

# Work-Life Balance, Work Performance and Quality of Care among Staff Nurses in Catarman Doctors Hospital

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## ABSTRACT

This study examined the relationship between work-life balance, work performance, and quality of care among nurse at Catarman Doctors Hospital. It employed a descriptive correlational research design utilizing a purposive sampling of 60 registered nurses from different clinical units. An online survey was deployed and completed to generate the necessary data. The data underwent statistical data treatment using descriptive statistics and Pearson's correlation. The research reveals that most respondents were young, early-career nurses working rotational shifts, with moderate levels of work-life balance and high work performance ratings. Quality of care was generally perceived as good, particularly in patient safety and communication. Statistical analysis indicated a significant positive relationship between work-life balance and both work performance and quality of care, suggesting that nurses who effectively manage personal and professional responsibilities tend to deliver higher quality services. The results highlight the need for hospital administrators to implement supportive policies such as flexible scheduling, peer mentorship, and wellness programs. This is to enhance nurse well-being and sustain care quality. This study contributes localized evidence on the interconnectedness of nurse welfare, performance, and patient outcomes in a provincial hospital setting.

**Keywords:** work-life balance, Quality of care, staff nurse, hospital workplace

## INTRODUCTION

Nurses serve as the backbone of healthcare institutions, playing an indispensable role in ensuring the delivery of high-quality patient care. In hospital settings like Catarman Doctors, the staff nurses form the core labor force tasked with delivering comprehensive care, often under intense physical, emotional, and psychological demands. These frontline healthcare providers not only manage complex patient needs but also face the challenge of maintaining personal and family responsibilities. This dual burden has placed the concept of work-life balance at the forefront of nursing discourse.

The COVID-19 pandemic exacerbated these challenges, as revealed by Ancheta et al. (2021), which says Filipino nurses endured extreme burnout conditions because of the increased workload and the emotional stress brought about by the crisis, came to light. Despite this, job satisfaction fairly did not show any change implying that there is a strong commitment on the part of the professionals which may be concealing the existing mental issues. The case was the same with Mangcucang et al. (2024) who pointed out that nurses in Metro Manila who worked longer shifts during the epidemic went through very stressful times and felt less resistance, even more for those who were deployed to the high-risk units and had no work experience. These revelations speak volumes about the necessity to address stress that is work-related in a comprehensive manner and to understand its impact not only on nurse performance but also on patient outcomes.

Despite these concerning trends, limited research has been able to discuss in more detail the ways in which staff nurses manage these stressors in small community hospitals such as Catarman Doctors. Most of the

references found are located at the hospitals that are operating off the tertiary level within the urban regions. Consequently, the situation for healthcare providers in the provinces has not been revealed, so the removal of an absence of words will worsen the situation greatly. This investigation is designed to discover what relationship there is and what the direct impact of it is when it comes to work-life balance, job performance, and perceived quality of care in the setting of nurses at Catarman Doctors. The first-hand information and personal stories from the same sources hint that the situation shows a consistent increase in nurse burnout, the existence of the intention to leave, and patient dissatisfaction issues that are under examination.

According to latest meta-analyses, nurse burnout has been established to be a chronic problem with many negative effects on both an individual and general clinical outcome as indicated by recent meta-analyses. For example, one study found that over 288,000 nurses from 32 countries had participated in a 2024 global study, and 54% of them reported that they had faced the problems of burnout at work. Safety climate is the most perceptible and the shortest way to lower patient satisfaction, besides, besides which the involvement of the nursing staff in the care process is found to be more effective by the patients (Shanafelt et al., 2024). Cascade is another term to describe effects, and it means that one factor results in another one and the latter leads to the final one. These chain effects confirm that in addition to being a matter of personal health, the balance of work-life also serves as the institutional effectiveness and the safety of patients.

