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## Perceived corporate image (PCI) and perceived external prestige (PEP) of nurses of hospital

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#### **Abstract**

**Objective:** This study aims to analyze the relationship between perceived corporate image of society and perceived external prestige (PEP) nurses at the same hospital.

**Method:** Design of the research by cross sectional study. The PCI measurement population is a community that knows about the hospital with a total sample of 235 people. PEP measurement population is nurses working in hospitals with a total of 214 people. Sample of study are 171 patients and community with proportionate random sampling.

**Result**: this study described that no correlation between PCI community and PEP nurse for 5 (five) hospitals, p = 0.778 ( $\alpha > 0.05$ ). Beside that, no correlation between PEPH community and PEPH nurse (p = 0.959,  $\alpha > 0.05$ ) and no correlation between PEPM community and PEPM nurse, with p = 0.501 ( $\alpha > 0.05$ ). These suggests that there is no relationship between nurse perceptions of what the PCI community. Nonetheless, PEP is positive for increased organizational identification. It is expected that the hospital management will try to grow the confidence level and pride of the nurses on the hospital. Confidence in PEP can support nurse retention efforts.

**Conclusion:** It is recommended in subsequent researchers to develop other variables in measuring PCI community and PEP nurses.

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**Keywords:** Perceived corporate image, perceived external prestige

#### Introduction

Since 2008 according to (Olivia and Ilies 2014) about 81% of firms view the need to retain employees as a very important business priority. This number increased by 41% from 2007. Turnover becomes important, because it can disrupt the continuity of the company and is very harmful (Price and Mueller 1981; Skagert and Dellve 2011) [61, 17].

According (Fitzpatrick and Fitzpatrick 2015) <sup>[6]</sup> turnover in an organization should be identified, whether turnover is due to voluntary or involuntary turnover. If the turnover rate is high on the involuntary, then the organization should be more careful in recruitment, selection and training and the importance of increasing motivation. If voluntary turnover is higher, the organization needs to find out what causes it (Dutton, Dukerich, and Harquail 2013; Price and Mueller 1981) <sup>[5, 61]</sup>. In this study the study was devoted to voluntary turnover, with the consideration that the nurses were out voluntarily. Nursing manpower is an integral part of any healthcare system and compose the largest healthcare providing group within hospitals (Lee 2022; Muharraq, Alallah, and Baker 2022; Xu, Zeng, and Wu 2021) <sup>[8, 14, 19]</sup>. The reason most of the nursing personnel who came out of Hospital B is due to follow husband and feel dissatisfied working in the hospital, so look for a job that is considered better. Some reasons nursing staff leave E hospital because they feel there is a better job. Generally they leave the hospital after working over 2 (two) years, after gaining work experience at the hospital (Muchlis and Indonesia 2020; Toms 2022) <sup>[11, 18]</sup>.

There are several opinions of researchers on aspects that can be used as a basis for predicting individuals, groups or communities in assessing an organization (Carmeli 2005; Herrbach and Mignonac 2004; Midts, Iel, and Ruyn 2000) [1]. One of the results of

the process of organizational activities that can be a prediction that is the performance of the organization. The general organizational performance can also serve as a predictor of the perception of prestige (Muchlis, Semmaila, and Amir 2022) [23], as long as organizational performance is a sign of quality and competence (Dutton *et al.* 2013) [5]. Data outpatient and bed utilization (BOR = Bed Occupation Rate) is one of the performance of the hospital. Therefore, to see the prediction of organizational prestige perception, it is shown the reference level data among users of health service in Makassar City hospital that is outpatient and BOR data. Reference level data among users of health services at Makassar City hospital illustrates the variation in the number of visits for each hospital.

The existence of several public and private hospitals that are the primary choice of outpatient service users, suggest that there are some hospitals that have not been the primary choice for outpatient community in hospitals, including Ibnu Sina hospital and Faisal Islamic hospital with outpatient which is relatively low compared to some other government and private hospitals. Other data that can illustrate the prediction of the health service user prestige perception is BOR. BOR data also indicate the existence of inter variation in each hospital in Makassar City.

