



The Influence Stress Work, Behavior Caring Nurses and Work Culture on Service Excellence in Inpatient at Dharmais Cancer Hospital

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Abstract. *This study aims for test influence work stress, nurses' caring behavior and work culture towards service excellence. This research uses a survey method, namely research that takes samples from a population using a questionnaire as the main data collection tool to study symptoms. or phenomenon Which observed. Study This use design causality based on dimensions time, that is, measurements of the independent and dependent variables are carried out at the same time. The unit of analysis is the individual, and the data analysis method uses correlation and regression. The sample used in this study is study This is nurse in Care Stay Hospital Dharmais Cancer Which amount to 249 respondents. Data research obtained from results filling questionnaire And analyzed with use technique analysis SEM PLS with the help of program Smart PLS. Results this research show that (1) stress Work negative impact and significant towards service excellence, the higher the nurse's work stress, the lower it is excellent service nurses, and vice versa lower stress Work nurse so increasingly supported by service excellence nurse. Stress Work proven is Wrong One factor Which affect service excellence; (2) behavior caring nurse influential positive to service excellence Which means that that The higher the nurse's caring behavior, the higher the service excellence, and vice versa, the lower the caring behavior. Caring nurse so the more low service excellence. Behavior caring nurse proven is wrong one factor which affect service excellence; (3) culture work no influential towards service excellence and it can be concluded that work culture has not been proven to be a factor that influences service excellence.*

Keywords: *Inpatient Care; Nurse Caring Behavior; Service Excellence; Work Culture; Work Stress.*

1. INTRODUCTION

Service excellence is one matter the important one on company including company services such as Hospital. By Because many hospital which own characteristics which The same in one category, type of service, price and other factors, service excellence can be used as a differentiating factor between one hospital and another. The other hospitals which become its competitors. With various similarities and uniformity which exists, consumer (patient) of course just will evaluate and choose a hospital based on its service. Patients who are satisfied with the service provided by a hospital tend to be loyal (Febres-Ramos et al., 2020). And of course, at the loyalty stage, consumers will recommend the hospital to other colleagues.

According to Philip Kotler and Kevin Lane Keller, service is any activity or benefit that can be provided by one party to another party that is essentially intangible and does not result in ownership (2009: 386). Meanwhile, according to Zeithaml et.al in their book Service Marketing (2006: 162), there are factors that influence customer perceptions and expectations,

namely customer expectations are highly dependent on individual characteristics where personal needs (personnel needs). The dimensions of Service Excellence itself There is 5 that is Tangible (tangible), Reliability, Responsiveness (Responsiveness), Assurance (Guarantee), and Empathy (Empathy).

Cancer services at Dharmais Cancer Hospital as a cancer referral center are in fact getting better day by day, good and comprehensive. However in the midst of efforts to improve services carried out by Dharmais Cancer Hospital, which is also in line with one of the strategic objectives The Indonesian Ministry of Health's 2020-2024 target of "providing quality referral health services" continues to receive complaints and grievances from hospital service users, specifically patients, their families, and the community, regarding the services provided by professional care providers, both doctors and nurses. Among them, there are complaints directed at nursing staff who are considered to be unsatisfactory in providing services to patients, such as nurses who are rude, lack attention, often act indifferently, and do not respond quickly to patient complaints, both those on duty in outpatient (polyclinic) and inpatient care. This, of course, results in the goal of service excellence in hospitals not being optimally achieved.

Based on the results of observations, it was found that there are several conditions that can hinder the achievement of service excellence at Dharmais Cancer Hospital, namely work stress that occurs in nurses with the situation and conditions that exist at Dharmais Cancer Hospital. Work stress can occur due to the patient's condition, work stress facing the patient's family, stress facing colleagues, stress in dealing with doctors, stress with the surrounding environment, stress with work (task deadlines), and stress with direct superiors. For example, the condition of cancer patients at Dharmais Cancer Hospital, with the disease suffered by not only experiencing physical changes in anatomical structure, but also psychologically they are also own level stress which tall facing their illness. As service providers, nurses are required to provide the best possible service. And as much as possible pressing feeling in the himself alone. Face family patient care is also not easy, as the family members who care for the patient during inpatient care also face conflicts within themselves. In addition to meeting the patient's basic needs, the family must also provide motivation and spiritual support to ensure the patient can undergo treatment well and with enthusiasm.

