



## RESEARCH ARTICLE

URL of this article: <http://heanoti.com/index.php/hn/article/view/hn1401>

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**Factors Influencing Nurses in Implementing Documentation of Nursing at Muhammadiyah Hospital, Kediri City**

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**ABSTRACT**

Documentation in nursing has important role against various kinds of people's demands which are more and more critical and influence people's awareness for their rights from unit of unity. This research aimed at knowing the factors that influenced nurses in implementing the documentation of nursing at Muhammadiyah Hospital, Kediri City, Indonesia. Design of the research was correlational with cross sectional approach. Through simple random sampling technique, it was obtained 78 respondents. Data collection utilized questionnaire and the result of this research was analyzed by utilizing logistic regression. The result of this research showed that most of the respondents had motivation to conduct documentation of nursing in medium category, which were 44 respondents (56.4%), had knowledge in category of sufficient which were 42 respondents (53.8%), and had work stress in medium category, which were 45 respondents (57.7%). In addition, most of respondents had implementation of documentation in category of being not implemented, which were 44 respondents (56.4%). The analysis result of logistic regression showed that the factor of motivation and work stress influenced against the implementation of the documentation of nursing at Muhammadiyah Hospital, Kediri City, East Java Province, Indonesia. In implementing documentation, the factor of motivation and work stress really influenced the nurses in implementing documentation of nursing. In order to increase nurse's motivation, it needed to conduct control against nurse's behavior in documenting nursing care, needed to socialize while working in which it was expected to be able to solve a problem from the client.

**Keywords:** Knowledge, Motivation, Work stress, Nurse, Documentation of nursing

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**INTRODUCTION****Background**

Health service system was a nursing service that underwent a fundamental change in 21<sup>st</sup> century. The change was an impact from the change of population, which the people would more and more develop in which the people would be more educated, more aware of rights and law, more critical against various kinds of nursing service and the development of science and technology recently (Kuntoro, 2011). Furthermore, nursing service had important role in keeping and increasing quality of health service (Dermawan, 2012).

The nursing process was a systematic way that was conducted by nurses and together with client in determining nursing care needs through conducting a study, determining diagnosis, planning an action that would be taken, taking the action, and evaluating the result of nursing care that had been given by focusing to the client, orientating to the goal in every stages, occurring dependence each other, and having connection each other (Hidayat, 2008).

Documentation in nursing had important role against various kinds of people's demands which were more and more critical and influenced people's awareness of their rights from the unit of unity. The documentation of nursing was a proof of record and report which were owned by nurse in care records that was used for client's, nurse's, and health team's necessity in providing health service with accurate and complete basis. Besides, in writing, it was as a nurse's responsibility (Wahid & Suprpto, 2012). As the nurse's responsibility against client, society, and government, all of the stages in the nursing process must be documented well and correctly (Ali, 2010). The characteristic of good documentation of nursing care was based on factual basis, accuracy, completeness, conciseness, organization, time lines, and legibility (Potter & Perry, 2009).

The problem that existed since formerly was on the nursing service which the nurses felt their daily duty as a routineness and as an intuition. Therefore, the nurses who could implement nursing care based on the care standard had important role in the effort in improving the quality of service. The quality of service would be very influenced by motivation and nurse's performance if the nurse obtained job satisfaction based on what they had expected (Gibson, et al,2001).

The experience in the field showed that documentation system that was conducted in several hospitals had not showed complete data based on what had been expected. RSUPN Cipto Mangunkusumo (RSCM), which was as a central referral hospital in the Capital, had not been able to show appropriate documentation system as what was demanded by nursing profession (Herawati, 2002). Conducted research by Agung Pribadi regarding analysis of the factor of nurse's knowledge, motivation, and perception about supervision of head of space against the management of documentation of nursing care in inpatient ward of RSUD Kelet Jepara, Central Java Province, Indonesia stated that only around a half of nurses (51.6%) who showed the factor of good nurse's knowledge. Besides, the documentation of good nursing care was only conducted by (58.1%) nurses. The documentation of nursing care was determined its quality if the written nursing process was appropriate with the standard of documentation, which were the study, nursing diagnosis, planning, observation, and evaluation the client's response against conducted action.

