

# Culture Value: Predictors of Preceptor Success for Quality Nursing Students

M. ARIFKI ZAINARO<sup>1</sup>, SUDJARWO<sup>1</sup>, HASAN HARIRI<sup>1</sup>, APRINA<sup>2</sup>,  
DYAH WULAN SUMEKAR RENGGANIS WARDANI<sup>3</sup>, PARGITO<sup>1</sup>, RIDWAN RIDWAN<sup>4</sup>,  
ADE MULYANAH<sup>5</sup>, USASTIAWATY CIK AYU SAADIAH ISNANINY<sup>6</sup>,  
ACHRIL ZALMANSYAH<sup>5</sup>, RIAS TUSIANAH<sup>7</sup>, TUBAGUS ALI PUJA KESUMA<sup>8</sup>,  
EDY IRAWAN<sup>9</sup>, ALBET MAYDIANTORO<sup>14</sup>

<sup>1</sup>Program Doktor Pendidikan Universitas Lampung, Bandar Lampung, INDONESIA

<sup>2</sup>Politeknik Kesehatan Tanjung Karang, Lampung, INDONESIA

<sup>3</sup>Fakultas Kedokteran Universitas Lampung, Bandar Lampung, INDONESIA

<sup>4</sup>SMP Negeri 3 Way Pengubuan, Lampung Tengah, INDONESIA

<sup>5</sup>Badan Riset dan Inovasi Nasional (BRIN), Jakarta, INDONESIA

<sup>6</sup>Universitas Malahayati Bandar Lampung, Lampung, INDONESIA

<sup>7</sup>SMP Negeri 1 Simpang Agung, Central Lampung Regency, INDONESIA

<sup>8</sup>IAIN Metro, Lampung, INDONESIA

<sup>9</sup>Universitas Muhammadiyah Pringsewu, Pringsewu, INDONESIA

*Abstract:* - One of the essential facts about the not optimal performance of the preceptors is that cultural factors are not in the process of preceptors because culture is a determinant of the nature of decisions that in life, and the value system of cultural elements directly influences individual behavior. Cultural values have a close relationship with performance. This study aims to analyze the influence of cultural values on preceptor performance. This type of research is quantitative. The population in this study were all professional nursing students at the Health College of Lampung Province. Samples using a simple random sampling technique to meet the feasibility of SEM analysis. Based on the results of the calculation of Cultural Value (CV) has a direct effect on Preceptor Performance (PP) of 1.30. This study concludes that there is a positive influence of cultural values on preceptor performance.

*Key-Words:* - Influence, Culture Value, Preceptor Performance.

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## 1 Introduction

Strategies to improve the quality of health human resources according to quantitative and qualitative needs. Therefore, professional education management is needed to improve education. The role of health workers will determine the success of development plans to achieve access to the Ministry of Health of the Republic of Indonesia in 2024, namely a healthy, independent, and just society, [1].

Clinical learning is a practice in working place where students of nursing professionals apprentice under supervision by preceptors. The phase is essential for students to do. By doing so, students of nursing professionals will get an insight into the working coverage and problems. Working with other people needs a good relationship. A relationship should be humanistic so that good practices run smoothly to achieve increased

competence, [2]. One of the advantages of learning in a clinical environment is that problem-focused learning can motivate students to actively participate in empowering, critical assessments, action, and professionalism played by the preceptor, [3]. If the clinical learning program does not run well, it is unlikely that health colleges will produce quality graduates hence the role of performance is much needed, [4].

However, receptor performance has not received much attention during the last few decades [5]. It is still relatively difficult to find research on receptor performance in Indonesia in Lampung Province, [6], [7], [8]. Meanwhile, education graduates still encounter obstacles, [9]. Based on this, optimal preceptor performance will produce educational graduates who utilize them as professionals in the field. The researcher found that there was knowledge about the performance of the

receptors, especially in education management, including those who had not been well-rounded.

Many factors that affect the performance of the perceiver include workload, rewards, work stress, work environment, organizational culture, motivation, supervision, leadership, social values, cultural values, and beliefs. This research focuses on the effect of cultural values on preceptor performance.

