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## **NURSE WORK STRESS IN THE INPATIENT ROOM OF PASAR MINGGU REGIONAL GENERAL HOSPITAL, SOUTH JAKARTA**

**Tatiana Siregar<sup>1</sup>, Tri Kurniarti<sup>2</sup>, Giri Widakdo<sup>2</sup>**

1. Faculty of Health Sciences - University of National Development "Veteran" Jakarta
2. Faculty of Nursing Science - University of Muhammadiyah Jakarta

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### **ABSTRACT**

A nurse is a professional medical personnel at the forefront of hospital services. The number of nurses is the highest and they continuously work on shifts for up to 24 hours. For the past two years, Pasar Minggu Regional General Hospital, South Jakarta has had an increasing number of patients along with the regulation of Social Security Organizing Agency (BPJS), which every hospital has to apply, this condition burdens the nurses and causes work stress. This research aims to investigate the experiences of the nurses regarding work stress in the inpatient rooms of the General Hospital Region, South Jakarta. The research method is qualitative phenomenology, with 10 nurse participants taken using purposive sampling. The researchers carried out the retrieval of data by means of structured and in-depth interviews, observations and notes. The analysis data utilized the Colaizzi method, which resulted in four main themes, i.e., understanding the state of work stress, the response of work stress, coping mechanisms and the expected support from the hospital leaders. The hospital leaders are expected to be able to make policies in managing nurse work design, which is in accordance with the competencies, so that the nurses do not experience work stress and will eventually benefit the hospital and patients.

Keywords: coping mechanism, nurse experience, work stress

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### **ABSTRAK**

Perawat merupakan salah satu tenaga kesehatan profesional yang berada di garda terdepan pelayanan rumah sakit. Jumlah tenaga perawat merupakan yang terbanyak dan bertugas secara terus menerus bergantian selama 24 jam. Kondisi Rumah Sakit Umum Daerah Pasar Minggu Jakarta Selatan dalam dua tahun terakhir terjadi peningkatan jumlah pasien seiring diberlakukannya pelaksanaan Badan Penyelenggara Jaminan Sosial (BPJS) yang harus dilaksanakan setiap rumah sakit, sehingga terjadi peningkatan jumlah kunjungan pasien dan menambah beban kerja perawat, yang berdampak mengalami stres kerja. Tujuan penelitian untuk menggali pengalaman perawat terhadap stres kerja di ruang rawat inap Rumah Sakit Umum Daerah Pasar Minggu Jakarta Selatan. Metode penelitian secara kualitatif fenomenologi, dengan 10 partisipan perawat yang diambil secara purposive sampling. Pengambilan data secara wawancara terstruktur dan mendalam, observasi serta catatan. Analisis data menggunakan metode Colaizzi, dihasilkan empat tema utama yaitu memahami kondisi stres kerja, respon dari stres kerja, mekanisme koping dan dukungan yang diharapkan dari pimpinan rumah sakit. Pimpinan rumah sakit diharapkan dapat membuat kebijakan dalam mengelola desain kerja perawat yang sesuai kompetensi agar dalam bekerja perawat tidak mengalami stres kerja sehingga menguntungkan bagi rumah sakit dan pasien.

Kata kunci: mekanisme koping, pengalaman perawat, stres kerja

## INTRODUCTION

A hospital can be defined as a health care provider for outpatients, inpatients and emergency conditions, which is stated in the Law of the Republic of Indonesia No. 44/2009 regarding hospitals (Secretariat of state, 2009). A hospital is an organization that aims to provide a perfect and optimal service for patients and their families.

The optimal services of a hospital are inseparable from the nurses' role. The nurses who are on duty must provide both excellent and optimal services as ordered by the hospital leadership, and this burdens the nurses.

Nurses are at the forefront of hospitals, highest in number and provide care continuously for 24 hours (Revalicha & Sami'an, 2012) The Hospital Accreditation Committee (KARS) explains that the nurses' service quality must be done by competent professionals to carry out the roles and function (KARS, 2018).

The nurses' roles and function in providing optimal care requires a high commitment to giving the best services and satisfying the patients (Macphee et al., 2017). The high work demand on nurses to carry out their commitments has burdened them in performing their job. They are asked to give excellent results and this might bother them while working since it triggers stress. Moreover, it is not good to continue since it might affect the patients, so it is concluded that work demands on nurses are the main contributor to work stress (Vernekar & Shah, 2018).

The number of work stress incidents reported by the Indonesian nurses, which was reported by Yana (2014), has reached 45.8% out of 24 nurses in the Emergency Room of Pasar Rebo Regional General Hospital, East Jakarta. A study by Widyasrini (2013) proved the same thing; 26 out of 32 nurses (81.25%) in Soeharso Hospital, Surakarta are in severe stress. However, no data explains the nurses' work stress phenomenon in Pasar Minggu Regional General Hospital, South Jakarta.

