



DEVELOPMENT OF NURSE BEHAVIOR MODELS BASED ON WORK PRODUCTIVITY AND THE INFORMATIONAL MOTIVATION BEHAVIORAL SKILL ON COMPLIANCE WITH DOCUMENTING INTEGRATED PATIENT PROGRESS RECORD

Diana Rochman¹, Mira Triharini^{1*}, Retno Indarwati¹, Daviq Ayatulloh², Diah Priyantini³

¹Faculty of Nursing, Universitas Airlangga, Mulyorejo, Surabaya, East Java 60115 Indonesia

²Faculty of Health Science, Universitas Gresik, Jl. Arif Rahman Hakim Gresik No.2B, Kramatandap, Gapurosukolilo, Gresik, East Java 61111, Indonesia

³Faculty of Health Science, Universitas Muhammadiyah Surabaya, Jl. Raya Sutorejo No.59, Dukuh Sutorejo, Mulyorejo, Surabaya, East Java 60113 Indonesia

*mira-t@fkip.unair.ac.id

ABSTRACT

Integrated patient progress record (IPPR) documentation shows that it is still not 100% complete and needs improvement. The aim of the research is to develop a model of nurse behavior based on work productivity and the informational motivation behavioral skills on IPPR documentation compliance. Phase 1 research used explanatory research with a cross sectional approach on 155 nurses at Blambangan Hospital, Banyuwangi who were recruited using cluster random sampling. Independent variables: organizational characteristics, nurse characteristics, work characteristics, information skills, social motivation, documentation behavior and the dependent variable is documentation compliance. The instrument is an instrument that was modified by the researcher and has first been tested and declared valid and reliable. Analysis of research data using SEM-PLS. Phase 2 research uses a qualitative design in the preparation of modules through FGD and expert consultation. Phase 1 research shows that the outer model construct validity of all indicators is valid with loading factor values ≥ 0.5 . Reliability for all indicators shows reliability with Cronbach's alpha > 0.6 . Hypothesis testing showed that all were significant, only the influence of work characteristics on nurse characteristics was not significant. The results of the phase 2 research module are based on recommendations from FGDs and expert consultations. During model development, the strongest path in combining the two theories is the nurse characteristics path through the work productivity and IMBS-based documentation behavior path and towards IPPR documentation compliance. So, it is very important to emphasize that in increasing nurses' compliance in carrying out IPPR nursing documentation, it is necessary to improve nurses' self-efficacy by increasing the knowledge, abilities, attitudes, personality, self-perception, beliefs and hopes that exist within nurses.

Keywords: behavior; information motivation behavioral skills; nurse; obedience; work productivity

First Received 14 March 2024	Revised 22 April 2024	Accepted 24 April 2024
Final Proof Received 28 May 2024	Published 01 August 2024	
How to cite (in APA style) Rochman, D., Triharini, M., Indarwati, R., Ayatulloh, D., & Priyantini, D. (2024). Development of Nurse Behavior Models Based on Work Productivity and the Informational Motivation Behavioral Skill on Compliance with Documenting Integrated Patient Progress Record. Indonesian Journal of Global Health Research, 6(4), 2245-2262. https://doi.org/10.37287/ijghr.v6i4.3314 .		

INTRODUCTION

Nursing documentation is a record of professional nursing services that contains patient information that is systematically arranged, standardized, valid, and can be morally and legally accountable, so that it can be used as evidence of recording and reporting nursing care that is useful for the benefit of patients, nurses, and health teams in providing health services (Blanco-Mavillard *et.al.*, 2020). One of the documents that must be completed by nurses to prevent errors in monitoring and evaluating patient progress and supporting patient safety is

the integrated patient development record (IPPR) (Ray-Barruel et al., 2019). IPPR is very important because it contains integrated patient health records from all interprofessional collaboration, if there is a mismatch in nursing care documentation, it will lead to miscommunication problems between health workers, hamper the provision of health services to have an impact on reducing the quality of service (Hariyati et al., 2018; Oktavianti, 2019). The non-compliance of nurses in IPPR documentation still requires further research to develop a new model so that documentation compliance increases, because so far there has not been much research done.

The phenomenon that occurs is that during the evaluation and supervision every month there are still many IPPR documents in the nursing assessment section whose writing is not in accordance with nursing care standards (Høvik et al., 2019). The prevalence of incomplete nursing care documentation resulting from nurse non-compliance is still not 100% compliant. This is based on data from several countries in the world, namely nurse compliance in conducting nursing documentation is still 80%, the lowest documentation compliance is shown in compliance with filling out the initial hospital admission assessment and integrated patient progress notes, the main reason is the limited time of service to patients (Spoon et al., 2020). Meanwhile, the results of nurse research in Indonesia show that nurses' compliance in conducting documentation is 78.3%, namely 70% assessment, 80% nursing diagnosis, 90% intervention, 90% implementation, 60% evaluation, and 70% nursing notes (Nyarmi et al., 2020), this shows that the lowest compliance is in the initial assessment of patients, namely patient assessment and nursing record.

Based on research on competence and motivation in the implementation of the nursing process, it shows that there is a relationship between nurses' knowledge and incompleteness of filling out nursing care documentation with a percentage of incompleteness reaching 70.5%, from these results it can be concluded that the incompleteness of filling out nursing care documentation is more than its completeness (Masri et al., 2023). Based on the monitoring and evaluation report for quality and patient safety indicators at one of the hospitals in Banyuwangi in 2020, in the quality indicator for the treatment installation unit, one of the indicators is the completeness of filling or documenting inpatient assessments, which is 58% of the 100% standard, while in 2021 the standard was reduced to 80% with a result of 17.8%. From the analysis, the decline occurred because nurses focused on being fast in providing care, so that documentation by doctors and nurses was often overlooked and ignored, especially in the IPPR form. Effective implementation of IPPR documentation of nursing assessments can be carried out with education and training efforts for nurses and system changes. Nurse education and training aims to improve performance, improve nurses' attitudes towards documenting IPPR nursing assessments.

Ignoring incompleteness in systematically documenting nursing care will jeopardize the quality of care and patient safety (Pahlin & Mattsson, 2019), decrease the quality and completeness of hospital records (Nyarmi et al., 2020), have a negative impact on direct patient care (e.g. patient safety), professional accountability, and organization (Hariyati *et al.*, 2016; Mahler *et al.*, 2007; Saputra, 2018; Saputra *et al.*, 2020). Compliance in documentation is important to provide quality and safe nursing care to patients. Furthermore, nursing documentation also serves as an indicator of service quality, evidence of nurse responsibility and accountability, and a database for research purposes or evidence-based policy making (Hariyati et al., 2016; Mahler et al., 2007). So far, at the Blambangan General Hospital, Banyuwangi, the behavior of nurses for IPPR documentation has not been optimal due to the lack of understanding of nurses in writing, and uniformity of the contents of the writing rules.

It is expected that compliance with IPPR documentation in hospitals so that nursing care documentation is written based on factual basis, accuracy, completeness, concise, organized, the right time, and easy to read (Orlando, 2019). There are several factors that cause the lack of compliance with nursing documentation according to standards, namely: the lack of nursing care standards so that nurses often find it difficult to make nursing diagnoses and care plans (Hariyati et al., 2018). Compliance with nursing assessment documentation at Blambangan Hospital, Banyuwangi also still shows a low value, this is due to the lack of time management and nursing resources that provide services in the treatment room, making it difficult for nurses to complete documentation.

