CORRELATION OF THE HEADROOM SUPERVISION AND THE ELECTRONIC NURSING DOCUMENTATION METHOD IN THE ERA OF COVID-19

Dila Sari Putri*, Nelly Febriani1
1,2Department of Nursing, Faculty of Health Sciences, Jakarta Veteran National Development University
*E-mail: dilasariputri@upnvj.ac.id

Abstract
The application of electronic nursing documentation makes it difficult for nurses to adapt to the system. Supervision carried out by the head of the room can affect the quality of electronic nursing documentation. The purpose of this study was to identify the correlation between the supervision of the head of the room and the implementation of nursing care using the Electronic Nursing Documentation. This study uses a descriptive correlation research design using a cross-sectional approach. The sampling technique used was purposive sampling with a total sample of 129 nurses. Collecting data using a questionnaire and analyzed using the Chi-Square test. The results of statistical tests showed that there was a significant correlation supervision (p=0.000) with electronic nursing documentation. The recommendation of this study is that hospital management is expected to be able to periodically supervise electronic nursing documentation, even in the current state of the Covid-19 pandemic.

Keywords: Electronic Nursing Documentation, Nurse, Supervision

Introduction
In the current era of the Covid-19 pandemic, the development of information technology cannot be left alone. The use of information technology in the health sector has a major role for hospital resources to improve the quality of health services (Pujani et al., 2019). Currently, many hospitals have implemented computer-based information systems to facilitate health services. However, hospitals in Indonesia only implemented computer-based information systems in the 2000s (Wulandari & Handiyani, 2019). This situation is supported by the minister of health who issued legislation on information technology which is stated in Law no. 36 Year (2009b) article 168 chapter XIV regarding health information that the implementation of health services that are practical and does not take time requires information technology and is cross-sectoral. This has been regulated in the Regulation of the Minister of Health Number 148 of (2010) concerning the implementation of nursing practice, which states that nurses are required to document nursing care in a structured manner and meet standards. Through nursing documentation, nurses can find out what plans will be made next.

The development of information technology in the world of health that is very rapidly has a big influence on the world of nursing. The transformation of conventional nursing documentation towards computerization has an impact on meaningful progress for nurses. Electronic-based nursing documentation is a technological development in the scope of nursing which includes nursing care records, making it easier for nurses to make decisions for further nursing actions (N. Y. Sari, 2018). At this time, electronic-based medical recording systems have been widely used by hospitals, for example Electronic Nursing Documentation (END), Electronic Medical Record (EMR), Electronic Health Record (EHR), and so on (Dewi, 2019). Electronic Health Record documentation is very useful for all medical personnel, especially nurses (Agarta & Febriani, 2019). Sulastri (2018) explains that there are benefits of END such as less risk of errors, more complete records of nursing evaluation results, and easier reporting and access to information. In addition, Wulandari (Wulandari & Handiyani, 2019) stated that the advantages of END for nurses are short recording times, easier data to read, low risk of data loss, and easy access. Not only that, it can also prevent unwanted events, respond quickly to unwanted events, and can track unwanted events, these are the advantages of END (Lee, S. H., & Yu, 2018, p. 15). END is an effective way to deal with nursing care documentation. Although END has many benefits and advantages, its implementation can potentially cause problems. Electronic documentation increases the nurse's workload due to a lack of understanding in its use (Balestra ML., 2017). This is associated with insufficient time in recording electronic documentation throughout the work shift making the electronic documentation unable to be used as
a reference for nursing care at the time of handoff, so nurses rely on paper notes that have been made before being entered into electronic records. In addition, nurses providing nursing care to patients are reduced because nurses focus more on their performance on computer screens, there are system changes that make it difficult for nurses to adapt to the system such as computer screen displays and nursing care formats, and there are also risks regarding legal and legal issues. Nursing ethics regarding patient health data, especially aspects of data confidentiality and patient rights (Hariyati et al., 2018). Efforts to minimize the obstacles obtained from electronic-based documentation systems must be carried out. Support from leaders and organizations can affect the effectiveness of implementing an electronic-based nursing documentation system (Hariyati et al., 2018). The head of the room as a nurse manager must carry out a supervisory function in managing an electronic-based nursing documentation system.

