Original Research

The Determinants Factors of Personal Mastery Among Clinical Nurse Practitioners in Indonesia

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ABSTRACT

Introduction: Human resources of nursing who have low personal mastery have an impact on the quality and productivity of nursing services. Several factors have been studied to be associated with the low personal mastery of nurses. The purpose of this study was to analyze the factors that's influencing personal mastery improvement of clinical nurse practitioners in a hospital.

Methods: This study applied cross sectional design with 120 respondents through cluster sampling technique in one of Surabaya Hospital. Data were collected using the personal mastery factors questionnaire that has been tested for validity and reliability. The variable included training and development, leadership, attitudes, competencies, motivation, personal values, job design and personal mastery of nurses. Data were analyzed using multiple linear regression.

Results: The result showed that competence, personal values and job design factors partially influenced the personal mastery (p = 0.006), (p = 0.001), (p = 0.005). Training and development, leadership, attitude and motivation have not influenced on personal mastery (p = 0.871), (p = 0.352), (p = 0.900), (p = 0.312). Simultaneously development and training, leadership, attitudes, competencies, motivation, personal values and job design factors was influenced the personal mastery of nurses' (p = 0.000). The influenced independent's variable on personal mastery of clinical nurse practitioners is 58.1%.

Conclusions: Personal mastery of clinical nurse practitioners was increased by improving the competence, strengthening of the personal values and design a good job. Further studies are warrant to examine other factors that can improve nurses' personal mastery such as organizational culture, reward systems that affect the performance of clinical nurse practitioners.

1. INTRODUCTION

Human resources of nursing who have a low personal mastery impact on the quality and productivity of nursing services (Dulyasook, 2023). Nurses will tend to carry out routine nursing services and do not have a personal vision and motivation to develop themselves in the service. Low personal vision, lack of nurse creativity, ability to see reality objectively, self-awareness and self-regulation of nurses in nursing

services are indicators of low nurses' personal mastery (Yao et al., 2021). Nursing personal mastery is low due to organizational factors and individual nurse factors. Organizational factors are the lack of leadership roles and the development and training of personal mastery in hospitals. Individual factors of nurses are lack of awareness, attitudes, motivation and intention of nurses in improving nursing services in hospitals (Yimer et al., 2024).

Personal mastery as a discipline of growth and learning from individual nurses through organizational support to improve personal vision, enhance creativity in carrying out services and always put the truth in service. Individual characteristics such as (competence, motivation and personal values) and organizational characteristics (leadership, training and development) improve nursing services through mediation of personal mastery (Labrague et al., 2021; Lee et al., 2021). Professional development of nurses can be enhanced through training and organizational development. Developing and training is essential for personal mastery employees. Training and development are believed to be important for increasing personal mastery. Training and development carried out effectively, will enhance the professional development of nurses. Supporting leadership empowerment impacts the readiness of individuals to change within the organization. The improvement of personal mastery is based on increasing individual competence (Mascio et al., 2022; Saad et al., 2024).

Increasing competence is influenced by personal mastery with a clear dimension of personal vision, managing pressure properly, commitment to work, self-confidence and having a high awareness to improve competence. Attitude helps us understand how people understand the issues and the process of care and determine what is in think is important, good, relevant and appropriate (El-Feky, 2020; Wu et al., 2021). Poor nurses' attitudes, which result in poor patient care, can severely damage the health system's ability to provide quality care and improve patient outcomes. Based on preliminary data conducted by researchers from 10 nurses interviewed, there were 6 nurses who had good personal mastery, after further review it turned out that nurses with good personal mastery showed more good performance and competency, compared to nurses with low personal mastery (Ham & Tak, 2022; Sisybania et al., 2021).

Personal value such as freedom, altruism, and the truth will form a sense of personal achievement as well as the values of the priority will be a personal achievement. Therefore, all nurses need to identify and clarify personal values, beliefs and assumptions about basic truths to enhance personal mastery. Nurse values are directly related to the waitress nursing as well as increasing awareness of the role of the professional nurse (Aziz et al., 2021). Work design to enhance the knowledge and act as a motivator for employees to seek a variety of knowledge in completing their tasks. The results of other studies show a significant and positive relationship between perceptions of job design levels and perceptions of employee performance levels. Based on the problems, the aim of this study was to analyze the factors that influenced the increase in clinical nurse practitioner' personal mastery in hospitals..

