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# ANALYSIS OF CREDENTIAL METHODS WITH THE VALUE OF ONGOING PRACTICE PROFESSIONALISM EVALUATION IN A PRIVATE HOSPITAL IN SURAKARTA

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**ABSTRACT**
Nurses as professionals have a very important clinical role in realizing quality services oriented towards patient safety. To improve their performance, nurses are required to continuously improve their professionalism. Nurse performance is assessed using the Ongoing Professional Practice Evaluation (OPPE) assessment. Credentials are an effort to maintain the professionalism of nurses, but their implementation still varies. The credential method is carried out through several methods, namely viewing portfolios, interviews, written exams and practical exams. This study aims to determine differences in OPPE scores for nurses in the three groups of credentialing methods used. This research is a comparative descriptive study that compares OPPE in three groups of respondents who used the credential method, namely the group that used portfolios and interviews, portfolios, interviews and written tests; as well as portfolios, interviews, written exams and practical exams. The results of research on 60 respondents showed that the majority were aged 26 – 30 years (56.06%), female (66.7%), had a D3 education in Nursing (71.1%). The majority of OPPE scores are Good (66.67%) and the longer the nurse works, the better the performance score. There are differences in OPPE values for respondents who were credentialed using method 1, method 2 and method 3. The more credential methods used, the better the OPPE value obtained.

Keywords: credentials; nursing professionalism; ongoing professional practice evaluation

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## INTRODUCTION

In hospitals, the clinical role of nursing staff is very important in providing quality services to patients, requiring nurses to be proactive in quality improvement and patient safety programs as well as hospital risk management programs (Sjarqiah, 2022). Nurses are responsible for providing nursing services according to their competence and authority, both independently and in collaboration with medical personnel and other health personnel. So it's necessary developed system credentials To use ensure that every nurses can meet quality standards (Fatikhah, 2019). The credentialing process will also minimize errors in actions given by nurses who have certain clinical authority, thereby reducing the risk of *adverse events* (Agusnita dkk., 2022). With good credentials, there will be safer and better quality nursing services and hospital services.

Markus & Landowero (2020) said that the implementation of credentialing still varies in its implementation, in fact there are still hospitals in Indonesia that have not carried out this process, either credentialing nurses by the nursing committee or credentialing doctors by the

medical committee. Several problems related to the lack of implementation of the nursing committee's role in establishing clinical authority are not optimal, the number of assessors is limited, the method of implementing the credentialing process starting from policies, standard operating procedures, implementation flow has not been prepared optimally (Agusnita dkk., 2022). The absence of standards regarding credentialing methods makes each hospital institution create different policies and provisions.

Application method credentials can help increase ability someone and can be a measure to ensure that someone fulfil condition for accept certification or licence. Hence, the implementation of the credential method have to do with good and right (Agusnita dkk., 2022). The credential method can be done by viewing portfolio, conducting competency assessments by giving tests standardized to subject which concerned with interview and test write, or if necessary, do a practice test (Kemenkes RI, 2017). Nursing credentialing activities at a private hospital in Surakarta are carried out with using the method, namely looking at the portfolio using interview test, written test, or with the practical exam method. So not all nurses are credentialed using the same method. This has an impact on the performance and level of professionalism of nurses in providing services to patients.

Nurse performance is a very important issue to study in order to maintain and improve the quality of health services (Woran dkk., 2018). One way to assess nurse performance is using the *Ongoing Professional Practice Evaluation* (OPPE), which has 6 core competencies, namely patient care, medical knowledge, practice-based learning and improvement, interpersonal communication, professionalism and system-based practice (Holley, 2016). The OPPE assessment that has been carried out has found that there are still 2.3% of nurses whose professionalism practice values need to be improved. The credentialing methods used by nurses vary. The method used during credentialing generally only uses the portfolio method with interviews or interviews and written tests without taking practical exams, this has an impact on the OPPE score being low. Based on this, this research aims to determine the differences in OPPE scores for nurses in three groups of nursing credential methods used in private hospitals in Surakarta.