Professional nurse behavior will improve nurse performance and demonstrate excellent quality of nursing care. Work productivity theory emphasizes that nurses at work must pay close attention to the nursing documentation process to improve patient and nurse satisfaction, quality of care, patient safety, and cost effectiveness, as well as to reduce the average length of stay (Asmirajanti et al., 2019). The determinants of work productivity of organizational members, in this case the documentation of nursing care according to Kopelman (1986), are directly influenced by individual characteristics (knowledge, skills, motivation, attitudes, values and norms), indirectly influenced by organizational characteristics (reward system, goal setting and objective management, selection, training and development, leadership, organizational structure) and job characteristics (objective performance, feedback, job design, work schedule) (Nursalam, 2020b, 2020a; Widodo et al., 2020).

Nurse compliance behavior in the documentation process is something that must be emphasized in the success of IPPR nursing documentation in nursing assessment. The informational motivation behavior skills explain that compliance behavior displayed by individuals arises because of 3 influencing factors, namely the existence of health information, personal motivation to take action and the formation of social support in shaping compliance behavior. Previous research conducted by Sulistyorini et.al (2022) states that the development of nurse behavior based on IMB theory can improve nurses' documentation compliance in IPPR documentation, so this IMB theory approach needs to be evaluated in IPPR documentation compliance in nurses. This research is expected to improve nurses' work behavior in documenting IPPR nursing assessments, which serves as a communication tool between the nursing team, health, which will improve the continuity of care and quality of nursing care, save time and be useful in improving the quality of nursing services and patient safety (Indonesian Ministry of Health, 2020; PPNI, 2017a; Widodo *et al.*, 2020). Through the development of a nurse behavior model based on the theory of work productivity and the informational motivation behavioral skill, this study is expected to increase nurse compliance in documenting IPPR nursing assessment, which serves as a communication tool between the nursing team, health, which will improve continuity of care and quality of nursing care, save time and be useful in improving the quality of nursing services and patient safety. The aims of this study was the development of nurse behavior models based on work productivity and the informational motivation behavioral skill on compliance with documenting integrated patient progress notes.

METHOD

Phase 1 of the study used explanatory research with a cross sectional approach on 155 nurses at RSUD Blambangan, Banyuwangi who were recruited using cluster random sampling. Sample criteria for implementing nurses have a minimum education of diploma 3 of nursing, work for at least 1 year, not a trainee, not on study assignments and leave. Independent variables: organizational characteristics, nurse characteristics, work characteristics,

information skills, social motivation, documentation behavior and the dependent variable is documentation compliance. The instrument is an instrument modified by the researcher and has previously been tested and declared valid and reliable. Analysis of research data using SEM-PLS. Phase 2 research used a qualitative design in the preparation of modules through focus group discussion (FGD) and expert consultation. FGD were conducted twice with nurses, heads of rooms, heads of units, and heads of nursing departments, while expert consultation was conducted with academic and clinical nursing management experts. The instrument used was FGD guidelines and data analysis techniques using descriptive analysis of input and recommendations given. The research has obtained ethical approval from the Ethical commission Faculty of Nursing with number of certificate 3027-KEPK, Universitas Airlangga, Surabaya.

RESULTS

Table 1.
Characteristics of study participants (n=155)

Indicator	Research Sample	
	f	%
Age (Years Old)		
a. 20-25	57	36,8
b. 26-30	43	27,7
c. 31-40	43	27,7
d. >40	12	7,7
Gender		
a. Male	15	9,7
b. Female	140	90,3
Marital Status		
a. Single	10	6,5
b. Married	144	92,9
c. Widow/ Widower	1	0,6
Education		
a. Diploma 3 Nursing	94	60,6
b. Diploma 4 Nursing	9	5,8
c. S1 Nursing	52	33,5
Employment Status		
a. Honorary Employ	41	26,5
b. Non Civil Servant (BLUD, Contract)	102	65,8
c. Civil Servant (ASN, CPNS, PPPK)	12	7,7
Length of Service		
a. 1-5 Years	9	5,8
b. 6-10 Years	47	30,3
c. 11-15 Years	17	11,0
d. >16 Years	82	52,9

Table 1 shows that out of 155 respondents with the age range, most of them are between 20-30 years old as many as 57 respondents (36.8%) with the majority of their gender being female as many as 140 respondents (90.3%). In the indicator of marital status, the majority of 144 respondents with a percentage (92.9%) have married marital status. The most dominant education indicator is diploma 3 nursing as many as 94 respondents (60.6%) with employment status mostly being non civil servant (BLUD, Contract) as many as 102 respondents (65.8%). The length of work of nurses shows that most of them are between 6-10 years, namely 47 respondents (30.3%).

Table 2.
Convergent validity test results (n=155)

Latent Variable	Observe Variable	Loading Factor	T Value	Cut Off	Description
X1 Organizational Characteristic	X1.1 Reward System	0,795	2,844	0,5	Valid
	X1.2 Organizational Structure	0,819	4,665	0,5	Valid
	X1.3 Selection	0,781	2,965	0,5	Valid
	X1.4 Training and Development	0,904	6,028	0,5	Valid
	X1.5 Leadership	0,945	7,544	0,5	Valid
X2 Nurse Characteristic	X2.1 Knowledge	0,776	2,508	0,5	Valid
	X2.2 Ability	0,837	3,037	0,5	Valid
	X2.3 Attitude	0,963	7,182	0,5	Valid
	X2.4 Personality	0,955	6,877	0,5	Valid
	X2.5 Self-perception	0,700	2,029	0,5	Valid
	X2.6 Beliefs	0,992	10,526	0,5	Valid
	X2.7 Expectations	0,750	2,041	0,5	Valid
X3 Work Characteristic	X3.1 Objective Performance	0,803	7,012	0,5	Valid
	X3.3 Correction	0,957	12,488	0,5	Valid
	X3.4 Work Design	0,855	9,254	0,5	Valid
	X3.5 Work Schedule	0,812	7,111	0,5	Valid
X4 Informational Skill	X4.1 Charging Procedure	0,767	9,501	0,5	Valid
	X4.2 Reporting	0,877	40,384	0,5	Valid
	X4.3 Evaluation	0,759	6,995	0,5	Valid
X5 Social Motivation	X5.1 Family Support	0,973	17,546	0,5	Valid
	X5.2 Peer Support	0,731	7,859	0,5	Valid
	X5.3 Organizational Support	0,980	18,284	0,5	Valid
X6 Nurse Documentation Behavior Based on Work Productivity and IMB	X6.1 Accuracy	0,753	5,269	0,5	Valid
	X6.2 Initiative	0,731	2,108	0,5	Valid
	X6.3 Quality	0,722	3,407	0,5	Valid
	X6.4 Teamwork	0,909	26,995	0,5	Valid
Y1 IPPR Documentation Compliance	Y1.1 Completeness and Suitability of NCS	0,739	3,241	0,5	Valid
	Y1.2 Accurate	0,933	34,387	0,5	Valid
	Y1.3 Real	0,861	5,575	0,5	Valid
	Y1.4 Relevant	0,701	2,047	0,5	Valid

Based on the results of the analysis, it is known that the outer loading value on all latent variables shows the results of $\lambda \geq 0.5$ and the value of T statistics ≥ 1.96 . Valid variable measurements are organizational characteristics (reward system, organizational structure, selection, training and development, leadership), nurse characteristics (knowledge, abilities, attitudes, and personality, self-perception, expectations), work characteristics (objective performance, correction, work design and work schedule), information skills (filling, reporting and evaluation procedures), social motivation (family support, peer support and organizational support), nurse documentation behaviour based on work productivity and the invormational motivation behavioural skills (timeliness, initiative, quality, and teamwork) and compliance with documenting integrated patient progress notes consisting of completeness and conformity with Nursing Care Standards (NCS), accurate, real and relevant.