Pasar Minggu Regional General Hospital of South Jakarta is a type B public hospital owned by the

Government of Special Capital Region (DKI) of Jakarta for the South Jakarta region. This hospital has a 455-bed capacity and provides outpatient and inpatient services. The description of the Bed Occupancy Rate (BOR) is 95%, in which approximately 317 beds are used in a day, based on the data as per December 2018. The number of Human Resources (HR), especially nurses are 448 (Pasar Minggu Regional General Hospital Research and Development Institute, 2018). By comparing the number of beds and the nurses and nurses on duty in concordance to the business hours, it could be assumed that the comparison is not ideal.

As informed before, Pasar Minggu Regional General Hospital is a hospital owned by DKI Jakarta, so treating patients who utilize the Social Security Organizing Agency (BPJS) is required. This suits an online news report that says that 90% of patients who received the outpatient and inpatient services are members of BPJS (www.rmol.id, 2018). In addition to 90% of BPJS patients, the BOR of the hospital would sometimes increase during the disease outbreak like dengue hemorrhagic fever in December 2018-January 2019. There were 233 additional dengue hemorrhagic fever patients (www.merdeka.com, 2019). This was in line with the prior study that the researchers did in early January 2019 regarding the limited number of nurses. The researchers observed and interviewed three people who worked as executive nurses and 2 people as head of the room. The results of the prior study revealed that there were three nurses providing care for 33 patients in the inpatient rooms during the afternoon shift. These patients had different kinds of dependency while the nurses applied the nursing care model in Team Model.

The interview with three nurses found results in the information regarding the work stress they experienced; it causes physical disorders like headache and psychological disorders such as anger and uncontrolled emotional feelings. They also shared the things they do to cope with stress like praying, drinking coffee, asking for help from other nurses and

communicating their problems.

From the results of the interview with two heads of the room, it was found that the staff's work stress does indeed occur. The staff have fatigue because there is too much of a workload and limited human resources. The work stress that the staff experience in the form of emotional change is getting irritated easily. Sometimes, less therapeutic ways of communication both to fellow nurses and even to patients also causes work stress.

It could be assumed that the nurses in Pasar Minggu Regional General Hospital of South Jakarta are experiencing work stress. The researchers decided to form a research question as follows: "How is the nurses' work stress phenomenon in the inpatients room in Pasar Minggu Regional General Hospital, South Jakarta?"

## METHOD

The research method was qualitative design using a phenomenology approach. The general objective of this research is to investigate the work stress experienced by the nurses in inpatient rooms of Pasar Minggu Regional General Hospital, South Jakarta. The specific objectives are to find out the nurses' perception of work stress, to identify the nurses' feelings regarding work stress and to identify the role of the hospital leaders regarding the work stress the nurses experience.

The participants were selected using purposive sampling based on the following criteria: 1) nurses in the 25-40 age range; 2) nurses that have only worked in inpatient rooms; 3) nurses with  $\geq$  two years of work experience; 4) nurses with Ners profession as their latest education; 5) nurses who worked as coordinators during the business hours and 6) nurses who would agree to be the participants and signed an agreement.

The in-depth interview with the participants resulted in weariness from ten participants. The data collection instruments are the researchers themselves who conducted 60-90-minute interviews for each participant. The researcher observed the participants during their working hours, observed the

participants' movements and wrote down all events that the researchers saw. The researchers are not allowed to record during the observation in accordance with the research permit from the Education and Training Center of Pasar Minggu Regional General Hospital. The data were collected on February 25<sup>th</sup> - April 20<sup>th</sup> 2019. The analysis data utilized the Colaizzi method.

The research was able to be conducted after obtaining the permit from the Education and Training Center of Pasar Minggu Regional General Hospital under the Recommendation Letter of the Government of DKI Jakarta Number: 109/AF.1/31/-1.862.9/2019 February 19<sup>th</sup>, 2019. Next, the hospital published the research permit number 636/-084.2 on March 5<sup>th</sup>, 2019. This research had also gone through the medical research ethical test issued by Health Research Ethics Committee, Veteran Jakarta number: 0193 / F.9- UMJ / II / 2019, on February 7<sup>th</sup>, 2019.

One of the validity tests is regarding credibility. The researcher provided the interview transcript and asked the participants to check the strength of their speech citation from the transcript, re-read and then re-check the checklist ( $\checkmark$ ) as an agreement for citation in the transcript, as well as performing triangulation techniques by examining the data from the same sources as the observation of participants during work.

## RESULT

### 1. Participant Profile

Ten participants consisted of the following: nurses with the Ners license (100%) as their most recent education, nurses with an average of 2.9 years or more than 2 years of working experience (100%). 9 of the nurses were female (90%); most were aged in the range of 25 - 33 years (90%), with only one person of 25 years old (10%). The career level of participants was at the level of Clinical Nurse-1 (PK-1) i.e 3 participants (30%), PK level -2 was 6 participants (60%), and PK level-3 was only 1 participant (10%). There was only 1 participant who participated in the Inpatient Management Training, while the other 9 participants had

not never participated in this training. However, these ten participants had an additional task from the hospital leadership, which was to be Manager on Duty, rotating at least twice a month.

