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# **RELATIONSHIP ANALYSIS OF SUPERVISION IMPLEMENTATION OF CPPT IN GENERAL HOSPITAL UNIVERSITY RIAU**

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**Abstract:** Documentation is a means of affective communication between health professions. The low quality of integrated record documentation in Indonesia includes incomplete CPPT where patient identity, date and time of visit are not filled in, PPA's signature and full name, and lack of discipline in filling out medical records by PPA. Supervision is carried out in stages in the preparation, implementation and evaluation phases. The preparation phase contains the planning of the supervision program that will be carried out. The implementation phase is the nurse's assessment by the supervisor while the last phase is the evaluation of the supervision assessment (from the results of direct and indirect observations from the CPPT. The purpose of the thesis is to analyze the relationship between the implementation of supervision on CPPT at the Riau University General Hospital. This study was conducted with a cross sectional approach and is a quantitative study. The research sample is 33 people with total sampling sampling technique. The study uses questionnaires and observation sheets that have been tested for validity and reliability. Through statistics there is a relationship between the preparation phase (p value 0.000), the implementation phase (p value 0.001) and the evaluation (p value 0.000) clinical supervision model 4S with CPPT. Researchers recommend the role of supervision to improve service quality and completeness of integrated recording documentation, carried out by increasing the frequency of supervision and assessment of the implementation of the document integrated logging entity.

**Keywords:** Supervisor Characteristics, Supervision 4S model.

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## INTRODUCTION

Nurse performance can be seen from the documentation of integrated notes, which are notes or *outcomes* produced by a nurse (Pramithasari, 2016). Research by Blair & Smith (2012), explained that documentation globally is still low, where America is at 32.7%, Europe at 32.3% and New Zealand at 52%. Compared to America, Europe and New Zealand, in Indonesia the quality of integrated record documentation is slightly higher at (47%).

The low quality of documenting integrated records in Indonesia includes incomplete filling out the Integrated Patient Development Record (CPPT) form where the patient's identity is not filled in, the name and signature of the Care Provider Professional (PPA), as well as the lack of PPA discipline in filling out medical records and integrated records. The characteristics of the nurse are individual factors that affect the performance of documentation while the characteristics of the supervisor are organizational factors that affect the performance of documentation. Supervisor characteristics consist of ideal 4K characteristics (character, cooperative, competent and communicative) (Siswanto et al., 2013).

According to the Ministry of Health of the Republic of Indonesia (2017) the standard elements of assessment of integrated record documentation include CPPT, actions of nurses and patient service managers (MPP). CPPT contains patient response information, which is based on subjective data (S), objective data (O), Data

Analysis (A), and action plan / Planning (P). The nurse's action form contains the date, time and description of the activities that have been carried out. To improve the quality of service in the hospital, a strategy is needed in order to be able to carry out the service process with a focus on improving service quality and patient satisfaction, one of which is the Patient Service Manager (MPP).

Incomplete documentation of integrated records shows that the nursing care process is not going well and continuously, there is no good communication between nurses and other health workers due to the absence of clear written communication. To carry out integrated recording, it is necessary to support the nursing leadership as supervisors who have leadership abilities and skills in directing and supervising the course of nursing services in order to create effective and efficient nursing services (Personal, 2009),

According to Oktariani et al., (2020) said the 4S supervision process is a structured (*structure*), be it schemes, policies and time used where a supervisor must have good *skills*. Supervisors are able to provide support which makes supervision more conducive to improving and improving the performance of nurses. Supervisors carry out activities that are supervised continuously (*sustainable*).

According to Milne (2007), 4S supervision is a supervision focused on nurses to improve knowledge and skills in

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the documentation of integrated recording. 4S supervision is more complex in nature not only improving the performance of nurses, but more about improving the quality of nursing services. Where 4S supervision is an effective strategy for supervisors in motivating and improving nurse performance through structured strategies, and having skills and support that are carried out continuously and carried out gradually in the supervision phases, namely the preparation phase, the implementation phase and the evaluation phase.

