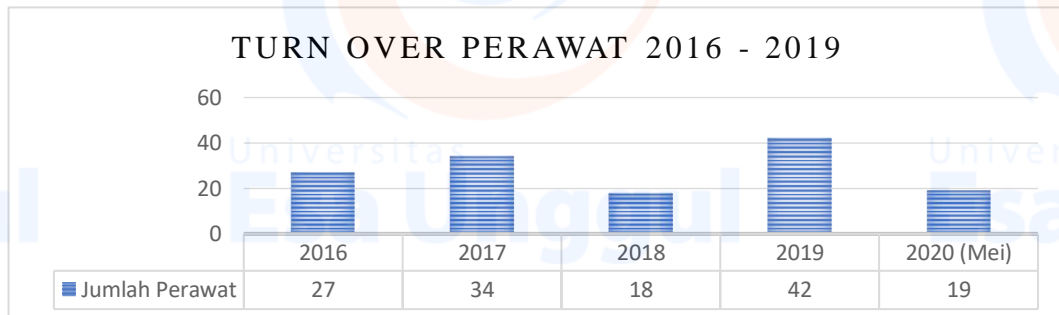


**Lampiran 1****Data Audit Keperawatan, Turn Over Dan Kepegawaian Perawat Rumah Sakit Kanker Dharmais****Hasil Audit Keperawatan (Dokumentasi Keperawatan)**

No	Ruangan	Pengkajian	Diagnosa	Perencanaan	Tindakan	Evaluasi	Σ
1	Anggrek I	98	100	100	96	98	98
2	Mawar I	97	78	80	97	95	89
3	Anggrek 2	95	95	93	92	94	94
4	Mawar 2	100	100	100	100	100	100
5	Teratai	97	94	95	95	95	95
6	Tulip	100	100	100	100	100	100
7	Cempaka	91	90	96	96	97	94
8	RIIM	100	100	100	100	100	100
9	Anak	98	100	100	90	100	98
10	ICU	100	100	100	100	100	100
11	HCU	100	100	100	100	100	100
12	IGD	81.2	87.5	91.6	98	93	96
13	PICU	100	100	100	100	100	100
14	RIRA	100	100	100	100	100	100
Total		98	97	97	97	98	98

Sumber : Laporan Komite Keperawatan RS Kanker Dharmais Tahun 2019

**Data Turnover Perawat Tahun 2016-2019**

Sumber: Laporan Bidang Keperawatan RS Kanker "Dharmais" Mei 2020

**Jumlah Perawat Berdasarkan Status Kepegawaian dan Jenjang Karier**

INSTALASI	Status Kepegawaian			Jenjang Karier				
	PNS	BLU	PKWT	PK IV	PK III	PK II	PK I	Pra PK
Rawat Inap	121	101	79	8	65	81	80	67
Rawat Khusus	77	30	9	2	49	38	21	6
Rawat Jalan	67	14	12	1	53	19	6	14
Jumlah	265	145	100	11	167	138	107	87
	510			510				

Sumber : Laporan Bidang Keperawatan RS Kanker "Dharmais" April 2020

**Lampiran 2****LEMBAR PERSETUJUAN RESPONDEN  
(INFORMED CONSENT)**

Saya yang bertanda tangan di bawah ini :

Nama :

Alamat :

Umur :

Menyatakan bersedia menjadi responden penelitian dari:

Nama : Gede Pronajaya

NIM : 20180309046

Program Studi : Magister Administrasi Rumah Sakit

Fakultas : Ilmu-Ilmu Kesehatan Universitas Esa Unggul

Judul Penelitian : Pengaruh Self Efficacy Dan Pengembangan Karir Terhadap Employee Engagement Serta Kinerja Perawat di Rumah Sakit Kanker Dharmais.

Saya telah mendapat penjelasan dari peneliti tentang tujuan dan manfaat dari penelitian ini. Saya mengerti bahwa penelitian ini tidak akan membahayakan diri saya dan keluarga saya. Identitas dan jawaban yang akan saya berikan terjamin kerahasiaannya dan hanya diperlukan sebagai bahan penelitian. Demikian surat pernyataan ini saya tanda tangani secara sadar dan tanpa suatu paksaan.

Jakarta, Agustus 2020

(.....)

**Lampiran 3****KUESIONER**

**PENGARUH SELF EFFICACY DAN PENGEMBANGAN KARIR  
TERHADAP EMPLOYEE ENGAGEMENT SERTA KINERJA PERAWAT  
DI RUMAH SAKIT KANKER DHARMAIS**

**A. Identitas Responden**

1. Jenis Kelamin
  - Laki-laki [ ]
  - Perempuan [ ]
2. Usia
  - 20-30 Tahun [ ]
  - 31-40 Tahun [ ]
  - 41-50 Tahun [ ]
3. Pendidikan
  - D3 Keperawatan [ ]
  - S1 Keperawatan [ ]
  - S2 Keperawatan [ ]
  - S2 Kesehatan [ ]
4. Jenjang Karier
  - PK 1 [ ]
  - PK II [ ]
  - PK III [ ]
  - PK IV [ ]
5. Lama Bekerja
  - 1-5 Tahun [ ]
  - 6 -10 Tahun [ ]
  - 11-15 Tahun [ ]
  - Lebih dari 15 Tahun [ ]
6. Status Kepegawaian
  - PNS [ ]
  - BLU [ ]

**B. Petunjuk Pengisian Kuesioner**

1. Setiap pertanyaan mempunyai alternatif jawaban sebagai berikut:

JAWABAN	SKOR
SS: Sangat Setuju	4
S: Setuju	3
TS : Tidak Setuju	2
STS : Sangat Tidak Setuju	1

2. Berilah tanda ceklist (√) pada salah satu jawaban yang saudara pilih
3. Isilah seluruh butir pernyataan

NO	PERNYATAAN	JAWABAN			
		SS	S	TS	STS
<b>A</b>	<b>KINERJA</b>				
1	Saya mampu menyelesaikan pekerjaan sesuai target yang sudah ditentukan.				
2	Saya dapat memenuhi beban kerja yang telah ditetapkan				
3	Saya dapat menyelesaikan pekerjaan dengan kualitas yang baik.				
4	Saya dapat meminimalisasi tingkat kesalahan saya dalam bekerja				
5	Saya memaksimalkan sumberdaya yang ada dalam setiap pekerjaan.				
6	Saya tidak pernah menunda pekerjaan				
7	Saya mematuhi hukum dan aturan yang berlaku di RS Kanker Dharmais				
8	Saya bekerja sesuai dengan standar yang diterapkan di RS Kanker Dharmais				
9	Saya mampu untuk memutuskan dan melakukan sesuatu yang benar tanpa harus diberi tahu				
10	Saya mampu mengambil inisiatif dalam bekerja				
11	Saya bekerja dengan ketelitian yang tinggi untuk hasil yang baik				
12	Saya bekerja penuh ketelitian untuk menghindari kesalahan dalam menyelesaikan pekerjaan				
13	Saya mampu memberikan contoh dalam melakukan pekerjaan dengan baik				
14	Saya mampu memberikan saran agar pekerjaan menjadi lebih baik dan benar				
15	Saya mengutamakan kejujuran dalam setiap menyelesaikan pekerjaan untuk meningkatkan hasil kerja.				
16	Saya dapat mempertanggung jawabkan tugas yang diberikan				
17	Saya mampu menemukan ide-ide baru guna menyelesaikan pekerjaan saya				
18	Saya dapat mengatasi berbagai kesulitan dengan pemikiran saya				
<b>B</b>	<b>SELF EFFICACY</b>	<b>SS</b>	<b>S</b>	<b>TS</b>	<b>STS</b>
19	Saya mengetahui tingkat kesulitan tugas yang dilakukan sebagai perawat				

20	Saya mampu mengatasi hambatan dalam tingkat kesulitan tugas yang dihadapi				
21	Saya menguasai bidang atau tugas pekerjaan yang dilakukan sebagai perawat				
22	Ketika saya dihadapkan dengan masalah, saya bisa menemukan beberapa solusi				
23	Saya memiliki semangat juang dan tidak mudah menyerah ketika mengalami hambatan dalam menyelesaikan tugas.				
24	Saya bisa tetap tenang ketika menghadapi kesulitan karena saya yakin dengan kemampuan saya				
<b>C</b>	<b>PENGEMBANGAN KARIER</b>	<b>SS</b>	<b>S</b>	<b>TS</b>	<b>STS</b>
25	Manajemen RS Kanker Dharmais membantu dalam menyesuaikan kebutuhan karier				
26	Atasan saya selalu memberi perhatian khusus terhadap pengembangan karir karyawannya				
27	Manajemen RS Kanker Dharmais menyiapkan posisi jabatan atau karier sesuai dengan kinerja yang dilakukan.				
28	RS Kanker Dharmais membantu dalam meningkatkan kemampuan kinerja karyawan				
29	Manajemen RS Kanker Dharmais memberikan fasilitas-fasilitas kerja yang sesuai dengan jabatan				
30	Perusahaan memberikan dana pendidikan untuk studi lanjut.				
31	Manajemen RS Kanker Dharmais membantu saya dalam meningkatkan kemampuan atau keterampilan dalam bidang operasional				
32	Pelatihan yang saya peroleh memampukan saya melakukan pekerjaan pada jenjang karier yang lebih tinggi				
33	Manajemen RS Kanker Dharmais memberikan kesempatan yang sama dalam berkarier				
34	Saya merasa mendapat perlakuan yang adil dalam sistem karir saat ini				
35	Manajemen RS Kanker Dharmais memberikan informasi kebutuhan karier				
36	Manajemen RS Kanker Dharmais selalu memberikan informasi tentang berbagai peluang promosi yang diberikan				

37	Manajemen RS Kanker Dharmais memberikan pengakuan, jabatan, dan imbalan jasa yang semakin besar kepada karyawan yang berprestasi tinggi				
38	Saya puas dengan sistem promosi yang ada di RS Kanker Dharmais				
39	Manajemen RS Kanker Dharmais memindahkan dan menempatkan karyawan dalam jabatannya berdasarkan prestasi kerja.				
40	Mutasi dilaksanakan dalam rangka menambah pengalaman dan pengetahuan pegawai				
41	Manajemen RS Kanker Dharmais memberikan program pendidikan dan pelatihan untuk karyawan				
42	Saya mempunyai kepuasan yang tinggi terhadap pengembangan karir yang ada				
<b>D</b>	<b>EMPLOYEE ENGAGEMENT</b>	<b>SS</b>	<b>S</b>	<b>TS</b>	<b>STS</b>
43	Sebagai perawat saya selalu bersemangat ketika sedang bekerja.				
44	Saya tidak mudah menyerah ketika ada kesulitan dalam bekerja				
45	Saya merasa pekerjaan yang saya lakukan sebagai perawat sangat bermakna.				
46	Pekerjaan saya merupakan sumber kebanggaan bagi diri saya				
47	Saya fokus ketika sedang bekerja di rumah sakit kanker dharmais				
48	Saya sangat menikmati pekerjaan saya				

**Lampiran 4 Output Uji Validitas dan Reliabilitas**

**Uji Validitas Variabel Kinerja Perawat**

**Correlations**

		KP1	KP2	KP3	KP4	KP5	KP6	KP7	KP8	KP9	KP10	KP11	KP12	KP13	KP14	KP15	KP16	KP17	KP18	TOTALKP
KP1	Pearson Correlation	1	.449*	.538**	.340	.433*	.559**	.449*	.282	.371*	.626**	.449*	.432*	.527**	.475**	.479**	.666**	.341	.401*	.666**
	Sig. (2-tailed)		.013	.002	.066	.017	.001	.013	.131	.043	.000	.013	.017	.003	.008	.007	.000	.065	.028	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
KP2	Pearson Correlation	.449*	1	.244	.108	.246	.156	.219	.048	.151	.151	.219	.025	.177	.285	.203	.331	.310	.272	.343
	Sig. (2-tailed)	.013		.194	.571	.190	.409	.244	.800	.425	.425	.244	.894	.350	.128	.283	.074	.096	.146	.064
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
KP3	Pearson Correlation	.538**	.244	1	.789**	.528**	.744**	.353	.299	.412*	.629**	.680**	.573**	.723**	.338	.418*	.462*	.391*	.431*	.720**
	Sig. (2-tailed)	.002	.194		.000	.003	.000	.056	.108	.024	.000	.000	.001	.000	.068	.022	.010	.033	.017	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
KP4	Pearson Correlation	.340	.108	.789**	1	.603**	.702**	.442*	.451*	.644*	.718**	.777**	.680**	.801**	.488**	.528**	.665**	.432*	.647**	.822**
	Sig. (2-tailed)	.066	.571	.000		.000	.000	.014	.012	.000	.000	.000	.000	.000	.006	.003	.000	.017	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30

KP5	Pearson Correlation	.433*	.246	.528**	.603**	1	.598**	.484**	.327	.730*	.646**	.603**	.412*	.511**	.586**	.610**	.484**	.513**	.520**	.742**
	Sig. (2-tailed)	.017	.190	.003	.000		.000	.007	.078	.000	.000	.000	.024	.004	.001	.000	.007	.004	.003	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
KP6	Pearson Correlation	.559**	.156	.744**	.702**	.598**	1	.375*	.488**	.489*	.740**	.811**	.637**	.804**	.457*	.715**	.593**	.367*	.394*	.806**
	Sig. (2-tailed)	.001	.409	.000	.000	.000		.041	.006	.006	.000	.000	.000	.000	.011	.000	.001	.046	.031	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
KP7	Pearson Correlation	.449*	.219	.353	.442*	.484**	.375*	1	.692**	.644*	.605**	.331	.571**	.489**	.691**	.420*	.442*	.554**	.365*	.700**
	Sig. (2-tailed)	.013	.244	.056	.014	.007	.041		.000	.000	.000	.074	.001	.006	.000	.021	.014	.001	.047	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
KP8	Pearson Correlation	.282	.048	.299	.451*	.327	.488**	.692**	1	.385*	.491**	.451*	.536**	.556**	.631**	.502**	.370*	.388*	.257	.636**
	Sig. (2-tailed)	.131	.800	.108	.012	.078	.006	.000		.036	.006	.012	.002	.001	.000	.005	.044	.034	.170	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
KP9	Pearson Correlation	.371*	.151	.412*	.644**	.730**	.489**	.644**	.385*	1	.769**	.447*	.412*	.442*	.647**	.493**	.546**	.591**	.547**	.738**
	Sig. (2-tailed)	.043	.425	.024	.000	.000	.006	.000	.036		.000	.013	.024	.015	.000	.006	.002	.001	.002	.000



	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
KP10	Pearson Correlation	.626**	.151	.629**	.718**	.646**	.740**	.605**	.491**	.769*	1	.605**	.518**	.635**	.620**	.699**	.718**	.580**	.667**	.867**
	Sig. (2-tailed)	.000	.425	.000	.000	.000	.000	.000	.006	.000		.000	.003	.000	.000	.000	.000	.001	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
KP11	Pearson Correlation	.449*	.219	.680**	.777**	.603**	.811**	.331	.451*	.447*	.605**	1	.789**	.801**	.386*	.637**	.665**	.310	.459*	.789**
	Sig. (2-tailed)	.013	.244	.000	.000	.000	.000	.074	.012	.013	.000		.000	.000	.035	.000	.000	.096	.011	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
KP12	Pearson Correlation	.432*	.025	.573**	.680**	.412*	.637**	.571**	.536**	.412*	.518**	.789**	1	.825**	.537**	.524**	.680**	.391*	.431*	.760**
	Sig. (2-tailed)	.017	.894	.001	.000	.024	.000	.001	.002	.024	.003	.000		.000	.002	.003	.000	.033	.017	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
KP13	Pearson Correlation	.527**	.177	.723**	.801**	.511**	.804**	.489**	.556**	.442*	.635**	.801**	.825**	1	.588**	.587**	.697**	.433*	.533**	.847**
	Sig. (2-tailed)	.003	.350	.000	.000	.004	.000	.006	.001	.015	.000	.000	.000		.001	.001	.000	.017	.002	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
KP14	Pearson Correlation	.475**	.285	.338	.488**	.586**	.457*	.691**	.631**	.647*	.620**	.386*	.537**	.588**	1	.613**	.589**	.579**	.546**	.771**

	Sig. (2-tailed)	.008	.128	.068	.006	.001	.011	.000	.000	.000	.000	.035	.002	.001	.000	.001	.001	.002	.000	
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	
KP15	Pearson Correlation	.479**	.203	.418*	.528**	.610**	.715**	.420*	.502**	.493*	.699**	.637**	.524**	.587**	.613**	1	.637**	.492**	.511**	.765**
	Sig. (2-tailed)	.007	.283	.022	.003	.000	.000	.021	.005	.006	.000	.000	.003	.001	.000		.000	.006	.004	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
KP16	Pearson Correlation	.666**	.331	.462*	.665**	.484**	.593**	.442*	.370*	.546*	.718**	.665**	.680**	.697**	.589**	.637**	1	.432*	.647**	.806**
	Sig. (2-tailed)	.000	.074	.010	.000	.007	.001	.014	.044	.002	.000	.000	.000	.000	.001	.000		.017	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
KP17	Pearson Correlation	.341	.310	.391*	.432*	.513**	.367*	.554**	.388*	.591*	.580**	.310	.391*	.433*	.579**	.492**	.432*	1	.678**	.666**
	Sig. (2-tailed)	.065	.096	.033	.017	.004	.046	.001	.034	.001	.001	.096	.033	.017	.001	.006	.017		.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
KP18	Pearson Correlation	.401*	.272	.431*	.647**	.520**	.394*	.365*	.257	.547*	.667**	.459*	.431*	.533**	.546**	.511**	.647**	.678**	1	.707**
	Sig. (2-tailed)	.028	.146	.017	.000	.003	.031	.047	.170	.002	.000	.011	.017	.002	.002	.004	.000	.000		.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30

TOTAL LKP	Pearson Correlation	.666**	.343	.720**	.822**	.742**	.806**	.700**	.636**	.738*	.867**	.789**	.760**	.847**	.771**	.765**	.806**	.666**	.707**	1
	Sig. (2- tailed)	.000	.064	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30

\*. Correlation is significant at the 0.05 level (2-tailed).

\*\* . Correlation is significant at the 0.01 level (2-tailed).

Data tersebut menunjukkan bahwa indikator dari variabel kinerja perawat yaitu KP1-KP18 memiliki nilai signifikansi < 0,05 dan dinyatakan valid.

