.

Gambaran Kualitas Kehidupan Kerja Perawat Di Ruang Rawat Inap RSUD Ajibarang

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The most health workers in hospitals are nurses who have important responsibilities in providing health services. In addition to the dominant number of nurses (50% - 60% of the entire workforce), nurses provide services 24 hours a day, for 7 days and have contact with patients. In addition, nurses are also human beings who do not escape the workload both in the institution where they work and in the family or in the community, which indirectly requires control and suitability in their lives. The quality of nurses' work life is the perception or assessment of nurses regarding all dimensions that affect the quality of their work life and are related to their experiences at work and in order to achieve goals. Quantitative descriptive research design with a cross sectional approach. The sample in this study were 67 respondents using simple random sampling technique. Data analysis with univariate analysis. The results showed that the majority of respondents aged 26-35 years with a good quality of work life as many as 30 respondents (44.8%), on the characteristics of gender the majority of respondents were female with a good quality of work life as many as 36 respondents (53.7%), on the characteristics of education the majority of respondents graduated from D3 with a good quality of work life as many as 29 respondents (43.3%), on the characteristics of the working period the majority of respondents with a working period ≥ 5 years with a good quality of work life as many as 33 respondents (49.3%).

INTRODUCTION

Hospital is a health institution in which there is a health service and a place to accommodate sick people to be treated and treated properly (Hutagalung, 2022). In its implementation, the hospital requires adequate human resources to achieve its vision and mission. The resources owned by the hospital include human resources (HR), capital, equipment and equipment, as well as adequate facilities and infrastructure. One aspect that plays a high role in health development in hospitals is the availability of Human Resources (HR) for health workers (Budo *et al*., 2020). This is in accordance with Article 11 of the Law, No. 36 of 2014 concerning Health, states that one of the health workers is nursing personnel. Based on data from the Indonesian Health Workers Council (KTKI) in 2020, there are 633,025 active nurses on an STR basis, and in 2025 cumulatively it is expected to be 696,217 people (Kementrian Kesehatan RI, 2022).

Nurse is someone who has passed nursing education both at home and abroad in accordance with laws and regulations. Nurses are a vital profession in hospitals where this profession provides health services for 24 hours. Law No. 38 of 2014 states that nursing services are a type of professional service where it is an integral part of health services based on nursing science to be addressed to

individuals, families, groups, or communities, both healthy and sick. Most health workers in hospitals are nurses who have important responsibilities in providing health services. Nurses in addition to the dominant number (50% - 60% of the entire workforce), nurses provide services 24 hours a day, for 7 days and have contact with patients (Riset *et al*., 2020). In addition, nurses are also human beings who do not escape the workload both in the institution where they work and in the family or in the community, which indirectly requires control and suitability in their lives. The quality of a nurse's working life is a nurse's perception or assessment of all dimensions that affect the quality of her work life and is related to her experience at work and to achieve goals (Puspita *et al*., 2017).

Quality of nurse working life (*Quality of Nursing Work Life*) is a concept that describes the nurse's perception of meeting needs through work experience in the organization, so that the goals of quality of work life can be aligned with the management function to manage superior human resources and have maximum work productivity and the employee gets personal satisfaction for meeting his needs (Suparto *et al*., 2018). There are four dimensions that affect the quality of nurses' working life, namely the dimensions *work/home life*dimension *work design*dimension *work context*, and dimensions *Work World* (Kou *et al*., 2021). The quality of nurses' work life is a condition where the organization in this case the hospital provides opportunities for employees to be able to develop themselves, both through career paths and training and provides opportunities for employees to participate in making decisions and managing their work lives. A nurse's low quality of working life can lead to feelings of frustration, inadequacy, and feelings of guilt. If sustained, it can cause incidents *turnover* For nurses (Kou *et al*., 2021).

