



# The Influence of Workload and Organizational Commitment on the Performance of Nurses at Siloam Palembang Hospital



Magdalena <sup>a</sup>, Zunaidah <sup>b</sup>, Muhammad Ichsan Hadjri <sup>c</sup>, Marlina Widiyanti <sup>d</sup>

Manuscript submitted: 27 May 2024, Manuscript revised: 18 June 2024, Accepted for publication: 09 July 2024

## Corresponding Author <sup>b</sup>



## Keywords

job satisfaction;  
nurse performance;  
organizational  
commitment;  
working motivation;  
workload;

## Abstract

This study aims to analyze the effect of workload and organizational commitment on nurse performance. This research uses quantitative research. The population in this study were 180 nurses from Siloam Palembang Hospital. The sampling technique used in this study was the saturated/census sampling method. The selection of the saturated / census sampling method was carried out because all populations were considered to have certain criteria to be studied and could be reached as a whole by researchers so that the population that would be sampled in this study amounted to 180 nurses. This study uses quantitative data types, where data is collected in a structured manner through measurement instruments such as questionnaires or systematic observations. The data analysis technique in this study used the help of SPSS software. The results showed that workload variables negatively affect the performance of Siloam Palembang nurses while organizational commitment variables positively affect the performance of Siloam Sriwijaya Palembang nurses, besides that simultaneously workload variables and organizational commitment also have a significant influence on employee performance.

International Journal of Social Sciences and Humanities © 2024.

This is an open access article under the CC BY-NC-ND license  
(<https://creativecommons.org/licenses/by-nc-nd/4.0/>).

## Contents

Abstract .....	63
1 Introduction .....	64
2 Materials and Methods .....	66
3 Results and Discussions .....	68
4 Conclusion .....	75
Acknowledgements .....	75
References .....	76

<sup>a</sup> Master of Management, Sriwijaya University, Palembang, Indonesia

<sup>b</sup> Lecturer in Master of Management, Faculty of Economics, Sriwijaya University, Palembang, Indonesia

<sup>c</sup> Lecturer in Master of Management, Faculty of Economics, Sriwijaya University, Palembang, Indonesia

<sup>d</sup> Lecturer in Master of Management, Faculty of Economics, Sriwijaya University, Palembang, Indonesia

## 1 Introduction

The pressure of globalization in the health sector results in competition between public, private and foreign hospitals. The community demands that hospitals provide services with the concept of *one-step quality services* which means that all healthcare needs and services related to hospital needs must be served by hospitals easily, quickly, accurately and with quality, to meet the needs of globalization, health workers must be able to become workers who are ready to provide services that satisfy customers, develop new capabilities, innovative products, commit and can manage change through group cooperation, and are required to think globally and have a vision (Saleh et al., 2023).

A hospital is a service company that provides health services to the community. In its operations, the Hospital is required to always have good performance because it is related to the health and safety of its patients. It requires the support of human resources who can carry out tasks and make changes to improve service quality.

In hospital service companies, nurses are one of the determining factors in creating satisfaction for patients because nurses are usually in contact with patients starting at the time of examination until when they are hospitalized in the hospital and if they have been hospitalized nurses will be in contact with patients for 24 hours. Planning both the number and classification of labor, as well as the utilization of labor following the management system is needed in existing services (Suratinoyo et al., 2018).

PT Siloam International Hospitals Tbk is the largest private hospital network that provides healthcare facilities in the form of hospitals and clinics in various cities in Indonesia. With more than 41 hospital branches and 25 clinics, Siloam Hospital reaches out to every community with complete facilities and professional medical personnel who are ready to provide quality medical services and international standards. (Copyright 2024, PT Siloam International Hospitals Tbk ).

Table 1  
Performance evaluation of inpatient and outpatient nurses of Siloam Sriwijaya Hospital Palembang  
Year 2022

Quality	Value Range	Description	Number of Nurses	%
5	4.60-5.00	Very Satisfactory	4	2.22
4	3.60-4.59	Satisfactory	16	8.89
3	2.60-3.59	Good enough	130	72.22
2	1.60-2.59	Simply	20	11.11
1	1.00-1.59	Bad	10	5.56

Source of *Human Capital* data Siloam Sriwijaya Hospital, 2023

Based on Table 1 the performance of inpatient and outpatient nurses in 2022 with a very satisfactory category is only 2.22%, a satisfactory category is 8.84%, a fairly good category is 72.22%, a fair category is 11.11%, and the performance of nurses in the poor category is 5.56%. The evaluation results show that the performance of inpatient and outpatient nurses is not optimal and needs to be further evaluated to determine the factors that influence the lack of nurse performance (Gunawan et al., 2019; Van Bogaert et al., 2013). According to Nugroho & Rahardja (2018), a lack of manpower can make the workload increase, so that ultimately the quality of work decreases.

Table 2  
Number of nurses on duty per shift compared to the number of patients October 2022 - October 2023

Number of Nurses	Number of Nurses	Total Patients	Nurse Ratio: Patients		
			Morning	Afternoon	Night
5th floor	32	54	1:7	1:6	1:6
6th floor	17	51	1:6	1:5	1:4
7th floor	20	42	1:7	1:7	1:7

Siloam Sriwijaya Hospital data source, 2022-2023

Table 2 data is processed based on the number of *full-bed* patients on each floor of the inpatient room. The number of nurses serving each *shift* compared to the number of patients October 2022 - October 2023 has a different ratio of nurses and patients, on the 5th-floor inpatient room nurses for the morning *shift* 1: 7, day *shift* 1: 6, night shift 1: 6, on the 6th-floor inpatient room nurses for the morning *shift* 1: 6, day *shift* 1: 5, night shift 1: 4, on the 7th-floor inpatient room nurses for the morning *shift* 1: 7, day *shift* 1: 7, night *shift* 1: 7. It can be seen that the workload faced by each nurse in each inpatient room on each *shift* is different in each inpatient room, including the ratio of the number of nurses on duty compared to the number of patients being treated. The workload on the 7th-floor nurses although the number of patients when *full bed* is not as much as on the 5th & 6th-floor inpatient rooms, in terms of the number of patients each nurse holds a larger number of patients when compared to other floors.