Furthermore, nurses must also deal with other matters related to his work at the hospital. Meanwhile, the number of nursing staff is still not optimally met (information from the Nursing Substance Coordinator), plus with many nurse skilled workers who resign or move elsewhere contribute to work stress. The percentage patient which treated with total

classification care and partial care which tall (around 94% of amount patient which treated) in Dharmais Cancer Hospital also can contribute to work stress in nurses. Researchers also observed an increase in the number of patients with prolonged length of stay (LOS) in inpatient care, which is a serious problem for hospitals. Patients treated exceed day care which should (exceeding from the Clinical Pathway), resulting in nurses having to devote more time and energy to caring for these patients. Most of these patients with prolonged LOS are in less stable condition or experiencing worsening due to their illness or side effects of treatment, making them unfit for discharge from the hospital. stress work which tall will this results in suboptimal service excellence. Furthermore, nurses are also required to continuously improve their professional role, with caring behavior currently a key element in providing nursing care to patients. Caring behavior can determine the moral values of a nurse in providing services, where caring behavior in nursing care can determine the level of patient satisfaction in receiving care service health. Draft according to Wolf and Banner (1998), there are 10 characteristics of caring nurses, namely: 1. listening attentively, 2. providing comfort, 3. speaking honestly, 4. having patience, 5. being responsible, 6. providing clear information according to the patient's needs, 7. providing touch, 8. using sensitivity, 9. showing respect to the patient, 10. calling patient with his name.

Related matter Dharmais Cancer Hospital is still facing problems such as many reports/complaints from patients and their families about unsatisfactory nursing services at Dharmais Cancer Hospital, (Data from the Complaints Section of Dharmais Cancer Hospital for January to July 2023 as many as 20 complaints from patients and families regarding nursing services in inpatient care); Dharmais Cancer Hospital as a National Cancer Center is challenged to be able to provide services with maximum service excellence targets; High work stress conditions in nurses, nurses' caring behavior and work culture have a role in influencing service excellence at Dharmais Cancer Hospital which is not optimal. Therefore, this study aims to analyze the influence of work stress, nurses' caring behavior, and nurses' work culture in inpatient care at Dharmais Cancer Hospital.

2. THEORETICAL STUDY

Service Excellence

Service excellence (service (prime) is a form of service that is very satisfying for service recipients. According to the theory of service quality, excellent service can explained if something which experienced by someone far exceeds what is expected of that person, where this is a comparison between perception (service felt/received) and expectations.

From the definition above, it can be concluded that excellent service is the provision of services to person other which in accordance with standard work and can provide the best in service so that customers will get flavor satisfied which experienced from what that has been expected. According to Zeithaml et al, the quality of excellent service can be measured from five dimensions, namely: Tangible, Reliability, Responsiveness, Assurance, and Empathy.

Stres Work

According to Cooper and Cartwright (2002), work stress is a relationship between fellow employees in the workplace that can cause pressure, caused by a lack of communication and mistrust, which ultimately impacts the employee's mental health. Cooper and Cartwright divide stress into three dimensions: Perception of stress, Attitude toward the organization, and Physical and Mental Health.

Caring Nurse

Caring is a behavior or action taken to genuinely provide a sense of physical and emotional security to another person. Caring is central to nursing practice, requiring nurses to be more attentive to their patients. Caring Dimensions according to KM Swanson There are five dimensions that underlie the concept of caring, namely Maintaining belief, knowing, being with (Presence), Doing for (Doing), Enabling (Enabling).

Work Culture

According to Schein (2010), culture can be formed because of a group that studies something over a certain period of time, where the group solves problems. internal and internal through behavioral, cognitive, and emotional processes. As for dimensions And indicator in work culture according to Robbins in Ichsan Nugraha (2016) is: a. Innovation And take risk, b. Attention on details, c. Orientation results, d. Orientation man, e. Orientation team, f. Aggressiveness, g. Stability.