RSU (RSU) Riau University is a government-owned hospital managed by Riau University. The Quality Picture of Riau University RSU, for BOR of 15.76%, is very far from the parameter value of IDEAL BOR. AvLOS was 14.96 days, BTO until August was 1.37 times and TOI until August was 18.30 days with the number of places there were 51 beds. Through the observations of researchers during a preliminary study at RSU Universitas Riau, it was seen that the documenting of nurses in integrated records in the inpatient room was not optimal. Of the 10 CPPT documentations, it appears that 3 CPPT are not carried out on an ongoing basis, 7 of which do not have continuity in soap (IER) recording and do

not have a *Treatment Goal* for the achievement of the time when each diagnosis must be completed.

Researchers assessed that supervision activities were still not carried out by the head of the room, such as when nurses would discuss CPPT, unscheduled supervision implementation and were often combined with nurses' receiving/passing activities, and were not well documented. Based on the researcher's interview with the head of the inpatient room, said that supervision is usually only carried out by the nursing field, and during the pandemic supervision is not carried out.

Based on the background, the impact of the above phenomenon, it is necessary to solve problems by improving the performance of nurses by increasing the clinical supervision ability of a manager by providing 4S supervision training so that integrated recording documentation can run well. 4S supervision is indispensable in performance monitoring and problem solving related to the quality of nursing services. For this reason, researchers are interested in conducting research on "Analysis of the relationship between the implementation of supervision to CPPT at the Riau University General Hospital".

## MATERIALS AND METHODS

This research was conducted with a *cross-sectional* approach and is a quantitative study. This research was conducted from June 29, 2022 to July 8, 2022 at the Riau University Hospital. Where the population in this study was all

implementing nurses who had received 4S supervision as many as 35 people. Sampling is carried out by *the probability sampling method of total sampling*. The questionnaire used in the study consisted of a questionnaire for the implementation

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of clinical supervision model 4S (*Structure, Skill, Support And Sustainable* consisting of 26 questions) and a monitoring sheet for the implementation of documenting integrated records consisting of subjective (current complaints, previous history, family disease history), objective (TTV, TB, BB, lab,

rad etc.), assessment, planning, date, hour, name and signature of the PPA. This study used univariate analysis and bivariate analysis using *logistic regression analysis*.

## RESULTS AND DISCUSSION

The results showed that most of the implementing nurses at the Riau University hospital were educated in D3 Nursing (63.60%) and had a service period of more than 3 years (60.60%). while the age of nurses is almost entirely in the early adult category (81.80%) and all nurses have undergone training related to nursing documentation (100%).

Through research, it is known that all supervisors are educated in S1 Ners (100%) and have a service period of more than 3 years (100%), half of the nurse's age is in the category of early adult (50.00%) and middle adult (50.00%) and all nurses have undergone training related to nursing supervision (100%). Most supervisors have the character of integrity (69.70%), competent (75.80%) and communicative (72.70%) and are almost entirely cooperative (84.80%).

The implementation of Model 4S Clinical Supervision at Riau University Hospital shows that most of the preparatory phases (57.60%) implementation (54.50%) and evaluation (57.60%) of the implementation of model 4S clinical supervision in the category are carried out appropriately.

CPPT's integrated recording documenting indicators show that most of the subjective (72.70%) and objective (63.60%) data are carried out in full and almost all assessment data (93.90%), planning (93.90%), dates (97.00%), hours (81.80%), signatures (90.90%) fall into the complete category. Most of the activity descriptions are filled in completely (69.7%) and almost all action forms (87.90%) and hour filling (87.90%) in the existing category are filled in completely.

**Table 1.**  
**Relationship of Supervision Preparation for CPPT at Riau University General Hospital (n=33)**

No	Preparation	CPPT				Total		p value	Odd Ratio (OR)
		Complete		Incomplete		N	%		
		n	%	N	%				
1	Properly Executed	19	57,60	1	3,00	20	60,60	0,000	42,75 (4,15-439)
2	Implemented Incorrectly	4	12,10	9	27,30	13	39,40		

Total	23	69,70	10	30,30	33	100
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Table 1 in the implementation of supervision obtained data, from 20 preparations for the implementation of supervision carried out correctly, 19 CPPT were carried out completely (57.60%) while from 13 preparations for the implementation of supervision that were carried out incorrectly, 9 CPPT were carried out incompletely (27.30%). Through the statistical test above, a *p value* = 0.000 was obtained, meaning that through statistical

tests, a *p value* = 0.000 was obtained, which means that there is a relationship between the implementation of supervision preparations for CPPT at the Riau University General Hospital. Through OR, a score of 42.75 was obtained, meaning that someone who prepares for supervision appropriately has a 42.75 times better chance of carrying out CPPT compared to someone who prepares for supervision incorrectly.

