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The Influence of Leadership Style, Workload, Job Promotion, Job Placement, and Merit System on the PRIMA Service Excellence Culture of Staff Nurses at Bhakti Husada General Hospital, Banyuwangi

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Abstract: Healthcare organizations increasingly recognize that a robust service excellence culture is central to sustaining patient care quality. At Bhakti Husada General Hospital, Banyuwangi, service excellence is operationalized through the PRIMA framework — Professionalism, Respect, Innovativeness, Morality, and Accountability. Despite its formal declaration, a gap exists between the institutional values and actual nursing practice, as evidenced by 12 documented patient complaints in 2023 related to deficiencies in communication and professional conduct. The research gap is the absence of an integrative empirical model simultaneously examining leadership style, workload, job promotion, job placement, and the merit system as determinants of PRIMA organizational culture in a regional hospital context. This study aimed to analyze the simultaneous and partial effects of these five managerial variables on PRIMA service excellence culture. A cross-sectional quantitative design was employed, with data collected from 61 staff nurses through total sampling and analyzed using multiple linear regression with SPSS. The results demonstrated a significant simultaneous effect ($F = 22.77$; $p < 0.05$; $R^2 = 0.674$). Partially, leadership style ($p = 0.043$), job promotion ($p = 0.042$), job placement ($p < 0.001$), and merit system ($p < 0.001$) showed significant positive effects, while workload was non-significant ($p = 0.995$). The novelty lies in integrating five managerial predictors into a single simultaneous model examining nurses' perceptions of PRIMA service excellence culture within a hospital setting. Whereas prior studies have tested these predictors separately or in pairs against individual-level outcomes such as job satisfaction or performance (e.g., Cummings et al., 2021; Rahmani et al., 2024; Suwignyo et al., 2022), this study examines these managerial factors jointly within a hospital-specific, multidimensional service excellence framework, thereby providing evidence on their combined explanatory contribution within the study context.

Keywords: PRIMA Organizational Culture, Leadership Style, Workload, Job Promotion, Job Placement, Merit System

INTRODUCTION

The global healthcare landscape faces mounting pressure to deliver consistent, patient-centered care in alignment with the Sustainable Development Goals (SDGs) 2030, particularly Goal 3 on ensuring healthy lives and promoting well-being for all. The World Health Organization (WHO, 2023) reports that approximately 40% of patients in low- and middle-income countries experience harm due to unsafe care, with more than 80% of adverse events attributable to failures in communication, care coordination, and inconsistent adherence to service standards at the operational level. In Indonesia, the implementation of the National Health Insurance (Jaminan Kesehatan Nasional/JKN) program by BPJS Kesehatan since 2014 has markedly expanded patient volume, with membership reaching over 267 million individuals — approximately 97% of the total population — by 2023 (BPJS Kesehatan, 2023). This massive demand places significant strain on nursing human resources as the frontline providers of direct patient care.

National patient satisfaction surveys conducted by the Indonesian Ministry of Health in 2022 indicate that the mean national patient satisfaction index across hospitals remained at approximately 75.3% (Kemenkes RI, 2022), which is considerably below the internationally accepted benchmark of 85%. This shortfall underscores that service excellence culture in many Indonesian hospitals has yet to be consistently implemented. At Bhakti Husada General Hospital (RSU Bhakti Husada) in Banyuwangi, a regional referral hospital serving a population exceeding 1.6 million, the hospital has formally adopted the PRIMA framework as its organizational culture, comprising five core dimensions: Professionalism, Respect, Innovativeness, Morality, and Accountability. Despite this institutional declaration, data from the hospital's Internal Quality Audit in 2023 documented 12 patient complaints directly linked to failures in PRIMA implementation, predominantly concerning deficiencies in effective nurse–patient communication and inconsistent application of the smile, greeting, and salutation (3S) professional conduct standard — both constituting the Respect and Morality dimensions of the PRIMA framework.

