

SUPERVISORS' MANAGERIAL COMPETENCIES IN FUNCTION OF MANAGEMENT IN IMPROVING THE PERFORMANCE OF IMPLEMENTER NURSES' IN IMPLEMENTING NURSING CARE

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ABSTRACT

The supervisors' managerial is in the level of operational manager, which is a strategic position because it can determine the success of nursing services provided, leading directly and controlling the care resources in realizing quality nursing services. This study used a quantitative design with correlation studies and a cross sectional approach. The objective of the study is to determine the relationship of charge nurse's competencies in function of management in improving the performance of implementer nurses in implementing nursing care. The number of samples was 132 implementer nurses in 10 inpatient wards. The process of Partial Least Square data analysis was used to test variables. The results shows a significant relationship between charge nurse's competencies and function of management which shows a strong relationship and positive pattern with r 0.429 ($p = 0.0005$) and the performance of implementer nurses with r 0.816 ($p = 0.0005$) and there was no significant relationship between functions of management and performance of implementer nurses. T-statistical test results shows a correlation of charge nurse's competencies and function of management $6.291 > 1.96$ (path coefficient 0.855), there is a relationship between charge nurse's competencies and performance of implementer nurses with value of $30.460 > 1.96$ (path coefficient 0.436). The researchers concluded that the charge nurse's competency variables, charge nurse's function of management were able to improve the performance of implementer nurses. Suggestions are competency variables need to be improved for the next research so that the assessment does not focus on implementer nurses or self assessment of supervisors' managerial with standardized instruments.

Keywords: Supervisors' Managerial Competencies, Function of Management, Performance of implementer nurses

INTRODUCTION

A hospital is a health service institution that carries out plenary health services that provide inpatient, outpatient, and emergency care services (Minister of Health regulations No. 147 of 2010 in Triwibowo (2013). Hospitals as the part of the order that provide health services are obliged to conduct many types of quality, and complex health services in Haryanti (2013).

According to Triwibowo (2013), nursing management describes a series of nursing services performed by nursing practitioners in presenting nursing care, by providing a sense of security to patients / families and society. Integrated arrangements from nursing resources by applying management procedures to achieve the target of nursing services is a management step in nursing (Hubberd, 2000) in Haryanti (2013).

Barometer of a hospital from public point of view is nursing services as one of services in the health care system, so the hospital is obliged to manage the quality of service, which ultimately requires the professionalism of implementer nurses and managers to regulate the activities in providing nursing care to patients. Research conducted by Sri Wahyuni (2007) states that managers with adequate abilities and skills will provide good input in producing quality health services, guided by standards.

Competence is the ability of someone to do a job appropriately and have perceived superiority in matters relating to knowledge, skills and attitudes (Edison et al. 2017). Inappropriate leadership competencies toward employees, can reduce motivation, performance and job satisfaction, because in a research conducted by Putu Widhi Sudariani (2016) states that leadership competency has an impact on performance ($t = 2.878 > 1.96$). Performance can have impact on three

things, namely psychological, organizational and individual factors.

Identification obtained at the time of the survey with a simple questionnaire to 12 supervisors' managerial to assess the effectiveness of leadership and management were data for the leadership effectiveness of supervisors' managerial by 83.4%. While the effectiveness of management from the monitoring function was only 65%. In the pilot study, this function of management was only assessed in terms of supervisors' managerial, to see (self-view) what good things of well identified leadership and function of management, both in terms of the process up to the evaluation, which ultimately would have affected the performance of employees, in this case were nurses, when performing nursing care.

According to PPNI (2012) Nurse Leadership Competency Standards are to advocate and act in making a positive work environment, able to manage conflict with the nursing management approach, have a role to lead the team so that it creates mutual respect and confidence, the task of being a priority and effective in managing time, have a share in the latest organizational policies and procedures, play an active role in evaluation and follow-up to organizations in work environment. While the leadership competency standard for midwives: contribute to create conducive atmosphere and master conflict management.

Kurniadi (2013) analyzes the responsibilities of supervisors' managerial: Quality management of services to be felt directly by patients, families and society as well as ensure the quality of nursing services and satisfy all parties so that the provision of professional nursing care is based on scientific principles and professional

ethics. The value of patients' perception quality of nursing care in Dr. Adjidarmo Hospital Lebak Regency in 2016 was 91%. Of the 14 wards that were evaluated, almost all wards with minimum service standard (MSS) were in the good category.

