

## THE EFFECT OF CLINICAL COMPETENCE AND WORKLOAD ON THE QUALITY OF NURSING CARE AND NURSE PERFORMANCE IN HOSPITALS: A LITERATURE REVIEW

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### ABSTRACT

*Service quality is a fundamental indicator in evaluating hospital performance. Nurses have frequent interaction with patients, so the quality of nursing care is the primary determinant of hospital service quality. This study aims to identify the influence of clinical competence and workload on the quality of nursing care and nurse performance in hospitals through literature analysis. The design uses a literature review approach guided by the PRISMA procedure. Articles are collected using search engines such as PubMed, ScienceDirect, and Google Scholar. The articles used were published from 2018-2025 that met the inclusion and exclusion criteria (n=14). Based on the collected articles, high workload is associated with low self-efficacy, fatigue, and decreased nursing competence, which negatively affect nurses' quality and performance. A competent nurse manager effectively improves the nurses' work environment, reduces missed care, and improves the quality of care. Some studies report the positive effects of clinical competence and motivation on nursing performance. In contrast, the effects of workload vary; some studies have not found a significant direct impact due to adaptive factors (n=3). Excessive workload increases emotional fatigue, which mediates a decrease in the quality of care. Clinical competence and workload are the main factors affecting the quality of nursing care and nurses' performance in hospitals. High clinical competence optimizes task execution and patient recovery; conversely, excessive workload leads to chronic fatigue, which then reduces the quality of care and nursing performance.*

**Keywords:** *Clinical Competence, Workload, Quality of Nursing Care, Nurse Performance, Nurse Burnout*

### INTRODUCTION

Hospitals provide comprehensive medical services, including outpatient, inpatient, and emergency care [1]. Hospitals must offer quality, safe, comprehensive health services as the main referral facility. This quality relies heavily on human resources. In 2023, the Ministry of Health of the Republic of Indonesia in 2023 show there are more than 2 million health workers in Indonesia. Nursing personnel dominate, accounting for 44.3%, with 364,254 nurses on duty in hospitals [2].

Service quality is a key indicator in evaluating hospital performance as a public health service provider. In addition to reflecting health worker competence, these qualities directly strengthen patient safety, community satisfaction, and hospital credibility. Nurses play a vital role because they interact the most with patients. Thus, the quality of nursing care largely determines the overall quality of hospital services [3].

One of the internal factors affecting nursing service quality and performance is nurse workload. In human resource management, a nurse's workload is the volume of tasks to complete within certain time and resource limits. This factor is crucial because it affects service quality, job satisfaction, and the performance of medical personnel. Excessive workload, if unmanaged, risks causing fatigue (burnout) and reducing overall service quality [4]. Nurse quality and performance depend on their competencies. Nursing personnel must be qualified, perform duties according to Standard Operating Procedures (SOP), and show dedication. Competencies from education and experience—including cognition, skills, and values—are crucial for effective and quality performance [5].

The relationship between workload and competence is reciprocal. Individuals with high competence capacity tend to complete tasks expeditiously and accurately, which in turn reduces perceived workload. Conversely, workload intensity exceeding the optimal threshold can degrade performance, whereas a proportional workload serves as a stimulus for competence to escalate [6].

This study aims to examine how clinical competence and workload affect nursing care quality and nurse performance. Using a literature review of fourteen journals, the study identifies influencing factors and highlights research gaps in this area. Through the integration of national and international journals, this study allows readers to compare various points of intersection and differences between the literature.

## **RESEARCH METHODS**

This study uses a literature review design with a thematic narrative synthesis approach. The data sources in this study were obtained through searches on international databases, including PubMed, Google Scholar and ScienceDirect. Several keywords guided the literature search, such as 'nurse', 'clinical competence', 'workload', 'quality of care', and 'performance'. Search engines used the conjunctions AND or OR to limit searches. For national journals, the keywords used were 'perawat', 'kompetensi klinis', 'beban kerja', 'mutu pelayanan', and 'kinerja'. The conjunctions DAN or ATAU were applied.

