Difference In Performance Of Civil Servants Nurses And Contract Nurses In Inpatient Room General Hospital Of Meuraxa District Banda Aceh Aceh Province

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Abstract : *The problem of nurse performance is also seen from the satisfaction aspect of the patient and his family who are being treated in Meuraxa city's HOSPITAL in Banda Aceh, which is still slow nurse response to complaints submitted by nurses, lack of information from nurses who Received by patients and families about treatment and treatment procedures, some nurses are still less friendly and communication problems between nurses and patients are not yet effective. The research aims to determine the difference in performance of the nurse of civil servant and contract nurse in the inpatient room in Meuraxa City of Banda Aceh. The design of the research used is comparative study with a retrospective approach. The sample is an implementer nurse who works in the inpatient room of 51 people nurses civil servants and 51 people nurse contracts. The performance assessment is conducted by using The Six Dimension Scale of Nursing Performance in The form of self report by implementing nurse and assessment by head of inpatient room. The results of data collection are further analyzed univariate and sufficient using independent test test. The results showed there was a difference in performance based on self assessment results between a civil servant and a contract nurse (P = 0,0007) and there was a difference in performance based on the assessment result from the head of the nursing room Nurse contract (P = 0,00001). Based on the results of the research, it is expected to management of Meuraxa Kota Banda Ace RSUD in order to facilitate performance enhancement for nurses through guidance and supervision activities.There are differences in the performance of teaching/collaboration aspects, planning/evaluation and professional development based on self assessment results between a civil servant and a contract nurse in the inpatient room of Meuraxa Kota Banda Aceh in 2019 and there is No performance difference from the aspect of leadership, critical care and interpersonal relationships/communication based on self assessment of civil servants with a contract nurse in the inpatient area of Meuraxa City Banda Aceh In 2019.*
Keywords: *Performance, Nurse, Civil Servants, Contract.*

I.   Introduction

The increase in productivity and healthcare performance is very useful to ensure that health interventions are provided efficiently and at this point it is a major challenge for hospitals. Human Resources (HR) health is the most important asset in the service in the hospital. The performance of a hospital depends heavily on the knowledge, skills and motivation of healthcare personnel (Kearney, 2018). Competent health personnel, have the motivation and skills that are the foundation for better performance in health care institutions, especially hospitals (Tesfaye et al., 2015).

The performance of nurses has a direct effect on the productivity of a hospital (Platis et al., 2015). Swaartbooi Research (2016) shows several factors affecting the performance level of nurses. Job satisfaction, organizational commitment, level of education, experience, nurse moral, stress and fatigue related to work, support from co-workers, supervision and support feedback, training, clinical tools, recognition, job expectations, Work environment, motivation, incentive, knowledge, skills, promotion, remuneration and competency level are among many factors that affect the level of nurse performance (Tesfaye et al., 2015).

The most employed health worker in the hospital is a nurse. The hospital is the institution that employs the most nurses, compared to other institutions such as nursing homes, home care and doctors ' practice (Chu & Hsu, 2011). The Institute of Medicine reports that more than 5 million nurses work in the United States. Nurses are the most health care provider (54%) In the United States. Nurses are health professionals who spend most of the time with patients compared to other healthcare professionals, so the quality of care provided by nurses has a direct relationship with patient satisfaction (DeLucia et al., 2009).

Another problem with the performance of nurses in the hospital today is the problem of shortage of nurses and the absence of proper surveillance system for nurses (Yuxiu et al., 2011). In addition, the dissatisfaction of nurses with the hospital is also a problem as the impact of the lack of the nurse (Nantsupawat et al., 2016). Another problem with the performance of nurses today is as stated by Aiken et al. (2018), which is that the nurse contributes to the incidence of actual patient death can be prevented through the application of patient safety.

Nurses are also the greatest health workforce in Indonesia. Kemenkes (2018) says that the total number of HR health in hospitals in 2017 is 665,826 people consisting of 461,651 people of health workers (69.3%) and 204,175 people of health support personnel (30.7%). The proportion of the largest health worker is the nurse, which is 223,257 people (48.36%). (Kemenkes, 2018). The problem with the performance of hospital nurses in Indonesia is as illustrated in some previous studies (Abdullah et al., 2013) such as competency that still lacks, low work satisfaction, lack of motivation work , the weak supervision and leadership are not yet reliable. The other problems are as stated by Sutrisno et al. (2017), namely the problem of high workload, leadership of the head of care, incentives and promotion opportunities are lacking.