Calculating the workload of a nurse is not an easy task. Several approaches can be taken such as: *technical work sampling*, *time and motion study* and *daily log*. The above approaches are scientifically justified (Sumarni & Pramuntadi, 2019).

According to the Ministry of Health of the Republic of Indonesia in 2012 concerning technical guidelines for hospital buildings, the inpatient room is a room used for patients who need nursing and treatment services on an ongoing basis for more than 24 hours, for each hospital will have a treatment room with its name according to the level of service and facilities provided by the hospital to its patients.

It should be noted that nursing workload is defined as the product of the average daily number of patients seen, adjusted for the degree of dependency and type of care, and the average assistance time for each patient, according to dependency and type of care provided (Lu et al., 2019; Lu et al., 2012).

Expectations of nursing as a profession in providing better and quality services that have an impact on the quality of nursing care are optimized. This will be achieved if the number of nursing staff needs is following the workload provided for the nurses themselves. Limiting the number of nurses increases the workload of nurses (Aiken & Clarke, 2003).

Table 3  
Data on the number of nurses who resigned in 2022-2023

Nursing Division	2022			2023		
	Total nurse	Total Resign	%	Total nurse	Total Resign	%
Structural	18	1	5.56	18	1	5.56
Nurse	157	5	3.18	162	7	4.32
<b>Total</b>	175	6	8.74	180	8	9.88

Source of *Human Capital* data Siloam Sriwijaya Hospital, 2024

From the data above, it can be seen that the number of nurses who *resigned* in 2023 out of a total of 175 nurses 6 nurses resigned, namely 1 structural nurse and 5 nurses, while in 2023 8 nurses resigned from a total of 180 nurses, namely 1 structural nurse and 7 nurses from a total of 180 nurses in 2023. Which is an increase compared to 2022 although not significant.

Various ways are done by companies to prevent high levels of *turnover* intention in employees. In line with this, Mowday (Widodo, 2020) said that management needs to get commitment from employees to their

organization because employee commitment to the organization leads to identification with organizational goals, the ability of all resources, for the benefit of the organization and interest in remaining part of the organization.

Organizational commitment explains the extent to which an employee knows or recognizes the organization, the purpose of their work, and their hope to remain part of the organization (Eliyana & Ma'arif, 2019; Cohen, 2007). When employees' organizational commitment is high, it will make them work more optimally, enthusiastically, and will produce performance according to organizational expectations (Fadilah, 2023). A harmonious relationship between employees and the organization will create comfort that will optimize performance for employees and increase productivity for organizations or institutions (Hamsal, 2021). Thus, organizational commitment is an important resource in achieving organizational competitive advantage (Barney, 1986; Dyahrini & Primiana, 2018).

## 2 Materials and Methods

### *Object of research*

The object of research was Siloam Palembang Hospital nurses with a composition of 69 inpatient nurses, 40 outpatient nurses, 13 Intensive Care nurses, 15 emergency nurses, 21 operating rooms, 4 hemodialysis nurses, 18 structural nurses and a total of 180 samples.

### *Research design*

This research design is causal research because it aims to examine the cause-and-effect relationship between two variables, namely the independent variables of workload and organizational commitment and one dependent variable, namely the performance of Siloam Palembang Hospital nurses.

The data source used in this research is primary data. According to Sugiyono (2010), primary data is data that directly provides data to data collectors. In this preparation, researchers collect directly from the first source of the object of research being carried out. In this study, the primary subjects were Siloam Palembang Hospital nurses. Data collection is based on respondents' answers and responses to statements submitted by researchers in questionnaires.

### *Data Analysis Technique*

This study uses multiple linear regression analysis, previously conducted validity tests and reliability tests on research data, then conducts hypothesis testing through the t-test to test and analyze the relationship partially, and conducts an F test to identify the relationship simultaneously. Meaningfulness analysis in this study is used through the coefficient of determination (*R square*) test. The data will be processed with a statistical test tool, SPSS.

### *Operational Definition of Variables*

Table 4  
Operational Definition of Variables

Variables	Dimensions	Indicator	Scale	Questionnaire No.
Workload (X1)	1. <i>Cognitive workload</i>	1. Impact of service schedule changes 2. Sudden change in the patient's condition 3. Maintain the quality of nursing services	Ordinal	1-3