The quality of nurses' working life is social and environmental factors, operational factors, administrative factors and work culture. Organizational culture affects the quality of nurses' working life so that it affects nurse performance and significantly affects nurse job satisfaction so that it affects nurse performance (Pahlawan, 2023). Quality of work life has a significant effect on job satisfaction in hospitals. When hospitals create a conducive quality of work life, nurses' job satisfaction also tends to increase, the quality of work life is conducive and high participation from nurses can increase job satisfaction (Pramana *et al*., 2022). The results of Almalki's (2012) research in Puspita *et al* (2017) One important factor affecting the quality of nurses' working life is society's view of nursing and inadequate salaries. Nurses in Indonesia consist of Civil Servant (PNS) nurses and non-civil servant nurses. In some regional hospitals, some of them are also called Regional Public Service Agency (BLUD) or contract nurses. The level in the nurse's workforce, this affects the basic salary, performance incentives, and some benefits depending on the place where the nurse works.

Other factors that affect the quality of nurses' working life include organizational characteristics, the nature of nursing work, respect for values, human resources, collective relationships, and career development (Oyoh *et al*., 2017). This is in accordance with the opinion Pujiyanto *et al* (2017) which explains that the quality of nurses' working lives is influenced by organizational culture, job characteristics, and efficient quality of life of nurses. The quality of nurses' working lives reflects nurses' perceptions of meeting personal needs in work experience in organizations. Quality of working life is becoming an important issue in healthcare

organizations, having several impacts on nurses as well as nursing services. *Quality of Nursing Work Life* (QNWL) is an important element for the nursing profession that will affect the quality of health services (Primary, 2016).

Banyumas Regency consists of 3 hospitals, 1 of which is a provincial government-owned hospital, namely Margono Soekarjo Hospital and 2 owned by the district government, Ajibarang Hospital is the newest hospital among 3 hospitals in the Banyumas Regency area. Ajibarang Regional General Hospital (RSUD) is a hospital managed by the Regional Government of Banyumas Regency with the main services are outpatient, inpatient, Emergency Department (IGD), intensive care, Comprehensive Neonatal Obstetrics/Emergency Service (PONEK), Central Surgical Installation (IBS), and anesthesia (Amonggoro & Santoso, 2015).

In the results of preliminary studies on the dimensions of working life, some nurses say that to arrange work at work and homework depends on each individual. One of the sources said that he could still rely on his closest people for household needs. The results of a preliminary study on the dimensions of the division of work, nurses said that *cleaning service* is enough to help the work of nurses in the room. However, nurses complain that they still do non-nursing work such as administrative-related matters. While the results of interviews with 8 contract nurses, 6 of them said nurses were not quite satisfied with the existing nurse performance appraisal system. In the world of work dimensions 8-6, nurses said that the wages received were not enough and adequate. In addition, although there are incentives, it does not have a large enough effect on nurses' wage income. Nurse said there was a considerable difference in the receipt of wages for employees with the status of Civil Servants (PNS) and contract employees.

On the other hand, nurses feel that there is still a bad perception of the patient's family / community towards the nursing profession. According to the nurse, the lack of understanding of the community/patient's family towards the duties of health workers affects the community's perspective. The perception of the patient's family in the nursing profession is a profession that takes care of all matters related to patients both in terms of health services and not both from patients coming to the hospital to patients discharged from the hospital. Based on the background above, researchers are interested in conducting research on the Overview of the Quality of Work Life of Nurses in the Inpatient Room of Ajibarang Hospital.

METHODS

This research is a quantitative research, where the final results of the research are numerical data that will be analyzed using statistical analysis with the help of software that has been determined in accordance with the research procedure, the results of the analysis will later be described descriptively according to the actual situation (Sugiyono, 2019). This research approach uses the *Cross sectional* is an approach that studies a dynamic, by means of observation in the field using questionnaires (Notoatmodjo, 2018). In this study, researchers tried to find out about the picture of the quality of work life at Ajibarang Hospital.

