

# The Related Factors to Nursing Documentation at General Hospital Dr. Zainoel Abidin Banda Aceh

Saumalina<sup>1</sup>, Marlina<sup>2</sup>, Said Usman<sup>3</sup>

<sup>1</sup>Master of Nursing Student, Universitas Syiah Kuala Banda Aceh-Indonesia,

<sup>2,3</sup>Faculty of Nursing, Universitas Syiah Kuala Banda Aceh-Indonesia

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## ABSTRACT

Nursing documentation is written information resulting from the nursing process to patients. Good documentation reflects accuracy in providing services. Inadequate supervision and motivation are some problems that affected to the nursing documentation. This study aimed to determine the factors related to nursing documentation at the General Hospital dr. Zainoel Abidin Banda Aceh. This study used a quantitative study; analytic survey with a cross-sectional approach. The sample sizes are 185 respondents on nurses and 185 medical records. Data collection tools are in the form of questionnaires to the nurses and observation sheets to the medical records. Data analysis was performed with chi-square and logistic regression tests. The results showed that the variables related to nursing documentation were supervision (p-value=0.000) and motivation (p-value=0.008). The factor most related to nursing documentation is supervision with an OR value of 6.052. Supervision has the most to do with nursing documentation. Periodic supervision and the presence of new technology in terms of documentation can improve the quality of nursing documentation.

**Keywords:** Documentation, Nursing, Motivation, Supervision

## INTRODUCTION

Nurses are among the largest service providers in the health care system. Nurses play an important role in improving the quality of hospital services, especially in nursing documentation to make patient information clearly recorded and accountable as per established standards.<sup>1,2</sup> The Patient Care Standards outlined in the 1st edition of the National Standards for Hospital Accreditation outline that hospitals are required to provide care plans that are created and documented in medical records. This standard emphasizes the existence of good and accurate documentation of patient care and according to standards, especially in nursing documentation.<sup>3</sup>

Nursing documentation is in the form of written information from the nursing care process provided to patients. Some of the reasons nurses do documentation include as a form of communication between the nursing team and other caregiving professionals, especially individuals and groups involved in accreditation, credentials, laws, regulations, government interests, writing, and activities related to assessing the quality of nursing services. Good and appropriate documentation capable of providing an accurate reflection of nursing<sup>4</sup> assessments, clinical changes and circumstances, treatments provided as well as related patient information to support a multidisciplinary team in providing good care.<sup>2</sup>

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**Corresponding author:** Marlina, Faculty of Nursing, Universitas Syiah Kuala Banda Aceh-Indonesia

Email: nersmarlina@unsyiah.ac.id

Nursing Documentation in several hospitals abroad, including in one of Iran's emergency departments, the quality of good documentation is 42.2%. In the Intensive Cardiology Care Unit, when viewed from the aspect of structure, 98% of the documentation is declared complete in its filling but when viewed from the content aspect, only 49% is categorized as good. While in one of the elderly health care units in the Netherlands of the 197 medical records assessed, 52.8% were categorized as complete in terms of the structure of nursing planning, the quality of documentation in the initial assessment of nursing 61.4% was in a complete category and the quality of diagnosis documentation of 41.8% was in a complete category.<sup>6,7</sup>

The results of another study related to nursing documentation in three hospitals in Jamaica with 119 medical record samples assessed where 90% documented the physical assessment of patients 1x24 hours (focused 36.8%, systematic 23.2%), less than 5% filled in patient education, and 13.5% had documented complete discharge planning within 72 hours of admission.<sup>8</sup>

The results of research related to documentation in Indonesia include the influence of behavior on the completeness of documentation in the inpatient room of one of the hospitals in Indonesia from 89 medical records that are considered to be obtained only 77.5% are categorized as complete.<sup>9</sup> Nursing documentation is stated to be complete but nurse knowledge is in the category of lacking. Meanwhile, in the hospital inpatient room in Mataram,<sup>10</sup> 71.6% were declared incomplete.<sup>11</sup>

Research related to nursing documentation found that the consistency between the activities carried out and the documentation was only 40%, especially in planning that was not based on a nursing diagnosis. In addition, there are findings that writing measuring results without writing the measuring instruments used, rarely fills in the assessment of decubitus risk, filling in wound characteristics, assessing mental abilities and, not specifically documentation and supporting

reading results. But another thing that is most often encountered is subjectivity and poor quality characterized by documentation tools and the level of commitment of the nurse, thus the importance of the role of the leader in evaluating nursing documentation.<sup>13</sup>

One qualitative study of nursing documentation showed that there are several problems related to the documentation of process from the perspective of the head of the room and the implementing nurse. The problem is the lack of supervision of nurses related to documentation, competence, lack of confidence, and motivation of nurses in documentation. This research confirms that documentation is an important element of building a positive relationship between nurses and patients to create quality services and the need for support from management to follow up on problems obtained, especially related to supervision, competence, confidence, and motivation of nurses so that the quality of nursing documentation will be better in the future.<sup>15</sup>

Based on the results of interviews with three room heads in February 2022, it was found that overall the documentation techniques were good but must be improved again. It is still found that nursing documentation is incomplete, there is duplication of filling from previous shifts, loss of nursing diagnoses without information is resolved or has not been resolved, the emergence of diagnoses that are not accordance with the patient care plan, there are subjective and objective data that are still not in accordance with the patient's clinical condition.

