

Performance and Commitment to Nurse Organization in Giving Nursing Care

Miming Oxandy

Student of Postgraduate,
Faculty of Nursing, University of
Andalas Lecturer at STIKES
'Aisyiyah Palembang

Hema Malini

Associate Professor,
Faculty of Nursing, University of
Andalas

Ismar Agustin

Lecturer at Poltekkes
Palembang

Abstract:- The performance of nurses, especially in the implementation of the nursing process, is still not in accordance with the specified standards. A lot of data have been found in the field in the assessment process to the evaluation stage that are still having many which do not meet the nursing care standards. This study is aimed to identify factors related to the application of nursing care in Islamic Hospital in Palembang. The research design used was observational with a cross sectional approach. This study used 68 field nurses as samples. The result of this study proves that there is a relationship between the variables of commitment in the organization, p value 0.003, with the performance of the nurse in implementing nursing care. This study recommends the need to develop policies to evaluate the application of nursing care as well as evaluation toward the application of nursing practice standards and the factors influencing them.

Keywords:- Nursing Care Implementation and Organizational Commitment.

I. INTRODUCTION

The improvement of nursing services quality is given through nurse performance and it must be based on high abilities so performance could support the task implementation in nursing services. Performance is a work done by someone in accordance with the tasks in an organization (Nursalam, 2014). The main key in improving the quality of health services is nurses who have high performance. The work performance produced by nurses cannot be separated from the factors that influence it.

The research done by Agustin (2013) states that the performance of nurses has an important position in producing quality of health services in hospitals. Therefore, the performance of nurses is very influential on patient satisfaction and an indicator of the quality of nursing services in a hospital. Research by Mandagi (2015) states that nurses' performance in implementing nursing care is an indicator of quality in a hospital. The results of his research shows the performance of field nurses as much as 63.8% categorized as not good and as much as 36.2% in the good category toward the performance of field nurses implementing the nursing care. The performance of nurses in the not good-category is high because the application of nursing care is not optimal, only 702 files are completely filled from 3934 existing patient status files while other

3232 files are not complete. This indicates that filling in the complete format is 17.8% while the incomplete one is 82.2%.

Based on the results of the research by Wicaksana (2016), the performance of field nurses is inseparable from the indicators of the nursing services quality and patient satisfaction which lead to quality nursing care services based on the performance of professional nurses. Nurses' performance on nursing services in hospital requires strong commitment of nurses to hospital organizations. The nurse's commitment to the organization is a work attitude that is defined as a situation in which a nursing staff takes sides with the organization and its goals and intends to maintain membership in that organization. According to Zurnali (2010), organizational commitment is a strong and close feeling of someone towards the goals and values of an organization in relation to their role in the effort to achieve those goals and values. Organizational commitment of a nurse as a state of psychology that characterizes the relationship of nurses with the organization or its implications that influence whether nurses will remain in the organization or not is identified in three components: affective commitment, continuance commitment and normative commitment (Zurnali, 2010).

Wicaksana's research (2016) states that commitment to the organization has a positive and significant influence on the performance of nurses. This makes nurses have a normative commitment to a moral dimension based on a sense of obligation and responsibility on the organization that employs it. Turnover is one of indicators of nurses commitment to their organization that i hospital. Based on the hospital nursing committee's report, the turnover rate is quite high: the nurse turnover rate during the January-December 2017 period was 11%.

The turnover rate is considered to be quite high where nurses from the hospital are said to be normal ranging from 5-10% per year and said to be high if more than 10%. A high turnover rate will have a negative impact on the organization. This is like creating instability and uncertainty of the workforce conditions and increasing the cost of human resources that is in the form of training costs that have been invested in employees to the cost of recruitment and retraining. High turnover also causes the organization to be ineffective because the hospital loses experienced employees and needs to retrain new employees. So that it affects how the nurse performs in implementing nursing care. The purpose of this study is to investigate the relationship between nurse commitment that will affect their

performance in providing nursing care. (Gillis in Aryanto (2011).

II. RESEARCH METHOD

This study uses a quantitative approach with cross sectional design. The number of samples in this study is determined by using *Proportionate Random Sampling* technique where sampling will be chosen randomly. Researchers use formulas based on the proportion of sampling (Sugiyono, 2016). The sample in this study was 68 respondents.

