



Training hotel staff in early emergency management to enhance tourist comfort at Ubud Raya Resort area

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ABSTRACT

Tourists who stay at the hotel have a risk of illness and/or experiencing emergency problems that interfere with the sense of security and comfort for tourists. One factor for successful emergency management is first aid proficiency. However, the knowledge and skills of hotel staff are relatively lacking in handling emergency problems for tourists. Based on this, this service was held to train the skills of hotel staff in handling emergencies for tourists. Service activities are carried out by presentation methods and practice on basic life support. The target of this activity is the hotel staff of Ubud Raya Resort. Dedication materials were given in 5 meetings. The training material has been adjusted to travel medicine subjects and based on the results of previous research by the implementation team. The implementation of this service went smoothly and as planned. Based on the results of the pretest and posttest, an increase in the knowledge and skills of participants was obtained. Based on interviews, it was found that service participants received positive benefits from the service carried out. Thus, concluded that this service was successfully carried out despite the limitations in its implementation. This community service advice re-conducting basic life support training for hotel staff so that the knowledge and skills received are beneficial in the long term.

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1. INTRODUCTION

Ubud is one of the tourist destinations located in Gianyar Regency, known for its thriving arts and culture scene in Bali. Through this allure, Ubud manages to attract tourists to visit and stay. The number of tourist visits to Ubud has been reported to increase each year (Warta Bali, 2022). The increase in the number of visits necessitates hotel staff readiness in providing security and comfort assurance for tourists. The need for security and comfort is considered one of the fundamental human needs according to Maslow's theory. Comfort is a state where the basic human needs for tranquility, relief, and transcendence are fulfilled. Meanwhile, security is the need for protection for human physical well-

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being, encompassing protection from criminal activities and other potential dangers. Every individual requires protection from environmental threats, accidents, or illnesses (Ruminem, 2021).

Various tourist activities entail risks of accidents ranging from minor to severe. The available tourist activities range from sports, meditation, shopping, culinary tours, museum visits, amusement parks, zoos, to adrenaline-charged activities such as rafting, hill trekking, waterfall visits, swings, and more ("Top 12 aktivitas wisata di Ubud", 2019). These tourist activities pose risks of diseases, accidents, and emergencies. Therefore, the readiness of resources in handling emergency situations for tourists is crucial, ensuring that tourists encountering emergency situations are properly and effectively managed.

One of the preparedness measures required is proficiency in Basic Life Support (BLS). BLS is the initial effort to restore respiratory and/or circulatory functions in individuals experiencing respiratory arrest and/or cardiac arrest due to accidents or certain diseases (Aditianingsih, 2022). Several simple skills need to be mastered to assist in maintaining the life of someone experiencing respiratory or cardiac arrest by clearing the airway, providing breathing assistance, and aiding in blood flow to vital areas of the victim's body. Conversely, tourism workers lack readiness in responding to emergencies. Typically, if a tourist experiences health problems such as a heart attack, accident, or drowning, they are immediately taken to the nearest health service.

Bali Municipality Police Department (Polda Bali) recorded an average of 6 traffic accidents involving foreign tourists in Bali in 2023. This figure is relatively higher compared to the number of traffic accidents involving foreign tourists in 2022, which amounted to 68 incidents. The traffic accidents were spread across several regions. Gianyar Regency reported the highest number of accidents involving tourists, with 23 incidents, followed by Denpasar City with 18 cases, and Buleleng and Klungkung Regencies each with 3 cases (Sugiharto, 2023). The distance between hotels and clinics or community health centers ranges from 1-2 kilometers. However, it is rare to find healthcare professionals, either doctors or nurses, on duty at hotels. Most hotels collaborate with nearby clinics to address health issues for hotel staff and tourists.

