



## Innovation Performance of Nursing: Competence, Motivation and Organizational Commitment as Mediating

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### Abstract

**Background:** Attention to open innovation is more important for future research. The impact of the globalization era in health care means that nursing staff are required to be competitive and more professional with the use of increasingly developing technology. Innovation performance is an important determinant of organizational success.

**Objective:** The substantial for this study is analysing key factors which effect the relationship between competence, motivation to innovate the performance of nursing with organizational commitment as mediating.

**Method:** This research adopted cross-sectional research. The total respondents in this study was 60 nurses at Jasmine Room RSST Klaten with a census. This study used a hypothesis for applying path analysis, validity reliability for questioner, Statistic-test, and also coefficient determination with correlation.

**Results:** Path 1 show that competence (Co) and motivation (Mt) have positive significance on organizational commitment (Z). Path 2 shows that competence (Co), motivation (Mt), and organizational commitment (Z) have positive significance. Highlighting the findings, nurse behaviour in innovation is based on competence. The support of hospital organizational commitment has an impact on strengthening nurses' ability in innovation behaviour. Improving the behaviour of nursing personnel in innovating will realize public health needs, and the need for understanding in healthy behaviour. In nursing staff, both those at a young or old age who will retire, competence becomes a factor that cannot be ruled out by funds to innovate. For the motivation, it does not have much meaning for nursing personnel who are old and about to retire.

**Conclusion:** The spotlight on findings shows the behaviour of nurses in innovation is based on competence. The support of hospital organizational commitment has the impact of strengthening the ability of nurses in innovation behaviour. Increasing the behaviour of nursing personnel in innovating will realize public health needs, and the need for understanding healthy behaviour.

**Keywords:** Innovation performance, multicultural competence, motivation, organizational commitment.

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## 1. Introduction

An organization needs knowledgeable people. Knowledge has become an important consideration for organizational success (Berraies, 2014). According to (Greer & Egan, 2019), human and structural diversity can optimize knowledge management and improve organizational outcomes. Knowledge becomes a very valuable asset in organizations (Torabi & El-Den, 2017). Knowledge sharing behaviour is important for creativity (H Aulawi, 2018). Knowledge and experience is required for smart innovation (Lee, 2018).

In globalization, attention to unlocking innovation is more important. The implementation of open innovation will suggest some future research (Zhao, Sun, & Xu, 2016). Open Innovation (OI) is more meaningful for the present or future (Bigliardi, Ferraro, Filippelli, & Galati, 2020). OI means the acceleration of the organization's internal innovation knowledge (Torabi & El-Den, 2017). OI has the opportunity to develop institutions in a sustainable manner (Turoń, 2022).

An organization needs performance appraisal. Evaluation is used for maturation and innovation sustainability performance (Salvador, Sjøberg, Jørgensen, Schmidt-Kallesøe, & Larsen, 2023; Trivellato, Martini, & Cavenago, 2021). Performance is a systematic management process (Apak, Gümüş, Öner, & Gümüş, 2016). Performance evaluation can lead the innovation process (Dereli, 2015; Şimşit, Vayvay, & Öztürk, 2014). Innovation performance is an important determinant of organizational success (Rylková and Chobotová, 2014).

According to Kaynak and Bülbül, performance appraisal is a process consisting of feedback from each appraisal that influences the determination of hand performance at work, and establishing an ideal development plan for the hand (Apak et al., 2016). The performance of innovation follows the innovative conditioning of the company. The performance of innovation (inventors) stands until the end of the discovery process (Rylková & Chobotová, 2014). In an association, fair performance appraisals are essential to ensure that no victim will be harmed or intentionally harmed (Choon & Embi, 2012). Assessments are generally used substantially for two main purposes; development and evaluation. Assessments are given to identify crimes, make decisive judgments against workers, and to encourage growth in associations (Ibeogu & Ozturen, 2015).

Performance evaluation in hospitals is a reference for improving human resources. Nurses have an important role within health services (Hallaran, Edge, Almost, & Tregunno, 2023). Evaluation of nurses' performance in hospitals needs to be supported by human resources to find out the best service results (Huo, Zhao, Li, & Li, 2022; Saryadi & Arini, 2019). Nurses are the spearhead in nursing care in hospital organizations. The success of the organization is due precisely to employee involvement (Kaliannan & Adjovu, 2015). Nursing care is an integral part of health care (Bogar, Nursalam, & Dewi, 2013). Nurses are required to understand the world, base decision-making on self-understanding and patients (Salvage & White, 2020).

The role of the nurse has an important role in patient management. Nurses are one of the most creative and quick-thinking people in health care. Nurses are often the brains behind many health and technological developments in hospitals. Nurses are a creative group who are always trying to make life easier for their patients, but often aren't realized. Institution as a hospital that is very competent for health services. According to Law No. 36/2009, health services must improve public health, accountability, transparency, responsiveness and be error-free.

Innovation performance appraisals for nurses rarely focus on developing nurses' skills and abilities. A grading system for nurses is needed to treat patients for quality health care. Performance appraisals of innovations in hospitals are useful in measuring organizational effectiveness and efficiency. The existence of this evaluation ensures better work performance, bonding in communication, and activating employee potential.

Nursing innovation performance appraisal is an updated evaluation of nurse performance. Through good governance, a hospital continues to improve the quality of service. Together with the Hospital Accreditation Committee, hospitals in Indonesia always make improvements, and self-development

must always improve the quality of patient care. Organizations must forge ahead to develop innovation and capability (Berraies, 2014; Siegenthaler, 2022; Trivellato et al., 2021). The organization as a hospital must move forward to continuously develop innovation and their ability to serve patients.

