

INFLUENCING FACTORS OF NURSES PERFORMANCE AT H. PADJONGA DG. NGALLE REGIONAL GENERAL HOSPITAL IN TAKALAR REGENCY

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Abstract

Background. Nursing services in hospitals are a critical component, requiring reliable nurses with strong motivation to perform their duties, which include providing nursing care. The success of nursing services is largely determined by the performance of the nurses. Therefore, evaluating nurse performance is essential and should always be carried out through a standardized system to ensure more objective results and evaluations. **Objective.** This study aims to identify the factors influencing nurse performance at RSUD H. Padjonga Dg. Ngalle in Takalar Regency. **Method.** This is a quantitative research study with a cross-sectional approach. The sample consists of 149 professional nurses. Data were collected using questionnaires and analyzed using chi-square and logistic regression tests. **Result.** The study results indicate that workload affects nurse performance with a p-value of $0.000 < 0.05$, shift work affects nurse performance with a p-value of $0.005 < 0.05$, interpersonal relationships do not affect nurse performance with a p-value of $0.607 > 0.05$, organizational culture does not affect nurse performance with a p-value of $0.229 > 0.05$, and dual roles affect nurse performance with a p-value of $0.000 < 0.05$. Multivariate analysis indicates that the primary factor affecting nurse performance is workload. **Recommendation.** Hospitals are encouraged to ensure that all nurses maintain a balanced workload to sustain nurse productivity.

Keywords: Performance, Nurses, Workload, Shift, Interpersonal Relationships, Organizational Culture, Dual Roles, Hospital.

INTRODUCTION

Health services play a crucial role in our society, particularly those provided by hospitals. The quality of hospital services is defined by the level of excellence in meeting the needs of the community as patients. These services must be delivered safely and satisfactorily, adhering to norms, ethics, laws, and social culture, while utilizing resources reasonably, effectively, and efficiently.

Nurses comprise the largest segment of the healthcare workforce, and their performance significantly impacts the productivity of health services. The number of nurses is nearly four times greater than the total number of doctors and surpasses all other health professions. Therefore, optimizing nurse performance is essential for hospital efficiency and achieving better patient health outcomes.

Based on data from the Medical Records of H. Padjonga Dg. Ngalle Regional General Hospital, there has been a year-to-year increase in the number of patients. In 2021, there were 62,363 patients, which rose to 82,316 in 2022. Patient visits continued to

increase, reaching 85,799 by November 2023. Meanwhile, according to interviews with staff from the Department of Medical Services at the hospital, the number of nurses in 2023 remained nearly the same as the previous year, at 243. The rising number of patients, combined with the static number of nurses, has led to an excessive workload for the staff at H. Padjonga Dg. Ngalle Regional General Hospital.

Nurse performance can be assessed through performance evaluations conducted by the hospital. The evaluations at H. Padjonga Dg. Ngalle Regional General Hospital from January to March 2024 showed that 79% of nurses performed within standard expectations, while 18% of nursing care fell below these standards. Based on interviews and observations, several issues were identified related to nurse performance in both inpatient and outpatient departments at H. Padjonga Dg. Ngalle Regional General Hospital. These issues contribute to the suboptimal performance of nurses in providing nursing care.

Addressing the persistent challenge of healthcare staff's work performance remains crucial in hospital management. Healthcare services are expected to deliver high-quality nursing care, particularly as health needs become increasingly complex. Given these challenges, the researcher aims to investigate the factors influencing nurse performance at H. Padjonga Dg. Ngalle Regional General Hospital in Takalar Regency.

METHOD

This study is a quantitative research using a Cross-Sectional Study. The sample consists of 149 nurses at H. Padjonga Dg. Ngalle Regional General Hospital in Takalar Regency, selected using Proportionate Stratified Random Sampling method. Data collection was conducted using a questionnaire. Data processing was performed using SPSS software, with univariate and bivariate analyses using chi-square test and multivariate analysis using Multiple Logistic Regression. This study has obtained ethical approval with reference number: 1212/UN4.14.1/TP.01.02/2024.