This research was carried out in August 2017 until July 2018. Furthermore, the research site was carried out in one of the Islamic hospitals in Palembang which was divided

III. RESULTS AND DISCUSSION

The results of the univariate analysis resulted the frequency distribution from each category of independent variables (demographic and commitment) and the dependent variable (the performance of field nurses in implementing nursing care) as follows:

A. Demographics of The Field Nurse

From the results of the research on the field nurse demographics, it can be seen in the table as follows:

No	Variable	Frequency (<i>f</i>)	Percentage (%)
1	Age		
	Post- Adult (36 s.d 45 Tahun)	15	22.1
	Pre-Adult (26 s.d 35 Tahun)	53	72.9
2	Sex		
	Male	4	5.9
	Female	64	95.1
3	Education		
	Vocational (D3/SKep)	64	95.1
	Professional (>Ners)	4	5.9
4	Years of Working		
	New (≤ 2 years)	2	2.9
	Old (> 2 years)	66	98.1

Table 1:-Demographic Frequency Distribution of Respondents

Based on table 1.about demographic data of the field nurses. It was found that most of the nurses who were working were mostly early adults (72.9%), vocational education (95.1%), female (95.1%), and had a work period of more than two years (98.1%).

B. Commitment to Organizations

From the results of research on commitment variables in the organization, it can be seen in the table as follows:

No	Commitment	Frequency (<i>f</i>)	Percentage (%)
1	Deficient	30	44.1
2	Good	38	55.9
	Total	68	100

Table 2:-Frequency Distribution of Commitments to Organizations

into intensive inpatient rooms, VIP hospitalizations and regular hospitalizations. The data collection tools in this study used a questionnaire that includes questions about characteristics and performance of the field nurse implementing the nursing care in the form of checklist sheets with observation methods and organizational commitment through questionnaires.

The analysis carried out is by looking at the *frequency distribution and percentage*. In this study, univariate analysis was carried out to obtain the variable frequency distribution of each variable. To see the relationship between the two variables, *Chi Square* statistical test was used with the biggest error rate (level of significance) of 0.05 or 5% and a confidence level of 95%.

Based on table 2., it was known from 68 respondents that the number of respondents who are committed to organizations that are categorized as good is 55.9%

No	Commitment	Frequency (f)	Percentage (%)
1	Affective		
	Good	54	79.0
	Deficient	14	21.0
2	Normative		
	Good	44	65.4
	Deficient	24	34.6
3	Continuance		
	Good	28	41.0
	Deficient	40	59.0

Table 3:- Frequency Distribution of Commitments to Organizations Based on Commitments

Based on table 3. Commitment to the organization based on components consisting of 3 parts: Affective by 79%, Normative by 65% and Continuance by 41%.

C. Nurses Performance

The results of the research on the variable of nurses performance in the implementation of nursing care can be seen in the table as follows:

No	Performance	Frequency (f)	Percentage (%)
1	Deficient	39	57.4
2	Good	29	42.6
	Total	68	100

Table 4:-Frequency Distribution of Performance of the Field Nurse in Carrying Out Nursing Care

Based on table 4, it is known from 68 respondents that the number of respondents who have less performance is 57.4%. It is greater than the respondents who have a good performance of 42.6%.

D. Performance of The Field Nurses in Carrying Out Nursing Care

From the results of research on variable of the field nurse performance in carrying out the nursing process, it can be seen in the table as follows:

No	Nursing Process	Cumulative		IRNA VIP (%)	IRNA Regular (%)	IRNA Intensive (%)
		(f)	(%)			
1	Assessment					
	Perform	41	62,9	67	58	64
	Not Perform	27	37,1	33	42	36
2	Diagnosis					
	Perform	46	70,5	77	68	79
	Not Perform	22	29,5	33	32	21
3	Intervention					
	Perform	50	75,7	82	70	69
	Not Perform	11	24,3	18	30	31
4	Impelementation					
	Perform	49	72,9	78	74	68
	Not Perform	19	27,1	22	26	32
5	Evaluation					
	Perform	44	68,7	75	62	68
	Not Perform	24	31,3	25	38	32

Table 5. Frequency Distribution of Performance of the Field Nurse in Carrying Out Nursing Care in IRNA VIP, IRNA Regular and IRNA Intensive

Based on table 5. Kinerja perawat pelaksana dalam asuhan keperawatan berdasarkan standar Depkes dengan pencapaian 75% didapatkan di IRNA VIP semua memenuhi standar, sebaliknya di IRNA Biasa semuanya tidak memenuhi standar dan di ruang IRNA Intensif hanya komponen diganosa keperawatan yang memenuhi standar asuhan keperawatan departemen kesehatan. The performance of the field nurses in nursing care based on Ministry of Health of Indonesia standards with 75% attainment: it was obtained in IRNAVIP that all met the standards, on the contrary at IRNA Regular, all did not meet the standards and in the IRNA Intensive room, only nursing diganosa components that met the health department nursing care standards.

