

Analysis of the Role of the Chief of Nursing for Supervision in the Implementation of Nursing Care in HoREX Baucau

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Abstract

Introduction: Nursing supervision is a managerial function that plays a crucial role in ensuring the quality of healthcare services in hospitals. The Head of Nursing holds strategic responsibility to direct, guide, and evaluate the implementation of nursing care so it aligns with professional standards and patient needs. **Objective:** This study aimed to analyze the role of the Head of Nursing in supervising the implementation of nursing care at Horex Baucau Regional Hospital. **Method:** A quantitative method with a descriptive correlational design and cross-sectional approach. The population consisted of the head of nursing and team leaders in inpatient and outpatient units, with a sample of 32 nurses and technicians. Sampling used a nonprobability total sampling technique. Data were collected through questionnaires and analyzed using the Spearman rho test. **Result and Discussion:** The results showed a significant relationship between the role of the Head of Nursing and the implementation of nursing care, with a significance value of 0.000 ($p < 0.05$) and a correlation coefficient of 0.627. This shows that the better the implementation of supervision, the better the implementation of nursing care by nurses. **Conclusion:** In conclusion, the managerial supervision function of the Head of Nursing is essential to ensure effective nursing care and improve service quality in hospitals.

Introduction

The quality of healthcare services is a multidimensional aspect encompassing physical, mental, social, and spiritual well-being. Hospitals, as healthcare institutions, are responsible for providing safe, effective, and patient-centered services in accordance with professional and ethical standards. Nurses constitute the largest proportion of healthcare workers in hospitals, accounting for approximately 55–65% of all healthcare workers, and are tasked with providing 24-hour nursing care (Purnomo et al., 2024). This dominant role places nurses at the forefront of ensuring patient safety, but it also poses risks to service quality due to the high workload and complexity of their duties (Alin et al., 2024).

Nursing care is a key component of the hospital healthcare system because nurses are the healthcare workers who interact most directly with patients. The quality of nursing care is a crucial determinant of healthcare quality and patient satisfaction (Silalahi & Bunga, 2025). According to the World Health Organization (2020), supervision is a crucial strategy for improving service quality, particularly nursing care. However, supervision in various healthcare facilities is often hampered by suboptimal nurse performance, which ultimately results in complaints from patients, families, and other healthcare workers (Oktariani et al., 2020).

International research indicates that supervision implementation is not yet optimal. A study of 99 nurses in Kenya and Benin found that 50% of respondents viewed supervision primarily as a control and criticism activity, while nursing unit heads did not provide feedback on issues that arose during supervision. Research in Zambia reported that 50% of nurses never received supervision from unit heads, while in Mali, 38% of nurses stated they had never been supervised, and 81% never received support or motivation from their supervisors (Ardiyanti & Anisah, 2023).

Numerous studies have shown that systematic clinical supervision is positively correlated with improvements in the quality of care, nurse performance, completeness of documentation, and adherence to standards (Kountul & Walewangko, 2023). Research by (Tumanggor et al., 2023) showed that nurses' level of independence in documentation increased from 34.2% to 92.1% after supervision. In addition, a literature review by (Huslianti, 2025) concluded that a structured clinical supervision program can improve technical skills, interpersonal communication, motivation, and nurse performance.

However, the implementation of supervision still faces various challenges. A scoping review by (Nilaprapti et al., 2025) identified obstacles such as high supervisor workloads, a lack of understanding of supervision implementation, and inadequate supervisor competency. These obstacles prevent the supervisory function in nursing management from functioning optimally, resulting in poor service quality, incomplete documentation, and failure to meet care standards (Mu'awanah et al., 2022).

At the managerial level, the Chief of Nursing plays a strategic role in designing, implementing, and overseeing the implementation of nursing practice. Supervisory duties include monitoring the implementation of care based on professional standards, fostering staff competency, providing clinical feedback, and developing internal policies and protocols. Professional supervision models such as clinical supervision and professional nurse advocacy have been used in various health systems to strengthen accountability and practice quality (Scanlan & Hart, 2024). Supportive supervision that includes professional development, practice reflection, and emotional support has been shown to improve nurse performance, reduce clinical errors, and increase job satisfaction (Brás Baptista Sérgio et al., 2023).

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At the HoREX Referral Hospital in Baucau, interviews with nurses in 2025 revealed that supervision was not yet fully structured. Some nurses stated that the head nurse conducted daily supervision, although this was not always understood as formal supervision. Others reported that formal supervision occurred only once or twice a month. These findings indicate that although nurses consistently strive to provide care according to standards, the supervisory competence of the head nurse is considered suboptimal and not yet implemented systematically.

