



The Relationship Of Workload And Completeness Spiritual Care Documentation In Nurses In Islamic Hospital Mataram

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Abstract

Documentation is an essential element in accountability for the performance of the nursing profession after performing nursing interventions directly to the client. Findings at the hospital showed that nursing documentation forms have been prepared not complete or not complete unfilled. Nurses more does the work of coordination and an abundance of authority. So that we need to know about correlation of nurses workload with nursing documentation. The method used is descriptive correlation with cross sectional approach. The number of samples in this study were as many as 56 people with purposive sampling method. Analysis of data using statistical test of Rank Spearman. The results of this study showed the majority of the workload of nurses in middle category (37.5%) and most of the documentation of nursing care nurses perform incomplete documentation (67.9), while the Spearman Rank test results show the significance value of 0.011 ($P < 0,05$), which shows there is a relationship between the workload of nurses and nursing documentation. Nurses are required to conduct complete care documentation for record of the whole action is given to the patient can be used as evidence of nursing care has been done correctly, precise, and comprehensive.

Keywords : Workload, Documentation, Nursing Care

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1. Introduction

Documentation is a key element in the accountability of the nursing profession's performance after conducting direct nursing interventions to clients. The emergence of new paradigms of medical records and nursing care as information management in the health sector is a positive impact of the development of information technology in accordance with the development of concepts and procedures for communication in the health sector. This has a great influence on every value system of life and knowledge, including in the world of health, especially in management in the health sector. Nursing care documentation is associated with the existence of a new paradigm as an information and communication center, practitioners want an understanding of the correct role in the world of health services. In order to improve services in hospitals, it is necessary to be supported by a good, correct and safe nursing care document management system, (Handayaningsih 2009).

Globalization has resulted in high competition in the health sector, especially in documentation in the health sector. The high demands of the public, both national and international, for the demands of health services provided in hospitals. Good, precise, fast, safe and transparent service in writing intervention results is an indicator of the quality of health services in hospitals. Competition between hospitals, both private, government and foreign hospitals, will be increasingly developed. In order to compete healthily in the free market competition for services in hospitals, both private, government and foreign hospitals, hospitals must provide services to direct clients quickly, precisely, accurately, and with quality at affordable costs, (Muninjaya, 2005).

Documentation is a record that can be proven or used as evidence in legal matters. While the documentation process is a work or recording events both from objects and providing services that are considered valuable and important, (Handayaningsih, 2009). Documentation is a means of communication between health workers in the context of recovering the client's health, without correct and clear documentation, nursing service activities that have been carried out by a professional nurse cannot be held accountable in an effort to improve the quality of nursing services and improve the health status of clients in hospitals, (Nursalam, 2018).





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Findings at the hospital showed that the nursing documentation forms that had been prepared were incomplete or not filled out completely. It was found that the average monthly medical record was incomplete between 5 and 10 medical records after the client was hospitalized at IRNA. Some of the things that are often the reason for officers include, many activities outside the responsibility of nurses are a burden carried out by the nursing profession. The recorded system taught is too difficult and takes a lot of time. Not all nurses in service institutions have the same knowledge and ability in writing to make nursing documentation in accordance with the set standards. The existing nursing staff come from various levels of nursing education from very different time spans of graduates. Nurses do more coordination work and delegation of authority. Forms are impractical so that there is overlapping writing. Nursing care in hospitals is carried out by professional human resources with a Vocational Nursing education level and a small part with a Bachelor Nursing education level. (Astuti & Lesmana, 2019)

Nurses are professionals who provide nursing care which is the function of nurses as care givers. In addition, in meeting the psychological needs of clients, nurses must also play the role of educators such as providing health counseling to clients and there are many other functions that nurses can do to improve the quality of their services to clients. In fulfilling their roles and functions in hospitals, nurses are required to work effectively, efficiently and meet the needs of clients comprehensively which include bio-psycho-social-spiritual.(Ernawati et al., 2020)

Based on initial observations made at the Inpatient Installation (IRNA), data was obtained that the number of nurses on guard at IRNA amounted to 23 people and was divided into 3 work shifts where 4 people were on the morning shift, 4 people on the afternoon shift, 4 people on the night shift, and there were 2 primary nurses who served as managers on each shift in the treatment room that required special observation. With the nurse-to-client ratio on the morning shift is 1:4, the afternoon and evening shifts are 1:6 with the time span for the morning shift of seven hours, the afternoon shift of seven hours and the night shift of 12 hours, while the standard is 1:1 each shift change. The client's condition is included in the group with high dependency, because it requires more specific





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attention and assistance than other clients and the general condition of the client with strict observation.

Based on Douglas' formula, the number of morning nurses for 36 clients in the inpatient room should be 12 people, 11 people during the day and 7 people at night. When viewed from the conditions in IRNA rooms 1, 2 and 3, it illustrates that the condition of the nurses in the room is less so that the workload of nurses can be said to be overloaded. Based on a preliminary study with interviews and observations of 30 nurses on duty in the inpatient room using the daily log method, it was found that the workload in the IRNA room was mostly classified as high level (70%) and 30% was classified as moderate. The workload of nurses is not only caring for clients, namely direct activities, but also indirect activities that are no less important such as completing and implementing nursing care documentation and detailed medical records.

