

FACTORS RELATED TO NURSES' PERFORMANCE IN REPORTING PATIENT SAFETY INCIDENTS AT PERMATA HATI HOSPITAL DURI IN 2025

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Abstract

Patient safety stands as a vital benchmark of healthcare quality, yet reporting incidents remains a challenge influenced by multiple human and organizational factors. This study explores the elements that shape nurses' performance in reporting patient safety incidents at Permata Hati Duri Hospital in 2025. Using a quantitative analytical observational approach with a cross-sectional design, the research involved 85 inpatient nurses. Data were analyzed through univariate, bivariate (Fisher's Exact test), and multivariate (logistic regression) techniques. Most participants were young adults aged 20–30 years (32.9%), predominantly female (91.8%), highly educated (84.7% D4/S1/Nursing), and experienced (80.0% with 6–>10 years). Findings revealed that most nurses demonstrated strong perceptions, positive attitudes, high motivation, and favorable views of leadership. Although bivariate analysis showed no significant association between independent variables and incident reporting, multivariate results indicated that work experience played the most dominant role (OR = 3.821; 95% CI = 0.010–1.025). The study concludes that enhancing reporting behavior requires consistent training, improved digital systems, and a reinforced culture of safety across all levels of hospital practice.

Keywords: Patient Safety, Incident Reporting, Nurse Performance, Work Experience, Hospital

INTRODUCTION

Patient safety serves as the foundation of high-quality healthcare services. It is not only a procedural necessity but also a moral and professional responsibility to ensure that every patient receiving medical care is protected from preventable harm. According to the Indonesian Ministry of Health Regulation (Permenkes, 2017), the patient safety system comprises several essential elements—risk assessment, risk management, incident reporting and analysis, learning from previous events, and implementing preventive actions. Patient safety, therefore, goes beyond administrative requirements; it represents a culture of vigilance and commitment where every action prioritizes patient welfare.

The World Health Organization (WHO, 2019) emphasizes that patient safety is a key

indicator of healthcare quality and a determinant in reducing preventable mortality and morbidity. In Indonesia, this global concern is reflected in the Regulation of the Minister of Health Number 11 of 2017 concerning Hospital Patient Safety, which obligates every hospital to establish a *Tim Keselamatan Pasien Rumah Sakit* (TKPRS) and implement a reporting system based on “no blame” and “just culture.” These principles encourage learning from mistakes rather than assigning blame, aiming to improve accountability and foster a supportive work environment where healthcare professionals can report incidents without fear.

Despite these comprehensive regulations, the implementation of patient safety systems in many hospitals remains inadequate. Many healthcare workers—especially nurses—hesitate to report incidents due to fear of punishment, stigma, or lack of trust in management follow-up. Others feel uncertain about the value of reporting because they rarely see meaningful outcomes or improvements after incidents are reported. Limited training, weak leadership support, and the absence of integrated information systems further hinder effective and transparent reporting processes. In fact, incident reporting plays a vital role in identifying risks, improving quality, and preventing recurrence of similar events (Kemenkes RI, 2021). An ideal reporting system must ensure confidentiality, fairness, and a structured follow-up process (Al-Mandhari et al., 2020).

Nurses play a central role in maintaining patient safety because they have the most direct and continuous contact with patients. Their close observation enables them to identify risks early, prevent complications, and respond promptly to incidents. Consequently, nurses’ performance in reporting incidents reflects the maturity of a hospital’s safety culture (Kemenkes RI, 2021). Research indicates that several factors influence nurses’ reporting behavior, such as work experience, education, perception, motivation, attitude, and leadership. Ariyani et al. (2023) found that nurses with longer work experience tend to be more confident and consistent in reporting compared to newer staff. Similarly, Nurislami et al. (2022) reported that higher educational attainment enhances nurses’ understanding of patient safety, leading to better compliance. Mendrofa et al. (2022) highlighted the positive influence of motivation, while Susanto and Handiyani (2023) revealed that negative perceptions toward reporting systems reduce nurses’ willingness to report incidents.