Therefore, research is needed that can provide an empirical overview of the implementation of supervision by the head nurse and provide recommendations for improving service quality by strengthening structured and continuous nursing supervision.

Method

The research design used in this study was analytical quantitative with a descriptive correlational design and cross-sectional approach. The population in this study was all unit heads and team leaders in inpatient and outpatient units, with a total sample of 32 nurses. The sampling technique used nonprobability sampling, with total sampling type. Data collection method using a questionnaire after data analysis using the Spearman rho statistical test to identify the relationship between independent variables and dependent variables.

Result and Discussion

1. Result

In this study, the respondents consisted of 32 nurses, including the head of nursing and team leaders. The findings present data on the respondents' characteristics, as well as the results of univariate and bivariate analyses

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Table 1

Respondents' characteristics (sociodemographics) (n=32)

	Distribution	f	%
Gender			
Male		13	41
Female		19	59
Age			
≤ 35 years		15	47
36-45 years		10	31
46-55 years		5	16
≥ 56 years		2	6
Level of Education			
SPK/Health Nursing School		2	6
Bachelor's degree		5	16
Licentiate degree		21	66
Ners		4	13
Master's degree		0	0
Length of work			
< 5 years		9	28
5-9 years		8	25
≥ 10 years		15	47
Employee Status			
Public Employee		24	75
Contracted Employee		8	25
Volunteer		0	0
n		32	100

Source: Research Results at HoREX Baucau, 2025.

Based on Table 1, from the 32 respondents comprising unit heads and team leaders, the following results were obtained: the majority of the respondents were female (59%). Most were aged ≤ 35 years (47%). The last level of education of the majority of the respondents was a licentiate degree, with a proportion of 66%. The length of service in HoREX Baucau was mostly in the category of ≥ 10 years (47%). The employment status of the majority of the respondents is public employee, with a proportion of 75%.

Table 2

Frequency Distribution of Respondents Based on Supervision by the Head of Nursing at HoREX Baucau, 2025 (n = 32)

Role of chief nursing officer for supervision	f	%
Less	12	37.5
Enough	14	43.8
Good	6	18.8
n	32	100

Source: Research Results at HoREX Baucau, 2025.

Based on the results of table 2, most respondents assessed the role of the Chief Nursing Officer in supervision at HoREX Baucau to be in the sufficient category (43.8%), followed by the less than adequate category (37.5%), and only a small proportion assessed it as good (18.8%).

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Table 3

Frequency Distribution of Respondents Based on the Implementation of Nursing Care in HoREX Baucau, 2025 (n = 32)

Implementation of Nursing Care	f	%
Less	9	28.1
Enough	15	46.9
Good	8	25
<i>n</i>	32	100

Source: Research Results at HoREX Baucau, 2025.

Based on the results of the analysis of table 3, most respondents assessed that the implementation of nursing care at HoREX Baucau was in the sufficient category (46.9%), followed by the good category (25.0%) and less (28.1%).

Table 4

Spearman rho correlation analysis between the role of the head of nursing in supervision with the implementation of nursing care in HoREX Baucau, 2025 (n = 32)

Role of chief nursing officer for supervision	Implementation of Nursing Care				Spearman's rho	
	Less	Enough	Good	Total	Coefficient	Sig. (2-tailed)
Less	<i>n</i>	7	4	1	12	
	%	58.3	33.3	8.3	100	
Enough	<i>n</i>	2	10	2	14	
	%	14.3	71.4	14.3	100	0.627 0.000
Good	<i>n</i>	0	1	5	6	
	%	0.0	16.7	83.3	100	
Total	<i>n</i>	9	15	8	32	
	%	28.1	46.9	25	100	

Source: Research Results at HoREX Baucau, 2025.

Based on the results of Table 4, which shows the Spearman rho correlation analysis, there is a strong and significant positive relationship between the role of the head nurse in supervision and the implementation of nursing care in HoREX Baucau ($r = 0.627$; $p = 0.000$). This indicates that the better the role of the head nurse in conducting supervision, the better the implementation of nursing care. Descriptively, respondents who rated supervision in the good category mostly also showed good implementation of nursing care (83.3%), while poor supervision tended to be followed by poor implementation of nursing care. This finding emphasizes the importance of the role of the head nurse's supervision in improving the quality of nursing services.