Existing literature reveals a significant theoretical gap. While individual studies have examined the influence of leadership style (Cummings et al., 2021; Jimenez-Caceres, 2025), workload (Susilawati et al., 2023; Puspitasari et al., 2022), job promotion (Kallio et al., 2024; Roza et al., 2022), job placement (Rahmani et al., 2024; Wong et al., 2021), and merit systems (Sikander & Batool, 2021; Suwignyo et al., 2022) on individual performance or job satisfaction as dependent variables, limited empirical research has examined leadership style, workload, job promotion, job placement, and merit systems simultaneously in relation to a hospital-specific service excellence culture framework. The predominant limitation in the existing literature is that variables are examined in isolation or in pairs, failing to capture their combined explanatory power and relative contributions in shaping a shared organizational culture of service excellence (Wardhani, 2023; Tukan, 2022).

The research gap addressed in this study is therefore twofold. First, there is a theoretical gap: no integrative empirical model has been developed to simultaneously test the combined influence of leadership style, workload, job promotion, job placement, and merit system on PRIMA service excellence culture as a collective, strategic dependent construct. Second, there is a contextual gap: no study has examined this integrative model specifically in a regional general hospital (*rumah sakit umum daerah*) in Banyuwangi, which has distinct demographic, organizational, and managerial characteristics compared to hospitals in major urban centers. The novelty (state of the art) of this research lies in three dimensions, each defined in explicit contrast to the existing body of work. First, previous studies have generally examined leadership, workload, career-related factors, job placement, and merit systems separately or in more limited combinations. This study extends this literature by examining all five managerial factors simultaneously in relation to nurses' perceptions of PRIMA service excellence culture. The integrated model enables their respective statistical contributions to be assessed within the

same sample and institutional context. Second, unlike prior organizational culture research that relies on generic culture inventories (e.g., Tukan, 2022; Wardhani, 2023), this study operationalizes the PRIMA framework as a measurable, hospital-specific organizational construct, directly grounded in the institutional identity of Bhakti Husada General Hospital, which increases the practical specificity of the findings for managerial application. Third, whereas most antecedent studies rely solely on self-reported survey data, this study anchors its research problem in independently documented patient complaint records as an objective, verifiable indicator of PRIMA culture deviation, strengthening the empirical basis for the identified research gap beyond perception-based measures alone.

Based on the foregoing analysis, the research questions are as follows: Does leadership style of unit heads significantly influence PRIMA service excellence culture? Does workload significantly influence PRIMA service excellence culture? Does job promotion significantly influence PRIMA service excellence culture? Does job placement significantly influence PRIMA service excellence culture? Does the merit system significantly influence PRIMA service excellence culture? And do all five variables simultaneously exert a significant influence on PRIMA service excellence culture among staff nurses at Bhakti Husada General Hospital, Banyuwangi?

METHODS

This study employed a quantitative approach with a cross-sectional research design, which enables data collection at a single point in time across several variables to obtain comprehensive findings (Andal-Saniano et al., 2024). The research was conducted at RSU Bhakti Husada Krikilan, Banyuwangi — one of the regional referral hospitals in Banyuwangi Regency, East Java, Indonesia — over a six-month period from August 2025 to January 2026. This location was selected due to its relevance to the research variables, the availability of supporting data, and the researcher's institutional access.

The population comprised all 61 staff nurses employed at RSU Bhakti Husada Krikilan Banyuwangi. A total sampling (census) technique was applied, wherein all population members meeting the inclusion criteria were recruited as research participants, rather than a probability sampling method. This technique was selected for three reasons. First, the finite population of 61 nurses falls below the threshold at which probability sampling offers meaningful efficiency gains over a census, so surveying the entire population was both feasible and more informative than sampling a subset. Second, total sampling enabled the study to include the entire accessible population meeting the eligibility criteria, thereby minimizing sampling-related limitations within this specific institutional context. Third, given that multiple linear regression with five predictors requires an adequate observations-to-predictor ratio, retaining the full population ($n = 61$) provided the strongest achievable statistical power within a single-hospital design, consistent with recommendations for total sampling in bounded, homogeneous organizational populations (Sugiyono, 2022). Inclusion criteria required nurses to be actively employed at the hospital and willing to participate. Exclusion criteria comprised nurses who were on leave or sick leave during the data collection period and those who declined participation.

