

The Role of Coaching in Enhancing Completeness of Nursing Care Documentation

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Abstract

Background: This study was based on preliminary research indicating that the average completeness of nursing documentation in the inpatient unit was around 57.32%. **Objective:** The study aimed to examine coaching on mediating the knowledge and motivation on the completeness of nursing documentation. **Method:** The cross-sectional study was employed in this study. We recruited the 121 inpatient nurses from Sultan Sulaiman hospital. Data collection was performed using questionnaires, and the analysis methods employed were the three-box method and SEM-PLS. **Result:** The results show $F_{count} 150,320 > F_{table} 2,68$ indicated that knowledge, motivation, and coaching simultaneous influenced the completeness of nursing and result show path coefficient values 0,348 (positive) 0,195 (positive) and 0,417 (positive), which means that knowledge, motivation and coaching have an effect completeness of nursing care documentation individually. **Conclusion:** Furthermore, coaching acted as a mediator, enhancing the impact of knowledge and motivation on documentation completeness. **Recommendation:** Therefore, the hospital needed to focus on improving nurses' knowledge and motivation through effective and sustainable coaching programs to enhance the quality of nursing documentation

Keywords: knowledge, motivation, coaching, nursing care, nursing documentation



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INTRODUCTION

The documentation of nursing care is an integral and inseparable component of healthcare services, reflecting the responsibility and accountability of nurses (1). The documentation of nursing care serves as a written record of the nursing process provided to patients. This document is essential for healthcare teams, patients, and hospitals (2).

Proper documentation of nursing care serves not only as a medical record but also as a communication tool among healthcare professionals and evidence of accountability in nursing practice. Ineffective nursing care documentation practices have been reported to negatively impact patient outcomes and the efficiency of healthcare providers (3).

Nursing care documentation coaching is statistically associated with professional nursing documentation practices. Nurses who have undergone training are ten times more likely to document routine daily care activities compared to those who have not received such training (3). Coaching is a developmental process aimed at enhancing the skills, knowledge, and performance of individuals or groups through structured interactions and support provided by a coach. Previous studies have indicated a significant impact of coaching on the completeness of nursing care documentation (3-4).

Sultan Sulaiman Regional General Hospital, owned by the Government of Serdang Bedagai Regency, faces challenges regarding the completeness of nursing care documentation. Preliminary observations conducted on August 31, 2024, revealed several issues in inpatient nursing documentation for 2024. Specifically, it was found that 14 cases (46.7%) had incomplete initial assessments, 15 cases (50%) had incomplete nursing diagnoses, 11 cases (36.7%) had incomplete planning, 14 cases (46.7%) had incomplete implementation, and 10 cases (33.3%) had incomplete evaluations.

Interviews conducted with ten nurses at Sultan Sulaiman Regional Hospital revealed diverse formal educational backgrounds, with most respondents holding nursing diplomas. Although these nurses possess basic knowledge of nursing practices, many reported insufficient advanced training on the importance of comprehensive and accurate documentation. Nurse motivation for performing documentation also varied. Some expressed that they felt motivated to document thoroughly due to an understanding of its impact on the quality of patient care.

Preliminary survey results involving the ten nurses indicated that 60% felt they lacked adequate knowledge about the significance of nursing care documentation, and 70% did not fully understand the correct procedures for documentation. Regarding motivation, 60% were not motivated to document comprehensively, and 30% doubted that proper documentation could enhance patient care quality. Limited coaching emerged as another significant issue, with 70% of nurses reporting a lack of support or mentorship during the documentation process.

These findings underscore an urgent need to enhance nurses' knowledge and motivation while providing more robust support and coaching related to nursing care documentation. Notably, more than 60% of the surveyed nurses face challenges in knowledge, motivation, and coaching. Based on these observations, the objective of this study is to examine and analyze the role of coaching in improving the completeness of nursing care documentation. We hope this finding become the basic data for developing the contextual intervention about this issue.

OBJECTIVE

The study aimed to examine the association between coaching on mediating the knowledge and motivation on the completeness of nursing documentation.

