Factors Influencing Effective Documentation and its relation to Patients Safety as Perceived by Staff Nurses

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Abstract

Background: Nurses play a vital role in maintaining and promoting quality care, while documentation is the evidence that displays nurses' performance. To achieve set goals regarding patient safety, it is pivotal to keep the clinical record of the patient to understand the patient's overall profile of delivered and intended care and provide the best possible care to improve patient safety through proper and accurate documentation **Aim of the study**: The study aimed to assess factors influencing effective documentation and its relation to patients' safety as perceived by staff nurses. **Study design:** A descriptive correlational research design was utilized to fulfill the aim of study. **Setting:** The present study conducted at Critical Care Units at Benha University Hospital, Qalyubia, Egypt. **Subject:** The study subjects included all available (420) staff nurses who were working in the above-mentioned study setting. **Tools of data collection:** Two tools were used in the study **first tool:** Factors Influencing Effective Documentation Questionnaire, **second tool:** Patient Safety Questionnaire. **Results:** The highest factor influencing effective documentation was nurses related factors followed by factors related to nursing administration while the lowest factor was related to work environment, more than two thirds(68.3%) of staff nurses reported that level of patient safety was high. **Conclusion**: There was highly statistically significant positive correlation between total factors influencing effective documentation with patient safety. **Recommendation:** Designing and implementing educational program about nursing care documentation standard and providing critical care nurses training courses regarding patient safety by hospital administration.

Keywords: Documentation, Factors Influencing, Patients Safety, Staff Nurses.

Introduction

Nursing documentation is the record of nursing care that is planned and delivered to patients by qualified nurses or other caregivers under the direction of a qualified nurse. Nursing documentation is the principal clinical information source to meet legal and professional requirements. It is a vital component of safe, ethical and effective nursing practice whether done manually or electronically. Nursing documentation should fulfill the legal requirements of nursing care documentation. Proper Nursing documentation covers all aspects of health care such as assessment standards, proper diagnosis, and identification of problems, planning and implementation of interventions **(Riaz, et al., 2022).**

Nursing documentation is a part of clinical notes which is done by nurses and it is one basic and fundamental source of information in health care, is the patient record that contains all the written information regarding a patient's conditions, his/her needs, and it is very important functions of nurses because it serves multiple and diverse purposes. The intention of nursing documentation is to demonstrate that an organization maintains comprehensive written evidence of its planning, delivery, assessment

and evaluation of patients, care and it is a source of knowledge for novice nurses and potentially for nursing theory development **(Ahmed, 2022).**

Then nursing documentation provides written evidence of patient progress, it should include rationales and the underlying critical thinking behind clinical decisions, interventions, and evaluations of caregivers and must comply with established standards. Nursing documentation has a very important role regarding members of a treatment team, continuity of care, reminding nurses and their involvement in professional duties and responsibilities, evaluation of therapeutic interventions, determining health care costs, supporting and protecting legal rights of patients and nurses and providing research and training details **(Amene et al., 2023).**

Nursing care documentation practice is the record of patient information that is used to facilitate effective nursing activities for patients also traces faults and makes empowered the nurses in clinical decision-making. The criteria of good documentation practice include using standards, patient identification, and comprehensive nursing assessment as subjective and objective data, date, timeline, common vocabulary, legible writing, and chronological event reports, using authorized abbreviations, symbols, and signatures **(Bibi et al., 2023).**

Quality of nursing documentation is that depend on the principles which include, specific, objective, clear, comprehensive, concise, complete, accurate, factual, true, honest, consistent, timely, confidential, legible, permanent and representative of professional observational assessments. Furthermore, it should be a contemporary, including date and time, without duplicated information, centered on the patient. Also, reveal the concerns, responses, perception, identify the person who provided or documented the care (**Ali et al., 2020).**

Several factors influencing implementation of nursing care documentation such as lack of enough time for documentation of the implemented actions, the priority of care to documentation, the existence of additional forms and documentation, disproportionate number of nurses to patients, lack of incentive systems, job dissatisfaction, and ignorance of correct documentation principles and legal consequences in different studies have been introduced as the barriers of correct recording**(Ayele et al.,2021)**