## METHOD

This research is quantitative research with a comparative descriptive design with a purposive sampling technique. This research, which was conducted at a private hospital in Surakarta, used 60 nurse respondents. The researchers determined the sample criteria, namely: Level I Clinical Nurse, less than 5 years of service, credentials have been carried out, not a structural official or Nursing committee administrator and not on leave or on duty outside the hospital. Respondents were divided into 3 groups, method group 1 used portfolios and interviews, method group 2 used portfolios, interviews and written tests, while method group 3 used portfolios, interviews, written tests and practice. The OPPE assessment was carried out using the OPPE form which is standard in the hospital where the research was conducted. This instrument had previously been tested for validity and reliability by Sujiyanti with r-calculation results between 0.448 – 0.581 (r table at N – 2 = 18 was 0.444) so that each question item in the OPPE assessment was valid. The Cronbach Alpha value is 0.911 (>0.81), according toSugiyono, (2018) almost perfect consistency. Next, the researchers compared the OPPE values for the three groups of respondents. Data analysis was carried out using the Kruskal-Wallis test to determine differences in OPPE values in each assessment period.

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## RESULTS

From the 60 research respondents, the characteristics of the respondents were obtained, including age, gender and the respondent's last education, in full as described in Table 1.

Table 1.
Characteristics of Respondents

| Indicator | f | % |
|---|---|---|
| Age | | |
| 22 - 25 years old | 13 | 21.7 |
| 26 - 30 years old | 34 | 56.7 |
| 31 - 35 years old | 13 | 21.7 |
| Gender | | |
| Man | 20 | 33.3 |
| Woman | 40 | 66.7 |
| Education | | |
| D3 Nursing | 43 | 71.1 |
| Bachelor's Degree in Nursing | 2 | 3.3 |
| Nurse | 15 | 25.0 |

The majority of respondents were aged 26 - 30 years, namely 56.6%, then those aged 31 - 35 and 22 - 25 years respectively were 21.7%. There were more female respondents than male, namely 66.67%. In terms of education, the majority have a D3 Nursing degree, 71.1%, 25.0% as nurses and 3.3% with a bachelor's degree in nursing.

Each group of respondents consisted of 20 people, then an OPPE assessment was carried out with the results as in the table below:

Table 2.
Description of OPPE values

| | Credential Method | | |
|---|---|---|---|
| | Method 1 | Method 2 | Method 3 |
| N | 20 | 20 | 20 |
| Minimal | 60 | 72 | 88 |
| Maximum | 78 | 88 | 95 |
| Average | 71.1 | 82.6 | 91.9 |
| Standard Deviation | 5.51 | 3.99 | 2.24 |

The group of respondents with method 1 had a minimum OPPE value of 60, a maximum of 72, an average of 71.1 with a standard deviation of 5.51. The method 2 respondent group had a minimum OPPE score of 72, a maximum of 88, an average of 82.6 with a standard deviation of 3.99. Meanwhile, the method 3 respondent group had a minimum OPPE score of 88, a maximum of 95, an average of 91.9 with a standard deviation of 2.24. From these data it appears that the OPPE value is higher for respondents who are credentialed using more methods, while the standard deviation also decreases when using more credentialing methods.

Table 3. OPPE values

| OPPE value | f | % |
|---|---|---|
| Not enough | 1 | 1.7 |
| Enough | 21 | 3.5 |
| Good | 38 | 63.3 |

The OPPE scores obtained from this research were 38 respondents with a good score (63.3%), 21 people with a fair score (3.5%) and 1 person with a poor score (1.7%).
Next, a statistical test using Kruskal-Wallis was carried out because the data variants were not homogeneous and the data distribution was not normal. This test compares the differences in OPPE scores between respondents who underwent different credential methods, and the following results were obtained:

Table 4.
Kruskal-Wallis test results

| | Credential Method | N | Mean Rank |
|---|---|---|---|
| OPPE | Method 1 | 20 | 11.23 |
| | Method 2 | 20 | 29.83 |
| | Method 3 | 20 | 50.45 |
| | Kruskal-Wallis H | | 50,674 |
| | Asymp. Sig. | | 0,000 |

Mean rank value or average rank in each group during the assessment period. In groups method 1 has a mean rank of 11.23, group method 2 has a mean rank of 29.83 and group method 3 has an mean rank of 50.45. Meanwhile, the Kruskal-Wallis value was 50.674 with p=0.000. So that the hypothetical decision obtained means that there are differences in credential assessment with method 1, method 2 and method 3.

