

THE INFLUENCE OF IMPLEMENTATION OF CLINICAL SUPERVISION TEAM TO MONITER THE PERFORMANCE OF THE EMPLOYEES IN THE HOSPITAL ROOM OF "X" PADANG, 2015

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ABSTRACT

The decline in nursing care in hospitals was caused by a decrease in the performance of the nurses, especially in inpatient rooms. The decrease in performance occurred because lack of optimal implementation of supervision activities in the room. The purpose of this study was to determine the effect of clinical supervision on the performance of nurses in the inpatient room. This type of research is quantitative and qualitative (mix methods) using Action research design. Intervention in the form of clinical supervision training was done on 13 patients, the sample in this study there were 38 nurses. The results showed that there was an effect of clinical supervision on the performance of inpatient room nurses with p -value of team leader knowledge before and after 0.048 clinical supervision training, team leader attitudes before and after 0.000 clinical supervision training, 0.000 before and after clinical skills, 0.000 caring behaviors, 0.000 work discipline, and 0.000 nursing care documentation. Clinical supervision training can improve knowledge, attitudes and skills in clinical supervision clinics. This include educative, supportive and managerial activities in the inpatient room, and improve discipline, caring and nursing care, nursing documentation after clinical supervision by trained cadres. Suggestions from the present study were made for nursing services along with establishing policies regarding the implementation of clinical supervision in the nursing room with the development of training for patients in the inpatient room.

Keywords : *Clinical Supervision, Performance, Nursing Documentation*

INTRODUCTION

Healthy life is highly desired by society in general. In the last five years, many Indonesians seek treatment abroad, especially Malaysia and Singapore. The results of Burdianto's research in 2011, reported that 70% of Indonesian people with middle and upper economy tend to seek treatment abroad. Suardi's research in 2010 reported 68% of Indonesians seeking treatment in Singapore. According to the Ministry of Health, the number of Indonesians seeking treatment in Malia increased in the last three years, in 2011 (72%), 2012 (77%) and 2012 (79.8%). The three studies above can show the interest of the Indonesian people to seek treatment abroad, many start. This means that increasing public visits for treatment abroad certainly shows the quality of health services in Indonesia.

Service quality in Indonesia is still a problem that

needs to be resolved. According to Sukanto's research in 2010 in Palembang City Hospital reported 68% of the causes of decreased hospital services were due to the lack of optimal performance of the implementing nurses. The 2012 Raditia study in Semarang Hospital reported that 75% of the reduction in hospital services was also caused by the performance of nurses who did not care for patients. The Ministry of Health (2007, 2010) also reported that 80% of the causes of health services decreased due to the poor performance of health workers in hospitals. One of the most influential forms of service decline is the decline in the performance of nurses in providing health services to patients.

Work performance is the most important part in nursing services. Suarti (2012) states that there are three elements that nurses must possess in increasing their performance, namely: 1) carrying the patient, 2)

discipline in work, and 3) documenting nursing care. According to Ilyas (2012) factors that affect performance include; 1) personal characteristics, 2) motivation, 3) supervision, 4) incentives, 5) organization, and 6) career development. Regular and scheduled supervision will further improve the quality of the performance of nurses, while supervision that is not carried out will reduce the performance of nurses so that servants at the hospital will also decline.

Decreasing performance Nurses in a hospital are of special concern to the leadership. Declining performance will lead to dissatisfaction in patients, in that case it must plan what must be done to improve the performance of nurses, and one of them is by supervision training.

The results of the supervision study conducted at the Hospital "X" Padang through interviews with researchers with the Head of Nursing, Head of the Room and Team Leader stated that all the Heads of Rooms and Team Leaders had to take nursing management training, but have never attended clinical supervision special training. The supervision training that was ever obtained was the training held by the residency students of the Master of Nursing Management in the Hospital "X" Padang focusing only on the supervision of the new employees. At the "X" Hospital in Padang, the implementation of new supervision focused on new employees, which during this time the inpatient room was carried out by employees and colleagues to the nurse. So far there has been no evaluation from the management regarding the implementation of supervision of work/care for nurses, this is evidenced by the absence of written documentation from the nursing head and the work about the special supervision of the head of the room / Team Chair.

This kind of event is a problem that really needs special attention from leader room/leader team to improve supervision of nurses in order to improve the performance of nurses because by increasing the performance of nurses will give satisfaction to patients. The 2014 residency report of Nursing Management S2 students reported 51.08% of patients were not satisfied with the nursing services performed by nurses in the inpatient hospital "X" in Padang.