Critical care nurses or intensive care unit (ICU) nurses must be proficient in a wide variety of high-level nursing skills. ICU nurses need to be a specialist in evaluating intensive care patients, recognizing complications, administering care, and coordinating with other members of the critical care team. Successful critical care nurses also excel at interpersonal communication, leadership, strategic planning, critical thinking, and decision-making **(Macey, et al., 2021).**

Intensive care is a multidisciplinary and inter professional specialty dedicated to the overall management of patients' needs or acute and life-threatening organ dysfunction. While the underlying disease is being treated and resolved, the primary goal of intensive care is to prevent additional physiologic deterioration. Nursing care is provided around the clock in intensive care by nurses having special qualifications and specialized training. The nurse-to-patient ratio is higher than in other areas of the hospital. ICU staff nurses role includes protection, promotion and optimization of health and abilities **(Hunfeld, et al., 2023).**

Intensive care settings provide lifesaving care for the critically ill patients; however, it is associated with significant risks for adverse events and serious errors with multiple interactions occurring between health multidisciplinary health care providers, patients, and medical devices. Critical care

nurses who play a vital role in improving the safety and quality of hospital care. Nurses need to know interventions that can be used to improve patient outcomes. As prominent care providers, nurses have continual direct contact with patients. Such conditions place nurses in the critical position of maintaining detailed documentation to ensure health-care team members are well-informed to any changes in a patient's health status and patient safety **(Tobin, 2022).**

Patient safety is a key component of hospital performance and improving ICU staff nurses' performance remains an ideal that every organization strives to achieve this goal. Health care has become more efficient and also become more complex, with greater application of new technologies and therapies, which needs adopting with the international patient safety goals to improve the patient safety environment to simulate international competition and to increase the competitive advantages of the healthcare organizations at the national and international grade **(Ahmed, 2022).**

Patient safety is a healthcare issue in the healthcare organizations that includes the reducing and preventing medical fault that often leads to harmful health consequences. Health care has become more efficient and also become more complex, with greater application of new technologies and therapies, which needs adopting with the international patient safety goals to improve the patient safety environment to simulate international competition and to increase the competitive advantages of the healthcare organizations at the national and international grades **(Abdullah, et al., 2020).**

Safe patient care is at the line when delivering patient care. Nurses play a vital role in maintaining and promoting quality care, while documentation is the evidence that displays the nurse's performance. To achieve set goals regarding patient safety, it is pivotal to keep the clinical record of the patient to understand the patient's overall profile of delivered and intended care and provide the best possible care to improve patient safety through proper and accurate documentation **(Hadi, 2023).**

The Joint Commission on Accreditation of Healthcare Organizations initiated in (2002) and developed a program of national patient safety goals for accreditation and certification to patient identification goals, Communication between caregivers, safety use of medication, prevention of infection, prevention of falls, prevention of pressure ulcers, prevention of wrong site, incorrect procedure, wrong person surgery, reduction of damage associated with clinical alarm systems**. (Aziz, et al., 2020).**

Significance of study

Poor communication between health care professionals at critical care unit is one factor that threatens patient safety. There is also evidence indicating that nursing documentation has relation with patient mortality obligation, many studies identified deficiencies in practice of documentation among nurses across the globe. It has been reported that nursing records are often incomplete, lacked accuracy and had poor quality. There are challenges for documentation reported so far, include shortage of staff, inadequate knowledge concerning the importance of documentation, patient load , lack of in-service training and lack of support from nursing leadership **(Alhawri, et al., 2021).**

In addition to the researchers observed that nurses have defect in effective documentation: Sloppy or illegible handwriting, failure to date, time, and sign a medical entry. Lack of documentation for omitted medications and/or treatments, incomplete or missing, documentation, adding entries later on/and documenting subjective data. It has great affect on patient safety and

quality of patient care.So that this study was conducted to assess factors influencing effective documentation and its relation to patients' safety as perceived by staff nurses.

Aim of the study:

Assess factors influencing effective documentation and its relation to patients' safety as perceived by staff nurses.

Research Questions:

1-What are factors influencing effective documentation as perceived by staff nurses?

2-What are patients' safety levels of as reported by nurses?

3-Is there a relation between factors influencing effective documentation and patients' safety?

Subjects and method:

Research design:

A descriptive correlational research design was used to achieve the aim of the present study.