Previous Research

Yani Indrastuti (2010). Relationship Analysis of Caring Behavior and Motivation with Nurse Performance in Duty in Applying Nurse Ethics Principles in Nursing Caring in Public Hospital of Sragen (RSUD Sragen). The results showed that the caring behavior variable was significantly related to intrinsic and extrinsic motivation, but had no effect on the salary system (Nahar et al., 2013). The Relationship of Job Satisfaction, Job Stress, and Mental Health of Government and Non-Government Employees of Bangladesh. This study found that there is a significant positive correlation between stress Work and type work ($r = 0.282$, $P < 0.01$). Significant job stress was found in non-government employees, as they felt less job security and high workload. Female employees were less satisfied than male employees

with their job level. Which more low with wages which lower and also because of lower social security. Revelation Wijanarko (2021). The Effect of The Caring Attitude of Nurses on Service Satisfaction of Inpatient A at H. Adam Malik Hospital Medan. The results of the study showed that there was a significant influence of the caring attitude of integrated inpatient nurse A on the service satisfaction of integrated inpatient A at H. Adam Malik Hospital Medan.

3. RESEARCH METHODS

This research use method survey, namely study which take sample from a population using a questionnaire as a tool collection data which main For examines the observed symptoms or phenomena. This study uses a causality design based on dimensions time, that is measurement to The independent and dependent variables were analyzed simultaneously. The unit of analysis was the individual, and the data analysis method used correlation and regression. This study was conducted to explain the relationship four variables that is variables free which includes work stress (X1), nurse caring behavior (X2), culture Work (X3), and variables bound, namely service excellence (Y), with the type of research used being associative quantitative.

Population and Sample

Population in study This is all nurses in The inpatient staff of Dharmais Cancer Hospital, a vertical hospital in West Jakarta, employs 339 nurses. The sample used in this study was 249 nurses at the inpatient staff of Dharmais Cancer Hospital, Jakarta. The research data were obtained from questionnaires and analyzed using SEM PLS analysis techniques with the assistance of the Smart PLS program.

Research Hypothesis

The research hypothesis in this study is presented in Figure 1.

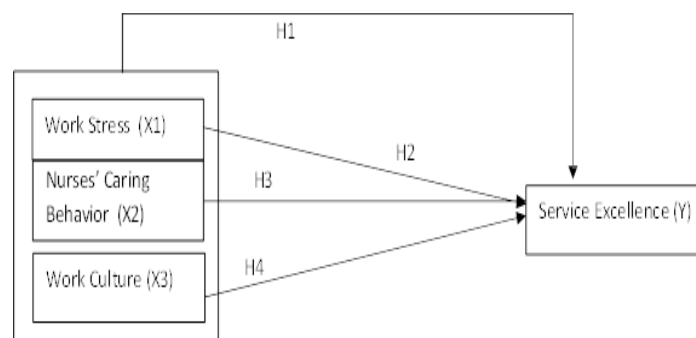


Figure 1. Research Constellation Framework.

The hypothesis in this study is as follows:

Hypothesis 1

Ho1: p value > 0.0 = there is no influence of Job Stress, Behavior Caring Nurses and Work Culture towards Service Excellence

Ha1: p value < 0.05 = there is an influence of Work Stress, Nurse Caring Behavior and Work Culture on Service Excellence

Hypothesis 2

Ho2: p value > 0.05 = there is no influence of Job Stress on Service Excellence

Ha2: p value < 0.05 = there is an influence of Job Stress on Service Excellence

Hypothesis 3

Ho3: p value > 0.05 = there is no influence of Nurse Caring Behavior on Service Excellence

Ha3: p value < 0.05 = there is an influence of behavior Caring Nursestowards Service Excellence

Hypothesis 4

Ho4: p value > 0.05 = there is no influence of Work Culture on Service Excellence

Ha4: p value < 0.05 = there is an influence of Work Culture on Service Excellence.

4. TECHNIQUE ANALYSIS DATA

The data analysis technique used in this study is quantitative analysis. This study uses the Smart PLS program to test data in a way quantitative. On study this uses path analysis.

