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Evaluation of HRM Strategies to Enhance Nurse Performance at RSU Muhammadiyah Cirebon

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Abstract This study aims to evaluate human resource (HR) management strategies in enhancing nurse performance at the Muhammadiyah University of Cirebon General Hospital (RSU UMC). A qualitative research approach was employed, utilizing case study and phenomenological methods through in-depth interviews, observations, documentation reviews, and questionnaires. The findings reveal that HR strategies such as selective recruitment, continuous training, and performance evaluation have been implemented and have shown a positive impact on nursing competence and service delivery. However, several challenges remain that hinder the full effectiveness of these strategies. These include high workload pressures, training content that is not entirely relevant to daily practice, performance evaluations that focus mainly on quantitative measures, and an incentive system perceived as inequitable. Furthermore, poor interprofessional communication and uneven distribution of tasks further reduce job satisfaction and motivation among nurses, ultimately affecting the quality of patient care. These limitations indicate that the current HR strategy needs to be improved and made more responsive to the real needs faced in the field. Based on the results, this study recommends the development of a more integrated HR strategy that emphasizes needs-based and adaptive training, a comprehensive and balanced performance evaluation framework, and a fair reward system that values service quality over quantity. Such improvements are essential to foster a supportive and motivating work environment, leading to increased nurse performance, higher job satisfaction, and improved patient satisfaction. This research contributes valuable insights for hospital management in designing effective HR strategies in healthcare settings.

*Keyword*_HR management, nurse performance, training, performance evaluation, patient satisfaction

I. INTRODUCTION

Quality nursing services are fundamental to fulfilling patient expectations and adhering to professional healthcare standards (Gile et al., 2018). However, across various regions in Indonesia, including West Java, hospitals frequently face issues such as delayed patient responses, inefficient nurse-patient communication, and inconsistent care delivery. These shortcomings are closely linked to systemic deficiencies in human resource management (HRM) within hospital settings (Cogin et al., 2016). As healthcare demands increase and patient expectations evolve, effective HR strategies are needed to ensure both workforce readiness and patient satisfaction.

The role of HRM is particularly critical in the nursing profession, where employee engagement, workload distribution, and continuous professional development directly affect service quality. In Indonesia, staffing shortages, uneven training access, and weak incentive systems have been reported in both public and private hospitals. Muhammadiyah University of Cirebon General Hospital (RSU UMC), a teaching hospital, is no exception. Although the hospital has implemented initiatives such as On-Going Professional Practice Evaluation (OPPE) and communication-focused training, ongoing challenges including limited recruitment capacity, overburdened staff, and lack of structured qualitative feedback undermine the success of these HR efforts (Jing, 2018).

Previous research has shown that integrated HR strategies, which combine recruitment, development, appraisal, and reward systems, are crucial to enhancing nursing performance (Gunawan et al., 2019, Matsumoto, 2019). However, such strategies must be tailored to the specific operational and cultural contexts of each hospital. There is a lack of localized studies that comprehensively evaluate how HRM practices affect nursing outcomes in Indonesian teaching hospitals, particularly from the perspective of the nurses themselves. Moreover, while many hospitals rely on quantitative performance metrics, there is increasing recognition of the importance of qualitative indicators such as communication skills, and empathy in evaluating teamwork, clinical effectiveness (Boito, 2024, Taylor et al., 2015).

This study, therefore, aims to evaluate the effectiveness of HR management strategies at RSU UMC in improving nurse performance, with a focus on recruitment processes, training programs, performance evaluation systems, and incentive models. By adopting a qualitative approach, this research provides an in-depth understanding of how these strategies are perceived and experienced by nurses and HR staff. The findings are expected to offer actionable insights for hospital leaders and policymakers in designing HR systems that are adaptive, equitable, and performance-driven.

II. METHODS

To provide a clear foundation for the methodological approach adopted in this study, it is essential to first outline the underlying conceptual framework. The conceptual framework serves as a guide for understanding the relationship between the core variables and the direction of inquiry. The conceptual framework aims to evaluate the human resource management (HRM) strategy in improving nurse performance at the Muhammadiyah University of Cirebon General Hospital (UMC RSU). This study explores the relationship between HRM strategies, nurse performance, and the quality of healthcare services, with a focus on the perceptions and experiences of the informants. By examining how HRM components-such as recruitment, training, performance evaluation, and incentive systems-interact with nurse performance outcomes, the framework supports a comprehensive exploration of factors influencing healthcare delivery at the institutional level can be show in Figure 1.