No	Organizational Commitment	Nurses Performance				Total n	Level of Significance (<i>p-value</i>)	OR	Confidence Interval
		Deficient n	%	Good n	%				
1	Deficient	22	73.3	8	26.7	30	0.003	5.288	1.849- 15.123
2	Good	13	34.2	25	65.8	38			
Total		35	51.5	33	48.5	68			

Table 6:-Performance of the Field Nurses in Implementation of Nursing Care Based on Commitment to Organization

Based on Table 6. Statistical test results using Chi Square test where $p\text{-value} = 0.003$ is smaller than $\alpha = 0.05$ which means that H_0 is rejected. So the hypothesis states that there is a meaningful relationship between commitment to the organization and the performance of the nurse in implementing nursing care. The results of the analysis of the relationship closeness test obtained value $OR = 5.288$ means that respondents who have a good commitment to the organization have the opportunity 5,288 times greater have a good performance in carrying out nursing care.

IV. DISCUSSIONS

➤ *The Performance of Field Nurses*

From the results of this study, the researchers viewed that the performance of field nurses in carrying out nursing care was less categorized, 57.4%. Based on the Ministry of Health of Indonesia, the performance achievement standard in giving nursing care was at least 75%. The results of this study show 42.6% of nurses have good performance but this value has not reached the standard of the Ministry of Health of Indonesia. Based on this study, 62.9% of respondents had conducted assessments. Nurses' performance in this study had not reached the standards set by the Ministry of Health of Indonesia (75%). The performance of nurses who had not yet reached the standard is due to the time of the assessment, most of the field nurses did not conduct head-to-head physical assessments and psycho, social and cultural studies. Research by Siahaan (2011) obtained information that as many as 65.45% of respondents had conducted an assessment. The performance in this study has not reached the standards set by the Ministry of Health of Indonesia. Assessment is the most important thing in doing nursing care because there is a series of data collection in it and will affect the next work: diagnosis until evaluation.

In terms of performance in nursing diagnostic writing, this study found nursing diagnoses had not reached the standard, only 70.5% of respondents had done so. This is

because most of the nurses in implementing nursing diagnoses are more actual than potential. Nursing diagnosis will not work if the data assessment is lacking or incomplete. Nursing diagnosis is a conclusion drawn from data collected about patients. This shows that if the assessment is not carried out then nursing diagnoses will not be meaningful even threatening the client because the actions taken are not in accordance with the actual condition of the patient. Therefore, nurses must conduct a complete and accurate assessment (Doenges, 2011). Research by Wirdah (2016) said that with high knowledge and skills, the understanding and appearance on respondents in establishing nursing diagnoses also increased. This results showed 77.6% or 45 respondents were mostly in the good category. These results indicate that nurses have performed nursing diagnoses for patients well.

This study shows that nursing planning has reached the standards set by the Ministry of Health of Indonesia that is 75.7%. Nursing care plans that are properly formulated are to facilitate the continuity of nursing care from one nurse to another. As a result, all nurses have the opportunity to provide high quality and consistent care. Whereas the implementation which is an action or application of the nursing care plan to achieve the expected goals, it is obtained an achievement value of 72.9% which has not fulfilled the Ministry of Health of Indonesia standards. In taking action in accordance with the nursing plan, a sufficient number of nurses, good knowledge and skills are needed. Nurses are the most needed when the number of clients increases and client conditions decline (Potter & Perry, 2011). From Alhasanah's research (2016), it is obtained information that not all nurses determine nursing plans. This is because to make a nursing plan requires time, on one side the nurse must provide nursing services quickly. While Siahaan's research (2011) shows that planning and implementation have not yet reached the standards set by the Ministry of Health of Indonesia. Implementation is an action

or application of a nursing care plan to achieve the expected goals.

Based on the results of this study, it was found that nurses who performed nursing evaluations were 68.7%, not reaching the standard of the Ministry of Health of Indonesia. This is because some implementing nurses in conducting nursing evaluations are routines based on special collaborative therapy with the doctor in charge of patient. Nursing evaluation is a stage to find out whether the expected results have been achieved (Doenges, 2011). Research by Siahaan (2011) shows that nursing evaluation has reached 76.29% of respondents, nurses perform evaluation actions in accordance with the standards. The results will be achieved if all nursing care process activities from assessment to evaluation are carried out correctly and appropriately. All processes of nursing care influence each other that all these stages of nursing care must be in accordance with standards so that results can be achieved.