METHOD

Design

This study is quantitative in nature with a cross-sectional study design. The research flow is depicted in the research constellation in Figure 1.

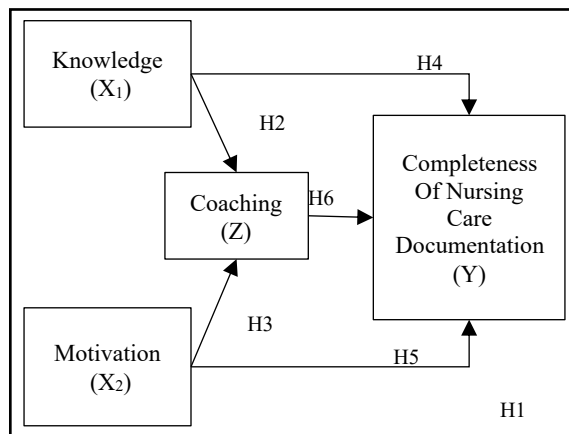


Figure 1. Research Constellation

Sample, sample size, & sampling technique

The population of this study consisted of 121 inpatient nurses at Sultan Sulaiman Regional General Hospital (RSUD). The sample was determined using a saturation sampling technique based on the calculation with power was 08%. The sampling method employed in this study was purposive sampling, where participants were selected based on specific criteria. The inclusion criteria for this study were: nurses assigned to the inpatient ward at Sultan Sulaiman Regional General Hospital and those willing to participate as respondents. The exclusion criteria included nurses who were on leave or assigned to external duties.

Data collection process

This study was carried out within 2 months of data collection. The research assistant helps the researcher to collect the data. All respondents who willing to participate in this study are required to sign the informed consent.

Data collection was conducted using a questionnaire as the primary data collection tool, with a Likert scale ranging from 4 to 1. The variable of Nursing Documentation Completeness was measured using six

dimensions, referring to the guidelines set by the Ministry of Health in 2005. The variable of Knowledge was measured using four dimensions, based on Anderson & Krathwohl's (5). The measurement of the Motivation variable is based on four dimensions according to Newstrom (6). The measurement of the coaching variable uses seven dimensions, referring to Wilson (7).

The results of the validity test indicate that all items for the variables of knowledge, motivation, and coaching have a calculated R-value greater than the table value of 0.361, demonstrating a strong relationship and good validity. The reliability analysis for the three variables—knowledge, motivation, and coaching—shows that the Cronbach's Alpha values exceed the critical threshold of 0.60, indicating that these variables can be considered reliable

Data analysis

The data in this study were analyzed using Structural Equation Modeling (SEM) with the Partial Least Squares (PLS) method through SmartPLS version 3.0. The hypothesis testing included simultaneous effect tests, direct effect tests, and indirect effect tests. To determine if the variable effects were significant simultaneously, the criterion for accepting or rejecting the hypothesis was that the alternative hypothesis (HA) is accepted and the null hypothesis (HO) is rejected when the calculated F-value (Fhitung) is greater than the table F-value (Ftabel).

For direct effects, the variable is considered significant when the alternative hypothesis (HA) is accepted and the null hypothesis (HO) is rejected when the p-value is less than 0.05. The indirect effect test was conducted using the Bootstrapping specific indirect effects method for significance level determination with the assistance of SmartPLS software. Hypothesis testing has a significant effect when the t-value is greater than 1.96 (at $\alpha = 5\%$), and conversely, when the p-value is less than 0.05, the mediating variable is found to

mediate the effect of the exogenous variable on the endogenous variable [8].

