

Article

# Identification of the Application of Midwifery Care Documentation by Midwives in RSUD Pulang Pisau

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**Abstract:** Midwifery documentation is important because it serves as legal evidence in health care, helping to enforce accountability and liability related to patient care. It also serves as a source of information about the patient's health status and an instrument of protection for patients and midwives. The use of standardized documentation methods such as SOAP has significant benefits in organizing midwives' thought processes, but there are still midwives who have not adopted it. Further efforts are needed to improve understanding and application of documentation standards in midwifery practice. Identifying Integrated Patient Progress Notes by Midwives at Pulang Pisau Regional Hospital in 2023. This study used a descriptive method that describes integrated patient development records by midwives at Pulang Pisau Regional Hospital. The samples in this study were 45 midwives who were in the delivery room, postpartum room and obstetric clinic room. Based on research from 45 midwives, the majority were 21-40 years old, 14 midwives (31.1%) had DIV Midwifery and S1 Midwifery education, 32 midwives (71.1%) had a working period of 6-10 years. 27 respondents (60%) of the completeness of integrated patient progress notes by midwives in the delivery room, postpartum room and obstetric clinic room of Pulang Pisau Hospital were incomplete, and as many as 18 respondents (40%) with complete progress notes. The majority of integrated patient progress notes made by midwives in the labor and delivery room, postpartum room, and obstetric clinic room of Pulang Pisau Regional Hospital were incomplete, with only a small proportion being complete. This suggests the need for improvement in the documentation process and integration of patient progress notes by midwives at RSUD Pulang Pisau.

**Keywords:** Midwife, Documentation.

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## 1. Introduction

Documentation is an authentic record or original document that can be used as evidence in legal matters. Midwifery documentation is very important for midwives in providing midwifery care, because midwifery care provided to patients requires recording and reporting which can be used as a reference to claim responsibility and accountability for various problems that may be experienced by patients related to the services provided. [1]

Documentation can help midwives maintain basic information in writing that is needed in the practice environment, but accurate documentation in the health care environment must be related to the concept of evidence-based, objective and impartial practice. [2]

Research that has been conducted by [3] in independent midwife practices on the relationship between midwife education and the application of midwifery care

documentation in independent practice midwives found that the application of midwifery care documentation is a series of activities carried out by midwives, related to recording and storing complete and correct information with good parameters ( $\geq 65\%$ ) and less good ( $\leq 65\%$ ).

One of the note formats that can be used as midwifery documentation is the SOAP note format (subject, object, data analysis and management) which is contained in KepMenKes 938 concerning midwifery care standards, in standard VI of 2019. SOAP notes are the most common documentation method used by healthcare providers, including midwives, to enter notes into a patient's medical record. It allows health providers to record and share information in a universal, systematic and easy-to-read format. [4]

The use of SOAP notes provides many benefits in its implementation, one of which is that it can help midwives to organize the thought processes involved in patient care, by thinking in an organized manner, midwives can better make decisions about patient care, but in practice there are still midwives who have not used SOAP as a documentation method. [5]

## 2. Materials and Methods

This study used descriptive method that describes the integrated patient development records by midwives in RSUD Pulang Pisau. The samples in this study were 45 midwives who were in the delivery room, postpartum room and obstetric clinic room.

The data collection instrument used in this study was a checklist, a checklist is a systematic recording of the phenomena being investigated. The checklist conducted in this study records the age, education and integrated patient development records for November-December 2023 by midwives in the delivery room, postpartum room and obstetric clinic room of Pulang Pisau Hospital in January 2024.

## 3. Results

**Table 1.** Characteristics of midwives based on age

Age	Frequency	Percentage
21-40 years old	35	77,8
41-60 years old	10	22,2
Total	45	100

**Table 2.** Characteristics of midwives based on education

Education	Frequency	Percentage
DIII Midwifery	15	33,3
DIV Midwifery	14	31,1
S1 Midwifery	14	31,1
Midwife profession	2	4,4
Total	45	100

**Table 3.** Characteristics of midwives based on length of service

Length of Service	Frequency	Percentage
<6 years	10	22,2
6-10 years	32	71,1
>10 years	3	6,7
Total	45	100

**Table 4.** characteristics of midwives based on integrated patient development records

Patient Progress Notes	Frequency	Percentage
Complete	18	40%
Incomplete	27	60%
Total	45	100

#### 4. Discussion

Integrated patient progress notes were measured using a checklist with a total of 45 midwives on duty at RSUD Pulang Pisau. the majority of midwives at RSUD Pulang Pisau were in the age range of 21-40 years, as many as 35 people (77.8%), while 10 people (22.2%) were between 41-60 years old. This indicates that the majority of midwives involved in the identification of integrated patient development records are relatively young or fall into the early adulthood category.

Being predominantly in the early adulthood age range may have certain implications related to the understanding and acceptance of new technology or systems, including the use of integrated patient progress notes. According to research [6] states that with increasing age, a person's ability to think and work will mature. The process of mental development tends to increase with age, although it may not be as fast as in adolescence. Nonetheless, at a certain stage, mental growth is not as fast as when a person is a teenager. Memory ability can also be influenced by age, where in general as one gets older, the knowledge one acquires can increase. However, as one gets older, the ability to receive or recall information may decline.

According to research [7] in Bantul Regency, it was found that the documentation methods carried out by midwives were still diverse, such as using Varney, SOAP and also narration. In addition, the results of this study also provide results that the documentation of midwifery care is influenced by age ( $p$  value 0.24). Although not directly related to patient progress notes, the age of the midwife can also affect work patterns and fatigue levels. Younger midwives may have higher energy and endurance to actively follow changes in technology or new systems, while older midwives may face challenges in terms of adaptation and change.

