



Exploring Staff Nurses' Experiences of Head Nurse Supervision in Supporting Caring Practices at Kotamobagu Regional Hospital

Eksplorasi Pengalaman Perawat Pelaksana terhadap Supervisi Kepala Ruangan dalam Mendukung Praktik Caring di Rumah Sakit Umum Daerah Kotamobagu

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ABSTRAK

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Kata kunci:

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Latar Belakang: Caring merupakan nilai fundamental dalam praktik keperawatan yang berkontribusi terhadap kualitas pelayanan dan kepuasan pasien. Implementasi praktik caring pada perawat dapat dipengaruhi oleh berbagai faktor, salah satunya adalah peran supervisi kepala ruangan. Supervisi yang efektif diharapkan tidak hanya mendukung kinerja teknis, tetapi juga mendorong pengembangan perilaku caring dalam praktik keperawatan sehari-hari. **Tujuan:** Penelitian ini bertujuan untuk mengeksplorasi pengalaman perawat pelaksana terhadap supervisi kepala ruangan dalam mendukung implementasi praktik caring di RSUD Kota Kotamobagu. **Metode:** Penelitian ini menggunakan desain penelitian kualitatif dengan pendekatan fenomenologi deskriptif. Penelitian dilaksanakan di Ruang Rawat Inap Melati dan Tuitan RSUD Kota Kotamobagu. Sebanyak delapan perawat pelaksana (IF1–IF8) dipilih melalui teknik purposive sampling. Data dikumpulkan melalui wawancara mendalam dan dianalisis menggunakan content analysis. **Hasil:** Hasil penelitian mengungkapkan tiga tema utama, yaitu: (1) praktik supervisi sebagai kontrol manajerial rutin yang berfokus pada penyelesaian tugas dan kepatuhan terhadap prosedur, yang menunjukkan bahwa supervisi belum sepenuhnya mendukung aspek relasional dalam pelayanan keperawatan; (2) keterbatasan penguatan perilaku caring dalam supervisi, yang tercermin dari minimnya penekanan pada komunikasi terapeutik dan dukungan emosional; serta (3) ketergantungan perawat terhadap arahan supervisi dalam pelaksanaan praktik caring, yang mengindikasikan bahwa perilaku caring belum sepenuhnya terinternalisasi sebagai nilai profesional yang intrinsik. Temuan ini menunjukkan bahwa supervisi masih lebih berorientasi pada tugas dibandingkan pada penguatan nilai-nilai caring. **Simpulan:** Supervisi kepala ruangan memiliki peran penting dalam mendukung praktik keperawatan, namun pelaksanaannya saat ini masih berfokus pada aspek manajerial dan

teknis. Nilai-nilai caring belum secara konsisten ditekankan dalam proses supervisi sehingga penguatan perilaku caring pada perawat pelaksana masih terbatas. Oleh karena itu, diperlukan pendekatan supervisi yang lebih holistik untuk mengintegrasikan nilai-nilai caring ke dalam praktik keperawatan sehari-hari. **Saran:** Institusi pelayanan kesehatan dan manajer keperawatan disarankan untuk mengorientasikan kembali praktik supervisi dengan mengintegrasikan prinsip-prinsip caring, komunikasi terapeutik, umpan balik reflektif, dan dukungan emosional ke dalam kegiatan supervisi rutin. Selain itu, pelatihan dan evaluasi berkelanjutan terhadap kompetensi supervisi kepala ruangan perlu dilakukan guna memperkuat internalisasi nilai-nilai caring dalam praktik keperawatan profesional.

ABSTRACT

Keywords:

Caring, Head nurse supervision, Phenomenology, Staff nurses, Supervisory practices.