Data were collected using a structured Likert-scale questionnaire comprising 60 items organized into six construct scales: Leadership Style (X1, 10 items), Workload (X2, 10 items), Job Promotion (X3, 10 items), Job Placement (X4, 10 items), Merit System (X5, 10 items), and PRIMA Organizational Service Excellence Culture (Y, 10 items). Each item was rated on a five-point scale ranging from Strongly Disagree (1) to Strongly Agree (5). Both positive and negative items were included to minimize acquiescence bias. Prior to full-scale administration, the instrument underwent a pilot test with 30 respondents drawn from a comparable nursing population outside the main study sample, in accordance with standard pretesting procedure for newly adapted Likert-scale instruments. Instrument validity was then tested using Pearson product-moment correlation coefficients, comparing each item's r -count against the r -table

critical value (r -table = 0.252 at $n = 30$, $\alpha = 0.05$); an item was retained only if its r -count exceeded this threshold, indicating that the item score correlated significantly with the total construct score. All 60 items showed item-total correlation coefficients above the specified critical value (range: 0.338–0.870), supporting their retention in the respective scales for the main study. Reliability was subsequently assessed using Cronbach's Alpha internal consistency coefficient, calculated separately for each of the six construct scales; a construct was considered reliable if its alpha exceeded the conventional 0.60 criterion for exploratory social-science research (Sugiyono, 2022). All six constructs exceeded this threshold (range: $\alpha = 0.748$ –0.895), confirming that the instrument produced consistent measurements across items within each construct. Following pilot validation, the finalized instrument was administered to the full study population of 61 nurses.

Classical assumption tests were conducted prior to regression analysis. Normality was assessed using the Kolmogorov-Smirnov test, yielding a significance value of 0.200 ($p > 0.05$), confirming normal residual distribution. Multicollinearity was evaluated via Variance Inflation Factor (VIF) values, all below 10 (range: 1.970–2.436), indicating no problematic multicollinearity. Heteroscedasticity was examined using the Glejser test, with significance values for all predictor variables exceeding 0.05, confirming homoscedasticity.

Data analysis employed multiple linear regression using IBM SPSS Statistics version 25, including the coefficient of determination (R^2), F-test for simultaneous significance, and t-tests for partial significance at a significance threshold of $\alpha = 0.05$. The study adhered to research ethics principles including informed consent, anonymity, and confidentiality of respondent data. Ethical clearance was obtained from the relevant institutional authority prior to data collection.

RESULTS AND DISCUSSION

Respondent Characteristics

Data were collected from 61 staff nurses at RSU Bhakti Husada Krikilan Banyuwangi during November–December 2025. Regarding gender distribution, the majority of respondents were female ($n = 46$; 75%), while male nurses constituted 25% ($n = 15$). In terms of age, 49.1% of respondents were over 45 years old, 34.4% were in the 30–45 age bracket, and 16.3% were under 30. Regarding educational background, 51.7% held a Diploma III (D3) in Nursing, 33.3% held a Bachelor's or Professional Nursing (S1/Ners) degree, and 15.0% held a Master's degree (S2). Concerning length of service, 47.5% ($n = 29$) had worked at the hospital for ten years or more, 36.1% ($n = 22$) for five to ten years, and 16.4% ($n = 10$) for less than five years. This workforce composition — dominated by experienced female nurses with diploma-level education — is characteristic of regional public hospitals in Indonesia and provides contextual grounding for interpreting the study findings.

Classical Assumption Tests

Table 1. Classical Assumption Test Results

Test	Statistic/Value	Result
Normality (Kolmogorov-Smirnov)	Asymp. Sig. = 0.200	Normal ($p > 0.05$)
Multicollinearity – X1 (Leadership Style)	Tolerance = .411; VIF = 2.436	No multicollinearity
Multicollinearity – X2 (Workload)	Tolerance = .444; VIF = 2.254	No multicollinearity
Multicollinearity – X3 (Job Promotion)	Tolerance = .508; VIF = 1.970	No multicollinearity
Multicollinearity – X4 (Job Placement)	Tolerance = .416; VIF = 2.403	No multicollinearity
Multicollinearity – X5 (Merit System)	Tolerance = .426; VIF = 2.345	No multicollinearity
Heteroscedasticity (Glejser)	All Sig. > 0.05	Homoscedastic

Source: Primary data analysis (2026)

All classical assumption conditions were satisfied, confirming the robustness and interpretability of the multiple linear regression model. As an additional robustness check, the Adjusted R^2 (0.645) was compared against the unadjusted R^2 (0.674); the modest gap between the two indicates that the model's explanatory power is not substantially inflated by the number of predictors relative to the sample size, supporting the stability of the reported coefficients. Nonetheless, formal robustness procedures beyond classical assumption testing such as bootstrapped confidence intervals or hierarchical (stepwise) regression comparisons were not performed in this study and are identified as a direction for future validation (see Limitations).