Research setting:

The present study was be conducted in critical care units at Benha University Hospital

Research subjects:

Study subject included all available staff nurses (420) who were working in the above-mentioned study settings.

Tools of data collection:

The data was collected by using two tools

Tool (1): Factor Influencing Effective Documentation Questionnaire A structured questionnaire was developed by the researchers after review of literature **(Alsayad, 2016; Motea, et al., 2016; Kebede, et al., 2017; Lee, et al., 2019; De Groot, et al., 2022).** It included two parts:

Part 1: Personal characteristics: It included personal characteristics of staff nurses (unit, age, year of experiences, gender, marital status, educational qualification, attended training course about effective documentation and patient safety).

Part 2: It included different items to assess factors influencing effective documentation as perceived by staff nurses. It consisted of 50 items divided under three main dimensions**:** Nurses related factors (30items), Factors related to nursing administration (12 items), Factors related to the work environment (8 items).

Scoring system:

Responses of staff nurses were measured by using three points Likert scale as follows; agree = (3), agree to some extent = (2) and disagree = (1).

Total score was ranged from (50-150). Total factors level was categorized into the following:

- High factor level if total score was (>75%) that equal (113-150) points.
- Moderate factors level if total score was (60-75%) that equal (90-112) points.
- Low factor if total level score was (<60%) that equal (50-89) points.

Tool (II): Patient Safety Questionnaire

A structured questionnaire was developed by the researchers after reviewing the related literature **(Gaal, et al., 2011; Suliman et al., 2017; Khoshakhlagh et al., 2019; Bahar&Önler, 2020)**. It included different items to assess patients' safety level as reported by staff nurses it consisted of (91) items divided under main eight dimensions**:** Patient identification (14 items),Verbal orders (8 items),Prevent wrong connections (9),Preventing patients from falling (11 items),Preventing bed sores (12 items),Handover (8 items),Activation of critical warning within critical care units (7 items),Medication given rights (22 items).

Scoring system:

Responses of staff nurses were measured by using three points Likert scale as follows; always done = (2), sometimes done = (1) and not done = (0).

- High patient safety level if total score was (>75%) that equal (137-182) point .

- Moderate patient safety level if total score was (60-75%) that equal (110-136) points.
- Low factor if patient safety level score was (<60%) that equal (<109) points.

Administrative design:

The Director of Benha University Hospital received a formal letter from the Dean of the Nursing Faculty, asking for their cooperation and permission to undertake the study. The researchers met with the head nurse of each department to establish an appropriate time to get the information from her team and ensure that work was not impeded.

Ethical consideration:

Ethical approval was obtained from Ethical Committee of Faculty of Nursing, Benha University. The informed oral permission was obtained from each participant after discussing the study's purpose, potential advantages, methods for filling out data collection tools, and anticipated results in order to preserve the respondents' rights before the study was conducted. The respondents' freedom to withdraw the research at any moment was guaranteed. The assignment of a code number to the questionnaire sheets secured the confidentiality of the data collected. Subjects were made aware that the tools' contents would only be used for research purposes

Face and content validity:

The tools were tested by Jury group consisted of nine experts from Nursing Administration (four assistant professors of Nursing Administration from Benha University, three professors of Nursing Administration from Tanta University and two professor of Nursing Administration from Menoufia University).

Some modifications in Arabic statements were done in tools based on comments of Jury experts such as modifying some words in some statements to give the right meaning for the phrase which did not understand clearly to arrive at the final format of the tools.

Reliability of tools:

It was measured using cronbach's Alpha coefficient, to estimates the consistency of measurement tool as the following: factor influencing effective documentation questionnaire (0.925) and patient safety questionnaire (0.962)

Pilot study:

A pilot study was conducted during July 2022 to test the sequence of items feasibility, practicability and applicability of the tools, clarity of the language and to estimate the time needed for filling each tool. It was done on 10% of the total studied subjects, it was done on 42 staff nurses there was no modification of the pilot study, so the pilot study was included in the main study. The average time needed to fill two questionnaires ranged from (25:39) minutes.

Field Work

Data collections take about three months from August 2022 to the end of October 2022 after securing necessary permissions.

