

# Predictor of Self-Efficacy, and Working Attitude Working Motivation on Improving quality of services

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## Abstract

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**Background:** This study was conducted based on the incidence issues of patients' safety in inpatient room. **Objective:** The study aimed to examine the association between self-efficacy, and working attitude on quality of services with working motivation as intervening variable. **Method:** A cross-sectional study was applied in this study. We involved 108 inpatient nurses which are selected using the purposive sampling technique. The statistically analysis using the structure equation modelling. **Result:** The results found that self-efficacy, and attitude were directly affected on working motivation and quality of services simultaneously (p-value <.05). **Conclusion:** The effects of self-efficacy and working attitude on the quality of services are significant, with working motivation serving as a critical intervening variable. **Recommendation:** Hospitals should therefore focus on strategies that enhance all three factors to ensure the delivery of superior healthcare services. Further study needs to conduct the study by developing the intervention to improve the quality of nursing services.

**Keywords:** self-efficacy, working attitude, quality of services, working motivation



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## BACKGROUND

Quality of care is a critical component of healthcare that directly impacts patient outcomes and the effectiveness of health services. The World Health Organization (WHO) emphasizes that quality health services should be effective, safe, people-centered, timely, equitable, integrated, and efficient (1).

Bad quality of care in the healthcare sector can have profound and far-reaching effects on patients, healthcare systems, and society at large. The World Health Organization (WHO) and other health bodies have highlighted the detrimental impacts of poor-quality healthcare, which include increased burden of illness, higher health costs, and a rise in preventable medical errors and associated morbidity and mortality (2).

The quality of care also affects healthcare workers. Hospitals serving economically disadvantaged patients often face challenges in providing high-quality care, which can lead to job dissatisfaction, burnout, and intent to leave among nurses (3). This not only impacts the individual healthcare workers but also the overall capacity of the healthcare system to deliver quality care.

Achieving high-quality care is complex and requires a multifaceted approach involving good governance, a skilled and motivated workforce, adequate financing, reliable information systems, and well-equipped healthcare facilities (4).

Quality improvement strategies in healthcare aim to reduce the quality gap and enhance patient safety by systematically analyzing and redesigning care processes (5). However, there is still a need for research on the effective implementation of these strategies and their impact on healthcare quality.

Self-efficacy necessary to produce specific performance attainments, plays a critical role in healthcare professionals' ability to deliver patient-centered care. A study mentioned that higher self-efficacy among medical professionals is positively

correlated with better work performance, motivation, enthusiasm, and cooperative work attitudes (6).

However, there is a gap in understanding the specific mechanisms through which self-efficacy influences service quality in healthcare and how it interacts with other personal and environmental factors within this context.

Another factor such as attitude of healthcare professional also well documented in quality of care (7). While the importance of teamwork and working attitudes is well-documented, less is known about how these factors are influenced by individual self-efficacy and motivation, and in turn, how they impact service quality.

Motivation is a complex factor that influences both self-efficacy and working attitude. It can be both an independent variable affecting learning, performance, and career choices in medical education (8). The literature suggests that motivation can mediate the relationship between self-efficacy and service quality (6).

One of interesting issue need to explore in this study which is conducted in private hospital in Ciledug-Tangerang, Indonesia related to the patient safety incidence. Based on the observations from service quality department on January 9, 2023 found that 20 cases of patients' safety.

If referring to the Health Minister's Regulation No. 11 of 2017 on patient safety, quality services should be carried out safely and avoid the occurrence of patient safety incidents, so that such incidents are categorized as unqualified services.

While existing research highlights the importance of self-efficacy, working attitude, and motivation in determining the quality of healthcare services, there are significant gaps in understanding the specific mechanisms and interactions between these factors. The current study needs to elucidate these relationships, with a particular focus on working motivation as an intervening variable. Such insights could inform targeted interventions to enhance healthcare service

quality, ultimately leading to better patient outcomes.

## OBJECTIVE

The study aimed to examine the association between self-efficacy, and working attitude on quality of services with working motivation as intervening variable.

## METHOD

### Design

This study was a quantitative study with the cross-sectional approach. The study was conducted at type C private hospital at Ciledug-Tangerang, Indonesia

### Sample, sample size, & sampling technique

A total of 108 nurses who responsibilities in inpatients room were recruited based on the inclusion criteria. The inclusion criteria of this study such as 1) willingness to participate in this study; 2) The nurse who's on duty at the inpatient room; 3) has been working within one year in inpatient room; 4) wiliness to fill out the questionnaire. Nurse on leave or sick during this study on going or does not return the questionnaire would be excluded in this study.