## Uji Validitas Variabel Self Efficacy

		Correlations						
		SE1	SE2	SE3	SE4	SE5	SE6	TOTALSE
SE1	Pearson Correlation	1	.648**	.398*	.511**	.749**	.511**	.807**
	Sig. (2-tailed)		.000	.029	.004	.000	.004	.000
	N	30	30	30	30	30	30	30
SE2	Pearson Correlation	.648**	1	.478**	.503**	.495**	.503**	.759**
	Sig. (2-tailed)	.000		.008	.005	.005	.005	.000
	N	30	30	30	30	30	30	30
SE3	Pearson Correlation	.398*	.478**	1	.679**	.588**	.679**	.783**
	Sig. (2-tailed)	.029	.008		.000	.001	.000	.000
	N	30	30	30	30	30	30	30
SE4	Pearson Correlation	.511**	.503**	.679**	1	.437*	.659**	.786**
	Sig. (2-tailed)	.004	.005	.000		.016	.000	.000
	N	30	30	30	30	30	30	30
SE5	Pearson Correlation	.749**	.495**	.588**	.437*	1	.656**	.824**
	Sig. (2-tailed)	.000	.005	.001	.016		.000	.000
	N	30	30	30	30	30	30	30
SE6	Pearson Correlation	.511**	.503**	.679**	.659**	.656**	1	.834**
	Sig. (2-tailed)	.004	.005	.000	.000	.000		.000
	N	30	30	30	30	30	30	30
TOTALS E	Pearson Correlation	.807**	.759**	.783**	.786**	.824**	.834**	1
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	
	N	30	30	30	30	30	30	30
**. Correlation is significant at the 0.01 level (2-tailed).								
*. Correlation is significant at the 0.05 level (2-tailed).								

Data tersebut menunjukkan bahwa indikator dari variabel self efficacy yaitu SE1-SE6 memiliki nilai signifikansi  $< 0,05$  dan dinyatakan valid.

Uji Validitas Variabel Pengembangan Karier

		Correlations																		
		PK1	PK2	PK3	PK4	PK5	PK6	PK7	PK8	PK9	PK10	PK11	PK12	PK13	PK14	PK15	PK16	PK17	PK18	TOTALPK
PK1	Pearson Correlation	1	.621*	.653*	.586*	.602*	.419*	.465*	.651*	.672*	.512**	.650**	.686**	.620**	.654**	.691**	.686**	.460*	.648**	.729**
	Sig. (2-tailed)		.000	.000	.001	.000	.021	.010	.000	.000	.004	.000	.000	.000	.000	.000	.000	.011	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
PK2	Pearson Correlation	.621*	1	.846*	.752*	.781*	.702*	.621*	.721*	.706*	.667**	.769**	.711**	.720**	.742**	.731**	.711**	.627**	.694**	.855**
	Sig. (2-tailed)	.000		.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
PK3	Pearson Correlation	.653*	.846*	1	.709*	.771*	.664*	.661*	.601*	.571*	.710**	.769**	.706**	.771**	.813**	.726**	.591**	.584**	.677**	.836**
	Sig. (2-tailed)	.000	.000		.000	.000	.000	.000	.000	.001	.000	.000	.000	.000	.000	.000	.001	.001	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
PK4	Pearson Correlation	.586*	.752*	.709*	1	.755*	.807*	.773*	.755*	.586*	.709**	.745**	.621**	.695**	.756**	.783**	.696**	.746**	.640**	.848**
	Sig. (2-tailed)	.001	.000	.000		.000	.000	.000	.000	.001	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30

PK5	Pearson Correlation	.602*	.781*	.771*	.755*	1	.765*	.666*	.687*	.721*	.674**	.744**	.710**	.746**	.722**	.785**	.710**	.693**	.690**	.859**
	Sig. (2-tailed)	.000	.000	.000	.000		.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
PK6	Pearson Correlation	.419*	.702*	.664*	.807*	.765*	1	.686*	.652*	.569*	.808**	.781**	.687**	.733**	.780**	.753**	.738**	.799**	.693**	.850**
	Sig. (2-tailed)	.021	.000	.000	.000	.000		.000	.000	.001	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
PK7	Pearson Correlation	.465*	.621*	.661*	.773*	.666*	.686*	1	.616*	.474*	.636**	.703**	.605**	.665**	.763**	.747**	.537**	.631**	.644**	.769**
	Sig. (2-tailed)	.010	.000	.000	.000	.000	.000		.000	.008	.000	.000	.000	.000	.000	.000	.002	.000	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
PK8	Pearson Correlation	.651*	.721*	.601*	.755*	.687*	.652*	.616*	1	.765*	.695**	.719**	.644**	.692**	.676**	.737**	.775**	.618**	.782**	.828**
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	.000		.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
PK9	Pearson Correlation	.672*	.706*	.571*	.586*	.721*	.569*	.474*	.765*	1	.727**	.777**	.778**	.786**	.696**	.803**	.778**	.538**	.881**	.835**
	Sig. (2-tailed)	.000	.000	.001	.001	.000	.001	.008	.000		.000	.000	.000	.000	.000	.000	.000	.002	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30

	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	
PK10	Pearson Correlation	.512*	.667*	.710*	.709*	.674*	.808*	.636*	.695*	.727*	1	.845**	.781**	.827**	.865**	.743**	.669**	.651**	.829**	.872**
	Sig. (2-tailed)	.004	.000	.000	.000	.000	.000	.000	.000	.000		.000	.000	.000	.000	.000	.000	.000	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
PK11	Pearson Correlation	.650*	.769*	.769*	.745*	.744*	.781*	.703*	.719*	.777*	.845**	1	.877**	.836**	.939**	.885**	.807**	.684**	.877**	.937**
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000		.000	.000	.000	.000	.000	.000	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
PK12	Pearson Correlation	.686*	.711*	.706*	.621*	.710*	.687*	.605*	.644*	.778*	.781**	.877**	1	.822**	.893**	.774**	.701**	.707**	.816**	.880**
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000		.000	.000	.000	.000	.000	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
PK13	Pearson Correlation	.620*	.720*	.771*	.695*	.746*	.733*	.665*	.692*	.786*	.827**	.836**	.822**	1	.888**	.801**	.625**	.638**	.827**	.895**
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000		.000	.000	.000	.000	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
PK14	Pearson Correlation	.654*	.742*	.813*	.756*	.722*	.780*	.763*	.676*	.696*	.865**	.939**	.893**	.888**	1	.839**	.705**	.694**	.842**	.929**

	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
PK15	Pearson Correlation	.691*	.731*	.726*	.783*	.785*	.753*	.747*	.737*	.803*	.743**	.885**	.774**	.801**	.839**	1	.840**	.719**	.836**	.920**
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000		.000	.000	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
PK16	Pearson Correlation	.686*	.711*	.591*	.696*	.710*	.738*	.537*	.775*	.778*	.669**	.807**	.701**	.625**	.705**	.840**	1	.707**	.816**	.848**
	Sig. (2-tailed)	.000	.000	.001	.000	.000	.000	.002	.000	.000	.000	.000	.000	.000	.000	.000		.000	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
PK17	Pearson Correlation	.460*	.627*	.584*	.746*	.693*	.799*	.631*	.618*	.538*	.651**	.684**	.707**	.638**	.694**	.719**	.707**	1	.660**	.788**
	Sig. (2-tailed)	.011	.000	.001	.000	.000	.000	.000	.000	.002	.000	.000	.000	.000	.000	.000	.000		.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30
PK18	Pearson Correlation	.648*	.694*	.677*	.640*	.690*	.693*	.644*	.782*	.881*	.829**	.877**	.816**	.827**	.842**	.836**	.816**	.660**	1	.901**
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000		.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30



TOTALPK	Pearson Correlation	.729*	.855*	.836*	.848*	.859*	.850*	.769*	.828*	.835*	.872**	.937**	.880**	.895**	.929**	.920**	.848**	.788**	.901**	1
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000	.000
	N	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30	30

\*\* . Correlation is significant at the 0.01 level (2-tailed).

\* . Correlation is significant at the 0.05 level (2-tailed).

Data tersebut menunjukkan bahwa indikator dari variabel pengembangan karier yaitu PK1-PK18 memiliki nilai signifikansi < 0,05 dan dinyatakan valid.

## Uji Validitas Variabel Employee Engagement

		Correlations						
		EE1	EE2	EE3	EE4	EE5	EE6	TOTALEE
EE1	Pearson Correlation	1	.727**	.674**	.733**	.672**	.808**	.906**
	Sig. (2-tailed)		.000	.000	.000	.000	.000	.000
	N	30	30	30	30	30	30	30
EE2	Pearson Correlation	.727**	1	.617**	.571**	.718**	.459*	.797**
	Sig. (2-tailed)	.000		.000	.001	.000	.011	.000
	N	30	30	30	30	30	30	30
EE3	Pearson Correlation	.674**	.617**	1	.733**	.560**	.709**	.843**
	Sig. (2-tailed)	.000	.000		.000	.001	.000	.000
	N	30	30	30	30	30	30	30
EE4	Pearson Correlation	.733**	.571**	.733**	1	.629**	.762**	.870**
	Sig. (2-tailed)	.000	.001	.000		.000	.000	.000
	N	30	30	30	30	30	30	30
EE5	Pearson Correlation	.672**	.718**	.560**	.629**	1	.609**	.818**
	Sig. (2-tailed)	.000	.000	.001	.000		.000	.000
	N	30	30	30	30	30	30	30
EE6	Pearson Correlation	.808**	.459*	.709**	.762**	.609**	1	.860**
	Sig. (2-tailed)	.000	.011	.000	.000	.000		.000
	N	30	30	30	30	30	30	30
TOTALEE	Pearson Correlation	.906**	.797**	.843**	.870**	.818**	.860**	1
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	
	N	30	30	30	30	30	30	30
**. Correlation is significant at the 0.01 level (2-tailed).								
*. Correlation is significant at the 0.05 level (2-tailed).								

Data tersebut menunjukkan bahwa indikator dari variabel employee engagement yaitu EE1-EE6 memiliki nilai signifikansi  $< 0,05$  dan dinyatakan valid.

**Uji Reliabilitas Variabel Kinerja Perawat****Scale: KINERJA PERAWAT****Case Processing Summary**

		N	%
Cases	Valid	30	100.0
	Excluded <sup>a</sup>	0	.0
	Total	30	100.0

a. Listwise deletion based on all variables in the procedure.

**Reliability Statistics**

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.947	.949	18

**Item-Total Statistics**

	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item- Total Correlation	Squared Multiple Correlation	Cronbach's Alpha if Item Deleted
KP1	56.2667	52.823	.621	.	.945
KP2	56.4333	55.702	.276	.	.951
KP3	56.3667	52.378	.681	.	.944
KP4	56.4333	51.633	.796	.	.942
KP5	56.5333	52.671	.709	.	.944
KP6	56.5667	51.633	.777	.	.943
KP7	56.4333	52.668	.660	.	.945
KP8	56.4000	51.421	.569	.	.948
KP9	56.6667	51.609	.697	.	.944
KP10	56.4667	51.361	.848	.	.941
KP11	56.4333	51.909	.759	.	.943
KP12	56.3667	52.033	.725	.	.944
KP13	56.5000	50.948	.823	.	.942
KP14	56.6000	51.490	.735	.	.943
KP15	56.3333	51.954	.731	.	.943
KP16	56.4333	51.771	.778	.	.943
KP17	56.6667	53.402	.626	.	.945
KP18	56.7000	51.597	.659	.	.945

**Uji Reliabilitas Variabel Self Efficacy**

**Scale: Self Efficacy**

**Case Processing Summary**

		N	%
Cases	Valid	30	100.0
	Excluded <sup>a</sup>	0	.0
	Total	30	100.0

a. Listwise deletion based on all variables in the procedure.

**Reliability Statistics**

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.886	.887	6

**Inter-Item Correlation Matrix**

	SE1	SE2	SE3	SE4	SE5	SE6
SE1	1.000	.648	.398	.511	.749	.511
SE2	.648	1.000	.478	.503	.495	.503
SE3	.398	.478	1.000	.679	.588	.679
SE4	.511	.503	.679	1.000	.437	.659
SE5	.749	.495	.588	.437	1.000	.656
SE6	.511	.503	.679	.659	.656	1.000

**Item-Total Statistics**

	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Squared Multiple Correlation	Cronbach's Alpha if Item Deleted
SE1	16.1667	4.695	.706	.729	.865
SE2	16.4667	4.878	.644	.501	.875
SE3	16.4000	5.076	.697	.646	.868
SE4	16.3667	4.792	.681	.627	.869
SE5	16.0667	4.616	.729	.739	.861
SE6	16.3667	4.654	.749	.634	.858

## Uji Reliabilitas Variabel Pengembangan Karier

### Scale: Pengembangan Karier

#### Case Processing Summary

		N	%
Cases	Valid	30	100.0
	Excluded <sup>a</sup>	0	.0
	Total	30	100.0

a. Listwise deletion based on all variables in the procedure.

#### Reliability Statistics

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.977	.978	18

#### Item-Total Statistics

	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item- Total Correlation	Squared Multiple Correlation	Cronbach's Alpha if Item Deleted
PK1	50.3667	118.516	.699	.	.978
PK2	50.4000	113.697	.833	.	.976
PK3	50.3333	114.851	.813	.	.976
PK4	50.3000	117.803	.832	.	.976
PK5	50.4667	116.120	.842	.	.976
PK6	50.6000	112.800	.826	.	.976
PK7	50.4333	117.909	.743	.	.977
PK8	50.1333	116.602	.808	.	.976
PK9	50.3667	115.206	.813	.	.976
PK10	50.4333	113.771	.853	.	.976
PK11	50.5667	115.771	.929	.	.975
PK12	50.5000	114.534	.864	.	.976
PK13	50.5000	111.224	.877	.	.976
PK14	50.6333	114.309	.919	.	.975
PK15	50.5333	115.361	.910	.	.975
PK16	50.5000	115.086	.828	.	.976
PK17	50.3000	117.734	.764	.	.977
PK18	50.4333	114.944	.888	.	.976

## Uji Reliabilitas Variabel Employee Engagement

### Scale: Employee Engagement

#### Case Processing Summary

		N	%
Cases	Valid	30	100.0
	Excluded <sup>a</sup>	0	.0
	Total	30	100.0

a. Listwise deletion based on all variables in the procedure.

#### Reliability Statistics

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.922	.923	6

#### Item-Total Statistics

	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item- Total Correlation	Squared Multiple Correlation	Cronbach's Alpha if Item Deleted
EE1	16.9333	5.789	.860	.819	.897
EE2	16.9667	6.171	.708	.746	.917
EE3	16.9333	5.995	.770	.658	.909
EE4	16.9000	5.886	.808	.685	.904
EE5	17.0000	6.138	.738	.629	.913
EE6	16.9333	5.720	.784	.806	.908

## Lampiran 5 Keterangan Lolos Kaji Etik Universitas Esa Unggul



DEWAN PENEGAKAN KODE ETIK UNIVERSITAS ESA UNGGUL  
 KOMISI ETIK PENELITIAN  
 Jl. Arjuna Utara No.9 Kebon Jeruk Jakarta Barat 11510  
 Telp. 021-5674223 email: dpke@esaunggul.ac.id

Nomor : 0311-20.292/DPKE-KEP/FINAL-EA/UEU/VIII/2020

**KETERANGAN LOLOS KAJI ETIK**  
**ETHICAL APPROVAL**

Komisi Etik Penelitian Universitas Esa Unggul dalam upaya melindungi hak asasi dan kesejahteraan subyek penelitian kesehatan, telah mengkaji dengan teliti protokol berjudul:

**PENGARUH SELF EFFICACY DAN PENGEMBANGAN KARIER TERHADAP EMPLOYEE  
 ENGAGEMENT SERTA KINERJA PERAWAT DI RUMAH SAKIT KANKER DHARMAIS**

Peneliti Utama : Ns. Gede Pronajaya, S.Kep.

Pembimbing : Dr. Rina Anindita, SE., MM.

Nama Institusi : Universitas Esa Unggul

dan telah menyetujui protokol tersebut di atas.

Jakarta, 25 Agustus 2020

Ketua  
  
 Universitas Esa Unggul  
 Dewan Penegakan Kode Etik

Dr. Rokiah Kusumapradja, SKM., MHA

- *Ethical approval* berlaku satu tahun dari tanggal persetujuan.
- Peneliti berkewajiban
  1. Menjaga kerahasiaan identitas subyek penelitian
  2. Memberitahukan status penelitian apabila:
    - a. Setelah masa berlakunya keterangan lolos kaji etik, penelitian masih belum selesai, dalam hal ini *ethical approval* harus diperpanjang
    - b. Penelitian berhenti di tengah jalan
  3. Melaporkan kejadian serius yang tidak diinginkan (*serious adverse events*).
  4. Peneliti tidak boleh melakukan tindakan apapun pada subyek sebelum penelitian lolos kaji etik dan *informed consent*.