Nationally, patient safety remains a major challenge. In 2019, Indonesia recorded 7,465 patient safety incidents, consisting of 38% near-miss cases, 31% non-injury incidents, and 31% adverse events (Toyo et al., 2023). Despite improvements in hospital accreditation, only around 12% of hospitals consistently report incidents. This gap shows that although patient safety regulations exist, their implementation still faces obstacles related to human factors, leadership, and organizational culture.

At Permata Hati Duri Hospital, a similar situation occurs. The number of inpatients increases annually, yet the rate of incident reporting remains inconsistent. Data from the hospital’s *Komite Mutu dan Keselamatan Pasien* show fluctuating trends, with an increase in reported incidents in 2024. Interviews with nurses reveal that many are still hesitant to report for fear of being blamed or receiving negative evaluations. Senior nurses tend to report more frequently due to familiarity with procedures, while newly recruited nurses often feel uncertain because of limited experience and unclear expectations regarding the outcomes of reporting.

This situation indicates that the success of patient safety systems depends not only on rules and infrastructure but also on human and cultural factors within healthcare institutions. Building a strong reporting culture requires trust, transparent leadership, and consistent support from management. Therefore, it is crucial to explore the factors associated with nurses' performance in reporting patient safety incidents to develop more effective strategies for strengthening hospital safety culture.

Based on this background, this study aims to identify the factors influencing nurses' performance in reporting patient safety incidents at Permata Hati Duri Hospital in 2025. The study will examine variables such as work experience, educational level, perception, motivation, attitude, and leadership to determine which of these factors most strongly affect reporting behavior. The findings are expected to provide both academic and practical benefits. Academically, the study will contribute to nursing management and patient safety literature. Practically, it will assist hospital administrators in designing better training programs, formulating supportive policies, and fostering a transparent and non-punitive reporting culture. For nurses, the study emphasizes that reporting is not a form of self-blame but an act of professional accountability and ethical responsibility. Ultimately, patient safety should be viewed not merely as a policy but as a shared moral value that reflects compassion, integrity, and the collective commitment of all healthcare professionals to protect and care for every patient.

IMPLEMENTATION METHOD

This study applied a quantitative analytic observational method with a cross-sectional design to examine the relationship between work experience, education, perception, attitude, motivation, and leadership with nurses' performance in reporting patient safety incidents at Permata Hati Duri Hospital (Notoatmodjo, 2012). The design enabled the observation of these relationships at a single point in time, providing an overview of actual workplace conditions.

The research was conducted from July to August 2025, involving 85 nurses selected from a population of 123 using the Lemeshow formula and total sampling. Inclusion criteria were nurses actively working in inpatient units and willing to participate, while those on leave, sick, or in structural positions were excluded.

Variables were operationally defined: work experience (length of service), education (highest qualification), perception (understanding of the reporting system), attitude (response to reporting), motivation (internal drive), and leadership (supervisory influence). The dependent variable, nurses' performance, was assessed through observation sheets documenting actual reporting behavior (Heryana, 2020). Data were collected via questionnaires and observations, then processed through editing, coding, and tabulating for accuracy.

Analysis included univariate (descriptive), bivariate (Chi-Square and Fisher Exact), and multivariate tests to identify the most influential factors, with variables entered into the model if $p \leq 0.25$ (Heryana, 2020). Ethical approval was granted by the Health Research Ethics Committee (No. 581/KEPK/UHTP/VIII/2025). All participants provided informed consent, confidentiality was maintained through numeric coding, and ethical principles of respect, beneficence, and justice (Polit & Beck, 2006) were upheld.

This method ensured research validity and produced meaningful insights to enhance nurses' performance and strengthen the patient safety incident reporting culture at Permata Hati Duri Hospital.