Researchers also analyzed nurse performance based on the type of room used in the study. In this study, there were 7 rooms which were divided into three main rooms, VIP inpatient rooms, regular inpatient rooms and intensive inpatient rooms. Researchers used observation techniques on the performance of field nurses in carrying out nursing care. Significant differences were found especially between VIP inpatients and other inpatient rooms. In the VIP room, nurses' performance standards did almost meet with all of the nursing process components set by the Ministry of Health of Indonesia, minimum standard 75% (diagnosis of 77%, intervention of 82%, implementation of 78% and evaluation of 75%) except the assessment component of 67%. This is because nurses in the inpatient room, especially VIP Ibnu Sina 'Bawah and Atas', in a ratio between nurses and patients have met the Ministry of Health of Indonesia standards, 1: 2 or 3 patients. Thus allowing the nurse to carry out the nursing process from conducting a conference review to nursing evaluation continuously.

On the other hand, the results of this study showed that in the regular inpatient room, the average score was below the minimum standard value determined by the Ministry of Health of Indonesia: 58% assessment, 62% diagnosis, 70% intervention, 74% implementation and 62% evaluation. This is because the ratio of the average comparison between nurses and patients is 1: 8 to 12 patients, and this is further strengthened by other additional workloads such as administration, security, maintenance, and cleanliness.

In line with the results of intensive inpatient research, the average value was below the minimum standard of Ministry of Health of Indonesia: 64% assessment, 79% diagnosis, 69% intervention, 68% implementation and 68% evaluation. There are several factors that have not yet achieved the performance standards based on the standard set by the Ministry of Health of Indonesia in the internal inpatient room, one of which is an inpatient room that is not yet separated, ICU, ICCU, PICU and NICU are still one room and one service. These things are elements of making the field nurses perform poorly in carrying out nursing care. It is not optimal from conducting studies to evaluating

nursing so that it affects the quality of nursing care in hospitals.

➤ *The Performance of Field Nurse in Implementing Nursing Care Based on Commitment to the Organization*

Based on the results of statistical testing using Chi Square test where p-value = 0.003 is smaller than $\alpha = 0.05$, which means that H_0 is rejected, so the hypothesis states that there is a significant relationship between commitment to the organization and the performance of the field nurse in implementing nursing care.

Nurses' performance in hospital toward nursing services requires strong nurse commitment to hospital organizations. The nurse's commitment to the organization is a work attitude that is defined as a situation in which a nursing staff takes sides with the organization and its goals and intends to maintain membership in that organization. Organizational commitment is a strong and close feeling of someone towards the goals and values of an organization in relation to their role in achieving those goals and values. Allen and Meyer (1997) in (Wibowo, 2016) suggested that an organization's commitment to a nurse as a state of psychology that characterizes the relationship of nurses to the organization or its implications that affect whether nurses will remain in the organization or not, are identified in three components: affective commitment, continuous commitment and normative commitment.

The nurse's commitment to work and work organization is an important factor that must be possessed as a form of internalization of the values and attitudes of individuals in carrying out nursing service activities. In an organization, individual commitment to the organization is a factor of one's work attitude toward the organization. Robbins (2015) says commitment is very important in creating conducive working conditions so that an organization can run efficiently and effectively.

Research on nurses' commitment to the organization was carried out by Fitria (2014) who said there was a positive role between organizational commitment and Organizational Citizenship Behavior (OCB) in nurses. This means the higher the organizational commitment, the higher the OCB will be. The contribution of organizational commitment to OCB is 17.8% while the remaining 82.2% is another factor beyond organizational commitment.

Research by Wicaksana (2016) states that commitment to the organization has a positive and significant influence on the performance of nurses. This is because nurses have a normative commitment to a moral dimension based on the feeling of obligation and responsibility on the organization that employs them. Whereas research conducted by (Safaat, 2017) that out of 104 respondents have organizational commitment that is in the third range (enough), 79.28. This means that the subject of this study is predominantly having organizational commitment in an adequate category, this is because organizational commitment is an employee's work attitude that is shown by an attitude towards a particular organization with its objectives and intends to maintain

membership in the organization. The dimension of organizational commitment has the highest average value that is affective commitment (27.86) in the sufficient category range. This shows that respondents have strong emotional ties with their organizations. Continuance commitment dimensions have an average (25.88) category of enough and the dimensions of organizational commitment with the lowest average value is normative commitment (25.55) although it is still in the sufficient category range. This means that the desire of respondents to remain in the organization at a sufficient level, allowing respondents to just leave their organization.

