Nurses Performance Improvment

by Prayudhy Yushananta

Nurses' Performance Improvement Model in Hospital of Dr. M. Yunus Bengkulu, Indonesia

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Abstract
Background: *In general, nurses in government hospitals show less performance compared to performance in private hospitals. The study aimed to identify the intervention model to improve the performance of the nurses and their influence on the performance of nurses and the quality of services in the inpatient ward.*
Methods: *The study uses an action research approach through three stages of research. The sample is the implementing nurse and the patient in the inpatient room with cluster sampling technique, while the sample to determine the effect of the intervention model on improving the quality of service is done by following sampling technique. The study was conducted in six inpatient rooms of Dr. M. Yunus Hospital Bengkulu, Indonesia for 2 months. Data collection applied observation guidelines and analyzed quantitatively with the Wilcoxon Signed Ranks test, and the Mann Whitney test at α 5%.*
Result: *The results showed that the average score of all sub-variables of the performance of the nursing process, communication, organizing, advocacy, adherence to the nursing code of ethics showed a significant difference before and after the intervention model of nurses' performance improvement (p = 0,000). Also, there were differences significant mean score of performance between before and after being given intervention.*
Conclusion: *Hospital of Dr. M. Yunus Bengkulu is expected to require every head of the room to apply o an intervention model of performance improvement in the inpatient room.*
Keyword: *Performance Improvement Model, Implementing Nurse, Hospital Inpatient Room.*

Introduction

The achievement of high standards of nursing practice nurse or high performance in the nursing service will affect the quality of health care as a system. More top nurse performance will ultimately increase patient satisfaction with nursing services which are part of hospital services (Schmele, 1996).

The results of the research by Putra and Rahyanti (2008) showed that most (57.5%) nurses in inpatient room at Ngudi Waluyo General Hospital had work productivity <85%. The results of Zuhriana, et al. (2012) in General Hospital, East Seram District showed that most (82.4%) nurses were less disciplined and more than half of the nurses (61.8%) had less performance.

This shows that the performance of nurses in hospitals is still not good, especially in government hospitals. The reason is the performance appraisal system that only uses the list of work accomplished and the absence of a system career and awards that can provide better work motivation. Starting in 2014 the appraisal performance of nurses has used Employee Performance Goals, but its application is still new and has not offered maximum results. One of the efforts that can be done to improve the performance of nurses in government hospitals is to develop the ability and skills of nurse nurses that are related to the process of providing nursing services. (Widaningsih, 2001).

Dr. M. Yunus Bengkulu is a self-funding government hospital owned by the local government. The hospital vision is "Being the Best Medical Referral Center in Province Bengkulu with Excellent Service." Performance of nurses in Dr. M. Yunus has not shown encouraging results as research results of Syafriyani's (2011) in the hospital indicates that almost half (47.5%) of nurses are not good at applying the nursing process.

Low performance of nurses in Dr. M. Yunus Bengkulu has an impact on the quality of nursing services and patient satisfaction as Astuti's (2010) research results show that more than half (66.2%) of respondents stated that they were not satisfied with the care of nurses.

The purpose of this study was to identify models for improving the performance of nurses and their effects on the performance of nurses in the inpatient room of RSUD dr. M. Yunus Bengkulu, Indonesia.

Materials and Methods

The research uses an *action research approach*. The population in this study were all nurses in the inpatient room of Dr. M. Yunus Bengkulu. The study sample consisted of 62 nurses comprised of 31 people per group. Research instrument to measure nurse performance by using performance observation guidelines composed of 48 statement items. Data analysis was univariate and bivariate by using the *Wilcoxon Signed Ranks* and *Mann Whitney* test at α 5%.

Results

Table 1. Distribution of respondents based on gender, education and marital status

No.	Variable	Intervention		Group Control Group	
		F	%	f	%
1.	**Gender**				
	Male	4	12,9	4	12,9
	Female	27	87,1	27	87,1
2.	**Education**				
	High School	1	3,2	1	3.2
	Nursing Associate	11	35,5	7	22.6
	Nursing Degree	19	61.3	23	74.2
3.	**Marital Status**				
	Married	29	93.5	31	100
	Not Married	2	6.5	0	0

In the intervention group most (87.1%) were female more than half (61.3%) with bachelor/nursing education, and almost all (93.5%) were married. In the control group, most (87.1%) were female, most (74.2%) with a degree in nursing education, and all (100%) respondents were married.