Nursing documentation is evidence of recording and reporting that nurses have in making nursing records that are useful for the benefit of clients, nurses and health teams in providing health services on the basis of accurate and complete communication in writing with the responsibility of nurses and are part of the implementation of nursing care that uses a nursing process approach and has very important legal value. (Trihastuti & Nursalam, 2016)

For the implementation of the nursing care documentation process in an effort to improve the quality of service in each inpatient, it has been prepared in the form of the 1994 Ministry of Health nursing care standards, hospital operational procedure standards and policies issued by the hospital director, the standard format of the application instrument in the form of check and form, but there is still documentation of clients entering the hospital until the client returns home has not been completed. (Nadila et al., 2020)

The results on medical records on the documentation of clients going home and dying in the inpatient room for incomplete medical records of more than 7 days in 2022, were obtained the highest in February at 1.28%. Meanwhile, the number of incomplete medical records more than 30 days after a client returned home and died in the inpatient in 2012, was obtained by 0.74% in February.





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The results of the supervision of nursing evaluation to nurses in the nursing room were obtained that the completeness of the documentation was not optimally complete because the documentation of nursing care was mentioned on the grounds that the existing form was not simple, had not been properly and correctly socialized about how to fill it out, was felt to take up time and hinder the service in the process of writing documents, and the understanding of the officers. Based on the above background, the author is interested in researching whether the workload of nurses is related to the documentation of nursing care in the inpatient room. (Hadi et al., 2020)

2. Research Method

The research method in this study uses a descriptive method, with a cross sectional approach, namely a research design in which measurements or observations are carried out at the same time, the population in this study is nurses who work in the hospital inpatient room is 62 people. The sampling method used in this study is purposive sampling. The number of samples in this study was 56 people according to the sample criteria. The inclusion criteria in this study are nurses who are registered as employees as Care Implementers in the inpatient room. Nurses who are educated with Diploma III in Nursing. Nurses with a minimum service period of 1 year. Nurses who are willing to be researched. (Nursalam, 2018) Research Instruments The data collection instruments or tools in this study used daily log sheets and checklists. The daily log sheet contains a record of the nurse's time and activities in each shift, while the checklist contains the components of nursing care in accordance with the checklist sheet of the Ministry of Health of the Republic of Indonesia. Data Collection Procedure Before conducting the research, the researcher has applied for permission to obtain approval. Data collection was carried out by distributing questionnaires to a sample of nurses who met the inclusion criteria, who were willing to become respondents and sign informed consent. Then the researcher conducted observations on the documentation of nursing care with the help of a research enumerator. Data Collection Techniques Research data collection is compiled based on data collection that is really appropriate for all subjects, and quantitative data collection methods, namely





data collected are compiled based on calculations so that they can be analyzed statistically (Nursalam, 2013).

3. Results And Discussions

a. Result

1. Characteristics of Informants Age, Work Period And Gender

Characteristics of Informants	n	%
Age >45 years	11	19,7
Age 20-30 Years	23	41,0
Age 31-45 Years	22	39,3
Work Period	n	%
1-10 Years	30	53,6
11-20 Years	16	28,6
>20 Years	10	17,8
Gender	n	%
Male	26	46
Female	30	54
Total	56	100

From the table, it can be seen that the least respondents are the > age group of 45 years (19.7%), while the age group of 20 – 30 years (41.0%) is almost balanced with the age group of 31 – 45 years. The average age of respondents was 35.36 years. The table above shows that most of the respondents have a working period between 1 – 10 years (53.6%), while the smallest have a working period > 20 years (17.8). The working period is usually associated with the time of starting work, where work experience also determines a person's performance. The longer the working period, the better the skills will be because they have adjusted to their work. A person will achieve a certain satisfaction if he is able to adjust to the environment. Based on the table above, most of the respondents' gender is male (54%).

Frequency Distribution of Nurse Workload

No	Category	n	%
1	Low Workload	19	33,9
2	Medium Workload	21	37,5
3	High Workload	16	28,6





	Total	56	100
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Tabel 2 shows that based on the frequency of workload of natural nurses providing services, the percentage of heavy workload is 28.6%, medium 37.5% and light 33.9%. The results show that the workload is currently having the largest proportion.

Frequency Distribution of Nursing Care Documentation

No	Item	%
1	Asesment Nursing	43,4
2	Nursing Diagnosis	29,6
3	Nursing Planing	29,8
4	Nursing Intervention	57,8
5	Nursing Evaluation	53,4

From table 3 it can be seen that the completeness of filling out nursing care documents for each stage in the nursing process is Still below 70%, with the largest proportion of documentation completeness found in nursing care records (69.8%) and the smallest in the formulation of nursing diagnoses (29.6%) and planning (29.8%).

