19. Nurse Performance Model in Terms of Value of Local Culture Philosophy, Religiosity and Leadership in Bima General Hospital West Nusa Tenggara Indonesia

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Nurse Performance Model in Terms of Value of Local Culture Philosophy, Religiosity and Leadersship in Bima General Hospital West Nusa Tenggara Indonesia

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Abstract

Problems regarding nurse performance are problems that are always faced by hospital management. So the hospital management needs to know what factors can improve nurse performance. The impact of a decrease in nurse performance can affect the quality of health services to be suboptimal. There are 4 variables used in this study, namely the leadership variable, the religiosity variable, and the local philosophy variable as the exogenous latent variable and the nurse performance variable as the endogenous latent variable. in analyzing the research data, Structural Equation Modeling (SEM) method is used with the Partial Least Square (PLS) approach in finding influential variables and the magnitude of the coefficient. The results obtained in this study are the Leadership variable, the Local Philosophy variable, and the Religiosity variable that has a significant and positive effect on the Nurse Performance variable at the Bima District General Hospital.

Keywords: The Nurse Performance Model, Local Philosophy, Leadership, Hospital, Religiosity

Introduction

In Law No. 36 of 2014 concerning Health Workers, nursing personnel are included in 13 types of disciplines including human resources in the health sector providing health services [1]. Nurses or nurses are an inseparable part of human resources in the health sector. Nurses' abilities and competencies must be improved to improve the quality of health services, especially in hospital services [2].

The hospital is a health service institution that organizes health services which are very beneficial in providing health services to the community, as stated in Law RI No. 44 Pasal 1[3]. Therefore, the hospital is required to provide quality services that are highly determined by the human resources in it.

West Nusa Tenggara is a province in Indonesia located in the western part of the Nusa Tenggara Islands. This province has its capital in Mataram and has 10 Regencies / Cities. Each city and district has regional public hospitals as a place for public health services. The health services of regional general hospitals in NTB Province have progressed quite well in the last three years. This is evidenced by an increase in access to health services in hospitals (outpatient and inpatient visits), but there are still some weakness factors that will hinder the optimization of future health improvement, one of which is the low performance of nurses [4].

The results of monitoring and evaluating the performance of nurses at 4 Regional Public Hospitals in NTB Province based on five nursing care directly related to the performance of nurses performed by the NTB Provincial Health Office, the average performance of nurses at Bima Regional General Hospital is 65.4% in 2016 and 71.2% in 2017 [5]. The number is fairly low because it means there are still 25.7% complaints and dissatisfaction from the public about the performance of nurses at the 4 hospitals.

Problems regarding nurse performance are problems that are always faced by hospital management. So the hospital management needs to know what factors can improve nurse performance. The impact of a decrease in nurse performance can affect the quality of health services to be suboptimal. The phenomenon shows that there are still many complaints from clients about unsatisfactory service quality [6]. Patient satisfaction depends on the quality of service. New patients will feel satisfied if the performance of health services they get is the same as or exceeded their expectations and vice versa, dissatisfaction or feelings of disappointment of patients will arise if the performance of health services obtained is not in line with expectations[7].

Colquitt conducts an analysis of a number of variables that affect behavior and performance are; First, the individual mechanism consisting of; job satisfaction, stress, motivation, trust, justice, ethics, and learning and decision making. Second, organizational mechanism consisting of organizational culture and organizational

structure. Third, the group mechanism consisting of; leadership: styles and behavior; leadership: power and negotiation; teams: processes and communication; teams: characteristics and diversity. Fourth, individual characteristics consisting of abilities, personality and cultural values [8].

Based on these explanations that leadership is one of the dominant variables in influencing performance. This is supported by several studies such as research by [9] and [10] on nursing leadership models that are built, which are positively supported by servant, visionary, situational, transactional, transformational, and elements of leadership. Research by [11] also explains that the leadership model represented by transformational leadership influences project time performance.

With the existence of religiosity, a person who has a religion should always try to do the best and not violate the rules in behaving and behaving in each of his activities, which is in accordance with the norms and rules set in his religion [12]. Religiosity is also very important to be owned by an employee, because if an employee has a high level of religiosity, then the motivation of employees to produce good achievements or performance will also be higher [13]. Because a nurse is also an employee in the health sector, so the factor of religiosity should affect the nurse's performance.

