THE EFFECT OF WORK LOAD, EMOTIONAL INTELLIGENCE, STRESS AND BURNOUT ON NURSING PERFORMANCE IN CARING IN HOSPITAL DIAN HUSADA MOJOKERTO

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THE EFFECT OF WORK LOAD, EMOTIONAL INTELLIGENCE, STRESS AND BURNOUT ON NURSING PERFORMANCE IN CARING IN HOSPITAL DIAN HUSADA MOJOKERTO

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ABSTRACT. This study aims to prove and analyze the influence of: influence of workload, emotional intelligence, work stress and burnout on the performance of nurses in caring in the dian husada mojokerto hospital. This research uses using cross sectional analytic surveys. This research was conducted on nurses who served in the inpatient nurses. Respondents used as r 40 trch samples totaled 30 people take 32 om taken using total sampling. Validity test, reliability test, and hypothesis testing using Smart PLS 3.0 Partial Least Square Software. The results of the study came to the conclusion: (1) Workload affects the work of nurses in caring for patients at Dian Husada General Hospital in Mojokerto (2) Workload does not support nurses' burnout in performing care at Dian Husada Ge [9] al Hospital in Mojokerto (3) Nurses performing care in Dian Husada General Hospital in Mojokerto, (4) Emotigal intelligence is not related to nurses' work in caring for Dian Husada General Hospital in Mojokerto, (5) Emotional intelligence is not related to burnout in Dian Husada General Hospital in Mojokerto, (6) Emotional intelligence does not support nurses' performance in caring patients at Dian Husada General Hospital in Mojokerto (7) Work stress is not related to nurses fatigue in treating at Dian Husada General Hospital in Mojokerto (8) Work stress does not support the performance of nurses in caring for patients at Dian Husada General Hospital in Mojokerto, (9) Burnout assesses the performance of nurses in caring for patients at Dian Husa da General Hospital in the city of Mojokerto

KEYWORDS: The Effect Of Work Load, Emotional Intelligence, work Stress, Burnout, ursing Performance In Caring

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I. INTRODUCTION

Nursing services as a form of professional service, are an inseparable part of overall health care assistance. A good and quality nursing process will produce results for the healing process, so implementing nurses must work well in accordance with Nursing Care Standards (SAK), their duties and responsibilities. Nurses must be able to meet the needs of clients with full commitment, intellectual, technical and interpersonal skills that require skills in care (Komariah, 2012). Nursing is an important aspect that must be done by nurses in nursing practice. Caring is a special form of performance performed by professional nurses who are currently in a professional program. Swanson's theory is useful in providing guidance on how to build caring strategies that are useful and effective (Potter & Perry, 2009), so that caring in general can be interpreted as an ability to be dedicated to others, watch out with caution, show concern, empathy feelings for others and feelings of love or affection which are the way of nursing (Potter & Perry, 2005).

Good nurses in terms of quality and quality are expected to be able to provide the best in providing nursing care, so that the nursing care process can run well and is not proven in providing nursing practice. Workloads that can cause stress and decrease the quality of nursing care, nurse care do not apply to the health care process (Indonesian Nursing Journal, 2012). Yulistiana (2012) in her research through filling out

questionnaires about the performance of nurses by 46 implementing nurses in inpatient rooms in 2011 as many as 57% of nurses obtained performance with good results, at the same time requiring poor performance. Margaranda (2015) shows results that show nurses have a relationship with background, psychological factors, and organization that strongly supports the quality of nurse performance. In Fauzan's research (2016) the caring behavior performed by nurses applying the percentage was 57.7% and the rest did not care. While the Dian Husada Hospital, a hospital located on Jalan Raya Gemekan No. 77 Sooko, Mojokerto is a hospital that is also 7 manded to be able to provide excellent health services for the community.

The phenomenon that occurs in hospitals, mostly related to nurse services is the difference between the ideal nurse revice quality and the actual nurse service. This is caused by requesting patient approval, due to the limited ability of nurses, weak knowledge and skills of nurses in serving patients. Excessive workload and inability to control the transition makes nurses feel stressed at work and this is needed by nurses who are responsible for work and work. Some conditions in the end that cause nurses are not optimal, nurses do not match expectations in caring behavior. The results of official observations and interviews with several nurses, showed that nurses who were not optimal related to their work became their duties, in addition because nurses were also less able to connect to them so as to encourage to improve services provided to patients.

