

# An Analysis on the Strategy of Increasing Knowledge, Skill, and Attitude in Improving Inpatient Nurses' Competence at RSUD Dr. H. Kumpulan Pane, Tebing Tinggi (RSKP TT)

Nelly Novithalinagari, Nazarudin Matondang, Sutarman

Program Study of Magister Management, University of Sumatera Utara, Indonesia

Jl. Prof. T. Maas, Kampus USU, Medan, 20155

Email: ny\_84@ymail.com

**Abstract**— The objective of the research was to find out the influence of knowledge, skill, and attitude on nurses' competence at RSUD Dr. H. Kumpulan Pane, Tebing Tinggi. The research used correlation method. The respondents were inpatient nurses who were government employees, were D3 nursing graduates, and had STR. Multiple linear regression analysis with an SPSS software program was used for analytical test. The result of the calculation showed that  $Y$  mean model =  $2.504 - 0.063X_1 + 0.318X_2 + 0.589X_3$ . The value of determination coefficient ( $R^2$ ) was 0.346 which indicated that 34.6% of nurses' competence was influenced by knowledge, skill, and attitude, while the remaining 65.4% was influenced by the variables excluded from this research. The value of correlation ( $R$ ) coefficient was 0.588 which indicated that there was significant correlation of knowledge, skill, and attitude with nurses' competence. The conclusion was that there was significant influence of nurses' attitude ( $X_3$ ) and their skill ( $X_2$ ) on their competence, while knowledge ( $X_1$ ) had insignificant influence on nurses' competence. Partially, attitude had significant influence on nurses' competence, while knowledge and skill had insignificant influence of nurses' competence at RSUD Dr. H. Kumpulan Pane, Tebing Tinggi.

**Keywords**— Nurses' Competence.

## I. INTRODUCTION

The era of globalization has created challenges for all types of industries to compete, including industries in the health services sector. The hospital is an organization that functions to serve public health. The quality of hospital services in Indonesia is still felt to be unsatisfactory. Some of the complaints that arise are due to differences in perceptions regarding the services felt by inpatients in grade 3 with VIPs. Complaints occur not only in the aspect of infrastructure, but also in the services of human resources. Patient waiting times to be served are often very late and not in accordance with established practice schedules (Jonirasmanto, 2009; Supratman and Prasetyo, 2010).

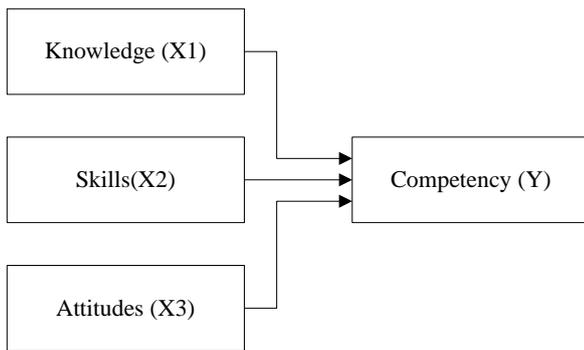
Criteria for the quality of hospital services can change according to patient preferences. Therefore it is important for hospitals to continue to monitor patient preferences so that they are not mistaken in perceiving the criteria for service quality they expect.

In an effort to improve service to consumers, Tebing Tinggi Hospital is required to always improve its performance, the way that has been carried out by the hospital management

is rotating room rotation to nurses, giving nurses the opportunity to continue their education and sending nurses to attend training held by government. These efforts are not fully able to improve the performance of nurses in the inpatient room, this can be seen from the achievement of nursing service performance that of the 14 nursing service indicators in the RSKP TT, only 6 (six) indicators reach the target while the other 8 indicators consist of 5 (five) indicators that have not been implemented in the inpatient room and 3 (three) other indicators are still far from expectations. According to nursing staff, the researchers interviewed the reasons for the 5 indicators that had not been implemented in the inpatient room because there were no nurses who had expertise in the field while the other 3 indicators had not yet reached the target such as phlebitis ie pain or inflammation. tasty, hot, local swelling and redness on or around the insertion of the infusion needle on the vein due to chemical or mechanical irritation due to infusion, nurses' ability to carry out nursing actions did not reach the target, because the RSKP TT had used the MAKP model (professional nursing care method) in a team but the implementation was not appropriate, ie patients were only served 1-2 teams with 6 nurses so 1 The 3 nurses implementing each team and team only apply in the morning shift. MAKP system should consist of 2-3 teams with 6-8 professional nurses, implementing nurses, technicians and administration under the leadership of the team on the morning, afternoon and night shifts.

Through this research, it is expected to be able to find the magnitude of the influence of each variable in order to improve current conditions and be able to provide strategy recommendations to the company in order to improve the company's competitive advantage.