Performance issues were also experienced by nurses at the District public Hospital (RSUD) Meuraxa Kota Banda Aceh. Based on data from the field of employment of Meuraxa Hospital, it is known today the total number of all implementing nurses who work in the classroom in the inpatient area Meuraxa Kota Banda Aceh is 311 people, consisting of 53 civil servants (PNS) and 258 energy people Contract. Based on a performance report of 2018, it is known that the average attendance rate of nurse PNS is 95.7% and the nurse contracts are 99.2% (personnel, 2018). Further from the preliminary study results that researchers do in the form of interviews with nurses in the inpatient hospital Meuraxa, Banda Aceh, obtained information that most of the nurses who served in the hospitalization is a contract nurse so that Most of the work is done by contract nurses.

Researchers have also conducted preliminary studies on the performance of nurses from the aspect of patient satisfaction by conducting interviews with patients and their families who are being treated in several inpatient rooms of Meuraxa, Banda ACEH, related to the service The nursing they received and felt during their treatment. The results of the interview received some information about nursing care in the inpatient room in Meuraxa town of Banda ACEH according to some patients and their family, namely still slow the response of nurses to complaints presented by Nurses, lack of information from nurses received by patients and families on treatment and treatment procedures, some nurses are still less friendly and communication problems between nurses and patients are not yet effective.

The performance of nurses in the Meuraxa RSUD inpatient room in Banda Aceh from the aspect of patient satisfaction has also been examined by Silfia (2015). The results of this research show that the physical evidence dimension of nursing service is in the dissatisfied category (64.3%), the dimensions of nursing service reliability are in the category of dissatisfied (61.2%), the dimension of Nursing service responsiveness is in a satisfied category (51.0%), the dimensions of the guarantee of nursing service in the category of dissatisfied (61.2%), the dimension of nursing service empathy is in the category of dissatisfied (61.2%). Level of patient satisfaction on nursing care in room service RSUD Meuraxa, Banda Aceh, which is seen from the comparison between expectations and reality of all findings of the results showed that patients were not satisfied with the service a given nursing.

Said Research (2014) also shows that the motivation of the average nurse contracts is good (57.9%) And the motivation of average civil servant nurses (86.7%), as well as the performance level of nurses in providing good nursing care (94.1%). Statistical results showed that there was a difference in performance between nurse contracts and nurse civil servants in providing nursing care with the average nurse of civil servants having a higher performance than on the performance of nurse contracts (t = -2.713, p = 0,011).

Based on the explanation above, it can be assumed that the performance of the nurse at Meuraxa City Hospital in Banda Aceh still need to be analyzed especially related to the performance of the nurse who is the status of civil servants and contract nurses in providing nursing services to the patient.

The executive nurse working in a living room in Meuraxa town of Banda Aceh is 311 people, consisting of 53 civil servants (PNS) and 258 contract personnel based on performance reports in 2018, it is known that the average attendance rate Nurse PNS is 95.7% and the nurse contracts for 99.2%. Other problems related to the performance of nurses can be seen from complaints delivered by the patient and his family is related with nursing services in the inpatient room of Meuraxa town of Banda Aceh. These problems are related to nursing in the room in hospital RSUD Meuraxa, Banda Aceh, which is currently in the group in 2 (two) categories namely nurse civil servants and contract nurses. Therefore, the problem in this research is whether there is a difference in performance between the nurse of civil servants with contract nurses in the inpatient room of Meuraxa city Banda Aceh.

II.   Material And Methods

This research is a quantitative study with the design of comparative studies, namely wanting to analyze the difference in performance between nurse nurses and nurse contracts. The approach used is retrospective study, which is the performance to be assessed is the performance that has been implemented by the nurse in the past.

2.1.   Research Population

The population in this study is the entire executive nurse (civil servant and contract worker) who works in the inpatient room of Meuraxa town in Banda Aceh, amounting to 311 people, consisting of 53 civil servants (PNS) and 258 people with contract personnel (source: Field of employment of Meuraxa City Banda Aceh in 2018).

2.2.   Research Samples

The sample size in this study was calculated using the power analysis presented by Cohen (1992) in Chuan (2006). Cohen states that to perform statistical strength analysis, it needs to be considered: 1) the level of significance; 2) effect size; 3) sample size. The significant rate (α) for this study was 0.05. The Size effect (d) is determined based on the study of Al-Makhaita et Al. (2014) obtained a value of $\mu1 = 141.57$ and $\mu2 = 162.99$ with $SD1 = 39.7$ and $SD2 = 31.1$. Based on the Cohen formula for a different test research the two mean size effect (d) is obtained:

