

QUALITY OF WORK LIFE (QWL) EVALUATION AND FACTORS AFFECTING QUALITY OF WORK LIFE (QWL) IN NURSES AT SATKES KODIKLATAL BY CROSS SECTIONAL STUDY

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ABSTRACT

The hospital is a health service business, one of which is based on the principle of trust so that service quality problems, patient satisfaction and patient loyalty are factors that determine its success. Various ways are used by organizations to create competitive advantage. One of the most important aspects in creating competitive advantage is increasing the quality of human resources owned. Quality of Work Life is a concept or management philosophy in the field of improvement in the quality of human resources that has been known since the seventies. By realizing and maintaining a healthy QoWL, it will increase employee job satisfaction, reduce the number of employees leaving, increase productivity and improve nursing care outcomes. Analysis of the QoWL factor was carried out using questionnaire data for 120 nurses in the ER department, outpatient and inpatient care. Analysis of QoWL results for satisfaction is in the dimensions of Control at Work and Stress at Work and for employee dissatisfaction is in the dimensions. between employees. From this analysis, recommendations for improvement and enhancement of the quality of a good work life can be made through stress management, existing workforce analysis.

Keywords: *Quality of work life, Cross Sectional Study, Satkes Kodiklatal.*

1. INTRODUCTION

Quality of work life (QWL) is a process by which employees and office holders in an organization gain insight into how to better work together to improve the quality of staff life and organizational effectiveness simultaneously. This concept basically states the way an organization can protect the holistic well-being of an employee rather than just concentrating on work-related features. QWL is usually considered as one of the most important elements in staffing and retaining, which has a major impact on reducing the turnover rate of nurses in a health facility. To solve this problem, a variety of issues including workload, professional leadership and clinical support, adequate continuing professional education, career mobility and career hierarchy, flexibility, planning and placement, professional admiration, providing safety for work-related illnesses, and better pay. Various existing

studies have shown that employee satisfaction with good QWL will have a positive impact on employees, reduce absenteeism from work, reduce unprofessionalism, reduce the incidence of work-related injuries, and increase job enjoyment and satisfaction in various aspects which will also have an impact. on improving employee performance.

In the world of health, especially in hospitals, nurses have an equally important role in handling patients at all levels in the hospital. It is believed that a manager serving in a health facility should be able to explore the needs of employees and improve the quality of work life of employees by continuously evaluating their work, organizing and identifying any possible errors.

In some cases, there are often statements about bad nurse attitudes or services. However, if it is observed further, the question can arise: does a nurse really feel that the quality of work life is

achieved? What are the possible factors that could be related to or affect the quality of their work life? In this journal, we aim to determine the level of quality of work life, as well as determine the influencing factors among nurses who work at the Kodiklatal Health Unit.

2. RESEARCH METODOLOGY

2.1 Area Studies and Design Studies

The location for data collection was the Kodiklatal Health Unit, on 7-9 December 2019. Data presentation was done descriptively

2.2 Population and Sample

The population in this study were all nurses who served in the Satkes Kodiklatal. Random samples were taken from nurses who worked at the Kodiklatal Health Unit. The number of samples was 120 nurses of the Kodiklatal Health Unit. The nurse education criteria that are entered are a minimum of a diploma and have at least 1 year of experience working at the Kodiklatal Health Unit.

2.3 Variable

The WRQoL (The Work-Related Quality of Life) research instrument uses 6 (six) core factors that explain most of the variations and qualities of individual work life, which consist of (1) General Welfare /GWB (General Well-Being) (2) Linkage between home and work-life domains / HWL (Homework Interface (3) Control at Work \ (4) Working Conditions (5) Stress at work / SAW (Stress at Work), stress levels, and (6) Job & Career Satisfaction and Career Satisfaction / JCS (Job an Career Satisfaction).

3. RESULT AND DISCUSSION

3.1 Quality of Work Life (QoWL)

The term Quality of Work Life is famously derived from the 1972 international labor relations conference at Arden House, Columbia University, New York (Davis & Cherns, 1975 in Sinha C, 2012).