The existing phenomena have not shown how well nurses performance in

providing good nursing services to patients, because the evaluation result showed the patient's quality perception of nursing care was quite good, whether there was a relationship with leadership, in this case the supervisors' managerial competencies in implementing function of management so that the performance of implementer nurses was considered good

METHODS

This research is quantitative study research with correlation study to see whether or not there is a relationship between two or more variables, where the relationship is positive or negative, and how far the relationship between two or more variables can be measured. With a cross sectional design, the independent variables and dependent variable are assessed simultaneously at the time unit (Kelana 2017 & Nursalam, 2017). This research was conducted in the inpatient wards of dr. Adjidarmo Regional General Hospital Lebak Regency, in July 2018. The population in this study were nurses in 10 inpatient wards with a total of 196 nurses, and a total sample of 132 nurses. Sampling will be taken proportionally based on the distribution in each ward that

fits the inclusion criteria, namely nurses in the inpatient wards, willing to become respondents, not on leave/education, working more than one year and sign the informed consent as the research participants.

The study was described in the form of univariate, bivariate and multivariate analyzes. Univariate analysis of research results was presented in the form of frequency distribution tables, bivariate was performed to show the r value to the variables studied whether positive or negative and PLS (partial least square), with the assessment of indicators can be said to have good validity and reliability if the value of Loading factor > 0.5 and or the T-statistics value > 1.96.

RESULTS

Univariate Analysis

Respondent Characteristics

The highest gender distribution is female respondents by 75%, and male respondents by 33%. The age distribution of respondents is divided into three categories based on the analysis results of median by 31 years old. This category shows the age of respondents is 31-40 years at most by 64.4%. The distribution of the education level of the most respondents is diploma in Nursing by 84.8%, and Bachelor's degree + Ners by 15.2%. The highest distribution of marital status of respondents is 86.4% of

respondents who married, while the rest of 13.6% are not married. The highest distribution of employment status of respondents is 87.9% for Non ASN. The distribution of respondents' length of service is divided into three categories based on the analysis results of median by 7.5 year. This category shows the respondents' length of service for 6-10 years by 69.7%, > 11 years by 13.6%, while length of service for 3-5 years by 16.7%.

The Description of Research Variable

Table 1
Frequency Distribution of Supervisors' managerial Competencies, Function of Management, and Implementer Nurses Performance. (n = 132)

No	Variable	Mean	Std. Deviasi	n
1	Competencies			
	Knowledge	17.22	2.043	132
	Skill	36.03	4.384	132
	Attitude	17.62	2.088	132
2	Function of Management			
	Planning	15.83	2.845	132
	Organizing	27.32	3.628	132
	Staffing	14.70	3.221	132
	Monitoring	23.43	3.754	132
	Controlling	17.01	2.293	132
3	Performance			
	Assessment	25.37	2.933	132
	Nursing Diagnose	17.95	2.942	132
	Planning	14.45	2.054	132
	Implementation	29.08	3.086	132
	Evaluation	21.50	2.725	132

Based on table 5.2 it can be concluded that of the 132 implementer nurses the average or mean values from the highest to the lowest competency variables are skill of 36.03 and knowledge of 17.22, respectively, and the highest to the lowest function of management mean

values are organizing of 27.32 and planning of 15.83, respectively. For implementer nurses performance variables, the highest and lowest mean values are the implementation indicator of 29.08, and planning indicator of 14.45, respectively.

Bivariate Analysis

Table 2
Cross Tabulation of Supervisors' Managerial Competencies with Supervisors' Managerial Function of Management

Variable	n	Correlation Value	P value
Supervisors' managerial Competencies Function of Management	132	0.429	0.0005

Table 3 above explains that the relationship between the competency of the head of space and the management function shows a strong relationship and has a positive pattern, meaning that the better the competence of the head of

space, the better the management function. The results of statistical tests found that there was a significant relationship between the competence of the head of the room with the management function ($p = 0.0005$).

Table 3
Cross Tabulation of Supervisors' Managerial Competencies and Implementer Nurses Performance

Variable	n	Correlation Value	P value
Supervisors' managerial Competencies Nurses' Performance	132	0.816	0.0005

The table above explains that the relationship of supervisors' managerial competencies and implementer nurses performance in implementing nursing care shows a strong relationship and a positive pattern means that the better supervisors' managerial competencies, the

better the performance of nurses in implementing nursing care. The results of the statistical test found that there was a significant relationship between supervisors' managerial competencies and the performance of the nurses in implementing nursing care ($p = 0.0005$).