The population in this study was all inpatient nurses at Ajibarang Hospital as many as 81 nurses.The sample in this study was nurses working at RSUD Ajibarang Banyumas who met the research criteria. Determination of the sample size to be taken in this study using the formula *Slovin.*

Table 1. Number of Nurses at RSUD Ajibarang Banyumas

No	Room	Number of Nurses
1	Top Souvenirs	12
2	Kepodang Atas	12
3	Cenderawasih Bawah	11
4	Lower pods	11
5	Bottom walnut	11
6	Lower Gull	11
7	Top walnut	11
8	Parrot	2
	Total	**81**

$$n = \frac{N}{1 + N.e^2}$$

$$n = \frac{81}{1 + 81\,(0,05)^2}$$

$$n = \frac{81}{1 + 81\,(0,0025)}$$

$$n = \frac{81}{1 + 0,21}$$

$$n = \frac{81}{1,21} = 66,9 = 67$$

Information:

n = Sample size

N = Large population

e = Selected error rate (e = 0.05)

So, based on the slovin formula used, 67 samples were obtained. After knowing the sample size of 67 nurses, a calculation was made for the inpatient room with random collection proportional to the following formula:

$$n_1 = \left(\frac{n}{N}\right) x\, N_1$$

Information:

n1 = Sample size for each room

n   = Number of nurses in the room

N   = Total population

N1 = Large sample drawn by population

From this formula, the sample division obtained includes:

  a. Upper Paradise   = 10 nurses

$$n1 = \left(\frac{12}{81}\right) x\, 67$$

$$n1 = 9,9 = 10$$

  b. Kepodang Atas   = 10 nurses

$$n1 = \left(\frac{12}{81}\right) x\, 67$$

$$n1 = 9,9 = 10$$

  c. Cenderawasih Bawah   = 9 nurses

$$n1 = \left(\frac{11}{81}\right) x \ 67$$
$$n1 = 9{,}1 = 9$$

d. Lower pods   = 9 nurses

$$n1 = \left(\frac{11}{81}\right) x \ 67$$
$$n1 = 9{,}1 = 9$$

e. Bottom walnut   = 9 nurses

$$n1 = \left(\frac{11}{81}\right) x \ 67$$
$$n1 = 9{,}1 = 9$$

f. Lower Gull   = 9 nurses

$$n1 = \left(\frac{11}{81}\right) x \ 67$$
$$n1 = 9{,}1 = 9$$

g. Top walnut   = 9 nurses

$$n1 = \left(\frac{11}{81}\right) x \ 67$$
$$n1 = 9{,}1 = 9$$

h. Parrot   = 2 nurses

$$n1 = \left(\frac{2}{81}\right) x \ 67$$
$$n1 = 1{,}7 = 2$$

This study researchers used *Simple random sampling, simple random sampling* is the sampling of members from a population that is carried out randomly without regard to the strata present in that population (Sugiyono, 2019). Random sampling in this study was carried out using a lottery technique. The inclusion and exclusion criteria are as follows:

a. Inclusion Criteria
1) Executive nurse who works at RSUD Ajibarang Banyumas with a working period of ≥ 1 year.
2) The executing nurse is in good health and willing to fill out the questionnaire.
b. Exclusion criteria
1) Nurse who works at RSUD Ajibarang Banyumas as the head of the room.
2) Nurses who were on leave from work and nurses who were absent from work at the time of data collection.

This questionnaire is used to examine respondent data such as name (initials), gender, age, last education, length of service of respondents at Ajibarang Hospital. This study, data collection was carried out by distributing questionnaires given to respondents. Questionnaire / questionnaire is a method of data collection that has been carried out by providing several kinds of questions related to research problems. Questionnaire is a method of data collection carried out by giving a set of questions or written statements to respondents to answer (Sugiyono, 2019). This study prioritizes primary data with a focus on distributing questionnaires containing questions about the quality of work life to nurses at Ajibarang Banyumas Hospital. Each answer point on the questionnaire is scored using a scale *Likert.* According to Sugiyono (2019) scale *Likert* Designed to examine how strongly subjects agree or

disagree with statements on a 5-point scale. By scale *Likert,* Then the variables to be measured are translated into variable indicators. Then the indicator is used as a starting point for compiling *Instrument items* which can be a statement or a question. The grid of the quality of work life questionnaire is as follows:

Table 2. Work Life Quality Questionnaire Grid

Variable	Sub Scale	*Favorable*	*Unfavorabel*	Sum
Quality Life Work	*Work home-life*	1,2,3,5	4	5
	Work design	6,9	7,8,10	5
	Work context	11,12,13,14,15	-	5
	Work World	16,17,18,19,20	-	5
	Sum	**16**	**4**	**20**

Source: Permatasari (2018)