The results of official observations and interviews with several nurses, showed that nurses who were not optimal related to their work became their duties, in addition because nurses were also less able to connect to them so as to encourage to improve services provided to patients. The caring activities carried out by nurses are very complex. Workload, emotional intelligence, work stress and fatigue that may be related to care can increase the motivation for care to be well anticipated.

II. LITERATUREREVIEW

Organizational behavior. Organizational Behavior is a study that involves aspects of human behavior in a particular organization or group, covers aspects arising from the influence of organizations on humans as well as aspects arising from human influences on organizations. (Thoha, 2007: 5). In the perspective of management control systems, Sokamo, 2002: 11, argues that organizational behavior is "crucial" to be able to understand, explain, predict and influence or change human behavior that occurs in workplace organizations. This understanding contains three elements of understanding: 1. Organizational behavior examines visible behavior, such as discussions with coworkers, operating computers, preparing reports. Organizational behavior studies human behavior as individuals and as members of organizational groups. 3. Group behavior also analyzes the behavior of the group and the organization is involved.

The performance. Performance is the final result of the activity or achievement achieved by someone in carrying out their duties or work in accordance with established standards and criteria (Robbins & Coulter, 2005/2007; Rivai, 2005). According to Gibson (1987) factors that affect performance, namely 1). Individual factors: grouped into abilities, background and geography. 2). Psychological factors consist of perception, personality attitude, learning and motivation. 3). Organizational factors: indirect effect on performance behavior which consists of resources, leadership, reward structure and job design.

Caring. Caring is central to nursing practice, but this is more important in the current chaos in the health care environment. Needs, pressures, deadlines in the current health service. Needs, pressures, deadlines in the health care environment are in a small space of caring practice that makes nurses and clients' health professions (Watson, in Potter and Perry, 2006). The caring behavior is formulated by Watson (1979) into ten charative factors which are conveyed back into clinical caritas processes that [24] ide direction for nurses in applying caring behavior (Watson, 2005). Nurse caring behavior listed in Watson's te [30] aratif factors, namely: 1. Forming a humanistic and altruistic value system, (2). Instilling trust and hope (Instilling faith and hope), Cultivating sensitivity to self and others (Cultivating sensitivity to one's se[38] (3). Developing a relationship of mutual trust and help (29) eloping helping and trust relations), (4) Increase acceptance of the expression of feelings, (5) Increase acceptance of the expression of feelings, (6). Using a systematic problem of process (Using creative problem solving problem caring), (7). Improve the learning process (Pro 2) ting interpersonal teaching-learning), (8) Providing physical, mental, social, and spiritual environment yang suportif, protektif dan korekt (2) Providing a supportive, protective, or corrective mental-phisical sociocultural & spiritual (2) virontment), (9). Membantu kebutuhan dasar manusia (assisting with the gratification of human needs), (10). Menghargai kekuatan eksistensial, fenomenologi dan spiritual

(allowing for existential-phenomenologic forces).

Emotional Intelligence. Goleman (2015), he argues that emotional intelligence is the ability to motivate yourse 3 and endure frustration, rely on impulse and do not overdo it in pleasure 3 egulate mood and keep free from stress, not paralyze the ability to think, empathize, and pray. According to Goleman (2015), the elements of emotional intelligence include the following: (1) Self-Awareness, (2) Self-Regulation

Burnout. Burnout is physical, emotional, and mental fatigue caused by long- (23) involvement in situations that are full of e (23) ional demands (Pines & Maslach, 1993). Schaufelli (1993) defines burnout as a psychological syndrome consisting of three dimensions: emotional exhaustion, depersonalization, and decreased self-achievement..

Work stress. Keenan and Newton (in Wijono, 2007) determine that work stress is an embodiment of role blur, role conflict and excessive workload. This condition will further improve individual achievement and ability to work. Indicators of measurement in work stress variables in this study are: (a) Ruriness of roles, (b) Role conflict, (c) Workload (Keenan and Newton, 2007).