Table 4

Cross Tabulation of Supervisors' Manageria Function of Management and Implementer Nurses Performance

Variable	n	Correlatio n Value	P value
Function of Management			
Nurses' Performance	132	0.369	.0005

The table above explains the relationship between the supervisors' managerial function of management and nurses performance in implementing nursing care which shows a strong relationship and a positive pattern means that the better the implementation of supervisors' managerial function of

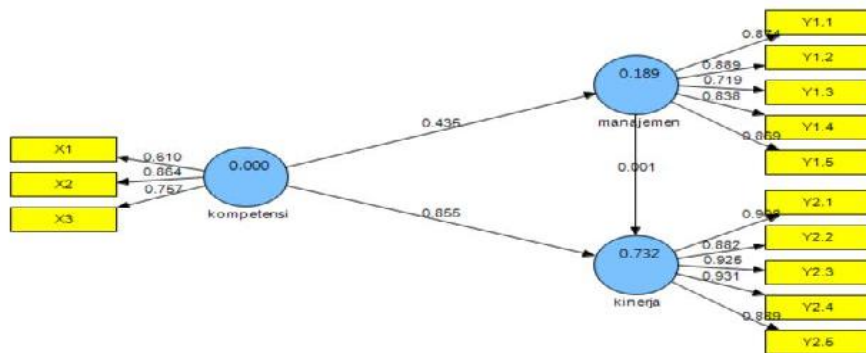
management, the better the performance of nurses in implementing nursing care. The results of the statistical test found that there was a significant relationship between supervisors' managerial competencies and the performance of nurses in implementing nursing care (p = 0.0005).

Inferential Analysis

Evaluation of Measurement Model (Outer model)

Figure 1. Outer model values of the relationship between supervisors' managerial competencies and function of management in improving nurses

performance in implementing nursing care in the inpatient rooms of dr. Adjidarmo Hospital Lebak Regency.



The indicator is said to have good validity if it has a Loading factor value > 0.5 and or a T-statistic value > 1.96. The highest loading factor values of an indicator indicates that the indicator is the

strong est measure of the latent variable. The results of the loading factor values and the T-statistics values are presented in the following table.

Tabel 5
Nilai loading factor indikator terhadap variable

Variable	Indicator	Loading Factor	T-Statistics
Supervisors' managerial Competencies	Knowledge	0.610	4.461
	Skill	0.864	9.075
	Attitude	0.757	10.505
Function of Management	Planning	0.874	6.784
	Organizing	0.889	10.445
	Staffing	0.719	6.544
	Actuating	0.837	8.245
	Controlling	0.869	8.832
	Assessment	0.908	33.233
Nurses' Performance	Diagnose	0.882	27.406
	Planning	0.924	31.595
	Implementin	0.931	33.727
	Evaluation	0.889	27.064

The table above shows that all indicators on the competencies of supervisors' managerial function of management and performance of nurses have values of loading factor > 0.5 and the values of t-statistics > 1.96 so that they are declared valid.

Hypothesis Test Results

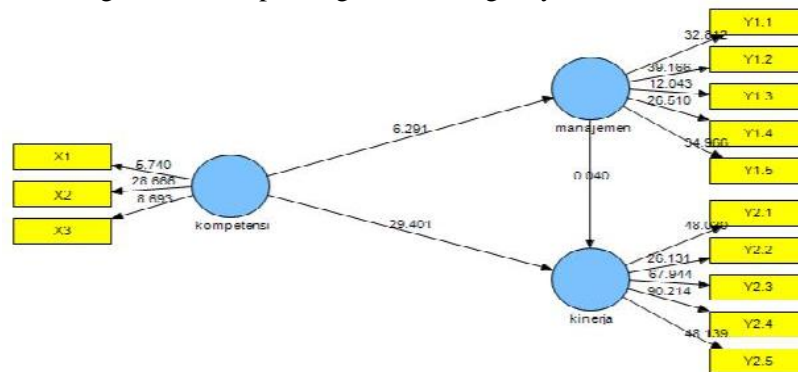
Table 6
Values of Constructs Reliability

Variable	Cronbach's Alpha	Composite Reliability
Supervisors' managerial Competencies	0.705	0.959
Function of Management	0.894	0.792
Nurses' Performance	0.946	0.923

The table above shows that the Cronbach's Alpha values and the Composite Reliability values on the the variables of supervisors' managerial competencies, the function of management and the performance of the implementer nurses are > 0.5 so they are stated to have high reliability.

