

THE INFLUENCE OF KNOWLEDGE, WORK ENVIRONMENT AND HEAD OF ROOM SUPERVISION ON THE IMPLEMENTATION OF NUTRITION SCREENING THROUGH MOTIVATION AS AN INTERVENING VARIABLE AT MUHAMMADIYAH HOSPITAL BANDUNG

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Abstract

Nutritional screening is the initial stage in inpatient nutrition services which is very important to be carried out by nurses as health workers who first contact with patients and is a simple and quick process with the aim of identifying individuals who are at risk of nutritional problems, so that with good nutritional screening nurses can find out quickly if patients are at risk of nutritional problems to be given appropriate nutritional care. Knowledge, work environment and supervision of the head of the room are some of the factors that influence the implementation of nutritional screening and motivation as intervening variables. Objectives: The purpose of this study was to analyze the effect of knowledge, work environment and supervision of the head of the room on the implementation of nutritional screening by nurses through motivation as an intervening variable in Muhammadiyah Hospital Bandung partially and simultaneously. Method: The research method used is a quantitative method with the type of explanatory causality research. The population in this study is the entire inpatient nurse as many as 150 people. The sample method used was purposive sampling using G-Power application was 71 people. Data analysis method used is multiple linear regression analysis with SPSS software version 21. Result: The results showed that knowledge, work environment and supervision of the head of the room have a significant effect on the implementation of nutritional screening by nurses through motivation as an intervening variable in Muhammadiyah Hospital Bandung. Implication: high knowledge will have a good attitude in implementing nutritional screening with high motivation. Conclusion: knowledge, work environment, head of room supervision and motivation significantly affect the implementation of nutritional screening with a total contribution of 61%.

Keywords: Knowledge, Work Environment, Head of Nurse Supervision, Motivation, Implementation Of Nutritional Screening

1. INTRODUCTION

Nutrition screening is the initial stage in inpatient nutrition services which is very important to be carried out by nurses as health workers who have first contact with patients. Initial nutritional screening is defined as a simple and fast process with the aim of identifying individuals who are experiencing nutritional problems or who are at risk of nutritional problems, so that with good initial nutritional screening, nurses can quickly find out if patients are at risk of nutritional problems so they can immediately refer them to experts. Nutrition to provide proper nutritional care. If the results of the initial nutritional screening show that the patient is not at risk of nutritional problems, then a nutritional re-screening must be carried out on the 7th day of treatment. (Raymond & Morrow, 2021).

Accurate nutritional screening will result in accuracy in nutritional interventions so that it can prevent malnutrition in hospitals and speed up the healing process. Ideally, every patient is given a nutritional screening by a nurse upon entering the treatment room so that the patient's nutritional needs can be identified early. However, the reality in the field is that there are still many incomplete filling out nutritional screenings (Schenker, 2003).

At the Bandung Muhammadiyah Hospital in January - November 2023 the number of new patients reached 10,860 patients and only 3244 patients were screened for nutrition by nurses, so it only reached 29.87%. In the implementation of this nutritional screening, 70.13% of the time it was assisted by hospital nutritionists, this was not in accordance with standard operational procedures where nutritional screening should be carried out by nurses.

Efforts to minimize the incidence of nutritional problems in hospitals require hospital readiness starting from input to the process of good nutritional care, so as to produce optimal output. As an initial stage in identifying the risk of nutritional problems, human resources carrying out nutritional screening must be competent, supported by supporting infrastructure and hospital policy regulations in accordance with accreditation standards. This will indirectly prevent the occurrence of nutritional problems. Based on this phenomenon, researchers thought to examine the relationship between knowledge, work environment and Head of Room Supervision on initial nutritional screening and Nurse motivation as an intervention variable at the Muhammadiyah Hospital in Bandung. This study aims to identify the influence of knowledge, work environment, supervision of the Head of Nursing Room on nutritional screening and motivation as an intervening variable on the implementation of initial nutritional screening by nurses in an effort to identify the nutritional needs of patients appropriately so that the role of nurses in optimizing the fulfillment of the nutritional needs of patients being treated. in the hospital is an important part of the nursing function.