## Lampiran 6 Keterangan Lolos Kaji Etik Rumah Sakit Kanker Dharmais


**KEMENTERIAN KESEHATAN REPUBLIK INDONESIA  
DIREKTORAT JENDERAL PELAYANAN KESEHATAN**

PUSAT KANKER NASIONAL  
RUMAH SAKIT KANKER DHARMAIS  
Jalan Let. Jend. S. Parman Kav. 84-86, Jakarta 11420  
Telepon +62 21 5681570 Faksimile +62 21 5681579  
Website : www.dharmais.co.id Email : dharmais@dharmais.co.id



No. : 0148/KEPK/X/2020

**KETERANGAN LOLOS KAJI ETIK  
ETHICAL CLEARANCE**

Komite Etik Penelitian, Rumah Sakit Kanker "Dharmais" dalam upaya melindungi hak asasi dan kesejahteraan subyek penelitian kedokteran, telah mengkaji dengan teliti protokol berjudul :

*The committee of the Medical Research Ethics of the "Dharmais" Cancer Hospital, with regards of the protection of human rights and welfare in medical research, has carefully reviewed the protocol entitled:*

***"Pengaruh Self Efficacy dan Pengembangan Karier terhadap Employee Engagement serta Kinerja Perawat di Rumah Sakit Kanker Dharmais"***

Nama Peneliti Utama : Gede Pronajaya  
Name of the Principal Investigator  
Nama Institusi : Universitas Esa Unggul  
Name of Institution

Dan telah menyetujui protokol tersebut di atas.  
And approved the protocol



Jakarta, 19 Oktober 2020

Wakil Ketua  
Vice Chairman

Dr. drh. Agus Kosasih, SpPK, MARS

\*Lolos Kaji Etik (Ethical approval) berlaku satu tahun dari tanggal persetujuan ini dikeluarkan

\*\*Peneliti berkewajiban

1. Menjaga kerahasiaan identitas subyek penelitian
2. Memberitahukan status penelitian apabila:
  - a. Setelah masa berlakunya keterangan lolos kaji etik, penelitian masih belum selesai, dalam hal ini *ethical clearance* harus diperpanjang
  - b. Penelitian berhenti di tengah jalan
3. Melaporkan kejadian serius yang tidak diinginkan (*serious adverse events*)
4. Peneliti tidak boleh melakukan tindakan apapun pada subyek sebelum penelitian lolos kaji etik dan *informed consent*
5. Komite Etik Penelitian Kesehatan (KEPK) akan melakukan pemantauan kegiatan penelitian dengan pemberitahuan terlebih dahulu kepada tim peneliti
6. Komite Etik Penelitian Kesehatan berhak untuk menghentikan penelitian apabila dalam pelaksanaan penelitian diketahui ada hak pasien yang dilanggar atau keselamatan pasien tidak terjaga dengan baik.
7. Hasil Penelitian mohon diserahkan ke Komite Etik Penelitian Kesehatan RS. Kanker "Dharmais"

Semua prosedur persetujuan dilakukan sesuai dengan standar ICH-GCP  
*All procedure of Ethical Approval are performed in accordance with ICH-GCP standard procedure*

Professional, Care, Continuous Improvement & Synergy





## Lampiran 7 Ijin Penelitian



**KEMENTERIAN KESEHATAN REPUBLIK INDONESIA  
DIREKTORAT JENDERAL PELAYANAN KESEHATAN**

PUSAT KANKER NASIONAL  
RUMAH SAKIT KANKER DHARMAIS  
Jalan Let. Jend. S. Parman Kav. 84-86, Jakarta 11420  
Telepon +62 21 5681570 Faksimile +62 21 5681579  
Website : www.dharmais.co.id Email : dharmais@dharmais.co.id



Nomor : LB.02.01/XXII.2.3/8299/2020  
Hal : Ijin Penelitian

9 September 2020

Yth.  
Ketua Magister Administrasi Rumah Sakit  
Universitas Esa Unggul  
Jakarta

Menjawab surat Saudara, 079/Esa Unggul/Pasca-Eks/MARS/VII/2020 tentang Permohonan izin Penelitian, maka dengan ini kami informasikan bahwa kami dapat menyetujui dan memberikan izin untuk melakukan kegiatan tersebut di Rumah Sakit Kanker "Dharmais" kepada Mahasiswa/wi saudara :

Nama : Gede ProOnajaya  
NPM : 20180309046  
Judul : "Pengaruh Self Efficacy dan Pengembangan Karier Terhadap Employee Engagement Serta Kinerja Perawat di Rumah Sakit Kanker Dharmais"

Untuk kelancaran pengumpulan data, kami telah menunjuk Supervisor /Narasumber di Rumah Sakit Kanker "Dharmais" :

Nama : Ns.Retno Setiowati S.Kep.MKM

Sebelum melaksanakan kegiatan kami mohon agar yang bersangkutan terlebih dahulu menghubungi Bagian Penelitian dan Pengembangan RS.Kanker "Dharmais"

Demikian atas perhatiannya kami ucapkan terimakasih.-

Direktur Utama,

dr. R. Soeko W Nindito D, MARS  
NIP : 196712212002121002

Tembusan Kepada Yth  
Ns.Retno Setiowati S.Kep.MKM

Professional, Care, Continuous Improvement & Synergy



## Lampiran 8 Output AMOS

## Assessment of normality (Group number 1)

Variable	min	max	skew	c.r.	kurtosis	c.r.
KP16	2.000	4.000	-.294	-1.699	-1.416	-4.087
KP13	2.000	4.000	-.164	-.948	-.949	-2.739
KP5	2.000	4.000	.043	.247	-1.481	-4.277
EE1	1.000	4.000	-.600	-3.463	.373	1.077
EE6	2.000	4.000	-.404	-2.333	-1.053	-3.040
PK9	1.000	4.000	-.504	-2.908	-.071	-.204
PK11	1.000	4.000	-.234	-1.351	-.348	-1.004
PK14	1.000	4.000	.073	.419	-.507	-1.464
SE6	2.000	4.000	-.085	-.490	-.842	-2.429
SE5	2.000	4.000	-.115	-.662	-1.486	-4.289
SE4	2.000	4.000	.176	1.019	-.582	-1.681
Multivariate					42.999	17.979

**Observations farthest from the centroid (Mahalanobis distance) (Group number 1)**

Observation number	Mahalanobis d-squared	p1	p2
78	61.785	.000	.000
103	36.163	.000	.000
4	33.410	.000	.000
134	33.410	.000	.000
52	29.620	.002	.000
182	29.620	.002	.000
121	29.506	.002	.000
57	28.157	.003	.000
187	28.157	.003	.000
2	24.561	.011	.000

Observation number	Mahalanobis d-squared	p1	p2
132	24.561	.011	.000
56	24.349	.011	.000
186	24.349	.011	.000
104	24.088	.012	.000
117	22.649	.020	.000
105	20.791	.036	.002
109	20.082	.044	.008
12	19.514	.052	.019
142	19.514	.052	.009
75	19.470	.053	.005
40	19.310	.056	.004
170	19.310	.056	.002
26	19.100	.059	.002
156	19.100	.059	.001
83	19.039	.060	.000
77	18.913	.063	.000
110	18.787	.065	.000
38	18.554	.070	.000
168	18.554	.070	.000
81	17.998	.082	.001
123	17.998	.082	.000
129	17.383	.097	.003
119	17.089	.105	.006
127	17.053	.106	.004
96	17.049	.106	.002
67	16.949	.109	.002

Observation number	Mahalanobis d-squared	p1	p2
197	16.949	.109	.001
45	16.180	.135	.017
175	16.180	.135	.011
42	16.155	.135	.007
172	16.155	.135	.004
8	16.115	.137	.003
138	16.115	.137	.002
101	15.865	.146	.003
47	15.442	.163	.014
177	15.442	.163	.009
35	15.203	.173	.016
165	15.203	.173	.010
107	15.122	.177	.009
98	14.958	.184	.013
91	14.930	.186	.009
43	14.512	.206	.038
173	14.512	.206	.026
97	14.260	.219	.051
93	14.109	.227	.065
94	14.109	.227	.047
50	13.942	.236	.064
180	13.942	.236	.046
46	13.867	.240	.045
176	13.867	.240	.032
17	13.600	.256	.068
147	13.600	.256	.050

Observation number	Mahalanobis d-squared	p1	p2
118	13.597	.256	.036
70	13.587	.257	.027
200	13.587	.257	.018
69	13.287	.275	.050
71	13.287	.275	.036
199	13.287	.275	.026
120	13.114	.286	.040
15	13.046	.290	.039
145	13.046	.290	.028
113	12.910	.299	.038
62	12.758	.309	.054
192	12.758	.309	.039
114	12.604	.320	.057
11	12.414	.333	.093
141	12.414	.333	.071
22	11.875	.373	.335
30	11.875	.373	.284
152	11.875	.373	.237
160	11.875	.373	.195
80	11.759	.382	.229
34	11.700	.387	.225
164	11.700	.387	.184
61	10.986	.444	.733
191	10.986	.444	.684
5	10.890	.453	.715
135	10.890	.453	.665

Observation number	Mahalanobis d-squared	p1	p2
72	10.850	.456	.648
3	10.780	.462	.658
133	10.780	.462	.604
41	10.622	.475	.694
171	10.622	.475	.643
39	10.372	.497	.800
169	10.372	.497	.758
21	10.287	.505	.780
151	10.287	.505	.736
73	10.229	.510	.737
59	10.160	.516	.748
189	10.160	.516	.700

Notes for Model (Default model)

Computation of degrees of freedom (Default model)

Number of distinct sample moments: 66

Number of distinct parameters to be estimated: 28

Degrees of freedom (66 - 28): 38

Result (Default model)

Minimum was achieved

Chi-square = 50.898

Degrees of freedom = 38

Probability level = .079

Scalar Estimates (Group number 1 - Default model)

Maximum Likelihood Estimates

**Regression Weights: (Group number 1 - Default model)**

			Estimate	S.E.	C.R.	P	Label
EMPLOYEE_ENGAGEMENT	<---	PENGEMBANGAN_KARIER	.089	.061	1.450	.147	par_2
EMPLOYEE_ENGAGEMENT	<---	SELF_EFFICACY	.904	.130	6.957	***	par_3
KINERJA_PERAWAT	<---	SELF_EFFICACY	.936	.241	3.883	***	par_1
KINERJA_PERAWAT	<---	EMPLOYEE_ENGAGEMENT	.096	.191	.502	.616	par_4
KINERJA_PERAWAT	<---	PENGEMBANGAN_KARIER	-.060	.050	-1.191	.234	par_5
SE4	<---	SELF_EFFICACY	1.000				
SE5	<---	SELF_EFFICACY	1.005	.107	9.406	***	par_6
SE6	<---	SELF_EFFICACY	1.119	.113	9.862	***	par_7
PK14	<---	PENGEMBANGAN_KARIER	1.000				
PK11	<---	PENGEMBANGAN_KARIER	1.200	.083	14.480	***	par_8
PK9	<---	PENGEMBANGAN_KARIER	1.116	.084	13.301	***	par_9
EE6	<---	EMPLOYEE_ENGAGEMENT	1.000				
EE1	<---	EMPLOYEE_ENGAGEMENT	1.094	.096	11.411	***	par_10
KP5	<---	KINERJA_PERAWAT	1.000				
KP13	<---	KINERJA_PERAWAT	1.062	.113	9.417	***	par_11
KP16	<---	KINERJA_PERAWAT	1.015	.107	9.507	***	par_12

Standardized Regression Weights: (Group number 1 - Default model)

		Estimate
EMPLOYEE_ENGAGEMENT	<--- PENGEMBANGAN_KARIER	.123
EMPLOYEE_ENGAGEMENT	<--- SELF_EFFICACY	.801
KINERJA_PERAWAT	<--- SELF_EFFICACY	.942
KINERJA_PERAWAT	<--- EMPLOYEE_ENGAGEMENT	.109
KINERJA_PERAWAT	<--- PENGEMBANGAN_KARIER	-.094
SE4	<--- SELF_EFFICACY	.708
SE5	<--- SELF_EFFICACY	.720
SE6	<--- SELF_EFFICACY	.757
PK14	<--- PENGEMBANGAN_KARIER	.816
PK11	<--- PENGEMBANGAN_KARIER	.915
PK9	<--- PENGEMBANGAN_KARIER	.830
EE6	<--- EMPLOYEE_ENGAGEMENT	.779
EE1	<--- EMPLOYEE_ENGAGEMENT	.838
KP5	<--- KINERJA_PERAWAT	.717
KP13	<--- KINERJA_PERAWAT	.716
KP16	<--- KINERJA_PERAWAT	.723

Covariances: (Group number 1 - Default model)

	Estimate	S.E.	C.R.	P	Label
SELF_EFFICACY <--> PENGEMBANGAN_KARIER	.125	.023	5.497	**	par_13

Correlations: (Group number 1 - Default model)

	Estimate
SELF_EFFICACY <--> PENGEMBANGAN_KARIER	.580

Variances: (Group number 1 - Default model)

	Estimate	S.E.	C.R.	P	Label
--	----------	------	------	---	-------



	Estimate	S.E.	C.R.	P	Label
SELF_EFFICACY	.138	.025	5.452	***	par_14
PENGEMBANGAN_KARIER	.338	.050	6.747	***	par_15
e12	.041	.014	2.995	.003	par_16
e13	.004	.009	.425	.671	par_17
e1	.138	.016	8.560	***	par_18
e2	.130	.015	8.442	***	par_19
e3	.129	.016	7.989	***	par_20
e4	.170	.022	7.635	***	par_21
e5	.095	.022	4.321	***	par_22
e6	.190	.026	7.312	***	par_23
e7	.114	.016	7.286	***	par_24
e8	.089	.016	5.729	***	par_25
e9	.129	.015	8.360	***	par_26
e10	.147	.018	8.378	***	par_27
e11	.129	.016	8.302	***	par_28

Residual Covariances (Group number 1 - Default model)

	KP1 6	KP1 3	KP5	EE1	EE6	PK9	PK1 1	PK1 4	SE6	SE5	SE4
KP1 6	.000										
KP1 3	.002	.000									
KP5	-.010	.009	.000								
EE1	.010	.001	.007	.000							
EE6	.020	.009	.015	.000	.000						
PK9	.000	.019	.011	-.000	.000	.000					

	KP1 6	KP1 3	KP5	EE1	EE6	PK9	PK1 1	PK1 4	SE6	SE5	SE4
PK1 1	-	.006	-	.004	-	.019	.003	.000			
PK1 4	.012	.024	.012	.024	.006	.028	.007	.000	.000		
SE6	.008	.013	.010	.005	.001	.001	.008	.021	.000		
SE5	.005	.009	.013	.013	.007	.015	.019	.017	.004	.000	
SE4	.002	.001	.006	.004	.007	.010	.005	.022	.015	.012	.000

Total Effects (Group number 1 - Default model)

	PENGEMBANGA N_KARIER	SELF_EFFI CACY	EMPLOYEE_ENG AGEMENT	KINERJA_PE RAWAT
EMPLOYEE_ENG AGEMENT	.089	.904	.000	.000
KINERJA_PERAW AT	-.051	1.023	.096	.000
KP16	-.052	1.038	.097	1.015
KP13	-.054	1.086	.102	1.062
KP5	-.051	1.023	.096	1.000
EE1	.097	.988	1.094	.000
EE6	.089	.904	1.000	.000
PK9	1.116	.000	.000	.000
PK11	1.200	.000	.000	.000
PK14	1.000	.000	.000	.000
SE6	.000	1.119	.000	.000
SE5	.000	1.005	.000	.000
SE4	.000	1.000	.000	.000

Standardized Total Effects (Group number 1 - Default model)

	PENGEMBANGA N_KARIER	SELF_EFFI CACY	EMPLOYEE_ENG AGEMENT	KINERJA_PE RAWAT
EMPLOYEE_ENG AGEMENT	.123	.801	.000	.000
KINERJA_PERAW AT	-.081	1.029	.109	.000
KP16	-.058	.743	.079	.723
KP13	-.058	.736	.078	.716
KP5	-.058	.738	.078	.717
EE1	.103	.671	.838	.000
EE6	.096	.624	.779	.000
PK9	.830	.000	.000	.000
PK11	.915	.000	.000	.000
PK14	.816	.000	.000	.000
SE6	.000	.757	.000	.000
SE5	.000	.720	.000	.000
SE4	.000	.708	.000	.000

Direct Effects (Group number 1 - Default model)

	PENGEMBANGA N_KARIER	SELF_EFFI CACY	EMPLOYEE_ENG AGEMENT	KINERJA_PE RAWAT
EMPLOYEE_ENG AGEMENT	.089	.904	.000	.000
KINERJA_PERAW AT	-.060	.936	.096	.000
KP16	.000	.000	.000	1.015
KP13	.000	.000	.000	1.062
KP5	.000	.000	.000	1.000
EE1	.000	.000	1.094	.000
EE6	.000	.000	1.000	.000

	PENGEMBANGA N_KARIER	SELF_EFFI CACY	EMPLOYEE_ENG AGEMENT	KINERJA_PE RAWAT
PK9	1.116	.000	.000	.000
PK11	1.200	.000	.000	.000
PK14	1.000	.000	.000	.000
SE6	.000	1.119	.000	.000
SE5	.000	1.005	.000	.000
SE4	.000	1.000	.000	.000

[Standardized Direct Effects \(Group number 1 - Default model\)](#)

	PENGEMBANGA N_KARIER	SELF_EFFI CACY	EMPLOYEE_ENG AGEMENT	KINERJA_PE RAWAT
EMPLOYEE_ENG AGEMENT	.123	.801	.000	.000
KINERJA_PERAW AT	-.094	.942	.109	.000
KP16	.000	.000	.000	.723
KP13	.000	.000	.000	.716
KP5	.000	.000	.000	.717
EE1	.000	.000	.838	.000
EE6	.000	.000	.779	.000
PK9	.830	.000	.000	.000
PK11	.915	.000	.000	.000
PK14	.816	.000	.000	.000
SE6	.000	.757	.000	.000
SE5	.000	.720	.000	.000
SE4	.000	.708	.000	.000

[Indirect Effects \(Group number 1 - Default model\)](#)

	PENGEMBANGA N_KARIER	SELF_EFFI CACY	EMPLOYEE_ENG AGEMENT	KINERJA_PE RAWAT
--	-------------------------	-------------------	-------------------------	---------------------

	PENGEMBANGA N_KARIER	SELF_EFFI CACY	EMPLOYEE_ENG AGEMENT	KINERJA_PE RAWAT
EMPLOYEE_ENG AGEMENT	.000	.000	.000	.000
KINERJA_PERAW AT	.009	.087	.000	.000
KP16	-.052	1.038	.097	.000
KP13	-.054	1.086	.102	.000
KP5	-.051	1.023	.096	.000
EE1	.097	.988	.000	.000
EE6	.089	.904	.000	.000
PK9	.000	.000	.000	.000
PK11	.000	.000	.000	.000
PK14	.000	.000	.000	.000
SE6	.000	.000	.000	.000
SE5	.000	.000	.000	.000
SE4	.000	.000	.000	.000

[Standardized Indirect Effects \(Group number 1 - Default model\)](#)

	PENGEMBANGA N_KARIER	SELF_EFFI CACY	EMPLOYEE_ENG AGEMENT	KINERJA_PE RAWAT
EMPLOYEE_ENG AGEMENT	.000	.000	.000	.000
KINERJA_PERAW AT	.013	.087	.000	.000
KP16	-.058	.743	.079	.000
KP13	-.058	.736	.078	.000
KP5	-.058	.738	.078	.000
EE1	.103	.671	.000	.000
EE6	.096	.624	.000	.000

	PENGEMBANGA N_KARIER	SELF_EFFI CACY	EMPLOYEE_ENG AGEMENT	KINERJA_PE RAWAT
PK9	.000	.000	.000	.000
PK11	.000	.000	.000	.000
PK14	.000	.000	.000	.000
SE6	.000	.000	.000	.000
SE5	.000	.000	.000	.000
SE4	.000	.000	.000	.000

[Summary of Bootstrap Iterations \(Default model\)](#)

(Default model)

Iterations	Method 0	Method 1	Method 2
1	0	0	0
2	0	0	0
3	0	0	0
4	0	0	0
5	0	0	0
6	0	0	0
7	0	0	0
8	0	0	0
9	0	11	0
10	0	23	0
11	0	33	0
12	0	30	0
13	0	32	0
14	0	14	0
15	0	17	0
16	0	12	0
17	0	5	0

Iterations	Method 0	Method 1	Method 2
18	0	5	0
19	0	18	0
Total	0	200	0

0 bootstrap samples were unused because of a singular covariance matrix.

