



**OPTIMIZING THE ROLE OF TALENT FIRST LINE MANAGER
THROUGH NURSING RESOURCE DEVELOPMENT STRATEGY BASED ON
EXTERNAL AND INTERNAL ANALYSIS : CASE REPORT**

Friska Lestari*, Choriati Nuormanisa, Ilham Cahyo Nugroho, Taufik Kurahman, Inyalebe Talaohu, Teuku Muhammad Zaini, Rr. Tutik Sri Hariyati

Master's Program, Faculty of Nursing, University of Indonesia, Jl. Prof. DR. Sudjono D. Puspongoro, Pondok Cina, Beji, Depok, Jawa Barat 16424, Indonesia

*friskabutter89@gmail.com

ABSTRACT

The role of the first line manager (FLM) is strategic in improving hospital service quality as a link between managerial policies and clinical practice. However, the transition from clinical nurse to managerial position, along with the complexity of healthcare services, creates challenges in managing nursing human resources. This case report aims to develop a strategic human resource development plan to support the transition of FLM talent at Hospital X Jakarta. The study participants consisted of 41 head nurses serving as First Line Managers (FLMs) at RS X. The method used is a descriptive-analytic approach with field study, using primary data (interviews and observations) and secondary data (literature and documents). The analysis applies SWOT, IFE-EFE matrices, IE matrix, and TOWS, integrated with the Balanced Scorecard (BSC). The results show that Hospital Strengths include educational qualifications, clinical experience, and a structured head nurse selection system. Weaknesses include uneven managerial competencies, a non-talent-based appointment system, and high workload. Opportunities arise from digitalization, accreditation demands, and HR development, while threats include burnout risk, hospital competition, and regulatory changes.

Keywords: first line manager; nursing resources; strategic planning

How to cite (in APA style)

Lestari, F., Nuormanisa, C., Nugroho, I. C., Kurahman, T., Talaohu, I., Zaini, T. M., & Hariyati, R. T. S. (2026). Optimizing the Role of Talent First Line Manager through Nursing Resource Development Strategy Based on External and Internal Analysis: Case Report. *Indonesian Journal of Global Health Research*, 8(4), 53–62. <https://doi.org/10.37287/ijghr.v8i4.2013>.

INTRODUCTION

First Line Managers (FLMs) in hospitals play an essential role in ensuring that nursing care is delivered effectively and safely to patients. Inadequate planning may lead to failures in nursing organizations, making them vulnerable to institutional pressures within the hospital environment (Hulu et al., 2023). Strategic planning aligns organizational strengths, resources, and activities to achieve shared goals. FLMs, such as head nurses or nursing supervisors, hold strategic positions as intermediaries between management and operational staff. Previous studies have shown that human resource management in healthcare still faces major challenges, including high workloads, low healthcare worker retention, and the limited implementation of continuous training and competency development programs (Fuadi & Yuniarti, 2025). FLMs contribute significantly to improving service quality, team management, clinical supervision, and strengthening nursing competencies. Their implementation through workforce planning based on service needs, continuous training programs, quality indicator-based performance evaluations, and healthcare worker retention strategies has been shown to improve service quality and patient satisfaction (Purba & Ningsih, 2025).

Jakarta Hospital has a substantial nursing workforce, consisting of 1,316 nursing personnel, with approximately 1,300 nurses holding professional nursing (Ners) or master's degree qualifications. Variations in educational backgrounds may influence the consistency of service quality if not

managed through structured competency development and strategic human resource planning. This is consistent with the findings of Putri (2022) from the University of Indonesia, which emphasized the importance of human resource development strategies based on actual competency needs analysis.

The vision and mission of Jakarta Hospital as a leading healthcare provider at the Asian level with sustainable growth requires strategic planning for human resource development. These objectives include improving the quality of healthcare providers through increased work productivity, enhancing clinical service quality through service standardization, strengthening hospital governance through service digitalization, and improving the implementation of high-quality, innovative, and applicable education, training, and research programs.

