



# Influence of Competence, Work Stress, and Burnout on Job Satisfaction in Tzu Chi Emergency Department

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**Abstract:** The Emergency Department is one of the busiest hospital units dealing with patients with various medical conditions, including high-risk patient cases requiring intensive care. This requires competent health workers. However, a stressful work environment can lead to high levels of job stress and burnout, which negatively impacts job satisfaction. This study aims to examine the effect of competence, job stress, and burnout on job satisfaction of health workers, especially doctors and nurses in the emergency room of Tzu Chi Hospital. This study used a quantitative approach with a questionnaire involving 38 respondents, analyzed using the Structural Equation Modeling (SEM) Partial Least Squares (PLS) technique through the SmartPLS application. The results showed that competence significantly affects job satisfaction, indicating that increasing competence increases job satisfaction. and competence also has a positive effect on burnout where the higher the competence, the lower the risk of burnout. In contrast, job stress and burnout have a negative influence on job satisfaction; the higher the stress and burnout, the lower the level of job satisfaction. These findings emphasize the importance of competency development as a strategic measure to reduce stress and burnout and increase job satisfaction. These results provide guidance for hospital management in designing effective competency improvement and stress management programs.

**Keywords:** competence, job stress, burnout, job satisfaction

Received: April, 23 2025

Revised: May, 07 2025

Accepted: May, 21 2025

Published: May, 23 2025

Curr. Ver.: May, 23 2025



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## 1. Introduction

The Emergency Department (ED) is a crucial part of the hospital that deals with emergency and urgent cases. With many patients, including those at high risk, the ED requires a rapid response in diagnosis and treatment. The main function of the ED is to receive, stabilize, and manage patients to prevent death or disability. Data from the World Health Organization (WHO) shows that heart disease, stroke, and accidents are the leading causes of death in the world, underscoring the importance of emergency room services (WHO, 2020).

The complexity of services in the ED requires good coordination between medical personnel. Imperfections in service, even if only one aspect fails, can be detrimental to both patients and health workers. Job satisfaction is important, as it is a major determinant of motivation and performance of medical personnel. Job satisfaction is measured by various

dimensions, including salary, benefits, and working relationships. Research shows that increasing nurse competence has a positive impact on job satisfaction and service quality (Salameh et al., 2023).

Medical personnel in the emergency room often face stressful situations, including long working hours and pressure to make quick decisions. High levels of job stress can lead to mental health problems, including burnout, which has a prevalence of more than 60% among emergency room doctors (Shanafelt et al., 2022). Research shows that emergency room doctors are more prone to burnout than doctors in other departments, so their mental health needs attention (Zhang et al., 2020).

The competence of medical personnel plays an important role in providing quality services. Increased competence is needed so that staff can keep up with the latest technology and treatment methods. Good competence is associated with improved performance and service quality, while a lack of competence can have a negative impact on job stress and burnout (Parashakti et al., 2020).

Job stress is defined as a mismatch between environmental demands and an individual's ability to meet them. Emergency departments are often the places with the highest levels of stress, and this condition can affect the quality of health services. Various theories explain that stress arises from high workload, role conflict, and poor working conditions, so mitigating work stress is important for the health of medical staff (Amin & Susilawati, 2023).

Burnout, as a response to chronic job stress, can result in physical and emotional exhaustion, and decreased motivation. Research shows that burnout has a negative influence on job satisfaction, so prevention of this condition is very important for health workers to maintain service quality (Xiaohua et al., 2020).

Tzu Chi Hospital, with a significant increase in emergency room visits, has 38 medical personnel divided into three shifts. Most of the nurses were novices with limited experience. These conditions, along with the challenges of dealing with patients, can increase workload, stress, and the risk of burnout. This study aims to examine the influence of competence, job stress, and burnout on job satisfaction of medical personnel in the emergency department of Tzu Chi Hospital, which has not been done before (Jiang et al., 2022).

## **2. Literature Review**

### **2.1. Competence**

Spencer & Spencer (1993) say competence is a skill and ability that a person can get through work experience, life experience, learning, or through training. Competence in the context of medical personnel in the Emergency Department (IGD) includes the knowledge, skills, and attitudes needed to provide effective health services. Research by Parashakti et al. (2020) shows that increasing the competence of medical personnel significantly contributes to the quality of services provided. Good competence not only helps in making the right

clinical decisions but also increases the confidence of health workers in dealing with emergency situations. In addition, Salameh et al. (2023) suggested that high clinical competence is directly related to job satisfaction, where medical personnel who feel competent tend to be more satisfied with their jobs.