Based on these descriptions, it is concluded that a person's performance can be influenced by several factors. Therefore, in this study, it will be examined "The Effect of Workload, Emotional Intelligence, Job Stress and Burnout on Nurse Performance at Dian Husada Hospital in Mojokerto City", as can be described in the conceptual framework as follows:

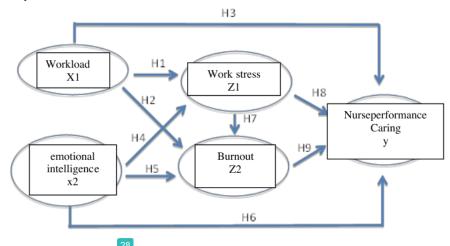


Figure 1. Research Conceptual Framework

Based on the conceptual framework, the following hypotheses can be proposed:

H1: there is an effect of workload on nurses' work stress in caring for patients at Dian Husada General Hospital in Mojokerto

H2: there is an influence of workload on nurses' burnout in caring for patients at Dian Husada General Hospital in Mojokerto.

H3: There is an influence of workload on nurses' performance in caring at Dian Husada General Hospital in the city of Mojokerto.

H4: There is an influence of emotional intelligence on nurses' work stress in caring for patients at Dian Husada General Hospital in the city of Mojokerto.

H5: There is an emotional intelligence effect on burnout nurses in caring for patients at Dian Husada General Hospital in Mojokerto.

H6: There is an influence of emotional intelligence on nurses' performance in caring for patients at Dian Husada General Hospital in the city of Mojokerto.

H7: There is an influence of work stress on nurses' burnout in caring for patients at Dian Husada General Hospital in the city of Mojokerto.

H8: There is an influence of work stress on nurses' performance in caring for patients at Dian Husada General Hospital in Mojokerto.

H9: There is a burnout effect on nurses' performance in caring for patients at Dian Husada General Hospital in Mojokerto.

III. RESEARCH METHODOLOGY

Population and Sample. The population of this study was all nurses implementing inclusion in the Dian Husada Hospital in Mojokerto city with the following criteria: (1). Nurse executor, (2). The work period of the nurse is more than (one) 1 year. The consideration is that the nurse is familiar with the situation and conditions of the workplace. Population taking is done in the inpatient room because the high number of complaints is in the inpatient room. The number of nurses with criteria as already mentioned is 30 nurses. The sample in this study used the entire population (saturated sample) of 30 nurses.

Method of Collecting Data. Data 18 llection in this study was carried out through a questionnaire given to respondents for. Likert scale is used to measure work load, emotional intelligence, stress and burnout on nursing performance in carin 3 Workload Indicators include: Physical, Cognitive, Pressure, time, Emotional, Qualitative, Quantitative. Emotional intelligence indicators include: self-awareness, self-regulation, motivation, social skills, empathy. Job stress indicators include: Obscurity, Role Conflict, Workload. Burnou 2 indicators include: Exhausion, Depersonalization, personal accomplishment. Caring indicators include: Instilling faith and hope, Cultivating sensitivity to one's self, Developing helping and trust relations, Expression of feeling, Using problem-solving caring process, Promoting interpersonal teaching-learning, Providing environment, Assisting of human needs, Allowing forces.

Data Analysis Method. Data analysis in this study uses an analytical method that can provide a simultaneous analysis process associated with a multi-variant research model as in this study, namely Structural Equation Modeling (SEM) analysis.

IV. RESULTS ANDDISCUSSION

1. Uji Outer Model Convergent Validity

Tabel 1. 1 Convergent Validity

	20			
	original sample estimate	mean of subsamples	Standard deviation	T-Statistic
		Workload (2	K1)	
X1.1	0.590	0.582	0.132	4.479
X1.2	0.783	0.781	0.082	9.555
X1.6	0.778	0.772	0.082	9.495
X1.7	0.793	0.783	0.081	9.745
X1.8	0.628	0.623	0.108	5.837
X1.9	0.627	0.605	0.156	4.011
X1.10	0.691	0.667	0.130	5.318
X1.12	0.617	0.613	0.139	4.453
X1.13	0.682	0.678	0.109	6.280
X1.14	0.620	0.605	0.138	4.474

