



THE RELATIONSHIP BETWEEN HEAD NURSE CONTROLLING FUNCTION AND THE COMPLETENESS OF NURSING CARE DOCUMENTATION

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ABSTRACT

Nursing care documentation (ASKEP) is a vital clinical quality indicator influenced by ward unit management. This study analyzed the relationship between the head nurse's management controlling function and the completeness of ASKEP at RSUD Yowari, Papua. A quantitative analytical design with a cross-sectional approach was conducted among 34 staff nurses. Data were collected via standardized questionnaires and observation checklists, then analyzed using Fisher's Exact Test ($\alpha=0.05$). Respondents were predominantly female (94.1%), early adults (91.2%), held a Diploma-III (85.3%), and had <10 years of tenure (58.8%). Head nurse controlling was perceived as poor (76.5%), yet ASKEP completeness was high/complete (82.4%). Bivariate analysis indicated no significant relationship between variables ($p=1.000$; $p>0.05$). Staff documentation compliance is systemically independent, driven by external macro-organizational pressures (systemic-driven compliance) including national accreditation preparation and professional-legal safety motivation, rather than internal daily unit supervision.

Keywords: documentation completeness; head nurse controlling; nursing care

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INTRODUCTION

Nursing documentation is a crucial element in the modern healthcare system, functioning to ensure continuity of care, provide professional-legal safety for clinical practice, and serve as a primary indicator in assessing hospital quality. All nursing interventions delivered to patients must be recorded accurately and continuously as authentic evidence of professional accountability. Globally, the compliance rate for high-quality nursing care documentation (ASKEP) is still categorized as low; a study in Ethiopia reported that 40.8% of nurses failed to optimize patient care records. In Indonesia, the compliance rate for standard nursing documentation averages only 77%, and several case reports in suburban regional hospitals outside Java demonstrate a high prevalence of incomplete charts driven by high operational workloads and a tendency among nurses to prioritize direct physical interventions over administrative recording. Incomplete documentation behavior can be minimized through effective ward management. The ward head nurse holds a central role as a first-line manager who coordinates planning, organizing, actuating, and controlling components. The controlling function—executed through clinical supervision, periodic guidance, and performance evaluations—is considered capable of dynamicizing nursing compliance in adhering to standard operating procedures (SOP). Previous studies in Bengkulu by Fitrawan et al. (2022) and in Kerinci by Friandi et al. (2020) consistently support this theory, proving a significant positive relationship between the head nurse's firm supervision and the staff nurses' discipline in completing care records.

However, a contradictory phenomenon is frequently observed in the governance of regional public hospitals. The dual administrative workload imposed on head nurses—such as managing ward logistics and verifying healthcare insurance bureaucracy—risks degrading the unit's direct clinical

quality control. Conversely, external organizational pressures, such as preparing for national institutional accreditation cycles (KARS) and the nurses' heightened awareness of personal legal safety, trigger a systemically independent compliance pattern among staff nurses. The gap between weakening internal unit management control and macro-systemic compliance demands underpins the importance of this study. Therefore, this research aims to analyze deeply the relationship between the ward head nurse's management controlling function and the completeness of nursing care documentation in the Inpatient Wards of RSUD Yowari, Jayapura Regency, Papua.

METHOD

This quantitative analytical study using a cross-sectional approach was conducted in April 2026 in the Inpatient Wards of RSUD Yowari, Jayapura Regency, Papua, involving 34 staff nurses selected via non-probability sampling based on active and cooperative inclusion criteria. Data were gathered using a standardized Likert-scale controlling function questionnaire (18 items) and a Guttman-scale nursing record audit checklist (24 indicators) adapted from Arhandi (2025), followed by computerized univariate and bivariate analysis utilizing Fisher's Exact Test ($\alpha=0.05$) as an alternative test due to 50% of the Chi-Square cells having an expected count of less than 5. The research procedure obtained formal ethical clearance from the LPPM Ethics Committee of Universitas Negeri Malang under Exemption Certificate Number: 20.05.15/UN32.14.2.8/LT/2026, while fully maintaining the autonomy, anonymity, and confidentiality of all respondents.

RESULT

This study was conducted among staff nurses in the Inpatient Wards at RSUD Yowari, Jayapura Regency, with a total number of respondents were 34 nurses. Data collection on respondents' demographic characteristics in this study included three main indicators, namely age, education level, and work tenure. The univariate data analysis showed that the respondents' characteristic profile was heavily dominated by the Early Adulthood age group with 31 nurses (91.2%), graduates of the Diploma-III in Nursing vocational path with 29 nurses (85.3%), and possessed a clinical work tenure of less than 10 years (<10 years) totaling 20 nurses (58.8%).

Table 1.

