

Implementation Nursing Documentation based on 3S (SDKI, SIKI, SLKI) Based Evidence Based Practice (EBP) on the Quality of Nursing Services

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Abstract

Complete documentation can improve the quality of nursing services. The Indonesian National Nurses Association Organization (INNA) has issued standards that can be used as a reference in the official nursing process, namely 3S including the Indonesian Nursing Diagnosis Standards (SDKI), Indonesian Nursing Intervention Standards (SIKI) and Indonesian Nursing Outcomes Standards (SLKI) which are adapted to cultural differences. in Indonesia. Knowing the application of 3S (SDKI, SIKI, and SLKI) in nursing documentation is the goal of this research. Quantitative research method with quasi-experimental design, with a research sample of 72 nurses who provide and write nursing care in the form of nursing documentation. The results of this study showed that there were significant differences in the completeness of nursing documentation based on the 3S (SDKI, SIKI, SLKI) based on Evidence Based Practice (EBP) before and after mentoring ($P < 0.005$). The application of 3S (SDKI, SIKI, SLKI) based on Evidence-based Practice (EBP) to the quality of nursing services before and after assistance has a unidirectional relationship showing a perfect positive relationship ($P < 0.005$) If 3S (SDKI, SIKI, SLKI) is based on Evidence-based Practice (EBP) is implemented properly, the quality of nursing services is increasing. In the application of nursing documentation based on 3S (SDKI, SIKI, SLKI) based on Evidence Based Practice (EBP), supporting factors are needed so that it can be applied properly.

Keywords: Nursing Documenting, 3S (SDKI, SIKI, SLKI), EBP and Quality of Nursing Services

1. Introduction

Complete documentation can improve the quality of service and can be used as a benchmark to what extent the professional level of nurses performs quality nursing care. (Nurhesti et al 2020). To improve the quality of better and better quality nursing services, the Indonesian National Nurses Association (PPNI) has issued standards that can be used as a reference in the official nursing process, namely 3S, including the Indonesian Nursing Diagnostic Standards (SDKI), Indonesian Nursing Intervention Standards (SIKI) and Standards Indonesian Nursing Results (SLKI) in accordance with cultural differences in Indonesia and the peculiarities of nursing services in Indonesia (Sukesi, 2021).

The 3S (SDKI, SIKI, SLKI) aims to make it easier for nurses to make nursing clinical decisions based on ease of use, clarity of diagnostic reasoning and the completeness of the types of diagnoses available and the standard language used (Ryandini, 2018) while Evidence-based Practice (EBP) Evidence based practice (EBP) is a process that will help health workers to be up to date or a way to be able to obtain the latest information that can be used as material for making effective and efficient clinical

decisions so that they can provide the best care to patients (Lehane et al. 2019) so that expected to be able to improve the quality of better nursing services Quantitative method with quasi-experimental design, with a sample of 72 nurses who provide and write nursing care in the form of nursing documentation.

2. Results and Discussion

Table.1 Characteristics of Respondents

Age (Year)	
Early adulthood	24 (33,3)
Late adulthood	36 (50,0)
Elderly	12 (16,7)
Gender	
Man	4 (5,6)
Woman	68 (94,4)
Marital Status	
Marry	65 (90,3)
Not Married not	7 (9,7)
Education	
DIII Nursing	23 (31,9)
Ners	48 (66,7)
Magister Nursing	1 (1,4)
Length work	
< 2 years	2 (2,8)
2- 5 years	8 (11,1)
>5- 10 years	22 (30,6)
>10 years	40 (55,6)
Nursing	72 (100,0)

Description. *n*= sample frequency, %= percentage sample frequency that the average age of the respondents was in late adulthood, namely 36 people with a percentage of 50%. Most respondents were women as many as 68 people (94.4%). Respondents who were married were as many as 65 people (90.3%). Education of the most respondents

is S1 Nursing Nurses, namely 48 people (66.7%) and respondents who have worked for > 10 years as many as 40 people (55.6%) and all respondents are nurses who provide nursing care and carry out nursing documentation as many as 72 respondents (100%).

Table. 2 Differences in the completeness of nursing documentation before and after mentoring.

Variable	Documentation Domunteness						P *
	Before Mentoring			After Mentoring			
	n	M	Min-Max	n	M	Min-Max	
	72	4.65	0-19	72	11.56	7-21	0.000
Nursing Documentation		(4.63)			(1.66)		

The mean value of nursing documentation before being given assistance is 4.65 with a minimum score of 0 and a maximum score of 19 after being given assistance the mean value is 11.56 with a minimum score of 7 and a maximum score of 21 with 21 sub-indicators. From the results of the table above it shows that the value of P = 0.000 (P <0.005) there is a significant difference in the completeness of nursing documentation before and after being given assistance.

