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ANALYSIS OF THE APPLICATION OF PATIENT SAFETY CULTURE IN PRABUMULIH CITY HOSPITAL, SOUTH SUMATERA, INDONESIA

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Abstract

Prabumulih City Hospital Accreditation graduation predicate in 2019 which decreased from fully accredited to mid-accredited, where one of the working groups that had not passed was the facility management and safety working group with a score of 67.62. This is also supported by data from the results of recording patient safety incidents for 3 consecutive years from 2018 to 2020. Departing from this problem, the authors are interested in conducting research on "Analysis of the Application of Patient Safety Culture in Prabumulih City Hospital in 2021. " The purpose of this study was to determine and analyze the application of patient safety culture and the factors that influence patient safety culture at Prabumulih City Hospital in 2021. This research is a quantitative study conducted in June and July 2021 on employees of the Prabumulih City Hospital. The sample in this study amounted to 252 people. Sampling was carried out using the stratified random sampling method with the research instrument being a questionnaire. The data were tested using univariate analysis, bivariate chi-square, and multivariate logistic regression. The results of the chi-square test showed that there is a significant relationship between Patient Safety Culture and the 8 independent variables studied, while the variables are age, gender, education level, employment status, work experience, type of work, income, and resources. Based on the multivariate analysis, it was found that the dominant variable that most influenced the application of patient safety culture was the resource variable, with an ap value of 0.000 <0.05 and the largest OR value of 84.564 meaning that the resource variable had 84.564 times the opportunity to influence the patient safety culture at the Prabumulih Hospital in 2021. In conclusion, there is a significant and dominant relationship between the resource variable and the application of patient safety culture at the Prabumulih City Hospital in 2021.

Keywords: Culture, Patient Safety, Occupational Health and Safety

INTRODUCTION

House Sick is a very complex place; there is hundreds of type of medicine, hundreds of tests and procedures, various tools and technology, and multiple professionals and non-professionals who provide service to a patient 24 hours a basis constantly, where diversity and routine service the if No managed with Good can happen incident No expected (KTD), where KTD is what will happen to threaten safety patient (MOH RI, 2006).

Patient safety is something at home that makes the system sick for care patients more secure. The plan covers evaluation risks, identification and management-related matters with a patient comma, reporting and analysis of accidents, capabilities, a study from accidents and following continued as well as implementation solutions to minimize emergence risk. The objective he did activity Safety Patient at Home Sick is to create a culture of safety for patients at home sick, improve accountability House ill, reduce unwanted pregnancies at home disease, implementation of prevention programs so that No happen incidents No expected (MOH RI, 2006).

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Standard safety patient House current pain the "Hospital Patient Safety Standards" issued by the Joint Commission on Accreditation of Health Organizations in Illinois in 2002. Six goals for handling the safety of patients, according to *Joint Commission International*, include identification of patients with the right, increasing communication effectively, increasing security from *high alert medications*, being sure Correct place, right procedure, and correct surgery patient, reduced risk of infection from worker health, reduce risk happening worse mistakes for patients (Lia & Asep, 2010).

Problems about possible actions that endanger the safety of patients of myself, too, have been discussed in several pieces of legislation as stated in Law No. 36 of 2009, article 53 (3) mentioned that "Patient entitled obtain security and safety himself during in-home care". If provision the No fulfilled, or house violated so patient own right for demand accountability party House Sick concerned as stated in Law No. 44 Article 32 (q) of 2009 that "Each patient have right sue and demand House Sick if House Sick suspected give service that is not by standard Good in a manner civil or criminal". Study results recommend that patients with notice issues of culture/climate safety patients are on step early for repair effort safety.

Effort House Sick For ensure safety for patient not regardless from role whole source Power man at home Sick like doctors, paramedics, management as well as power other in organize service health For patient and implementation process safety patient at home sick. Draft culture safety patient is defined as a product of individuals' or groups' values, attitudes, perceptions, competencies, and behavior patterns to influence the organization's commitment and ability to arrange management safety. Cultural positivity has been associated with enhanced safety for patients (Fujita, et al. 2014).

To minimize adverse events related to patient safety, hospital management needs to create a culture of patient safety. Patient safety culture is the main foundation for patient safety. A patient safety culture will significantly reduce adverse events so that hospital accountability in the eyes of patients and the community will increase, and ultimately, the hospital's performance will increase, according to Sora & Nieva (2004) (Hamdani, 2007). This is because many hospitals apply a good safety system, but adverse events still occur. Even though, in general, if the system can run properly, then KTD can be suppressed as small as possible, the facts show that the system cannot run optimally if the existing competencies and values or culture do not support it (Budihardjo, 2008).