This study is focused on determining if the interrelationship of work-life balance, job performance, and patient care quality has any political implications. The accomplishment of the study will assist hospital administrators, policy makers, and nurse educators in defining the scope of the investigations. The study will be used as a weapon in the fight against corruption by implementing such measures as there should be a work program and physical and mental health programs and the training of the partners in the health system in rural and provincial locations. To conclude, the results aspire to develop a nursing workforce at Catarman Doctors and in the other hospitals of the country that is more resilient, more motivated, and more efficient. In the ever-changing field of healthcare, the ones who take care of the patients are the nurses who ensure that the clinics work in an efficient manner by the care given. However, the work of nursing which is full of longer hours, emotions, and complex patient situations causes a great deal of distress to their personal lives. Thus, the subject of work-life balance is one of the key factors which is affecting the overall health and the performance of healthcare workers in the present time.

In the study by Babapour, et. al. (2022), the presence of job stress has been found to be a significant factor that can bring down the nurses' life quality and the caregiving behaviors of the nurses indicating that the personal health and professional functioning are closely associated. When nurses are not well-rested or have little personal time, they lose their capacity to be kind and loving in their care-giving roles. This situation also causes not only dissatisfaction but also burnout, which gives a negative impact to the hospital as not only does it worsen the staff shortage and staff turnover, but it also leads to the further decline of service quality. The healthcare sector must deal with these drawbacks; even in small hospitals in remote areas such as Catarman Doctors, where work pressure is intensified due to limited resources. It is essential to study the work-life balance of staff nurses in this setting to come up with real-life solutions to increase both, the well-being of employees and patient outcomes.

In their study, Wahyudi & Deswarta (2024) stated that work-life balance and burnout are the reasons for eliciting nursing performance, albeit job satisfaction is the mediator. The Care Quality Commission in 2017 reports that those nurses who can balance personal and professional lives are engaged and motivated to their job. Whereas the staff that feel burnout because of failure to keep life and work boundaries strictly can hardly be expected to show effort and their clinical performance is negatively affected. This interrelationship manifests itself clinical environments where patient safety is of utmost importance are most affected. Keeping nurse performance at a high level is essential in Catarman Doctors, a place where inadequate staffing and workload are currently experienced. To tackle the root causes of nurse dissatisfaction and burnout, such as engaging in two-way conversations about workload and work hours, it also gives them the benefit of improving staff retention and morale, and the patient's overall experience. A proper understanding of the relationship between work-life and the performance for the respective issues like human behavior and operations can help the team identify effective and perhaps new methods to deliver better performance.

## METHODOLOGY

This research will make the most of a descriptive-correlational quantitative research design. The purpose is to investigate the association among the work-life balance, work performance, and quality of care among staff nurses at Catarman Doctors Hospital. Descriptive research design is a type of research that attempts to describe and summarize the nature and condition of a population without manipulating the variables. It is a method of generating data using the descriptive survey method, which involves the administration of questionnaires (Polit & Beck, 2012). The main purpose is to generate an accurate, systematic, and definitive idea of the subject that permits the researcher to be able to understand it and if necessary, modify and improve it.

On the other hand, a correlational design is a type of research that is used to find out whether there is a correlation between two or more variables and the extent of this connection (Creswell, 2014). The study will use the correlational approach to reveal the magnitude and direction of the relationships between work-life balance and work performance Work performance and quality of care.

This research will employ quantitative data collection methods, specifically the use of structured survey questionnaires, to measure the variables numerically and allow for statistical analysis.

This study will utilize purposive sampling, a non-probability sampling method that selects participants based on specific inclusion criteria relevant to the research objectives (Polit & Beck, 2012). Since the study seeks to understand how clinical staff nurses manage work-life balance and how it relates to their performance and the care they deliver, it is essential that participants are actively involved in direct patient care. This approach is appropriate when a focused population is needed, especially when generalizability to the broader nursing profession is less important than obtaining depth and accuracy from a contextually relevant group.

This study is planning to use a standardized self-completion questionnaire that consists of three sections, wherein each will evaluate some of the essential variables in the study, such as work-life balance, work performance, and quality of care. All the tools to be utilized are drawn from the set of the already validated ones and will be modified to suit the local hospital situation.