2. Discussion

The results of the study in Table 2 show that the majority of respondents rated the role of the Chief Nursing Officer (CNO) in supervision at HoREX Baucau as adequate (43.8%), while the good rating (18.8%) was still low. This finding indicates that nursing supervision has been implemented but has not been optimal in providing consistent guidance, feedback, and professional support. Suboptimal supervision has the potential to impact the quality of nursing care delivery and nurse involvement in implementing service standards (Alsadaan et al., 2023).

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These findings align with previous research, which found that the effectiveness of nursing leadership and supervision is significantly influenced by leader behavior and organizational support. When supervision is not structured and participatory, staff tend to rate the nursing leadership role moderately to lowly. Furthermore, administrative pressures and limited authority experienced by CNOs can reduce supervision effectiveness, even when the leader possesses adequate competency (Atli Özbaş & Kovancı, 2022).

Furthermore, empirical evidence shows that the implementation of structured clinical supervision can significantly improve nurse performance and self-confidence. A study by (Gheisari et al., 2024a) confirmed that a systematic supervision model positively impacts nurses' self-efficacy and communication quality. Therefore, the low proportion of good ratings in this study underscores the need to strengthen the role of the CNO through leadership development and the implementation of evidence-based supervision to improve the quality of nursing services.

Based on the analysis of Table 3, the majority of respondents rated the implementation of nursing care in HoREX Baucau as adequate (46.9%), with a lower portion (25%) rating it as good. This indicates that nursing care practices are ongoing but have not yet reached the expected level of consistency and optimal quality. A similar condition was reported in quantitative research, which found that the implementation of the nursing process/EBP is often suboptimal without adequate organizational support and training (Edmealem et al., 2024).

Common barriers to implementation include lack of ongoing training, high nurse workload/ratio, limited access to resources (internet, up-to-date guidelines), and role ambiguity, all of which reduce the fidelity of nursing intervention implementation. Findings from the scoping review and field study indicate that these issues are consistent across contexts and need to be addressed through capacity building and role clarification (e.g., case management/nursing process) (Putra & Sandhi, 2021).

To improve the rating from fair to good, implementation evidence suggests the use of a structured, multifaceted strategy of integrated education, audit & feedback, clinical reminders, and interventions tailored to local barriers—as a multifaceted approach tends to be more effective than a single intervention in improving nurse practice and patient outcomes. Therefore, a package of implementation interventions (training + audit + management support) accompanied by pre-post evaluation is recommended. (Fontaine et al., 2024).

Based on the results of Table 4, which shows the Spearman rho correlation analysis, there is a strong and significant positive relationship between the role of the head nurse in supervision and the implementation of nursing care in HoREX Baucau ($r = 0.627$; $p = 0.000$). This indicates that the better the role of the head nurse in carrying out supervision, the better the implementation of nursing care. Descriptively, respondents who rated supervision as good mostly also showed good implementation of nursing care (83.3%), while poor supervision tended to be followed by poor implementation of nursing care. This finding emphasizes the importance of the role of the head nurse's supervision in improving the quality of nursing services.

This pattern aligns with research (Kountul & Walewangko, 2023) showing a relationship between ward head supervision and nurse performance in implementing nursing care (Fitri Nurani et al., 2025) that the quality of ward head supervision was significantly related to nurse compliance in implementing and documenting nursing care.

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This suggests that supervision is not merely an administrative function, but a crucial instrument in ensuring the quality of nursing practice.

The strong relationship between supervision and nursing care implementation is also supported by research emphasizing the effectiveness of structured clinical supervision. Experimental studies by (Gheisari et al., 2024b) and (Huslianti, 2025) demonstrated that systematic clinical supervision improves nurses' competence, communication, and consistency in implementing the nursing process. Thus, planned and ongoing supervision directly contributes to improving the quality of nursing care.

Critically, the findings of this study reinforce the evidence that improving the quality of nursing care is inextricably linked to the leadership role of head nurses in supervision. However, supervision effectiveness is also influenced by organizational support and the workload of nursing leaders. Research (Atli Özbaş & Kovancı, 2022) and (Edmealem et al., 2024) indicate that resource constraints and organizational pressures can undermine the role of supervision. Therefore, strengthening leadership capacity and establishing an evidence-based supervision system are crucial strategies for improving the implementation of sustainable nursing care.

Conclusion

This study concluded that there is a strong and significant positive relationship between the role of the Head of Nursing in supervision and the implementation of nursing care at HoREX Baucau Hospital. The better the supervision implementation, the better the implementation of nursing care by nurses. Although supervision and implementation of nursing care were largely in the adequate category, this finding confirms that strengthening structured, sustainable, and management-supported supervision is crucial for improving the quality of nursing services.

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