Diagnosis stage was a stage of very critical decision making in which the nurses could determine the problem that was really felt by the client with their rational argumentation. The more trained the nurses for thinking critically, the nurses would be deeper in determining the problem or diagnosis the client's nursing for either possible, potential, or actual nursing diagnosis. Critical thinking needed this conceptualization, even this skill was very important for formulating diagnosis because basically, taxonomy of nursing diagnosis was a concept (NANDA, 2003). According to taxonomy of NANDA II, nursing diagnosis was divided by 13 domains, 46 classes, and 167 nursing diagnosis. The thirteen (13) domains were consisted of health promotion, nutrition, elimination, cardiovascular/pulmonary response, perception and cognition, self-perception, the correlation of role, sexuality, coping, life principles, safety, comfort, and also growth and development (NANDA, 2003).

There were many factors that influenced the system of documentation in a hospital that had not been optimal. Phenomenon of the implementation of documentation was influenced by several factors, such as management factor, motivation factor, facility and infrastructure factor, and time factor. Those four factors were also discussed in the result of conducted research by Safriana, Trisna (2008) which showed quite satisfied result. Trisna's research result showed that management factor in good category was 89.7% (61 respondents), motivation factor in good category was 100% (68 respondents), facility and infrastructure factor in good category was 86.8% (59 respondents), meanwhile, the time factor in good category was 82.4% (56 respondents).

Although the document of nursing care was really needed for either patient's necessity or nurse's necessity, in reality, the completeness of filling document was still less attention, thus, there were so many documents of nursing care whose contents had not been complete. The result of previous research through interview with several nurses who worked in inpatient wards at Muhammadiyah hospital showed that several problems of documentation of nursing care were: lack of nurse's motivation in documenting nursing care, the writing of document took much time, more focused to the patient's service. Some nurses honestly felt that the writing of documentation which was over demanded would have impact to reduce time for providing service directly to the patients and they also stated that documentation could be conducted later when they had finished to do all activities in the room.

According to American Heritage Dictionary of the English Language : Fourth Edition (2000), behavior of delay to do something / proastination was did not do duty, delayed or canceled to do something. Delaying or not completing documentation of nursing could be caused by several things, such as motivation, knowledge, or work stress.

## Purpose

Based on the explanation above, the researchers were interested for knowing nurses' barrier in conducting documentation of nursing in inpatient ward. Furthermore, this research aimed at knowing the factors that influenced nurses in implementing documentation of nursing in Muhammadiyah Hospital, Kediri City, East Java Province, Indonesia.

## METHODS

This research utilized research method of correlation by utilizing cross sectional approach. The population of this research was all of the nurses in inpatient ward at Muhammadiyah hospital, Kediri City, East Java, Indonesia with simple random sampling technique and it was obtained 78 respondents (sample).

This research had independent variables, which were: knowledge, motivation, and work stress (X). Besides, it also had dependent variable, which was the implementation of nursing documentation (Y). After all

of the data were collected, their completeness were checked. Then, the researchers analyzed the data for examining the correlation of both variables by utilizing logistic regression method.

## RESULTS

### Motivation of Nurses

Table 1. The distribution of motivation of nurses

	Motivation	Frequency	Percentage (%)
1	Low	0	0.0
2	Medium	44	56.4
3	High	34	43.6
	Total	78	100.0

According to table 1 above, it was known that most of respondents had motivation to conduct nursing documentation in medium category.

### Knowledge of Nurses

Table 2. The distribution of knowledge of nurses

	Knowledge	Frequency	Percentage (%)
1	Less	0	0.0
2	Sufficient	42	53.8
3	Good	36	46.2
	Total	78	100.0

According to table 2 above, it was known that most of respondents had knowledge regarding nursing documentation in the category of sufficient.