Performance assessment of nursing innovation refers to the improvement of nurses in hospitals. GCG improvement. Strengthening employees in hospitals (nurses) is an effective method in utilizing and improving abilities (Ganjinia, Gilaninia, Poorali, & Sharami, 2013). Performance is a factor that can determine success in an organization (Singh Narban, Kumar Singh Narban, & Pratap Singh Narban, 2016). Nursing performance appraisal innovations can be influenced by competence (ability), motivation and commitment.

Various studies conclude that performance is influenced by competence (Adam & Kamase, 2019; Runi, Ramli, Nujum, Kalla, & South, 2017; Saryadi & Rahayu, 2018). Hospitals have challenges in developing innovation competencies. Research related to innovative competencies at the level of competitiveness in enterprises is carried out (Srivastava, Sultan, & Chashti, 2017). (Srivastava et al., 2017) said that in strategic decision making, innovation competence is a secondary consideration after competitiveness on cost and price.

An organization can grow and thrive if it is supported by multicultural elements. Multicultural competence is adopted by work experience in organizations and when applied in large groups and small groups (Suharto, Suyanto, & Hendri, 2019; Vincent & Torres, 2015). Multicultural abilities are forms of awareness, knowledge, and skills of individuals possessed (Hladik & Jadama, 2016). Multicultural competence directly influences organizational commitment (Suharto et al., 2019).

Motivate the results of the relevance of nursing work. Various studies show that motivation is significant to performance (Dwi Hartono, 2017; Forson, Ofosu-Dwamena, Opoku, & Adjavon, 2021; Habba, Modding, Bima, & Bijang, 2017; Hersona & Sidharta, 2017). Dapu states that motivation is not important for performance (Dapu, 2015). Related research increasing worker motivation by comparing two new probabilistic elements (Camilleri, Dankova, Ortiz, & Neelim, 2023).

The commitment of the organization is assumed as mediation, for the improvement of the innovation performance of the nursing staff. Organizational commitment has implications for employees and organizations (Zaraket, Garios, & Malek, 2018). Research (Than, Le, & Le, 2023) links high commitment in HR management practices with innovation capabilities. The hospital's innovation ability will reach the community who become patients if there is interaction between the hospital and the community. This interaction will be realized through the communication process (Hartono & Sudarwan, 2020).

For health nursing care, synergy is needed that supports patient services. The state integrates traditional medicine with modern approaches documented in the development of timely treatment methods (Liu et al., 2022). Therefore, it is necessary to increase patient participation and benefit acceptance. Research (van Niekerk, Manderson, & Balabanova, 2021) shows that the application of social innovation is needed to improve health systems and practices that encourage patient participation and beneficiaries of health programs. In the development of strategies that can be sustainable (Purwanto, Sarjito, & Wijayanto, 2023), it is important to identify internal and external factors to formulate strategies. According to (Fajrin & Budiani, 2020), strategy accuracy can maintain sustainability. Innovative responses very important in sustainable business practices (Sholihah, Naufal, & Ariescy, 2023). While (Wati, Lestariadi, Supriyadi, & Safii, 2023) carry out strategies in conducting sustainability analysis and development with the MICMAC approach. The MICMAC method serves in the development of sustainability strategies for systematic problem solving.

## 2. Literature Review

### 2.1 Innovation Performance

Performance is said to figure lead to quality and quantity. Performance is said to something done. Performance also can be associated with the achievement of an individual or group. Performance is to satisfy a requirement during a style to satisfy the predetermined criteria, and therefore the realization ratio of the target as a requirement of the duty (Meyer & Allen, 1991). The performance appraisal system is used because each individual employee has their own behavior at work (Aggarwal, Sundar, & Thakur, 2013). The perception of each nurse of fairness in performance appraisal is subjective and varies

between rates. Fair performance appraisal in a corporation is important to make sure that no victims are going to be harmed or at risk of being purposely being harmed (Choon & Embi, 2012). Innovation performance is an ability to transform innovation inputs into outputs or outcomes. According to (Zizlavsky, 2016) innovation performance is understood as the ability to convert innovation inputs into outputs. The innovation performance of nursing personnel in this study is an assessment of the performance of nursing personnel who are sustainable and for better ways of working and innovation in nursing care.

## 2.2 *Competence*

Competence is needed in capability. Competence is the ability to do something. According to (Adam & Kamase, 2019), competence is expected to improve the performance and results of work. Competencies as characteristics of the knowledge, skills, and behavioural abilities that a person needs to carry out tasks or activities more optimally. In health care by a nurse, competence can provide quality and the best performance and results nursing. Competence is related to knowledge, skill and having quality individuals to achieve, success.

## 2.3 *Motivation*

Motivation is something that drives individual in behaviour achieving goals (Nazilah, Misnaniarti, & Windusari, 2020). Motivation is related to achieving or satisfying goals. The five dimensions from Maslow's needs: physiological, safety, social, esteem, self-actualization. Motivation makes a person have strong behavior at work.

## 2.4 *Organizational Commitment*

Commitment with the organization as perception and beliefs in which a person accepts the values, vision, mission, objectives, and goals. Commitment relates to the involvement of individuals who are the strength of identifying their involvement in the organization. The three-components from the Meyer and Allen model (Rizany et al., 2018).

