



The Influence Of Work Life's Quality and Job Satisfaction Toward Nurses Performance in Inpatient Ward Edelweiss Hospital Bandung

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ABSTRACT

Hospital nurses in Indonesia are declining (2021 data), as well as in West Java Province (2022 data). This phenomenon (2021 data) also occurred at Edelweiss Hospital, Bandung (RS). The increasing demand for nursing staff and demands for high quality of service affect the performance of nurses (Brooks & Anderson, 2005). Nurse job satisfaction plays an important role in supporting motivation and performance. This study aims to analyze the effect of quality of work life and job satisfaction on the performance of nurses in the Inpatient Installation at the Hospital. This study used a *cross-sectional method* with a descriptive analysis approach and partial and simultaneous correlation-regression through quantitative and qualitative methods. The entire population (census) of 54 nurses in the Inpatient Installation was used in this study. Data collection techniques through questionnaires and interviews were used. The results of the study showed that the quality of work life, job satisfaction, and nurse performance were in the "Good-Very Good" category. The results of the correlation-regression showed that the quality of work life and job satisfaction had a strong relationship with nurse performance with an *r value* of 0.809. The results of the research hypothesis test showed that the quality of work life and job satisfaction had a positive effect on nurse performance, with a *p-value* of 0.000 ($p < 0.05$). This is in line with the theory of Brooks & Anderson and Muller Mc Closkey. The study concluded that both quality of work life and job satisfaction have a positive impact on nurse performance. Suggestions for hospital management include additional management support in implementing policies, optimizing quality of work life, strengthening the conformity between SOPs and field practices, and strengthening *work-life balance* programs.

Keywords: Quality of Work Life, Job Satisfaction, Nurse Performance, Hospital Management

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INTRODUCTION

Ministry of Health of the Republic of Indonesia in 2018, every hospital is responsible for providing optimal, high-quality, fair, and efficient health services, by prioritizing the interests of patients in accordance with the service standards applicable in the hospital. Reviewed in 2018, in the form of Regulation of the Minister of Health of the Republic of Indonesia/PERMENKES No. 3 of 2020 concerning the classification and licensing of hospitals, it states that hospitals are grouped based on the ability of medical services, health facilities, supporting facilities, and human resources. This grouping ensures that each class of hospital has standards according to the capacity and resources available. PERMENKES No. 47 of 2021 stipulates that hospitals are health service institutions that provide comprehensive health services, which provide inpatient care,

outpatient and emergency

In the context of health services in West Java Province, RSHS in Bandung City and dr. H. Marzoeki Mahdi Mental Hospital in Bogor City are class A hospitals owned by the government that have an important role in the health referral system. Research by Lilik (2022), regarding the level of satisfaction and strategies for improving service quality. The results showed that the overall satisfaction score reached 81.86, which indicated a moderate level of satisfaction. This result has not reached the target set by the hospital. Both hospitals show efforts to improve service quality even though they still face challenges in achieving the satisfaction targets that have been set.

Bandung City is the center of West Java Province. Information from the Health Profile data of the Bandung City Health Office in 2021, explains that the number of nurses in hospitals is 7,763 people and in 2022 there are 6,346 nurses. This shows that from 2021 to 2022, the number of nurses operating in Bandung City Hospital health facilities has decreased by around 18.25%.

The health situation in Bandung City shows variations in the utilization of health services. On the one hand, RSHS reflects the scale of complex operations, namely the number of nurses and beds. However, challenges related to employee satisfaction remain, as indicated by the gap between targets and achievements in job satisfaction surveys.

Meanwhile, the challenge in maintaining employee satisfaction is also seen in private hospitals such as Edelweiss Hospital in Bandung City, which was established in 2020 under the auspices of PT. Dawa Daya Kahuripan, also contributes to health services in this area. With the status of a class C health facility, this hospital provides alternative health services amidst the dynamics of the health sector in Bandung City and its surroundings. This hospital is equipped with adequate Inpatient Installation facilities to handle patients who need more intensive care.

Information obtained through an interview with the Nursing Manager of Edelweiss Hospital Bandung in September, that The hospital faces challenges in HR management, especially in terms of decreasing the number of nurses and bed capacity. There has been a gradual decrease in the total number of nursing staff over three years at the hospital starting from 155 people in 2021, decreasing to 150 people in 2022, then decreasing again to 122 people in 2023, and decreasing further to 110 nurses in 2024, consisting of educational backgrounds of Masters in Nursing, Nurses, D3 Nursing, this reflects a similar phenomenon. In 2023, the number of nurses in the Inpatient Installation was recorded at 47 people but increased to 53 people in 2024.

The hospital has bed capacity 133 TT in 2022, there was a slight decrease to 123 TT in 2023. In 2024, the bed capacity decreased further to 110 TT. The number of beds in the Inpatient Installation, especially in the Suite, VIP, and Class I sections, 2, and 3, totaling 98 TT in 2023, but decreasing to 85 TT in 2024. Based on interviews, this decrease was due to adjustments to patient demand, where there was an increase in demand for VIP rooms, so that the number of TT in the higher class low reduced. Information from the nursing manager also stated that the decline in human resources was caused by the large number of nurses who resigned. The resignation letter as evidence for not working anymore stated the reason for moving to a government hospital as ASN and various family reasons.

The *Bed Occupancy Rate* (BOR) at Edelweiss Hospital Bandung in August 2024 reached 57%. This reflects a promising increase considering the BOR trend since operating as follows: 2021 (31.40%), 2022 (31.48%) and 2023 (46.45%). Although The BOR value above has not reached the standard according to PERMENKES No. 1171 of 2011, which stipulates the ideal BOR between 60% and 85%, there is potential for increasing BOR towards a healthier direction by strengthening various strategies, including increasing human resource capacity.

Edelweiss Hospital Bandung joined BPJS services in February 2022, has experienced an increase in BOR values from 2022 to August 2024. This increase shows that since the hospital joined BPJS, there has been an increase in the number of patients utilizing more affordable health services, especially because BPJS expands the accessibility of care for the community. Likewise, the Tayu Family Healthy Hospital in Pati recorded a similar trend with an increase in BOR after starting to provide BPJS services in 2024. Both hospitals showed that BPJS services encouraged an increase in the number of patients and the use of hospital TT facilities. Supported by research from Damayanthie (2024) at Surakarta General Hospital, it showed that good quality health services in standard inpatient classes increased patient satisfaction and revisit intentions. BPJS services, with affordable health access and adequate facilities, play an important role in ensuring this satisfaction. This helps increase the sense of security regarding financing and equal quality of care, which overall contributes to an increase in BOR.

Nursing Manager convey that the performance of nurses is assessed based on nursing care standards. Evaluation of the quality of nursing performance is carried out internally by the Head of Nursing (Karu) at the Inpatient Care Installation

every three months. There are several issues raised from comments/reviews from patients and their families, related to the quality of health services at the hospital. In 2023, there was a problem with medication, indicating the potential for errors in administering medication to patients, which could be fatal. Nurses are expected to always re-check the medication that will be given to patients in accordance with applicable procedures. In addition, effective communication between nurses and doctors is very important, such as in the handover process related to samples and follow-up *advice* from the doctor in charge of the case (DPJP). Complaints found in 2024, regarding *response time* to patients and confirmation of patient discharge indicate the need for good response speed, as well as smooth communication regarding therapy for patients. Patient identification when performing procedures is also important to prevent medical errors.