Analysis three box method

Variable descriptions are used to determine respondents' responses to the variables of work stress, nurse caring behavior, work culture, and service excellence. This analysis utilizes index analysis. To determine the tendency of respondents' responses to each variable, the average score or index value is categorized into upper and lower limit values. based on calculation three box method (Ferdinand, 2014).

$$\text{Mark limit on} = (\%F*4) / 4 = (249*4)/4 = 249$$

$$\text{Mark limit lower} = (\%F*1) / 4 = (249*1)/4 = 62.25$$

$$= 186.75/3 = 62.25$$

Interpretation of low index values starts from the lower limit value (62.25) to the lower value plus with range mark (62.25+62.25 = 124.5); the average value of the index starts from the limit next from mark addition lower limit value with a range of values up to the addition of a range of values for the medium index value limit with mark index tall (124.5 + 62.25 = 186.75); and the high index value up to the value limit on (249). Interpretation mark index in

this study as follows:

Low = 62.3 – 124.5

Medium = 124.6 – 186.8

Tall = 186.9 – 249

The scoring technique used in this study is with a maximum score of 4 and a minimum score of 1, so the calculation of the respondent's answer index is by using the following formula:

$$\text{Index Value} = [(\%F1*1) + (\%F2*1) + (\%F3*1) + (\%F4*1)] / 4$$

Information:

F1 : Frequency of respondents who answered 1 of the scores used in the questionnaire list.

F2 : Frequency of respondents who answered 2 of the scores used in the questionnaire list.

F3 : Frequency of respondents who answered 3 of the scores used in the questionnaire list.

F4 : Frequency of respondents who answered 4 of the scores used in the questionnaire list.

Analysis path analysis

The analytical method used is path analysis. It is used to analyze the relationship patterns between variables. This model is used to determine the direct and indirect influence of a set of independent (exogenous) variables on the dependent (endogenous) variable (Sani and Maharani, 2013). Path analysis is a diagram that connects independent, intermediary, and dependent variables. The relationship pattern uses arrows. A single arrow indicates a cause-and-effect relationship between an exogenous variable and one or more dependent variables. The arrow also connects errors. (variable residue) with all each exogenous variable. Double arrows indicate the correlation between pairs of exogenous variables (Kusnendi, 2014).

5. RESULTS AND DISCUSSION

Results

Description of Research Respondents

The results of the descriptive analysis of the characteristics of respondents in Table 4.1 show that there are more female respondents, namely 195 people (78.3%), and male respondents are 54 people (21.7%). This indicates that the majority of respondents are female. The age of respondents is dominated by the age of 25-35 years, namely 143 people (57.4%), the second position is the age group of 35-45 years as many as 71 people (28.5%). The majority of respondents are 28 years old. From Table 4.1, it can also be seen that nurses with the highest level of education are Ners, namely 128 people (51.4%), followed by DIII Nursing, namely 94 people (37.8%), the rest are followed by Bachelor of Nursing and Master of Nursing. This

shows that the majority of respondents' education is Ners. For marital status, the most respondents are married, namely 172 people (69.1%). For the criteria of work period, the most respondents were 1-5 years, namely 70 people (28.1%). For employment status, it can be seen that there is a balance between civil servants and non-civil servants (contract, BLU, CBLU), although the dominant one is civil servants, namely 116 people (46.6%). In terms of income, it is very dominant with respondents earning 5-10 million, namely 170 people (68.3%).

Data analysis

Analysis of Research Variable Descriptions Using the Three Box Method

Variable descriptions were used to determine respondents' responses to the variables of work stress, nurse *caring behavior*, *work culture*, and *service excellence*. This analysis used index analysis. To obtain the respondent's response tendencies for each variable, it will be based on the average score or index value categorized into upper and lower limit values based on the *three box method calculation* (Ferdinand, 2014). The interpretation of the index value in this study is grouped into Low (62.3 - 124.5), Medium (124.6 - 186.8), High (186.9 - 249). The average value for the work stress variable is 123.61 and is included in the low category, but when viewed on each indicator, there are 8 indicators with a medium index category. This is because there are 7 of the 18 indicators/statements that are categorized as medium (124.6 - 186.8). The recapitulation of the results of the three box method shows that work stress, nurses' caring behavior, work culture and service excellence in inpatient care at Dharmais Cancer Hospital are included in the good assessment, where the low level of stress and nurses' caring behavior, work culture in providing good service excellence at Dharmais Cancer Hospital.

Validity Test Results

The loading factor and AVE values for each construct in Table 4.9 show that all constructs are valid and have an AVE > 0.5, which means that from the perspective of loading factor and AVE values, all constructs have met convergent validity which required.