## DISCUSSION

The majority of respondents were aged 26 – 30 years, accounting 56.7%. The age of the population in Indonesia is categorized into 3 (three) groups, age less than 15 years (young age), age 15 – 64 years (productive age) and age >65 years (non-productive age) (Kementerian Kesehatan RI, 2018). According to Badan Pusat Statistik, (2022) the population aged 15 – 64 years are productive age population group. Meanwhile, according to William H. Frey in Badan Pusat Statistik, (2022) respondents were divided into 2 groups, namely Generation Z (born in 1997-2012) , and Generation Large areas can also be a large resource for producing workers, business actors and consumers who have a large role in accelerating

health development (Badan Pusat Statistik, 2022). Individual abilities both cognitively, reasoning, speed and episodic memory reach their maximum peak of ability at the age of 20 - 30 years and will decline significantly before the age of 50 years, this decline will be even greater after that (Skirbekk, 2004). As an individual ages, physical decline will also be accompanied by a decrease in muscle strength, visual acuity, and organ function (lungs, kidneys and liver) (Börsch-Supan & Weiss, 2016). Employees who are older or too young have a higher risk of experiencing work-related mental stress or helplessness than older workers (Setiadi dkk., 2020). Hospitals have the potential to gain large benefits in terms of improving patient services based on quality and patient safety. All Respondents are included in the productive age population category so they are very influential in producing quality nursing services, so that hospitals can take advantage to encourage improvements in the quality of hospital services as a whole.

According to William H. Frey in Badan Pusat Statistik, (2022), the population is divided into 6 age groups: Post Generation Z (born from 2013 onwards), Generation Z (born from 1997-2012), Generation Y (Millennials) (born from 1981-1996), Generation X (born from 1965-1980), Baby Boomer Generation (born from 1946-1964), and Pre-Boomer Generation (born before 1945). The majority of Indonesia's productive-age population in 2020 belonged to Generation Y (37.23%), followed by Generation X (30.21%), then Generation Z (21.62%), and the least was the Baby Boomer Generation (10.94%) (Badan Pusat Statistik, 2022). According to these categories, the respondents in this study are divided into 2 groups: Generation Z and Generation X, and all respondents belong to the productive-age population. A large productive-age population can be a significant resource for generating the workforce, entrepreneurs, and consumers who play a major role in accelerating health development (Badan Pusat Statistik, 2022). Hospitals have the potential to benefit greatly from improving patient services based on patient quality and safety. All respondents belong to the productive-age population category thus they have a significant impact on producing quality nursing services. Therefore, hospitals can take advantage of this to promote overall improvement in hospital service quality.

The majority of respondents were female (66.7%). Indonesian population data for 2023 shows that the number of men is 50.08% and women are 49.92% (Badan Pusat Statistik, 2022). Gender categorization is used as biological self-identity. The existence of gender differences in nurses does not have a direct relationship with nurse performance, because nurses must work according to professionalism which cannot be based on a particular gender. (Soeprodjo dkk., 2017). Gender differences do not directly affect productivity, but women's extrinsic motivation is higher than men's, so this can create motivation for better performance (Martyastuti dkk., 2023). In other research shows that gender has an influence on nurse performance, in this case female nurses feel more mental decline when they are faced with greater demands in providing patient services. (Walangara dkk., 2022). Badan Pusat Statistik, (2022) noted that the older the generation, the female population has higher productivity than male.