This is in line with previous information showing that despite the decrease in TT capacity and the number of nurses, performance and quality evaluations are maintained through internal procedures. However, there has been no job satisfaction survey on nurses and employees as a whole, this can be one of the elements that must be considered for resource empowerment and service quality, including in overcoming the low BOR rate in this hospital.

Edelweiss Hospital Bandung faces challenges in HR management, especially related to the struggle to achieve BOR since operating until now, which shows a trend approaching the PERMENKES standard regarding the ideal BOR. In addition, related to the decline in bed capacity since 2022 (*post* COVID-19) to 2024 with a range of 7.52% annually. This is even more urgent considering that the evaluation of nurse performance is assessed every three months. There are complaints from patients regarding the performance of nurses in the Inpatient Installation, namely complaints about medication, communication, and *response time*. By identifying existing problems, including the absence of a job satisfaction survey for nurses and employees, this study is expected to provide an overview of conditions that can provide a way for empowering human resources and maintaining/increasing and improving quality of service at the hospital.

Thus, the researcher is interested in conducting research on the influence of the quality of work life and job satisfaction of nurses on the performance of nurses in the Inpatient Installation at Edelweiss Hospital, Bandung.

Formulation of the problem

Based on this background, the formulation of the research problems includes:

1. How is the quality picture? life work, job satisfaction, and performance of nurses in the Inpatient Installation at Edelweiss Hospital Bandung?
2. How does the quality of work life affect the performance of inpatient nurses at Edelweiss Hospital, Bandung?
3. How does job satisfaction affect the performance of nurses in the inpatient installation? Edelweiss Hospital Bandung?
4. How does the quality of work life and job satisfaction affect the performance of inpatient nurses at Edelweiss Hospital, Bandung?

Objective Study

From formulation problem the taken objective from research this is:

1. For know quality overview life work, job satisfaction, and performance of nurses in the Inpatient Installation at Edelweiss Hospital Bandung.
2. To assess the influence of quality of work life on the performance of nurses in the Inpatient Installation at Edelweiss Hospital Bandung.
3. To assess the influence of job satisfaction on the performance of nurses in the Inpatient Installation at Edelweiss Hospital Bandung.
4. To analyze the influence of quality of work life and job satisfaction on the performance of inpatient nurses at Edelweiss Hospital, Bandung.

LITERATURE REVIEW

Quality of Work Life

Quality of work life/QWL defined as a broad related entity with various aspects of work And one's life (Leitao, Pereira & Goncalves, 2019). Quality of work life of nurses/QNWL is a nurse's assessment of the quality of their work in achieving a vision to improve nurse performance and productivity (Brooks & Anderson, 2005). Research by Thirumalvalavan and Ananth (2017), revealed that organizations with fulfilled quality of work life can improve performance, productivity and effectiveness, reduce absenteeism, reduce *turnover rates*, reduce work-related injuries, and become very competitive. The findings above illustrate how important the value of quality of work life is in creating work productivity for the benefit of achieving an organization's vision.

Dimensions of Quality of Work Life of Nurses

Quality of work life has a complexity of values between work life and personal life. Brooks & Anderson (2005), describes it into four main dimensions, as follows:

- a. *Worklife - Homelife* : is a balance between professional and personal life. *Worklife dimensions* include: (1) Work, and (2) Workplace policies. *Homelife dimensions* include: Roles at home. Research by Nurwahyuni (2018), said that workload has a negative effect on work -life balance. In other words, when a worker has a better balance between his personal life and work. Conversely, when a worker has a higher level of workload, the lower the balance achieved. To achieve a balance between work life and home life, it is very important to reduce the risk of stress, fatigue, and *burnout*.
- b. *Work Design* : is a structure of tasks and responsibilities of nurses to achieve optimal results . The dimensions of *work design* include: Nurses' work environment, such as workload and assignments. A supportive environment is the main focus of the hospital, because this factor greatly influences nurse satisfaction in carrying out their duties. According to Ahyari (2006), a less supportive work environment can weaken motivation and ultimately reduce employee productivity.
- c. *Work Context* : is a work environment factor that affects the experience and job satisfaction of nurses. The dimensions of *the work context* include the nursing system, salary or work bonuses, and adequate facilities. According to Ariani et al. (2019), explains the relationship between adequate compensation and employee performance. Basically, a salary, bonus, and incentive system that is sufficient with government regulations can provide a sense of security and employee readiness to work as well as possible.
- d. *Work World* : is a nursing job in general as an effect of environmental impacts that must be ready to face various critical situations and be responsible for patient health and safety. The dimensions of *the work world* include: (1) High workload, (2) Multitasking , and (3) Interpersonal relationships between nurses and other medical personnel. According to Ananta et al. (2021), stated that the large number of tasks carried out by nurses often results in neglect of their main tasks which focus on patients. With the many additional responsibilities faced by nurses, it can affect the effectiveness of the services they provide.

Nurses' quality of work life includes dimensions such as work-life balance, work design, work context, and the world of work, all of which contribute to nurses' experiences, satisfaction, and effectiveness in facing professional challenges at work.

Satisfaction Work Nurse

Mueller and McCloskey (1990) in Lee et al.'s research (2016), said that job satisfaction is the degree of positive attitude towards work. Job satisfaction is a person's behavior and emotions towards their work. Good behavior towards work indicates satisfaction in work (Armstrong, 2014). Job satisfaction is a good feeling towards work. Individuals with high job satisfaction feel positive about their work, while those with low job satisfaction tend to feel dissatisfied (Pitasari, 2018). This finding shows that workers who have good job satisfaction feel positive about their work and have good behavior towards their work.

There are two theoretical approaches used in measuring job satisfaction as follows:

1. The McCloskey/Mueller/MMSS Satisfaction Scale Theory was developed in 1990 by Mueller and McCloskey to meet the need for a measure of nurse job satisfaction. The McCloskey satisfaction scale consists of 31 items in three dimensions (safety, social, and psychological). The safety dimension includes satisfaction with pay, vacation, benefits, work/family balance, maternity leave, childcare, and work scheduling. The social dimension assesses satisfaction with relationships with coworkers and opportunities to socialize with coworkers. The psychological dimension includes satisfaction with praise, recognition, autonomy, and responsibility.
2. The theory proposed by Robbins (2003), states that measuring job satisfaction consists of two scales, namely: a) *Single Global Rating* , b) *Summation Score* . First, the *single global scale* is a method for individuals to assess their own satisfaction with their work. Second, the summation score is a more complex method to identify important elements in the job and workers assess their feelings towards each of these elements. Elements assessed such as: (a) Salary, (b) Job promotion opportunities, and (c) Relationships with coworkers.

The two theories of job satisfaction measurement above offer different approaches: the McCloskey/Mueller theory uses scales that measure specific dimensions of nurse satisfaction, while the Robbins theory divides measurement into general and detailed methods to assess important elements of the job. The McCloskey/Mueller approach focuses on safety, social, and psychological aspects, while Robbins relies on global assessments and evaluations of elements such as pay and work relationships.

Performance

Performance is the result of activities or work tasks carried out within a certain period of time (Bernadin and Russuell, 1998). Performance is definition general which often used to show *the output* and achievements achieved by indicators or professions in a certain time period (Wirawan, 2009). Furthermore, Wirawan also discusses aspects that influence the level of performance including quality of work, volume of work, efficiency funds, and initiatives do tasks. Personal

characteristics impact performance such as age, gender, sex, level of education, length of service , placement position, as well as work environment , including interactions with coworkers, superiors, rewards And rewards. According to Bakri (2017), nurse performance is not only measured by the patient's willingness to do something, but also by the patient's readiness to do it. From the definition above, it is stated that the quality and efficiency components of performance are influenced by individual characteristics and the work environment on their readiness to perform tasks.