### Data Collection process

The researcher gathers the data within 1 month. The process of data collection was conducted by the researcher and assisted by the research assistant. We gather the information from respondents using the questionnaire. The selection of the 4-1 range is done on the grounds that the middle answer category has a double meaning.

The questionnaire is structured on the basis of each dimension adopted by the individual expert, some instruments were used to measure the variables and had been validated by 30 respondents. Details of the reliability of instruments by showing the Cronbach- alpha would be explained below.

No	Instruments	Cronbach-alpha
1	Self-efficacy questionnaire	0.826
2	Working attitude questionnaire	0.855
3	Job motivation questionnaire	0.853
4	Quality of nursing services questionnaire	0.749

*The quality of nursing services was measured using the questionnaire.* This instrument has five dimensions 1) reliability, 2) response power, 3) guarantee, 4) empathy, and 5) physical proof. This questionnaire consisted of 14 items with Likert scale approach including strongly agree=4, agree=3, disagree=2, strongly disagree=1

*Self-efficacy questionnaire.* This questionnaire was used to measure the nurse's efficacy on delivering quality nursing services in the hospital facilities of Bhakti Asih general hospital. This questionnaire consisted of 3 dimensions such as 1) level of efficacy on delivering quality nursing services, 2) Strength of delivering quality nursing services, and 3) generalization. The total item questionnaires were 12 items with Likert scale approach including strongly agree=4, agree=3, disagree=2, strongly disagree=1.

*Working attitude questionnaire.* This questionnaire was used to measure the attitude nurses in delivering the quality nursing services. It has 3 dimensions such as 1) cognitive, 2) affective, and 3) conative. The instruments consisted of nine questions with the Likert scale approach was applied in this study including strongly agree=4, agree=3, disagree=2, strongly disagree =1.

*Job motivation questionnaire* was used to measure the motivation of nurses delivering the quality nursing services. The questionnaire consisted of 2 dimensions including 1) intrinsic factors, and 2) extrinsic factors. The instrument was ten questions with scale used of Likert scale approach including strongly agree=4, agree=3, disagree=2, strongly disagree =1.

## Analysis data

The descriptive statistic was used to describe the characteristic of respondent using frequency, percentage, mean, and standard deviation. The structure equation modelling with Lisrel software was used to measure the direct and indirect effect of the independent variables to the dependent variable. The Structural Model Matching Test is performed determine the model matching of each variable being tested.

## RESULT

### Characteristic of respondents

The table is likely from a report or study that categorizes a population or sample group by these characteristics. The data suggests a predominantly male group with the largest age group being between 22-27 years. Most individuals have a diploma, and the working duration is fairly evenly distributed among the given ranges.

**Table. 1 Characteristic of respondents**

No	Characteristic	n	%
1	Gender		
	Men	99	92
	Women	9	8
2	Age		
	≤ 22 years	9	8
	> 22-27 years	44	41
	> 27-32 years	39	36
	> 32 years	16	15
3	Education level		
	Diploma	79	73
	Bachelor	25	23
	Master	4	4
4	Duration of working		
	< 1-3 year	29	27
	> 3-6 year	36	33
	> 6-9 year	27	25
	> 9 year	16	15

### Direct effect of independent variables to dependent variable

Table 2 described the direct effect of independent variables with dependent variables. The results found that;

- In sub structural analysis 1 yields a direct influence equation function  $Z=0.44(X1)$

$+0.63(X2)$  and the value of the determination coefficient shows a value of 0.58. The results explained that if self-efficiency and work attitude were increased by one unit, then work motivation would increase by 0.44 through self-efficiency and 0.63 through work attitudes, and both variables contributed by 58% in increasing work Motivation

- In sub-structural analysis 2, the resulting function of the direct influence equation is  $Y=0.30(X1) + 0.23(X2)+0.60(Z)$  and the value of the determination coefficient is 0.83. The results explained that if self-efficiency, work attitude and work motivation were increased by one unit, then the quality of nursing services would increase by 0.30 through self-efficacy, 0.23 through work attitudes and 0.60 through job motivation, and the three variables contributed by 83% in the improvement of service quality.