The article selection process is carried out in stages, starting with title and abstract screening to assess topic suitability, followed by full-text review of articles that meet the initial criteria. Articles that pass the final selection process are then subjected to in-depth analysis. This procedure aligns with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines, which are recommended to improve the transparency and reproducibility of literature-based research [7].

The inclusion criteria for the studies analyzed included articles in English or Indonesian published in the range of 2018–2025 with a focus on the influence of clinical competence and workload on the quality of nursing care and nurse performance in hospitals. The exclusion criteria include opinion articles, editorials, non-scientific reports, and research conducted outside the context of the hospital organization.

PRISMA Flow Summary:

1. Records identified through database (n=849)
2. Records removed before screening (n=437)
3. Records screened by title and abstract (n=412)
4. Records sought for retrieval (n=93)
5. Full-text assessed for eligibility (n=22)
6. Articles included in final review (n=14)
7. Articles excluded due to irrelevance and incomplete data (n=8)

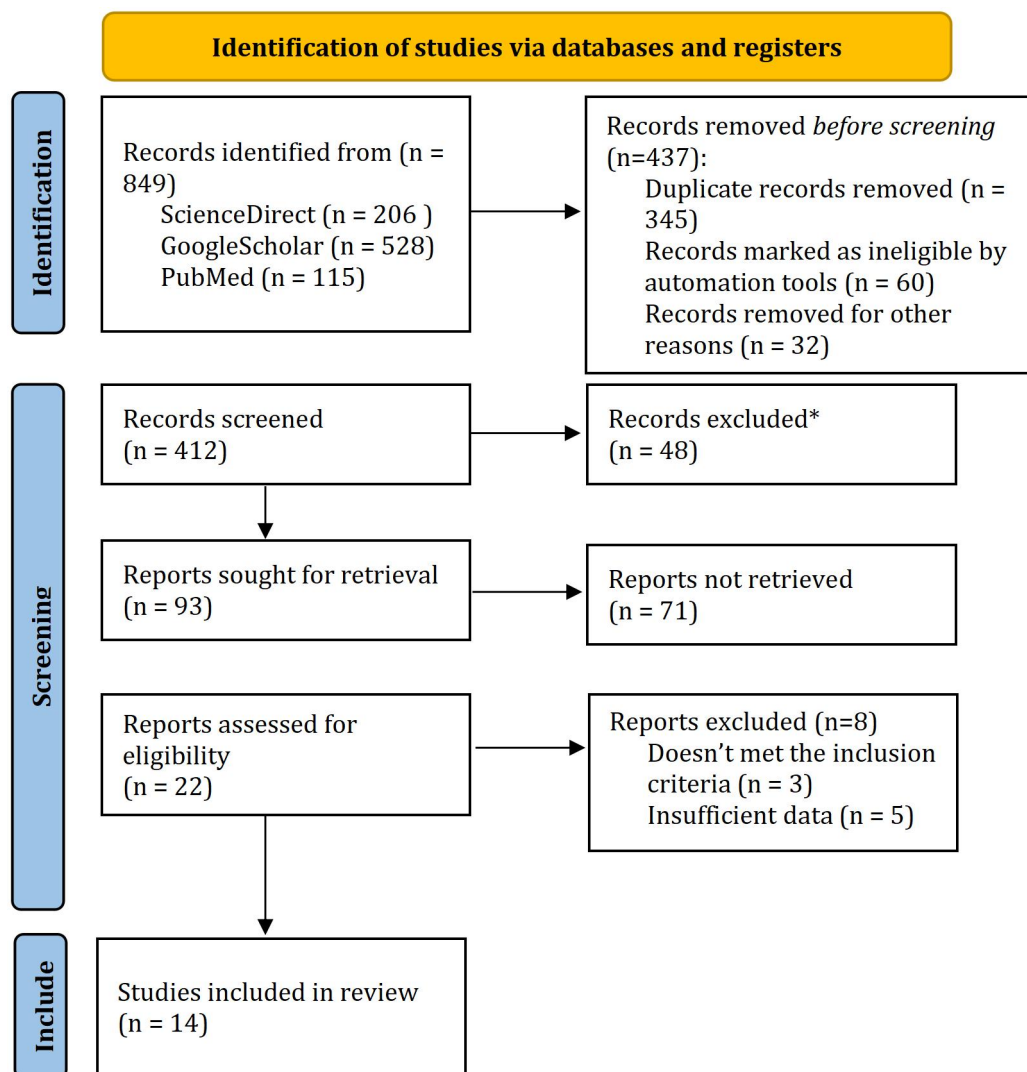


Figure 1. PRISMA Flow Chart

## RESULTS AND DISCUSSION

In this study, the author examined 14 articles concerning how clinical competence and workload impact the quality of nursing care and nurse performance in hospitals. The articles utilized various research methods. Twelve journals applied *cross-sectional* designs to analyze data at a specific point. The remaining articles used different approaches: one adopted a three-phase hybrid

method (theoretical, fieldwork, and analytical phase) [8]; another implemented a *scoping review* to identify literature from multiple sources [9]; and one conducted a *literature review* by collecting relevant articles.

Table 1. Selected Articles

No	Author, Journal, Year	Title	Study Design	Result