Multiple Linear Regression: Coefficient of Determination and F-Test

Table 2. Coefficient of Determination

Model	R	R Square	Adjusted R Square	Std. Error of Estimate
1	0.821	0.674	0.645	3.257

Source: SPSS Output (2026)

Table 3. F-Test (Simultaneous Significance)

Model	F	Sig.
Regression	22.773	.000

Source: SPSS Output (2026)

The multiple correlation coefficient was $R = 0.821$, while the coefficient of determination was $R^2 = 0.674$. Thus, the five predictors collectively accounted for 67.4% of the variance in PRIMA service excellence culture scores. R-square (R^2) of 0.674 reveals that 67.4% of the variance in PRIMA organizational culture is collectively explained by leadership style, workload, job promotion, job placement, and merit system. The Adjusted R^2 of 0.645 confirms model stability. The F-test yielded $F = 22.77$ with $p < 0.001$, establishing that the five-predictor model is statistically significant and fit, thereby confirming the simultaneous hypothesis.

Partial Effects: T-Test Results

Table 4. T-Test Results (Partial Significance)

Variable	B	Std. Error	Beta	t	Sig.	Decision
(Constant)	6.722	3.949	—	1.702	.094	—
X1 Leadership Style	-.263	.127	.249	2.074	.043	H1 Accepted
X2 Workload	-.001	.117	.001	.006	.995	H2 Rejected
X3 – Job Promotion	.300	.144	.225	2.080	.042	H3 Accepted
X4 – Job Placement	.427	.115	.444	3.722	.000	H4 Accepted
X5 – Merit System	.450	.132	.401	3.400	.001	H5 Accepted

Source: SPSS Output (2026). Dependent Variable: Y (PRIMA Service Excellence Culture)

Discussion

The simultaneous finding ($R^2 = 0.674$, $F = 22.77$, $p < 0.001$) confirms that PRIMA organizational culture is not a product of a single managerial factor but rather the outcome of an integrated configuration of leadership, human resource management, and reward systems. This aligns with organizational culture theory, which views service excellence culture as a collective phenomenon emerging from the interaction of multiple contextual determinants (Kotler & Keller, 2021; Tukan, 2022).

Leadership style ($\beta = 0.263$, $p = 0.043$) exerted a significant positive effect on PRIMA culture. This finding is consistent with transformational leadership theory, which posits that leaders who inspire, empower, and serve as role models for professional values create an organizational climate conducive to the internalization of service excellence norms (Cummings et al., 2021; Boamah et al., 2023). In the context of RSU Bhakti Husada, unit heads who demonstrate communicative, participatory, and ethically-grounded leadership styles catalyze nurses' commitment to PRIMA dimensions, particularly Professionalism and Respect. This extends the findings of Jimenez-Caceres (2025), whose systematic review identified transformational and participatory leadership as consistently associated with positive workplace cultures in nursing settings, and of Hidayat et al. (2024), who demonstrated the influence of leadership on nursing staff productivity at a regional hospital.

Workload ($\beta = 0.001$, $p = 0.995$) was the only variable that failed to demonstrate a significant effect on PRIMA service excellence culture. This non-significant result may be attributed to the relative standardization of workload distribution at RSU Bhakti Husada, where established duty allocation protocols and organizational systems have created a stable working environment. The non-significant association suggests that workload did not independently explain variation in PRIMA service excellence culture within this sample after accounting for the other predictors. The present data do not establish whether this finding reflects workload standardization, professional resilience, or other organizational mechanisms (Sunyoto, 2015). This finding diverges from Puspitasari et al. (2022) and Natasha (2023), who found workload negatively correlated with patient satisfaction and nursing performance, suggesting that context-specific organizational factors may moderate the workload–culture relationship.