Hypothesis Test Results

Hypothesis Testing Analysis (PLS SEM Analysis)

In this study, the influence test between variables will be analyzed using the SEM PLS analysis technique. The stages in SEM PLS analysis consist of the outer model testing stage and the inner model testing stage (Hair et al.; 2019). In the outer model testing stage, all indicators in each construct are tested for validity and each construct is tested for its level of reliability, while the inner model testing is used to examine the relationship between variables.

Outer Model Testing

The measurement model testing stage includes Convergent Validity, Discriminant Validity, and Composite Reliability testing. The results of the PLS analysis can be used to test the research hypothesis if all indicators in the PLS model have met the requirements of convergent validity, discriminant validity, and composite reliability. To produce the results of the outer model test, the PLS model must be estimated using algorithmic techniques. The following are the results of the SEM PLS model estimation after being estimated using algorithmic techniques.

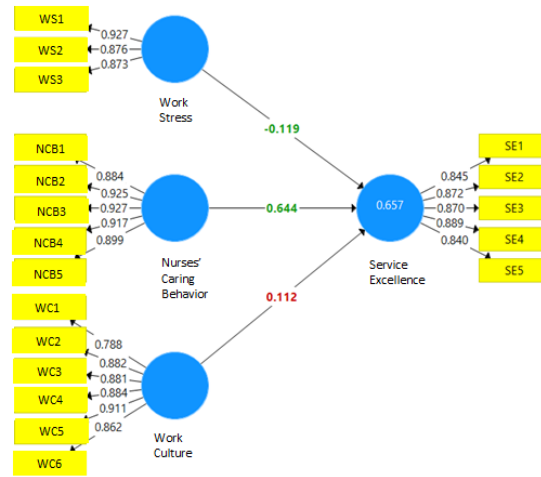


Figure 2. SEM PLS Algorithm Model Estimation Results.

Convergent validity testing is conducted by examining the loading factor values of each indicator against its construct. For confirmatory research, the loading factor limit used is 0.7, while for exploratory research, the loading factor limit used is 0.6, and for developmental research, the loading factor limit used is 0.5. Because this research is confirmatory, the loading factor limit used is 0.7. Based on the SEM model estimation results in Figure 3, all remaining variables in the model are valid in measuring their constructs because they have a loading factor > 0.7 and the figure also shows that the R square model is very good (in the strong model category) at 0.657. so that testing can be continued to the AVE test stage. The loading factor and AVE values of the model can be seen more clearly in the following table:

Table 1. Convergent Validity Test Results.

Variable	Indicator	Loading Factor	Cut Value	AVE	Convergent Validity
Work Culture (WI)	WC1	0,778	0,7	0,754	Valid
	WC2	0,882	0,7		Valid
	WC3	0,881	0,7		Valid
	WC4	0,884	0,7		Valid
	WC5	0,911	0,7		Valid
	WC6	0,862	0,7		Valid
	NCB1	0,884	0,7	0,829	Valid

Nurses'	NCB1	0,925	0,7		Valid
Caring	NCB1	0,927	0,7		Valid
Behavior	NCB1	0,917	0,7		Valid
(NCB)	NCB1	0,899	0,7		Valid
	SE1	0,845	0,7		Valid
Service	SE1	0,872	0,7		Valid
Excellence	SE1	0,870	0,7	0,745	Valid
(SE)	SE1	0,889	0,7		Valid
	SE1	0,84	0,7		Valid
Work Stress	WS1	0,927	0,7		Valid
(WS)	WS2	0,876	0,7	0,796	Valid
	W3	0,873	0,7		Valid

Construct reliability can be assessed from the Cronbach's Alpha value and Composite Reliability value of each construct. The recommended composite reliability and Cronbach's alpha values are more than 0.7, but in development research, because the loading factor limit used is low (0.5), low composite reliability and Cronbach's alpha values are still acceptable as long as the requirements for convergent validity and discriminant validity have been met.

Table 2. Composite Reliability.

Construct	Cronbach's Alpha	Composite Reliability	Reliability
Work Culture	0,935	0,948	Reliable
Nurses Caring Behavior	0,948	0,96	Reliable
Service Excellence	0,915	0,936	Reliable
Work Stress	0,872	0,921	Reliable

Inner Model Testing

The inner model testing stage begins with the goodness of fit model testing stage. This test is a test carried out to ensure that the PLS model to be estimated to test the relationship between research variables fits the data being analyzed so that the sample used can explain the actual population conditions.

