



THE RELATIONSHIP BETWEEN NURSE EMPOWERMENT AND QUALITY OF NURSING WORK LIFE IN HOSPITAL

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ABSTRACT

Background: Nursing human resources are a very important asset and component of a hospital service, contributing 55-65% to the hospital image out of the total number of employees. The utilization of human resources is essentially a form of employee empowerment in a hospital. The empowerment of hospital nurses will give a positive impact to nurse satisfaction, customer satisfaction, and organization, but it is still common to find hospitals that still lack in empowering their employees. This research is aimed at determine the relationship between nurse empowerment and Quality Of Nursing Work Life (QNWL). **Methods:** This study used a cross-sectional approach. The population is nurses who have the status as civil servants at a Dr Haryoto Hospital Lumajang, and by using a multi-stage sampling, 134 respondents were obtained. Data were collected by the questioner and were analyzed by using Spearman's Rho correlation with a significance level of 0.01. **Results:** The result showed variable of structural empowerment, the highest category is opportunity with 46%, in the psychological empowerment is confidence with 63%, while at the QNWL, work context received 54%. Empowerment was significantly related to QNWL ($p=0.000$, $r=0.326$). Structural empowerment was related with QNWL ($r=0.286$) and psychological empowerment too ($r=0.213$). So empowerment was able to increase QNWL by 32.6%. **Conclusions:** Empowerment had a direct influence on QNWL. Strategy of empowerment so important to increase engagement so role of nurse managers creating a work environment and improve the quality of services provided to the patient.

Keywords: empowerment, quality of nursing work life, nurse, hospital

INTRODUCTION

Human resource management is essentially a major asset and an integral part of an organization or company. Strategic human resource management views that employees in all areas of work and at whatever level are structurally and functionally (Bawafaa, 2015). Employees are one factor of production, therefore should be utilized optimally and productively (Ahmad, 2014). Utilization of human resources as an effort to empower employees in the hospital. Empowerment

becomes something important because in the face of the era of competition and service, each organization requires employees who are fast, responsive and independent so as to be able to compete through human resources and strengthen the capabilities and commitment of employees (Simarmata, 2009). Nursing human resources are a very important asset and component of a hospital service, contributing 55-65% to the hospital image (Armstrong, 2006) out of the total number of employees (Fitzpatrick, 2005). The



utilization of human resources is essentially a form of employee empowerment in a hospital (Fitzpatrick, 2005). Empowerment is pivotal in facing the era of competition and service because every organization requires employees who are agile, responsive, and independent, but it also needs to strengthen the capabilities and commitment of its employees (Laschinger et al, 2004).

The empowerment of hospital nurses will give a positive impact to work satisfaction, customer satisfaction, and organization (Wong, 2007), but it is still common to find hospitals that still lack in empowering their employees. Human resource development, especially for the nurses, at Dr Haryoto Hospital, Lumajang, is continuously being conducted by giving the opportunities to the nurses to follow continued education, training, seminars, and workshops, to improve their knowledge, competencies, and skills. Most inpatient rooms at Dr Haryoto Hospital, Lumajang use the Professional Nursing Care Model (*Model Asuhan Keperawatan Profesional (MAKP)*) of the team model in which each room consists of 2-3 teams. This team model gives the team leaders the opportunity to be responsible for the nursing care given to patients so that each team member will have a contribution and be empowered. On the other side, with the big responsibility trusted to the nurses, it can trigger exhaustion that will affect the nurses work satisfaction. The empowerment for nurses can be increased quality of nursing work life.

Based on a preliminary study conducted at Dr Haryoto Hospital, Lumajang, 199 nurses and midwives out of 347 employees (57.3%) have the statuses as civil servants. Structural empowerment

as a form of nurses' involvement in working took up a big portion, 50%, while psychological empowerment that could be seen through work role was just less than 45% in this survey. Meanwhile, nurse empowerment at their working environment will give rise to growth of performance (Wong, 2006) so will threaten the organizational productivity because less empowered nurses will have less work satisfaction and quality of nursing work life (Laschinger, 2008) (Meng, 2015).

Empowerment can be attributed to the degree of saturation and job satisfaction of the nurse (Laschinger et al, 2004). Quality of nursing work life includes four components: work life-home life, work design, work context, and work world (Brooks & Anderson, 2004). Quality of nursing work life which can generally be assessed from job satisfaction of nurses in the category of enough and not satisfied by 35%. This is due to several things, among others, nurses doing administrative work in the service, especially during the afternoon and evening shifts, the policy of the director of the hospital on the rotation of work placement so that nurses need to re-adapt to new work environment and lack of effective communication with other profession teams.

