

# The Impact of Health Worker Rotation and Adaptation on the Quality of Patient Services in the Inpatient Ward of Kendari City Hospital

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## ABSTRACT

The increase in the number of patients and the complexity of services in hospitals require health workers to be able to adapt quickly, including when there is a work rotation. However, suboptimal rotation and adaptation have the potential to reduce the quality of service and patient satisfaction. This study aims to determine the impact of rotation and adaptation of health workers on the quality of patient services in the inpatient room of Kendari City Hospital. The study used a quantitative design with survey methods and a cross-sectional approach. The research sample was 40 health workers who had undergone rotation, taken by total sampling technique. Data were collected using questionnaires related to service quality, the impact of rotation, and adaptation of health workers, then analyzed using the chi-square test. The results showed that the majority of respondents rated service quality (57.5%), rotation (52.5%), and adaptation (55.0%) in the poor category. Statistical tests showed a significant relationship between rotation ( $p=0.000$ ) and adaptation ( $p=0.000$ ) with the quality of patient care. This study concludes that suboptimal rotation and adaptation have

a negative impact on service quality. It is recommended that hospitals implement competency-based rotation planning, work adaptation orientation programs, and periodic evaluations to improve service quality.

**Keywords:** Healthcare Worker Rotation, Adaptation, Patient Service Quality

## INTRODUCTION

As hospital services continue to develop and improve, healthcare workers are required to adapt to changes in their work environment. They must also adjust to evolving service demands and the dynamics of job rotation Hidayat et al. (2025).

Based on World Health Organization data, 5.7 to 8.4 million people died due to low quality of health services. In low-income countries, namely Kenya, the patient satisfaction rate is 40.4% and in Bakhtapur, India, the patient satisfaction rate is 34.4% (WHO, 2020). In Indonesia, patient satisfaction rates were 42.8% in Central Maluku, 44.4% in West Sumatra and 73.68% in Southeast Sulawesi in 2020, and there was a decrease in 2021 to 73.10%. Based on this data, it can be concluded that the patient satisfaction rate is still relatively

low, so that patient satisfaction is a problem both in Indonesia and abroad (SKI, 2023). The results of a preliminary study based on the personnel data of the Kendari City Regional General Hospital are known that the number of health workers on duty in the inpatient room is 179 people. The results of the initial survey conducted by the researcher on April 21, 2024 to one of the heads of the Lavender and Orchid inpatient room at the Kendari City Hospital found that there were 3 health workers who were considered unresponsive in providing health services, 2 health workers who rarely wrote nursing documentation, the writing of patient assessments in the room was incomplete and not meticulous, as many as 4 nurses said that they had service colleagues who were not on time in carrying out tasks well according to responsibilities. An interview about the leadership of hospital management 6 nurses said that the leadership only directed and reprimanded nurses who did not work according to *standard operating procedures*

(SOPs), but there were more *punishments* than *rewards* to officers who had good performance.

Based on the description above, the researcher is interested in conducting research entitled "The Impact of Rotation and Adaptation of Health Workers on the Quality of Patient Services in the Inpatient Room of Kendari City Hospital".

## MATERIALS & METHODS

This research method is quantitative research using a survey method, which is to obtain data from certain natural places. This study uses a cross-sectional design, which is an observational approach carried out to determine the relationship between independent variables and dependent variables by collecting data at a certain time or period simultaneously. (Sugiyono, 2021).

## RESULT

### 1. Univariate Analysis

#### 1) Respondent Characteristics

Table 4.1 Frequency Distribution Characteristics by age

| Age   | Frequency (f) | Present (%) |
|-------|---------------|-------------|
| 25-30 | 10            | 25,0        |
| 31-35 | 16            | 40,0        |
| 36-40 | 14            | 35,0        |
| Total | 40            | 100         |

Based on table 4.1, it is explained that respondents aged 31-35 years old there are 16 respondents (40.0%),

Table 4.2 Frequency Distribution Characteristics based on working time

| Length of Work (year) | Frequency (f) | Present (%) |
|-----------------------|---------------|-------------|
| 1-5                   | 20            | 50,0        |
| 6-10                  | 16            | 40,0        |
| 11-15                 | 4             | 10,0        |
| Total                 | 40            | 100         |