The following figure will show the dimensions that affect the nurses' inpatient competency level at RSUD Dr. H. Kumpulan Pane Kota Tebing Tinggi which is a reference in providing recommendations for strategies to improve nurses' knowledge, skills and attitudes .



In this section, the theories and literature used at the time of the study were presented. This theory is taken from books and the internet.

*Competency Theory*

Wibowo (2012), competency is a fundamental characteristic of each individual that is connected with criteria that are referenced against superior or effective performance in a job or situation. Another opinion was also expressed by Santiasih (2013) which states that competence is the knowledge, ability, and skills or personal characteristics of a person who determines the level of behavior and expertise of an individual in carrying out his work which is expected to provide superior performance in his work. Spencer (1993) quoted by Vathanophas (2007), it is stated that the components of competency building are knowledge, skills and attitudes.

*Knowledge*

Knowledge is information that someone has for a particular field. knowledge is a complex competency. Knowledge tests measure the ability of test takers to choose the most correct answer, but cannot see if someone can do work based on the knowledge they have.

Knowledge or cognitive is a domain that is very important in shaping one's actions (overt behavior). Because from experience and research it turns out that if we are based on knowledge it will be more lasting than behavior that is not based on knowledge.

In this study nurses 'knowledge was measured by nurses' knowledge about the practice of nursing care. Nursing care is a process or series of nursing practice activities directly to clients in various health service settings that are based on the nursing profession's rules and are at the core of nursing practice (Putra, 2016). The components of the nursing process are:

- a. Assessment
- b. Nursing diagnoses
- c. Planning
- d. Implementation
- e. Evaluation

The success of nursing care to patients is largely determined by the choice of the method of giving professional nursing care. With the increasing public need for nursing services and the demands of the development of science and

technology, the method of giving nursing care systems must be effective and efficient.

*Skills*

Skills are the ability to carry out certain tasks both physically and mentally. Physical and mental tasks carried out daily by nurses are:

1. provide nursing services directly based on the nursing process with a touch of affection:
  - a. arrange a treatment plan according to the patient's problem
  - b. set the treatment action according to the plan
  - c. evaluate the care actions that have been given
  - d. record or report all treatment actions and patient responses to the care record
2. carrying out medical programs responsibly
  - a. drug administration
  - b. laboratory examination
  - c. preparation of patients who will be operated on
3. pay attention to the balance of physical, mental, social and spiritual needs of the patient
  - a. maintain patient and environmental cleanliness
  - b. reduce the suffering of patients by providing a sense of security, comfort and calm
  - c. therapeutic approach and communication
4. prepare patients physically and mentally to deal with nursing actions and treatment or diagnosis.
5. train the patient to help himself according to his abilities
6. provide immediate relief to patients who are serious
7. assist the head of the room in administering the room administratively.
  - a. prepare new patient data, go home or die
  - b. daily census or form
  - c. daily reference or form
8. arrange and prepare the tools in the room according to their functions so that they are ready to use
9. Creating and maintaining cleanliness, safety, comfort and beauty of the room
10. carry out official duties morning, evening, evening or holiday alternately according to the schedule of tasks
11. provide health education in connection with the disease
12. report everything about the patient's condition both oral and written
13. make the patient's daily report.

Guarantees for services provided by nurses are very determined by performance or service performance, so it is believed that nurses are able to provide reliable, independent and professional services that have an impact on the satisfaction of services received. aside from these performances, the guarantee of a service is also determined by the existence of a strong organizational commitment, which recommends that each nurse provide service seriously and seriously to satisfy the person being served.

*Attitudes*

Attitude is the attitude of the officer in establishing relationships with patients with care or friendliness and

trustworthiness (Putra.2016). These attitudes can be grouped into four attitudinal characteristics, namely:

- a. friendliness, that is a friendly attitude to others
- b. politeness, namely polite attitude both speech and behavior
- c. attention, namely warm and harmonious interest in communicating
- d. stability, ie a balanced state is not easy to get emotional and disappointed.

**Research Methods**

The research method used is a correlational research method, using a quantitative approach to the type of survey research. Data was collected through interviews and questionnaires then processed using multiple regression analysis.