	10			
	original sample estimate	mean of subsamples	Standard deviation	T-Statistic
X1.15	0.652	0.654	0.093	7.045
X1.16	0.788	0.787	0.072	10.985
X1.18	0.749	0.752	0.065	11.476
X1.19	0.633	0.611	0.129	4.915
A1.1)		Emotional Intelege		4.713
X2.1	0.680	0.638	0.170	4.010
X2.2	0.734	0.702	0.175	4.196
X2.3	0.777	0.721	0.168	4.616
X2.4	0.807	0.763	0.162	4.978
X2.5	0.807	0.766	0.155	5.210
X2.6	0.586	0.474	0.249	1.956
X2.9	0.710	0.650	0.167	4.240
X2.10	0.625	0.597	0.175	3.582
X2.11	0.806	0.757	0.166	4.865
X2.11	0.858	0.811	0.162	5.295
X2.14	0.677	0.669	0.174	3.881
X2.15	0.775	0.736	0.147	5.259
X2.16	0.705	0.651	0.175	4.020
X2.17	0.716	0.680	0.166	4.308
X2.17 X2.19	0.612	0.576	0.189	3.245
X2.20	0.727	0.666	0.157	4.644
X2.20 X2.21	0.649	0.572	0.221	2.937
X2.24	0.787	0.693	0.232	3.400
X2.25	0.605	0.546	0.232	3.293
X2.25 X2.27	0.692	0.659	0.147	4.699
X2.28	0.652	0.623	0.155	4.203
X2.29	0.837	0.768	0.176	4.768
X2.30	0.697	0.644	0.200	3.489
A2.50	0.097	Work Stress (3.469
Z1.1	0.775	0.759	0.117	6.596
Z1.2	0.836	0.823	0.106	7.854
Z1.3	0.697	0.697	0.163	4.285
Z1.4	0.831	0.818	0.111	7.490
Z1.5	0.803	0.794	0.100	8.067
Z1.7	0.807	0.806	0.085	9.458
Z1.8	0.808	0.800	0.096	8.386
Z1.11	0.712	0.705	0.122	5.811
Z1.12	0.679	0.641	0.173	3.933
Z1.13	0.735	0.707	0.115	6.375
		Burnout (Z2		
Z2.1	0.673	0.654	0.172	3.919
Z2.2	0.658	0.646	0.185	3.562
Z2.3	0.692	0.704	0.203	3.406
Z2.4	0.828	0.800	0.144	5.735
Z2.5	0.710	0.675	0.153	4.632
Z2.6	0.804	0.762	0.171	4.697
Z2.7	0.608	0.549	0.212	2.874
Z2.8	0.811	0.769	0.137	5.898
Z2.9	0.734	0.703	0.149	4.933
Z2.11	0.775	0.722	0.173	4.482
Z2.13	0.683	0.634	0.208	3.288

	22			
	original sample	mean of	Standard	T-Statistic
	estimate	subsamples	deviation	
Z2.14	0.759	0.691	0.205	3.696
Z2.15	0.715	0.665	0.211	3.384
Z2.16	0.765	0.718	0.194	3.946
Z2.17	0.725	0.656	0.190	3.822
	Nu	rses' Performance i	n Caring (Y)	
Y.1	0.777	0.721	0.177	4.397
Y.2	0.909	0.856	0.150	6.077
Y.3	0.774	0.724	0.177	4.383
Y.4	0.860	0.801	0.167	5.159
Y.5	0.722	0.682	0.153	4.722
Y.6	0.691	0.645	0.217	3.181
Y.8	0.712	0.661	0.180	3.963
Y.9	0.699	0.693	0.213	3.276
Y.10	0.723	0.706	0.180	4.015
Y.11	0.751	0.715	0.187	4.020
Y.12	0.791	0.769	0.164	4.827
Y.13	0.750	0.744	0.154	4.871
Y.14	0.673	0.644	0.198	3.389
Y.15	0.797	0.770	0.163	4.881
Y.16	0.511	0.524	0.171	2.993
Y.18	0.794	0.770	0.166	4.775
Y.19	0.704	0.679	0.168	4.188
Y.20	0.766	0.739	0.151	5.063
Y.21	0.811	0.759	0.186	4.354
Y.22	0.782	0.754	0.226	3.465
Y.23	0.644	0.647	0.219	2.945

Based on the table above, the results are obtained that all the indicator variable items in this study as a whole mea are ment have a convergent validity value above 0.5, then all measurement items that measure the variables in this study are declared valid as a measure of the construct.