Table 2. Distribution of respondents by age and length of employment

Groups	N	Mean	Median	SD	Min – Max	95% CI
Ages						
Intervention	31	30.81	30	3.902	24-40	29.38-32.24
Control	31	31.55	30	4.809	24-45	29.78-33.31
Tenure						
Intervention	31	7.55	7	2.567	4-13	6.61-8.49
Control	31	8.39	7	5.103	4-27	6.52-10.26

In the intervention group, the mean the average age of the respondents was 30.81 years with a standard deviation of 3.902 years. From the results of the interval estimation, it was concluded that 95% in the average age of respondents are between 29.38-32.24 years. In the control group, the average age of respondents was 31.55 years with a standard deviation of 4.809 years. From the results of the interval estimation, it was concluded that 95% in the average age of respondents are between 29.78-33.31 years.

In the intervention group, the average length of work of respondents was 7.55 years with a standard deviation of 2.567 years. From the results of the interval estimation, it was concluded that 95% of the average length of work of respondents are between 6.61-8.49 years. In the control group, the average range of action of respondents was 8.39 years with a standard deviation of 5.103 years. From the results of the interval estimation, it was concluded that 95% of the average length of work of respondents was between 6.52-10.26 years.

Table 3 Equivalence analyzes the performance of nurses

Variabel	N	Mean	Standard Deviation	P
Performance				
Intervention	31	209.81	17.367	0.092
Control	31	203.55	14.076	

Results of the analysis showed that the performance of nurses equality between the intervention and control groups are equal. The results of statistical tests on performance in the intervention group and the control group show a value of p = 0.092 > α 0.05.

Table 4 Analysis of the performance of implementing nurses improvement model

No.	Nurse Performance	Groups	N	Mean	SD	Z	P- Value
1.	Application of Nursing Process	Before	31	57.58	5.150	-5.249	0.000
		After		59.52	3.604		
2.	Communication	Before	31	48.94	4.669	-4.360	0.000
		After		50.16	4.034		
3.	Work Organizing	Before	31	21.87	2.187	-2.784	0.000
		After		22.39	1.820		
4.	Advocacy of nurse	Before	31	16.68	1.777	-4.179	0.000
		After		17.10	1.557		
5.	Compliance with the Nursing Code of Ethics	Before	31	64.74	5.597	-5.492	0.000
		After		66.45	4.871		

Before being given an intervention model for improving the performance of nurses is with an average of 57.58 to 59.52. The results of statistical tests also showed that there were significant differences in the average score of the performance of the application of the nursing process between before and after being given intervention (p-value = 0.000). Before being given an intervention model of increasing the performance of nurses is with an average of 48.94 to 50.16. Statistical test results also showed that there were significant differences in the average score of communication performance between before and after being given intervention (p-value = 0.000). Before being granted a response, the model for improving nurse performance is with an average of 21.87 to 22.39. The results of statistical tests also showed that there was a significant difference in the average score of work organizing performance between before and after the intervention was given (p-value = 0.000). Before being given an intervention model, improving the performance of nurses is with an average of 16.68 to 17.10. Statistical test results also show that there is a significant difference in the average score of advocacy performance between before and after being given intervention (p-value = 0.000). Before being given the response, the model for improving the performance of nurses is with an average of 64.74 to 66.45. Statistical test results also show that there is a significant difference in the average score of the performance

of compliance with the nursing code of ethics between before and after the intervention (p-value = 0.000).

Further, the intervention group had an increase in the performance of the nurse before being given an intervention model for improving the performance of nurses, with an average of 209.81 to 215.61. Statistical test results also showed that there was a significant difference in the average score performance between before and after the intervention was given to the intervention group (p = 0.000). The results of the analysis also showed that in the control group there was an increase in the performance of the implementing nurses, before being given the intervention booklet, with an average of 203.55 to 206.10. Statistical test results also show that there is a significant difference in the average score performance between before and after the intervention (p-value = 0.000).

The average increase in performance of nurses in the intervention group for improving the performance of nurses is better than the average improvement in the production of nurses in the control group given a booklet. Statistical test results also showed that there was a significant difference in the average score of performance improvement between before and after the intervention was delivered (p-value = 0.03). This means that the intervention performance improvement model improves the performance of nurses in hospital inpatients is higher than the intervention with booklet.