# 3. **Method**

## 3.1. *Sample / Participants*

A census was utilized in this study at Jasmine room at RSST Klaten, with a total of 60 nursing staff. Cross-sectional used in this study with Organizational Commitment Questionnaire (OCQ). intellectual, physical, human relations, work quantity, work quality, knowledge, cooperation, initiative, and personal integrity for competence nurse. Maslow's theory for motivation indicator, and PPNI (assessment; nursing diagnoses; planning, implementation; and evaluation) for innovation performance.

## 3.2. *Instrument(s)*

The researcher used the OCQ (Meyer & Allen, 1991) to examine organizational commitment with dimensions affective, continuance, and normative. The questionnaire is a 19-item for competence nurses with intellectual, physical, human relations, work quantity, work quality, knowledge, cooperation, initiative, and personal integrity. The questionnaire is a 10-item looking at motivation for working nurses, focussing on five dimensions from Maslow. The questionnaire for performance appraisal with nursing practice standards have been described by PPNI. This study uses the Likert scale.

## 3.3. *Data collection procedures*

The Health and Ethics Committee with the R&D Committee of RSST Klaten approved the study protocol.

### 3.4. Data analysis

Analyzed this study using SPSS version 25 with path analysis (Jonathan Sarwono, 2022). Pearson r coefficient correlations ANOVA and independent t-test were used. Validity and reliability test used Corrected Item Total Correlation (Ghozali & Latan, 2015).

$$\text{Path 1. } Z = \beta_1 C_o + \beta_2 M_t + e_1$$

$$\text{Path 2. } \text{Perf} = \beta_3 C_o + \beta_4 M_t + \beta_5 Z + e_2$$

Note:

Z = Organizational commitment

Perf = Performance appraisal of nursing

Co = Competence

Mt = Motivation

$\beta_1, \beta_2 \dots \beta_5$  = Path coefficient

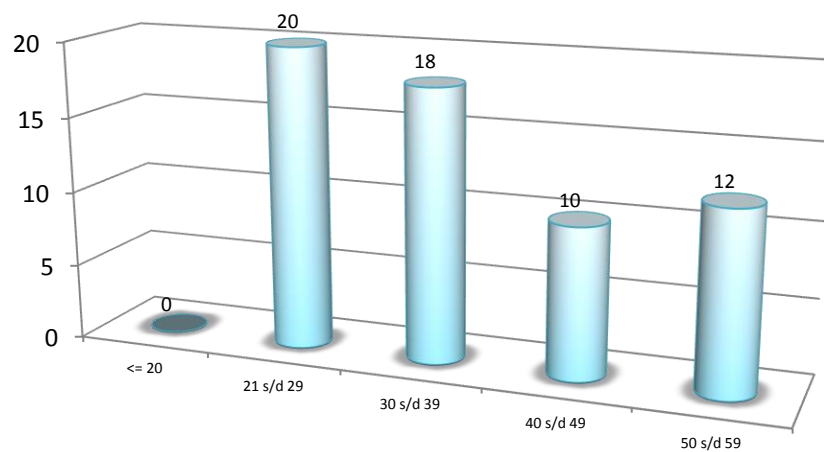
$e_1, e_2$  = error factors

## 4. Results

### 4.1 Descriptive Respondents

Descriptive respondents are shown in the following figure.

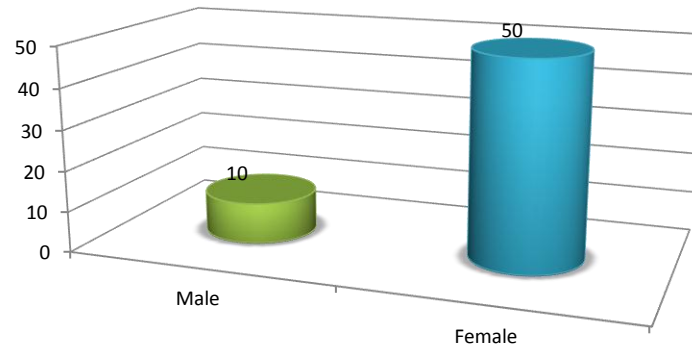
#### Age of the respondents



**Figure 1.** Respondents of Age

Figure 1 shows that the age of the respondents from this study were  $\leq 20 = 0$  person ; 21 s/d 29 = 20 persons; 30 s/d 39 = 18 persons; 40 s/d 49 = 10 persons; and 50 s/d 59 = 12 persons.

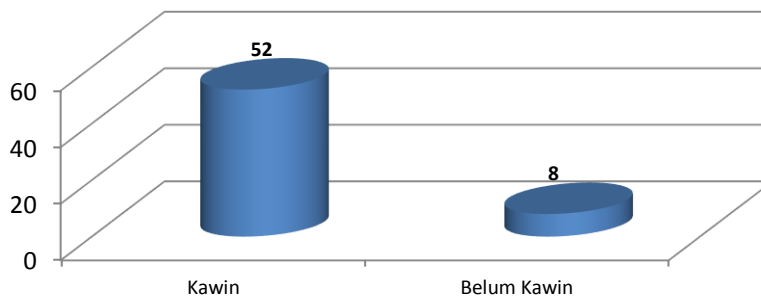
**Gender of the respondents**



**Figure 2.** Gender of the respondents

Gender of the respondents (respondents of sex) from this study were male = 10 persons and female = 50 persons.

