WORKLOAD AND EMOTIONAL INTELLIGENCE OF NURSES IN THE PARTITION ROOM OF SUNAN KUDUS ISLAMIC HOSPITAL

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Info Article		Abstract
		Health workers dedicate themselves to the health sector, have knowledge, skills and education, and require authority to carry out health efforts (Law No. 36 of 2009). Increasing health costs should be balanced with efforts to improve the quality of health services, especially for health workers in hospitals. Knowing the relationship between nurse workload and nurses' emotional intelligence in the inpatient room at Sunan Kudus Islamic Hospital. This research uses a cross-sectional quantitative research approach; the independent variable is workload, and the dependent variable is emotional intelligence. The location is in the RSI Kudus inpatient room, with a total sample of 66 nurses, with side sampling probability sampling based on the inclusion and exclusion criteria. Time of research in June 2022. The instruments used are the Emotional Intelligence Questionnaire courtesy of NHS London. Data analysis using tests spearman rho. Spearman Rho test obtained P value = 0.027 < 0.05 and has a correlation coefficient value of -0.272, which means that the strength correlation/relationship between workload and emotional intelligence is reasonably strong and has a negative relationship direction. There is a Relationship between Workload and the Emotional Intelligence of Nurses in the Inpatient Room at Sunan Kudus Islamic Hospital. Increasing the number of nurses per room is necessary to minimize the high workload.

I. INTRODUCTION

Health workers dedicate themselves to the health sector, have knowledge, skills and education, and require authority to carry out health efforts (Law No. 36 of 2009). Increasing health costs should be balanced with efforts to improve the quality of health services, especially for health workers in hospitals. In hospitals, the most significant number of professional health workers and those at the front line of hospital services are nurses (Novia, 2018).

Nurses are the spearheads of operational activities in health services, hospitals, and health centres. Therefore, nurses are required to work effectively and professionally in serving patients. The Directorate of Nursing Service Development of the Ministry of Health of the Republic of Indonesia stated that patient satisfaction is an important indicator of the quality of health services. Nurse participation significantly contributes to the success of health services by providing quality services to patients, so patient satisfaction with health services is greatly influenced by the quality of nursing services (Novia, 2018).

To determine nurses' emotional intelligence levels, researchers distributed questionnaires to 10 nurses in the Saad room. The results obtained from distributing the questionnaire were that, on average, nurses had a medium self-awareness average score,

a moderate emotional management average score, a high average motivation score, a high average empathy score, and a medium social skills average score. Emotional intelligence helps nurses to understand the emotions that occur both in themselves and others.

By understanding the importance of emotional intelligence, nurses can manage. They can recognize their emotions well and provide more positive service to patients and their families than nurses who cannot. By having high emotional intelligence, nurses can improve their performance and become more resistant to the mental and emotional fatigue experienced at work. This research aims to analyze nurses' workload and emotional intelligence in the inpatient room at RSI Sunan Kudus.

II. RESEARCH METHODS

This research uses quantitative research with a correlation analysis method, which is a research used to determine the relationship and level of relationship between two or more variables without influencing these variables (Hendriana & Kadarisma, 2019)

This type of research used correlational analytics with a cross-sectional approach. The independent variable is workload, and the dependent variable is emotional intelligence. The research involved 79 nurses in the inpatient room at RSI Sunan Kudus in June 2022. The sample in this study was all 66 nurses using the total technique. *probability sampling*, who have met the inclusion criteria: Nurses on duty in the inpatient ward at RSI Sunan Kudus; Willing to be a respondent; Not on leave. Meanwhile, the exclusion criteria are on leave, nurses who dropped out/resigned from participating in research, and nurses who were still interns. The instruments used in the research include: 1. Workload uses a questionnaire from Nursalam's book with 13 standard questions. 2. Emotional intelligence using instrument sheets: The *Emotional Intelligence Questionnaire* belonging to NHS London was adapted from Novia's research. The research was carried out for 7 months.

Starting in June 2022. In the research process, researchers provided questionnaire questions in the form of a checklist about how workload is related to the emotional intelligence of nurses carrying out nursing actions. The data analysis used to test the independent and dependent variables is *Cronbach alpha* with a significance level of n α ≥ 0.6. Ethics in this research include; consent form, anonymity, confidentiality, fairness, *beneficence* And *normal efficiency*.