### Work Stress of Nurses

Table 3. The distribution of work stress of nurses

	Work Stress	Frequency	Percentage (%)
1	Hard	0	0.0
2	Medium	45	57.7
3	Minor	33	42.3
	Total	78	100.0

According to table 3 above, it was known that most of respondents had work stress in medium category.

**The Implementation of Nursing Documentation**

Table 4. The distribution of implementation of nursing documentation

	The Implementation of Nursing Documentation	Frequency	Percentage (%)
1	Being not implemented	44	56.4
2	Being implemented	34	43.6
	Total	78	100.0

According to table 4 above, it was known that most of respondents had the implementation of nursing documentation in category of being not implemented.

Table 3. The Result of Logistic Regression Test

Variable	Sig.
Motivation	0.002
Knowledge	0.054
Work stress	0.001

The result of logistic regression analysis showed the probability value as follows:

1. Motivation (X1) showed p-value = 0.002 (there was a significant influence between motivation and the implementation of nursing care documentation at Muhammadiyah Hospital, Kediri).
2. Knowledge (X2) showed p-value = 0.054 (there was no significant influence between knowledge and the implementation of nursing care documentation at Muhammadiyah Hospital, Kediri).
3. Work Stress (X3) showed p-value = 0.001 (there was a significant influence between work stress and the implementation of nursing care documentation at Muhammadiyah Hospital, Kediri).

**DISCUSSION**

**Motivation of Nurses at Muhammadiyah Hospital, Kediri City**

The result showed that most of the respondents had medium category of motivation to do nursing care documentation and they were 56.4%. Motivation was an influential condition of generating, directing, and maintaining behavior related to work environment (Mangkunegara, 2005). According to Stanford (1970), there were three important points in the sense of motivation and those were correlation among needs, encouragement, and goal. Needs arose because of something that was felt by someone, both physical and psychological thing. Encouragement was the direction to fulfill the needs, while the goal was the end of task condition that was called as motivation factor, because its existence determined whether the individual was motivated to give high performance or not. Motivation would only work properly if it could be aligned with organizational goals and individual's and or group's goal who were members of the organization (Azwar, 2009). Thus, the first step that needed to be done was to know the goals owned by individual and or a group, then, tried to integrate them with organizational goals.

One thing that played a role in improving motivation was a sense of responsibility. The results showed that most of respondents did not conduct proper nursing care documentation. Low intrinsic motivation caused a lot of incompleteness in documentation, so patients' condition would not be communicated to the nurses or other health workers

Nurses who had low motivation was due to lack of intellectual factors and self-maturity. Therefore, in this case, it was needed great leader's role in order to increase their motivation either intrinsic or extrinsic motivation. However, intrinsic factors would strongly encourage motivation, such as feeling that they were needed and meaningful in their work, getting recognition in their work, having freedom in alternatives, knowing the progress and achievement of their work. In order to improve the nurses' motivation, it was necessary to supervise nurses' behavior in documenting the nursing care. Besides, socializing each other in work

environment was expected to solve patients' problem and having program for the development of potential nurse.

### **Knowledge of Nurses at Muhammadiyah Hospital, Kediri City**

The results showed that most respondents had knowledge regarding nursing care documentation in category of sufficient and they were 42 respondents (53.8%). Damayanti (2013) stated that knowledge of the implementation of documentation had to be owned by various health professionals and one of whom was a nurse. A nurse had a role in conducting nursing care documentation in a medical record. Nuryani and Susanti (2014) stated that nurses' knowledge determined their actions in providing services to patients, thus, nursing care based on knowledge would provide better service than nurses who performed their actions without knowledge. Nurses' knowledge was also very influential on the completeness of nursing care documentation.