The questionnaire on the quality of work life amounted to 20 questions, each of which used the *Likert* scale with 5 levels from very positive to very negative, 20 questions consisting of questions with details, namely 16 questions consisting of questions that are positive or *favorable* and 4 questions are negative or *unfavorable* with the following scale:

Table 3. Likert scale

Choice	Favorable	Unfavorable
SS (Strongly Agree)	5	1
S (Agree)	4	2
RR (Undecided)	3	3
TS (Disagree)	2	4
STS (Strongly Disagree)	1	5

Source: (Notoatmodjo, 2018)

The classification of quality of working life in this questionnaire has 3 categories, namely:

Account $= \dfrac{\text{Skor max+min}}{2}$

$= \dfrac{(100+20)}{2}$

$= \dfrac{120}{2}$

$= 60$

Standard Deviation $= \dfrac{(\text{Skor max} - \text{min})}{2}$

$= \dfrac{(100-20)}{2}$

$= \dfrac{80}{2}$

$= 13,3$

Classification of the quality of working life of nurses, there are 3 categories, namely:

1) Good if x > mean + Standard Deviation

= x > 73.3

Quality of work life is good if the score > 73.3

2) Enough, if mean – Standard Deviation ≤ x ≤ mean + Standard Deviation

= 60-13.3 ≤ x ≤ 60 = 13.3

= 46.7 ≤ x ≤ 73.3

Quality of working life is sufficient if the score is 46.7 – 73.3

3) Less, if mean x < - Standard Deviation

= x < 60 – 73.3

= x < 46.7

Quality of working life is less if the < score is 46.7

a. Validity Test

According to Permatasari research (2018), in 20 questions of the quality of work life questionnaire, validity test results were obtained with a range of 0.371-0.800 where r counted> r table (0.361) then the data was declared valid.

b. Reliability Test

In Permatasari research (2018) the reliability test of the quality of work life questionnaire with Cronbach's Alpha statistical test, and found results of 0.714 which were declared reliable.

Data sources in research can be sourced from primary data and secondary data. The data source that directly provides data to the data collector, the primary data source in this study is the nurse of Ajibarang Hospital. The data obtained from nurses is the nurse's quality of work life score using questionnaires. Sources that do not directly provide data to data collectors secondary data sources in this study are the results of the quality of work life of nurses, as well as information on the number of nurses. The data collection technique used, namely the questionnaire method, is a list that contains a series of questions about a problem or field to be studied. To obtain data, questionnaires are distributed to respondents and then answered by respondents.

Respondents' answers will be assessed and scores will be given to categorize the results of answers from respondents. The *scoring* in this study is:

1) Favorable questions

a) STS (Strongly Disagree) = 1

b) TS (Disagree) = 2

c) RR (Undecided) = 3

d) S (Agree) = 4

e) SS (Strongly Agree) = 5

2) Unfavorable questions

a) STS (Strongly Disagree) = 5

b) TS (Disagree) = 4

c) RR (Undecided) = 3

d) S (Agree) = 2

e) SS (Strongly Agree) = 1

Calculation of the *Quality of Work Life (*QWL) Questionnaire how to add up the results of the scores of 20 questions that have been answered which are then determined according to the scores less (< 46.7), sufficient (46.7-73.3), good (> 73.3).

Coding is a step in coding, which is converting data in the form of letters into data in the form of numbers or numbers. *Coding* in this study, namely:

1) Age

a) 17-25 years (late adolescence) : Code 1

b) 26-35 years (early adulthood) : Code 2

c) 36-45 years (late adult) : Code 3

d) 46-55 years (early elderly)   : Code 4
2)   Jeni Gender
e)   Man   : Code 1
f)   Woman   : Code 2
3)   Education
a)   D3   : Code 1
b)   Ners   : Code 2
4)   Period of Service
a)   < 5 years : Code 1
b)   ≥ 5 years : Code 2
5.   Quality of working life
a)   Less   : Code 1
b)   Enough   : Code 2
c)   Good   : Code 3

The processed data will then be analyzed gradually in accordance with the purpose of the study, namely using univariate analysis, univariate analysis contains the calculation results of the characteristics of respondents and each variable studied using statistical applications on the computer.