Job promotion ($\beta = 0.300$, $p = 0.042$) showed a significant positive effect on PRIMA culture. This finding supports Career Management Theory (Greenhaus et al., 2019) and Expectancy Theory (as cited in Hidayat, 2022), both of which suggest that a fair, merit-based promotion system motivates nurses to sustain high-quality, patient-centered behavior in anticipation of career advancement. The Social Exchange Theory (Blau, 1964, as cited in Goyal et al., 2023) further explains this relationship: promotion signals organizational appreciation for professional dedication, strengthening nurses' affective commitment to institutional values including PRIMA dimensions. The negative standardized beta ($\beta = .225$ unstandardized positive with $t = 2.080$) requires contextual interpretation — in initial analyses, the regression coefficient was positive, while the finding aligns with the promotion system requiring reform to more explicitly embed service excellence indicators (Rivai & Sagala, 2014).

Job placement ($\beta = 0.427$, $p < 0.001$) exerted the second-strongest positive effect on PRIMA culture. This finding is strongly supported by Person-Job Fit Theory (Sikander et al., 2021), Role Theory (Sahay et al., 2022), and Human Capital Theory (Kemenkes RI, 2021). When nurses are assigned to clinical units congruent with their competencies, educational backgrounds, and professional interests, they demonstrate higher task efficiency, reduced role conflict, lower burnout risk, and more empathic patient interactions — all fundamental to PRIMA Professionalism and Respect. This aligns with Rahmani et al. (2024), who confirmed that role clarity amplifies the positive effect of job placement on service excellence in Indonesian teaching hospitals, and with Wong et al. (2021), who found nurse-unit fit positively associated with patient satisfaction in Malaysian public hospitals.

The merit system ($\beta = 0.450$, $p = 0.001$) emerged as the most dominant predictor of PRIMA service excellence culture, carrying the highest unstandardized coefficient among all significant variables. This finding is consistent with performance-based human resource management theory (Dessler, 2020) and four foundational motivational theories: Herzberg's Two-Factor Theory (recognition as an intrinsic motivator for Professionalism and Innovativeness), Equity Theory (fair merit reinforces Morality and Accountability through organizational justice perceptions), Reinforcement Theory (merit-based rewards strengthen empathic communication and disciplined Respect), and Expectancy Theory (merit creates

expectancy-instrumentality linkages that drive sustained high performance) (Gibson et al., 2021; Robbins & Judge, 2022; Mathis & Jackson, 2020). Sikander et al. (2021) reported that merit systems in private hospitals increased job satisfaction by 18% and patient satisfaction by 12%, closely mirroring the direction of the current findings. The primacy of the merit system confirms that a transparent, competency-based, and performance-oriented reward structure is the single most strategic lever for institutionalizing PRIMA culture across the nursing workforce.

Beyond the variable-by-variable interpretation above, the overall pattern of results warrants theoretical synthesis against the recent international literature. The relative ordering of predictors merit system and job placement as the strongest effects, followed by leadership style and job promotion, with workload non-significant mirrors a broader shift documented in recent cross-national nursing research, in which structural and organizational-justice factors (fair reward and person-role fit) increasingly outweigh purely leadership-driven or workload-driven explanations of culture-level outcomes. This pattern is consistent with Ditlopo (2024), whose structural equation model of South African primary care nurses found that practice-environment and support factors exerted stronger effects on job outcomes than workload per se, and with Kiptulon et al. (2024), whose systematic review concluded that organizational-level structural conditions, rather than individual workload alone, are the more consistent predictors of culture-related strain across health systems. Read together with the present findings, this suggests that service excellence culture in resource-constrained regional hospitals is better explained by how fairly and appropriately human resources are managed (through merit and placement systems) than by how heavily staff are loaded, a theoretical nuance that extends organizational culture theory (Kotler & Keller, 2021) toward a more structurally-grounded, HRM-centered model of culture formation in Southeast Asian regional hospital settings specifically, complementing rather than simply replicating findings from higher-resource health systems in East Asia and the Gulf region (Li et al., 2022; Wong et al., 2021).

The novelty of this research is confirmed through three dimensions. First, this study provides the first simultaneous empirical model integrating five managerial variables — leadership style, workload, job promotion, job placement, and merit system — as predictors of PRIMA service excellence culture as a collective organizational construct, rather than individual performance. This integrative approach substantially advances beyond prior research that examined these variables in isolation or in pairs (Wardhani, 2023; Roza et al., 2022). Second, by operationalizing the PRIMA framework (Professional, Respect, Innovative, Morality, Accountability) as the dependent construct, the study generates findings with direct translational relevance for RSU Bhakti Husada's managerial interventions. Third, the grounding of the study in empirical patient complaint data as an objective indicator of PRIMA culture deviation — combined with its execution in the regional hospital setting of Banyuwangi, previously unstudied — positions this research as a context-specific contribution to the hospital management literature.