RESULT

Table 1 described the characteristic of respondents. The result found that most of

Demographics	Category	f	%
Gender	Male	7	5.8
	Female	114	94.2
Age	21-30 years	17	14.0
	31-40 years	61	50.4
	41-50 years	40	33.1
	Above 50 years	3	2.5
Education	D3	64	52.9
	Bachelor /Ners (Profession)	55	45.5
	Postgraduate	2	1.7

Model Fit Assessment

Table 2 presents the model fit parameters. The SRMR value of 0.065 meets the fit criteria as it is less than 0.1 or 0.08. The NFI value of 0.364

Model Fit		
SRMR	NFI	RMS theta
0.065	0.364	0.141

Hypothesis Testing

The simultaneous hypothesis testing in SmartPLS can be observed through the F-statistic value, calculated using the following formula:

$$F_{hit} = \frac{R^2(n - k - 1)}{(1 - R^2)k}$$

Table 3. Direct Effect and Indirect effect of dependent variable with dependent variables

Direct Effect	p-value
Association between nurses' knowledge with coaching	0.000
Association between nurses' motivation with coaching	0.001
Association between nurses' knowledge with the completeness of nursing care documentation.	0.005
Association between nurses' motivation with the completeness of nursing care documentation.	0.007
Association between coaching with the completeness of nursing care documentation.	0.000
Indirect Effect	TValue
Coaching mediates the effect of nurses' knowledge on the completeness of nursing care documentation	0.000
Coaching mediates the effect of nurses' motivation on the completeness of nursing care documentation	0.020

The critical F value is obtained from the table using the following formula:

$$F_{table} = F_{\alpha}(k, n - k - 1)$$

k : number of independent variables

R² : coefficient of determination

n : number of samples

The hypothesis test was conducted simultaneously with a 5% significance level, setting the critical value of 1.96 for the t-table. If the calculated F-value (Fhitung) is greater than the critical F-value (Ftabel), the hypothesis is accepted, whereas if the calculated F-value is less than the critical F-value, the hypothesis is rejected. The critical F-value (Ftabel) in this study is 2.68, obtained from the F table.

Based on the R-Square of the Completeness of Nursing Documentation, an R² value of 0.794 (79.4%) was obtained. With 3 independent variables (k) and a sample size of 121 (n) at a 5% significance level (α), the calculated F-value and the critical F-value are as follows:

$$\begin{aligned} F_{hit} &= \frac{R^2(n - k - 1)}{(1 - R^2)k} \\ &= \frac{0,794(121 - 3 - 1)}{(1 - 0.794)3} \\ &= \frac{92.898}{0.618} \\ &= 150.320 \end{aligned}$$

Based on the results from the above calculation, the obtained F-value of 150.320 is greater than the F-table value of 2.68, indicating that the variables of knowledge, motivation, and coaching have a significant simultaneous effect on the Completeness of Nursing Care Documentation, contributing 79.4%. Furthermore, the results of the direct and indirect effects can be observed in Table

Three-Box Method Index Analysis

Table 4 above presents the variable of the completeness of nursing care documentation, categorized as complete, indicating that the documentation has been properly recorded and meets the established standards. The coaching variable is categorized as mentoring, suggesting that the coaching process is effective in supporting the professional development of nurses. The knowledge variable is categorized as mastered, signifying that nurses possess a strong understanding of nursing practices. Lastly, the motivation variable is categorized as motivated, indicating that nurses are driven to perform their duties effectively.

Table 4. Three-Box method analysis matrix

Variables	Index			Behavior
	R	S	T	
Completeness of Nursing Care Documentation			√	Documented
Coaching			√	Empowering
Knowledge			√	Mastering
Motivation			√	Motivated

DISCUSSION

The Simultaneous Influence of Knowledge, Motivation, and Coaching on the Completeness of Nursing Care Documentation

The results of the F-test indicate that knowledge, motivation, and coaching collectively influence the completeness of nursing care documentation. This implies that the completeness of nursing care documentation can be improved if hospitals enhance nurses' knowledge, motivation, and coaching. Increasing nurses' knowledge of procedures and documentation standards will enable them to perform documentation tasks with greater competence and confidence. Meanwhile, high motivation will encourage nurses to be more committed and proactive in ensuring proper documentation.