In PLS analysis, once the model has been proven to fit, testing the influence between variables can be performed. This influence testing includes testing for direct influence and testing for indirect influence. and total influence testing. The following are the results of the SEM PLS model estimation using the bootstrapping method.

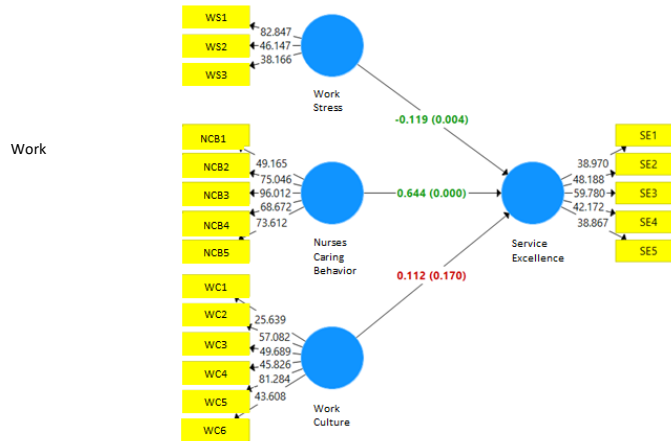


Figure 3. Bootstrapping Model Estimation Results.

Based on the results of the PLS model estimation using the bootstrapping technique for 500 samples, the results of the test of the influence between variables were as follows.

Table 3. Results of the Dirrect Effect Test.

Path	Dirrect Effet				Hypothesis	Conclusion
	Path Coefficient	T statistics	P Values			
Work Stress > Service Excellence	-0,119	2,916	0,004		(H2)	Supported
Nurses Caring Behavior > Service Excellence	0,644	9,232	0		(H3)	Supported
Work Culture > Service Excellence	0,112	1,374	0,17		(H4)	Not Supported

A direct effect, often referred to as a direct effect, is the influence of an exogenous variable directly on an endogenous variable without going through another variable (intervening). In SEM PLS analysis, the significance and direction of the direct effect are seen from the p value, t statistic, and path coefficient on each path connecting the endogenous and exogenous. If the p value obtained in the relationship between variables is <0.05 and the T statistic is >1.96 (two-tailed t value , α 5%) and the T statistic is >1.65 in the one-tailed test, then it is concluded that the exogenous variable has a significant effect on the endogenous variable with the direction of influence according to the sign attached to the path coefficient. Furthermore, if the p value obtained is >0.05 and the T statistic is <1.96 (t value two tail, α 5%) in the two tail test and T Statistics < 1.65 in the one tail test, it is concluded that the exogenous variable does not have a significant effect on the endogenous (Hair et al, 2019).

Based on the test results, the following results were obtained:

Work stress on service excellence

Work stress has a negative and significant effect on service excellence, as indicated by a p value of $0.004 < 0.05$, T statistic $2.916 > 1.96$ and a negative path coefficient of -0.119 , meaning that the higher the employee's work stress, the lower the service quality (service excellence), and vice versa, the lower the level of work stress, the better the service quality (service excellence).

Caring behavior towards service excellence

Nurses' caring behavior has a positive and significant effect on service excellence, as shown by a p value of $0.000 < 0.05$, T statistic $9.232 > 1.96$ and a positive path coefficient of 0.644 , meaning that the higher the nurse's caring behavior, the higher the service excellence, and vice versa, the lower the nurse's caring behavior, the lower the service excellence.

Work culture towards service excellence

Work culture does not affect service excellence indicated by $P = 0.170 < 0.05$, T statistic $1.374 > 1.96$, this means that changes in service quality (service excellence) are not caused by work culture, but are caused by other factors.

Discussion

The influence of work stress, nurses' caring behavior and work culture simultaneously on service excellence

Hypothesis 1 in this study states that work stress, nurses' caring behavior, and work culture jointly influence service excellence. The results of the F count calculation obtained a calculated F value of 114.287 while the F table value for the number of samples of 249 and the number of variables in model 4 is 3.815 , therefore the calculated F value $>$ F table, this supports hypothesis 1 in this study so that hypothesis 1 can be accepted. Based on the three box method analysis, the highest index value was found in the indicator every time I am on duty I try to dress and appear well and politely (index value 239.75). This indicator is one of the indicators of the tangible dimension in the service excellence variable. There were 248 respondents who agreed with this indicator with a percentage of 99.6% .