$$SDpooled = \sqrt{\frac{SD1^2 + SD2^2}{2}}$$

$$SDpooled = \sqrt{\frac{39{,}7^2 + 31{,}1^2}{2}}$$

$$SDpooled = \sqrt{\frac{2542{,}8}{2}}$$

$$SDpooled = 35{,}7$$

$$d = \frac{\mu1 - \mu2}{sd_{pooled}}$$

$$d = \frac{141{,}57 - 162{,}99}{35{,}7}$$

$$d = 0{,}60$$

Based on the results of the calculation obtained the size effect of 0.60 and according to Cohen (1992) in Chuan (2006) including the medium size effect (≥ 0.50). The next step is to specify the sample size (n) based on the significant level (α) and the size effect (d), which is with $\alpha = 0.05$ and $d = 0.60$ (medium size effect) based on the sample size table Cohen (Appendix 4) for the two-mean difference test studies on the two groups Unknown number of samples in this study were 51 nurses for each group (a group of civil servants and nurse group contracts) with a total sample of 102 implementing nurses.

2.3.   Analysis Unit

An analysis unit is a examined unit that can be individuals, groups, objects or a background of social events such as individual or group activity as the subject of research. The analysis Unit in this study is implementing nurses (excluding case manager, head of the chamber and Deputy Head of space) in the inpatient room of Meuraxa City Banda Aceh. The focus of analysis is the performance assessment of implementing nurses in the hospital.

III.   Results and Discussion

The data collection is conducted from 16th to 27th August 2019 in the inpatient room of Meuraxa city of Banda Aceh. Data collection is done by 2 (two) methods, namely 1) Self assessment by giving questionnaires to 51 people nurses and 51 nurses contract to fill; and 2) judgment of the head of the room. The Data that has been collected is further processed and analyzed using the statistics of univariate and bivariate. The results of the data analysis can be seen in the table below:

3.1. Characteristics of Respondents

The characteristics of nurse nurses and nurse contracts include age, gender, education and employment. The characteristics of nurses who are respondents can be seen in the following table:

Table 1. Frequency distribution characteristics Nurse in inpatient room Meuraxa Kota Banda Aceh Year 2019

No	caracter	PNS		Kontrak	
		F	%	f	%
Age					
1	20 - 35 Years	22	43,14	46	90,20
2	36 - 45 Years	24	47,06	5	9,80
3	46 – 60 Years	5	9,80	0	0,00
Gender					
1	Male	4	7,84	10	19,61
2	Female	47	92,16	41	80,39
Education					
1	Ners	13	25,49	10	19,61
2	S1 Kep.	7	13,73	3	5,88
3	D.IV Kep	6	11,76	2	3,92
4	D.III Kep	24	47,06	36	70,59
5	SKM	1	1,96	0	0,00
Employment Period					
1	≤ 5 Years	14	27,45	29	56,86
3	> 5 Years	37	72,55	22	43,14

According to table 1. It is known that most nurses, as many as 24 people (47.06%) Aged 36 – 45 years, 47 people (92.16%) Female gender, 24 persons (47.06%) Educated D. III Nursing and 37 people (72.55%) With a working period of > 5 years. Furthermore, it is also known that most nurse contracts, as many as 46 people (90.20%) Aged 20 – 35 years, 41 people (80.39%) Female gender, 36 people (70.59%) Educated D. III Nursing and 29 people (58.86%) With the employment ≤ 5 years.

3.2. Performance of Nurse Civil Servants

The performance of a valued nurse of civil servants is based on the Six-D Scale of Nursing Performance developed by Schwirian (1978) in Poorgholami et al. (2016), covering leadership, critical care, teaching/collaboration, planning/evaluation, relationship/interpersonal communication and professional development. The performance assessment of nurses is conducted with 2 (two) methods, namely self assessment and assessment by the head of the living room using the same instrument.

Self Assessment

Table 2. Performance frequency distribution of civil servants based on self-assessment in the admissions room of Meuraxa City Banda Aceh Year 2019 (n = 51)

No	category	Frekwensi (f)	Persentase (%)
1	Good	28	54,90
2	Bad	23	45,10
	total	51	100,00

Table 2. Describes the performance of Nurse PNS based on self assessment results and shows the results that the nurse's performance is mostly or 28 people (54.90%) Have good performance.