Figure 1. Conceptual Framework

To ensure that this study can measure the variables in a systematic and objective manner, the following are the operational definitions for each variable investigated, which will be used in data collection and analysis, as presented in Table 1.

Concept	Operational Definition	Indicators	Instruments/Measurement Tools	Data Collection Techniques
HR Management Strategy	Management of healthcare personnel in hospitals through planning, recruitment, training, performance evaluation, and provision of incentives to improve nurse quality.	Recruitment process, continuous training, incentive system, nurse welfare policies.	Interviews, Observations, Documentation, Questionnaire	Semi-structured Interviews, Observation, Document Study
Nurse Performance	The outcomes achieved by nurses in delivering services in accordance with professional standards, in terms of competence, job satisfaction, and productivity levels.	Technical competence, job satisfaction, productivity, patient relations, complaint response.	Interviews, Observations, Performance Evaluation	Interviews, Observations, Document Study, Performance Appraisal
Training and Development	Programs provided by hospitals to improve nurses' skills and knowledge in line with evolving medical and technological needs.	Training frequency, training material relevance, impact on nurse performance.	Training reports, Interviews	Document Study, Interviews, Observation
Incentive and Welfare System	Policies on providing incentives that support nurse welfare, enhance work motivation, and ensure healthy work-life balance.	Bonuses, rewards, welfare policies, work-life balance system.	Interviews, Questionnaires	Interviews, Questionnaires, Document Study
Nurse Performance Evaluation	The process of measuring and assessing nurse performance, including effectiveness in delivering services according to hospital standards	Work quality assessment, rate of medical errors, SOP compliance, patient interaction.	Performance Evaluation, Performance Reports, Interviews	Observation, Interviews, Document Study

Table 1. Operational Definitions

Based on the data analysis in Figure 2, the researchers formulated conclusions that illustrate the extent to which human resource management (HRM) strategies have been implemented and their impact on improving nurse performance, as well as providing recommendations that can be applied to enhance HR policies at UMC General Hospital.



Figure 2. Research Flow

This qualitative study adopted a combined case study and phenomenological approach to explore human resource (HR) management strategies and their influence on nurse performance at RSU UMC. The selected approach enabled an in-depth understanding of real-world experiences and perceptions from key stakeholders, including nurses, head nurses, and HR managers, who are directly involved in HR policy implementation.

The research was conducted at RSU UMC, Jakarta, Indonesia, over a period from April to December 2025. Participants were selected using purposive sampling, targeting individuals with direct involvement in HR activities and a minimum of one year of work experience. The study involved the Head of HR, two Head Nurses, ten registered nurses, and two administrative staff members.

Data were collected using four primary techniques

- Semi-structured interviews to explore perspectives on HR strategies
- 2. Participant observation to document policy implementation in real-time
- 3. Document analysis of internal HR records and performance reports
- 4. Survey questionnaire to assess nurses' job satisfaction with existing HR practices.

The instruments included an interview guide focused on themes such as recruitment, training, evaluation, and recognition, an observation checklist, a document analysis protocol, and a structured questionnaire developed to evaluate various dimensions of job satisfaction. All instruments were pilot-tested prior to use.

To ensure data credibility, the study employed triangulation of data sources and methods, member checking for validation, and an audit trail documenting all research stages. These measures were taken to ensure the reliability and transparency of the data collection process.

Thematic data analysis was conducted following the Miles and Huberman framework, which includes data reduction, data display, and conclusion drawing. Themes were extracted and refined iteratively based on patterns identified across interviews, observations, and document reviews.

All participants provided informed consent prior to participation. The study ensured confidentiality and anonymity by assigning codes to respondents and restricting access to identifiable information. Ethical procedures were aligned with standard research ethics guidelines.

III. RESULT AND DISCUSSION

This study aims to evaluate the human resource management (HRM) strategy in enhancing nurse performance at the Muhammadiyah University of Cirebon General Hospital (UMC RSU). Data were collected through in-depth interviews with the Head of HR, Head Nurse, and several nurses, supported by observation, document analysis, and questionnaire distribution. Overall, the HRM strategies implemented at UMC RSU have positively contributed to improving nurse competence. However, several operational challenges still hinder their optimal impact (Mirera, 2020; Raj & Ling-Meng, 2024).