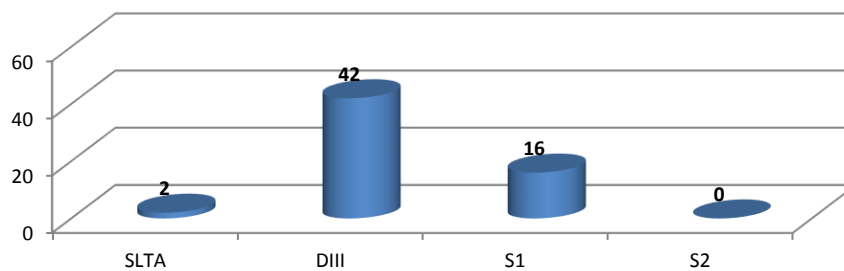
**Status of the respondents**



**Figure 3.** Status of the respondents

Status of the respondents from this study were Kawin = 52 persons and Belum Kawin = 8 persons.

**Educational qualifications of the respondents**



**Figure 4.** Educational qualifications of the respondents

The respondents of education from this study were SLTA = 2 persons; D-III=42 persons; S1 = 16 persons; and S2 = 0. male teachers to increase with grade level, whereas the percentage of female teachers decreases from preschool to high school.

### 4.2 Validity and Reliability Test

Validity test in this study are shown in figure 5

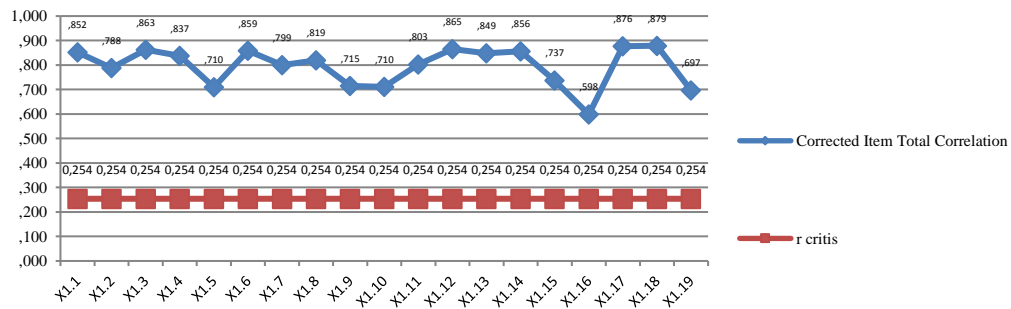


Figure 5. Validity Test of Competence

From figure 5, value *Corrected Item Total Correlation* of item questionnaire from competence variable show X1.1= 0,852; X1.2= 0,788; X1.3= 0,863; X1.4= 0,837; X1.5= 0,710; X1.6= 0,859; X1.7= 0,799; X1.8= 0,819; X1.9= 0,715; X1.10= 0,710; X1.11= 0,803; X1.12= 0,865; X1.13= 0,849; X1.14= 0,856; X1.15= 0,737; X1.16= 0,598; X1.17= 0,876; X1.18= 0,879; X1.19= 0,697 more than  $r\text{-table}(60) = 0,254$ ; means all items of competence variable is valid.

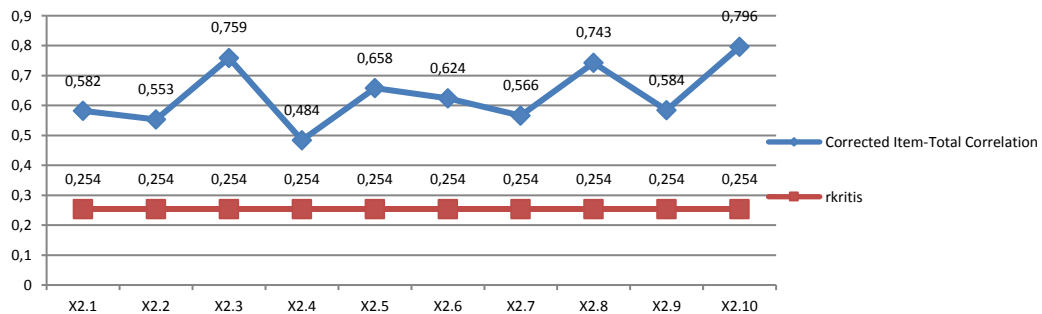


Figure 6. Validity Test of Motivation

From figure 6, value *Corrected Item Total Correlation* of item questionnaire from motivation variable show X2.1=0,582; X2.2=0,553; X2.3=0,759; X2.4=0,484; X2.5=0,658; X2.6=0,624; X2.7=0,566;

X2.8= 0,743; X2.9=0,584; X2.10=0,796 more than r-table(60) =2,54; means all items questionnaire of motivation variable is valid.