1	Hendy <i>et al.</i> ; BMC Nursing; 2025	Bridging the gap: the mediating role of self efficacy in the impact of workload on core competencies among pediatric nurses	Descriptive cross-sectional study; SEM; questionnaire (n=198)	High workload reduces nurses' self-efficacy, negatively impacting nurses' performance and core competencies (p<0.001). In contrast, high self-efficacy was associated with better performance in core nursing skills (p<0.001).
2	Warshawsky <i>et al.</i> ; J Nurs Manag; 2022	The influence of nurse manager competency on practice environment, missed nursing care, and patient care quality: A cross-sectional study of nurse managers in U.S. hospitals	Quantitative cross sectional study; multilevel path analysis; online survey (n=541)	Competent nurse managers and a supportive work environment effectively minimize negligence and improve patient care quality standards. A nurse manager's experience has a much stronger influence on their competence and leadership skills than their level of further education.
3	Nabizadeh-Gharghozar, Alavi, & Ajorpas; Nurse Education Today, 2021	Clinical competence in nursing: A hybrid concept analysis	3-phase hybrid analysis (Theoretical phase, field phase, analysis phase)	<i>Clinical competence</i> (CC) in nursing is a combination of knowledge, skills, and attitudes acquired gradually through repeated practice, supported by effective education and organization, to improve patient and nurse satisfaction and the quality of care.
4	Pérez-Francisco, <i>et al.</i> ; Healthcare; 2020	Influence of Workload on Primary Care Nurses' Health and Burnout, Patients' Safety, and Quality of Care: Integrative Review	<i>Scoping review</i> (n= 45 studies)	The high level of <i>burnout</i> among nurses is caused by heavy workloads, which contribute to declining nurses' health, increased errors, and disruptions to patient safety. Interventions such as staffing enhancement and proven organizational strategies can mitigate these impacts.

