

**PROCEEDING INTERNATIONAL CONFERENCE
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**PREPARE FOR UPGRADING SKILL
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PHENOMENOLOGY STUDY: FAMILY EXPERIENCE IN MANAGING
MENTAL DISORDERS IN PANTI DISTRICT

ANXIETY OF ACUTE CORONARY SYNDROME PATIENTS IN REGIONAL
PUBLIC HOSPITAL OF DR.T.C.HILLERSMAUMERE

MANAGER'S STRATEGY IN IMPROVING THE QUALITY OF NURSING
DOCUMENTATION

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TO PRESCHOOL CHILDREN

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PHARMACOLOGICAL THERAPYTYPE II DIABETES MELITUS

DECREASED BLOOD URIC ACID LEVELS TRHOUGH HEALTH
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MEDAN

INCIDENCE OF INSOMNIA IN THE ELDERLY AT WREDHA NURSING
HOME

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FOREWORD

Thanks to God Almighty for his abundance of grace so that the Proceedings Of Update Comprehensive Nursing Care For Diabetes Mellitus Patients With A Multidisciplinary Approach can be solved well. This Proceeding is a collection of research results that are expected to contribute in improving health status in the community. Research results can be a point of reference for developing other research for the welfare of Indonesian society. This Proceeding contains research papers and is created with the aim of providing knowledge to the general public regarding the latest research and scientific developments so that it is expected to increase knowledge, communication and further motivation for the filing of Intellectual Property Rights.

We would like to thank **Mrs. Selvia David Richard, S.Kep., Ns., M.Kep as Chief of STIKES RS. Baptis Kediri, Libest Asia Consultans, Social Welfare Corporation Prefectual Welfare Society, Asia Kyoei Jigyou Kyodokumiai, Kumiai/AO Japan, Seiyukai Foundation, Rakurakuen Foundation and Southeast Asia Ministers of Education Organization Regional Open Learning Center (SEAMEO SEAMOLEC)** in publishing the proceedings that we have held. We realize that this Proceeding certainly does not escape the deficiencies, for that all suggestions and criticism we expect for the improvement of proceedings in the next issue. Finally we would like to thank all those who have assisted in this activity, and we hope that this proceeding can be useful for researchers, academics and the development of science.

Kediri, 29th November 2019
Committe

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MANAGER'S STRATEGY IN IMPROVING THE QUALITY OF NURSING DOCUMENTATION

Nikodimus Margo Rinenggantyas¹ M. Rofii² Luky Dwiantoro²

1. Nursing Masters Student Diponegoro University Semarang

2. Lecturer in Nursing at Diponegoro University, Semarang

email: nuningniko@gmail.com

ABSTRACT

The quality of nursing documentation is considered to be quality if it is complete, integrated, systematically arranged and follows the rules of the existing rules, because records of incomplete nursing documentation and not following the rules of documentation will cause nurses to be easily sued legally if they do not comply with procedures. The research objective is to determine the manager's strategy in improving the quality of nursing documentation.

This research method uses research design using descriptive analytics. The population in this study were 150 nurses in the inpatient hospital room. H.L Manambai Abdulkadir. The study sample was 20 nurses. The dependent variable in this study is the Quality of Nursing Care Documentation. Research instruments using questionnaires and statistical tests using frequency distribution.

The results showed that 15 nurses had good quality documentation of nursing care (75%) and 5 nurses had poor quality nursing care documentation. The quality of good nursing care documentation is the result of a well-structured and well-managed manager strategy

INTRODUCTION

The quality of nursing documentation is considered to be quality if it is complete, integrated, systematically arranged and follows the rules of the existing rules, because records of incomplete nursing documentation and not following the rules of documentation will cause nurses to be easily sued legally if they do not comply with procedures. The Ministry of Health of the Republic of Indonesia in 2014 showed that completeness of completing nursing care documentation in the hospital was still lacking, namely the results of the study were only 16%, determined 77% of diagnoses, and made plans <20%. (3) Completeness of filling in the

documentation of nursing care obtained results an average of 69.65%, namely assessment of 70.92%, diagnosis formula 66.65%, planning or intervention 71.73%, action or implementation 84.90%, evaluation of actions 31.30%, and nursing records 92, 40%. (4) The results of research conducted by Ulum and Wulandari show that the completeness of nursing documentation is 63.7%. (4.5) Of course this will have an impact on the quality of nursing service quality, which is reportedly not yet running nationally at only as large as 53.8% (6) Whereas the standard applied by the Ministry of Health of the Republic of Indonesia is 80%. (3)

