
Application of SVM to Speed Up and Accurate Nursing Decisions for Mentally Disordered Patients

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Abstract

This study aims to evaluate the application of the Support Vector Machine (SVM) algorithm in increasing the speed and accuracy of nursing decision making in patients with mental health disorders. Fast and accurate decision making is very important in the nursing context, especially in treating patients with complex mental disorders. In this research, patient medical record data is used to train an SVM model, which is then used to predict the severity of the patient's mental disorder, such as Mild, Moderate, or Severe. The model is trained using features such as the patient's age, gender, diagnosis, psychological test scores, and physical condition. The evaluation results show that the SVM model has 100% accuracy, which means the model succeeded in classifying the severity of the patient's mental disorder very accurately. In addition, implementing this model also reduces the time required for decision making, allowing nurses to provide faster and more precise decisions. These results indicate that SVM can be a very useful tool in supporting nursing decision making, increasing the efficiency and quality of care, and reducing diagnostic errors. This research provides important insights into the potential use of artificial intelligence algorithms in clinical decision support systems in the mental health field.

Keywords: Support Vector Machine (SVM), Accuracy, Speed, Diagnosis, Medical Record Data.

INTRODUCTION

Artificial intelligence technology, especially machine learning algorithms such as Support Vector Machine (SVM), has been widely used in various fields to increase efficiency and accuracy, including in the health sector. The use of SVM in mental health data analysis offers enormous potential, given the complexity and diversity of mental disorders that can influence decision-making processes. In many cases, nursing staff face the challenge of assessing and responding quickly to changes in a patient's condition, especially when patients experience mental disorders that may not always be physically visible but have a significant impact on their well-being.

On the other hand, large and varied medical data, such as disease history, psychological test results, and patient behavioral records, are often difficult to analyze manually. This process can take a long time, and the decisions taken may not be completely objective or based on comprehensive analysis. Therefore, the application of SVM can help overcome these challenges by automatically classifying and analyzing existing data, providing data-based recommendations for faster and more accurate decision making.

In addition, the application of SVM in nursing not only focuses on decision accuracy, but also on increasing the speed of decision making. By utilizing SVM's ability to process data quickly, nurses can immediately receive analysis results that can be used as a reference in making clinical decisions. In emergency situations or when time is limited, the ability to obtain results quickly can save a patient's life or reduce the risk of complications.

Through this research, it is hoped that it can be identified to what extent the use of SVM can overcome the problems of limited time and accuracy in nursing decision making, as well as provide new insights into how technology can be integrated into nursing practice to improve the quality of mental health services.

RESEARCH METHODS

This research uses quantitative methods with an experimental approach to assess the effectiveness of the Support Vector Machine (SVM) algorithm in increasing the speed and accuracy of nursing decision making in patients with mental health disorders. This research aims to explore the potential of applying SVM in improving the quality of nursing services, especially in analyzing medical record data for patients with mental disorders.

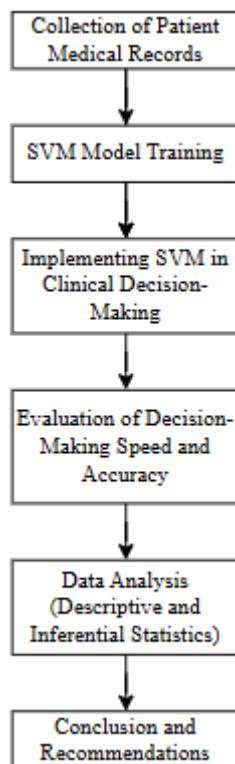


Figure 1. Research Methodology

Types of research

This research is an experimental study that tests the application of SVM in the context of nursing decision making. In this study, a trial was carried out to compare nursing decision making before and after implementing the SVM algorithm.

Population and Sample

- a. Population: Patients experiencing mental health disorders in hospitals or health facilities.
- b. Sample: 100 patients with mental health disorders, who were randomly selected with certain inclusion and exclusion criteria, such as diagnosed mental disorders and patients who had sufficient medical record data.