Data gathering follows an orderly procedure to properly facilitate this phase of the research. It ran for four weeks with a week of preparation. Data is retained and deidentified for five (5) years in encrypted storage; and delete online and digital forms after the retention period, per ethics approval. The password was destroyed immediately after analysis and verification. Data analysis was conducted in alignment with the sequential flow of the study's standard operating procedure (SOP), from data preparation to hypothesis testing. All statistical treatments were performed using IBM SPSS Statistics (Version XX), with a significance level set at  $p < 0.05$  for all inferential tests.

## RESULTS

This study aims to examine the relationship between work-life balance, work performance, and the quality of care provided by nurses at Catarman Doctors' Hospital, using a descriptive-correlational research design. Specifically, it seeks to determine how variations in work-life balance and performance levels among staff nurses affect the quality of healthcare delivery in a provincial hospital setting. Thus, a quantitative survey was done participated by the respondents specifically highlighted in this study.

The research respondents were drawn from a variety of hospital units, reflecting a broad cross-section of nursing roles. The General Ward had the highest representation (21.7%), followed by the Emergency Room and Nursing Services (16.7% each), and the Critical Care Unit (CCU) (13.3%). Other areas like the Operating Room (8.3%), Nursing Ward (11.7%), Renal/Dialysis (6.7%), Delivery/Newborn (1.7%), NICU (1.7%), and administrative nursing departments (aggregate -5%) were also represented.

It shows a moderately positively work-life balance with the mean score of 3.73 and SD of 0.50 on a 5-point Likert scale; wherein higher scores are considered better balance. This suggests that, on average, nurses felt

they were able to manage their professional and personal responsibilities. A mean around 3.7 denotes a generally favorable perception. In similar studies, moderate WLB levels are common.

It implies a positive finding as respondents generally feel capable of organizing their time and meeting both work and personal responsibilities effectively. As score near 4 on the 5-point Likert scale suggests, “agree,” which mean they agree on having good time in managing it well. It means they might prioritize tasks, avoid excessive overtime, or carve out personal time despite a busy schedule. Almost on par with time management, the emotional well-being domain averaged 3.91 with an SD of 0.62. It indicates that nurses generally feel emotionally stable and content with how they balance work and personal life.

This suggests a slight overall agreement that their hospital work interferes with personal or family obligations. In other words, the nurses somewhat agreed with statements such as having work duties intrude on family time, feeling under pressure to balance work and home responsibilities, and bringing work-related worries home. The mean of 3.20 thus indicates a mild level of role conflict but not an extreme conflict, but enough to reflect that many nurses experience some difficulty reconciling their professional and personal roles. The standard deviation of 0.80 denotes moderate variability in these experiences.

The results of the work-life balance questionnaire reveal that the nurses at Catarman Doctors Hospital experience a generally favorable level of balance between their work and personal responsibilities. The overall mean score of 3.73 indicates that most respondents agree they are managing their time and demands well, with minimal variability in responses. Time management emerged as the strongest area, suggesting that nurses are confident in organizing their duties effectively. Emotional well-being also scored high, showing that most nurses maintain psychological stability and manage workrelated stress despite the demands of the profession. Flexibility and managerial support ranked similarly high, which suggests that the institution offers accommodating work arrangements and supportive leadership. However, role conflict surfaced as the weakest domain. Although the mean score still leans positive, it reflects that some nurses have trouble in keeping work from affecting their personal life. This tension is likely due to rotating shifts, emotional demands, and responsibilities outside of work. Overall, the findings suggest that while the nurses are navigating work-life balance relatively well, areas such as role conflict still require thoughtful interventions from hospital management to ensure sustained well-being and job satisfaction.

The nurses self-reported a high level of work performance, with an overall mean score of 6.31 with an SD of 0.92 on a 7-point Likert scale. Given that 7 is the maximum, an average of 6.31 is remarkably strong. This suggests that, in general, staff nurses perceive themselves as executing their job duties very effectively.

The domain of task efficiency results shows how well nurses complete their duties accurately and promptly. It has a means of 6.04 with an SD of 1.14. This is the lowest among the performance subscales. Still, it is a very high rating based on the Likert, above 6 on a 7-point scale. It suggests that nurses “always” feel efficient. They reported being able to complete their tasks with minimal waste of time or resources, which is critical in a hospital setting where efficiency can affect patient throughput and safety. The slightly lower mean here and the highest standard deviation indicate more variability in perceived efficiency.