Ubud Raya Resort is one of the hotels located on Jalan Raya Sayan, Banjar Sindu Sayan, Ubud, Bali, Indonesia. The staff at Ubud Raya Resort also lack readiness in handling emergencies. Based on interviews with hotel management, an average of 3 emergency cases involving tourists occurs per month. Common emergency incidents include slipping and cramps while swimming. Sick tourists are taken to the hotel's collaborating clinic without providing first aid for accidents because hotel staff lack skills in handling emergency cases. To date, no training activities for everyday emergency handling skills have been conducted. Based on this, a service dedication activity through empowering hotel staff in emergency handling is organized with the aim of improving BLS skills for hotel staff and enhancing service quality for tourists. Improving the skills and service quality of hotel staff in maintaining health can increase the sense of security and comfort for tourists staying at the hotel.

2. METHODS

The service dedication activity is conducted through training sessions to enhance the knowledge and skills regarding emergencies for hotel staff. This service dedication activity took place at Ubud Raya Resort, Gianyar, Bali in July 2023. The activity commenced with the determination of the timing for the service dedication. Based on the availability and agreement between the service team and the hotel management, the activity was scheduled for Friday, July 14, 2023, from 09:00 to 13:00.

Activity Methods

The activity that was attended by 15 hotel staff was carried out using two methods, namely presentation and question and answer as well as practice of providing basic life support.

Presentation and Question-and-Answer Session

The presentation and question-and-answer session lasted for 1 hour. The training material on basic life support provided insights into the potential risks of emergencies for tourists and covered basic life support techniques. The training material was delivered by a nurse from the STIKES Bina Usada Bali institution. The provision of basic life support material began with a pre-test for all participants. The event continued with the delivery of basic life support material followed by a question-and-answer session. A post-test was then administered to all participants to assess the improvement in their knowledge of basic life support.

Practices

Practice in performing basic life support on victims was provided to all service participants for approximately 100 minutes. The activity began with the screening of an illustrative video depicting victims experiencing emergencies. This was followed by a direct demonstration of the proper and correct basic life support techniques. Each participant was given the opportunity to practice basic life support techniques with the assistance of instructional aids. Training continued until all participants were assessed as capable of performing basic life support using the correct techniques

Evaluation Design

Evaluation of the implementation of the emergency training program for hotel staff using three metrics of achievement from the training activities includes success from the execution of the activities, from the participants, and from the organizers of the activities. The measure of success from the execution of the activities involves assessing the adequacy of the timing and the number of meetings that were planned beforehand. The measure of success from the participants involves the scores obtained from the pretest and post-test of the presentation and practice of basic life support activities. The measure of success from the organizers is assessed by the benefits derived by the participants from the activities.

3. RESULTS AND DISCUSSION

Results

In Table 1, it was found that most of the training participants were aged 19-24 years (53.3%), had a high school/vocational education level (53.3%) and had worked for > 5 years (60%).

Table 1. Characteristics of participants

Characteristics	n	%
Age		
19-24	8	53,3
25-45	6	40,0
>45	1	6,7
Education level		
Senior/Vocational High School (SMA/SMK)	8	53,3
Diploma	7	46,7
Work experience		
<5 years	6	40
>5 years	9	60

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Presentation

Training activities are filled with lectures and demonstrations. In Figure 1, it is shown that almost all participants seemed enthusiastic about listening to the material presented by the lecturer, namely an emergency nurse specialist from STIKES Bina Usada Bali. Participants' knowledge about potential emergency risks for tourists and basic life support was assessed to have increased. The assessment of participants' increased knowledge is assumed to be based on the participants' ability to answer questions correctly after being given a lecture.



Figure 1. The enthusiasm of the participants

Practices

Figure 2 shows a demonstration activity of basic life support skills. In this demonstration activity, all participants were shown the correct procedures when helping people experiencing heart failure. Furthermore, hotel staff participating in the training were given the opportunity to practice basic life support procedures with the help of phantoms. The trainer supervises and guides the participants until they are able to perform well and correctly. In the picture, it can be seen that the participants are able to carry out the correct method of basic life support procedures.



Figure 2. Demonstration of basic life support by trainers and participants practicing the procedures

Closing

The service activity closed with an evaluation activity on the implementation of service for hotel staff. Evaluation is carried out by filling out a posttest questionnaire to determine the increase in participants' knowledge and skills regarding basic life support. Several participants were randomly selected to be interviewed about staff perceptions of the benefits of implementing this service activity. The service activity ended with the event of giving certificates and mementos from the implementing team to the service participants, as in Figure 3.