Discriminant Validity

1.2 Discriminant Validity

1	Workload (X1)	Emotional Intelegence (X2)	Work Stress (Z1)	Burnout (Z2)	Nurse Performance (Y)
X1.1	<mark>0</mark> .590	- <mark>0</mark> .163	<mark>0</mark> .454	<mark>0</mark> .189	- <mark>0</mark> .121
X1.2	0 .783	- <mark>0</mark> .243	<mark>0</mark> .612	0.280	- <mark>0</mark> .162
X1.6	<mark>0</mark> .778	- <mark>0</mark> .218	<mark>0</mark> .588	<mark>0</mark> .449	- <mark>0</mark> .005
X1.7	<mark>0</mark> .793	- <mark>0</mark> .234	<mark>0</mark> .670	<mark>0</mark> .540	0.121
X1.8	0.628	- <mark>0</mark> .551	0.288	0.369	- <mark>0</mark> .072
X1.9	0.627	-0.248	0.524	0.467	0.162
X1.10	0.691	-0.276	0.648	0.469	0.020
X1.12	0.617	-0.394	0.591	0.200	-0.153
X1.13	0.682	-0.166	0.379	0.196	0.094

	Workload (X1)	Emotional Intelegence (X2)	Work Stress (Z1)	Burnout (Z2)	Nurse Performance (Y)
X1.14	0.620	-0.286	0.463	0.187	-0.011
X1.15	0.652	-0.480	0.434	0.201	-0.036
X1.16	0.788	-0.144	0.609	0.476	0.292
X1.18	0.749	-0.355	0.467	0.231	-0.006
¥1.19	0.633	-0.406	0.403	0.248	-0.006
X2.1	-0.162	<mark>0</mark> .680	- <mark>0</mark> .066	0.043	<mark>0</mark> .310
X2.2	<mark>-0</mark> .177	0.734	- <mark>0</mark> .160	- <mark>0</mark> .276	<mark>0</mark> .075
X2.3	-0.126	<mark>0</mark> .777	- <mark>0</mark> .033	- <mark>0</mark> .071	<mark>0</mark> .271
X2.4	-0.272	<mark>0</mark> .807	- <mark>0</mark> .099	- <mark>0</mark> .010	0.134
X2.5	- <mark>0</mark> .318	<mark>0</mark> .807	- <mark>0</mark> .112	- <mark>0</mark> .172	<mark>0</mark> .162
X2.6	- <mark>0</mark> .446	<mark>0</mark> .486	- <mark>0</mark> .285	- <mark>0</mark> .334	- <mark>0</mark> .189
X2.9	- <mark>0</mark> .042	<mark>0</mark> .710	- <mark>0</mark> .116	- <mark>0</mark> .136	- <mark>0</mark> .014
X2.10	-0.314	0.625	-0.189	-0.124	-0.068
X2.11	-0.213	0.806	-0.103	-0.177	0.127
X2.12	-0.293	0.858	-0.227	-0.096	0.283
X2.14	-0.365	0.677	-0.271	-0.177	0.173
X2.15	-0.262	0.775	-0.157	-0.104	0.215
X2.16	-0.296	0.705	-0.287	-0.044	0.031
X2.17	-0.332	0.716	-0.378	0.058	0.133
X2.19	-0.266	0.612	-0.270	-0.067	-0.121
X2.20	-0.270	0.727	-0.175	-0.093	0.083
X2.21	-0.224	0.649	-0.355	0.021	0.351
X2.24	-0.159	0.787	-0.113	0.279	0.465
X2.25	-0.081	0.605	-0.117	-0.098	0.169
X2.27	-0.412	0.692	-0.365	-0.149	0.086
X2.28	-0.345	0.652	-0.320	-0.225	0.075
X2.29	-0.268	0.837	-0.197	0.081	0.316
X2.30	-0.472	0.697	-0.509	-0.236	0.391
Z1.1	0.540	-0.355	0.775	0.507	0.023
Z1.2	0.690	-0.496	0.836	0.383	-0.140
Z1.3	0.605	-0.279	0.697	0.281	0.008
Z1.4	0.652	-0.243	0.831	0.365	-0.070
Z1.5	0.565	-0.096	0.803	0.258	-0.116
Z1.7	0.617	-0.341	0.807	0.460	-0.169
Z1.8	0.789	-0.212	0.808	0.471	-0.031
Z1.11	0.508	-0.176	0.712	0.280	-0.104
Z1.12	0.289	-0.310	0.679	0.082	-0.264
Z1.13	0.370	-0.095	0.735	0.285	-0.122
Z2.1	0.296	-0.328	0.229	0.673	0.154