On the other hand, effective coaching provides the necessary support and feedback to improve documentation practices, allowing nurses to overcome challenges they encounter. By combining these three aspects, hospitals can create a conducive environment that enables nurses to improve documentation completeness, which will, in turn, positively impact the quality of healthcare services provided.

These findings align with the theory that comprehensive documentation includes recording all relevant data, such as medical history, examination results, interventions, and evaluations. Documentation quality is considered complete when nurses record all healthcare services provided, and all formats are fully filled out. It is deemed accurate when nurses' notes consistently begin with the date and time and are in accordance with the patient's condition (2).

The results of this study are supported by previous research, which demonstrates that motivational factors have a strong influence on the completeness of nursing care documentation (3), and that knowledge affects the completeness of nursing care documentation (9-11). Coaching has shown beneficial effects on care process outcomes, including laboratory orders and vital signs. Coaching interventions impact various care activities, such as accurate documentation and the delivery of appropriate counseling (4), and training in the nursing process has been proven effective in influencing nursing process documentation (12).

The analysis using the Three-Box Method indicates that the average knowledge index falls into the high category, with the highest dimension being factual knowledge and the lowest being procedural knowledge. This suggests that respondents possess a good understanding of nursing terminology, key

elements in documentation, and the standards governing nursing documentation. However, there is a slight decline in understanding the steps of documentation and the use of documentation tools.

Furthermore, the average motivation index falls into the high category, with the highest dimension being responsibility and the lowest being achievement. This indicates that respondents feel responsible for ensuring complete nursing documentation and view this responsibility as an important aspect of nursing professionalism. However, there is a slight decrease in the sense of pride related to recognition from superiors.

Meanwhile, the average coaching index falls into the high category, with the highest dimension being awareness and the lowest dimensions being self-confidence and a no-blame culture. This shows that respondents feel supported by the coach in realizing the importance of accurate documentation. However, some respondents still feel a lack of self-confidence, and there is a culture of blame, suggesting room for improvement in respondents' self-confidence in documentation practices.

The influence of knowledge on coaching

The hypothesis testing results indicate that knowledge has an impact on coaching among nurses at Sultan Sulaiman Regional Public Hospital. This suggests that the application of coaching can become more effective if the hospital enhances the knowledge of its nurses. Improved knowledge provides a solid foundation for nurses to understand the concepts, techniques, and practice standards required in nursing care. When nurses possess adequate knowledge, they are better prepared to accept and implement feedback provided during coaching sessions. Additionally, good knowledge enables nurses to actively engage in discussions, ask relevant questions, and apply the solutions proposed by the coach. Therefore, increasing knowledge not only strengthens nurses' capabilities but also

fosters a more productive relationship between nurses and coaches.

These findings are consistent with knowledge theory, which asserts that knowledge is the outcome of a learning process that involves mastering various types of knowledge. In this context, good knowledge serves as a crucial foundation for nurses to practice effective and appropriate nursing care(5).

The findings of this study are supported by previous research that demonstrates a significant relationship between nurses' knowledge and the application of coaching techniques in improving the quality of care for children undergoing cardiac catheterization (13). Effective training has been shown to enhance nurses' abilities to communicate and educate patients, which, in turn, contributes to improved health outcomes (14). Additionally, tailored mentorship programs, including coaching elements, can enhance the confidence, problem-solving skills, and professional communication of newly graduated nurses(15).

Based on the Three-Box Method analysis, the evaluation of the knowledge dimension in nursing care revealed that the lowest scoring dimension was procedural knowledge, with the item "I can demonstrate the ability to use documentation aids" receiving the lowest score. A total of 15.7% of respondents answered "Strongly Disagree" (STS) or "Disagree" (TS) for this item, indicating that 15.7% of respondents were either unsure or disagreed with their ability to use documentation aids. This suggests that, although procedural knowledge is generally adequate, there is a need to enhance training or support in the use of documentation aids. Improvements in this area are critical, as the ability to use documentation aids effectively can contribute to the acceptance and application of feedback provided during coaching sessions.