A. Recruitment Strategy and HR Quantity Challenges

According to the HR Head, UMC RSU conducts selective recruitment processes involving written exams and interviews to ensure that incoming nurses meet competency and qualification standards. This aligns with best practices in healthcare HRM that emphasize merit-based recruitment (Mirera, 2020). Despite this, the number of nurses remains inadequate to meet patient volume demands, resulting in work overload. Research shows that inadequate staffing levels can negatively impact care quality and staff well-being (James et al., 2019,Zainafree et al., 2025). A survey found that 75% of respondents reported excessive workloads, contributing to job dissatisfaction and diminished service quality.

While selective recruitment strategies like written exams and structured interviews ensure a standard of professional competence, they may fall short in meeting immediate workforce demands in healthcare. Hospitals must align recruitment efficiency with quality to respond to rapidly increasing patient volumes. Rigid hiring pipelines can delay staff onboarding, thereby exacerbating nurse shortages and resulting in burnout. As Ployhart (2006) noted, staffing in complex environments requires a shift toward strategic agility that supports both short-term needs and long-term human capital planning. Without a more responsive HR framework, hospitals risk operational inefficiencies despite maintaining high recruitment standards.

Additionally, global competition for nursing talent continues to strain institutional capacity to attract and retain qualified professionals. Williamson and Burog (2022) emphasize that sustainable staffing requires more than recruitment it demands comprehensive support systems that include incentives, career development, and work-life balance initiatives. Furthermore, Buchan and Aiken (2008) argue that policy-level reforms, such as international workforce cooperation and governmentbacked retention programs, are essential to mitigate chronic staffing deficits. Hospitals that fail to adapt may

experience diminishing care quality and rising attrition rates. This highlights the need for integrated strategies that combine institutional, national, and global perspectives on workforce planning.

B. Ongoing Training and Material Mismatch

Continuous training is integral to professional nursing development. UMC RSU organizes regular training in communication, emergency care, and quality management. Over 70% of nurses found the training useful for improving technical skills. However, the training content often fails to address practical field needs and is not accessible to all nurses, especially those on night shifts or in emergency units. Studies emphasize the importance of flexible, modular training systems, including online delivery to accommodate rotating shift work (Banakhar et al., 2018, Raj & Ling-Meng, 2024).

C. Performance Evaluation and Lack of Qualitative Feedback

Performance evaluation at UMC RSU is conducted periodically but is mostly focused on quantitative indicators such as patient load and attendance. Many nurses expressed dissatisfaction, noting that aspects like empathy, communication, and teamwork are neglected. Feedback is rarely personalized or constructive. A holistic performance management model is needed—one that integrates qualitative measures and facilitates professional development (Boito, 2024, Sims, 2024). Such models have been shown to improve employee motivation and retention in hospital settings.

Relying solely on quantitative metrics such as patient throughput or attendance to evaluate nurse performance risks overlooking essential aspects of care, including communication, and empathy, collaboration. Α comprehensive performance evaluation should integrate qualitative feedback to support reflective learning and strengthen professional growth. Research shows that nurses respond positively to personalized and constructive feedback, which fosters both motivation and retention (Taylor et al., 2015). Without this holistic approach, nurses may feel undervalued, especially when their interpersonal skills or emotional labor are ignored. Qualitative feedback can act as a powerful mechanism to reinforce core nursing values and improve patient care outcomes.

Moreover, the exclusion of non-quantifiable competencies from formal assessments contributes to a workplace culture that undervalues intrinsic motivation. Kaiser (2005) found that top-performing nurses were more likely to stay in organizations that recognized their efforts through meaningful, tailored feedback. Similarly, Li et al. (2022) argued that overemphasis on metrics such as payfor-performance can lead to dissatisfaction if not complemented with supportive and developmental appraisal practices. Integrating structured qualitative assessments into performance evaluations can lead to a more engaged workforce and reduce turnover. Ultimately, this shift enhances both individual fulfillment and organizational resilience in healthcare environments.