## 2. Theme

After obtaining data from in-depth interviews and observing the environmental situation of the Pasar Minggu Hospital inpatient room and participant's movement, the researchers arranged several keywords into themes by using the Colaizzi method flow. Those themes are displayed below:

### **First theme: Understanding working stress conditions**

The first theme is understanding working stress conditions. This theme is formed based on the sub-themes that have been summarized as follows:

#### a. High workload

The ten participants considered that their work was very heavy and should be categorized as a high workload, whereas one nurse held the responsibility for 10-11 patients (this was recorded in the nurse's assignment schedule for each shift).

The extremely high workload, mainly felt by participants when they served as Manager on Duty (MoD), meant that they took full responsibility for hospital operations during the working hours, while ten participants said that they had not ever received training as a room manager inpatient.

#### b. Obligation to provide the best service to patients

The ten participants shared similar results about how nurses provided services to patients. Participants revealed that the provided services to patients were not at a maximum because nurses provided services that were limited only to patients' needs.

#### c. Busiest working hours

The ten participants all stated how busy the working hours were in the inpatient room; that there was 'rush hour' activity and time-consuming activities that occurred during the morning working hours. The researchers monitored this situation by observing each participant's room, and the busyness during the nurses

working hours were evident.

#### d. Demands of hospital leaders

The ten participants revealed that the participants were expected by the hospital managers to provide excellent service, that all nurses there including the participants were required to fill in the documentation many times, both computerized and manually on paper. Therefore, this was considered by the participants as 'double work' and time consuming.

#### e. Patient's or patient's family complaints

All participants stated that during their duty, what made them feel stress at work, was a complaint from the patient or their family.

#### f. Conflict with colleagues

The next form of work stress felt by participants was the conflict with colleagues. This occurred because of the finished work that might become a talk during the next working hours. The staff would say it was because they (the nurses) did not directly deal with the team in completing the work.

### **Second theme: Response from work stress**

The second theme that researchers found was the response from work stress felt by participants, which was supported by the sub-theme:

#### a. Fatigue

The ten participants reported the effects of work stress that was felt on the body. They were exhausted and their muscles from the legs to the back ached. Based on the researcher's observations, these symptoms occurred due to a lot of work, and the participants needed to mobilize actively in providing services to patients.

#### b. Headache

All the participants expressed other symptoms when they were really stressed, such as headache, dizziness, and tension from the neck to the head.

#### c. Rapid heartbeat

All participants expressed work stress in the form of nervousness due to a rapid heartbeat when facing complaints from patients or patients' families.

#### d. Digestive system disorders

Some participants complained they had digestive system disorders when they were stressed at work, and on average, they felt gastric pain. This was due to the late eating hours. The researchers observed that there were nurses who ate lunch after the end of their working hours.

e. Anxiety

All participants expressed anxiety especially when obtaining complaints from the patient's family. Anxiety also appeared when they were assigned as Manager on Duty (MoD) because this situation made participants take full responsibility for all hospital operations during working hours.

f. Unable to concentrate

The participants revealed that due to a lot of work and the mind being full of alternatives of how to solve the patient's problems, their head became dizzy, which then ultimately disturbed their concentration.

g. Easily provoked

All participants expressed the same opinion that they easily became emotional when they had a lot of work, especially when the work was unfinished by the colleagues. As a result, it made the participants want to express their anger.

### Third theme: Coping mechanism

The researchers selected this theme as part of stress management by using positive coping mechanisms, such as a rationalization by relaxation, as well as suppressive coping mechanisms in the form of religious activities and concentration.

a. Rationalization

The ten participants expressed the same opinion, which was - that it was good to reduce their work stress by doing stress-reducing activities. If their body was tired, the participants chose massage on aching and tense bodies. Another relaxation by participants in dealing with work stress was deep breathing. There were some participants who stated that if they were in a stress condition they listened to music from a cellphone or explored social media such as Instagram or watching YouTube as these really helped to reduce fatigue.

b. Suppression

All the participants also said that

when they felt tired and dizzy, they did ablution, prayer and dhikr, and those were significant in reducing stress.

c. Concentration

All participants stated that they kept trying to concentrate on their work during working hours. They did that to prevent any harm for the patients, specifically on the direct actions regarding the service to the patients.

### Fourth Theme: Expected support from hospital leaders

The fourth theme was the expected support from the hospital's board of directors. This theme was supported by the following sub-themes:

a. Only gave motivation without increasing the number of nurses.

All participants said that the hospital managers saw the limited number of nurses, but they only motivated them to work diligently and sincerely, give the best for the patient, work with the professional ethics despite the lack of employees, and maintain health

b. Provided nurses with self-development opportunities

All participants shared the same opinion regarding nurses' self-development. Here, the participants were given opportunities to increase their competencies and skills by holding training to improve nurse performance.

c. Employees' refreshing

All participants expressed the same opinion that they wanted togetherness with all employees to know each other and expected that the hospital leaders facilitated this activity, so that the nurses did not get bored and stressed out in their routine work.