Tabel 3. Sub variable frequency distribution of nurse's performance by self-assessment in the inpatient area Meuraxa City Banda Aceh Year 2019 (n = 51)

No	Sub Variabel	Good		Bad	
		F	%	f	%
1	Leadership	26	50,98	25	49,02
2	Critical Care	32	62,75	19	37,25
3	Teaching/Collaboration	22	43,14	29	56,86
4	Planning/Evaluation	28	54,90	23	45,10
5	Interpersonal relationships/communication	19	37,25	32	62,75
6	Professional Development	21	41,18	30	58,82

Table 3. Describes the sub variable of the nurse's performance of PNS based on self assessment results and shows the results that the nurse's performance of PNS from the leadership aspect of 26 people (50.98%) Have a good performance, critical care aspect of 32 people (62.75%) Have good performance, teaching/collaboration aspects of 29 people (56.86%) Have poor performance, planning/evaluation aspects of 28 people (54.90%) Have a good performance, interpersonal relationships/communication aspects of 32 people (62.75%) has poor performance and professional development aspects of 30 people (58.82%) have poor performance.

Performance Based on the Assessment of the Head of Care

Table 4. Performance frequency distribution of civil servants based on the assessment of the head of inpatient room in the hospital RSUD Meuraxa Banda ACEH Year 2019 (n = 51)

No	Category	Frekwensi (f)	Persentase (%)
1	Good	25	49,02
2	Bad	26	50,98
	Total	51	100,00

Table 4. describes the performance of Nurse PNS based on the results of the head of nursing room and shows results that the performance of the nurse of civil servants of most or 26 people (50.98%) have poor performance.

Table 5. Sub variable frequency distribution of nurse civil servants based on the assessment of the head of hospitalization in the inpatient area Meuraxa City Banda Aceh Year 2019 (n = 51)

No	Aspect Assessment	Good		Bad	
		f	%	f	%
1	Leadership	29	56,86	22	43,14
2	Critical Care	25	49,02	26	50,98
3	Teaching/Collaboration	21	41,18	30	58,82
4	Planning/Evaluation	19	37,25	32	62,75
5	Interpersonal relationships/communication	22	43,14	29	56,86
6	Professional Development	19	37,25	32	62,75

Based on table 5. Known that the sub variables of the nurse's performance of PNS based on the assessment of the head of care, which is the leadership aspect of 29 people (56.86%) Have good performance, critical care aspect 26 people (50.98%) Have poor performance, teaching/collaboration aspects of 30 people (58.82%) Have poor performance, planning/evaluation aspects of 32 people (62.75%) Have poor performance, interpersonal relationships/communication aspects of 29 people (56.86%) Have poor performance and professional development aspects of 32 people (62.75%) have poor performance.

3.3. Performance Nurse Contracts

The performance of contract nurses is assessed based on the Six-D Scale of Nursing Performance developed by Schwirian (1978) in Poorgholami et al. (2016), which includes leadership, critical care, teaching/collaboration, planning/evaluation, relationship/interpersonal communication and professional development. The performance assessment of the contract nurse is also conducted with 2 (two) methods, which are self assessment and assessment by the head of nursing room using the same instrument.

Self Assessment

Table 6. Frequency distribution performance of nurse contract based on self-assessment in the inpatient room Meuraxa City Banda Aceh Year 2019 (n = 51)

No	Category	Frekwensi (f)	Persentase (%)
1	Good	27	52,94
2	Bad	24	47,06
	Jumlah	51	100,00

Table 6. Represent the performance of a contract nurse based on self assessment results and show the results that the performance of a contract nurse of most or 27 people (52.94%) Have good performance.

Table 7. Sub variable frequency distribution performance of nurse Self Assessment in inpatient room RSUD Meuraxa Banda Aceh Year 2019 (n = 51)

No	Aspect Assessment	Good		Bad	
		f	%	f	%
1	Leadership	31	60,78	20	39,22
2	Critical Care	30	58,82	21	41,18
3	Teaching/Collaboration	27	52,94	24	47,06

4	Planning/Evaluation	25	49,02	26	50,98
5	Relationships/Interpersonal communication	28	54,90	23	45,10
6	Professional Development	24	47,06	27	52,94

Table 7. Describes a sub-variable of the nurse performance of the contract based on self assessment results and shows the results that the performance of the nurse contracts from the leadership aspects of 31 people (60.78%) Have a good performance, critical care aspect 30 people (58.82%) Good performance, teaching/collaboration Aspect 27 people (52.94%) Have good performance, planning/evaluation aspects of 26 people (50.98%) Have poor performance, communication aspects/interpersonal communications 28 people (54.90%) Good performance and professional development aspects of 27 people (52.94%) have poor performance.

Performance Based on the assessment Of the Head of Care
Table 8. Frequency distribution performance of nurse contract based on assessment head of hospitalization of inpatient room RSUD Meuraxa Banda Aceh Year 2019 (n = 51)

No	Category	Frekwensi (f)	Persentase (%)
1	Good	28	54,90
2	Bad	23	45,10
	Total	51	100,00

Table 8, describing the performance of nurse contracts based on the results of the assessment from the head of the nursing room and shows the results that the performance of a contract nurse of most or 28 people (54.90%) Have good performance.