Nurses with D3 Nursing education still dominate the population of nurses at PKU Muhammadiyah Sampangan Hospital, namely 71.1%. This data is in line with data from the Ministry of Health in 2017, that 10.84% of nurses had nurse education, 77.56% had D3 and Bachelor of Nursing education and 5.17% had SPK education and 6.42% had specialist nurses (Kementerian Kesehatan RI, 2017). In the report *The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity (2021)* , in 2019 there were 3,352,461 nurses in the world and around 37.7% had a Diploma III education level or equivalent, then 32.7% had a

bachelor's degree. , and 10.8% held a Master's degree (Hassmiller & Wakefield, 2022). Education level is one of the variables that can influence nurse performance, nurses with higher education have better performance (Due, 2017). The higher the level of education, the nurse will be able to think more critically, be more mature in logic and have better systematic thinking, this can improve the quality of a nurse's performance. Likewise, a nurse will think more critically and work more professionally than a D3 Nursing graduate (Martyastuti dkk., 2023). This is because nurses will have wider autonomy in providing care, because they have better cognitive abilities and critical thinking (Walangara dkk., 2022). Most of the nurses at PKU Muhammadiyah Sampangan Hospital have D3 Nursing education, so it is necessary to improve the quality of nurses to realize the professionalism of nurses in providing nursing care.

As much as 63.3% received a Good OPPE score, with an average score of 81.87. OPPE assessment has become the standard in evaluating the performance of nurses at RS PKU Muhammadiyah Sampangan, thus, generally, the performance of nurses in the hospital is good. The parameters used in OPPE include three aspects: the competency aspect consisting of nurse competence in providing nursing care to patients, then the general aspect consisting of communication, work attitude, and discipline, and the third aspect is complaints, consisting of complaints from customers or if there is an increasing number of complaints directed at the respective nurse, it will further reduce the score obtained.

*Ongoing* Professional Practice Evaluation (OPPE) is a summary of ongoing data collected to assess a practitioner's clinical competency and professional behavior. This information is taken into account to make decisions in maintaining, revising, or revoking *clinical privileges* whether newly requested or previously existing (Holley, 2016). The OPPE assessment includes 6 (six) core competencies that must be present, namely (1) patient care; (2) medical knowledge; (3) practice-based learning and improvement; (4) interpersonal communication; (5) professionalism; and (6) systems-based practice (Holley, 2016). So that OPPE can become one of the standards for evaluating nursing professional performance on an ongoing basis.
The average ranking value of each group also shows that respondents who were credentialed using method 3 (portfolio, interview, written test and practice) got higher scores, while the Kruskall Walis test showed differences in OPPE scores in third group credentials Which different that is method 1, method 2 and method 3. These results show that the more credential methods used, the better the OPPE value.

Other facts show that the increase in nurses' grades after credentialing is higher compared to before credentialing, because redentialing can increase work motivation and moderate the influence of nurses' work motivation which will then influence the nurse's performance (Sugiarta dkk., 2022). A credential process carried out in a structured manner can provide an overview of the quality and quality of nursing services because credentials include knowledge, skills, performance, attitudes and values that can be accepted by society, so that credentials become one way to improve the quality and maintain standards of nursing care services (Hariyati dkk., 2018; Idhan dkk., 2022). Thus, the credentialing method has a vital role in improving the performance of nurses and is one of the management strategies for improving performance and maintaining the quality of nursing services in hospitals.

The credential requires nurses to master the concept of comprehensive care practices starting from knowledge, skills, performance, attitude and values which are claimed to be in accordance with the holistic concept and can be accepted by society and can be developed into a competency standard (Yanhua & Watson, 2011). A nurse's clinical performance

increases significantly after credentialing, where credentialing assesses the nurse's professionalism so that it helps the nurse feel confident in improving their professionalism climate (Setiawan dkk., 2021). Credentials are carried out to assess the competency of nurses in providing patient care and competency has a significant influence on the performance and work motivation of nurses in hospitals (Laksana & Mayasari, 2021). If nurses can demonstrate good knowledge, attitudes and skills at work, it will be easy to assess patients, make diagnoses, make plans, implement plans and evaluate each of their duties and functions as a nurse, so that credentials are considered as one way to improve quality. and maintaining standards of nursing care services.