From a business perspective, Quality of Work Life is important because there is evidence to suggest that the nature of the work environment is related to employee satisfaction and work-related behavior (Greenhaus et al., 1987 in Sinha C, 2012). Quality of Work Life was also found to influence employee job responses in terms of organizational identification, job satisfaction, job involvement, work effort, job performance, intention to quit, organizational turnover and personal alienation (Carter et al., 1990; Efraty & Sirgy, 1990.; Efraty et al, 1991, in Sinha C, 2012).

A definition of Quality of Work Life criteria was first proposed in 1972 (Walton, 1973) states that dissatisfaction with work life is a problem that will affect almost all workers at one time or another, with regard to position or status. Frustration, boredom, or anger often occur in employees who are less than satisfied with their work lives, and can have an impact on the individual himself.

Gray and Smeltzer (1990: 641) stated that, "Quality of Work life, the original use referred to the quality of the relationship between the worker and the working environment consider as a whole". Meanwhile, according to Davis and Newstorm (1993: 345), they argue, "Quality of work life refers to favorableness of a job environment that is excellent for people as well for the economic health of organization". Quality of work life is a condition of a good work environment for workers. The fundamental objective is to develop a good work environment in accordance with the economic well-being of the organization. According to Luthans (1995) Quality of Work Life is more concerned with the overall climate of work. One Quality of Work Life analysis describes it as (1) a concern about the impact of working on people as well as on organizational effectiveness, and (2) the idea of participation in organizational problem solving and decision making.

According to Gibson (2003), the concept of Quality of Work Life is now widely used to refer to "a management philosophy that enhances the dignity of all workers; introduces changes to organizational culture, and improves the physical and emotional well-being of employees". Quality of Work Life indicators include accident rates, use of sick leave, employee turnover, and the number of complaints filed the concept of Quality of Work Life is now widely used to refer to "a management philosophy that enhances the dignity of all workers; introduces a change in organizational culture, and improves the physical and emotional well-being of employees". Quality of Work Life indicators include accident rates, use of sick leave, employee turnover, and the number of complaints filed the concept of Quality of Work Life is now widely used to refer to "a management philosophy that enhances the dignity of all workers; introduces changes to organizational culture, and improves the physical and emotional well-being of employees". Quality of Work Life indicators include accident rates, use of sick leave, employee turnover, and the number of complaints filed.

Mondy and Noe (1996: 283) state that, "Quality of work life is the degree to which members of a work organization are able to satisfy their most important personal needs through organizational experiences". Quality of work life is the degree to which members of a work organization are able to satisfy their important personal needs through experience in the organization.

Definition *Quality of Worklife* according to Robbins (2002: 159), "*Quality of Work Life* is a process by which an organization responds to employee needs by developing mechanisms to allow them to share fully in making the decisions that design their lives at work. Robbins' opinion implies that Quality of Work Life is a process by which an organization reacts to the needs of employees through the development of decision-making

mechanisms that allow employees to fully participate in designing their lives in the workplace. Furthermore, Quality of Work Life is useful for increasing organizational productivity.

Cascio (2003) states that Quality of Work Life can be defined as employees' perceptions of their mental and physical well-being at work. There are two views regarding the purpose of Quality of Work Life. First, Quality of Work Life is the set of circumstances and practices of the organization (eg democratic supervisor enrichment, worker involvement, and safe working conditions). Meanwhile, the second, Quality of Work Life is the perception of employees that they want to feel safe, they feel satisfied, and get the opportunity to grow and develop as human beings.

According to Easton and Van Laar (2012) Quality of Work Life (QoWL) is a theoretical concept aimed at capturing the essence of individual work experience in a broad sense. An individual's QoWL is influenced directly by their work experience as well as direct and indirect factors that influence that experience. These factors include job satisfaction, other factors that generally reflect life satisfaction and well-being. QoWL is defined as the favorable conditions and environment of the workplace that support employee satisfaction by providing them with gifts, job security and growth opportunities.