One of the essential facts about the performance of the preceptors is that preceptors do not include cultural factors in the process of preceptorship. Culture is a determinant of the nature of decisions that must be made in life. The value system of cultural elements directly influences individual behavior. Cultural values and social values have a close relationship with performance. Humans as social beings need other people in all activities, whether coworkers, superiors, or students, [10]. It also applies to life in the world of work, one of which is the field of nursing.

Based on a preliminary survey on the performance of preceptors that the author conducted in 18 provinces in health universities in Indonesia on May 22, 2021, with a total of 112 respondents, it was found that the performance of the receptors was still less than optimal, 35 respondents (31.5%), many receptors in the frequency range. attendance is still lacking and only sufficient as many as 49 respondents (43.8%), generally, the preceptors come on the first and last day of the practice period only. It can be used to master the receptors in the practice field to guide students. Cultural Value Factors to measure the Performance of Nurse Profession Student Preceptors in Lampung Province”.

## 2 Problem Identification

The authors identified knowledge gaps seen in previous research on receptor performance [6], [7], [8]. Perceptor performance deserves further exploration to provide an understanding of the preparation of guidance programs, implementation of guidance programs, implementation of clinical guidance evaluations, and implementation of improvement and enrichment programs. Similar to cultural values, the authors identify knowledge gaps seen in previous research on cultural values. Research on cultural values among nursing profession students is difficult to find, [11], [12]. Cultural values deserve to be explored to provide an understanding of how cultural values play a role in the field of nursing education.

This research reveals the essential role of cultural values. The world has become so globalized that it has created friction between individuals, groups, and ethnic groups. Every individual needs to learn to understand each other and the differences in cultural values that are part of one's life. Understanding each other's differences is a catalyst for positive and constructive synergies. The role of the preceptor is essential if faced with a clash of cultural values with students' practice not only hinders but also distances from the expected results.

## 3 Formulation Problem

Based on the formulation of the problem, they can master knowledge about policies in practical fields to guide student nurses. So, the formulation of the problem is how is the influence of cultural values on the performance of the nurse profession student in Lampung Province?

### 3.1 Research Purposes

This study aims to analyze the influence of cultural values on preceptor performance.

### 3.2 Benefits of Research

This research contributes to human resources and student skills, maintaining and developing cultural values in their professional duties. For the management of higher education quality assurance is the planning and development of Human Resources for Health Workers, especially the preceptors. The quality of guidance for students improved by paying attention to variables Exemplary Leadership and Cultural Values.

## 4 Literature Review

### 4.1 The Importance of Education

Education is a deliberate effort from parents, namely the child's parents or people who are obliged to educate as teachers, priests, and Kiai as being responsible for more than all their actions. What the parents meant was, [13]. So that the child can have a happy life and can be himself, society, nation, state, and religion, [14].

### 4.2 Humanism Education

Effective education is learner-centered education in which students have the motivation to learn to benefit other humans. Learners who learn are students who are spiritually dedicated and have the

dedication to provide individual and social benefits, [15]. Human education is building communication and relationships between personal and school community groups. In developing and cultivating a relational model like this, students will be able to present it in such a way that the learning process has a meaningful relationship with the school community. Thus, the main points of effective humanist education are learning respect, respect, and communicating optimally even though in different scopes, [16].

### **4.3 Preceptorship**

#### **Definition**

Clinical education refers to the Association of Indonesian Nurses Education Institutions, [17], described as an immersive experience. During clinical practice, students care for patients. [18] describes education as direct observation of patients.

Clinical Preceptors or receptors. Clinical receptors or clinical receptors are used interchangeably in the literature. Preceptors are lecturers employed by institutions responsible for helping professional students achieve their learning outcomes. These receptors are responsible for planning and carrying out instructions and demonstrating the performance of nursing-professional students [19], [20]. [21] defines a preceptor as a person who integrates theory into practice and creates an optimal learning environment. Similarly, [22], [23] define a preceptor as a person who teaches in a practice setting.

### **4.4 Nursing Service**

Assessment is a process of assessing the results of nursing care to evaluate the feasibility and effectiveness of the action nurse. The benchmark for the nurse's assessment is the standard of nursing care.