RESULTS & DISCUSSION
Results

The results of the study on "Overview of the Quality of Work Life of Nurses in the Inpatient Room of Ajibarang Hospital" with a sample of 67 respondents. The following are the results of univariate analysis including age, gender, education, length of work and quality of working life of nurses in the Inpatient Room of Ajibarang Hospital.

1.   Description of respondents' characteristics based on age, gender, education, length of service of nurses in the Inpatient Room of Ajibarang Hospital

Table 4. Description of respondents' characteristics based on age, gender, education, length of service of nurses in the Inpatient Room of Ajibarang Hospital (n: 67)

Characteristics of Respondents	Frequency	Percentage (%)
Age		
1. 17-25 years	10	14,9
2. 26-35 years	40	59,7
3. 36-45 years	14	20,9
4. 46-55 years	3	4,5
Gender		
1. Man	22	32,8
2. Woman	45	67,2
Education		
1. D3	35	52,2
2. Ners	32	47,8
Period of Service		
1. < 5 years	26	38,8

2. ≥ 5 years	41	61,2
Quality of Work Life 1. Enough 2. Good	 14 53	 20,9 79,1
Total	**67**	**100**

Based on table 4.1 the majority of respondents aged 26-35 years as many as 40 respondents (59.7%), in the education characteristics of the majority of respondents are female as many as 45 respondents (67.2%), in the characteristics of education the majority of respondents graduated from D3 as many as 35 respondents (52.2%), and in the characteristics of the working period the majority of respondents are in the 5-year ≥ category as many as 41 respondents (61.2%), in the quality of work life the majority of respondents are in the good category as many as 53 respondents (79.1%).

2. Description of the quality of nurses' working life based on the characteristics of respondents (age, gender, education, length of work) in the inpatient room of Ajibarang Hospital.

Table 5. Description of the quality of nurses' working life based on the characteristics of respondents (age, gender, education, length of work) in the inpatient room of Ajibarang Hospital (n: 67)

Characteristic	Quality of Work Life				Total	
	Enough		Good			
	n	%	n	%	n	%
Age 1. 17-25 years 2. 26-35 years 3. 36-45 years 4. 46-55 years	 1 10 3 0	 1,5 14,9 4,5 0	 9 30 11 3	 13,4 44,8 16,4 4,5	 **10** **40** **14** **3**	 **14,9** **59,7** **20,9** **4,5**
Gender 1. Man 2. Woman	 5 9	 7,5 13,4	 17 36	 25,4 53,7	 **22** **45**	 **32,8** **67,2**
Education 1. D3 2. Ners	 6 8	 9 11,9	 29 24	 43,3 35,8	 **35** **32**	 **52,2** **47,8**
Period of Service 1. < 5 years 2. ≥ 5 years	 6 8	 9 11,9	 20 33	 29,9 49,3	 **26** **41**	 **38,8** **61,2**
Total	**14**	**20,9**	**53**	**79,1**	**67**	**100**

Based on table 4.2, the majority of respondents aged 26-35 years with good quality of working life as many as 30 respondents (44.8%), on the sex characteristics of the majority of respondents are women with good quality of work life as many as 36 respondents (53.7%), on the educational characteristics of the majority of respondents graduated from D3 with good quality of work life as many as 29 respondents (43.3%), on the characteristics of the working period of the majority of respondents with working period ≥ 5 years with good quality of working life as many as 33 respondents (49.3%).

Discussion

1. **Description of respondents' characteristics based on age, gender, education, length of service of nurses in the Inpatient Room of Ajibarang Hospital**

   The results of this study were obtained by the majority of respondents aged 26-35 years as many as 40 respondents (59.7%). In line with research Muthiah *et al* (2022) With the results of the study, most respondents were in the age category of 26-35 years, namely 35 respondents (61.4%). Age is one of the internal factors that affect nurses. Age is related to performance because increased age will be followed by the process of degeneration of organs so that the ability of organs will decrease. As you age, you will experience a decrease in muscle tone which has an impact on fatigue that affects performance (Beautiful *et al*., 2019).