Based on the background that has been stated above, we need to know the influence of knowledge, work environment and supervision of the head of the room on the implementation of nutritional screening and nurse motivation as an intervening variable to find the cause of the lack of coverage of initial nutritional screening by nurses so as to increase the coverage of the number of patients at risk of nutritional problems who receive nutritional care, so researchers are interested in conducting research entitled "The Influence of Knowledge, Work Environment and Head of Room Supervision on the Implementation of Nutritional Screening by Nurses Through Motivation as an Intervening Variable at the Muhammadiyah Hospital in Bandung".

2. LITERATURE REVIEW

2.1 Implementation of Nutrition Screening

Krause and Mahan's(2021) stated that nutritional screening is a systematic process of identifying patients who are at risk of nutritional problems with the aim of determining whether the patient needs nutritional care or not. Krause stated that the nutritional screening process is carried out in 2 (two) stages, namely nutritional screening carried out by nurses in the nursing assessment process which is carried out within a maximum of 1 x 24 hours and further nutritional screening carried out by nutritionists as verification of the screening that has been carried out by nurses (Raymond & Morrow, 2021).

Screening tool nutrition very helpful in daily routine to detect potential or real nutritional problems in a timely manner. The tool must be easy to use, fast, economical, standardized and validated. Screening tools should be sensitive and specific, and if possible, predictors of the success of nutritional therapy. Nutritional screening should be part of an established clinical protocol that results in an action plan in the event of a positive screening result.

The MST (Malnutrition Screening Tools) screening measuring tool is the most effective instrument used to assess the risk of nutritional problems in patients, this is in accordance with the requirements stated by the Academy of Nutrition and Dietetics (2009) that screening instruments must be simple, fast and easy to use. by various health service providers by utilizing existing data (medical charts, patient reports, survey data), saving management costs and having some high reliability, namely producing the same screening results when provided by different users or producing the same screening results when given by the same user on different occasions. Apart from that, it has high validity, namely it has appropriate sensitivity and specificity. (Raymond & Morrow, 2021). Dimensions of implementing nutritional screening include weight loss, decreased appetite and statements about the patient's special condition.

2.2 Knowledge

Benjamin Bloom (1956), who is famous for Bloom's Taxonomy theory and revised by Anderson and Krathwohl (2001), states that knowledge is part of the cognitive aspect which is defined as a person's ability to recall or recognize names, terms, ideas, symptoms. , formulas and so on without expecting the ability to use them.

The following definition from the American Nurses Association (ANA) describes nurses' consistent commitment to providing care that promotes the well-being of their patients and communities (ANA, 2010a). Nursing is the protection, promotion, and optimization of health and abilities; prevention of disease and injury; alleviation of suffering through diagnosis and treatment of human response; and advocacy in the care of individuals, families, communities, and populations (ANA, 2010b) and education are also key roles of nursing. Both definitions support the excellence and importance of nursing in providing safe, patient-centered health care to the global community. Factors that influence knowledge are age, education, environment, intelligence, experience and information. According to Benjamin Bloom (1956), the dimensions of knowledge are remembering, understanding, applying, analyzing, evaluating and creating.

2.3 Work Environment

A positive work environment is a practice setting that can maximize the health and well-being of nurses, improve the quality of patient outcomes and organizational performance (RNAO 2006, in Baumann, 2007). A positive work environment indicates that employees remain leading to better teamwork, increased continuity of care and improved patient outcomes. Leaders have begun to realize that positive work environment changes result in employees remaining and having a high commitment to the organization. Some of the influences on the work environment are workload management, supervision of the head of the room and the atmosphere of the work environment and professional development.