Variables	Dimensions	Indicator	Scale	Questionnaire No.
Organizational Commitment (X2)	2. <i>Physical workload</i>	4. The physical workload of nurses	Ordinal	4-6
		5. A large number of patients		
		6. Type of work		
	3. <i>Time pressure</i>	7. Time challenges	Ordinal	7-9
		8. Strategies for managing workload		
		9. Solid team		
	4. <i>Emotional workload</i>	10. Caregiver & Family Perception	Ordinal	10-12
		11. Patient demands		
		12. Professionalism and emotional support		
	5. <i>Quantitative workload &amp; qualitative workload</i>	13. Increased work & working hours	Ordinal	13-15
		14. Volume of work		
		15. Patient & nurse ratio		
	1. <i>Affective Commitment</i>	16. The feeling of love for the organization	Ordinal	16-18
		17. Strong desire to be part of the Organization		
		18. Support & Service		
	2. <i>Continuance Commitment</i>	19. Professional & personal loss	Ordinal	19-21
		20. Encouragement at work		
		21. Adaptation & Risk		
	3. <i>Normative Commitment</i>	22. Moral values or principles	Ordinal	22-24
		23. Moral consequences		
		24. Moral responsibility		
Performance (Y)	1. Quality	1. Skills certificate	Ordinal	1-3
		2. Service according to SOP		
		3. Communication		
	2. Quantity	4. Task work	Ordinal	4-6
		5. Work target		
		6. Work quantity		
	3. Timeliness	7. Shift schedule	Ordinal	7-9
		8. Assignments on time		
		9. Fast and precise service		

Variables	Dimensions	Indicator	Scale	Questionnaire No.
	4. Effectiveness	10. Attentive 11. Maintain Confidentiality 12. Problem-solving	Ordinal	10-12
	5. Independence	13. Honesty 14. Respect for the patient 15. Health services	Ordinal	13-15

Source: researcher, 2024

### 3 Results and Discussions

#### *Testing research instruments*

Data were collected using a two-part questionnaire instrument. The first part aims to collect information on the identity of the respondents, while the second part includes various indicators related to the research variables. Each indicator in the research variable was given a choice using a five-point Likert scale. After the data was collected, validity and reliability tests were conducted to ensure the eligibility of the data for further analysis.

#### *Validity test*

In this study, validity testing was carried out on two variables, namely Nurse Workload (X1) and Organizational Commitment (X2) which are independent variables (X), and nurse performance variables (Y). The validity test is sought by comparing the *Pearson product-moment* value found in the results of data processing with the help of the SPSS program seen in the CITS (*corrected item-total correlation*) column with the r value in the PMM (*Pearson product-moment*) table. The critical value of the correlation r-table at the significance level ( $\alpha$ ) 5% is 0.367 in the *Pearson product-moment* table. If the value of r-count > r-table (0.367) then it is declared valid, whereas if the value of rcount < r-table (0.367) then it is declared invalid.

Table 5  
Results of the validity test of the nurse workload variable (X1)

No.	Statement Items	rcount	r <sub>table</sub>	Result
1.	X1.1	0,491	0,367	Valid
2.	X1.2	0,385	0,367	Valid
3.	X1.3	0,443	0,367	Valid
4.	X1.4	0,456	0,367	Valid
5.	X1.5	0,444	0,367	Valid
6.	X1.6	0,525	0,367	Valid
7.	X1.7	0,411	0,367	Valid
8.	XI. 8	0,458	0,367	Valid
9.	X1.9	0,46	0,367	Valid
10.	X1.10	0,715	0,367	Valid
11.	X1.11	0,386	0,367	Valid
12.	X1.12	0,549	0,367	Valid
13.	X1.13	0,661	0,367	Valid
14.	X1.14	0,468	0,367	Valid
15.	X1.15	0,664	0,367	Valid

Data source: Processed from Questionnaire, 2024

Based on the data in Table 5 of the SPSS output above, it can be seen that overall in each item of the Nurse Workload variable questionnaire (X1) the value of  $r\text{-count} > r\text{-table}$ . So it can be concluded that all of these statement items have met the validity requirements (valid) so that they can be continued to the next testing stage.

Table 6  
Organizational Commitment Variable Validity Test Results (X2)

Statement Items	r count	r table	Details
X2.16	0,578	0,367	Valid
X2.17	0,586	0,367	Valid
X2.18	0,419	0,367	Valid
X2.19	0,626	0,367	Valid
X2.20	0,496	0,367	Valid
X2.21	0,619	0,367	Valid
X2.22	0,458	0,367	Valid
X2.23	0,369	0,367	Valid
X2.24	0,718	0,367	Valid

Data Source: Processed from Questionnaire, 2024

Based on the data in Table 6 SPSS output above, it can be seen that overall in each statement item of the Organizational Commitment variable questionnaire (X2) the value of  $r\text{-count} > r\text{-table}$ . So it can be concluded that all of these statement items have met the validity requirements (valid) so that they can be continued to the next testing stage.

Table 7  
Results of the Validity Test of Nurse Performance Variables (Y)

Statement Items	r count	r table	Details
Y.1	0,457	0,367	Valid
Y.2	0,531	0,367	Valid
Y.3	0,516	0,367	Valid
Y.4	0,502	0,367	Valid
Y.5	0,656	0,367	Valid
Y.6	0,408	0,367	Valid
Y.7	0,421	0,367	Valid
Y.8	0,621	0,367	Valid
Y.9	0,634	0,367	Valid
Y.10	0,383	0,367	Valid
Y.11	0,402	0,367	Valid
Y.12	0,487	0,367	Valid
Y.13	0,369	0,367	Valid
Y.14	0,418	0,367	Valid
Y.15	0,594	0,367	Valid

Data Source: Processed from Questionnaire, 2024

Based on the data in Table 7 of the SPSS output above, it can be seen that overall in each statement item of the Nurse Performance variable questionnaire (Y) the value of  $r\text{-count} > r\text{-table}$ . So it can be concluded that all the statement items have met the validity requirements (valid) so that they can be continued to the next testing stage.



### Reliability Test

The reliability test uses *Cronbach's alpha*. An instrument is said to be reliable if *Cronbach's alpha* is greater than 0.60. Reliability testing was carried out on three variables, namely Nurse Workload (X1) and Organizational Commitment (X2) which are independent, while Nurse Performance (Y) is the dependent variable. The decision-making criterion is that if the *reliability coefficient* (Cronbach's alpha) value is > 0.60, the measured variable can be said to be reliable.

