RELATED FACTORS WITH BURNOUT ON NURSE TREAT STAY AT HOSPITAL

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Abstract. A condition known as burnout in nurses can result in a decline in the energy level and output of inpatient nurses. At Kumala Siwi Mijen Kudus Hospital, there are cases of work accidents every year, specifically cases of being punctured by needles. These accidents happen frequently each year and are probably caused by variables related to job exhaustion. The goal of this study was to examine the variables linked to inpatient nurses' work tiredness. -According to the study's findings, age and burnout are not correlated (p-value (0.464) > 0.05). Burnout and sex have no link; p-value (0.644) > 0.05. Burnout and work shifts do not correlate; p-value (0.381) > 0.05. Burnout and nutritional state had a significant association (p-value (0.014) 0.05). Burnout and nutritional state had a significant association (p-value (0.014) 0.05). Burnout and work duration had a significant link; p-value (0.005) 0.05. The study's findings suggest that the length of work and nutritional status are the factors that contribute to burnout in inpatient nurses.

Keywords: Burnout, Risk Factors, Inpatient Nurse.

INTRODUCTION

According to the Republic of Indonesia's Minister of Health's Decree from 2004: "A hospital is a health service facility, a gathering place for sick and healthy people, and can be a place for disease transmission and allows for environmental pollution and health problems." efforts to reduce the risk of occupational diseases and even accidents at work depending on the type of employment so that Hospital Occupational Safety and Health (K3RS) is required.

Workplace accidents frequently happen due to a variety of factors. Work tiredness is one of them, and it can happen because it depends on a number of factors, including workload, age, work shift, gender, years of service, and others. The body's defense strategy against fatigue is tiredness (Tarwaka,2014).

There are cases of workplace accidents in several areas, Kudus Regency being one of them. The number of work accident cases in Kudus Regency increased from the year before when there were 823 instances, to 1,014 in 2015 (Anwar & Sugiharto, 2018).

One internal component that contributes to work weariness is age, which affects how well one's body functions as one ages and makes it easier to feel tired at work. FW Astuti et al. (2017) researched nurses at RSJD Dr. Amino Gondohutomo Semarang. According to the results, there was a 90.9% greater risk of work burnout among older nurses than among younger ones (58.3%).

Because family support serves as a buffer against job stress, it also plays a role as an internal element in the development of work burnout and tiredness. This assistance is required to promote greater psychological well-being since it will foster feelings of belonging, higher self-esteem, clarity of self-identity, and positive self-perceptions (Ramdan & Fadly, 2016).

To adhere to the 24-hour/day schedule, shift work, which involves working at the same place but at various times, can be performed more than once. Because hospitals are required to provide 24-hour care, this can cause nurses to become overworked (Aini, 2019). In the inpatient rooms of RSU GMIM Bethesda Tomohon, Anguw et al. (2016) looked at disparities in degrees of work weariness among nurses working the morning, evening, and night shifts. They found that the morning work shift had the highest distribution of exhaustion and moderate levels of fatigue.

The length of work is the period that a workforce is employed somewhere, and it also includes external elements that contribute to work tiredness. According to Wijono (2012), 20% (9.6 hours) of the total working hours should be devoted to productive work, leaving 80% (38.4

hours) for other tasks. According to research from LY Astuti et al. (2020), an overview of the length of nurses' working hours in the internal medicine inpatient room of the Ambarawa General Hospital was found to be 420 minutes in 21 respondents (52.5%), 360 minutes in 10 respondents (25.0%), and 660 minutes in 9 respondents (22.5%). However, the study's findings still support the classification of working hours as accounting for more than 80% of total labor time.

Workload is another element that contributes to job tiredness; this can happen as a result of various physical tasks or excessive workloads. The workload is a task that must be finished by employees in a specific amount of time using their abilities and potential (Munandar, 2014).

Even if under these circumstances, modest nutritional status still affects work performance and concentration, undernutrition and excess nutritional status have a negative impact on workers' health. Cross-tabulations between nutritional status and work weariness in Suryaningtyas and Widajati's (2017) study yielded 3 categories with findings, and 6 (28.30%) workers with obese nutritional status reported feeling fatigued. 7 (33.30%) workers experience reduced fatigue when their nutritional status is normal. All employees who are undernourished or thin also experience excessive fatigue.