Credentialing is carried out by conducting a portfolio examination, interviews with nurses, and giving written and practical exams. A portfolio is a nurse's self-description, not only limited to a curriculum vitae, but also describes aspects of competence, expertise to achievement. Portfolio assessment can provide an overview of strategies for increasing knowledge and skills in certain competencies by planning employee development (Veriana, 2018). Completeness of the portfolio document includes (1) resume and personal description and espoused values in the profession as well as professional development plans ; (2) Registration Certificate (STR) and Nursing Practice Permit (SIPP); (3) CPD certificate in the form of a seminar / workshops / training / education / study ; (4) performance ; (5) participation in professional activities /scientific activities, (6) recommendations and evaluation from the preceptor ; and (7) health certificate (Hariyati dkk., 2018). By using a portfolio assessment nurses can see growth and development of capabilities over time based on feeds back and self-reflection.

Interviews allow leaders or evaluators to communicate directly with the person being evaluated, providing a space for open dialogue and mutual understanding. Interviews are also used to display employee preferences in working conditions, work motivation, social situations, ways of working and also attitudes towards work (Baroroh dkk., 2023). Interviews can also open up opportunities to identify development needs and design a more focused development plan (Molloy dkk., 2020). Thus, interviews are seen as an effort to involve employees in the evaluation process which can increase motivation and commitment and accelerate professional growth.

The written test method is used to measure the knowledge/cognitive aspect of the competency aspect. In the written test there are 2 (two) forms of questions, namely a description or essay test and an objective test. Objective tests can be divided into three, namely true-false tests, matching test items, and multiple choice test items. (Inana dkk., 2021) The nurse credentialing method at PKU Muhammadiyah Sampangan Hospital uses questions with multiple choice answers. This multiple choice question method has the advantage that the time required to complete the questions is relatively short, so that a large number of questions can be made. A test with many questions will tend to be more reliable, scoring can be done easily and assessment can be more objective (Inana dkk., 2021). This allows nurses who are credentialed with a written test to prepare themselves by studying first.

Practice tests or action tests are tests that require answers in the form of behavior, actions or deeds under the supervision of an examiner who will observe and make decisions about the quality of the learning outcomes displayed (Asrul dkk., 2014). Participants do as they are told. Action tests are used to assess the ability to plan, accuracy, speed and quality of work (Asrul dkk., 2014). The nurse will carry out nursing actions that have been ordered by the assessor. This assessment is suitable for assessing the achievement of competencies that require nurses

to perform work. His credentials includes assessing available resources and specific patient needs, as well as improving capacity and self-management. So credential effective in improving nurses' clinical competence, professional competence and general competence that can be used in nursing services. The credentialing process can be used to improve the quality of nursing services based on increasing nurse competency so that it can have an impact on customer satisfaction.

## CONCLUSION

This research shows that the majority of respondents are aged 26 - 30 years, there are more female respondents than male, while those with a D3 Nursing education still dominate the respondents' education. The most OPPE score is Good. There are differences in OPPE values third group credentials method 1, method 2 and method 3. The more credential methods used, the better the OPPE value.

## REFERENCES

Agusnita, R., Hartono, B., Hamid, A., Ismainar, H., & Lita, L. (2022). Analisis Peran Komite Keperawatan dalam Implementasi Kredensial Tenaga Keperawatan di RSUD Kota Dumai. *Jurnal Ilmiah Universitas Batanghari Jambi*, *22*(3), 1768–1774. https://doi.org/10.33087/JIUBJ.V22I3.2956

Asrul, Drs. , M. Si., Ananda, R. M. Pd., & Rosnita, Drs. MA. (2014). *EVALUASI PEMBELAJARAN*. Citapustaka Media.

Badan Pusat Statistik. (2022). Analisis Profil Penduduk Indonesia: Mendeskripsikan Peran Penduduk dalam Pembangunan. Dalam *Badan Pusat Statistik*.