	Workload (X1)	Emotional Intelegence (X2)	Work Stress (Z1)	Burnout (Z2)	Nurse Performance (Y)
Z2.2	0.357	-0.275	0.425	0.658	-0.018
Z2.3	0.577	-0.311	0.616	0.692	-0.057
Z2.4	0.310	-0.195	0.463	0.828	0.302
Z2.5	0.355	0.030	0.251	0.710	0.302
Z2.6	0.330	-0.092	0.493	0.804	0.457
Z2.7	0.158	0.360	0.120	0.608	0.625
Z2.8	0.328	-0.141	0.220	0.811	0.422
Z2.9	0.504	-0.299	0.228	0.734	0.243
Z2.11	0.444	-0.266	0.405	0.775	0.465
Z2.13	0.364	0.016	0.247	0.683	0.430
Z2.14	0.264	0.058	0.264	0.759	0.480
Z2.15	0.343	0.088	0.323	0.715	0.430
Z2.16	0.434	0.030	0.382	0.765	0.492
Z217	0.274	-0.039	0.252	0.725	0.438
Y.1	0.084	0.166	<mark>0</mark> .057	0.613	<mark>0</mark> .777
Y.2	-0 .088	0.268	- <mark>0</mark> .132	0.533	0.909
Y.3	<mark>-0</mark> .016	0.028	- <mark>0</mark> .067	<mark>0</mark> .404	<mark>0</mark> .774
Y.4	-0.158	0.273	-0.253	<mark>0</mark> .497	0.860
Y.5	- <mark>0</mark> .019	0.597	- <mark>0</mark> .140	0.200	0.722
Y.6	- <mark>0</mark> .012	<mark>0</mark> .187	- <mark>0</mark> .110	<mark>0</mark> .109	<mark>0</mark> .691
Y.8	<mark>0</mark> .074	0.060	0.023	0.352	0.712
Y.9	-0.085	0.205	-0.271	-0.050	0.699
Y.10	0.234	0.133	0.020	0.436	0.723
Y.11	-0.169	0.259	-0.179	0.295	0.751
Y.12	0.027	0.265	-0.083	0.258	0.791
Y.13	0.140	0.151	-0.131	0.173	0.750
Y.14	0.202	0.067	0.082	0.374	0.673
Y.15	0.130	0.103	0.002	0.455	0.797
Y.16	0.265	0.002	0.119	0.187	0.511
Y.18	0.087	0.211	-0.053	0.295	0.794
Y.19	0.303	0.077	0.088	0.442	0.704
Y.20	-0.013	0.066	-0.105	0.380	0.766
Y.21	-0.173	0.311	-0.316	0.362	0.811
Y.22	-0.052	0.273	-0.199	0.165	0.782
Y.23	-0.116	0.256	-0.233	-0.053	0.644

The value of cross loadings in the table obtained overall from the construct construct is stated to have good discrimination. Where the value of the correlation indicator of the construct must be greater than the value of the correlation between the indicator with other constructs.

Average Variance Extracted (AVE)

13 Average Variance Extracted (AVE)

	Average Variance Extracted (AVE)
Workload (X1)	0.579
Emotional Intelegence (X2)	0.517
Work Stress (Z1)	0.593
Burnout (Z2)	0.535
Nurses' Performance in Caring (Y)	0.561

The results of the AVE value for the indicator block that measures the construct can be stated to have a good discriminant validity value because the AVE value> 0.5. This means that all construct variables are declared reliable.

Composite Reliability

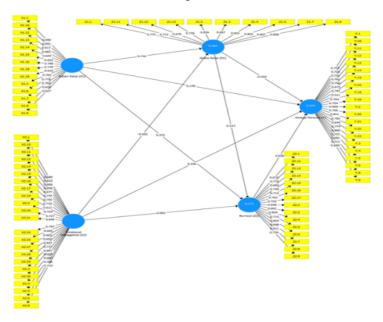
1.4 Composite Reliability

	Composite Reliability
Workload (X1)	0.927
Emotional Intelegence (X2)	0.960
Work Stress (Z1)	0.935
Burnout (Z2)	0.945
Marses' Performance in Caring (Y)	<mark>0</mark> .964

Based on Table, it can be explained that from the provisions of composite reliability, it can be stated that all the constructs under study fulfill the composite reliability criteria, so that each construct can be positioned as a research variable. This indicates that in a composite manner all variables have adequate internal consistency in measuring the measured latent / construct variable so that it can be used in further

timer Model Test
31 rms test is used to evaluate the relationship between latent constructs as hypothesized in the research, based on PLS output, the following figure is obtained:

Figure 1.1 PLS Research Model



The result of inner weight value of Figure 4.3 shows that the Nurse's performance in Caring is influenced by 34 kload, Emotional Intelligence, Work Stress, and Burnout. whereas Burnout is influenced by Workload, Emotior Intelligence, and Work Stress and Work Stress is influenced by Workload and Emotional Intelligence shown in the following equation.