Kumala Siwi General Hospital is a type D hospital located in Mijen Village, A type D hospital called Kumala Siwi General Hospital is situated in Mijen Village, Kaliwungu District, Kudus Regency. Every year, there are a number of occurrences of workplace accidents involving nurses at Kumala Siwi Hospital. The researchers' preliminary analysis revealed that nurses who were pricked by needles experienced work mishaps. Worker weariness is most likely to blame for the substantial number of work accidents that happen each year. According to Pangalila et al. (2017)'s research findings, 58.2% (46) of nurses who were pricked by needles due to work exhaustion had workload as a contributing factor.

The association between age, shift, length of work, workload, and nutritional status on work tiredness among inpatient nurses at Kumala Siwi Hospital in Kudus piqued researchers' curiosity given this context.

METHODS

38 respondents make up the population of this analytical study's cross-sectional design. A questionnaire was utilized as the study's instrument, and univariate and bivariate data analyses were also used. The association between age, work shift, length of work, workload, and nutritional status that affects work weariness with inpatient nurses is examined in this study using univariate analysis. In this study, bivariate analysis was used to use the Chi-Square test to determine the association between the two independent and dependent variables. According to statistical computations, there is a relationship between the independent factors and the dependent variable if the p-value is less than 0.05 and is 0.05 at the 95% confidence level. The Fisher Exact Test is used if the 2x2 table is determined to have an expected value of less than 5, and the Pearson Chi-Square test is used if the table is larger than 2x2 (Santoso, 2013).

RESULTS AND DISCUSSION

Results

Univariate analysis

The results of the univariate analysis of work fatigue factors for 38 inpatient nurses at Kumala Siwi Mijen Kudus General Hospital can be seen in Table 1.

Table 1 Univariate Analysis

Variable	F	Percentage (100%)
Age		
Less than 30	21	55,3
More than 30	17	44,7

Gender		
Man	6	15,8
Woman	32	84,2
Shift work		
Morning	15	39.5
Afternoon	14	36,8
Evening	9	23,7
Nutritional status		
Not enough	3	7,9
Normal	27	71,1
More	8	21,1
Workload		
Low	0	0
Currently	0	0
Tall	38	100
Length of working		
<1 Year	3	7,9
1-5 Years	17	44,7
6-10 Years	18	47,4
Family Social Support		
Not very supportive	0	0
Support	38	100
Fatigue Scale		
Low	18	47,3
Tall	19	50
Currently	1	2,7

Table 1's bivariate analysis research findings demonstrate that: Age displays the age distribution, which reveals that 21.3% of respondents were under the age of 30. While 17 people, or 44.7%, were over 30, that figure was lower. Regarding the gender breakdown, it can be noted that there are 32 women, or up to 84.2% of the population, as opposed to 6 men, or up to 15.8%. Work Shift displays the distribution of work shifts; it can be observed that the morning shift accounts for 15 or up to 39.5% of the total, the work shift accounts for 14 or up to 36.8%, and the work shift accounts for 9 or as much as 23.7%.

The distribution of nutritional status is shown by nutritional status, which reveals that malnutrition status is 3 or as much as 7.9%, normal nutritional status is 27 or as much as 71.1%, and the night shift is 8 or as much as 21.1%. Workload reveals that the heavy workload category had 38 responders overall and a percentage of 100%. Length of Work displays the distribution of length of work, which may be observed as 3 or as much as 7.9% for work lasting under a year, 17 or as much as 44.7% for work lasting between 1 and 5 years, and 18 or as much as 47.4% for work lasting between 5 and 10 years.

Family Social Support displays the distribution of family social support; it can be seen that 38 families, or 100%, receive support. The distribution of mild tiredness scale is 18 (47.3% presentation), moderate fatigue is 19 (50%) and excessive fatigue is 1 (2.7% presentation), according to the tiredness Scale.