## DISCUSSION

### First theme: Understanding working stress conditions

A high workload is often expressed by the participants. The high workload is also caused by additional responsibilities as Manager on Duty (MoD). They consider it as a high workload since the participants said that they do not yet have special skills and competencies as a manager and they also have never received training on inpatient room management.

The concept of competencies was first revealed by Boyazits (1982) ) in Bhardwaj & Punia, (2013), which was interpreted as the underlying characteristics of a person to lead or to cause effective and extraordinary performance. Managerial competence is defined as a combination of skills, knowledge, attitudes, values and abilities that bring effective or high performance in work and professional positions (Levett-jones, et al 2011).

Development and application of Managerial Competence Model approach are proven to protect and preserve human resources in order to achieve a more effective and productive workforce (Mustafa et al., 2017).

A nursing manager must prioritize organizational commitment and professional competencies to provide high quality services and in maintaining safety in nursing services. (Karami, Farokhzadian, & Foroughameri, 2017)

Other managerial competencies that must be considered are time management, proper planning and good time organization, which have a positive correlation in providing appropriate implementation of the plan and a positive disposition towards wasting time. These eventually contribute to a successful and effective management in the use of time (Said, 2014). The time management delivered is not in harmony with what has been done by the participants while working because they reveal the lack of time in completing their work.

The large number of patients and few nurses are understood as a stressor by the participants. The condition of the participants is also in line with the research of Eltarhuni (2016) where the main stress of nurses at Hospital in Kashan, Iran is the lack of nurses in the workplace. Similar research from Magama & Kgositau (2018) also concluded the same thing - that the shortage of nurses is the cause of stress in the workplace.

The high workload experienced by participants based on the observations of researchers resulted in nurses working in a hurry. The work done in a hurry can threaten patient safety, since the nurses cannot focus on the services they provide

to patients, such as the results of Aini (2014) research at Penembahan Senopati Regional General Hospital Bantul that the high workload can disrupt the concentration of nurses which affects the patient safety.

The situation at the Pasar Minggu Regional General Hospital as a government-owned property requires the health care workers to serve any patients and they are not allowed to refuse patients. It is expected for Pasar Minggu Regional General Hospital to always give the best for patients to make them satisfied with the services provided by the hospital. According to Keller (2009), the service quality must start from the existence of customer needs, and there must be a positive perception of service quality in the form of its ability to satisfy customer needs either explicitly or implicitly.

Understanding satisfaction as summarized by Tjiptono and Chandra (2011) which is interpreted as an emotional or cognitive response to expectations on experience in the form of feelings of pleasure or disappointment at a certain time to service reception.

These demands are obligatory to keep the quality of service guaranteed. This is similar with the research results of Talib, Rahman, & Azam (2011) that one of the supporting practices of TQM (Total Quality Management) is focusing on customers and customer satisfaction. In this case, the leader's responsibility is to ensure satisfaction as a long-term commitment of health workers, especially nurses in providing services to patients. Demands from the leaders felt by the participants according to Munandar, (2014) is categorized as stress in the workplace, and it includes intrinsic factor in work in the form of job demands.

The next work stress according to the participants is facing complaints from patients or their families. The lack of nurses to quickly provide services to patients has an impact on the quality of services provided by a hospital, such as the research results of Jarrar, (2015) that a nurse who provides care for 11-15 patients or more has a significant negative impact on both service quality and patient

safety compared with nurse who provides services to less than 5 patients

The form of complaints perceived by participants are expressed verbally more to the nurses. This condition is in accordance with the research results of Tsounis (2018) where the cause of nurse stress among others is the demand from patients or their families with mean of 20 and SD of 7.12 from 157 respondents consisting of Greek hospital nurses. It reveals that patients and their families behave rudely, they easily blame nurses, and even they also commit violence to the nurses, specifically in the form of verbal abuse.

However, patient complaints submitted to the hospital should not be considered as useless or a burden, because complaints can make the leaders manage the hospital weaknesses. In accordance with the conclusions of research from Pratiwi., Presti., and Martini (2016) complaints submitted by patients or their families can be used as input or service complaints provided by the hospital.

The work during morning shift makes the participants more stressed, because there are many activities that must be done in the morning working hours, while the number of nurses is small, the level of mobility is high, and the time is short make the participants must carry out everything to finish on time. This condition is supported by the research results of Maria (2016)

Where nurses with a morning shift have a higher stress level than the night shift due to the different workloads between shifts. However, the research from Khammar, et al (2017) is contradictory because it shows that there is no significant difference between the level of work stress and the average work shift of nurses ( $p=0.26$ )

Another work stress according to the participants is conflict with colleagues. The impact of colleagues as stressors makes the participants feel uncomfortable when working in a team. This is in line with the results of research from Adib-hajbaghery, Khamechian, and Alavi (2012), in which poor relationships with colleagues disturb the harmony in work.

Colleagues who make situations uncomfortable at work can trigger conflicts.