Ilyas (2012 cited in (Andriani, 2017)) mentions that there are several factors that affect the performance of nurses in providing nursing care using the electronic nursing documentation method, namely individual factors consisting of ability, age, gender, and level of education. Then there are organizational factors including human resources, leadership, supervision, and organizational structure. And the last is psychological factors which consist of attitude, perception, personality and motivation. Supervision is a hierarchical factor that affects the appearance of medical nurses in providing nursing care. Supervision is a program carried out by the head of the room to the implementing nurse with the aim of making the organization's vision run smoothly (Sihotang et al., 2016). Puspitasari (2018) states that the supervision of the head of the room can affect the competence of nurses in carrying out nursing care. One form of obligation that must be owned by the head of the room as a supervisor is to evaluate the quality of services provided by implementing nurses to patients in the form of electronic nursing documentation. Manuhutu, et al (2020) stated that the score for documenting nursing care increased after training and mentoring for the head of the room for implementing nurses. From this study it can be concluded that clinical supervision must be carried out regularly and directed by the head of the room to the implementing nurse in order to create quality and competent nursing care services. The results of research conducted by Pranatha (2020) are that there is a correlation between the supervision of the head of the room and the completeness of nursing care documentation. Complete recording of nursing care will affect the quality of nursing care services. Through the supervision of the head of the room, the implementation of nursing documentation will be carried out properly.

The current pandemic condition makes nurses find it difficult to apply electronic-based documentation (Istyanto & Maghfiroh, 2021). A pandemic is an outbreak of infection that affects many people, causing death, social and economic problems (Jamison et al., 2017). Coronavirus Disease 2019 (Covid-19) is a respiratory infection caused by the SAR-Cov-2 virus which is transmitted through direct physical contact, droplets, and airborne during aerosol procedures (World Health Organization, 2020). WHO (World Health Organization, 2020) said that nurses are the largest health professionals to contribute in handling Covid-19 cases. Even in situations like this, nurses work in totality in providing health services to patients. Researchers conducted interviews with 10 implementing nurses and 5 head of the inpatient room at Pasar Minggu Hospital on March 23-28, 2021. Based on the experience gained by nurses and head of the room, the current condition at Pasar Minggu Hospital has become a Covid referral hospital. -19 resulting in an increase in the number of patients in the Inpatient Room. As many as 7 out of 10 (70%) nurses at Pasar Minggu Hospital felt that they were facilitated by the presence of the electronic nursing documentation system. Nurses will find it easier to document using electronic media compared to paper/hardcopy media. However, in its implementation there are several obstacles expressed by nurses. The results of the preliminary study showed that 6 out of 10 (60%) nurses said that the Pasar Minggu Hospital had not fully used the computer system, there was still the use of paper such as patient data, general consent, and informed consent. When the network is in trouble, the head of the room instructs the nurse to return to the paper system.

The results of the preliminary study found as many as 5 out of 10 (50%) nurses filled out the assessment form that was not in accordance with the patient's condition. As many as 6 out of 10 (60%) nurses said that the diagnoses were not included in the template in the electronic nursing documentation method. As many as 5 out of 10 (50%) nurses said that the latest diagnoses from Nanda, NIC, and NOC were not fully available. The diagnoses entered as the main diagnoses and the implemented diagnoses are not fully appropriate. Nurses sometimes add notes that have not been included in the template in the electronic nursing documentation method. As many as 5 out of 10 (50%) nurses said that the pandemic era made it difficult for nurses to input the data that had been obtained. According to the implementing nurse, to overcome obstacles related to nursing care documentation, the role of the head of the room is needed to carry out supervision and individual guidance of implementing nurses. In the current pandemic era, the head
of the room rarely supervises nursing care using the electronic nursing documentation method. As many as 60% of nurses said that supervision was only carried out a maximum of once a month for each individual. If there is a new format, nurses will find it difficult to implement an electronic nursing documentation system. The researcher suspects that there is a role for the head of the room who can overcome obstacles in the implementation of Electronic Nursing Documentation. Researchers want to identify how the role of the head of the room as a supervisor in overcoming the obstacles contained in the implementation of Electronic Nursing Documentation. Therefore, the researcher will conduct a study with the title "The Correlation of Room Head Supervision with the Electronic Nursing Documentation Method in the Covid-19 Pandemic Era at Pasar Minggu Hospital, Jakarta". Based on the description above, this study aims to identify the correlation between the supervision of the head of the room and the implementation of nursing care using the Electronic Nursing Documentation method during the Covid-19 Pandemic Era in the Inpatient Room of Pasar Minggu Hospital, Jakarta.

