

The Effect of Communication Skills and Compensation on Performance through Job Satisfaction and Subjective Well-Being of Mental Hospital Nurses in South Sulawesi

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Abstract

Due to COVID-19, education has been blocked out on a global scale. Most countries around the world stopped educational activities and moved to virtual education. Even though most teachers and students were not prepared, they had to execute this unexpected change. Therefore, the purpose of this research was to measure the Asynchronous Virtual Education Acceptance of university faculty during the COVID-19 pandemic period. An Asynchronous Virtual Education Acceptance Scale for Faculty was designed and validated, which is an adapted version of the TAMPST (Technology Acceptance Measure for Preservice Teachers) questionnaire. A sample of 222 faculty of a public university in the coastal region of Ecuador responded to 28 technology items. The main results showed 75 percent of Faculty acceptance toward Asynchronous Virtual Education with strong correlations between the questions and their factors. It is concluded that training and previous use of the Virtual Platform helped to achieve this acceptance.

Keywords: *Asynchronous virtual education; Covid-19; Factor analysis; ICT; University faculty.*

Introduction

Risikedas data from the Indonesian Ministry of Health in 2013 showed that the prevalence of mental illness and symptoms of depression and anxiety in the population over the age of 15 years reached 14 million people or constituted 6% of the total population of Indonesia. The Ministry of Health (Kemenkes) said there were 277,000 cases of mental illness in Indonesia in June 2020, an increase from 197,000 cases in 2019. According to the Director of Prevention and Control of Mental Health and Drug Problems (Ditjen P2PL Kemenkes) Siti Khalimah, the increase during the pandemic is due to lack of access to the community and the problems they face (Denny Susanto, 2020).

Plt. Director General of Disease Prevention and Control of the Ministry of Health dr. Maxi Rein Rondonuwu said, during the Covid-19 pandemic, Indonesian people not only suffer physically, but also psychologically, because conditions arise such as anxiety, fear, mental stress due to isolation, physical distancing and social interaction, and feelings of uncertainty about the situation that occurs. The survey results show that 1 in 20 young people report feeling depressed, anxious, lonely, and disturbed during the Covid-19 pandemic (Gloria, 2022). From the phenomenon that occurs, it illustrates the importance of the presence of health industry services and professional human resources in large numbers in the community, especially in mental health services.

The report (2017) from intelresos.kemensos.go.id website states that Indonesia with a population of more than 250 million people only has 48 mental hospitals, 32 of which are government-owned and 16 private hospitals. The government has launched the addition of RSJ in 6 provinces including Riau Islands, North Kalimantan, Southeast Sulawesi, West Sulawesi, Gorontalo, and West Papua (Kemenkopmk, 2021). The addition in several provinces of Sulawesi is also carried out considering that the number of RSJ in Sulawesi only focuses on South Sulawesi, namely at RSKD (Regional Special Hospital) Dadi. The reason is, the number of patients at RSKD Dadi has exceeded the bed capacity which is only around 403 units used for

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patients totaling 600 mental patients.

Based on data from RSKD Dadi in 2023 which shows the number of patients as many as 272 people, there is a decrease in the number of patients from the 2021 data reported, which is around 600 people. This can be influenced by the condition of RSKD Dadi which has handled not only patients with mental disorders, but also non-mental patients (Antaranews, 2022). In this situation, the hospital service model that originally focused on social and charismatic services shifted to economic and business services. The business industry is an industry that is able to understand the needs, wants and expectations of the market or customers (in this case patients) so as to create price transactions that can satisfy them in all aspects, including patients and human resources. This includes professionals (doctors, nurses) and managers involved in the business (Supriyanto & Ernawaty, 2010). Law of the Republic of Indonesia Number 44 of 2009 concerning Hospitals, stated that health services are the rights of everyone guaranteed in the 1945 Constitution which must be realized with efforts to improve the highest degree of public health (Ministry of Health of the Republic of Indonesia, 2019). Therefore, hospitals are expected to provide excellent service to their patients, including patients in mental hospitals.

Nurses as part of medical personnel who carry out nursing duties are the spearhead of a hospital (Rahmawati & Purwanti, 2008). Nurses must also provide the best possible service and ensure that this is reflected in the results of their work (Nursalam, 2007). According to Mulati (2006), nurse performance is using skills or learning gained after completing nursing education programs to provide services and responsibilities to improve health, disease prevention and patient care.