RESULT

The characteristics of the respondents, including gender, age, and marital status, are presented in the following table.

Table 1: Frequency Distribution of Respondent Characteristics at H. Padjonga Dg. Ngalle Regional General Hospital in Takalar Regency in 2024

Characteristics	Frequency (n=149)	Percent (%)
Gender		
Female	132	88.6
Male	17	11.4
Age		
22-35 Year	73	49.0
36-60 Year	76	51.0
Marital Status		
Unmarried	34	22.8
Married	115	77.2
Total	149	100.0

Source: Primary Data 2024

Table 1 shows that the majority of respondents are female, with 132 nurses (88.6%). The largest age group is 36-60 years old, comprising 76 nurses (51.0%). In terms of marital status, the majority are married, with 115 nurses (77.2%)

Table 2: Distribution of Respondents Based on the Variables Studied at RSUD H. Padjonga Dg. Ngalle Regional General Hospital in Takalar In 2024

Variable	Frequency (n=94)	Percent (%)
Workload		
Light	95	63.8
Heavy	54	36.2
Shift Work		
Rotating shift system	77	51.7
Non- rotating shift system	72	48.3
Interpersonal Relationship		
Good	148	99.3
Poor	1	0.7
Organizational Culture		
Good	145	97.3
Poor	4	2.7
Dual Roles		
High	44	29.5
Low	105	70.5
Nurses Performance		
Good	118	79.2
Poor	31	20.8
Total	149	100

Source: Primary Data 2024

Table 2 indicates that most nurses have a light workload (63.8%), work under a rotating shift system (51.7%), have good interpersonal relationships (99.3%), maintain a high organizational culture (97.3%), and have low dual roles (70.5%). The completeness of nursing care data based on documentation exhibits a good performance category (79.2%).

Table 3: Bivariate Analysis of Influencing Variables on Nurses Performance at Regional General Hospital in Takalar In 2024

Variable (Workload, Shift Work, Interpersonal Relationships, Organizational Culture, Dual Roles)	Nurses Performance				Total		P-Value
	Good		Poor		N	%	
	N	%	n	%			
Light	93	97.9	2	2.1	95	100	0.000
Heavy	25	46.3	29	53.7	54	100	
Rotating shift system	54	70.1	23	29.9	77	100	0.005
Non-rotating shift system	64	88.9	8	11.1	72	100	
Good	117	79.1	30	20.9	148	100	0.607
Poor	1	100.0	0	0	1	100	
Good	114	78.6	31	21.4	145	100	0.299
Poor	4	100.0	0	0	4	100	
High	18	40.9	26	59.1	44	100	0.000
Low	100	95.2	5	4.8	105	100	

Source: Primary Data 2024

Table 3 shows that the results of the bivariate statistical test indicate that the workload variable has a p-value of $0.000 < 0.05$, the shift work variable has a p-value of $0.005 > 0.05$, the interpersonal relationship variable has a p-value of $0.607 > 0.05$, the organizational culture variable has a p-value of $0.299 > 0.05$, and the dual role variable has a p-value of $0.000 < 0.05$. These results indicate that workload, shift work, and dual roles have an impact on nurse performance at H. Padjonga Dg. Ngalle Regional General Hospital in Takalar Regency, while interpersonal relationships and organizational culture do not.

Table 4: Binary Logistic Regression Analysis of Influencing Variables on Nurses Performance at Regional General Hospital in Takalar In 2024

Variable	B	S.E	Wald	Df	Sig.	Exp (β)
Workload	4.913	1.302	14.234	1	.000	136.039
Shift Work	2.463	1.228	4.021	1	.045	11.741
Dual Roles	-2.859	.676	17.874	1	.000	.057

Source: Primary Data 2024

Table 4 demonstrates that the workload variable has the greatest impact on nurse performance, as indicated by the exp β value of the workload being higher than the other variables, such as shift work and dual roles.