Perceptions of organizational prestige by (Carmeli 2005; Carmeli and Freund 2002; Carmeli and Josman 2009) [1, 2, 3] mean the image to the organization. Image is defined as a person's initial assessment (cursory) of the organization, assessment can be done even though the individual has no experience of direct interaction with the organization (Anon n.d.; Dutton 1991; Dutton et al. 2013) [4,5]. Good image of the organization is a distinct prestige, while good prestige in the organization, with high employee commitment and high satisfaction leads to low intention to leave the organization (Morgan, Art, and Grund n.d.). In addition, some data that has been presented previously, the previous explanation is also reinforced by research conducted by with the aim of research to know the perception of image hospital in Makassar City by nursing staff and nursing staff candidate (Muchlis et al. 2017) [13].

Assessment of hospital image in Makassar City using respondents from private and public universities in Makassar City. Consisting of 38 (35.8%) respondents coming from state universities and 68 (64.2%) respondents coming from private universities. A description of workplace priority options can illustrate the image of nursing staff of hospitals in Makassar. The higher the priority value of the hospital as a workplace, it can be predicted that the higher the image of nursing personnel toward the hospital, or the better the image of the hospital.

#### Methods

This research is categorized as quantitative research with cross sectional study design, using survey method. This study aims to analyze the relationship between society and perceived external prestige (PEP) nurses at the same hospital. The research was conducted on 5 (five) locations namely; Hospital A, Hospital B, Hospital C, Hospital D and Hospital E. in Makassar City. Determination of research location by considering trend of turnover rate value at the five hospitals in the last 3 (three) years data. Hospitals A and Hospital A represent public private hospitals with an increasing trend of turnover rate each year, whereas C and D represent public private hospitals with a declining turnover rate trend in the

last 3 (three) years. Added 1 government general hospital that has the same characteristics as the location (to meet the number of samples in the study, taking into consideration the sampling criteria.

The study was conducted for 2 (two) years. The population is all nursing staff with non-permanent employees status (daily freelance, honorary, contract and permanent employee candidate), amounting to 214 people. Sample taken as many as 171 nurses. The sampling technique is proportionate random sampling.

As a data collection control tool for the PEP variable of nursing personnel in the hospital, samples from the existing community / patient are located around the location of the hospital (research location). Respondent from patient, taken at each hospital (research location). The samples collected were 234 people, this number was taken based on the consideration of the amount which is almost the same as the nursing staff population in 5 (five) research sites. The purpose of the survey was to know the level of Perceived Corporate Image (PCI) of the hospital by individuals outside of the hospital. The technique of sampling on nursing personnel based on proportionate random sampling. The number of samples taken based on the proportion of the number of nursing personnel in each hospital. The PCI measurement results were then compared with the results of PEP measurements by nursing staff in each hospital followed by a two-sample correlation test.

#### Result

Based on the results of research at each study site, the number of target samples of each hospital experienced a difference. This is because there are several sample targets that do not meet the sample criteria, such as working less than 1 year, aged over 36 years, leave, have resigned as nursing staff, and those who are not willing to be respondents. The average age of respondents is 27 years old, with the last level average education D III, employee status average honorer, and generally respoden still pertek new employees that is 3 (three) year). Based on the work unit, the average work is in the nursing unit. Respondents at all study sites (5 hospitals) were dominated by women. There are only a few nursing personnel of the male sex. Especially in the midwife profession, there are no male respondents.

In the age group of respondents 31-35 years, most obtained at Hospital C. In all hospitals, age group of 26-30 respondents (52.0%). This shows that respondents generally are at a relatively easy age. Especially in honorary workers and contract workers. Data on the marital status of the respondents indicated that Hospital B, Hospital D and Hospital E had the majority of respondents with no marriage. In contrast to Hospital B most of the respondents encountered had marital status.

Based on the education level of respondent's only respondents in Hospital E who have the level of education SPK / equivalent, while at other hospitals, the respondents have a minimum education level D III. In table 5.9 also obtained information that at Hospital B, the number of graduates D4 / Bachelor / Keb. More than any other hospital. This is certainly related to the rules of recruitment requirements set by each hospital.

Based on employee status, it is found that in hospital A, all respondents are honorary, related to the employment regulations in hospital A which stipulates that since June 2016, all non-permanent workers have honorary status. On

the other hand, the majority of respondents at D and E hospital had contract employee status, as well as hospital C and hospital B, most of whose respondents had honorary status. This is related to the internal policies of each hospital regarding the determination of the type of employee status and the mechanism of each.