2. MATERIALS AND METHODS

A descriptive analysis with cross sectional design and the populations were nurses at one hospital in East Nusa Tenggara, Indonesia. The criteria of respondents of this study were nurses with education minimum of nursing diplomas and minimum work period of one year. Selection of respondents through probability sampling type of cluster sampling with a sample size of 120 respondents. The reason researchers used cluster sampling was because researchers wanted to evaluate all existing rooms, so that nurses in each room were represented. Variables in this study included development and training, leadership, attitude, competence, motivation, personal values, job design and personal mastery of nurses. Data were collected from November 2019 using a questionnaire from each sub variable. Development and training instruments are questionnaires developed by Forssen M and Haho P in 2001 which are translated according to the research topic, leadership instruments using the Leadership Behavior Inventory (LBI) questionnaire developed by Howard Rudd Tom Kent Carrie A. Blair on 2009. The attitude used the questionnaire by Nursalam on 2017, nurse's competence used questionnaire developed by Spreitzer, motivation of nurses used questionnaire developed by Siebold GL, and personal value used questionnaire developed by Kahle. The job design used questionnaire developed by the researcher. Measurement of personal mastery used questionnaire from Senge and developed by researchers. All questionnaire that has been tested the validity with the results of R table >0.444 as valid for the all questionnaire and reliability test using Cronbach alpha with a value of between 0.650 to 0.997. Inferential analysis using the classic assumption test of multiple linear regression.

This study has been approved by the ethics committee of the Faculty of Nursing at the University of Airlangga Surabaya with proof certificate number 1797- KEPK dated October 21, 2019.

3 RESULT

The majority of respondents were female nurses, aged 21-40 years and length of working 11-20 years with level of education for nurse was nursing diplomas (Table 1). The development and training of nurses 25.8% were still in the sufficient category. Likewise, there was still a negative perception of nurses towards leadership in organizations of 15.8%. All nurses had the attitude that positive followed with high competence. However, inversely proportional to the motivation of nurses found that most are still in the moderate category. Likewise with the personal

Table 1. Characteristics of respondents

Characteristics of respondents	Σ	%
Gender		
Male	18	15
Female	102	85
Age		
40-60 years old	22	18.3
21-40 years old	98	81.7
Education		
Nursing diplomas	97	80.8
D4 / Nurse	23	19.2
S2 Nursing	120	100
Length of working		
1-5 years	27	22.5
6-10 years	41	34.2
11-20 years	48	40
> 20 years old	4	3,3

Table 2. Distribution of variables research

Independent variable	n	%	Category
Development and training	87	72.5	Good
	31	25.8	Enough
	2	1.7	Less
Leadership	101	84.2	Positive
	19	15.8	Negative
Attitude	120	100	Positive
	0	0	Negative
Competence	64	53.3	High
	56	46.7	Medium
	0	0	Low
Motivation	27	22.5	High
	85	70.8	Medium
	8	6.7	Low
Personal value	57	47.5	Value oriented
	35	29.2	Being driven by values
	28	23.3	Looking safe
	0	0	Disappointed
Job design	74	61.7	Good
	46	38.3	Enough
	0	0	Less
Dependent variable			
Personal mastery nurse	96	80	High
	24	20	Medium
	0	0	Low

value characteristics of nurses found 23.3% of nurses were still looking for safety in work. Job design characteristic is included in both categories. Personal mastery nurses in hospitals were mostly in the high category (Table 2).

Based on the research there were no factors of development and training, leadership, attitude, competence, motivation, personal values and job design, the personal mastery score was 3,618. The coefficient values of all variables were positive which means that each addition of score one for development and training, leadership, attitude, competence, motivation, personal value and job design will increase personal mastery by (0.012), (0.062), (0.145), (0.270), (0.092), (0.302) and (0.189). There was a significance value of the competency variable ($p = 0.006$), personal value ($p = 0.001$) and job design ($p = 0.005$) < (0.05), so there was an influence of these variables on the nurses' personal mastery. Test the effect of partially found the value of t count for variable competence, personal values and design work (2.831) (3.554) (2.875)> t table (2.091), so that it can be concluded that in partial effect on the nurse's personal mastery. There was a significance value of the development and training variables ($p = 0.871$), leadership ($p = 0.352$),