Methods

This study uses a Cross Sectional Study approach using a descriptive correlation design because the researcher will find out whether there is a correlation between the independent variables which means that here a supervisor or head of the room if associated with a dependent variable is the application of electronic nursing documentation at one time. This type of research is a correlation or association that examines the correlation between the independent variable and the dependent variable (Nursalam, 2017). The sampling technique used is the purposive sampling technique because the researchers want to take samples from all types of Covid-19 referral inpatient rooms. Then the researchers will take samples on floors 7, 8, 9, and 10 by taking samples using the slovin as many as 129 respondents as well as the research instrument using a Likert scale scale.

The inclusion criteria in this study were the following nurses who currently work in the 7,8,9, and 10th Floors of RSUD Pasar Minggu Jakarta, nurses in the 7,8,9, and 10th Floors of the Pasar Minggu Hospital Jakarta who are currently working in the Inpatient Room, willing to be research respondents, and nurses in the Inpatient Room 7, 8, 9, and 10 of Pasar Minggu Jakarta Hospital who are willing to fill out research questionnaires. The exclusion criteria in this study were as follows: the head of the room in the Inpatient Room at Pasar Minggu Hospital, Jakarta, the nurse in the Inpatient Room at Pasar Minggu Hospital, Jakarta who was on leave from work, the nurse in the Inpatient Room at Pasar Minggu Hospital Jakarta, who was sick and did not come to work. nurses in the inpatient ward of Pasar Minggu Jakarta Hospital who were not willing to be research respondents, nurses in the inpatient ward of Pasar Minggu Jakarta Hospital who resigned as research respondents, nurses in the outpatient ward of Pasar Minggu Jakarta Hospital, nurses in the emergency room of Pasar Minggu Jakarta Hospital, and nurses in the ICU room at Pasar Minggu Hospital, Jakarta.

The data analysis used is univariate analysis, bivariate analysis, and Odds Ratio. Univariate analysis is used with the aim of describing each characteristic related to the variables to be studied such as descriptions of age, gender, marital status, education level, years of service, supervision of the head of the room, and electronic nursing documentation. Bivariate analysis is done if you want to analyze the correlation between two variables and gives results in the form of a correlation between the independent variable and the dependent variable and the correlation between the co-founding variable and the dependent variable (Hastono, 2016, p. 68). While the Odds Ratio is used to test the strength of the correlation between two variables whose estimation can be seen from the large or small value of the Odds Ratio with a 95% confidence level (Widarsa et al., 2016).

Results

Analysis of univariate data describes the characteristics of respondents in the form of age, gender, marital status, education level, and years of service of nurses in the Inpatient Room RSUD Pasar Minggu Jakarta. Characteristics of respondents based on age after being analyzed showed that the number of nurses who became research respondents in the 7th, 8th, 9th and 10th Floors of RSUD Pasar Minggu Jakarta were 129 nurses. Nurses aged 25 years were 105 nurses (81.4%) while those aged < 25 years were 24 nurses (18.6%). So the researchers concluded that the majority of nurses were 25 years old. Nurses aged 25 years have better electronic nursing documentation competence than nurses aged < 25 years. Researchers made observations with the results that nurses who worked in the Inpatient Room at Pasar Minggu Hospital with a mature age were more able to carry out electronic-based nursing documentation properly. This is because those who are of mature age have better experience and abilities than younger nurses. The higher the age of the nurse, the better the ability to provide nursing care.
Characteristics of respondents based on gender after being analyzed showed that the number of nurses who became research respondents in the 7th, 8th, 9th and 10th Floors of RSUD Pasar Minggu Jakarta were 129 nurses. There were 101 female nurses (78.3%) while the male nurses were 28 nurses (21.7%) so the researcher concluded that the majority of nurses were female. The results of the researchers' observations, at Pasar Minggu Hospital the majority of nurses were female. Male nurses tend to be less careful about what is documented in electronic nursing documentation, this makes male nurses less than optimal in doing electronic nursing documentation. Based on this, it can be concluded that the supervision of the head of the room tends to be better if it is followed by female nurses because they are more likely to follow the directions given by the head of the room in supervising electronic nursing documentation. In contrast to male nurses, they tend to be indifferent to following orders from the head of the room because they have personalities who like to lead not to be led.