This performance domain shows a mean of 6.36 with an SD of 0.94. It is reflected that nurses are almost always present and on time for their shifts and duties. Attendance and punctuality are fundamental performance metrics in healthcare. The consistent presence ensures continuity of care and demonstrates reliability. A mean score of 6.36 indicates that tardiness or absenteeism is very rare among the respondents. Most nurses take their duty schedules seriously, arriving promptly and taking minimal unscheduled leave. The SD of 0.94 shows relatively little disagreement, meaning nearly all respondents rated themselves high on this aspect.

The respondents rated their patient interaction and communication very highly, with a mean of 6.40 and an SD of 0.92. This domain captures how effectively nurses communicate with patients, show empathy, and build therapeutic relationships. A 6.40 average implies that nurses feel they “almost always” communicate well and engage positively with patients. This is a critically important aspect of performance. communication can improve patient satisfaction and adherence to treatments. The high score is encouraging, indicating that nurses



at Catarman Doctors Hospital prioritize patient-centered care and likely exhibit kindness, clarity in explanations, and active listening. The consistency (SD 0.92) suggests most nurses agree on their strong communication abilities, which could reflect good training in patient communication and a culture that values compassion. It aligns with the literature emphasizing the link between nurse engagement and patient communication quality. Alhussin et al. (2024) found that when nurses are emotionally available and not fatigued, patients report higher satisfaction due to better responsiveness and empathy from nurses. In our study, the high communication scores could be partly due to the generally good emotional well-being nurses reported. They have the emotional capacity to connect with patients effectively.

Overall, this result is a strong asset for the hospital. The high-quality nurse-patient communication is associated with better patient outcomes and can differentiate the hospital in terms of care quality. Continuous training in communication would help maintain and even elevate this strength. The work performance of nurses at Catarman Doctors Hospital is self-rated as very high across multiple dimensions. They see themselves as efficient, reliable, communicative, and rule-abiding practitioners. These results are heartening, indicating a workforce that is confident in its abilities and delivering strong performance, which is an essential ingredient for quality healthcare delivery. The pattern of scores suggests a particular strength in quality and safety-oriented behaviors, which aligns with the growing emphasis on patient-centered care and safety culture in nursing. The slightly lower score in task efficiency points to an area where even a good team can improve; addressing workload and process optimization could turn that perceived “almost always efficient” into “always efficient.” Importantly, these performance outcomes seem to correlate with the earlier finding of a reasonably good work-life balance. When nurses can manage stress and personal duties, they likely come to work more focused and energized, leading to better performance. It is dynamic supported by research. Adella et al. (2024) explicitly noted that nurses with strong WLB demonstrated greater focus and accountability at work, partly due to lower emotional exhaustion. The data exemplifies that principle in practice. Being said, we must also consider that these are self-reported measures; while nurses tend to be reasonably accurate in selfassessment, there could be an optimism bias. Still, even if slightly inflated, the relative differences between domains are informative. Nevertheless, maintaining high nurse performance will depend on supporting the factors that enable it. These could be fair workloads, recognition, continuous training, and work-life harmony.

The nurses’ self-evaluation of the quality of care they provide is quite high. On a 4-point Likert scale, the overall mean quality of care score was 3.67 with an SD of 0.50. This indicates that, on average, nurses perceive the care they deliver to patients as between “good” and “excellent.” An overall score near 3.7 out of 4 is a strong endorsement of care standards. It means nurses believe they are providing high-quality care in most situations. The moderate standard deviation of 0.50 suggests a fair degree of agreement among respondents, with most clustering in the upper range of quality ratings and very few indicating mediocre or low quality.

In terms of patient safety, nurses rated the quality of care with a mean of 3.68 and an SD of 0.56 on the 4-point scale. This high score indicates that nurses strongly believe they are maintaining safe practices and preventing harm to patients in their daily work. A 3.68 is very close to “excellent.”