Improvements to get good QoWL have been proven to provide benefits in employee performance. For example, researchers from the faculty of public health and tropical medicine, Jazan University, Saudi Arabia conducted research with the results of improving QoWL improving individual and organizational performance and increasing nurse commitment (Almalki, et al, 2012). In the same year the three researchers also conducted another study with the conclusion "Creating and maintaining a healthy work life for PHC nurses is very important to improve their work satisfaction, reduce turnover,

enhance productivity and improve nursing care outcomes" (Almalki, et al, 2012).

Research on a multinational company in Sydney states that currently companies are focused on improving the quality of work life for their employees. Not only a technique, this is a philosophy or concept that companies have used to balance business, human needs and social needs (Ouppara and Victoria, 2012).

A study of lecturers in Iran shows that the increase in QoWL of lecturers at universities has a significant effect on the development of education and society in a country (Parsa et al, 2014).

3.2 Components of Quality of Work Life

Walton proposes eight main conceptual areas for understanding QWL. The aspect put forward by Richard E. Walton (1975) is the description that is considered the most comprehensive of the conditions of QWL. He stated 8 (eight) main categories which together constitute QWL, namely:

- a. Adequate and fair compensation (Fair and appropriate remuneration (salary))
- b. Safe and healthy working conditions (Safe and healthy working conditions)
- c. Immediate opportunity to use and develop human capacities (There is an opportunity to use and develop one's capacity as a human being)
- d. Opportunity for continued growth and development (Opportunity to progress and develop)
- e. Social integration in the work organization (Social relations at work)
- f. Constitutionalism in the work organization (Constitutionalism in the workplace also relates to the privacy of employees)
- g. Work and total life space (Work and whole living space)
- h. The social relevance of work life (Social relevance of work life)



Figure 1. QWL Components (Walton, 1975)

The following is an explanation of each aspect expressed by Richard Walton about Quality of Work Life, namely:

- a. Wage System (Salary): The reward of the employee's energy which is manifested as a result of production, or a service that is considered the same for it, in the form of money, with a certain guarantee in each week or month. It also relates to the suitability of wages with adequate social standards or the subjective standards of the recipient.
- b. Safe and healthy working conditions: a system of control over people, facilities, work environment and software. This aspect also includes reasonable working hours, physical working conditions that minimize the risk of illness and accidents, as well as the age limit imposed at work which is a potential destroyer for the welfare of the person who is over (or below) a certain age. Because it is found that the general improvement in the quality of working conditions and early maturity in young people may lead to a relaxation of the age limit in some areas of the work environment. A safe and healthy work environment also includes a work environment that is free from noise, free from visual disturbances such as sunlight in a good work environment, and pollution-free (Walton, 1975 in Agung,
- c. Opportunities to use and develop personal capacities: the extent to which the work is carried out

by employees to provide opportunities for employees to use and develop all the abilities and skills they have and whether the work presents a challenge for him to be fully involved. Opportunities for growth and development also include opportunities for training and continuing education in an effort to attend training and continue education as an effort to develop skills in doing work (Walton, 1975; Taylor, 1978; Levine et al., 1984 in Brooks, 2001).

d. Opportunities for advancement: the extent to which the employee's job can provide opportunities for him to advance in a career in the future. Focusing on career rather than job opportunities includes personal development, application of new skills, opportunities for self-development, and security.

e. Social relations in the workplace: the extent to which the work environment and co-workers can accept the presence of individuals and the extent to which the work environment is free from destructive prejudice. Do employees achieve personal identity and self-confidence due to conditions in the workplace that are free from prejudice, egalitarianism (equality), upward mobility, supportive main groups, a sense of togetherness between groups, and also feelings of openness between employees.

f. Employee privacy rights: The extent to which the organization can fulfill the rights that employees should have and the extent to which the organization provides freedom of privacy (privacy). There may be many variations to expand this understanding, including an organizational culture that values personal freedom, tolerates differences and the opportunity to express opinions, as well as equality in the distribution of organizational rewards.

