

FACTORS RELATED TO THE IMPLEMENTATION OF NURSING CARE DOCUMENTATION

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ABSTRACT

Documentation is legal evidence of the implementation of services in hospitals. The quality of service in hospitals in the form of the nursing process from assessment to evaluation and documentation of nursing care can be assessed from the documentation. This study aims to determine the relationship of knowledge, motivation, workload in the documentation of nursing care in the Inpatient Room of Dumai City Hospital. This type of research is quantitative with a cross sectional design. The population in this study were 121 inpatient nurses with a sample size of 55 people. The sampling technique was proportioned stratified random sampling. The research instrument used was a questionnaire. Data analysis consisted of univariate analysis and bivariate analysis. Bivariate analysis used chi square. The results of the analysis studied showed that there was a relationship between knowledge (p value 0.00 < 0.05), motivation (p value 0.01 < 0.05), workload (p value 0.01 < 0.05) in the implementation of care documentation. nursing in the inpatient ward of the Dumai City Hospital. It is expected that further researchers can conduct further research on the effectiveness of education and supervision of the implementation of nursing care documentation and supervisor monitoring in the implementation of nursing care documentation in the Inpatient Room of Dumai City Hospital.

Keywords: Workload, Documentation, Motivation, Knowledge

INTRODUCTION

Documentation is legal evidence of the implementation of services in the hospital. To assess the quality of hospital services, it can be seen from the implementation of nursing care documentation, in the form of a good nursing process from assessment to evaluation and documentation of nursing care. Documentation is also useful for hospitals in improving accreditation standards, as a means of inter-professional communication, indicators of service quality, proof of responsibility, and accountability for nurses (Iyer & Nancy, 2012). The results of a study conducted by Firman (2014) at the Mentawai Islands Hospital in the medical record section obtained Documentation research results of 52.5% is not good because the process of documenting nursing care carried out by nurses is still limited to the initial assessment which contains the patient's identity , the reason for hospitalization and data grouped by biopsychosocial-spirituality is rarely done.

Salmawati's research (2013) at the Regional General Hospital Laburan Baji Makasar was conducted to determine factors related to the implementation of nursing care documentation with a quantitative analysis approach through questionnaires obtained p-value <0.05 on the factors of knowledge, motivation, and time. This shows that there is a significant relationship between the level of knowledge, motivation, and time in documenting nursing care (Durrenting Training at RSUD Laburan Baji Makasar, 2013). The low score for the quality of nursing care documentation is influenced by the behavior of nurses in documenting nursing care. Based on the basic theory of Lawrence Green explains that human behavior is influenced by two main factors, namely behavioral factors (behavior causes) and factors outside of behavior (non-

behavior causes). Next is the behavior itself determined or formed from 3 factors, namely: predisposing factors which include knowledge, attitudes, motivation, and so on, enabling factors which include the physical environment, availability or unavailability of facilities, and so on, the three reinforcing factors which include laws, regulations - regulations, supervision, and so on (Notoadmojo, 2014).

Based on the results of a survey conducted at the Dumai City Hospital regarding a comparison of nursing care documentation in the 2018 inpatient assessment, the results obtained were 58%, the diagnosis nursing 62%, intervention nursing 57%, implementation 60%, evaluation 55% of all inpatients at the Hospital of Dumai City. In 2019, the nursing field again conducted a survey at the Dumai City Hospital and found a comparison of nursing care documentation in the study of inpatients obtained an average of 61% that was completely filled out, nursing diagnoses 63%, interventi nursing 58%, nursing implementation 78%, nursing evaluation 75% and the highest patient development record reported was in the male inpatient room 88% while in the ICU room it was 50.75%. Comparative achievement of nursing care documentation in the implementation of nursing at the Dumai City Hospital was highest in male inpatient rooms 85.27% and 36.10% ICU.