2.4 Motivation

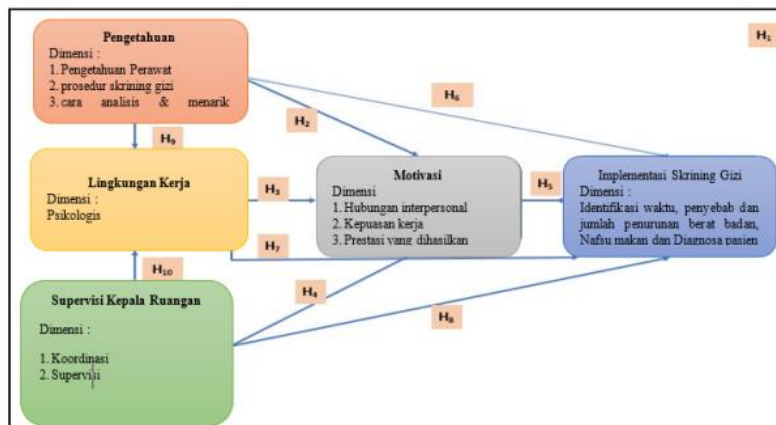
According to Gibson et al (2011) motivation is a concept that describes the forces within a person that initiate and direct behavior. Motivation is an explanatory concept used to understand the behavior we observe. This concept explains differences in the intensity of behavior and indicates the direction of behavior. Motivational factors consist of intrinsic factors, namely the driving force that arises from oneself and extrinsic factors, namely the driving force that comes from outside oneself. The dimensions of motivation according to Abraham Maslow in 1962 include physiological needs, security and safety, social, esteem and self-actualization.

3. RESEARCH METHOD

Quantitative descriptive research by analyzing causal relationships with path analysis aims to determine the influence of Knowledge (X1), Work Environment (X2) and Head of Room Supervision (X3) on the Implementation of Initial Nutrition Skiring by Nurses (Y) at the Muhammadiyah Hospital in Bandung through Motivation (Z) as an intervening variable. The research sample uses the G – Power application. The sampling technique was carried out by purposive sampling.

3.1 Conceptual Framework

The conceptual framework in this research consists of 5 variables, namely dependent variable Knowledge, Work Environment and Head of Room Supervision are the independent variables and Motivation as the intervening variable as shown below.



4. RESEARCH RESULT AND DISCUSSION

4.1 Respondent Characteristics

Based on the total number of respondents, 71 people were aged 31 - 40 years, 39 people (54.9%) were female, 60 people (84.5%), 46 people (64.8%) had the last education D III and status Permanent staffing is 65 people (91.5%) with 59 people (83.1%) working for more than 5 years.

4.2 Validation Test

The validation test uses the Pearson Product Moment method with an r-table value of 0.361.

4.3 Reliability Test

The reliability test in this research is Cronbach's Alpha and is said to be reliable if the value is greater than 0.6.

4.4 Normality Test

Test the normality of the data using the Kolmogorov-Smirnov test because the number of samples (n) > 50. As a basis for decision making, if the significance value (Asymp. Sig. (2-tailed)) > 0.05 then the data is normally distributed. From calculation results are obtained significant value (Asymp. Sig. (2-tailed)) is 0.685.

4.5 Heteroscedasticity Test

The significance value (sig.) between the independent variable and its residual absolute value each has a value greater than 0.05 (0.826; 0.592; 0.659 and 0.688). So it can be concluded that the data studied was homogeneous and no heteroscedasticity problems were found.

4.6 Multicollinearity Test

The multicollinearity test can be carried out by looking at the tolerance value and variance inflation factor (VIF), with the test criteria being a tolerance value > 0.1 and a Variance Inflation Factor (VIF) < 10 .