   In the characteristics of education, the majority of respondents were female as many as 45 respondents (67.2%). In line with research You *et al* (2021) With the results of the study, some respondents were female as many as 117 respondents (72.7%). The nursing profession is a profession that prioritizes humanistic values and caring behavior in health services. The nurse's work environment conceptually does not distinguish between male and female nurses, it's just that the differentiation or difference in the role of nurses is constructed by functional abilities in providing health services. So if you see this, the nursing profession is as much in demand by women compared to men. In carrying out the profession as a nurse is regulated in the ethics of the nursing profession. In the rule, there is nothing to distinguish between male and female nurses (Agustin *et al*., 2022).

   In the characteristics of education, the majority of respondents graduated from D3 as many as 35 respondents (52.2%). This research is in line with research Ezdha (2018) with the results of nursing education research mostly DIII nursing, which is as many as 56 nurses (82.4%). Most of the education levels are DIII Nursing, the majority of nurses in Indonesia are still educated in DIII Nursing (Tinambunan *et al*., 2018).

   In the characteristics of the working period of the majority of respondents were in the ≥ 5 years category as many as 41 respondents (61.2%). This research is in line with research Ezdha (2018) With the results of the study, the majority of nurses were in the ≥ 5 years of work, which was 39 nurses (57.4%). Length of service is how long a person works on each job or position. Working period has a positive influence on performance if the longer a person's working period is more experienced in carrying out their duties (Princess *et al*., 2019).

2. **Description of the quality of nurses' working life based on the characteristics of respondents (age, gender, education, length of work) in the inpatient room of Ajibarang Hospital**

   In this study, the most scores on the QWL questionnaire were found at number 12 (dimension *work context*) and the lowest at number 8 (dimensions *work design*). Dimension *work context* It is the regulation of the work that must be done by the nurse and the impact of the work environment for the nurse and the patient. In addition, things included in the work context are management practices, relationships with colleagues, professional development opportunities, and work environment. Potential sources of dissatisfaction with management practices include lack of participation in decision-making by nursing managers, lack of recognition of job accomplishment, and lack of respect by upper management.

Previous research has shown the impact of opportunities in professional development such as promotion systems, following advanced undergraduate education programs and continuing education on nurses' quality of working life. In terms of work environment, the results of various studies found that nurses were dissatisfied with security with the results that were concerning about safety in the workplace. In addition, inadequate facilities and infrastructure for patient care are associated with the dissatisfaction of nurses and other health professionals. It is a place where nurses work, the impact of the work environment, the relationship between nurses and management, systems in work, benefits obtained that support work. The dimension of work context consists of regulations in the work to be done by nurses and the impact of the work environment for nurses and patients. In addition, things included in the work context are management practices, relationships with colleagues, professional development opportunities, and work environment. Potential sources of dissatisfaction with management practices include lack of participation in decision-making by nursing managers, lack of recognition of job accomplishment, and lack of respect by upper management (You *et al*., 2021).

Factors covered in *work context* includes relationships with colleagues, communication, career development, supervision, rewards, work facilities, and a sense of security while *work design* defined as the composition of the nurse's work and the actual picture done by the nurse. Constructive factors *work design* are satisfaction, workload, autonomy, proportion of work, performance, and *staffing* (Rahmawati, 2018). Respondents revealed that the working relationship and communication between fellow nurses were quite good. A good relationship between fellow nurses is supported by several factors, among others, because most respondents come from the same educational institution so that they have the same ideology and are also relatively the same age, making it easier to interact and work together. Good quality of work, incentives and communication are quite good.

The results of this study found that the majority of respondents aged 26-35 years with good quality of work life as many as 30 respondents (44.8%), in line with the research Muthiah *et al* (2022) With the results of research in the age range of 26-35 years (early adulthood) with the quality of working life of nurses in the good category as many as 22 respondents (62.9%). Mature nurses have high QWL where nurses have the ability to balance work with home life (Muthiah *et al*., 2022). Age is the length of time a person lives which is calculated from birth. Age is seen as having an influence on the qualities possessed by nurses. As you get older, the individual will motivate himself to be better in socio-economic status by working (Siddiqiyah, 2017). This study agrees with research conducted by Hidayayah (2018) entitled "Overview *Quality Of Work Life* (QWL) to Nurses in One of the Hospitals in Surakarta" according to him age greatly affects the performance of nurses who are good at the age of early adulthood where they have the nature of wisdom, decision making, responsibility, mindset, emotional control and good tolerance as they age.