The recruitment process for prospective FLMS at Jakarta Hospital is conducted through self-nomination and managerial recommendations. Qualification requirements include holding the position of Clinical Nurse Level 2, having experience as a Primary Nurse or Team Leader, completing a Google Form application, and participating in a fit-and-proper test process consisting of interviews, soft skills assessments, and portfolio evaluations. The portfolio assessment includes professional performance records, patient and colleague complaints, ethics, and compliance with patient safety principles.

Overall, these conditions indicate that Jakarta Hospital possesses a relatively strong human resource structure; However, more focused strategies for human resource development are still required to ensure equitable competency distribution and strengthen clinical career pathways in order to optimize service quality. Effective strategies require comprehensive analysis of both internal and external organizational factors. Analytical tools such as SWOT analysis, the Internal Factor Evaluation (IFE) Matrix, and the External Factor Evaluation (EFE) Matrix can be used regularly to identify organizational strengths, weaknesses, opportunities, and threats. Furthermore, the IE Matrix may be utilized to determine the organization's strategic position, while the Balanced Scorecard (BSC) functions as a tool for measuring and monitoring organizational performance across multiple strategic perspectives (Ayuningtyas, 2022).

Based on this background, optimizing the performance of First Line Managers through human resource management strategies based on SWOT analysis, IFE, EFE, IE Matrix, Balanced Scorecard (BSC), and Key Performance Indicators (KPI) is highly important, particularly within hospital settings. This approach is expected to generate focused, measurable, and sustainable strategies for improving healthcare service quality and overall organizational performance. The purpose of this study is to analyze strategies for optimizing the performance of First Line Managers (FLMs) through human resource management approaches based on SWOT analysis, Internal Factor Evaluation (IFE), External Factor Evaluation (EFE), IE Matrix, Balanced Scorecard (BSC), and Key Performance Indicators (KPI) at Jakarta Hospital.

METHOD

The method used in developing the strategic plan for First Line Managers (FLMs) at RS X was a field study approach. Primary data were obtained directly through interviews and documentation. Semi-structured interviews consisting of 10 questions were conducted with the Head of the Inpatient Installation, focusing on the management and development of nursing human resources in the inpatient wards of RS X. Observations were also conducted to support the data collection process. Secondary data were obtained from relevant literature, scientific journals, and books related to human resource career development, particularly in nursing management within hospital settings. The participants in this study consisted of the Head of the Inpatient Installation and nursing management personnel involved in the management and development of First Line Managers (FLMs) at RS X. Data were collected through semi-structured interviews consisting of 10 questions,

direct observations, and document reviews related to nursing human resource management. Data analysis was conducted using SWOT analysis to identify strengths, weaknesses, opportunities, and threats, followed by weighting and scoring through the Internal Factor Evaluation (IFE) and External Factor Evaluation (EFE) matrices. Furthermore, the organization's strategic position was determined using the IE Matrix, and strategic alternatives were formulated using the TOWS Matrix.

RESULT

RS X is a national central general hospital owned by the Ministry of Health of the Republic of Indonesia and located in Jakarta. As a national referral Type A hospital, the hospital specializes in orthopedic and trauma services, as well as comprehensive curative and rehabilitative care supported by advanced technology. These conditions require highly prepared human resources, particularly nursing staff, to align with the organization's strategic direction.

The vision of RS X is to become an Asian-standard hospital with excellent orthopedic services and sustainable growth. This vision requires high-quality healthcare services based on international standards and supported by competent and adaptive human resources. The hospital's mission focuses on improving patient experience, enhancing healthcare provider quality, strengthening clinical service quality through standardization, implementing digital governance systems, strengthening national healthcare networks, and advancing education and research development.

In the context of nursing resources, nurses hold strategic roles because they are directly involved in clinical services and contribute significantly to service quality and patient satisfaction. Based on document reviews and interview findings, Hospital Most head nurses are within the productive age range of 35–40 years; however, managerial experience still requires further strengthening. The hospital has implemented technology-based recruitment processes using Google Forms and computerized systems, although technology integration in clinical practice remains suboptimal. The selection process for head nurses has been structured through administrative screening, interviews, competency tests, and portfolio assessments, although it has not yet fully adopted an objective talent management-based approach. In addition, financial support for competency development and specialized training remains unclear. Although the hospital possesses comprehensive facilities as a Type A referral hospital, high bed occupancy rates (BOR) increase workloads and require more appropriate competency-based staff distribution and equitable access to specialized training programs such as ICU and orthopedic nursing training.

