Psycho-Socio-Cultural Effects in Work towards Work Performance of Nurse

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ABSTRACT

Background*: Not all nurses' performance in Indonesia has a good performance. Nurse Performance in Panti Waluya Sawahan Hospital Malang, showed that 17.4% of nurses had sufficient performance, and 11.1% had poor nurse performance. Poor performance of the nursing process can reduce the quality of health services to clients resulting in decreased health status. **Objective**: This study aims to analyze the effect of Psycho-Socio-Cultural on the performance of the nurses' process at Malang Panti Waluya Hospital. **Method**: This research is a quantitative study with a cross sectional design approach. The population in this study were all nurses in the inpatient room with simple random sampling technique. The research instrument used questionnaires and observation sheets. **Results**: The results showed that all variables had p values <0.001, with OR = 16.73 for Work Culture, OR = 8.14 for Work Environment, and OR = 5.11 for Psychological Factor variables. **Conclusion**: The results showed that psycho-socio-cultural in work affects the performance of the nursing process. **Keywords**: work culture, work environment, psychological factors, nurse performance*

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INTRODUCTION

The hospital is a health service institution that is obliged to provide safe, quality, anti-discrimination and effective health services by prioritizing patient interests in accordance with hospital service standards[1]. To carry out these obligations, the hospital must have resources, especially human resources. Human resources consist of medical personnel, pharmaceutical personnel, nursing staff, other health workers, and non-health workers[2].

Nursing personnel, i.e. nurses are human resources who are responsible for providing care to patients. Nursing practice is directed at the goal of helping clients to achieve and maintain optimal health in order to maximize quality of life throughout life[3]. In order to achieve this goal, optimal nurse performance is needed[4]. Performance is the result of a person's or group's efforts in an organization in accordance with their respective authorities and responsibilities to achieve organizational goals legally[5], morally and ethically[6]. Performance in nursing is the activity of a nurse who carries out her responsibilities and authority properly in order to achieve the main tasks of the nurse profession and the realization of the vision and mission of an organizational unit. Nurses' Performance Assessment has indicators that refer to nursing standards in Indonesia, consisting of assessment standards, nursing diagnostic standards, planning, implementation and evaluation[7].

Good nurse performance is needed to create patient satisfaction[8]. Quality assurance is an evaluation of the performance of the nursing process. Quality assurance is a systematic and continuous monitoring and evaluation of the quality of care provided to clients, the feasibility of client care, identification of opportunities to improve client care and resolution of identified problems[9].

The performance of nurses in Indonesia has not all had good performance. Nurse performance in Semarang City Hospital showed that as many as 23.9% had sufficient performance[10]. Based on research conducted by Nurcahyani, Widodo & Rosdiana (2016) at Panti Waluya Sawahan Hospital Malang, showed that as many as 17.4% nurses had sufficient performance, and as many as 11.1% had poor nurse performance[11]. This shows that some nurses have not provided services to patients optimally.

The quality of nurse performance can be influenced by several factors. Internal factors, such as: intelligence, skills[12], emotional stability, characteristics / characteristics of a

person which includes attitudes[13], personality, physical, motivation, age, gender, education, work experience, cultural background and other personal variables[14,15]; and External factors, namely factors that come from the environment such as labor regulations, customer desires, competition, economics, organizational policies, leadership, actions from colleagues, types of training and supervision, wage systems and social environment[16]. Work Culture, Work Environment, and Psychological Factors also have a positive and significant influence on the performance of the nurse's process.

Work Culture is a habit that has lasted a long time and is used and applied in the life of work activities as one of the drivers to improve the work quality of employees and company managers[16]. Work environment is a composition of three main sub-environments which include three social environments, namely the physical environment, the human environment and the organizational environment[17,18]. The physical environment refers to tools, equipment, technological infrastructure and other physical or technical elements of the workplace[19]. The human environment includes relationships with peers, teams and work groups, interactional problems. The organizational environment refers to leadership and management[20]. Psychological factors are internal factors of an individual consisting of; Perception, Attitude, Personality, Learning, and Motivation[21]. Nurses, as one of the health workers will improve the quality and quality of nursing services to patients if they have good performance. Poor performance of the nursing process affects the lack of services provided to patients resulting in decreased public health status[22]. The purpose of this study was to analyze the effect of Work Culture, Work Environment, and Psychological Factors on the performance of the nurses' process at Malang Panti Waluya Hospital.

