

The Influence of Nursing

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The Influence of Nursing Committee on Professionalism of Nursing Staff with Work Motivation as a Moderation Variable At the General Hospital Ganesha, Gianyar, Bali

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Abstract--- The quality of services carried out by nursing can be assessed as one of indicator either good or bad serve quality in hospitals, so that the nurses should have good knowledge, skills and ethics and discipline, to carry out their daily duties professionally. Increasing the professionalism of nursing can be realized by applying the role of the nursing committee towards the development of the professionalism of human resources in nursing. This is in accordance with Minister of Health Regulation of the Republic of Indonesia number 49 of 2013 concerning Hospital Nursing Committee. This study aims to analyze the effect of the nursing committee on the nursing professionalism. To analyze work motivation that can moderate the effect of the nursing committee on the nursing professionalism. The number of samples has been applied in this study were 135 nurses by using the saturated sample method. Data collection was done by using Likert scale questionnaire. Data analysis techniques using SEM-PLS. The results showed that the nursing committee have positive effect on the nursing professionalism. Work motivation can strengthen the effect of the nursing committee on the nursing professionalism at Ganesha Hospital.

Keywords--- Nursing Committee, Work Motivation, Nursing Professionalism.

I. Introduction

The hospitals are health care institutions that carry out individual health services in a comprehensive manner (including promotive, preventive, curative and rehabilitative), by providing inpatient, outpatient and emergency services. The quality of patient care is highly dependent on the performance of physicians and nurses (Lombarts, 2014). Although the commitment to the quality of patient care is firmly grounded in the ethical bases of both the medical and nursing professions, ideas about how this commitment should translate in assuring and improving patient care quality have changed over the past decades due to i.e. the explosion of medical knowledge, increased accountability and cost containment demands and the establishment of the science of quality improvement research. Nurses are the largest part of professional staff in medical institutions and desperately need ongoing efforts to promote competency in the nursing profession to meet high expectations related to cost effectiveness, high-quality nursing services, and social demands (Park & Kim, 2014). The quality of services carried out by nursing staff can be assessed as one indicator of the good or bad quality of services in hospitals, so nurses are required to have good knowledge, skills and ethics and professional discipline, to carry out their daily duties professionally. Increasing the professionalism of nursing staff can be realized by applying the role of the nursing committee towards the development of the professionalism of human resources in nursing staff (Kelly & Courts, 2007).

The nursing committee in accordance with Minister of Health Regulation number 49 of 2013 states that the Nursing Committee is a non-structural organization that has the main function of maintaining and improving the professionalism of nursing staff through credential mechanisms, safeguarding professional quality, and maintaining ethics and professional discipline. The implementation of the nursing committee aims to improve the professionalism of nursing staff and regulate good clinical governance so that the quality of nursing services and midwifery services oriented to patient safety in hospitals is more secure and protected. The Nursing Committee consists of several sub or dimensions. Such as (a) credential committee, (b) professional quality committee, and (c) ethics committee and professional discipline.

The first nursing sub-committee is a credential committee is to ensure that nursing staff are competent in providing nursing services to patients in accordance with professional standards (Dickerson *et al*, 2011).

The credential process includes the stages of review, verification and evaluation of documents relating to the performance of nursing staff. Based on the results of the credential process, the nursing committee recommends that the head / director of the hospital determine the clinical assignment that will be given to the nursing staff in the form of a clinical assignment letter. The clinical assignment is in the form of a list of clinical authorities given by the head / director of the hospital to nursing staff to carry out nursing care in the hospital environment for a certain period.

The second nursing sub-committee is the professional quality committee guaranteeing the quality of care / nursing care, so that nursing staff as service providers must be competent, ethical, and culturally sensitive (Bassendowski & Petrucka, 2009). The quality of the profession of nursing staff must always be improved through continuous professional development programs that are arranged systematically, directed and patterned or structured. The professional quality of nursing staff must always be continuously improved according to the development of health, science and technology issues, changes in professional standards, service standards and the results of the latest research.