Background: Caring is a fundamental value in nursing practice that contributes to the quality of patient care and satisfaction. The implementation of caring practices among nurses can be influenced by various factors, including the supervisory role of head nurses. Effective supervision is expected to support not only technical performance but also the development of caring behaviors in daily nursing practice. **Objective:** This study aimed to explore staff nurses' experiences of head nurse supervision in supporting the implementation of caring practices at Kotamobagu Regional Hospital. **Methods:** This study employed a qualitative research design with a descriptive phenomenological approach. The study was conducted in the Melati and Tuitan inpatient wards of Kotamobagu Regional Hospital. Eight staff nurses (IF1–IF8) were selected through purposive sampling. Data were collected through in-depth interviews and analyzed using content analysis. **Results:** The findings revealed three major themes: (1) supervision practices as routine managerial control focused on task completion and procedural compliance, indicating that supervision had not fully supported the relational aspects of nursing care; (2) limited reinforcement of caring behaviors during supervision, reflected in the minimal emphasis on therapeutic communication and emotional support; and (3) nurses' dependence on supervisory direction in implementing caring practices, suggesting that caring behaviors had not yet been fully internalized as intrinsic professional values. These findings indicate that supervision remains predominantly task-oriented rather than caring-oriented. **Conclusion:** Head nurse supervision plays an important role in supporting nursing practice; however, current supervision is primarily focused on managerial and technical aspects. Caring values have not been consistently emphasized, resulting in limited reinforcement of caring behaviors among staff nurses. A more holistic supervisory approach is needed to integrate caring values into everyday nursing practice. **Suggestion:** Healthcare institutions and nursing managers should reorient supervisory practices by incorporating caring principles, therapeutic communication, reflective feedback, and emotional support into routine supervision activities. Continuous training and evaluation of supervisory competencies are also recommended to strengthen the integration of caring values within professional nursing practice.



INTRODUCTION

Nursing is a professional discipline that focuses on providing comprehensive care to individuals, families, groups, and communities in both health and illness (Baker et al., 2021; Yakov et al., 2025). Nurses play a vital role in healthcare delivery as they spend the most time interacting with patients and are directly involved in meeting patients' physical, psychological, social, and spiritual needs (Nasirin & Asrina, 2020; ur Rashad et al., 2023). Therefore, the quality of nursing services significantly influences patient outcomes, patient satisfaction, and the overall quality of healthcare services (Bressan et al., 2020).

Caring is widely recognized as the essence and foundation of nursing practice. It reflects nurses' commitment to understanding patients as unique individuals and responding to their needs with compassion, respect, empathy, and professional competence (Coombs et al., 2022; Danacı & Erdoğan, 2025). Caring practices not only contribute to patients' well-being and recovery but also foster trust, therapeutic relationships, and positive healthcare experiences (Lindström et al., 2025). Consequently, the implementation of caring practices has become an important indicator of quality nursing care in healthcare settings.

Despite its importance, the implementation of caring practices in clinical settings remains a challenge. Previous studies have reported that caring behaviors are not always consistently demonstrated in nursing practice (King et al., 2021). Some patients continue to perceive nursing care as task-oriented rather than patient-centered, resulting in unmet emotional and psychosocial needs (Longhini et al., 2021). Such conditions may negatively affect patient satisfaction and the quality of nursing services (Karaca & Durna, 2019). Therefore, healthcare organizations are increasingly seeking effective strategies to strengthen caring practices among nurses.

One strategy that may support the implementation of caring practices is effective nursing supervision. Supervision is an essential managerial function that enables nursing leaders to guide, support, motivate, and monitor staff nurses in delivering quality patient care (Yulianita et al., 2020). Head nurses, as frontline nursing managers, are responsible for ensuring that nursing care is provided according to professional standards and organizational expectations (Huber, 2018; Karaca & Durna, 2019). Through supervisory activities, head nurses can provide direction, feedback, encouragement, and professional support that may help nurses maintain and improve caring behaviors in their daily practice (A. L. Watson et al., 2025).

Previous studies have highlighted the importance of nursing supervision in enhancing nursing performance, patient safety, and quality of care. Research has suggested that effective supervision can contribute to positive nursing outcomes and support the delivery of patient-centered care (Delima et al., 2024). However, much of the existing literature has focused primarily on measuring the outcomes of supervision or examining statistical relationships between supervision and nursing performance (Labrague, 2024). Previous studies have predominantly employed quantitative approaches to examine the relationship between supervision and nursing performance. However, little is known about how staff nurses perceive and experience head nurse supervisory practices in relation to caring implementation, particularly in Indonesian hospital settings. This lack of understanding limits the development of supervision models that effectively promote caring behaviors in clinical practice. Limited attention has been given to understanding how staff nurses themselves experience supervisory practices and how these experiences influence the implementation of caring practices in their clinical work. (Ali & Shaban, 2025). Staff nurses' experiences can provide valuable insights into the ways supervisory practices facilitate, support, or potentially hinder the implementation of caring practices. Exploring these experiences may

contribute to a deeper understanding of how supervisory processes operate within nursing practice and how they can be strengthened to improve patient-centered care (Stacey et al., 2020).