Table 9. Distribution of SUB-variable frequency performance of nursing contracts based on assessment head of hospitalization in inpatient room RSUD Meuraxa Banda Aceh Year 2019 (n = 51)

No	Aspect Assessment	Good		Bad	
		f	%	f	%
1	Leadership	19	37,25	32	62,75
2	Critical Care	32	62,75	19	37,25
3	Teaching/Collaboration	27	52,94	24	47,06
4	Planning/Evaluation	24	47,06	27	52,94
5	Interpersonal relationships/Communication	27	52,94	24	47.06
6	Professional Development	32	62,75	19	37,25

Table 9. Described sub-variable performance of nurse contracts based on the results of the assessment from the head of the nursing room and showed the results that the performance of nurse contracts from the leadership aspect of 62.75 32 Have poor performance, critical care aspect of 32 people (62.75%) Good performance, teaching/collaboration Aspect 27 people (52.94%) Good performance, the planning/evaluation aspect of 27 people (52.94%) Have a poor performance, a relationship/interpersonal communication aspect of 27 people (52.94%) Have good performance and professional development aspects of 32 people (62.75%) Have good performance.

3.4. Uji Normalitas
Test data normality is conducted on performance assessment data based on self assessment and based on assessment by the head phone. Test the normality of data in this study using the Shapiro Wilk test. The result criteria of this test is normal distributed data when the value of Prob > Z > 0.05 and the data is not distributed normally if the value of Prob > Z ≤ 0.05. Test results of normality data can be seen as follows:

Test the Normality of Nurse Performance Data Based on Self Assessment
Table 10. Test results normality of nurse performance Data based on self-assessment in the inpatient area of Meuraxa City Banda Aceh Year 2019

Variabel/Sub Variabel	Obs	W	V	z	Prob>z
Performance	102	0.98186	1.523	0.934	0.17505
a. Leadership	102	0.99571	0.360	-2.267	0.98832
b. Critical Care	102	0.98742	1.056	0.121	0.45178
c. Teaching/Collaboration	102	0.96935	2.572	2.098	0.01794
d. Planning/Evaluation	102	0.99177	0.691	-0.822	0.79453
e. Interpersonal relationships/Communication	102	0.99211	0.662	-0.915	0.81992
f. Professional Development	102	0.99379	0.522	-1.445	0.92579

Based on table 10. It is known that the data of the nurse's performance variable based on self assessment has obtained a Prob > Z value of 0.17505 > 0.05 so that it can be concluded that the data is distributed normally. It is meaningful to analyze the difference in performance based on self assessment between civil servant nurses and contract nurses can be used parametric test, which is Independent t test. Furthermore, the test result normality of data against 6 sub-variables of performance, it is known that 5 sub variavel, namely leadership, critical care, planning/evaluation, relationship/interpersonal communication and professional development obtained the value of Prob > Z > 0.05, so that the data is declared to be distributed normally and meaningful analysis of sub-variable differences in performance based on self assessment of civil servants and contract nurses can be used parametric test, ie Independent t test. While the teaching/collaboration sub-variables derive a Prob > Z value of 0.01794 < 0.05, so the data declared is not distributed normally and means analysis of the difference in sub-variable performance based on self assessment between civil servants and contract nurses using a non parametric test, the Mann Whitney U Test test.

Test The Normality of Nurse Performance Data Based On The Assessment of the Head

Based on table 11. Below, it is known that the data on the performance variable of nurses based on the assessment of the head of care obtained the value of > Z Prob of 0.00455 < 0.05 so that it can be concluded that data is not distributed normally. It means that in order to analyse performance differences based on the assessment of the head of the nursing room between civil servants and contract nurses can be used non parametric tests, that is Mann Whitney U Test. Further, test results normality of data against 6 sub variables of performance, it is known that 4 sub variavel, namely critical care, teaching/collaboration, planning/evaluation and professional development obtained the value of Prob > Z > 0.05, so the data is declared to be distributed normally and meaningful analysis Differences sub Performance variables based on the assessment of the head of the nursing room between civil servants and contract nurses can be used parametric test, which is Independent t test. While 2 other sub-variables, namely leadership and interpersonal relations/communication obtained the value of Prob > Z < 0.05, so the data declared not distributed normally and meaningful analysis of the differences sub-variables performance based on the assessment of the head of the nurse between civil servants and contract nurses using a non parametric test, the Mann Whitney U Test test.