4 bootstrap samples were unused because a solution was not found.

200 usable bootstrap samples were obtained.

**Model Fit Summary**

CMIN

Model	NPAR	CMIN	DF	P	CMIN/DF
Default model	28	50.898	38	.079	1.339
Saturated model	66	.000	0		
Independence model	11	1198.504	55	.000	21.791

RMR, GFI

Model	RMR	GFI	AGFI	PGFI
Default model	.011	.955	.922	.550
Saturated model	.000	1.000		
Independence model	.158	.308	.169	.256

Baseline Comparisons

Model	NFI Delta1	RFI rho1	IFI Delta2	TLI rho2	CFI
Default model	.958	.939	.989	.984	.989
Saturated model	1.000		1.000		1.000
Independence model	.000	.000	.000	.000	.000

Parsimony-Adjusted Measures

Model	PRATIO	PNFI	PCFI
Default model	.691	.662	.683
Saturated model	.000	.000	.000

Model	PRATIO	PNFI	PCFI
Independence model	1.000	.000	.000

NCP

Model	NCP	LO 90	HI 90
Default model	12.898	.000	35.608
Saturated model	.000	.000	.000
Independence model	1143.504	1034.590	1259.818

FMIN

Model	FMIN	F0	LO 90	HI 90
Default model	.256	.065	.000	.179
Saturated model	.000	.000	.000	.000
Independence model	6.023	5.746	5.199	6.331

RMSEA

Model	RMSEA	LO 90	HI 90	PCLOSE
Default model	.041	.000	.069	.669
Independence model	.323	.307	.339	.000

AIC

Model	AIC	BCC	BIC	CAIC
Default model	106.898	110.492	199.251	227.251
Saturated model	132.000	140.471	349.689	415.689
Independence model	1220.504	1221.916	1256.786	1267.786

ECVI

Model	ECVI	LO 90	HI 90	MECVI
Default model	.537	.472	.651	.555
Saturated model	.663	.663	.663	.706
Independence model	6.133	5.586	6.718	6.140



## HOELTER

Model	HOELTER	HOELTER
	.05	.01
Default model	209	240
Independence model	13	14

## Model Self Efficacy dan Pengembangan Karier dalam Meningkatkan Employee Engagement serta Kinerja Perawat

Gede Pronajaya<sup>1</sup> Rina Anindita<sup>2</sup> Rian Adi Pamungkas<sup>3</sup>  
Fakultas Ilmu Kesehatan, Universitas Esa Unggul Jakarta  
rina.anindita@esaunggul.ac.id

### ABSTRAK

Salah satu faktor keberhasilan pengelolaan sumber daya manusia di dalam suatu organisasi ialah kinerja karyawan. Organisasi dapat dikatakan berhasil ketika kinerja karyawan organisasi tersebut baik. Hasil audit keperawatan yang masih rendah disalah satu ruangan yaitu dibawah 90%, tingginya angka turnover yang terjadi pada perawat setiap tahunnya, adanya pengaruh self efficacy terhadap kinerja yang dilakukan oleh perawat dan jenjang perawat klinis IV masih sedikit. Tujuan penelitian ini adalah untuk mengetahui dan menganalisis pengaruh Self Efficacy dan Pengembangan Karier terhadap Employee Engagement serta Kinerja Perawat di Rumah Sakit Kanker Dharmais. Sampel penelitian berjumlah 200 responden. Desain penelitian ini adalah penelitian eksplanatori kausalitas (eksplanatory research). Teknik analisis data menggunakan Three-Box Method dan SEM (Structural Equation Model) dengan program AMOS 24. Hasil penelitian menunjukkan bahwa self efficacy dan pengembangan karier secara tidak langsung yang dimediasi employee engagement belum berpengaruh terhadap kinerja perawat ; employee engagement tidak berpengaruh terhadap kinerja perawat ; self efficacy berpengaruh positif terhadap kinerja perawat ; pengembangan karier tidak berpengaruh terhadap kinerja perawat ; self efficacy berpengaruh positif terhadap employee engagement ; pengembangan karier tidak berpengaruh terhadap employee engagement. Temuan Penelitian: kinerja perawat dalam kategori tinggi, self efficacy dalam kategori tinggi, pengembangan karier dalam kategori baik, dan variabel employee engagement dalam kategori engaged.

**Kata Kunci :** *Self Efficacy, Pengembangan Karier, Employee Engagement dan Kinerja Perawat*

### Pendahuluan

Sumber Daya Manusia (SDM) merupakan kunci sukses sebuah organisasi dalam menghadapi persaingan di era global. Sumber daya manusia merupakan kemampuan terintegrasi dari daya pikir dan daya fisik yang dimiliki oleh individu (Bohlander & Snell, 2010). Sumber daya ini dibangun agar mampu bersaing dalam menghadapi persaingan yang semakin ketat. Salah satu faktor keberhasilan pengelolaan sumber daya manusia di dalam suatu organisasi ialah kinerja karyawan. Organisasi dapat dikatakan berhasil ketika kinerja karyawan organisasi tersebut baik. Kinerja sebagai hasil kegiatan individu atau kelompok dalam suatu organisasi, merupakan hal penting yang menunjukkan keberhasilan pelaksanaan sistem manajemen. Sumber daya manusia yang terlibat dalam pelayanan kesehatan di rumah sakit terdiri dari multi profesi baik tenaga kesehatan maupun tenaga non kesehatan.

Sumber Daya Manusia di rumah sakit yang paling dominan adalah perawat. Penelitian di beberapa rumah sakit menyatakan bahwa 60-70 % SDM dirumah sakit adalah perawat (Gilles, 1994). Perawat adalah tenaga yang paling dominan yang memberikan pelayanan kepada pasien selama 24 jam secara terus menerus. Dengan demikian, perawat adalah tenaga kesehatan yang paling sering kontak langsung dengan pasien dan keluarga, sehingga peranannya sangat menentukan mutu pelayanan di rumah sakit. Kinerja perawat saat ini dapat dilihat dari beberapa aspek seperti dalam memberikan pelayanan kepada pasien yang mengacu pada perilaku, kemampuan profesional dan proses keperawatan dalam mencapai atau mempertahankan keadaan biologis, psikologis, sosial, dan spiritual yang optimal. Perawat memiliki tanggung jawab yang tinggi karena memiliki pekerjaan yang bersifat *human service* atau memberikan pelayanan kepada masyarakat yang dituntut untuk memiliki keterampilan yang baik dalam bidang kesehatan (Perry & Potter, 2005).

Faktor yang dapat mempengaruhi kinerja adalah *employee engagement* (Djani, 2015; Azizah & Gustomo, 2015; Ardi *et.al* 2017; Nurfajar *et.al* 2018; Motyka, 2018). *Engagement* terjadi ketika seseorang secara sadar waspada dan secara emosi terhubung dengan orang lain. Ketika karyawan sudah terikat

(*engaged*) karyawan memiliki suatu kesadaran terhadap tujuan perannya untuk memberikan layanannya sehingga membuat karyawan akan memberikan seluruh kemampuan terbaiknya. Salah satu cara bagi karyawan untuk membalas jasa organisasi mereka adalah melalui *engagement* mereka, karyawan akan memilih untuk melibatkan diri mereka sendiri dalam berbagai tingkatan yang individu terima dari organisasi mereka (Saks, 2006). Karyawan akan menunjukkan perilaku menerima segala situasi yang terjadi pada organisasi dan berkontribusi dalam kemajuan organisasi.

Perawat juga dituntut dapat memberikan pelayanan yang berkualitas dan memuaskan bagi pasien, untuk itu perawat harus memiliki disposisi perilaku tertentu agar dapat menyelesaikan setiap tugas yang diberikan. Salah satu disposisi perilaku tersebut ialah efikasi diri (*Self efficacy*). *Self efficacy* memberikan pengaruh terhadap kinerja karyawan (Ming dan Yen, 2012; Cherian & Jacob, 2013; Salman *et.al* 2016; Rahayu *et.al* 2018). *Self efficacy* mengacu pada keyakinan individu mengenai kemampuannya, memobilisasi motivasi, sumber daya kognitif dan tindakan yang diperlukan agar berhasil melaksanakan tugas dalam konteks tertentu. *Self efficacy* yang tinggi akan mengembangkan kepribadian yang kuat pada seseorang, mengurangi stres dan tidak mudah terpengaruh oleh situasi yang mengancam

Kinerja perawat dalam usaha pelayanan di rumah sakit didukung oleh salah satu faktor yaitu pengembangan karier (Kakui dan Gachunga, 2016; Nasution *et.al* 2018; Yunus *et.al* 2018). Pengembangan karier merupakan aspek penting yang tidak boleh dilupakan dalam mengelola sumber daya manusia (Sari & Sinulingga, 2011). Seseorang karyawan yang ingin mengembangkan karirnya perlu memikirkan penilaian kinerja apa yang dia miliki. Pengembangan karir karyawan harus dilihat sebagai investasi bukan biaya dan bahwa kinerja yang buruk dan komitmen yang rendah merupakan suatu biaya dalam organisasi (Pareek & Rao, 2012).

Rumah Sakit Kanker Dharmais sebagai unit pelaksana teknis Kementerian Kesehatan yang berada di bawah dan bertanggung jawab kepada Direktorat Jenderal Kesehatan. Salah satu tugas pokok Rumah Sakit Kanker Dharmais yaitu memberikan pelayanan dan perawatan pasien sesuai dengan modalitas yang dibutuhkan (seperti operasi, kemoterapi dan radiasi). Sumber daya manusia terutama perawat di Rumah Sakit Kanker “Dharmais” yang berjumlah 510 perawat yang terdiri dari Pra Perawat Klinik Kanker (Pra PKK), Perawat Klinik Kanker I (PKK I), Perawat Klinik Kanker II (PKK II), Perawat Klinik Kanker III (PKK III) dan Perawat Klinik Kanker IV (PKK IV) dengan status kepegawaian PNS, BLU dan PKWT (Perjanjian Kerja Waktu Tertentu). Menjalankan praktik profesional di rawat jalan, rawat inap dan rawat khusus.

Dari hasil audit keperawatan (pengkajian, diagnosa keperawatan, perencanaan, pelaksanaan dan evaluasi) oleh Komite Keperawatan RS Kanker Dharmais yang dilakukan tahun 2019 didapatkan hasil Anggrek 1 98%, Mawar 1 89%, Anggrek 2 94%, Mawar 2 100%, Cempaka 94%, RIM 100%, RIRA 100%, Teratai 95%, Tulip 100%, Anak 98%, ICU 100%, HCU 100%, PICU 100%, IGD 96%, data tersebut menunjukkan di beberapa ruangan masih ada hasil yang dibawah 90% seperti di ruangan Mawar 1 (dokumentasi diagnosa keperawatan hanya mencapai 78% dengan rata-rata dokumentasi asuhan keperawatan yaitu 89%), selanjutnya di ruang IGD dokumentasi pengkajian mencapai 81.2%, dokumentasi diagnosa keperawatan mencapai 87.5%. Diharapkan dokumentasi keperawatan yang dilakukan dapat mencapai nilai 100% seperti di ruangan ICU, HCU, Tulip, RIM, PICU dan RIRA.

Dari laporan bidang keperawatan *turnover* perawat di RS Kanker Dharmais Cukup Tinggi. Data yang didapatkan dari tahun 2016-2019 yaitu terjadi *turnover* pada tahun 2016 dengan jumlah 27 perawat, tahun 2017 dengan jumlah 34 perawat, 2018 dengan jumlah 18 perawat dan tertinggi pada tahun 2019 yaitu 42 perawat. Pada empat tahun terakhir *turnover* perawat mencapai 121 orang dan pada tahun 2020 laporan januari-mei sudah ada 19 perawat yang keluar dari RS Kanker Dharmais, mereka menyampaikan bahwa keluar dari rumah sakit dengan beberapa alasan yaitu pindah tempat kerja ke rumah sakit lain seperti di rumah sakit milik pemerintah daerah atau lembaga kesehatan lainnya, tidak memperpanjang kontrak, tidak ada kejelasan aturan dan status kerja, mengundurkan diri, diterima CPNS, dan juga faktor keluarga. Salah satu dampak dari *turnover* adalah kinerja yang kurang maksimal. Fenomena tersebut menunjukkan bahwa rasa *engagement* pada perawat masih rendah. *Engagement* merupakan karakteristik karyawan yang memiliki komitmen terhadap organisasi, oleh karena itu karyawan yang *engaged* memiliki dedikasi kuat terhadap perusahaan sehingga akan bekerja lebih produktif dalam memajukan perusahaan (Nurfajar *et.al* 2018).

Berdasarkan pengamatan yang peneliti lakukan terkait kinerja perawat, *self efficacy* menjadi faktor yang berpengaruh pada keberhasilan kinerja yang perawat lakukan, terlihat dari mereka tidak memandang tugas sebagai suatu ancaman yang harus mereka hindari, perawat-perawat RS Kanker Dharmais banyak

tergabung dalam Kelompok Staf Perawat Fungsional (KSPF) seperti KSPF Anak, KSPF Kemoterapi, KSPF Perawatan Luka, KSPF Paliatif, KSPF Radioterapi dan sebagainya. Terlihat bahwa mereka mengembangkan minat intrinsik dan ketertarikan yang mendalam terhadap suatu aktivitas serta mengembangkan tujuan guna meningkatkan kinerjanya.

Data perawat berdasarkan status kepegawaian dan jenjang perawat klinis di RS Kanker Dharmais yaitu dengan status pegawai PNS berjumlah 265, BLU berjumlah 145, PKWT berjumlah 100 dan berdasarkan jenjang karier perawat klinis yaitu Pra PK berjumlah 87, PK I berjumlah 107, PK II berjumlah 138, PK III berjumlah 167, PK IV berjumlah 11 dengan jumlah total keseluruhan perawat yaitu 510 orang. Data tersebut menunjukkan masih banyak perawat yang bersetatus PKWT (Perjanjian Kerja Waktu Tertentu) atau kontrak yaitu berjumlah 100 perawat, berdasarkan jenjang karier menunjukkan ada jenjang perawat klinis Pra PK, pada jenjang tersebut adalah perawat yang masih dalam masa orientasi atau belum memiliki surat penugasan klinis, diperoleh juga data perawat dengan jenjang PK IV hanya 11 orang, sangat sedikit dibandingkan dengan jenjang perawat klinis yang lain.

Berdasarkan penelitian sebelumnya oleh Ardi *et.al* (2017) dengan judul Pengaruh Self Efficacy Terhadap Employee Engagement dan Kinerja Karyawan (Studi pada Karyawan PT Telekomunikasi Indonesia Regional V Surabaya) menunjukkan bahwa terdapat pengaruh tidak langsung (indirect effect) untuk self efficacy terhadap kinerja karyawan melalui employee engagement, sejalan dengan penelitian Nurfajar *et.al* (2018) hasil penelitian menunjukkan bahwa secara simultan employee engagement, efikasi diri terhadap kinerja karyawan berpengaruh positif signifikan, namun secara parsial efikasi diri berpengaruh negatif. Penelitian lainnya oleh Setyabudi *et.al* (2018) menunjukkan bahwa Self efficacy tidak berpengaruh signifikan terhadap Kinerja Perawat. Perbedaan penelitian ini dengan penelitian yang akan dilakukan adalah penambahan variabel pengembangan karier, teknik analisis menggunakan SEM (*Structural Equation Modelling*) dan juga dilakukan pada fasilitas layanan kesehatan yaitu rumah sakit dengan unit analisis adalah perawat.

Employee Engagement yang rendah menyebabkan rumah sakit akan kehilangan karyawan dan tentunya hal tersebut otomatis mengharuskan rumah sakit mengganti dengan karyawan baru untuk memenuhi kebutuhan tenaga pelayanan. Hal tersebut tentunya sangat merugikan dikarenakan harus melakukan perekrutan serta orientasi baru yang tentunya membutuhkan waktu dan biaya. Kehilangan karyawan tentunya akan mengganggu kelancaran aktivitas pelayanan dan kinerja dari karyawan yang lain. Sehingga timbul pertanyaan mengapa angka turnover perawat tinggi, apakah terdapat faktor pemicu seperti self efficacy yang bersumber dari diri karyawan tersebut yang menjadi penyebabnya atau faktor lain seperti pengembangan karier yang karyawan rasakan atau terima selama bekerja. Berdasarkan penjelasan tersebut peneliti tertarik melakukan penelitian dengan judul "Pengaruh *self efficacy* dan pengembangan karir terhadap *employee engagement* serta kinerja perawat di Rumah Sakit Kanker Dharmais". Tujuan penelitian ini adalah : Pertama, untuk mengetahui dan menganalisis pengaruh *Self Efficacy* dan Pengembangan Karier terhadap *Employee Engagement* serta Kinerja Perawat di Rumah Sakit Kanker Dharmais ; kedua, untuk mengkaji dan menganalisis pengaruh *Employee Engagement* terhadap Kinerja Perawat ; ketiga, untuk mengkaji dan menganalisis pengaruh *Self Efficacy* terhadap Kinerja Perawat; keempat, untuk mengkaji dan menganalisis pengaruh Pengembangan Karier terhadap Kinerja Perawat; kelima, untuk mengkaji dan menganalisis pengaruh *Self Efficacy* terhadap *Employee Engagement*; keenam, untuk mengkaji dan menganalisis pengaruh Pengembangan Karier terhadap *Employee Engagement*.

## Hipotesis

Hipotesis dalam penelitian ini adalah (1) *Self Efficacy* dan Pengembangan Karier berpengaruh terhadap *Employee Engagement* serta Kinerja Perawat secara simultan, (2) *Employee Engagement* berpengaruh positif terhadap Kinerja Perawat, (3) *Self Efficacy* berpengaruh positif terhadap Kinerja Perawat, (4) Pengembangan Karier berpengaruh positif terhadap Kinerja Perawat, (5) *Self Efficacy* berpengaruh positif terhadap *Employee Engagement*. (6) Pengembangan Karier berpengaruh positif terhadap *Employee Engagement*.