CONCLUSIONS AND RECOMMENDATIONS

Conclusion

This study demonstrates that leadership style, workload, job promotion, job placement, and merit system simultaneously explain 67.4% of the variance in PRIMA service excellence organizational culture among staff nurses at RSU Bhakti Husada Banyuwangi ($R^2 = 0.674$; $F = 22.77$; $p < 0.001$). Partially, leadership style, job promotion, job placement, and the merit system each exerted statistically significant positive effects, while workload did not. The merit system emerged as the most dominant predictor, followed by job placement, indicating that transparent, performance-based reward structures and competency-aligned placement are the most critical strategic levers for institutionalizing PRIMA service excellence culture. These

findings affirm that service excellence culture is a multi-determined collective organizational outcome, requiring integrated managerial attention rather than isolated interventions.

Limitations

This study has several limitations. The cross-sectional design captures variables at a single time point, limiting causal inference. The single-institution, relatively small sample restricts generalizability to other hospital contexts. Additionally, only five managerial predictors were examined, while factors such as burnout, employee engagement, organizational climate at the director level, and psychological variables likely also influence PRIMA culture. Seasonal fluctuations in workload were not captured within the data collection period. Finally, while classical assumption tests confirmed the statistical adequacy of the regression model, formal robustness checks such as bootstrapped confidence intervals, hierarchical (stepwise) model comparisons, or alternative estimation methods were not performed; future studies should incorporate such procedures to further strengthen the validity of the conclusions drawn from a relatively small, single-site sample.

Recommendations

Hospital management should prioritize the development of clinical leadership capacity among unit heads through competency-based training programs emphasizing effective communication, coaching skills, and PRIMA value modeling, including periodic 360-degree leadership evaluation. A transparent, competency- and performance-based merit system should be formalized and consistently implemented across all nursing units, incorporating PRIMA-aligned Key Performance Indicators (KPIs). A structured, competency-mapped nursing career pathway should be established to align promotion with measurable service excellence contributions. Regular competency assessments and evidence-based placement practices are recommended to minimize nurse-unit mismatch. While workload was non-significant in this study, proactive monitoring of workload distribution is advised to prevent long-term burnout risks. Future research should incorporate longitudinal designs, broader multi-hospital samples, and additional mediating or moderating variables such as organizational commitment, job satisfaction, or employee engagement to develop a more comprehensive model of PRIMA service excellence culture formation.

Author Contributions

All authors made significant contributions to this study, including research conceptualization, theoretical framework development, data collection and analysis, results interpretation, manuscript preparation, scholarly revision, and final manuscript approval. All authors confirm they have read and approved the final version of the article.

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REFERENCES

- Al-Hamdan, Z., Bawadi, H., Nussera, H., Al-Zaru, I., & Badran, E. (2022). The impact of nurse managers' leadership styles on quality of nursing care: A cross-sectional study. *Journal of Nursing Management*, 30(1), 85–94.
- Al-Thawabiya, A., & Al-Momani, M. (2023). Leadership styles and transformational leadership skills among nursing leaders. *Nursing Open*, 10(2), 1158–1167.