Preliminary data from Kotamobagu City Regional General Hospital showed that the Melati Inpatient Unit had 22 staff nurses serving 149 patients, while the Tuitan Inpatient Unit had 20 staff nurses serving 131 patients in January. Initial interviews with staff nurses indicated that supervisory support for caring behaviors was not consistently provided, as head nurses were perceived to rarely encourage patient interaction, emotional support, or recognition of patients' efforts, and patient interviews also confirmed that caring behaviors such as appreciation and routine needs assessment were not consistently experienced. These findings highlight the need to explore how staff nurses experience head nurse supervisory practices in supporting caring practice implementation, as such understanding may help improve supervisory approaches and nursing care quality in these units. Therefore, this study aims to explore staff nurses' experiences of head nurse supervisory practices in supporting the implementation of caring practices in the Melati and Tuitan Inpatient Units of Kotamobagu City Regional General Hospital.

METHOD

Research Design and Approach

This study employed a qualitative research design using a descriptive phenomenological approach. Descriptive phenomenology, as developed by Husserl and operationalized by Colaizzi, was chosen to explore and describe the lived experiences of staff nurses regarding head nurse supervisory practices in supporting the implementation of caring practices. This approach enabled the researchers to gain an in-depth understanding of participants' perceptions, experiences, and meanings related to supervisory activities within their clinical practice.

Research Setting and Period

The study was conducted in the Melati and Tuitan Inpatient Units of Kotamobagu City Regional General Hospital, Indonesia. These inpatient units provide nursing care services to a diverse patient population and are supervised by head nurses responsible for managing nursing activities. The study was carried out from March to May 2025, including participant recruitment, data collection, and data analysis.

Population and Sample

The study population consisted of 42 staff nurses working in the Melati and Tuitan Inpatient Units. Participants were selected using purposive sampling to obtain individuals who could provide rich and relevant information regarding the phenomenon under investigation. A total of eight staff nurses participated in the study and were assigned the participant codes IF1, IF2, IF3, IF4, IF5, IF6, IF7, and IF8. The sample size was determined based on data saturation, a principle commonly applied in qualitative phenomenological research whereby sampling continues until no new information or themes emerge from the data; in this study, saturation was reached at the eighth participant, consistent with the typical range of six to twelve participants in phenomenological studies. The inclusion criteria were staff nurses who worked in the Melati or Tuitan Inpatient Units, had at least one year of work experience in the unit, were willing to participate in the study, and were able to communicate their experiences clearly. The exclusion criteria were nurses who were on leave, undergoing training outside the hospital during the data collection period, or unwilling to participate in the study.

Study Focus

The focus of this study was to explore staff nurses' experiences of head nurse supervisory practices in supporting the implementation of caring practices in the Melati and Tuitan Inpatient Units of Kotamobagu City Regional General Hospital.



Data Collection Methods and Instruments

Data were collected through in-depth interviews using a semi-structured interview guide developed based on the study objectives and relevant literature on nursing supervision and caring practices. The interview guide consisted of open-ended questions that encouraged participants to share their experiences and perceptions regarding supervisory practices implemented by head nurses and their influence on caring practice implementation. All interviews were conducted individually in a private setting, audio-recorded with participants' permission, and supplemented by field notes to capture contextual information and non-verbal observations.

Research Procedures

The research began with obtaining ethical approval and permission from the hospital administration. Eligible participants were identified and invited to participate in the study. After providing informed consent, participants were scheduled for individual in-depth interviews. Each interview was conducted in a quiet and comfortable environment to facilitate open communication. Interviews were transcribed verbatim immediately after data collection. To ensure data quality and credibility, the researchers reviewed the interview transcripts, compared them with the audio recordings, and conducted member checking when necessary to confirm the accuracy of participants' statements.

Data Analysis

The data were analyzed using content analysis. Interview transcripts were read repeatedly to gain familiarity with the data. Meaningful statements related to participants' experiences of head nurse supervisory practices were identified, coded, and grouped into categories based on similarities and differences. These categories were then organized into broader themes that reflected the participants' experiences and perceptions regarding supervisory practices and the implementation of caring practices.

Ethical Considerations

This study received ethical approval from the authorized Health Research Ethics Committee prior to data collection (Approval Number: 14/KEPK/STIKES-BTH/IV/2025). All participants received information regarding the purpose, procedures, benefits, and risks of the study before providing written informed consent. Participation was voluntary, and participants were informed of their right to withdraw from the study at any time without consequences. Confidentiality and anonymity were maintained throughout the study by using participant codes and securely storing all research data.