Table 8  
Reliability Test Results

Variables	Cronbach's Alpha	Cut Off	N of items	Description
Workload (X1)	0,753	> 0,60	15	Reliable
Organizational Commitment (X2)	0,691	> 0,60	9	Reliable
Nurse Performance (Y)	0,779	> 0,60	15	Reliable

Data Source: Processed from Questionnaire, 2024

Based on the results of the reliability test in Table 8, it was carried out using *Cronbach's Alpha* method. The test criteria are if *Cronbach's Alpha* value > 0.60, then it can be declared reliable. The results of the reliability test of the independent variable Nurse Workload (X1) and Organizational Commitment (X2) show that the data obtained are reliable because the *Cronbach's Alpha* value is 0.753 and 0.691 as well as the results of the reliability test of the dependent variable nurse performance (Y) show that the data obtained are reliable. After all, the *Cronbach's Alpha* value is 0.779. This means that the data obtained can be trusted following predetermined criteria.

### Classical Assumption Testing

The classical assumption tests that must be met include normality test, multicollinearity test, and heteroscedasticity test. The following are the test results of the four classical assumptions:

#### Normality Test

The normality test is carried out to determine whether the sample data comes from a normally distributed population or not.

Table 9  
Normality Test Results

One-Sample Kolmogorov-Smirnov Test		
		Unstandardized Residual
N		180
Normal Parameters <sup>a,b</sup>	Mean	.0000000
	Std. Deviation	536.179.434
Most Extreme Differences	Absolute	.041
	Positive	.034
	Negative	-.041
Test Statistic		.041
Asymp. Sig. (2-tailed)		.200 <sup>c,d</sup>

Data Source: Processed from questionnaire, 2024

Based on the normality test results in Table 9, the significance value (Sig.) is 0.200 (> 0.05). So it can be concluded that the research data is normally distributed.



### Multicollinearity Test

The multicollinearity test aims to test whether the regression model found a correlation between independent variables. A good regression model should not correlate with the independent variables. The multicollinearity test is carried out by looking at the tolerance value and *variance inflation factor* (VIF) and the results of the analysis using the SPSS application, if the *torelance value* is higher than 0.10 or VIF is smaller than 10, it can be concluded that there is no multicollinearity (Hair et al., 2012).

Table 10  
Multicollinearity Test Results

<i>Test of Multicollinearity</i>	Tolerance Value	Cut Off Tolerance Value	VIF	VIF Cut Off	Description
Workload (X1)	0,759	>0,10	1,317	<10	No Multicollinearity
Organizational Commitment (X2)	0,759	>0,10	1,317	<10	No Multicollinearity

Data Source: Processed from Questionnaire, 2024

The results of the multicollinearity test that has been carried out are presented in Table 10, which shows a *torelance value* of 0.759 ( $> 0.10$ ) and a VIF value of 1.317 ( $<10$ ), it can be concluded that there is no multicollinearity.

### Heteroscedasticity Test

The Heteroscedasticity test aims to test whether, in the regression model, there is an inequality of variances from the residuals of one observation to another. In this study, the heteroscedasticity test was carried out with the *Glejser* Test by regressing the independent variable on the absolute value of the residuals. If the significance value between the independent variable and the absolute residual is more than 0.05, there is no heteroscedasticity problem. The results of the heteroscedasticity test are shown in the following table:

Table 11  
Heteroscedasticity Test Results

Variables	<i>Sig.</i>
Workload	0,466
Organizational Commitment	0,155

Data Source: Processed from Questionnaire, 2024

The results of the heteroscedasticity test that has been carried out are presented in Table 11 showing the *Sig.* a value between the independent variable workload and *Unstandardized Coefficients* which is 0.466 ( $>0.05$ ) and the *Sig.* value between the independent variable organizational commitment and *Unstandardized Coefficients* which is 0.155 ( $>0.05$ ), it can be concluded that the data does not occur heteroscedasticity.

### Multiple Linear Regression Analysis

Multiple linear regression analysis aims to determine the direct effect between 2 independent variables and 1 dependent variable. The independent variables in this study are workload variables ( $X_1$ ), organizational commitment ( $X_2$ ) and the dependent variable performance ( $Y$ ). The results of multiple linear regression are presented in Table 12:

Table 12  
Multiple Linear Regression Analysis

		Coefficients		
Model		Unstandardized Coefficients		Standardized Coefficients
		B	Std. Error	Beta
1	(Constant)	48.208	6.616	
	Workload	-.305	.098	-.231
	Organizational Commitment	.415	.088	.351

Data Source: Processed from Questionnaire, 2024

Based on the results of multiple linear regression tests, the regression equation model that can be written is as follows:

$$KP = 48.208 - 0.305 + 0.415$$

$$KP = 21.685 + 0.737 + 0.238$$

Description:

KP = Nurse Performance

$\alpha$  = Constant

$\beta_{1,2}$  = Coefficient of Value Change

BK = Workload

KO = Organizational Commitment

The equation shows the effect of the independent variable (X) on the dependent variable (Y), which is interpreted:

- The constant of 48.208 indicates that if the workload and organizational commitment variables are considered 0, the performance level of Siloam Sriwijaya Hospital nurses is 48.208.
- The workload variable regression coefficient value of - 0.305 indicates that if the workload variable increases by 1 unit, it will reduce the performance of Siloam Sriwijaya Hospital nurses by - 0.305.
- The regression coefficient value of the organizational commitment variable of 0.415 indicates that if the variable on organizational commitment increases by 1 unit, it will increase the performance of Siloam Sriwijaya Hospital nurses by 0.415.