In addition, other obstacles in documentation such as limited time, high service mobility, the existence of non-nursing duties during service, and limited discussions related to nursing documentation. Currently, there is a significant increase during the accreditation where documentation is more focused on the existence of Nursing Care Standards that have been set in all divisions including about care standards to Covid-19. In addition, there is verification before the medical record is submitted to the medical record installation.

Based on interviews with five implementing nurses in February 2022, nurses argued that the documentation was complete but not optimal. The obstacle is insufficient time for the mobilization of non-nursing services. In addition, often at the end of the shift bumps with patient problems like the patient's serious condition.

Based on the observation results on the integrated patient development record sheet documentation has been filled with a Subjective, Objective, Assessment and Planning (SOAP) format with clear writing of time and person in charge of the nurse, but some are found to be duplication between shifts, supporting objective data are not in sync, do not show measurement results that are in accordance with the 'patient care plan'. Surveys or audits of 5 medical records every month are still continuing to see the completeness in filling out the form. Another thing that has been done is the presentation of cases in each room 2 times a year and journal studies once a year for each room. This has stalled during the covid-19 pandemic but has restarted at the end of 2021. Some things that have not been completed include the percentage of room cases that are still limited. So it needs to be evaluated gradually, the availability of a system that facilitates filling, increasing the number of medical records that are audited every month, looking for obstacles in filling, periodic supervision, training, and re-socialization according to standard operating procedures.

Based on the background above, the researcher examined how the factors related to nursing documentation at General Hospital dr. Zainoel Abidin Banda Aceh so that the formation of quality care and ensuring patient safety.

## METHODS

This study used a quantitative study; analytic survey with cross-sectional approach, sample determination by purposive sampling. The inclusions criteria consist of nurse who is willing to be a respondent, work period  $\geq 1$  year, not on duty/sick/study assignment

and medical records with treatment  $\geq 3 \times 24$  hours. Data collection used questionnaires which consists of demographic data, factors related to documentation and observation sheets in the form of nursing process evaluation instruments and integrated patient development records and documentation form developed by the Hospital in the research area of nursing field that collaborated with the Nursing Faculty in Universitas Syiah Kuala.

Questionnaires are distributed and answered directly by respondents when the respondents are on duty. Meanwhile, observations are carried out by researcher on the medical records of the treated patients. When the data has been collected, then researcher checked for completeness, processed, and analyzed. Univariate analysis for each variable is categorized as good/high if  $x > 75\%$  or less/low if  $x \leq 75\%$  to the maximum value of the questionnaire and then calculated it in percentage form. Bivariate analysis used chi-square test and multivariate analysis used the logistic regression test.

## RESULT

The results of the data analysis in this study can be determined in the tables below:

### Univariate Analysis

Table 1 shows that most of the respondents were women (84.9%), the age of the most respondents were young adult (67%). Most of their education level were diploma III nurse (47%), with the most years of work of more than 5 years (56.2%) and status non-government employees (68.1%). When viewed from the level of clinical nurses, (45.9%) are at the level II.

Based on table 2, it can be concluded that nurse supervision related to nursing documentation is in the good category (84,3%).

Based on table 3 above, it can be concluded that the motivation of nurses in nursing documentation is in the high category (88,6%)

Based on table 4 above, it can be concluded that the nursing documentation is in the good category (90,3%)

### Bivariate Analysis

Based on table 5, it was found that nurses received good supervision and documented nursing well, namely 147

**Table 1: Demographic Characteristics of Respondents**

Characteristics of Respondents	Frequency (f)	Percentage (%)
<i>Gender</i>		
Female	28	15,1
Male	157	84,9
<i>Age</i>		
Young Adult	124	67,0
Older Adult	61	33,0
<i>Education</i>		
Diploma III	87	47,0
Nursing Academic	3	1,6
Diploma IV	29	15,7
Nursing Academic	66	35,7
Bachelor of Nursing		
Nurses (Nursing Profession)		

Characteristics of Respondents	Frequency (f)	Percentage (%)
<i>Work experience</i>		
1-5 years	81	43,8
> 5 years	104	56,2
<i>Employment status</i>		
Government employees	59	31,9
Non government employees	126	68,1
<i>Clinical Nurse Level</i>		
Level I	60	32,4
Level II	85	45,9
Level III	40	21,6

respondents. Through statistical tests, p-value = 0.000 is obtained. Thus, the p-value <0.05 so the null hypothesis is rejected. This shows that there is a relationship between supervision and nursing documentation at General Hospital dr. Zainoel Abidin Banda Aceh.