Surveys to measure climate safety at home Sick Then developed and used routine and function to predict RS attention to safety patients (Rachmawati, 2011). Opinion This is strengthened by research done by Mc Fadden et al. (2009) that culture safety patient's connection direct to enhancement implementation safety the patient, in the end, will impact on safety outcomes patient. Because that important for something House Sick know culture safety moderate patient develop moment it is at home Sick so that can is known necessary efforts to developed for increase safety for the patient. According to the Agency of Healthcare Research and Quality (2004), in evaluating the cultural safety of patient at home

Sick there is several aspects necessary dimensions noticed that is supervisor/ manager expectations and actions to promote the safety of the patient, study enhancement sustainability, collaboration team in units, openness communication, feedback to errors, response No blame, adequate staff, perception in a manner overall, support management House pain, cooperation team between units, handover and transfer patients and frequency reporting the incident.

The Institute of Medicine (IOM) stated that the biggest challenge in movement change is going to system service more health-safe changes culture safety patients, where an error is considered a chance to increase quality service and prevent incident safety patients (Doweri et al., 2015). In response to IOM recommendations, the organization has given health services since 2006 and started focusing on cultural safety in the work unit. The first step is to determine cultural status safety at home pain (Sammer, CE et al. 2010).

Institute of Medicine, in "To Err Is Human Executive Summary", as stated by Prinz (2015), a study conducted at home hospitals in Colorado, Utah, and New York found 2.9% of adverse events and 6.6% of them caused death, whereas in New York found 3.7% adverse event and 13.6% cause death, then number death consequences of adverse events in patients take care stay in the United States amounted to 33.6 million per year around 44,000 inhabitants up to 98,000 souls. WHO, in 2004, collected several study house sick in various countries: America, England, Denmark, and Australia, found unwanted pregnancies in the range of 3.2–16.6 %, with these data. Finally, various developing countries' system safety patients (MOH RI, 2008).

Research conducted in Australia found 16.6% of adverse events, where approximately half the case can be prevented; the same incident happened in England, where notes patients showed 10.8% of adverse events in Denmark, Zealand, New and Canadian, and KTD around 10%. (WHO, 2005).

Report incident safety patients in Indonesia based on Province find of the 145 incidents reported as many as 55 cases (37.9%) in the DKI Jakarta area. Based on kind of the 145 incidents reported, the KNC has obtained: 69 cases (47.6%), adverse events: 67 cases (46.2%), and others: 9 cases (6.2%) (Lumenta, 2008).

Every year millions of patients are harmed by health that is not safe. In developed countries, 5-10% of patients at home Sick obtain infection between 7.5% and 10.4% of patients in maintenance experience adverse events as a consequence of gift medicine. Globally, 5.5% effect from no injection is safe. For Indonesia itself, the IKP is still the same Lots happens result research conducted by Mustikawati (2011) mentions report incident safety patients based on provinces in Indonesia in 2007 was found percentage of IKP in Jakarta 37.9%, Central Java 15.9%, Yogyakarta 13.8%, East Java 11.7%, South Sumatra 6.9%, West Java 2.8%, Bali 1.4%, Aceh 10.7%, South Sulawesi 0.7%.

Prabumulih City Hospital is House Sick owned by Prabumulih City Government and has been accredited by the Commission Accreditation House Pain (KARS), will but predicate graduation in 2019 decreased from plenary became a middle matter. This is known

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that several working groups in accreditation have not passed one of 3 working groups Lowest results evaluation accreditation of Prabumulih City Hospital is working group management facilities and safety with a value of 67.62, p This is so not in line with the objective main accreditation House Sick that is For increase quality and safety patient.

It is known from the result data recording incident safety patient for three years successively from 2018 to 2020, happened enhancement case Where For incident No (KTD) in 2018 and 2019 there is 1 case, and in 2020 there are 3 cases, for case incident barely injuries (KNC) in 2018 there were 2 cases, in 2019 there were 3 cases. In 2020 there were 4 cases, and for incident potential injuries in 2018, there were 10 cases; in 2019, there were 9 cases; and in 2020, there were 13 cases.