Characteristics of respondents based on marital status after being analyzed showed that nurses who were married were 88 nurses (68.2%) while nurses who were not married were 41 nurses (68.2%) so that the researcher concluded that the majority of nurses were married. This condition is in accordance with the profile of nurses at Pasar Minggu Hospital that the majority of nurses' marital status is married. Nurses who are married or unmarried are allowed to apply and work at Pasar Minggu Hospital. Married nurses have nothing to do with nurses' performance in doing electronic nursing documentation, they do electronic nursing documentation better than unmarried nurses. Based on this description, it can be concluded that marital status has nothing to do with the implementation of electronic nursing documentation. Married and unmarried nurses can do electronic nursing documentation well. However, married nurses will have greater responsibilities at work.

Characteristics of respondents based on education level after being analyzed showed that nurses with vocational education (D3) were 75 nurses (58.1%) while nurses with professional education (Ners) were 54 nurses (41.9%), so the researcher concluded that the majority of nurses were educated vocational (D3). There are more nurses with Vocational/D3 education compared to nurses with Professional/Ners education. This is because the recruitment process for nurses at Pasar Minggu Hospital is dominated by nurses with Vocational/D3 education. The majority of nurses with undergraduate education come from vocational education first. Nurses who work at Pasar Minggu Hospital generally continue their undergraduate and professional extension education after working at the hospital. It can be concluded that nurses with professional/Ners education will be able to perform electronic-based nursing care better than nurses with Vocational/D3 education. The higher the level of education of nurses, the better their performance in conducting electronic nursing documentation. It is hoped that nurses can improve their level of education so that the quality of electronic-based nursing care documentation is better.

Characteristics of respondents based on years of service after being analyzed showed that there were 105 nurses (81.4%) who had a working period of > 2 years, while 24 nurses (18.6%) had a tenure of 2 years, so the researcher concluded that the majority of nurses have a working period of > 2 years. This condition is in accordance with the nurses who work at Pasar Minggu Hospital, most of whom have a working period of > 2 years. Nurses who have a working period of > 2 years will perform electronic nursing documentation better than nurses who have a working period of 2 years. This is because nurses who have worked longer at Pasar Minggu Hospital have more experience with electronic nursing documentation. Nurses who have a longer working period will easily adapt to the latest system developments because they already have a solution if there are problems that occur when using electronic nursing documentation. It can be concluded that nurses who have a long working period will carry out electronic-based nursing care documentation well. They have experience, correlations, and problem solving when dealing with changes to the system. The higher the working period of the nurse, the better the performance in conducting electronic nursing documentation.

Supervision of the head of the room in the inpatient room of Pasar Minggu Jakarta Hospital after being analyzed showed that nurses who assumed supervision in the good category were 70 nurses (54.3%) and in the poor category were 59 nurses (45.7%). So it can be concluded that the majority of nurses assume that supervision is in the good category. The nurse stated that the supervision that was categorized as good included, among others, the head of the room providing directions on electronic-based nursing care, the head of the room providing motivation in the form of words of encouragement for nurses who did electronic nursing documentation even in the Covid-19 pandemic era, and the head of the room was also willing to accept suggestions given by the implementing nurse if there are unresolved difficulties. From this description, it can be concluded that the better the quality of supervision provided by the head of the room, the better the nurse's performance in conducting electronic nursing documentation. Supervision carried out will have a good impact on the performance of nurses. It is recommended that the head of the room and nursing
management can supervise implementing nurses regarding electronic nursing documentation as often as possible, even during the current Covid-19 pandemic era.