Purba (2018) shows several aspects related to nurse performance in providing nursing services, including the level of nurse education, inadequate abilities, some nurses being rude and impatient in dealing with patients. In addition, the Ministry of Health of the Republic of Indonesia (2017) also mentioned that problems related to performance are complaints from consumers who still feel many shortcomings of nursing performance, such as the competitiveness and competence of nurses.

Based on information from RSKD Dadi, common problems related to nurse performance are competencies such as nursing skills so that they can be negligent in carrying out their duties, which are also related to nurse discipline. In addition, the Ministry of Health of the Republic of Indonesia (2017) stated that performance-related problems are complaints from consumers who still believe there are many shortcomings in nursing performance such as competitiveness and competence of service providers. It is important for a professional nurse to have competence in communication skills (also known as therapeutic communication skills) for the purpose of patient recovery (Supriyanto & Ernawaty, 2010).

Many hospitals become overwhelmed if their health workers are not qualified to provide good service to patients. Soedarso Pontianak Hospital is one of them, which has received criticism from the public regarding the number of their nurses who judges in serving patients, so the hospital needs to improve services such as communication and serving well to patients (kumparan.com, 2022). In line with these conditions, the results of Skar and Soderberg's (2018) research show that there is patient dissatisfaction with the handling and communication of all departments in health care organizations in Sweden.

RSKD Dadi is one of the hospitals that strives to improve effective communication through seminars to increase nurses' knowledge and experience in providing health services to patients and patients' families (Ismail, et al, 2022). Mubyl's (2012) findings at Jakarta Provincial Hospital show that mastery of therapeutic communication skills has a significant and positive relationship with nurses' Work Satisfaction. Therefore, the better the nurse's communication skills, the more satisfied the nurse will be with her work. Another study shows a pattern of relationship between communication skills and nurses' Work Satisfaction shown from the results of research by Vermeir, et al (2018) which states that all dimensions of communication satisfaction are quite related to Work Satisfaction.

Work Satisfaction has a huge impact on how an employee does his job. A satisfied employee, will devote himself to work, perform orders better, as well as care for others and himself (Dziuba, Ingaldi, & Zhuravskaya, 2020). Research by Saharuddin, Mus, Latief, and Budiandriani (2020) shows that there is an

influence of Work Satisfaction on performance and specifically Mubyl and Dwinanda (2020) The results show that nurses' Work Satisfaction has a significant effect on nurses' performance.

The concept of satisfaction with life and positive feelings is an aspect of subjective well-being. So from the results of the study it is known that workers with high subjective well-being, will show good performance. Conversely, if nurse performance decreases, it can be concluded that nurses' subjective well-being also decreases (Salgado, Blanco, & Moscos, 2019; Aini, 2022). Liu, et al (2017) found that there is a positive relationship between self-esteem and Work Satisfaction with subjective well-being. This means that if nurses have high self-esteem and increase Work Satisfaction, the stronger their subjective well-being

In addition to communication skills, Work Satisfaction, subjective well-being, Suleman and Wijono (2021) found that other phenomena related to declining nurse performance occurred due to lack of attention to improving the quality, quantity and timeliness of services, as well as due to dissatisfaction with the compensation received by nurses. Buheli (2012) mentions factors that can affect nurse performance including motivation, income/compensation, supervision, and career development. Armanu (2017) also found that compensation in health service management has a positive and significant effect on performance and Dwinanda, Basalamah, Alam, Arifin (2022) found that compensation has a positive and significant effect on performance, as well as on subjective well-being, compensation has a positive and significant effect on performance through subjective well-being, and subjective well-being has a positive and significant effect on employee performance.

Literature Review

Communication Skills

Communication is professional communication that is consciously planned, purposeful, and centered on the recovery of patients (Supriyanto & Ernawaty, 2010). According to Wulan and Hastuti (2011), nurses who have communication skills will easily establish trust relationships with patients, more easily prevent legal problems from arising, able to provide professional satisfaction in nursing services, and able to improve the image of the nursing service profession and hospitals.

Nasir and Muhith (2011) explain communication as an activity of exchanging information between nurses and patients carried out consciously in the context of the healing process. Activities carried out by nurses are looking for information about complaints felt by patients and evaluating. The patient's activity is to provide clear information about the complaints felt so that it can be used as a nurse's handle in acting (carrying out nursing actions).