Framework Thinking

The research framework is designed to understand how the quality of work life and job satisfaction influence the performance of nurses in the Inpatient Installation at Edelweiss Hospital Bandung. The following picture framework thinking from study This:

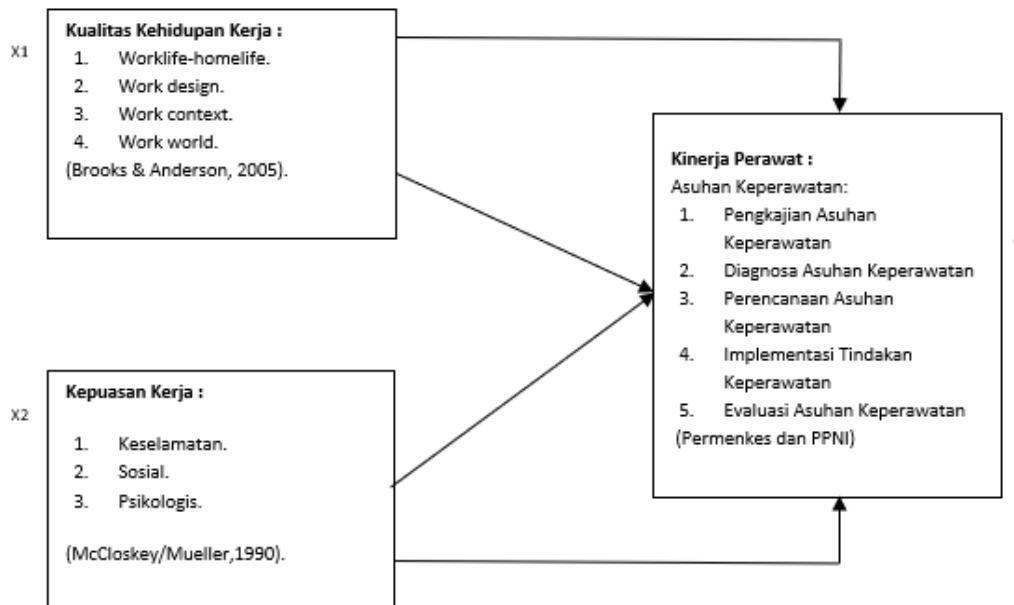


Figure 1 Framework

Hypothesis Study

In study This there is three research hypothesis presented is :

- H1 = Quality of work life has a significant effect on the performance of nurses in the Inpatient Installation at Edelweiss Hospital, Bandung.
- H2 = Job satisfaction has a significant effect on the performance of nurses in the Inpatient Installation at Edelweiss Hospital, Bandung.
- H3 = Quality of work life and job satisfaction have a significant influence on the performance of nurses in the Inpatient Installation at Edelweiss Hospital, Bandung.

RESEARCH METHOD

This research is related with HR in the Hospital. The purpose of this study was to determine the quality of work life, analyze job satisfaction, and assess the performance of nurses in the Inpatient Installation . Unit analysis is subject target for researcher For observed (Arikunto, 2013) . In study In this study, the unit of analysis was Edelweiss Hospital Bandung, and the observation unit included nurses in the Inpatient Installation.

According to Arikunto (2017), explains that the sample is part of the total and characteristics possessed by the population. This study used all nurses of the Inpatient Installation as a research sample totaling 54 people. The sampling technique was carried out using *non-sampling/census* .

Data primary obtained direct through interviews. *Secondary data* is data that supports primary data. primary obtained from document part nursing care at Edelweiss Hospital Bandung, namely a description general location research, hospital organizational structure, BOR value, and data on the number of nurses in the Inpatient Installation.

Quantitative data were collected using a questionnaire. The researcher provided an initial description of the research objectives, provided instructions about method fill in questionnaire, And request agreement participant before starting

process collection data Actually. Then questionnaire shared with Inpatient Installation nurses are divided into three main parts: the first is collecting demographic data from respondents; the second is submitting statements about the quality of nurses' work life; the third part is about nurses' job satisfaction; and the fourth part is distributed to the Head of the Room for the nurse performance questionnaire.

Qualitative data through interviews with the Nursing Manager of Edelweiss Hospital Bandung. Interview guidelines were created using an interview sheet consisting of five sub-topics. This study uses qualitative data in the form of interviews to obtain deeper and more complex information . This method can help broadly that may not appear in quantitative data, such as personal experiences and views on nursing management policies, especially in Inpatient Installations.

Regression Analysis Test

Linear regression analysis to understand the relationship between one or more independent variables to one dependent variable . This research model involves one dependent variable, namely nurse performance (Y) and two independent variables, namely quality of work life (X1) and job satisfaction (X2), using multiple linear regression analysis. The estimated multiple linear regression equation is as follows:

$$Y = \alpha + \beta_1 X_1 + \beta_2 X_2 + \epsilon$$

Where:

Y = Nurse Performance (dependent variable)

X₁ = Quality of Work Life (independent variable)

X₂ = Job Satisfaction (independent variable)

α = Constant (intercept)

β₁ = Regression coefficient of X₁

β₂ = Regression coefficient X₂

ε = Random error/error term or other factors that affect the Y variable (error)

The structure of the analysis model is described by the multiple linear regression diagram as follows:

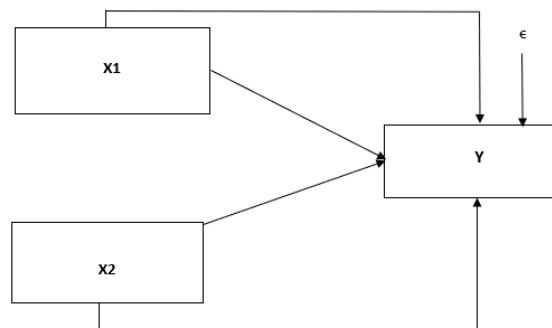


Figure 2 Structure of Linear Regression Research Model

Data scales in statistics are of four types: nominal, ordinal, interval, and ratio. Multiple linear regression requires interval or ratio scale data. If ordinal data is available, there is a solution , namely converting the data to intervals. The MSI (*Method of Successive Interval*) Transformation is a technique that converts ordinal data to intervals by mapping the cumulative proportions of each category to values on a standard normal curve . Because statistical procedures such as linear regression and t-tests require interval data, this transformation is important (Ningsih, 2019).

Classical Assumption Test of Regression Analysis

Testing classical assumptions to ensure more accurate data in multiple regression analysis aims to find out violations before hypothesis testing is carried out. And there are classical assumptions that must be met before applying multiple regression analysis to analyze the influence of the variables being studied , including the following:

a) Normality Test

Data Normality Test is a method to determine whether the residual variables in a regression model have a normal distribution or not (Siregar, 2015). Normality testing uses the *Kolmogorov Smirnov test* processed with SPSS version 27. The conclusion of the normality test results can be seen as follows:

- 1) If the significance value > 0.05, the data is considered normally distributed.