MATERIAL AND METHOD

This research is a quantitative study with a cross sectional design approach. This research was carried out at Malang Panti Waluya Hospital in October 2019. The population in this study were all nurses in the inpatient room, special room, and intensive care room at Panti Waluya Sawahan Hospital Malang. The sampling technique was done by simple random sampling with a total of 125 nurses.

The variables in this study consisted of independent and dependent variables. The independent variables describe the psycho-socio-cultural factors, which include work culture (cultural) variables, work environment (social) variables, and psychological factors (psycho)

variables. The dependent variable is a single variable, namely the performance variable of the nursing process.

The research instrument of the independent variable used a questionnaire consisting of the Work Culture questionnaire, the Work Environment questionnaire, and the Psychological Factor questionnaire. The Work Culture questionnaire was 22 questions on an ordinal scale, measuring work culture with indicators of habit, rule compliance, openness and mutual respect for nurses. Work Environment Questionnaire totaling 30 questions with ordinal scale, measuring nurses' social work with indicators of nurse involvement in work, cohesiveness with colleagues, work autonomy, task orientation, managerial control, clarity, innovation, and physical comfort. Psychological factor questionnaire amounted to 31 questions on an ordinal scale, measuring perceptions, attitudes, personality, learning and motivation

The dependent variable is measured through document review of the performance of the nursing process which consists of carrying out the assessment, determining the nursing diagnosis, nursing plan, implementing nursing and evaluating nursing.

Data analysis was performed through statistical tests using the chi square relationship test to determine whether there was a significant relationship, and the regression test used linear regression to determine the size of the influence between the dependent and independent variables.

RESULT

Based on the research that has been done, the data that has been collected and analyzed is presented in the form of frequency tables and cross tables. The data consists of respondent characteristic data and special data.

1. Demographic Data and Variable Frequencies

Based on research that has been done on 125 respondents, it was found that as many as 87.2% of nurses were female, spread in the inpatient room and specifically the Panti Waluya Sawahan Hospital in Malang. Most nurses are permanent employees, which is 91.2%, and have a D3 education level (73.6%) with 41.6% starting from new work (1-5 years). Based on the research, data show that most nurses has a strong work culture, which is equal to 90.4%, whereas in terms of work environment, psychology factors and nurse performance, categorized into good groups is 55.2%, 52.8%, and 71.2%.

Table 1 Demographic Data and Frequency Distribution of respondents

Variable	Frequency (n)	Percentage (%)
Gender		

Male	16	12,8
Female	109	87,2
Assigned Room		
Special Unit 1 (Stroke)	8	6,4
Special Unit 2 (Hemodyalisis)	3	2,4
Special Unit 3 (Obstetic and Gynecology)	5	4,0
Special Unit 4 (Isolation Room)	7	5,6
Class 1 Ward	15	12,0
Class 2 Ward	14	11,2
Class 3 Ward	7	5,6
Children Ward	15	12,0
VIP Room 1	7	5,6
VIP Room 2	6	4,8
VVIP Room 1	9	7,2
VVIP Room 2	11	8,8
Intensive Care Room 1 (Adult)	13	10,4
Intensive Care Room (Infant)	5	4,0
Employement Status		
Contract Employee	12	91,2
Employee	122	8,8
Educational Background		
Diploma of Nursing	92	73,6
Bachelor of Nursing	33	26,4
Working Lenght		
New	52	41,6
Long Enough	45	36,0
Long	28	22,4
Work Culture		
Weak	12	9,6
Strong	113	90,4
Work Environment		
Poor	56	44,8
Good	69	55,2
Pschycological Aspect		
Well	59	47,2
Good	66	52,8
Working Performance		
Poor	36	28,8
Good	89	71,2

2. Intervariables Relationships

Table 2 shows that women performed better than men, which amounted to 72.5%. All nurses in the Isolation Room performed well, while the performance of nurses in the Upper Santa Anna Room was the lowest, with only 44.4% having good performance. Nurses with an S1 education have better performance than D3, which is 81.8% having

good performance. Meanwhile, based on the length of work, nurses who have long worked have good performance, which is 89.3%.

Based on statistical tests using chi square (Table 2), it was found that there was a significant relationship between Work Culture, Work Environment and Psychological Factors, with a p value for each variable of <0.001 Table 4 shows that Work Culture Variables affect performance by 16 time. Table 4 also shows that work culture variables have the highest odds ratio compared to work environment variables and psychological factors.

