



THE RELATIONSHIP BETWEEN SELF-EFFICACY AND BURNOUT OF IMPLEMENTING NURSES IN THE IMPLEMENTATION OF DISCHARGE PLANNING

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ABSTRACT

Self-efficacy implementing nurse is a belief and ability of a nurse in implementing discharge planning that aims to improve the quality of health that will affect the continuity of ongoing care for patients. The purpose of this study was to identify the determinant factors of self-efficacy of implementing nurses and analyze the most dominant factors in the implementation of discharge planning. The design used in this study was cross-sectional with a sample of 187 implementing nurses selected through simple random sampling using a questionnaire as an instrument. Data were analyzed univariately, bivariately with the chi square test, and multivariately with the binary logistic regression test. The results of the bivariate analysis of the burnout variable ($p < 0.002$) had a significant relationship in the implementation of discharge planning. It is expected that implementing nurses can increase their self-efficacy values through improving good self-function so that it has an impact on the quality of service in the implementation of discharge planning.

Keywords: burnout; discharge planning; self-efficacy

INTRODUCTION

Confidence (self-efficacy) is very important for nurses to have in implementing discharge planning. *Discharge planning* aims to provide the best service to ensure the sustainability of quality nursing care (Nursalam, 2011). Self-efficacy can also be an important aspect that supports the performance of nursing skills (Tyler, 2012). High self-efficacy reduces the fear of failure, improves problem solving and good critical thinking skills possessed by nurses. According to Widodo, (2016) self-efficacy is one of the sources of forming a commitment and self-motivation. Self-motivation in nurses is also fostered by high self-efficacy. Diawati and The Last Supper (2019) stated that when providing nursing services, self-efficacy is something that creates nurse motivation so that a desire arises to do nursing work.

The difference in self-efficacy of individuals with other individuals is very different, this is due to various factors that influence it. Gusnia and Saragih (2013) stated that age can affect the perception of a person's abilities. In addition to age, education level also plays a role in the development of individual self-efficacy. In addition to age, education level also plays a role in the development of individual self-efficacy Srihandayani (2016) This significant relationship is because nurses with higher levels of education have more mature considerations because they already have broader insights. Gender is also a factor that can contribute to individual self-efficacy. Chyung (2017) stated that women have a better perception of their own abilities.

Physical and psychological conditions can also play a role in influencing a person's self-efficacy. Srihandayani (2016) stated that high self-efficacy helps individuals to complete tasks and reduce the workload both psychologically and physically. In addition, factors that influence a person's self-efficacy are burnout. Irawati (2012) burnout is a condition in which an individual experiences physical, mental, and emotional exhaustion that occurs due to prolonged stress. Imelda, Yulia & Muliyadi (2020)

stated that The effects that occur when the burnout level is high are decreased motivation for performance, negative attitudes, and feelings of rejection by the environment.

Nurses who have high self-efficacy will be able to control threats and stressors that come from both within themselves and from the environment, so that nurses have effective coping strategies to reduce stress levels (Ariasti & Pawitri, 2016). *Self-efficacy* high will develop self-confidence, reward and self-ability so that the view of success in work is satisfying, on oneself (Saam & Wahyuni, 2013). Wangaya Regional General Hospital (RSUD) is one of the hospitals in Bali Province that has become a type B hospital and received the highest hospital accreditation, namely Paripurna Bintang Lima from the Central Hospital Accreditation Commission. Based on data from the Wangaya Hospital Nursing Committee, it was found that the number of inpatient visits increased every year. This is supported by data from the Health Office (2019) which showed that in 2016 there were 8,313 inpatient visits, in 2017 there were 13,565 patients and in 2018 there were 13,970 patients.