Table 11. Test result normality of nurse performance Data based on assessment head of hospitalization in inpatient room RSUD Meuraxa Banda Aceh Year 2019

Variabel/Sub Variabel	Obs	W	V	z	Prob>z
Performance	102	0.96145	3.236	2.608	0.00455
a. Leadership	102	0.96398	3.023	2.457	0.00701
b. Critical Care	102	0.98317	1.413	0.767	0.22151
c. Teaching/Collaboration	102	0.98353	1.383	0.719	0.23597
d. Planning/Evaluation	102	0.98185	1.523	0.935	0.17500
e. Interpersonal relationships/Communication	102	0.95774	3.547	2.812	0.00246
f. Professional Development	102	0.97865	1.792	1.295	0.09761

3.5. Performance Differences Nurse Civil Servant and Contract Nurse

The difference in performance between civil servant nurses and contract nurses is analyzed based on the results of self-assessment and assessment of the head of the nursing room as follows:

Performance Differences Based On Self-Assessment Results

Analysis results for performance differences based on self assessment results among civil servants with contract nurses can be seen in the following table:

Table 12. Performance difference between a civil servant nurse with a Self Assessment in inpatient living room in the Hospital of Meuraxa Banda Aceh in 2019 (n = 51)

No.	Nurse	n	Mean	Mean Difference	P Value
1	Civil servants	51	170,2353	-4,254902	0,0007
2	Contracts	51	174,4902		

Table 12. Indicates that the performance score mean for nurse PNS is 170.2353 and the nurse contracts for 174.4902. Based on these results, it is known the mean difference performance value is-4.254902 which means there is a difference in the mean score, which is the mean of nurse performance of civil servants lower than the contract nurse. The results of known hypothesis tests P Value of 0.0007 < 0.05, then Ho rejected that means there is a significant difference in performance based on self assessment results between a civil servant with a contract nurse at the inpatient room of Meuraxa city of Banda Aceh in 2019.

Table 12. Indicates that the performance score mean for nurse PNS is 170.2353 and the nurse contracts for 174.4902. Based on these results, it is known the mean difference performance value is-4.254902 which

means there is a difference in the mean score, which is the mean of nurse performance of civil servants lower than the contract nurse. The results of known hypothesis tests P Value of 0.0007 < 0.05, then Ho rejected that means there is a significant difference in performance based on self assessment results between a civil servant with a contract nurse at the inpatient room of Meuraxa city of Banda Aceh in 2019.

Table 13. Difference between Sub-variables of performance between a civil servant nurse with a Self Assessment in inpatient living room in Meuraxa town of Banda Aceh in 2019 (n = 51)

Sub Variabel Kinerja	n	Mean	Mean Difference	P Value
1. Leadership				
PNS	51	17,39216	-0,1960784	0,5330
Contract	51	17,58824		
2. Critical Care				
PNS	51	24,90196	0,3137255	0,4272
Contract	51	24,58824		
3. Teaching/Collaboration				
PNS	51	32,96078	-3,254902	0,00001
Contract	51	36,21569		
4. Planning/Evaluation				
PNS	51	24,43137	1,058824	0,0146
Contract	51	23,37255		
5. Interpersonal Relationships/Communication				
PNS	51	39,31373	-0,8235294	0,1026
Contract	51	40,3725		
6. Professional Development				
PNS	51	31,23529	-1,352941	0,0034
Contract	51	32,58824		

Table 13. Shows that the mean score performance of the leadership aspects based on self-assessment results (self assessment) for civil servants is 17.39216 and nurse contracts of 17.58824. Based on these results, it is known that the value of mean difference performance aspect of the leadership is-0.1960784 which means there is a difference in the mean score, namely the performance score of the leadership aspect of nurse civil servant lower than the contract nurse. The results of the hypothetical test known as P Value 0.5330 > 0.05, Ho accepted that means there is no difference in performance of the leadership aspect based on self assessment results between a civil servant and a contract nurse at RSUD inpatient room Meuraxa City Banda Aceh in 2019.

The subsequent analysis results on table 5.13 showed that the mean score performance aspect of critical care based on self-assessment (self assessment) for civil servant nurses was 24.90196 and a contract nurse of 24.58824. Based on these results, it is known that the mean difference performance aspect of critical care is 0.3137255 which means there is a difference in the mean score, i.e. performance score aspect of critical care nurse for civil servants is greater than nurse contract. The results of known hypothesis tests P Value of 0.4272 > 0.05, then Ho accepted that means there is no difference in performance aspects of critical care based on self assessment results between a civil servant nurse with a contract nurse at Inpatient hospital Meuraxa City Banda Aceh in 2019.