- The researchers met staff nurses in each unit and explained the aim, the nature of the study, the method of filling questionnaire and this was done individually or through group meetings of staff nurses during morning and afternoon shifts after taking the permissions from the head nurse of each unit according to the workload in each unit.
- The researchers distributed the data collection tool with some instructions about how to fill it.
- The data were collected from staff nurses for three days per week from 10 a.m. to 1.30 p.m.
- The average time needed to fill two questionnaires ranged from (25:30) minutes. The average number of

completed sheets daily ranged from 11-13 sheets, the filled forms was revised to check their completeness to avoid any missing data.

Statistical analysis:

The collected data were revised, coded, tabulated and verified prior to computerized entry. The Statistical Package for Social Sciences (SPSS version 25.0) was used. Descriptive statistics were applied in the form of mean and standard deviation for quantitative variables and frequency and percentages for qualitative variables. Qualitative categorical variables were compared using chi-square test. Pearson correlation coefficient was calculated between variables. Statistical significance was considered at p-value $p<0.05$, and considered highly statistically significance at p-value $p<0.001$.

Results:

Table (1): Shows that approximately two fifths (42.9 %) of staff nurses were aged 25 to less than 30 years old with Mean±SD (30.21±5.45). Regarding years of experience, more than one third (35.2%) of them had less than 5 years of experience with Mean±SD (9.16±6.94). Regarding to gender and marital status, (76.2%& 72.1%) of them were females and married respectively. In relation to educational qualification more than **o**ne third (35.0%) of them were had Bachelor Degree of Nursing. The majority (94.5%) of them were not attending training courses about effective documentation and (72.4%) of them were not attending training courses about patient safety .While more than half (69.6%&56.9%)of them were attending only one course about effective documentation and patient safety respectively.

Figure (1): Clarifies that more than three quarters (75.2%) of staff nurses reported that high level of factors influencing effective documentation and more than one fifth(21.4%) of them reported that moderate level of factors influencing effective documentation. While the minority (3.3%) of them were reported low level of factors influencing effective documentation.

Table (2): Shows that total mean of factors influencing effective documentation was (122.58±16.47) with mean percent (81.7%) of total scores. The highest mean scores (74.58±10.37) with mean percent (82.8%) of factor influencing effective documentation was nurses related factor. While the lowest mean scores (19.18±2.91) with mean percent (79.9%) was factors related to the work environment.

Figure (2): Clarifies that more than two thirds (68.3%) of staff nurses reported that level of patient safety was high. While more than one fifths (23.1%) of staff nurses were reported that level of patient safety was moderate. While the lowest percent (8.6%) of them reported that level of patient safety was low.

Table (3): Shows that the total means of patient safety as perceived by staff nurses was (147.22±22.34) with mean percent (80.9%) of total scores. The highest mean scores (20.94±3.09) with mean percent (87.3%) of patient safety dimension was related to preventing bed sores, while the lowest mean scores (20.03±2.50) with mean percent (71.5%) of patient safety dimension was related to patient identification.

Table (4): Demonstrates that there was highly statistically significant positive correlation between total factors influencing effective documentation and total patient safety.

Table (1): Frequency distribution of staff nurses regarding their personal characteristics (n=420)

Personal characteristics items	No	%
Age		
Less than 25 years	43	10.2
25- less than 30	180	42.9
30-35 years	79	18.8
More than 35 years	118	28.1
Range **Mean ± SD**	**20-39** **30.21±5.45**	
Years of experience		
Less than 5 years	148	35.2
5- less than 10	119	28.3
10-15 years	26	6.2
More than 15 years	127	30.3
Range **Mean±SD**	**1-22** **9.16±6.94**	
Gender		
Male	100	23.8
Female	320	76.2
Marital status		
Married	303	72.1
Unmarried	117	27.9
Educational qualification		
Diploma degree in Nursing	131	31.2
Associated degree in Nursing	142	33.8
Bachelor degree of Nursing	147	35.0
Have you attended training courses about effective documentation		
Yes	23	5.5
No	397	94.5
If yes, what is the number of courses (n= 23)		
1 course	16	69.6
2 courses	7	30.4
Have you attended patient safety training courses		
Yes	116	27.6
No	304	72.4
If yes, what is the number of courses (n=116)		
1 course	66	56.9
2 course	42	36.2
3 course	8	6.9