RESULTS AND DISCUSSION

Results

The findings of this study describe staff nurses' experiences of head nurse supervisory practices in supporting the implementation of caring practices in the Melati and Tuitan Inpatient Units of Kotamobagu City Regional General Hospital. The eight participants (IF1–IF8) ranged in age from 24 to 38 years, comprised five female and three male nurses, held a Bachelor of Nursing degree (S.Kep., Ns.), and had between two and ten years of clinical experience in their respective units. These participant characteristics are summarized in Table 1. Based on content analysis, three main themes were identified: (1) supervisory practices as routine managerial control, (2) limited

reinforcement of caring behaviors in supervision, and (3) nurses' dependence on supervisory direction for caring implementation.

Table 1. Themes and Sub-Themes

No	Theme	Sub-Themes
1	Supervisory practices as routine managerial control	Task-oriented supervision, focus on clinical procedures
2	Limited reinforcement of caring behaviors in supervision	Lack of encouragement for emotional care, minimal feedback on caring
3	Nurses' dependence on supervisory direction for caring implementation	Motivation influenced by supervision, variability in caring practice

The first theme, supervisory practices as routine managerial control, reflects nurses' perceptions that head nurse supervision is primarily focused on monitoring task completion and ensuring compliance with clinical procedures. Participants explained that supervisory activities were mainly concerned with checking nursing actions, documentation, and adherence to hospital standards rather than interpersonal aspects of care. One participant (IF1) stated, "Usually the head nurse only checks whether our work follows the procedures." Similarly, IF3 noted, "Supervision is more about checking clinical tasks, not how we interact with patients." These statements indicate that supervision is largely perceived as task-oriented and administratively focused.

The second theme, limited reinforcement of caring behaviors in supervision, describes the lack of consistent emphasis on caring practices such as therapeutic communication, emotional support, and patient appreciation during supervisory activities. Several participants reported that head nurses rarely reminded them to focus on the emotional and psychosocial needs of patients. IF2 stated, "The head nurse rarely reminds us to pay attention to patients emotionally." In addition, IF4 expressed, "We are not often encouraged to greet or motivate patients." IF5 also added, "Giving praise to patients is not always discussed during supervision." These findings suggest that caring behaviors are not yet systematically integrated into supervisory practices.

The third theme, nurses' dependence on supervisory direction for caring implementation, illustrates that the implementation of caring practices is influenced by the extent of guidance and reinforcement provided by head nurses. Participants described that when supervision included reminders and encouragement, they were more motivated to demonstrate caring behaviors. IF1 stated, "If the head nurse reminds us, we become more attentive to patients." Similarly, IF6 said, "We are more motivated when the head nurse gives encouragement." IF8 also explained, "Supervision is important so that we are not only focused on tasks but also remain friendly and caring." These narratives indicate that supervisory engagement plays a significant role in shaping nurses' caring behaviors in clinical practice.

Discussion

The findings of this study indicate that head nurse supervisory practices in the Melati and Tuitan Inpatient Units are predominantly perceived by staff nurses as routine managerial control with a strong emphasis on task completion and procedural compliance. Supervision is mainly understood as an administrative mechanism to ensure that nursing activities are carried out according to established standards, rather than as a developmental or supportive process that fosters professional growth in caring practice. This perception suggests that supervision is still closely associated with monitoring and control functions, where the primary concern is task achievement, documentation accuracy, and adherence to clinical protocols. As a result, the broader educational and motivational roles of supervision appear to be less emphasized in daily practice. This condition may limit the potential of supervision to function as a transformative leadership tool that shapes professional values such as empathy, compassion, and patient-centered care in nursing practice.



Consistent with the traditional managerial perspective in nursing supervision, this finding aligns with reports that supervision in many clinical settings tends to prioritize administrative control and patient safety indicators rather than interpersonal aspects of care (Patrician et al., 2024). This dominance of task-oriented supervision may reflect the influence of bureaucratic healthcare systems, where measurable outputs are often prioritized over qualitative aspects of care (Oliveira et al., 2020). Consequently, interpersonal dimensions of nursing, including therapeutic communication and emotional engagement with patients, may receive less attention during supervisory processes (Cunha et al., 2026). This imbalance highlights a potential gap between managerial expectations and the holistic philosophy of nursing care, which emphasizes both technical competence and humanistic interaction.

From a theoretical perspective, nursing management functions include planning, organizing, actuating, controlling, and evaluating, where supervision is an integral component of the controlling function (Dennis Wijaya et al., 2022). However, the controlling function in nursing should not be interpreted narrowly as inspection or fault-finding activity. Instead, it should encompass guidance, feedback, mentoring, and continuous professional development (Cheng et al., 2026). When supervision is limited to task monitoring, its potential contribution to shaping holistic nursing practice, including caring behaviors, may not be fully realized. In contrast, effective supervision should serve as a bridge between organizational goals and professional values, ensuring that nurses not only perform tasks correctly but also deliver care with compassion and empathy (Cunha et al., 2026). Therefore, the current findings suggest the need to reconceptualize supervisory practices from a purely administrative function to a more supportive and developmental leadership approach.