Based on the above phenomenon, researchers are interested in conducting clinical supervision training research that will improve the performance of the implementing nurses.

RESEARCH METHODOLOGY

Design of this study uses design action research. The research design action is carried out in 3 stages, namely the identification stage, the intervention stage, and the evaluation phase. Data were collected before and after intervention in the group.

The population in this study were all nurses who worked in the inpatient room of the "X" Padang Hospital, amounting to 45 nurses who were scattered in the zam-zam, syafa, marwaandarafah rooms. The sample in quantitative research consisted of 38 nurses, with quota sampling technique. The number of participants in the qualitative research was at the age of 13 people and 6 nurses.

RESULTS

This study describe the effect of the implementation of clinical supervision team leader on the performance of the implementing nurses in the Inpatient Room of the Padang "X" Hospital in 2015. The research data collection began on April 13 2015 - June 12, 2015.

At the problem identification stage, the researcher conduct observations on respondents and interviews with participants in accordance with the interview guidelines that have been prepared previously.

1. Clinical Supervision Implementation

Table 1: Preliminary Data on Maternal Skills Problems in Clinical Supervision Implementation Before Clinical Supervision Training in Inpatient Rooms "X" Hospital at Padang in 2015 (n = 13)

No.	Skill of Maternal	N	%
1	Good	7	53.8
2	Less	6	46.2
	Total	13	100

The results of the interview showed that:

- All students stated that supervision was not well planned, the results of interviews with several participants stated:

(P1): ".....clinical supervision activities have never been planned, supervision is done if there is a need, if we have been asked to do so and we are moving to carry out supervision activities and if not we are silent..."

2. Caring Behavior of Nurses Before Implementation

Preliminary Data on Nurse Care Behavior Problems Executing Before Clinical Supervision Training at Inpatient "X" Hospital in Padang, in 2015 (n=38)

No.	Caring Nurses Implementing	n	%
1	Caring	21	5.26
2	No Care	17	44.74
	Total	38	100

The results of interviews with the implementing nurses showed that:

- Some of the nurse nurses said they did not care like the statements of some participants as follows:

(P2): "... we care about the patient but for the number of nurses slightly while the number of patients a lot so we rather quickly perform nursing actions..."

3. Implementing nurse Work Discipline

Table 3: Preliminary Data on Executing Nurses' Occupational Discipline Problems in Inpatient Rooms at "X" Hospital in Padang in 2015 (n = 38)

No.	Work Discipline	n	%
1	Discipline	17	44.74
2	No discipline	21	55.26
	Total	38	100

The results of the interviews / FGDs with the implementing nurses showed that the nurses lacked the time to carry out documentation such as the statements of some participants as follows:

(P1): "... if we say discipline is not too, if you enter the work on time and if you wear official clothes according to the rules there is, but if to make nursing care always constrained due to busyness in the room, sometimes there is a complete nursing care when there are students practicing in the room, if there is no assistance from students the practice may be incomplete..."

4. Nursing Care Documentation

Table 4: Preliminary Data Documentation Problems Before Clinical Training Supervision in the Inpatient Room at Padang's "X" Hospital in 2015 (n=38)

No.	Documentation	n	%
1	Complete	17	44.74
2	Not Complete	21	55.26
	Total	38	100

Some The nurse participant mentioned that the documentation was not complete as the following statement:

(P2): "... the time to do the documentation was difficult because there were many patients while the nurses were few, so our request was incomplete..... "

Intervention Phase

In this intervention phase researchers conducted training activities on supervision of clinics in inpatient rooms at Padang" X "Hospital. The speaker in this training was the head of the first-class surgical room who was competent in his field. The training process begins with the *pre-test and after the training is done post-test*.

1. Preparation of the Clinical Supervision Module

The preparation of the clinical supervision module was first carried out by searching the literature related to the material taken. After the literature, researchers sought to make the module and consult it with those who were competent in their fields.