Findings from interviews also described the condition of First Line Managers, particularly head nurses, at RS Their productive age range supports operational capacity and work productivity; However, managerial experience and strategic decision-making skills still require strengthening to improve clinical supervision effectiveness. From the "machine" aspect, technology utilization has been implemented in the head nurse recruitment process through digital systems such as Google Forms and computer-based competency testing, indicating the integration of technology into human resource management processes.

From the "method" aspect, the head nurse selection system has been structured through administrative processes, interviews, competency assessments, and portfolio evaluations. Selection criteria include educational background, clinical level, work experience, and unit-specific competencies. Nevertheless, the appointment system remains recommendation-based and has not fully adopted an objective and standardized talent management approach. From the "money" aspect, financial support for competency development, particularly specialized training and advanced education for head nurses, remains limited. This limitation may hinder sustainable leadership capacity development. Meanwhile, from the "material" aspect, RS X possesses comprehensive healthcare facilities as a national referral hospital. However, high service demands and the need for

specialized competencies require more effective human resource distribution and equal access to specialized training programs.

Overall, strengthening the management system and competency development of head nurses has become a major priority. The collected data were further evaluated using SWOT analysis followed by weighting through the Internal Factor Evaluation (IFE) and External Factor Evaluation (EFE) matrices. SWOT analysis served as the basis for determining the organization's strategic position, which is essential in strategic planning. Strategic planning generally covers a period of three to five years. The SWOT analysis process begins with an analysis of the internal environment while also considering external environmental conditions to enable comparative strategic analysis (Ayuningtyas, 2022). The following section presents the results of the SWOT analysis.

Table 1.
SWOT Analysis

Strengths	Weaknesses
The educational background of Karu at Hospital X is at least S1+Nursing and some have a S2 background	Karu's managerial competencies are not evenly distributed/still limited. (Such as: Leadership, Conflict Management, etc.).
There is a strict and multi-layered Karu selection stage (fit & proper test).	The Karu appointment system is not yet based on talent management (still based on subjective submissions)
Each Karu has a minimum of PK 2 in experience as a PPJA/PN	Karu's age range is still relatively young (35-40 years), physically energetic but still lacking in complex decision making.
Each Karu has specific competencies according to the unit, which are adjusted to the needs in the field.	The Karu evaluation system is not yet optimal, so that Karu replacement is based on subjective assessment.
Opportunities	Threats
Karu can play a role as a Change of Agent amidst the high demands for improving quality and patient safety in the world of health.	Karu has a high workload because Hospital X is a national referral hospital.
Encourage strengthening of Karu's role in management for Hospital Accreditation (SNARS / JCI)	Competence between hospitals in Jakarta requires Karu / Managers to be able to improve service performance.
Karu is increasingly supported in digitalization-based hospital work, thereby reducing the administrative burden.	The high risk of burnout in Karu and nurses due to high pressure from the community in the National Hospital service
Karu was involved in the human resource development program by being given the opportunity to study for a Masters and receive leadership and hospital management training.	Changes in health policies and regulations in the Government require managers/Karu to be able to adapt quickly to services.

Table 1 shows that the analysis of the condition of nursing human resource (HR) management at Hospital X depicts a combination of strengths, weaknesses, opportunities, and threats that influence each other. From the internal perspective, the main strengths include mapping showing that the Head of Ward (Karu) at Hospital X has a fairly strong competency foundation. From the strength aspect, Karu is dominated by personnel with a minimum educational qualification of S1 Nursing and some have completed S2 education. A rigorous selection process and adequate clinical work experience strengthen the readiness of Karu in carrying out operational functions. In addition, the competencies possessed have been adjusted to the needs of the unit, thus supporting the effectiveness of services. However, there are significant weaknesses, especially in the aspect of managerial competency which is not evenly distributed. From the opportunity perspective, Head of Ward has a strategic role in improving service quality, patient safety, and achieving accreditation standards.

Table 2 shows the results of the Internal Factor Evaluation (IFE) for the role of Head of Room (Karu) at Hospital X, with a total score of 2.54, indicating that the internal conditions are in the moderate category. This means that the organization has sufficient strengths, but is still balanced by a number of weaknesses that need to be addressed.