As written by Umam (2012) that conflict between employees is one of the group stressors in a company Zainal, et al (2017) also explain that stressors from work are caused by interpersonal factors and work conditions in the form of jealousy and anger, which create tension among workers.

### **Second theme: Response from work stress**

The impact of 'work stress' according to Cooper (1989 in Munandar, 2014)) results in physical, psychological, behavioral, and organizational symptoms (such as not being present during working hours). Zainal, et al (2017)) concluded that there are three stress impacts, which are physical, psychological and behavioral symptoms.

The impacts of physical stress, which are often expressed by participants, due to the high workload, are fatigue and exhaustion. The cause of fatigue (burnout) is generally due to situational and individual (including personality) factors in the form of work demands, which control individuals at work and in increasing social support (Bakker & Costa, 2014).

Besides, the participants also usually feel a headache. The mechanism of headaches, due to stress, is explained by Sherwood (2014) as the effects of stimulation in the somatosensory cortex, thalamus, hypothalamus, Amigdala ACC (Anterior Cingulate Cortex), and the frontal cortex that is connected to Substance P as the afferent ends of pain (as pain fibers). The stimulated sensory pain in Substance P is felt by the participants in the head region, in the form of dizziness and pain.

Gastritis is experienced by the average participant due to late eating as a result of busyness at work place. Research of (Kusnadi & Yundari (2020) concludes that there is a significant relationship between stress and incidence of gastritis ( $p= 0,022$ ) where the higher the stress level, the more susceptible to gastritis. Gastritis caused by work stress stimulates the parasympathetic nerve of

the submucosal plexus which affects the gastrin hormone found in the stomach, which then increases the production of stomach acid or HCl, the gastrin hormone will reduce the HCl production if someone fills the stomach with food Sherwood (2014).

Poor concentration due to the stress felt by the patient can indeed occur as explained by Yaribeygi, Panahi, Sahraei, & Johnston (2017). This shows that the concentration of a person depends on the functional aspects of the central nervous system as short-term and long-term sensory (Hippokampus). Stress causes changes in the functioning and structure of the hippocampus which have cortisol receptors (glucocorticoids and mineralocorticoids), and the presence of amygdala that assesses the emotional experience of memory, and high glucocorticosteroid concentrations in plasma for a long time can cause atrophy of the hippocampus leading to memory impairment.

Anxiety felt by participants from the expressed signs and symptoms is included in moderate anxiety, where the participants despite focusing on something important and putting aside the others, are still able to do something more directed (Stuart and Sundeen, 2013).

Anxiety occurs due to the response of the autonomic nervous system to fear causing accidental activity in the body that is included in the defense mechanism. Sympathetic nerve fibers activate vital signs at every danger sign to prepare the body defense. The adrenal glands release adrenaline (epinephrine), which causes the body to take more oxygen, dilate the pupils, and increase arterial pressure and heart frequency while limiting peripheral arteries and blood flowing from the digestive tract and reproductive system and increasing glycogenolysis to free glucose from supporting the heart, muscles, and central nervous system Sherwood (2014)

### **Third theme: Coping mechanism**

The third theme is identified as coping mechanisms, because it is a positive choice for participants in stress management. According to Harber and

Runyon (1984 in Siswanto, 2015), there are several constructive coping mechanisms that can be used by a person based on reasoning or rationality, objectivity, concentration, humor, suppression, ambiguity, and empathy.

Rationalization is carried out by participants by massaging the tired parts of the body to help in reducing work-related stress. This is in line with a research by Mahdizadeh, Jaber, and Bonabi (2019), which concludes that massage therapy is an effective method in reducing work stress on nursing staff in emergency rooms. Massage increases the substance of endorphin hormone, which makes a person relax, especially massage on the back that stimulates hormones to relax namely endorphin and serotonin (Sherwood, 2014). Another activity undertaken by the participants when they are tired is stretching their legs. According to Tucker, (2010) resting effect works at least as a mediator to reduce biological stress responses (catecholamine, cortisol, blood pressure, etc.). In addition, it also has beneficial psychosocial effects, facilitates social relations at work, and increases job satisfaction, which in turn shows stress reduction or has a buffering effect. This is in line with the results of research by (Rogers, 2014) that a nurse who is tired and has a lack of rest endangers the patient and him/herself. Rest, even for a short time while working is very helpful for the participants especially to avoid mistakes in taking action on patients.

Another thing performed by the participants to reduce stress at work is listening to music, that listening to music affects autonomic nerves and endocrine. The limbic system can be activated by sound and vibration stimuli. Limbic system includes thalamus, amygdala, and hypothalamus (Sherwood, 2014). The amygdala receives information from the temporal region of cortex, which collects information from visual, auditory, and sound sensor associations as part of the brain. The limbic system also includes the hippocampus, which plays a major role in memory. This can be important and useful when the music you listen to is associated with the brain and relaxed feeling before



(Bukhsh & Nisa, 2011).