Compensation

Compensation as anything that is constituted or considered as a reward or equivalent. For organizations or companies, compensation means appreciation to workers who have contributed to realizing their goals, through activities called work (Yang, Li, & Wang, 2020). Hasibuan (2013) explained that compensation is all income in the form of money, direct or indirect goods received by employees in return for services provided to the company. According to Davis and Werther (2013), compensation is classified in two general forms, namely direct and indirect compensation. Direct compensation in the form of basic salary and wages, as well as incentives and profit sharing. While indirect compensation is in the form of well-being programs and services. Indirect compensation can be grouped into two types: those provided voluntarily by the employer and those required by law or regulation.

Compensation can be given in various forms or terms, including: salary, benefits and bonuses. Salary is remuneration in the form of money received by employees as a consequence of their status as an employee who contributes to achieving company/organizational goals (Yang, Liu, & Wang, 2020). Meanwhile, according to Simamora (2015), compensation consists of salary, wages, incentives, allowances, and facilities.

Work Satisfaction

Work Satisfaction expressed by Locke (in Wijono, 2010) is a pleasant feeling that is the result of individual perceptions in order to complete tasks or meet their needs in order to obtain important work values for themselves. Umar (2005) suggests that Work Satisfaction is an assessment or reflection of workers' feelings towards their work. This can be seen in the positive attitude of workers towards their work and everything faced in their work environment. In this case, the impact of Work Satisfaction needs to be monitored by relating to the output produced, for example Work Satisfaction with productivity, Work Satisfaction with turnover, Work Satisfaction with absenteeism, and others.

Wijono (2010) explained several notions of Work Satisfaction from several experts, such as according to Howell & Robert (1986) which suggests that Work Satisfaction is the overall result of the degree of liking or dislike of an employee towards various aspects of his job. If an employee is positive about his work, then he will get a feeling of satisfaction with his work, and vice versa.

Subjective Well-Being

Subjective well-being is a subjective assessment of the cognitive and affective that a person feels in relation to his life that can affect the level of emotions felt. Subjective well-being consists of cognitive dimensions including life satisfaction and domain satisfaction, and affective dimensions include positive affection and negative affection, where these two affects stand alone and have their own frequency and intensity (Tay & Diener, 2011).

Diener et al (2002) define subjective well-being as a person's cognitive and affective evaluation of his life. This evaluation includes emotional reactions to events as well as cognitive assessments of satisfaction and fulfillment. There are two theoretical approaches used in subjective well-being, namely bottom-up theories and top-down theories. Bottom-up theories view that happiness and life satisfaction that a person feels and experiences depends on the amount of small happiness and the structure of happy events. In particular, subjective well-being is the sum of positive experiences that occur in a person's life. Top-down theories, on the other hand, view the subjective well-being experienced by a person depending on how the individual evaluates and interprets an event / event in a positive perspective. The perspective of this theory assumes that it is the individual who determines or plays a role in whether the events he experiences will create psychological well-being for him.

Performance

Performance is a term used to measure the level of achievement of a job or company. Kasmir (2016) stated that there are two types of performance, namely individual performance and organizational / company performance. Company performance is a description of the level of achievement of operational activity results, including financial performance (Priatna, 2016). Financial performance is different from individual performance, so it needs to be specifically defined about the performance measured (Fitra & Mursalim, 2017). According to Arsindi, et al (2020), the company's performance is inseparable from the individuals in it. Individual performance describes a person's ability to achieve performance results, both in quantity and quality. Performance is the most important part in assessing individual development in accordance with the goals set by an organization (Koopmans, et al., 2013).

Individual performance will increase if they are able to take responsibility for their tasks (Task Performance), show behavior that is in line with structural (Contextual Performance), do not do things that can harm structurally (Counter productive Work Behavior), and are able to adjust to changes in the work system (Adaptive behavior) (Koopmans, et al., 2013). Nurses as individuals who also work in agencies are assessed based on their performance seen as professionals who are intellectually, technically, interpersonally, and responsible for carrying out nursing care duties (Sanjaya & Yohana, 2021).