Bivariate Analysis

Age, gender, work shift, nutritional status, and length of work are the results of a bivariate study of work tiredness factors for inpatient nurses at Kumala Siwi Mijen Kudus General Hospital; workload and family social support factors cannot be evaluated since they produce different results. constant. Table 2 shows the statistical outcomes of the chi-square test for bivariate analysis.

Table 2. Bivariate Analysis

Variable	Fatigue Scale						*p-value*
	Low	**N**	**Currently**	**N**	**Tall**	**N**	
Age							
<30	28.9 %	11	26.3 %	10	0.0 %	0	0.464
> 30	18.4 %	7	23.7 %	9	2.6 %	1	
Gender							
Man	5.3 %	2	10.5 %	4	0.0 %	0	0.644
Woman	42.1 %	16	39.5 %	15	2.6 %	1	
Shift work							
Morning	15.8 %	6	23.7 %	9	0.0 %	0	0.381
Afternoon	21.1 %	8	15.8 %	6	0.0 %	0	
Evening	10.5 %	4	10.5 %	4	2.6 %	1	
Nutritional status							
Not enough	2.6 %	1	2.6 %	1	2.6%	1	0.014
Normal	36.8 %	14	34.2 %	13	0.0%	0	
More	7.9%	3	13.2%	5	0.0%	0	
Length of Work							
< 1 year	5.3%	2	0.0%	0	2.6%	1	0.005
1-5 years	15.8%	6	28.9%	11	0.0%	0	
6-10 years	26.3%	10	21.1%	8	0.0%	0	

Table 2's results from the bivariate analysis of the chi-square statistical test show that age has a p-value> 0.05, or 0.464, indicating that there is no relationship between the age factor and the factors that affect work fatigue because the factor value exceeds the p-value. The gender factor does not significantly relate to the factors that cause job tiredness, according to the gender factor's p-value of >0.05, or 0.644.

Work Shift has a p-value> 0.05, or 0.381, indicating that there is no significant link between the work shift factor and the variables affecting work tiredness. The nutritional status factor exhibits a substantial link to the variables that affect job weariness, as indicated by its p-value of 0.05, or 0.014. With a p-value of 0.05, or 0.005, the length of the task has a significant association with the variables influencing work tiredness.

Discussion

In this study, data was collected using a questionnaire and analyzed using univariate and bivariate data using the chi-square statistical test. Respondents were taken as a total sampling of inpatient nurse workers at Kumala Siwi Mijen Kudus General Hospital as many as 38 respondents, to determine the relationship of factors to work fatigue. The factors studied are:

1. Age

The age factor has statistical results that exceed the *p-value* of 0.464 which indicates that the age factor has no significant relationship to the factors that affect work fatigue. Most likely because the age factor has no effect because the nurse is still relatively young. In this study, according to the research by Sari *et al.* (2020) , which states that there is no relationship between age, history of illness, and years of service to work fatigue as indicated by a *p-value* that exceeds the standard at the age of 0.544. Table 9 shows that there is a fatigue scale for those aged less than 30 who have a low fatigue scale with a percentage of 28.9% and those over 30 have a moderate fatigue scale with a percentage of 23.7%.

Because they are the main duty and are most likely to become the backbone of the company, employees over the age of 45 have a larger percentage of employees who are fatigued

and still doing their jobs, according to Juliana et al. (2018). Work productivity will also diminish with age. The results of this study are in line with those of Melati's (2013) study, which used a sample size of 32 people and the chi-square statistical test to show no relationship between age and work exhaustion in workers.

2. Gender

The statistical test result for the gender component is 0.644. Given that the gender factor's value exceeds the p-value, this demonstrates that the gender factor has no discernible relationship to the elements that affect job tiredness. Given that there are no differences in the responsibilities of male and female nurses, the gender component likely has no impact on job tiredness.

The findings of this study are consistent with the findings of Chesnal et al. (2014), who found no significant link between gender and job tiredness, with a p-value of 0.922 ($p > 0.05$). On average, women have 2/3 the physical strength or muscular mass of men, however in some circumstances, women are more cautious than men, claims Tarwaka (2010). Because female nurses made up the majority of responders at Kumala Siwi Mijen Kudus General Hospital, women made up a bigger percentage of the study's sample.