RESULTS AND DISCUSSION

This study took place at Permata Hati Hospital, a private healthcare facility in Mandau District, Bengkalis Regency, Riau Province. The hospital has 104 beds and 31 specialist doctors, offering services such as outpatient care, emergency services, inpatient treatment, ICU, and other supporting units. The research focused on the inpatient unit, involving 85 nurses selected from a total of 123 through total sampling. Respondents included nurses from the second-floor wards, Flamboyan, ICU, and perinatology units. Most were female and aged 20–30 years, reflecting a predominantly young and active nursing workforce. This demographic profile provides important context for understanding factors that influence nurses' participation in patient safety incident reporting at Permata Hati Hospital.

Univariate Analysis

Univariate analysis is used to describe the characteristics of each research variable individually through frequency distribution. The results are presented in the following table.

Table 1 Overview of Research Variables

No	Variable	Category	f	%
1	Work Experience	1–≤5 years	17	20.0
		5–≥10 years	68	80.0
2	Education	D3	13	15.3
		D4/S1/Ners	72	84.7
3	Perception	Poor	7	8.2
		Good	78	91.8
4	Attitude	Negative	13	15.3
		Positive	72	84.7
5	Motivation	Low	2	2.4
		High	83	97.6
6	Leadership	Negative	13	15.3
		Positive	72	84.7
7	Patient Safety Incident Reporting	No Reporting	23	27.1
		Reporting Exists	62	72.9
Total			85	100.0

Source: SPSS Data Processing (2025)

Table 1 shows that most nurses in the inpatient unit of Permata Hati Duri Hospital have 6–>10 years of experience (80.0%) and hold D4/S1/Ners degrees (84.7%). The majority demonstrate good perception (91.8%), positive attitude (84.7%), high motivation (97.6%), and view leadership as positive (84.7%). Additionally, 72.9% reported that incident reporting is implemented. Overall, these results suggest that nurses' adequate experience, higher education, positive mindset, strong motivation, and supportive leadership foster effective patient safety incident reporting at Permata Hati Duri Hospital.

Bivariate Analysis

Bivariate analysis is used to determine the relationship between two variables. In this study, six independent variables were analyzed to examine their relationship with the dependent variable, namely the *patient safety incident reporting system*. The results are presented in the following table.

Table 2 Frequency Distribution of Bivariate Analysis

Patient Safety Incident Reporting									
No	Variable	Category	No Incident Reporting		Incident Reporting		Total		p-Value
			f	%	f	%	f	%	
1.	Work Experience	1-≤5 Tahun	7	41.2	10	58.8	17	100	0.220
		5-≥10 Tahun	16	23.5	52	76,5	68	100	
2.	Education	D3	1	7.7	12	92.3	13	100	0.241
		D4	22	30.6	50	69,4	72	100	
3.	Perception	Poor	2	28.6	5	71.4	7	100	1.000
		Good	21	26.9	57	73.1	78	100	
4.	Attitude	Negative	4	30.8	9	69.2	13	100	0.742
		Positie	19	26.4	53	73.6	72	100	
5.	Motivation	Low	0	0	2	100	2	100	1.000
		High	23	27.7	60	72.3	83	100	
6.	Education	Negative	2	15.4	11	84.6	13	100	0.499
		Positive	21	29.2	51	70.8	72	100	

Source: SPSS Data Processing (2025)

Fisher's Exact Test results showed no significant relationship between the independent variables and patient safety incident reporting among nurses at Permata Hati Duri Hospital. However, descriptive trends indicated that nurses with 6-→10 years of experience (76.5%), D3 education (92.3%), good perceptions (73.1%), positive attitudes (73.6%), high motivation (72.3%), and supportive leadership (70.8%) were more likely to report incidents. Although not statistically significant, these patterns suggest that such characteristics may encourage greater participation in patient safety incident reporting.

Multivariate Analysis

Before the multivariate analysis, bivariate testing was conducted to select independent variables meeting the inclusion criterion ($p < 0.25$) for the multiple logistic regression model. The results of this selection are shown in the following table:

Table 3. Bivariate Selection Results

Independent Variable	p-value	Description
Work Experience	0.220	Candidate
Education	0.241	Candidate
Perception	1.000	Not a Candidate
Attitude	0.742	Not a Candidate
Motivation	1.000	Not a Candidate
Leadership	0.499	Not a Candidate

Source: SPSS Data Processing (2025)

Work experience and education were included in the multivariate model ($p < 0.25$) and analyzed using multiple logistic regression to determine dominant factors influencing patient safety incident reporting at Permata Hati Duri Hospital. Model 1 included these two variables, while perception, attitude, motivation, and leadership were excluded due to higher p -values.