Research Methodology

This study used a quantitative approach. According to Musthofa (2008), a quantitative approach is a type of research that uses research design based on statistical procedures or by other means of quantification to measure research variables. The category in this study is correlational research that is non-experimental / *ex post facto*. According to Danim and Darwis (2002) is a study that aims to determine the magnitude of variances against one factor related to variance against one or several other factors based on correlation coefficients.

This study used primary data. The primary data in this study were interviews, observations, and questionnaire results filled out directly by nurses working at RSKD Dadi. The sample in this study was all nurses totaling 148. The data was analyzed using SEM (*structural equation model*) analysis with SmartPLS 4 analysis tool.

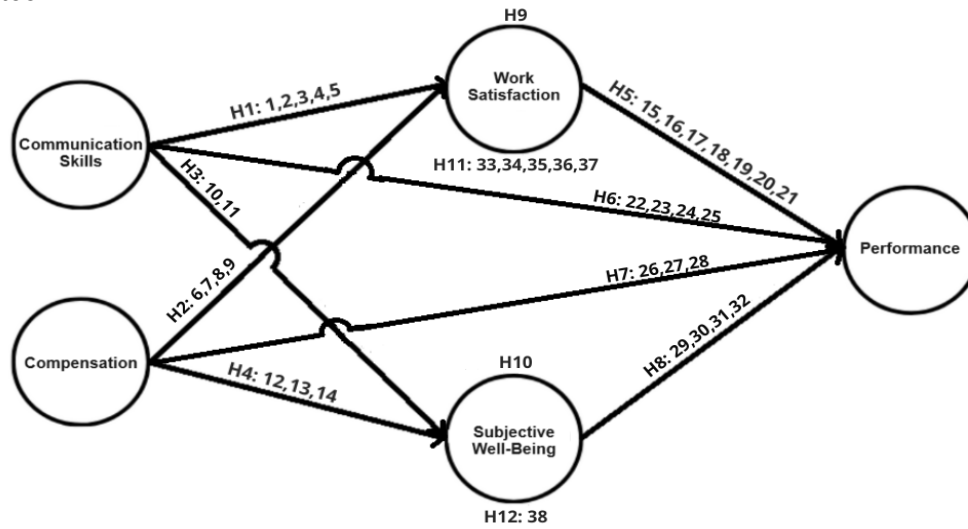


Fig. 1: Theoretical Framework and Hypothesis Development

The hypothesis in this study has been developed and has been studied from various studies empirically, theoretically and also various other theoretical references.

- H1 : Communication skills have a positive and significant effect on nurses' Work Satisfaction.
- H2 : Compensation has a positive and significant effect on nurses' Work Satisfaction.
- H3 : Communication skills have a positive and significant effect on the subjective well-being of nurses.
- H4 : Compensation has a positive and significant effect on the subjective well-being of nurses.
- H5 : Work Satisfaction has a positive and significant effect on nurse performance.
- H6 : Communication skills have a positive and significant effect on nurse performance.

- H7 : Compensation has a positive and significant effect on nurses' performance.
- H8 : Subjective well-being has a positive and significant effect on nurses' performance.
- H9 : Communication skills positively and significantly affect performance through nurse Work Satisfaction
- H10 : Communication skills positively and significantly affect performance through the nurse's subjective well-being.
- H11 : Compensation has a positive and significant effect on performance through nurse Work Satisfaction.
- H12 : Compensation positively and significantly affects performance through the nurse's subjective well-being.

Results and Discussions

Measurement Model / Outer Model

According to Chin (in Ghozali and Latan, 2015), the loading factor value of 0.50-0.60 is considered sufficient as a condition of convergent validity. So in this study, the acceptable loading factor value is >0.50.

When viewed in Figure 2 of the bootstrapping results, it is known that facilities (0.395) which are indicators of compensation, pay (0.284) and autonomy (0.313) variables which are indicators of Work Satisfaction variables, all three have loading factor values smaller than 0.50 so these three indicators must be removed.