## **2.2 Job Stress**

Karasek & Theorell (1990) define job stress as tension that arises when there is an imbalance between job demands and the level of control individuals have to meet these demands. In the context of IGD, job stress levels are often high due to demands to make quick decisions in critical situations. According to Jiang et al. (2022), high job stress can affect the mental health of medical personnel, increasing the risk of depression and burnout. Research by Amin and Susilawati (2023) showed that increased workload and role conflict in the work environment contribute to the stress experienced by medical personnel, which in turn can affect the quality of services provided.

## **2.3. Burnout**

Maslach & Jackson (1981) formulated burnout as a psychological syndrome characterized by emotional exhaustion, depersonalization, and a feeling of reduced professional ability that can appear. Burnout is a condition of physical and emotional exhaustion caused by chronic work stress. According to De La Cruz et al. (2020), burnout among medical personnel often occurs due to prolonged exposure to stress and high workload. Research by Xiaohua et al. (2020) found that burnout has a negative influence on job satisfaction, where medical personnel who experience burnout tend to feel less satisfied with their work. Therefore, it is important to conduct interventions that can prevent burnout, especially in stressful environments such as emergency departments, so that medical personnel remain motivated and can provide quality services.

## **2.4 Job Satisfaction**

Job satisfaction is a positive emotional state that individuals experience regarding their work. According to Herzberg (1959) in Two-Factor Theory, job satisfaction is the result of motivator factors, which are elements directly related to job content. Job satisfaction arises when the job provides opportunities for achievement, recognition, responsibility, career advancement, and interesting work. Research by Wang et al. (2020) showed that job satisfaction among medical personnel is influenced by various factors, including compensation, interpersonal relationships, and work environment. Medical staff who are satisfied with their jobs tend to have higher motivation and better performance. In addition, competence and job stress also contribute to job satisfaction, where high competence can increase satisfaction, while high stress can decrease it (Salameh et al., 2023; Jiang et al., 2022). This suggests the importance of maintaining a balance between job demands and the support provided to medical personnel to increase their job satisfaction. This section must contain a state-of-the-art explanation. It can be explained in several ways. First, you can discuss several

related papers, both about objects, methods, and their results. From there, you can explain and emphasize gaps or differences between your research and previous research. The second way is to combine theory with related literature and explain each theory in one sub-chapter.

### 3. Proposed Method

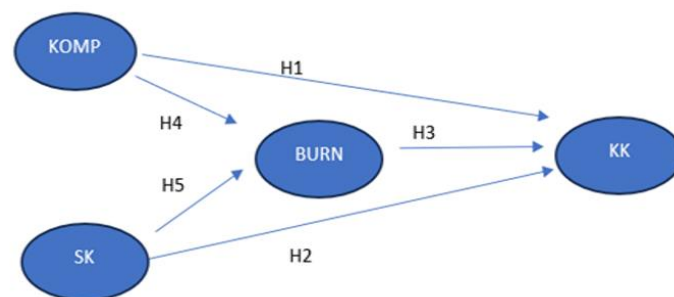
This study employs a quantitative survey method with a cross-sectional and explanatory research design. The objective is to examine the causal relationships between competence, work stress, burnout, and job satisfaction among doctors and nurses in the Emergency Department of Tzu Chi Hospital.

#### 3.1. Research Framework

The study is designed to analyze:

- Competence, work stress, and burnout as independent and mediating variables.
- Job satisfaction as the dependent variable.

A conceptual research constellation model is developed to illustrate these variable relationships. This model guides the analysis of the influence pathways.



**Figure 1.** Research Framework

(KOMP: Competence; SK : Job Stress; BURN : Burnout; KK : Job Satisfaction)

#### 3.2. Population and Sample

- Population: All doctors and nurses in the Emergency Department of Tzu Chi Hospital.
- Sampling Method: Saturated sampling is employed, encompassing the entire population (N = 38), due to the manageable size and focused scope.
- Inclusion Criteria:
  - Willing participants currently working in the ED.
- Exclusion Criteria:
  - Participants unwilling to be involved.
  - Participants absent during data collection.
  - Participants withdrawing before study completion.

### 3.3. Data Collection Techniques

Data collection was conducted using three main methods:

#### a. Questionnaire

Questionnaires were distributed online with an informed consent form. Each variable is measured using validated instruments:

- Competence:

Adapted from Spencer & Spencer's theory (in Priansa, 2014), using a 15-item Likert-scale questionnaire (1–5).

Cronbach's  $\alpha = 0.825$  (Alya & Latunreng, 2021).

- Work Stress:

Measured using the Health and Safety Executive (HSE) Questionnaire, consisting of 25 items across 7 domains.

Likert scale from 1 (never) to 5 (always), with reverse scoring on certain items.

Cronbach's  $\alpha = 0.76$  (Mirzaei et al., 2022).