The third nursing sub-committee is a professional ethics and discipline committee whose role is that every nursing staff must have a high professional discipline in providing nursing care and implementing professional ethics in practice. With increasing awareness of ethical issues in health care, many nursing professionals have formed Nursing Ethics Committees (NEC), namely preparing nurses in ethical concepts, decision making and relevant legal standards; and provide a forum for nurses to act as patient advocates (Kim *et al*, 2015). These include legally mandatory ethics review boards for research as well as committees for moral deliberation and consultation on clinical cases (Cusveller, 2012). Professionalism of nursing staff can be improved by fostering and enforcing professional discipline and strengthening ethical values in the professional life. Ethical values are very necessary for nursing staff as a basis for providing human-centered, patient services. The principle of caring is the core service provided by nursing staff (Carvalho, 2012).

Professionalism is the traits or abilities, skills, methods of carrying out things and so on as are naturally found in or carried out by a professional (Franco & Tavares, 2013). Most continuing competence programs call for a professional portfolio to collect, synthesize, and analyze professional experiences, including documentation of peer feedback and preparation of a learning plan (Bassendowski, 2009). The American Nurses Credentialing Center (ANCC) began offering a certification examination in continuing education and staff development. After a change in the scope and standards for these roles, the examination is now titled Nursing Professional Development (Desilets, 2007).

According to Minister of Health Regulation Number 49 of 2013 states that the professional achievement of nursing staff is influenced by the motivation of the work of the nursing staff. The work motivation of the nursing staff in implementing the concepts related to the nursing committee, can affect the level of professionalism of nursing staff for the better. This illustrates that the work motivation of nursing staff can strengthen the direct relationship between nursing committees to the professionalism of nursing staff. Healthcare professionals' work motivation depends on multiple sources and a number of individual, organizational, and cultural factors (Kjellstrom, 2017; Choon Hee & Kamaludin, 2016; Lili *et al*, 2014). Nurse work motivation can increase the influence between the implementation of a nursing committee in a hospital on the professionalism of nursing staff (Republic of Indonesia health minister regulation number 49, 2013). According to Kerlinger's and Elazar's Motivation theory states that the motivation variable consists of: (1) Motives for motive; (2) Expectations for the environment (expectation); (3) The need for benefits (incentives). Motives for Needs (Motive) are factors that cause individuals to behave or behave in a certain way. Motive as an impulse that comes from within a person to do certain activities, in order to achieve a goal. Expectation is the strength of the tendency to carry out activities correctly depending on the strength of the expectation that the activities will be followed by the provision of health insurance, facilities and environment or attractive outings. Needs for Rewards (Incentive) is a stimulus that makes the cause of the activity take place, maintaining activities to lead directly to a goal that is better than the other. Based on research conducted by Khairurrozi (2016), Tumulty 92001, Desilets (2007), Villegas et al (2012), Sofi et al (2015), Gaudine et al (2011), Condell (2012), Stephens (1993) stated that the nursing committee influences the professionalism of nursing staff with work motivation that can strengthen this influence. Research conducted by Matousova & Tollarova (2014) mentions the culture of nursing professionals in the present-day for health-care system at a time of personal, generational, and educational transitions (reforms), which have driven a change of organisational-cultural means in the relationship between two key professions: doctors and nurses. Research conducted by Dimauro (2014) mentions for self assessment and non structured methods of professional development for professional developers. Professional developers can assess their true learning needs and identify useful methods to develop themselves professionally.

Based on research conducted by Choon Hee (2014) states that Professional commitment in nursing is defined as employee's engagement to his or her profession with regard to acceptance of professional values, nursing ethics, willingness to maintain membership and a definite desire to build a belief in the profession (Oda, 2002; Kvas & Seljak, 2013; Lacobucci *et al*, 2012).