## Metode Penelitian

### *Sampel dan teknik pengambilan sampel*

Penelitian dilakukan di Pusat Kanker Nasional RS Kanker “Dharmais” yang berlokasi di Jl. Let Jend S. Parman Kav.84-86, Slipi, Jakarta 11420. Penelitian ini dilakukan pada bulan April - September 2020. Desain penelitian ini bersifat analisis deskriptif dengan model kausalitas atau hubungan pengaruh. Sampel pada penelitian ini berjumlah 200 responden yang menggunakan model estimasi *Maksimum Likelihood Estimation (MLE)*. Teknik Pengambilan sampel yang digunakan pada penelitian ini adalah *Proportional Systematic Sampling*, sehingga didapatkan responden dengan status kepegawaian PNS berjumlah 129 perawat dan status kepegawaian BLU berjumlah 71 perawat. Adapun kriteria inklusi dalam penelitian ini adalah perawat yang bekerja di RS Kanker Dharmais dengan status kepegawaian PNS dan BLU, jenjang perawat klinis PKK I - PKK IV, Melakukan Pelayanan Keperawatan, bersedia menjadi responden. Kriteria eksklusi dalam penelitian ini adalah perawat dengan status kepegawaian PKWT dan perawat yang sudah tidak memberikan pelayanan keperawatan secara langsung.

### *Instrument Penelitian*

Jenis instrument yang digunakan dalam penelitian ini adalah Kuesioner (Angket). Terdiri atas 48 pernyataan dengan rincian sebagai berikut; Variabel kinerja 18 pernyataan (no item 1-18), Variabel self efficacy 6 pernyataan (no item 19-24), Variabel pengembangan karier 18 pernyataan (no item 25-42) dan Variabel employee engagement dengan 6 pernyataan (no item 43-48). Penelitian ini menggunakan skala likert dengan 4 kategori yang bertujuan untuk menghilangkan jawaban ragu-ragu dari para responden dengan kriteria 1: Sangat Tidak Setuju ; 2: Tidak Setuju; 3: Setuju; 4: Sangat Setuju.

### *Validitas dan reliabilitas instrumen*

Uji validitas dilakukan dengan membandingkan hasil  $r$  tabel dengan  $r$  hitung yaitu jika  $r$  tabel  $<$   $r$  hitung dikatakan valid sedangkan  $r$  tabel  $>$   $r$  hitung dikatakan tidak valid. *Pilot study* dilakukan di Rumah Sakit Kanker Dharmais dengan jumlah sampel 30 perawat dengan nilai  $r$  hitung yaitu 0,361 (taraf signifikansi 5%  $n=30$ ). Variabel Kinerja perawat dengan 18 item pertanyaan : 17 item pertanyaan pada variabel kinerja perawat dinyatakan valid ,satu item tidak valid yaitu item KP2 dengan  $r$  hitung 0,343 dan dinyatakan gugur. Variabel Self Efficacy dengan 6 item pertanyaan dinyatakan valid. Variabel pengembangan karier dengan 18 pertanyaan dinyatakan valid. Variabel employee engagement dengan 6 pertanyaan dinyatakan valid.

Dalam penelitian ini peneliti melakukan uji reliabilitas data dengan menggunakan *Cronbach Alpha*. Menurut Hair *et.al* (2014) ukuran koefisien reliabilitas berada pada diantara 0 dan 1, dengan batas minimal koefisien reliabilitas berada diantara 0,6 dan 0,7. Hasil pengujian didapatkan nilai *Cronbach Alpha* variabel kinerja perawat yaitu 0,947; variabel self efficacy yaitu 0,886; variabel pengembangan karier yaitu 0,977 dan variabel employee engagement yaitu 0,922.

### *Three Box Method*

Analisis indeks jawaban per variabel ini bertujuan mengetahui gambaran deskriptif mengenai jawaban atas item-item pertanyaan yang diajukan pada responden. Teknik skoring yang digunakan dalam penelitian ini adalah dengan skor maksimal 4 dan minimal 1 dengan total responden 200 orang. Nilai skor rata-rata (indeks) yang dikategorikan ke dalam rentang skor berdasarkan perhitungan *three box method* (Ferdinand, 2006). Batas atas rentang skor :  $(\%F*4)/4 = (200*4)/4=200$  ; Batas bawah rentang skor :  $(\%F*1)/4 = (200*1)/4 = 50$ . Berdasarkan perhitungan maka dihasilkan skor antara 50 – 200 dengan rentang sebesar 150. Hasil rentang tersebut dibagi tiga (*three box method*), yaitu sebesar 50 sehingga menghasilkan pembagian sebagai berikut: nilai indeks 50-100 dalam kategori rendah; 101-150 dalam kategori sedang dan 151-200 dalam kategori tinggi.

### *Teknik Analisa Data*

Teknik analisa yang dipergunakan untuk menganalisis data adalah analisis SEM (*Structural Equation Model*). Menurut Ghozali (2011) *Structural Equation Modelling* atau model persamaan struktural adalah teknik analisis multivariate yang digunakan peneliti untuk menguji hubungan antara variabel yang kompleks baik *recursive* maupun *non recursive* guna mendapatkan gambaran yang menyeluruh mengenai keseluruhan model.

## Kaji Etik

Protokol penelitian ini telah melalui proses kaji etik dan dinyatakan lolos kaji etik oleh Komisi Etik Penelitian Universitas Esa Unggul dengan surat keterangan Nomor : 0311-20.292/DPKE-KEP/FINAL-EA/UEU/VIII/2020 dan Komite Etik Penelitian Rumah Sakit Kanker Dharmais dengan keterangan lolos kaji etik Nomor : 0148/KEPK/X/2020.

## Hasil

### Karakteristik Responden

Mayoritas responden yaitu perawat perempuan sebanyak 117 orang (58.5%) dan sisanya laki-laki sebanyak 83 orang (41.5%). Responden berdasarkan usia didominasi oleh responden berumur 20 - 30 Tahun sebanyak 83 orang (41.5%). Responden berdasarkan pendidikan sebagian besar perawat memiliki pendidikan DIII Keperawatan sebanyak 84 orang (42%) dan S1 Keperawatan sebanyak 109 orang (54.5%). Responden berdasarkan jenjang karier tertinggi itu oleh perawat PK III yaitu 85 orang (42.5%). Responden berdasarkan lama bekerja yaitu 1-5 tahun 73 (36.5%) dan masa kerja lebih dari 15 tahun sebanyak 63 orang (31.5%). Responden berdasarkan status kepegawaian yaitu sebanyak 129 orang (64.5) adalah PNS dan sebanyak 71 (35.5) orang dengan status kepegawaian BLU.(Tabel 1)

Tabel 1. Karakteristik Responden

Karakteristik	Jumlah	Presentase
<b>Jenis Kelamin</b>		
Laki-Laki	83	41,5
Perempuan	117	58,5
<b>Usia</b>		
20-30 Tahun	83	41,5
31-40 Tahun	53	26,5
41-50 Tahun	64	32
<b>Pendidikan</b>		
DIII Keperawatan	84	42
SI Keperawatan/NERS	109	54,5
S2 Keperawatan	6	3
S2 Kesehatan	1	0,5
<b>Jenjang Karier</b>		
Perawat Klinis I	75	37,5
Perawat Klinis II	31	15,5
Perawat Klinis III	85	42,5
Perawat Klinis IV	9	4,5
<b>Masa Kerja</b>		
1-5 Tahun	73	36,5
6-10 Tahun	35	17,5
11-15 Tahun	29	14,5
Lebih dari 15 Tahun	63	31,5
<b>Status Kepegawaian</b>		
PNS	129	64,5
BLU	71	35,5

Sumber : Data Primer yang diolah, 2020

**Analisis Three Box Method**

Resume deskripsi jawaban responden tentang sikap dalam berperilaku ditunjukkan dalam matriks perilaku yang ditampilkan pada tabel berikut :

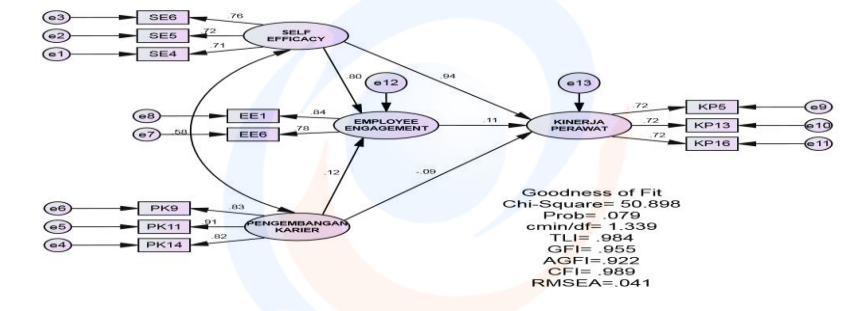
Tabel 1  
Matriks Tanggapan Responden Rumah Sakit Kanker Dharmais

Variabel	Posisi Tanggapan Responden		
	Rendah	Sedang	Tinggi
Kinerja Perawat			*
Self Efficacy			*
Pengembangan Karier		*	
Employee Engagement			*

sumber : hasil olah data three box method (2020)

Berdasarkan tabel 1, menunjukkan respon terhadap kinerja perawat, self efficacy, pengembangan karier dan employee engagement perawat di Rumah Sakit Kanker Dharmais. Hasil penelitian menunjukkan bahwa semua variabel memiliki respon yang bernilai positif secara keseluruhan. Analisis deskriptif dengan menggunakan *three box method* variabel kinerja perawat dalam kategori tinggi, self efficacy dalam kategori tinggi, pengembangan karier dalam kategori baik, dan variabel employee engagement dalam kategori *engaged*.

**Analisis Model Struktural**



Gambar 1  
Modifikasi Full Model Akhir

Setelah melakukan modifikasi model , didapatkan hasil yang tersaji pada gambar 1, merupakan model yang dapat dikatakan *good fit* karena memiliki nilai dalam kategori *good fit* yaitu nilai *Chi-Square*, *RMSEA*, *CFI* dan *CMIN/DF*. Pada model yang telah dilakukan modifikasi sebanyak 37 indikator dilakukan eliminasi untuk mendapatkan hasil model yang fit dan hanya tersisa 11 indikator, tentunya ini masih merupakan model pada pengujian tahap awal yang hasilnya hanya bergantung pada 200 responden dalam penelitian ini saja, untuk penelitian selanjutnya dengan sampel yang berbeda bisa saja memiliki hasil yang berbeda pula.

**Hasil Uji Goodness of Fit**

Uji *Goodness of Fit* dilakukan untuk melihat apakah model *good fit* atau *poor fit*. Hasil pengujian dapat dilihat pada tabel berikut :

Tabel 2  
Hasil Uji Goodness of Fit

Goodness of fit	Cut – off Value	Hasil Model	Keterangan
X <sup>2</sup> – Chi Square	Diharapkan nilainya kecil dengan DF=38 nilai tabelnya = 53.38 (0.05)	50,898	Good Fit
Probability	≥ 0,05	0,079	Good Fit
Cmin/DF	≤ 2	1,339	Good Fit
GFI	≥ 0,90	0,955	Good Fit
RMSEA	≤ 0,079	0,041	Good Fit
AGFI	≥ 0,90	0,922	Good Fit
TLI	≥ 0,90	0,984	Good Fit

CFI	>0,90	0,989	Good Fit
-----	-------	-------	----------

Sumber : olah data AMOS 24 (2020)

Berdasarkan pada Gambar 1, pada analisis full model dapat ditunjukkan bahwa model memenuhi kriteria *fit*. Hal tersebut dapat dijelaskan dengan nilai dari hasil perhitungan yang memenuhi kriteria kelayakan model full model SEM secara rinci disajikan dalam Tabel 2. Berdasarkan Tabel 2, hasil perhitungan uji *chi-square* pada *full model* diperoleh nilai sebesar 50.898 yang artinya memenuhi persyaratan yang disyaratkan. Nilai ini dapat diterima dan dapat melakukan analisis selanjutnya dengan melihat nilai *CMIN/DF*, *RMSEA* dan *CFI* yang sudah memenuhi kriteria baik, maka dapat dilakukan analisis selanjutnya. Berdasarkan hasil tersebut dapat dijelaskan bahwa model dalam penelitian ini secara keseluruhan memenuhi kriteria sebagai *model fit*.

### Hasil Pengujian Hipotesis Parsial

Pengujian hipotesis dilakukan dengan menggunakan program SEM yaitu nilai *Critical Ratio* (c.r) pada *Regression Weight* dari fit model. Apabila nilai *Critical Ratio* (c.r)  $\geq 1,967$  atau nilai probabilitas (P)  $\leq 0,05$  maka  $H_0$  ditolak (hipotesis penelitian diterima). Hasil pengolahan oleh AMOS terhadap *full model* dapat dilihat pada tabel 3 sebagai berikut:

Tabel 3  
Uji Hipotesis Pengaruh Langsung (Hipotesis 2-6)

Hipotesis	Estimate	S.E.	C.R	P	Keterangan
Employee Engagement → Kinerja Perawat	.096	.191	.502	.616	H2 ditolak
Self Efficacy → Kinerja Perawat	.936	.241	3.883	***	H3 diterima
Pengembangan Karier → Kinerja Perawat	-.060	.050	-1.191	.234	H4 ditolak
Self Efficacy → Employee Engagement	.904	.130	6.957	***	H5 diterima
Pengembangan Karier → Employee Engagement	.089	.061	1.450	.147	H6 ditolak

Sumber : olah data AMOS 24 (2020)

Nilai p =\*\*\* (artinya angkanya di bawah 0,001, sehingga ini bermakna signifikan pada taraf nyata (level of significance) 0,01 yang tentunya lebih baik dari pada taraf nyata 0,05)

### Hasil Pengujian Hipotesis Mediasi

Tabel 4  
Uji Hipotesis Tidak Langsung (Hipotesis 1)

Hubungan Antar Konstruk	Variabel Mediasi	Direct Effect	Indirect Effect	Keterangan
Self Efficacy → Kinerja Perawat	Employee engagement	.942	.087	Tidak Memediasi
Pengembangan Karier → Kinerja Perawat	Employee engagement	-.094	.013	Tidak Memediasi

Sumber : olah data AMOS 24 (2020)

### Pembahasan

Hipotesis 1 : hasil uji hipotesis tidak langsung yang ditunjukkan pada tabel 4, pengaruh self efficacy terhadap kinerja perawat melalui employee engagement sebesar 0,087 atau 8,7% (lebih besar direct effect), sedangkan pengaruh pengembangan karier terhadap kinerja perawat melalui employee engagement sebesar 0,013 atau 1,3 % (lebih besar indirect effect). Penelitian ini menyatakan bahwa variabel self efficacy dan pengembangan karier secara simultan belum berpengaruh terhadap kinerja perawat yang dimediasi oleh employee engagement. Efikasi diri memiliki peranan langsung terhadap *employee engagement*, efikasi diri dapat mendorong kemauan karyawan untuk terikat dengan perusahaan, hal tersebut didukung oleh penelitian Ardi *et.al* (2017); Rugiyanto (2017); Muliana dan Rahmi (2019) yang menyatakan bahwa Self efficacy berpengaruh langsung positif terhadap *Employee Engagement*. Efikasi diri memiliki peranan yang besar dalam meningkatkan kinerja karyawan, baik peran secara langsung ataupun dimediasi oleh employee engagement (Fajriah dan Darokah, 2016). Menurut Hedger dalam Zulfa (2014) dalam Sumadhinata dan Murtisari (2017) salah satu cara yang efektif untuk mempertahankan karyawan yang engaged adalah memperlihatkan kepada mereka bahwa mereka diapresiasi. Bentuk apresiasi bermacam-macam, salah



satunya dengan pengembangan karir. Pengembangan karir sangat penting bagi karyawan dalam sebuah perusahaan. Pengembangan karier dapat membuat karyawan lebih termotivasi untuk meningkatkan kinerja.

Hipotesis 2 : hasil pengujian pengaruh langsung Employee Engagement terhadap Kinerja Perawat menunjukkan bahwa nilai estimasi sebesar 0,096 dengan C.R sebesar 0,502 ( $c.r \geq 1,967$ ) dan  $p$ -value sebesar 0,616 ( $p$ -value  $< 0,05$ ), artinya pengaruh employee engagement terhadap kinerja perawat yaitu sebesar 6,9% dan 93,1% merupakan faktor lain yang tidak diteliti dalam penelitian ini. Hasil analisis menunjukkan bahwa tidak terdapat pengaruh yang signifikan antara employee engagement terhadap kinerja perawat. Berdasarkan hasil tersebut dapat dijelaskan bahwa semakin tinggi *employee engagement* tidak akan berpengaruh terhadap kinerja perawat. Hasil penelitian ini tidak sejalan dengan Ilyas dan Nurtjahjanti (2015) yang mengatakan pegawai yang bekerja dengan perasaan yang *engaged* memiliki kemungkinan perkembangan potensi diri, pengalaman dengan kualitas kerja yang mengarah pada produktivitas individual. Penelitian Gruman & Saks (2010) menyatakan keberadaan *employee engagement* memiliki hubungan positif pada peningkatan kinerja yang lebih produktif. Hal ini mampu menciptakan performa pegawai yang *engaged* sehingga dapat menciptakan pekerjaan menjadi lebih menyenangkan dan mampu meningkatkan kinerjanya dalam perusahaan. Hal tersebut secara otomatis mengarah pada peningkatan kinerja perusahaan kedepannya. Hasil penelitian ini tidak sejalan dengan penelitian sebelumnya oleh Ardi *et.al* 2017 yang menyatakan bahwa jika karyawan terikat dengan perusahaan dalam bekerja maka akan berdampak pada pencapaian kinerja karyawan akan meningkat pula. Hal ini didukung penelitian sebelumnya oleh Djani (2015); Azizah & Gustomo (2015); Nurfajar *et.al* (2018) yang menyatakan adanya pengaruh yang signifikan antara *employee engagement* dan kinerja karyawan. Di rumah sakit kanker dharmais, penilaian hasil kerja dilakukan berdasarkan penilaian indikator kinerja individu yang hasilnya menjadi acuan dalam pembayaran remunerasi atau gaji yang akan diperoleh oleh perawat. Dalam indikator penilaian individu (IKI) terdapat target baik secara kualitas dan kuantitas yang harus dipenuhi, sehingga pada penelitian ini *employee engagement* tidak berpengaruh terhadap kinerja.