The following coping mechanism is suppression. When someone experiences work stress, it will cause anxiety. The methods used by participants to relieve stress include praying or worshipping. For Muslim nurses, belief in the existence of God becomes the main thing in life according to QS: 112 (Surah Al - Ikhlas). It is affirmed in the word of Allah SWT in QS.13 (Surah Ar-Ra'du) verse 28 that "By remembering Allah the heart will lead to peace of mind".. Similar research also states that religious coping mechanisms can reduce stress (Suparman, 2015). During a solemn prayer, where all thoughts are in a state of concentration and communication with Allah, there is a time when the brain receives the perfect rest to neutralize the increasing amount of chemicals produced by the brain in facing the stressors

The ability to concentrate at work is needed. Concentration at work is not the most important, but working without concentration will make working time inefficient and reduce productivity. Therefore, we need to train ourselves to always be able to increase concentration at work (RSUP dr.Sardjito, 2018). According to [www.liputan6.com](http://www.liputan6.com) (2018) concentration can easily control the mind; increase self-confidence because increased confidence in self-abilities will broaden the insights; concentration can strengthen the memories because it indirectly trains the brain's memory; having increased focus means that someone is able to see things in great detail.

#### **Theme Four: Expected support from hospital leaders**

Actually, motivation obtained from the workplace has a positive effect and it creates a sense of comfort and peace of mind. As a result, work does not feel stressed, but productive. The results of research from Beh (2012) show that motivation from superiors to subordinates has a significant effect in reducing stress at work Li et al. (2014) prove that the motivation given by the leaders has a significant effect on the satisfaction of health workers in the community of Heilongjiang Province, China.

In addition, all participants also asked the leaders to give the opportunity to develop themselves in the form of training or seminars related to the nurse competencies, especially in the managerial field. According to the results of research from Saraswati, Hamid, and Topowijono, (2015), it is evident that the provision of knowledge and skills-based training has a significant effect on employee competencies and competencies have a significant effect on service quality.

According to Kho (2016) providing training to employees will increase productivity or the amount of production, avoid or reduce errors at work. The research results of Talib et al (2011) also conclude that training and education are noted as supporting practices for implementing the Total Quality Management (TQM) approach.

Another simple request from all participants is to be facilitated in refreshing activities among employees. According to Hartig, et al. (2014), refreshing activities that aim at the 'togetherness' of all hospital employees will help reduce boredom at work, other physical activities other than work routine, and the existence of social contact with other employees can improve their quality of life. Employee refreshing activities can be carried out by leaders in the form of family gatherings. The research results by Jati and Mukzam (2018) show that refreshing activities in the form of family gatherings provided by companies have an impact by creating a good relationship between management and employees, employee and employee, as well as among employee families. In addition, employees feel respected by the existence of this family gathering in such a way that results in an effort to improve the company's employee performance.

#### **CONCLUSIONS**

Hospital management support has not been maximally felt by all participants in reducing nurses' work stress. Hospital leaders are expected to pay attention to nurses' desires who need human resource development (HRD) programs, so that nurses' work stress can be minimized. The competencies needed now are regarding

the inpatient management. Hospital leaders are also expected to be able to make policies in managing nurse work designs that are in accordance with the competencies. All of these are necessary to prevent the nurses from experiencing work stress and from having responsibilities outside their competencies. The final outcome is the nurses will be more productive in working and providing service for hospitals and patients.

## REFERENCES

- Adib-hajbaghery, M., Khamechian, M., & Alavi, N. M. (2012). Nurses' perception of occupational stress and its influencing factors: A qualitative study. *Iranian Journal of Nursing and Midwifery Research*, 17(5), 352–359.
- Aini, Q. (2014). The Influence of Workload and Work Stress to Patient Safety Attitude on Nurses. *Journal of Biology, Agriculture and Healthcare*, 4(28), 93–102.
- Bakker, A. B., & Costa, P. L. (2014). Chronic job burnout and daily functioning: A theoretical analysis. *Elsevier*, 1(3), 112–119. <https://doi.org/10.1016/j.burn.2014.04.003>
- Beh, L. (2012). Job Stress and Coping Mechanisms among Nursing Staff in Public Health Services Leap-Han Loo. *International Journal of Academic Research in Business and Social Sciences*, 2(7), 131–176.
- Bhardwaj, A., & Punia, B. K. (2013). Managerial Competencies and Their Influence on Managerial Performance: a Literatur Review. *International Journal of Advanced Research in Management and Social Sciences*, 2(5), 70–84.
- Bukhsh, Q., & Nisa, M. (2011). Social and A Study of Learning Stress and Stress Management Strategies of the Students of Postgraduate level: A Case Study of Islamia University of Bahawalpur, Pakistan. *Elsevier*, 00, 182–186. <https://doi.org/10.1016/j.sbspro.2011.10.036>
- Eltarhuni, A. (2016). Job Stress Sources Among Doctors and Nurses Working in Emergency Departments in Public Hospitals. *www.losjournals.Org*, 5(6), 84–88. <https://doi.org/10.9790/1959-0506068488>
- Hartig, T., Mitchell, R., Vries, S. De, & Frumkin, H. (2014). Nature and Health. *The Annual Review of Public Health Is Online*, 35(207–228). <https://doi.org/10.1146/annurev-publhealth-032013-182443>
- Jarrar, M. (2015). The Impact of Patient to Nurse Ratio on Quality of Care and Patient Safety in the Medical and Surgical Wards in Malaysian Private Hospitals: A Cross- The Impact of Patient to Nurse Ratio on Quality of Care and Patient Safety in the Medical and Surgical W. *Global Journal of Health Science*, 11(9). <https://doi.org/10.5539/ass.v11n9p326>
- Jati, P., & Mukzam, M. D. (2018). Analisis Program Family Day Dalam Peningkatan Kerja Karyawan (Studi pada PT. Jakarta International Container Terminal). *Jurnal Administrasi Bisnis*, 54(1), 48–57.
- Karami, A., Farokhzadian, J., & Foroughameri, G. (2017). Nurses' professional competency and organizational commitment: Is it important for human resource management? *Plos One*, 1–15.
- KARS. (2018). *Standar Nasional Akreditasi Rumah Sakit* (1st ed.). KARS.
- Keller, K. (2009). *Marketing Management* (5th ed.). New Jersey USA: Pearson Education Inc.
- Khammar, A., Raze Nabi Amjad, E.N., Marzieh Rohani, M. (2017). Survey of shift work disorders and occupational stress among nurses: A cross-sectional study. *Annals of*