The unevenness of the results of the study or the results gap and the concept of the influence of the nursing committee on professionalism, allegedly need to know the moderating role of work motivation. The nursing committee cannot simply influence the level of professionalism, but must be based on the motivation of employees to become professionals. Previous research mostly aggregates the three sub committees into a construct of the nursing committee. Very limited is done by separating each sub committee into a stand-alone construct. Based on the phenomena that occur in the field and several gaps from the results of previous studies, the researchers want to examine further the influence of the nursing committee on the professionalism of nursing staff with work motivation as a moderating variable in the General Hospital of Ganesha. The purpose of this study was to analyze the influence of the nursing committee on the professionalism of nursing staff and to analyze work motivation that could moderate the influence of the nursing committee on the professionalism of nursing staff.

II. Methods

2.1 Research Design

In this study using a type of quantitative data and in the form of associative causality research. Research in the form of explanation is research that aims to explain the relationship between two or more variables, and this relationship has a causal nature. This study will analyze and explain the influence of nursing committees (credential committees, professional quality committees, ethical committees and professional disciplines) on the professionalism of nursing staff with work motivation as a moderating variable in Gianyar Ganesha General Hospital.

The variables used are the nursing committee, which consists of credential committees, professional quality committees, ethical committees and professional disciplines, professionalism of nursing staff, and work motivation. As described in the hypothesis, each of them will be described in the corresponding indicator and then derived into question items in the research instrument.

Sampling technique. used in this study is to use Nonprobability sampling technique, which is a technique that does not provide the same opportunity / opportunity for each element or member of the population to be selected as a sample. The type of sampling technique used is Saturated Sampling which is a sampling technique if all members of the population are used as samples.

Data collection techniques in the form of interviews and questionnaires, followed by validity and reliability testing. The data analysis method used in this study is the analysis of SEM (Structural Equation Modeling) based on components or variants, namely PLS (Partial Least Square). The results of the analysis are then interpreted and discussed, so that in the end the results of the research can be concluded and suggestions for these problems are given.

The total population in this study, namely 135 people, and the number of samples in this study, which amounted to 135 people, using total sampling technique, with 55 male and 80 female respondents.

2.2 Research Indicators

The credential committee dimension has 8 indicators (clinical authority, clinical practice area, career path classification, nursing staff competency, verification of credential requirements, standard operational procedure credentials, re-credential concepts, credential policies); the professional quality committee dimension consists of 6 indicators (mapping of nursing staff, competency grouping and career paths, CPD / Continuous Professional Development, professional nursing unit credit, discussion of nursing and midwifery cases, health service case audits); the dimensions of the ethics committee and professional discipline consist of 6 indicators (nursing code of ethics books, adherence to the nursing code of ethics, monitoring and evaluation of nursing codes of ethics, application of ethical principles, ethical decisions, fostering nursing codes of ethics).

Work motivation variables have 6 indicators, namely motives for needs by working team work, by establishing good relationships between colleagues, expectation by giving advice, in making decisions, the need for appropriate rewards, rewards. The professionalism of nursing staff has 11 indicators, namely knowledge, skills, attitude, value, high ethical standards, adequate knowledge, compassion, competence, confidence, conscience, commitment.