Prihastuty's research (2013) suggests that QNWL is categorized as being on work life home life and work design at Premier Surabaya Hospital, while intention to quit is influenced by social and administrative variables. QNWL has an effect on intention to quit. Research conducted by Winasih (2015) that job satisfaction is influenced by work environment factor which influence to quality of work life of nurse professionally



in supportive work environment to create high achieving nurse, high value, self-benefit and positive impact for productivity and quality of hospital . The quality of working life of the nurse is beneficial to decrease absenteeism, decrease nurse turnover and increase in work satisfaction (Boxall, 2013).

Nursing management plays a key role in creating a positive work environment so that they nurses will get the great benefits in facing their work condition and in improving the quality of services to customers (Sheel et al, 2012). Hospitals are also required to empower the nurse as much as possible in order to create job satisfaction that can impact the performance of existing nurses so that the organization can be strong and competent (Greco, 2006). This research is aimed at determine the relationship between nurse empowerment and QNWL at Dr Haryoto Hospital, Lumajang, in 2017.

METHODS

This study was a cross sectional approach. The population in this study were nurses working at Dr Haryoto Hospital, Lumajang. The samples in this study were 134 nurses at the Dr Haryoto Regional Hospital, Lumajang nurse who met the study criteria as a civil nurse with had 5-10 years of work experience and a minimum of education is Diploma.

The sampling used is a multi-stage sampling. First phase cluster sampling is used classify nurses working space where the corresponding units consisting of four units. Second phase of used proportional random sampling by considering the number of respondents representing each unit. Thirth phase used simple random sampling is to take samples in accordance

with the criteria to be used as a 134 respondents, that are critical care (38 nurses), inpatient (55 nurses), outpatient (19 nurses) and operating room (22 nurses).

Variable in this research is composed of empowerment and QNWL. Measurements of structural empowerment in nursing using by Condition for Work Effectiveness Questionnaire (CWEQ) to measure four dimensions of structural empowerment, include access to opportunity, support, information, and resources (Greco, 2006). Formal power measurement using the Job Activities Scale (JAS) and informal power using the Organizational Relationship Scale (ORS). While the measurement of psychological empowerment using by Psychological Empowerment Scale (PES) includes four dimensions of meaning, confidence, autonomy, and impact (Laschinger, Finegan, Shamian, & Wilk, 2009). The instrument used to QNWL using QNWL Brooks & Brooks 2004.

Analyses were performed using the SPSS with Spearman's Rho correlation were used to analyze the relationship between empowerment and QNWL. Cronbach's alpha reliability test (Nursalam, 2016) is 0.721 (> 0.6) so that the instrument is considered reliable.

RESULTS

Based on a nurses demographics at Dr Haryoto Hospital, Lumajang, most of the respondents were female (61.2 %) and almost half (49.3 %) had undergraduate degrees. The age range of the majority of nurses (33.6 %) is 36-40 years old, while more than half (51.5 %) had 5-10 years of work experience. Most of them (80.6%) belonged to the category of Clinical Nurse



III, which is nurses with an education background of diploma III nursing with work experience of at least 8 years and of

an undergraduate nursing degree with work experience of at least 6 years.

Table 1. The distribution of Research Variables of The Relationship between Nurse Empowerment and QNWL at Dr Haryoto Regional Hospital, Lumajang, in 2017

No.	Variable	Good f (%)	Adequate f (%)	Inadequate f (%)	Mean	Score
1.	Structural empowerment					
1)	Opportunity	62 (46%)	54 (40%)	18 (13%)	11.164	3-15
2)	Information	34 (25%)	75 (56%)	28 (21%)	9.754	3-15
3)	Support	39 (29%)	77 (57%)	18 (13%)	10.328	3-15
4)	Resources	38 (28%)	72 (54%)	24 (18%)	10.291	3-15
5)	Formal power	20 (15%)	59 (44%)	55 (41%)	8.955	3-15
6)	Informal power	39 (29%)	68 (51%)	27 (20%)	13.261	4-20
2.	Psychological empowerment					
1)	Meaning	84 (63%)	39 (29%)	11 (8%)	11.776	3-15
2)	Confidence	85 (63%)	38 (28%)	11 (8%)	11.896	3-15
3)	Autonomy	65 (49%)	56 (42%)	13 (10%)	11.045	3-15
4)	Impact	81 (60%)	45 (34%)	8(6%)	11.418	3-15
3.	QNWL					
1)	Work life-home life	53 (40%)	70 (52%)	11 (8%)	25.425	7-35
2)	Work design	32 (24%)	95 (71%)	7 (5%)	31.672	9-45
3)	Work context	73 (54%)	61 (46%)	0	75.500	20-100
4)	Work world	24 (18%)	88 (66%)	22 (16%)	16.679	5-25

From Table 1, meanwhile, in the variable of Structural Empowerment, the highest category is opportunity, with an good category more than 46% and a mean of 11.164. In the variable of psychological empowerment, the highest is meaning and

confidence with an good category reaching 63% and a mean of 11.776 and 11.896, while the QNWL, work context received 54%.