III. RESULTS AND DISCUSSION

A. Respondent Characteristics

Table 1 Characteristics of respondents (n=66)

Characteristics	f	%
Age		
20-26	17	25,8
27-33	22	33,3
34-40	14	21,2
41-47	7	10,6
48-54	6	9,1
Gender		
Man	21	31,8
Woman	45	68,2
Education		
Nursing Diploma	17	25,8
Nursing Profession	49	74,2
Nation/space		
Abu Bakr	7	10,6
Umar	8	12,1
Uthman	7	10,6
Ali	9	13,6
Saad	17	25,8
Talk	11	16,7
ICU	7	10,6
Total	**66**	**100**

Source: Primary Data, 2023

Based on Table 1 above, it can be seen that the most significant number of respondents aged 27-33 years was 22 respondents (3 respondents on gender, and it can be stated that 45 respondents (68.2%) were female. Based on educational data, most nurses were educated as nurses, with 49 respondents (74.2%). Based on the ward, the most respondents, namely respondents in

Bangsal Saad, had 17 respondents (25.8%). This statement is supported by previous research that in terms of age, research shows that the nurse's age is related to the level of anxiety experienced. Nurses aged 41-50 years tend to be more susceptible to experiencing anxiety compared to nurses aged 31-40 years.

This may be due to increased responsibilities and workload with age. Apart from that, the characteristics of the respondents were 45 female respondents (68.2%) and 21 respondents (31.8%) male, who women dominated. Gender also plays a role in nurses' emotional condition. Studies find that female nurses are more susceptible to stress and anxiety than male nurses. Differences in responses to stress between men and women can cause this. According to (Hermanto, 2021), then in terms of education, there were 17 respondents (25.8%) respondents with D3 nursing education and 49 respondents (49.2%), where the Diploma education level was dominated by previous research (Prastike, 2022).

A nurse's education level can influence mental workload. Nurses with more education may have better time management skills and knowledge, reducing mental workload. Research shows that there is a relationship between the level of education and the mental workload of nurses. Another explanation is that nurses with a D3 Nursing education tend to experience lower anxiety compared to nurses who have a Bachelor's degree in Nursing or Nursing. This may be related to differences in responsibilities and work expectations based on education level (Prastike, 2022).

From these data, most respondents have a moderate workload. Respondents in this study consisted of nurses from 7 treatment rooms/wards, of which only a few nurses were taken for research, including 7 respondents from the Abu Bakar Room, 8 respondents from the Umar Room, 7 respondents from the Utsman Room, 9 respondents from the Ali Room, 17 respondents from the Saad Room, 7 respondents from the ICU Room, and 11 respondents from the Talkhah Room. The

results of the questionnaire showed that respondents' average high workload score was the statement that there was a lack of room care staff compared to the number of patients. This is in line with research (Sriwahyuni Hutasoit & Banjarnahor, 2023) where the highest is in the Sa'ad room, especially the one that handles class III patients with the highest number of patients of all rooms and the correlation that shows the high and low workload can be seen, one of which is from the inappropriate comparison between the number of patients and the number of nurses.

The more patients are treated, the more activities are carried out to provide nursing care. Not only that, nurses are also faced with demands placed on them by patients and their families. The patient hopes that the nurse can understand the complaint suffered by the patient so that they respond quickly and take immediate action, while the nurse can only take action based on existing nursing care. Another factor that causes the high workload of nurses is that nurses have to deal with patients with different characteristics and feel less comfortable with the patient's family's demands for patient safety (Sriwahyuni Hutasoit & Banjarnahor, 2023).

B. Nurse Workload

Table 2 Workload of Nurses at Sunan Kudus Islamic Hospital (n=66)

Workload	f	%
Low	3	4,5
Currently	37	56,1
Heavy	26	39,4
Total	**66**	**100**

Source: Primary Data, 2023

Table 2 shows that of the 66 respondents, 3 respondents (4.5%) had a low workload, 37 respondents (56.1%) had a medium workload, and 26 respondents (39.4%) had a heavy workload.

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this study consisted of nurses from 7 treatment rooms/wards, of which only a few nurses were taken for research, including 7 respondents from the Abu Bakar Room, 8 respondents from the Umar Room, 7 respondents from the Utsman Room, 9 respondents from the Ali Room, 17 respondents from the Saad Room, 7 respondents from the ICU Room, and 11 respondents from the Talkhah Room.