Based on the length of work, the information obtained that all respondents in all research sites, mostly in the period of work 1-5 years. This is also of course related to the age of respondents who are relatively young at that age. Hospital B has the most respondents for the long category of work> 10 years. Those who have a working duration> 10 years are prospective permanent employees (non-permanent) in the hospital.

Based on the distribution of the respondent's work unit, it is found that respondents generally work in the nursing unit. Only a few respondents were in ICU, ER and OK rooms. This is due to many respondents who refused to be respondents on the unit ICU, ER and OK. Including when setting up their interview schedule is difficult to provide a special schedule of interviews, because the time used in addition to work, is to rest and family. In addition, at some nursing care hospitals in the ICU are generally permanent personnel, so they are not included in the sample criteria.

Based on the tribe, it is found that in 5 (five) research locations, spread 6 (six) types of tribes namely Bugis,

Makassar, Java, Mandar, Toraja and Manado. Based on the research results obtained information that the Bugis tribe is the most tribe type in all research sites than other tribes, followed by Makassar tribe.

Criteria for respondent education level (community / patient) starting at junior high level / equivalent, the consideration of education level of junior high / equal are considered high enough and objective in assessing hospital prestige. In addition, consider the level of educational criteria of respondents from nursing staff, most of whom come from DIPLOMA III which belongs to the category of education is quite high. In the table obtained information that the respondent (community / patient) most derived from high school education level / equal, then followed by education level S1 / S2 / S3. Especially for Hospital B and Hospital D most respondents come from S1 / S2 / S3.

Based on the result of statistical analysis, there is no correlation between PCI community and PEP nurse for 5 (five) hospitals, p = 0.778 ( $\alpha$ > 0.05). Beside that, no correlation between PEPH community and PEPM nurse (p = 0.959,  $\alpha$ > 0,05) and no correlation between PEPM community and PEPM nurse, with p = 0,501 ( $\alpha$ > 0,05). These suggests that there is no relationship between nurse perceptions or PEP with PCI community. The results showed that the large number of patients and the public had perceived external prestige in the category of good.

#### **Appendix**

Table 1: Correlations PEPH People and PEPH Nurse

|                      |                     | mean_PEPRS_people | mean_PEPRS_nurse |
|----------------------|---------------------|-------------------|------------------|
| mean_PEPH_ community | Pearson Correlation | 1                 | ,032             |
|                      | Sig. (2-tailed)     |                   | ,959             |
|                      | N                   | 5                 | 5                |
| mean_PEPH_nurse      | Pearson Correlation | ,032              | 1                |
|                      | Sig. (2-tailed)     | ,959              |                  |
|                      | N                   | 5                 | 5                |

Table 2: Correlations PEPM People and PEPM Nurse

|                      |                     | mean_PEPTM_people | mean_PEPTM_nurse |
|----------------------|---------------------|-------------------|------------------|
| mean_PEPM_ community | Pearson Correlation | 1                 | ,403             |
|                      | Sig. (2-tailed)     |                   | ,501             |
|                      | N                   | 5                 | 5                |
| mean_PEPM_nurse      | Pearson Correlation | ,403              | 1                |
|                      | Sig. (2-tailed)     | ,501              |                  |
|                      | N                   | 5                 | 5                |

Note:

PEPH: Perceived External Prestige Hospital PEPM: Perceived External Prestige Medical staff

Table 3: Correlations PCI People and PEP Nurse

|     |                     | PEP  | PCI  |
|-----|---------------------|------|------|
| PEP | Pearson Correlation | 1    | ,175 |
|     | Sig. (2-tailed)     |      | ,778 |
|     | N                   | 5    | 5    |
| PCI | Pearson Correlation | ,175 | 1    |
|     | Sig. (2-tailed)     | ,778 |      |
|     | N                   | 5    | 5    |

#### Conclusion

This study described that there was no correlation between PCI community and PEP nurse for 5 (five) hospitals, p = 0.778 (> 0.05). This suggests that there is no relationship between nurse perceptions of what the PCI community is. Nonetheless, PEP is positive for increased organizational

identification. It is expected that the hospital management will try to grow the confidence level and pride of the nurses on the hospital. Confidence in PEP can support nurse retention efforts. This research was recommended in subsequent researchers to develop other variables in measuring PCI community and PEP nurses.

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