No	Author, Journal, Year	Title	Study Design	Result
5	Maghsoud <i>et al.</i> ; BMC Nursing; 2022	Workload and quality of nursing care: the mediating role of implicit rationing of nursing care, job satisfaction and emotional exhaustion by using structural equations modeling approach	Quantitative cross sectional study; SPSS 16 and Stata 14; questionnaire (n=311)	Nurse workload indirectly affects the quality of care mediated by implicit <i>rationing</i> , job satisfaction, and emotional exhaustion.
6	Moghadam <i>et al.</i> ; Nursing in Critical Care; 2020	Nursing workload in intensive care units and the influence of patient and nurse characteristic	Quantitative cross-sectional study; independent sample t-test, one-way analysis, and multivariable linear regression analysis (SPSS); questionnaire (n=509)	The average nurse workload, as measured by <i>the Nursing Activities Score</i> (NAS), is approximately 72.84%, with higher workloads during the morning shift, among male patients, and for referral patients from the emergency department and ICU. Female nurses, higher patient count, and longer patient stay in the ICU were directly related to increased NAS. The intensity of nursing activities tends to be lower in surgical and burn ICU work areas than in medical ICUs.
7	Mobasher-Amini, Rezaei, Esmaeilpour-Bandboni; Advances in Nursing & Midwifery; 2019	Nurses' Competence and Job Related Factors among Nurses in University Hospitals: A Cross Sectional Descriptive Design	Descriptive cross-sectional study; analysis with Spearman correlation and Mann-Whitney-U test (SPSS 21); questionnaire (n=230)	The majority of nurses (66.1%) have high competence with an average <i>Competency Inventory for Registered Nurses</i> (CIRN) score of 173.59±26.72. The highest competence is found in the dimension of 'Legal practice/ethics', while the lowest is in 'Critical thinking/research ability'. Competencies are positively correlated with experience, age, salary, and job stability, and negatively correlated with monthly working hours.
8	Malawat, abdullah & Nurlinda; Jurnal Ilmiah Kesehatan Diagnosis; 2019	Pengaruh Beban Kerja Dan Stress Melalui Kelelahan Kerja Terhadap Kinerja Perawat Di Ruang Rawat Inap Rumah Sakit Islam Faisal Makassar	Quantitative study using path analysis method; questionnaire (n=76)	This study concludes that workload has a significant effect on nurses' performance (p<0.05), either directly or indirectly through work fatigue. Meanwhile, work stress had no direct effect on performance (p>0.05), but significantly triggered work fatigue, which negatively affected nurses'

No	Author, Journal, Year	Title	Study Design	Result
				performance ( $p < 0.05$ ).
9	Cesilia & Kosasih; Jurnal Sosial dan Teknologi (SOSTECH); 2024	Pengaruh Beban Kerja dan Kelelahan Kerja terhadap Kinerja Perawat	Qualitative analytical descriptive study with literature review	A high workload significantly increases nurses' work fatigue, thereby reducing their performance in providing health services. High workload and burnout reduce nurses' motivation and performance and increase the risk of <i>burnout</i> and job dissatisfaction.
10	Bariah, Sumijatun, & Herawani; Jurnal Manajemen dan Administrasi Rumah Sakit Indonesia (MARSIS); 2025	Analisis Pengaruh Beban Kerja, Kompetensi dan Motivasi Terhadap Kinerja Perawat di Ruang Rawat Inap RS Karya Medika I Cikarang Tahun 2024	Observational descriptive quantitative study; questionnaire (n=63)	The results of the analysis showed that workload had no significant effect on performance ( $p > 0.05$ ), whereas competence and motivation had significant positive effects ( $p < 0.05$ ). Simultaneous influences of workload, competence, and motivation showed a complex and interrelated relationship in improving nurse performance ( $p < 0.05$ ).
11	Bhadjowawo, <i>et al</i> ; Jurnal Manajemen dan Administrasi Rumah Sakit Indonesia (MARSIS); 2025	Pengaruh Beban Kerja, Kompetensi, Dan Motivasi Terhadap Kinerja Tenaga Perawat pada Instalasi Rawat Inap Rumah Sakit Bhayangkara Kupang tahun 2025	Cross sectional study; multiple regression analysis; questionnaire (n=65)	Workload did not have a significant effect on nurse performance ( $p > 0.05$ ) due to adaptation factors and effective work systems in the field. Competence and motivation have a significant effect on nurse performance ( $p < 0.05$ ), thereby achieving optimal performance.
12	Halawa, Nadapdap & Silaen; Jurnal Prima Medika Sains; 2020	Kinerja perawat di ruangan rawat inap Rumah Sakit Bhayangkara Tingkat II Medan ditinjau dari kompetensi, motivasi, dan beban kerja	Cross sectional study with analytical survey; bivariate analysis with chi-square and multivariate analysis with logistic regression test; questionnaire	This study found significant relationships among competence, motivation, education, and the performance of implementing nurses, while workload was not significant ( $p = 0.136$ ). Through multivariate analysis, motivation was identified as the most dominant variable influencing nurses'