4.7 Univariate Analysis

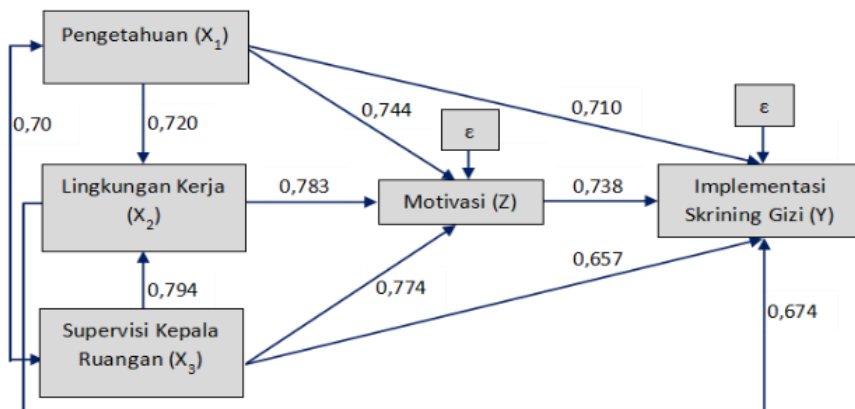
Three Box Method Analysis Matrix.

- The Knowledge variable has a medium category of 53.3% with good behavior.
- The work environment variable has a score of 53.8% with positive behavior.
- Head of room supervision variable with a score of 52.5 with consistent behavior
- Motivation variable with a score of 53% with high behavior
- Variable implementation of nutritional screening with a score of 45.6 with consistent behavior carried out.

4.8 Bivariate Analysis

Pearson Product Moment Correlation Test Results.

a. Flow Analysis and Effect Size



Correlation value (r) obtained between variables knowledge (X_1) with work environment (X_2) is 0.720. The value is 0.720 if according to the criteria it is in the category of a strong relationship in a positive direction.

b. T Test

- Knowledge has a significant effect on the motivation of nurses at the Muhammadiyah Hospital in Bandung (sig. 0.005 $<$ 0.05).
- The work environment has a significant effect on the motivation of nurses at the Muhammadiyah Hospital in Bandung (sig. 0.006 $<$ 0.05).
- Supervision of the head of the room has a significant effect on the motivation of nurses at the Muhammadiyah Hospital in Bandung (sig. 0.009 $<$ 0.05).
- Knowledge has a significant effect on the implementation of initial nutritional screening by nurses at the Muhammadiyah Hospital in Bandung (sig. 0.016 $<$ 0.05).

- 5) The work environment did not have a significant effect on the implementation of initial nutritional screening by nurses at the Muhammadiyah Hospital in Bandung (sig. 0.441 > 0.05).
- 6) Head of room supervision did not have a significant effect on the implementation of initial nutritional screening by nurses at Muhammadiyah Hospital Bandung (sig. 0.681 > 0.05).
- 7) Motivation has a significant effect on the implementation of initial nutritional screening by nurses at the Muhammadiyah Hospital in Bandung (sig. 0.011 < 0.05).
- 8) Knowledge has a significant effect on the work environment at the Muhammadiyah Hospital in Bandung (sig. 0.000 < 0.05).
- 9) Head of room supervision has a significant effect on the work environment at Muhammadiyah Hospital Bandung (sig. 0.000 < 0.05).