III. Results

The average nursing committee variable description is 4.46, this means that respondents' perception¹¹ the nursing committee at Ganesha General Hospital are very high and very well perceived by nursing staff. In Table 3 also shows that the average value is obtained for the credential committee dimension which is equal to 4.45. Furthermore, it can be informed that clinical practice area indicators have the highest average value of 4.57, followed by career level classification (4.55), clinical authority (4.53), verification of credential requirements (4.50), standard credential procedures (4.48), nursing personnel competence (4.47), recredential policy (4.30), and the lowest is the concept of re-credentials (4.23). In the dimensions of the professional quality committee at the General Hospital, Ganesha is very well perceived, this can be seen in the average value obtained for the dimensions of the professional quality committee which is equal to 4.40. Furthermore, it can be informed that the case discussion indicators related to nursing and midwifery care services to improve the quality of care for patients have the highest average value of 4.54, followed by health service case audits (4.450), Continues Professional Development (CPD) (4.39), Units Credit of professional staffing (4.36), grouping of competencies and career levels (4.33), and the lowest indicator is the mapping of nursing staff according to practice area (4.27). In the dimensions of the ethical committee and professional discipline in the General Hospital of Ganesha, it is very well perceived, this can be seen in the average value obtained for the dimensions of the ethical committee and professional discipline, which is equal to 4.53. Furthermore, informed ethical decision indicators have the highest mean value of 4.59, followed by adherence to the nursing code of ethics (4.54), application of ethical principles (4.53), fostering the nursing code of ethics (4.52), and the lowest indicator monitoring and evaluation of the nursing code of ethics (4.51). That respondents' perceptions of employee motivation at the General Ganesha Hospital are very high, this can be seen from the mean value of 4.28. Furthermore, the motive indicator for the need to work with team work is informed that the highest average value is (4.34), followed by expectation by giving advice (4.31), motive for needs by running good relations with coworkers (4.28), expectation in decision making (4.28), reward for nursing staff (4.22), and the lowest indicator is the need for appropriate benefits (4.22). That respondents' perceptions of the professionalism of nursing staff at Ganesha General Hospital are high, this can be seen from the average value of 3.95. Then informed, where the indicator of knowledge has the highest average value of (4.04), followed by skills (4.01), value / value (3.99), concern (3.97), responsibility (3.94), attitude (3.94), adequate knowledge (3.93), high ethical standards (3.93), sincerity (3.93), trust (3.93), and the lowest indicator, namely skills (3.88).

3.1 Inferential Analysis Results

3.1.1 Assessing the Outer Model

a. Convergent validity

Convergent validity of the measurement model with reflexive indicators is assessed based on the correlation between the item score or component score estimated by 2M SmartPLS software. The individual reflexive measure is said to be high if it correlates more than 0.50 with the measured variable. In this study, a loading factor limit of 0.5 will be used.

Variable nursing committee consisting of 20 indicators, work motivation consists of 6 indicators and professionalism of nursing staff consists of 11 indicators have an Outer Loading value greater than 0.5 which means valid. In the nursing committee variable, the indicator that has the highest Outer Loading value is the career level classification of 0.885. Work motivation variable has an Outer Loading value above 0.5 which means valid. Indicator of expectation by giving advice has the highest Outer Loading value of 0.935. The professionalism variable of the nursing staff has an Outer Loading value above 0.5 which means it is declared valid. The attitude indicator has the highest Outer Loading value of 0.933.

b. Discriminant validity

Discriminant is one is done to ensure that each concept of each latent variable is different from the other variables. The model is said to have good discriminant validity if each loading indicator value of a latent variable has a loading value greater than the loading value if it is correlated with other latent variables. The results of the three variables have AVE values above 0.50 and all variables have higher AVE root values than the correlation coefficients between one variable and the other so that the data has good discriminant validity.

c. Composite Reliability

The criteria for validity and reliability can also be seen from the reliability value of a variable and the value of Average Variance Extracted (AVE) of each variable.

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Variables are said to have high reliability if the composite reliability value is above 0.70 and AVE is above 0.50. Nursing Committee (X) (0,971), Work motivation (Z) (0,966), professionalism Nursing staff (Y) (0,981).

3.1.2. Testing the Inner Model

Testing the inner model or structural model is done to see the relationship between variables, significance values and R-square of the research model. The structural model was evaluated using the R-square for the dependent variable t test and the significance of the structural path parameter coefficients. Changing the R-square value can be used to assess the effect of certain exogenous latent variables on endogenous latent variables that have substantive effects.