In addition to leadership and religiosity, the culture value variable is also quite unique to discuss, because Indonesia consists of many tribes and cultures so that with a high cultural value in each individual, it can encourage someone with a particular ethnicity / culture to become more competitive and strive to achieve success. This also contributes to improved performance. A nurse who has cultural competence will care for and be sensitive to the cultural needs of patients who receive nursing care. At this time, the cultural competence of nurses in Indonesia is still not a concern, the majority of nurses have not been prepared for cultural competency during the education process. Lack of nurse's cultural competence can result in many problems interacting between patients and nurses [2].

Literature Review

Descriptive Statistics

Descriptive statistics are methods relating to the collection and presentation of data so that they can provide useful information [14]. In descriptive statistics it does not involve drawing general conclusions.

Structural Equation Modeling (SEM)

Structural Equation Modeling (SEM) is a multivariate analysis method that can be used to describe the simultaneous relationship of linear relationships between observational variables (indicators) and variables that cannot be measured directly (latent variables). Latent variables are unobserved variables (unobserved) or can not be measured (unmeasured) directly, but must be measured through several indicators. There are two types of latent variables in SEM, they are endogenous (η) and exogenous (ξ) [15].

Partial Least Square (PLS)

Partial Least Square (PLS) is a powerful method of analysis due to the lack of dependence on the measurement scale (eg measurements that require interval or ratio scales), sample size, and the distribution of residuals. Indicators on PLS can be formed with a reflexive or formative type. Structural models describe the relationship between the independent latent variable (exogenous) with the dependent latent variable (endogenous) with the following equation [16].

$$\boldsymbol{\eta = B\eta + \Gamma\xi + \zeta}$$

Where η (eta) is an endogenous latent variable random vector with size mx1, ξ (xi) is an exogenous latent variable random vector with size nx1, B is an endogenous latent variable coefficient of size mxm and Γ exogenous latent variable coefficient matrix, which shows the relationship of ξ to η in size mxn. Whereas ζ (zeta) is a random error vector of size mx1. Assuming structural equation models of latent variables include: $E(\eta) = 0$, $E(\xi) = 0$, $E(\zeta) = 0$, and ζ does not correlate with ξ and (I – B) is a nonsingular matrix.

Evaluation of The SEM-PLS Model

Evaluation of the model in PLS includes two stages, namely evaluation of the measurement model and evaluation of the structural model. Evaluation of the measurement model is performed as follows criteria [17].

1. Indicator reliability shows how many indicator variants can be explained by latent variables by taking into account the loading value. Where if the loading value is smaller than 0.4 then the indicator must be eliminated from the model [18].
2. Internal consistency or construct reliability, which can be calculated through a composite reliability value ($\hat{\rho}$) of more than 0,6 [18].
3. Convergent validity is generally checked with average variance extracted (AVE) with a minimum 0,5 to show a good measure of convergent validity [18].
4. Discriminant validity, evaluated by comparing the AVE root value must be higher than the correlation between constructs or AVE value is higher than the square of correlation between constructs [18].

Whereas to evaluate the structural model it can using the following criteria [19].

1. R^2 states the percentage of variance that can be explained by endogenous latent variables [20]. The minimum value is 0,7.
2. Path coefficient (path coefficient), describes the strength of the relationship between constructs.

Method of Bootstrapping

The bootstrap method has been developed by Efron (1979) as a tool to help reduce the reliability that is associated with errors in the use of normal distributions and their use. In bootstrap pseudo data (shadow data) is made using information and properties of the original data, so that shadow data has characteristics similar to the original data [21].

In the bootstrap method, sampling is carried out with the return of the sample data (resampling with replacement) [21].