Table 3. Hypothesis result of Variable

Variable	Regression		Coefficient standard (β)	T value	F value	Sig	Ket
	Coefficient of determination (r²)	A constant (B)					
Constant		3,618					
Organizational Characteristics (X1)							
Development and training (X1.1)	0.581	0.020	0.012	.163	22,143	0.871	Not influence
Leadership (X1.2)	0.581	0.007	0.062	0.935	22,143	.352	Not influence
Individual Characteristics (X2)							
Attitude (X2.1)	0.581	0.320	0.145	1,710	22,143	0.090	Not influence
Competence (X2.2)	0.581	0.430	0.270	2,831	22,143	0.006	Influence
Motivation (X2.3)	0.581	.108	0.092	1,016	22,143	0.312	Not influence
Personal value (X2.4)	0.581	0.260	0.302	3,554	22,143	.001	Influence
Job design (X3)	0.581	0.315	.189	2,875	22,143	0.005	Influence

Dependent Variable: Personal mastery

attitude ($p = 0.090$) and motivation ($p = 0.312$)> (0.05) then there was no effect of these variables on the nurses' personal mastery. Test the effect of partially found the value of t count for variable development and training, leadership, attitude, and motivation (0.163) (0.935) (1.710) (1.016)> t table (2.091), so it can be concluded that partial variables are no effect on personal mastery nurses (Table 3).

4   DISCUSSION

Development and training have no effect on nurses ' personal mastery in hospitals. Personal mastery is a continuous discipline to clarify and deepen personal vision, focus on energy, develop patience and see reality more objectively (Bratajaya, 2021). Personal mastery develops from a combination of personal attributes such as personal vision and competence, as well as training and development. The main focus of personal mastery is individuals not on organizational characteristics which include development and training. Training and development are short-term education using systematic procedures to improve nurse competence (Mellor et al., 2022). Training and development impact on the readiness of individuals to change in the organization (Muafi et al., 2019). Training can improve team work attitude, a working knowledge of a team of nurses and capacity building of human resources who are skilled and competent.

Development and training only give an understanding would be the responsibility of the nurse in the role of her and build trust yourself nurses in service. A strong training and development program ensure that employees have consistent experience and background knowledge. Capacity building of skilled and competent human resources can be done through training and development

(Piotrowska et al., 2022). Developing and training without their feedback and failure to improve personal vision clarification nurses will have an impact on the sustainability of the development of self- nurses. Personal mastery is a person's personal development where the process is continuous, always looking for ways to continue to develop, trying to learn new things, make changes, satisfaction of personal and professional life (Fradelos et al., 2022). Training and development do not directly affect the increase in nurses' personal mastery. Training and development will improve nurses 'personal mastery through increasing the capacity of individual nurses namely nurses' knowledge, abilities and competencies (Nursalam et al., 2020).

Leadership has no effect on nurses' personal mastery in hospitals. According to Senge effective leadership in the influence by personal mastery. Leadership that implements personal mastery in organizations will provide examples of positive behavior and interpersonal relationships that affect themselves and their employees. This statement is supported by study of Retna that personal mastery plays an important role in increasing leadership potential and providing change in leadership. Personal mastery influences creative and innovative leadership. Personal mastery plays a role in influencing leaders to clarify the vision of employees and increase employee commitment to develop the organization (Berhanu et al., 2021; Diao et al., 2024).

Personal Mastery not only play a role in improving professional leaders alone but also will affect the personal lives of leaders. With personal mastery the leader will bring progress to the company and success in his personal life. Previous scholar explained that leadership is not significantly related to personal mastery but is related to systems

thinking, team learning and mental models (Tong et al., 2021). Leadership that has a personal mastery will develop the ideas of his employees for organizational development (Tong et al., 2021). Personal mastery allows a leader to develop characteristics that will help them deal with difficult situations and pressures. Personal mastery also helps leaders to understand and deal with the weaknesses and strengths of team members. There are many leaders who testify that undergoing a personal mastery program has enabled them to maintain balance in their lives and at the same time shape them to be effective leaders (Beni et al., 2020). Negative perception of the leadership of the ward head illustrates that the head of the room does not yet have a personal mastery in service. It can be assumed that organizational characteristics such as leadership have no influence with personal mastery, but instead personal mastery allows the head of the room to develop the vision and creativity of nurses in hospital services.