Hipotesis 3 : hasil pengujian pengaruh langsung Self Efficacy terhadap Kinerja perawat menunjukkan bahwa nilai estimasi sebesar 0,936 dengan C.R sebesar 3,883 ( $c.r \geq 1,967$ ) dan  $p$ -value sebesar \*\*\* ( $p$ -value  $< 0,05$ ), artinya self efficacy memiliki pengaruh sebesar 93,6% terhadap kinerja perawat dan 6,4% lainnya merupakan faktor lain. Hasil analisis menunjukkan terdapat pengaruh positif antara self efficacy terhadap kinerja. Hal ini menunjukkan bahwa semakin tinggi self efficacy yang dimiliki seorang perawat maka akan semakin tinggi pula kinerjanya. Hasil penelitian ini didukung penelitian sebelumnya oleh Ardi, Astuti dan Sulistyono (2017) menyatakan bahwa *self efficacy* dapat memberikan pengaruh positif pada kinerja karyawan. Dalam penelitian tersebut menjelaskan bahwa semakin tinggi *self efficacy* yang dimiliki oleh seorang karyawan, maka karyawan tersebut akan mengeluarkan usaha yang cukup besar agar mereka dapat meraih kinerja yang tinggi. Penelitian tersebut menyarankan untuk lebih memperhatikan dan memberikan arahan serta bimbingan kepada karyawan untuk lebih meningkatkan kepercayaan diri agar bisa mengandalkan diri sendiri. Hal tersebut didukung oleh penelitian Kurra & Aty (2015); Salman *et.al* (2016); Rahayu *et.al* (2018) yang menyatakan bahwa adanya pengaruh yang signifikan antara self efficacy terhadap kinerja karyawan. Self efficacy yang dapat mempengaruhi kinerja yang dilakukan perawat ialah *Magnitude* (tingkat), *Generality* (keluasan), *Strength* (kekuatan). Dalam hal ini perawat yang memiliki self efficacy yang tinggi akan mampu mengetahui tingkat kesulitan tugas yang dilakukan, mampu mengatasi hambatan dalam tingkat kesulitan tugas yang dihadapi, menguasai bidang atau tugas pekerjaan yang dilakukan, ketika dihadapkan dengan masalah bisa menemukan beberapa solusi, memiliki semangat juang dan tidak mudah menyerah ketika mengalami hambatan dalam menyelesaikan tugas dan bisa tetap tenang ketika menghadapi kesulitan karena yakin dengan kemampuan yang dimilikinya. Perawat di Rumah Sakit Kanker Dharmais tergabung dalam Kelompok Staf Perawat Fungsional (KSPF) seperti KSPF Anak, KSPF Kemoterapi, KSPF Perawatan Luka, KSPF Paliatif, KSPF Radioterapi dan sebagainya. Terlihat bahwa mereka mengembangkan minat intrinsik dan ketertarikan yang mendalam terhadap suatu aktivitas serta mengembangkan tujuan guna meningkatkan kinerjanya.

Hipotesis 4 : hasil pengujian pengaruh langsung Pengembangan Karier terhadap Kinerja Perawat menunjukkan bahwa nilai estimasi sebesar -0,060 dengan C.R sebesar -1,191 ( $c.r \geq 1,967$ ) dan  $p$ -value sebesar 0,234 ( $p$ -value  $< 0,05$ ) artinya pengembangan karier memiliki pengaruh sebesar 6% terhadap kinerja perawat dan 94% merupakan faktor lain. Hasil analisis menunjukkan bahwa tidak terdapat pengaruh yang signifikan antara pengembangan karier terhadap kinerja perawat. Berdasarkan hasil tersebut dapat dijelaskan bahwa semakin tinggi pengembangan karier tidak akan berpengaruh terhadap kinerja perawat. Hasil penelitian ini belum sejalan dengan Robbins (2002) dalam Nasution *et.al* (2018) yang menunjukkan bahwa kinerja seseorang tidak hanya dipengaruhi oleh faktor internalnya sendiri seperti motivasi dan kemampuan tetapi juga oleh kesempatannya untuk mengembangkan karirnya yang disediakan oleh organisasi untuknya,

karena pengembangan karir akan memicu dia untuk meningkatkan kemampuannya yang pada akhirnya akan memiliki efek pada kinerjanya dalam bekerja (Amstrong, 2001 dalam Nasution et.al 2018). Penelitian Nasution *et.al* (2018) menyatakan bahwa pengembangan karier berpengaruh positif dan signifikan terhadap kinerja karyawan, pengembangan karier dapat membuat karyawan lebih termotivasi untuk meningkatkan kinerja. Dengan melakukan pengembangan karier karyawan tentu kualitasnya pun akan meningkat. Saleem dan Amin (2013) dalam Nasution *et.al* (2018) juga menunjukkan bahwa kinerja karyawan meningkat seiring dengan kualitas pengembangan karier yang lebih baik yang mana salah satu bentuk dukungan organisasi. Hal tersebut sejalan dengan penelitian terdahulu yang dilakukan oleh Kakui dan Gachunga (2016); Ali *et.al* (2016); Setyabudi *et.al* 2018, di mana hasil penelitian menunjukkan bahwa pengembangan karier memiliki pengaruh positif dan signifikan terhadap kinerja karyawan. Pengembangan jenjang karier profesional perawat sudah diatur dalam PMK No.40 Tahun 2017, dimana seorang perawat akan memalui penempatan jenjang karier sesuai dengan kompetensinya, yang dilakukan melalui pengembangan profesional berkelanjutan (pendidikan formal, pelatihan, *workshop*, dan lain-lain) dan pengakuan terhadap kemampuan yang didasarkan kepada pengalaman kerja serta kinerja praktek keperawatan. Sehingga perawat akan selalu melakukan kinerja yang terbaik.

Hipotesis 5 : hasil pengujian pengaruh langsung *self efficacy* terhadap *employee engagement* menunjukkan bahwa nilai estimasi sebesar 0,904 dengan C.R sebesar 6,957 ( $c.r \geq 1,967$ ) dan *p-value* sebesar \*\*\* ( $p-value < 0,05$ ), artinya *self efficacy* memiliki pengaruh 90,4% terhadap *employee engagement* dan 9,6% merupakan faktor lain. Hasil analisis menunjukkan terdapat pengaruh positif antara *self efficacy* terhadap *employee engagement*. Hal ini menunjukkan bahwa semakin tinggi *self efficacy* yang dimiliki seorang perawat maka akan semakin meningkatkan *employee engagement*. Hasil penelitian ini didukung penelitian sebelumnya oleh Muliana dan Rahmi (2019) menyimpulkan bahwa terdapat pengaruh langsung positif *self efficacy* terhadap keterikatan kerja. Dalam penelitian tersebut dikatakan bahwa tinggi rendahnya *self efficacy* atau keyakinan diri yang dimiliki oleh akan menentukan keberhasilan atau kurang berhasil dalam melaksanakan pekerjaannya. Lebih lanjut dijelaskan jika seorang yang memiliki keyakinan diri (*self efficacy*) yang tinggi, maka ia akan yakin dan merasa mampu dalam melaksanakan pekerjaannya, ia akan merasa mampu melaksanakan tugasnya dengan baik, tujuan yang telah direncanakan, dapat memotivasi dirinya serta dapat mengatasi tantangan, dan selanjutnya akan memiliki sikap dan perilaku yang positif, ia akan terhubung secara fisik, kognitif dan emosional, yang berhubungan dengan pemenuhan pekerjaan, dalam mencapai tujuan yang telah ditetapkan oleh institusi lembaga, ia akan merasa terikat (*engaged*) dengan pekerjaannya, gigih dan memiliki dedikasi yang tinggi, memiliki inisiatif, kepedulian, serta rasa tanggung jawab. Sejalan dengan penelitian ini Ardi *et.al* (2017) menunjukkan bahwa *self efficacy* dapat memberikan dampak pada karyawan agar mau terikat dengan perusahaan, keyakinan karyawan terhadap kemampuannya untuk dapat melakukan yang terbaik akan membuat karyawan semakin terikat dengan perusahaan. Penelitiannya menemukan *self efficacy* berhubungan positif dengan tingkat penetapan tujuan. Hal tersebut didukung oleh penelitian Rugiyanto (2017) yang menyatakan bahwa *Self efficacy* berpengaruh langsung positif terhadap *Employee Engagement*.

Hipotesis 6 : hasil pengujian pengaruh langsung Pengembangan Karier terhadap *employee engagement* menunjukkan bahwa nilai estimasi sebesar 0,089 dengan C.R sebesar 1,450 ( $c.r \geq 1,967$ ) dan *p-value* sebesar 0,147 ( $p-value < 0,05$ ) artinya pengembangan karier memiliki pengaruh sebesar 8,9% terhadap *employee engagement* dan 91,1% merupakan faktor lain. Hasil analisis menunjukkan bahwa tidak terdapat pengaruh yang signifikan antara pengembangan karier terhadap *employee engagement*. Berdasarkan hasil tersebut dapat dijelaskan bahwa semakin tinggi pengembangan karier tidak akan berpengaruh terhadap *employee engagement*. Hasil penelitian ini tidak sejalan dengan penelitian sebelumnya dilakukan oleh Yolanda dan Sari (2019) yang menyimpulkan bahwa pengembangan karir secara parsial memiliki pengaruh dan signifikan terhadap *Employee Engagement*. Dalam penelitian tersebut dijelaskan bahwa salah satu cara yang efektif untuk mempertahankan karyawan adalah dengan memperlihatkan bahwa mereka di apresiasi. Salah satunya dengan memberikan kesempatan bagi karyawan untuk mengembangkan karirnya. Penelitian tersebut menyarankan agar dapat mengoptimalkan pengembangan karir antara lain, mengadakan maupaun meningkatkan program pelatihan dan pengembangan pembelajaran terbaru bagi para karyawan sesuai dengan kebutuhan karyawan, maka pengetahuan dan keterampilannya diharapkan sesuai dengan pekerjaannya. Pengembangan karir mampu meningkatkan *employee engagement*, pernyataan tersebut

didukung penelitian sebelumnya oleh Dayona dan Rinawati (2016); Sumadhinata dan Murtisari (2017) yang menyatakan pengembangan karier berpengaruh secara signifikan terhadap employee engagement. Dari status kepegawaian responden adalah pegawai PNS dan BLU sehingga status kepegawaiannya adalah tetap, sehingga employee engagement perawat tinggi dan pengembangan karier tidak memiliki pengaruh signifikan.

### **Kesimpulan**

Berdasarkan analisis data dan pembahasan hasil penelitian, dapat disimpulkan sebagai berikut : (1) Variabel self efficacy dan pengembangan karier secara tidak langsung yang dimediasi employee engagement belum berpengaruh terhadap kinerja perawat, (2) Variabel employee engagement tidak berpengaruh terhadap kinerja perawat. Artinya masih ada faktor lain yang mempengaruhi kinerja perawat. Perawat dalam kategori engaged namun belum cukup kuat dalam meningkatkan kinerja perawat, (3) Variabel self efficacy berpengaruh positif terhadap kinerja perawat. Artinya semakin tinggi self efficacy yang dimiliki oleh seorang perawat maka akan semakin tinggi juga kinerja yang dihasilkan, (4) Variabel pengembangan karier tidak berpengaruh terhadap kinerja perawat. Pengembangan karier yang dirasakan perawat dalam kategori baik, namun belum kuat dalam meningkatkan kinerja perawat, (5) Variabel self efficacy berpengaruh positif terhadap employee engagement. Artinya semakin tinggi self efficacy yang dimiliki maka akan meningkatkan employee engagement atau perawat akan semakin *engaged*, (6) Variabel pengembangan karier tidak berpengaruh terhadap employee engagement. Pengembangan karier dalam kategori baik namun belum cukup kuat dalam meningkatkan engagement perawat.

Hasil penelitian ini menemukan bahwa pentingnya self efficacy pada perawat karena tingginya self efficacy yang dimiliki oleh perawat menghasilkan tingginya juga employee engagement dan kinerja perawat. Untuk dapat mencapai kenaikan jenjang karier perawat tentunya perawat harus mempersiapkan kebutuhan atau syarat-syarat yang digunakan dalam proses kenaikan jenjang karier melalui kredensial, baik itu pendidikan, pengalaman kerja, logbook, dan sertifikat dari pelatihan-pelatihan yang diikuti, serta selalu meningkatkan pengetahuan dan keterampilan dalam melakukan asuhan keperawatan. Ketua tim, kepala ruangan atau manajer keperawatan memiliki peranan yang penting dalam membangun self efficacy perawat, dimana dapat dilakukan dengan memberi informasi tentang kemampuan diri yang dimiliki oleh perawat, individu yang memiliki *self efficacy* tinggi, jika ia memperoleh informasi positif mengenai dirinya, sementara individu akan memiliki *self efficacy* yang rendah, jika ia memperoleh informasi negatif mengenai dirinya. Mempertahankan dan terus meningkatkan kinerjanya, senantiasa untuk update pengetahuan melalui seminar, workshop serta pelatihan, dan juga harus lebih aktif untuk melakukan kenaikan jenjang perawat klinis jika sudah memenuhi syarat yang ditetapkan.

. Untuk pengembangan penelitian disarankan penelitian mendatang dapat menambahkan variabel-variabel lain yang dapat mempengaruhi employee engagement dan kinerja perawat serta memperluas kajian tentang indikator - indikator dari setiap variabel melalui upaya pengembangan teori.

## DAFTAR PUSTAKA

- Ardi,V,T,P, Astuti,E,S dan Sulistyio,M,C,W.(2017). Pengaruh Self Efficacy Terhadap Employee Engagement Dan Kinerja Karyawan (Studi pada Karyawan PT Telekomunikasi Indonesia Regional V Surabaya). *Jurnal Administrasi Bisnis (JAB)/Vol. 52 No. 1 November 2017*
- Azizah,A dan Gustomo,A. (2015). The Influence Of Employee Engagement To Employee Performance at PT Telkom Bandung. *Journal Of Business And Management Vol. 4, No.7, 2015: 817-829*
- Bohlander, George., and Snell, Scott. (2010). Principles of Human Resource. Management, 15th ed. Mason, OH: South Western – Cengage Learning
- Cherian, J dan Jacob,J. (2013). Impact of Self Efficacy on Motivation and Performance of Employees. *International Journal of Business and Management; Vol. 8, No. 14*
- Dajani, M,A,Z.(2015). The Impact of Employee Engagement on Job Performance and Organisational Commitment in the Egyptian Banking Sector. *Journal of Business and Management Sciences, 2015, Vol. 3, No. 5, 138-147*
- Giles. (1994). *Manajemen A system Approach, edisi 3*.WB. Saunders Company.
- Hughes dan Rog. (2008).*Talent Management, A Strategy for Improving Employee Recruitment, Retention, and Engegement within Hospitality Organization. International Journal of Contemporary Hospitality Management.*
- Kakui, I. M., dan Gachunga, H. (2016). Effects of Career Development on Employee Performance in The Public Sector: A Case of National Cereals And Produce Board. *The Strategic Journal of Business & Change Management, Volume 3, Issue 3, Arcticle 19, 308-324*
- Ming,C,L, dan Yen,C,C.(2012). Self-Efficacy, Effort, Job Performance, Job Satisfaction, and Turnover Intention: The Effect of Personal Characteristics on Organization Performance. *International Journal of Innovation, Management and Technology, Vol. 3, No. 4, August 2012*
- Motyka, B. 2018. *Employee engagement and performance: a systematic literature review. International Journal of Management and Economics 2018; 54(3): 227–244*
- Nasution, F. N., Mariatin, E., dan Zahreni, S. (2018). The Influence of Career Development and Organizational Culture on Employee Performance. *International Journal of Scientific Research and Management (IJSRM), Volume 06, Issue 01, January 2018, 57-65.*
- Nurfajar, Marzuqi, M,S. dan Rohmayati,N. (2018). Pengaruh Employee Engagement Dan Efikasi Diri Terhadap Kinerja Karyawan PT Nikomas Gemilang Divisi PCI S5 Serang Banten. *Jurnal Pengembangan Wiraswasta Vol. 20 NO. 01 –April 2018*
- Rahayu,M, Rasid,F dan Tannady,H.(2018). Effects Of Self Efficacy, Job Satisfaction, And Work Culture Toward Performance Of Telemarketing Staff In Banking Sector. *South East Asia Journal of Contemporary Business, Economics and Law, Vol. 16*
- Salman,M, Khan,M,N, Draz,U, Iqbal,M,J, dan Aslam,K. (2016). Impact of Self-Efficacy on Employee’s Job Performance in Health Sector of Pakistan. *American Journal of Business and Society Vol. 1, No. 3, 2016, pp. 136-142*
- Sari,E., dan Sinulangga,J. (2011). Pengaruh Pengembangan Karir Dan Kompensasi Terhadap Motivasi Karyawan. *Jurnal Ilmiah Penelitian Manajemen Manajerial, 2(1): 431-440*
- Schaufeli, W.B., & Bakker, A.B. (2004). Job demands, job resources, and their relationship with burnout and engagement: Amulti-sample study. *Journal of Organizational Behavior, 25, 293-315.*
- Setiawan,A.P, T.Andjarwati.(2017).Pengaruh Self Efficacy Dan Motivasi Terhadap Kinerja Karyawan PT. Busson Auto Finance (BAF) Cabang Surabaya I. *Jurnal Ekonomi Manajemen, Hal 275 - 284 275 Volume 2, Nomor 1, Mei 2017.*
- Setyabudi,M,A, Musadieg,M,A, dan Aziz,A,L.(2018). Pengaruh Pengembangan Karir Dan Self-Efficacy Terhadap Kinerja Pegawai (Studi Pada Perawat Rumah Sakit Dr. Mohamad Saleh Probolinggo). *Jurnal Administrasi Bisnis (JAB)/Vol. 63 No. 1*
- Sinambela,L.P.(2016). *Manajemen Sumber Daya Manusia*, Jakarta: Bumi Aksara.
- Yunus,A,N,M,T, Hamid,N dan Yusuf,R,M. (2018). Kepemimpinan Dan Pengembangan Karir Terhadap Komitmen Organisasional Serta Dampaknya Pada Kinerja Karyawan PT. Bank Mandiri (Persero) Tbk Area Makassar Kartini. *Hasanuddin Journal of Applied Business and Entrepreneurship HJABE Vol. 1 No. 2 April 2018*

## DAFTAR RIWAYAT HIDUP

Nama : Ns. Gede Pronajaya, S.Kep  
Alamat : Perumahan Alam Tirta Baru Blok B1  
No.18 Sukaesmi, Tamansari, Bogor,  
Jawa Barat 16610  
Tempat Tanggal Lahir : Bangunrejo, 18 September 1993  
Agama : Islam  
Jenis Kelamin : Laki-Laki  
Hp/Email : 085886673646/ nersgede18@gmail.com



### Pendidikan

- |  |                  |
|--|------------------|
| 1. SD Negeri Bangunrejo, Sumatera Selatan  | Tahun Lulus 2005 |
| 2. SMP Negeri Bangunrejo, Sumatera Selatan | Tahun Lulus 2008 |
| 3. SMA Negeri 5 Kota Lubuklinggau          | Tahun Lulus 2011 |
| 4. S1 Keperawatan Universitas Nasional     | Tahun Lulus 2015 |
| 5. S1 Profesi Ners Universitas Esa Unggul  | Tahun Lulus 2016 |
| 6. S2 MARS Universitas Esa Unggul          | Tahun Lulus 2021 |

### Riwayat Pekerjaan

1. Petugas Penerimaan Mahasiswa Baru (PPMB) Universitas Nasional / Unas Promotion Team periode 2013 – 2015
2. Koordinator Petugas Penerimaan Mahasiswa Baru (PPMB) Universitas Nasional / Unas Promotion Team periode 2014 – 2015
3. Perawat Pusat Kanker Nasional Rumah Sakit Kanker “Dharmais” Jakarta 01 November 2016 - 30 Desember 2020
4. IPCN *Link* Instalasi Radiodiagnostik Pusat Kanker Nasional Rumah Sakit Kanker “Dharmais” Jakarta 2019-2020
5. CPNS Rumah Sakit Umum Pusat Nasional Dr. Cipto Mangunkusumo Jakarta 01 Desember 2020-Sekarang.