No	Author, Journal, Year	Title	Study Design	Result
			(n=45)	performance with an AOR score of 36,943. The next determining factor was competence (AOR = 12,953) and education level (AOR = 3,663).
13	Purwanto & Pradiptha; Jurnal Wacana Kesehatan; 202	Hubungan Kompetensi (Pengarahan) Kepala Ruang Kinerja Terhadap Kinerja Perawat Pelaksana Di Ruang Rawat Inap RSUD Dr. Adjidarmo Kabupaten Lebak	Quantitative using correlation study; SPSS 22; questionnaire (n=132)	The study, with a sample of 132 nurses across 10 inpatient rooms, showed that the head of the ward's competence was significantly related to the implementing nurse's performance (p = 0.04; OR = 2,314). These findings indicate that the head of the room's effective briefing function can more than double the likelihood of improving nurses' clinical performance.
14	Mulyani <i>et al</i> ; PREPOTIF: Jurnal Kesehatan Masyarakat; 2024	Pengaruh Kompetensi Dan Disiplin Melalui Kinerja Perawat Terhadap Mutu Pelayanan Rumah Sakit Di RSAU Dr. Sukirman Lanud Roesmin Nurjadin Pekanbaru	Quantitative descriptive; analysis with Outer and Inner Model (SmartPLS) test; questionnaire (n=41)	Competence and performance are the main determinants that significantly affect the quality of health services (either directly or through mediating relationships). At the same time, the discipline variable has no significant influence on the quality of service or performance of nurses.

Following this review of study designs, the literature emphasizes that clinical competence is essential in nursing services, requiring resilience under pressure and effective teamwork. Disregarding professional competency standards may undermine organizational effectiveness and raise concerns about the credibility of nursing practice [10]. For example, Nabizadeh-Gharghozar, Alavi, and Ajorpaz (2021), using a three-phase hybrid method, found that *Clinical Competence (CC)* develops over time through practice, repetition, and accruing experience [8]. Building on this, research by Hendy *et al* (2025) showed that clinical competence in nurses relates to workload and self-efficacy: nurses facing high workloads often exhibit lower self-efficacy and core competencies, ultimately impacting both patient care quality and nurse performance [11].

The role of nurse managers is vital in ensuring clinical competence within healthcare organizations. Nurse managers hold full responsibility around the clock to ensure medical care quality and legal compliance. Their critical role is to manage operations and foster a positive work environment for nurses. Notably, skilled nurse managers and an improved practice environment are linked to fewer missed care opportunities and better quality of care [12]. Supporting this, Purwanto & Pradiptha (2020) found that the competence of the unit head, particularly in providing direction, relates to nurse performance. Motivation and effective guidance from the unit head can foster a favorable work climate, ultimately

enhancing nurse performance [13] . Further, Mobasher-Amini, Rezaei, and Bandboni (2019) demonstrate that occupational factors (monthly working hours, salary, shift patterns, and type of work) are associated with nurse competence [14].

Expanding on factors impacting nurse performance, this study identified three journals indicating that competence and motivation are the main drivers in improving nurse performance [15] ; [2] ; [16] . Moreover, Mulyani *et al.* (2024) demonstrated a significant influence of competence on performance and quality of service both directly and indirectly, while discipline was not found to have a significant effect on service quality and performance [17].

Nurses play a crucial role as frontline professionals who directly interact with patients to deliver quality care. Evaluating nurse performance is essential to assess how well they meet clinical skills, professional knowledge, and nursing standards. However, nurses often encounter high workloads, as they are directly responsible for patient care in diverse settings, ranging from inpatient wards to emergency departments [18].