2) If the significance value < 0.05 , the data is considered not normally distributed.

b) Multicollinearity Test

Multicollinearity Test is a test to analyze the presence or absence of a relationship between independent variables , using the Variance Inflation Factor (VIF) method . *Multicollinearity can be* seen by detection through the value *Variance Inflation Factor (VIF)*.

If the VIF value is high then there is Multicollinearity between independent variables or if $VIF > 10$ then it can be concluded that there is Multicollinearity . If the VIF value < 10 then there is no multicollinearity between independent variables.

c) Heteroscedasticity Test

The Heteroscedasticity test is carried out to see whether there is a difference in the variance of the residuals (the difference between the observed data and the predicted values). in the regression model. According to Sugiyono in (Sahir, 2022) , heteroscedasticity is the variance of the el variables in the *constant* or unequal model . In testing Heteroscedasticity using *the Splitman correlation* to identify whether there is a heteroscedasticity problem in the regression results.

- 1) If *the p-value* > 0.05 there is no evidence to reject the initial hypothesis (null), which states that the residual variance of one observation to another produces a fixed / constant value, then this is called homoscedasticity. In other words, the regression model does not experience heteroscedasticity problems, so it can be considered more valid.
- 2) If *the p-value* ≤ 0.05 this indicates that the null hypothesis can be rejected, there is evidence of different values. The ideal regression model is one that meets the assumption of homoscedasticity or does not occur heteroscedasticity.

d) Auto Correlation Test

Autocorrelation is a condition where the disturbance variable in a certain period is correlated with other variables, in other words the disturbance variable is not random. To test whether the results of the regression model estimation do not contain serial correlation between its disturbance terms, the correlation coefficient is influenced. *Durbin Watson (DW) Statistics*. By conducting the DW test, it can be determined whether there is autocorrelation between the sequence of observations over time. The DW value is used as a formal procedure to test for the presence of autocorrelation. According to Algifari (2010) if the DW value is $1.66 < DW < 2.34$.

Correlation Analysis

Correlation analysis to measure the strength of the linear relationship between two variables X and variable Y. The bivariate correlation coefficient that is often used is the correlation formulated by *Karl Pearson*. The test uses *Pearson's correlation*. with r in the formula below:

$$r = \frac{n(\sum XiYi) - (\sum Xi)(\sum y)}{\sqrt{\{n(\sum Xi^2) - (\sum Xi)^2\} - \{n(\sum yi^2) - (\sum yi)^2\}}}$$

Description: $-1 \leq r \leq +1$

- r = correlation coefficient
- $\sum xi$ = Total X
- $\sum yi$ = Total Y
- n = Total respondents
- $\sum xy$ = Product of XY of Each Respondent
- $(\sum xi)^2$ = S score X total
- $(\sum yi)^2$ = Total Y score

If r approaches +1, it will indicate a significant relationship between variable X and variable Y, this means that the better the quality of work life or the better the job satisfaction, the better the nurse's performance . If r approaches -1, it indicates a strong negative relationship, which means that an increase in the quality of work life or job satisfaction may be followed by a decrease in nurse performance, and if r approaches 0 , it indicates no there is a linear relationship between the variables tested .

Analysis of Determination Coefficient

The coefficient of determination (KP) with the symbol R^2 is used to measure the influence of independent variables on dependent variables. The coefficient of determination is $(0 \leq R^2 \leq 1)$. With the formula used for the duration of the coefficient of determination is:

$$KP = r^2 \times 100\%$$

Information:

KP = Coefficient of determination

R^2 = Correlation coefficient

If the value of the coefficient of determination continues to be small or if it approaches zero, then the influence of variable X on variable Y is getting smaller, or it can be said that the value of R^2 is getting closer to 1 (or 100%), which indicates that the influence is getting bigger and more significant with all variables X against variable Y.

Hypothesis Testing

Hypothesis is a temporary assumption aimed at knowing the truth, so it is necessary to test the existing hypothesis. Statistical tests are carried out by considering the characteristics of the variables to be tested, using regression and correlation analysis calculations, as shown below:

1. Partial Testing (T-Test)

Partial/T Test to test how far the variable influences X with variable Y partially.

A. Hypothesis Formulation:

The hypothesis in this study is:

H0. $\beta_1 = 0$, It is suspected that there is no partial influence of the Quality of Work Life on the performance of nurses in the Inpatient Installation at Edelweiss Hospital, Bandung.

H1. $\beta_1 \neq 0$, It is suspected that there is a partial influence of the Quality of Work Life on the performance of nurses in the Inpatient Installation at Edelweiss Hospital, Bandung.

H0. $\beta_2 = 0$, It is suspected that there is no partial influence of job satisfaction on the performance of nurses in the Inpatient Installation at Edelweiss Hospital, Bandung.

H1. $\beta_2 \neq 0$, It is suspected that there is a partial influence of job satisfaction on the performance of nurses in the Inpatient Installation at Edelweiss Hospital, Bandung.

B. Testing Criteria

The significance level (α) applied is 0.05 or using the error rate ($\alpha = 0.01$) for two-way testing. Therefore, the criteria for accepting or rejecting the hypothesis are as follows:

1. If $t_{\text{count}} \geq t_{\text{table}}$, then H0 is rejected; H1 is accepted, meaning that there is an influence between variable X and variable Y.
2. If $t_{\text{count}} \leq t_{\text{table}}$, then H0 is accepted; H1 is rejected, meaning there is no influence between variables X and Y.

RESULTS OF STUDY

Table 1. Compilation of Research Results on Quality of Work Life, Job Satisfaction, and Nurse Performance Variables

No.	Research Variables	Average value	Category
1	Quality of Nurses' Work Life	3.47	Good
2	Nurse Job Satisfaction	3.46	Good/Satisfied
3	Nurse Performance	4.28	Very good

The results of the study showed that the quality of nurses' work life was in the good category with an average score of 3.47, nurses' job satisfaction was also classified as good or satisfactory with an average score of 3.46, and nurses' performance in inpatient installations was recorded as very good, with an average score of 4.28. These findings indicate that a conducive work environment and a good level of job satisfaction play an important role in supporting optimal nurse performance in providing services to patients.

1. Classical Assumption Testing

The next step is to analyze the data using multiple linear regression tests. Before analyzing the questionnaire data in the form of ordinal data, the data needs to be converted into interval data using the MSI transformation method. This is

important because one of the requirements in the regression test is the use of interval data. The process of converting ordinal data into intervals is carried out using *Microsoft Excel* software, and the results can be seen in appendix 6.

a. Normality Test

Normality testing is carried out using the *Kolmogorov-Smirnov test*. According to Siregar (2015), the basis for decision making can be done based on probability. that is:

- (1) If the significance value > 0.05, the data is considered normally distributed.
- (2) If the significance value < 0.05, the data is considered not normally distributed.

Table 2. Normality Test with *Kolmogorov-Smirnov Test*

		Unstandardized Residual
N		51
Normal Parameters ^{a,b}	Mean	.0000000
	Std. Deviation	3.26291160
Most Extreme Differences	Absolute	.079
	Positive	.052
	Negative	-.079
Test Statistics		.079
Asymp. Sig. (2-tailed)		.200 ^{c,d}

- a. Test distribution is Normal.
- b. Calculated from data.
- c. Lilliefors Significance Correction.
- d. This is a lower bound of the true significance.