D. Incentive System That Under-Rewarding Quality

The hospital's incentive system primarily rewards nurses based on working hours and patient numbers. Around 60% of nurses reported dissatisfaction with this model, as it does not account for the quality or complexity of care provided. Nurses felt that their dedication, especially in critical cases, went unrecognized. A performance-based incentive system that incorporates qualitative service indicators is more effective in sustaining motivation (Al-Qathmi & Zedan. 2021, Ukponahiusi & Ahuru, 2024). According to Two-Factor Theory, recognition and Herzberg's meaningful rewards are key motivators that influence job performance (Raj & Ling-Meng, 2024).

Incentive systems that prioritize quantitative metrics such as hours worked or number of patients treated often fail to recognize the nuanced and emotionally demanding aspects of nursing care. These models may unintentionally devalue the critical thinking, empathy, and patientcentered efforts that define high-quality healthcare. Nurses caring for critically ill patients or managing complex clinical situations often exert greater cognitive and emotional labor without receiving proportional recognition. According to Herzberg's Two-Factor Theory, intrinsic motivators such as recognition, achievement, and meaningful work significantly impact job satisfaction and performance (Raj & Ling-Meng, 2024). Therefore, failing to reward quality may not only diminish motivation but also increase turnover among highly committed nursing staff.

Introducing performance-based incentive systems that include qualitative indicators—such as patient feedback, teamwork, and clinical outcomes—can drive a more holistic approach to nurse motivation. Al-Qathmi & Zedan (2021) suggest that aligning rewards with quality care outcomes leads to improved service delivery and staff morale. Similarly, Ukponahiusi & Ahuru (2024) emphasize that non-financial recognition, like professional development opportunities and public acknowledgment, also enhance engagement. These qualitative measures support a culture of appreciation and foster a deeper connection between nurses and their roles. Thus, integrating both quantitative and qualitative performance metrics is key to sustaining long-term motivation in hospital settings.

E. Communication and Workload Distribution

Poor communication between nurses, physicians, and administrators was frequently cited as a barrier. Misinformation and unclear task delegation increase procedural errors and jeopardize patient safety. Additionally, some nurses carry significantly heavier workloads than others. This inequity leads to frustration, fatigue, and burnout. According to Wong (2024), effective communication and workload balancing are essential for creating a safe and productive hospital environment.

Ineffective communication among healthcare teams—particularly between nurses, physicians, and administrators—can compromise both patient safety and

staff cohesion. When task delegation is unclear, procedural errors become more likely, increasing the risk of adverse events. Poor communication is also linked to greater stress among staff and a deteriorating work environment. According to Pérez-Francisco and Duarte-Clímets (2020), standardized communication protocols and balanced workloads significantly enhance care coordination and safety. Structured dialogue and shared understanding are essential for reducing operational ambiguity and ensuring accountability in care delivery.

Workload imbalance further exacerbates burnout, especially when some nurses bear disproportionate responsibilities compared to others. This uneven distribution not only causes physical exhaustion but also fosters resentment and disengagement. Purnawati and Martiana (2020) highlight that burnout correlates strongly with ineffective communication and inequitable task distribution. Similarly, Al Ma'mari and Sharour (2020) found that the combination of fatigue, heavy workloads, and a lack of supportive dialogue among staff negatively impacts patient safety culture in critical care units. For hospitals to sustain safe and productive environments, communication and workload equity must be treated as interdependent priorities.

F. Relationship Between HR Strategy and Nurse Performance

HR strategies such as structured recruitment and regular training have successfully improved technical competencies. However, limitations in evaluation systems and the lack of performance-based incentives reduce their overall effectiveness. Herzberg's theory supports the view that intrinsic motivators—like appreciation and meaningful feedback—drive employee satisfaction and improve outcomes (Feng & Tsai, 2020, Raj & Ling-Meng, 2024).

strategies-particularly Effective HR those emphasizing structured recruitment and regular traininghave been shown to enhance nurses' technical skills and job readiness. However, without comprehensive evaluation systems and appropriate incentives, the longterm impact of these strategies is diminished. Gunawan et al. (2019) argue that HR frameworks must integrate performance appraisal, motivation, and staff development to sustain professional excellence. Likewise, recruitment alone does not ensure retention or motivation unless followed by continuous feedback and growth opportunities. Thus, a fragmented HR system may lead to stagnation in nurse performance despite initial competence.