There were 72 nurses (55.8%) who assumed the implementation of electronic nursing documentation in the good category and 57 nurses (44.2%). The implementation of electronic nursing documentation at Pasar Minggu Hospital has been carried out since its establishment on December 12, 2015. The implementation of electronic nursing documentation is in line with the goals of the hospital organization because nurses who use the majority have a high level of tenacity in doing electronic nursing documentation. The results of interviews with several implementing nurses said that they carried out documentation well, as evidenced by recording assessments, diagnoses, interventions, and evaluations in accordance with the format in the electronic nursing documentation. However, some nurses said that they did not understand very well about electronic nursing documentation so that the implementation of nursing care had a lot of additional data that they added personally, causing the implementation of nursing care to be less good. It can be seen from the comparison between the implementation of good and bad electronic nursing documentation, only a little. From the description above, it can be concluded that the implementation of a good electronic nursing documentation will improve the quality of nursing services. The better the application of electronic-based nursing care, the better the quality of hospital services, especially in the field of nursing care. Bivariate analysis was conducted to determine how the correlation between the independent variables in the form of supervision of the head of the room and the dependent variable in the form of electronic nursing documentation. Here, the researchers describe the results of the bivariate test in tabular form:

### Table 1. Analysis of the Correlation between Nurse Age and Electronic Nursing Documentation in the Inpatient Room at Pasar Minggu Hospital, Jakarta (n=129)

| Age       | Electronic Nursing Documentation | Total | pValue | Odds Ratio         |
|-----------|---------------------------------|-------|--------|--------------------|
|           | Good                            | Not Good |       |                    |
|           | n  | %  | N  | %  | n  | %  |                       |                       |
| < 25 years | 11 | 8.5 | 13 | 10.1 | 24 | 18.6 | 0.275 | 0.610 (0.250-1.489) |
| ≥ 25 years | 61 | 47.3 | 44 | 34.1 | 105 | 81.4 | 0.016 | 2.862 (1.198-6.835) |
| Amount    | 72 | 55.8 | 57 | 44.2 | 129 | 100.0 |            |                       |

Source: Research Data (2021)

The table above shows that nurses who work at Pasar Minggu Hospital have an average age of maturity. In this case, it is associated with the number of nurses who are of mature age which will result in good quality nursing care. However, in practice the age of nurses does not have much impact on the implementation of electronic nursing documentation. Nurses who are old or young can perform nursing care well too. In conclusion, age does not affect the performance of nurses in conducting electronic nursing documentation.

### Table 2. Analysis of the Correlation between Nurse Gender and Electronic Nursing Documentation in the Inpatient Room at Pasar Minggu Hospital, Jakarta (n=129)

| Gender | Electronic Nursing Documentation | Total | pValue | Odds Ratio         |
|--------|---------------------------------|-------|--------|--------------------|
|        | Good                            | Not Good |       |                    |
|        | N  | %  | N  | %  | N  | %  |                       |                       |
| Female | 62 | 48.1 | 39 | 30.2 | 101 | 78.3 | 0.016 | 2.862 (1.198-6.835) |
| Male   | 10 | 7.8  | 18 | 14.0 | 28  | 21.7 |                      |                       |
| Amount | 72 | 55.8 | 57 | 44.2 | 129 | 100.0 |            |                       |

Source: Research Data (2021)