$$\begin{split} Y &= 0.149 \ X_1 + 0.256 \ X_2 - 0.434 \ Z1 + 0.636 \ Z2 \\ Z2 &= 0.372 \ X_1 + 0.093 \ X_2 + 0.214 \ Z1 \\ Z1 &= 0.742 \ X_1 - 0.052 \ X_2 \end{split}$$

Hypothesis test The next step is to test the hypothesis using the T-statistic value. To determine whether there is an influence of exogenous variables on endogenous variables and endogenous variables on endogenous variables, the provision is used if the calculated T value of T (39), it is decided that there is a significant influence between the two variables, variable. The following are the results of testing the hypothesis.

Table 1.4. Hypothesis Testing Results

	Original Sample	Sample Mean	Standard Deviation	T Statistics (IO/STDEVI)
Workload (X1) -> Work Stress (Z1)	0.742	<mark>0</mark> .732	0.127	5.839
Workload (X1) -> Burnout (Z2)	0.372	0.347	0.343	1.085
Workload (X1) -> Nurses' performance in caring (Y)	0.149	0.212	0.263	0.566
Emotional Intelligence (X2) -> Work Stress (Z1)	-0.052	-0.073	0.126	0.413
Emotional Intelligence	0.093	0.023	0.282	0.332

	1 Original Sample	Sample Mean	Standard Deviation	T Statistics (IO/STDEVI)
(X2) -> Burnout (Z2)				
Emotional Intelligence (X2) -> Nurse's performance in caring (Y)	0.256	0.229	0.260	0.984
Work Stress (Z1) -> Burnout (Z2)	0.214	0.228	0.285	0.752
Work Stress (Z1) -> Nurse's performance in caring (Y)	-0.434	-0.439	0.287	1.512
Burnout (Z2) -> Nurse's performance in caring (Y)	0.636	0.500	0.273	2.327

The test results show that: Workload has a significant effect on Job Stress, because the 11 atistical T value is 5.839 which means greater than 1.96, and Burnout has a significant effect 12 on Nurse Performance, because the statistical T value is 2.327 w 21 means it is greater than 1,96, While Workload does not have a significant effect on Burnout, Workload does not have a significant 19 fect on Nurse Performance, Emotional Intelligence does not have a significant effect on Burnout, Emotional Intelligence does not have a significant effect on Performance Nurse, Job Stress has no significant effect on Burnout, Job Stress has no significant effect on Nurse Performance because the statistical T value is less than 1.96,

Structural Model Testing (Inner Model)

In assessing a model with PLS it starts by looking at the R-square for each latent dependent variable. Changes in the value of R-square can be used to assess the effect of certain independent latent variables on the dependent latent variable whether it has a substantive effect. For endogenous latent variables in the structural model which has an R2 of 0.67 indicating that the model is "good", R2 of 0.33 indicates that the model is "moderate", R2 of 0.19 indicates that the model is "weak" (Ghozali, 2013: 81). The PLS output as described below:

Table 1.5 R-Square Values

	R-Square
Workload (X1)	
Emotional Intelligence (X2)	
Work Stress (Z1)	0.584
Burnout (Z2)	0.272
Nurse's performance in caring (Y)	0.424

For 5 free variable Workload (X1) and Emotional Intelligence (X2) which affect the Work Stress variable (Z1) has an R2 value of 0.584 which indicates that the model is moderate. Then the 4 orkload (X1), Emotional Intelligence (X2) and Work Stress (Z1) which influence the Burnout (Z2) variable in the structural model has an R2 value of 0.272 which indicates that the model is "weak", while the Workload (X1) and Emotional In 4 ligence (X2), Job Stress (Z1), and Burnout (Z2) which influence Nurse Performance variable in caring (Y) in the structural model has an R2 value of 0.424 indicating that the model is "moderate".