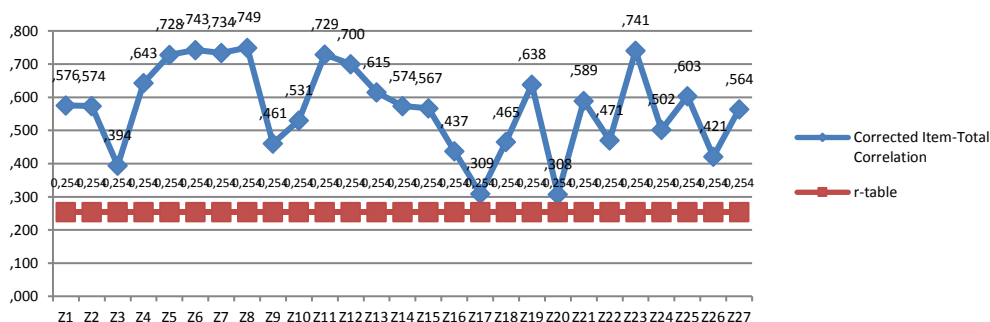


Figure 7. Validity Test of Organizational Commitment

From figure 7, value *Corrected Item Total Correlation* of item questionnaire from organizational commitment variable show Z1= 0,576; Z2= 0,574; Z3= 0,394; Z4= 0,643; Z5= 0,728; Z6= 0,743; Z7= 0,734; Z8= 0,749; Z9= 0,461; Z10 = ,531; Z11= 0,729; Z12= 0,700; Z13= 0,615; Z14= 0,574; Z15= 0,567; Z16= 0,437; Z17= 0,309; Z18= 0,465; Z19= 0,638; Z20= 0,308; Z21= 0,589; Z22= 0,471; Z23= 0,741; Z24= 0,502; Z25= 0,603; Z26= 0,421; Z27= 0,564; more than r-table(60) =2,54; means all items of organizational commitment variable is valid.

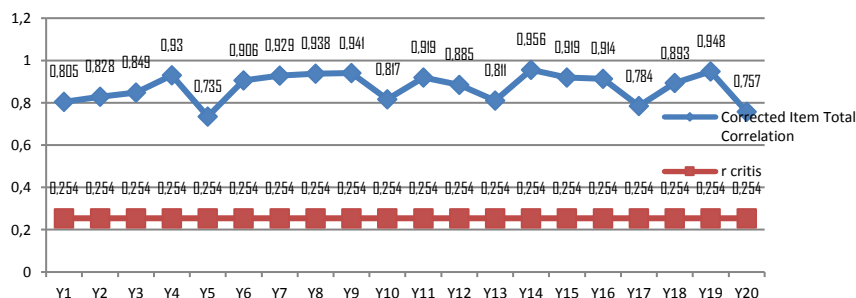
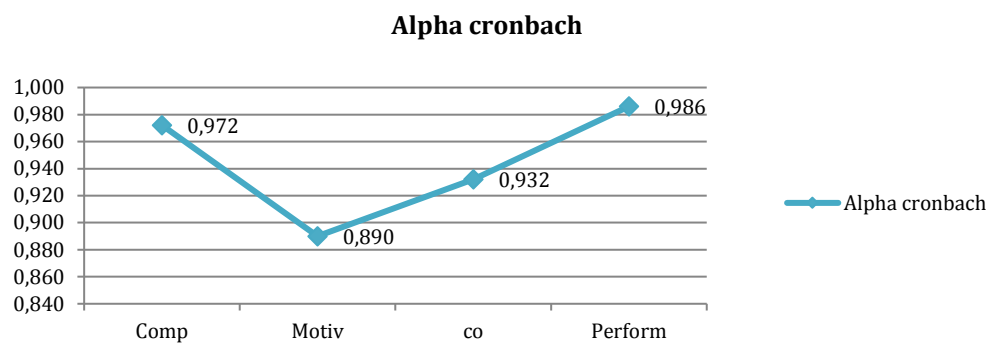


Figure 8. Validity Test of Performance Appraisal of Nursing

From figure 8, value *Corrected Item Total Correlation* of item questionnaire from performance of nursing variable show Y1= 0,805; Y2= 0,828; Y3= 0,849; Y4= 0,930; Y5= 0,735; Y6= 0,906; Y7= 0,929; Y8= 0,938; Y9= 0,941; Y10= 0,817; Y11= 0,919; Y12= 0,885; Y13= 0,811; Y14= 0,956; Y15= 0,919; Y16= 0,914; Y17= 0,784; Y18= 0,893; Y19= 0,948; Y20= 0,757; more than r-table(60) =2,54. Means items questionnaire performance appraisal of nursing variable is valid.



## Reliability test



**Figure 9.** Reliability test

Figur 9 shows that the value of cronbach alpha of competence ( $X_1$ ) = 0,972; motivation ( $X_2$ ) = 0,890; organizational commitment ( $Z$ ) = 0,932; and performance appraisal of nursing = 0,986 more than 0,60 means the all variables is in this study were reliable.

### 4.3 Path Analysis & $t$ -test

**Table 1.** Result of path analysis 1 &  $t$  value

Var	B	Beta	t	Sig.
Comp ( $X_1$ )	,609	,455	3,705	,000
Mot ( $X_2$ )	,701	,295	2,400	,020

a. Dependent Variable: OC ( $Z$ )

Source: Data analysis, 2019

The table-1 has revealed the results from path analysis 1 and the relationship between competence ( $X_1$ ) and motivation ( $X_2$ ) on organizational commitment ( $Z$ ) in the jasmine room RSST Klaten.

The regression path 1:

$$Z = 0,455 Co + 0,295 Mt + e1$$

$t$ -value of competence = 3,705 with value significance of competence ( $Co$ ) =  $0,000 < \alpha = 0,05$ ; means competence ( $Co$ ) has positive significance on organizational commitment ( $Z$ ) and  $t$ -value of motivation = 2,400 with value significance of motivation ( $Mt$ ) =  $0,020 < \alpha = 0,05$ ; means motivation ( $Mt$ ) has positive significance on organizational commitment ( $Z$ ).