#### *Correlation Coefficient (r) and Coefficient of Determination (R)<sup>2</sup>*

The correlation coefficient (r) needs to be analyzed and shows the relationship between one variable and another.

Table 13  
Correlation Coefficient (r) and Coefficient of Determination (R)<sup>2</sup>

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.507 <sup>a</sup>	.257	.248	5.392.002

Data Source: Processed from Questionnaire, 2024

Based on Table 13, the correlation coefficient (r) between the independent variable and the dependent variable is 0.507, which means that the level of relationship between variables is moderate (included in the range of 0.40 - 0.599). The coefficient of determination (R<sup>2</sup>) is used to determine the contribution of the independent variable to the dependent variable. Based on the coefficient of determination in Table 13, it is known that the coefficient of determination (R<sup>2</sup>) obtained is 0.248. This means that the workload and

organizational commitment variables have a contribution of 25.7%. While the other 74.3% is explained by other variables not examined in this study.

### *Hypothesis Testing*

#### *Statistical Test Results t (Partial Test)*

The t-test is used to determine whether partially the independent variable has a significant effect on the dependent variable. Based on the test results and data processing, the results are presented in Table 14.

Table 14  
Partial Test (t-test)

Variables	t	Sig.
Workload	-3,112	0,002
Organizational Commitment	4,724	0,000

Data Source: Processed from Questionnaire, 2024

Based on the t-test results shown in Table 14, the following results are obtained:

- The t-count value of the workload variable is -3.112. The negative t value indicates that workload has a negative influence on nurse performance. Based on the results of the t-test, the significance value (Sig.) of the workload variable is 0.002 < 0.05, so it can be concluded that workload has a significant negative effect on the performance of nurses at Siloam Sriwijaya Hospital Palembang.
- The t-count value of the organizational commitment variable is 4.724. The positive t value indicates that organizational commitment has a unidirectional influence on nurse performance. Based on the results of the t-test, the significance value (Sig.) of the organizational commitment variable is 0.000 < 0.05, so it can be concluded that organizational commitment has a significant positive effect on the performance of nurses at Siloam Sriwijaya Hospital Palembang.

#### *Simultaneous Test Results (F Test)*

The F test or simultaneous test is used to identify whether the regression equation model is feasible or not feasible to explain the effect of the independent variables (workload and organizational commitment) on the dependent variable (nurse performance). Based on the test results and data processing, the test results are presented in Table 15.

Table 15  
Simultaneous Test Results (F Test)

ANOVA						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	1777.978	2	888.989	30.577	.000 <sup>b</sup>
	Residuals	5146.042	177	29.074		
	Total	6924.020	179			

Data Source: Processed from Questionnaire, 2024

Based on Table 15, the significance value is 0.000 (< 0.05), which means that  $H_1$  is accepted, so it can be concluded that the workload variable ( $X_1$ ) and organizational commitment ( $X_2$ ) have a significant influence simultaneously on the nurse performance variable ( $Y$ ). Based on these results, it can also be concluded that the linear regression model obtained is feasible to be used to explain the effect of workload and organizational commitment on nurse performance.

### *The Effect of Workload on Nurse Performance at Siloam Hospital Palembang*

Based on the results of the analysis that has been obtained from this study, it show that workload has a significant negative effect on the performance of Siloam Palembang Hospital nurses. According to [Hakman et al. \(2021\)](#), nurses in hospitals have a lot of tasks and responsibilities set by the hospital, so the work done by nurses can provide their workload due to the many tasks and pressures that exist. This workload will eventually cause pressure on nurses so it affects the performance of nurses.

According to [Sulastri & Onsardi \(2020\)](#), a higher the workload received by an employee, it will have an impact on the quality of his performance and lead to a decrease in employee performance.

The results of this study are in line with the results of research conducted by [Aprilia et al. \(2017\)](#); [Dhermawan & Pratama \(2020\)](#); [Widiastuti & Yulihastri \(2021\)](#); [Erlina et al. \(2018\)](#), that workload has a negative and significant effect on nurse performance. The results research of [Santoso et al. \(2023\)](#), also state that the greater the workload, the nurse's performance decreases. [Sopali et al. \(2023\)](#), concluded that there is an effect of workload on nurse performance at RSUD dr. La Palaloi Maros where workload is negatively correlated with nurse performance, which means that nurses whose workload is high tend to have low performance and vice versa, nurses whose workload is low tend to have high performance with strong correlation strength.

The results of the calculation of the frequency of questionnaire responses by respondents show that the largest percentage of nurses who chose "Agree" and "Strongly Agree" was in the physical workload dimension with a value of 96.4%. It can be interpreted that the physical workload of nurses at Siloam Sriwijaya Hospital is high, including the physical workload carried out by nurses not only consists of direct nursing actions such as lifting, moving, and bathing patients, but also indirect nursing actions such as taking and sending medical devices to other departments, besides that the type of work is complex so that nurses feel difficult and become a workload ([Groenewegen & Hutten, 1991](#); [DiDomenico & Nussbaum, 2011](#)).

Based on the calculation of the frequency of performance questionnaire responses, it shows that the percentage of superiors who chose "Disagree" and "Strongly Disagree" was the largest, namely in the quality dimension (10.4%), and the dimension of timeliness (4.43%). This shows that there are still nurses who have not been able to complete tasks or provide nursing services on time. In addition, there are still nurses who have poor communication with patients or families. This is thought to be due to the high workload of nurses so they are less able to complete work on time and require additional time and sacrifice rest time to complete the job. High workload is also thought to have an impact on the communication aspects of nurses who are less than optimal. Nurses who work with maximum workload will cause nurses to experience fatigue, nurses are not focused and do not concentrate when providing services. Nurses only focus on completing tasks without having time to communicate with patients about the actions to be taken ([Dewi et al., 2018](#)).