The second theme highlighted the limited reinforcement of caring behaviors in supervisory activities. Participants reported that aspects such as therapeutic communication, emotional support, and patient appreciation were not consistently emphasized by head nurses during supervision. This indicates that caring, as a core value in nursing practice, has not yet been fully integrated into the supervisory framework. As a result, nurses may perceive caring behaviors as secondary or optional rather than essential components of professional practice. This situation may contribute to variability in how caring is expressed across different nurses and shifts. The absence of consistent reinforcement also suggests that role modeling and feedback related to caring behaviors are not systematically embedded in supervisory interactions, which may weaken the internalization of caring values among staff nurses over time. Indicated that although nursing supervision is associated with improved caring behaviors, its effectiveness depends on the extent to which supervisors actively reinforce caring values in daily practice (Rodríguez-Monforte et al., 2021). Without structured reinforcement, supervision may fail to translate theoretical caring principles into consistent clinical behavior (Zonneveld et al., 2025). This gap between knowledge and practice may be further influenced by workload pressures and time constraints faced by head nurses, which often lead to prioritization of technical supervision over relational aspects of care. Consequently, caring behaviors may not be adequately monitored, supported, or evaluated within existing supervisory systems.

This finding can be further explained using the theoretical framework of Jean Watson, which emphasizes that caring is the fundamental essence of nursing and is expressed through authentic human connection between nurse and patient (Gunawan et al., 2022). According to Watson's theory, caring involves not only technical competence but also presence, empathy, and transpersonal relationships that promote healing and human dignity (J. Watson & Woodward, 2020). However, the results of this study suggest that supervisory practices have not yet fully

integrated these caring principles into routine managerial activities. This lack of integration may hinder the development of a caring-based nursing culture, where emotional engagement and compassionate care are consistently valued and reinforced alongside clinical performance.

The third theme demonstrated that nurses' implementation of caring practices is highly dependent on supervisory direction and encouragement. Nurses reported that when head nurses provided reminders, motivation, and feedback, they were more likely to demonstrate caring behaviors in their interactions with patients. Conversely, in the absence of active supervision, nurses tended to focus primarily on completing clinical tasks efficiently. This indicates that caring behavior among staff nurses is not solely an internalized professional value but is also shaped by external managerial influences. Such dependence on supervision suggests that caring practices may not yet be fully embedded as intrinsic professional behavior, but rather as behavior that is reinforced externally through leadership input. This finding is consistent with leadership theories in nursing management, particularly transformational leadership, which emphasizes the role of leaders in inspiring, motivating, and influencing staff behavior beyond task execution (Howard & Eddy-Imishue, 2020). Supportive and participative supervision has been shown to enhance intrinsic motivation, job satisfaction, and professional commitment among nurses (Delima et al., 2024). When head nurses actively engage in supportive supervision, nurses are more likely to internalize caring values and apply them consistently in patient care. The structured of supervisory interventions can improve nursing performance and patient care quality (Brás Baptista Sérgio et al., 2023). However, the current study extends this understanding by highlighting that supervision is not only a structural or procedural intervention but also an experiential and relational process. Nurses interpret supervisory practices subjectively, and these interpretations significantly influence how caring is enacted in daily clinical practice.

CONCLUSION

This study concludes that staff nurses' experiences of head nurse supervisory practices in the Melati and Tuitan Inpatient Units are predominantly characterized by task-oriented supervision that emphasizes clinical procedures, documentation, and compliance with institutional standards. Supervisory practices were not consistently directed toward strengthening caring behaviors, particularly in relation to therapeutic communication, emotional support, and patient-centered interaction. As a result, caring practice implementation among nurses appears to be uneven and largely influenced by the presence and intensity of supervisory reinforcement. Overall, the findings indicate that while supervision plays an important managerial role, its current form has not yet fully supported the consistent integration of caring practices into daily nursing care.

RECOMMENDATIONS

Head nurses are encouraged to integrate and consistently reinforce caring behaviors within supervisory practices, alongside task monitoring. Healthcare institutions should support this through training and clear guidelines on caring-based supervision. Future research should involve larger, multi-site studies and include perspectives of head nurses and patients for a more comprehensive understanding.

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