Based on table 4.2, it shows that the number of respondents is more, namely 1-5 years of service as many as 20 (50.0%),

Table 4.3 Frequency Distribution of Characteristics by Gender

| Gender | Frequency (f) | Present (%) |
|--------|---------------|-------------|
| Women  | 34            | 85,0        |
| Male   | 6             | 15,0        |
| Total  | 40            | 100         |

Based on table 4.3, it is explained that the most respondents are women as many as 34 respondents (85.0%),

**Table 4.4 Frequency Distribution of Characteristics by marital status**

| Marital Status | Frequency (f) | Present (%) |
|----------------|---------------|-------------|
| Unmarried      | 5             | 12,5        |
| married        | 35            | 87,5        |
| Total          | 40            | 100         |

*Source: Primary Data, July 2025*

Based on table 4.4, it is explained that the most respondents are married, namely 35 respondents (87.5%),

## 2) Research Variables

**Table 4.5 Frequency Distribution of Research Variables**

| Quality of service | n  | Present % |
|--------------------|----|-----------|
| Less               | 23 | 7,5       |
| Good               | 17 | 42,5      |
| Impact of rotation | n  | Present % |
| Less               | 21 | 52,5      |
| Good               | 19 | 47,5      |
| Adaptation impact  | n  | Present % |
| Less               | 22 | 55,0      |
| Good               | 18 | 45,0      |

*Source: Primary Data, July 2025*

Based on Table 4.5, it shows that based on the quality of service, there are 23 respondents (57.5%) with categorically lacking, based on the impact of rotation, there are 21 respondents (52.5%) categorically lacking and the impact of adaptation there are 22 respondents (55.0%) categorically lacking.

## 2. Bivariate Analysis

The results of the study on the relationship between the impact of rotation and adaptation on the quality of patient services in the inpatient room of Kendari City Hospital can be seen in the following table:

**Table 4.6 The relationship between the impact of rotation on the quality of patient care**

| Impact of rotation | Quality of patient service |             |           |             | Total     |            | <i>p value</i> |
|--------------------|----------------------------|-------------|-----------|-------------|-----------|------------|----------------|
|                    | Good                       |             | Less      |             |           |            |                |
|                    | n                          | %           | n         | %           | n         | %          |                |
| Less               | 19                         | 90,5        | 2         | 9,5         | 21        | 100        | 0,000          |
| Good               | 4                          | 21,1        | 15        | 78,9        | 19        | 100        |                |
| <b>Total</b>       | <b>23</b>                  | <b>57.5</b> | <b>17</b> | <b>42.5</b> | <b>40</b> | <b>100</b> |                |

*Source: Primary Data, July 2025*

Based on the results of the study in Table 4.6, it shows that most of the respondents rated the impact of rotation as low as 21 people and 19 people rated it good. Then of the 21 respondents, who assessed the impact of rotation as low but the quality of service was good, as many as 19 (90.5%) respondents and only 2 (9.5%) respondents rated the quality of service as lacking. Then of the 19 respondents, who assessed the impact of good rotation and also the quality

of patient service were good, 4 (21.1%) respondents and as many as 15 (78.9%) respondents assessed the quality of patient service as lacking. These results show that most respondents who rated the impact of rotation less likely still gave a positive assessment of the quality of service. However, respondents who rated the impact of good rotation tended to have a more diverse assessment of service quality.