The influence of motivation on coaching

The hypothesis test results indicate that motivation has a significant effect on coaching for nurses at Sultan Sulaiman Regional General

Hospital. This implies that the implementation of coaching can be more effective if the hospital enhances nurses' motivation.

Increased motivation encourages nurses to actively engage in the coaching process. When nurses feel motivated, they are more likely to be receptive to feedback and suggestions provided by the coach, as well as more committed to applying the knowledge and skills they have learned.

These findings are consistent with motivation theory, which suggests that motivated individuals are more likely to be committed to achieving desired outcomes. The three key elements of work motivation—direction and focus of behavior, level of effort exerted, and behavioral persistence—further support this conclusion (6).

The findings of this study are supported by previous research that demonstrated the motivation of nurses and midwives to engage in mentoring within hospitals in Uganda as a critical factor in the success of mentoring relationships (16), and that coaching is considered an effective tool to enhance individual motivation within a professional context (17).

Based on the Three-box Method analysis, the results of the assessment of the motivation dimension in nursing documentation revealed that the lowest-rated dimension was achievement. Within this dimension, the item with the lowest score was "I feel satisfied when I successfully complete the nursing documentation thoroughly." The total percentage of respondents who answered Strongly Disagree (SD) and Disagree (D) to this item was 15.7%, indicating that 15.7% of respondents felt dissatisfied with their achievements in completing the documentation. This dissatisfaction may reflect the challenges nurses face in completing documentation tasks comprehensively, potentially due to high workload, time constraints, or lack of support from the work environment. Improving this area is crucial to enhance nurse satisfaction and encourage greater commitment to effective documentation practices.

The influence of nurses' knowledge on the completeness of nursing care documentation

The hypothesis test results indicate that there is an effect of nurses' knowledge on the completeness of nursing documentation at Sultan Sulaiman Regional General Hospital. This implies that the completeness of nursing documentation can be improved if the hospital enhances nurses' knowledge in documenting nursing care. The improvement in knowledge is influential because a good understanding provides a strong foundation for nurses to comprehend procedures, standards, and the importance of accurate documentation. These findings are consistent with knowledge theory, which suggests that having a solid knowledge base enables nurses to identify essential information that must be recorded according to established standards (2).

The findings of this study are supported by previous research which demonstrates that nurses' knowledge has a significant influence on the completeness of nursing care documentation (18). A significant relationship exists between knowledge and good documentation practices (19), with nurses possessing better knowledge tending to document more comprehensively and knowledge improving the completeness of SOAP documentation(9).

Based on the Three-box Method analysis, the dimension with the lowest score is procedural knowledge, which, although still relatively high, is lower compared to other dimensions. One item reflecting the challenge within this dimension is the nurses' ability to utilize documentation tools effectively. Furthermore, the item addressing the steps involved in performing complete nursing documentation also highlights a significant challenge. Although nurses recognize the importance of documentation, there may be difficulties in explaining and implementing the necessary steps to ensure comprehensive documentation. This could be attributed to a lack of practical experience or inadequate training regarding the procedures for complete documentation.

The influence of nurse motivation on the completeness of nursing care documentation

The results of the hypothesis test indicate that there is an influence of nurses' motivation on the completeness of nursing care documentation at Sultan Sulaiman General Hospital. This suggests that the completeness of nursing care documentation can be improved if the hospital enhances nurses' motivation in documenting nursing care.

These findings align with motivational theory, which posits that motivation encompasses three key elements: the direction and focus of behavior, the level of effort exerted, and the persistence of behavior. In this context, nurses' motivation to perform documentation accurately and comprehensively can enhance the quality of healthcare services provided (6).

The findings of this study are supported by previous research that identified motivation as a significant factor influencing the completeness of nursing documentation (3), with motivation being shown to have an impact on the comprehensiveness of nursing care documentation (9-11).

Based on the Three-Box Method analysis, the dimension with the lowest score in the assessment is achievement, indicating room for improvement regarding nurses' satisfaction and accomplishments in nursing documentation. Although nurses exhibit high motivation, existing challenges need to be addressed so that they feel more satisfied and valued for their efforts. Enhancing management support, providing more consistent recognition, and reducing workload may contribute to improving the completeness of nursing documentation.