Table 2 Chi Square and Regression Statistical Test Result

Variables	Frequency (n)	Percentage (%)	Working Performance		OR	p value
			Poor	Good		
Gender						
Male	16	12,8	6 (37,5%)	10 (62,5%)	0,99	0,292
Female	109	87,2	30 (27,5%)	79 (72,5%)		
Assigned Room						
Special Unit 1 (Stroke)	8	6,4	3 (37,5%)	5 (62,5%)	1,10	0,522
Special Unit 2 (Hemodyalisis)	3	2,4	1 (33,3%)	2 (66,7%)		
Special Unit 3 (Obstetic and Gynecology)	5	4,0	0 (0,0%)	5 (100%)		
Special Unit 4 (Isolation Room)	7	5,6	0 (0,0%)	7 (100,0%)		
Class 1 Ward	15	12,0	3 (20,0%)	12 (80,0%)		
Class 2 Ward	14	11,2	6 (42,9%)	8 (57,1%)		
Class 3 Ward	7	5,6	2 (28,6%)	5 (71,4%)		
Children Ward	15	12,0	3 (20,0%)	12 (80,0%)		
VIP Room 1	7	5,6	3 (42,9%)	4 (57,1%)		
VIP Room 2	6	4,8	2 (33,3%)	4 (66,7%)		
VVIP Room 1	9	7,2	5 (55,6%)	4 (44,4%)		
VVIP Room 2	11	8,8	3 (27,3%)	8 (72,7%)		
Intensive Care Room 1 (Adult)	13	10,4	3 (23,1%)	10 (76,9%)		
Intensive Care Room (Infant)	5	4,0	2 (40,0%)	3 (60,0%)		
Employement Status						
Contract Employee	12	91,2	7 (63,6%)	4 (36,4%)	3,48	0,013*
Employee	122	8,8	29 (25,4%)	85 (74,6%)		
Educational Background						
Diploma of Nursing	92	73,6	30 (32,6%)	62 (67,4%)	1,818	0,087
Bachelor of Nursing	33	26,4	6 (18,2%)	27 (81,8%)		
Working Lenght						
New	52	41,6	19 (36,5%)	33 (63,5%)		
Long enough	45	36,0	14 (31,1%)	31 (68,9%)	1,44	0,047*
Long	28	22,4	3 (10,7%)	25 (89,3%)		
Work Culture						
Weak	12	9,6	10 (83,3%)	2 (16,7%)	16,73	0,000*
Strong	113	90,4	26 (23,0%)	87 (77,0%)		

Work Environment						
Poor	56	44,8	26 (46,4%)	30 (53,6%)	8,14	0,000*
Good	69	55,2	10 (14,5%)	59 (85,5%)		
Psychological Factor						
Well	59	28,8	29 (49,2%)	30 (50,8%)	5,11	0,000*
Good	66	71,2	7 (10,6%)	59 (89,4%)		

*significant

DISCUSSION

Based on table 2, shows that women have a better performance of the nursing process than men, but gender does not have a significant relationship with the performance of the nursing process. This happens because nurses, both men and women have been given knowledge about how to properly document nursing according to national standards. Nurses who are unable to operationalize nursing documentation according to standards result in underperformance[23].

Table 2 shows that the type of room did not have a significant relationship with the performance of the nursing process. Good performance which has the highest value is the isolation room and the puerperium and delivery room. Not large room capacity decreases the workload of nurses where workload is related to nurse performance[24]. The performance that has the lowest value is the VVIP 1 room. The VVIP room has a higher workload than the usual inpatient room[25]. High workload causes work stress, where job stress affects job satisfaction and nurse performance[26,27].

The results of this study indicate that employee status has an influence on nurse performance. Employees who are permanent employees have a higher performance value than contract employees. The high value of performance on permanent employees is influenced by the amount of work experience[28].

This research shows that education influences the performance of the nursing process. Nursing performance is influenced by meaningful work, where meaningful work is influenced by the level of education[29]. Performance is also influenced by the knowledge and skills of nurses, the higher the education, the higher the level of knowledge and skills.

Work culture is a system of meaning related to work, work, and work interaction, which is mutually agreed upon and used in daily work life[30]. Based on this study the indicators of Work Culture itself consist of habits, regulations, values, discipline, openness, mutual respect, and cooperation.

Table 1 shows that the majority of respondents have a strong Work Culture. Based on statistical tests using chi square, there is a significant relationship between work culture and performance, while based on work culture regression tests have a significant effect, which is 16 times affecting performance. These results are consistent with previous research, which shows that there is a positive correlation between technocratic culture and employee performance[31]. Employees who implement a strong work culture, and are able to adapt to the culture of the organization will improve the performance of the employees themselves.