According to the analysis of the researcher, it was found in this study that there was a relationship between commitment to the organization and the performance of nurses and having conformity with several theories and research results of other researchers. This study looks at commitments from three components: affective (form of loyalty and emotional involvement and self-identification of the organization), normative (moral dimension to work), and continuous (perception of a cost and risk to work). In this study, the formation of affective commitments is around 79% of the value in commitment while for normative values around 65% and continuous values are only 41%. The three patterns of formation have implications for different work motivation. The implication of high affective commitment results in good performance. High normative commitment creates an obligation to perform higher while a high continuous commitment, the performance produced as a form of individual control over the possibility of loss. The results of this study illustrate that affective commitment is greater than normative commitment to produce performance. However, normative commitment is greater than continuance commitment to produce better nurse performance.

Commitment is basically a personal attitude that is formed through the interaction of individuals with their organizations. Nurses' commitment to hospital organizations is formed along with their existence in a hospital organization environment. High commitment is a positive attitude in looking at the existence of individuals in an organization that fosters willingness, desire, sense of responsibility and the obligation to do the best for the organization and ultimately strive to achieve organizational goals through quality performance.

V. CONCLUSIONS

The results of this study indicate a positive relationship between commitment to the organization and the work environment with the performance of the field nurse. The results of the analysis show that the affective commitment variable is the main determinant variable that influences the performance of the field nurse followed by controlled variables over practice and management, leadership and culture. These results imply that building a good nurse's performance must be pursued through increasing affective commitment of each individual nurse, providing a nursing environment that allows the implementation of nursing care

in accordance with the authority and scope of practice driven by effective management, managerial leadership and fostering an effective work culture.

REFERENCES

- [1]. Agustin, R. (2013). Hubungan kinerja Perawat Dalam Memberikan Asuhan Keperawatan dengan Kepuasan Pasien Rawat Inap Kelas III di RSUD kabupaten Pekalongan. Skripsi. STIKES Muhammadiyah Pakalongan.
- [2]. Alhasanah, N. H. (2016). Gambaran kinerja Perawat Berdasarkan Beban Kerja di Instalasi Rawat Inap Penyakit Dalam Rumah Sakit Umum (RSU) Kota Tangerang Selatan, Skripsi. PKM Universitas Islam Negeri Syarif Hiday.
- [3]. Doenges, M. (2011). Penerapan Proses Keperawatan dan Diagnosa Keperawatan. (EGC). Jakarta.
- [4]. Fitria. (2014). Peran Komitmen Organisasi Terhadap Organizational Citizenship Behavior pada Perawat, Skripsi. Prodi Psikologi Universitas Lambung Mangk.
- [5]. Mandagi. (2015). Analisis Faktor-Faktor yang Berhubungan Dengan Kinerja Perawat Dalam Penerapan Asuhan Keperawatan Dirumah Sakit Umum Bethesda GMIM Tomohon. Jurnal e-Biomedik. Tesis. Pascasarjana Kesehatan Masyarakat. Universitas Sam Ratulangi Manado.
- [6]. Nursalam. (2014). Manajemen Keperawatan. Aplikasi dalam Praktik Keperawatan Profesional. Jakarta: Penerbit Salemba Medika.
- [7]. Potter & Perry. (2011). Buku Ajar Fundamental Keperawatan Konsep, Proses, dan Praktik. Jakarta.
- [8]. Robbins. (2015). Perilaku Organisasi (Edisi 16). Jakarta: PT. Indeks.
- [9]. Siahaan. (2011). Kinerja Perawat dalam Pemberian Asuhan Keperawatan di Rumah Sakit TK II Putri Hijau Medan, Skripsi. PSIK Universitas Sumatera Utara.
- [10]. Sugiyono. (2016). Metode Penelitian Manajemen. Bandung: Alfabeta.
- [11]. Wibowo. (2016). Manajemen Kinerja. Jakarta: Raja Grafindo Persada.
- [12]. Wicaksana. (2016). Pengaruh Beban Kerja dan Komitmen Organisasi Terhadap Kinerja Perawat pada Rumah Sakit Islam Yogyakarta, SKripsi, Prodi Manajemen Universitas Negeri Yogyakarta.
- [13]. Wirdah, H., & Yusuf, M. (2016). Penerapan Asuhan Keperawatan Oleh Perawat Pelaksana di Rumah Sakit Bandar Aceh, Program Studi Ilmu Keperawatan Fakultas Keperawatan Universitas Syiah Kuala Banda Aceh Zurnali, C. (2010). "Learning Organization, Competency, Organizational Commitment, dan Customer Orientation : Knowledge Worker - Kerangka Riset Manajemen Sumberdaya Manusia di Masa Depan," Bandung: Unpad Press.