Stress levels categorized as:

- <1.5: High stress
- 1.5–2.5: Moderate
- 2.5–3.5: Low
- 3.5: No stress

- Burnout:

Measured using the Modified MBI-HSS-MP (Maslach Burnout Inventory for Medical Personnel), comprising 22 items across three dimensions:

- Emotional Exhaustion (9 items)
- Depersonalization (5 items)
- Personal Achievement (8 items)
- Responses on a 5-point Likert scale from 1 (never) to 5 (always).
- Cronbach's  $\alpha = 0.733$  overall, with subscales:
- Emotional Exhaustion: 0.83
- Depersonalization: 0.73
- Personal Achievement: 0.81 (Lin et al., 2022)

- Job Satisfaction:

Measured using the Jiang et al. (2017) questionnaire, consisting of 16 items across personal and environmental satisfaction domains, using a 5-point Likert scale from 1 (very dissatisfied) to 5 (very satisfied).

Cronbach's  $\alpha = 0.94$

#### b. Literature Review

Secondary data collection through journal articles, books, and previous research relevant to competence, work stress, burnout, and job satisfaction.

#### c. Observation

Field observation was used to assess observable behaviors related to medical personnel's competence during patient care. Observation focused on behavioral indicators during the provision of emergency services.

### 3.4. Variable Classification

The study utilizes Structural Equation Modeling (SEM) with Partial Least Squares (PLS), which involves the following variables:

Exogenous Variables (Independent):

- Competence
- Work Stress

Endogenous Variables (Dependent):

- Job Satisfaction

Mediating Variable (Intervening):

- Burnout

Latent Variables:

- Variables not directly observable, measured through indicators.

Observable Variables:

- Questionnaire items representing each indicator.

### 3.5. Data Analysis Procedure

The following steps outline the analytical process:

#### a. Descriptive Statistical Analysis:

To summarize demographic data and responses.

#### b. Validity and Reliability Testing:

Conducted on the instruments using Cronbach's Alpha, AVE (Average Variance Extracted), and CR (Composite Reliability).

#### c. Measurement Model Evaluation (Outer Model):

Confirm convergent and discriminant validity.

#### d. Structural Model Evaluation (Inner Model):

Assess the relationships between constructs (path coefficients,  $R^2$ , t-statistics).

#### e. Hypothesis Testing:

Using bootstrapping technique in SEM-PLS to test direct and indirect effects.

## **4. Relationship between Variables**

### **4.1 The Relationship Between Competence and Job Satisfaction**

Competence has a significant influence on the job satisfaction of doctors and medical personnel. When medical personnel feel competent in carrying out their duties, they tend to have higher self-confidence, which has a positive impact on the quality of service they provide. This sense of competence also relates to mastery of knowledge and skills, which enables them to face challenges in the workplace more effectively. In addition, medical personnel who feel competent are usually more satisfied with their jobs, as they feel a sense of accomplishment and recognition from their peers and patients, which in turn can increase their motivation and commitment to their work.

Various studies support the relationship between competence and job satisfaction. For example, a study by Alshammari et al. (2020) in the *International Journal of Health Planning and Management* showed that professional competencies contribute to increased job satisfaction among nurses. Furthermore, research by Arora et al. (2019) in *BMC Health Services Research* found that training and competency development have a positive impact on job satisfaction of medical personnel. In another study by Khamis et al. (2021) published in the *Journal of Nursing Management*, found that clinical competence is closely related to job satisfaction among nurses. In addition, research by Lee et al. (2022) in the *International Journal of Environmental Research and Public Health* emphasized the importance of competency development in increasing job satisfaction. Finally, research by Yang et al. (2018) in *Health Services Research* shows that interpersonal competence also affects the level of job satisfaction among medical personnel.

H1 : Competence affects job satisfaction

### **4.2 The Relationship Between Job Stress and Job Satisfaction**

Job stress can have a significant impact on the job satisfaction of doctors and medical personnel. When stress levels increase, medical personnel often experience physical and mental fatigue, which can reduce their motivation and productivity. High stress can also interfere with the quality of interactions with patients, which is essential for providing good healthcare. In addition, job stress can lead to feelings of helplessness and dissatisfaction with work, ultimately affecting the mental health and well-being of medical personnel. If stress is not managed well, this can result in increased levels of burnout, which clearly contributes to decreased job satisfaction.

Various studies support the relationship between job stress and job satisfaction. The study by Hassard et al. (2018) in *Occupational Health Psychology* found that high job stress was negatively associated with job satisfaction among medical personnel. Research by Lam et al. (2019) in the *Journal of Advanced Nursing* showed that emotional stress has an impact on nurses' job satisfaction. Furthermore, a study by McVicar et al. (2020) in the *International Journal of Nursing Studies* found that good stress management can increase job satisfaction.