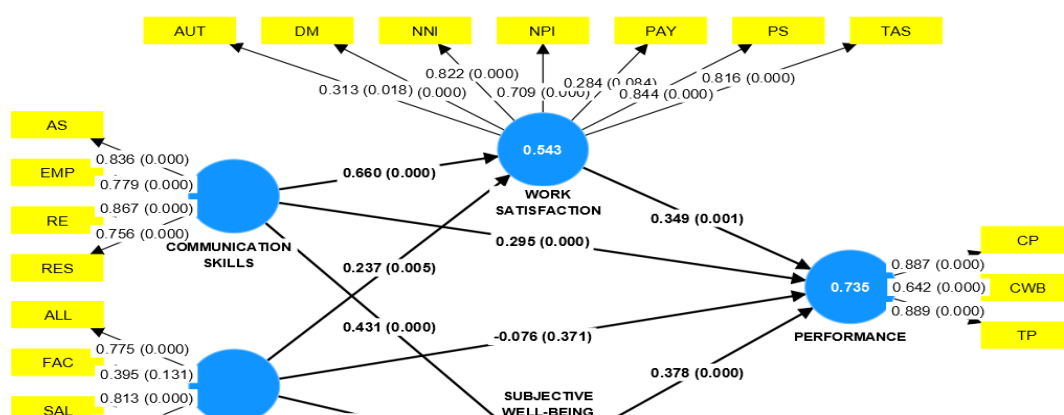


Figure 2. Path chart before the indicator is removed

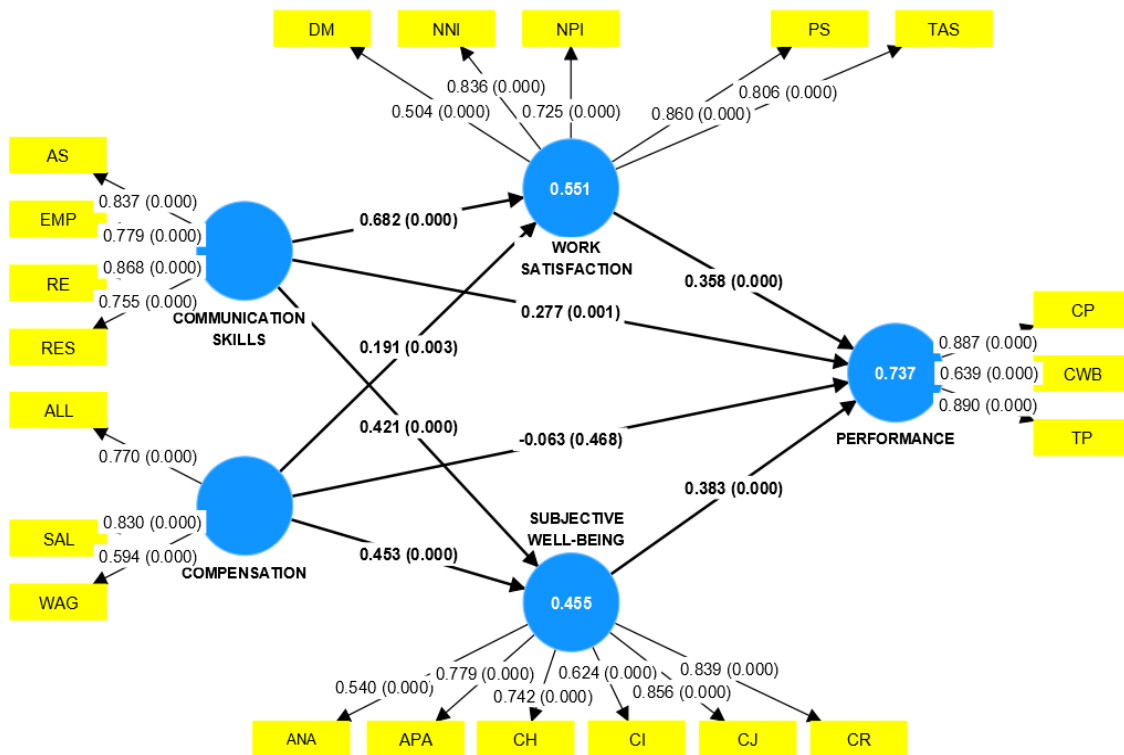


Figure 3. Path chart after indicator is removed

In addition, based on the significance value (p) of the outer model, these three indicators have a significance value (p) > 0.01 , namely facilities ($0.131 > 0.01$), autonomy ($0.018 > 0.01$), and pay ($0.084 > 0.01$). This shows that there is no correlation of indicators to their constructs, so these three indicators cannot be included for further analysis.