DISCUSSION

1. The Influence of Workload on Nurse Performance

According to Koesomowidjojo, workload refers to the tasks or responsibilities assigned to all available human resources to be completed within the designated time⁴. The effect of workload on nurse performance is considerably important in healthcare management. Workload can significantly impact nurse performance, both directly and indirectly⁵.

The results of this study indicate a significant influence of workload on nurse performance at H. Padjonga Dg. Ngalle Regional General Hospital. This is evidenced by a p-value of 0.000, which is less than 0.05, indicating rejection of the null hypothesis (H_0). The impact of workload on nurse performance shows that 118 nurses (79.2%) demonstrated good performance, with 93 individuals (97.9%) experiencing a light workload and 25 nurses (46.3%) experiencing a heavy workload. Meanwhile, 31 nurses (20.8%) exhibited poor performance, with 2 nurses (2.1%) experiencing a light workload and 29 nurses (53.7%) experiencing a heavy workload.

This study proves that an excessive workload can negatively impact nurse performance. The lighter the workload, the better the performance, and vice versa. Nurses with heavy workloads who still maintain good performance exhibit positive attitudes and high dedication to their job, helping them remain productive and provide quality care to patients. Torkaman's research shows that to have efficient human resources in the health sector, highly professional nurses can enhance performance and the quality of care provided⁶.

This finding is consistent with Kristanti's research, which states that workload negatively affects performance: the higher the workload, the lower the performance. Workloads that do not match the employees' capabilities can potentially decrease their performance, and vice versa⁷.

2. The Influence of Shift Work on Nurse Performance

Shift scheduling is a system implemented by hospital management that allows nurses to alternate between different time periods after a certain interval, rotating between different groups within the same department⁸. H. Padjonga Dg. Ngalle Regional General Hospital has three shift schedules: morning, afternoon, and night shifts. The results of this study indicate a significant influence of shift work on nurse performance at H. Padjonga Dg. Ngalle Regional General Hospital in Takalar Regency. This is supported by a p-value of 0.005, which is less than 0.05, indicating rejection of the null hypothesis (Ho). The impact of shift work on nurse performance shows that 118 nurses (79.2%) exhibited good performance, with 54 nurses (70.1%) working in a rotating shift system and 64 nurses (88.9%) working in a non-rotating shift system. Meanwhile, 31 nurses (20.8%) showed poor performance, with 23 nurses (29.9%) working in a rotating shift system and 8 nurses (11.1%) working in a non-rotating shift system.

The study also indicates that nurses working in rotating shifts have poorer performance compared to those on fixed schedules. Shift work significantly affects performance by influencing their ability to carry out duties and has long-term impacts on their health and well-being. Despite various negative effects of shift work, sleep disturbances can particularly influence workers' physical and mental health, contributing to fatigue, cognitive performance, and overall quality of life⁹. At H. Padjonga Dg. Ngalle Regional General Hospital, night shifts typically last for 12 hours, whereas the optimal daily work duration for most individuals is generally 6-10 hours¹⁰.

These findings align with the findings of Arini's research, which showed that the variable of shift work affects nurse performance at Moslem Baby Day Care in Timoho, Yogyakarta, with a significance value of $0.010 < 0.05$. This indicates that shift work plays a role in determining nurse performance¹¹. However, these findings differ from those of Syahrizal, which stated that shift work does not affect performance at PT Matahari Department Store Tbk in Bengkulu. It suggests that poorly managed and unfair shift work conditions perceived by an individual or group of employees do not enhance employee performance¹². The results of this study highlight the importance of adjusting work demands and minimizing extended work durations to mitigate the impacts of rotating shift work, particularly sleep disturbances among night shift workers¹³.