g. Work and life space as a whole: the extent to which work affects the personal life roles of employees, such as relationships with family. Emphasizes the existence of a balance of roles from work in the actual life of the employee. The concept of a balanced role also relates to working hours,

career demands, being given vacation time as well as free time and time for family.

h. Work-life social relevance: the extent to which the organization has social responsibility for its environment, the extent to which the organization can provide pride to its employees, and so on. Organizations that are not socially responsible can be the cause of an increase in workers who have a lower assessment of their work and also their career so that it will affect their self-confidence.

Meanwhile, according to Cascio (2003), there are nine components of the quality of work life, including:

a. Communication (*Communication*)

In every organization or company environment, employees need open communication within the boundaries of their respective powers and responsibilities. With smooth communication, employees will get important information correctly.

b. Problem solving (*Conflict Resolution*)

In a company, every employee has the opportunity to make a contribution in resolving conflicts both in the company and conflicts between employees in an open, honest and fair manner. This condition greatly affects employee loyalty and dedication and work motivation.

c. Career development (*Career Development*)

In a company every employee needs clarity about their career development in facing the future. For this reason, it is pursued through offers of promotion, providing opportunities to take part in training or education outside the company at higher educational institutions.

d. Employee engagement (*Employee Participation*)

In a company, every employee needs to be involved in the decision-making process and the implementation of work in accordance with their respective positions, authorities and positions.

e. Taste Proud of the Institution (*Pride*)

In a company, every employee needs to be nurtured and developed a feeling of pride in his place of work, including in his job or position.

f. Balanced compensation (*Equitable Compensation*)

In a company, every employee must receive fair, reasonable and sufficient compensation. For this reason, it is necessary to have the ability to formulate and administer a system and structure for providing direct and indirect compensation for the welfare of employees in accordance with their positions.

g. Work environment safety (*Save Environment*)

Every employee needs security in the work environment. For this reason, the company is obliged to create and develop and guarantee a safe work environment by forming a work environment safety committee which continuously observes and monitors the conditions of the work place and equipment in order to avoid anything that endangers the workers.

h. Sense of security at work (*Job Security*)

Every company needs a sense of security or a guarantee of continuity of its work. For this reason, companies need to try to avoid temporary layoffs of employees, make them permanent employees by having regular tasks and having regular programs to provide employees with opportunities to resign, especially through pension arrangements. Every employee needs attention to the maintenance of his health in order to work effectively, efficiently and productively.

i. Facilities obtained (*Wellness*)

In a company environment, each and every employee needs attention to the maintenance of their health, in order to work effectively, efficiently and productively. For this reason, companies can establish and administer health care programs, recreational programs and counselling/ counselling programs for employees.

Various questionnaire instruments have been developed to assess the quality of work life. In the UK this assessment has been carried out since 1998. Easton and Van Laar (2018) state that there

are six factors that are assessed in conducting the QoWL analysis, namely:

- a. *General Well-Being* (GWB)
- b. *Homework Interface* (HWI)
- c. *Job and Career Satisfaction* (JCS)
- d. *Control at Work* (CAW)
- e. *Working Conditions* (WCS)
- f. *Stress at Work* (SAW)

The factors that affect the Quality of Work Life include:

a. Individual Internal Factors

Factors that directly affect QoWL are age, gender, marital status, number of children, dependents at home, position in work, work experience, years of service.

b. Workplace Factor

c. Social and environmental factors: communication, relationships between colleagues, relationships between departments, relationships with other professions, leadership

d. Operational factors: work schedule, number of employees, competition, supervisor supervision, new staff training

e. Administrative factors: Workplace policies related to HR administration and management systems, career development, salaries and health insurance.

f. Workplace External Factors

Government policies, competitors' workplaces, customer dependency, health insurance policies, labor market, customer workplace coverage.