In assessing the quality of nursing services to patients, nursing practice standards are guidelines for nurses carrying out nursing care. Standards of nursing practice have been described, [24] refers to the stages of the nursing process, including assessment, nursing diagnosis, planning, implementation, and evaluation, [24].

### **4.5 Entrepreneurship in the Health Sector**

In the health sector of nursing, nurses must have an entrepreneurial spirit. Nurs-ecopreneurs are agents of change and must try to show their identity in facing various current global challenges, both internal and external challenges. This challenge is

increasing along with the demand to make nursing respected by other professions and the general public. One of the challenges that need special attention for an entrepreneur is the impact of the concept of entrepreneurship in nursing which is closely related to the professionalism of nursing services to the community.

The business-oriented paradigm of health services demands that it is both human-oriented but also profit-oriented. In the end, health services were not managed professionally. The quality of health services, the affordability of costs by clients, and improving the quality and quantity of medical facilities become vulnerable when there is a shift in the paradigm of business-oriented health services, [25]

### **4.6 Culture value**

#### **Definition**

Cultural values are abstract concepts about general social problems that are important and valuable for people's lives. These cultural values guide the behavior of most stakeholders, exist in their minds, and are difficult to explain rationally. Cultural values are lasting and are not easily changed or replaced by other cultural values, [26], [27], [28], [29]. Education equips students so that one day they can deal with the complexities of society which often develop unexpectedly and give rise to values arising from problems in the environment, society, and schools. Then came those who talked about the strengths and weaknesses of a person in handling his views [30], [31], [32].

Based on the description above, cultural value is a general conception that organizes and influences behavior related to nature, human relations with nature, human relations about things desirable by the environment, and fellow human beings. Likewise, cultural values found in the school environment significantly affect teachers and students themselves as a disciplined culture where students are often late to school even though there are rules that apply at school [26], [27], [28], [29].

### **4.7 Understanding Culture**

Culture is a complex whole that includes abilities and habits such as knowledge, belief, art, morality, law, customs, and habits that are acquired by people as members of society, and are the forming elements of behavior that are supported by members of society, [33].

Culture is the whole value, social order, and human order, which is embodied in the philosophy of life and the philosophy of the nation in all

aspects of social, state, and national life, which become the basic pattern of governing behavior and existing structures, [33].

Based on the description above, culture is the behavior and results of human learning in the actions of people's lives. Culture emerges from the way of life of a human. Culture and cultural values are abstract things, which people know the thought while human life through the five senses [34], [35].

#### **4.8 The Function of Cultural Values**

Cultural values have several functions in human life. The role of cultural values are as follows, [36]: 1) Cultural values work as standards, namely standards that show behavior in various ways, namely; a) Bringing individuals to take unique positions on social issues. b) Influencing individuals in choosing an ideology or religion. c) Assess and determine the right and wrong of oneself and others. d) It is a center for the study of benchmarking processes to determine moral and competent individuals. e) Values used to influence others or to change them; 2) Cultural values work as a general plan in resolving conflicts and making decisions; 3) The value of motivational work culture. Values have motivational components as cognitive, affective, and behavioral components; 4) Cultural values function to adjust to values according to the way of behaving and the ultimate goal directed at adjustment, 5) Cultural values work as a defensive ego; 6) Cultural values work as knowledge and the self-actualization, [37].

#### **4.9 Cultural Traits**

Many cultural traits that affect a person or group impact the moral formation of a person, as seen from the nature of culture. These cultural traits change and shape a person's morals that are directed and do not deviate. However, cultural values are also not only passed down by ancestors. There are cultural values oriented toward stories, fairy tales, and literature so that not only do local people know and understand other people who are not in the local community themselves know it through writing, [38].

#### **4.10 Various Cultural Values**

Various kinds of cultural values are closely related to culture and society. Every society or culture has values of culture society itself is an infinite value to the people who have it, [38].

Culture is an explanatory variable or intervention in exploring customer satisfaction with services and products, [39]. Cultural norms influence consumer expectations and evaluations of

services and products because "the cultural background of consumers may influence the selection for complex service quality. The contextual view of customer experience examines the impact and cultural norms on the process of customer cognition that cultural practices, regularized rules, and social norms are indirect contextual influences, [40], [41].