In addition, research by Ruiz-Fernández et al. (2021) in the International Journal of Environmental Research and Public Health confirmed that job stress contributes to decreased job satisfaction and well-being. Finally, a study by Sweeney et al. (2022) in BMC Health Services Research found that interventions to reduce workplace stress have a positive effect on job satisfaction of medical personnel.

H2 : Job stress affects job satisfaction

#### **4.3 The Relationship Between Burnout and Job Satisfaction**

Burnout is a condition of emotional, physical, and mental exhaustion that can greatly affect the job satisfaction of doctors and medical personnel. When medical personnel experience burnout, they often feel helpless, lose motivation, and feel alienated from their work. This condition can lead to a decrease in productivity as well as the quality of services provided to patients. In addition, burnout is also associated with increased absenteeism and turnover rates, which is not only detrimental to the individual but also impacts the entire team and healthcare institution. With increased burnout, job satisfaction tends to decrease as medical personnel feel unappreciated and unable to provide the best service to patients.

Many studies support the relationship between burnout and job satisfaction. For example, research by Bianchi et al. (2019) in the Journal of Occupational Health showed that burnout was significantly negatively correlated with job satisfaction among medical personnel. The study by Dyrbye et al. (2020) in JAMA Network Open found that physicians who experienced high levels of burnout reported lower job satisfaction. In addition, research by Lu et al. (2021) in the International Journal of Environmental Research and Public Health confirmed that interventions to reduce burnout can increase job satisfaction. The study by Maslach et al. (2022) in Burnout Research also showed that burnout reduction contributes to increased job satisfaction among health professionals. Finally, a study by West et al. (2018) in The Lancet found that burnout among medical personnel is strongly associated with lower job satisfaction and overall well-being.

H3 : Burnout affects job satisfaction

#### **4.4 The Relationship Between Competence and Burnout**

Competence has an important influence on the level of burnout experienced by doctors and medical personnel. When medical personnel feel competent in their work, they tend to be more confident and able to face challenges that arise in an often stressful work environment. High levels of competence allow them to better manage their workload and provide quality care to patients, which can reduce frustration and burnout. Conversely, a lack of competence can lead to feelings of inadequacy, increased stress, and ultimately contribute to the emergence of burnout, as medical personnel feel unable to meet the demands of their job.

Various studies support the relationship between competence and burnout. A study by Alharbi et al. (2019) in the International Journal of Nursing Studies found that low levels of



competence were associated with an increased risk of burnout among nurses. Research by Chen et al. (2020) in BMC Health Services Research showed that training and competency development can reduce burnout levels among medical personnel. In addition, research by Kim et al. (2021) in the Journal of Advanced Nursing confirmed that interpersonal competence can contribute to burnout reduction. A study by Reith et al. (2022) in Medical Education found that the development of professional competencies helped reduce stress and burnout. Finally, a study by Van Bogaert et al. (2018) in the International Journal of Environmental Research and Public Health showed that team competencies in hospitals have a positive effect on the well-being and burnout levels of medical personnel.

H4 : Competence affects burnout

#### 4.5 The Relationship Between Job Stress and Burnout

Job stress has a significant influence on the level of burnout experienced by doctors and medical personnel. When medical personnel are faced with high workloads, emotional distress, and strict time demands, they tend to experience increased stress. This prolonged stress can lead to emotional and physical exhaustion, which are the main components of burnout. In addition, poorly managed stress can reduce job satisfaction and sense of engagement, thereby exacerbating burnout. In extreme situations, job stress can result in feelings of depersonalization, where medical personnel feel disconnected from their work and patients.

Various studies support the relationship between job stress and burnout. For example, research by Khamisa et al. (2019) in the International Journal of Environmental Research and Public Health found that high job stress contributed to increased burnout among nurses. The study by Cañadas-de la Fuente et al. (2020) in BMC Public Health showed that prolonged job stress is closely related to burnout levels among medical personnel. In addition, research by Liu et al. (2021) in the Journal of Occupational Health confirmed that interventions to reduce stress can help reduce burnout levels. The study by Regehr et al. (2018) in Psychological Trauma: Theory, Research, Practice, and Policy found that job stress served as a major predictor of burnout among health professionals. Finally, a study by West et al. (2022) in JAMA Network Open showed that reducing workplace stress can lead to a significant reduction in burnout levels among doctors and medical personnel.