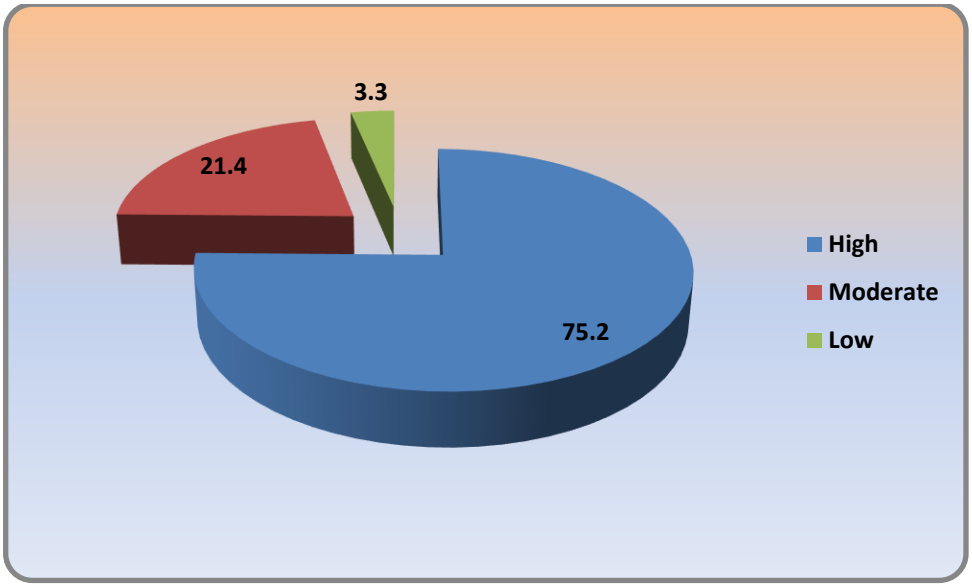

Figure (1): Percentage distribution of factors influencing effective documentation total levelsas perceived by staff nurses.

Table (2): Mean scores and mean percent regarding factors influencing effective documentation as perceived by staff nurses(n=420)

Factors influencing effective documentation	Maximum score	Mean ± SD	Mean%	Ranking
I-Nurses related factor	**90**	**74.58±10.37**	**82.8**	**1**
A- Nurses related factor regarding knowledge about effective documentation	**27**	**22.48±3.60**	**83.3**	**A**
b- Nurses' related factor regarding practices about effective documentation	**36**	**29.84±4.16**	**82.9**	**B**
c- Nurses' related factor regarding attitude that affect effective documentation.	**27**	**22.25±4.45**	**82.4**	**C**
II-Factors related to nursing administration at unit	**36**	**28.81±5.55**	**80.0**	**2**
III-Factors related to the work environment	**24**	**19.18±2.91**	**79.9**	**3**
Total factors influencing effective documentation	**150**	**122.58±16.47**	**81.7%**	

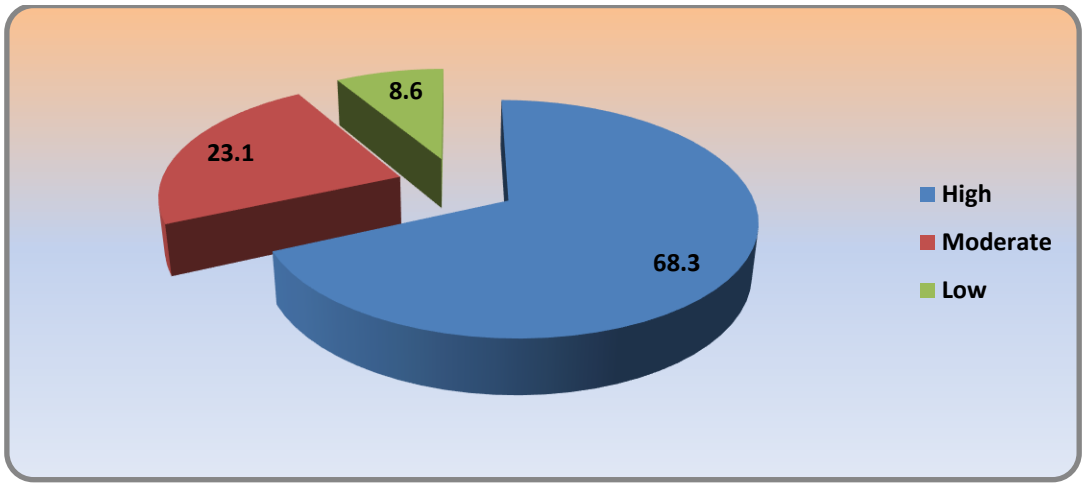

Figure (2): Percentage distribution of patient safety totals levels as perceived by staff nurses