Efforts to improve the quality of documentation of nursing diagnoses have been carried out by means of socializing guidelines and operational standard procedures in the documentation of nursing care specifically in lifting diagnoses. The guidelines for nursing diagnoses so far refer to the North American Nursing Diagnosis Association (NANDA), Nursing Interventions Classification (NIC), and Nursing Outcomes Classification (NOC) however, not all nurses know how to use and write diagnoses based on NANDA rules so that it affects the decision of the diagnosis. enforced by nurses who influence the selection of interventions and outcomes of nursing care that will be given to patients. (5,8)

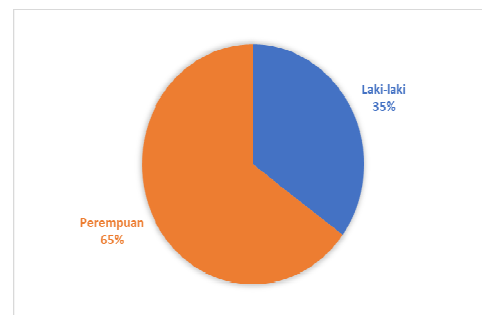
Based on the researchers' initial study on February 13, 2019 at HL Manambai Abdulkadir Hospital from 20 Medical Record records, in three inpatient rooms namely in the Tulips, Sakura and Flamboyan Rooms, the average value of completing nursing care documentation is around 60% with details of the formulation 40% nursing diagnoses, 80% nursing care planning, 70% nursing actions, 80% evaluation. The hospital itself in carrying out the diagnosis so far does already have guidelines that prioritizes actual problems, such as pain, hyperthermia, nausea, nutritionally less than needed, changes in tissue perfusion, ineffective breath patterns, airway cleansing, and activity intolerance but, based on observation appointment of this diagnosis is not in accordance with the rules of PES (problems, etiology, and symptoms) contained in the NANDA diagnosis. In fact, internationally the nursing diagnoses of NANDA, NIC, and NOC have been considered important as a reference in formulating nursing diagnoses. (10-12) In addition,

interventions and outcomes as part of the nursing process have also been applied in various hospitals.

RESEARCH METHODS

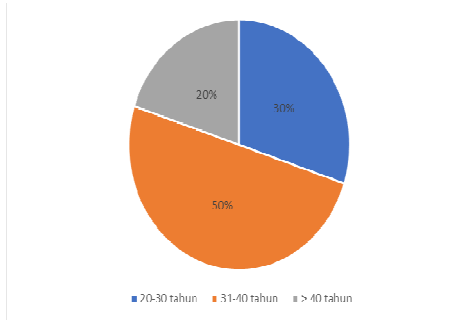
The research objective is to determine the manager's strategy in improving the quality of nursing documentation. The research design uses descriptive analytics. The population in this study were 150 nurses in the inpatient hospital room. H.L Manambai Abdulkadir. The study sample were 20 nurses. The dependent variable in this study is the Quality of Nursing Care Documentation. Research instruments using questionnaires and statistical tests using frequency distribution.

RESULT



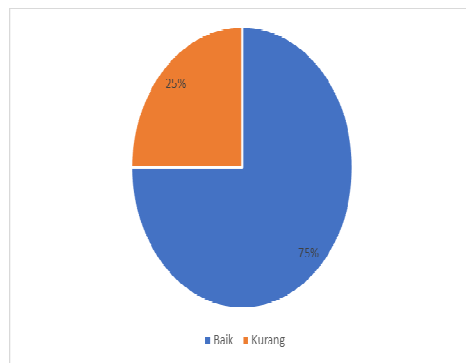
Picture 1 Distribution of respondent frequencies by sex

Based on the results of research that has been done, it was found that the majority of nurse respondents had a female gender that is equal to 65%, and male sex numbered 35%.