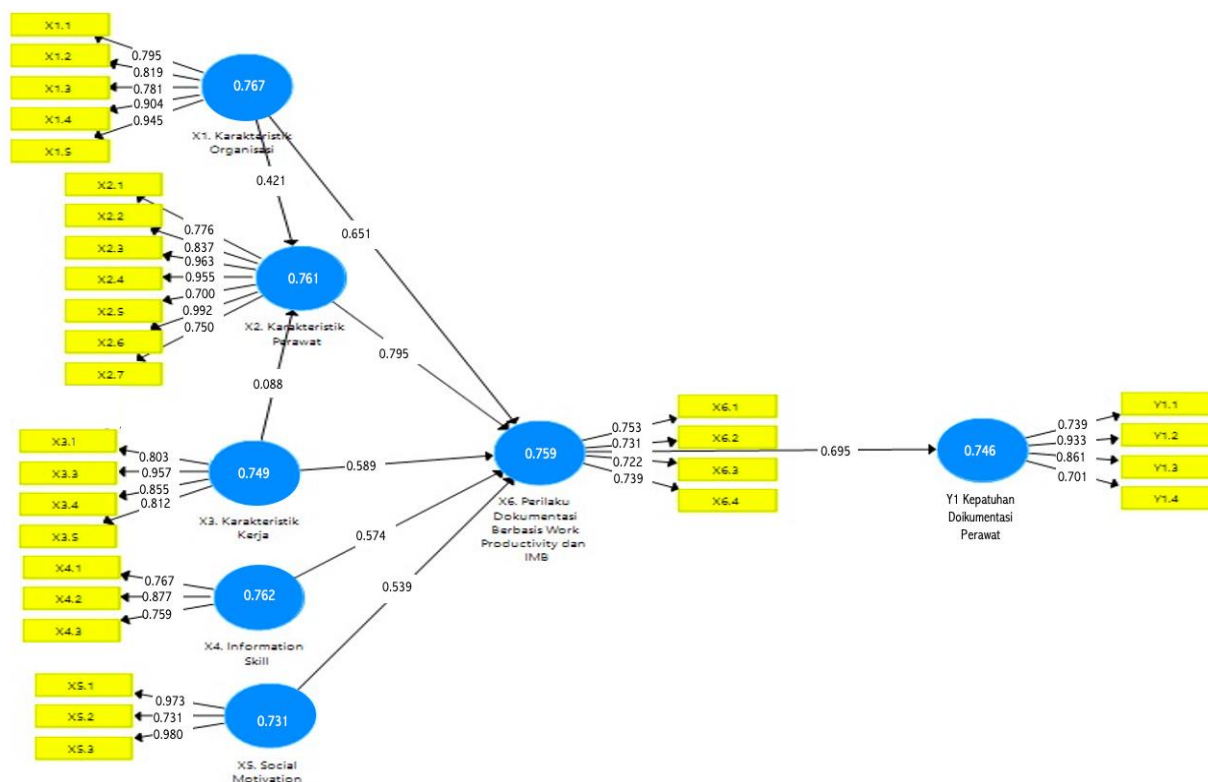


Figure 1. Outer Model

Table 3.
Research reliability test results (n = 155)

Latent Variable	Cronbach's Alpha	Composite Reliability	Average Variance Extracted (AVE)
X1 Organizational Characteristics	0,727	0,767	0,732
X2 Nurse Characteristics	0,782	0,761	0,725
X3 Work Characteristics	0,789	0,749	0,738
X4 Informational Skill	0,797	0,762	0,823
X5 Social Motivation	0,764	0,731	0,967
X6 WP and IMBS based Documentation Behaviour	0,727	0,759	0,632
Y1 IPPR Documentation Compliance	0,718	0,746	0,630

Table 3. above, namely the reliability test on latent variables shows that the composite reliability value has met the requirements, which is more than 0.7. Likewise with the Cronbach's alpha value > 0.6 and AVE > 0.50. Thus it can be concluded that all latent variables in the study have fulfilled the reliability test.

Table 4.
Results of the Research Determination Coefficient

Variable	R Square	R Square Adjusted
X2 Nurse Characteristics	0,220	0,209
X6 WP and IMBS based documentation behaviour	0,574	0,560
Y1 IPPR documentation compliance	0,483	0,479

Table 4. shows that the diversity of nurse characteristics variables can be explained by the latent variables of organizational characteristics and work characteristics as much as 20.9%, while the remaining 0.791 or 79.1% is the contribution of other variables not explained in this study. The variable of nurse behaviour based on work productivity and the informational

motivation behavioural skill is able to be explained by the variables of organizational characteristics, nurse characteristics, work characteristics, informational skills and social motivation as a whole by 56.0%, while the remaining 0.540 or 54.0% is the contribution of other variables not discussed in this study. In the IPPR documentation compliance variable, the results show 47.9%, which means that this variable can be explained by the work productivity-based nurse behaviour variable and the infomational motivation behavioral skill can be explained by the variables of organizational characteristics, nurse characteristics, work characteristics, informational skills and social motivation, and the remaining 0.521 or 52.1% is the contribution of other variables not discussed in this study. The results of R-square testing show that the X6 variable of work productivity-based nurse behaviour and the infomational motivation behavioural skill shows a value of 0.560 and the Y1 variable of IPPR documentation compliance shows a value of 0,479. This indicates that the strength of the model is in the moderate category ($R^2 > 0.33$).

Table 5.
Research Predictive Relevance Test Results

Variabel	SSO	SSE	$Q^2 (=1 - SSE/SSO)$
X1 Organizational Characteristics	775,000	775,000	
X2 Nurse Characteristics	1085,000	1038,099	0,343
X3 Work Characteristics	775,000	775,000	
X4 Informational Skill	465,000	465,000	
X5 Social Motivation	465,000	465,000	
X6 WP and IMBS based Documentation Behaviour	620,000	527,732	0,349
Y1 IPPR Documentation Compliance	620,000	542,678	0,225

The results in table 5 show that all variables produce a predictive relevance value (Q^2) greater than 0 (zero) which indicates that the model is said to be good enough.

Table 6.
Research Model Fit Testing Results

	Saturated Model	Estimated Model
SRMR	0,087	0,098
d_ULS	3,794	4,752
d_G	1,229	1,469
Chi-Square	918,566	1009,439
NFI	0,989	0,939
rms Theta		0,045

In accordance with the model fit picture above, the RMS Theta value is $0.045 < 0.102$ and the NFI value is $0.989 > 0.9$. So based on these two model assessments, the model meets the model fit criteria. Likewise with the SRMR or Standardised Root Mean Square Value, the value is $0.087 < 0.10$, so the model fits, so it can be concluded that the model fits the research data.