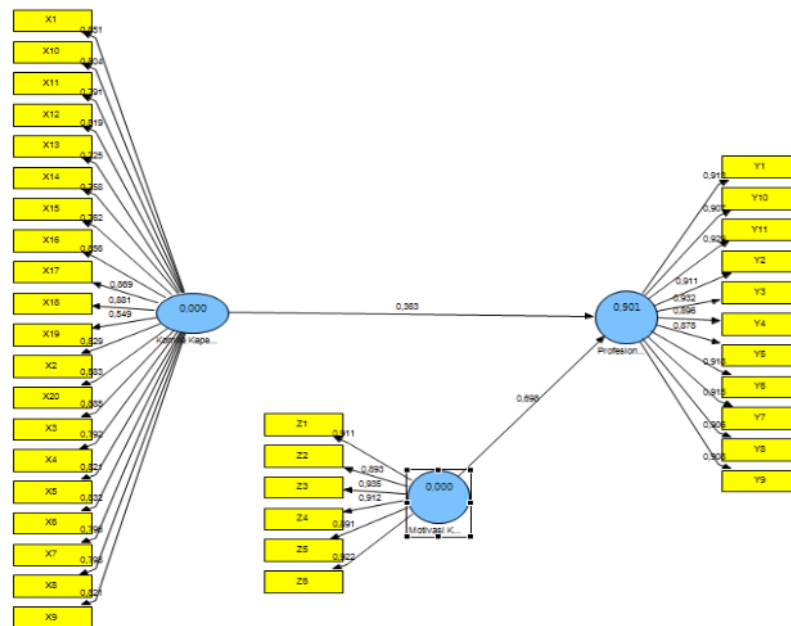


Figure 1: Structural Model (Inner Model)

In Figure 1 it can be explained that the covariance of indicator measurements is influenced by latent constructs or reflects variations of unidimensional constructs which are represented by an ellipse with several arrows from the construct to the indicator. This model hypothesizes that changes in latent constructs affect changes in indicators. In the model there is one independent variable, namely the nursing committee, one moderating variable is work motivation and one dependent variable is the professionalism of the nursing staff. Assessment of the model with PLS begins by looking at the R-square for each dependent latent variable. Changes in the value of R-square can be used to assess the influence of certain independent latent variables on late dependent variables that have substantive effects. The structural model is evaluated by considering the Q2 predictive relevance model which measures how well the observation value is generated by the model. Q2 is based on the coefficient of determination of all dependent variables. The magnitude of Q2 has a value with a range of $0 < Q2 < 1$, the closer to the value of 1, the better the model.

In addition to using the R-square, goodness of fit models are also measured using Q-Square predictive relevance for structural models, measuring how well the observation value is generated by the model and also its parameter estimates. Q-square value > 0 indicates the model has predictive relevance; conversely, if the Q-Square value ≤ 0 indicates the model lacks predictive relevance. The results of the Q Square Predictive Relevance (Q2) calculation show a value of 0.901 which means the model shows good observation, where 90.1% of the relationships between variables can be explained by the model, while the rest (9.9%) is a factor error or other factor that does not enter research model. Evaluation of the inner model measured by Q Square Predictive Relevance (Q2) and Goodness of Fit (GoF) above shows that the model formed by constructs has a very good model category.

3.1.3. Hypothesis Testing

Hypothesis testing is done by ¹ statistics. The stages of hypothesis testing are divided into two, namely the estimated parameter significance provides very useful information about the relationship between the research variables. The basis used in testing hypotheses is the value found in the result for inner weight output.

a. Hypothesis Testing 1: Nursing Committee has a positive effect on the professionalism of nursing staff.

This result can be seen in the coefficient value of 0.75 with t-statistics value of 25.64. The t-statistics value is above the 1.96 value. Based on this, hypothesis 1 is accepted.

b. Hypothesis Testing 2: Work motivation can strengthen ³ the influence of the nursing committee on the professionalism of nursing staff.

This result can be seen in the coefficient of 1.88 with the value of t-statistics of 4.39. The t-statistics value is above the value of 1.96. Based on this, hypothesis 2 is accepted.