Hipotesis Test

Hypothesis testing is done by bootstrapping resampling method with multiple bootstraps in accordance with the default of PLS software. The hypothesis is used as follows:

1. Hypothesis for the relationship between Leadership and Nurse Performance
   - H0 : There is no significant effect of the leadership variable on nurse performance
   - H1 : There is a significant influence of the leadership variable on nurse performance
2. Hypothesis for the relationship of Local Philosophy with Nurse Performance
   - H0 : There is no significant effect of local philosophy variables on nurse performance
   - H1 : There is a significant influence of local philosophy variables on nurse performance
3. Hypothesis for Religiosity relationship with Nurse Performance
   - H0 : There is no significant effect of the religiosity variable on nurse performance
   - H1 : There is a significant effect of the religiosity variable on nurse performance

Material and Methods

Research Data

The data used in this study are primary data. A total of 48 people who worked as nurses at the Bima Regional Hospital were respondents in this study. Of the 48 respondents, based on the sex of the respondents were 30 female nurses and 18 male nurses who were respondents. Whereas based on education, 36 nurses with D3 degrees and 12 nurses with S1 degrees.

Data Collection Methods and Research Methods

Data obtained from questionnaires distributed to respondents. The sampling method used in determining respondents by purposive sampling, the sampling technique with certain considerations [22]. The reason for using purposive sampling is because the respondent in this study is the nurse who works at the Bima District General Hospital.

This study uses a mixed method, which is a type of research that combines elements of qualitative and quantitative research approaches. Sequence explanatory mixed method is carried out through two stages: the first stage uses qualitative methods, and the second stage uses quantitative methods. Furthermore, the research variables are measured using instruments so that data in the form of numbers can be analyzed using statistical procedures [23,24].

Variables

There are 4 variables used, leadership variables, religiosity variables, and local philosophy variables as exogenous latent variables and nurse performance variables as endogenous latent variables. The Leadership Variable is explained by 5 indicators with 33 instruments. The variable of religiosity is explained by 5 indicators with 33 instruments. For the Local Philosophy variable explained by 1 indicator with a total of 15 instrument statement instruments. While the Nurse Performance variable is explained by 5 indicators with many 25 instrument statement instruments. The following table is a variable in research :

Table 1. Research Variable

Variables	Indicator	
Leadership	L1	Leadership Style
	L2	Teamwork
	L3	Communication
	L4	Power
	L5	Negotiations
Religiosity	R1	Religious Belief
	R2	Religious Practice
	R3	Religious Feeling
	R4	Religious Knowledge
	R5	Religious Effect
Local Phylosophi	LP	Local Cultural Values
Nurse Performance	NP1	Assessment
	NP2	Nursing Diagnoses
	NP3	Planning
	NP4	Implementation
	NP5	Evaluation

Source: Previous studies

Whereas in analyzing research data, Structural Equation Modeling (SEM) method is used with Partial Least Square (PLS) approach in finding influential variables and the magnitude of the coefficient. That is because, the data in this study are in the form of an assessment of 3 variables with a Likert scale namely point 1 for strongly disagreeing, point 2 for disagreeing, point 3 for agreeing and point 4 for strongly agreeing. So it is very suitable to use the PLS approach which does not require that research data patterns are assumed to follow normal distribution patterns. That is because the research data patterns certainly do not follow the normal distribution pattern.

Results and Discussion

Descriptive Statistics

There were 48 nurses who became respondents at the Bima District General Hospital. Respondent characteristics are described in the following table:

Table. 2. Characteristics of Respondents in the Bima Regency Regional General Hospital

Category	Description	Frequency (person)	Percentage (%)
Gender	Male	8	17
	Female	40	83
	Total	48	100
Age	< 25 year	2	4
	25 – 40 year	34	71
	41 – 50 year	11	23
	> 50 year	1	2
	Total	48	100
Length of Working	< 5 year	11	23
	5 – 10 year	14	29
	11 – 15 year	8	17
	> 15 year	15	31
	Total	48	100
Last Education	S2	0	0
	S1	26	54
	D4	0	0
	D3	22	46
	SPK	0	0
	Total	48	100
Employment Status	PNS	44	92
	Contract	4	8
	Others	0	0
	Total	48	100
Religion	Islam	48	100
	Hindu	0	0
	Catholic	0	0
	Total	48	100
Tribe	Sasak	0	0
	Samawa	0	0
	Mbojo	48	100
	Others	0	0
	Total	100	100

Source : Primary Data is Processed (2019)

From the results of the details as shown in table 2. Can be explained as follows:

1. Gender
   Characteristics of respondents by sex in table 2. it can be seen that male respondents were 8 people (17%) and female respondents were 40 people (83%) of the total 48 respondents in Bima District Hospital. This shows that in Bima District Hospital nurses who were respondents of the study were dominated by nurses with female gender.