**Table 2.**  
**Relationship of Supervision Implementation of CPPT at Riau University General Hospital (n=33)**

No	Implementation	CPPT				Total		<i>p value</i>	Odd Ratio (OR)
		Complete		Incomplete		n	%		
		n	%	n	%				
1	Properly Executed	17	51,50	1	54,50	18	54,50	0,001	25,50 (2,64-245)
2	Implemented Incorrectly	6	18,20	9	45,40	15	45,40		
	Total	23	69,70	10	30,30	33	100		

Table 2 of the supervision implementation obtained data, from 18 supervision implementations that were carried out appropriately, 17 CPPT were carried out completely (51.50%) while of the 15 supervision implementations that were carried out incorrectly, 9 CPPT were carried out incompletely (45.40%). Through the statistical test above, a *p value* = 0.001, statistical test obtained a *p value* = 0.001,

meaning that there is a relationship between the implementation of supervision and CPPT at the Riau University General Hospital. Through OR, a value of 25.50 is obtained, meaning that someone who carries out supervision appropriately has a 25.50 times better opportunity to carry out CPPT compared to someone who carries out supervision incorrectly.

**Table 3.**  
**Relationship of Supervision Evaluation of CPPT at Riau University General Hospital (n=33)**

No	Evaluation	CPPT				Total		<i>p value</i>	Odd Ratio (OR)
		Complete		Incomplete		n	%		
		n	%	N	%				
1	Properly Executed	19	57,60	0	0	19	57,60	0,000	3,5 (1,52-
2	Implemented	4	12,10	10	30,30	14	42,40		

Incorrectly								8,01)
Total	23	69,70	10	30,30	33	100		

Table 3 of the supervision evaluation obtained data, from 19 supervision evaluations carried out correctly, 19 CPPT were carried out completely (57.60%) while of the 14 supervision implementations carried out incorrectly, 10 CPPT were carried out incompletely (30.30%). Through statistical tests, a  $p$  value = 0.000 was obtained, meaning that there is a relationship between

the evaluation of supervision of CPPT at the Riau University General Hospital. Through OR, a value of 3.5 is obtained, which means that someone who carries out the supervision evaluation correctly has a 3.5 times better chance of carrying out CPPT compared to someone who carries out supervision incorrectly

## DISCUSSION

### 1. Relationship of Supervision Implementation of CPPT at Riau University General Hospital.

Through research, it can be seen that there is a relationship between the implementation of supervision ( $p$  value = 0.000) to CPPT. This is in line with the research of Suarli & Bachtiar (2010), saying that the supervision of the head of the room is one of the factors that affect the compliance of nurses in carrying out their duties in the hospital. The supervision implementation phase is a phase where a supervisor is able to assess the performance of nurses based on instruments and measuring instruments that have been prepared. Supervisors are able to supervise directly and periodically which if problems are found in nursing, they can immediately be given direct assistance to overcome existing problems.

According to Santoso (2019), the implementation of supervision is carried out by direct visits through direct observation activities where the supervisor conducts inspections and question and answer interviews with

nurses. Nursing supervision aims to assist implementing nurses in developing professionalism so that the appearance and performance of nurses in providing nursing care can increase, especially in carrying out integrated recording. Supervision is related to the satisfaction of the nurse's work where the nurse will feel the support of the supervisor and can be supervised properly so that in carrying out their work will be more satisfied with the results of their work.

The results of the study showed that the implementation of supervision in this study was where a supervisor would provide an opportunity for the implementing nurse to convey problems that arose related to the documentation of integrated recording (63.60%), the supervisor gave an obligation to the supervisor to give the obligation to the nurse to carry out the integrated documentation appropriately (51.50%), the supervisor would supervise when supervising (72.70%), a the supervisor will guide the nurse on making appropriately

integrated documentation (66.7%), the supervisor will direct the nurse to work in accordance with the existing SPO (57.60%), in improving the appropriately integrated recording, the supervisor provides support to the nurse (60.60%), the supervisor explains about the implementation of the correct integrated documentation recording (57.60%), the supervisor provides support to improve the nurse's knowledge of the nurse about proper integrated documentation recording (66.70%), supervisors provide support and opportunities for implementing nurses to take part in training and seminars on integrated documenting records (45.50%), when supervision of supervised nurses provides input (57.60%), supervisors remind nurses in carrying out nursing actions to always document into integrated recording (51.50%) and supervisors provide examples in implementing the correct integrated documenting records (60.60%).