There are various methods / measuring tools for QWL assessment, including:

a. Employee Quality Worklife Survey (Albrech, 2013) who assessed QWL based on aspects of work freedom and relationships with coworkers.

b. Swamy (2015) developed 9 dimensions to measure QWL based on literature studies on several aspects that affect QWL. These aspects are

- 1) Work environment;
- 2) Climate and organizational culture;
- 3) Relationships and cooperation between co-workers;
- 4) Training and development;
- 5) Compensation and rewards;
- 6) Facilities;
- 7) Job satisfaction and security;
- 8) Work autonomy;
- 9) Resources

c. NIOSH (2010) developed a measuring tool to assess QWL subjectively including: aspects of job demands, job satisfaction, factors outside of work such as family, work routines, relationships with colleagues and companies, including anatomical factors at work.

d.

Table 1. General Well-being

VARIABEL	n(%)	General well being		P value	
		puas	Tidak puas		
Jenis kelamin	1. Pria	44 (36,5)	10	34	0,013
	2. Wanita	76 (63,4)	36	40	
Rentang usia	1. 25-35	67 (55,8)	18	49	0,035
	2. 35-45	53 (44,2)	25	28	
Pendidikan	1. D3	83 (69,2)	39	44	0,032
	2. S1	37 (30,8)	9	28	
Marital status	1. Menikah	78 (65)	37	41	0,02
	2. Tidak menikah	42 (35)	10	32	
Lama dinas	1. 1-5 tahun	76 (63,3)	21	55	0,043
	2. 5-10 tahun	44 (36,7)	21	23	
Departemen	1. IGD	37 (30,8)	5	32	0,039
	2. Rawat inap	53 (44,2)	20	33	
	3. Rawat jalan	30 (25)	10	20	

In the general wellbeing dimension, it can be concluded that nurses at the Kodiklat Health Unit feel dissatisfied with their lives. Dissatisfaction was higher in the male nurse group (77%), the group in the age range 25-35 years (73%), the group with undergraduate education status (76%), the group with unmarried status (76%), the group with service years. 1-5 years (72%) and the group who served in the ER (86%).

This indicates a lack of general welfare that is obtained from their place of work or is not in accordance with the expectations of the nurses. The GWB factor assesses the perception of an individual feeling good or satisfied with their life as a whole. GWB can influence and be influenced by work. GWB is a broad relationship between psychological well-being and aspects of physical health. Psychological well-being can affect individual performance in the workplace both for better and for worse. When someone is feeling good, they may tend to do well and enjoy being at work. But when people feel anxious, restless because it arises from work or difficulties at home, their work may be affected.

When employees are physically ill, their performance in the workplace can be affected and the impact on their sense of psychological well-being can be reduced. Thus, it can be said that, general welfare in the workplace must be handled positively. Handling is not only providing assistance when problems arise, but paying more attention to preventing and improving welfare.

It is useful to review the relevance of policies and services, maintain awareness and clarify responsibilities, ensure that public welfare monitoring is effective. So that the results help people to work well and feel good at work. Mental health problems, especially depression and anxiety disorders have a major impact on the population's GWB and on the use of health care resources.

Table 2. Home Work Interface

VARIABLES	n (%)	Homework Interface		P value	
		satisfied	Not satisfied		
Gender	1. Male	44 (36.5)	14 (32%)	30 (68%)	0.026
	2. Women	76 (63.4)	10 (13%)	66 (87%)	
Age range	1. 25-35	67 (55.8)	17 (25%)	50 (75%)	0.037
	2. 35-45	53 (44.2)	24 (45%)	29 (55%)	
Education	1. D3	83 (69.2)	14 (17%)	69 (83%)	0.023
	2. S1	37 (30.8)	14 (38%)	23 (62%)	

Marital status	1. Getting married	78 (65)	36 (46%)	42 (54%)	0.028
	2. Not married	42 (35)	10 (24%)	32 (76%)	
Length of service	1. 1-5 years	76 (63.3)	15 (20%)	61 (80%)	0.022
	2. 5-10 years	44 (36.7)	18 (41%)	26 (59%)	
Department	1. IGD	37 (30.8)	12 (32%)	25 (68%)	0.038
	2. Hospitalization	53 (44.2)	17 (32%)	36 (68%)	
	3. Outpatient	30 (25)	10 (33%)	20 (67%)	

In HWI, in general, the nurses from the Satkes Kodiklatal were not satisfied. Dissatisfaction was higher in the female nurse group (87%), the group in the age range of 25-35 years (75%), the group at D3 education status (83%), the group with unmarried status (76%), the group with service years. 1-5 years (80%) and the group who served in the ER and inpatients (86%).