A high workload can have a negative impact on nurse performance. Excessive workload can cause physical and mental fatigue, reduce concentration, and increase stress levels. Therefore, hospital management must strive to reduce stress levels in nurses, and conduct regular evaluations of workload, increase counselling, *coaching* for nurses so that they can balance their roles in hospital and outside the hospital.

### *The effect of organizational commitment on nurse performance at Siloam Hospital Palembang*

Based on the results of the analysis that has been obtained from this study, it show that organizational commitment has a positive and significant effect on nurse performance. According to [Pamungkas et al. \(2022\)](#), performance can be improved if employee commitment to the company organization is so strong. Robbins & Judge (2011), state that organizational commitment is a relative force. Individuals define their involvement in the part of the organization that is characterized by acceptance of organizational values and goals, willingness to strive for the organization, and desire to maintain membership in the organization.

The results of this study following research conducted by [Priyatama et al. \(2018\)](#); [Pamungkas et al. \(2022\)](#); [Hamdani & Awatara \(2016\)](#); [Wahyudi & Sudibya \(2016\)](#); [Susanti & Palupiningdyah \(2016\)](#); [Verawati et al. \(2019\)](#); and [Putra et al. \(2021\)](#), which shows that organizational commitment has a positive and significant effect on employee performance. Research conducted by [Haris \(2017\)](#), shows that if organizational commitment increases, it will have a positive impact on employee performance and vice versa.

The results of the calculation of the frequency of questionnaire responses by respondents show that the percentage of nurses who chose "Agree" and "Strongly Agree" was the largest in the *continuance commitment* dimension with a value of 97.06%. This shows that the *continuance commitment* of Siloam Sriwijaya Hospital nurses is good. Nurses feel that leaving the Siloam Hospital organization is a loss for nurses personally or professionally as nurses. Nurses also feel that staying in the Siloam Hospital organization is a form of respect for the values or moral principles that nurses espouse as a nurses. Although there are challenges in the workplace, nurses still survive because they realize that moving to a new workplace will require adaptation and high risk, so nurses still survive and are committed to a career with Siloam Sriwijaya Hospital.

The results of the calculation of the frequency of questionnaire responses by respondents choosing "Agree" and "Strongly Agree" are the lowest in the *normative commitment* dimension. Although the *normative commitment* dimension has the lowest percentage compared to *continuance commitment* and *affective commitment*, the *continuance commitment* of nurses is still classified as good, which is 81.96%. This is based on the perception of nurses who feel Siloam Hospital has contributed a lot to the training and experience received by nurses, so nurses feel they have a moral responsibility to continue to contribute to the success of Siloam Hospital Palembang.

The study shows that the organizational commitment variable influences nurse performance. This is thought to be because nurses who have high organizational commitment will give their maximum and best effort to achieve organizational goals, are willing to sacrifice for the benefit of the organization have a strong desire to stay in the organization, and are always loyal to the responsibilities that have been committed together in the organization so that every expectation and goal of the company that has been set can be realized and can be done well together (Franco et al., 2002; Raziq & Maulabakhsh, 2015).

## 4 Conclusion

Based on the results of research and analysis that has been done, it can be concluded that workload has a negative and significant effect on the performance of Siloam Hospital Palembang nurses. Organizational commitment has a positive and significant effect on the performance of Siloam Hospital Palembang nurses.

Based on the results of the above conclusions, the suggestions that can be conveyed by researchers are the need for re-evaluation related to nurse workload, especially physical workload with indirect nursing actions such as taking and sending medical devices to other parts. In addition, it is necessary to increase counselling, and *coaching* for nurses so that they can balance their roles in hospital duties and life outside the hospital.

The lowest dimension of organizational commitment of Siloam Hospital Palembang nurses is the *normative commitment* dimension. So it is necessary to increase nurses' feelings of attachment to continue to be in the organization, for example by increasing training, and income or providing more *rewards* to nurses. This can increase nurses' organizational commitment to stay with Siloam Sriwijaya Hospital.

To improve nurses' performance, Siloam Hospital Palembang needs to improve the supervision and discipline of nurses so that nurses can use time efficiently in carrying out their work.

Future researchers, it is expected to add variables that affect nurse performance that have not been included in this study such as leadership, trust in the organization, *human capital investments*, management support, organizational climate, environmental dynamism, work communication, work autonomy, work environment, proactivity, adaptability, intrinsic motivation, skill flexibility, and skill level.

## Acknowledgements

Thank you to those who have helped so that it is worthy of publication in an international journal.