Table 4. Itivariate Model I

Dominant Factors of Patient Safety Incident Reporting at Permata Hati Duri Hospital (2025)

Independent Variable	p-value	OR	95% CI for Exp(B)
Work Experience	0.220	3.821	0.971–15.032
Education	0.241	0.102	0.010–1.025

Source: SPSS Data Processing (2025)

From the table, the education variable showed a p -value > 0.25 , indicating it was not significant. Therefore, it was excluded in the next model to assess its effect on the odds ratio (OR) of other variables. The comparison is shown below.

Table 5. Changes in Odds Ratio (OR)

Independent Variable	OR (with Education)	OR (without Education)	Change (%)
Work Experience	3.821	3.709	2.3%
Education	1.102	1.103	+6.9

Source: SPSS Data Processing (2025)

The results show that removing the education variable caused less than a 10% change in OR, meaning education did not have a confounding effect on the relationship between work experience and patient safety incident reporting.

The final model is presented as follows:

Table 6. Final Model

Dominant Factors of Patient Safety Incident Reporting in the Inpatient Unit of Permata Hati Duri Hospital (2025)

Independent Variable	p-value	Exp(B) (POR)	95% CI (Lower–Upper)
Work Experience	0.220	3.821	0.971–15.032
Omnibus Test	77.380		
Nagelkerke R Square	0.329		

Source: SPSS Data Processing (2025)

Nurses with longer work experience were 3.8 times more likely to report patient safety incidents than those with shorter experience ($\text{Exp}(B) = 3.821$; 95% CI = 0.971–15.032). The model explained 32.9% of the variation in reporting behavior, indicating that work experience was the most influential factor, while education and other variables were not significant.

The Relationship Between Work Experience and Patient Safety Incident Reporting

The statistical results of the study indicated that there was no significant relationship between work experience and patient safety incident reporting at Permata Hati Hospital, Duri. However, descriptively, it was observed that the longer the nurses' work experience, the higher the proportion of reported patient safety incidents. This finding suggests a tendency for work experience to play a role in enhancing nurses' ability to recognize incidents and their awareness in reporting them.

This finding aligns with the study conducted by Maria et al. (2020), which stated that work experience and education do not significantly influence patient safety incident reporting. This implies that longer working periods and higher educational levels do not necessarily guarantee a higher awareness among nurses to report patient safety incidents, mainly due to the lack of knowledge and training related to incident reporting procedures.

Theoretically, work experience is one of the key factors influencing clinical competence, decision-making ability, and compliance with patient safety procedures (Sellers et al., 2014). This is consistent with the findings of Rn et al. (2016), who explained that novice nurses with less than one year of work experience are more likely to make medication errors compared to experienced nurses, as they have limited ability to identify the causes of errors. Similarly, Zhang (2019) found that most incidents were committed by junior staff with ≤ 5 years of experience (44.4%), whereas nurses with longer work experience were generally more capable of recognizing risks and engaging in reporting behavior.

The Relationship Between Education and Patient Safety Incident Reporting

The study results revealed that the proportion of patient safety incident reporting varied across different educational levels. Although there were percentage differences among educational groups, statistical analysis indicated that there was no significant relationship between education level and the patient safety incident reporting system at Permata Hati Hospital, Duri. In other words, the nurses' formal educational level was not a major determinant in incident reporting practices within the context of this study.

Theoretically, education is expected to enhance critical thinking skills, systematic reasoning, and understanding of the importance of patient safety (Sellers et al., 2014). Nurses with a bachelor's degree typically demonstrate stronger critical thinking abilities, practice evidence-based care, and provide more holistic nursing services. This aligns with the study by Rn et al. (2016), which showed that nurses with higher education levels possess better medication knowledge, thereby reducing the risk of medical errors. Furthermore, Audet et al. (2018) found that higher educational attainment among nurses was associated with lower patient mortality rates and fewer adverse incidents.