Figure 2. The results of the hypothesis tests on the relationship between supervisors' managerial competencies and function of management in improving the

performance of the nurses in implementing nursing care in the inpatient rooms of dr. Adjidarmo Hospital Lebak Regency



The results of path coefficients and T-Statistics values are presented

comprehensively in the recapitulation table as follows:

Table 7

Recapitulation of the results of the hypothesis tests on the relationship between supervisors' managerial competencies and function of management in improving the performance of nurses in implementing nursing care in the inpatient rooms of dr. Adjidarmo Hospital Lebak Regency. (n = 132)

No	Hypothesis	Path Coefficient	T-Statistic	Description
1.	Relationship between Supervisors' managerial competencies and Function of management implementation	0.855	6.291	Significant
2.	Relationship between Supervisors' managerial and the performance implementer nurses	0.435	29.401	Significant
3.	Relationship between Supervisors' managerial function of management and the performance implementer nurses	0.001	0.040	Not Significant

DISCUSSIONS

The results of T-statistic tests obtaining a value of $6.291 > 1.91$ with the path coefficient value of $0.855 > 0.5$, which can be concluded that there is a relationship between supervisors' managerial competencies and function of management implementation in improving the performance of implementer nurses, strengthened by cross-testing or correlation between supervisors' managerial competencies and function of management that shows a strong and positive pattern meaning that the better supervisors' managerial competencies, the better the function of management. The results of statistical tests found that there was a significant relationship between supervisors' managerial competencies and function of management ($p = 0.0005$). Chase (2010) also measured the competence of nurse managers in 81 first-line manager respondents from 3 types of hospitals and found that supervisors' managerial competencies was instrumental in determining the extent to which nurses played a role in the organization of a hospital. This is also in accordance with the results of the research conducted, namely the results of statistical indicators shows that there is a significant influence on the leadership competencies of supervisors' managerial namely skills.

The modeling process with Partial Least Square (PLS) analysis obtaining the latent variable of supervisors' managerial competencies with three indicators that are capable affect significantly the latent variables, but the visible indicator of the most influential modeling is the skills of supervisors' managerial by 26,843 followed by attitude that able to affect supervisors' managerial competencies in carrying out function of management that are part of leadership.

This leadership attribute complements the managerial skills defined. Dr. Vickie Hughes, a professor at

the Appalachian State University, reviewed 10 national and international studies from 2002 to 2015 to identify the characteristics of great nurse leaders. This review emphasizes the importance of interpersonal relationships that promote trust and empowerment of team members. Expert knowledge and awareness of situational contexts can influence the ability of nurse leaders to mentor others, serve as role models, and communicate effectively to connect with and influence others (Hughes, 2017). The leadership characteristics described by Hughes (2017) include integrity, accessibility, motivating others, emotional abilities, and social intelligence. Integrity is exemplified by honesty, and actions that are consistent with beliefs and values. Leaders must be open and approachable with the ability to motivate others by supporting and empowering them. Emotional capacities require caring, empathy, awareness of others, and emotional intelligence. Emotional intelligence can be developed through team formation and executive coaching to improve social skills and manage behavior. This is the quality of great leaders who empower others to achieve positive organizational results, as leaders must demonstrate political insight, organizational clarity, and skills to influence others (Hughes, 2017). These leadership characteristics are reflected in three behaviors: mentors, role models, and effective communicators. As a mentor, a supervisors' managerial should be able to empowere others, and support professional growth. The role model leads by example and adapts its style to the context of the situation and setting. Effective communication is very important to build and maintain successful relationships and collaboration. As a leader, one also should demonstrate expert knowledge and skills in evidence-based education, critical and fast thinking skills, and the ability to adapt to various

situations (Hughes, 2017). As a manager and leader, one should be able to combine both qualities to create a healthy work environment that supports professional growth and self-development. Leadership and managerial skills enhance positive interpersonal empowerment and communication within departments and organizations. Roles as mentor for others, and mutual respect and trust will lead to joint decision making (Reilly et al., 2016). The leader's award is to guide leaders to innovative achievements that produce positive results for patients and organizations as well as personal and professional success, so that ultimately supervisors' managerial competencies can indeed help improve the performance of implementer nurses by implementing good function of management.

The results of the T-statistical test were value of $30.460 > 1.91$ with a path coefficient value of $0.436 > 0.5$, it can be concluded that there is a significant relationship between supervisors' managerial ' competencies and the improvement of nurses' performance, as well as the results of the correlation test it was obtained that the relationship between supervisors' managerial competencies and the performance of nurses in implementing nursing care had a strong and positive pattern meaning that the better the competencies of supervisors' managerial , the better the performance of nurses in implementing nursing care. The results of the statistical test found that there was a significant relationship between the competencies of supervisors' managerial with the performance of nurses in implementing nursing care ($p = 0.0005$).