After the three indicators are removed, bootstrapping is again done to check whether there are still indicators that have a loading factor value of < 0.50 , as well as a significance value (p) > 0.01 . From the bootstrapping results (Figure 3) which are then concluded in Table 1, it is known that the loading factor value for each item of each indicator ranges from 0.504-0.890. With a minimum standard value of 0.50, this means that all items are declared valid and can be included in the hypothesis analysis.

Table 1. Loading Factor Value

Variable	Indicator	Loading Factor After Deleted
Communication Skills	Attending skills (AS)	0,837
	Respect (RE)	0,868
	Empathy (EMP)	0,779
	Responsiveness (RES)	0,775
Compensation	Salary (SAL)	0,830
	Wages (WAG)	0,594
	Allowances (ALL)	0,770
Work Satisfaction	Nurse-Physician Interaction (NPI)	0,725
	Task (TAS)	0,806
	Decision Making (DM)	0,504
	Nurse-Nurse Interaction (NNI)	0,836
	Professional Status (PS)	0,860
Subjective Well-Being	Cognitive-Income (CI)	0,624
	Cognitive-Relations (CR)	0,839
	Cognitive-Job (CJ)	0,856
	Cognitive-Health (CH)	0,742
	Affect-Positive Affection (APA)	0,779
	Affect-Negative Affection (ANA)	0,540
Performance	Task Performance (TP)	0,890
	Contextual Performance (CP)	0,887
	Counterproductive Work Behaviour (CWB)	0,639

Source: Data processing of 100 respondents (2024)

Discriminant Validity (*Validitas Diskriminan*)

From the results of the outer model analysis, it is known that the AVE value of each construct ≥ 0.50 , namely the constructs of communication skills (0.657), compensation (0.545), Work Satisfaction (0.574), subjective well-being (0.546), and performance (0.663).

Table 2. Cross loading and AVE (Average Variance Extracted) values

	Skills communication	Compensation	Satisfaction work	Subjective well-being	Performance	AVE value
AS	0,837	0,063	0,599	0,415	0,587	0,657
RE	0,868	0,246	0,596	0,379	0,568	
EMP	0,779	0,003	0,581	0,379	0,490	
RES	0,755	0,283	0,551	0,461	0,665	
SAL	0,253	0,830	0,277	0,440	0,303	0,545
WAG	-0,003	0,594	0,176	0,307	0,083	
ALL	0,114	0,770	0,243	0,419	0,251	
NPI	0,619	0,327	0,725	0,505	0,517	0,574
TAS	0,512	0,389	0,806	0,567	0,620	
DM	0,229	0,286	0,504	0,324	0,315	
NNI	0,643	0,114	0,836	0,513	0,705	
PS	0,611	0,170	0,860	0,499	0,718	
CI	0,219	0,300	0,234	0,624	0,369	0,546
CR	0,347	0,436	0,558	0,839	0,612	
CJ	0,568	0,377	0,720	0,856	0,726	

CH	0,251	0,395	0,459	0,742	0,495	0,663
APA	0,309	0,497	0,385	0,779	0,527	
ANA	0,479	0,350	0,355	0,540	0,362	
TP	0,537	0,358	0,665	0,610	0,890	
CP	0,575	0,256	0,718	0,626	0,887	
CWB	0,642	0,127	0,510	0,510	0,639	

Source: Data processing of 100 respondents (2024)

From Table 2 it is also known that each indicator value has a higher value than other latent variables, so that all indicators/manifests are in accordance with their respective construct/variable groups. Therefore, it can be said that the discriminant validity of each indicator has been met.

Construct Reliability

From the calculation of Cronbach's alpha and composite reliability of each variable shown in Table 3, it is known that there are some changes in values before and after the facilities (FAC), pay (PAY), and autonomy (AUT) indicators are removed.

Table 3. Cronbach's alpha and composite reliability scores

Variable	Indicators	<i>Cronbach's alpha</i>		<i>Composite reliability</i>		Information
		<i>Before deleted</i>	<i>After deleted</i>	<i>Before deleted</i>	<i>After deleted</i>	
Communication Skills	AS	0,825	0,825	0,826	0,826	Reliable
	RE					
	EMP					
	RES					
Compensation	SAL	0,611	0,583	0,658	0,623	Reliable
	WAG					
	ALL					
	FAC					
Work Satisfaction	PAY	0,762	0,808	0,845	0,843	Reliable
	NPI					
	TAS					
	DM					
	AUT					
	NNI					
Subjective Well-being	PS	0,827	0,827	0,855	0,855	Reliable
	CI					
	CR					
	CJ					
	CH					
	APA					
Performance	ANA	0,731	0,731	0,744	0,745	Reliable
	TP					
	CP					
	CWB					

Source: Data processing of 100 respondents (2024)

The cut-off value of construct reliability testing is 0.70, but according to Hasan (2023) Cronbach's alpha value of 0.5-0.7 is still acceptable.