Table.3 Application of 3S (SDKI, SIKI, SLKI) based on Evidence Based Practice (EBP) on the quality of nursing services

Variable	Application 3S (SDKI, SIKI, SLKI)					
	Before Mentoring			After Mentoring		
	n%	r	P*	n%	r	P*
Quality of Nursing Services	72(100%)	0,330	0,000	72 (100%)	0,918	0,005

*Pearson Corelation

Shows that there is a significant value that is owned by the implementation of 3S (SDKI, SLKI, SIKI) based on Evidence Based Practice (EBP) before and after assistance. nursing before mentoring of 0.918 and 0.330 after mentoring indicates that there is a unidirectional relationship between the implementation of 3S (SDKI, SIKI, SLKI) based on Evidence Based Practice (EBP) and the quality of nursing services. This correlation figure explains that there is a perfect positive relationship between the application of 3S (SDKI, SIKI, SLKI) based on Evidence Based Practice (EBP) before and after assistance and quality of nursing services. This means that if the application of 3S (SDKI, SIKI, SLKI) based on Evidence Based Practice (EBP) is implemented properly, the quality of nursing services will also increase.

Differences in the completeness of nursing documentation based on 3S (SDKI, SIKI, SLKI) based on Evidence Based Practice (EBP) before and after mentoring.

There are significant differences in the completeness of nursing documentation based on 3S (SDKI, SIKI, SLKI) based on Evidence-Based Practice (EBP) before and after mentoring where prior to mentoring it was

found that there were still many nurses in carrying out nursing care who did not carry out the nursing process properly, there was completeness of nursing documentation carried out by nurses is still lacking, the writing of nursing documentation still varies in each room, still copy and paste and only one time. The nursing assessment at the initial admission of the patient is carried out then it is not carried out again until the patient recovers or is declared allowed to go home by the doctor, the writing of diagnoses still varies according to his own opinion, not based on top priority, nursing interventions still sometimes follow instructions from other professions not based on nursing interventions, not yet found in detail nursing interventions (SIKI), namely: observation, nursing therapy, education and collaboration, implementation only wrote collaborative actions, did not record independent actions that had been carried out so that gradual patient evaluation was not obtained while the patient was being treated. The nurse also did not initial the integration sheet.

Besides that, the number of room nurses is very small with a very large patient capacity and workload which makes nurses rarely write complete nursing care documentation, nurses usually only write patient names without room numbers, do not complete patient physical examination data, do not write down data analysis, purpose and action plans, on the implementation sheet nurses often do not write evaluations and often do not write notes on patient progress and do not include initials (Blair et al 2012).

Application of evidence-based practice (EBP)-based nursing documentation (SDKI, SIKI, SLKI) to the quality of nursing services

The application of nursing documentation based on 3S (SDKI, SIKI, SLKI) based on Evidence based Practice (EBP) on the quality of nursing services after assistance has a significant effect which shows that the better the implementation of 3S based on Evidence Based Practice (EBP), the quality of nursing services is increasing.

The implementation of 3S in Indonesia is not optimal. Most nurses have a low level of knowledge about nursing care standards issued by the PPNI organization, this is because 3S is still relatively new, while nurses who have worked on average have

completed their nursing education studies before 2018 which is the year the 3S standard was published (Fitrianola Rezkiki, et al. 2022). So they don't really understand how to use the 3S and how nursing documentation is based on EBP.

To implement these 3s, quality human resources are needed where the quality of the contents of the nursing care documentation will depend on the quality of the human resources (Noorkasiani, et al, 2017)

In addition, the EBP-based 3S nursing documentation is not implemented properly, namely lack of time to study and attend seminars, workshops on 3S and EBP, the daily culture of nurses in service agencies (Suyanti, et al. 2021), lack of staff providing nursing care, inaccuracies Standard Operating Procedures (SOP) which regulate quality nursing processes, lack of support from nursing leaders, and the availability of guidelines/guidelines in carrying out nursing documentation (Saputra, et al. 2020).

So that the use of 3S (SDKI, SIKI, SLKI) in other areas can be recommended because this standard is a summary of existing international standards and modified by the Indonesian National Nurses Association (INNA). a more varied study or research is needed regarding SDKI, SIKI, SLKI based on Evidence Based Practice (EBP)

Writing nursing documentation that is not up to standard can lead to different actions from other nurses (Siegert et al, 2021) which will lead to a decrease in service quality. Many nurses do not realize the importance of nursing documentation whose implementation must be in accordance with existing standards and guidelines (Sulistiyawati et al, 2021).

3. Conclusions

The application of nursing documentation based on 3S (SDKI, SIKI, SLKI) based on Evidence Based Practice (EBP) requires supporting factors so that it can be implemented properly such as professional nurses who understand the use of 3S, policies issued by local hospitals, and spare time to always update latest nursing knowledge (Evidence based Practice).

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