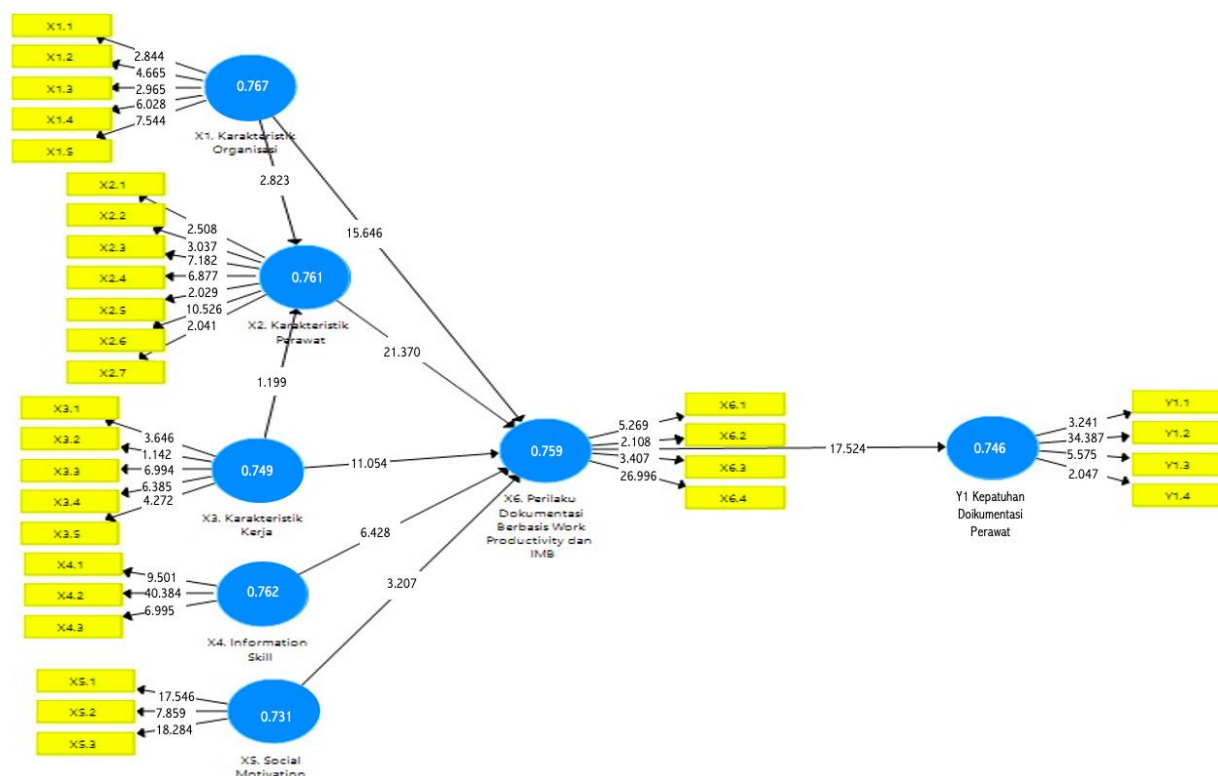


Figure 2. Inner Model

Table 7.
Research Hypothesis Testing Results

Hypothesis	Original Sample (O)	T Statistics (O/STDEV)	P Values	Description
Effect of organizational characteristics on nurse characteristics	0,421	2,823	0,021	Significant
Influence of organizational characteristics on WP and IMBS-based documentation behaviour	0,651	15,646	0,002	Significant
Influence of nurse characteristics on WP and IMBS-based documentation behaviour	0,795	21,370	0,000	Significant
The effect of work characteristics on nurse characteristics	0,088	1,199	0,171	Not Significant
The effect of work characteristics on WP and IMBS-based documentation behaviour	0,589	11,054	0,000	Significant
Influence of informational skill on WP and IMBS-based documentation behaviour	0,574	6,428	0,000	Significant
The effect of social motivation on WP and IMBS-based documentation behaviour	0,539	3,207	0,028	Significant
Influence of WP-based documentation behaviour and IMBS on CPPT documentation compliance	0,695	17,524	0,000	Significant

Based on the results of data processing, all hypotheses are significant except for the effect of work characteristics on nurse characteristics.

DISCUSSION

Organizational characteristics consisting of the reward system, organizational structure, selection, training and development, and leadership have a significant influence on nurse characteristics. Organizational characteristics shape a nurse's personality through the reward system obtained during work, the organizational structure that exists in the room and makes

nurses have to respect the managerial structure that is their superior. The selection system carried out by nurses when nurses are recruited as employees and given briefings during the selection process has taken place. Training and development followed by nurses so that nurses can improve their self-competence.

The reward system is important in shaping the characteristics of nurses because the reward system and rewards for nurses will have a good influence on nurse performance. The performance of nurses is expected to show a real professional contribution in improving the quality of quality and professional nursing services. Based on a study found that data on 30 inpatient nurses as many as 46.67% were dissatisfied, 40% were moderately satisfied, and 13.3% were satisfied. Job satisfaction is measured based on Maslow's Hierarchy of Needs, namely physiological needs, safety, social, ego/ self-esteem, and self-actualisation. The basic need that workers need is physiological needs. Decent wages and salaries are included in physiological needs which is a reward system for nurses.

The results showed that organizational characteristics, namely the reward system, organizational goals, selection, training and development, leadership and organizational structure have an influence on work productivity-based documentation behaviour. The results describe that the reward system shows good results about a management in rewarding or appreciating an achievement by the hospital to nurses. The amount of reward reflects the status, recognition, and level of fulfilment of needs enjoyed by nurses and their families (Anggreny, 2018). This reward will be used by employees and their families to fulfil their needs (Agustini & Mulya, 2019). If the service pay received by nurses is getting bigger, it means that their position is getting higher, their status is getting better and the fulfilment of the needs they enjoy is getting more and more. Thus, his performance is also getting better. A reward system directed at meeting individual needs can also support increased organizational effectiveness (Dewi et al., 2021). With the approach of improving the reward system, it can help build a more effective performance motivation system by ensuring that a reward that has important value is given to task performance effectively.

The results showed that there was a significant influence of individual characteristics, namely knowledge, skills, abilities, attitudes and personality on the documentation behaviour of nurses based on work productivity. The results showed that knowledge showed moderate category results about the collection of information about the meaning, purpose, benefits of nursing care documentation sources understood by nurses, obtained from the learning process of nurses. The results of this study are things that nurses perceive based on encouragement from themselves or individuals based on knowledge. Research shows that the knowledge aspect provides awareness of nursing care management practices in Nigeria (Abila & Kantola, 2013; Yang et al., 2014). Nurse knowledge as the main element of nurse characteristics in achieving performance, because knowledge is information that has been analyzed and organized so that it is understood and can be used to solve problems and make decisions (Sopiah and Sangaji, 2018). Based on the above research, knowledge plays an important role for nurses in carrying out abilities and expertise, attitudes, personality, motivation that affect the performance of nurses in implementing the standard reference for patient safety by conducting documentation through thinking and determining new things through a nursing approach that is inherent in individual nurses.

Work characteristics, namely objective performance, feedback, correlation, work design and work schedule do not have a significant influence on IPPR documentation compliance. The results showed, a) The objective performance shown by nurses was classified in the sufficient

category; b) The feedback given by nurses in carrying out nursing actions in the sufficient category as well; c) The correlation of work with documentation compliance also showed sufficient results; d) Nursing work design in carrying out nursing actions showed sufficient results; and e) Compliance of nurses in implementing work schedules also showed sufficient results. The compliance of a nurse's documentation is not only influenced by characteristics that come from the nurse, characteristics in an organization, but also influenced by characteristics in the work itself. Work is an action taken by an individual in order to achieve planned goals. Performance must show an objective nature so as not to show too much subjectivity and will cause an impact on employee performance in doing work. Objective performance is more needed in a team and cooperative organization, because it views work in an objective portrait and not subjectivity. According to research (Dirik, 2020; Drey, 2022) the subjectivity of work will cause a poor work culture in an organization, because it can cause conflicts of interest, egocentricity and trigger the emergence of quarrels between members, so that divisions and the formation of camps will occur more quickly. So objective performance must be prioritised in the development of an organization.