**Table 4.7 The relationship between the impact of adaptation on the quality of patient care**

| Adaptation impact | Quality of patient service |      |      |      | Total |     | p value |
|-------------------|----------------------------|------|------|------|-------|-----|---------|
|                   | Good                       |      | Less |      |       |     |         |
|                   | n                          | %    | n    | %    | n     | %   |         |
| Less              | 19                         | 86,4 | 3    | 13,6 | 22    | 100 | 0,000   |
| Good              | 4                          | 22,2 | 14   | 77,8 | 18    | 100 |         |
| Total             | 23                         | 57,5 | 17   | 42,5 | 40    | 100 |         |

*Source: Primary Data, July 2025*

Based on the results of the study in Table 4.7, it shows that most of the respondents rated the impact of adaptation as low as 22 people and 18 people rated it good. Then of the 22 respondents, who assessed the impact of adaptation as less but the quality of service was good, as many as 19 (86.4%) respondents and only 3 (13.6%) respondents assessed the quality of service as lacking. Then of the 18 respondents, who assessed the impact of good adaptation and also the quality of patient service were good, 4 (22.2%) respondents and as many as 14 (77.8%) respondents assessed the quality of patient service as lacking. The results of the study show that the quality of service can be influenced by several factors, such as physical evidence, reliability, responsiveness, assurance, and empathy. Therefore, even though the impact of adaptation is less, the quality of service can still be assessed well if these other factors are met.

## DISCUSSION

Discuss findings of your study with relevant reasoning along with proper citations/references.

### 1. Quality of Patient Service in the Inpatient Room of Kendari City Hospital

The results showed that most of the respondents assessed the quality of patient service in the poor category, namely 23 respondents, while 17 respondents assessed it in the good category. This shows that the quality of service has not fully met the service standards expected by patients. The quality of service is influenced by the competence of health workers, therapeutic communication, timeliness of services, availability of facilities, and attitudes in providing services. Service dimensions such as

reliability, responsiveness, assurance, empathy, and tangibles greatly determine patients' perception of service quality.

Explicitly assessed reliability, responsiveness, assurance, empathy, and physical facilities in relation to patient satisfaction. The results showed a significant relationship between all these dimensions and patient satisfaction, including responsiveness ( $p=0.017$ ) and empathy ( $p<0.001$ ) (Elvina & Lastri, (2023). In addition, (Mujiarti et al. (2024) also found that nurses' facilities and communication are determining factors for patient satisfaction. They concluded that the sub-optimal quality of service in this study indicates the need to improve aspects of responsiveness, communication clarity, and discipline in the implementation of tasks.

### 2. Rotation of Health Workers in the Inpatient Room of Kendari City Hospital

The results showed that 21 respondents rated the implementation of health worker rotation in the category as not good, while 19 respondents rated it as good. Poorly structured work rotations can cause healthcare workers to have difficulty adapting to new work procedures, service flows, and patient characteristics. Rotation should aim to increase knowledge, reduce boredom, and encourage competency development. However, when done without adequate training and orientation, rotation actually causes work stress and decreased performance.

This research is in line with (Zhafira et al., 2025) which states that rotation without preparation leads to a temporary decrease in competence in health workers. In addition, (Selina, (2024) also explain that rotation has a positive impact such as increased

experience, but can have a negative impact if it is done without considering individual readiness and unit needs. So, it can be concluded that the rotation carried out has not fully supported the improvement of service quality.

### **3. Adaptation of Health Workers in the Inpatient Room of Kendari City Hospital**

The results showed that 22 respondents had work adaptation in the poor category, while 18 respondents were in the good category. The process of work adaptation requires time and social support and supervision. Poor adaptation can have an impact on stress, emotional exhaustion (burnout), decreased self-confidence, and decreased ability to perform clinical actions and therapeutic communication.

This research is in line with (Astawa et al. (2024) which found that nurses' adaptability is related to safety and performance of nursing services. Inability to adapt will hinder work effectiveness and reduce patient satisfaction. Thus, adaptation is a key factor that must be considered, especially when there is a move of units or changes in workload.

### **4. The Impact of Health Worker Rotation on the Quality of Patient Services in the Inpatient Room of Kendari City Hospital**

The results of this study showed that most respondents perceived the implementation of health worker rotation in the inpatient wards as less than optimal. Although job rotation can provide new experiences and broaden professional competencies, its implementation may also create adaptation challenges during the transition period, potentially affecting service quality. The chi-square test revealed a statistically significant relationship between health worker rotation and patient service quality ( $p = 0.000$ ). This finding indicates that well-planned, structured, and competency-based rotation programs can enhance nurses'

ability to deliver timely, accurate, and responsive care to patients.