This can be due to an imbalance in their personal and work lives so that nurses feel they have no control over the time, place and way they work. This reflects the individual's perception that he does not have a fulfilled life from inside and outside of work for the benefit of the individual, the workplace and society. In the Work-Related Quality of Life (WRQoL) assessment, the HWI factor is used to see the balance of life and work and reflects employer support for employees' lives at home.

When employees are needed at home can mean those employees find it difficult to get to work when they are needed, and this results in employees having less attention when they are at work. Work constraints mean that an individual feels unable to leave their job, or unable to recover after work and unable to self-actualize in other aspects of their life.

It can be concluded that inadequate attention to the lives of employees at home will not be good for the organization in the long run. Failure to balance work and home demands is likely to threaten an employee's ability to provide the best for both lives.

As individuals and as workers, they must actively and continuously monitor the balance of life

and work, and make the necessary adjustments. Flexibility as individuals and workers will often be required. With discussion and compromise, if there are obstacles, it will encourage solutions to emerge.

Relevant issues will vary widely between and within work settings. Flexible working hours, working from home, job rotation, pregnancy and maternity leave, child care, division of labor are all aspects that can affect HWI. The demands of a family with a husband and wife to work, for example, are one of the many problems that arise in the home and work so that it needs to be monitored and handled by cooperating in the workplace.

A study in Calcutta states that an employee's emotional intelligence has a positive influence on QoWL and the ability to manage home and workplace conflicts and also has an impact on reducing work stress (Dasgupta, 2010).

Table 3. Job and Career Satisfaction

VARIABLES	n (%)	Job and Career Satisfaction		P value	
		satisfied	Not satisfied		
Gender	1. Male	44 (36.5)	22 (50%)	22 (50%)	0.015
	2. Women	76 (63.4)	20 (26%)	56 (74%)	
Age range	1. 25-35	67 (55.8)	33 (49%)	34 (51%)	0.032
	2. 35-45	53 (44.2)	15 (28%)	38 (72%)	
Education	1. D3	83 (69.2)	20 (24%)	63 (76%)	0.014
	2. S1	37 (30.8)	18 (49%)	19 (51%)	
Marital status	1. Getting married	78 (65)	20 (34%)	58 (66%)	0.013
	2. Not married	42 (35)	21 (50%)	21 (50%)	
Length of service	1. 1-5 years	76 (63.3)	19 (25%)	57 (75%)	0.035
	2. 5-10 years	44 (36.7)	20 (45%)	24 (55%)	
Department	1. IGD	37 (30.8)	18 (47%)	19 (53%)	0.039
	2. Hospitalization	53 (44.2)	14 (26%)	39 (74%)	
	3. watch the road	30 (25)	15 (50%)	15 (50%)	

In the dimension of Job and Career Satisfaction, overall, the Satkes kodiklatal nurses expressed dissatisfaction. Dissatisfaction was higher in the female nurse group (74%), the group in the age range 35-45 years (72%), the group at D3 education

status (76%), the group with married status (66%), the group with service period 1 -5 years (75%) and the group serving inpatients (74%).

JCS describes the level of a work environment that is able to provide the best for employees in the workplace. Things that make them feel good include appreciation, high self-esteem and the fulfillment of individual potential. When the QoWL scale was associated with job satisfaction, the JCS factor was the most correlated subscale. Previous research has shown that some of the most important determinants of JCS are working conditions, fairness at work, promotion and income (Parvin & Kabir, 2011). So that it can be concluded, nurses at the Kodiklatal Health Unit have not received an award in accordance with their expectations for their performance.