From the results of interviews with inpatient nurses at the Dumai City Hospital for 10 nurses, it was found that 3 nurses in carrying out nursing care still did not understand filling out several documentation forms, as many as 2 nurses said there was no recent training on nursing, while many new nurses enter so that senior nurses rely on new nurses to carry out nursing care, but new nurses have not been socialized about filling out nursing care documentation for patients correctly and appropriately. Meanwhile, the other 3 nurses said that the amount and lack of incentives received were not proportional to the workload, so the motivation to document nursing care was lacking. As many as 2 nurses said the high number of inpatients also resulted in them being busy with patients so there was no time to properly and completely document nursing care. The results of this survey indicate that the completeness of documentation of nursing care at the Hospital of Dumai City is still low, this is caused by several factors from the results of direct interviews with nurses such as knowledge, motivation and workload. The low completeness of nursing care documentation will certainly have a negative impact on the overall quality of health services and result in decreased patient satisfaction with nursing services. Based on this background, the authors are interested in conducting research on Factors Associated with the Implementation of Nursing Care Documentation in the Inpatient Room of the Dumai City Hospital.

METHOD

This research is a type of quantitative research with a cross sectional design. This design is an analytic research design that aims to determine the relationship between variables, which are independent variables.

and the dependent variable is identified in the time unit (Dharma, 2012). This research was conducted in the Inpatient Room of the Dumai City Hospital and was carried out from July to August 2021. The population of this study were Inpatient Room nurses, totaling 121 people. The number of samples in this study using the Slovin formula obtained a sample size of 55 people. The sampling technique is proportioned stratified random sampling. The research instrument used was a questionnaire. Data analysis consisted of univariate analysis and bivariate analysis. Bivariate analysis used chi square.

RESULTS

Distribution of Respondents' Knowledge

Knowledge	F	%
Well	23	41.8
Enough	22	40.0
	10	18.2
Not enough Total	55	100

Based on table, it was found that 23 respondents (41.8%) had good knowledge, 22 respondents.

Frequency distr	ibution of respondents' mo	tivation
Motivation	F	%
High	21	38.2
Low	34	61.8
Total	55	100

Based on the table above, it was found that 21 respondents (38.2%) had high motivation, and 34 respondents (61.8%) had low motivation.

Workload F %							
Workload		/0					
High	20	36,4					
Low	35	63,6					
Total	55	100					

Frequency Distribution of Respondents' Workload

Based on the table above, it was found that 20 respondents (36.4%) had high workload, and 35 respondents (63.4%) had low workload. Erequency Distribution of Respondent Documentation

Frequency Distribution of Respondent Documentation						
Dokumentasi	F	%				
complete	20	36,4				
incomplete	35	63,6				
Total	55	100				

Based on the table above, it was found that 20 respondents (36.4%) had complete documentation, and 35 respondents (63.6%) incomplete documentation.

The Relationship between Respondents' Motivation and Documentation of Nursing Care in Inpatient Rooms at Dumai City Hospital in 2021

Nursing Care Documentation							
Motivation		Total					P valu e
	incor	nplete	complete				
	f	%	f	%	f	%	
High	3	14,3	18	85,7	21	100	0,01
Low	17	50,0	17	50,0	34	100	-
Jumlah	20	34,6	35	63,6	55	100	

The table above shows that 85.70% (18 respondents) motivational factors are in the high category with complete nursing care documentation and 50.0% (17 respondents) incomplete nursing care documentation. Statistical test results showed that the p value

of 0.01 < 0.05 indicated that there was a relationship between motivation and nursing care documentation

The Relationship between Respondents' Knowledge and Documentation of Nursing Care in
the Inpatient Room of the Dumai City Hospital 2021

Knowledge	Nursing Care Documentation					Total		
	Incomplete Complete		C	Complete			_	
	F	%	F	%	F	%		
Good	3	13,6	20	87	23			
Good enough	12	54,5	10	45.5	22	100	0.000	
Less	5	50	5	50	10			
Total	20	36,4	35	63.6	55			

The table above shows that 87.0% (20 respondents) the knowledge factor is in the good category with complete orphanage assistance and 54.5% (12 respondents) the orphanage is incomplete with sufficient knowledge. Statistical test results show that p value 0.00 <0.05 indicates a relationship between knowledge and humanitarian assistance

Relationship of Respondents' Workload to Documentation of Nursing Care in Inpatient Rooms at Dumai City Hospital in 2021

	Р						
	BebanKerja				То	tal	value
	Desum terju <u> </u>	complete	incomplete				
			Lengka				
	f	%	F	%	f	%	
High	3	15	17	85,0	20	100	0,01
Low	17	48,6	18	51,4	35	100	
Total	35	63,6	20	36,4	55	100	

The table above shows that 85.0% (17 respondents) workload factor in the high category with incomplete nursing care documentation and 48.6% (17 respondents) complete nursing care documentation with low workload. Statistical test results showed that the p value of 0.01 < 0.05 indicated that there was a relationship between workload and nursing care documentation.