Based on mua's research (2011) it is known that there is an influence of head room clinic supervision training on job satisfaction and performance of implementing nurses in the inpatient room of *Woodward* palu hospital where *the p value = 0.000*. This is in line with the research of Oktariani et al (2020) which said that 4S-based clinical supervision of the application of patient safety by the intervention group at Raden Mattaher Jambi Hospital (0.012) which was carried out appropriately would significantly affect the

satisfaction of nurse performance (*p value = 0.000*).

Researchers assume that the implementation of nursing supervision must be in accordance with the objectives of the implementation of supervision, support the improvement of the quality of nursing services, carry out control, supervision using problem solving techniques. The implementation of the supervision of the head of the room must be scheduled and structured and carried out continuously in order to ensure that the implementation of nursing care is in accordance with nursing practice standards and can be well documented.

A nursing supervisor must have reliable managerial abilities to be able to carry out supervision so that he can carry out the role of a planner, director, coach and assessor.

## 2. The Relationship between Supervision Evaluation of CPPT at Riau University General Hospital

From the results of the study, it can be seen that there is a relationship between supervision evaluation (*p value = 0.000*) and CPPT. The last phase of supervision activities is evaluation where in providing a supervisory assessment (*F-fair*) a supervisor can be carried out from direct and indirect observations where the supervisor will provide *feedback* and clarification on the implementation of supervision activities and provide *reinforcement* and *follow-up* improvements that are

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positive (Santoso, 2015).

According to the Director General of Health Efforts at RSUP Persahabatan (2015), CPPT is a series of information that records all the patient's condition and development, as well as the treatment and actions received by the patient. CPPT is used by PPAs in planning, monitoring and evaluating the patient's condition. Supervision not only functions as a supervisory process but also as a structured guidance process, staff support, good brainstorming facilities, continuity and can improve the quality of service after nursing evaluation.

The results of the study showed that the supervisor's evaluation in this study was that the supervisor provided feedback on the results of supervision (63.60%), the supervisor would provide alternative problem solving not in accordance with the integrated documentation of managed patients without involving the implementing nurse (57.60%), the supervisor provided *reinforcement* if the nurse complies with implementing integrated documentation recording correctly (60.60%), the supervisor checks the results of the nurse's work according to predetermined standards (63.60%), and the nurse will be penalized if he does not apply the integrated documentation recording correctly by the supervisor (45.50%).

## CONCLUSIONS

This study proves that there is a relationship between the preparation

Through research, it can be seen that the evaluation phase also affects the completeness of CPPT. The evaluation phase, CPPT which is a means of communication between health professions in providing services to patients, where the communication in question is effective communication between professions which aims to prevent misinformation, interdisciplinary coordination, prevent repeated information and also assist nurses in service time management.

Evaluation of the implementation of supervision in this study is not only to carry out control but also includes determining the personal and material conditions or requirements needed to achieve the goals of nursing asuahn effectively and efficiently. Evaluation of the implementation of supervision is very important where the improvement of CPPT documentation in the future will refer to solving existing problems

Based on the researcher's assumptions, the evaluation phase has a close relationship with CPPT and the evaluation assessment must always be improved in order to get optimal improvement. To carry out integrated recording, it is necessary to support the nursing leadership as supervisors who have leadership abilities and skills in directing and supervising the course of nursing services in order to create effective and efficient nursing services.

phase ( $p\text{-value} = 0.000$ ), the implementation phase ( $p\text{ value} = 0.001$ ),

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and the evaluation phase ( $p$  value = 0.000) of 4S model clinical supervision with CPPT at RSU Universitas Riau. The results of this study are suggested to be a reference in improving the quality of hospital services by increasing the ability of nurses to

document integrated records. The supervising nurse is expected to be able to improve the ideal 4K supervision ability and the clinic's understanding of the 4S model, in order to supervise the implementation of nursing care documentation appropriately.

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