- Ali, M., Park, J., & Lee, Y. (2023). Supportive leadership and nurse burnout: The mediating role of work engagement. *International Journal of Environmental Research and Public Health*, 20(7), 5612.
- American Nurses Association (ANA). (2021). Professional pathways and clinical ladder models in nursing practice. ANA Publications.
- Andal-Saniano, A. C., Marquez, M. I., & Medina, H. R. (2024). How to conduct and write a cross-sectional study. *The Filipino Family Physician*, 62(1), 27–36.
- Babamohamadi, H., & Shamsaei, F. (2023). The association between workload and quality of work life of nurses: A cross-sectional study. *BMC Nursing*, 22(1), 132.
- BPJS Kesehatan. (2023). Laporan tahunan BPJS Kesehatan 2023. Badan Penyelenggara Jaminan Sosial Kesehatan.
- Boamah, S. A., Laschinger, H. K. S., & Wong, C. A. (2023). Transformational leadership practices and nurses' job satisfaction: A systematic review update. *BMC Nursing*, 22(1), 97.
- Cummings, G. G., Tate, K., & Lee, S. (2021). Leadership styles and outcome patterns for the nursing workforce and work environment: A systematic review. *International Journal of Nursing Studies*, 115, 103842.
- Dessler, G. (2020). Human resource management (16th ed.). Pearson Education.
- Dewi, I. N., & Handayani, R. (2024). Hubungan antara beban kerja perawat dengan pelaksanaan standar pelayanan keperawatan di rumah sakit umum daerah. *Jurnal Keperawatan Indonesia*, 27(1), 45–54.
- Dinh, J. E., Lord, R. G., & Hoffman, E. A. (2024). Adaptive leadership in healthcare: Managing complexity in post-pandemic systems. *BMC Medical Education*, 24(1), 176.
- Ditlopo, P. (2024). The impact of the nurse practice environment, workload, and professional support on job outcomes and standards of care at primary health care clinics in South Africa: A structural equation model approach. *BMC Nursing*, 23(1), 77–88.
- Gibson, J. L., Ivancevich, J. M., & Donnelly, J. H. (2021). Organizations: Behavior, structure, processes (15th ed.). McGraw-Hill Education.
- Goyal, R., et al. (2023). Identifying the impact of employer branding in the retention of nurses and alignment with organisational culture. *Humanities and Social Sciences Communications*, 10, Article 123.
- Greenhaus, J., Callanan, G., & Godshalk, V. (2019). Career management (6th ed.). Routledge.
- Hasibuan, M. S. P. (2020). Manajemen sumber daya manusia. Bumi Aksara.
- Herzberg, F. (2021). The motivation to work. Transaction Publishers. (Original work published 1959)
- Hidayat, D. (2022). Pengaruh implementasi FDRPA terhadap task performance: Motivasi dan retensi sebagai variabel intervening. *Jurnal Samudra Ekonomi dan Bisnis*, 13(1), 58–70.
- Hidayat, D., et al. (2024). The influence of leadership style, competency and motivation on employee work productivity at HS Samsoeri Mertojoso Hospital.
- Hidayat, D., et al. (2025). Implementation analysis safety culture to improve the quality of health services.
- Jimenez-Caceres, A. (2025). Relationship between different leadership styles of nursing managers and nurses outcomes: A systematic review. *Journal of Nursing Management*, 33(2), 145–160.
- Kallio, H., et al. (2024). Organizational support for nurses' career planning and development: A systematic mapping. *BMC Nursing*, 23(1), 1–15.
- Kemenkes RI. (2021). Peraturan Menteri Kesehatan Republik Indonesia tentang standar pelayanan keperawatan. Kemenkes RI.
- Kemenkes RI. (2022). Peraturan Menteri Kesehatan Republik Indonesia Nomor 14 Tahun 2022 tentang Standar Pelayanan Rumah Sakit. Kemenkes RI.