Hypothesis Testing

Hypothesis testing is done by bootstrapping to see path coefficients and specific indirect effects.

Table 4. Path coefficients value, T-count value, and significance value (p)

Hyp	Variable relationships	Std.direct effect	Std. indirect	Sample mean	Std. dev.	T-Stat.	P-Values
H1	Communication Skills → Work Satisfaction	0,682	-	0,683	0,054	12,744	0,000
H2	Compensation → Work Satisfaction	0,191	-	0,200	0,065	2,940	0,003
H3	Communication Skills → Subjective Well-Being	0,421	-	0,419	0,091	4,619	0,000
H4	Compensation → Subjective Well-Being	0,453	-	0,462	0,076	5,996	0,000
H5	Work Satisfaction → Performance	0,358	-	0,356	0,100	3,598	0,000
H6	Performance → communication skills	0,277	-	0,267	0,080	3,469	0,001
H7	Performance Compensation →	-0,063	-	-0,056	0,086	0,725	0,468
H8	Subjective well-being → Performance	0,383	-	0,389	0,090	4,270	0,000
H9	Communication skills → Work Satisfaction → Performance	-	0,245	0,243	0,071	3,440	0,001
H10	Communication skills → Subjective well-being → Performance	-	0,161	0,163	0,053	3,018	0,003
H11	Compensation → Work Satisfaction → Performance	-	0,068	0,071	0,031	2,203	0,028
H12	Performance → Subjective Well-Being → Compensation	-	0,174	0,180	0,051	3,421	0,001

Source: Data processing of 100 respondents (2024)

From Table 4, it is known that out of 12 hypotheses built, 11 hypotheses were accepted. This is because 11 hypotheses have a T-statistics value above the T-table value (1.985). The T-table calculation is based on the number of respondents 100 people and 5 variables ($df = 100 - 5 = 95$) and uses a 2-sided test with a significance level of 0.050. In addition, the hypothesis is also accepted based on the significance value ($p < 0.050$). While there is 1 hypothesis rejected (H7), because it shows the value of T-statistics $<$ T-table ($0.725 < 1.985$) as well as the significance value ($p > 0.050$) ($0.468 > 0.050$). The following is a discussion of the results of hypothesis testing in this study:

The Effect of Communication Skills and Compensation on Work Satisfaction

According to Nasir & Muhith (2011), communication skills are abilities that must be possessed by nurses as the main capital for nursing because in it there are information exchange activities between nurses and patients as a healing process.

The study revealed that nurses' communication skills have a significant influence on nurses' Work

Satisfaction. These skills include empathy, attending skills, respect, and responsiveness. Nurses at RSKD Dadi strongly consider it important to have this skill because it can help build a trusting relationship between nurses and patients. Good communication patterns between colleagues, including fellow nurses and doctors, also have a positive impact on nurses' Work Satisfaction at RSKD Dadi. This suggests that communication skills are not only important in relationships with patients, but also important in relationships between colleagues.

The study also found that compensation had an effect on nurses' Work Satisfaction even though it was relatively low. The compensation received by nurses at RSKD Dadi depends on their rank and class, and is not directly related to their performance. With this condition, nurses already understand that the provision of wages, incentives, benefits, and additional facilities is not easily given unless promoted to rank or class. Therefore, other factors also need to be considered to increase nurses' Work Satisfaction. Saxena and Rai's (2016) research supports these findings, showing that employees in private hospitals are more satisfied with their compensation and benefits than employees in state hospitals.

The Effect of Communication Skills and Compensation on Subjective Well-Being

According to Tay & Diener (2011), subjective well-being is a subjective assessment of the cognitive and affective that a person feels, which is related to his life and can affect the level of emotions expressed. The results showed that almost all RSKD nurses agreed that they felt subjective well-being. RSKD Dadi nurses consistently maintain aspects of work professionally and maintain their social relations. In addition, when viewed from the influence of communication skills which also affect subjective well-being. Empathy is an indicator with a high average percentage index showing that nurses can feel more prosperous if they are able to establish good social relationships, one of which is by empathizing with patients.