2. Age
   Characteristics of research respondents by age in table 2. shows that respondents under the age of 25 are 2 people (4%), respondents with an age range of 25 to 40 years are 34 people (71%), respondents with an age range of 41 to 50 years as many as 11 people (23%), and respondents with age over 50 years as many as 1 person (2%) of the total number of 100 respondents in Mataram City Hospital. Based on the age characteristics, it shows that respondents in Bima District Hospital are dominated by nurses with an age range of 25 to 40 years. This is because nurses of this age have the skills and productivity at work.

3. Length of Work
   Employees who have a long working period will cause loyalty to the organization and have a high commitment not to leave the company. Characteristics of respondents based on length of service, based on table 2. shows that respondents with tenure less than 5 years are 11 people (23%), respondents with tenure between 5 to 10 years are 14 people (29%), respondents with tenure between 11 to 15 years as many as 8 people (17%), and respondents with more than 15 years of service as many as 15

people (31%). Based on the characteristics of the work period, respondents in Bima District Hospital are dominated by respondents with tenure of 5 to 10 years and tenure of more than 15 years.

4. Last Education

Characteristics of respondents based on education level, based on table 2. shows that respondents with the last education S1 were 26 people (54%), and respondents with the last education DIII were 22 people (46%). Respondents with a Bachelor's degree in Nursing were the most respondents in their educational characteristics.

5. Employment Status

Characteristics of respondents based on employment status, based on table 2. shows that respondents with civil servant employment status (Civil Servants) are 44 people (92%) and respondents with contract staffing status are 4 people (8%). This means that nurses who become respondents at the Bima District Hospital are dominated by civil servant employment status.

6. Religion

Characteristics of respondents based on religion, based on table 2. shows that respondents who filled out the questionnaire were all Muslim (100%).

7. Tribe

Characteristics of respondents based on ethnicity of respondents, based on table 2. shows that respondents who filled out the questionnaire all had Mbojo ethnicity (100%). That is because Bima Regency where Bima District Hospital is dominated by the Mbojo tribe.

Test Validity and Test Reliability of Instrument

1. Leadership Variable

The leadership variable has 33 instruments derived from 5 indicators, following the results of the validity and reliability test of the leadership variable :

Table 3. Results of Test Validity and Reliability Test for Leadership Instrument Variables

Variable	Indicator	Instrumen	Koefisien Korelasi Spearman	Descr
Leadership	Leadership Style (L1)	L1.1	0,453	Valid
		L1.2	0,649	Valid
		L1.3	0,707	Valid
		L1.4	0,697	Valid
		L1.5	0,736	Valid
		L1.6	0,712	Valid
		L1.7	0,686	Valid
		L1.8	0,706	Valid
		L1.9	0,442	Valid
		L1.10	0,663	Valid
		L1.11	0,669	Valid
		L1.12	0,365	Valid
		L1.13	0,355	Valid
		L1.14	0,667	Valid
		L1.15	0,676	Valid
	Teamwork (L2)	L2.1	0,381	Valid
		L2.2	0,582	Valid
		L2.3	0,396	Valid
		L2.4	0,564	Valid
		L2.5	0,586	Valid
	Communication (L3)	L3.1	0,444	Valid
		L3.2	0,421	Valid
		L3.3	0,566	Valid
		L3.4	0,387	Valid
		L3.5	0,577	Valid
	Power (L4)	L4.1	0,592	Valid
		L4.2	0,563	Valid
		L4.3	0,578	Valid
		L4.4	0,417	Valid
	Negotiation (L5)	L5.1	0,667	Valid
		L5.2	0,430	Valid
		L5.3	0,575	Valid
		L5.4	0,617	Valid
	Reliability Test			
	Alpha Croncbach		0,949	Reliable

Source : SPSS Analysis Result

For validity testing, all instruments on the leadership variable are valid. This can be seen in the value of the Spearman correlation coefficient whose value is above 0.3. As for the reliability test with a Cronbach alpha value of 0.949, it shows that the instruments on the leadership variable are very reliable.