Respondent Characteristic Data			
Respondent Characteristic	Category	f	%
Gender	Man	2	5.9
	Woman	32	94.1
Age	Early Adulthood	31	91.2
	Middle Adulthood	2	5.9
	Young Adulthood	1	2.9
Education	DIII	29	85.3
	S1	2	5.9
	Profesi Ners	3	8.8
Job Tenure	< 10 Years	20	58.8
	> 10 Years	14	41.2

Based on Table 1 it is known that out of 34 respondents, in the gender category, the highest presentation was obtained by women with a percentage of 94.1%. In the age category, the highest presentation was in the Early Adulthood group with a percentage of 91.2%. The highest education category is in DIII level with a percentage of 85.3%. Meanwhile, for the job tenure category, the highest is less than 10 years with a percentage of 58.8%.

Table 2.

Management Controlling Function		
Management Controlling Function	f	%
Poor	26	76,5%
Good	8	23,5%

Based on the table it is known that out of 34 respondents, in the management controlling function category, the highest presentation was obtained by the poor category with a percentage of 76.5%.

Meanwhile, for the management controlling function category, the good category obtained a percentage of 23.5%.

Table 3.
Completeness of Nursing Care Documentation

Completeness of Nursing Care Documentation	f	%
Incomplete	6	17,6%
Complete	28	82,4%

Based on Table 3, it is known that out of 34 respondents in the completeness of nursing care documentation category, the highest percentage was obtained by the complete category with a percentage of 82.4% (28 respondents). Meanwhile, the incomplete category obtained a percentage of 17.6% (6 respondents).

DISCUSSION

The bivariate testing in this study reveals a unique phenomenon where the Fisher's Exact Test significance value shows an Exact Sig. (2-sided) of $p = 1.000$ ($p > 0.05$), meaning that the null hypothesis (H_0) is accepted and statistically there is no significant relationship between the ward head nurse's management controlling function and the completeness of nursing care documentation in the Inpatient Wards of RSUD Yowari, Jayapura Regency. This finding fundamentally contradicts previous studies in Bengkulu by Fitrawan et al. (2022) and in Kerinci by Friandi et al. (2020), which consistently proved a positive linear relationship where strict oversight by head nurses served as the primary determinant of staff nurses' administrative discipline. Based on an in-depth analysis of field dynamics, the non-significance of this relationship is triggered by a contextual governance gap. On one hand, the internal management controlling function executed by head nurses was perceived as Poor by the majority of respondents (76.5%) due to the heavy double burden of structural-bureaucratic workloads that consumed their duty hours, such as managing ward logistics, attending centralized management meetings, and resolving patient insurance claim verifications (BPJS Kesehatan). Due to these non-clinical administrative burdens, head nurses lost their dedicated time to conduct regular bedside supervision.

On the other hand, the performance of staff nurses in fulfilling nursing care documentation (ASKEP) completeness at RSUD Yowari was paradoxically very high, reaching 82.4% in the Complete category. This data contrast proves that the nurses' compliance behavior in completing administrative duties has shifted toward a systemic-driven compliance pattern. The researcher identified that the staff's motivation to finish care records was tightly driven by a macro-control system outside the ward unit, particularly because during the data collection period, the hospital was actively preparing for the national institutional accreditation cycle by KARS. Charting compliance was heavily and centrally monitored through continuous quality audits by the Nursing Committee, backed by direct administrative disciplinary consequences. Furthermore, the majority of staff nurses belonging to the highly productive Early Adulthood group (91.2%) possessed a heightened awareness of personal professional-legal safety to avoid malpractice liabilities and institutional warnings. The standardized clinical charting format using a practical checklist layout also simplified the entry process, helping nurses finish paperwork despite high daily physical workloads. Consequently, although daily unit-level supervision by head nurses was sub-optimal, centralized macro-regulatory mandates and the nurses' legal safety awareness successfully substituted the internal control role, allowing ASKEP completeness to remain excellently maintained independently.

CONCLUSION

Conclusion: 1) Based on the statistical analysis, the data indicates that there is no significant relationship between the ward head nurse's management controlling function and the completeness of nursing care documentation in the Inpatient Wards of RSUD Yowari, Jayapura Regency, Papua,

as demonstrated by the Fisher's Exact Test significance value of $p = 1.000$ ($p > 0.05$). 2) Descriptive evaluation in this study reveals a contradictory field phenomenon, where the internal unit-level supervisory function by head nurses is perceived as poor by the majority of respondents (76.5%), yet independently, the performance of nursing care documentation (ASKEP) completeness among staff nurses is paradoxically high and complete (82.4%). 3) This condition concludes that staff nurses' compliance behavior in fulfilling clinical medical records has shifted toward a systemic-driven compliance pattern, where the staff's administrative discipline no longer linearly depends on the daily unit control of the head nurse but is actively driven by macro-organizational forces, including national accreditation mandates and a heightened awareness of personal professional-legal safety.

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