**Table 2. Direct effect of independent variables to dependent variable**

Structure	Direct effect	Coefficient	R <sup>2</sup>
Structure 1	Self-efficacy to motivation	0.44	0.58
	Attitude to motivation	0.63	
Structure 2	Self-efficacy to quality of nursing care	0.30	0.83
	Attitude to quality of nursing care	0.23	
	Motivation to quality of nursing care	0.60	

### Indirect effect of independent variables to dependent variable

Table 3 described the indirect effect of self-efficacy, attitude to quality of nursing care with the motivation as the intervening variables. The findings explained as below:

- In the analysis of indirect influence, found a line equation of  $0.26(X1)+0.37(X2)$  the equation described explains that work motivation intervened positively self-efficiency influence of 0.26, and a large

work attitude of 0.37 to the quality of service

- b. The total influence analysis found a path equation of  $0.56(X1)+0.60(X2)$  which means that if there is work motivation, then self-efficiency and work attitude will be higher improving the quality of nursing services than without the intervention role of job motivation.

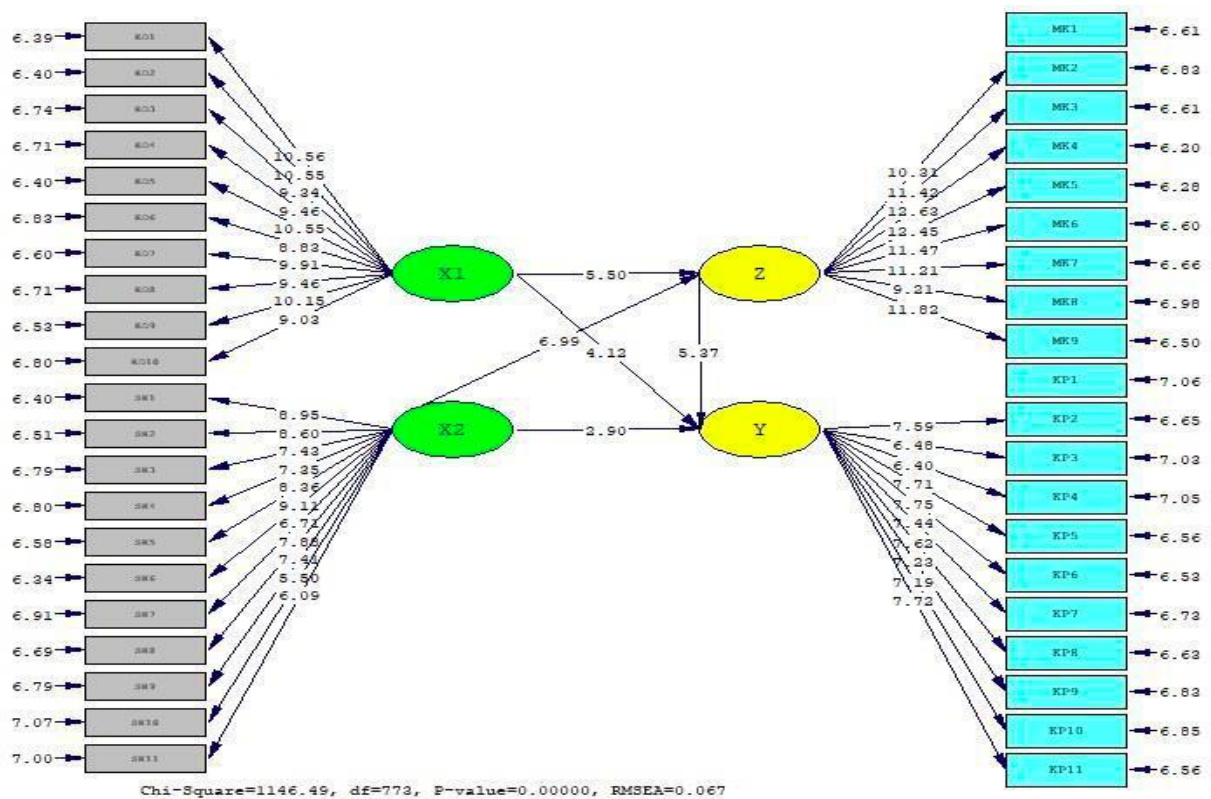
**Table 3. Indirect effect of independent variables to dependent variable**

Indirect effect	Coefficient	Total effect	p-value
Self-efficacy to motivation to quality of nursing care	0.26	0.56	0.000
Attitude to motivation to quality of nursing care	0.37	0.60	0.000

strong factors is good self–efficacy among healthcare provider.