3. The Influence of Interpersonal Relationships on Nurse Performance

Interpersonal relationships refer to relationships involving two or more individuals who are mutually dependent and use consistent interaction patterns. Several causes of interpersonal conflicts in healthcare facilities include differing views on task completion, dissatisfaction with service delivery, communication misunderstandings, and others¹⁵. The results of this study indicate that there is no significant influence of interpersonal relationships on nurse performance at H. Padjonga Dg. Ngalle Regional General Hospital in Takalar Regency. This is evidenced by a p-value of $0.607 > 0.05$, indicating acceptance of the null hypothesis (Ho). The findings regarding the influence of interpersonal relationships on nurse performance show that 118 nurses (79.2%) demonstrate good performance, with 117 (79.1%) having good interpersonal relationships and 1 nurse (100.0%) having poor interpersonal relationships. Meanwhile, 31 nurses (20.8%) exhibit poor performance, with 31 (20.9%) having good interpersonal relationships and no respondents showing poor performance associated with poor interpersonal relationships.

The analysis of respondent answers indicates that while most nurses have good interpersonal relationships, there are still some nurses who show disagreement regarding the statement that nurses have good relationships with their superiors. The condition of interpersonal relationships among nurses at H. Padjonga Dg. Ngalle Regional General Hospital shows a tendency towards lack of openness in communication among colleagues and a lack of initiative in providing feedback during discussion forums (meetings) to evaluate work outcomes. The role of a head nurse is crucial in maintaining relationships between the administrative institution and nurses and ensuring efficient patient care activities in each ward by making sure that team members fulfill their duties¹⁶.

This study aligns with Febriana's research, which found a chi-square test result with a p-value of 0.783, indicating acceptance of the null hypothesis (Ho). This suggests that there is no significant relationship between interpersonal relationships and nurse performance in Royal Prima Hospital, Medan, in 2019. Factors such as professionalism, strong work structure and procedures, and effective performance supervision and evaluation play a vital role in ensuring nurses can provide high-quality care to patients, regardless of the dynamics of interpersonal relationships in the workplace. Unlike Rahmanita's study, the correlation test results showed a p-value of 0.003, which is less than 0.05, indicating a significant relationship between interpersonal relationships and nurse performance¹⁷. This finding is also supported by Shin & Lee's research, which states that interpersonal relationships and teamwork among nurses are determinants of a healthy work environment quality¹⁸.

Although interpersonal relationships may not always be the sole determinant of performance, this variable still plays a crucial role in creating a healthy and efficient work environment. Therefore, maintaining positive interpersonal relationships remains an essential aspect of nursing workforce management.

4. The Influence of Organizational Culture on Nurse Performance

Organizational culture encompasses a set of values, beliefs, norms, and practices that shape how members of an organization interact and work. Dimensions that support the creation of organizational culture include communication, training and development, rewards, decision-making, risk-taking, cooperation, and management practices. Over time, these dimensions have shifted to include key factors such as innovation and risk-taking, team orientation, and aggressiveness¹⁹.

This study shows that there is no significant influence of organizational culture on nurse performance at H. Padjonga Dg. Ngalle Regional General Hospital in Takalar Regency. This is indicated by a p-value of 0.299, which is greater than 0.05, meaning the null hypothesis (Ho) is accepted. The results show that 118 nurses (79.2%) have good performance, of which 114 (78.6%) are associated with a good organizational culture, and 4 nurses (100.0%) are associated with a poor organizational culture. Meanwhile, 31 nurses (20.8%) have poor performance, with 31 (21.4%) associated with a good organizational culture, and none associated with a poor organizational culture. The analysis of respondent answers in the researcher's study indicates that nurses at H. Padjonga Dg. Ngalle Regional General Hospital in Takalar Regency exhibit high agreement in terms of precision in performing their tasks. Nurses who are meticulous pay attention to every small aspect of patient care to ensure high-quality service and patient safety. This attention to detail helps nurses minimize risks²⁰. The study results also show that nurses with a poor organizational culture indicate lack of

initiative in carrying out their duties and responsibilities. Based on the observations, some nurses demonstrate low initiative in their tasks. Despite nurses being healthcare professionals who are constantly with patients and their families 24/7, providing service should inherently involve high initiative²¹. This study contrasts with Yundelfa's research, which found a significant relationship between organizational culture and inpatient nurse performance at Ibnu Sina Islamic Hospital in Bukittinggi, with a p-value of $0.01 < 0.0522$. In the context of hospitals and healthcare services, organizational culture significantly influences nurse performance, job satisfaction, quality of patient care, and employee well-being²².