**Validity Test and Instrument Reliability**

Variable	Statement number	r count	r critis	information
Knowledge (X1)	1	0.679	0,444	VALID
	2	0.665	0,444	VALID
	3	0.706	0,444	VALID
	4	0.680	0,444	VALID
	5	0.714	0,444	VALID
Skills (X2)	1	0.666	0,444	VALID
	2	0.677	0,444	VALID
	3	0.698	0,444	VALID
	4	0.690	0,444	VALID
	5	0.649	0,444	VALID
Attitudes(X3)	1	0.720	0,444	VALID
	2	0.702	0,444	VALID
	3	0.711	0,444	VALID
	4	0.642	0,444	VALID
	5	0.715	0,444	VALID
Competency (Y)	1	0.771	0,444	VALID
	2	0.766	0,444	VALID
	3	0.718	0,444	VALID
	4	0.738	0,444	VALID
	5	0.746	0,444	VALID

**Instrument Reliability Test**

NO	Variable	Alpha Cronbach	N of Item	information
1	Knowledge (X1)	0.716	5	RELIABILITAS
2	Skills(X2)	0.702	5	RELIABILITAS
3	Attitudes (X3)	0.727	5	RELIABILITAS
4	Competency (Y)	0.782	5	RELIABILITAS

**Data Analysis Model**

Model Summary <sup>b</sup>					
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Durbin-Watson
1	.588 <sup>a</sup>	.346	.223	3.391	2.721

a. Predictors: (Constant), attitudes, skills, knowledge  
b. Dependent Variable : competency

**Uji Hipotesis Simultan (Uji F)**

ANOVA <sup>b</sup>						
Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	97.182	3	32.394	2.817	.072 <sup>a</sup>
	Residual	184.018	16	11.501		
	Total	281.200	19			

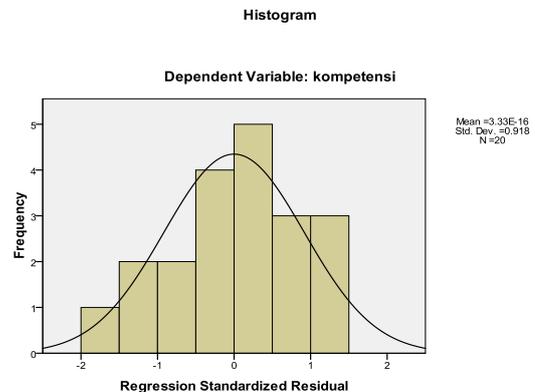
a. Predictors: (Constant), attitudes, skills, knowledge  
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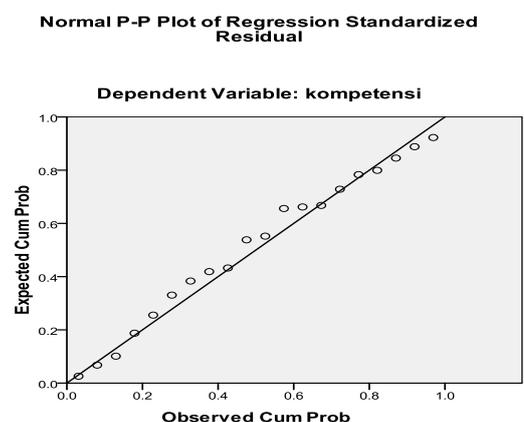
Coefficients <sup>a</sup>						
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	2.504	8.134		.308	.762
	Knowledge	-.063	.329	-.041	-.192	.850
	Skills	.318	.269	.247	1.180	.255
	attitudes	.589	.268	.488	2.198	.043

a. Dependent Variable: competency

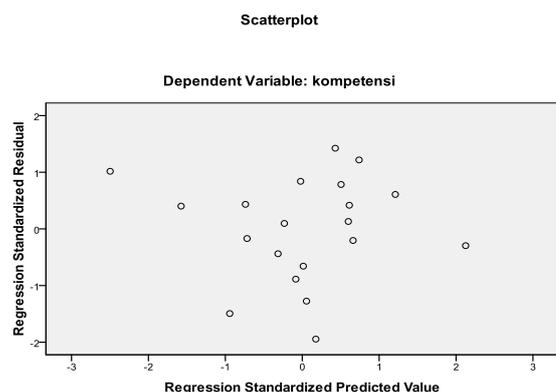
**Uji Normalitas**



**Uji Linearitas**



**Uji Heterokedastisitas**



## II. SUMMARY

Based on the research conducted from the three variables, the attitude variable that most influences the nurses' competency, this is also in line with the results of direct observation of researchers while conducting research in the inpatient ward of the RSUD Dr. H. Kumpulan Pane is seen by the attitude of nurses who are less responsive or responsive to patient complaints in the child's room. Where it was clearly seen when the family complained of pain in the infusion area to their children, the response from one of the nurses only gave an ordinary response and responded by giving a verbal word that it was not a problem and suggested to the mother that the child move her hand occasionally so it didn't feel stiff in his hand without seeing the condition of the area of pain that the child feels. Based on the above events it is clear that nurses do not show professional ethics as appropriate in carrying out services to patients.

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