- Tropical Medicine and Public Health*, 10(4), 978–984. <http://www.atmph.org/article.asp?issn=1755-6783;year=2017;volume=10;issue=4;spage=978;epage=984;aulast=Khammar>
- Kho, B. (2016). *Pengertian Training (Pelatihan) dan Tahap-tahapnya*. [Www.ilmumanajemenindustri.com/pengertian-training-pelatihan-tahap-pelatihan](http://www.ilmumanajemenindustri.com/pengertian-training-pelatihan-tahap-pelatihan)
- Kusnadi, E., & Yundari, D. T. (2020). Hubungan Stress Psikologis Dengan Kejadian Gastritis di Wilayah Kerja Puskesmas Cisurupan. *Jurnal Medika Cendikia*, 7(1), 1–7. <https://doi.org/https://doi.org/10.33482/medika.v7i1.128>
- Levett-jones, T., Gersbach, J., Arthur, C., & Roche, J. (2011). Implementing a clinical competency assessment model that promotes critical reflection and ensures nursing graduates' readiness for professional practice. *Nurse Education in Practice*, 11(1), 64–69. <https://doi.org/10.1016/j.nepr.2010.07.004>
- Li, L., Hu, H., Zhou, H., He, C., Fan, L., & Liu, X. (2014). Work stress, work motivation and their effects on job satisfaction in community health workers : a cross-sectional survey in China. *BMJ Open* 2014;4:E004897, December 2012. <https://doi.org/10.1136/bmjopen-2014-004897>
- Macphee, M., Dahinten, V. S., & Havaei, F. (2017). *administrative sciences The Impact of Heavy Perceived Nurse Workloads on Patient and Nurse Outcomes*. 1–17.
- Magama, M. M., & Kgositau, M. (2018). Perception of Stress by Nurses in their Profession : A Case of Primary Health Care Clinics. *Biomedical Journal & Technical Research*, 2(1), 1–4. <https://doi.org/10.26717/BJS TR.2018.02.000643>
- Mahdzadeh, M., Jaber, A. A., & Bonabi, T. N. (2019). Massage Therapy in Management of Occupational Stress in Emergency Medical Services Staffs : a Randomized Controlled Trial. *16 International Journal of Therapeutic Massage and Bodywork*, 12(1), 16–22.
- Maria, E. (2016). Shift Work And Work-Related Stress Symptoms In Health Care Workers In A Tertiary Hospital In Medellin, Colombia: A Cross-Sectional Study. *CES Psicología*, 9(2), 28–39. <https://doi.org/10.21615/5/3525>
- Munandar, Ashar Sunyoto. (2014). *Psikologi Industri dan Organisasi*. UI Press.
- Mustafa, M., Illzam, E. M., Muniandy, R. K., Hashmi, M. I., Sharifa, A. M., & Nang, M. K. (2017). *Causes and Prevention of Occupational Stress*. November. <https://doi.org/10.9790/0853-1411898104>
- Pasar Minggu Regional General Hospital Research and Development Institute. (2018). *Profile RSUD Pasar Minggu*. [Www.rsudpasarminggu.jakarta.go.id](http://www.rsudpasarminggu.jakarta.go.id); Pasar Minggu Regional General Hospital Research and Development Institute. <http://rsudpasarminggu.jakarta.go.id/>
- Pratiwi., Presti., and Martini., . . (2016). Complaint Management On Health Care Improvement Efforts As A Customer Satisfaction. *International Nursing Confrence*, 031, 162. [http://eprints.ners.unair.ac.id/263/3/COMPLAINT MANAGEMENT ON HEALTH CARE.pdf](http://eprints.ners.unair.ac.id/263/3/COMPLAINT%20MANAGEMENT%20ON%20HEALTH%20CARE.pdf)
- Revalicha, N. S., & Sami'an. (2012). Perbedaan Stres Kerja Ditinjau dari Shift Kerja pada Perawat di RSUD Dr . Soetomo Surabaya. *Jurnal Psikologi Industri Dan Organisasi*, 2(01), 16–24. [digilib.stikeskusumahusada.ac.id](http://digilib.stikeskusumahusada.ac.id)
- Rogers, A. E. (2014). *The Effects of Fatigue and Sleepiness on Nurse Performance and Patient Safety*.