## References





- Aprilia, F., Samsir, S., & Pramadewi, A. (2017). *Pengaruh beban kerja, stres kerja dan motivasi kerja terhadap kinerja perawat Rumah Sakit Islam Ibnu Sina Pekanbaru* (Doctoral dissertation, Riau University).
- Barney, J. B. (1986). Strategic factor markets: Expectations, luck, and business strategy. *Management science*, 32(10), 1231-1241.
- Clarke, S. P., & Aiken, L. H. (2003). Failure to Rescue: Needless deaths are prime examples of the need for more nurses at the bedside. *AJN The American Journal of Nursing*, 103(1), 42-47.
- Cohen, A. (2007). Commitment before and after: An evaluation and reconceptualization of organizational commitment. *Human resource management review*, 17(3), 336-354. <https://doi.org/10.1016/j.hrmr.2007.05.001>
- Dewi, L. K. C., Kawiana, I. G. P., & Martini, L. K. B. (2018). Integrative model of performance improvement. *International Journal of Social Sciences and Humanities (IJSSH)*, 2(2), 26-39. <https://doi.org/10.29332/ijssh.v2n2.116>
- Dhermawan, A., & Pratama, M. P. (2020). Pengaruh Kompensasi, Disipln Kerja, dan Beban Kerja Terhadap Kinerja Rumah Sakit Aisyiyah Purworejo. *Jurnal Ilmiah Mahasiswa Manajemen, Bisnis dan Akuntansi (JIMMBA)*, 2(4), 537-545.
- DiDomenico, A., & Nussbaum, M. A. (2011). Effects of different physical workload parameters on mental workload and performance. *International Journal of Industrial Ergonomics*, 41(3), 255-260. <https://doi.org/10.1016/j.ergon.2011.01.008>
- Dyahrini, W., & Primiana, I. (2018). Organizational commitment, competitive advantage, influence on performance cooperative in west java region. *vol*, 16, 78-87.
- Eliyana, A., & Ma'arif, S. (2019). Job satisfaction and organizational commitment effect in the transformational leadership towards employee performance. *European Research on Management and Business Economics*, 25(3), 144-150. <https://doi.org/10.1016/j.iiedeen.2019.05.001>
- Erlina, E., Arifin, A., & Salamah, A. U. (2018). Pengaruh beban kerja terhadap kinerja perawat di instalasi rawat inap RSUD Labuang Baji Makassar. *Jurnal Kesehatan Masyarakat Maritim*, 1(3).
- Fadilah, W. (2023). Pengaruh Kepuasan Kerja Motivasi Kerja dan Komitmen Organisasi terhadap Kinerja Perawat di RS Awal Bros Bekasi. *Syntax Literate; Jurnal Ilmiah Indonesia*, 8(10), 5617-5631.
- Franco, L. M., Bennett, S., & Kanfer, R. (2002). Health sector reform and public sector health worker motivation: a conceptual framework. *Social science & medicine*, 54(8), 1255-1266. [https://doi.org/10.1016/S0277-9536\(01\)00094-6](https://doi.org/10.1016/S0277-9536(01)00094-6)
- Groenewegen, P. P., & Hutten, J. B. (1991). Workload and job satisfaction among general practitioners: a review of the literature. *Social science & medicine*, 32(10), 1111-1119. [https://doi.org/10.1016/0277-9536\(91\)90087-S](https://doi.org/10.1016/0277-9536(91)90087-S)
- Gunawan, N. P. I. N., Hariyati, R. T. S., & Gayatri, D. (2019). Motivation as a factor affecting nurse performance in Regional General Hospitals: A factors analysis. *Enfermeria clinica*, 29, 515-520. <https://doi.org/10.1016/j.enfcli.2019.04.078>
- Hair, J. F., Sarstedt, M., Ringle, C. M., & Mena, J. A. (2012). An assessment of the use of partial least squares structural equation modeling in marketing research. *Journal of the academy of marketing science*, 40, 414-433.
- Hakman, H., Suhadi, S., & Yuniar, N. (2021). Pengaruh Beban Kerja, Stres Kerja, Motivasi Kerja Terhadap Kinerja Perawat Pasien Covid-19. *Nursing Care and Health Technology Journal (NCHAT)*, 1(2), 47-54.
- Hamdani, A., & Awatara, I. G. P. D. (2016). The Influence Of Social Capital, Intelectual Capital And Environment Dynamism Toward Employpess Performance. *15TH ANNIVERSARY PDIM FEB UNIVERSITAS BRAWIJAYA*, 171.
- Hamsal, H. (2021). Pengaruh Gaya Kepemimpinan, Komitmen Organisasi dan Budaya Organisasi Terhadap Kepuasan Kerja dan Kinerja Pegawai Universitas Islam Riau. *INVEST: Jurnal Inovasi Bisnis dan Akuntansi*, 2(1), 15-29.
- Haris, A. (2017). Learning system management based on teaching factory in Indonesia. *Journal of Advanced Research in Social Sciences and Humanities*, 2(4), 237-248.
- Lu, H., Barriball, K. L., Zhang, X., & While, A. E. (2012). Job satisfaction among hospital nurses revisited: a systematic review. *International journal of nursing studies*, 49(8), 1017-1038. <https://doi.org/10.1016/j.ijnurstu.2011.11.009>