According to Kopelman (1986), the determining factors of job characteristics are objective performance, feedback, correction, job design, work schedule. Job factors can be seen from the implementation of meeting standards and feedback where by looking at aspects of completing work on time, having realistic goals, involvement, initiative, mistakes, relationships with colleagues, socialization, gossip, time management, performance results (Kopelman, R., Brief, A., & Guzzo, 1990). This is supported by the findings of researchers that job factors assessed from objective performance (tasks carried out in accordance with procedures and rules, work enthusiasm, productive work, prudence in carrying out tasks, job descriptions, job descriptions, cooperation), feedback (peer input, leadership input, commitment to their work), evaluation (improvement of work results, understanding of the consequences of work), form of work (priority scale, planning, methods, job selection) (Paul et al., 2016; Rukh et al., 2015; Squires et al., 2015). The results of this study agree with Robbins and Judge (2014: 270) who suggest that individuals can only be motivated to work better according to the tasks and workload they receive. The diversity of tasks given, identification with the task through the opportunity to do the task from start to finish, providing autonomy by giving freedom to determine their own work procedures can have a positive effect on work behaviour and productivity. This study shows that nurses provide sufficient perceptions of the job characteristics provided by the hospital. The results of this study support previous research conducted by Djastuti (2011) and Dwiningrum (2015) which states that job characteristics have a positive and significant effect on work behaviour and productivity. Based on the results of this study, existing hospitals should pay more attention to factors that can affect the behaviour and work productivity of nurses in the future, especially the job characteristics applied to nurses.

CONCLUSION

Based on the overall results of the study, it can be seen that in the development of a model of nurse documentation behaviour based on work productivity and IMB theory towards compliance with IPPR documentation nurses have the best path, namely the path from X2 nurse characteristics through the path X6 work productivity-based documentation behaviour and IMBS and towards Y1 IPPR documentation compliance. It is shown that in improving nurses' compliance with IPPR nursing documentation, nurse characteristics and nurse behaviour are the most dominant factors, so that in improving compliance must improve these two factors. Nurse characteristics consisting of knowledge, abilities, attitudes, personality, self-perception, beliefs and expectations with the strongest indicator is belief. Nurse

characteristics are motivation that comes from within the nurse and has an impact on increasing the motivation that exists within the nurse. The characteristics of nurses make one of the strongest factors because individual nurses in making behavioural changes and forming compliance motivation and the biggest belief is in themselves. Nurses need confidence from themselves in order to work professionally, although nurses also need support so that they do not easily experience burnout syndrome.

REFERENCES

- Ahsan et al. (2018). Analysis of Nursing Behavior Factors in Documentation of Nursing Care in Emergency Unit Using Theory of Planned Behavior. *International Journal of Indonesian National Nurses Association (IJINNA)*, 1(1), 64–79. <https://doi.org/10.32944/ijinna.v1i1.20>
- Ardiansyah Saputra, M. (2018). The Influence of Nursing Care Documenting Behavior to the Completeness of Nursing Care Documentation at Hospital X. *Jurnal Medicoeticolegal Dan Manajemen Rumah Sakit*, 7(2), 170–177. <https://doi.org/10.18196/jmmr.7270>
- Asmirajanti, M., Hamid, A. Y. S., & Hariyati, R. T. S. (2019). Nursing care activities based on documentation. *BMC Nursing*, 18(Suppl 1), 1–5. <https://doi.org/10.1186/s12912-019-0352-0>
- Baldé, M., Ferreira, A. I., & Maynard, T. (2018). SECI driven creativity: the role of team trust and intrinsic motivation. *Journal of Knowledge Management*. <https://doi.org/10.1108/JKM-06-2017-0241>
- Blanco-Mavillard, I., Parra-García, G., Fernández-Fernández, I., Rodríguez-Calero, M. Á., Personat-Labrador, C., & Castro-Sánchez, E. (2020a). Care of peripheral intravenous catheters in three hospitals in Spain: Mapping clinical outcomes and implementation of clinical practice guidelines. *PloS One*, 15(10), e0240086. <https://doi.org/10.1371/journal.pone.0240086>
- Blanco-Mavillard, I., Parra-García, G., Fernández-Fernández, I., Rodríguez-Calero, M. Á., Personat-Labrador, C., & Castro-Sánchez, E. (2020b). Care of peripheral intravenous catheters in three hospitals in Spain: Mapping clinical outcomes and implementation of clinical practice guidelines. *PLOS ONE*, 15(10), e0240086. <https://doi.org/10.1371/journal.pone.0240086>
- Buchbinder, S. B., Shanks, N. H., & Kite, B. J. (2021). *Introduction to Health Care Management* (4th ed.). Jones & Bartlett Learning.
- Centers for Disease Control and Prevention. (2021). *National Healthcare Safety Network (NHSN) Patient Safety Component Manual*. National Healthcare Safety Network (NHSN) Patient Safety Component Manual, January, 1–39.
- Chen, Y., Zou, H., Zhang, Y., Fang, W., & Fan, X. (2017). Family caregiver contribution to self-care of heart failure: an application of the information-motivation-behavioral skills model. *Journal of Cardiovascular Nursing*, 32(6), 576–583.
- Choi, S. A., & Jeong, S. Y. (2020). Choi, S. A., & Jeong, S. Y. (2020). Factors influencing compliance in intravenous practice for infection prevention among nurses in small and medium hospitals. *Journal of the Korean Academy of Fundamentals of Nursing*, 27(4), 344–355. <https://doi.org/10.7739/JKAFN.2020.27.4.344>