Table 13. Also shows the mean score performance of the teaching/collaboration aspect based on the self assessment result for the nurse's civil servants is 32.96078 and a contract nurse of 36.21569. Based on these results, it is known that the value of mean difference performance aspect teaching/collaboration is-3.254902 which means there is a difference in the mean score, namely the performance score of the teaching/collaboration aspect of nurse civil servants is lower than the contract nurse. The result of a known hypothesis test P Value of 0.00001 < 0.05, then Ho rejected that means there is a significant difference in performance aspects of teaching/collaboration based on self assessment results between a civil servant nurse with a contract nurse in the inpatient room of Meuraxa Kota Banda Aceh in 2019.

Further analysis results in table 13. Indicate that the performance score mean of the planning/evaluation aspect based on the self assessment results for civil servants is 24.43137 and nurse contracts of 23.37255. Based on these results, it is known that the mean difference performance aspect of planning/evaluation is 1.058824 which means there is a difference in the mean score, namely the performance score of the planning/evaluation aspect of nurse nurses greater than the contract nurse. The result of a known hypothesis test P Value of 0.0146 < 0.05, then Ho rejected that means there is a significant difference in performance aspects of planning/evaluation based on self assessment results between a civil servant nurse with a contract nurse in the inpatient room of Meuraxa Kota Banda Aceh in 2019.

Table 13. Furthermore also showed the result of the mean performance score aspect relation/interpersonal communication based on self assessment results for civil servants is 39.31373 and nurse contracts of 40.3725. Based on these results, it is known that the value of mean difference performance aspect

relations/interpersonal communication is-0.8235294 which means there is a difference in the mean score, namely the performance score of aspects of relationship/interpersonal communication nurse civil servants lower than the nurse contract. Hypothesis test results known P Value for 0.1026 > 0.05, then Ho accepted that means there is no difference in the performance aspects of interpersonal relationships/communication based on self assessment results between a civil servant nurse with a contract nurse in the inpatient room of Meuraxa City Banda Aceh in 2019.

Further analysis results in table 13. Show that the mean score performance aspect of professional development based on self assessment results for civil servants is 31.23529 and nurse contracts of 32.58824. Based on these results, it is known that the value of mean difference performance aspect of professional development is-1.352941 which means there is a difference in mean score, i.e. performance score aspect of professional development of nurse civil servant is lower than nurse contract. The results of known hypothesis tests P Value of 0.0034 < 0.05, then Ho rejected that means there is a significant difference in performance aspects of professional development based on self assessment results between a civil servant nurse with a contract nurse in the inpatient room of Meuraxa City Banda Aceh in 2019.

IV. Discussion

The results of the study in table 2. It is noted that the performance of civil servants based on self assessment results of most or 54.90% have good performance. Furthermore, in table 5.6 is also known that the performance of the contract nurse based on self assessment results of a large part or 52.94% have a good performance also. Hypotheses test results on table 5.12 are known that the performance score mean for the nurse of PNS is 170.2353 and the nurse contracts for 174.4902. Based on these results, it is known the mean difference performance value is-4.254902 which means there is a difference in the mean score, which is the mean of nurse performance of civil servants lower than the contract nurse. The results of known hypothesis tests P Value of 0.0007 < 0.05, then Ho rejected that means there is a significant difference in performance based on self assessment results between a civil servant with a contract nurse at the inpatient room of Meuraxa city of Banda Aceh in 2019.

The results of the above research can be concluded that there is a difference in performance between the nurse of civil servants with contract nurses, where the performance of the nurse contract has a higher average value compared to the nurse PNS. This conclusion is different from that expressed by Yuxiu et al. (2011), which is the performance of professional nurses in general is better when compared with newly worked nurses. However, Al-Makhaita et al. (2014) expressed opinion in line with the results of the study, which is 60% of newly-employed nurses have better nursing performance, while long-working nurses generally have Poor performance.

Many factors cause the difference in performance between nurse civil servant with contract nurse. Alejandro (2013) says that statistically significant performance differences between beginner nurses with experienced nurses. Furthermore Urus et al. (2018) identifies factors that affect the performance of nursing in hospitals is motivation, work rotation, appreciation and punishment. Factors that do not affect the performance of nursing in hospitals are age, employment, work discipline. Work rotation and punishment are the dominant factors affecting the performance of nurses in hospitals.