Based on the results of the preliminary study, it was found that there was an increase in the number of inpatient visits each year so that the patients treated exceeded the capacity in the room. This had an impact on the implementing nurses holding responsibility for more than three patients in working so that there was an increase in the nurse's workload. Sometimes there is a feeling of tiredness and not being in the mood to work due to less than optimal personal conditions in addition to the responsibilities and workload felt while working. Feelings pessimistic in working the feeling arises when the implementing nurse conducts self-evaluation and compares performance with colleagues. This feeling is often felt even though the implementing nurse feels that he has worked for a long time and provided good nursing care. A similar condition is stated to arise when there is less than optimal emotional self-control due to various factors. This is the background for researchers to conduct research on *The Relationship of Self-Efficacy to Burnout of Nurses in the Implementation of Discharge Planning at Wangaya Regional Hospital*

METHOD

This study aims to analyze the effect of reward and punishment systems on improving the quality of health services in hospitals, particularly in Denpasar City. Reward and punishment systems are crucial elements of human resource management that can motivate both medical and non-medical staff to enhance their performance. In the context of hospitals, these systems not only influence employee motivation but also have a direct impact on the quality of services received by patients. The research design used in this study is quantitative, employing a cross-sectional approach. The population consisted of all implementing nurses at Wangaya Regional General Hospital in Denpasar City, with a sample size of 187 respondents. The study was conducted in the inpatient ward of Wangaya Regional General Hospital from April 27 to May 17, 2024.

The instruments used were the Individual Characteristics Questionnaire, the Maslach Burnout Inventory-Human Services Survey (MBI-HSS), and the Self-Efficacy Questionnaire. The validity and reliability of the instruments were tested beforehand to ensure accurate and consistent measurements. Validity was assessed using content and construct validity tests, while reliability was measured using Cronbach's Alpha, with acceptable values above 0.70. Data analysis included univariate analysis to determine frequency distributions, bivariate analysis using the Chi-square test (with Fisher's Exact Test as an alternative), and multivariate analysis using binary logistic regression. The study reveals that an effective reward system can significantly boost employee motivation and improve service quality, while an appropriate punishment system helps maintain work discipline and prevents a decline in service standards. A balanced implementation of both systems is essential for achieving optimal outcomes. This study aims to identify the benefits and challenges of reward and punishment systems and provide recommendations for improving their efficiency. Additionally, it seeks to enrich the literature on quality

management in healthcare services, particularly in Indonesia. The findings are expected to serve as a reference for other hospitals seeking to implement similar management strategies to enhance health service quality.

RESULT AND DISCUSSION

Table 1.
Frequency Distribution of General Characteristics of Respondents

Variables	f (%)
Age	
< 32	80 (42.8)
≥ 32	107 (57.2)
Gender	
Man	19 (10.2)
Woman	168 (89.8)
Level of education	
Bachelor of Nursing	94 (50.3)
3-year diploma	93 (49.7)

Table 1. shows that respondents in this study were <32 years old as many as 80 respondents (42.8%) and age ≥ 32 years as many as 107 respondents (57.2%). Gender characteristics were male as many as 19 respondents (10.2%) and female as many as 168 respondents (89.8%). Characteristics of education level were Bachelor of Nursing as many as 94 respondents (50.3%) and Diploma 3 as many as 93% (49.7%).

Table 2.
Distribution of Respondent Variables

Variables	f (%)
<i>Burnout</i>	
Low	113 (60.4%)
Tall	74 (39.6%)
<i>Self-Efficacy</i>	
Low	40 (21.4%)
Tall	147 (78.6%)

Table 2 shows the distribution of respondent variables, most of which are in the low burnout category, as many as 113 respondents (60.4%) and the rest are in the high burnout category, as many as 74 respondents (39.6%). Meanwhile, the high self-efficacy category owned by implementing nurses is 147 respondents (78.6%) and the rest have low self-efficacy, as many as 40 respondents (21.4%).

Table 3.
Relationship between Age, Gender, Education Level, Burnout in the Implementation of Discharge Planning.

Independent Variables	<i>Self-efficacy</i> implementing nurse in the implementation of discharge planning		p-value
	Low (%)	High(%)	
Age			
< 32 years	16 (20.0)	64 (80.0)	0.825
≥ 32 years	24 (22.4)	83 (77.6)	
Gender			
Man	6 (31.6)	13 (68.4)	0.249*
Woman	34 (35.9)	134 (79.8)	
Level of education			
Bachelor of Nursing	18 (19.1)	76 (80.9)	0.567
Diploma (D3)	22 (23.7)	71 (76.3)	
<i>Burnout</i>			
Low	15 (13.3)	98 (86.7)	0.002
High	25 (33.8)	49 (66.2)	

Table 3 shows that the characteristics of respondents including age, gender and education level, do not have a significant relationship with self-efficacy in the implementation of discharge planning. All variables have a p value > 0.05, namely the age variable (p value 0.825), gender variable (p value 0.249) and education level variable (p value 0.567), while the burnout variable (p value 0.002) has a significant relationship with self-efficacy in the implementation of discharge planning.