### **Work Stress at Muhammadiyah Hospital, Kediri City, East Java, Indonesia**

The results showed that most of respondents had medium category of work stress and they were 45 respondents (57.7%). One of factors that influenced performance was work stress that was dangerous physical and emotional response that arose when working demands were not in accordance with their ability (Baridwan, 2012). Work stress could be caused by many factors, such as intrinsic factors, role conflict, relationship in work, career development, as well as other factors that related to work. Intrinsic factor could be over workload of employee. Nurses' workload was quite high because they had to handle several patients in one work shift and this condition was increasingly stressful when patients' condition was getting worse that required intensive care and supervision (Widyatama, 2010).

The results showed that work stress was in medium category. This condition was caused by hospital environment that demanded high level attention in implementing nursing care to patients. This tended to lead pressure of respondents in working. This condition was caused by directly relation of nurses - patients and nurses - patients' family, hence, when a problem was occurred in patient although the problem was not caused by nursing care action, it could encourage misunderstanding that impacted the emergence of respondents' stress.

In addition, medium stress level tended to produce better performance. People with low stress level would get less stimulation and there was no challenge and boredom because physical and mental skills were not used optimally. When people experienced high stress level, personal resources were constrained and they would experience tension under physical and mental limitations. If people experienced medium stress level, they would have high performance because physical and mental capacity was challenged. Besides, the people would be motivated but not anxious and their mental attention was only focused on work being dealt with.

Furthermore, there was still less complete and incomplete documentation, even there was no documentation that included in very complete category which could be caused by several factors, such as lack of time. According to Carpenito (1999), time factor had a very big influence for the taken activities. The absence of adequate time to write documentation was a common problem in implementing nursing care documentation so that the writing of nursing care documentation was often delayed or done incompletely.

### **The Implementation of Nursing Care Documentation at Muhammadiyah Hospital, Kediri City**

The results showed that the implementation of nursing care documentation at Muhammadiyah Hospital Kediri was not applied by most of respondents and there were 44 respondents (56.4%). Nursing care documentation was a profession demand that had to be answered, both from ethics and legal aspects. This meant, nursing care documentation, which could be answered for both aspects, was closely related to managerial aspect, which protected patients as service recipients (consumers) and protected nurses as service providers and nursing care (Hidayat, 2008). Nursalam (2011) explained that nursing care documentation had important meaning from various aspects such as legal aspects, service quality, communication, finance, education, research, and accreditation. Filling the nursing care documentation that did not qualify the standards might result incorrect diagnosis and improper treatment for the patients. In addition, nursing care documentation was legal evidence that could be used to support nurses when they faced legal issues.

The results indicated that many nurses were less aware of the importance of nursing care documentation. Nursing care documentation was an important thing as evidence of responsibility and accountability of nurses in performing their duties. Professional nurses were faced with demand of higher responsibility and accountability for every taken action. Nursing intervention that was provided to patients should be avoided the negligence by accurate and correct nursing care approaches and nursing care documentation. Although nursing care documentation was really needed for patient's and nurse's necessity but in fact, the completeness in filling the document was still in less attention. Thus, there were still many incomplete documents of nursing care.

## The Most Dominant Factor in the Implementation of Nursing Care Documentation at Muhammadiyah Hospital, Kediri City

Regression logistic test results showed that the most dominant factor that inhibited the nurses in performing nursing care documentation was motivation factor (CC = 0.668). According to Potter (2010), nursing care documentation should include the entire process of nursing care, starting from the assessment in determining patient's basic data, nursing diagnosis for identifying problem that was faced by patient, intervention of planning the nursing care to patients, implementation of series activity that was taken by nurses to assist patients from health status problems to get better health status that described the expected outcome criteria and evaluation that was a systematic and planned comparison of patients' health with established goals. This was conducted continuously by involving patients and other health workers. Filling the documentation of nursing care that was not in accordance with the standards could cause different actions by other nurses, resulting in a decrease of quality service. Many nurses were not aware of the importance of nursing care documentation which the implementation of it should qualify the standards. The nurse often made the documentation that related to their own understanding, hence, the compiled documentation could not be understood by other nurses. This led to delay in service time which impacted on reducing the quality of service (Windari, 2009).