Discussion

The results showed that the average score performance in the intervention and control groups before being given a performance improvement intervention was almost the same. This is also supported by the results of the analysis of the equality of the performance of the implementing nurses between the intervention and control groups where p = 0.092 which means that there is no significant difference in the performance of the implementing nurses in the

intervention and control groups, or the performance of the implementing nurses in the two groups is equal. The results of this study are in line with Hermansyah's (2009) study that a small proportion (25.9%) of nurses were in the inpatient room of Dr. RSUD. M. Yunus Bengkulu has a poor performance. The results of this study are also in line with the results of Saefulloh's research (2009) in Indramayu Regional Hospital, where the performance of nurses implementing before being given a performance training intervention in the form of application of nursing care and supervised by the head of the room was 77.03%. Internal and external factors influence performance. Internal elements consist of ability and motivation (Wijono, 2000). External factors are all things that come from other influential parties or the environment, for example, parents, co-workers, patients and families or leaders who influence someone to be able to work harder to achieve something. The factors that affect performance are supervision, leadership style (Nursalam, 2002).

In this study to improve the ability of nurses in the inpatient room is done by training to improve performance. Implementing nurses must change according to the increasingly complex dynamics and demands of service where service quality is prioritized. Therefore routinely needed training and development of nurses so that cognitive, affective, and psychomotor abilities are by their work needs (Saefulloh, 2009).

The results of the study showed that there was an increase in the average score of the performance of the nurses in implementing the nursing process at 1.94 (3.26%), in the application of communication at 1.22 (2.43%) , in the implementation of work organizing by 0.52 (2.32%), in the form of nurse advocacy by 0.42 (2.46%), in the application of adherence to the nursing code of ethics was 1.71 (2.57%) and an increase the average score of the nurse's performance was 5.8 (2.69%).

The results of the study showed that interventions to improve performance could improve the

performance of nurses in the inpatient ward. The results of the study are in line with Saefulloh's (2009) research that there is a significant increase in the performance of nursing care provided by nursing nurses after receiving nursing care training and supervised by the head of the room who has been trained and supervised by supervision (p = 0.000).

The results of the study are in line with Saefulloh's (2009) opinion that training and development are things that must be done by an organization so that staff gains new knowledge, skills, and abilities according to the development of science and technology. According to Gillies (1995), training in nursing is one of the staff development activities that aim to improve the quality of human resources in this case nurses. According to As'ad (2003), the objectives of training are to increase productivity work, enhance the quality of work, improve accuracy in human resource planning, especially nurses, improve staff personality maturity, and develop intellectual abilities and skills.

The results of the study showed that the performance improvement intervention in the form of performance improvement training, increasing the role of the head of the room, coworker support and patient and family involvement were more effective in improving the performance of nurses in the inpatient ward than the improvement intervention. The results of the study are in line with Saefulloh's (2009) research that there are significant differences in the performance of nurse nurses between groups who received nursing care training and supervised by the head of the room who were trained and managed by the group who did not receive nursing care training and overseen by the head of the place who was not qualified and oversaw supervision (p = 0.000).

In this study to improve the ability of nurses in the inpatient room is done by training to improve performance (Saefulloh, 2009). Materials The training provided was about the application of the nursing process, documentation of medication,

therapeutic communication, relationships interpersonal, caring, quality of nursing services, performance and excellent service, in the form of lectures and simulations.

Performance improvement is also carried out by increasing the role of the head of the room by guiding supervise and document nursing care. The Head of the room was also given a *Booklet* on guidelines for supervision, the role of the head of the office to increase the motivation of nurses' work and documentation of health insurance. Besides that, it also increases the support of colleagues (implementing nurses who work in the same room) to improve the performance of other implementing nurses.

The involvement of patients and families is the last variable included in the model to improve nurse performance. The participation of patients and families who know the rights and obligations of patients and nurses will also encourage nurses to enhance their performance. According to Nursalam (2002), patients and families are one of the external factors that can affect the performance of nurses. In this study to increase the involvement of patients and families, patients and families are given explanations and *booklets* about patient rights, rights, responsibilities, obligations, and authority of the nurse when the patient enters the inpatient room.

Conclusions

The average score of the performance of the nurse implementing before being given the intervention model for increasing the production of nurses in the intervention group was 209.81 and after that was 215.61. The average score of the performance of the nursing nurse before the intervention was given *booklet* to the control group is 203.55, and after is 206.10 There is a significant difference in the average score performance between before and after being given intervention in the intervention group. Intervention, performance improvement models, improve the performance of nurses in hospital inpatients higher than with intervention *booklet*.

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