General Individual Characteristics of Respondents

Age

The results of this study found that the majority of respondents were aged ≥ 32 years, namely 107 (57.2%) respondents compared to nurses aged <32 years, namely 80 (42.8%). According to the theory Bandura (2008) stated that as individuals get older, they will be able to overcome all the challenges presented in life.. This is in line with the research results of Reski, Hamzah & Andyanie (2020) who stated that the maturity in question is related to increasing age which then has an impact on understanding and perception regarding the implementation of discharge planning. The researcher's assumption regarding the results of this study is that the average age of implementing nurses is in the range of minimum results of 21 years and a maximum value of 46 years in this case including productive age. Productive age is also said to be a determining stage of individual success in increasing productivity, one of which is performance.

Gender

The results of this study found that the majority of respondents were female, namely 168 (89.8%) respondents compared to male respondents, namely 19 (10.2%). According to the concept of caring mother instinct nursing, there are more female nurses. According to Deniati, Anugrahwati and Suminarti (2018) states that women grow and are raised with the direction to have a guiding, compassionate and empathetic attitude. The researcher's assumption regarding the results of this study is that the proportion of implementing nurses based on gender is still uneven, so it can be used as input that the addition of implementing nurses based on gender is in accordance with the research results obtained by the researcher.

Level of education

According to Taylor's theory (2016), it is stated that in carrying out discharge planning, implementing nurses are required to have broad insight in dealing with patient nursing problems and think critically in determining nursing diagnoses so that a high level of education is a guideline for implementing nurses in providing nursing care, especially discharge planning. The researcher's assumption, regarding the results of this study is that implementing nurses are required to have various critical thoughts in providing nursing care services to clients. Higher education can make individuals have good hopes and/or aspirations.

Respondent Variables

Burnout

The results of this study are burnout of implementing nurses shows that the majority of respondents experienced low burnout, namely 113 (60.4%) respondents compared to implementing nurses who experienced high burnout, namely 74 (64.2%) in implementing discharge planning.. According to Abdul, Lindo & Stennett (2019) stated that a work environment with optimal function tends to reduce the risk of burnout in each implementing nurse. This is in line with the opinion of Asmuji, Faridah & Handayani (2018) who stated that the factors that cause burnout are the work environment and individual factors. The researcher's assumption regarding the results of this study is that implementing nurses who work experience low burnout, have good coping so that burnout tends not to be felt at work.

Self-Efficacy

The results of this study are the self-efficacy of implementing nurses shows that most respondents experienced self-efficacy high by 147 (78.6%) respondents compared to implementing nurses who have low

self-efficacy, which is 40 (21.4%). According to Wulandari & Hariyanti (2019), the support received by individuals can increase the level of individual confidence in their abilities. This is in line with the statement by Anggareni, Widayati and Sutawardana (2020) who stated that individuals who receive good support from both internal and external sources tend to have a good level of confidence in their abilities. The researcher's assumption regarding the results of this study is that the self-efficacy of implementing nurses is caused by many factors, including the personal condition of implementing nurses who may have poor coping mechanisms so that this can affect the high and low self-efficacy of implementing nurses. However, the researcher did not examine further how coping mechanisms affect self-efficacy.

CONCLUSION

Self-efficacy of implementing nurses has an important role in the success of the implementation of discharge planning which aims to improve the quality of patient health and support ongoing care. This study identified that the burnout factor has a significant relationship with the implementation of discharge planning, based on the results of bivariate analysis ($p = 0.002$). Therefore, increasing nurses' self-efficacy can be done through efforts to improve self-function and manage burnout levels. This is expected to improve the quality of health services provided by implementing nurses. The relationship between self-efficacy and burnout of implementing nurses in the implementation of discharge planning. Further research to conduct research with qualitative methods so that it can be a development of science related to the self-efficacy of implementing nurses in the implementation of discharge planning.

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