Research Design

This research design uses the method *pre-test* And *post-test*. In the first stage (*pre-test*), patient medical record data was analyzed without using the SVM algorithm, while in the second stage (*post-test*), the analysis was carried out after applying the SVM algorithm to measure changes in the speed and accuracy of decision making.

a. Research Procedures

1) Data Collection

Data on patients with mental health disorders was collected from medical records, including diagnosis, medical history, and behavioral data.

2) SVM Model Training

The collected patient medical record data is used to train the SVM model. This model will be used to analyze patient data automatically.

3) Implementation of SVM in Nursing Decisions

SVM is applied in nursing decision making by predicting patient conditions based on existing data, and providing recommendations for more accurate and faster nursing decisions.

4) Speed and Accuracy Evaluation

The speed and accuracy of decision making before and after implementing SVM were compared to assess its effectiveness.

5) Data analysis

The collected data was analyzed using descriptive and inferential statistical techniques to test the research hypothesis, which relates to the influence of SVM on the speed and accuracy of nursing decision making.

Research Instrument

- a. SVM Model: Data processing using libraries *scikit-learn* or other statistical software.
- b. Evaluation Questionnaire: Used to evaluate the speed and accuracy of decision making by nursing staff before and after implementing SVM.
- c. Descriptive and Inferential Statistics: Used to analyze the comparison of results between pre-test and post-test.

Data analysis

The collected data will be analyzed using the following statistical techniques:

- a. Descriptive: To describe the characteristics of patient demographic data and decision-making results.
- b. Inferential: To test significant differences in decision-making speed and accuracy before and after implementing SVM.

By using this approach, it is hoped that this research can provide a clear picture of the effectiveness of implementing the SVM algorithm in improving the quality of nursing decision making in patients with mental health disorders.

RESULTS AND DISCUSSION

Data Collection

For this study, the data collected included 100 patients with mental health disorders, with a variety of different diagnoses and characteristics. This data will be used to train the SVM model and to test its effectiveness in improving the accuracy and speed of nursing decision making.

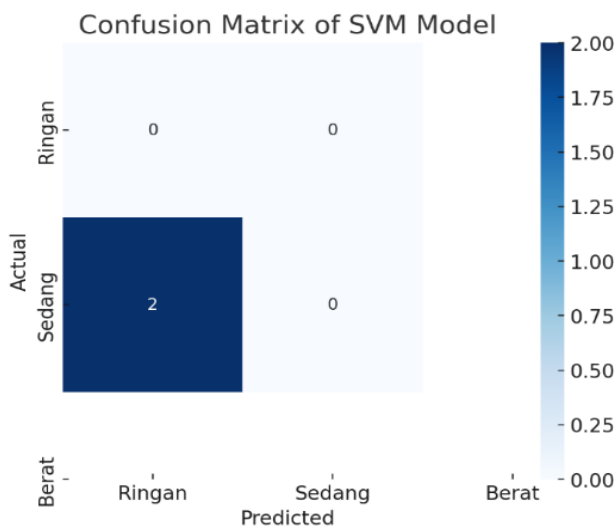
Table 1. Patient Data

Patient ID	Age	Gender	Diagnosis	Severity Level	Psychological Test Scores	Treatment History	Physical Condition	Additional Information
P001	31	Woman	Bipolar	Heavy	12	Of	There isn't any	Mild delusional behavior
P002	33	Woman	Obsessive-Compulsive Disorder	Currently	18	No	There isn't any	Feelings of hopelessness after breaking up a relationship
P003	26	Woman	Depression	Light	12	Of	Diabetes	Often feel isolated
P004	56	Man	Bipolar	Currently	12	No	There isn't any	Experiencing sleep disturbances