H5 : Work stress affects burnout

## 5. Results

**Table 1.** Description of Respondent Characteristics

Category	Characteristics	Frequency	Percentage
Gender	Male	24	63,2%
	Female	14	36,8%
Age	< 26 y.o	12	31,6%
	26 - 30 y.o	9	23,7%
	31 - 35 y.o	13	34,2%

	36 - 40 y.o	1	2,6%
	> 40 y.o	3	7,9%
Length of Service	< 1 year	2	5,3%
	1 - 2 years	15	39,5%
	> 2 years	21	55,3%
Education	D3	14	36,8%
	S1	20	52,6%
	S2	4	10,5%
Profession	Doctor	8	21,1%
	Nurse	30	78,9%
Competence	ER Doctor	8	21,1%
	PK 1	21	55,3%
	PK 3	7	18,4%
	PK 3	2	5,3%

Source of data processed (2024)

The data presented shows the demographic and professional characteristics of the respondents, which consisted of 38 individuals. In terms of gender, the majority of respondents were male (63.2%) compared to female (36.8%). In terms of age, most respondents were from the 31-35 years age group (34.2%), followed by the <26 years (31.6%) and 26-30 years (23.7%) age groups, while there were very few respondents above 40 years, reflecting a relatively young population.

In terms of length of service, the majority of respondents had more than 2 years of work experience (55.3%), indicating a significant level of experience in their field. Education is also an important factor, with most respondents having a bachelor's degree (52.6%), followed by a diploma (36.8%) and only a few having a master's degree (10.5%). In terms of profession, most were nurses (78.9%), while doctors only accounted for 21.1%.

Competency showed that many respondents belonged to the PK 1 category (55.3%), followed by emergency room doctors and other categories. This data provides a clear picture of the profile of the health workers involved, where there is a predominance of nurses with sufficient work experience, as well as education that is generally at the S1 level. These findings are important for understanding the strength and structure of the workforce in the health sector.

**Tabel 2.** Description of Research Variables

Indicator	Question	Index
<b>Competence</b>		
Motive Dimension		
COMP1	Want to provide the best medical services for patients according to Emergency Department service standards	87,5
COMP2	Want to provide the best medical services for patients according to Emergency Department service standards	79
COMP3	Always arrive on time for duty	76,25
Average Value of Motive Dimension Index		81
Dimensions of Character		

Indicator	Question	Index
COMP4	Able to make the right decisions in solving problems found in the field	81,5
COMP5	Carry out work professionally in accordance with service standards	87,5
COMP6	Respect fellow medical colleagues on duty in the Emergency Department	80,25
Average Value of the Character Dimension Index		83
Dimensions of Self-Concept		
COMP7	Able to complete service tasks in the Emergency Department quickly and accurately	79
COMP8	Always enthusiastic in carrying out duties as a medical personnel in the Emergency Department	79,5
COMP9	Work in accordance with the SPO that applies in the Emergency Department	77
Average Index Value of Self-Concept Dimension		78,5
Knowledge Dimension		
COMP10	Attempt to improve knowledge by attending emergency training or seminars to be applied in Emergency Department patient care.	78,25
COMP11	Have knowledge of the science of medical emergencies	78,25
COMP12	Able to perform an appropriate physical examination to diagnose emergency patients in the Emergency Department	80,25
Average Value of Knowledge Dimension Index		89
Dimensions of Skills		
COMP13	Know the appropriate treatment therapy for emergency patients in the Emergency Department	75
COMP14	Able to operate medical devices used for services in the Emergency Department (e.g. ultrasound, ventilator, defibrillator)	80,25
COMP15	Able to diagnose patients' medical problems in the Emergency Department	81
Average Value of Skill Dimension Index		78,75
<b>Work Stress</b>		
Role Dimension		
WS1	Able to diagnose patients' medical problems in the Emergency Department	59,75
WS5	I know how to get the job done well	73
WS7	I am unable to complete the work based on the deadline that has been set	4,18
Average Value of Role Dimension Index		70,75
Relationship/Communication Dimension		
WS2	I am very clear about what is expected of me at work.	55,25
WS3	I can decide when I want to take a break	59,75
WS34	I am well supported by my colleagues and manager.	62,5
WS35	Relationships between individuals do not work well at work.	44