The results of modeling using PLS competencies have high influence after the line was cut between supervisors' managerial function of management to the improvement the performance of implementer nurses in improving performance, Kewuan (2017)

states that the performance parameters are quantitative and qualitative variables that show the level of achievement of predetermined targets by a nurse in service, care, and nursing practice. Performance has 2 important elements, namely: elements means a person or organization with the ability to assess the level of performance. Creativity or productivity, the above competencies can be interpreted into appropriate actions in achieving performance results.

As agents of change, nurse leaders are reminded to stay focused, be introspective, connect with team members, and gain support for change. Nurse managers must drive performance at the highest level. Because of the impact of intrinsic and extrinsic motivation that drives people and teams, the expected and unexpected consequences can occur as a result of continuous development. The consequences for team dynamics, such as building trust and networks, must be considered in plans to create and maintain change, (Maragh KA, 2011) Leaders must demonstrate and communicate how change will contribute to improved performance.

Evaluation of nurse managers' skill competencies is important to be improved continuously, initial assessment by asking managers to assess their own level of knowledge and abilities. This can then be used to track progress or focus on areas identified as opportunities to improve the performance of nurses in providing nursing care, because according to (McGinnis & Donner, 1997) nurse managers play an important role in the effectiveness of care systems, so special competencies must be owned by supervisors' managerial "specific competencies that comprise the nurse manager role" (Carroll & Adams, 1994; Chase, 1994; Dreisbach, 1994; Duffield, 1992, 1994; Duffield et al., 1994).

In the first modeling, the relationship between the function of

management implementation and the performance of nurses with the T-statistic $0.040 < 1.96$, so it can be concluded that there is no relationship between the competencies of supervisors' managerial in improving the performance of nurses, while the correlation test results it was found that there was a strong and positive pattern of relationship between supervisors' managerial function of management and the performance of the nurses in implementing nursing care, meaning that the better the implementation of supervisors' managerial function of management, the better the performance of the nurses in implementing nursing care. The results of the statistical test found that there was a significant relationship between the competencies of supervisors' managerial and the performance of nurses in implementing nursing care ($p = 0.0005$). The results obtained by the researchers are reinforced by the research conducted by Kumajas (2016) with a cross-sectional approach, a type of quantitative research with 115 implementer nurses as samples, through the proportionate stratified

random sampling in 3 inpatient rooms, the results of the study mention that there is no relationship between supervisors' managerial function of management, namely planning, organizing, directing and supervising and the performance of implementer nurses. This is because both research were conducted on different places and respondents.

An important element is that supervision which means guiding and educating. With a predetermined solution can be implemented by reliable and efficient resources and can be increased in the implementation of activities. Supervision can control the behavior of implementer nurses. For example, an executive nurse who is praised or gives feedback because doing a good job will promise to repeat her/his action. Conversely, if you reprimand or punish the nurse for doing something that shouldn't be done, the nurse will not repeat the action. This positive actions must be nurtured and receive appropriate awards to improve the performance of the implementer nurses.

RESEARCH LIMITATION

This research found some difficulties, they are:

) Statement totaling 80 statements, causing respondents to take a long time to fill out questionnaires and cannot be waited by researchers for reasons of busyness in the nursing room so that the instrument can be taken home by the respondent and possible bias can occur. In addition, research instruments use a closed questionnaire where alternative answers are provided with subjective answers, so the truth of the data depends on the honesty, seriousness and sincerity of the respondents in filling out the questionnaire

) In this study the weaknesses were the research instrument in this question item in the form of a questionnaire made by the researcher himself and not a standard questionnaire, where all questions were made based on a literature review. Then the question / statement asked to the respondent for each variable is likely not to include in detail from all aspects relating to the variable. Researchers have tried to minimize this limitation by making questions / statements based on existing theoretical theories, so as to avoid bias before conducting research, researchers first test their validity and reliability.

CONCLUSIONS

The results of this study indicate:

-) There is a relationship between supervisors' managerial competencies and function of management in improving implementing nurse performance
-) There is a relationship between supervisors' managerial competencies and the performance of implementer nurses in implementing nursing care in the inpatient wards.
-) There is no relationship between supervisors' managerial function of management and the performance of implementer nurses in implementing nursing care in the inpatient wards.

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