Data on the completeness of Nursing Care documentation in the Inpatient Room

No	Documentation	Jumlah	Persentase (%)
1.	Completness	18	32,1
2.	Incompletness	38	67,8
Total		56	100

From Table 4 it Can Be seen the completeness of nursing care documentation, as many as 67.9% of respondents did incomplete documentation and as many as 32.1% did complete nursing documentation.

The Relationship Between Nurse Workload and Nursing Care Documentation

No	Workload	Documentation				Total		p value
		Incompletness		Completness		n	%	
		N	%	N	%			
1	Low Workload	12	63,2	7	36,8	19	100	0.011
2	Medium Workload	12	57,1	9	42,9	21	100	





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3	High Workload	14	87,5	2	12,5	16	100	
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From Table 5 it Can Be seen the percentage of respondents who had a heavy workload had incomplete documentation practices, the largest number (87.5%) compared to respondents who had a moderate (57.1%) and light (63.2%) workload, as shown in table 4.18. From the statistical test using Rank Spearman, the results showed a p value of 0.011 (<0.05) which means that there is a relationship between the respondent's workload and the practice of documenting nursing care.

4. Conclusion

Completeness of nursing care documentation, as many as 67.9% of respondents did incomplete documentation and as many as 32.1% did complete nursing documentation. Nurses as professionals are responsible for documenting the nursing care provided to patients. Every hospital officer who serves or takes action against a patient is required to record all actions to the patient on the defect sheet in accordance with his authority and responsibility (Kemenkes RI, 2018) The nursing process is a systematic way carried out by nurses and patients in determining the needs of nursing care by conducting assessments, determining diagnoses, planning actions to be taken, carrying out nursing actions and evaluating the results of nursing care that have been carried out by focusing on patients, goal-oriented at each stage of interdependence and continuity (Rohmah et al., 2022). If the completeness of writing at the stages of the nursing care process is still incomplete, then the goal of nursing cannot be achieved properly. (Knoerl et al., 2021)

The percentage of respondents who had a heavy workload had incomplete documentation practices, the largest number (87.5%) compared to respondents who had a moderate (57.1%) and light (63.2%) workload, as shown in table 4.18. From the statistical test using Rank Spearman, the results showed a p value of 0.011 (<0.05) which means that there is a relationship between the respondent's workload and the practice of documenting nursing care. In accordance with research conducted it is stated that there is a positive relationship between workload and the performance of administrative employees in the administrative section of the Central Java Provincial Health Office. Workload is affected





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by one of them by work capacity, someone who works with a maximum workload will cause productivity to decrease. (Syukur, 2018) According to Sumakmur, every job is a burden for the perpetrator, a burden meant physical, mental, and social bias. In addition found a positive relationship between the workload of nurses and the performance of nurses at Saras Husada Purworejo Hospital by marking the results of the analysis test $p = 0.00$ with a sufficient correlation level of 0.537. This shows a condition where the increase in workload is followed by strong efforts from nurses as well as to improve the performance of nursing care services to patients, so that the documentation of care can be carried out properly and completely, even though it is realized that the achievement of performance standards is not in accordance with the standards set by the Ministry of Health of the Republic of Indonesia. (Rahayu et al., 2022)

In a study conducted by I Gusti A.A Putri Mastini (2013) at RSUP. Sanglah Denpasar explained that there is a relationship between workload and nursing care documentation with a Pvalue = $0.004 < 0.05$. According to researchers, the benefits of documentation are records of all actions given to patients and if there are problems related to the nursing profession, the documentation can be used as evidence in court. (Erviarningsih et al., 2020)

Work load is a process carried out by a person in completing work tasks or a group of positions within a predetermined time period and carried out under normal conditions Workload is a task given to nurses to be completed at a certain time using the skills and potential of the workforce. Managing the workload for each nurse is very important so that nurses do not experience pressure and stress. Workload refers to the number of responsible tasks that must be completed by an organization or its unit by a certain number of workers per unit of time (Haryani, 2020). The influence of excessive nursing workload can influence and affect the productivity of health workers, especially nurses, such as physical and mental work pressure and emotional effects such as headaches, digestive problems, vomiting, irritability. If there is an imbalance between tasks and physical abilities, as well as skills and available time, this will cause work stress for nurses (Sundari, 2022).





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Nursing Completeness in nursing documentation is highly important as it reflects a nurse's responsibility and accountability for the tasks performed to meet client needs. However, the heavy workload of Nurses can hinder the implementation of nursing documentation. Nursing documentation is part of a record action of accurate written evidence carried out by nurses during nursing activities high workloads can affect complete nursing documentation.

5. Compliance with ethical standards

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Disclosure of conflict of interest

This research collaboration is a positive thing for all researchers so that conflicts, problems and others are absolutely no problem for all writers.

Statement of informed consent

Every action we take as authors is a mutual agreement or consent.

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