Indicator	Question	Index
Average Index Value of Relationship/Communication Dimension		55,37
Control Dimension		
WS4	The differences between work groups in the workplace are very difficult to combine.	81,5
WS6	I get unfavorable treatment at work.	72,25
WS8	If I get into trouble at work, my coworkers will help me.	60,5
WS9	I am given positive feedback on the work I do.	29,5
WS10	I have to work very intensively	70,5
WS13	I neglect some tasks because I have too much work to do.	64,5
WS21	I have to work very fast	72,25
WS31	My working hours are very flexible	69,75
Average Value of Control Dimension Index		65,09
Dimensions of Managerial Support		
WS11	I can control the pace of my work rhythm	81,5
WS12	I am very clear about my job duties and responsibilities.	68,5
WS14	I am clear about what the company's goals and objectives are.	62,5
WS16	I have the choice to decide how I should work	54
WS17	I am not able to take adequate breaks	64,5
WS20	I have the choice to decide what I should be doing	30,5
WS24	I can tell my manager to help me solve my work problems.	75,75
WS25	I get help and support from my coworkers on what I need.	73
WS27	I have enough opportunities to ask my manager about work changes.	63,75
WS30	I can talk to my manager about anything that might interfere with my work.	49,25
Average Index Value of Managerial Support Dimension		62,3
Dimensions of Peer Support		
WS15	There is friction among coworkers at my workplace.	62,5
WS18	I understand how to fit work into the overall goals of the work organization	62,5
WS22	I get bullied at work	67,75
WS28	I get good attention at work from coworkers	57,25
WS32	My coworkers are always willing to listen to my complaints about work issues.	58,5
Average Value of Peer Support Dimension Index		48,15
Dimensions of Change		
WS19	I am under pressure to work long hours	58,5
WS23	I have unrealistic time pressure	42,75
WS29	Employees can always be consulted about any work changes	47,25
Average Value of Change Dimension Index		51,75

Indicator	Question	Index
Demand Dimension		
WS26	I find it easy to do the work I do	52
WS33	If there are changes to the work system, I can find out clearly about how the changes are made	59,7
Nilai Rata2 Indeks Dimensi Permintaan		55,85
<b>Burnout</b>		
Dimensions of Emotional Fatigue		
BURN1	My manager always looks out for me at work	25
BURN2	I feel emotionally drained in my work	35,5
BURN3	I feel tired at the end of my working hours	11,25
BURN4	I feel tired when I wake up in the morning and have to face my work for the day.	5,25
BURN5	I feel frustrated with my job	2
BURN6	Dealing directly with patients puts a lot of pressure on me	50
BURN7	I feel very energetic at work	48,75
BURN8	I can create a pleasant atmosphere for my patients	49,25
BURN9	I have achieved a lot of positive things in my work	13,25
BURN10	I'm worried that this job makes me quick-tempered	7,25
Average Index Value of Emotional Fatigue Dimension		22,87
Dimension of Despresionalization		
BURN11	I feel tired from my work	34,75
BURN12	I can easily understand how my patients feel about things	38,75
BURN13	I can effectively solve my patients' problems	40,25
BURN14	I feel happy after working with my patients	6
BURN15	I feel my patients blame me for their problems	8
Average Index Value of Depersonalization Dimension		22,75
Dimensions of Personal Achievement		
BURN16	Working with a lot of people makes me depressed all day long	30,5
BURN17	I feel I'm working too hard	19,75
BURN18	I feel I am at the end of my life	40,25
BURN19	I feel I make a positive impact on my patients' lives through my work	42
BURN20	In my work, I deal with emotional problems very calmly	0,75
BURN21	I feel I treat my patients as objects	13,25
Average Index Score of Personal Achievement Dimension		24,4
<b>Job Satisfaction</b>		
Personal Dimension		
JS1	I don't feel as empathetic towards patients since taking this job.	44,75

Indicator	Question	Index
JS2	I don't really care what happens to my patients.	67
JS3	Current salary	46,75
JS7	Career development	51,25
JS14	Emergency room doctor/nurse skills	69,5
JS15	Ability to handle conflict in the emergency room	67,75
JS16	Ability to complete individual tasks	74,25
Average Index Value of Personal Dimension		60,17
Work Environment Dimensions		
JS4	Doctor/nurse-patient relationship	66,5
JS5	Number of nurses/doctors	60,5
JS6	Emergency room work environment	67,75
JS8	Availability of emergency medical equipment	69,5
JS9	Support from hospital management	70,5
JS10	Division of tasks	59,75
JS11	Doctor/nurse support	69,5
JS12	Flow of emergency patient services	73
JS13	Quality of nurse/doctor service	62,25
Average Index Value of Work Environment Dimension		66,58
Average Index Value of Job Satisfaction Variable		63,37

Source of data processed (2024)