Consider the opinion from Sora & Nieva (2004) that "Culture safety patient will lower incident No expected in a manner significant so that accountability House sore in the eye patients and society will increase and finally performance House pain also increased", and in relation with his descent mark accreditation House one of them is sick caused by yet pass related groups with safety patient as well as data about enhancement incident safety patients at the Prabumulih City Hospital, then writer feel interested For do Study about "Analysis Application Culture Safety Patients at the Prabumulih City Hospital Year 2021".

METHOD

This is a study quantitative with the use of design cross-sectional between variable independent and dependent *(cross-sectional)*, Where observation and measurement of whole variables are executed at the same time or at a time in same time It means every subject study is observed only one time only and impact be measured according to circumstances or status at the time observation.

This was held in June and July 2021 at the Prabumulih City Hospital. The population in the study This is whole employees of the Prabumulih City Hospital, totalling 678 people (2021 Hospital Staff Data) and a sample study This is an employee from various work units in the Prabumulih City Hospital consisting of group structural, service medical, service nursing, service support and service administration.

Taking samples was done with *stratified random sampling*, that is, with the method of employees in division-based work unit groups. With the use of comparison proportion amount employees in each unit, obtained amount samples in work units. Stratification and randomization continued in the work unit until obtained a sample representing each profession in the work unit. If an employee has a task duplicate in multiple units, then the employee is grouped into units where employees have the Work with proportion time biggest.

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RESULTS AND DISCUSSION

Table 1. Distribution of variables independent and variable dependent study

Variable	Amount n=252	%
Age		
- Young	147	58,3
- Old	105	41.7
Type Sex		
- Man	36	14,3
- female	216	85.7
Level of education		
- Low	17	6,7
- Tall	235	93,3
Income		
- Tall	124	49,2
- Low	128	50,8
Employment Status		
- Employee Still	107	42.5
- Employee No Still	145	57.5
Experience Work		
- New	38	15,1
- Old	214	84.9
Type Work		
- Administration and General	43	17,1
- Service	209	82.9
Training		
- Yes	95	37,7
- No	157	62,3
Resources		
- Good	190	75,4
- Less Good	62	24,6
Culture Safety		
- Good	139	55,2
- Less Good	113	44.8

Based on table above can concluded that characteristics respondent study This is part big, aged young, that is by 58.3%, manifold sex female, that is by 85.7%. His education level

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part big education high, that is of 93.3% and their income part big is part big income low, ie by 50.8%.

On employment status, in part big employee No still is as much as 57.5%. On research This type work respondent is part big type work service, that is by 82.9% and experience it works is long, ie by 84.9%. Respondents on research this too in part big No Once follow training safety patients (62.3%). For source power on research This is part big well, that is by 75.4%. Application culture safety patients in the study This is part big well, that is by 55.2%.

Analysis Bivariate

Table 2. Distribution Culture Safety Patient according to a number of variable Independent

Variable	Less Good	%	Good	%	OR (95%CI)	*p value*
Age						
- Young	83	56,4	64	43,6	0.302 (0.132-0.693)	0.003
- Old	30	28.5	75	71.5		
Type Sex						
- Woman	105	48,6	111	51,4	0.302 (0.132 – 0.693)	0.003
- Man	8	22,2	28	77,8		
Level of education						
- Low	2	0.06	31	99.94	0.149 (0.033 – 0.666)	0 , 0 05
- Tall	111	84.0	21	16		
Income						
- Low	69	53,9	59	46,1	2,126 (1,282-3,527)	0.003
- Tall	44	35,4	80	64,6		
Employment Status						
- No Still	83	57,2	62	42.8	3,436 (2,012 – 5,867)	0.0 00 _ _
- Still	30	28.0	77	72		
Type Work						

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- Administration and General	28	65,1	15	34,9	0.367 (0.185-0.729)	0.003
- Service	85	40,6	124	59,4		
Experience Work						
- New	24	63,1	14	36,9	2,408 (1,180 – 4,912)	0.014 _ _
- Long	89	41.5	125	58.5		
Training						
- No	63	40,1	94	59,9	0.603 (0.361 - 1.008)	0.053
- Yes	50	52,6	45	47,4		
Resources						
- Good	52	27,3	138	72,7	161.88 (21,875-1198,013)	0.0000
- Less Good	61	98.3	1	1,7		

*P ≤ 0.05

Based on table 2 above, all variable independent relate significant with application culture safety patients (p ≤ 0.05).