**Table 2.** Result of path analysis 2 & t value

Model	Coefficients <sup>a</sup>					
	B	Unstandardized		Standardized	t	Sig.
		Std. Error	Coefficients	Coefficients		
1 (Constant)	8,013	7,675			1,044	,301
Comp (X1)	,406	,122		,351	3,323	,002
Mot (X2)	,529	,204		,258	2,591	,012
OC (Z)	,303	,088		,351	3,437	,001

a. Dependent Variable: Perf (Y)

Source: Data analysis, 2019

Result of path 2 presents that the relationship between competence (X<sub>1</sub>), motivation (X<sub>2</sub>) and organizational commitment (Z) on performance appraisal of nursing (Y) in the jasmine room RSST Klaten has positive significance

### The regression path 2:

$$Y = 0,351 X_1 + 0,258 X_2 + 0,351 Z + e_1$$

t-value of competence = 3,323 with value significance of competence (X<sub>1</sub>) = 0,002 < α = 0,05; means competence (X<sub>1</sub>) has positive significance on performance appraisal of nursing (Y), t-value of motivation = 2,591 with value significance of motivation (X<sub>2</sub>) = 0,012 < α = 0,05; means motivation (X<sub>2</sub>) has positive significance on performance appraisal of nursing (Y). and t-value of organizational commitment = 3,437 with value significance of organizational commitment (Z) = 0,001 < α = 0,05; means organizational commitment (Z) has positive significance on performance appraisal of nursing (Y).

#### 4.4 F-test

**Table 3.** Result F-test

Model	F	Sig.
1 Regression	39,872	,000 <sup>b</sup>

Table-3 show that competence (X<sub>1</sub>), motivation (X<sub>2</sub>) and organizational commitment (Z) together have effect positive significance on performance appraisal of nursing (Y) with value of significance = 0,000.

#### 4.5 Coefficient Determination

**Table 4.** Coefficient Determination Path 1

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	,675 <sup>a</sup>	,455	,436	10,89329

a. Predictors: (Constant), Mot (X<sub>2</sub>), Comp (X<sub>1</sub>)

$$e_1 = \sqrt{1 - 0,455} = \sqrt{0,545} = 0,7382$$

**Table 5.** Coefficient Determination Path 2

<b>Model Summary</b>				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	,825 <sup>a</sup>	,681	,664	7,25769

a. Predictors: (Constant), KO (Z), Mot (X<sub>2</sub>), Comp (X<sub>1</sub>)

$$e_2 = \sqrt{1 - 0,681} = \sqrt{0,319} = 0,5648$$

$$R^2_{tot} = 1 - (e_1^2 \times e_2^2) = 1 - (0,545 \times 0,319) = 1 - 0,1739 = 0,8261$$

From Table 4 and Table 5 obtained magnitude value Total R<sup>2</sup>= 0,8261, means are performance appraisal of nursing.

The value Total R square is 0,8261. Intentions that variables competence, motivation and organizational commitment influence on performance appraisal of nursing at Jasmine room combined was 82,61%, while the remaining 7,39 influenced by other variables.

#### 4.6 Direct and Indirect Effect

**Table 6.** Direct and Indirect Effect

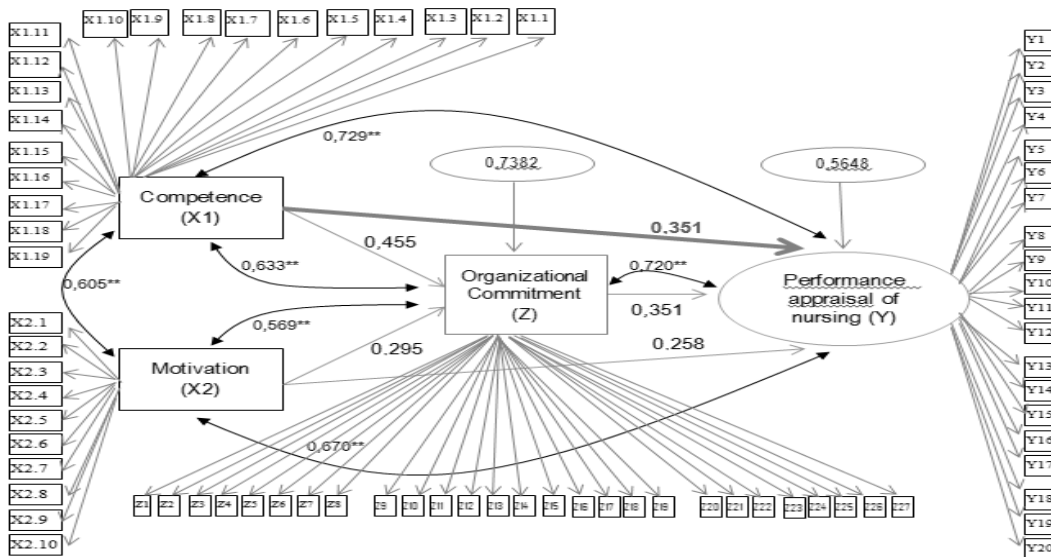
Hubungan variabel	Effect		Total Effect
	Direct	Indirect	
X1 → Y	P <sub>3</sub> = 0,351		
X2 → Y	P <sub>4</sub> = 0,258		
X1 → Z → Y		P <sub>1</sub> x P <sub>5</sub> = 0,455 x 0,351 = 0,160	P <sub>3</sub> + (P <sub>1</sub> x P <sub>5</sub> ) = 0,351 + 0,160 = 0,511
X2 → Z → Y		P <sub>2</sub> x P <sub>5</sub> = 0,295 x 0,351 = 0,104	P <sub>4</sub> + (P <sub>2</sub> x P <sub>5</sub> ) = 0,258 + 0,10 = 0,362

Table 6 shows that direct effect competence to performance appraisal of nursing (0,351) more than indirect effect competence to performance appraisal of nursing through organizational commitment (0,160), so effectively used direct effect. Direct effect motivation to performance appraisal of nursing (0,258) more than indirect effect motivation to performance appraisal of nursing through organizational commitment (0,104), so effectively used direct effect. Hence, direct effect competence variable on performance appraisal of nursing is effectively and dominant for increasing performance appraisal of nursing in the jasmine room at RSST Klaten.