Most studies indicate that a positive organizational culture contributes to better performance. This aligns with Bisma et al.'s research, which found a significant relationship between organizational culture and nurse performance²³. Hospitals are encouraged to focus on their organizational culture, emphasizing attention to detail, innovation, and direction towards optimal outcomes, which can enhance employee performance. However, the results of this study differ from those conducted at RSUD H. Padjonga Dg. Ngalle, which found no significant impact of organizational culture on nurse performance. Although most literature states that organizational culture significantly influences performance, there is room to argue that other factors may be more dominant or that the influence of organizational culture varies depending on specific contexts.

5. The Influence of Dual Roles on Nurse Performance

Dual roles refer to the condition where an individual must balance workplace responsibilities with household responsibilities or other roles in their personal life²⁴. This study shows a significant impact of dual roles on nurse performance at H. Padjonga Dg. Ngalle Regional General Hospital in Takalar Regency. This is indicated by a p-value of $0.000 < 0.05$, meaning the null hypothesis (H_0) is rejected. The results indicate that 118 nurses (79.2%) have good performance, with 18 nurses (40.9%) having high dual roles and 100 nurses (95.2%) having low dual roles. Meanwhile, 31 nurses (20.8%) exhibit poor performance, with 26 nurses (59.1%) having high dual roles and 5 nurses (4.8%) having low dual roles. Thus, it can be concluded that dual roles negatively affect nurse performance, with nurses managing dual roles performing worse compared to those without dual roles.

This finding aligns with research results from Hanafiah Hospital in Batusangkar, which showed that dual role conflicts significantly affect the performance of female nurses²⁴. This is evident from the obtained t-value of 3.264 and a significance value of $0.001 > 0.005$, with a coefficient of 0.301, indicating that the higher the dual role conflict, the lower the performance of female nurses at Hanafiah Hospital. The demands of multiple roles can lead to high stress, fatigue, and burnout if not managed well.

Based on the distribution of respondents' answers, the majority agreed on the aspect of Behavior-based Conflict. Families expect holidays to be spent together, but most respondents also work in a rotating shift system that requires them to work on holidays. As previously explained, one factor influencing work-family conflict is time pressure. This factor can make it difficult to balance work and family life due to the shift work²⁵. This situation does not meet family expectations, making it harder for nurses to maintain a balance between their professional and personal lives²⁶. This finding contrasts with Astuti's research, which showed a statistical test result of 0.881 ($0.881 > 0.05$), indicating no significant relationship²⁷. Dual roles have a complex impact

on nurse performance¹⁷. With effective time management, social support, a focus on personal well-being, and proper training, nurses can better manage their dual roles, maintaining high performance and quality care.

CONCLUSION

1. There is an influence of workload on nurse performance at H. Padjonga Dg. Ngalle Regional General Hospital in Takalar Regency.
2. There is an influence of shift work on nurse performance at H. Padjonga Dg. Ngalle Regional General Hospital in Takalar Regency.
3. There is no influence of interpersonal relationships on nurse performance at H. Padjonga Dg. Ngalle Regional General Hospital in Takalar Regency.
4. There is no influence of organizational culture on nurse performance at H. Padjonga Dg. Ngalle Regional General Hospital in Takalar Regency.
5. There is an influence of dual roles on nurse performance at H. Padjonga Dg. Ngalle Regional General Hospital in Takalar Regency.
6. Workload is the most influential variable on nurse performance at H. Padjonga Dg. Ngalle Regional General Hospital in Takalar Regency.