Analysis Multivariate

Variable can enter the multivariate model is variables in the analysis the bivariate have p-value <0.25. Based on statistical test results are obtained p value 9 variables as following:

NO	VARIABLE	P VALUE
1	Age	0.000
2	Type Sex	0.006
3	Level of education	0.005
4	Income	0.000
5	Employment Status	0.004
6	Type Work	0.000
7	Experience Work	0.013
8	Training	0.000
9	Resources	0.000

Analysis results multivariate done with use backward LR method. The stages in the analysis multivariate obtained that There is seven related variables with Culture Safety

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Patients, namely: type gender, grade education, employment status, experience work, training safety patient, type work and perception about source power. For the most dominant variable relate with application culture safety patient, that is seen in the table results end modeling will be shown in the table below this:

No	Variable	Sig.	OR	Upper	Lower
1	Type sex	.009	.128	.027	.591
2	Education level respondent	.037	071	006	.848
3	employment status	.000	11,394	18,050	49,731
4	Experience Work	.000	24.3836	33,530	132,198
5	Training safety patient	.000	.000	.000	001
6	Type work	.000	39,450	6.202	74,256
7	Perception about source Power	.000	84,564	25,226	144,482

Table above show that after controlled there are two variables that are variables independent significant Because p value is more small from alpha value , which is 0.05, however for see the most dominant factor seen from OR value on both variable so that from results end multivariate regression analysis logistics there is One variable (source power) is the most influential to culture safety patient with a p-value of 0.000 <0.05. The largest OR value obtained that is 84,564 means variable source Power have opportunity 84,564 times affect culture safety patients at the Prabumulih City Hospital Year 2021.

Connection Age

On research This show that the most respondents do application culture safety patient Good is mature beginning that is totaling 64 people. Based on results calculation tabulation cross between age and culture safety patient obtained value P-value=0.003, where if (p<0.05), it means there is significant relationship between age to application culture safety patient. This study in line with opinion Kusumawati and Frandinata (2015), which stated that age influential to performance somebody because ability for adapt yourself in the situation in work and process understanding as well as maturity in Work can achieved at the age of 30-45 years. At a still age young learning process in matter adaptation to work and adjustments to new situation still felt by respondents who are at age young so that need persistence and passion For obtain actualization in work.

According Nivalinda, et al (2003) stated that part big respondent in stage age mature young that is until with 40 years is age productive so that development ability will potency self more max. Age mature is development peak apply knowledge and skills possessed as well as habit think rational will increased (Robbins, 2010).

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Study This in line with research by Ida Faridah, et al (2018) which states that age influential in determine behavior and abilities somebody for work, how respond to a given stimulus individual, age varied respondents. This raises response different every individual to culture safety patient so will also differs in application culture safety patient. Based on a number of theory and opinion scientific a number of researchers so can conclude age give significant influence to application culture safety patients at the Prabumulih City Hospital, because age can influence employee in work and apply knowledge the knowledge you have including in effort application culture safety patient.

Connection Type Sex

On research This show that type sex the most respondents do application culture safety patient Good is Woman that is totaling 111 people. Based on results calculation tabulation cross between type gender and culture safety patient obtained value P value = 0.003, where if ($p<0.05$), it means there is significant relationship between type sex respondent to application culture safety patient.

Study This in line with results study previously by Murhayati, 2008 which states that type sex can influence performance someone, from facet discipline clan Woman more often absent with reason House stairs. Roles, duties and responsibilities answer between men and women in the environment family different, so too physical. Nature Woman more often no enter work compared to man for example Because pregnant or give birth, however employee woman tend more diligent, disciplined and patient (Sopiah, 2009).

Based on type gender in general in obedience woman more obey than men because woman more obedient and caring For increase service to patients (Wardhana, 2013). Study from Sapariah (2015), stated that type sex influential to performance employees, it is known that employee Woman more Lots obtain results good performance compared with employee man.

Prabumulih City Hospital a service unit predisposed health more lots employ woman compared to men, This caused Because power health Woman more dominate compared with men and types work service health more need persistence and tenacity girl then with many amount power health Woman in a manner significant will affect application culture safety patients at the Prabumulih City Hospital.

Educational Level Relationship

On research This is known that most respondents own level education tall that is totaling 235 respondents, with details of 124 people who applied culture safety patient Good and 111 people applied culture safety patient not enough. Based on results calculation tabulation cross between level education and culture safety patient obtained value P value = 0.005, where if ($p < 0.05$) Ho is rejected, it means There is significant relationship between level education respondent to application culture safety patient.