Based on table 6, it was found that nurses were highly motivated and documented nursing well, namely 152 respondents. Through statistical tests, p-value = 0.008 is obtained. Thus, the p-value <0.05 so the null hypothesis is rejected. This shows that there is a relationship between nurse motivation and nursing documentation at General Hospital dr. Zainoel Abidin Banda Aceh.

**Table 2: Supervision of Nurse in Nursing Documentation (n=185)**

Supervision	Frequency	Percentage (%)
Good	156	84,3
Less	29	15,7
Total	185	100

**Table 3: Distribution of Motivation in Nursing Documentation (n=185)**

Motivation	Frequency	Percentage (%)
High	164	88.6
Low	21	11.4
Total	185	100

**Table 4: Nursing Documentation (n=185)**

Nursing documentation	Frequency	Percentage (%)
Good	167	90.3
Less	18	9.7
Total	185	100

**Table 5. The Relationship between Supervision and Nursing Documentation at General Hospital dr. Zainoel Abidin Banda Aceh in 2022 (n=185)**

Supervision	Nursing documentation				Total		a	p- value
	Good		Less					
	f	%	f	%	f	%	0,05	0,000
Good	147	94,2	9	5,8	156	100		
Less	20	68,9	9	31,1	29	100		
Total	167	90,3	18	9,7	185	100		

**Table 6: The Relationship between Motivation and Nursing Documentation at General Hospital dr. Zainoel Abidin Banda Aceh in 2022 (n=185)**

Motivation	Nursing documentation				Total		a	p- value
	Good		Less		f	%		
	f	%	f	%	f	%		
Good	152	92,7	12	7,3	164	100	0,05	0,008
Less	15	71,4	6	28,6	21	100		
Total	167	90,3	18	9,7	185	100		

### Multivariate Analysis

Based on a multivariate analysis with logistic regression tests, the most factor related to nursing documentation is supervision (OR:6.052).

## DISCUSSION

### The relationship of supervision to nursing documentation

Based on table 2, it was found that nurse supervision related to nursing documentation was in the good category of 156 respondents. Based on table 5, it was found that nurses who received good supervision also documented nursing well, namely 147 respondents. Through statistical tests, p-value = 0.000 is obtained. Thus, the p-value <0.05 so the null hypothesis is rejected. This shows that there is a relationship between nurse supervision and nursing documentation at the General Hospital dr. Zainoel Abidin Banda Aceh.

The results of this study are supported by studies conducted by Tajabadi (2019) that good supervision has a significant relationship with nursing documentation in hospitals.<sup>14</sup> A good vision will provide good nursing documentation results as well.<sup>9</sup> A qualitative study about nursing documentation also explained that through good supervision it will have a good impact on nurses in nursing documentation and will be illustrated by the quality of care services provided.<sup>15</sup>

Nursing supervision is the factor most related to the nursing documentation with an Odd Ratio value of 6,052. For this reason, the importance of the role of leaders in the room such as the head of the room / team leader in supervising nurses, especially related to

nursing documentation. Good leadership will have a positive impact in nursing documentation. Good communication between nurses and leaders, especially the head of the room in providing assistance and monitoring in nursing documentation, also has a positive relationship with the quality of service.

### The relationship of motivation to nursing documentation

Based on the univariate data in table 3, it was found that the motivation of nurses in nursing documentation was in the high category of 164 respondents. Based on the table 6, there were nurses who were highly motivated and documented nursing well, namely 152 respondents. Through statistical tests, the p-value = 0.008 was obtained. Thus, the p-value <0.05 so the null hypothesis is rejected. This shows that there is a relationship between nurse motivation and nursing documentation at General Hospital dr.Zainoel Abidin Banda Aceh.

Study showed that nurse motivation has a significant relationship with nurses' compliance in complementing the nursing documentation<sup>9</sup>. Motivation is an important factor in nursing documentation. The qualitative study explained that the motivation of the nurse may decrease due to the workload and other responsibilities that the nurse must perform during the duty shift.<sup>15</sup>

The authors assumed that nurses' motivation, which is already high in hospitals today, is a challenge for hospitals to be able to continue to maintain them. Motivation will generally be in line with the provision of appropriate rewards (material and non-material) to nurses so that the satisfaction

of staff will increase and the services to the patient become more quality.

## CONCLUSION

Based on the results of this study, showed that the factors related to nursing documentation are supervision and motivation. Then the results of the regression test showed that the most related variable in nursing documentation was supervision (OR: 6,052).

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**Limitations:** The results of the documentation audit are basically in the form of percentages, but the authors categorize them in the form of ordinal measuring scales with percentages of both  $> 75\%$  and  $\leq 75\%$ , preferably the measuring scale used is the ratio or following the health regulation related to medical records that must be filled 100% for more accurate to the results in this study.

**Ethical Clearance:** Research ethics permit obtained from the Ethics Committee for health research of general hospital dr. Zainoel Abidin, Banda Aceh with the Registration Number: 056/ETIK-RSUDZA/2022.

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**Conflict of interest:** The authors declare no conflict of interest in this study.

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