The workload contained in the Abu Bakar Room was 7 respondents; 5 respondents (71.4%) had a medium workload, and 2 respondents (28.6%) had a heavy workload. Workload in the Umar Room: Of the 8 respondents, 2 respondents (25%) had a low workload, 5 respondents (62.5%) had a medium workload, and 1 respondent (12.5%) had a heavy workload. Of the respondents in the Utsman Room, out of 7 respondents, 3 respondents (42.9%) had a medium workload, and 4 (57.1%) had a heavy workload. Of the 9 respondents in Ruang Ali, 4 respondents (44.4%) had a medium workload, and 5 respondents (55.6%) had a heavy workload. In the Saad Room, of the 17 respondents, 1 respondent (5.9%) had a low workload, 9 respondents (52.9%) had a medium workload, and 7 respondents (41.2%) had a heavy workload. Of the 7 respondents in the ICU, 1 respondent (14.3%) had a moderate workload and the other 6 respondents (85.7%) had a heavy workload. In the Talkhah Room, out of 11 respondents, 10 respondents (90.9%) had a moderate workload, and 1 respondent (9.1%) had a heavy workload. Workload is several tasks that must be completed within a certain period. Workload includes physical and mental workload. As a result of a workload that is too heavy or physical abilities that are too weak can result in a nurse suffering from illness or emotional disorders due to work (Febrina et al., 2020).

The results of the questionnaire showed that respondents' average high workload score was the statement that there was a lack of room care staff compared to the number of patients. This is in line with research (Sri Wahani Hutasoit & Banjarnahor, 2023), which states that the high and low workload can be seen, one of the ways, from the inappropriate comparison between the number of patients and the number of nurses. The more patients are treated, the more activities are carried out to provide nursing care. Not only that, nurses are also faced with demands placed on them by patients and their families. The patient hopes that the nurse can understand the complaint suffered by the patient so that they respond quickly and take immediate action, while the nurse can only take action based on existing nursing care. Another factor that causes the high workload of nurses is that nurses have to deal with patients with different characteristics, and nurses feel less comfortable with the demands of the patients' families for patient safety.

Based on research (Linni & Rivelino, 2019) on inpatient nurses, it is known that the workload presentation in the inpatient room is that 23 respondents (56.1%) have a moderate workload and 18 respondents (43.9%) have a heavy workload. The workload is felt heavy because many nurses have to do concurrent work outside of nursing care, namely cleaning rooms and changing patient linens, thus increasing the nurses' workload. Excessive workload will cause mental stress or emotional reactions such as irritability. This can result in neglecting the primary duties of a nurse in a hospital.

This is in line with research conducted by (Etlidawati et al., 2020); of the 41 respondents, it was found that 23 respondents (56%) had a moderate workload, and 18 respondents (44%) had a heavy workload. Most respondents in this study had a moderate workload, meaning that some nurses considered their work not a burden on themselves. However, there are still nurses whose workload is heavy. This is due to an imbalance between the number of nurses on duty on each shift and the number of patients, and apart from that, many indirect activities must be carried out by implementing nurses on each shift, where these activities are activities that cannot be avoided and are still related to the needs and interests of patients and nurses.

According to Oetelaar (2021), the job demands nurses feel in direct patient care, additional administrative activities provided, and nurses being required to work quickly so that all patients can be served make nurses feel the workload. A high workload has an impact on the quality of the actions provided. The high workload is influenced by the lack of nursing staff compared to the number of patients and the level of patient dependency.

C. Nurses' Emotional Intelligence

Table 3 Emotional Intelligence of Nurses at Sunan Kudus Islamic Hospital (n=66)

Emotional Intelligence	f	%
Low	0	0
Currently	29	43,9
high	37	56,1
Total	**66**	**100**

Based on table 3 shows that of the 66 respondents, the majority had high emotional intelligence with 37 respondents (56.1%), moderate emotional intelligence with 29 respondents (43.9%), and low emotional intelligence with 0 respondents (0%).

Table 3 shows that most of the 66 respondents had high emotional intelligence, with 37 respondents (56.1%) and moderate emotional intelligence, with 29 respondents (43.9%). Regarding the emotional intelligence of nurses in the Ali Room, of the 9 respondents, 5 respondents (55.6%) had moderate emotional intelligence, and 4 respondents (44.4%) had high emotional intelligence. Then, in the Umar Room, of the 8 respondents, 2 respondents (25%) had moderate emotional intelligence, and 6 respondents (75%) had high emotional

intelligence. Then, in the Talkhah Room, of the 11 respondents, 4 respondents (36.4%) had moderate emotional intelligence, and 5 respondents (63.6%) had high emotional intelligence. In the Abu Bakar Room, of the 7 respondents, 2 respondents (28.6%) had moderate emotional intelligence and the other 5 respondents (71.4%) had high emotional intelligence. In the Saad Room, of the 17 respondents, 10 respondents (58.8%) had moderate emotional intelligence, and 7 other respondents (41.2%) had high emotional intelligence. In Ruang Uthman, of the 7 respondents, 2 respondents (28.6%) had moderate emotional intelligence and 5 other respondents (71.4%) had high emotional intelligence. Of the 7 respondents in the ICU, 4 respondents (57.1%) had moderate emotional intelligence and the other 3 respondents (42.9%) had high emotional intelligence.