This indicates that nurses who work in the inpatient ward are very concerned about their personal performance and appearance. The indicator with the second highest index value is I am kind and friendly to all patients (index value 232.50). This indicator is an indicator of the Empathy dimension, which is also a service excellence variable. There were 248 respondents who agreed with this indicator with a percentage of 99.6% . The number of indicators contained in this service excellence variable is 15 indicators. For the other 13 indicators of this service excellence variable, the index value is also high, namely at least 211.75 , so the index value range for the service excellence variable is $211.75 - 239.75$. The

average index value for the service excellence variable is 224.83 with a high category (meeting the high category index value of 186.9 - 249). This means that in general, the nurses who work in inpatient care at Dharmais Cancer Hospital already understand the indicators of the service excellence variable. Therefore, it is concluded that improving service quality (service excellence) can be increased through improvements in the indicators of the work stress variable, the caring variable, and the work culture variable together. Low levels of work stress, good caring behavior of nurses, and a good work culture together influence the quality of service, in this case the service excellence of nurses in inpatient care at Dharmais Cancer Hospital.

The influence of work stress on service excellence

Hypothesis 2 in this study states that work stress has an effect on service excellence, the results of the analysis in this study show that the p value of the effect of work stress on service excellence is 0.004, T statistic is 2.916 and the negative path coefficient is -0.119, therefore p value <0.05, T> 1.65 and the negative path coefficient then it is concluded that work stress has a negative effect on service excellence, this supports hypothesis 2 in the study so that hypothesis 2 can be accepted. In this case it can be concluded that work stress has an effect on service excellence, where the high or low work stress experienced by nurses affects the high or low service excellence.

The negative path coefficient explains that the effect of work stress on performance is negative, the higher the work stress experienced by nurses, the lower the nurse's service excellence, and vice versa, work stress that can be minimized can support the high service excellence of nurses. Based on the three box method analysis for the work stress variable, there are 18 indicators/statements in it, where the average index value is 123.61 in the low category (meeting the high index value of 186.9 -249.00), although the average value of this index is almost close to the range of the medium index category. When viewed for each indicator, there are 7 indicators whose index values are included in the medium category (124.6 - 186.8), and 10 other indicators have index values in the low category (62.3 - 124.5). For the range of index values for the work stress variable itself, from all existing indicators (from its 3 dimensions), namely 149.50 - 102.75.

The results of this study align with those of Kurniati (2019), which showed that high levels of work stress among nurses lead to decreased performance. These results also support previous research conducted by Sakinah & Suyadi (2020), which demonstrated the negative impact of stress on nurse performance, necessitating techniques to minimize it. These results also align with those of Nainggolan (2018), which showed that higher levels of work stress

among nurses lead to decreased performance. Other research results that also show the negative influence of work stress on performance include the results of research (Cahyadi et al., 2021; Carsita et al., 2018; Hidayatullah & Handari, 2017; Insan & Damrus, 2020; Mazelda et al., 2022; Nainggolan, 2018; Rachmawati, 2019; Runtuwene, 2018; Santoso & Setiani, 2022; Sugiarto & Nanda, 2020; Wicaksono et al., 2022).

The influence of nurses' caring behavior on service excellence

Hypothesis 3 in this study states that nurses' caring behavior has an effect on service excellence, the results of the analysis in this study show that the p value of the influence of nurses' caring behavior on service excellence is 0.000, T statistic is 9.232 and the positive path coefficient is 0.644, therefore the value of value $<0.05, T> 1.65$ and the positive path coefficient it is concluded that nurses' caring behavior has a positive effect on service excellence, this supports hypothesis 3. In this study Hypothesis 3 can be accepted and concluded that the higher the nurses' caring behavior, the higher the service excellence, and vice versa the lower the nurses' caring behavior, the lower the service excellence. Based on the three box method analysis for the nurses' caring behavior variable, there are 15 indicators/statements in it, where the average index value is 218.43 in the high category (meeting the high index value of 186.9 -249.00). For the range of values for the nurses' caring behavior variable index, from all existing indicators (from the 5 dimensions), namely 211.25 – 226.75.