DISCUSSION

The results of the study obtained from 55 respondents 41.8% had good knowledge of nursing care. This is in line with research conducted by Salmawati (2013), with the results of the study 57.4% had a high knowledge level and 42.4% had a low knowledge level. The nurse's knowledge of nursing care documentation is the result of remembering something the nurse has learned about nursing documentation. Nurses must have evidence of recording and reporting that is useful for the benefit of clients, nurses and the health team in providing accurate and complete health services in writing as the basis for nurse responsibilities. It is important for nurses in documenting nursing care so that it can be used as responsibility and accountability for various possible problems experienced by clients, satisfied or dissatisfied. Nuryani (2014) states that the knowledge of nurses determines the actions of nurses in providing services to patients, so that nurses' actions based on knowledge will provide better service compared to nurses who lack knowledge.

The results of the study of 55 respondents showed that 61.8% had low motivation, while 38.2% had high motivation. These results are in line with Sanjaya's research (2016) that motivation

influences the performance of nurses in the documentation of nursing care in the Inpatient Room of the Tourism Hospital at the University of Indonesia Timur Makassar.

Motivation is a condition that directs oneself to achieve organizational goals (work goals). Mental attitude is a condition of a person who encourages to achieve maximum working conditions (Zoelddhan, 2012). Grace et al. (2015) suggests that motivational factors such as leadership, interdisciplinary team, facilitating and creating a conducive environment for documenting nursing care, the work environment is very important for improving documentation compliance, supportive supervision will also produce good documentation and support from others in the nursing profession and outside the profession motivate nurses to document client care. According to the assumptions of researchers, nurse motivation is needed in nurse work because good motivation can foster morale, so that the work done will get more satisfying results. The higher a person's motivation in working, the better the results obtained. If a person's motivation is lacking, the enthusiasm for doing the work will also be reduced because there is no enthusiasm for work.

The results of the study of 55 respondents obtained 36.4% high workload while 63.6% low workload. In the research results of Ilyas (2012) that the high workload of nurses affects the productivity of nurse performance including the activity of documenting nursing care. This is also according to the statement of Sochalski (2014), the more number of patients will increase the workload and will ultimately affect the quality of service.

Workload is a condition that burdens the workforce, both physically and non-physically at work. Workload affects the quality of nurses in documenting nursing care. Nurses will tend to be in a hurry in carrying out the nursing process and forget to document it so that the completeness of the documentation is not fulfilled (Andri, Indra & Susmarini, 2015).

According to the assumptions of researchers, workload is a systematic study in order to obtain information on determining the number of employees to complete work within a certain period of time to achieve organizational goals. The more job descriptions of an employee, the more tasks that must be done, both main tasks and additional tasks.

The results of the study from 55 respondents obtained incomplete documentation of 63.6% while complete documentation of 36.4%. This result is in line with the results of a study conducted by Endra Amalia with the results of a complete nursing care documentation study of 27.1%, while incomplete documentation was 72.9%.

Good and quality nursing documentation must be accurate, complete and up to standard. If nursing activities are not documented accurately and completely, it is difficult to prove that nursing actions have been carried out correctly (Supriatti & Ashiandy, 2018).

According to the researcher's assumption, the completeness of documentation is very much needed in a hospital room because patient data is needed for further action, so that good documentation can form good actions. Good documentation requires evidence of recording and reporting that nurses have in carrying out care records that are useful for the benefit of clients, nurses, and the health team in providing health services on the basis of accurate and complete communication in writing with responsibilities.

The results showed that good knowledge with complete documentation was 20 respondents (87.0%), and poor knowledge with incomplete documentation was 5 respondents (50.0%). The results of the Chi-square test obtained p value = 0.00 < 0.05, indicating that there is a relationship between knowledge and documentation of nursing care.