Table 4. Control at Work

VARIABLES	n (%)	Control at Work		P value	
		satisfied	Not satisfied		
Gender	1. Male	44 (36.5)	34 (77%)	10 (23%)	0.013
	2. Women	76 (63.4)	40 (52%)	36 (48%)	
Age range	1. 25-35	67 (55.8)	34 (51%)	33 (49%)	0.032
	2. 35-45	53 (44.2)	38 (71%)	15 (39)	
Education	1. D3	83 (69.2)	43 (52%)	40 (48%)	0.024
	2. S1	37 (30.8)	28 (72%)	9 (28%)	
Marital status	1. Getting married	78 (65)	57 (73%)	21 (27%)	0.038
	2. Not married	42 (35)	22 (52%)	20 (48%)	
Length of service	1. 1-5 years	76 (63.3)	43 (56%)	33 (44%)	0.037
	2. 5-10 years	44 (36.7)	34 (77%)	10 (23%)	
	3. >10 years	10 (8.0)	10 (100%)	0 (0%)	
Department	1. IGD	37 (30.8)	19 (51%)	18 (49%)	0.033
	2. Other	63 (53.3)	34 (54%)	29 (46%)	

2. Hospitalization	53 (44.2)	40 (75%)	13 (25%)
3. Outpatient	30 (25)	16 (53%)	14 (47%)

In the Control at work dimension, the Kodiklatal Health Unit nurse expressed satisfaction. In the CAW results, higher satisfaction was found in the male nurse group (77%), nurses with an age range of 35-45 years (71%), nurses with S1 education status (72%), nurses with married status (73%), nurses with a length of service of 5-10 years (77%), and a group of nurses who served in inpatients (75%).

CAW reflects the level of control employees have over what is considered appropriate in their work environment. The perception of this control can be from various aspects of his job, such as the opportunity to contribute to the decision-making process related to his job. Perceptions of personal control can influence stress and their health.

HSE uses a simple definition of CAW which focuses on how much opinion or influence people feel about doing their job the way they do (<http://www.hse.gov.uk/stress/standards/>). The meta-analysis of Thomas et al. (2006) states that a positive CAW has a positive impact on employee work results such as good work results, greater work motivation and a social experience effect.

Table 5. Working Conditions

VARIABLES	n (%)	Control at Work		P value	
		satisfied	Not satisfied		
Gender	1. Men	44 (36.5)	22 (50%)	22 (50%)	0.035
	2. women	76 (63.4)	22 (41%)	54 (59%)	
Age range	1. 25-35	67 (55.8)	18 (27%)	49 (73%)	0.035
	2. 35-45	53 (44.2)	25 (47%)	28 (53%)	
Education	1. D3	83 (69.2)	39 (47%)	44 (53%)	0.032
	2. S1	37 (30.8)	9 (24%)	28 (76%)	
Marital status	1. Getting married	78 (65)	36 (46%)	42 (54%)	0.028
	2. Not married	42 (35)	10 (31%)	32 (69%)	

Length of service	1. 1-5 years	76 (63.3)	21 (27%)	55 (73%)	0.043
	2. 5-10 years	44 (36.7)	21 (48%)	23 (52%)	
Department	1. IGD	37 (30.8)	8 (22%)	29 (78%)	0.032
	2. Hospitalization	53 (44.2)	25 (47%)	28 (53%)	
	3. Outpatient	30 (25)	14 (47%)	16 (53%)	

In the WCS dimension, nurses at the Kodiklatal Health Unit expressed dissatisfaction. Dissatisfaction was higher in the female nurse group (59%), the group in the age range 25-35 years (73%), the group with undergraduate education status (76%), the group with the unmarried status (69%), the group with service years. 1-5 years (73%) and the group who served in the ER (78%).