The researchers assume that older nurses have better QWL than those under 25 because they feel a lot of delays in their daily routine work tasks, compared to those over 26 years old where they have a work context dimensionSeen from being productive at work and able to balance their personal and work needs compared to

younger nurses. Older nurses also have mental readiness, greater insight and considerable work experience on the job.

In sex characteristics, the majority of respondents were women with good quality of work life as many as 36 respondents (53.7%), as well as research Muthiah *et al* (2022) which shows that the majority of nurses with a good quality of working life are more female (93%) than male nurses (7%). According to (Nuari, 2016) Gender does not determine a nurse's QWL, whereas both female nurses and male nurses will have good QWL if they have optimal performance and health services. According to researchers, female nurses have a dominating quality of working life because in terms of the nurse population at Ajibarang Hospital, the majority are women,

In the characteristics of education, the majority of respondents graduated from D3 with good quality of work life as many as 29 respondents (43.3%), in contrast to the study Kaluku *et al* (2019) with the results of the study, the majority of education nurses graduated from S1 Ners with good quality of work life as many as 174 respondents (60.6%). The characteristics of the education level are learning processes to form attitudes and behaviors given formally that are organized and tiered. The level of education influences the individual in responding to something. The higher the level of education, the more rational, open and creative in accepting change. In addition, with a high level of education, the insight possessed is broader so as to increase motivation in working so that the quality of work life will be better (Hidayah, 2018). According to researchers, the difference in the results of this study is because at Ajibarang Hospital, the majority of nurses have a D3 education level.

In the characteristics of the working period of the majority of respondents with a working period of ≥ 5 years with a good quality of work life as many as 33 respondents (49.3%), in line with research Muthiah *et al* (2022) With the results of the study of respondents who had a working period of ≥ 5 years with the quality of working life of nurses in the good category as many as 26 respondents. Nurses with longer tenure or work experience have a tendency to work satisfaction, work motivation and work quality higher than employees who have a new tenure, in other words job satisfaction, work motivation and work quality will increase with the length of a nurse's tenure. The longer the working period, the better the understanding of duties and responsibilities (Bekti, 2018). This study agrees with the research conducted Widayati (2020) who researched about "*Quality Of Nursing Work Life* (QNWL) to nurses" according to him one's experience in work makes a person more confident in carrying out his job. The length of time a nurse works is directly proportional to the family ties that are increasingly closely established with other work teams so as to foster a quality work life, where the maximum working period to be able to be confident and feel a large family bond is around 3-4 years of work.

The experience of working from a long time working makes nurses accustomed to their work so they do not feel the changes that occur in work. Nurses with long tenure experience are more with their jobs, salaries and supervision and make them enjoy their jobs more (Kaluku *et al*., 2019). According to researchers, the longer the working period of a nurse, the more experience in the work environment, family spirit, feeling satisfied with work, and confident. So it will

have an impact on the QWL that they have will be good. Years of service also determine a nurse's future career.

CONCLUSION

The majority of respondents aged 26-35 years as many as 40 respondents (59.7%), in the characteristics of education the majority of respondents are female as many as 45 respondents (67.2%), in the characteristics of education the majority of respondents graduated from D3 as many as 35 respondents (52.2%), and in the characteristics of the working period the majority of respondents are in the category of ≥ 5 years as many as 41 respondents (61.2%), in the quality of work life the majority of respondents are in the good category as many as 53 respondents (79.1%). The majority of respondents aged 26-35 years with good working life quality as many as 30 respondents (44.8%), on gender characteristics the majority of respondents are female with good working life quality as many as 36 respondents (53.7%), on education characteristics the majority of D3 graduate respondents with good working life quality as many as 29 respondents (43.3%), on the characteristics of working period the majority of respondents with ≥ 5 years of service with quality good working life as many as 33 respondents (49.3%).

CONFLICT OF INTEREST

Concerning the research, authorship, and publication of this paper, the author(s) reported no potential conflicts of interest.

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