This is supported by (Tri Wijayanti & Mudzakkir, 2019), who emphasize that emotional intelligence itself cannot be formed in a short time but is formed by an individual's journey process, which physical and psychological conditions can influence. Recognizing your own emotions is the primary basis for emotional intelligence. Nurses need emotional intelligence to understand and regulate their emotions so that they behave wisely when dealing with patients. Nurses can know when they are acting and communicate appropriately and with care if they are not aware that they are in a state of frustration and sadness related to the patient's situation, so they are less able to control their emotions (Farid, Ahmad. 2022).

D. The Relationship between Workload and Nurses' Emotional Intelligence

Table 3.4 Relationship between Workload and Emotional Intelligence of Nurses in the Inpatient Room at Sunan Kudus Islamic Hospital

Workload	Emotional Intelligence						Total		P Value
	Low		Currently		High				
	N	%	N	%	N	%	N	%	
Low	0	0	1	1,5	2	3,0	3	4,5	
Currently	0	0	13	19,7	24	36,4	37	56,1	0,027
Heavy	0	0	15	22,7	11	16,7	26	39,4	
Total	0	0	29	43,9	37	56,1	66	100	
Rho = -0,272									

Source: Primary Data, 2023

Based on table 4.7 above shows that there were 3 respondents (4.5%) who had a low workload, with 1 respondent having moderate emotional intelligence (1.5%) and 2 respondents (3.0%) having high emotional intelligence. For respondents who had a moderate workload, there were 37 respondents (56.1%) with moderate emotional intelligence, as many as 13 respondents (19.7%) and high emotional intelligence, as many as 24 respondents (36.4%). For respondents who had a heavy workload, there were 26 respondents (29.4%) with moderate emotional intelligence, as many as 15 respondents (22.7%) and high emotional intelligence, as many as 11 respondents (16.7%).

The results of statistical tests using the Spearman Rho Test obtained a P value = $0.027 < 0.05$ and a correlation coefficient value of -0.272, which means that the level of strength of correlation/relationship between workload and emotional intelligence is a reasonably strong relationship and has a negative relationship direction. This means that the higher the workload, the lower the emotional intelligence. It can be concluded that there is a relationship between workload and nurses' emotional intelligence in the inpatient room at Sunan Kudus Islamic Hospital.

Based on research conducted by (Illustri, 2021) regarding the Relationship between Workload and the Emotional Intelligence of Nurses in the Inpatient Room at Sunan Kudus Islamic Hospital, results were obtained from 66 respondents; 3 respondents who had low workload were found (4.5%) with moderate emotional intelligence 1 respondent (1.5%) and high emotional intelligence 2 respondents (3.0%). For respondents who had a moderate workload, there were 37 respondents (56.1%) with moderate emotional intelligence, as many as 13 respondents (19.7%) and high emotional intelligence, as many as 24 respondents (36.4%). For respondents who had a heavy workload, there were 26 respondents (29.4%) with moderate emotional intelligence, as many as 15 respondents (22.7%) and high emotional intelligence, as many as 11 respondents (16.7%).

Based on the results of statistical tests analyzed using the Spearman Rho Test, the p-value = $0.027 < 0.05$ so that H_0 rejected and H_a accepted. These results show a relationship between workload and the emotional intelligence of nurses in the inpatient room at Sunan Kudus Islamic Hospital.

Working in an inpatient room will bring patients with different characteristics, impacting the condition and workload of nurses. For this reason, nurses must have versatile energy and initiative, behave creatively and have broad insight with the motivation to work hard, intelligently, sincerely and with quality work. The types of patients treated in inpatient rooms can be considered a burden if health services are not managed well, which can have an emotional impact on nurses (Aryanto, 2021)

This research has difficulties when collecting emotional intelligence research data, and sometimes the answers given by respondents do not match the actual situation. The confounding factors in this research have not been controlled, so the results are too general and not specific (Illustri, 2021).

IV. CONCLUSION

The results of statistical tests using the Spearman Rho Test obtained a P value = $0.027 < 0.05$ and a correlation coefficient value of -0.272, which means that the level of strength of correlation/relationship between workload and emotional intelligence is a reasonably strong relationship and has a negative relationship direction. This means that the higher the workload, the lower the emotional intelligence. It can be concluded that there is a relationship between workload and the emotional intelligence of nurses in the inpatient room at Sunan Kudus Islamic Hospital, and it is necessary to increase the number of nurses per room to minimize the high workload.

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