted herself to the area around the *Karitas* nursing home, now there are 39 oma opa residents, they come from various areas of Java and some are from Palembang. This nursing home is engaged in the social sector, only accepting the less fortunate. The residents of this nursing home are not only from Christians, but there are also Muslims and Hindus who show that the diversity and harmony between religious communities is very well maintained in this place. There are several activities at this institution, for example at 3 pm the rosary prayer, there is also sports. Every week a priest comes or is escorted to the church. There is a faith formation by the sisters 1 month 1 time. For health problems, there are doctors who come to visit every month but sometimes only check the sick elderly, while the elderly who are at risk of deteriorating health are sometimes neglected. The purpose of this activity is as a preventive measure or to identify elderly people who have physical or psychological health problems.

2. METHODS

Community service is provided by providing health services: Screening, examination of vital signs, blood sugar, gout, relaxation massage, vitamins and counseling on nutrition as a preventive effort, promotion in improving the quality of life of the elderly at the *Karitas* Nursing Home.

3. RESULTS AND DISCUSSION

This activity was carried out in July 2018 for 39 elderly people at the *Karitas* Nursing Home and the elderly who were around the nursing home. The activity starts from 09.00 to 12.00 which is held in the hall of the *Werdha Karitas* nursing home as a gathering place for residents to carry out activities.



The examination is divided into several tables with different examination focuses, namely:

Table 1

Examination of the general condition of the elderly which includes activities of daily living plus measuring blood pressure using a tensimeter and stethoscope as well as calculating the pulse for one minute. The results of the examination are recorded on the examination card.

Table 2

Examination of the presence of blood sugar as an early detection of diabetes mellitus, cholesterol and gout examination, data is written per elderly to be recapitulated and documented in examination card notes. After finishing at table 2, the elderly will be encouraged to go to the next table



Table 3

Based on the results of the examination at tables 1 and 2, it was followed by a direct consultation session. Counseling is carried out directly when finding elderly people who have health problems, such as counseling about nutrition in patients with hypertension, diabetes, gout and cholesterol. Other activities carried out according to that time were provision of vitamin B12 and provision of supplementary food counseling as an example of a diet by taking into account the health and nutrition aspects of the elderly and using food ingredients from the area.

Table 4

Table 4 is more accurately called a relaxation center because the activities carried out are by giving massage to the elderly which aims to increase comfort, reduce complaints of aches. When doing massage, the nurse also conducts assessments or consultations related to the mental status of the elderly. This mental status check is related to mental emotional. Mental status checks are carried out because the mental processes of the elderly have started and are declining. For example, they complain that they are very forgetful, have difficulty accepting new things, also feel unable to withstand pressure, feelings like this form their mental as if they fall asleep with the belief that they are too old to do certain things so they withdraw from all forms of activity. Nurses provide counseling related to mental and emotional status.



The activity starts from table 1 for registration and measurement of blood pressure with the results of the examination that most of the elderly have blood pressure above 140/100 mmHg. The next table, table 2, is checked for blood sugar, uric acid and cholesterol. On this table, the elderly can find out the results of the examination when they are expected to be a picture of the health condition of the elderly in general. Some residents experienced complaints of aches and after the examination had an increase in the value of uric acid and cholesterol in their blood. Other seniors complained about BAK disorders too often at night, easily drowsy during the day and itching, and from the results of the examination, some elderly people had blood sugar levels above 180. On table 3, health counseling was carried out based on the results of the examination. At this stage, the elderly are very enthusiastic, marked by the many questions that arise about the health problems experienced by patients.

Some of the elderly were shocked by the results of the examination and said this was the first time the elderly had tested. There are elderly people who feel calm after knowing the results, which are very high in sugar so that from the results of this examination, the elderly can continue to see a doctor or health center to get the right treatment. Continue to the massage corner where the queue is very long, this elderly corner is one of the favorites for the elderly who do checkups. In addition to getting massages, including from coconut, shoulders, hands, to feet, the elderly can also consult, starting from health problems and personal problems related to the elderly's emotional.

4. CONCLUSION

Based on the results of interviews with the elderly, it was said that this activity was very beneficial, especially for the elderly. The residents hope that activities like this can be carried out every month so that apart from getting checked, residents and the elderly in the nursing home can socialize. This program should be continued as a preventive and promotive effort to improve the health status of the elderly in the community. This is intended to reduce the risk of disease complications in the elderly and as an effort to improve the quality of life in the elderly.

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