# Self Efficacy Model and Career Development in Increase Employee Engagement and Nurse Performance

Gede Pronajaya<sup>1</sup> Rina Anindita<sup>2</sup> Rian Adi Pamungkas<sup>3</sup>  
Faculty of Health Sciences, Esa Unggul University Jakarta  
rina.anindita@esaunggul.ac.id

## ABSTRACT

*One of the factors for the success of human resource management in an organization is employee performance. Organizations can be said to be successful when the performance of the organization's employees is good. The results of nursing audits are still low in one room, namely below 90%, the high rate of turnover that occurs in nurses every year, the influence of self-efficacy on the performance of nurses, and the level of clinical nurse IV are still small. The purpose of this study was to determine and analyze the effect of Self Efficacy and Career Development on Employee Engagement and Nurse Performance at Dharmais Cancer Hospital. The research sample consisted of 200 respondents. The design of this research is explanatory research of causality (explanatory research). The data analysis technique used the Three-Box Method and SEM (Structural Equation Model) with the AMOS 24 program. The results showed that self-efficacy and career development indirectly mediated by employee engagement had not affected nurse performance; employee engagement does not affect nurse performance; self-efficacy has a positive effect on nurse performance; career development does not affect nurse performance; Self-efficacy has a positive effect on employee engagement; Career development does not affect employee engagement. Research findings: nurse performance in the high category, self-efficacy in the high category, career development in the good category, and employee engagement variable in the engaged category. career development does not affect nurse performance; Self-efficacy has a positive effect on employee engagement; Career development does not affect employee engagement. Research findings: nurse performance in the high category, self-efficacy in the high category, career development in the good category, and employee engagement variable in the engaged category. career development does not affect nurse performance; Self-efficacy has a positive effect on employee engagement; Career development does not affect employee engagement. Research findings: nurse performance in the high category, self-efficacy in the high category, career development in the good category, and employee engagement variable in the engaged category.*

**Keywords :** *Self Efficacy, Career Development, Employee Engagement, and Nurse Performance*

## Introduction

Human Resources (HR) is the key to the success of an organization is facing competition in the global era. Human resources are an integrated ability of thinking and physical power possessed by individuals (Bohlander & Snell, 2010). These resources are built to be able to compete in the face of increasingly fierce competition. One of the factors for the success of human resource management in an organization is employee performance. Organizations can be said to be successful when the performance of the organization's employees is good. Performance as a result of individual or group activities in an organization is an important thing that shows the successful implementation of the management system. Human resources involved in health services in hospitals consist of multi professions, both health workers and non-health workers.

Human Resources in the most dominant hospital are nurses. Research in several hospitals states that 60-70% of human resources in the hospital are nurses (Gilles, 1994). Nurses are the most dominant personnel who provide services to patients for 24 hours continuously. Thus, nurses are health workers who are most often in direct contact with patients and families, so that their role greatly determines the quality of service in the hospital. The current performance of nurses can be seen from several aspects such as in

providing services to patients which refers to the behavior, professional abilities, and nursing processes in achieving or maintaining optimal biological, psychological, social, and spiritual states.

Factors that can affect performance are employee engagement (Djani, 2015; Azizah & Gustomo, 2015; Ardi et.al 2017; Nurfajar et.al 2018; Motyka, 2018). Engagement occurs when a person is consciously alert and emotionally connected with another person. When the employee is engaged, the employee has an awareness of the purpose of his role to provide services so that the employee will give his best. One way for employees to repay their organization's services is through their engagement, employees will choose to involve themselves in the various levels that individuals receive from their organization (Saks, 2006). Employees will show the behavior of accepting all situations that occur in the organization and contribute to the progress of the organization.

Nurses are also required to provide quality and satisfying services for patients, for that nurse must have certain behavioral dispositions to complete each given task. One of these behavioral dispositions is self-efficacy. Self-efficacy influences employee performance (Ming and Yen, 2012; Cherian & Jacob, 2013; Salman et.al 2016; Rahayu et.al 2018). Self-efficacy refers to an individual's beliefs about his abilities, mobilizing the motivation, cognitive resources, and actions needed to successfully carry out a task in a particular context. High self-efficacy will develop a strong personality in a person, reduce stress, and are not easily affected by threatening situations

The performance of nurses in the hospital service business is supported by one of the factors, namely career development (Kakui and Gachunga, 2016; Nasution et.al 2018; Yunus et.al 2018). Career development is an important aspect that should not be overlooked in managing human resources (Sari & Sinulingga, 2011). An employee who wants to develop his career needs to think about what performance appraisals he has. Employee career development should be seen as an investment not a cost and that poor performance and low commitment are costs in the organization (Pareek & Rao, 2012).

Dharmais Cancer Hospital is a technical implementation unit of the Ministry of Health which is under and responsible to the Directorate General of Health. One of the main tasks of the Dharmais Cancer Hospital is to provide patient care and services according to the required modalities (such as surgery, chemotherapy, and radiation). Human resources, especially nurses at "Dharmais" Cancer Hospital, totaling 510 nurses consisting of Cancer Clinic Pre-Nurses (Pre-PKK), Cancer Clinic Nurses I (PKK I), Cancer Clinic Nurses II (PKK II), Cancer Clinic Nurses III (PKK III) and Cancer Clinic Nurse IV (PKK IV) with civil servant status, BLU and PKWT (Specific Time Work Agreement). Carrying out professional practice in outpatient, inpatient, and specialty care.

From the results of the nursing audit (assessment, nursing diagnosis, planning, implementation, and evaluation) by the Nursing Committee of the Dharmais Cancer Hospital which was carried out in 2019, the results obtained were Anggrek 1 98%, Mawar 1 89%, Anggrek 2 94%, Mawar 2 100%, Cempaka 94 %, RIM 100%, RIRA 100%, Lotus 95%, Tulip 100%, Child 98%, ICU 100%, HCU 100%, PICU 100%, IGD 96%, the data shows that in some rooms there are still results that are below 90% such as in the Mawar 1 room (documentation of nursing diagnoses only reached 78% with an average nursing care documentation of 89%), then in the IGD room the assessment documentation reached 81.2%, documentation of nursing diagnoses reached 87.5%. It is hoped that the nursing documentation carried out can reach a value of 100% such as in the ICU, HCU, Tulip, RIM, PICU, and RIRA rooms.

From the nursing report, the turnover of nurses at the Dharmais Cancer Hospital is quite high. The data obtained from 2016-2019 is a turnover in 2016 with 27 nurses, 2017 with 34 nurses, 2018 with 18 nurses, and the highest in 2019, 42 nurses. In the last four years, the turnover of nurses has reached 121 people and in the January-May report 19 nurses left the Dharmais Cancer Hospital, they said that they left the hospital for several reasons, namely moving their work to another hospital such as a hospital. owned by the local government or other health institutions, did not extend the contract, there was no clarity on the rules and work status, resigned, was accepted by CPNS, and also family factors. One of the effects of turnover is less than optimal performance. This phenomenon shows that the sense of engagement with nurses is still low. Engagement is a characteristic of employees who are committed to the organization, therefore engaged employees have a strong dedication to the company so that they will work more productively in advancing the company (Nurfajar et.al 2018).

Based on the observations made by the researchers regarding the performance of nurses, self-efficacy is a factor that influences the success of the performance that nurses do, it can be seen from they do not see duties as a threat they must avoid, many nurses at Dharmais Cancer Hospital are members of the

Functional Nursing Staff Group ( KSPF) such as Children KSPF, Chemotherapy KSPF, Wound Care KSPF, Palliative KSPF, Radiotherapy KSPF and so on. It appears that they develop a deep intrinsic interest and interest in an activity and develop goals to improve its performance.

Nurse data based on employment status and clinical nurse level at Dharmais Cancer Hospital, namely with 265 civil servant status, 145 BLUs, 100 PKWT and based on the clinical nurse career ladder, Pre PK totaled 87, PK I totaled 107, PK II amounted to 138, PK III totaled 167, PK IV totaled 11 with a total number of nurses, namely 510 people. This data shows that there are still many nurses who have the status of PKWT (Specific Time Work Agreement) or contract, which is 100 nurses, based on the career ladder, it shows that there is a Pre-PK clinical nurse level, at that level are nurses who are still in the orientation period or do not have a clinical assignment letter, Also obtained data on nurses with the PK IV level was only 11 people, very little compared to other clinical nurse levels.

Based on previous research by Ardi et.al (2017) entitled *The Influence of Self Efficacy on Employee Engagement and Employee Performance (Studies on Employees of PT Telekomunikasi Indonesia Regional V Surabaya)* show that there is an indirect effect (indirect effect) for self-efficacy on employee performance through Employee engagement, in line with research by Nurfajar et.al (2018), the results of the study show that simultaneously employee engagement, self-efficacy on employee performance has a significant positive effect, but partially self-efficacy has a negative effect. Other research by Setyabudi et.al (2018) shows that self-efficacy does not have a significant effect on nurse performance. The difference between this research and the research to be carried out is the addition of career development variables,

Low Employee Engagement causes the hospital to lose employees and of course, this automatically requires the hospital to replace new employees to meet the needs of service personnel. This is of course very detrimental because of having to recruit and orientate, which of course requires time and money. Losing employees will certainly interfere with the smooth running of service activities and the performance of other employees. So the question arises why the nurse turnover rate is high, is there a triggering factor such as self-efficacy originating from the employee who is the cause or other factors such as career development that employees feel or receive during work, Based on this explanation, the researcher is interested in conducting research entitled "The effect of self-efficacy and career development on employee engagement and the performance of nurses at Dharmais Cancer Hospital." The objectives of this study are: First, to determine and analyze the effect of Self Efficacy and Career Development on Employee Engagement and Nurse Performance at Dharmais Cancer Hospital; second, to study and analyze the effect of Employee Engagement on Nurse Performance; third, to study and analyze the effect of Self Efficacy on Nurse Performance; fourth, to examine and analyze the influence of Career Development on Nurse Performance; fifth, to study and analyze the effect of Self Efficacy on Employee Engagement; sixth,

## **Hypothesis**

The hypotheses in this study are (1) Self Efficacy and Career Development has a simultaneous effect on Employee Engagement and Nurse Performance, (2) Employee Engagement has a positive effect on Nurse Performance, (3) Self Efficacy has a positive effect on Nurse Performance, (4) Career Development has a positive effect on Nurse Performance, (5) Self Efficacy has a positive effect on Employee Engagement. (6) Career development has a positive effect on Employee Engagement.

## **Research methods**

### ***Samples and sampling techniques***

The research was conducted at the National Cancer Center "Dharmais" Cancer Hospital which is located on Jl. Let Jend S. Parman Kav.84-86, Slipi, Jakarta 11420. This research was conducted from April - September 2020. The design of this research is descriptive analysis with a model of causality or influence relationships. The sample in this study amounted to 200 respondents who used the Maximum Likelihood Estimation (MLE) estimation model. The sampling technique used in this study was Proportional Systematic Sampling, to obtain 129 nurses of respondents with PNS employment status and 71 BLU staffing status. The inclusion criteria in this study are nurses who work at Dharmais Cancer Hospital with civil servant status and BLU, clinical nurse level PKK I - PKK IV, Performing Nursing Services, willing to be a respondent. The



exclusion criteria in this study were nurses with PKWT employment status and nurses who no longer provided direct nursing services.

### **Research Instrument**

The type of instrument used in this study was a questionnaire. Consisting of 48 statements with details as follows; Performance variable 18 statements (item no. 1-18), variable self-efficacy 6 statements (item no 19-24), career development variable 18 statements (item no 25-42), and variable employee engagement with 6 statements (item no 43-48 ). This study uses a Likert scale with 4 categories which aim to eliminate doubtful answers from respondents with criteria 1: Strongly Disagree; 2: Disagree; 3: Agree; 4: Strongly Agree.

### **Validity and reliability of the instrument**

The validity test is done by comparing the results of the  $r$  table with  $r$  count, that is, if  $r$  table  $<$   $r$  count is said to be valid while  $r$  table  $>$   $r$  count is said to be invalid. The pilot study was conducted at the Dharmais Cancer Hospital with a total sample of 30 nurses with a calculated  $r$ -value of 0.361 (significance level 5%  $n = 30$ ). Nurse performance variables with 18 question items: 17 question items on nurse performance variables were declared valid, one item was invalid, namely KP2 items with  $r$  count 0.343 and declared invalid. The Self Efficacy variable with 6 question items was declared valid. The career development variable with 18 questions was declared valid. Employee engagement variable with 6 questions was declared valid.

In this study, researchers tested the reliability of the data using Cronbach Alpha. According to Hair et.al (2014), the size of the reliability coefficient is between 0 and 1, with the minimum reliability coefficient being between 0.6 and 0.7. The test results obtained the Cronbach Alpha value of the nurse performance variable, namely 0.947; self-efficacy variable, namely 0.886; The career development variable is 0.977 and the employee engagement variable is 0.922.

### **Three Box Method**

The analysis of the answer index per variable aims to find a descriptive picture of the answers to the questions posed by the respondents. The scoring technique used in this study is a maximum score of 4 and a minimum of 1 with a total of 200 respondents. The average score (index) is categorized into score ranges based on the calculation of the three-box method (Ferdinand, 2006). Upper limit of the score range:  $(\% F * 4) / 4 = (200 * 4) / 4 = 200$ ; The lower limit of the score range:  $(\% F * 1) / 4 = (200 * 1) / 4 = 50$ . Based on the calculation, the resulting score is between 50 - 200 with a range of 150. The results of the range are divided into three (three-box method), namely equal to 50, resulting in the following distribution: index value of 50-100 in the low category; 101-150 in the moderate category, and 151-200 in the high category.

### **Data Analysis Techniques**

The analysis technique used to analyze the data is SEM (Structural Equation Model) analysis. According to Ghozali (2011), Structural Equation Modeling or structural equation modeling is a multivariate analysis technique used by researchers to test the relationship between complex variables both recursive and non-recursive to get a comprehensive picture of the entire model.

### **Ethics Review**

This research protocol has gone through an ethical review process and passed an ethical review by the Research Ethics Commission of Esa Unggul University with a certificate Number: 0311-20.292 / DPKE-KEP / FINAL-EA / UEU / VIII / 2020 and the Ethics Committee for Research at the Dharmais Cancer Hospital. with a statement of passing the ethical review Number: 0148 / KEPK / X / 2020.

### **Result**

#### **Characteristics of Respondents**

The majority of respondents were female nurses as many as 117 people (58.5%) and the rest were men as many as 83 people (41.5%). Respondents based on age were dominated by respondents aged 20-30 years as many as 83 people (41.5%). Respondents based on education, most of the nurses have DIII Nursing education as many as 84 people (42%) and S1 Nursing as many as 109 people (54.5%). Respondents based

on the highest career path were PK III nurses, namely 85 people (42.5%). Respondents based on length of work, namely 1-5 years 73 (36.5%) and a work period of more than 15 years as many as 63 people (31.5%). Respondents based on employment status, as many as 129 people (64.5) were civil servants and as many as 71 (35.5) people with BLU employment status (Table 1)

Table 1. Characteristics of Respondents

Characteristics	amount	Percentage
<b>Gender</b>		
Man	83	41.5
Women	117	58.5
<b>Age</b>		
20-30 Years	83	41.5
31-40 Years	53	26.5
41-50 years	64	32
<b>Education</b>		
DIII Nursing	84	42
Nursing SI / NERS	109	54.5
Master of Nursing	6	3
S2 Health	1	0.5
<b>Career Path</b>		
Clinical Nurse 1	75	37.5
Clinical Nurse II	31	15.5
Clinical Nurse III	85	42.5
Clinical Nurse IV	9	4.5
<b>Years of service</b>		
1-5 Years	73	36.5
6-10 Years	35	17.5
11-15 Years	29	14.5
More than 15 Years	63	31.5
<b>Employment status</b>		
Civil servants	129	64.5
BLU	71	35.5

Source: Primary data processed, 2020

### Three Box Method Analysis

Resume descriptions of respondents' answers about attitudes in behavior are shown in the behavior matrix shown in the following table:

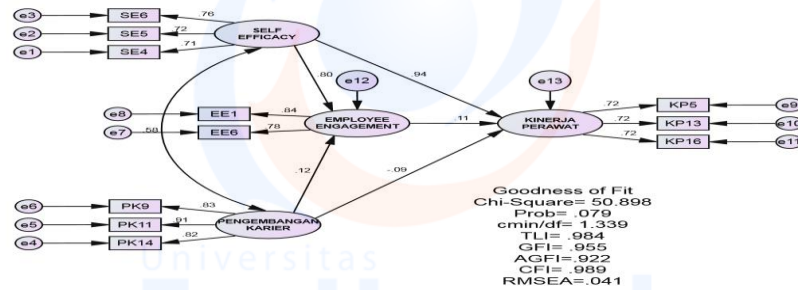
Table 1  
Matrix of Respondents' Responses at Dharmais Cancer Hospital

Variable	Respondent Response Position			Behavior
	Low	Moderate	High	
Nurse Performance			*	High
Self Efficacy			*	High
Career Development		*		Good
Employee Engagement			*	Engaged

source: the results of the three-box method (2020)

Based on table 1, shows the response to nurse performance, self-efficacy, career development, and employee engagement of nurses at the Dharmais Cancer Hospital. The results showed that all variables had a positive overall response. Descriptive analysis using the three-box method variable performance of nurses in the high category, self-efficacy in the high category, career development in good categories, and variable employee engagement in the category *engaged*.