Source: SPSS 27.0 Processing Results

Based on Table 4.9 above, it can be seen that the significance or probability value is 0.200 for the variables of quality of work life, job satisfaction and nurse performance. the value is greater than 0.05 then it can be concluded that the data used has met the assumption of normality and can then be used for regression analysis that meets the normality test. Another way to detect whether the residual is normally distributed or not is by graphical analysis by looking at the normality of the normal *P-Plot of Regression image*. That the points are spread around the diagonal line and follow the direction of the line, which indicates that the data comes from a population with a normal distribution (Appendix 7).

b. Multicollinearity Test

Multicollinearity test is conducted by looking at the *tolerance value* and its opposite, *Variance Inflation Factor (VIF)*. Multicollinearity occurs when the *tolerance value* is below 0.10 or the VIF value is above 5. The results of the multicollinearity test are presented in the following table :

Table 3. Multicollinearity Test

Model		Coefficients ^a			
		Partial	Correlations Part	Tolerance	VIF
1	(Constant)				
	Quality of Work Life	.519	.357	.465	2.151
	Job satisfaction	.369	.234	.465	2.151

a. Dependent Variable: Nurse Performance

Source: SPSS 27.0 Processing Results

From the table above, it can be seen that each independent sub-variable has a *tolerance value* above 0.10 and a VIF value below 5 (VIF < 10) so it can be concluded that there is no multicollinearity between the independent variables in the regression model.

c. Heteroscedasticity Test

Heteroscedasticity is the opposite of homoscedasticity, which is a condition where there is inequality of error variance for all observations of each independent variable in the regression model. Conversely, the definition of homoscedasticity

is a condition where there is equality of error variance for all observations of each independent variable in the regression model.

The purpose of the heteroscedasticity test is to test whether in the regression model there is inequality of variance from residuals from one observation to another. A good regression model is one in which there is no heteroscedasticity. The heteroscedasticity test can be done by looking at the plot image. If the points in the plot image are spread out, then there is no heteroscedasticity that can damage the regression model.

The basis for decision making is:

1. If there is a certain pattern, such as the existing points forming a certain regular pattern (wavy, widening then narrowing), then heteroscedasticity occurs.
2. If there is no clear pattern, such as dots spread above and below the number 0 on the Y axis, then heteroscedasticity does not occur.

Based on *scatterplot* between *standardized residual* and *standardized predicted value* which is seen that it does not form a certain pattern or the points are spread above and below the number 0 on the Y axis. So it can be concluded that there is no heteroscedasticity situation that is damaging to the regression model (Appendix 7). Another way that can be used to detect heteroscedasticity is by using the *Spearman* rank test. The following are the results of heteroscedasticity testing using the *Spearman* rank test :

Table 4. Heteroscedasticity Test Results with Spearman Rank Test Correlations

		Unstandardized Residual	
Spearman's rho	Quality of Work Life	Correlation Coefficient	-.024
		Sig. (2-tailed)	.865
		N	51
	Job satisfaction	Correlation Coefficient	-.042
		Sig. (2-tailed)	.768
		N	51
	Unstandardized Residual	Correlation Coefficient	1,000
		Sig. (2-tailed)	.
		N	51

** . Correlation is significant at the 0.01 level (2-tailed).

Source: SPSS 2 7 Processing Results

Based on the test results, it shows that there is no heteroscedasticity in the variables as evidenced by the significance value of each variable of more than 0.05, namely 0.865 for the Sig . value of the quality of work life variable and 0.768 for the Sig . value of the job satisfaction variable . This shows that the residual variance remains constant. for both variables. The regression model is free from heteroscedasticity problems, so that the model estimation results are more valid for use in further analysis.

d. Autocorrelation Test

Autocorrelation is a condition where the disturbance variable in a certain period is correlated with other variables, in other words the disturbance variable is not random. To test whether the results of the regression model estimation do not contain serial correlation between its disturbance terms, it is influenced by Durbin Watson Statistics, namely by looking at the Durbin Watson correlation coefficient. By conducting the Durbin Watson test, it can be seen whether there is autocorrelation between the same sequence of observations from time to time. The results of the autocorrelation test in this study can be seen in table 4.1 2 .

Table 5. Autocorrelation Test with Durbin Watson Model Summary ^b

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics		Durbin-Watson
					R Square Change	F Change	
1	.809 ^a	.655	.640	1,21573	.655	45,465	1,304

a. Predictors: (Constant), Job Satisfaction, Quality of Work Life

b. Dependent Variable: Nurse Performance

Source: SPSS 2 7 Processing Results

Durbin-Watson (DW) value is used as a formal procedure to test for the presence of autocorrelation. Autocorrelation testing shows a DW value of 1.304. According to Algifari (2010) , if the DW value is at $1.66 < DW < 2.34$, it can be concluded that there are no symptoms of autocorrelation. in this study.

2) Verification Analysis

The Influence of Quality of Work Life and Job Satisfaction on the Performance of Inpatient Nurses at Edelweiss Hospital, Bandung

This study used multiple linear regression analysis, which is a regression that has one dependent variable and two or more independent variables (Sahir, 2022). Multiple linear regression analysis is used to test whether the independent variables have an effect on the dependent variable simultaneously or partially.

Multiple Linear Regression Analysis

To understand the influence of quality of work life and job satisfaction simultaneously on nurse performance, multiple linear regression analysis is used. Mathematically, this can be described in the form of the following statistical equation:

$$Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \varepsilon$$

By using SPSS Software Ver 27, then the following results were obtained:

Table 6. Regression Analysis Results

		Coefficients ^a			
		Unstandardized Coefficients		Standardized Coefficients	t
Model		B	Std. Error	Beta	
1	(Constant)	3.247	1,017		3.194
	Quality of Work Life	.182	.043	.524	4.210
	Job satisfaction	.135	.049	.343	2,754

a. Predictors: (Constant), Job Satisfaction, Quality of Work Life
 b. Dependent Variable: Nurse Performance
 Source: SPSS 27 Processing Results

Based on the data in table 4.13, a regression equation can be obtained that describes the influence of quality of work life and job satisfaction simultaneously on predicting nurse performance, namely:

$$Y = 3.247 + 0.182X_1 + 0.135X_2$$

1. The regression coefficient value of the quality of work life variable is positive, namely 0.182, meaning that every 1% increase in the quality of work life is predicted to increase nurse performance by 0.182, assuming that other variables remain constant.
2. The regression coefficient value of the job satisfaction variable is positive, namely 0.135, meaning that every 1% increase in job satisfaction is predicted to increase nurse performance by 0.126, assuming that other variables remain constant.

Multiple Correlation Analysis

To measure how strong the relationship between the quality of work life and job satisfaction) simultaneously with the performance of nurses, multiple correlation analysis is used. Based on the processing results, the multiple correlation coefficients of the quality of work life and job satisfaction simultaneously with the performance of nurses are obtained as follows:

Table 7 Multiple Correlation Between Quality of Work Life and Job Satisfaction with Nurses ' Performance

Model Summary ^b						
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics	
					R Square Change	F Change
1	.809 ^a	.655	.640	1.21573	.655	45,465

a. Predictors: (Constant), Job Satisfaction, Quality of Work Life
 b. Dependent Variable: Nurse Performance
 Source: SPSS 27 Processing Results

Based on the results of table 4.14, the R value (correlation coefficient) is 0.809. A clearer interpretation of the correlation coefficient assessment will be stated in Table 4.15 as follows:

Table 8. Interpretation of Correlation Coefficient

Coefficient Interval	Relationship Level
0.00-0.199	Very low
0.20-0.399	Low
0.40-0.599	Currently
0.60-0.799	Strong
0.80-1.000	Very strong

Source: Sugiyono (2020)

It is known that the R value (correlation coefficient) is 0.809, which is between 0.80 - 1,000, which means that the quality of work life and job satisfaction have a very strong relationship with nurse performance. The r value is close to +1, there is a significant relationship between variable X and variable Y, this means that the better the quality of work life or the better the job satisfaction, the better the nurse's performance .