There are many difficulties when dealing with the concept of culture. [42] presents three contradictory cultural characteristics cause (i) Continuity and change concept called culture. On the one hand, there is a cultural tradition (that is, a continuation of the existing cultural values and norms), and a new culture emerges in parallel with the existing one (that is, the cultural values and norms change, and the existing one). (ii) Standardization and differentiation refer to culture as a tendency to standardize values and behavioral patterns on the one act as uniform ideas and variations according to individual, subcultural, and small cultural values and norms. (iii) Openness and limitations refer to national culture, [43].

Quality, safe and compassionate patient care is a top priority for healthcare globally. However, the extensive report on the Gibbon and Crane treatment and the culture-insensitive treatment is a growing concern. With the widening sociocultural dispersal of today's population, it is now that educators build on cultural competence as a graduate capability and a way of coping with the continuing decline in standards of care [44], [45].

Cultural competence is the continuous growth of the ability and capacity to provide safe and quality care to patients from various cultural backgrounds. Socio-cultural diversification process variables such as; customs, ethnic identity, language, gender, socioeconomic status, and sexual orientation influence interpretation, [39]. The discussion of nursing culture sees the importance of integrating the development of cultural understanding through a values-based learning approach. It challenges nurse educators to incorporate innovative teaching practices that make cultural competence a more visible responsibility of future nurses in providing quality care, [46].

## **5 Method**

This research will be conducted at the Health College of Lampung Province. This type of research is quantitative. The population in this study were all nursing professional students at the Health College of Lampung Province in the odd 2021/2022 academic year, Malahayati University

with 34 students, Mitra Indonesia University with 110 students, Polytechnic Ministry of Health Tanjung Karang with 92 students, University of Muhammadiyah Pringsewu 187 students, and Aisyah University Pringsewu 81 students with a total population of 504 Nurse Profession Students, [47]. Samples were taken using a simple random sampling technique to meet the feasibility of SEM analysis. Inclusion criteria, Nurse Profession Students who have completed the first semester, Nurse Profession Students in Lampung Province, and Nurse Profession Students at State and Private Universities. The questionnaire is in the form of a Likert scale model. The questionnaire consists of several statement items equipped with 5 answers. Measurement is done by asking respondents to choose one of the answers that have been provided through the google form. Each alternative answer gets a weighted score between 1 to 5. 1 = Strongly disagree (STS), 2 = Disagree (TS), 3 = Doubtful (RR), 4 = Agree (S), 5 = Strongly Agree (SS).

## 6. Results and Discussion

### 6.1 Result

#### 6.1.1 Data Demographic

The total respondents who were willing to be involved were 212 student precepts from Malahayati University, Tanjung Karang Health Polytechnic, Mitra Indonesia University, Aisyah Pringsewu University, and Pringsewu Muhammadiyah University located in the administrative area of Pringsewu Regency and Bandar Lampung City. Respondents from Bandar Lampung City were 78.3% (166 respondents) while from Pringsewu District 21.7% (46 respondents). The number of respondents in the range of 200 to 400 respondents met the requirements that demanded an adequate number of respondents, [47].

Respondent Data Based on Universities, the total number of respondents who are willing is 212 respondents with details of Malahayati University as many as 20.3% (43 respondents), Tanjung Karang Health Polytechnic 21.2% (45 respondents), Aisyah Pringsewu University 25.5% (54 respondents), University Muhammadiyah Pringsewu 10.8% (23 respondents), and Mitra Indonesia University 22.2% (47 respondents).

The following is the demographic data based on the status of the university. State Universities were 21.7% (46 respondents), while Private Universities were 78.3 (166 respondents).

The following demographic data is based on ages 18-23 years as much as 34.9% (74 respondents), age 24-29 years 29.7% (63 respondents), and age 30 years as many as 35.4% (75 respondents). Gender showed that the male gender was 31.1% (66 respondents), while the female sex was 68.9% (146 respondents).