3.1.4. Testing for Moderating Effects

To find out the moderating effect on the model, by detecting the coefficient coefficients b2 and b3 in the full model equation. The results of testing the model involving interaction variables are presented in Figure 6

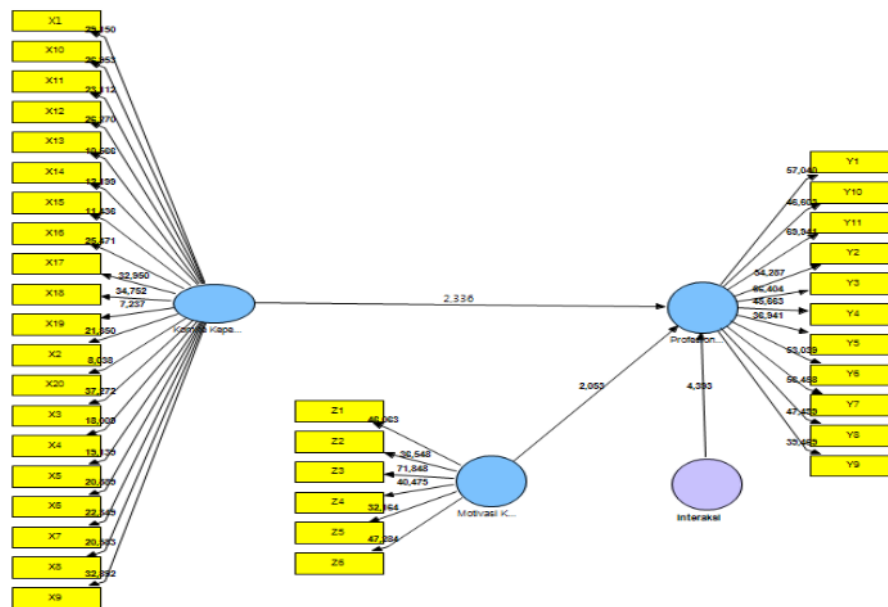


Figure 2: The Influence of the Nursing Committee on Professionalism of Nursing Staff with Work Motivation as a Moderation Variable

In Figure 2, it shows that the calculated t value of the work motivation variable is 2.053, the t-statistics value is above the 1.96 value. Based on this it was stated to be significant. Based on figure 5.7 the value of the calculated t interaction variable is 4.393, the t-statistics value is above the 1.96 value. Based on this it was stated to be significant. According to Hair, et al. (In Solimun, 2011) it can be said that work motivation is a quasy moderator variable.

3.1.5. Renewal of Research Results

Renewal is an element or finding of a study. Research is said to be good if it finds new findings so that it has a contribution to both science and life. The renewal in this research is the indicators on the professional quality committee, namely case audits related to the provision of nursing care and midwifery that have not been found in empirical studies, after the concept of analysis with SmartPLS, that audit cases related to nursing and midwifery care can be used as indicators on the quality committee profession.

This supports Permenkes No. 49 (2013) regarding the Hospital Nursing Committee which states that case audits are related to the provision of nursing care and midwifery are included in the duties and working mechanism of the professional quality committee.

In addition, the analysis concept related to Minister of Health Regulation No. 49 of 2013 concerning the Hospital Nursing Committee applied in all hospitals in Indonesia has never been published in relation to the results of a comparison of empirical and theoretical studies. So, in this study, the dimensions of the nursing committee describe each of the three nursing sub-committees, which consist of credential committees, professional quality committees, ethics committees and professional disciplines, with comparative analysis between the results of empirical and theoretical studies. This illustrates that the nursing committee in accordance with the Minister of Health Regulation No. 49 of 2013 can improve the professionalism of nursing staff according to job descriptions and functions in each dimension or sub-committee of nursing.