- Choi, S., Ham, Y. H., Han, K., & Ryu, E. (2020). Knowing in nurses' belief and attitude about patient activation: A validation of the Korean clinician support for patient activation measure using rasch analysis. *Healthcare*, 8(4), 571.
- chopade, A. kumar S., & Dhudum, B. (2018). A Study to assess the Effectiveness of Standard Operating Procedure Related to Peripheral Intravenous Therapy on Prevention of Intravenous Related Complications among Staff Nurses. *International Journal of Nursing Education*, 10(4), 7–11. <https://doi.org/10.5958/0974-9357.2018.00090.9>
- Corado, K., Jain, S., Morris, S., Dube, M. P., Daar, E. S., He, F., Aldous, J. L., Sitapati, A., Haubrich, R., Milam, J., & Karris, M. Y. (2018). Randomized Trial of a Health Coaching Intervention to Enhance Retention in Care: California Collaborative Treatment Group 594. *AIDS and Behavior*, 22(8), 2698–2710. <https://doi.org/http://dx.doi.org/10.1007/s10461-018-2132-3>
- Dahshan, D. M. E. A. El, Youssef, D. H. A. M., Aljouaid, M., Babkeir, R. A., & Hassan, D. W. B. (2017). Effect of Nurse Managers' Leadership Styles on Organizational Commitment of Nurses Working at Taif Governmental Hospitals in Kingdom of Saudi Arabia. *IOSR Journal of Nursing and Health Science*, 06(02), 35–46. <https://doi.org/10.9790/1959-0602043546>
- Dennis, C. L. (2013). Peer support for postpartum depression: Volunteers' perceptions, recruitment strategies and training from a randomized controlled trial. *Health Promotion International*, 28(2), 187–196. <https://doi.org/10.1093/heapro/das003>
- Duwadi, S., Zhao, Q., & Budal, B. S. (2019). Peripherally inserted central catheters in critically ill patients – complications and its prevention: A review. *International Journal of Nursing Sciences*, 6(1), 99–105. <https://doi.org/10.1016/j.ijnss.2018.12.007>
- Fisher, J. D., & Fisher, W. A. (1992). Changing AIDS-risk behavior. *Psychological Bulletin*, 111(3), 455.
- Fisher, J. D., Fisher, W. A., Amico, K. R., & Harman, J. J. (2006). An information-motivation-behavioral skills model of adherence to antiretroviral therapy. *Health Psychology*, 25(4), 462.
- Franco-Santos, M., & Gomez-Mejia, L. (2015). Reward Systems. *Wiley Encyclopedia of Management*, November, 1–6. <https://doi.org/10.1002/9781118785317.weom050102>
- Gomez, R., McLaren, S., Sharp, M., Smith, C., Hearn, K., & Turner, L. (2015). Evaluation of the bifactor structure of the Dispositional Hope Scale. *Journal of Personality Assessment*, 97(2), 191–199.
- Gorski, L., Hadaway, L., Hagle, M. E., McGoldrick, M., Orr, M., & Doellman, D. (2021). Infusion Therapy Standards of Practice Reviewers. *Chemical Physics Letters*, 39(1).
- Guembe, M., Pérez-Granda, M. J., Capdevila, J. A., Barberán, J., Pinilla, B., Martín-Rabadán, P., Bouza, E., Millán, J., Pérez de Oteyza, C., Muíño, A., Villalba, M., Cuenca, C., Castaño, J. G., Delgado, C. M., Zamorano, S., Gómez, B., Collado, J. M., Salinas, M. T., Amat, A. S., ... Costa Cerdá, M. A. (2017). Nationwide study on peripheral-venous-catheter-associated-bloodstream infections in internal medicine departments. *Journal of Hospital Infection*, 97(3), 260–266. <https://doi.org/10.1016/j.jhin.2017.07.008>
- Gupta, P., Thomas, M., Patel, A., George, R., Mathews, L., Alex, S., John, S., Simbulan, C.,

- Garcia, M. L., Al-Balushi, S., & El Hassan, M. (2021). Bundle approach used to achieve zero central line-associated bloodstream infections in an adult coronary intensive care unit. *BMJ Open Quality*, 10(1). <https://doi.org/10.1136/bmjopen-2020-001200>
- Hariyati, Tutik, S., Delimayanti, Mera, K., & Widyatuti. (2011). Developing prototype of the nursing management information system in Puskesmas and hospital, Depok Indonesia. *International Journal of Physical Sciences*, 6(15), 3711–3718.
- Hariyati, R. T. S., Hamid, Yani, A., Eryando, T., Hasibuan, Z. A., & Milanti, A. (2016). The Effectiveness and Efficiency of Nursing Care Documentation Using the SIMPRO Model. *International Journal of Nursing Knowledge*, 27(3), 136–142. <https://doi.org/10.1111/2047-3095.12086>
- Hariyati, R. T. S., Kobayashi, N., & Sahar, J. (2018). Simplicity and Completeness of Nursing Process Satisfaction Using Nursing Management Information System at the Public Health Service “X” Indonesia. *International Journal of Caring Science*.
- Hastuti, A. P., Nursalam, N., & Triharini, M. (2017). Preventing Medication Error Based on Knowledge Management Against Adverse Event. *Jurnal Ners*, 12(1), 133. <https://doi.org/10.20473/jn.v12i1.2297>
- Hoffmann-Burdzińska, K., & Flak, O. (2016). Management By Objectives As a Method of Measuring Teams’ Effectiveness. *Journal of Positive Management*, 6(3), 67. <https://doi.org/10.12775/jpm.2015.016>
- Høvik, L. H., Gjeilo, K. H., Lydersen, S., Rickard, C. M., Røtvold, B., Damås, J. K., Solligård, E., & Gustad, L. T. (2019). Monitoring quality of care for peripheral intravenous catheters; feasibility and reliability of the peripheral intravenous catheters mini questionnaire (PIVC-miniQ). *BMC Health Services Research*, 19(1), 636. <https://doi.org/10.1186/s12913-019-4497-z>
- Irmawati Mathar. (2018). Manajemen informasi Kesehatan (pertama). DEEPPUBLISH (CV Budi Utama).
- Jeihooni, A. K., Hidarnia, A., Kaveh, M. H., Hajizadeh, E., & Askari, A. (2016). Application of the health belief model and social cognitive theory for osteoporosis preventive nutritional behaviors in a sample of Iranian women. *Iranian Journal of Nursing and Midwifery Research*, 21(2), 131.
- Jepkosgei, J., Nzinga, J., Adam, M. B., & English, M. (2022). Exploring healthcare workers’ perceptions on the use of morbidity and mortality audits as an avenue for learning and care improvement in Kenyan hospitals’ newborn units. *BMC Health Services Research*, 22(1), 1–10.
- Kadiyono, A., & Sumantri, S. (2011). Identifikasi Hambatan Organisasi Dalam Memberdayakan Sumber Daya Manusia Serta Hubungannya Dengan Kepuasan Kerja Karyawan. *Fakultas Psikologi Universitas Padjadjaran*, 1, 5–6.
- Kamil, H., Rachmah, R., & Wardani, E. (2018). What is the problem with nursing documentation? Perspective of Indonesian nurses. *International Journal of Africa Nursing Sciences*, 9, 111–114. <https://doi.org/10.1016/j.ijans.2018.09.002>
- Karinda, M., Sepang, J. L., & Mintardjo, C. M. O. (2016). Study On The Training And