The influence of coaching on the completeness of nursing care documentation

The results of the hypothesis test indicate that coaching has an impact on the completeness of nursing care documentation by nurses at Sultan Sulaiman Regional General Hospital. This suggests that the completeness of nursing care documentation can be enhanced if the hospital increases its coaching program for nurses. These

findings align with the coaching theory, which emphasizes the importance of fostering a collaborative relationship between the coach and the nurse. In this context, coaching is not solely about providing advice, but also about creating an environment that supports reflection and learning (7).

The findings of this study are supported by previous research that found coaching to have a beneficial effect on care process outcomes, including laboratory orders and vital signs. Coaching interventions have influenced various aspects of care activities, such as accurate documentation and the delivery of appropriate counseling (4). Nursing documentation practices are statistically associated with training (3), and nursing process training has proven effective in influencing nursing process documentation (12). Based on the analysis using the Three-box Method, the lowest-scoring dimension of coaching is self-confidence and a blame-free culture, although both dimensions remain within the high category. However, despite the high levels of support indicated by the self-confidence and blame-free culture dimensions, further improvement in coaching strategies is needed to build nurses' self-confidence and foster a truly supportive culture free from fear of judgment. This could help nurses feel more prepared and comfortable in performing accurate and comprehensive documentation.

Coaching mediates the influence of nurses' knowledge on the completeness of nursing care documentation

The results of the hypothesis testing indicate that coaching mediates the effect of nurses' knowledge on the completeness of nursing documentation at Sultan Sulaiman Regional General Hospital. This suggests that the completeness of nursing documentation can be enhanced if the hospital improves nurses' knowledge, supported by an effective and sustainable coaching program for nurses.

These findings align with the theory that coaching is not merely about providing instructions, but about creating an environment

that fosters reflection and learning. In this context, when nurses possess knowledge about documentation practices, coaching can assist them in effectively applying that knowledge (20-21).

The results of this study are supported by previous research findings, which indicate a significant relationship between nurses' knowledge and the application of coaching techniques (13). Effective training can enhance nurses' communication and patient education skills, which in turn contributes to improved health outcomes (14). Additionally, tailored mentorship programs, including coaching aspects, can increase the confidence, problem-solving abilities, and professional communication of new nurses (15).

Based on the Three-box Method analysis, the dimension with the lowest score is procedural knowledge within the knowledge category, and self-confidence and a no-blame culture within the coaching category. The low scores in these two dimensions highlight the need for further improvement in the training and support provided to nurses. By strengthening practical understanding and skills in documentation, boosting self-confidence, and fostering a truly supportive, no-blame culture, it is expected that nurses will be more effective in carrying out documentation tasks, which will, in turn, contribute to the enhancement of the quality of care provided to patients.

Coaching mediates the influence of nurse motivation on the completeness of nursing care documentation

The hypothesis test results indicate that coaching mediates the effect of nurses' motivation on the completeness of nursing documentation at Sultan Sulaiman Regional General Hospital. This suggests that the completeness of nursing documentation can be enhanced if the hospital increases nurses' motivation, supported by an effective and sustainable coaching program for nurses.

These findings align with theories stating that motivation is a factor that can stimulate and

direct individual behavior in the workplace. In the context of nursing, nurses who are motivated to provide quality care are more likely to be committed to documenting all aspects of patient care (22).

The results of this study align with previous research findings that demonstrate intrinsic motivation, such as the desire to reciprocate for prior mentoring experiences, as well as a genuine concern for patients and the community, which drive professionals to actively engage in mentoring (16). Additionally, the intrinsic motivation of the coachee can be enhanced through support and constructive feedback from the coach (17).