Table (3): Mean scores and mean percent regarding patient safety as perceived by staff nurses (n=420)

Patient safety dimension	Maximum score	Mean ± SD	Mean%	Ranking
1-Patient identification	**28**	20.03±2.50	71.5	8
2-Verbal orders	**16**	12.22±2.44	76.4	7
3-Prevent wrong connections	**18**	14.47±3.31	80.4	5
4-Preventing patients from falling	**22**	18.33±3.26	83.3	4
5-Preventing bed sores	**24**	20.94±3.09	87.3	1
6-Handover	**16**	13.71±3.01	85.7	2
7-Activation of critical warning within critical care units	**14**	10.78±2.39	77.0	6
8-Medication given rights	**44**	36.74±5.42	83.5	3
A-The correct points used when giving the medication	20	16.76±2.72	83.8	**A**
B-Dealing with high-alert and high-concentration medications	12	9.90±2.02	82.5	**B**
C-Store and save medications	12	10.06±2.56	83.8	**A**
Total patient safety	**182**	**147.22±22.34**	**80.9%**	

Table (4): Correlation between total factors influencing effective documentation and total patient safety

Total factors influencing effective documentation	Total patient safety	
	r	P value
	0.283	0.000**

**A highly statistical significant difference P ≤ 0. 001

Discussion

Concerning factors influencing effective documentation, the findings of the current study clarified that, three quarters of nurses reported that level of factors influencing effective documentation was high. From the researchers point of view this result might be due to the staff nurses understood that nursing documentation is an essential function of professional nursing practice, can be used for specific purposes such as quality assurance ensure continuity of care, provide legal evidence provided, and support evaluation of quality patient care.

This result was agreed with **Ayele et al.,(2021),** who conducted a study at Southern Ethiopia about "Attitude towards documentation and its associated factors among nurses working" and reported that level of factors influencing effective documentation was high as reported by nurses. Also, this result was in the same line with **Seidu (2021),** who conducted a study at the Tamale Teaching Hospital, Ghana about" Factors influencing documentation in nursing care by nurses "and reported that factors influencing knowledge, attitude and practice of nurses on documentation were high.

This result was disagreed with **Vafaei et al., (2018)**,who conducted a study in Iran about "Improving nursing care documentation in emergency department'' and stated that the lower the knowledge of nurses about factors influencing effective documenting nursing care at pre program assessment .

Concerning mean scores and mean percent regarding factors influencing effective documentation as perceived by staff nurses. The forgoing results of the current study represented that the highest mean scores of factor influencing effective documentation was nurse's related factor followed by factors related to nursing administration while the lowest mean scores was related to the work environment. From the researchers point of view this result might be due to staff nurses understand factor influencing effective documentation and good practice of documentation process, also the highest factors was related to nurses because of their knowledge, practice and attitude as they are the main power for nursing personnel who are the main responsible for documentation of provided nursing care.

These results supported with **Melkie, (2020),** who conduct a study at Eastern Ethiopia about" Documentation practice and associated factors among nurses" and mentioned reported that highest mean scores of factor influencing effective documentation was nurses' related factor. Also, These results was in the same line with **Ayele et al., (2021) ,**who reported that more than half of the study participants had a favorable attitude towards documentation.

On the other hand, these results was disagreement with **Tasew, et al., (2019),** who conducted a study at Tigray, Ethiopia about" Nursing documentation practice and

associated factors among nurses" and reported that mean scores of factor influencing effective documentation was nurses related factor were lowest scores.

Concerning percentage distribution of patient safety total level as perceived by staff nurses, the findings of the current study, clarified that more than two thirds of staff nurses reported that level of patient safety was high.