The table above shows that means that female respondents have a risk of 2.862 times greater to do electronic nursing documentation less well than male respondents. Nurses who are female will be more optimal in doing electronic nursing documentation than male nurses because female nurses at Pasar Minggu Hospital have a high level of perseverance and accuracy so that they can produce quality documentation. According to the head of the room, female nurses had more comprehensive documentation scores than male nurses. Female nurses tend to be more obedient to the head of the room who provides training on electronic nursing documentation and they also apply it according to the SOP that has been made by the hospital.
Table 3. Analysis of the Correlation between Nurses Marital Status and Electronic Nursing Documentation in the Inpatient Room at Pasar Minggu Hospital, Jakarta (n= 129)

| Marital Status   | Electronic Nursing Documentation | Total | pValue | Odds Ratio       |
|------------------|----------------------------------|-------|--------|------------------|
|                  | Good                             | Not Good |       |                  |
|                  | n | %     | n | %   | n | %     |               |                  |
| Not Married Yet  | 20 | 15,5 | 21 | 16,3 | 41 | 31,8 | 0,272 | 0,659 (0,313-1,389) |
| Married          | 52 | 40,3 | 36 | 27,9 | 88 | 68,2 |       |                  |
| Amount           | 72 | 55,8 | 57 | 44,2 | 129 | 100,0 |       |                  |

Source: Research Data (2021)

The table above shows that it can be concluded that nurses who have married or unmarried marital status have nothing to do with the implementation of electronic nursing documentation. Married nurses and unmarried nurses both can perform nursing care well. This depends on her responsibilities as the implementing nurse.

Table 4. Analysis of the Correlation between Nurse Education Levels and Electronic Nursing Documentation in the Inpatient Room at Pasar Minggu Hospital, Jakarta (n= 129)

| Education Levels | Electronic Nursing Documentation | Total | pValue | Odds Ratio       |
|------------------|----------------------------------|-------|--------|------------------|
|                  | Good                             | Not Good |       |                  |
|                  | N | %     | N | %   | N | %     |               |                  |
| Vocation (D3)    | 40 | 31,0 | 35 | 27,1 | 75 | 51,8 | 0,504 | 0,786 (0,387-1,594) |
| Profession (Ners) | 32 | 24,8 | 22 | 17,1 | 54 | 41,9 |       |                  |
| Amount           | 72 | 55,8 | 57 | 44,2 | 129 | 100,0 |       |                  |

Source: Research Data (2021)

The table above shows that In conclusion, nurses who do electronic nursing documentation in good category are nurses with vocational education (D3). A high level of education does not affect the quality of electronic-based nursing care. Nurses who have low education are expected to improve their education. This is intended to improve the quality of hospital services. The higher the quality of nurse education, the better the nurse’s performance in conducting electronic nursing documentation.

Table 5. Analysis of the Correlation between Nurses Working Period and Electronic Nursing Documentation in the Inpatient Room at Pasar Minggu Hospital, Jakarta (n= 129)

| Working Period | Electronic Nursing Documentation | Total | pValue | Odds Ratio       |
|----------------|----------------------------------|-------|--------|------------------|
|                | Good                             | Not Good |       |                  |
|                | N | %     | N | %   | N | %     |               |                  |
| ≤ 2 years      | 11 | 8,5 | 13 | 10,1 | 24 | 18,6 | 0,275 | 0,610 (0,250-1,498) |
| > 2 years      | 61 | 47,3 | 44 | 34,1 | 105 | 81,4 |       |                  |
| Amount         | 69 | 53,5 | 60 | 46,5 | 129 | 100,0 |       |                  |

Source: Research Data (2021)

The table above shows that In conclusion, nurses who perform electronic nursing documentation in the good category are nurses who have a working period of > 2 years. Nurses who have a working period of > 2 years and 2 have no effect on the performance of nurses in conducting electronic-based nursing care. However, the longer the nurse works in the hospital, the better the quality of nursing care will be. This relates to the experience nurses gain during their work in the hospital.