2. Training on Clinical Supervision in Meeting Rooms at Padang "X" Hospital

Training activities were held on 11 May at 10:00 WIB until finished.

a. Pre-Post Test Knowledge about Clinical Supervision in the Inpatient Room

The *pre-test* was nurse knowledge carried out before the training and *post-test* after training with the following results:

Table 5: Distribution of Average Knowledge Value Before and After Clinical Supervision Training in the Inpatient Room Padang's "X" Hospital in 2015 (n = 13)

Knowledge	Mean	SD	SE	p-value
a. PreTest	5.18	2.40	0.58	0.048
b. Post Test	6.71	2.31	0.56	

b. Pre-Post Test Attitudes of Nurses in Clinical Supervision in the Inpatient Room

Pre test nurses' attitudes were carried out before the training and *post test* after training with the following results:

Table 6: Distribution of Average Attitudes of Nurses Before and After Clinical Supervision Training in Inpatient Rooms at Padang "X" Hospital in 2015 (n = 13)

Attitude	Mean	SD	SE	p-Value
a. Pre Test	27.00	4.12	1.14	0.000
b. PostTest	34.62	2.14	0.59	

c. Clinical Supervision Implementation After Inpatient Training

Observation of clinical supervision implementation began on May 26 to June 6, 2015 conducted by researchers and also involving two research assistants.

Table 7: Team Leader Skills in Clinical Supervision Before and After Clinical Training at patient wards at the hospital "X" Padang in 2015 (n = 13)

No.	Skills	Before		After		p-value
		f	%	f	%	
1	Good	7	53.8	10	6.9	0.000
2	Less Good	6	46.2	3	23.1	

Evaluation Phase

1. After Implementation of Caring nurse clinical supervision training Guide by Team Leader

Assessment is done after the nurse care training and clinical supervision in accordance with a predetermined schedule. The results of the questionnaire session can be seen from the following table:

Table 8: Implementing Caring Actions of Nurses in Inpatient Rooms at Padang "X" Hospital Before and After Intervention Clinical Supervision TrainingKatim in 2015(n = 38)

No.	Variable	Before		After		p-value
		f	%	f	%	
1	Caring	21	55.26	27	71.05	0.000
2	Not caring	17	44.74	11	28.95	

All participants said that the nurse had done nursing care with caring there are patients, as the statements of some participants as follows:

(P1): "...after a week of clinical supervision by team leader we felt more understanding and understanding of how to treat patients, care for patients and empathy for patients....."

2. Work Discipline Nurses Implementing After team leader Clinical Supervision Training

Assessment of nurses' work discipline is carried out after conducting clinical supervision training and after performing a direct supervision of the nurse in accordance with a predetermined schedule, the results of the discipline questionnaire can be seen from the following table:

Table 9: Work Discipline among Executing Nurse Before and After Clinical Supervision Training in Inpatient Room at Padang "X" Hospital in 2015 (n = 38)

No.	Variable	Before		After		p-value
		F	%	F	%	
1	Discipline	21	55.26	27	71.05	0.000
2	No discipline	17	44.74	11	28.95	

All participants said that after clinical supervision training there were many discussions but the discipline was good, such as per their statement is as follows:

(P1): ".....since we were doing clinical supervision, we felt that there were a lot of changes that occurred, because every clinical supervision carried out by us covered many things, including discipline in carrying out health care and in order..."

3. Nurse Documentation After Clinical Supervision Training

Assessment of this documentation of nursing care is carried out after conducting clinical supervision training and after completing direct supervision of the implementing nurses in accordance with a predetermined schedule, the results of the observations after can be seen from the following table:

Table 10: Nurse Documentation Implementing Before and After Clinical Supervision Training in the Hospitalization Room at "X" Hospital in Padang in 2015 (n = 38)

No.	Documentation	Before		After		p-value
		f	%	f	%	
1	Complete	17	44.74	34	89.47	0.000
2	Incomplete	21	55.26	4	10.53	

The team felt that after clinical supervision training the nursing documentation is more complete as their statement is as follows:

(P3): "Since we routinely carried out clinical supervision, especially after we discussed the documentation during supervision, we would better understand how documentation was said to be complete..."

DISCUSSION

1. Implementation of Clinical Supervision After Training Clinical Supervision in Students in the Inpatient Room of the "X" Padang Hospital

Clinical supervision activities after clinical supervision training were carried out in its application in the inpatient room of "X" Padang Hospital were carried out in a programmed manner, and there was a clear schedule. This is in accordance with the opinion of Marquis & Huston (2010) who stated that supervision is a coaching activity planned to assist nursing staff in carrying out work.