This is in line with research conducted by Salmawati (2013), the results of the Chi-Square test obtained a value of p = 0.013 (p <0.05), that there is a relationship between the level of knowledge in the implementation of nursing care documentation which describes the actions of nurses in the practice of nursing care documentation because knowledge is an important basis for the implementation of a job. Knowledge also directs a nurse to act. Incorrect knowledge regarding the documentation of nursing care, then the results of the documentation that will be carried out will not be good. This is also in line with research conducted by Putri (2013) showing that there is a relationship between nurse knowledge and the completeness of nursing care documentation of nursing care. Nurses who have good knowledge tend to do documentation of appropriate nursing care.

According to the researcher's assumptions, good knowledge will affect the documentation of nursing care that is accurate, complete and according to standards, and knowledge that is not good will affect the documentation of nursing care which is incomplete and not in accordance with standards.

Knowledge of the completeness of documentation is very necessary in a hospital room because patient data is needed for further action, so knowledge of good documentation can form good actions. Good documentation requires evidence of recording and reporting that nurses have in carrying out care records that are useful for the benefit of clients, nurses, and the health team in providing health services on the basis of accurate and complete communication in writing with responsibilities.

The results showed that 18 respondents (85.7%) had high motivation with complete documentation, and 3 respondents (14.3%) had good knowledge with incomplete documentation. Chi-square test results obtained p value = 0.00 < 0.05, indicating a relationship between motivation and documentation of nursing care.

Motivation that gives strength to a person's behavior can come from internal or external. Hasniah (2013) explained that the high motivation of nurses will have a good impact on the performance of nurses in carrying out nursing documentation, conversely the low motivation of nurses will have a negative impact on the performance of nurses in carrying out nursing documentation. The theory of motivation provides an explanation of a person's needs and desires and shows the direction of his actions.

According to the researcher's assumption, nurse motivation is very much needed in nurse work because good motivation can foster enthusiasm for work, so that the work done will get more satisfying results. The higher a person's motivation to work, the better the results obtained. High motivation will provide better documentation of nursing care for patients, so that they can provide more appropriate and accurate actions to patients. If a person's motivation to work is low, then carrying out work such as documenting nursing care will be reduced, due to a lack of enthusiasm for carrying out these actions so that the actions given to patients will also be reduced.

The results showed that 3 respondents (15.0%) had a high workload with complete documentation, and a high workload with incomplete documentation 17 respondents (85.0%). The results of the Chi-square test obtained p value = 0.01 < 0.05 indicating that there is a relationship between workload and documentation of nursing care. This is in line with research conducted by Susiana (2019) which shows that there is a relationship between workload and documentation of nursing care. It is known that heavy workload distribution data can lead to

poor documentation of nursing care. Due to the quantity or the number of types of work that must be completed by professional health workers within one year in one health facility. Workload is a condition that burdens the workforce, both physically and non-physically at work. Workload also affects the quality of a nurse in documenting nursing care. The nurse will rush inside To do processdo cumentation so thatdocumentation completeness is not fulfilled (Andri, 2015).

According to the assumptions of researchers, workload is a systematic study in order to obtain information on determining the number of employees to complete work within a certain period of time to achieve organizational goals. Someone who has a heavy workload will affect the documentation of complete nursing care for patients, because it is caused by fatigue, not concentrating on documenting patient nursing care. Someone who has a light workload will affect the completeness of the patient's nursing care documentation because the absence of workload can make a person able to concentrate on documenting patient nursing care.

CONCLUSION

Knowledge, motivation, and workload have a relationship with the completeness of nursing care documentation. Good knowledge will affect the documentation of nursing care that is accurate, complete and according to standards. High motivation will provide better documentation of nursing care for patients, so that they can provide more appropriate and accurate actions to patients.

Someone who has a heavy workload will affect the documentation of complete nursing care for patients, because it is caused by fatigue, not concentrating on documenting patient nursing care. Someone who has a light workload will affect the completeness of the patient's nursing care documentation because the absence of workload can make a person able to concentrate on documenting patient nursing care.

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