- Development of employee In The Improvement of Banking Service Performance At Bank Sulutgo Manado. *Jurnal Berkala Ilmiah Efisiensi*, 16(03), 382–393.
- Kebede, M., Endris, Y., & Zegeye, D. T. (2017). Nursing care documentation practice: The unfinished task of nursing care in the University of Gondar Hospital. *Informatics for Health and Social Care*, 42(3), 290–302. <https://doi.org/10.1080/17538157.2016.1252766>
- Kementerian Kesehatan RI. (2020). Keputusan Menteri Kesehatan No. HK.01.07-MENKES-425-2020 tentang Standar Profesi Perawat. Kementerian Kesehatan RI.
- Kementrian kesehatan. (2018). Permenkes no 4 tahun 2018 hak kewajiban pasien dan rumah sakit. *Advanced Optical Materials*, 10(1), 1–9.
- KHANI, J. A. L. I., Hidarnia, A., Kaveh, M. H., & Hajizadeh, E. (2015). The effect of a prevention program based on health belief model on osteoporosis.
- Kim, M., & Beehr, T. A. (2018). Empowering leadership: leading people to be present through affective organizational commitment?*. *International Journal of Human Resource Management*, 5192, 1–25. <https://doi.org/10.1080/09585192.2018.1424017>
- Lee, J., & Kang, S. J. (2020). Factors influencing nurses' intention to care for patients with emerging infectious diseases: Application of the theory of planned behavior. *Nursing & Health Sciences*, 22(1), 82–90.
- Leineweber, C., Chungkham, H. S., Lindqvist, R., Westerlund, H., Runesdotter, S., Alenius, L. S., & Tishelman, C. (2016). Nurses' practice environment and satisfaction with schedule flexibility is related to intention to leave due to dissatisfaction: A multi-country, multilevel study *International Journal of Nursing Studies* Nurses' practice environment and satisfaction w. *International Journal of Nursing Studies*, 58, 47–58. <https://doi.org/10.1016/j.ijnurstu.2016.02.003>
- Lestari. (2015). *Kumpulan Teori Untuk Kajian Pustaka Penelitian Kesehatan*. Yogyakarta : Nuha Medika.
- Li, X.-F., Liu, W., & Qin, Y. (2016). Nurses' perception of risk factors for infusion phlebitis: A cross-sectional survey. *Chinese Nursing Research*, 3(1), 37–40. <https://doi.org/10.1016/j.cnre.2016.03.002>
- Liu, C., Chen, L., Kong, D., Lyu, F., Luan, L., & Yang, L. (2020). Incidence, risk factors and medical cost of peripheral intravenous catheter-related complications in hospitalised adult patients. *Journal of Vascular Access*. <https://doi.org/10.1177/1129729820978124>
- Mahler, C., Ammenwerth, E., Wagner, A., Tautz, A., Happek, T., Hoppe, B., & Eichstädter, R. (2007). Effects of a computer-based nursing documentation system on the quality of nursing documentation. *Journal of Medical Systems*, 31(4), 274–282. <https://doi.org/10.1007/s10916-007-9065-0>
- Mayberry, L. S., & Osborn, C. Y. (2014). Empirical validation of the information–motivation–behavioral skills model of diabetes medication adherence: a framework for intervention. *Diabetes Care*, 37(5), 1246–1253.
- Moher, D., Liberati, A., Tetzlaff, J., & Altman, D. G. (2009). Preferred reporting items for systematic reviews and meta-analyses_ the PRISMA statement _ Enhanced Reader.pdf.

- BMJ, 339, 1–8. <https://doi.org/10.1136/bmj.b2535>
- Muhamad, M., Afshari, M., & Kazilan, F. (2011). Family support in cancer survivorship. *Asian Pacific Journal of Cancer Prevention*, 12(6), 1389–1397.
- Mutakallim. (2016). Pengawasan, Evaluasi dan Umpan Balik Strategik. *Journal UIN Alauddin*, V(2), 351–365.
- Negm, E. M., Othman, H. A., Tawfeek, M. M., Zalat, M. M., El-Sokkary, R. H., & Alanwer, K. M. (2021). Impact of a comprehensive care bundle educational program on device-associated infections in an emergency intensive care unit. *Germs*, 11(3), 381–390. <https://doi.org/10.18683/germs.2021.1275>
- Nelson, L. A., Wallston, K. A., Kripalani, S., Lestourgeon, L. M., Williamson, S. E., & Mayberry, L. S. (2018). Assessing barriers to diabetes medication adherence using the Information-Motivation- Behavioral skills model. *Diabetes Research and Clinical Practice*, 142, 374–384. <https://doi.org/10.1016/j.diabres.2018.05.046>
- Neupane, S., Dhungana, G. P., & Ghimire, H. C. (2019). Adherence to antiretroviral treatment and associated factors among people living with HIV and AIDS in CHITWAN, Nepal. *BMC Public Health*, 19(1), 720.
- Noor, S. (2021). Pengembangan Model Komitmen Organisasi Berbasis Keyakinan Terhadap Kinerja Perawat Dan Kepuasan Klien Rumah Sakit di Provinsi Kalimantan Selatan. In Universitas Airlangga. Universitas Airlangga.
- Noor, S., Nursalam, N., & Sukartini, T. (2021). Development of an Organizational Commitment Model Based on Belief on Nurse Performance. 12(1), 818–831.
- Noorkasiani, Gustina, & Maryam, R. S. (2015). Factors Related to Nursing Documentation Completeness. *Indonesia Nursing Journal*, 18(1), 1–8.
- Nurdin, R. (2018). Pemberdayaan , Kepemimpinan Dan Konseptual. *Manajemen Dan Inovasi*, 9(1), 60–74.
- Nursalam. (2020a). *Manajemen Keperawatan: Aplikasi dalam Praktik Keperawatan Profesional* (P. P. Lestari (ed.); 6th ed.). Salemba Medika.
- Nursalam. (2020b). *Metodologi Penelitian Ilmu Keperawatan: Pendekatan Praktis*, Edisi 5. Salemba Medika.
- Nursalam, Kurniawati, N. D., Misutarno, M., & S, F. K. (2018). *Asuhan Keperawatan pada Pasien Terinfeksi HIV/AIDS*. Jakarta: Salemba Medika.
- Nyarmi, Wahyuni, E. D., & Ni'mah, L. (2020). The affecting factors of nurses' compliance in nursing documentation. *International Journal of Psychosocial Rehabilitation*, 24(2). <https://doi.org/10.37200/IJPR/V24I2/PR200731>
- Osborn, C. Y., & Egede, L. E. (2010). Validation of an Information-Motivation-Behavioral Skills model of diabetes self-care (IMB-DSC). *Patient Education and Counseling*, 79(1), 49–54. <https://doi.org/10.1016/j.pec.2009.07.016>
- Pahlin, T., & Mattsson, J. (2019). Digital documentation platforms in prehospital care - Do they support the nursing care. *International Journal of Higher Education*, 8(1), 84–91.