From the researchers' point of view this result might be due to the staff nurses believe that patient safety is primarily a nursing responsibility, staff has a role informing the patient safety by understanding hazards within the workplace and working. The nurses had knowledge and skills to prevent any possible harm to patients, contributing to the improvement of care quality through the provision of effective and safe care, monitoring quality and patient safety indicators

The finding of the current study was agreed with **Khader (2016),** who conducted a study about" Nurses' perception and knowledge of factors affecting patient safety "and concluded that the result of study showed positive scores of nurses, perception toward patient safety. Also, the finding of the current study was agreed with **Abe (2018),** who conducted a study about" Patient safety goals' level "and stated that total levels of patient safety were high. In addition to, the finding of the current study was agreed with **Al-Rafay, et al., (2018),** who conducted a study about "Assessment of nurses' performance regarding international patient safety goals" and reported that satisfactory level of patient safety goals among nurses.

The finding of the current study was similar to **Mihdawi et al., (2020),** who conducted a study about "The influence of nursing work environment on patient safety "and reported positive levels of perceived patient safety. Also, This result was in agreement with **Koak et al., (2023),** who conducted a study about" The Effects of Professional Autonomy, Job Satisfaction, and Perceived Patient-Safety Culture on Nurses' Patient-Safety Management Activities" and reported that the mean score for patient-safety management activities was high.

The finding of the current study was disagreed with **Hadad et al., (2021),**who conducted a study about "Perceptions of Staff Nurses about Patient Safety "and stated that the results indicated that the overall perception of staff nurses regarding patient safety in the hospital were moderate. Also, The finding of the current study was disagreed with **Sinurat et al., (2023**), who conducted a study about "Organizational culture and nurses' behavior in implementing patient safety "and reported that more than half of the nurses demonstrated poor behavior in implementing patient safety.

Concerning mean scores and mean percent regarding patient safety as perceived by staff nurses, the findings of the current study revealed that the highest mean scores of patient safety dimension was preventing bed sores. From the researchers' point of view this result might be due to the staff nurses had knowledge about providing preventive pressure ulcer care and they followed pressure ulcer guidelines. Staff Nurses are encouraged to review these comprehensive guidelines (e.g., risk assessment, skin care, mechanical loading, patient and staff education, etc.) when implemented, could reduce pressure ulcer development and reduce the incidence of ulcers.

This result was in the same line with **Wang et al., (2014),** who conducted a study about" The relationship between patient safety culture and adverse events who reported that a higher mean score of "Organizational Learning-Continuous Improvement" was significantly related to lower the occurrence

of pressure ulcers Moreover, this result was in agreement with **Shahin et al., (2020),** who conducted a study about "Quality of care and patients' safety awareness and compliance among critical care nurses "and indicated that critical care nurses have a high knowledge level regarding patients' safety as the mean of knowledge mean-scores for patients' safety scale was generally high. In addition to, this result was in the same line with **Sengul&Karadag, (2020),** who conducted a study about "Determination of nurses' level of knowledge on the prevention of pressure ulcers" and indicated that the mean level of knowledge on pressure ulcer was high.

The finding of the current study was contrast with **Rostamvand et al., (2022),** who conducted a study about" Nurses' attitude on pressure injury prevention: A systematic review and meta-analysis based on the pressure ulcer prevention instrument " and concluded that the attitude of nurses towards the prevention of pressure ulcers was moderate.

Concerning distribution of patient safety regarding patient identification as reported by staff nurses, the findings of the current study, revealed that majority of staff nurses reported that they were always put a new patient's identification bracelet if the original lost or became illegible and all data was written on the patient's identification bracelet and included the name, number and date of entry. From the researchers' point of view this result might be due to the staff nurses have awareness about importance of patient identification before all medical interventions avoid and prevent any injury to the patient during healthcare delivery, have greater confidence in the moment of performing care, ensuring its quality. Professionals monitor patients regarding wearing identification wristbands

The finding of the current study was agreed with **Cengiz et al., (2016),** who conducted a study about "Evaluation of patient wristbands and patient identification process" and stated that the majority of patients wearing their wristbands had the correct wristbands on their arms. Also, the finding of the current study was agreed with **Ngo(2020),** who conducted a study about**"** Evaluation of patient identification practices by nurses" and found that more than half of nurses followed the right practice of having patients wear wristbands in the inpatient reception area.