Based on the Three-box Method analysis, the dimensions with the lowest scores are self-confidence and a culture of non-blame in the coaching category, and achievement in the motivation category. The low scores in these three dimensions indicate the need for further improvement in the training and support provided to nurses. Strengthening self-confidence, fostering a supportive culture, and offering more recognition for achievements are expected to help nurses perform documentation tasks more effectively.

CONCLUSION

Coaching plays a significant role in improving the completeness of nursing care documentation by nurses at Sultan Sulaiman General Hospital. An effective coaching program not only directly contributes to enhancing documentation completeness but also acts as a mediator that strengthens the influence of nurses' knowledge and motivation on the quality of nursing care documentation. Therefore, the implementation of sustainable and structured coaching becomes a crucial strategy for hospitals to enhance nurses' competencies, motivation, and work accuracy, ultimately achieving the optimal goal of improving documentation completeness.

Theoretical Implications

The results of the hypothesis testing indicate a significant effect of nurses' knowledge

on the completeness of nursing documentation at Sultan Sulaiman General Hospital. This finding is consistent with knowledge theory, which emphasizes that adequate knowledge enables nurses to identify essential information that should be recorded according to established standards [2]. The hypothesis results also show a significant effect of nurses' motivation on the completeness of nursing documentation at Sultan Sulaiman General Hospital.

This finding aligns with motivation theory, which states that motivation involves three key elements: the direction and focus of behavior, the level of effort exerted, and the persistence of behavior [6]. Furthermore, the hypothesis results demonstrate a positive effect of coaching on the completeness of nursing documentation at Sultan Sulaiman General Hospital. This understanding is in accordance with coaching theory, which highlights the importance of fostering a collaborative relationship between the coach and the nurse [7].

Managerial Implications

The research conducted at Sultan Sulaiman General Hospital indicates that improvements in the system are needed to enhance the completeness of nursing care documentation. The low procedural knowledge dimension highlights the need for training and continuous education programs on procedures and documentation standards. The low motivation in the achievement aspect calls for the development of a human resource management system that provides both formal and informal recognition of nurses' achievements, including incentives such as rewards and career development paths. Furthermore, the low self-confidence and the culture of blame-free coaching require strengthening the employee development system through continuous coaching programs that support improvements in documentation quality.

RECOMMENDATION

Based on the findings of this study, it is recommended to enhance nurses' knowledge

through practical training, particularly in the use of documentation tools, as well as to strengthen motivation through structured incentives such as certificates and rewards. Coaching and mentoring programs should be reinforced with direct guidance and a work culture that supports self-confidence. The provision of documentation templates aligned with guidelines will also aid in improving the completeness of nursing assessments. For future research, it is suggested to employ experimental or quasi-experimental designs, develop context-specific motivation questionnaires, and conduct bivariate analyses to understand the variables affecting documentation completeness. Qualitative approaches, such as in-depth interviews, are also recommended to explore the challenges faced by nurses in a more comprehensive manner.

References

- (1) Alhawri FHA, Rampal KG, Abdulla AMH. Knowledge, Attitude, Performance and Associated Factors Towards Nursing Documentation Among Nurses in Public Hospitals, Sana'a City, Yemen. *Int J Innov Sci Res Technol.* 2021;6(3):573-8.
- (2) Potter PA, Perry AG, Stockert PA, Hall A. *Fundamentals of nursing.* United States of America: Elsevier Mosby; 2013.
- (3) Hardido TG, Kedida BD, Kigongo E. Nursing Documentation Practices and Related Factors in Patient Care in Ethiopia: A Systematic Review and Meta-Analysis. *Adv Med.* 2023;2023:1-8. doi:10.1155/2023/5565226.
- (4) Ballengee LA, Ford CD, Moss MA, Shah A, Harlan WR, Whitson HE, et al. Effectiveness of Quality Improvement Coaching on Process Outcomes in Health Care Settings: A Systematic Review. *J Gen Intern Med.* 2022;37(4):885-99. doi:10.1007/s11606-021-07217-2.
- (5) Anderson LW, Krathwohl DR. A taxonomy for learning, teaching and assessing: a revision of Bloom's taxonomy of