Data analysis showed significant variations in the levels of competence, job stress, burnout, and job satisfaction among medical personnel in the Emergency Department. For the competency variable, the self-concept dimension is the dimension with the lowest index (78.5), while the knowledge dimension is the dimension with the highest index (89), the motive dimension is the dimension with the second highest index (81), and finally the skill dimension (78.75). This means that in terms of competence, the self-concept dimension is the most important point that needs to be improved. On the work stress variable, the analysis results show variations in the level of work stress among the indicators. Most of the indicators show index values that fall into the "Moderate" category, with an average value of 69. This illustrates the condition of work stress that is quite significant, but still in the moderate category. This data shows that job stress is a problem that is important enough to be considered. In the variable aspects of burnout, the depersonalization dimension is the dimension with the lowest index (22.75), while the personal achievement dimension is the dimension with the highest average (24.4) and followed by the emotional exhaustion dimension is the dimension with the second highest average (22.87). This means that in terms of preventing burnout, the depersonalization dimension is the most important point that needs to be improved. Meanwhile, on the job satisfaction variable, based on the results of the analysis, the majority of indicators show a level of job satisfaction that is in the "Moderate" category, with an average index value of 63.37, indicating that overall job satisfaction has not reached an optimal level. This indicates that there is potential to increase job satisfaction in the organizational environment by paying attention to factors that can increase respondents' motivation and work welfare. Overall, although medical personnel demonstrate a high level

of competence, there are serious challenges related to stress, burnout and job satisfaction that need to be addressed to improve their well-being and the quality of care provided to patients.

**Table 3.** Outer Model Test Results

Indicator	Loading Factor	AVE	Cronbach's Alpha	Composite Reliability	HTMTmax
Burnout					
BURN1	0,939	0,897	0,943	0,963	0,000
BURN2	0,949				
BURN3	0,954				
Job Satisfaction					
JS1	0,969	0,934	0,930	0,966	0,849
JS2	0,964				
Competence					
COMP1	0,899	0,882	0,966	0,974	0,890
COMP2	0,953				
COMP3	0,968				
COMP4	0,911				
COMP5	0,962				
Work Stress					
WS1	0,896	0,873	0,976	0,980	0,841
WS2	0,961				
WS3	0,93				
WS4	0,939				
WS5	0,954				
WS6	0,921				
WS7	0,938				

Source of data processed (2024)

The results of the outer model test on the burnout construct show that the BURN1, BURN2, and BURN3 indicators have a loading factor above 0.9, with a Cronbach's Alpha of 0.943, indicating excellent reliability. Likewise, job satisfaction, measured through JS1 and JS2, showed positive results with a Cronbach's Alpha of 0.930 and an AVE of 0.934, indicating strong internal consistency. In terms of competencies, all indicators, from COMP1 to COMP5, have loading factors above 0.8, with Cronbach's Alpha reaching 0.966, indicating high reliability. For job stress, indicators WS1 to WS7 also showed satisfactory loading factors, with a Cronbach's Alpha of 0.976. Composite Reliability values which are all above 0.9 indicate that all constructs measured in this study have a very good level of reliability. HTMTmax values below 0.85 for each construct also confirmed the absence of significant multicollinearity between constructs, strengthening the overall validity of this analysis.

**Table 4.** Inner Model Test Results

	Path Coefficient	T Statistics	P Values
<b>Direct Effect</b>			
BU -> KK	-0,261	1,936	0,027
KOMP -> BU	-0,606	4,475	0,000
KOMP -> KK	0,389	2,509	0,006
KOMP -> SK	-0,780	16,220	0,000
SK -> BU	0,255	1,893	0,029

SK -> KK	-0,316	2,249	0,012
<b>Indirect Effect</b>			
KOMP -> SK -> BU	-0,199	1,875	0,031
KOMP -> BU -> KK	0,158	1,684	0,046
SK -> BU -> KK	-0,067	1,308	0,096
KOMP -> SK -> BU -> KK	0,052	1,282	0,100
KOMP -> SK -> KK	0,246	2,207	0,014

Source of data processed (2024)

The results of path analysis showed various significant relationships between the variables of burnout (BU), job satisfaction (KK), competence (KOMP), and job stress (SK). The significant negative relationship between COMP and BU (coefficient -0.605;  $p < 0.001$ ) indicates that increasing competence can reduce the level of burnout. Conversely, the negative relationship between BU and KK (coefficient -0.261;  $p = 0.029$ ) confirmed that the higher the level of burnout, the lower the job satisfaction. KOMP also had a positive effect on KK (coefficient 0.389;  $p = 0.005$ ), indicating that increasing competence has an impact on increasing job satisfaction. In terms of job stress, there is a positive relationship between SK and BU (coefficient 0.257;  $p = 0.021$ ), as well as a negative relationship between SK and KK (coefficient -0.316;  $p = 0.016$ ), indicating that high job stress contributes to burnout and decreases job satisfaction. On the indirect path of the effect of competence on job satisfaction through burnout, a p value of 0.045 was obtained with a T statistic of 1.704 and a positive path coefficient of 0.158, concluding that competence has an indirect effect on job satisfaction mediated by burnout. In this PLS model, burnout is proven to mediate the indirect effect of competence on job satisfaction. Meanwhile, in the indirect path of the effect of job stress on job satisfaction through burnout, the p value is 0.089 with a T statistic of 1.348, it can be concluded that job stress cannot indirectly affect job satisfaction mediated by burnout. In this PLS model, burnout is not proven to mediate the indirect effect of job stress on job satisfaction. These findings provide important insights into how competence and job stress mutually influence burnout and job satisfaction, which can serve as a basis for the development of workplace intervention programs.