Figure 3. Handing over basic life support training certificates

Activity Materials

The material used in the dedication for hotel staff is in line with the teaching materials from the Travel Medicine course. Travel medicine, also known as travel health or emporiatrics, is a branch or specialization of medicine that specifically studies diseases and health conditions resulting from travel and their management efforts (Wirawan & Made, 2016). Various health problems are often experienced by tourists during their travels. Therefore, preventive measures are needed for tourists (Wirawan et al., 2020). The material for the dedication on basic life support practice is adjusted according to the basic life support protocol prepared by the Ministry of Health of the Republic of Indonesia. The basic life support training material is also tailored to the needs of participants who are classified as non-healthcare professionals. Therefore, the depth of the material, the number of meetings, and the training delivery methods are adjusted for the general public. The implementation of community dedication activities is divided into 5 meetings, as shown in Table 2.

Table 2. Schedule

1st Meeting	
Activities	- Introduction between the service team and service participants - Explanation of the reasons and benefits of service activities - Explanation of the methods of service activities - Explanation of the evaluation of service activities
Goals	- Pretest - Introduction to the service team and introducing the reasons, benefits and methods of implementing the service program. - Introduce the activity and evaluation methods used in implementing this service program - To find out the initial knowledge of service participants, so that the presenters can adjust the material provided
2nd Meeting	
Activities	- Providing material on the topic of potential emergency risks for tourists
Goals	- To be able to provide knowledge to participants regarding the risks of emergencies for tourists
3rd Meeting	
Activities	- Explanation of the meaning, objectives, procedures and evaluation of providing basic life support
Goals	- To provide knowledge about basic life support for tourists
4th Meeting	
Activities	- Practice of providing basic life support by service participants
Goals	- To provide experience and make service participants able to carry out basic life support correctly
5th Meeting	
Activities	- Post test
Goals	- To determine changes in the level of knowledge and abilities of participants in carrying out basic life support correctly

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Discussion

The training on basic life support is typically provided to medical professionals. However, emergency victims are often encountered in various locations far from healthcare facilities. The success of emergency patient management is determined by the quality of the first aid received before receiving medical treatment. Proficiency in providing basic life support increases the success rate of managing patients with cardiac arrest. Therefore, the ability to provide assistance in cases of respiratory and cardiac arrest needs to be imparted not only to healthcare professionals but also to other professions. One profession that needs to acquire knowledge about basic life support is hotel staff. The skills required by hotel staff for basic life support include the ability to perform cardiopulmonary resuscitation (CPR), which involves chest compressions and airway management to maintain blood circulation and oxygenation in patients experiencing a heart attack. Another essential skill for hotel staff is understanding wound care and how to manage bleeding and other injuries (My CPR Now, 2024; Sing, 2023).

Basic life support training is essential for hotel staff as it enables them to provide first aid in emergency situations. This training aims to enhance employees' skills in delivering first aid and basic life support. Basic life support training encompasses various skills, such as cardiopulmonary resuscitation, wound management, and other emergency actions. Basic life support training can be conducted in various settings, including hotels, and involves learning methods such as theory, discussion, and practical sessions. Therefore, basic life support training is highly relevant and crucial for enhancing the readiness of hotel staff in dealing with emergencies and providing safe service to their guests (Mayfield, 2021).

Based on research conducted at a hotel, it was found that basic life support training improves the knowledge and preparedness of hotel staff in providing first aid for emergencies. Approximately 60% of hotel staff were found to have good knowledge of basic life support after receiving training (Prihastini et al., 2023). Contrary results were found among healthcare workers. Although the degree of training and proficiency in basic life support differs between healthcare workers and hotel staff, the knowledge of hotel staff was found to be higher than that of healthcare workers. A study found that only 12% of healthcare workers had adequate knowledge of basic life support (Chaudhary et al., 2023). Most healthcare workers, especially nurses, require improvement in their knowledge of basic life support (Adal & Emishaw, 2023).