**Structural Model Analysis**



Picture 1

**Full Modification of the Final Model**

After modifying the model, the results presented in Figure 1 are a model that can be said to be a good fit because it has a value in the good fit category, namely the values of Chi-Square, RMSEA, CFI, and CMIN / DF. In the model that has been modified as many as 37 indicators are eliminated to get a fit model result and only 11 indicators are left, of course, this is still a model in the initial stage of testing whose results depend only on 200 respondents in this study alone, for further research with a sample that is different may have different results.

**The goodness of Fit Test Results**

The Goodness of Fit test is carried out to see whether the model is a good fit or a poor fit. The test results can be seen in the following table:

Table 2  
 The goodness of Fit Test Results

Goodness of fit	Cut - off Value	Model Results	Information
X2 - Chi-Square	It is expected that the value is small with the degree of freedom (DF) = 38, the table value = 53.38 (0.05)	50,898	Good Fit
Probability	≥ 0.05	0.079	Good Fit
Cmin / DF	≤ 2	1,339	Good Fit
GFI	≥ 0.90	0.955	Good Fit
RMSEA	≤ 0.079	0.041	Good Fit
AGFI	≥ 0.90	0.922	Good Fit
TLI	≥ 0.90	0.984	Good Fit
CFI	> 0.90	0.989	Good Fit

Source: AMOS 24 data processing (2020)

Based on Figure 1, the full model analysis shows that the model meets the fit criteria. This can be explained by the value of the calculation results that meet the eligibility criteria for the full model SEM model in detail shown in Table 2. Based on Table 2, the results of the chi-square test calculation on the full model obtained a value of 50,898, which means that it meets the required requirements. This value is acceptable and can carry out further analysis by looking at the CMIN / DF, RMSEA, and CFI values that have met the good criteria, then further analysis can be carried out. Based on these results, it can be explained that the model in this study as a whole meets the criteria as a fit model.

**Partial Hypothesis Testing Results**

Hypothesis testing is carried out using the SEM program, namely the value of the Critical Ratio (cr) on the Regression Weight of the fit model. If the value of Critical Ratio (cr) ≥ 1.967 or the probability value

( $P \leq 0.05$ ) then  $H_0$  is rejected (the research hypothesis is accepted). The results of processing by AMOS on the full model can be seen in Table 3 as follows:

Table 3  
Hypothesis Test of Direct Effect (Hypotheses 2-6)

Hypothesis	Estimate	SE	CR	P	Information
Employee Engagement → Nurse Performance	.096	.191	.502	.616	H2 is rejected
Self Efficacy → Nurse Performance	.936	.241	3,883	***	H3 accepted
Career Development → Nurse Performance	-.060	.050	-1,191	.234	H4 rejected
Self Efficacy → Employee Engagement	.904	.130	6,957	***	H5 is accepted
Career Development → Employee Engagement	.089	.061	1,450	.147	H6 rejected

Source: AMOS 24 data processing (2020)

P-value = \*\*\* (meaning the number is below 0.001, so this is significant at the 0.01 level of significance, which is certainly better than the 0.05 level)

### Mediation Hypothesis Testing Results

Table 4  
Indirect Hypothesis Test (Hypothesis 1)

Relations Between Constructs	Mediation Variables	Direct Effect	Indirect Effect	Information
Self Efficacy → Nurse Performance	Employee engagement	.942	.087	Not Mediating
Career Development → Nurse Performance	Employee engagement	-.094	.013	Not Mediating

Source: AMOS 24 data processing (2020)

### Discussion

Hypothesis 1: the indirect hypothesis test results are shown in Table 4, the effect of self-efficacy on nurse performance through employee engagement is 0.087 or 8.7% (greater direct effect), whereas the influence of career development on nurse performance through employee engagement is 0.013 or 1.3% (greater indirect effect). This study states that the variable self-efficacy and career development simultaneously have not affected nurse performance mediated by employee engagement. Self-efficacy has a direct role in employee engagement, self-efficacy can encourage the willingness of employees to bond with the company, this is supported by research by Ardi et.al (2017); Rugiyanto (2017); Muliana and Rahmi (2019) state that self-efficacy has a positive direct effect on Employee Engagement. Self-efficacy has a big role in improving employee performance, either directly or mediated by employee engagement (Fajriah and Darokah, 2016). According to Hedger in Zulfa (2014) in Sumadhinata and Murtisari (2017), One of the most effective ways to keep engaged employees is to show them that they are appreciated. There are many forms of appreciation, one of which is career development. Career development is very important for employees in a company. Career development can make employees more motivated to improve performance.

Hypothesis 2: the results of testing the direct effect of Employee Engagement on Nurse Performance show that the estimated value is 0.096 with a CR of 0.502 ( $cr \geq 1.967$ ) and a p-value of 0.616 (p-value  $< 0.05$ ), meaning that the effect of employee engagement on nurse performance that is, 6.9% and 93.1% are other factors that were not examined in this study. The results of the analysis showed that there was no significant influence between employee engagement on nurse performance. Based on these results, it can be explained that higher employee engagement will not affect nurse performance. The results of this study are not in line with Ilyas and Nurtjahjanti (2015) who said employees who work with feelings that are engaged have the possibility of developing self-potential, experience with quality work that leads to individual productivity. Research by Gruman & Saks (2010) states that employee engagement has a positive relationship in increasing more productive performance. This can create the performance of engaged employees so that they can make work more enjoyable and can improve their performance in the company. This automatically leads to an increase in the company's performance going forward. The results of this study are not in line with previous research by Ardi et.al 2017 which states that if employees are tied to the company at work it will have an impact on employee performance achievement will also increase. This is supported by previous research by Djani (2015); Azizah & Gustomo (2015); Nurfajar et.al (2018) which states that there is a significant influence between employee engagement and employee performance. At the Dharmais Cancer Hospital, the assessment of work results is based on the assessment of individual performance indicators, the results of which become a reference in remuneration payments or salaries to be

obtained by nurses. In the individual assessment indicators (IKI) there are targets both in quality and quantity that must be met so that in this study employee engagement does not affect performance.

Hypothesis 3: the results of testing the direct effect of Self Efficacy on nurse performance show that the estimated value is 0.936 with a CR of 3.883 ( $cr \geq 1.967$ ) and a p-value of \*\*\* (p-value <0.05), meaning that self-efficacy affects. amounting to 93.6% of the performance of nurses and 6.4% of other factors. The results of the analysis show that there is a positive influence between self-efficacy on performance. This shows that the higher the self-efficacy of a nurse, the higher the performance. The results of this study are supported by previous research by Ardi, Astuti, and Sulistyono(2017) stated that self-efficacy can have a positive effect on employee performance. In this study, it was explained that the higher the self-efficacy of an employee, the employee will spend a lot of effort so that they can achieve high performance. The research suggests paying more attention and providing direction and guidance to employees to further increase self-confidence so that they can rely on themselves. This is supported by research by Kurra & Aty (2015); Salman et.al (2016); Rahayu et.al (2018) which states that there is a significant influence between self-efficacy on employee performance. Self-efficacy that can affect the performance of nurses is Magnitude (level), Generality (breadth), Strength (strength). Nurses at Dharmas Cancer Hospital are members of the Functional Nursing Staff Group (KSPF) such as KSPF Children, KSPF Chemotherapy, KSPF Wound Care, Palliative KSPF, Radiotherapy KSPF, and so on. It appears that they develop a deep intrinsic interest and interest in an activity and develop goals to improve its performance.

Hypothesis 4: the results of testing the direct effect of Career Development on Nurse Performance show that the estimated value is -0.060 with a CR of -1.191 ( $cr \geq 1.967$ ) and the p-value of 0.234 (p-value <0.05) means that career development has an effect of 6% of the nurse's performance and 94% are other factors. The results of the analysis show that there is no significant influence between career development and nurse performance. Based on these results it can be explained that the higher the career development will not affect the performance of nurses. The results of this study are not in line with Robbins (2002) in Nasution et. al (2018) which shows that a person's performance is not only influenced by his internal factors such as motivation and abilities but also by the opportunity to develop his career provided by the organization for him because career development will trigger him to improve his abilities which will ultimately affect his performance. at work (Amstrong, 2001 in Nasution et.al 2018). Research by Nasution et.al (2018) states that career development has a positive and significant effect on employee performance, career development can make employees more motivated to improve performance. By carrying out employee career development, the quality will certainly increase. Saleem and Amin (2013) in Nasution et. al (2018) also show that employee performance increases along with better quality career development, which is a form of organizational support. This is in line with previous research conducted by Kakui and Gachunga (2016); Ali et.al (2016); Setyabudi et.al 2018, where the results of the study show that career development has a positive and significant impact on employee performance. The development of a professional nurse career path has been regulated in PMK No. 40 of 2017, where a nurse will go through a career path placement according to her competence, which is carried out through continuous professional development (formal education, training, workshops, etc.) and recognition of her abilities. which is based on work experience and performance of the nursing practice.

Hypothesis 5: the results of testing the direct effect of self-efficacy on employee engagement show that the estimated value is 0.904 with a CR of 6.957 ( $cr \geq 1.967$ ) and a p-value of \*\*\* (p-value <0.05), meaning that self-efficacy affects. 90.4% of employee engagement and 9.6% are other factors. The results of the analysis showed that there was a positive influence on self-efficacy on employees. This shows that the higher the self-efficacy of a nurse, the more employee engagement will be increased. The results of this study are supported by previous research by Muliana and Rahmi (2019) which concluded that there is a positive direct effect of self-efficacy on work engagement. In this study, it is said that the level of self-efficacy or self-confidence that is owned by them will determine the success or lack of success in carrying out their work. It is further explained that if a person has high self-efficacy, then he will be confident and feel capable of carrying out his job, he will feel able to carry out his duties properly, goals that have been planned, can motivate himself and be able to overcome challenges, and they will have positive attitudes and behaviors, they will be connected physically, cognitively and emotionally, which are related to job fulfillment, in achieving the goals set by the institutional institution, they will feel engaged with their work, persistent and have strong dedication. high, have the initiative, In line with this research, Ardi et.al (2017) show that self-efficacy can have an impact on employees so that they want to be tied to the company, employees' confidence in their ability to do their best will make employees more attached to the company.

His research found that self-efficacy was positively related to the level of goal setting. This is supported by the research of Rugiyanto (2017) which states that self-efficacy has a positive direct effect on Employee Engagement.

Hypothesis 6: the results of testing the direct effect of Career Development on employee engagement show that the estimated value is 0.089 with a CR of 1.450 ( $cr \geq 1.967$ ) and a p-value of 0.147 (p-value  $< 0.05$ ) means that career development has an effect of 8, 9% of employee management and 91.1% are other factors. The results of the analysis show that there is no significant effect between career development on employee engagement. Based on these results, it can be explained that higher career development will not affect employee engagement. The results of this study are not in line with previous research conducted by Yolanda and Sari (2019) which concluded that career development has a significant and partial effect on Employee Engagement. In this study, it was explained that one of the effective ways to retain employees is to show that they are appreciated. One of them is by providing opportunities for employees to develop their careers. The research suggests that to optimize career development, among others, hold or improve training programs and the latest learning development for employees according to employee needs so that their knowledge and skills are expected to be following their work. Career development can increase employee engagement, Sumadhinata and Murtisari (2017) stated that career development had a significant effect on employee engagement. The employment status of respondents is PNS and BLU employees so that the employment status is permanent so that high nurse employee engagement and career development do not have a significant effect.

## Conclusion

Based on data analysis and discussion of research results, it can be concluded as follows: (1) The variable of self-efficacy and career development indirectly mediated by employee engagement has not affected nurse performance, (2) The employee engagement variable has no effect on nurse performance. This means that other factors affect the performance of nurses. The nurse is in the engaged category but is not strong enough to improve the nurse's performance, (3) The self-efficacy variable has a positive effect on the nurse's performance. This means that the higher the self-efficacy of a nurse, the higher the performance produced, (4) Career development variables do not affect nurse performance. The career development felt by nurses is in a good category, but not yet strong in improving the performance of nurses, (5) the variable self-efficacy has a positive effect on employee engagement. This means that the higher the self-efficacy that is owned, it will increase employee engagement or the nurses will be more engaged, (6) Career development variables have no effect on employee engagement. Career development is in a good category but is not strong enough to increase nurse engagement.

The results of this study found that the importance of self-efficacy in nurses because the high self-efficacy of nurses resulted in high employee engagement and performance of nurses. To be able to achieve an advancement in the career ladder of nurses, of course, nurses must prepare the needs or conditions that are used in the process of advancing the career path through credentials, be it education, work experience, logbooks, and certificates from the training that is followed, and always improve knowledge and skills. in doing nursing care. The team leader, room head, or nursing manager has an important role in building nurse self-efficacy, which can be done by providing information about the self-efficacy of nurses, individuals who have high self-efficacy, if they get positive information about themselves, while individuals will have low self-efficacy if he gets negative information about himself. Maintain and continuously improve their performance, constantly update their knowledge through seminars, workshops, and training, and they must also be more active in advancing the clinical nurse level if they meet the specified requirements.

. For research development, it is suggested that future research can add other variables that can affect employee engagement and performance of nurses and expand the study of the indicators of each variable through theory development efforts.

## REFERENCES

- Ardi, V, T, P, Astuti, E, S and Sulisty, M, C, W. (2017). The Influence of Self-Efficacy on Employee Engagement and Employee Performance (Study on Employees of PT Telekomunikasi Indonesia Regional V Surabaya). *Journal of Business Administration (JAB)* | Vol. 52 No. November 1, 2017
- Azizah, A and Gustomo, A. (2015). The Influence Of Employee Engagement To Employee Performance at PT Telkom Bandung. *Journal Of Business And Management* Vol. 4, No.7, 2015: 817-829
- Bohlander, George., And Snell, Scott. (2010). *Principles of Human Resource. Management*, 15th ed. Mason, OH: South-Western - Cengage Learning
- Cherian, J, and Jacob, J. (2013). Impact of Self-Efficacy on Motivation and Performance of Employees. *International Journal of Business and Management*; Vol. 8, No. 14
- Dajani, M, A, Z. (2015). The Impact of Employee Engagement on Job Performance and Organizational Commitment in the Egyptian Banking Sector. *Journal of Business and Management Sciences*, 2015, Vol. 3, No. 5, 138-147
- Giles. (1994). *Management A system Approach*, edition 3. WB. Saunders Company.
- Hughes and Rog. (2008). Talent Management, A Strategy for Improving Employee Recruitment, Retention, and Engagement within Hospitality Organization. International Journal of Contemporary Hospitality Management.*
- Kakui, IM, and Gachunga, H. (2016). Effects of Career Development on Employee Performance in The Public Sector: A Case of National Cereals And Produce Board. *The Strategic Journal of Business & Change Management*, Volume 3, Issue 3, Article 19, 308-324
- Ming, C, L, and Yen, C, C. (2012). Self-Efficacy, Effort, Job Performance, Job Satisfaction, and Turnover Intention: The Effect of Personal Characteristics on Organization Performance. *International Journal of Innovation, Management and Technology*, Vol. 3, No. 4, August 2012
- Motyka, B. 2018. Employee engagement and performance: a systematic literature review. *International Journal of Management and Economics* 2018; 54 (3): 227–244
- Nasution, FN, Mariatin, E., and Zahreni, S. (2018). The Influence of Career Development and Organizational Culture on Employee Performance. *International Journal of Scientific Research and Management (IJSRM)*, Volume 06, Issue 01, January 2018, 57-65.
- Nurfajar, Marzuqi, M, S. and Rohmayati, N. (2018). The Influence of Employee Engagement and Self-Efficacy on Employee Performance of PT Nikomas Gemilang PCI S5 Division Serang Banten. *Journal of Entrepreneurial Development* Vol. 20 NO. 01 - April 2018
- Rahayu, M, Rasid, F and Tannady, H. (2018). Effects Of Self Efficacy, Job Satisfaction, And Work Culture Toward Performance Of Telemarketing Staff In Banking Sector. *Southeast Asia Journal of Contemporary Business, Economics, and Law*, Vol. 16
- Salman, M, Khan, M, N, Draz, U, Iqbal, M, J, and Aslam, K. (2016). Impact of Self-Efficacy on Employee's Job Performance in Health Sector of Pakistan. *American Journal of Business and Society* Vol. 1, No. 3, 2016, pp. 136-142
- Sari, E., And Sinulangga, J. (2011). Effect of Career Development and Compensation on Employee Motivation. *Scientific Journal of Managerial Management Research*, 2 (1): 431-440
- Schaufeli, WB, & Bakker, AB (2004). Job demands, job resources, and their relationship with burnout and engagement: A multi-sample study. *Journal of Organizational Behavior*, 25, 293-315.
- Setiawan, AP, T. Andjarwati. (2017) Influence of Self-Efficacy and Motivation on Employee Performance of PT. Busson Auto Finance (BAF) Surabaya Branch I. *Journal of Management Economics*, Pages 275 - 284 275 Volume 2, Number 1, May 2017.
- Setyabudi, MA, Musadieg, MA, and Aziz, A, L. (2018). The Influence of Career Development and Self-Efficacy on Employee Performance (Study of Nurse at Dr. Mohamad Saleh Probolinggo Hospital). *Journal of Business Administration (JAB)* | Vol. 63 No. 1
- Sinambela, LP (2016). *Human Resource Management*, Jakarta: Earth Literacy.
- Yunus, A, NM, T, Hamid, N and Yusuf, R, M. (2018). Leadership and Career Development on Organizational Commitment and Its Impact on Employee Performance of PT. Bank Mandiri (Persero) Tbk Makassar Kartini Area. *Hasanuddin Journal of Applied Business and Entrepreneurship HJABE* Vol. 1 No. April 2, 2018