Picture 2 Frequency distribution of respondents based on age

Based on the results of research that has been done, it was found that the majority of nurse respondents had age 31-40 years which is equal to 50%, and those aged 20-30 years amounted to 30% and those aged > 40 years amounted to 30%.



Picture 3 Frequency distribution of respondents based on Manager's Strategy in Improving the Quality of Nursing Documentation

Based on the results of research that has been done it was found that the majority of nurse respondents had a Manager Strategy in Improving the Quality of Nursing Documentation that was good by 75% and less by 25%.

DISCUSSION

Based on the results of research that has been done it was found that the majority of nurse respondents had a Manager Strategy in Improving the

Quality of Nursing Documentation that was good by 75% and less by 25%. Based on the results of research that has been done, it was found that the majority of nurse respondents had age 31-40 years which is equal to 50%, and those aged 20-30 years amounted to 30% and those aged > 40 years amounted to 30%. Based on the results of research that has been done, it was found that the majority of nurse respondents had a female gender of 65%, and male sex numbered 35%.

Nursing care is a series of interactions between nurses and clients and their environment to achieve the goals of meeting the needs and independence of clients in caring for themselves. Nursing care where nurses as professional care givers for 24 hours which include biological, psychological, social, spiritual, cultural services and all of that is reflected in the nursing process. (13) Nursing care is the process or summary of activities in nursing practice directly given to clients therein and other health care settings to overcome the problems faced by clients by using a scientific approach to nursing based on a code of ethics and standards of nursing practice. (14,15) Based on the above understanding, it can be concluded that nursing care is a whole set of nursing processes provided to patients who continue with nursing tips that begin from the assessment to the evaluation in an effort to improve or maintain optimal health. (14,16)

Quality indicators are useful for measuring the achievement of a predetermined documentation standard. Nursing documentation is part of the nursing service which is the most important element in health care. This is because documentation is an indicator of the quality of nursing care. The quality of documentation reflects the activities of the nursing process that

have been and will be carried out by nurses, to make good quality documentation a nurse must know and understand the indicators of quality documentation. Documentation quality indicator is something that can provide or be a guide to the implementation of documentation standards. (2,7)

Accurately means that what is documented uses true and valid values so that it can be maintained. Proper and accurate execution in the records must reflect the nurse's activities that have been carried out. Documentation must be based on facts. According to Enggland information about patients and care must be based on facts. Records must contain descriptive and objective information about what nurses see, hear and feel. Objective descriptive is the result of direct observation and measurement, so it will not cause misinterpretation. Logically interpreted in accordance with the flow of thought, recorded chronologically, including the name and register of each sheet, start writing with capital letters, done with the identity of time (hours, dates, days, months, and years). The writing is clear and can be read by anyone, both between nursing staff and with other professions, written using signs, using abbreviations that are commonly used in nursing documentation. (20)

Organized means to have the appropriate format in each writing at each stage, so that it can communicated among nursing staff and understood together. Up-to-date means that the recording is carried out with all current conditions and is not delayed or the data exchange rate must always be up to date. Maintaining confidentiality means that documentation as a medium for maintaining data security is only used for official purposes and is related to the status of the patient or nursing staff

concerned. The information is documented only for health workers.

CONCLUSION

1. Based on the results of research that has been done, it is found that the majority of nurse respondents have a female sex that is equal to 65%, and those of the male sex number 35%.
2. Based on the results of research that has been done, it was found that the majority of nurse respondents had age 31-40 years which is equal to 50%, and those aged 20-30 years amounted to 30% and those aged > 40 years amounted to 30%.
3. Based on the results of research that has been done it was found that the majority of nurse respondents had a Manager Strategy in Improving the Quality of Nursing Documentation that was good by 75% and less by 25%.

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