**Table 7. Correlation Test**

		Comp (X <sub>1</sub> )	Mot (X <sub>2</sub> )	CO (Z)	Perf (Y)
Comp (X <sub>1</sub> )	Pearson Correlation	1	,605**	,633**	,729**
	Sig. (2-tailed)		,000	,000	,000
	N	60	60	60	60
Mot (X <sub>2</sub> )	Pearson Correlation	,605**	1	,569**	,670**
	Sig. (2-tailed)	,000		,000	,000
	N	60	60	60	60
OC (Z)	Pearson Correlation	,633**	,569**	1	,720**
	Sig. (2-tailed)	,000	,000		,000
	N	60	60	60	60
Perf (Y)	Pearson Correlation	,729**	,670**	,720**	1
	Sig. (2-tailed)	,000	,000	,000	
	N	60	60	60	60

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



**Figure 10. Direct and Indirect Effect**

#### 4.7 Sobel Test

Test of the effect on competence on performance appraisal of nursing with organizational commitment as a mediator

$$\begin{aligned} Sab &= \sqrt{b^2 S_a^2 + a^2 S_b^2 + S_a^2 S_b^2} \\ &= \sqrt{(0,303)^2 (0,164)^2 + (0,609)^2 (0,088)^2 + (0,164)^2 (0,088)^2} \\ &= \sqrt{0,002469 + 0,002872 + 0,00208} \\ &= \sqrt{0,00555} \\ &= 0,074496 \end{aligned}$$

$$t - test = \frac{ab}{Sab} = \frac{0,609 \times 0,303}{0,074496} = \frac{0,184527}{0,074496} = 2,477$$

Value t-test much  $2,477 > t_{60(\text{table})}=2,000$ . Organizational commitment as role mediating affects competence on performance appraisal of nursing at RSST Klaten. Therefore, organizational commitment was a partial mediator between competence and performance appraisal of nursing.

Test of the effects on motivation on performance appraisal of nursing with organizational commitment as a mediating

$$\begin{aligned} Sab &= \sqrt{(0,303)^2 (0,292)^2 + (0,701)^2 (0,088)^2 + (0,292)^2 (0,088)^2} \\ &= \sqrt{0,007828 + 0,003805 + 0,000660} \\ &= \sqrt{0,012294} \\ &= 0,110877 \end{aligned}$$

$$t - test = \frac{ab}{Sab} = \frac{0,701 \times 0,303}{0,110877} = \frac{0,212403}{0,110877} = 1,915664$$

Value t-test much  $1,915664 < t_{60(\text{tabel})}=2,000$ ; organizational commitment do not as mediating affect motivation on performance at RSST Klaten. Therefore, organizational commitment was a partial do not mediator between motivation and performance appraisal of nursing.

## 5 Discussion

The substantial for this study is analysing key factors which affect the relationship between competence and motivation to innovate performance in nursing, with the mediating role of organizational commitment.

Table 1 presents in path analysis 1 about t-test, that 1) competence affects positive significance on organizational commitment. The ability of nurses to provide attention in care will be very useful and can be done continuously, and will ensure good behaviour in the organization. This will be able to form organizational commitment that will improve service to patients. This result was relevant to a study from (Saryadi & Arini, 2022; Suharto et al., 2019). Commitment behaviour in the organization can be affected by the competence of the human resources that sustain the organization concerned. The findings reject the study (Gani, Nur, Mallongi, & Rusjdin, 2018) which shows a negative influence is not significant. 2) motivation affects positive significance on organizational commitment. These results are as per the study (Gani et al., 2018). Nursing staff are the spearhead of the service system in hospitals and the largest component of human resources (Cheruiyot & Brysiewicz, 2019). Self-motivation of a nurse who has awareness in behaving for the benefit of the organization of a hospital makes a force in the formation of commitment in the hospital concerned.

Result of path 2 shows that Co (competence), Mt (motivation) and Z (organizational commitment) have a positive significance on performance appraisal of nursing (Perf) at RSST Klaten. The several studies that were relevant in this research show that the competence of nurses and motivation have a positive significance on performance (Adam & Kamase, 2019; Arifin, Troena, & Djumahir, 2014; Gani et al., 2018; Runi, Ramli, Nujum, & Kalla, 2017; Sriekaningsih & Setyadi, 2015). In Papua, a sample of 117 respondents found pedagogical competence behaviour in high school teacher may set up high school teacher performance improvement in Jayapura City, Papua. However, (Adam & Kamase, 2019) disagree, because they found an insignificant influence despite the positive nature between competence on performance by using 150 respondents by means of multistage sampling, mentioning an insignificant relationship the positive effect of competence and not significantly to the performance of the employees. (Cheruiyot & Brysiewicz, 2019) conveyed the existence of research recommendations found that the continuous encouragement from nursing staff in patients will accelerate the rehabilitation process of healing patient diseases. Borgutee's reputation theory states that reputation will be determined in the development of employees within their competence sustain the findings of the influence of competence on this performance.