CONCLUSIONS ANDRECOMMENDATIONS

(1) Workload affects the work of nurses in caring for patients at Dian Husada General Hospital in Mojokerto (2) Workload does not support nurses' burnout in performing care at Dian Husada General Hospital in Mojokerto (3) Nurses performing care in Dian Husada General Hospital in Mojokerto , (4)

Emotional in ligence is not related to nurses 'work in caring for Dian Husada General Hospital in Mojokerto, (5) Emotional intelligence is not related to burnout in Dian Husada General Hospital in Mojokerto, (6) Emotional intelligence does not support nurses' performance in caring patients at Dian Husada General Hospital in Mojokerto (7) Work stress is not related to nurses fatigue in treating at Dian Husada General Hospital in Mojokerto (8) Work stress does not support the performance of nurses in caring for patients at Dian Husada General Hospital in Mojokerto, (9) Burnout assesses the performance of nurses in caring for patients at Dian Husada General Hospital in the city of Mojokerto

SUGGESTION AND RESEARCH LIMITATIONS

Suggestions

Based on the conclusions outlined above, the researcher will provide suggestions and input that need to be considered by the Dian Husada Mojokerto Hospital for future improvement, these suggestions consist of: Suggestions given in 33 study are as follows:

- 1. Future studies are expected to be able to add or develop variables other than the variables used in this study that increase nurse competency, competency, quality and quantity training.
- 2. Future studies are expected to use other methods such as using qualitative research methods so as to produce data conducted by conducting interviews with related parties.
- 3. Sow the number of research samples So the results of the study can 14 better.
- 4. The number of population used in this study is only one company. Future studies are expected to increase the number of samples to be used, in accordance with the changes produced.
- 5. It is expected that in subsequent studies to use other types of companies as research objects.

13search Limitations

This research has been attempted and carried out in accordance with scientific procedures, however it still has limitations, namely:

- 1. The small number of research samples taking into account hospital policies regarding conditions related to the Covid 19 pandemic are too risky if the study 25 arried out in all treatments at Dian Husada Hospital.
- 2. The existence of research using questions that sometimes the answers given by the sample do not indicate a real situation.

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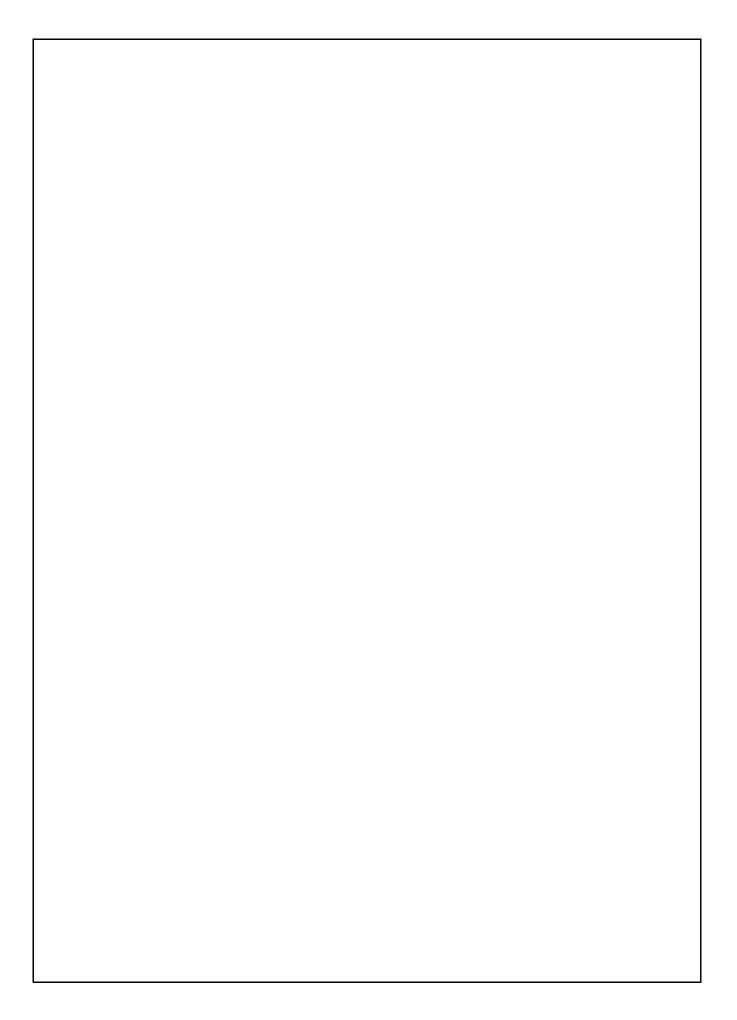
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THE EFFECT OF WORK LOAD, EMOTIONAL INTELLIGENCE, STRESS AND BURNOUT ON NURSING PERFORMANCE IN CARING IN HOSPITAL DIAN HUSADA MOJOKERTO

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