- <http://www.ncbi.nlm.nih.gov/pubmed/21328747>
- RSUP dr.Sardjito. (2018). *Mengapa Kita Sulit Konsentrasi dalam Bekerja?* <https://sardjito.co.id/2019/04/08/mengapa-kita-sulit-konsentrasi-saat-bekerja/>
- Said, N. B. (2014). Time Management in Nursing Work. *Researchgate.Net*, 6–7.
- Saraswati, A.B., Hamid, D., & Topowijono. (2015). kualitas pelayanan ( studi pada karyawan Eco Green Park , Batu ). *Jurnal Administrasi Bisnis (JAB)*, 31(1), 91–97.
- Secretariat of state. (2009). *Undang-Undang Republik Indonesia Nomor 44 Tahun 2009 Tentang Rumah Sakit*, (LN:153; LTN:5072). Kementerian Sekretariat Negara RI; 28 October 2009. <https://www.setneg.go.id/>
- Sherwood, L. (2014). *Fisiologi Manusia Dari Sel ke Sistem* (8th ed.). Jakarta: EGC.
- Siswanto. (2015). *Kesehatan Mental, Konsep, Cakupan dan Perkembangannya*. CV. Andi Offset.
- Stuart, GW., dan Sundeen. (2013). *Keperawatan Jiwa* (10th ed.). EGC.
- Suparman, D. (2015). Pembelajaran ibadah shalat dalam perpektif psikis dan medis. *ISSN :1979-8911, IX*(2).
- Talib, F., Rahman, Z., & Azam, M. (2011). Best Practices of Total Quality Management Implementation in Health Care Settings Best Practices of Total Quality Management Implementation in Health Care Settings. *Journal of Health Marketing Quarterly*, 28(3), 232–252. <https://doi.org/10.1080/07359683.2011.595643>
- Tjiptono, F., & Chandra, G. (2011). *Service, Quality and Satisfaction* (3rd ed.). CV. Andi Offset.
- Tsounis, A. (2018). Occupational Stress Experienced by Nurses Working in a Greek Regional Hospital : A Cross - sectional Study. *Iranian Journal of Nursing and Midwifery Research*, 23(6). <https://doi.org/10.4103/ijnmr.IJNMR>
- Tucker, P. (2010). The impact of rest breaks upon accident risk, fatigue and performance: A review. *An International Journal of Work, Health & Organisations*, 17(2), 123–137. <https://doi.org/10.1080/026783703100155949>
- Umam, K. (2012). *Perilaku Organisasi*. CV. Pustaka Setia.
- Vernekar, S. P., & Shah, H. (2018). A study of work-related stress among nurses in a tertiary care hospital in Goa. *5*(2), 657–661.
- Widyasrini. (2013). *Pengaruh Shift Kerja Terhadap Tingkat Stres Kerja Pada Perawat Rawat Inap Rumah Sakit*.
- [www.liputan6.com](http://www.liputan6.com). (2018). *Tingkatkan Daya Ingat hingga Kepercayaan Diri*. <https://www.liputan6.com/citizen6/read/3406532/tingkatkan-daya-ingat-hingga-kepercayaan-diri-ini-4-manfaat-konsentrasi-saat-belajar>
- [www.merdeka.com](http://www.merdeka.com). (2019). *RSUD Pasar Minggu Rawat 233 Pasien DBD*. <https://www.merdeka.com/foto/jakarta/1045474/20190130181514-rsud-pasar-minggu-rawat-233-pasien-dbd-004-nfi.html>
- [www.rmol.id](http://www.rmol.id). (2018). *RSUD Pasar Minggu Masih Berupaya Penuhi Obat Pasien*. <https://rmol.id/read/2018/09/20/358203/rsud-pasar-minggu-masih-berupaya-penuhi-obat-pasien>
- Yana, D. (2014). Stres Kerja pada Perawat Instalasi Gawat Darurat di RSUD Pasar Rebo Tahun 2014. *Jurnal Administrasi Kebijakan Kesehatan*, 1(2), 107–115.

Yaribeygi, H., Panahi, Y., Sahraei, H., & Johnston, T. P. (2017). Review article : The Impact OF Stress On Body Function : A Review. *EXCLI Journal* 2017;16:1057-1072, 16, 1057–1072.

Zainal, V.R; Hadad, M.D; Ramly, M. (2017). *Perilaku Organisasi*. PT. RagGrafindo Persada.