Work environment (work environment) is a condition in the workplace both physical and non-physical that affects the work of employees because it gives the impression of security, peace and pleasure to employees[32]. In this study, indicators of the work environment are employee involvement, collegial cohesiveness, supervisor support, autonomy, task orientation, work pressure, managerial control, clarity, and physical comfort.

Based on the results of the study, from statistical analysis using chi square, there is a significant relationship between work environment and the performance of the nursing process. Meanwhile, statistical tests using regression tests, obtained a high odds ratio. This shows that the work environment variables affect the performance of the nursing process. Previous research explains that there is a linear relationship between work environment, job satisfaction, and performance. The results of the study explain that the work environment influences work peeling, and job satisfaction affects performance[33]. According to researchers, a good environment has a positive impact on employee performance. This environment can be in the form of a physical environment, such as the condition of buildings that provide comfort; and non-physical environment that comes from organizational management, coworkers, subordinates, and superiors.

Components of Psychology include perception, attitude, personality, learning, stress and motivation[34]. The five components are indicators of psychological factors, and can build employee psychology. The results showed that the majority of respondents have good psychology, but this needs attention because they have a small difference with those who have good enough psychology. Psychology is a very important factor to consider, because each employee has different endurance, and has different uniqueness. The organization has a role in building employee psychology for good quality work[35]. Table 2 shows that there is a significant relationship between psychological factors and the performance of the nursing process. Based on the regression test results obtained high odds values, this shows that psychological factors affect the performance of the nursing process. These results are

consistent with previous research which shows that motivation and self-esteem which are components of psychological factors are significantly related to employee performance. The study also explained that organizational culture has more influence on performance than psychological factors[36]. This also happens in this study where work culture is more influential than psychological factors as indicated by the work culture odds ratio greater than the psychological factor odds ratio.

A limitation in this study is the lack of exploration of other indicators in performance. In this study, more exploring the performance of the output, while the performance of the input and the process has not been explored.

CONCLUSION

Based on the description above, it is concluded that Work Culture, Work Environment, and Psychological Factors affect the performance of the nursing process. Of the three independent variables, work culture is the most powerful factor influencing the performance of the nursing process with an OD value of 16.73.

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REFERENCE

1.   Permenkes RI. Peraturan Menteri Kesehatan RI No 4 Tahun 2018 tentang Kewajiban Rumah Sakit dan Kewajiban Pasien. Jakarta; 2018.

2.   Kementrian Kesehatan RI. Permenkes No. 56 tentang Klasifikasi dan Perizinan Rumah Sakit. Jakarta; 2014.

3.   Association of Registered Nurses of Newfoundland and Labrador. Scope of Nursing Practice: Definition, Decision-Making and Delegation. 2006.

4.   Coster S, Watkins M, Norman I. What is the impact of professional nursing on patients' outcomes globally? An overview of research evidence. Int J Nurs Stud. 2018;

5.   Palutturi S, Rutherford S, Davey P, Chu C. Professional challenges to strengthen partnerships in the implementation of healthy cities in Indonesia: A case study of Makassar. Res J Med Sci [Internet]. 2014;8(4):126–32.

6.   Usman H. Manajemen Teori, dan Riset pendidikan. 3rd ed. Jakarta: Bumi Aksara;

2011.

7. Nursalam. Manajemen Keperawatan: Aplikasi dalam Praktik Keperawatan Profesional. 2nd ed. Jakarta: Salemba Medika; 2008.

8. Karaca A, Durna Z. Patient satisfaction with the quality of nursing care. Nurs Open [Internet]. 2019;6(2):535–45. Available from: https://onlinelibrary.wiley.com/doi/epdf/10.1002/nop2.237

9. Allen C. Memahami Proses Keperawatan dengan Pendekatan Latihan. Jakarta: EGC; 1998.

10. Sutrisno Y, Suryoputro A, Fatmasari E. Faktor-Faktor yang Berhubungan dengan Kinerja Perawat Rawat Inap di RSUD Kota Semarang. J Kesehat Masy. 2017;5(1).

11. Nurcahyani E, Dyah W. Hubungan Tingkat Stres Kerja dengan Kinerja Perawat di Rumah Sakit Panti Waluya Sawahan. Nurs News J. 2016;4(2):22–35.

12. Pratiwi R, Akbar FH, Abdullah A, Maretta YA. Knowledge and self perception about preventive dentistry among Indonesian dental students. Pesqui Bras Odontopediatria Clin Integr [Internet]. 2018;18(1):1–6.