2. Local Philosophy Variable

The local philosophy variable has 15 instruments derived from 1 indicator, following the validity and reliability test results of the local philosophy variable :

Table 4. Results of Test Validity and Reliability Test for Local Philosophy Instrument Variables

Variable	Indicator	Instrumen	Koefisien Korelasi Spearman	Descr
Local Philosophy	Local Philosophy (LP)	LP1	0,414	Valid
		LP2	0,426	Valid
		LP3	0,383	Valid
		LP4	0,293	Valid
		LP5	0,378	Valid
		LP6	0,336	Valid
		LP7	0,371	Valid
		LP8	0,254	Valid
		LP9	0,346	Valid
		LP10	0,449	Valid
		LP11	0,516	Valid
		LP12	0,474	Valid
		LP13	0,518	Valid
		LP14	0,505	Valid
		LP15	0,205	Valid
	Reliability Test			
	Alpha Cronbach		0,928	Reliable

Source : SPSS Analysis Result

For validity testing, all instruments on the local philosophy variable are valid. This can be seen in the value of the Spearman correlation coefficient whose value is above 0.3. As for the Reliability Test with a Cronbach alpha value of 0.928, it shows that the instruments on the local philosophy variable are very reliable.

3. Religiosity Variable

The religiosity variable has 33 instruments derived from 5 indicators, the following results are the validity and reliability of the religiosity variable :

Table 5. Results of Test Validity and Reliability Test for Religiosity Instrument Variables

Variable	Indicator	Instrument	Koefisien Korelasi Spearman	Descr
Religiosity	Religious Belief (R1)	R1.1	0,661	Valid
		R1.2	0,667	Valid
		R1.3	0,688	Valid
		R1.4	0,706	Valid
		R1.5	0,702	Valid
		R1.6	0,675	Valid
		R1.7	0,689	Valid
	Religious Practice (R2)	R2.1	0,716	Valid
		R2.2	0,681	Valid
		R2.3	0,651	Valid
		R2.4	0,651	Valid
		R2.5	0,654	Valid
		R2.6	0,655	Valid
		R2.7	0,657	Valid
		R2.8	0,642	Valid
		R2.9	0,732	Valid
	Religious Feeling (R3)	R3.1	0,707	Valid
		R3.2	0,695	Valid
		R3.3	0,714	Valid
		R3.4	0,687	Valid
		R3.5	0,670	Valid
	Religious Knowledge (R4)	R4.1	0,704	Valid
		R4.2	0,658	Valid
		R4.3	0,698	Valid
		R4.4	0,665	Valid
		R4.5	0,678	Valid
	Religious Effect (R5)	R5.1	0,735	Valid
		R5.2	0,735	Valid
		R5.3	0,709	Valid
		R5.4	0,698	Valid
		R5.5	0,712	Valid
		R5.6	0,642	Valid
		R5.7	0,644	Valid
	Reliability Test			
	Alfa Cronbach		0,965	Reliable

Source : SPSS Analysis Result

For the validity test, all instruments on the religiosity variable are valid. This can be seen in the value of the Spearman correlation coefficient whose value is above 0.3. As for the Reliability Test with a Cronbach alpha value of 0.928, it shows that the instrument on the religiosity variable is very reliable.

4. Nurse Performance Variable

The nurse performance variable has 25 instruments derived from 5 indicators, following the validity and reliability test results of the nurse performance variable :

Table 6. Results of Test Validity and Reliability Test for Nurse Performance Instrument Variables