Table 2. The Relationship Between Nurse Empowerment and QNWL at Dr Haryoto Regional Hospital, Lumajang, in 2017

Variable	QNWL	
	Sig (2-tailed)	Spearman's Rho correlation
1. Structural Empowerment	0.000	0.286
2. Psychological empowerment	0.000	0.213
3. Overall empowerment	0.000	0.326

Correlation analyses were conducted to further examine the relationship between empowerment dimensions and burnout syndrome. Empowerment was significantly ($p < 0.01$) related to QNWL (see table 2) with $r=0.326$. So empowerment was able to increase QNWL by 32.6%. Structural empowerment was

related with QNWL ($r=0.286$) and psychological empowerment ($r=0.213$).

DISCUSSION

The result of the research shows that there is a significant influence between structural empowerment on quality of nursing work life. Number, type and



qualification of nurses in RSUD Dr. Haryoto Lumajang so the imbalance between the number of nurses and their workload. Clinical nurse III distributed in outpatient, in addition to the room with high BOR does not guarantee the number of appropriate nurses. Calculation of the need for the number of nurses in RSUD Dr. Haryoto Lumajang uses Depkes calculations by adjusting the type of case and BOR.

The discrepancy between the ratio of nurses to the patient and the composition of the nurses in each watch will provide the quality of the services provided. Empowerment of nurses in the work environment will provide an opportunity for performance growth, but when this condition is lacking then the nurse will feel helpless. This threatens the productivity of the organization because the unempowered nurses are more vulnerable to burnout and less job satisfaction (Laschinger et al., 2004). Empowerment teaches nurses to make decisions and accept responsibility for outcomes (Simarmata, 2009). The impact of empowerment in the workplace, employers and co-workers is job satisfaction, organizational commitment, and survival (Laschinger et al., 2004).

Another study by Donahue (2008) that there is a significant relationship between the perception of nurse empowerment in obtaining information, opportunities, support and resources have a positive relationship with quality of work life. Research conducted by Winasih (2015) that job satisfaction is influenced by work environment factor which influence to quality of work life of nurse professionally in supportive working environment to create high achieving nurse, high value, beneficial to self and

positively impact to productivity and quality of hospital . Education and training are conducted so that the workforce can always follow the development of science and technology. Promotion can be used for the way of employment development, because promotion is the transfer of employees to a higher level. The existence of the development of manpower, both through education and training, promotion and mutation will be able to motivate employees to have good performance (Huber, 2006). Lack of appreciation of the work environment makes workers feel worthless. Appreciation is not only seen from the giving of bonus (money), but the relationship that exists between the workers, the employee with the employer also gives an impact to the workers. The given appreciation will increase the positive affection of the worker which is also an important value in showing that someone is already working well (Leiter & Maslach, 2004).

Psychological empowerment there are four important components of meaning, confidence, autonomy, and impact. The high workload of nurses, the adequacy of the services felt less transparent, effective communication is still less than optimal and the nurse job security is still lacking as the cause of the lack of quality of nursing work life. Good psychological empowerment will increase organizational loyalty and job satisfaction (Laschinger, 2008). Research on the psychological empowerment dimension is supported also by research conducted by Lina Meng (2015) that psychological empowerment has a significant positive effect on intention to stay nurse and negative effect on burnout. Meanwhile, according to Winasih (2015) that job



satisfaction is influenced by work environment factors that influence each other on the quality of nursing work life professionally in work environment. The quality of working life of the nurse is beneficial to decrease absenteeism, decrease nurse turnover and increase in work satisfaction.

The quality of the nurse's working life affects the nurse's relationship with all the supporting elements in the hospital as a whole, the relationship with other professions including the organization's understanding of the wants and needs of the nurses on the safety of the environment and work safety as well as the comfortable working atmosphere, so that the nurse is motivated.

The benefits of empowerment can, among others, encourage staff to think critically, solve problems and foster leadership attitudes. Empowerment fosters leadership, collegiality, self respect, and professionalism (Marquis & Huston, 2000). Empowerment frees staff from mechanical thinking and encourages critical thinking, solving problems, and applying knowledge to practice (Baker & Young in Marquis & Huston, 2000). Motivation and staff remotivation can be achieved through empowerment (Joss & Kogan, 1995 in Brooker & Nicol, 2003). Empowerment provides staff with knowledge, skills and attitudes through education and training to enable staff to be professionally responsible (Brooker & Nicol, 2003).