13. Setijanto RD, Bramantoro T, Palupi R, Hanani A. The role of attitude, subjective norm, and perceived behavioral control (PBC) of mothers on teaching toothbrushing to preschool children - Based on the Theory of Planned Behavior: A cross-sectional study. Fam Med Prim Care Rev. 2019;21(1):53–7.

14. Susilawati S, Monica G, Fadilah RPN, Bramantoro T, Setijanto D, Wening GRS, Palupi R. Building team agreement on large population surveys through inter-rater reliability among oral health survey examiners. Dent J (Majalah Kedokt Gigi). 2018;51(1):42–6.

15. Lubis HF, Laturiuw HP. Socioeconomic status and orthodontic treatment need based on the Dental Health Component. Dent J (Majalah Kedokt Gigi). 2018;51(3):119.

16. Tika P. Budaya Organisasi dan Peningkatan Kinerja Perusahaan. Jakarta: PT Bumi Aksara; 2006.

17. Darmawanty F, Lumbanraja P, Lubis AN. The influence of leadership behavior, communication and work motivation on the employees' performance at kopertis religion i in the north of sumatera. Int J Sci Technol Res. 2018;7(5):41–55.

18. Erlina, Muda I. The effect of self efficacy and professional development on the work quality of internal auditor. Int J Civ Eng Technol. 2018;9(5):1292–304.

19. North R, Indonesia S. VILLAGE FUND IMPLEMENTATION PUBLIC WORK IN

DELI SERDANG VILLAGE FUND IMPLEMENTATION FOR PUBLIC WORK IN DELI SERDANG RESIDENT. 2019;(January).

20. Noah Y, Steve M. Work Environment and Job Attitude among Employees in a Nigerian Work Organization. J Sustain Soc. 2012;

21. Anwar PM. Evaluasi Kinerja SDM. Refika Aditama.; 2014.

22. Dieleman M, Harnmeijer J. Improving health worker performance : in search of promising practices. Hum Resour Heal. 2006;

23. Tasew H, Mariye T, Teklay G. Nursing documentation practice and associated factors among nurses in public hospitals, Tigray, Ethiopia. BMC Res Notes. 2019;12(1).

24. Widayanti D. HUBUNGAN BEBAN KERJA DENGAN KINERJA PERAWAT DI RUANG RAWAT INAP KELAS III RSUD WATES. Yogyakarta. 2017.

25. Ariyanti A, Rahayu D, Nurhidayati T. PERBANDINGAN BEBAN KERJA DAN KOMUNIKASI TERAPEUTIK PERAWAT DI RSI MUHAMMADIYAH KENDAL. UNIMUS; 2018.

26. Retnaningtyas L. Pengaruh Beban Kerja Terhadap Stres Kerja di Ruang Rawat Inap Rumah Sakit Islam Siti Aisyah Kota Madiun. 2018.

27. Inuwa M. Job Satisfaction and Employee Performance: An Empirical Approach. Millenn Univ J. 2016;

28. Sivatte ID, Gordon J, Olmos R, Simon C. Effects of Job Experience and Site Experience on Job Performance. In: Academy of Management Proceeding. USA: Academy of Management; 2018.

29. Tong L. Relationship between meaningful work and job performance in nurses. Int J Nurs Pr. 2018;

30. Hartanto F. Paradigma Baru Manajemen Indonesia. Bandung: PT Mizan Pustaka; 2009.

31. Sinha S, Kr. Singh A, Gupta N, Dutt R. Impact of Work Culture on Motivation and Performance Level of Employees in Private Sector Companies. Acta Oeconomica Pragensia; 2010.

32. Aruan Q, Fakhri M. Pengaruh Lingkungan Kerja Terhadap kepuasan kerja Karyawan Lapangan Departemen GRASBERG POWER DISTRIBUTION PT. FREEPORT INDONESIA. J Modus. 2015;

33. Hartanti R. KONTRIBUSI WORK ENVIRONMENT DAN JOB SATISFACTION SEBAGAI MULTI MEDIASI TERHADAP JOB PERFORMANCE. J Manaj dan Pemasar Jasa; 2019.

34. Gibson J, Ivancevich J, Donnelly J. Organisasi : perilaku, struktur, proses. jilid 2. Organisasi; 1989.

35. Carmeli A, Gilat G, Waldman D. The role of perceived organizational performance in organizational identification, adjustment and job performance. J Manag Stud. 2007;

36. Ogiamien L, Izuagbe R. Impact of Organisational and Psychological Factors on the Job Performance of Personnel in Private University Libraries in South-South Nigeria. OALib. 2016;3(3):1–14.