Judgin³ from the methodology, the renewal in this study empirically proved that work motivation can strengthen the influence of the nursing committee on the professionalism of nursing staff. I³ is classified as a type of moderating variable, it can be seen that the role of work motivation is related to the influence of the nursing committee on the professionalism of nursing staff, so work motivation is a quasy moderator variable

3.1.6. Research Implications

a. Theoretical implications

The results of this study can contribute to science, especially for further researchers that the use of the variable nursing committee that uses theory according to Priharjo (2017) proved to influence the profession³sm of nursing staff. Likewise the work motivation used in this study, namely Koeswara (2016) can increase the influence of the nursing committee on the professionalism of nursing staff.

b. Practical implications

Policy implications that can be related to the findings produced in this study so that it provides practical contribution to nursing care services to patients, namely nurses' work motivation is strongly influenced by working in team work with fellow coworkers, so that collaborative concepts are very important in providing health services in the hospital.

3.1.7. Research Limitations

The limitations that can be conveyed from this study are based on understanding the concept of the nursing committee on new nursing staff, so that it requires more time in the process of socialization and monitoring and evaluation related to understanding the implementation of the hospital nursing committee

IV. Conclusions and Recommendations

4.1 Conclusions

Based on the discussion of the results of the study, it can be concluded that the influence of the nursing committee on the professionalism of nursing staff with work motivation as a moderating variable in the General Hospital Ganesha Gianyar are as follows:

1. The nursing committee has a positive effect on the professionalism of nursing staff at the General Hospital Ganesha, this indicates that the higher the role of the nursing committee, the higher the professionalism of nursing staff. Vice versa, the lower the role of the nursing committee, the lower the professionalism of nursing staff. This can be used as a basic reference in the concept of increasing the professionalism of nursing staff through the hospital nur³g committee.
2. Work motivation can strengthen the influence of the nursing committee on the professionalism of nursing staff at the General H³pital Hospital. This means that the higher the work motivation of nursing staff can increase the positive influence of the nursing committee on the professionalism of nursing staff. This can improve the quality of service in hospitals to be better, especially nursing care services and midwifery care.

4.2 Suggestions

Based on these conclusions, suggestions can be given as follows:

1. On the nursing committee variable, that is, on the credentials committee dimension, the value of the statement with the lowest average value is the concept of re-credentials as a form of re-evaluation process

- related to clinical authority. Based on this, the nursing committee, especially the credential committee, must re-socialize the concept of re-credentials for renewal of clinical authority for nursing staff, so that nursing staff can better prepare the concept of re-credentials which include review, verification and evaluation of performance documents. nursing staff as a condition in conducting re-credentials.
2. On the nursing committee variable, namely on the dimensions of the professional quality committee it is known that the value of the statement with the lowest average value is the mapping of nursing staff in the area of clinical practice. Based on this, the nursing committee must map the nursing staff to reevaluate the placement of nursing staff in accordance with the area of clinical practice and competence they have, so as to improve the quality of service in the hospital.
 3. In the nursing committee variable, namely on the dimensions of the ethics committee and professional discipline it is known that the value of the statement with the lowest average value is the nursing committee monitoring and evaluating the guidance and enforcement of ethics and professional discipline for nursing staff. Based on this, the ethics committee and disciplinary profession must conduct monitoring and evaluation as a follow-up step towards ethical decisions made for nursing staff.
 4. In the work motivation variable it is known that the value of the statement that has the lowest average value is the need for appropriate compensation. This is related to the completion of difficult tasks in accordance with the responsibilities supported with appropriate rewards. Based on this, the nursing committee and hospital management can consider the provision of benefits in accordance with the area of nursing staff practice, including the calculation of the workload of nursing staff and the concept of career paths of nursing staff.
 5. In the professionalism of nursing staff it is known that the value of the statement with the lowest average value is skill. This is related to the concept of notification to patients about each nursing action performed by nursing staff. Based on this, the nursing committee cooperating with the field of nursing in the hospital carries out a more intense monitoring and evaluation system related to the concept of effective communication, so that good communication can be established between nursing staff and patients, especially in providing information about all treatment actions that will be received by the patient. In this case, the patient's family can also be involved in delivering information regarding the patient's health status.
 6. For the next researcher, they can develop research concepts related to nursing committees that can be associated with improved quality of service in hospitals to be even better.

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