Baroroh, I., Oktaviya, A. S., Rahmadani, F. E. N., & Larassaty, A. L. (2023). Pengaruh Penilaian Kerja Terhadap Kinerja Karyawan Melalui Pengembangan Karir Karyawan. *Journal of Student Research*, *1*(2). https://doi.org/10.55606/jsr.v1i2.1082

Börsch-Supan, A., & Weiss, M. (2016). Productivity and age: Evidence from work teams at the assembly line. *Journal of the Economics of Ageing*, *7*. https://doi.org/10.1016/j.jeoa.2015.12.001

Due, Y. M. B. M. (2017). *Pengaruh Tingkat Pendidikan, Masa Kerja, dan Perencanaan Sumber Daya Manusia Terhadap Kinerja Perawat Pengelola Perkesmas di Puskesmas Kecamatan Bajawa Kabupaten Ngada Tahun 2016*.

Fatikhah. (2019). Studi fenomenologi peningkatan profesional keperawatan melalui kredensial di RSUD Tugurejo Semarang. *The 9th University Research Colloqium 2019 Universitas Muhammadiyah Purworejo*, *49*.

Hariyati, Rr. T. S., Sutoto, null, & Irawati, D. (2018). *Kredensial & rekredensial keperawatan*. Komisi Akreditasi Rumah Sakit. https://scholar.ui.ac.id/en/publications/kredensial-amp-rekredensial-keperawatan

Hassmiller, S. B., & Wakefield, M. K. (2022). The Future of Nursing 2020–2030: Charting a path to achieve health equity. *Nursing Outlook*, *70*(6). https://doi.org/10.1016/j.outlook.2022.05.013

Holley, S. L. (2016). Ongoing Professional Performance Evaluation: Advanced Practice Registered Nurse Practice Competency Assessment. *The Journal for Nurse Practitioners*, *12*(2), 67–74. https://doi.org/10.1016/J.NURPRA.2015.08.037

Idhan, M., Ayu Erika, K., Tahir Program Studi Magister Ilmu Keperawatan, T., Hasanuddin Makassar, U., Makassar, K., & Selatan, S. (2022). Kredensial terhadap Peningkatan Mutu Layanan Keperawatan: An Integrative Review. *Jurnal Keperawatan*, *14*(4), 1165–1174. https://doi.org/10.32583/KEPERAWATAN.V14I4.526

Inana, Dr. , S. Pd. , M. Pd., Rahmatullah, Dr. , S. Pd. , M. E., & Muhammad, H. Dr. , S. Pd. , M. Pd. (2021). *EVALUASI PEMBELAJARAN: Teori dan Praktek*. Tahta Media Group.

Kemenkes RI. (2017). Peraturan Menteri Kesehatan Republik Indonesia Nomor 40 Tahun 2017 Tentang Pengembangan Jenjang Karir Profesional Perawat Klinis. Dalam *Kemenkes RI* (Vol. 21, Nomor 2).

Kementerian Kesehatan RI. (2017). Situasi Tenaga Keperawatan Indonesia. Dalam *Pusat Data dan Informasi Kementerian Kesehatan RI*.

Kementerian Kesehatan RI. (2018). *PROFIL KESEHATAN INDONESIA TAHUN 2017* (R. Dr. M. K. Kurniawan, S. M. S. Yudianto, B. S. S. M. Hardhana, & T. S. M. K. Siswanti, Ed.). Jakarta: Kementerian Kesehatan RI.

Laksana, D. I. G., & Mayasari, A. N. M. D. (2021). Pengaruh Kompetensi Dan Stres Kerja Terhadap Kinerja Perawat Di Rumah Sakit Jiwa Provinsi Bali. *Bisma: Jurnal Manajemen*, *7*(2). https://doi.org/10.23887/bjm.v7i2.31930

Markus, S. N., & Landowero, E. K. (2020). Pelaksanaan Kredensial Profesi PMIK dalam Rangka Meningkatkan Mutu Layanan di RSU Bintuni Papua Barat. *SEMINAR NASIONAL REKAM MEDIS & INFORMASI KESEHATAN Standar Akreditasi Rumah Sakit (SNARS) Edisi 1 Terkait Rekam Medis PELAKSANAAN*, *1*.