The finding of the current study was disagreed with **Kim (2019),** who conducted a study about "Effect of quality management initiative to improve patient identification behavior of nurses" and found that the patient identification behavior of nurses was poor at pre program assessment. Similar to, the finding of **Alkhaqani (2023),** who conducted a study about" Patient identification errors in the hospital setting a prospective observational study "and concluded that more than three-quarters of healthcare workers missed patient identification while performing a task patient.

Concerning correlation between total factors influencing effective documentation and patient safety the findings of the current study, demonstrated that there was highly statistically significant positive correlation between total factors influencing effective documentation and patient safety. From researchers' point of view, staff nurses believed that high-quality patient documentation in primary care is crucial for ensuring the quality of care, continuity of care and patient safety

The finding of the current study was in same line with **Kent & Morrow, (2014),** who conducted a study about "Better documentation improves patient care" who reported that highly statistically significant positive correlation between total factors influencing effective documentation and patient safety. In addition to,**Bjerkan et al., (2021),** who conducted a study about" Patient

safety through nursing documentation" and concluded that identified several barriers that negatively influenced patient documentation practices, exposing patients in primary care to increased safety risks and potentially harmful situations.

Also, the finding of the current study was in same line with **Obaia et al., (2023),** who conducted a study about "Factors affecting quality of nursing handover among staff nurses and its relation to patients' safety in intensive care units" and reported that there was a positive correlation between total factors affecting quality of nursing handover documentation process and patients' safety issues in ICUs.

Conclusion

Based on findings of the study, it can be concluded that, the highest factor influencing effective documentation was nurses related factor followed by factors related to nursing administration while the lowest factor was related to work environment, more than two thirds of staff nurses reported that level of patient safety was high. There was highly statistically significant positive correlation between total factors influencing effective documentation and patient safety.

Recommendations

For hospital administrator

1- Designing and implementing educational program about nursing care documentation standard and give direction for health department to encourage nurses to do their activities and document what they provide timely.

2-Providing critical care nurses training courses regarding patient safety.

For head nurses:

1-Continuous supervision of nursing documentation through regular and periodic auditing is suggested, with constructive feedback, as well as disciplinary actions for defaulters and rewards for good achievers.

2 -Provide opportunities for nurses to attend nursing conferences to improve their knowledge and skills about nursing documentation principles and its importance.

For nurses:

1- Updating nurses' knowledge and skills about documentation guidelines through continuous professional development and focused on importance of proper documentation as reference for further research study.

2- Initial education and continuous learning programs need to be planned to improve healthcare providers and integrate patient safety topics into the educational curricula.

Further research should be made to:

1-Assess the impact of the-job training and application of patient safety on nurses' practices in relation to factors influencing effective documentation.

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العوامل المؤثرة علي التوثيق الفعال وعلاقتها بسلامة المرضي كما يدركها الممرضين

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التوثيق التمريضي هو سجل الرعاية التمريضية التي يتم التخطيط لها وتقديمها للمرضى من قبل ممرضين مؤهلين أو غيرهم من مقدمي الرعاية تحت إشراف ممرض مؤهل. لذا هدفت هذه الدراسة الي تقييم العوامل المؤثرة علي التوثيق الفعال وعلاقتها بسلامة المرضي كما يدركها الممرضين. تم استخدام البحث الوصفي الارتباطي لإجراء هذه الدراسة. وقد أجريت هذه الدراسة في وحدات العناية المركزة بمستشفى بنها الجامعي على جميع الممرضين المتاحين الذين يعملون في مكان الدراسة المذكور أعلاه والذي يبلغ عددهم 420 ممرض/ه. واظهرت النتائج بوجود علاقة ارتباط موجبة ذات دلالة إحصائية عالية بين مجموع العوامل التي تؤثر على التوثيق الفعال وسلامة المريض الكلي.. لذا اوصت الدراسة بأن مسؤول المستشفى يحتاج إلى معالجة العوائق التي تحول دون التوثيق التمريضي الفعال المحدد من قبل الممرضات ، وتوفير جميع الموارد اللازمة.