Table 2.
Internal Factor Evaluation (IFE)

Internal Factors	Weight	Scale	Score
Strengths			
The educational background of Karu at Hospital X is at least S1+Nursing and some have a S2 background	0.10	4	0.40
There is a strict and multi-layered Karu selection stage (fit & proper test)	0.13	2	0.26
Each Karu has a minimum of PK 2 in experience as a PPJA/PN	0.12	3	0.36
Each Karu has specific competencies according to the unit, which are adjusted to the needs in the field.	0.10	3	0.30
Weaknesses			
Karu's managerial competencies are not evenly distributed/still limited. (Such as: Leadership, Conflict Management, etc.).	0.15	2	0.30
The Karu appointment system is not yet based on talent management (still based on subjective submissions)	0.13	2	0.26
Karu's age range is still relatively young (35-40 years), physically energetic but still lacking in complex decision making.	0.12	3	0.36
The Karu evaluation system is not yet optimal, so that Karu replacement is based on subjective assessment.	0.15	2	0.30
Total Ife Score	1		2.54

Table 3.
Internal Factor Evaluation (EFE)

Internal Factors	Weight	Scale	Score
Opportunities			
Karu's background can play a role as a <i>Change of Agent</i> amidst the high demands for improving quality and patient safety in the world of health.	0.18	4	0.72
Encourage strengthening of Karu's role in management for Hospital Accreditation (SNARS / JCI)	0.15	4	0.60
Karu is increasingly supported in digitalization-based hospital work, thereby reducing the administrative burden.	0.15	3	0.45
Each Karu has specific competencies according to their unit. Karu are involved in human resource development programs, providing opportunities for postgraduate studies and leadership and hospital management training.	0.15	3	0.45
Threats			
Karu has a high workload because Hospital X is a national referral hospital.	0.10	4	0.40
Competence between hospitals in Jakarta requires Karu / Managers to be able to improve service performance.	0.09	2	0.18
The high risk of burnout in Karu and nurses due to high pressure from the community in the National Hospital service	0.10	3	0.30
Changes in health policies and regulations in the Government require managers/Karu to be able to adapt quickly to services.	0.08	1	0.08
Total Efe Score	1		3.18

Table 4 shows the results of the External Factor Evaluation (EFE) for the role of Head of Room (Karu) at Hospital X, with a total score of 3.18, indicating the organization's ability to respond to

the external environment is in the good category. This indicates that existing opportunities can be optimally utilized compared to the impact of the threats faced.

Table 5.
IE Matrix

		IFE total score; 2.54		
		Strong 3.0 - 4.0	Currently 2.0 - 2.99	Weak 1.0 - 1.99
EFE total score; 3.18	Tall 3.0 - 4.0	I	II	III
	Currently 2.0 - 2.99	IV	V	VI
	Weak 1.0 - 1.99	VII	VIII	IX

Table 5 shows that this hospital organization is in cell II. The organizational position of the Inpatient Room of Hospital X is in cell II which describes the *GROW* and *BUILD* position, this shows that the Inpatient Room of Hospital X has great internal HR strength to grow, although it is still influenced by external factors that do not support growth. The strategies commonly used are intensive strategies (*market penetration, market development* and *product development*) and integrative strategies (*backward integration, forward integration, and horizontal integration*).

Table 6.
TOWS Matrix

TOWS Matrix	Strengths	Weakness
	Nurse Education and Specialist Nurses <i>Fit & proper test</i> Karu	Managerial competencies are not evenly distributed The submission of candidate cards is still subjective
	Karu has experience as an Acting Shift Officer and minimum PK 2 Have Specific Competencies	Karu age 35-40 years The assessment system is still subjective
Opportunities (O)	SO Strategies	WO Strategies
Karu's competence as a <i>change agent</i> for improving quality	Optimize education and competency to improve quality	Development through leadership training
The role of cards in SNARS/JCI accreditation	Assess the card according to the <i>Fit & proper test</i>	Talent management program for prospective card holders
Digitization of services reduces administrative burden	Integrating card competencies with service digitalization	Young Karu development program
Human resource development facilities (Training or Masters Education)	Mentorship program for young people	Structured and competency-based evaluation
Threats (T)	ST Strategies	WT Strategies
High workload	Optimize competencies, experience in managing workload	Improve the evaluation system lifting of the karu
Fierce hospital competition	Optimize Karu Education in optimizing inter-hospital services	Mentorship <i>coaching</i> , monitoring and decision making program
Risk of employee <i>burnout</i>	Optimize competencies to maintain service quality	Workload management and organizational support
Adaptation to changes in government regulations	Optimizing the role of cards in adapting to regulatory changes	Optimize card adaptation in dynamic regulations