Clinical competencies of nurses are related to workload and self-efficacy. A nurse's self-efficacy, or confidence in their ability to perform work-related tasks well, significantly affects their decision-making and resilience under pressure. Targeted interventions to improve self-efficacy can help nurses maintain core competencies despite increased workload by enhancing their confidence and ability to adapt, ultimately resulting in improved quality of care [11] . Pérez-Francisco *et al.* (2020) stated that excessive workload is related to a decrease in nurses' health, an increase in errors, and a disruption in patient safety. This, in turn, reduces the quality of service [19] . Maghsoud *et al.* (2022) show that workload affects the quality of nursing care through implicit allocation, job satisfaction, and emotional exhaustion. Nurses' excessive workload forces them to give strict priority to medical interventions. This risks lowering the quality standards of nursing care [20].

Furthermore, the workload of nurses, especially those working in the emergency department and Intensive Care Unit (ICU), is also influenced by nurse characteristics, including type, modality, source of referral, and length of the treatment period. Workload tends to be higher in *the morning shift*, among male patients, and among those referred from the emergency department and ICU. In particular, there is a positive correlation between female nurse characteristics, patient volume, and length of ICU stay with an increase in nursing activity scores [21].

In the national journals studied, as many as 2 journals showed the influence of workload on nurse performance. High workload and work stress directly and indirectly affect performance through work fatigue [22] . High workload and burnout contribute significantly to decreased motivation and performance of nurses, as well as increasing the risk of *burnout* and job dissatisfaction [23] . However, studies conducted by Bariah, Sumijatun, & Herawani (2025), Bhadjowawo, Rumengan, & Mariana (2025), and Halawa, Nadapdap, & Silaen (2020) showed that workload did not have a significant effect on nurse performance. A high workload does not always have a negative impact due to adaptation factors and effective work systems in the field [15]; [2]; [16].

Adaptation is an individual's conscious process of adjusting to the external environment. According to the Roy Adaptation Model (ROM), the balance between ecological stimuli and individual responses shapes adaptive behavior. For nurses, this process is influenced by three main factors: the academic institution where they study, organizational support in the workplace, and the nurse's own personality characteristics [24].

Organizational culture also affects nurse performance through burnout. Negative organizational cultures tend to increase nurse stress. Kiptulon et al. (2024) identified four types of organizational culture in nursing: clan, market, hierarchy, and adhocracy. Of these, hierarchical and market cultures are most associated with higher levels of nurse stress. In comparison, clan and adhocracy cultures tend to be associated with lower stress levels and greater job satisfaction [25].

Nurse managers can create a positive work environment by strengthening clan and adhocracy cultures. A focus on teamwork, trust, open communication, innovation, and participatory leadership is effective in reducing stress and burnout in nurses. Organizations should prioritize regulations that create a conducive work climate to increase nurse satisfaction and engagement, while eliminating the toxic environment caused by excessive bureaucracy. Reducing stress levels among nurses can be achieved through collaborative leadership, appreciation of work, transparent communication, and participatory decision-making systems [25].

To reduce the impact of high workload, hospitals can implement several strategies, including increasing the number of nurses can improve the nurse-patient ratio, so that each nurse is responsible for fewer patients. Additionally, training programs focusing on time management and managerial skills can help nurses manage their duties more efficiently [18].

## **CONCLUSION**

Clinical competence and workload are the main factors that affect the quality of nursing care and the performance of nurses in hospitals. High clinical competence is able to increase the effectiveness of task execution, service quality, and ensure the success of patient rehabilitation. On the other hand, excessive workload tends to reduce service quality, increase the risk of fatigue and burnout, and negatively impact nurse performance if not managed properly. To address a lack of competence and high workloads, hospitals can increase the frequency of nurse training and adjust the nurse-to-patient ratio.

This literature review was limited to articles published within the last seven years, thereby risking the omission of older foundational theories. The study was also limited to the databases ScienceDirect, PubMed, and Google Scholar. Future studies should adopt a meta-analysis approach to more accurately evaluate relationships between variables.

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