The results of the analysis showed that nursing care documentation had a significant impact on the quality of service because nursing care documentation influenced the speed of service, but not many patients were aware of this condition. Thus, there were some respondents who did not implement nursing care documentation well but still led to patients' satisfaction. This condition was occurred because nursing care documentation did not correlate to the patients directly, so as long as the nursing care that was provided did well even the documentation was not conducted properly, it did not affect the patients to give good assessment of service quality. This was certainly not applicable when it was found the problems in provided services and of course, it would cause bad assessment from the patients.

There was still less complete and incomplete documentation, even there was no documentation that included in very complete category which could be caused by several factors, such as the lack of time. According to Carpenito (1999), time factor had a very big influence on taken activities. The absence of adequate time to write documentation was a common problem in implementing nursing care documentation. Hence, the writing of nursing care documentation was often delayed or done incompletely. Nevertheless, motivation was the main key that determined nurses' performance, particularly for the implementation of nursing care documentation. In the implementation, nurses had to have high motivation and desire within themselves. If nurses did not have good intrinsic motivation, then, the implementation of nursing care documentation would not be achieved and it could affect the quality of health services.

### CONCLUSION

Based on the results of the research could be concluded that the determinants of the implementation of nursing documentation were motivation and work stress. It was expected for hospital to conduct more intense supervision by the head of space with supervision and routine direction of staff in making nursing care documentation in order to improve the quality of nursing care in general. For nurses, it is expected to be able to improve the quality of good nursing services, especially in terms of nursing care documentation because the nursing care documentation was as legal records of nursing evidence and it was important to be conducted completely.

### REFERENCES

- Ali, Z. (2012). Dasar-dasar Dokumentasi Keperawatan. EGC. Jakarta
- Dermawan, D. (2012). Proses Perawatan penerapan Konsep dan Kerangka Kerja. Gosyen Publishing. Yogyakarta
- Dwijayanti, (2010). Stres Kerja pada Perawat Pelaksana di Ruang Rawat Inap RS Krakatau Medika th 2010. Skripsi. Tidak dipublikasikan. Jakarta. FKM UI
- Hidayat, Aziz. A (2002). Pengantar Dokumentasi Proses Perawatan. EGC. Jakarta
- Gibson, J.L (2001). Organizations: Behaviour, Structure, Process. Ed 8<sup>th</sup>. Richard D.Irwin.pko. Boston
- Gillies, D, (1994). *Nursing management : A System Approach, Third Edition*, Philadelphia. WB Saunders
- Kuntoro, A. (2011). Buku Ajar Manajemen Keperawatan. Nuha Medika. Yogyakarta
- Lannasari, (2005). Hubungan Karakteristik Demografi dan Persepsi terhadap Reward Sistem dengan Motivasi Kerja Perawat Pelaksana di RS Islam Jakarta. Tesis. Tidak dipublikasikan. Jakarta.FKM UI
- Ling, et all. (2005). *Perception of Stress in an Intensive Care Unit Setting Among Working in ICU and General ward. Surgical Intensive Care Unit Journal*. Vol 14. 195-202

- Nursalam, (2003). Konsep dan Penerapan Metodologi Penelitian Ilmu Keperawatan. Salemba Medika. Jakarta
- Notoadmojo, (2002). Metodologi Penelitian Kesehatan. PT Rineka Cipta. Jakarta
- Potter, C.J, Taylor, P.A & Perry, C. Potter (2009). *Fundamentals Of Nursing, 2<sup>nd</sup> Edition*. Mosby Elsevier. Australia
- Robbins (2007). Perilaku Organisasi. Gramedia. Jakarta
- Wahid, A & Suprpto, I. (2012). Dokumentasi Proses Keperawatan. Nuha Medika. Yogyakarta