Based on the TOWS Matrix in Table 6, it shows a systematic strategy formulation in developing the role of Head of Room (Karu) at Hospital X by integrating internal and external factors. The development of the SWOT analysis resulted in 4 types of strategies, including SO strategy, WO

strategy, ST strategy, and WT strategy.

DISCUSSION

First Line Managers (FLMs) are key components within hospital organizational structures, serving as intermediaries between managerial policies and frontline service implementation. This position carries responsibilities not only in administrative functions but also in ensuring the quality of clinical services and managing human resources. From a theoretical perspective, the role of FLMs can be explained through Role Theory, which states that individuals within organizations face complex and overlapping role expectations. This condition may lead to role ambiguity and role conflict, particularly among individuals who are newly transitioning into managerial positions (Zhang et al., 2025). In addition, high managerial demands and workplace stressors may negatively affect job satisfaction and increase turnover intention among nursing staff if leadership support systems are inadequate (Bautista et al., 2020).

In hospital services, role complexity becomes even more challenging because FLMs are required to perform dual functions as both managers and clinicians. This is consistent with findings that FLMs function as service coordinators, team leaders, and controllers of nursing care quality (González-García et al., 2024). Therefore, the effectiveness of FLMs is influenced not only by individual competencies but also by organizational support systems. Research conducted by Gunawan et al. (2020) found that managerial competence among first-line nurse managers significantly contributes to nursing staff performance, service coordination, and the overall effectiveness of healthcare delivery in hospital settings.

Kanter's Structural Empowerment Theory emphasizes that access to information, support, resources, and development opportunities are essential factors in improving first-line managerial performance. Within hospital settings, such support may include leadership training, access to information systems, and organizational policies that support decision-making at the unit level (Kanter, 1993; Laschinger et al., 2014). Without adequate empowerment, FLMs may experience difficulties in performing their roles effectively. This finding is supported by Alilyyani et al. (2021), who explained that authentic leadership and supportive organizational environments positively influence leadership effectiveness, staff engagement, and organizational outcomes in healthcare settings.

Based on interviews and observations conducted at RS X, the hospital is recognized as a national referral hospital in Indonesia with orthopedic services as one of its main specialties. Healthcare services are supported by a well-established management structure, including nursing management systems. The hospital employs 1,316 nurses, with 41 head nurses serving as First Line Managers. Educational qualifications indicate that all head nurses possess professional nursing degrees (S1 Nurse), while nine have completed master's degrees in nursing. The average age of head nurses ranges between 35–40 years, reflecting a productive stage in their professional careers. The head nurse selection process through fit-and-proper tests has incorporated competency-based assessments through administrative screening, interviews, and portfolio evaluations that include professional track records and patient safety aspects.

These findings indicate that RS X has implemented a competency-based approach in the appointment and transition processes of FLMs. This approach aligns with competency theory, which states that the success of nursing managers depends on the integration of clinical, managerial, and interpersonal competencies (González-García et al., 2024). In addition, specialized training programs in areas such as ICU, orthopedic, and pediatric nursing further strengthen the clinical capabilities of head nurses in managing healthcare units. Paarima et al. (2022) emphasized that leadership competencies among first-line nurse managers should include communication skills,

conflict management, decision-making abilities, and team leadership competencies to improve healthcare service quality and organizational performance.