The results of the study on table 3. Shows that 50.98% of nurse PNS have good performance from the leadership aspects based on self assessment results and on the table 5.7 It is known that 60.78% of nurse contracts also have good performance from the leadership aspects Self assessment. Further from the results of the analysis on the table 5.13 it is known that the performance score mean of the leadership based on self-assessment results (self assessment) for the nurse of civil servants is 17.39216 and the nurse contracts 17.58824. The results of the hypothetical test known as P Value 0.5330 > 0.05, Ho accepted that means there is no difference in performance of the leadership aspect based on self assessment results between a civil servant and a contract nurse at RSUD inpatient room Meuraxa City Banda Aceh in 2019.

The results of the above research can be concluded that from the aspect of leadership between civil servants and nurse contracts there is no performance difference of self assessment results. This conclusion is based on the requirements of nursing energy rekruitment which requires that nurses have the ability of clinical leadership in providing nursing care. The results of this research are in line with the proposed by Daly et al. (2014), which is effective clinical leadership is a hospital treatment requirement, including system performance, achievement of health reform objectives, providing Timely, integrity and efficiency of the system, and is an integral component of nursing care systems. This opinion is also supported from the research results of al-Makhaita et Al. (2014) which shows the results that among nurses working in primary care level with nurses in the care level of the secondary has no difference in assessment of performance Both, where between the two nurses at each level of treatment assess their performance well.

The results of self-assessment of the same aspect of leadership between civil servants and nurse contracts are also related to the level of nursing education. It is as shown in table 5.1 i.e. most of the or 47.06%

educated PNS nurses D. III Nursing, as well as contract nurses who are largely or 70.59% educated in D. III Nursing. The level of education significantly has an important effect on performance. It is as stated by Al-Makhaita et al. (2014), a bachelor's degree (73.4%) Statistically related to a significant level of performance among nurses in primary and secondary level care.

The results of the study on table 3. Shows that 62.75% of civil servants have good performance from critical care aspects based on self assessment results and on the table 5.7 It is known that 58.82% of nurse contracts also have good performance from critical care aspects Self assessment. Further from the results of the analysis on the table 5.13 is known that the mean score performance aspect of critical care based on the results of self-assessment (self Assessment) for nurse PNS is 24.90196 and nurse contracts of 24.58824. The results of known hypothesis tests P Value of 0.4272 > 0.05, then Ho accepted that means there is no difference in performance aspects of critical care based on self assessment results between a civil servant nurse with a contract nurse at Inpatient hospital Meuraxa City Banda Aceh in 2019.

The results of the above research can be concluded that from aspects of critical care between civil servants and nurse contracts there is no performance difference of self assessment results. These results differed from the opinion of Mokhtar & Mohamed (2015), i.e. the level of performance of the new critical care nurse at moderate level due to lack of experience to provide effective treatment for patients, because the performance of their work is based On work experience and qualifications. However senior qualified nurses have a good level of critical care performance above average. The research is also different from the opinions expressed by Al-Makhaita et al. (2014), i.e. primary health care level nurses assess higher average performance in subscales of teaching and communication, while leadership performance And the critical care Skinerja has a low average.

Referring from both opinions above, it can be assumed that the performance of critical care is closely related to the work experience of a nurse. This statement is in line with the characteristics of nurses depicted in Table 5.1 and table 5.2. Based on the table it is known that most or 72.55% of civil servants have a working period of > 5 years, while the nurse contracts of most or 58.86% have a working period of ≤ 5 years. It also corresponds to the study conducted by Olatunji & Mokuolu (2014), which shows the results that there is a significant influence of the working period on the performance of nurses and physicians [F (2.190) = 115.6, p < 0.01] and work stress experience also [F (2.190) = 163.71, p <. 01]. Therefore, the hypothesis that states that the employment will have a significant effect on the performance of nurses and physicians.

V.   Conclusion

There is a difference in the performance of teaching/collaboration aspects, planning/evaluation and professional development based on self assessment by the nurses of civil servants with contract nurses in the inpatient area of Meuraxa City of Banda Aceh in 2019. There is no difference in the performance of leadership aspects, critical care and interpersonal relationships/communication based on self assessment by the nurse of civil servants with contract nurses in the inpatient room of Meuraxa Kota Banda Aceh in 2019. There is a difference in performance from the aspects of leadership, teaching/collaboration, planning/evaluation and interpersonal relations/communication based on the results of the assessment of the head of the nursing room with civil servants with contract nurses in the inpatient area of Meuraxa City of Banda Aceh in 2019. There is no difference in the performance of critical care aspects and professional development based on the results of the assessment from the head of the nursing room of civil servants with the contract nurse in the inpatient area of Meuraxa City Banda Aceh in 2019.

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