Variable	Indicator	Instrumen	Koefisien Korelasi Spearman	Descr
Nurse Performance	Assessment (NP1)	NP1.1	0,431	Valid
		NP1.2	0,396	Valid
		NP1.3	0,501	Valid
		NP1.4	0,529	Valid
		NP1.5	0,565	Valid
	Nursing Diagnoses (NP2)	NP2.1	0,578	Valid
		NP2.2	0,541	Valid
		NP2.3	0,473	Valid
		NP2.4	0,563	Valid
		NP2.5	0,549	Valid
	Planning (NP3)	NP3.1	0,481	Valid
		NP3.2	0,664	Valid
		NP3.3	0,428	Valid
		NP3.4	0,613	Valid
		NP3.5	0,408	Valid
	Implementation (NP4)	NP4.1	0,684	Valid
		NP4.2	0,670	Valid
		NP4.3	0,626	Valid
		NP4.4	0,666	Valid
		NP4.5	0,652	Valid
	Evaluation (NP5)	NP5.1	0,690	Valid
		NP5.2	0,680	Valid
		NP5.3	0,416	Valid
		NP5.4	0,590	Valid
		NP5.5	0,313	Valid
	Reliability Test			
	Alpha Cronbach		0,924	Reliable

Source : SPSS Analysis Result

For validity testing, all instruments on the nurse performance variable are valid. This can be seen in the value of the Spearman correlation coefficient whose value is above 0.3. As for the Reliability Test with a Cronbach alpha value of 0.928, it shows that the instruments on the nurse performance variable are very reliable.

Validities' and Reliabilities' Model Tests

The stages of data analysis in the PLS method are outer model evaluation, inner model evaluation, and hypothesis testing. Evaluation of the outer model is the measurement of indicators against latent variables or measuring how far these indicators can explain the latent variables [15]. Outer model evaluation is done by testing the validity and reliability. Validity testing uses the average variance extracted (AVE) value, while for the Reliability Test uses nilaicronbach's alpha.

Table 6. Results of Test Validity and Reliability Test of Research Variables

Variable	Cronbach's Alpha	AVE	Desc
Leadership	0,931	0,516	valid and reliable
Local Philosophy	0,969	0,647	valid and reliable
Religiosity	0,974	0,506	valid and reliable
Nurse Performance	0,920	0,559	valid and reliable

Source : Smart PLS Calculation Result

A variable is said to be convergently valid if the AVE value produced is greater than 0.5 [15]. As for the Reliability Test, the value of Cronbach's alpha for each variable is greater than 0.7 [17]. In table 6. explain the AVE value and Cronbach's alpha value of each variable that meets the criteria. So it can be concluded that the indicators on the variables of Leadership, Local Philosophy and Nurse Performance are said to be valid and reliable.

Goodness of Fit Model (Outer Model)

Table 7. R Square (R^2) Model Nurse Performance

	R Square (R^2)
Nurse Performance	0,519

Source : Smart PLS Calculation Result

The inner model evaluation is done by looking at the value of R Square (R2) for each endogenous variable as the predictive power of the structural model [16]. In table 7. explains the R2 value of the relationship between the Leadership variable and the Local Philosophy variable to the Nurse Performance variable of 0.519. This means that 51.9% of the diversity of the Nurse Performance variable can be explained by the Leadership variable, the Local Philosophy variable, and the Religiosity variable, so that the value of R2 is included in the category of a strong model.

Hypothesis Testing

After the evaluation of the outer model and inner model are met, then hypothesis testing is performed. Hypothesis decisions can be known by comparing t-counts with t-tables. If the t-value is higher than the t-table then H0 is rejected. The error level used is 5% so the t-table value obtained is 1.96. The decision of the research hypothesis can be seen in the following table:

Tabel 8. Keputusan Hipotesis Penelitian

Variabel	T Count	P Value	Decision	Koef
Leadership → Nurse Performance	1,978	0,048	H0 refused	0,409
Local Philosophy → Nurse Performance	2,363	0,022	H0 refused	0,230
Religiosity → Nurse Performance	4,007	0,000	H0 refused	0,473

Source : Smart PLS Calculation Result

The following explanation of the results of the hypothesis decision based on the results of the analysis by the PLS method.

1. Hypothesis Testing for Leadership Variables

Based on table 8, the calculated t-value for the relationship between the Leadership variables to the Nurse Performance variable is 1.978, higher than the t-table value (1.96) at an error level of 5%. So the decision that can be taken is to reject H0 (H1 accepted) so it can be concluded that the Leadership variable significantly influences the Nurse Performance variable.