However, further analysis using the SWOT approach revealed several areas that still require improvement. Based on the integration of theoretical perspectives and SWOT analysis, the effectiveness of FLMs at RS X is strongly influenced by the balance between individual competencies and organizational support. Strengthening the role of FLMs can be achieved through enhanced leadership training programs, mentoring systems, and optimization of structural support from the organization. Furthermore, the implementation of transformational leadership approaches is considered highly relevant in responding to team dynamics and increasingly complex healthcare service demands. Thus, FLMs function not only as policy implementers but also as change agents who contribute to improving service quality and patient safety within hospitals.

Based on the analysis of internal and external factors, the Internal Factor Evaluation (IFE) matrix score was 2.54, while the External Factor Evaluation (EFE) matrix score was 3.18. These results position the organization within Quadrant II of the Internal-External (IE) Matrix, categorized as “Grow and Build.” This position indicates that the organization possesses strong external opportunities and is relatively capable of utilizing its internal strengths, although several weaknesses still require improvement.

In the context of First Line Manager management, this position suggests that RS X has significant potential to develop the capacity of head nurses more regularly and sustainably. This finding is consistent with Structural Empowerment Theory, which emphasizes that organizations with strong external opportunities should optimize internal structures to improve individual and team performance (Kanter, 1993; Laschinger et al., 2014). Furthermore, Al-Hamdan et al. (2021) reported that positive nursing work environments and supportive leadership systems significantly influence nurses’ job satisfaction and retention, indicating the importance of organizational support for frontline nursing managers.

Referring to the “Grow and Build” position, the recommended strategy is an intensive strategy that includes market penetration, market development, and product development approaches. Within hospital settings, these strategies are interpreted not only as business expansion strategies but also as organizational and human resource capacity-building strategies, particularly for the transition and development of FLMs.

The market penetration strategy in the FLM transition process can be implemented by optimizing the performance of head nurses in improving service quality within existing units and strengthening the fit-and-proper test process. This may include strengthening clinical supervision roles, monitoring quality indicators, and improving compliance with standard operating procedures. Through this approach, FLMs actively contribute to improving service quality, patient satisfaction, and hospital competitiveness. This strategy aligns with situational leadership theory, which emphasizes that leaders should optimize team potential according to existing conditions (Wang et al., 2024).

Although the FLM transition process at RS X has been implemented relatively well, further strategic development is still required, particularly within nursing management systems. Prospective managers should be equipped with stronger managerial and leadership competencies to support nursing services effectively. Educational background also remains an important factor in managerial readiness. Therefore, fit-and-proper test processes should be conducted more objectively and minimize subjective considerations (Wang et al., 2024).

Furthermore, the market development strategy can be interpreted as efforts to expand the competencies and capacities of FLMs in responding to increasingly complex healthcare demands.

At RS X, this strategy may be implemented through advanced training programs, work unit rotations, and increased involvement of head nurses in strategic hospital management activities. This approach enables FLMs to develop broader perspectives beyond their respective units. This finding aligns with the concept of managerial competency development, which emphasizes the importance of continuous professional development (González-García et al., 2024). Therefore, establishing clear job descriptions, measurable performance indicators, and transparent evaluation systems within fit-and-proper tests are strategic steps necessary for managerial selection processes. In addition, within the Structural Empowerment framework, organizations must ensure that FLMs have adequate access to information, support, and resources. This may be achieved through strengthening internal communication systems, providing needs-based training programs, and increasing support from top-level management. Strong empowerment systems enable FLMs to perform their roles more effectively and contribute to improvements in healthcare service quality. Thus, the position of RS X within Quadrant II (“Grow and Build”) provides strategic opportunities to develop First Line Managers as key drivers of healthcare service quality improvement. The implementation of intensive strategies integrated with competency strengthening, organizational systems, and managerial support is expected to sustainably improve the effectiveness of FLM roles.

CONCLUSION

First Line Managers (FLMs) play strategic roles as intermediaries between managerial policies and operational healthcare service implementation. SWOT analysis findings indicate that RS This finding is supported by the IFE and EFE matrix results, which position the hospital in Quadrant II (“Grow and Build”), indicating strong organizational potential for growth through intensive strategic approaches. Therefore, FLM development should be continuously strengthened through competency enhancement, organizational system improvement, and adequate structural support to improve healthcare service quality and patient safety.