Coefficient of Determination

After being tested and proven that the quality of work life and job satisfaction have a relationship with nurse performance, the next step is to calculate how much influence the quality of work life and job satisfaction have simultaneously on nurse performance. Inpatient Installation. The determination coefficient value obtained through processing results using *SPSS 27 software* is presented in the following table:

Table 9. Coefficient of Determination

Model Summary ^b						
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics	
					R Square Change	F Change
1	.809 ^a	.655	.640	1.21573	.655	45.465

a. Predictors: (Constant), Job Satisfaction, Quality of Work Life

b. Dependent Variable: Nurse Performance

Source: SPSS 2 7 Processing Results

Based on the data in table 4.16 above, it can be seen that the value of the multiple correlation coefficient (R) of the quality of work life and job satisfaction simultaneously on nurse performance is 0.809 . In addition to the correlation coefficient, the table above also presents the R-square value (0.655) which is known as the coefficient of determination (KD) which is calculated by squaring the correlation coefficient :

$$KP = r^2 \times 100\%$$

Information:

KP = Coefficient of determination

R ² = Correlation coefficient

$$KD = (0.809)^2 \times 100\% = 65.5 \%$$

The determination coefficient of 65.5 % indicates that 65.5 % of changes in the performance of Inpatient Installation nurses can be caused by the quality of work life and job satisfaction simultaneously. In other words, the quality of work life and job satisfaction simultaneously have an influence of 65.5 % on nurse performance . While the remaining 34.5 % is the influence of other factors outside the variable .

The magnitude of the influence of each independent variable, namely the quality of work life and job satisfaction, partially on nurse performance can be calculated by multiplying the *standardized coefficients value by the zero-order correlation* contained in table 4.17 as follows:

Table 10. Partial Determination Coefficient

Coefficients ^a					
Model		Unstandardized Coefficients		Standardized Coefficients	t
		B	Std. Error	Beta	
1	(Constant)	3.247	1,017		3.194
	Quality of Work Life	.182	.043	.524	4.210
	Job satisfaction	.135	.049	.343	2,754

Model	Sig.	Coefficients ^a		Correlations Zero order
		95.0% Confidence Interval for B Lower Bound	Upper Bound	
1				
(Constant)	.002	1.203	5.291	
Quality of Work Life	.000	.095	.269	.775
Job satisfaction	.008	.036	.233	.726

Source: SPSS 27 Processing Results

1. For the quality of work life

Partial KD = Zero order quality of work life x Beta quality of work life

Partial KD = 0.775 x 0.524

= 0.4061 or 40.61%

2. For job satisfaction

Partial KD = Zero order job satisfaction x Beta job satisfaction

Partial KD = 0.726 x 0.343

= 0.2491 or 24.91%

The magnitude of the influence of the quality of work life on nurse performance is 40.61%. Likewise, the magnitude of the influence of job satisfaction on nurse performance is 24.91%. Based on the results of the calculation of the magnitude of the influence of each independent variable, it can be seen that between the two variables, the quality of work life has the greatest influence on nurse performance. From these results, it can be proven that the structural research model below has been proven:

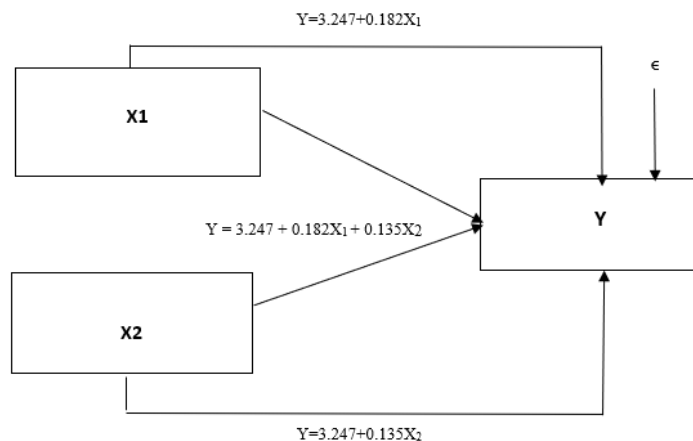


Figure 3 Structure of Multiple Linear Regression Research Model

3) Hypothesis Testing

Overall/Total Hypothesis Test (Simultaneous /F Test)

To find out whether the quality of work life and job satisfaction have an influence on nurse performance , we will test it using the F test statistic. Hypothesis testing:

H0; $\beta = 0$, Quality of work life and job satisfaction do not have a significant effect simultaneously on the performance of nurses in the Inpatient Installation at Edelweiss Hospital, Bandung.

H1; $\beta \neq 0$, Quality of work life and job satisfaction have a significant simultaneous effect on the performance of nurses in the Inpatient Installation at Edelweiss Hospital , Bandung.

By using software SPSS ver 27 , then the results can be obtained below:

Table 11. Simultaneous Testing of Quality of Work Life and Satisfaction Work on Nurse Performance

ANOVA ^a						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	134,394	2	67.197	45,465	.000 ^b
	Residual	70,944	48	1,478		
	Total	205,338	50			

a. Dependent Variable: Nurse Performance
 b. Predictors: (Constant), Job Satisfaction, Quality of Work Life
 Source: SPSS 2 7 Processing Results

Based on the calculation above, the calculated F value is 45.465 , where the rejection criteria for Ho are: The calculated F is greater than the F table , by taking a significance level (α) of 5%, then from the F distribution table the F table value is obtained for $F_{(0.05; 2, 48)} = 2.807$, or simply look at the sig F value of 0.000 , which means that it is α less than 5% and shows significance. Due to $F_{count} 45,465$ greater than $F_{table} 2.807$, and sig F is 0.000, then Ho is rejected. This means that it can be concluded that there is a simultaneous influence of the quality of work life and job satisfaction on performance of inpatient nurses at the hospital .

Partial Hypothesis Test (T-Test)

To find out which variables of quality of work life and job satisfaction actually have an influence on the performance variables of nurses in the Inpatient Installation at R S Edelweiss Bandung . The calculated t value is compared with the t table at an error rate α of 5%.