The magnitude of the coefficient of the Leadership variable relationship is positive 0.409 which means that every 1 increase in the value of the Leadership variable increases the value of the Nurse Performance variable by 0.409. This means that in the environment of nurses in the Bima Regional General Hospital, the leadership style of a leader, teamwork between nurses, communication between nurses and communication with leaders, power that is put to good use, and good negotiations between leaders and nurses positively affect performance from the nurse.

This is consistent with the descriptive statistics in table 2 that the age of nurses at the Bima Regency General Hospital is at the age of 25-40, where at that age it is said to be of productive age so that teamwork can be created properly. Likewise on the criteria of length of work, the most length of work for a length of work is over 15 years. This means that the longer working time will provide a lot of experience too so that the leadership attitude can be formed well as well

2. Hypothesis Testing for Local Philosophy Variables

As for the Local Philosophy variable, the t-count value for the relationship between the Local Philosophy variable to the Nurse Performance variable is 2.363, higher than the t-table value (1.96) at the error level of 5%. Then the decision that can be taken is to reject H0 (H1 accepted) so that it can be concluded that the Local Philosophy variable significantly influences the Nurse Performance variable.

The coefficient obtained is 0.230, which means that each increase in 1 value from the Local Philosophy variable increases the value of the Nurse Performance variable by 0.230. This means that in the environment of nurses in the Bima Regional General Hospital, the value of local philosophy of a nurse is enough to influence the performance of the nurse itself. The influence of local philosophy is positive so there is an increase in the influence of local philosophy on nurse performance. The result of the positive significant influence of Local philosophy variable on Nurse Performance variable indicates that cultural values are very attached to the daily lives of nurses in Bima District Hospital. The application of the value of local cultural philosophies such as application to health services, implemented in nursing care, implemented in hospital governance, and implemented in an effort to improve performance.

3. Hypothesis Testing for Religiosity Variables

Based on table 8, the t-value for the relationship between the Religiosity variable to the Nurse Performance variable is 4.007, higher than the t-table value (1.96) at an error level of 5%. So the decision that can be taken is to reject H0 (H1 accepted) so it can be concluded that the Religiosity variable significantly influences the Nurse Performance variable.

The magnitude of the coefficient obtained is 0.473 which means that every 1 increase in the value of the Religiosity variable increases the value of the Nurse Performance variable by 0.473. This means that the religious values of nurses in Bima District Hospital are very influential in the daily lives of nurses. Values such as religious beliefs, religious practices, religious feelings, religious knowledge, and religious effects of nurses affect religious values in general so that they affect nurses' performance significantly and positively.

Based on the coefficient values of the Leadership variable, the Local Philosophy variable, and the Religious variable to the Nurse Performance variable, the relationship model chart can be formed as follows:

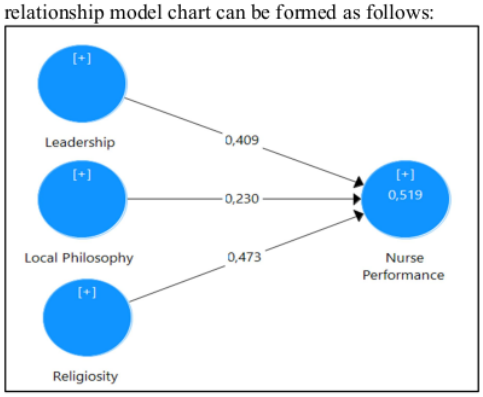

Figure 1. Results of Leadership Modeling and Local Philosophy on Nurse Performance

CONCLUSION

Based on the explanation in the results and discussion section, it can be concluded that :

1. In the environment of nurses in the Bima Regional General Hospital, Leadership, Local Philosophy, and Religiosity have a significant and positive effect on Nurse Performance.
2. The influence of Leadership variable on Nurse Performance variable is 0.409, which means that every 1 increase in value from the Leadership variable increases the value of Nurse Performance variable by 0.409.
3. The influence of Local Philosophy variable on Nurse Performance variable is 0,230, which means that every 1 increase in value from Local Philosophy variable increases the value of Nurse Performance variable by 0,230.
4. The influence of the Religiosity variable on the Nurse Performance variable is 0.473, which means that every 1 increase in the value of the Religiosity variable increases the value of the Nurse Performance variable by 0.473.

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