Table 6. Analysis of the Correlation between Head Supervision and Electronic Nursing Documentation in the Inpatient Room at Pasar Minggu Hospital, Jakarta (n= 129)

| Supervisi      | Electronic Nursing Documentation | Total | pValue | Odds Ratio       |
|----------------|----------------------------------|-------|--------|------------------|
|                | Good                             | Not Good |       |                  |
|                | N | %     | N | %   | N | %     |               |                  |
| Good           | 54 | 41,9 | 16 | 12,4 | 70 | 54,3 | 0,000 | 7,688 (3,502-16,877) |
| Not Good       | 18 | 14,0 | 41 | 31,8 | 59 | 45,7 |       |                  |
| Amount         | 72 | 55,8 | 57 | 44,2 | 129 | 100,0 |       |                  |

Source: Research Data (2021)
The table above shows that the results of the odds ratio (OR) = 7.688 CI 95% = (3.502-16.877) shows that OR < 1 = 7.688 means that respondents with poor supervision of the head of the room are at risk of doing electronic nursing documentation less well by 7.688 times compared to respondents with supervision of the head of the room the good one. The description above can be concluded that there is a significant correlation between the supervision of the head of the room and electronic nursing documentation during the Covid-19 pandemic. The better the supervision carried out by the head of the room, the better the nursing care provided by the implementing nurse. It is recommended for the head of the room and nursing management to carry out regular supervision even though in the current pandemic era, the goal is to build excellent quality nursing services.

**Discussions**

The head of the room who works in the inpatient room at Pasar Minggu Hospital does good supervision as evidenced by the head of the room providing directions on electronic-based nursing care, the head of the room providing motivation in the form of words of encouragement for nurses who do electronic nursing documentation even in the Covid-19 pandemic era, and the head of the room is also willing to accept the advice given by the implementing nurse if there are unresolved difficulties. However, the implementing nurse said that the head of the room was in the poor category as evidenced by the current state of the Covid-19 pandemic, supervision was rarely carried out considering the high risk of transmission. Supervision is carried out during the Covid-19 pandemic era a maximum of once a month. The implementing nurse also said that the head of the room supervised the electronic nursing documentation directly without a time contract in advance so that the nurse panicked and had not prepared the files that had to be prepared during supervision. The application of electronic nursing care documentation can improve service quality. Improving service quality is reviewed by considering efficiency; patient focus, effectiveness, time discipline, equity, and confidentiality. In the digital era of health workers, the use of electronic nursing care documentation requires continuous development to improve the quality of service to patients (Saraswasta et al., 2019).

This study is in line with what was done by Sutris (2020) that a p value of 0.017 was obtained, which means that there is a positive correlation between the supervision of the head of the room and the documentation of nursing care. The better the supervision carried out by the head of the room, the more complete and good the quality of nursing care documentation. The results of research conducted by Ginting, et al (2019) showed that of the 39 nurses who had good supervision from the head of the room, 36 nurses (92.3%) did complete documentation of nursing care and 3 nurses (5.4%) did documentation of care. Incomplete nursing care and of the 17 nurses whose supervising nurses were not well supervised by the head of the room, there were 10 nurses (58.8%) who did the complete documentation of nursing care and 7 nurses (41.2%) who did the incomplete documentation of nursing care. Based on the results of the Chi-Square test, the value of p = 0.003 means that there is a correlation between the supervision of the head of the room and the documentation of nursing care at Martha Friska Brayan Hospital, Medan.

Some of the descriptions above can be concluded that there is a significant correlation between the supervision of the head of the room and electronic nursing documentation during the Covid-19 pandemic. The better the supervision carried out by the head of the room, the better the nursing care provided by the implementing nurse. It is recommended for the head of the room and nursing management to carry out regular supervision, even though in the current pandemic era, the goal is to build excellent quality nursing services.

**Conclusions**

Based on the discussion of the results of the study entitled The Correlation of Room Head Supervision with the Electronic Nursing Documentation Method in the Covid-19 Pandemic Era at Pasar Minggu Hospital, Jakarta with a total of 129 implementing nurse respondents, it can be concluded that there is a significant correlation between room head supervision and the implementation of electronic nursing documentation with test results. Chi-Square statistic states that p value = 0.000 which means p value is smaller than = 0.05 or p value < 0.05. The results of the odds ratio (OR) = 7.688 CI 95% = (3.502-16.877) shows that OR < 1 = 7.688 means that respondents with poor supervision of the head of the room are at risk of doing electronic nursing documentation less well by 7.688 times compared to respondents with supervision of the head of the room the good one.
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