3. Shift Work

The work shift factor in this study has a *p-value*> 0.05, namely 0.381. Based on the results show that the work shift factor has no significant relationship to the factors that affect work fatigue. because the value of the work shift factor exceeds the p-value. This will likely occur due to the work shift factor at Kumala Siwi General Hospital which does not have the potential to affect work fatigue because nurses work according to their shifts. In this study, it is by previous studies which stated that the work shift factor did not affect work fatigue with a *p-value*> 0.644 (Faiz, 2014) . The nurse's work shift is divided into 3 work shifts, namely morning, afternoon, and evening so that the work shift does not influence the implementation of occupational health and safety because the rotation and distribution of work shifts have been regulated (Patrisia, 2018) . Research by Mallapiang *et al.* (2016) , also showed that the statistical test using the chis quare obtained a value of P = 0.875 (p> 0.05) which means that Ha is rejected with Ho accepted, with the interpretation that there is no relationship between work shifts and work fatigue of emergency room nurses at Haj Hospital Macassar.

4. Nutritional Status Factors

The chi-square statistical test on the nutritional status factor stated that it had a relationship to work fatigue, which was indicated by a *p-value* <0.05, namely 0.014. Because the average nurse has fulfilled her nutritional status. The SPSS statistical results in this study are by the research of Aisyah & Basri K (2018) , stating that there is a relationship between nutritional status and work fatigue with a value of 0.005 (*p-value* <0.05) in workers and there is a fairly strong relationship with the *Spearman correlation* (SC) value = 0.485. Nutritional status has a relationship with work fatigue because in doing work the condition of the body requires energy, if you have poor energy, work capacity will be disrupted (Tarwaka, 2004) . Nutritional status in this study was calculated using BMI, with weight and height measurements entered into the formula for data analysis and results compared with the standards set by the Minister of Health of the Republic of Indonesia (2004) . The relationship between nutritional status and work fatigue is also in accordance with the research of Paulina and Salbiah (2016) , which states that there is a significant relationship between nutritional status and work fatigue with a value of p = 0.016.

5. Workload Factor

38 responders have a high workload category with a proportion of 100%, according to the workload factor. as nurses are required to do their duties by hospital policies. This is in line with Padila and Andri's research from 2022, which also found that a high level of skill necessary, a high level of dexterity required, and a high volume of labor contributed to the high

workload category. According to Mulfiyanti's research, 43.1% of nurses reported feeling extremely fatigued despite having a 61.6% workload.

6. Length of Work Factor

The length of work factor had a p-value 0.05, or 0.005, according to the study's findings from the chi-square statistical test. because performing the same work every day could make nurses feel bored. Because the value of the length of the work factor does not exceed the p value, this demonstrates that the length of work factor has a substantial relationship to the components that affect job tiredness. The study's findings are consistent with those of earlier studies published in publications with statistical p-values of 0.016 or lower. The probability of feeling severe work tiredness increases with the length of employment, which can result in declining workers (Nur et al., 2020).

7. Family Social Support Factors

The results of the chi-square statistical test on the family social support factor had a *p-value*> 0.05, namely 0.834, which stated that it had no relationship to work fatigue. Because nurses get good support from their families so they don't feel pressured in doing their jobs. These results are consistent with previous research by Harnida (2015) which stated that the relationship between family social support and burnout in nurses was not proven, meaning that the level of social support received by nurses had no effect. Social support influences individual health by providing protection against negative high levels of stress and strengthening family social support reducing or minimizing the effects of events that have the potential to cause *burnout* . Family support can be in the form of providing information, behavioral assistance, or material obtained from close social relationships that can make individuals feel cared for, loved, and valued (Kendall Hunt, 2011)

CONCLUSION

Indicates that there is no association between age and burnout P value (0.464). Burnout and gender have no link, according to the p-value (0.644). Burnout and work shift have no link, according to the p-value (0.381). Burnout and nutritional state had a significant association (p = 0.014). Working time and exhaustion are significantly correlated (p-value, 0.005).

Advice

The need to continue studying despite topic fatigue work that involves capability, stress Workplace accident or incident risk factors.

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