### 6.1.2 Requirements Analysis Test Results

#### 6.1.2.1 Test instrument requirements

This study uses standardized instruments commonly used by researchers, in general, to measure people's behavior within variable limits and within the framework of various research designs and traditional and cultural backgrounds. Thus, the researcher thinks that it is urgent to test the readability of the instrument by the respondents. The questionnaire instrument has been validated for legibility by experts in the field of education management and leadership through a Forum Group Discussion (FGD) and declared feasible. To test the reliability and validity of the readability of the instrument, the authors used preliminary research data sources with a total of 30 respondents. The data were analyzed using SPSS Version 23.

#### 6.1.2.2 Test of Reliability and Validity of Preceptor Performance Variables

The researcher presents the calculation of SPSS version 23 which includes an output table in the form of a Case Processing Summary, Reliability Statistics, and Item-Total Statistics. Here's the presentation in order.

Table 1. Case Processing Summary Preceptor Performance Variables

Case Processing Summary			
		N	%
Cases	Valid	30	100.0
	Excluded <sup>a</sup>	0	.0
	Total	30	100.0

a. Listwise deletion based on all variables in the procedure.

Table 1 shows the number of respondents (N) as many as 30 respondents in the percentage column (%) showing the number 100 indicating that there is no missing respondent data.

Table 2. Preceptor Performance Statistical Reliability

<b>Reliability Statistics</b>	
<b>Cronbach's Alpha</b>	<b>N of Items</b>
.768	19

Table 2 shows Cronbach's Alpha value of 0.768 with a total of 19 items.

Table 3. Case Processing Summary Variable Cultural Value

<b>Case Processing Summary</b>			
		<b>N</b>	<b>%</b>
Cases	Valid	30	100.0
	Excluded <sup>a</sup>	0	.0
	Total	30	100.0

a. Listwise deletion based on all variables in the procedure.

Table 3 shows the number of respondents (N) as many as 30 respondents in the percentage column (%) shows the number 100 indicating that there is no missing respondent data.

Table 4. Reliability Statistic Variable Cultural Value

<b>Reliability Statistics</b>	
<b>Cronbach's Alpha</b>	<b>N of Items</b>
.786	11

Table 4. shows Cronbach's Alpha value of 0.786 with a total of 11 items.

### 6.1.2.3 Amos Analysis Requirements Test

The requirement that must be met is the fit of the model, i.e., goodness of fit (GOF). If the model fit has been obtained, then analysis and interpretation can be carried out. GOF in the regression model shows the degree of good that the model can produce estimates that are under the actual value. The general measure of GOF that is commonly used in regression models is the proportion of variance (sample) that can be explained by the model. This site is called R<sup>2</sup> (R-Square). To obtain a model fit, the following steps were taken.

There are several methods to test the goodness or suitability of a model as a whole, namely: 1) Chi-Squares statistical test ( $\chi^2$  Test); 2) Root Mean Squares Error of Approximation (RMSEA); 3) Goodness of Fit

Index (GFI); 4) Adjusted Goodness of Fit Index (AGFI); and 5) Root Mean Squares Residual (RMSR), [48], [49], [50].

The five compatibility tests have at least some calculation results that indicate that the interpretation is fulfilled. Some that show the results can be interpreted are CMIN/DF is 2-5. probability (P) is > 0.05. Baseline Comparison which includes CFI, TLI, IFI, RFI, and NFI is 0.80, or getting closer to 1 means the model is getting fit, and RMSEA (Root mean square error of approximation) is 0.08. Here the researchers present a reference table for the overall structure model fits. The following researchers show a table about the Goodness of the Fit Index.

Table 5. Goodness of Fit Index

No	The goodness of Fit Index	Cut off Value (Nilai Batas)			Criteria
		Parameter Good Fit	Parameter Marginal Fit	Obtained	
1.	CMIN/DF	< 3		2,13	Good Fit
2.	CFI	≥ 0,90	≥0,50 - ≥ 0,90	0,83	Marginal Fit
3.	TLI atau NNFI	≥ 0,90	≥0,50 - ≥ 0,90	0,81	Marginal Fit
4.	NFI	≥ 0,90	≥0,50 - ≥ 0,90	0,73	Marginal fit
5.	RFI	≥ 0,90	≥0,50 - ≥ 0,90	0,70	Marginal fit
6.	IFI	≥ 0,90	≥0,50 - ≥ 0,90	0,83	Marginal Fit
7.	RMSEA	≤ 0,08		0,07	Good Fit