Meanwhile, the effect of compensation on subjective well-being also has an influence. This is in line with the research of Jung and Vranceanu (2018) which found that competitive compensation can improve a person's subjective well-being, especially in gender and culture comparisons and Dwinanda, et al. (2022) research on the performance of PT BPR Syariah employees, namely directly, compensation has a positive and significant effect on subjective well-being.

Effects of Work Satisfaction, Communication Skills, Compensation, and Subjective Well-Being on Performance

According to Locke (Wijono, 2010), Work Satisfaction is a pleasant feeling obtained when someone completes a task or meets the needs of his work. Work Satisfaction can also be measured through assessment or reflection of positive feelings towards work. In this study, the nurses were satisfied with the good interaction between fellow nurses and the team of doctors. Social interactions in the workplace also affect Work Satisfaction, including relationships with superiors, subordinates, co-workers, and work groups.

In the Islamic view, Work Satisfaction also involves gratitude, patience, and sincerity in carrying out work. In addition, communication skills also have a positive and significant influence on nurse performance. However, compensation has no effect on the performance of nurses at RSKD Dadi. Nurses tend to work professionally even though their income is not entirely satisfactory.

As for subjective well-being, there is an influence on nurse performance. The performance of nurses at RSKD Dadi tends to be high in terms of contextual performance, such as commitment, responsibility, collaboration, communication, creativity, and initiative in working. Nurses also have a willingness to improve their skills and knowledge to support their work. Based on these findings, almost all nurses of RSKD Dadi feel that they have a high performance value. This high value is strengthened by the willingness of RSKD Dadi nurses to improve their skills and knowledge to support their work.

The Effect of Communication Skills on Performance through Work Satisfaction and Subjective Well-being.

From the literature study, there has been no previous research on the effect of communication skills on performance through employee Work Satisfaction, so this is the latest finding for research related to

communication skills, Work Satisfaction, and nurse performance. From the results of this study, it is concluded that nurses who are able to improve their communication skills, then their performance will also increase through increased Work Satisfaction.

When related to indicators of communication skills and subjective well-being, it is illustrated that RSKD Dadi nurses do focus on good communication and relationship skills, so that teamwork is formed, both between patients, doctors, and nurses, and works professionally. With good communication, good relationships will be established. If good relations are established, the domain of work and relations on subjective well-being will increase, so that the performance of nurses can also increase.

The Effect of Compensation on Performance through Work Satisfaction and Subjective Well-Being

Separately, research by Kalalo, Sjattar, and Natzir (2018) showed that nurses who perceived good compensation with satisfied Work Satisfaction were 66.7%. This means there is a meaningful relationship between compensation and nurses' Work Satisfaction. While all nurses who perceived Work Satisfaction were satisfied with good performance, which was 100%. This means there is a significant relationship between Work Satisfaction and nurse performance.

The results of this study also support several other studies such as research from Saharuddin, et al. (2020) which looks at how the influence of organizational culture, organizational commitment, compensation affects performance through Work Satisfaction. The results show that compensation and organizational culture negatively affect Work Satisfaction, but directly compensation, organizational commitment, and Work Satisfaction affect performance, and indirectly organizational culture, organizational commitment, and compensation have a positive and significant effect on performance through Work Satisfaction. This shows that in general, performance can increase influenced by several factors, Work Satisfaction is one of them, both as an exogenous and influential variable directly and as a mediating variable. According to Kasmir (2019), there are at least 13 factors that can affect a person's performance, including specific skills or knowledge, knowledge, job design, personality, work motivation, management style, organizational culture, Work Satisfaction, work climate, loyalty, commitment, and work discipline.

Conclusions

In terms of findings, this study explains how the human resource management model in hospital management. This research is interesting because the activities that occur in hospitals are one of the managing patients with psychiatric disorders who specifically have different management models. The findings show that communication skills can support maximum performance both directly and indirectly through job satisfaction and subjective well-being. The interesting in this finding is the existence of subjective well-being variables as an intervening model that is thoroughly able to explain the involvement of subjective well-being in the form of cognitive and affective in a person's perceived life, both on communication skills and compensation that can affect a person's level of performance.

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