The Relationship Between Perception and Patient Safety Incident Reporting

The study findings indicated that most respondents had a good perception of patient safety incident reporting. Respondents with positive perceptions were mostly those who reported incidents. However, statistical testing showed no significant relationship between perception and the patient safety incident reporting system at Permata Hati Hospital, Duri. This implies that although most nurses have a positive perception regarding the importance of incident reporting, this factor does not directly influence their decision to report or not report

patient safety incidents.

Theoretically, patient safety incident reporting is part of a risk management system that must be supported by positive perceptions among healthcare workers, as perception influences their willingness to recognize and respond to risks (Sujan et al., 2017). Healthcare workers' perceptions of reporting are often shaped by psychosocial factors such as fear of legal consequences, confidentiality concerns, and the lack of feedback from management. These conditions may explain why a positive perception does not always translate into reporting behavior.

This finding aligns with studies by Espin et al. (2015) and Abualrub et al. (2015), which found that positive perceptions among healthcare professionals do not always correlate with compliance in reporting incidents. Nurses tend to report serious incidents more frequently than minor or near-miss events, as they perceive the reporting of minor incidents to have limited benefits.

According to Maryani (2022), although nurses generally have good perceptions, some still do not report patient safety incidents due to a lack of external motivation, such as insufficient peer support or leadership involvement in the reporting process. Similarly, Larasasih (2022) found no relationship between perception and the low rate of incident reporting, which may be due to nurses' strong awareness of their obligation to report patient safety incidents as part of efforts to improve healthcare service quality.

The Relationship Between Attitude and Patient Safety Incident Reporting

The study results indicated that the majority of respondents with a positive attitude engaged in patient safety incident reporting. However, statistical testing showed no significant relationship between nurses' attitudes and the patient safety incident reporting system at Permata Hati Hospital, Duri. In other words, nurses' attitudes whether positive or negative, were not statistically proven to influence their decision to report incidents.

According to Mjadu and Jarvis (2018), attitude is one of the psychological factors that can affect individual behavior. Nurses with negative attitudes may feel uncomfortable reporting incidents due to fear of blame or concerns about confidentiality. This is supported by findings from Yung et al. (2016), who reported that nurses tend to have negative attitudes toward medication error reporting, primarily due to fear of repercussions after reporting. Similarly, Abualrub et al. (2015) identified attitudinal barriers such as fear of disciplinary action and perceived lack of benefits from reporting, which ultimately reduce nurses' motivation to report incidents.

The Relationship Between Motivation and Patient Safety Incident Reporting

The study findings revealed that most respondents demonstrated high motivation in reporting patient safety incidents. However, the results of the bivariate regression test showed no significant relationship between nurses' motivation and the patient safety incident reporting system at Permata Hati Hospital, Duri. Descriptively, both low and high motivation levels were not absolute determinants of incident reporting behavior.

According to McClelland's theory, an individual's motivation is driven by the need for achievement, affiliation, or power (Nursalam, 2017). In line with Yung et al. (2016), it was found that even though some nurses had high motivation, they were reluctant to report

incidents due to fear of consequences and lack of protection for reporters. Similarly, Mjadu and Jarvis (2018) reported that nurses' intrinsic motivation does not always translate into reporting behavior, especially when the work environment does not support transparency.

Consistent with this study, Asli (2019) also found no significant relationship between motivation and patient safety incident reporting. This may be influenced by other factors such as heavy workload. Highly motivated nurses may still fail to report incidents if they lack the time or opportunity to complete the incident reporting forms. Thus, motivation alone is not a sufficient determinant of nurses' reporting performance without adequate structural and organizational support.

The Relationship Between Leadership and Patient Safety Incident Reporting

The study results showed that most respondents who perceived leadership positively also reported patient safety incidents. However, statistical testing revealed no significant relationship between leadership and the patient safety incident reporting system at Permata Hati Hospital, Duri. In other words, although most respondents rated leadership positively, it was not proven to be directly related to nurses' decisions to report incidents.