- educational objectives. New York: Longman; 2001.
- (6) Newstrom J. *Organizational behavior: human behavior at work*. New York: McGraw-Hill Education; 2006.
 - (7) Wilson C. *Best practice in performance coaching: a handbook for leaders, coaches, HR professionals and organizations*. London and Philadelphia: Kogan Page Limited; 2007. doi:10.4324/9781003155928-3.
 - (8) Hair JF, Hult GTM, Ringle CM, Sarstedt M. *A primer on partial least squares structural equation modeling (PLS-SEM)*. California: Thousand Oaks: SAGE Publications; 2017.
 - (9) Elida D, Tarigan E, Supardi S. The effect of increasing knowledge and motivation of nurses on completeness of SOAP documentation during handover at X Hospital, Bogor District. *Ascarya J Islam Sci Cult Soc Stud*. 2023;3(1):82-90. doi:10.53754/iscs.v3i1.628.
 - (10) Monalisa I, Hilmy MR, Anindita R. The role of nurse motivation, competence and workload for increasing completeness of nursing process documentation at class B private hospital in Jakarta. *Int J Nurs Health Serv (IJNHS)*. 2023;6(3):178-83. doi:10.35654/ijnhs.v6i3.723.
 - (11) Sultan, Rauf A, Haruna A, Iskandar, Rahman A, et al. The influence of knowledge, compensation for documentation upbringing treatment through motivation nurse in Mamuju regional general hospital. *Proc Int Conf Ind Eng Oper Manag*. 2021;(August):3074-82. doi:10.46254/sa02.20210854.
 - (12) Harmini H, Supratman S, Yulian V. Nursing process training to improve the quality of nursing care documentation. *INTEREST J Ilmu Kesehatan*. 2024;13(1):10-18.
 - (13) Elmwafie S, Abdelaziz F, Tork H. Coaching program effect on nurses' knowledge and practice regarding caring child undergoing cardiac catheterization. *Assiut Sci Nurs J*. 2022;10(32):87-99. doi:10.21608/asnj.2022.160456.1427.
 - (14) Sato A, Harada N, Suzukamo Y, Tonomura I, Izumi SI. How coaching training transforms nurses' behaviour: The effectiveness of coaching training according to objective measures. *Nurs Open*. 2023;10(7):4490-503. doi:10.1002/nop2.1691.
 - (15) Gualarte-Rinaldo J. Mentorship ReSPeCT Study: A nurse mentorship program's impact on transition to practice and decision to remain in nursing for newly graduated nurses. *Nurse Lead*. 2023;21(1):1-9.
 - (16) Kakyo TA, Xiao LD, Chamberlain D. The role of motivation in the initiation and maintaining mentoring relationships among nurses and midwives. *Int Nurs Rev*. 2024;(April). doi:10.1111/inr.12977.
 - (17) Parsons M. How have nurses found coaching training useful in their role as line managers, and what were their perceived barriers to implementing their training? *Int J Evid Based Coach Mentor*. 2023;(Special Issue 17):135-47. doi:10.24384/sppk-7z10.
 - (18) Utami PL, Melia JY. The relationship between level of knowledge, attitude, and workload of nurses with completeness of nursing care documentation. *Appl Nurs Res Innov (ANRI)*. 2024;1(1):1-5.
 - (19) Tasew H, Mariye T, Teklay G. Nursing documentation practice and associated factors among nurses in public hospitals, Tigray, Ethiopia. *BMC Res Notes*. 2019;12(1):1-6. doi:10.1186/s13104-019-4661-x.
 - (20) Starr J. *The coaching manual: the definitive guide to the process, principles and skills of personal coaching*. London: Financial Times Management; 2003. doi:10.53841/bpstcp.2016.12.1.41.
 - (21) Clutterbuck D. *Coaching the team at work*. UK: Intercultural Press UK; 2007.
 - (22) Sanders MS, McCormick EJ. *Human factors in engineering and design*. New York: McGraw-Hill; 1993