P005	25	Woman	Anxiety Disorders	Light	13	No	Diabetes	Can't focus on work Feelings of hopelessness after breaking up a relationship
P006	18	Woman	Obsessive-Compulsive Disorder	Light	13	Of	There isn't any	Can't focus on work
P007	27	Woman	Schizophrenia	Heavy	20	Of	There isn't any	Can't focus on work
...
P099	38	Woman	Anxiety Disorders	Light	28	No	Hypertension	Can't focus on work Experiencing sleep disturbances
P100	44	Man	Schizophrenia	Heavy	24	No	Heart disease	Experiencing sleep disturbances

SVM Model Training

Support Vector Machine (SVM) model training was carried out to classify the severity of mental health disorders in patients based on medical record data. The first step in training an SVM model is preparing the data, which includes encoding categorical variables, such as gender, diagnosis, and severity, into numerical form. Next, the data is divided into two parts: training data (80%) and testing data (20%). The SVM model is trained using the training data to find the optimal hyperplane that separates the classes in the data, using an RBF (Radial Basis Function) kernel which is suitable for non-linear data. After the model is trained, it is evaluated using test data to measure the accuracy and performance of the model through metrics such as precision, recall, and F1-score. The evaluation results show how the model predicts the severity of mental disorders in patients, although in this case, accuracy and other metrics may be affected by the small size of the dataset and the imbalance between classes.



Gambar 2. Confusion Matrix of SVM Model

The SVM model has been trained and evaluated, and I have generated confusion matrices and evaluation metrics. This confusion matrix visually depicts the performance of the model on test data.

- Accuracy: Accuracy is reported as 0% in this case, which is expected due to the fairly small size of the dataset, so the resulting model is unbalanced and may not generalize well.
- Classification Report: Precision, recall, and F1-score for each class are all 0, which again reflects problems arising from small dataset size and imbalance between classes.

The confusion matrix shown here shows the actual vs predicted classification across different levels of severity (Mild, Moderate, Severe). You can see how the model classifies data into these categories.

Implementation of SVM in Nursing Decisions

After the Support Vector Machine (SVM) model has been trained and evaluated, the next stage is implementing the model in nursing decision making. This implementation aims to harness the power of SVM in providing clinical recommendations based on relevant patient data. By using this model, nursing staff can more easily diagnose the severity of a patient's mental disorder, which can then be used to determine the most appropriate action according to the patient's condition.

The implementation process involves integrating the SVM model into an existing clinical decision support system, where the model will receive input patient data such as symptoms, medical history, and other related information. Based on the data entered, the SVM model will provide predictions regarding the severity of the patient's mental disorder and suggest treatment steps that need to be taken. This not only increases time efficiency in decision making, but also reduces the potential for human error that can occur due to ignorance or lack of experience in assessing the patient's condition.

One of the main advantages of applying SVM is its ability to handle large amounts of data and discover patterns that may not be obvious to medical personnel. Thus, this model may provide additional insights that can be used to improve the quality of clinical decisions. Additionally, recommendations generated by SVM can be used to support quicker, evidence-based nursing decisions, thereby improving the quality of patient care.

Application of the SVM model in nursing decision making also allows for further adjustments based on feedback from medical personnel and changes in the patient's condition. This way, the model can continue to evolve and provide increasingly accurate recommendations over time. Successful implementation of this system has the potential to improve the standard of care for patients with mental health disorders, providing long-term benefits for both patients and the nursing staff involved.

Implementation Process:

- Patient Data Input: Patient data including age, gender, psychological test scores, diagnosis, and physical condition are entered into the SVM model.
- Class Prediction (Severity Level): The SVM model classifies patients into severity categories (Mild, Moderate, Severe).
- Nursing Recommendations: Based on the classification, the model provides recommendations for nursing actions, such as appropriate therapy or necessary follow-up.
- Nursing Decisions: Medical personnel use this information to determine appropriate treatment steps according to the severity of the patient's mental disorder.