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Study This in line with results research by Ida Faridah, et al, 2019 which concluded that level education somebody influential in give response to something is coming from outside. Educated people tall will more rational and creative as well as open in accept exists various business updates will more can adapt self to various change. Achieved education somebody expected to become determinant of productivity factors including sufficient knowledge, skills, abilities, attitude and behavior in operate activities his job.

According to Mangkunegara (2000) states that factors performance factors is factor ability psychological, ability (ability) employees consists of ability potential (IQ) and abilities reality (education). Therefore that educated employees tall though need placed on the right job competency and added trainings, especially in application culture safety patient so that can prevent happening error in his job.

Based on the theory and results research above, so can be concluded education is an influential part important for the creation of behavior good work will but still must accompanied with competency and placement-appropriate work will maximize behavior work becomes better, especially in application culture safety patients.

Employment Status Relations

On research This is known that most respondents application culture safety patient Good namely employees fixed which amounted to 77 respondents. In matter This employee remains in the Prabumulih City Hospital are civil servants (PNS). Based on results calculation tabulation cross between employment status and culture safety patient obtained value P value = 0.000, where if ($p < 0.05$), where Ho is rejected which means There is significant relationship between employment status respondent to application culture safety patient.

Study This in line with study from Sri Rahayu, et al 2018 which stated that There is a significant relationship between work states to incident safety patient At home Sick general area offering namely power health with employment status is employee permanent (civil servant) then will happen decline incident safety patient of 0.537 times labor with civil servant status will tend will Work more optimal follow standard quality and powerhouse Sick because rights form of compensation financial or non-financial Already sure and regular with Good as well as clarity level career so that can minimize or can avoid happening incident safety patient. Health workers with employee status country civil Already through the selection process among them evaluation competencies possessed by the worker's health so that produce performance service optimal health with impact decline incident safety patient.

In a journal, (Boyatzis, 2008) states that *"maximum performance is believed to occur when the person's capability and talent is consistent with the needs of the job demands and the organizational environment"* which means "performance maximum trusted happen when abilities and talents somebody consistent with need will demands work and environment organization". this explained that appearance work best will we do when our talents and

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abilities have in line with needs and demands work We in something institution, in matter application culture safety patient employee still will tend better because employee still is the work needed everyone and already have rules and targets measurable work. So with exists connection between employment status to application culture safety patient, then expected employee still can give examples and invites employee no still for apply culture safety good patient at Prabumulih Hospital.

Connection Experience Work

On research This is known that the most respondents application culture safety patient Good namely the respondents who have experience long work ie amounted to 125 respondents. Based on results calculation tabulation cross between experience work and culture safety patient obtained value P value = 0.014, where if ($p < 0.05$), where Ho is rejected which means there is a significant relationship between experience Work respondent to application culture safety patient.

Experience or working time is whole lessons learned somebody from experienced events during journey work. The longer a person wrestle field his job the more skilled somebody in Work or work. Hal this is also appropriate with draft theory that level knowledge somebody level is also affected experience in work (long working period) (Notoatmodjo, 2012).

Seniority and productivity work related in a manner positive, the longer it works the more skilled and experienced in carry out work (Robbins, 2010). In line with study Nivalinda et al. (2013) where obtained results that the average nurse with working time experience and opportunity work will can increase draft individual, split problems, and skills motor.

On research This explain that experience Work influential to culture safety patients, as many as 49, 60% of respondents is old employees who apply culture safety patient with well, in line with deep research by Ida Farida, et al (2018). his research mention part big respondent with a relatively long working period experience you have considered Enough in implement application culture safety patient.

So that based on theory and research previously can concluded that respondents who have experience tend to work long potentially more Good in application culture safety patients at the Prabumulih City Hospital.

Connection Training Safety Patient

On research This is known that the most respondents application culture safety patient Good namely the respondents who did not follow training safety patient that is by 94 respondents , and based on results calculation tabulation cross between training safety patient and culture safety patient obtained value P value = 0.053, where if ($p > 0.05$), then Ho is accepted , which means No There is significant relationship between training safety patient to application culture safety patient.

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Increase competence special staff in training safety covering knowledge patients, skills and behavior about draft key, key process and method in practice safety, should can strengthen role employee as giver service, as well as Friend colleague, will but training enhancement competency special staff in training safety patient must in accordance with curriculum based on *patient safety* WHO and PERSI (Iriviranty, 2014).