CONCLUSION

Empowerment had a direct influence on QNWL. Empowerment needs to be created within an organization of nursing services so that nurses as frontliners have

sufficient strength to have a major impact on client health services. Strategy of empowerment so important to increase engagement so role of nurse managers creating a work environment and improve the quality of services provided to the patient. Further research should be conducted to analyze the influences of empowerment, leadership, and customer satisfaction.

REFERENCES

- Ahmad, Thoifur. (2014). *Manajemen Sumber Daya Manusia*, diakses 27 November 2016, <http://thoifurblog.blogspot.co.id/2014/11/manajemen-sumber-daya-manusia.html>.
- Armstrong, M. (2006). *A Handbook of Human Resources Management Practice, Philadelphia* : British Library Cataloguing in Publication Data.
- Bakker, A.B. & Leiter, M.P. (2010). Where to go from here: Integration and future research on work engagement. *Work engagement: A handbook of essential theory and research.*, pp.181–196.
- Bawafaa, E., Laschinger, H. & Wong, C.A. (2015). The influence of resonant leadership on the structural empowerment and job satisfaction of registered nurses Carol A Wong. *Journal of Research in Nursing*, 0(0), pp.1–13.
- Boxall, P. (2013). Mutuality in the management of human resources: assessing the quality of alignment in employment relationships. *Human Resource Management Journal*, 23(1), pp.3–17.
- Brooks, B.A. & Brooks, B.A. (2004). Defining Quality of Nursing Work Life, (November 2016).
- Donahue, M.O. et al. (2008). The relationship between nurses perceptions of empowerment and patient satisfaction, 21, pp.2–7.
- Fitzpatrick, J.J. & Editor, S., 2005.



- Springer Series on Nursing Management.*
- Greco, Paula dan Heather Laschinger. (2006). Leader Empowering Behaviour Staff Nurse Empowerment and Work engagement/Burnout, *Nursing Leadership Journal*, Volume 19, Number 4, 2006.
- Huber, D. (2006). *Leadership and nursing care management*, 3rd edition. USA: Elsevier Health Sciences.
- Laschinger, Heather, Joan Finegan, Judith Shamian and Piotr Wilk. (2003). Workplace Empowerment as a predictor of nurse burnout in restructured healthcare setting, *Healthcare Quarterly*, 6(4) June 2003.
- Laschinger, Sarmiento, Iwasiw. (2004). Nurse educators' workplace empowerment, burnout, and job satisfaction: testing Kanter's theory. *Journal of Advanced Nursing* (46)2, 134-143.
- Laschinger, Heather. (2008). Effect of Empowerment on Professional Practice Environments, Work Satisfaction, and Patient Care Quality: Further Testing the Nursing Worklife Model, *Journal of nursing care quality* 23(4):322-30, May 2008.
- Laschinger. (2009). Workplace empowerment, incivility, and burnout: impact on staff nurse recruitment and retention outcomes, *Journal of Nursing Management*, 2009, 17, 302-311.
- Leiter MP and AB Bakker. (2010). *Work engagement: A handbook of essential theory and research*, New York : Psychology Press, books.google.com
- Meng, Lina. (2015). Relationships among structural empowerment, psychological empowerment, intent to stay and burnout in nursing field in mainland China, J. *International Journal of Nursing Practice*, Volume 21, Issue 3 June 2015.
- Nursalam. (2016). *Metodologi Penelitian Ilmu Keperawatan Pendekatan Praktis*, 4th edition, Jakarta: Salemba Medika.
- Prihastuty, Jany, Nyoman Anita dan Nursalam. (2013). Model Peningkatan QNWL untuk Menurunkan Intensi to Quit di RS Premier Surabaya, *Jurnal Ners Volume 8 Nomor 2*, Oktober 2013: 349-356.
- Sheel et al. (2012). Quality of Work Life , Employee Performance and Career Growth Opportunities : a Literature Review. *International Journal of Multidisciplinary Research*, 2(2), pp.291-300.
- Simarmata, Henry dan Nicholas Simarmata. (2009). *Pemberdayaan Karyawan*, accessed 10 Oktober 2016, <http://headtoresearch.blogspot.co.id/2009/04/pemberdayaan-karyawan.html>.
- Winasih, Rini. (2015). Analisis pengaruh budaya organisasi dan QNWL terhadap kinerja dan kepuasan kerja perawat di RSUD Dr Soetomo Surabaya, *Jurnal Ners Vol. 10, No. 2*, Oktober 2015 : 332-342.
- Wong, Cho, and Julia, C. A. (2006). Workplace Empowerment , Work Engagement and Organizational Commitment of New Graduate Nurses (October 2006), *Nursing Leadership Journal*, Volume 19, Number 3, 2006.