The implementation of training activities so that all the problems faced so far by the nurses about the implementation of clinical supervision have been answered. Many things can be felt by students about how skills a supervisor must possess in conducting clinical supervision. In carrying out clinical supervision, we already understand what needs to be prepared before clinical supervision activities are carried out.

2. Caring Implementing Nurse in Inpatient Room of "X" Padang Hospital

Based on the results of the caring questionnaire distributed to respondents, the results of caring nurses before and after clinical supervision activities increased. The increase that occurred according to the assumptions of the researchers was caused by an increase in the performance of the nurse executives after getting clinical supervision from the leaders who had received clinical supervision training. Nurses are given clinical supervision through clinical supervision stages of the three types of clinical supervision models (educative, supportive and managerial). Planned supervision allows caring for nurses to increase.

Referring to the results of the above research, the researcher argues that caring for nurses is influenced by supervision activities carried out by supervisors. The more frequent supervision of the eating clinic will be the increase in caring of nurses to patients in hospitalized rooms. The creation of an increase in nurse

caring shows that the nurse's performance is increasing. Increased caring is proof of the implementation of clinical supervision activities from the teacher to the implementing nurse. Another study that supports the results of this study is the results of Martini's (2011) study which reported participants saying that nurses have good caring after a seminar or supervision training compared to before training.

3. Implementing Nurse Work Discipline in the "X" Padang Hospital Inpatient Room

Assessment of the work discipline of the implementing nurses was obtained from questionnaires conducted before and after the clinical clinic supervision training. Well-planned supervision activities form an increased discipline of nurse work. So that the application of nursing care to patients also produces the best. In this study, the working discipline of nurses after getting clinical supervision training was better than the work discipline that had not received clinical supervision.

4. Nursing Care Documentation in Inpatient Rooms

The results of the study showed that supervision of clinics for planned and scheduled will improve the performance of nursing nurses towards a better one, one of which is the completeness of nursing care documentation.

Documentation of nursing care is an integral part of seeing how far the nurse's care is for patients (Nursalam, 2011). One form of monitoring documentation completeness is by supervising activities by leaders / managers (Nursalam, 2011). The results of this study are in line with the results of a study conducted by Mosadeghrad *et al.*, (2008) which reported a relationship between supervision and the implementation of documentation for health insurance by implementing nurses. Likewise, research conducted by Yunia (2012) reported that there was an influence of supervision on the completeness of the documentation of health insurance in the inpatient rooms of hospitals.

Based on these studies it can be seen that supervision has an important role in controlling the implementation of nursing care documentation. Team leader must really see how the nurse carries out the complete health insurance. Another thing that should be of particular concern is that there is still a small part found in this study. The incomplete nurse performs

nursing care documentation 4 people (10.53%), this is due to the busyness of the nurses in the room, with the lack of nurses and activities which is a lot so that nurses are not able to share time doing nursing care documentation. The result is that documentation that is expected to be incomplete should be in accordance with the standard. This must be considered closely in the implementation of clinical supervision, in order to produce good and complete nursing care documentation in the inpatient room.

CONCLUSION

In this chapter, a conclusion is drawn from the results of the research and recommendations relating to the results of the study. Based on the objectives, the formulation of the hypothesis, the results of the studies that have been analyzed and the discussions that have been raised, the researchers draw the following conclusions:

1. Implementation of clinical supervision training in inpatient rooms
2. There are differences in cognitive skills in supervision between before and after training
3. There is a difference in knowledge in doing supervision between before and after training
4. There is a difference between nurses' attitudes in supervising between before and after training.

5. There is an increase in the performance of the nurse before and after clinical supervision after training.

6. The availability of a clinical supervision module in the "X" Padang Hospital as a reference material for supervising clinical inpatient room.

RECOMMENDATIONS

1. For the nursing field
 - a. Set policy on the implementation of clinical supervision leader room or team leader especially in the inpatient room
 - b. Socializing gradually to all nurses in patient care about clinical supervision knowledge, attitude and performance of nurses implementing
 - c. Training activities for all employees and students in Padang Hospital to improve knowledge, attitudes and skills in conducting clinical supervision
 - d. Validate supervision guidelines and clinical supervision SPO
 - e. Conduct periodic monitoring regarding the application of clinical supervision in inpatient rooms.
 - f. Evaluate the implementation of clinical and other room supervision every six months by using observation sheets for clinical supervision and development of other instruments from this study.

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