Sumber: Data Primer Diolah Peneliti dengan AMOS 23

Referring to Table 5 above, the researcher can conclude that overall the full model is an acceptable Fit Model. Overall the Goodness of Fit Index can be assessed based on five (5) criteria. Researchers who use SEM are not required to meet all the criteria for the Goodness of Fit Index, [48], [49], [50]. Researchers are advised to meet four (4) to five (5) criteria for the Goodness of Fit Index. Fulfillment of four (4) to five (5) Goodness of Fit Index is considered sufficient to assess the feasibility of a model provided that Absolute Fit Indices, Incremental Fit Indices, and Parsimony Fit Indices are represented, respectively, [48], [49], [50].

Based on Table 5 of the Goodness of Fit Index, the researcher concludes that the confirmed model is feasible to use to interpret the variables studied. After the suitability conditions are met, the next step is to estimate. The results of the estimation of Amos 23, the authors present as follows.

#### 6.1.2.4 Estimate

In the following, the researchers describe several estimates made called the Maximum Likelihood Estimates method. Maximum likelihood estimates are regression weights of exogenous variable variance, the covariance between exogenous variables, means of exogenous variables, intercepts to predict endogenous variables of quantity estimates, and some outputs that can also be generated when requested. Squared multiple correlations (to estimate multiple squared correlations), correlations between exogenous variables (to estimate correlations and standardized regression weights), and standardized regression weights (to estimate correlations and standardized regression weights).

Next, the researcher presents the Standardized Regression Weights: (Group number 1 - Default model). The estimated standard regression weight

can be seen in the estimation table column. Standard methods control the reporting of standard parameter estimates (correlation between exogenous variables, and standardized regression weights). When used with the sample moments method, it controls the reporting of sample correlations. When used with the implied moments or all implied moments method, this method controls the reporting of implied correlations. When used with total effects, it controls the reporting of standard direct effects, indirect effects, and total effects. The following are the results (output) in Table 6.

Table 6. Standardized Regression Weights: (Group number 1 - Default model)

Standardized Regression Weights: (Group number 1 - default model)			
			Estimate
PP	<---	CV	1,30

Source: Primary Data Processed by Researchers with AMOS 22

Regression weight gives the value of the unstandardized and standardized regression coefficients. The standardized value is the unstandardized value minus (-) by the Standard Error (SE). Cultural Value (CV) has a positive effect on Preceptor Performance (PP) with a standardized coefficient of 1.30 (Cultural Value (CV) 1 will increase Preceptor Performance (PP) positively by 1.30). Next, the researcher presents the Standardized Direct Effects (Group number 1 - Default model).

Table 7. Standardized Direct Effects (Group number 1 - Default model)

	PP
CV	1,30

Source: Primary Data Processed by Researchers with AMOS 22

Based on the results of the calculations in Table 7. Cultural Value (CV) has a direct effect on Preceptor Performance (PP) of 1.30.

## 6.2 Discussion

### 6.2.1 Cultural Values have a Positive Effect on the Performance of the Perceiver

Based on the results of calculations with the SEM test in the standardized direct effects output table, cultural value influences the performance of the preceptors by 1.30 (see Table 7), then  $H_0$  is rejected, which means that the cultural value has a positive effect on the performance of the preceptors.

The result of this study is in line with the theory of the influence of cultural values on performance. To identify the processes that underlie changes in job performance, experts distinguish between transition and maintenance stages. The transition stage occurs when the individual is new to a job and when the tasks are new [51], [52]. The maintenance phase occurs when the knowledge and skills needed to perform the job are learned and when task completion becomes automated. To perform during the transitional phase, cognitive abilities are necessary. During the maintenance stage, cognitive abilities turn to dispositional factors (motivation, interests, values) of increasing relevance. Changes in performance from time to time do not vary between individuals. There is increasing empirical evidence that individuals differ concerning patterns of intra-individual change, [53], [54], [55]. These findings indicate that there is no uniform pattern of performance development over time.