5. CONCLUSION, IMPLICATION, AND SUGGESTION

5.1 Conclusion

- a. Knowledge has a strong and significant effect on the work environment, where the better the knowledge, the better the work environment at the Muhammadiyah Hospital in Bandung, with a contribution of 51.9%.
- b. The supervision of the head of the room has a strong and significant effect on the work environment, where the better the supervision of the head of the room, the better the work environment at the Muhammadiyah Hospital in Bandung will be, with a contribution of 63.1%.
- c. Knowledge has a strong and significant effect on motivation, where the better the knowledge, the better the motivation of nurses at the Muhammadiyah Hospital in Bandung, with a contribution of 55.4%.
- d. The work environment has a strong and significant effect on motivation, where the better the work environment, the better the motivation of nurses at the Muhammadiyah Hospital in Bandung, with a contribution of 61.3%.
- e. Supervision of the head of the room has a strong and significant effect on motivation, where the better the supervision of the head of the room, the better the motivation of nurses at the Muhammadiyah Hospital in Bandung, with a contribution of 60.0%.
- f. Knowledge has a strong and significant effect on the implementation of nutritional screening, where the better the knowledge, the better the implementation of initial nutritional screening by nurses at the Muhammadiyah Hospital in Bandung, with a contribution of 50.4%.
- g. The work environment does not have a significant effect on the implementation of nutritional screening, with a contribution of 45.5%.
- h. Head of room supervision did not have a significant effect on the implementation of nutritional screening, with a contribution of 43.1%.
- i. Motivation has a strong and significant effect on the implementation of nutritional screening, where the better the motivation, the better the implementation of initial nutritional screening by nurses at the Muhammadiyah Hospital in Bandung, with a contribution of 54.5%.
- j. Knowledge, work environment and supervision of the head of the room have a significant influence on motivation at the Bandung Muhammadiyah Hospital, with a total contribution of 71.2%, while the remaining 28.8% is the influence or contribution of other variables not examined outside the research.
- k. Knowledge, work environment, supervision of the head of the room and motivation have a significant influence on the implementation of initial nutritional screening by nurses at the

Muhammadiyah Hospital in Bandung, with a total contribution of 61.0%, while the remaining 39.0% is the influence or contribution of other variables that are not researched outside research.

5.2 Implications

5.2.1 Theoretical Implications

With high knowledge, a person will have a good attitude so that motivation will be formed to carry out initial nutritional screening. However, in this study, the variables of high knowledge, good attitude and high motivation did not have a direct effect on increasing the implementation of initial nutritional screening by nurses because hospital management support had a greater influence on the implementation of initial nutritional screening. In this study, hospital management support showed a low category so that the nutritional screening implementation score also showed a low score.

5.2.2 Managerial Implications

Positive implications for the management of Muhammadiyah Hospital Bandung in developing strategies to increase coverage of nutritional care through the implementation of initial nutritional screening by nurses for inpatients. It is hoped that this implication will be able to achieve better and better quality nutrition services in particular and general health services at Muhammadiyah Hospital in Bandung.

5.3 Suggestions

5.3.1 For Hospitals

- a. Hospital Management through the Nursing Department in collaboration with the Education and Training Department created a comprehensive Human Resources Development System related to increasing the capabilities of nurses in understanding nutritional screening in particular and patient care in general;
- b. Hospital Management through the Service Department should form a Nutrition Care Team that involves all Professional Care Providers so that the service system can be well integrated with all types of services in accordance with the principles of Patient Center Care;
- c. management through the Human Resources Department and the Nursing Department should carry out a Staffing System Analysis so that it can be seen whether the placement of nurses in inpatient rooms is in accordance with standards or not;
- d. Management should take the initiative to implement a Reward System in providing services so that it will provide motivation to nurses in particular and all employees in general
- e. Management should develop a Hospital Information System (SIRS) in patient care including integrating the results of initial nursing assessments with all related Care Professionals in an effort to implement the concept of patient-focused service;
- f. Management through the Nursing Department should further improve coordination with the inpatient room, medical records department and nutrition department through the Hospital Information System in terms of monitoring evaluation of medical records and determining follow-up plans if problems are found in the initial nursing assessment.

5.3.1 For Other Researchers

- a. This research is still limited because it was only carried out on some nurses in the inpatient room at Muhammadiyah Hospital in Bandung, therefore the researcher suggests that further research can be carried out with a larger number of respondents;
- b. Further research can be expanded by conducting research related to the implementation of nutritional screening with other methods, namely screening for outpatients, hemodialysis patients and pediatric patients;

- c. It is necessary to consider double checking the data collection methods, apart from using questionnaires, it might be possible to add sampling interviews

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