Table 12. Partial Testing of the Variables of Quality of Work Life and Job Satisfaction on Nurse Performance

Coefficients ^a						
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	3.247	1,017	.002	3.194	.002
	Quality of Work Life	.182	.043	.000	4.210	.000
	Job satisfaction	.135	.049	.008	2,754	.008

a. Dependent Variable: Nurse Performance
 b. Predictors: (Constant), Job Satisfaction, Quality of Work Life
 Source: SPSS 2 7 Processing Results

The t-value for quality of work life is 4.210. by taking a significant level α by 5%, then the value of the t table Or $t_{0.05, 48} = 1.988$, because the calculated $t = 4.210$ greater than $t_{table} = 1.988$, then rejects Ho with a significance value (*p-value*) = 0.000 , meaning less than 0.05, thus it can be concluded that the quality of work life has a significant effect on nurse performance. Visually, the acceptance and rejection areas of Ho can be described as follows:

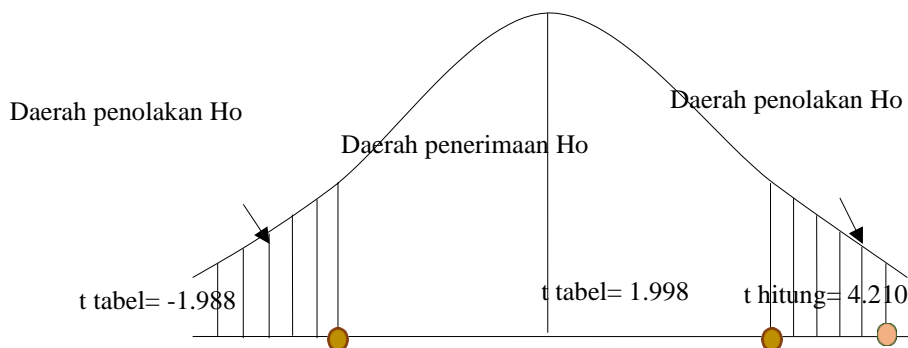


Figure 4 Rejection and Acceptance of Ho The Influence of Quality of Work Life On Nurse Performance

calculated t value for job satisfaction is 2.754 , taking the significance level α of 5%, then the value of t table Or $t_{0.05, 48} = 1.988$, because $t_{count} = 2.754$ is greater than $t_{table} = 1.988$, then reject Ho with a significance value (*p-value*) = 0.008 meaning less than 0.05, thus it can be concluded that job satisfaction has a significant effect on nurse performance .

Visually, the acceptance and rejection areas of H_0 can be described as follows:

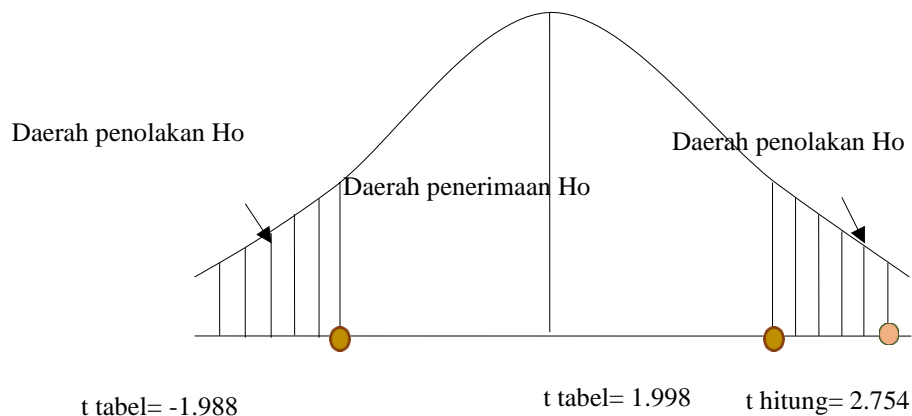


Figure 5 Rejection and Acceptance of H_0 The Effect of Job Satisfaction on Nurse Performance

All data have been analyzed using multiple linear regression tests and hypothesis tests. The next step is to discuss the results of the data analysis in order to answer the formulation of the research problems in the second, third, and fourth points.

a. The Influence of Quality of Work Life on the Performance of Inpatient Nurses at Edelweiss Hospital, Bandung

The results of statistical calculations show that the quality of work life *has* a positive effect on nurse performance. The results of the analysis obtained the coefficient of determination value stating that an increase in the quality of work life by one unit contributes to an increase in nurse performance by 40.61%. The *t-statistics value* (4.210) with $p < 0.05$ (0.000). The *t-statistics results* have a value greater than the t-table (1.998), so in this study the quality of work life has a significant effect on nurse performance. The quality of nurse work life (QNWL) refers to nurses' perceptions of the quality of their work in realizing the vision to improve performance and productivity (Brooks & Anderson, 2005). The quality of nurse work life has an effect on nurse performance (Sibuea ZM, 2024). This supports the findings of Brooks & Anderson (2005) and Sibuea ZM (2024). Nurses who have good quality of work life are able to provide optimal services to patients, improve work effectiveness, and increase job satisfaction, thus supporting the success of the organization's overall goals.

b. The Influence of Job Satisfaction on the Performance of Inpatient Nurses at Edelweiss Hospital, Bandung

Mueller and McCloskey (1990) in Lee et al.'s (2016) study define job satisfaction as the level of an individual's positive attitude towards their work. This is in line with Robbins (2015), who defines job satisfaction as a positive feeling that arises from evaluating various aspects of work. In the context of this research at the Inpatient Installation of Edelweiss Hospital Bandung, the results of statistical calculations show that job satisfaction influential positive on the performance of nurses in the Inpatient Installation at Edelweiss Hospital Bandung. The results of the analysis obtained a *t-statistics value* (2.754) with $p < 0.05$ (0.008) and positive *path coefficients* (0.343). The *t-statistics results* have a value greater than the t-table (1.998), so in this study job satisfaction has a significant influence on nurse performance. This supports previous findings regarding the close relationship between job satisfaction and health worker performance.

c. The Influence of Quality of Work Life and Job Satisfaction on the Performance of Inpatient Nurses at Edelweiss Hospital, Bandung

Based on the results of research conducted on 51 nurses and 3 Heads of Inpatient Installation Rooms, it was found that the quality of work life and job satisfaction has a positive effect on nurse performance. The results of the analysis were obtained from the calculation of the *calculated F value* of 45,465 which is greater than the *F table* for $F_{(0.05; 2, 48)} = 2.807$, or simply look at the *p-value* of 0.000 which means that with α less than 5% it still shows significance with a strong positive correlation (0.809) which shows a close relationship. This means that it can be concluded that there is a simultaneous influence of the quality of work life and job satisfaction on nurse performance.

d. Discussion of Interview Results with the Head of Nursing Division

Interviews with Nursing Managers discussed policies, challenges, and steps to improve nurse performance in Inpatient Installations. In the policy, it was found that Nursing policies were formulated through collaboration between Nursing Managers, Head of Rooms, and nursing staff, and were based on National and International standards. This finding is in line with research by Ulrich et al. (2010), which showed that structured Nursing policies with a focus on quality greatly

influenced nurse performance and emphasized the importance of policies supported by hospital leaders and involving nursing staff in their design.

Effective management support also has a significant impact on nurse performance, as explained in the study by Aiken et al. (2012). This study found that good hospital leadership and direct attention to operations can improve nurse satisfaction and performance. This was reflected in interviews at Edelweiss Hospital Bandung, the importance of hospital leadership support, including field monitoring and regular meetings to discuss operational issues, was highly emphasized.