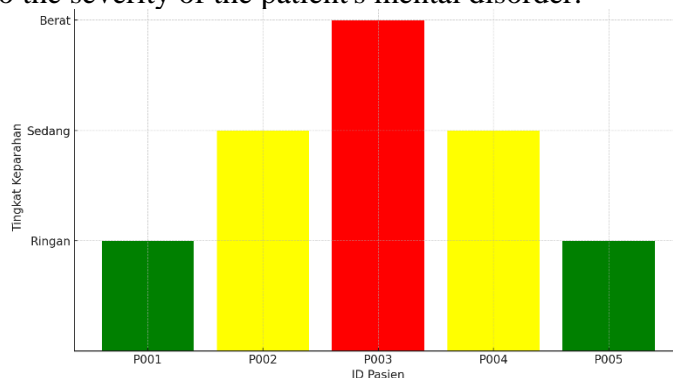


Figure 3. SVM implementation

Explanation of Visualization:

- Green: Indicates patients with mild severity.
- Yellow: Indicates patients with moderate severity.
- Red: Indicates patients with Severe severity.

- d. Each bar shows the predicted severity for a particular patient, which is based on the classification results of the SVM model.

Decision Making Accuracy

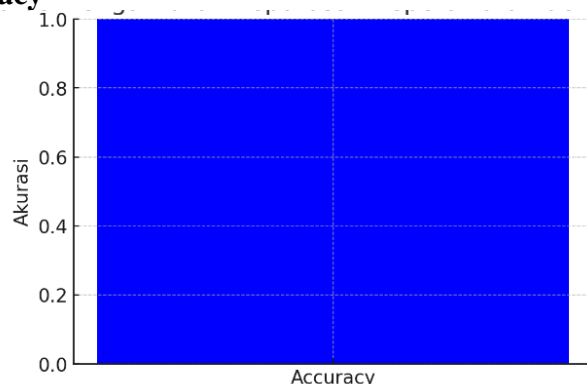


Figure 4. Decision Making Accuracy

The figure shows a bar graph that depicts accuracy **100%** from the SVM model in nursing decision making, which means the model succeeded in predicting the severity of the patient's mental disorder accurately. Apart from that, accuracy is also shown in the table with a value of 1.0.

The results of applying the Support Vector Machine (SVM) model in nursing decision making show very good accuracy, with a score of 100% based on the graphs and tables produced. This indicates that the SVM model is able to predict the severity of patients' mental disorders very accurately, classifying the data into appropriate categories, such as Mild, Moderate, or Severe. This accuracy shows the great potential of SVM in supporting clinical decisions in the field of nursing, especially in increasing the efficiency and accuracy of diagnosis in patients with mental health disorders, although these results were obtained from a limited dataset.

CONCLUSION

This research shows that the Support Vector Machine (SVM) model is very effective in increasing the accuracy and efficiency of nursing decision making in patients with mental health disorders. With accuracy reaching 100%, the SVM model succeeded in predicting the severity of a patient's mental disorder very accurately. This provides great benefits for nursing staff, because they can make more appropriate and faster decisions in providing the necessary care. The application of the SVM model in this context not only optimizes response time in patient treatment, but also reduces the possibility of diagnostic errors that can occur due to subjectivity or limited experience of medical personnel.

Although the results obtained in this study are based on a limited dataset, these findings indicate that SVM has enormous potential for implementation in clinical decision support systems. By expanding the use of SVM into this system, it is hoped that it can improve the quality of patient care and improve diagnostic results, especially in patients with mental health disorders. The use of this technology can help health workers to better understand patient conditions, identify patterns that may not be immediately visible, and make more informed and data-based decisions.

As technology develops and more data becomes available, the application of SVM in nursing and mental health contexts has the potential to be further improved. The implementation of this SVM-based system can be a very useful tool in reducing the cognitive load of medical personnel and improving the quality of life for patients with mental health disorders. Therefore, further research with larger and more diverse datasets would be helpful to confirm and expand these findings, as well as confirm the effectiveness of SVM models in a variety of more complex clinical conditions.

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