Bibliography

- 1) Sophiana Enjellin Anathasia, Dety Mulyanti. Faktor-Faktor yang mempengaruhi peningkatan kualitas pelayanan kesehatan di Rumah Sakit: Tinjauan Teoritis. *J Ilm Kedokt Dan Kesehat*. 2023;2(2):145-151. doi:10.55606/klinik.v2i2.1289
- 2) Khamidah IN, Muchsin S, Sekarsari RW. Peningkatan Kualitas Pelayanan Kesehatan Di Rsud Kota Malang (Studi Kasus Tentang Pelayanan Kesehatan Dan Kepuasan Pasien Dalam Menggunakan Program BPJS). *J Respon Publik*. 2024;18(3).
- 3) Daba L, Beza L, Kefyalew M, et al. Job performance and associated factors among nurses working in adult emergency departments at selected public hospitals in Ethiopia: a facility-based cross-sectional study. *BMC Nurs*. 2024;23(1):312. doi:10.1186/s12912-024-01979-w
- 4) Chandra LD. Pengaruh Beban Kerja Dan Kepuasan Kerja Terhadap Kinerja Perawat. *J Ekon Dan Ilmu Sos JEIS*. 2023;02(01):86-93.
- 5) Bolado GN, Ataro BA, Gadabo CK, Ayana AS, Kebamo TE, Minuta WM. Stress level and associated factors among nurses working in the critical care unit and emergency rooms at comprehensive specialized hospitals in Southern Ethiopia, 2023: explanatory sequential mixed-method study. *BMC Nurs*. 2024;23(1):341. doi:10.1186/s12912-024-02004-w
- 6) Torkaman M, Heydari N, Torabizadeh C. Nurses' perspectives regarding the relationship between professional ethics and organizational commitment in healthcare organizations. *J Med Ethics Hist Med*. Published online November 17, 2020. doi:10.18502/jmehm.v13i17.4658
- 7) Kristanti R, Bastian A, Amdanata DD. Analisa Pengaruh Beban Kerja, Kepuasan Kerja, dan Motivasi Kerja terhadap Kinerja Perawat dan Tenaga Kesehatan di Lingkungan Rumah Sakit Umum Daerah Kabupaten Rokan Hulu. *South East Asian Manag Concern*. 2024;1(2):51-59. doi:10.61761/seamac.1.2.51-59
- 8) Ilahi NK, Yenni M, Suroso S. Hubungan Beban Kerja dan Shift Kerja dengan Gejala Stres Kerja Perawat di Rumah Sakit Jiwa Daerah Provinsi Jambi. *Environ Occup Health Saf J*. 2023;3(2):141. doi:10.24853/eohjs.3.2.141-152
- 9) Booker LA, Mills J, Bish M, Spong J, Deacon-Crouch M, Skinner TC. Nurse rostering: understanding the current *shift* work scheduling processes, benefits, limitations, and potential fatigue risks. *BMC Nurs*. 2024;23(1):295. doi:10.1186/s12912-024-01949-2