WCS assesses employees' satisfaction with available resources, working conditions and the security needed to perform their jobs effectively. Dissatisfaction with physical work conditions such as health and safety as well as work hygiene can have a significant adverse impact on employee QoWL.

The WCS factor is conceptually related to JCS. JCS reflects a workplace that provides individuals with the best of things such as self-development, goals, promotion and recognition of their performance. Meanwhile, the WCS factor reflects that the workplace fulfills the basic needs of the individual. When WCS needs to be addressed to avoid possible dissatisfaction in the workplace, the JCS component assesses the extent to which the workplace offers the opportunity for workers to experience workplace satisfaction. Problems associated with poor WCS (lighting, dust, smoke) can cause employees to move away from the workplace or avoid spending time in certain work areas.

Table 6. Stress at Work

VARIABLES	n (%)	Stress at Work		P value	
		satisfied	Not satisfied		
Gender	1. Male	44 (36.5)	35 (80%)	9 (20%)	0.038

2. Women	76 (63.4)	45 (59%)	31 (41%)	0.043	
	1. 25-35	67 (55.8)	39 (58%)		28 (42%)
Age range	2. 35-45	53 (44.2)	41 (77%)	12 (33%)	0.044
	1. D3	83 (69.2)	45 (54%)	38 (46%)	
Education	2. S1	37 (30.8)	28 (76%)	9 (24%)	0.043
	1. Getting married	78 (65)	43 (55%)	35 (45%)	
Marital status	2. Not married	42 (35)	32 (76%)	10 (24%)	0.038
	1. 1-5 years	76 (63.3)	66 (87%)	10 (13%)	
Length of service	2. 5-10 years	44 (36.7)	30 (68%)	14 (34%)	0.026
	1. IGD	37 (30.8)	30 (81%)	7 (19%)	
Department	2. Hospitalization	53 (44.2)	31 (58%)	22 (42%)	0.046
	3. Outpatient	30 (25)	23 (77%)	7 (23%)	

In the SAW dimension, nurses at the Kodiklatal Health Unit expressed satisfaction. The higher satisfaction occurred in the male nurse group (80%), the group in the age range 35-45 years (77%), the group with the S1 education status (76%), the group with the unmarried status (76%), the group with the service period. 1-5 years (87%) and the group who served in the emergency room (81%).

SAW is determined by individual feelings of excessive pressure and stress at work. This definition is based on the idea that a person's stressful experiences depend on the individual's perception of the situation and his ability to cope with stress. One other definition proposes work that causes stress is a physical and emotional response that is dangerous and occurs when job requirements do not match the abilities, resources or needs of employees.

In their research, Ahsan et al (2009) stated that there is a negative relationship between stress at work and job satisfaction. Ahsan et al also stated that motivation is a key factor in influencing job stress among employees. Employees who are highly

motivated will feel happier and more willing to work for the organization.

4. CONCLUSION

In this study, it was concluded that in the dimensions of General Well-Being, Homework Interface, Job and Work Satisfaction and the dimensions of Working Conditions, nurse satisfaction was still low. This can be caused by a lack of relevance between policies and jobs, imbalance of personal life and work, there is no respect for nurses from hospital management and an uncomfortable work environment.

Meanwhile, in the Control at Work dimension and the Stress at Work dimension, the satisfaction is high enough. This could be due to the opportunity that nurses feel to contribute to the decision-making process related to their work, and the high motivation of the nurses.

Suggestions that can be taken from this research for the management of the Kodiklat Health Unit are that there is a need for better communication between management and workers under its auspices (in this case especially nurses), creating a more conducive and comfortable working atmosphere and work environment and creating a sense of security for workers. There is a rewards system for employees who contribute more to the organization and excel.

ACKNOWLEDGEMENT

The authors greatly acknowledge the support from Airlangga University Surabaya, Indonesia for providing the necessary resources to carry out this research work. The authors are also grateful to Satkes Kodiklat Naval Technology College, STTAL Surabaya, and the anonymous reviewers and journal editorial board for their many insightful comments, which have significantly improved this article

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