The nursing managerial practice interview approach explores information on five aspects providing an in-depth understanding of daily practice. The results present the impression that the interviews not only provide a qualitative perspective, but also confirm the relationships and impacts that have been proven through quantitative analysis. The synergy between the interview results and statistical tests provides a stronger foundation for formulating more optimal management strategies. The following is a strengthening of the five aspects or managerial practices:

a. Improving the Quality of Work Life:

The results of the multiple linear regression-correlation test showed a very strong relationship between the quality of work life and nurse performance ($R = 0.809$). In addition, the hypothesis test proved that the quality of work life has a significant effect on nurse performance with a $\text{calculated } t \text{ value} = 4.210 > t_{\text{table}} = 1.988$ and a $p\text{-value}$ (0.000) less than 0.05. Therefore, management can strengthen policies that support the balance between work and personal life for nurses, such as providing flexible work schedules, additional health facilities, and reward programs such as Umrah and trips to Turkey.

b. Increased Job Satisfaction:

The results of the hypothesis test show that job satisfaction has a significant effect on nurse performance with $t_{\text{count}} = 2.754 > t_{\text{table}} = 1.988$ and $p\text{-value}$ (0.008) is smaller than 0.05. Therefore, management needs to create a comfortable work environment and improve internal communication to ensure that nurse satisfaction remains high. This can be done through regular training and the *Best Nurse of the Month* award.

c. Development of Policies and SOPs that Support Performance

Frequent miscommunication can be minimized with intensive communication training and strict monitoring. Strengthening SOPs that support collaboration between work units is a strategic step to ensure efficient workflow. The results of the regression test showed a very strong relationship between the quality of work life and job satisfaction on nurse performance ($R = 0.809$). This indicates the importance of structured policy management that is relevant to operational needs. The policy-making process at Edelweiss Hospital involving the Nursing Manager, Head of Room, and nursing staff has supported effective policy implementation. By periodically revising policies and involving all parties, the hospital can continue to adjust policies according to field conditions, thus supporting optimal nurse work quality.

d. HR Competency Training and Development

Hypothesis testing shows that quality of work life ($t_{\text{count}} = 4,210$) and job satisfaction ($t_{\text{count}} = 2,754$) have a significant influence on nurse performance. Therefore, regular training, both related to *hard skills* such as the use of medical devices and *soft skills* such as communication, needs to be carried out continuously. The process of disseminating training materials also ensures that the benefits of training are widely spread among staff. In addition, providing formal education scholarships and external training can be a long-term strategy to improve HR competence and work motivation.

e. Improvement of Work Facilities and Technology

Limited medical equipment and technology, such as e-medical records, are challenges frequently mentioned in interviews. With the hypothesis results showing a significant impact of quality of work life on performance, management needs to accelerate the procurement of medical equipment and integration of technology systems. This will support a more efficient work environment and encourage nurse productivity. The tracking system for equipment between units also needs to be optimized to minimize the impact of temporary facility limitations.

The results of managerial interviews can explain between policies or practices implemented and the expected results in the study. This interview can reveal the extent to which managerial policies support or hinder nurse performance and job satisfaction. In addition, interviews also provide very important enrichment for researchers about daily practices that occur in the field, such as policy implementation and challenges faced by Nursing staff. Thus, interviews not only provide an overview of the results of existing policies, but also provide insight into dynamics and gaps that may not be visible from quantitative data such as lack of communication, thus enriching researchers' understanding of the operational context in the hospital.

Descriptive analysis of the variables of quality of work life, job satisfaction, and nurse performance showed results that were in line with the regression-correlation analysis and research hypotheses. Descriptive analysis revealed that the three variables were generally in the category of "Good" to "Very Good", the regression-correlation analysis showed a value of 0.809, indicating a very strong relationship. In addition, the hypothesis test strengthened these findings, by showing significant results. This is evidenced by the fact that both independent variables have a positive effect on nurse

performance. It can be concluded that improvements in the quality of work life and job satisfaction will directly support improvements in nurse performance.

However, there are gaps in several aspects. Based on descriptive analysis, although the average score is in the category of "Good" to "Very Good" there are still a number of indicators with lower values, especially in the dimensions of *worklife-homelife* and *work design*, which indicate areas with certain challenges or dissatisfaction. Regression analysis revealed that the contribution of quality of work life to nurse performance reached 40.61%, this value is higher than the contribution of job satisfaction of 24.91%. This reflects an imbalance in influence between the two variables. Hypothesis testing also showed that quality of work life has a greater impact on nurse performance compared to job satisfaction. Therefore, improving quality of work life is seen as more effective in addressing this gap and supporting overall performance improvement.

CONCLUSION

Based on the results of the research that has been conducted, the following conclusions can be drawn:

1. The description of the quality of work life, job satisfaction, and performance of nurses in the Inpatient Installation at Edelweiss Hospital, Bandung is as follows:
 - a. Quality of work life Nurses are interpreted in the "Good" criteria, even though there are still *worklife-homelife* and *work design dimensions*. with a lower value. This is represented by the number nurses who have not fulfilled need.
 - b. Satisfaction The work of nurses is interpreted in the criteria of "Good or Satisfactory".
 - c. Performance nurses are good. However, it is still necessary to improve the flexibility of nursing actions to adjust to changes in patient conditions.
2. There is an influence of the quality of work life on the performance of nurses. This shows that the better the quality of work life perceived by nurses will result in an increase in nurse performance of 40.61% with a *p-value* (0.000).
3. There is an influence of job satisfaction on nurse performance. This shows that the better the job satisfaction, the better the nurse performance. perceived by nurses will result in an increase in nurse performance of 24.91% with a *p-value* (0.008).
4. There is positive influence simultaneously between the quality of work life and job satisfaction on nurse performance. This shows that the better the quality of work life and job satisfaction felt by nurses, the nurse performance will increase by 65.5 % with a *p-value* of 0.000 less than 0.05.

Suggestion

- 1) For the Management of Edelweiss Hospital Bandung:

Additional support is needed from the management of Edelweiss Bandung Hospital regarding policies that can facilitate daily operations such as nursing resources, medical equipment and technology (e-medical records).

- 2) Strategy:

Hospital is advised to strengthen the planned redistribution of human resources. Acceleration of the implementation of e-medical records, the implementation of periodic job satisfaction surveys, and planning for additional staff can be priorities in supporting operational efficiency including improving the quality of service.

- 3) Optimizing the Quality of Nurses' Work Life:

The quality of work life of nurses in the Inpatient Installation is considered not yet fully optimal even though it has reached a fairly good category. The aspects of concern are the dimensions of *worklife-homelife* and *work design*, especially on items related to the suitability of the number of nurses with the needs in the workplace to meet operational needs, which can have an impact on the workload and quality of services provided. Therefore, it is recommended to consider increasing the number of nurses through: a. New recruitment b. Redistribution of personnel to work units in need to ensure the suitability of the number of nurses with patient needs.

- 4) Strengthening Conformity between SOP and Field Practice:

Supervision of the implementation of internal nursing SOPs and joint SOPs between several work units: This supervision process is intended to ensure that the SOPs implemented are in accordance with actual conditions in the field. Further discussions with related parties both internally and between work units will be able to identify gaps between written policies and field conditions. The results of supervision carried out periodically can be used as one of the considerations when the time for re-evaluation comes which will fall in 2026.

- 5) Strengthening the *Work-Life Balance Program*:

It is recommended to implement a *work-life balance program strategy*, especially for Inpatient Installation nurses. Some programs in *Worklife Balance* include training and development, appreciation or awards to increase motivation, and flexibility of work schedules to meet the suitability between workload and excessive job descriptions. These

programs aim to improve the welfare, physical and mental health, and emotional control of nurses, so that they can maintain a balance between work and personal life.

- 6) Further research related to factors that have not been included in this study such as emotional support through counseling services to reduce stress and prevent *burnout* in nurses. In addition, inadequate work facilities, such as medical equipment and PPE, and job satisfaction between work units related to team coordination are also important to study. Finally, the quality of compensation that is not commensurate with the workload can affect nurse motivation and performance. By examining these four factors, it is hoped that effective solutions can be found to improve the welfare and performance of future nurses.

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