Self-efficacy, defined as an individual's belief in their ability to execute behaviors necessary to produce specific performance outcomes, plays a crucial role in various aspects of healthcare delivery, including the quality of care provided to patients. The quality of care in healthcare settings is influenced by various factors, including the self-efficacy of medical professionals.

A study has demonstrated a positive correlation between healthcare professionals' self-efficacy and their performance, motivation, enthusiasm, and cooperative work attitudes (6). For instance, a study focusing on the nursing population found that an acceptable level of self-efficacy positively affects all aspects of nurses' general health, which is indirectly related to their ability to provide quality care (9).



## DISCUSSION

This study conclude that self-efficacy has positive effect on quality of care at private hospital, Ciledug-Tangerang. One of

This suggests that healthcare professionals with higher self-efficacy are more likely to engage in patient-centered service behaviors, contributing to improved quality of care.

The relationship between self-efficacy and quality of care is also mediated by other variables such as the social context and achievement motivation of medical professionals can influence their self-efficacy, which in turn affects their patient-centered service behavior (6).

Another finding demonstrated that the working attitude was significantly effect on quality of care. A positive attitude among healthcare workers can significantly impact their job performance, reduce accidents or unintentional incidents, and ultimately improve patient care.

A previous study described the Positive attitudes help healthcare professionals handle job stress more constructively and approach difficult situations more effectively, which are crucial for career advancement and maintaining a good reputation (10).

Another study found that safety self-efficacy is influenced by factors such as enactive mastery experiences, managers as safety role models, verbal persuasion, and safety priority. Moreover, standardization in healthcare settings can moderate the effects of safety self-efficacy on patient safety, suggesting that self-efficacy may serve as a "substitute-for-standardization" in promoting safe behaviors when not all processes can be standardized (11).

Additionally, Self-efficacy acts as a cognitive mediator that affects nurses' physical and psychological health statuses, and nurses with low self-efficacy may not be able to fully demonstrate their capabilities at work, potentially leading to poorer clinical outcomes (12).

A study conducted in Sharqia Governorate, Egypt, found that healthcare workers with higher educational levels and those who received patient safety (PS) training had better attitudes towards patient safety. This suggests that education and training play a critical role in shaping healthcare workers' attitudes towards safety, which in turn affects the quality of care (13).

The review also pointed out that nurse staffing levels and the work

environment can affect patient outcomes, suggesting that improving these aspects could enhance nurses' safety attitudes and, consequently, patient care quality (14)

Therefore, Positive attitudes and job satisfaction not only benefit healthcare professionals in their careers but also play a crucial role in enhancing patient safety and the overall quality of healthcare services. Positive attitudes and job satisfaction not only benefit healthcare professionals in their careers but also play a crucial role in enhancing patient safety and the overall quality of healthcare services.

Another factor such as working motivation also described the positive outcome on quality of care. Working motivation is indeed described as having a positive outcome on the quality of care in healthcare settings.

Motivation among healthcare professionals is influenced by both intrinsic and extrinsic factors, which in turn affect their work engagement and behaviors (15). When healthcare workers are positively motivated, they are more likely to be productive, exhibit better work-related behaviors, and have improved perceptions of quality (16).

Therefore, the motivation of healthcare professionals is a critical factor that influences the quality of care. Both extrinsic and intrinsic motivational factors contribute to work engagement and the behaviors of healthcare workers. Organizations that aim to improve the quality of care should focus on creating a motivating work environment that addresses both types of motivational factors

## CONCLUSION

The effects of self-efficacy and working attitude on the quality of services are significant, with working motivation serving as a critical intervening variable. Self-efficacy, which is the belief in one's ability to execute behaviors necessary to produce specific performance outcomes, has been shown to positively influence service quality. It does so by enhancing employees'



confidence, which in turn encourages proactive problem-solving and participation in performance improvement activities. A positive working attitude contributes to optimal job performance, patient safety, and reduced medical errors, all of which are essential for high-quality service delivery.

## IMPLICATION

The effects of self-efficacy and working attitude on the quality of services in hospitals are significantly moderated by working motivation. This underscores the importance of not only fostering the skills and attitudes necessary for high-quality service delivery but also the motivation to apply these attributes effectively. Hospitals should therefore focus on strategies that enhance all three factors to ensure the delivery of superior healthcare services.

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