The results of this study align with those of Nurhayati (2016), which showed a significant influence between nurses' caring behavior and their performance in patient care. Furthermore, Nastiti et al. (2017) also demonstrated a positive influence between caring behavior and nurses' performance, necessitating further research to improve it. In research (Sukezi, 2019) it is also stated that caring behavior supports nurses' performance so that it can provide satisfaction to nurses, as well as in research (Adnan & Kahar, 2019; Agusthia et al., 2022; Ananda & Asmawati, 2018; Angkasa et al., 2021; Hervinda & et al, 2014; Hervinda & Novadian, 2014; Ilham, 2020; Juliani et al., 2021; Muttaqin et al., 2020; Sukezi, 2013; Sumarni et al., 2023; Suweko & Warsito, 2019) it was also concluded that in increasing patient satisfaction, nurses' caring behavior is one thing that is very important to pay attention to because it is related to nurses' performance in caring for patients.

The influence of work culture on service excellence

Hypothesis 4 in this study states that nurses' work culture has an effect on service excellence , the results of the analysis in this study show that the p value is $0.170 > 0.05$, T statistic $1.374 < 1.96$. Hypothesis 4 in this study is not accepted and it is concluded that work

culture does not have an effect on service excellence, this means that the high or low level of work culture does not have an effect on the high or low level of service excellence, this does not support hypothesis 4 in this study. Three-box method analysis for the work culture variable, there are 18 indicators/statements in it, where the average index value is 212.42 in the high category (meeting the high index value of 186.9 - 249.00). For the range of index values for the work culture variable, from all existing indicators (from its 6 dimensions), namely 200.75 - 226.50.

The results of this study are inconsistent with those of (Parmin, 2017), which showed that work culture can influence employee performance. They also deviate from those of (Kurniawan, 2017), which showed that nurse performance is shaped by a positive work culture. These results align with those of (Yundelfa et al., 2020), which showed that a positive organizational culture does not always lead to high nurse performance. The results of research (Darmin, 2021) also show that organizational culture does not have a significant effect on nurse performance, likewise the results of research (Bima et al., 2019; Burdahayat, 2009; Faqih & Nasution, 2016; Feriani, 2020; Harmiyati et al., 2016; Hedyastuti et al., 2020; Maesaroh & Widodo, 2022; Najamuddin, 2019; Oktaviana et al., 2022; Sari, 2020; Sidin et al., 2019; Vernadeth & Anindita, 2021) also show that work culture does not affect nurse performance.

6. CONCLUSION AND SUGGESTIONS

Conclusion

Based on the results of the data processing conducted by the author, the following conclusions can be drawn from the research: First, work stress, nurses' caring behavior, and work culture collectively have an influence on service excellence in inpatient care at Dharmais Cancer Hospital. Second, nurses' work stress has a significant impact on service excellence in inpatient care at the hospital. Third, nurses' caring behavior positively influences service excellence, with higher levels of caring behavior leading to improved service excellence in inpatient care. Lastly, work culture was found not to have a significant effect on service excellence in inpatient care at Dharmais Cancer Hospital, indicating that work culture does not play a critical role in influencing the quality of care provided.

Suggestion

Based on the results of the research conducted, several suggestions for the Dharmais Cancer Hospital Management have been proposed. First, the hospital should provide routine counseling facilities, including access to special psychologists for health workers, to address mental health concerns. Additionally, the hospital could bring in religious leaders regularly

for spiritual guidance, particularly after handling serious cases such as patient death. It is also recommended to conduct an evaluation of the patient-to-nurse/doctor ratio to ensure optimal care delivery. The hospital should arrange shift schedules that are not too long and avoid consecutive night shifts for nurses, ensuring sufficient rest time between nursing shifts. To enhance communication under pressure, training in empathetic communication should be conducted. The hospital should also simulate high-stress situations to practice effective service responses and create an emotional intelligence strengthening program. Regular employee stress surveys (e.g., every 3 months) are essential to monitor the correlation between employee stress and patient satisfaction. Furthermore, a supportive work culture should be developed, with open channels for employees to express complaints or emotional needs. The management should also be directly involved in fostering a healthy and supportive work culture. Providing incentives based on service performance, in addition to work quantity, is recommended, along with the creation of a monthly award program for the best service under complex conditions. Finally, the hospital should offer leave for employees to recover from stress, ensuring their well-being and continued ability to provide high-quality care.

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