Martyastuti, N. E., Rusdi, R., & Indriono, A. (2023). Analisis Pengaruh Faktor Individu dan Faktor Psikologis terhadap Peningkatan Mutu dan Keselamatan Pasien pada Era Kebiasaan Baru di RSUD X. *Jurnal Penelitian Perawat Profesional*, *5*(1), 347–354. https://doi.org/10.37287/JPPP.V5I1.1366

Molloy, E., Boud, D., & Henderson, M. (2020). Developing a learning-centred framework for feedback literacy. *Assessment & Evaluation in Higher Education*, *45*(4), 527–540. https://doi.org/10.1080/02602938.2019.1667955

Setiadi, P. B., Ursula, R., Rismawati, R., & Setini, M. (2020). Labour Productivity, Work Experience, Age and Education: The Case of Lurik Weaving Industry in Klaten, Indonesia. *Webology*, *17*(2). https://doi.org/10.14704/WEB/V17I2/WEB17047

Setiawan, A., Dewi Rahmayanti, S., Suryati, Y., Tinggi Ilmu Kesehatan Sukabumi, S., Kemenkes Bandung, P., & Jenderal Achmad Yani Cimahi, Stik. (2021). PENGARUH KREDENSIAL TERHADAP KINERJA PERAWAT DI RSUD R SYAMSUDIN, SH KOTA SUKABUMI. *Jurnal Health Society*, *10*(1). https://ojs.stikesmi.ac.id/index.php/ojs/article/view/23

Sjarqiah, U. dr. Sp. KFR. M. (2022). *Instrumen Akreditasi Rumah Sakit* (Edisi 1: Juni 2022). Lembaga Akreditasi Rumah Sakit Indonesia (LARSI): Jakarta. http://www.larsi.id

Skirbekk, V. (2004). Age and Individual Productivity: A Literature Survey. *Vienna Yearbook of Population Research*, *1*(2004). https://doi.org/10.1553/populationyearbook2004s133

Soeprodjo, R. O. K., Mandagi, C. K. F., & Engkeng, S. (2017). Hubungan Antara Jenis Kelamin Dan Motivasi Kerja Dengan Kinerja Perawat Di Rumah Sakit Jiwa Prof. Dr. V. L. Ratumbuysang Provinsi Sulawesi Utara. *Kesmas*, *6*(4).

Sugiarta, R. D., Arofiati, F., & Rosa, E. M. (2022). The Effect of Motivation on Nurse Performance in Moderation with Nurse Credentials at PKU Muhammadiyah Kutowinangun Hospital in the Covid-19 Pandemic Era. *Eduvest - Journal of Universal Studies*, *2*(9), 1728–1741. https://doi.org/10.59188/EDUVEST.V2I9.578

Sugiyono. (2018). *Metode penelitian kuantitatif, kualitatif dan kombinasi (mixed methods)*. Alfabeta, Bandung.

Veriana, C. M. (2018). *Pengembangan Penilaian Portofolio dalam Jabatan Fungsional Perawat di Rumah Sakit USU Medan*. https://repositori.usu.ac.id/handle/123456789/12311

Walangara, H. U. K., Widuri, & Devianto, A. (2022). Pengaruh Karakteristik Individu Terhadap Kinerja Perawat di Rumah Sakit: Studi Literatur. *Jurnal Keperawatan*, *14*(2).

Woran, I. L., Tucunan, A. A. T., & Maramis, F. R. R. (2018). Hubungan Antara Supervisi dan Keamanan Kerja Dengan Kinerja Perawat di Ruang Rawat Inap RSUD Noongan. *Jurnal Kesehatan Masyarakat*, *7*(5).

Yanhua, C., & Watson, R. (2011). A review of clinical competence assessment in nursing. *Nurse Education Today*, *31*(8). https://doi.org/10.1016/j.nedt.2011.05.003.