REFERENCES

- Al-Hamdan, Z., Manojlovich, M., & Tanima, B. (2021). Jordanian nursing work environments, intent to stay, and job satisfaction. *Journal of Nursing Scholarship*, 49(1), 103–110. <https://doi.org/10.1111/jnu.12265>
- Alilyyani, B., Wong, C. A., & Cummings, G. (2021). Antecedents, mediators, and outcomes of authentic leadership in healthcare: A systematic review. *International Journal of Nursing Studies*, 83, 34–64. <https://doi.org/10.1016/j.ijnurstu.2018.04.001>
- Ayuningtyas, D. (2022). *Strategic Management of Health Service Organizations*. Rajawali Press: Depok.
- Bautista, J. R., Lauria, P. A., Contreras, M. C. S., et al. (2020). Specific stressors relate to nurses’ job satisfaction, perceived quality of care, and turnover intention. *International Journal of Nursing Practice*, 26(1), e12774. <https://doi.org/10.1111/ijn.12774>
- Fuadi, MF, & Yuniarti, CA (2025). Overview of human resource management in health services in Indonesia: A literature review. *Indonesian Journal of Health Community* , 6(1), 42–49. <http://e-journal.ivet.ac.id/index.php/ijheco>
- González-García, A., Pinto-Carral, A., Pérez-García, E., & Fernández-Fernández, M. (2024). Competency framework for nurse managers: A systematic review. *Journal of Advanced Nursing* , 80(2), 456–470. <https://doi.org/10.1111/jan.15890>
- Gunawan, J., Aunguroch, Y., Fisher, M. L., McDaniel, A. M., & Marzilli, C. (2020). Managerial competence of first-line nurse managers in public hospitals in Indonesia. *Journal of Multidisciplinary Healthcare*, 13, 1017–1025. <https://doi.org/10.2147/JMDH.S269150>
- Hulu, SRK, Simanjuntak, IC, Hernawati, L., Djarang, L., Indriasari, R., Hariyati, RTS, & Handiyani, H. (2023). Analysis of strategic plans for nursing human resources (HR) in hospitals in the Jakarta area. *Indonesian Journal of Nursing Scientific*, 3(1), 16–21. <https://doi.org/10.58467/ijons.v3i1.61>

- Joint Commission International. (2023). Joint Commission International accreditation standards for hospitals (7th ed.). JCI.
- Laschinger, H. K. S., Wong, C. A., & Grau, A. L. (2014). Authentic leadership, empowerment and burnout: A comparison in new graduates and experienced nurses. *Journal of Nursing Management* , 22(4), 541–552. <https://doi.org/10.1111/jonm.12118>
- Ministry of Health of the Republic of Indonesia. (2022). National Hospital Accreditation Standards (SNARS) edition 1.1 . Ministry of Health of the Republic of Indonesia.
- Paarima, Y., Kwashie, A. A., Asamani, J. A., & Ofei, A. M. A. (2022). Leadership competencies of first-line nurse managers: A quantitative study. *Leadership in Health Services*, 35(2), 219–233. <https://doi.org/10.1108/LHS-05-2021-0047>
- Purba, OH, & Ningsih, AK (2025). The role of human resource management in improving hospital service quality to support accreditation at Grandmed Hospital Lubuk Pakam. *Jurnal Kesmas dan Gizi (JKG)* , 8 (1), 665–669. <https://doi.org/10.35451/4swms297>
- Putri, AN (2022). Analysis of Nursing Personnel Competency Development Needs in Improving the Quality of Hospital Services . Thesis. Master of Nursing Program, University of Indonesia.
- Wang, X., Liu, Y., & Wang, J. (2024). Application of situational leadership in nursing management: A scoping review. *BMC Nursing* , 23(1), 112. <https://doi.org/10.1186/s12912-024-02582-9>
- Wong, C. A., Cummings, G. G., & Ducharme, L. (2013). The relationship between nursing leadership and patient outcomes: A systematic review update. *Journal of Nursing Management* , 21(5), 709–724. <https://doi.org/10.1111/jonm.12116>
- Zhang, R., Li, Q., & Chen, Y. (2025). Difficulties and support needs of new nurse managers during role transition: A qualitative study. *International Nursing Review* . Advance online publication. <https://doi.org/10.1111/inr.13045>.