The emergency training activities for hotel staff that have been conducted are considered successful. Based on the evaluation results, the success of the implementation of the activities was attributed to the appropriateness of the timing and the number of meetings planned beforehand. This success was influenced by the support from the hotel staff and management themselves. Despite the increasing hotel visits and the busy schedules of hotel staff, the training activities proceeded smoothly. Additionally, the expertise and delivery methods of the service team were considered engaging, resulting in enthusiastic participation from the service participants from the first meeting to the end. Interviews also revealed that training participants perceived the benefits of this basic life support training. The skills acquired can be applied to guests staying at the hotel where they work. Previously, if guests experienced health problems or emergencies, the hotel staff only contacted the clinic for assistance without providing first aid to the victims.

Based on the pretest and post-test evaluations, it was found that the knowledge of hotel staff is assumed to increase after receiving information about the potential risks of emergencies for tourists. The average pretest knowledge score was 37.3 ± 1.4 , which increased to 78.9 ± 16.2 in the post-test. Similarly, the ability of participants to practice basic life support improved. The average pretest score for basic life support skills among hotel staff was 28.3 ± 2.2 , which increased to 82.4 ± 21.6 in the post-test. This success

can be attributed to the methods used in providing basic life support training to hotel staff. The method used was a combination of presentations and direct practice of basic life support, ensuring that the techniques were performed correctly and effectively. An approach combining mini-lectures and practical sessions is an effective method for delivering education and basic life support training to the general public, thereby enhancing their ability to provide first aid in emergency situations (Ghozali et al., 2023).

Although the knowledge and skills of hotel staff appear to have improved, there are still some points of knowledge and skills that need to be enhanced. Some questions about basic life support were found to have low scores after lectures on basic life support. These questions pertained to the correct location for performing chest compressions, the frequency and speed of chest compressions, and the depth of pressure during chest compressions. These scores were 43.7, 37.5, and 31.2, respectively. Similarly, low scores were found for practical skills in basic life support. The lowest score was found in the skill of checking the pulse to ensure the absence of a pulse, with a score of 42.8. The low scores of knowledge and skills obtained by hotel staff may be because the basic life support training was conducted for the first time. Therefore, basic life support training is recommended to be conducted regularly every six months, with a focus on knowledge and skills points that are still categorized as less proficient.

This activity also has limitations that may hinder the success of the Community Service program. The time interval between the pretest and post-test evaluations of participants' knowledge and skills is relatively short, so this assessment may not reflect participants' knowledge and skills over the long term. Another limitation is the use of instructional aids in training, which may differ from the actual situation when basic life support is applied directly to victims. Therefore, the limitations of this service need to be considered to ensure the success of the program being conducted (Lahaya et al., 2021).

4. CONCLUSION AND RECOMMENDATIONS

The service activity for hotel staff was successfully conducted. The success of implementing this activity was assessed based on the adequacy of the timing and the number of meetings planned beforehand. Success was also observed in the improvement of participants' knowledge and skills after receiving basic life support training. However, some points of knowledge and skills that need to be enhanced were still identified. The factors supporting the success of this dedication include support from the hotel staff and management, as well as the expertise and delivery methods of the service team, which were deemed engaging, resulting in enthusiastic participation from the participants from the first meeting to the end. On the other hand, factors hindering this dedication activity include the relatively short time interval between the pretest and post-test evaluations of participants' knowledge and skills, which may not fully reflect participants' knowledge and skills over the long term. Additionally, the use of instructional aids in training may create different situations and conditions compared to when basic life support is applied directly to victims.

Based on the evaluation results of the training, it was found that there were still low scores of knowledges and skills on basic life support, so it is recommended to provide basic life assistance training on a regular basis once in six months with emphasis on the point-point of the knowledge and skill assessed as under-mastered. In addition, in order to overcome the limitations in the use of security tools, it is recommended that service activities for hotel staff be carried out with simulation methods involving health personnel as well as supporting advice to provide a more realistic situation so that it can provide experience for the hotel staff in the implementation of basic life support.

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