Training should capably change knowledge someone, because knowledge is result of "know" and this happen after somebody do sensing to something object certain. Knowledge This is dominant thing that is very important for formation action someone, from experience a number of study it turns out action that is not based on good knowledge, no will produce good results (Notoatmodjo, 2012).

Training safety patients who don't can influence culture safety patients at the Prabumulih City Hospital possible Because no exists *reviews* burden work and analysis bait come back Good through oral as well as writing from units against management at the time training, so become constraint in success training is also added with No exists *follow up* from work process flow with careful so that No can reach efficiency and effectiveness from training safety patient.

Connection Type Work

On research This is known that the most respondents application culture safety patient Good namely the respondents who work in the field service that is by 124 respondents , and based on results calculation tabulation cross between training safety patient and culture safety patient obtained value P value = 0.003, where if ($p < 0.05$), then Ho is rejected, which means no there is significant relationship between type work patient to application culture safety patient.

Connection Big Income

On research This is known that the most respondents application culture safety patient Good namely the respondents who have income tall that is by 80 respondents, and based on results calculation tabulation cross between training safety patient and culture safety patient obtained value P value = 0.003, where if ($p < 0.05$), then Ho is rejected, which means there is significant relationship between big income respondent to application culture safety patient. Income is one enhancing factor motivation respondent in work.

Connection Resources

On research This is known that the most respondents application culture safety patient Good namely the respondents who did not follow training safety patient that is by 94 respondents , and based on results calculation tabulation cross between training safety patient and culture safety patient obtained value P value=0.053, where if ($p > 0.05$), then Ho is accepted, which means No There is significant relationship between training safety patient to application culture safety patient.

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Build culture safety patient is element important For increase safety patient and quality home service sick. Needed source comprehensive power, effort and preparation as well as structured for reach success implementation culture safety patients and decline risk occurrence of KTD (Yasmi Y, 2015).

The Institute of Medicine (IOM) proposes five principles in designing safety patients in the organization health (Kohn, 2000), which is one of them is capable leadership make safety patient as not quite enough answer together, designate/assign somebody in charge answer in a safety program patient especially in provide source Power For analysis health and design repeat system.

Factor dominant from analysis multivariate

Based on results regression test analysis logistics carried out For know the most dominant factor own connection to culture safety patients at the Prabumulih City Hospital Year 2021, then can concluded that from whole variable presumed independent influence level culture safety patients at the Prabumulih City Hospital 2021 exists one subvariable that is source the most influential power, with a p value of 0.000 <0.05. With mark the greatest *odds ratio* (OR). that is 84,564 means variable source Power have odds 84,564 times affect culture safety patients at the Prabumulih City Hospital in 2021.

Study This in line with results study Neri RA, et al (2018) at Padang Pariaman Hospital who explained that source Power or means infrastructure at home Sick needed for support effort safety patient. For example, related with availability place storage appropriate medication with standards, security on stairs and so on. Even though in his research No show significant relationship with effort prevention incident no desired (KTD), source Power still needed for support effort decline risk occurrence of KTD at home sick and deep framework application culture safety patient at home sick.

CONCLUSION

Based on results analysis *univariate* on the table distribution frequency obtained results most in variables age that is mature beginning amounted to 147 respondents (58.3%), for variable type sex mostly in women namely 216 respondents (85.7%), for variable level education most on the level education tall namely 235 respondents (93.3%), for employment status variable most of the employees No still namely 145 respondents (57.5%), for variable experience Work mostly on experience old work , namely 214 respondents (84.9%), for variable training safety patient most on no follow training safety patient namely 157 respondents (62.3%), for variable type work most in parts service that is by 124 respondents (82.9%), for variable big income the most on the big income low namely 128 respondents, and for source Power the most source power (52.8%), and for variable source Power the most that is source Power Good that is amounted to 190 respondents (75,4%).

Based on results analysis *bivariate*, out of 9 independent variables, 8 variables were obtained connection significant to application culture safety patient , as for the variables that

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is age with a p value of 0.003, kind sex with a p value of 0.003, level education with a p value of 0.005, employment status with a p value of 0.000, experience Work with a p value of 0.014, type work with a p value of 0.003, large income with p value 0.003 and source Power with a vvalue of 0.000.

Based on from analysis *multivariate* obtained variable dominant influence application culture safety patients at the Prabumulih City Hospital The year 2021 that is variable source power, with a p value of 0.000 <0.05. The largest OR value obtained i.e. 84,564 means variable source Power have odds.

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