- 10) Laili H, Susilawati S. Hubungan Antara *Shift* Kerja, Kelelahan Kerja Dengan Stres Kerja Pada Perawat di Rumah Sakit Literature Review. *Indones J Innov Multidisipliner Res*. 2024;2(4):51-60. doi:10.31004/ijim.v2i4.95
- 11) Arini BP. Pengaruh *Shift* Kerja Dan Beban Kerja Terhadap Kinerja Perawat Pada Moslem Baby Day Care Di Timoho Yogyakarta (Studi Pada Moslem Baby Day Care). *J Amenika*. 2021;18(1).
- 12) Syahrizal A, Hidayati A, Waliamin J. Pengaruh *Shift* Kerja, Lingkungan Kerja Dan Beban Kerja Terhadap Kinerja Karyawan Di Matahari Departement Store Tbk Kota Bengkulu. *Primanomics J Ekon Bisnis*. 2023;21(3):168-179. doi:10.31253/pe.v21i3.2248
- 13) AL-hrinat J, Al-Ansi AM, Hendi A, Adwan G, Hazaimah M. The impact of night *shift* stress and sleep disturbance on nurses quality of life: case in Palestine Red Crescent and Al-Ahli Hospital. *BMC Nurs*. 2024;23(1):24. doi:10.1186/s12912-023-01673-3
- 14) Suherning S, Herlambang T, Budi Satoto E. Pengaruh Komunikasi Interpersonal, Profesionalitas Dan Kompetensi Terhadap Sistem Monitoring dan Kinerja Paramedis. *RELASI J Ekon*. 2023;19(2):290-301. doi:10.31967/relasi.v19i2.858
- 15) Memah ND, Lengkong VPK, Walangitan MD. Pengaruh konflik peran ganda dan konflik interpersonal terhadap task performance tenaga kesehatan di puskesmas molompar. *J EMBA J Ris Ekon Manaj Bisnis Dan Akunt*. 2023;11(4):239-248. doi:10.35794/emba.v11i4.51742
- 16) Sumayku IR, Bolang ASL, Doda DVD. Hubungan Stres Kerja, Hubungan Interpersonal dan Tugas Tambahan dengan Beban Kerja Perawat di Ruangn Palma RSUP Prof. Dr. R. D. Kandou, Manado. *E-Clin*. 2023;11(2):204-213. doi:10.35790/ecl.v11i2.44904
- 17) Rahmanita F. Analisis Pengaruh Peran Ganda pada Perawat Wanita terhadap Kinerja pada Masa Pandemi Covid-19. *Sci Sacra J Sains Teknol Dan Masy*. 2022;2(1).
- 18) Shin SH, Lee EH. Development and validation of a quality of healthy work environment instrument for *shift* nurses. *BMC Nurs*. 2024;23(1):37. doi:10.1186/s12912-023-01672-4
- 19) Ramadhani TW, Erlinengsih. Volume 6 Nomor 2 | <https://jurnal.syedzasaintika.ac.id>. *J Kesehat Saintika Meditory*. 2023;6(2):536-548.
- 20) Salma HF, Mas'ud F. Pengaruh Kepemimpinan Islami, Budaya Organisasi Islam, Dan Kepuasan Kerja Terhadap Kinerja Perawat. *Diponegoro J Manag*. 2023;12(3).
- 21) Vernadeth V, Anindita R. Pengaruh Budaya Organisasi terhadap Kinerja Perawat dengan Disiplin Kerja sebagai Variabel Intervening di RSUD Pesanggrahan. *J Hosp Manag*. 2021;4(1).
- 22) Yundelfa M, Refialdinata J, Haryono B. Hubungan Komunikasi, Budaya Organisasi, Dan Kepemimpinan Dengan Kinerja Perawatdi Rumah Sakit Umum 'Aisyiyah Padang. *MENARA Ilmu*. 2020;14(1):79-84.
- 23) Bisma Ayodha Kurniawan Putra, Syadzalina Bilqis, Catharina Aprilia Hellyani. Pengaruh Budaya Organisasi Terhadap Kinerja Karyawan Di Rumah Sakit. *J Ekon Bisnis Dan Akunt*. 2023;3(2):162-170. doi:10.55606/jebaku.v3i2.1883
- 24) Suri A. Pengaruh Konflik Peran Ganda Dan Stres Kerja Terhadap Kinerja Pada Perawat Wanita Di RSUD Prof.DR.M.A Hanafiah, SM Batusangkar. *J Salingka Nagari*. 2023;02(2):664-674.
- 25) Jacobus IL, Yahya IM, Riu SDM. Hubungan Konflik Peran Ganda Dengan Stres Kerja Pada Perawat Wanita Di Rumah Sakit Bhayangkara TK.III Manado. *J Ris RUMPUN ILMU Kesehat*. 2024;3(1):27-34. doi:10.55606/jurrikes.v3i1.2363
- 26) Evodius Nasus, Ekawati Saputri, Grace Tedy Tulak. Pengaruh Konflik Peran Ganda terhadap Kinerja Perawat Wanita: The Effect of Multiple Role Conflict on the Performance of Women Nurses. *J Kolaboratif Sains*. 2023;6(7):657-663. doi:10.56338/jks.v6i7.3746
- 27) Astuti R, Permina Y, Intening VR, Sudarta IW. Hubungan Peran Ganda Dengan Kinerja Perawat Pada Asuhan Keperawatan Mahasiswa Rekognisi Pembelajaran Lampau (RPL). *STIKES Bethesda Yakkum*. 2024;3(1):395-402.