<https://doi.org/10.5430/ijhe.v8n1p84>

- Palese, A., Ambrosi, E., Fabris, F., Guarnier, A., Barelli, P., Zambiasi, P., Allegrini, E., Bazoli, L., Casson, P., Marin, M., Padovan, M., Picogna, M., Taddia, P., Salmaso, D., Chiari, P., Marognolli, O., Canzan, F., & Saiani, L. (2016). Nursing care as a predictor of phlebitis related to insertion of a peripheral venous cannula in emergency departments: Findings from a prospective study. *Journal of Hospital Infection*, 92(3), 280–286. <https://doi.org/10.1016/j.jhin.2015.10.021>
- Peng, Z., Yu, Y., Wei, W., Hou, Y., Sun, Z., Wang, Y., Zhang, L., Zhou, Y., Wang, Q., & Cai, Y. (2020). Reliability and Validity of the LifeWindows Information–Motivation–Behavioral Skills Antiretroviral Therapy Adherence Questionnaire Among HIV+ Patients in Shanghai. *Patient Preference and Adherence*, 14, 507.
- Peter G. Northouse. (2016). *Kepemimpinan Teori dan Praktik* (6th ed.). PT Indeks, Jakarta.
- PPNI. (2017). *Standar Diagnosis Keperawatan Indonesia: Definisi dan Indikator Diagnostik*. DPP PPNI.
- Rachmania, D., Nursalam, N., & Yunitasari, E. (2016). Development of Nursing Diagnosis and Intervention Instrument Based on Standardized Nursing Language (Nanda-I, Noc, Nic). *Jurnal NERS*, 11(2), 157–164. <https://doi.org/10.20473/jn.v11i22016.157-163>
- Ray-Barruel, G., Xu, H., Marsh, N., Cooke, M., & Rickard, C. M. (2019). Effectiveness of insertion and maintenance bundles in preventing peripheral intravenous catheter-related complications and bloodstream infection in hospital patients: A systematic review. *Infection, Disease and Health*, 24(3), 152–168. <https://doi.org/10.1016/j.idh.2019.03.001>
- Ray-Barruel, Gillian, Xu, H., Marsh, N., Cooke, M., & Rickard, C. M. (2019a). Effectiveness of insertion and maintenance bundles in preventing peripheral intravenous catheter-related complications and bloodstream infection in hospital patients: A systematic review. *Infection, Disease and Health*, 24(3), 152–168. <https://doi.org/10.1016/j.idh.2019.03.001>
- Ray-Barruel, Gillian, Xu, H., Marsh, N., Cooke, M., & Rickard, C. M. (2019b). Effectiveness of insertion and maintenance bundles in preventing peripheral intravenous catheter-related complications and bloodstream infection in hospital patients: A systematic review. *Infection, Disease & Health*, 24(3), 152–168. <https://doi.org/10.1016/j.idh.2019.03.001>
- Rizany, I., Hariyati, R. T. S., Afifah, E., & Rusdiyansyah. (2019). The impact of nurse scheduling management on nurses' job satisfaction in Army Hospital: a cross-sectional research. *Sage Open*, 9(2), 2158244019856189.
- Ross, K. E. (1971). Management by Objectives Applied to the Business Communication Class. *The Journal of Business Communication*, 8(2), 45 – 52. <https://doi.org/http://dx.doi.org/10.1177/002194367100800201>
- Santillán Torres Torija, C., Villagrán Vázquez, G., Robles Montijo, S. S., & Eguiluz Romo, L. de L. (2015). The information and motivation and behavioral skills model of ART adherence among HIV-positive adults in Mexico. *Journal of the International Association of Providers of AIDS Care (JIAPAC)*, 14(4), 335–342.

- Santoso, C. B. (2019). Exploration Of Asia Leadership Theory: Looking For An Asian Role In The Field Of Leadership Theory. *Journal of Leadership in Organizations*, 1(1), 67–78.
- Saputra, Muhammad, A. (2018). The Influence of Nursing Care Documenting Behavior to the Completeness of Nursing Care Documentation at Hospital X. *Jurnal Medicoeticolegal Dan Manajemen Rumah Sakit*, 7(2), 170–177. <https://doi.org/10.18196/jmmr.7270>
- Saputra, C., Arif, Y., & Yeni, F. (2020). Upaya Meningkatkan Pengetahuan Perawat Tentang Dokumentasi Keperawatan. *Journal of Chemical Information and Modeling*, 53(9), 1689–1699.
- Seyedrezazadeh, E., Ansarin, K., Sharifi, A., Jafari Rouhi, A. H., Gilani, N., Aftabi, Y., Khalili, M., & Najmi, M. (2020). Validation of the Persian work productivity and activity impairment questionnaire in asthmatic patients. *Expert Review of Respiratory Medicine*, 14(7), 757–762. <https://doi.org/10.1080/17476348.2020.1750373>
- Siagian. (2003). *Manajemen Sumber Daya Manusia*. Jakarta: Bumi Aksara.
- Sianturi, E. I., Perwitasari, D. A., Islam, M. A., & Taxis, K. (2019). The association between ethnicity, stigma, beliefs about medicines and adherence in people living with HIV in a rural area in Indonesia. *BMC Public Health*, 19(1), 55.
- Sopiah, & Sangaji, E. (2018). *Manajemen Sumber Daya Manusia Strategik*. Andi Offset.
- Spengler, M., Damian, R. I., & Roberts, B. W. (2018). How you behave in school predicts life success above and beyond family background, broad traits, and cognitive ability. *Journal of Personality and Social Psychology*, 114(4), 620.
- Spoon, D., Rietbergen, T., Huis, A., Heinen, M., van Dijk, M., van Bodegom-Vos, L., & Ista, E. (2020). Implementation strategies used to implement nursing guidelines in daily practice: A systematic review. *International Journal of Nursing Studies*, 111, 103748. <https://doi.org/10.1016/j.ijnurstu.2020.103748>
- Tasew, H., Mariye, T., & Teklay, G. (2019). Nursing documentation practice and associated factors among nurses in public hospitals, Tigray, Ethiopia. *BMC Research Notes*, 12(1). <https://doi.org/10.1186/s13104-019-4661-x>
- Tim Departemen Kesehatan RI. (2005). *Instrumen Evaluasi penerapan Standar Asuhan Keperawatan di Rumah Sakit* (5th ed.). Departemen Kesehatan RI Dirjen Pelayanan Medik.
- Tsamlag, L., Wang, H., Shen, Q., Shi, Y., Zhang, S., Chang, R., Liu, X., Shen, T., & Cai, Y. (2020). Applying the information–motivation–behavioral model to explore the influencing factors of self-management behavior among osteoporosis patients. *BMC Public Health*, 20(1), 1–8.
- Wahyuni, E. D. (2012a). *Pengembangan Model Perilaku Perawat dalam Pendokumentasian Asuhan Keperawatan Berbasis Theory of Planned Behavior di RSD Mardi Waluyo Blitar*. Universitas Airlangga.
- Wahyuni, E. D. (2012b). *Pengembangan Model Perilaku Perawat dalam Pendokumentasian Asuhan Keperawatan Berbasis Theory of Planned Behavior di RSD Mardi Waluyo Kota Blitar*. Universitas Airlangga.

- Wasserman, S., & Messina, A. (2018). Guide To Infection Control In The Healthcare Setting Bundles in Infection Prevention and Safety. International Society for Infectious Diseases, 1–14.
- Widodo, H., Nursalam, N., & Wahyuni, E. D. (2020). Analysis of Implementation of Perioperative Care Instrument Based on Standards of Nursing Diagnosis , Intervention and Outcomes in Indonesia Literature review. *Jurnal Ners*, 15(2), 57–62.
- Yang, L. R., Huang, C. F., & Hsu, T. J. (2014). Knowledge leadership to improve project and organizational performance. *International Journal of Project Management*, 32(1), 40–53. <https://doi.org/10.1016/j.ijproman.2013.01.011>
- Yanti, D., & Muhammad, I. (2018). Pengaruh Faktor Psikologis dan Organisasi terhadap Kinerja Perawat di Rumah Sakit Umum Daerah Sultan Abdul Aziz Syah Peureulak. *Jurnal Rekam Medic*, 1(2), 106–116.
- Zaheya, L. A., Al Maaitah, R., & Hani, S. B. (2017). Quality of nursing documentation: Paper-based health records versus electronic-based health records. *Journal of Clinical Nursing*, 1(12), 578–589. <https://doi.org/https://doi.org/10.1111/jocn.14097>
- Zhang, X., Wang, M. C., He, L., Jie, L., & Deng, J. (2019). The development and psychometric evaluation of the Chinese Big Five Personality Inventory-15. *PLoS ONE*, 14(8), 1–21. <https://doi.org/10.1371/journal.pone.0221621>
- Zheng, L. Y., Peng, Y., Yuan, H., Liu, S. X., Xue, H., & Zhang, X. Y. (2020). Nurses' knowledge of the management of drug-induced peripherally inserted central catheter obstruction: A descriptive phenomenological study. *Journal of Vascular Access*, 21(5), 680–686. <https://doi.org/10.1177/1129729819900864>