Attitude has no effect on nurses' personal mastery in hospitals. The attitude was reaction to the response 's someone who is still closed to a stimulus or object. Attitude is the mental preparedness learned and determine the likely formed from that emotional or affective and cognitive feeling that consists of perception, belief process based on rational thinking and logic (Nursalam, 2018). Personal mastery with a dimension of self-regulation refers to thoughts that are produced themselves from feelings, planned actions and cycles tailored to the achievement of personal goals. Personal mastery with the dimension of self-regulation resources influences nurses ' attitudes that will shape nurses' behavior (Priyantini & Ayatulloh, 2023). Nurse's attitude toward professionalism is shaped by work experience, individual empowerment and self-regulation of nurses (Dulyasook, 2023). Good self-regulation is needed to improve nurses' attitudes. Poor nurses' attitudes, which result in poor patient care, can damage the health system's ability to provide quality care and improve patient outcomes (Lee et al., 2021).

Nurse competence influences nurses' personal mastery in hospitals. Personal mastery abilities are based on competence (Labrague et al., 2021). Competencies include emotional intelligence, interpersonal skills and active thinking systems, contributing to personal mastery and modified knowledge. Competence is a process of professional development of nurses (Wu et al., 2021). This statement is supported by the study that competence increases one's personal mastery in service. Competence has a great impact on personal mastery in providing nursing care. Personal mastery is formed marked by the growth of individual skills in understanding strengths and weaknesses, increasing intellectual, emotional and social competence as skills to revise personal visions at work (Ham & Tak, 2022; Sisybania et al., 2021). Nurses who have high competence will continuously learn to improve their personal mastery abilities. Nursing competence is a core ability needed to fulfill nursing responsibilities.

Motivation does not affect nurses' personal mastery in hospitals. Motivation associated with behavioral direction, the strength of the response s after people pursues a specific action and survival behavior. Motivation can arise due to the drive for needs such as feelings of self-worth, opportunity, prestige, feeling of security, and a sense of achievement. Personal mastery influences motivation (Aziz et al., 2021). Motivation has several goals and objectives but no real goals. Whereas personal mastery focuses on one personal goal, deepening the goal and achieving that goal. Individuals with high personal mastery will be self-motivated. Motivation influenced by the culture of the organization, employees may be willing to commit to the personal and professional development, which will produce individual performance better and better improve individual satisfaction.

Personal values affect the personal mastery of nurses in hospitals. One of the characteristics of individuals who enhance personal mastery is personal value. Personal values are values that are internalized from the society or culture in which a person lives. People need social values to feel accepted, and they need personal values to have a sense of individuality. Personal value such as freedom, altruism, and the truth will form a sense of personal achievement as well as the values of the priority will be a personal achievement. Nurses need to identify and clarify the value of personal, beliefs and assumptions about the basic truths to improve personal mastery. According to lists positive personal values such as internal individual values (e.g. self-esteem and self- fulfillment), external values (e.g. security and sense of belonging) and internal interpersonal values (e.g. warm relationships with others, pleasure and enjoyment of life). These values are an important component of personal mastery. Personal values are directly related to the waitress nursing as well as increasing awareness of the role of the professional nurse (Mellor et al., 2022; Piotrowska et al., 2022).

Job design influences nurses' personal mastery in hospitals. Work design to enhance the knowledge and act as a motivator for employees to seek a variety of knowledge in completing their tasks (Ahmad Al Azzam, 2018). The results of other studies show a significant and positive relationship between perceptions of job design levels and perceptions of employee performance levels (Diao et al., 2024). Research showed that positive and significant relationship between job characteristics with internal motivation and job characteristics as predictors of internal motivation. Kopelman explains that one of the characteristics of work that is job design will regulate the assignment of individual work in achieving organizational goals and needs (Nursalam, 2018). Job design is one of the most positive and significant efforts to design work in increasing employee work motivation. Perspective of work design can be used to increase the motivation of nurses in performing nursing services. Well job

designed will increase motivation, productivity and job satisfaction. Further research is conducted to identify other factors that influence nurses' personal mastery improvement such as organizational culture, reward systems and individual learning.

The limitations of the study found by the researcher are that the study could not produce a significant relationship between all factors and personal mastery, further research is needed on other factors, so that better results can be found. In addition, more samples are needed and come from several hospitals to further strengthen the results of the factor analysis.

5 CONCLUSION

Clinical nurses practitioner's personal mastery can be improved through increasing nurses' competencies with regard to their duties and responsibilities, increasing the nurse's personal value to his personal vision as a nurse in service and maintaining a good work design for nurses. Nurse training and development, leadership, attitude and motivation must be continuously developed to improve the nurses' personal mastery, because this factors do not related with the personal mastery among nurses.

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