The self-motivation of a nurse who has awareness in behaving for the benefit of the organization of a hospital makes a force in the formation of commitment in the hospital concerned (Saryadi & Sundari, 2023).

Employees are valuable human resources and need good management to contribute optimally. The achievement of the goals of the organization is related to the performance of all employees. Human resource management will effectively be able to contribute to the achievement of the goals of the organization. Therefore, it is necessary to evaluate the performance of employees.

Direct effect competence on performance appraisal of nursing in Table 2 or Table-6 with coefficient regression much 0,351 compares more than indirect effect competence on performance appraisal of nursing through organizational commitment much 0,160 shown on table 6, therefore direct effect competence on performance appraisal of nursing more effectively compares competence on performance appraisal of nursing with intervening variable organizational commitment. Direct effect motivation on performance appraisal of nursing in table 2 or table-6 with coefficient regression much 0,258 compares more than indirect effect motivation on performance appraisal of nursing through organizational commitment much 0,104 shown on table 6, therefore direct effect motivation on performance appraisal of nursing more effectively compare motivation on performance appraisal of nursing through organizational commitment.

Figure 10 shows that direct effect competence on performance appraisal of nursing at Jasmine room RSST Klaten is most effective and efficiently increasing to performance appraisal of nursing at Jasmine room RSST Klaten. This result is relevant to the other study who states that organizational commitment positive significance on performance (Adam & Kamase, 2019; Amiroso, 2015; Muhammad Arifin, 2015; Runi, Ramli, Nujum, & Kalla, 2017; Saryadi & Arini, 2022; Saryadi & Rahayu, 2019).

According to Apak et.al, there are three purposes using performance appraisal: Managerial Purposes, Development Oriented Purposes and Educational Purposes (Apak et al., 2016). The mediating role of organizational commitment on performance appraisal of nursing showed at Sobel test, that organizational commitment is significant as mediating on performance nursing in the relationship between competence to performance appraisal of nursing, but insignificance as mediating in relationship motivation variable on performance appraisal of nursing at Jasmine room RSST Klaten. It means appraisal to be actuated significantly for development nurses, so increasing healthcare for the patient. Nurse competence is a key component in nursing care (Faraji, Karimi, Mohsen, & Janatolmakan, 2019).

With implementation and the organizational commitment for a nurse, the hospital can increase performance of nurses so that nursing can be effective and efficient in working to handle the patient for quality healthcare. It's relevant if a nurse conducted high competence for health care and self-increasing capabilities. Innovation for long-term sustainability (Sholihah et al., 2023). Linkage of Innovation Performance Of Nursing, can be through the MICMAC approach. This approach is used to understand the positioning of the organization in the benchmark of increasing continuous innovation. The MICMAC strategy serves as continuous systematic problem solving (Wati et al., 2023). The innovative response of nursing personnel in nursing care is important as nursing service efforts are better and continue. This is due to the dynamic wants and needs of patients and patients' families in fulfilling increasingly quality health. In sustainability business practices, innovative responses are very important

(Sholihah et al., 2023). Similarly, in health services, innovative responses are needed for better and long-term sustainable public health improvement.

A high level of health care system accuracy strategy (high accuracy) will have a sustainability impact. Nursing personnel need an increasingly established and creative competence to reach the dynamics of higher community (patient) desires. This is conveyed (Fajrin & Budiani, 2020) that high accuracy in strategy will maintain sustainability. Steps for the development of sustainable innovation can be taken with innovation implementation strategies, which can be viewed from the side of internal factors and also external factors, both in nursing resources and also in hospitals. It is like a recommendation (Purwanto et al., 2023) that steps are needed in identifying factors from within the hospital or external factors. Research results (van Niekerk et al., 2021) suggest the need for health beneficiary participation. The participation of the user community or recipients of nursing care, in the era of dynamism will foster innovation in the performance of nurses. The synergy of nursing personnel with beneficiaries will be able to improve better services and sustainability by following the needs of the community and the hospital's ability to provide care. In order to develop nursing care innovation, an approach that integrates traditional methods mixed with the needs of today, an increasingly modern era is needed. The results of the development can be applied in treatment and how to deal with patients which is done in an integrated and timely manner according to patient needs. Research results (Liu et al., 2022) indicates the integration of traditional with modern. Hospitals as places of nursing care services require commitment in the organization that is integrated with the competencies of hospitals, especially nursing personnel. In addition to their competencies, nurses' motivation in the implementation and acceptance of existing innovations is very important to improve the performance of sustainable nurse innovation.

When highlighting the findings, nurse behaviour in innovation is based on competence. The support of hospital organizational commitment has an impact on strengthening nurses' ability in innovation behaviour. Improving the behaviour of nursing personnel in innovating will realize public health needs and the need for understanding in healthy behaviour. In nursing staff at a young or old age who will retire, competence becomes a factor that cannot be ruled out by funds to innovate. For the motivation of nursing personnel, it does not have much meaning for nursing personnel who are old and about to retire.

## 6 Conclusions

Results: 1) Competence and motivation have a significant effect on organizational commitment; 2) Competence and motivation influence and significant on nursing performance directly and indirectly through organizational commitment. 3) Competency variables have a dominant effect on nursing performance appraisal. 4) Organizational commitment is a mediating role between competencies on nursing performance appraisals but does not mediate roles between motivations on nursing performance appraisals.

Age conditions were correlated with the characteristics of nurses, where the elderly were not affected by the motivation given. However, high professionalism behaviour makes a nurse still have high competence which has an impact on performance.

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