In addition, there is short-term variability in performance caused by changes in the individual's psycho-physiological state, including processing capacity, [56], [57], [58]. These changes can be caused by long working hours, disruption of circadian rhythms, or exposure to stress and can lead to fatigue or decreased activity. However, this situation does not necessarily result in a decrease in individual performance, for example, in the ability to compensate for fatigue, either by switching to a different strategy or by increasing effort [59], [60].

Individual variables are grouped on ability, cultural background (Cultural Value), and geography. Variable abilities and skills are the main factors that influence behavior and performance. Meanwhile, geographic variables have an indirect effect on individual behavior and performance. Values arise from problems that exist in the environment, community, and schools where education is given to equip students so that later they can face complexities in society that often develop unexpectedly. Then a problem arises related to the value of a person's good or bad in dealing with one's views of others, [30], [31], [32].

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This study is in line with the results in Virginia, United States, with the title "Do all raters value task, citizenship, and counterproductive behaviors equally: An investigation of cultural values and performance evaluations, Human Performance". directly on performance in a positive way. In another study, the results of statistical tests have proven that cultural value variables have a significant effect on employee performance variables, [61]. This means cultural values can be one of the factors driving performance, [62].

The researcher concludes by referring to the results of research, theory, and previous related research that cultural value has a role in improving the performance of the perceiver, if the perceiver works by always considering the aspects of Cultural Value in carrying out his perceptive activities, he can increase his influence to 30%. The direct (unmediated) effect of the Cultural Value standard on Performance is 1.30. That is, due to the direct (without intermediary) influence of Cultural Value on performance when Cultural Value increases by 1 standard deviation, Performance increases by 1.30 standard deviation.

The results obtained indicate that it is important for the perceiver to involve an approach to cultural values, especially when there is individual perception. There is a need for openness about



cultural values that are embraced by both the preceptors and also practicing students. The results of this study foster the hope that the preceptors and students will seek to change the habits that cause misunderstandings during the practice process and both parties agree to reach a common ground so that changes will occur in improving student performance in practice by imitating the behavior of the preceptors in guiding students who practice to patients. , so this practice allows a lot of new knowledge that students get.

The constellation of the influence of the Cultural Value variable on the performance of the preceptor is relatively complicated because the level of success of the preceptor is also measured by the performance of practical students. The process of influencing this variable follows the practice pattern of behavioristic and humanistic learning theory at the same time. The behavioristic education pattern demands that the perceiver exemplifies how to work by involving good habits over and over again and in the end, it becomes a habit that shapes culture humanistic education implements learning by viewing students as whole human persons who need respect from others, better known as humanizing man. The respect that students get from the preceptor will be re-imaged by the students when the students carry out the noble call to heal the sick to the patient. So that the relationship that occurs is a relationship of mutual respect between nurses and patients as well as mutual respect between preceptors and practicing students.

Preceptors who understand across cultures can guide their students to have more potential to become entrepreneurs in the health sector. The ability of the perceiver will be captured by students so that students become successful entrepreneurs. Sectors that can be worked on that require cultural understanding to become successful entrepreneurs such as opening a practice, opening a pharmacy, health consulting services, becoming a health YouTuber, becoming a health blogger, becoming a health program, selling medical equipment, hospital catering business, selling herbal medicines, establishing a health startup, opening a healthy restaurant, organic gardening, organic livestock farming, selling natural pesticides, opening a beauty clinic, opening a clothing store for health, selling vegetarian food, opening a shop, health software, writing health books, health check services.

Currently, business challenges are increasingly making medical personnel have to be intelligent in

managing finances, including earning additional income from a side business.

## 7 Conclusion

This study concludes that there is a positive influence of cultural values on preceptor performance. This research contributes practically. This research contributes to the development of human resources and the development of student skills, maintaining and developing cultural values in carrying out their professional duties. For the management of higher education quality assurance as planning and development of human resources for health workers, especially nursing precepts. Improving the quality of guidance to nursing students by paying attention to exemplary leadership, social and cultural values as well as the trustworthiness of the nurses and professional nurses.

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