To determine if nurses’ work-life balance has a measurable impact on the quality of care they provide, a Pearson correlation analysis was conducted between the overall WLB scores and overall quality-of-care scores. The results show an  $r$ -value of  $-0.037$  with a  $p$ -value of  $0.777$ . This correlation is very close to zero and statistically not significant at the conventional  $0.05$  threshold. In practical terms, an  $r$  of  $-0.037$  indicates essentially no linear relationship.

If one variable changes, the other does not show a consistent upward or downward trend. The negative sign is so small as to be trivial, and the high  $p$ -value (much greater than  $0.05$ ) means we cannot reject the null hypothesis of no correlation. Therefore, we accept the null hypothesis that work-life balance and quality of care are not significantly related in this sample.

Further analysis showed that work-life balance and quality of care are not significantly differ by demographic characteristics such as age, gender, civil status, years of experience, or hospital affiliation. However, engagement levels varied significantly by age group and hospital, with certain hospitals demonstrating higher engagement scores, suggesting that institutional practices may contribute to differences in engagement.

## DISCUSSION

The significant positive correlation between work performance and quality of care in this study highlights that the two go together. When nurses perform at a high level, patients receive high-quality care. This reinforces the core premise of healthcare management through investing in the nursing workforce's capability and performance has direct benefits for patient outcomes. It also complements the broader literature, which consistently finds that metrics of nurse performance are strong predictors of patient safety and satisfaction. Our data provides local evidence of this global principle. Ultimately, ensuring that nurses can maintain peak performance through supportive work-life policies, sufficient staffing, and engagement strategies will likely continue to yield excellent quality of care in Catarman Doctors Hospital. The interrelationships observed here offer valuable insights into the hospital's policy and for future research. By focusing on tangible performance improvements may show immediate quality benefits, while worklife balance, although crucial for nurses' well-being and retention, might require a longerterm or indirect view to see its influence on care quality. Each variable plays a role in the ecosystem of healthcare delivery, and our findings emphasize that the pathway from nurse well-being to patient well-being often runs through nurse performance. Keeping that pathway strong is essential for sustaining high standards of care.

Practical recommendations for staff voice and schedule control must be enhanced. Nurses benefit greatly when they can participate in shift assignments, swap shifts, or request fixed rosters. Providing true access to flexible working arrangements, not simply policy statement, boosts well-being and indirectly improves performance. This stems from evidence showing that flexibility grounded in employee choice improves job satisfaction and commitment. Flexibility was identified as the top driver of nurse satisfaction, outperforming pay by a substantial margin. Transparency and fair negotiation in shift scheduling foster fairness, reduce role conflict, and support mental health. Nurse leaders should pilot collaborative scheduling systems, involve team input and shift start times based on actual preferences, to improve morale and retention.

The interrelationships observed here offer valuable insights into the hospital's policy and for future research. By focusing on tangible performance improvements may show immediate quality benefits, while work-life balance, although crucial for nurses' well-being and retention, might require a longer-term or indirect view to see its influence on care quality. Each variable plays a role in the ecosystem of healthcare delivery, and our findings emphasize that the pathway from nurse well-being to patient well-being often runs through nurse performance. Keeping that pathway strong is essential for sustaining high standards of care.

The research affirms that nurses at Catarman Doctors Hospital maintain satisfactory work-life balance, high performance standards, and a strong perception of care quality. Time management, emotional resilience, and managerial support stand out as strengths in sustaining nurse well-being. Role conflict remains the one domain with noticeable friction. This result is likely linked to rotating shifts and the stressful nature of nursing tasks.

While work-life balance does not directly predict perceived quality of care in this study, its role in nurturing engagement and performance remains critical. Work performance surfaced as the most proximal predictor of care quality. When nurses perceive themselves as efficient, communicative, and protocol-compliant, patients receive more consistent and safer care. This aligns with extant research linking nurse engagement and performance to improved patient safety, satisfaction, and clinical outcomes.

Furthermore, the lack of significant direct correlation between WLB and quality of care does not negate its importance. Evidence shows that poor work-life balance contributes to burnout, turnover, and impaired psychological health. These factors that eventually undermine performance and care outcomes. Similarly, nurses highly stressed by conflicting demands or rigid schedules report long-term consequences in both job satisfaction and retention.

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