- Lu, H., Zhao, Y., & While, A. (2019). Job satisfaction among hospital nurses: A literature review. *International journal of nursing studies*, 94, 21-31. <https://doi.org/10.1016/j.ijnurstu.2019.01.011>
- Nugroho, S., & Rahardja, E. (2018). Pengaruh Person-Organization Fit, Beban Kerja Dan Gaya Kepemimpinan Transformatif Terhadap Kinerja Perawat (Studi pada Perawat Rumah Sakit Ken Saras Kabupaten Semarang). *Diponegoro Journal of Management*, 7(4), 698-707.
- Pamungkas, W. N., Wahidi, K. R., & Pamungkas, I. J. A. (2022). Working Motivation and Reward System Influenced Nurses' Perception of Performance Mediated by Organizational Commitment. *International Journal of Nursing and Health Services (IJNHS)*, 5(4), 374-383.
- Priyatama, A. N., Zainuddin, M., & Seger Handoyo, N. I. D. N. (2018). Predicting Faculty Member's Work Engagement In Indonesia: Testing The Role Of Optimism, Perceived Organizational Support And Self Efficacy.
- Putra, R. (2021). Determinasi Kepuasan Pelanggan Dan Loyalitas Pelanggan Terhadap Kualitas Produk, Citra Merek Dan Persepsi Harga (Literature Review Manajemen Pemasaran). *Jurnal Ekonomi Manajemen Sistem Informasi*, 2(4), 516-524.
- Raziq, A., & Maulabakhsh, R. (2015). Impact of working environment on job satisfaction. *Procedia economics and finance*, 23, 717-725. [https://doi.org/10.1016/S2212-5671\(15\)00524-9](https://doi.org/10.1016/S2212-5671(15)00524-9)
- Saleh, M. F. G., Windiyansih, C., & Yoshida, E. (2023). Analisis Pengaruh Stres Kerja, Beban Kerja, Penghargaan dan Sanksi Kerja Terhadap Kinerja Kerja Pada Perawat Ruang Rawat Inap RS Azra Kota Bogor Provinsi Jawa Barat Tahun 2022. *Jurnal Manajemen dan Administrasi Rumah Sakit Indonesia (MARS)*, 7(1), 1-7.
- Santoso, T. A., Saepudin, D., & Oetojo, W. (2023). Pengaruh Motivasi, Kemampuan, Dan Beban Kerja Terhadap Kinerja Perawat Selama Pandemi Di Rspi Sulianti Saroso Jakarta. *Jurnal Multidisiplin Indonesia*, 2(8), 1811-1817.
- Sopali, M. F., Karlinda, A. E., Azizi, P., & Charli, C. O. (2023). Beban Kerja, Pengembangan Karir dan Komitmen Organisasi Terhadap Kinerja Perawat Pelaksana. *Jurnal Ekobistek*, 12(4), 740-745.
- Sugiyono, P. D. (2010). Metode Penelitian. *Kuantitatif, Kualitatif, Dan R&D*.
- Sulastri, S., & Onsardi, O. (2020). Pengaruh Stres Kerja, dan Beban Kerja, terhadap Kinerja Karyawan. *Journal of Management and Bussines (JOMB)*, 2(1), 83-98.
- Sumarni, S., & Pramuntadi, A. (2019). Pengaruh komitmen organisasi terhadap kinerja perawat di RS PK Muhammadiyah Bantul. *Jurnal Manajemen Kesehatan Yayasan RS. Dr. Soetomo*, 5(2), 154-164.
- Suratinoyo, Z., Saerang, I., & Trang, I. (2018). Motivasi Kerja, Komitmen Organisasional dan Disiplin Kerja Pengaruhnya terhadap Kinerja Karyawan PT. Uphus Khamang Indonesia. *Jurnal EMBA: Jurnal Riset Ekonomi, Manajemen, Bisnis dan Akuntansi*, 6(2).
- Susanti, S., & Palupiningdyah, P. (2016). The effect of job satisfaction and organizational commitment on employee performance with turnover intention as an intervening variable. *Manag. Anal. J*, 5(1).
- Van Bogaert, P., Kowalski, C., Weeks, S. M., & Clarke, S. P. (2013). The relationship between nurse practice environment, nurse work characteristics, burnout and job outcome and quality of nursing care: a cross-sectional survey. *International journal of nursing studies*, 50(12), 1667-1677. <https://doi.org/10.1016/j.ijnurstu.2013.05.010>
- Verawati, Y., & Bhegawati, D. A. S. (2019). The Role Of Skill In Mediating The Influence Of Organizational Culture To Employees'performance In General Affairs And Human Resources Development Of Klungkung Regency Public Hospital. *International Journal Of Sustainability, Education, And Global Creative Economic (IJSEGCE)*, 2(3), 154-160.
- Wahyudi, N. K. S., & Sudibya, G. A. (2016). Effect of job satisfaction and organizational commitment on employee performance at Natya Hotel, Kuta Bali. *Journal of Management*, 5(2).
- Widiastuti, Y., & Yuliasri, P. B. K. D. K. (2021). Emosional Terhadap Kinerja Perawat Dengan Stres Kerja Sebagai Variabel Mediasi Pada Rumah Sakit Universitas Andalas. *Menara Ekonomi*, 7(3).
- Widodo, S. (2020). The Effect of Task Competence, Placement, and Organisational Commitment on Performance: A Study in Airforce Command and Staff College in Lembang, Bandung. *International Journal of Innovation, Creativity and Change (IJICC)*, Scopus, 11(8), 681-697.



### Biography of Authors

	<p><b>Magdalena</b>  Student of Master Management, Sriwijaya University, Palembang, Indonesia.  Email: <a href="mailto:lena.manulang@gmail.com">lena.manulang@gmail.com</a></p>
	<p><b>Zunaidah</b>  Lecturer of Magister Management, Economic Faculty, Sriwijaya University, Palembang, Indonesia  Email: <a href="mailto:zunaidah@unsri.ac.id">zunaidah@unsri.ac.id</a></p>
	<p><b>Muhammad Ichsan Hadjri</b>  Lecturer of Magister Management, Economic Faculty, Sriwijaya University, Palembang, Indonesia  Email: <a href="mailto:ichsanhadjri@fe.unsri.ac.id">ichsanhadjri@fe.unsri.ac.id</a></p>
	<p><b>Marlina Widiyanti</b>  Lecturer of Magister Management, Economic Faculty, Sriwijaya University, Palembang, Indonesia  Email: <a href="mailto:marlinawidiyanti@fe.unsri.ac.id">marlinawidiyanti@fe.unsri.ac.id</a></p>