These findings are consistent with Yulia Sasmita et al. (2023), who found that well-planned job rotation can improve nurses' competence by providing diverse clinical experiences and opportunities for knowledge exchange. Job rotation may also increase job satisfaction and occupational engagement Platis et al. (2021). However, inadequate preparation and training may increase rotation-related stress and negatively affect nursing work performance Jeong et al. (2023). Therefore, job rotation should be supported by systematic planning, adequate training, and continuous evaluation to maximize its benefits for nurses.

In addition, a study by Kadhim Thaeir Younus (2024) reported that healthcare professionals who experience structured job rotation demonstrate improved clinical competence, communication skills, and adaptability, which ultimately contribute to better patient outcomes. Likewise, research conducted by Jeong et al., (2023) found that adequate organizational support during job transitions enhances nurses' work performance, confidence, and quality of care delivery. These findings emphasize the importance of providing orientation programs and mentoring systems for healthcare workers assigned to new units.

Furthermore, job rotation can serve as a strategic human resource management approach to improve workforce flexibility and organizational resilience. When employees are exposed to different units and responsibilities, they develop broader knowledge and stronger problem-solving skills, enabling them to respond more effectively to complex patient needs. Conversely, poorly managed rotation may increase work stress and reduce employee engagement, thereby negatively affecting service quality.

Therefore, it can be concluded that health worker rotation implemented systematically, based on competencies, and supported by training, mentoring, and periodic evaluation

programs can significantly improve patient service quality. On the other hand, sudden rotations without adequate preparation may reduce service effectiveness in the inpatient wards of Kendari City Hospital.

## 5. The Impact of Health Worker Adaptation on the Quality of Patient Services in the Inpatient Room of Kendari City Hospital

The results of the study showed that most respondents assessed that the adaptability of health workers was still not good. This condition indicates that the post-rotation adaptation process has not been fully effective, resulting in a decrease in the quality of patient services. Based on the results of the chi-square test,  $p = 0.000$  was obtained, which means that there is a significant relationship between the adaptability of health workers and the quality of patient service. This indicates that the better the adaptability of health workers, the higher the quality of services provided.

This research is in line with the findings of Astawa et al. (2024) which shows a strong relationship between nurses' work adaptability and the implementation of occupational safety and health (K3), where nurses who have good adaptation are better able to provide effective, safe, and quality services. Research by Ribeiro et al. (2019) also emphasized that nurses' adaptability is directly related to reducing the rate of work accidents and improving patient recovery, because nurses are able to adapt physically and emotionally to the dynamics of the hospital work environment. In addition, according to Tsandila-Kalakou et al. (2023), adaptation is a process of self-adjustment to the environment so that individuals can function effectively and achieve balance with work situations. In the context of hospitals, health workers who are able to adapt well will be better prepared to face system changes, patient demands, and dynamic workloads, so as to maintain the quality of service.

Thus, it can be concluded that the adaptation of health workers plays an important role in

maintaining the stability and effectiveness of services in hospitals. Good adaptation not only increases the comfort of health workers at work, but also strengthens interpersonal relationships with patients, which ultimately has a positive impact on the quality of service in the inpatient room of Kendari City Hospital.

## 6. Research Stubbornness

This study has limitations on the relatively small number of respondents, namely only 40 health workers in the inpatient room of Kendari City Hospital, so the results are not representative of all health workers in the hospital. In addition, the data collected through questionnaires allowed for subjective bias from respondents. The research design that uses a *cross-sectional approach* also limits researchers in looking at the cause-and-effect relationship between rotation, adaptation, and quality of patient care in depth.

## CONCLUSION

It can be concluded that there is a significant relationship between rotation and adaptation of health workers to the quality of patient service in the inpatient room of Kendari City Hospital based on a  $p$  value of  $0.000 (< 0.000)$ , well-planned rotation and adaptation can improve professionalism, performance, and quality of patient service, while inappropriate implementation has an impact on reducing service quality.

### Declaration by Authors

**Ethical Approval:** Approved

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**Conflict of Interest:** No conflicts of interest declared.

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