This finding is consistent with the study by Ekaningtyas et al. (2023), which explained that management support, including leadership, was not significantly related to the frequency of patient safety incident reporting. The study further stated that besides leadership, other factors influencing the low rate of reporting included communication openness within work units and team collaboration to develop and strengthen the reporting culture.

According to the Leader–Member Exchange (LMX) theory, the quality of the relationship between leaders and subordinates enhances trust, job satisfaction, and positive staff behaviors, including incident reporting (Jungbauer et al., 2018). Supportive leadership helps strengthen staff confidence in the existing system, thereby fostering a culture of patient safety. Similarly, Iswadi (2022) emphasized that effective leadership is a key component in patient safety design within hospitals, as leaders play a crucial role in providing direction, establishing reporting systems, and creating a safe work environment. Mjadu and Jarvis (2018) also stated that leadership support is closely related to nurses' comfort in reporting incidents.

Dominant Factors Influencing Patient Safety Incident Reporting

The multivariate logistic regression analysis revealed that, among the six independent variables examined, only work experience had a significant effect on patient safety incident reporting. Variables such as attitude, education, perception, motivation, and leadership showed no significant influence. Hence, work experience emerged as the dominant factor affecting reporting behavior in this study.

Nurses with longer work experience were approximately 3.8 times more likely to report patient safety incidents compared to those with shorter tenure. This finding supports the research by Rosyidah, Haryono, and Oktafiani R. (2008), which emphasized that tenure is strongly linked to the accumulation of professional experience—employees with longer service tend to perform their duties more effectively. Nurses with at least five years of experience are generally considered senior and show higher compliance with the six patient safety goals. Similarly, Sutriningsih (2018) noted that work experience positively influences

nurses' adherence to safety procedures, thereby improving their overall compliance.

Furthermore, studies by Aiken et al. (2018) and Patmawati et al. (2023) highlight that experienced nurses play a crucial role in fostering a hospital safety culture. They often serve as mentors to junior staff, reinforcing the value of reporting incidents as a means of learning and improving service quality. This suggests that work experience not only enhances individual competence but also strengthens the collective culture of safety within healthcare institutions.

In conclusion, work experience is a key determinant of nurses' willingness and ability to report patient safety incidents. The longer a nurse's tenure, the greater their competence, confidence, and commitment to recognizing and reporting safety events. While factors such as attitude, education, perception, motivation, and leadership may contribute, their effects appear secondary to that of work experience. Additionally, a supportive work environment and strong safety culture can further amplify this positive relationship, positioning experienced nurses as vital agents in promoting consistent and effective patient safety incident reporting.

CONCLUSION

The study on factors influencing patient safety incident reporting at Permata Hati Duri Hospital found that most nurses were 20–30 years old, female, had 5–≥10 years of experience, and held D4/S1/Nursing degrees. Overall, nurses showed good perceptions, positive attitudes, high motivation, and positive views of leadership in the inpatient units. Bivariate analysis showed no significant relationship between work experience, education, perception, attitude, motivation, and leadership with incident reporting ($p > 0.05$). However, multivariate analysis revealed that work experience was significantly related, with nurses having longer experience being 3.8 times more likely to report incidents ($\text{Exp}(B) = 3.821$; 95% CI = 0.971–15.032). Thus, work experience emerged as the dominant factor, while other variables showed no significant effect.

It is recommended that future research include additional variables such as workload, organizational climate, managerial supervision, or psychological factors that may better explain reporting behavior. Future studies could also use longitudinal or qualitative designs to explore deeper influences not captured in this study. For hospitals, efforts should focus on strengthening reporting systems through mentorship between senior and junior nurses, recognition for active reporters, and ensuring that systems are simple, fast, and non-punitive. Regular training on risk management and patient safety should also be conducted. For nursing education institutions, greater emphasis should be placed on teaching concepts, principles, and practical skills of incident reporting so that students are prepared to identify, analyze, and report safety incidents accurately and responsibly.

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