Midwives in the delivery room, postpartum room, and obstetric clinic of RSUD Pulang Pisau have various educational backgrounds, but most midwives have a DIV Midwifery and S1 Midwifery graduate education, indicating that they have a more in-depth knowledge of midwifery practice as a whole.

Midwives' education plays a crucial role in determining the quality of maternal health services provided. Midwives with DIV Midwifery and S1 Midwifery educational backgrounds tend to have more in-depth knowledge and broader skills in caring for pregnant and birthing women. They may also have more access to resources and opportunities for professional development, such as advanced training or certification programs. In addition, midwives with higher education may have a better understanding

of the importance of complete and accurate medical records in providing quality healthcare. They may also have better skills and knowledge in compiling integrated medical records.

According to research [8] The higher a person's level of education, the more qualified he is, where the higher a person's education, the easier it is to adapt to new things, but it does not rule out the possibility that low education has good knowledge. DIV and S1 educational backgrounds have the highest rates based on the results of the analysis that has been done, but the results obtained in cppt documentation are still found incomplete cppt, midwifery documentation is very important for midwives in providing midwifery care.

According to the law, if something is documented, it means that the responsible party did not do what should have been done. If a midwife does not perform or complete an activity or documents incorrectly, she can be charged with malpractice. Midwifery documentation must be legally trustworthy.

Based on Kepmenkes 938 concerning midwifery care standards, standard VI explains that midwives make complete, accurate, concise and clear records of the circumstances or events found and carried out in providing midwifery care and records are written in the form of SOAP development notes. However, in practice there are still many midwives who do not document midwifery care carried out using the SOAP method. According to the assumptions of researchers, the majority of midwives with DIII education, totaling 15 people, should be the main factor in the implementation of SOAP documentation, this is in line with the competencies possessed by someone who graduates from midwifery intermediate experts, namely having abilities that include knowledge, skills and attitudes in providing midwifery services and have also been equipped with midwifery care management knowledge, one of which is an integrated patient development record using the SOAP method. While midwives who graduated from the midwifery profession amounted to 2 people with complete developmental notes, indicating that higher education is often associated with a better understanding of the processes and practices in a particular profession.

Midwives in the maternity ward, postpartum ward, and obstetric ward of RSUD Pulang Pisau had a working period of between 6 to 10 years, which accounted for the majority of the total respondents (71.1%). This suggests that many midwives have had a considerable amount of work experience in these environments. This long tenure can bring benefits in terms of clinical experience, practical expertise, and a better understanding of the dynamics of working in a hospital. (22.2%) had less than 6 years of service, while only a few had worked for more than 10 years (6.7%). This may reflect the influx of new midwives into the profession, as well as the challenges of retaining experienced staff over the long term. Factors such as career opportunities, working conditions, and support from the institution may influence medical staff retention. In addition, midwives with longer tenure tend to have higher levels of confidence, the ability to cope with complex situations, and better relationships with patients and coworkers.

Other research states that the more experience a person has, the more knowledge he has, because experience is the best teacher and teaches us about what we have done, be it a bad experience, so that we can reap the results of the experience. A lot of work experience, making midwives more knowledgeable about aspects related to midwifery documentation, this can be caused by senior midwives still lacking interest in increasing their knowledge by attending seminars and training training. [1]

Midwives at RSUD Pulang Pisau face challenges in terms of the completeness of integrated patient progress notes in the delivery room, postpartum room, and obstetric clinic room. Of the total respondents, 60% reported that patient progress notes were incomplete, while only 40% reported patient progress notes as complete. This suggests a need to improve the process of compiling and maintaining medical records to ensure completeness and consistency of recorded information.

Seeing the number of aspects that were not documented by the implementing midwife, this shows that the documentation of midwifery care written by the implementing midwife in the midwifery room of Pulang Pisau Hospital has not fulfilled the applicable provisions or has not met the expected standards. According to the standards of midwifery care documentation, it contains Subjetif, Objective, Data Analysis and Management (SOAP), while the existing documentation standards in Pulang Pisau Hospital also contain SOAP.

## 5. Conclusion

It can be concluded that the characteristics of midwives, it can be seen that there is a correlation between the individual characteristics of midwives, such as age with increasing age, a person's ability to think and work will be more mature. The process of mental development tends to increase with age, although it may not be as fast as in adolescence, but towards a later age, the ability to receive or remember information may decrease so that based on the results of the study, it was found that complete cppt based on age was in the age range of 21 - 40 years, while the results of cppt based on education found that midwives with DIII education, totaling 15 people, should be the main factor in the implementation of SOAP documentation.

The cause of the incompleteness of midwifery care documentation is the factor of the characteristics of midwives working at Rumah Pisau Hospital, especially in the obstetrics room, this can be seen from the results of CPPT found 60% that the patient's progress notes are incomplete, while only 40% have complete patient progress notes. The completeness of cppt can be seen from the results of SOAP assessment starting from assessment or activities for data or information about clients obtained from observations, interviews, consultations and examinations in order to identify recognize problems, recognize health needs and midwifery care both physically, socially and spiritually. besides that cppt also contains how to prioritize problems, intervene or management or action, namely management and realization of plans that have been prepared at the planning stage, as well as evaluation, namely notes on indications of client progress towards goals to be achieved. (Pitriani & Andriyani, 2021).

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