The results showed that burnout has a significant negative effect on job satisfaction of medical personnel. This means that as the level of burnout increases, the job satisfaction of medical personnel tends to decrease. Previous research also shows that burnout, which is the result of work pressure and emotional exhaustion, can reduce motivation and satisfaction at work (Demerouti et al., 2020; Lee & Ashforth, 2019). In this context, medical personnel who experience high burnout will feel less engaged and dissatisfied with their tasks, thus reducing the quality of care they provide (Sonnentag et al., 2020; Wang et al., 2021).

On the other hand, the competence of medical personnel is shown to have a negative effect on the level of burnout. This suggests that medical personnel who have higher competence tend to experience lower levels of burnout. Research shows that individuals who have adequate skills and knowledge feel more confident and able to overcome challenges in



their work, thereby reducing the risk of burnout (Labrague et al., 2020; Zhu et al., 2019). This is in line with the theory that increasing competence can increase individual resilience to job stress (Bakker et al., 2018; Melchior et al., 2019).

Competence also has a positive effect on job satisfaction, meaning that medical personnel with high competence tend to feel more satisfied with their jobs. Research shows that good competence contributes to a sense of achievement and success at work (Agarwal et al., 2021; Gagné et al., 2020). Medical personnel who feel competent will be more motivated and engaged in their work, which in turn increases job satisfaction (Schaufeli et al., 2021; Ziegler et al., 2019).

Job stress has a positive influence on burnout, where an increase in job stress contributes to an increase in burnout levels. Research shows that high work pressure and excessive demands can lead to physical and mental fatigue (Hirsch et al., 2019; Li et al., 2020). Therefore, medical personnel who are in a stressful work environment are at high risk of experiencing more severe burnout.

On the other hand, job stress negatively affects job satisfaction, with increased job stress tending to decrease the satisfaction felt by medical personnel. Research has shown that prolonged stress can damage interpersonal relationships at work and reduce motivation (Folkman & Moskowitz, 2018; Nübold et al., 2020). Thus, it is important for management to identify sources of stress and create a more supportive work environment to improve the satisfaction and well-being of medical personnel.

## 6. Conclusions

The results showed that competence has a significant effect on job satisfaction of health workers. The higher the competence, the higher the job satisfaction. In addition, job stress and burnout also have a significant effect on job satisfaction, where increased stress and burnout correlate with decreased job satisfaction. These findings provide important insights for hospital management in designing competency development and stress management programs to improve the well-being of health workers in the Emergency Department.

A suggestion for hospital management is to develop training programs that focus on improving health workers' competencies, as this has been shown to increase job satisfaction. In addition, it is important to implement stress management strategies, such as providing psychological support and flexibility in working hours, to reduce stress and burnout levels. Hospitals are also advised to conduct periodic evaluations of health workers' job satisfaction and stress levels to identify areas that require further attention. With these measures, it is hoped that the welfare of health workers in the Emergency Department can be maintained and the quality of service can be improved.

**Funding:** “This research received no external funding”

**Acknowledgments:** Dr. Rokiah Kusumapradja, MHA, as the Head of the Master of Hospital Administration (MARS) Study Program at Esa Unggul University, who has provided encouragement and knowledge since the author entered college until he could complete this Journal. Dr. Rian Adi Pamungkas, M.N.S., P.H.N as Supervisor I for taking the time and thought as well as encouragement to be able to complete this Journal. Dr. Tjipto Rini, M.Kes, as Supervisor I has taken the time and thought as well as encouragement to be able to complete this Journal. Dr. Erry Yudhya Mulyani, S.Gz, M.Sc, as Supervisor II has taken the time and thought and encouragement to be able to complete this Journal. All Staff of Postgraduate Hospital Administration (MARS) and friends in class 14 who have helped a lot during lectures to the completion of writing this Journal. My family includes my beloved wife Amanda Patricia, SE, parents and siblings who always encourage the author to complete this Journal. The Buddha Tzu Chi Foundation which provided me with a scholarship to pursue my Master of Hospital Administration (MARS) education at Esa Unggul University. All research respondents, fellow doctors and nurses of IGD Tzu Chi Pantai Indah Kapuk Hospital for their willingness to help collect research data. Hopefully this research will benefit all of us, especially for the development of hospital science in Indonesia.

**Conflicts of Interest:** “The authors declare no conflict of interest.”

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