Furthermore, hospitals that implement competencybased HR systems, including performance-based recognition, report stronger organizational outcomes. Misfeldt et al. (2014) highlight the importance of aligning incentives with professional development goals to improve care delivery and employee satisfaction. Incentives—both monetary and non-monetary—must be meaningful and directly linked to the quality of care provided, not just quantitative targets. Matsumoto (2019) also emphasizes that strategic HR planning should include cultural and psychological motivators, which reinforce Herzberg's notion of intrinsic satisfaction. Consequently, the synergy between strategic HR practices and motivational design is critical for maximizing nurse engagement and performance.

G. Nurse Satisfaction and Implications for Patient Satisfaction

Nurse job satisfaction is strongly linked to patient satisfaction. Survey results indicate that while about 65% of nurses are generally satisfied with their environment, many voiced concerns about workloads and compensation. Burnout and lack of recognition can reduce attentiveness and empathy, undermining patient experiences and increasing the likelihood of errors. A well-rounded HRM approach should aim to create a balanced and supportive ecosystem that benefits both staff and patients (Melanson, 2024, Swedana, 2023).

Nurse satisfaction significantly influences the overall quality of care and the experiences patients report. When nurses are satisfied with their work environment, feel recognized, and experience manageable workloads, they are more attentive, empathetic, and committed to patientcentered care. Karaca and Durna (2019) found a strong correlation between nurses' job satisfaction and patients' perception of care quality, particularly in areas such as responsiveness and communication. On the contrary, burnout and unmet expectations reduce the emotional engagement nurses bring to their roles. This emotional disconnect can translate into poorer patient outcomes and lower satisfaction ratings.

Moreover, job dissatisfaction among nurses is often linked to increased turnover and absenteeism, which disrupt continuity of care and contribute to higher error rates. Mrayyan (2006) emphasized that when nurses feel overburdened or underappreciated, their performance and, by extension, patient care—deteriorates. Studies by Kvist et al. (2014) also reinforce that patient satisfaction scores are higher in units where staff morale is strong and supported by organizational culture. Therefore, to improve patient satisfaction, healthcare organizations must prioritize nurse well-being through strategic HR practices, adequate staffing, and recognition mechanisms. A satisfied nursing workforce is essential to sustaining high-quality, compassionate care.

IV. CONCLUSION

Although the strategies implemented have had a positive impact on nurse performance and the quality of services, there are still several areas that need improvement in order to more optimally achieve the goal of enhancing nurse performance.

The recruitment strategy implemented at RSU UMC is considered quite good, with a transparent and competency-based selection process. This process is deemed effective in recruiting nurses who meet the required qualifications. However, the main issue identified is the imbalance between the number of available nurses and the workload that needs to be handled. The excessive

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workload causes nurses to feel exhausted, which affects the quality of care provided to patients. Therefore, despite the successful recruitment process, the limited number of nurses remains a major obstacle in HR management and needs more serious attention.

In addition, the ongoing training programs implemented at RSU UMC have had a positive impact on enhancing nurses' competencies, particularly in communication and handling emergency situations. However, the challenges encountered include the infrequency of training sessions and the misalignment of training materials with the real challenges faced by nurses in the field. Most nurses suggested that training should be held more frequently and focus more on practical skills directly relevant to their work. Some nurses, especially those working night shifts, reported difficulties in attending the available training sessions. Therefore, the hospital needs to adjust the training schedule to be more flexible and better suited to the needs of nurses in the field. The hospital's performance evaluation of nurses is conducted periodically but tends to focus more on quantitative aspects such as attendance and productivity.

This approach overlooks important aspects such as the quality of nurse-patient interactions and interpersonal skills. A more comprehensive evaluation focusing on service quality would be more effective in improving nurse performance. Furthermore, providing more constructive feedback to nurses regarding areas for improvement is also essential in supporting their professional development.

The incentive system implemented is also one of the factors influencing nurses' work motivation. However, based on survey results, the majority of nurses feel that the incentives prioritize the quantity of work—such as the number of patients handled or working hours—without taking into account the quality of care provided. Therefore, improvements are needed in the incentive system to make it fairer and to reward nurses who demonstrate good performance, particularly in terms of service quality and patient interaction.

Overall, although RSU UMC has implemented various positive HRM strategies, there are still several issues that need to be addressed. Uneven workload distribution, infrequent training, and an unfair incentive system are the main challenges that must be resolved. If these issues can be addressed, the quality of services at RSU UMC will continue to improve, and nurse performance will be optimized, which in turn will enhance patient satisfaction and nurse well-being.

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