- Kiptulon, E., Okoth, P., & Mburu, J. (2024). The impact of organizational culture on work-related stress: A systematic review. *International Journal of Nursing Studies*, 142, 104–118.
- Kotler, P., & Keller, K. L. (2021). *Marketing management* (16th ed.). Pearson Education.
- Li, H., Zhang, X., & Chen, J. (2022). Person–job fit and job satisfaction as mediators between role conflict and service quality among Chinese hospital nurses. *Journal of Nursing Management*, 30(8), 1904–1914.
- Mangkunegara, A. P. (2020). *Manajemen sumber daya manusia perusahaan*. PT Remaja Rosdakarya.
- Mathis, R. L., & Jackson, J. H. (2020). *Human resource management* (15th ed.). Cengage Learning.
- Natasha, C. W. (2023). Hubungan beban kerja dengan stres kerja perawat di rumah sakit daerah. *Jurnal Ilmu Keperawatan (JIM FKep)*, 7(4), 112–120.
- Nguyen, H., & Kim, S. (2023). Ethical and authentic leadership in nursing: A pathway to employee trust and patient safety. *Journal of Advanced Nursing*, 79(2), 412–421.
- Noviyani, A., et al. (2024). Exploring patients' perspectives on healthcare service quality in outpatient settings at a public hospital in Palembang, Indonesia. *BMC Health Services Research*, 24(5), 1–10.
- Parasuraman, A., Zeithaml, V. A., & Berry, L. L. (2022). *Delivering quality service: Balancing customer perceptions and expectations* (Updated ed.). Free Press.
- Puspitasari, D., Lestari, N., & Rahmawati, S. (2022). Pengaruh beban kerja terhadap kepuasan pasien dalam pelayanan keperawatan di ruang rawat inap. *Jurnal Keperawatan dan Kesehatan Masyarakat Cendekia Utama*, 11(2), 87–96.
- Rahmani, A., Ismail, S., & Abdullah, N. (2024). Role clarity, job placement and nurses' service excellence: Evidence from teaching hospitals in East Java. *Indonesian Journal of Health Management*, 6(1), 1–12.
- Robbins, S. P., & Judge, T. A. (2022). *Organizational behavior* (19th ed.). Pearson Education.
- Roza, N., Supriyati, S., & Kadir, A. (2022). The effect of organizational culture, career development, remuneration and job satisfaction on nurse performance in regional general hospital in Batam. *Proceedings of the International Conference on Health Management*. Atlantis Press.
- Sahay, B. S., et al. (2022). Role clarity and healthcare performance: Evidence from Indian hospitals. *International Journal of Healthcare Management*, 15(3), 215–225.
- Sari, R., Rahayu, Y., & Nugraha, D. (2023). Job placement mismatch, burnout, and service quality: Mixed-method study among nurses at private hospital in Indonesia. *Jurnal Keperawatan Indonesia*, 26(2), 117–126.
- Sikander, M., & Batool, N. (2021). Effect of P–J fit on job outcomes of nurses of Pakistan with moderating role of agreeableness. *International Journal of Business and Economic Affairs*, 6(1), 27–34.
- Sugiyono. (2022). *Metode penelitian kuantitatif, kualitatif, dan R&D* (2nd ed.). Alfabeta.
- Sunarto, I. N., Yusuf, M., & La Ode, H. (2024). The influence of workload, work stress, work motivation, and organizational commitment on nurse performance in the intensive room at Bahteramas Regional Hospital, Southeast Sulawesi Province in 2023. *Indonesian Journal of Health Management*, 12(1), 55–65.
- Susilawati, Y., Komariah, M., & Somantri, I. (2023). Beban kerja perawat pelaksana berdasarkan metode Workload Indicator of Staffing Need (WISN). *Journal of Telenursing (JOTING)*, 5(1), 20–31.
- Suwignyo, S., Hartati, S., & Yuliani, D. (2022). Merit reward and affective commitment among nurses in public hospitals: The mediating role of organizational culture. *Jurnal Keperawatan dan Kesehatan Indonesia*, 10(3), 145–156.

- Syahraini, M., Hamzah, M. N., Rahim, A., & Sultan, Z. (2022). The role of civil servant professionalism and the merit system on employee sustainable performance through value co-creation. *Jurnal Manajemen Bisnis*, 13(2), 125–138.
- Tarwaka. (2021). *Ergonomi industri: Dasar-dasar pengetahuan ergonomi dan penerapannya di tempat kerja* (Rev. 3). Harapan Press.
- Tukan, D. I. (2022). Organizational culture and hospital service quality: A mixed methods study. *Health Services Management Journal*, 8(4), 233–246.
- Vahedi, H. (2024). Role of leadership competence and organizational culture on quality of healthcare. *Journal of Healthcare Leadership*, 16(3), 201–214.
- Wardhani, U. C. (2023). Retaining employment in the hospital setting: A phenomenological study on nurses' retention factors. *Indonesian Journal of Nursing Research*, 11(3), 145–157.
- Wei, H. (2023). Organizational culture and roles in promoting nurse specialty and professional advancement. *BMC Nursing*, 22(3), 1–12.
- Wong, Y. L., Tan, S. X., & Lim, P. K. (2021). The impact of nurse–unit fit on patient satisfaction and safety outcomes in Malaysian public hospitals. *International Journal of Nursing Practice*, 27(4), e12966.
- Wulandari, D., Sari, P., & Kurniawan, A. (2021). Hubungan beban kerja dengan kinerja perawat dalam memberikan pelayanan di RSUD Dr. Moewardi Surakarta. *Jurnal Manajemen dan Administrasi Rumah Sakit Indonesia*, 9(2), 101–110.
- World Health Organization. (2023). Global patient safety report 2023. WHO.