

Health Facilities and Competence on Service Quality through the Performance of Health Workers in the Regional General Hospital of Central Mamuju Regency

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Abstract

The research objective was to measure and analyze the influence of health facilities and competence on the quality of services through the performance of health workers at the Central Mamuju District General Hospital. This research design is a survey. This research was conducted at the Regional General Hospital of Central Mamuju Regency. This research lasted for about two months, from July 2019 to August 2019. Data collection was carried out through observation, interviews, questionnaires, documentation. The sample in the study was 100 people data analysis through research instrument test, validity test, reliability test, and path analysis. The results showed that the direct effect of competence on the performance of health workers had the highest correlation value compared to the impact of other variables. In contrast, the lowest correlation was shown in the indirect effect of the health facility variable on service quality through the performance of health workers. The highest correlation found in this study is the direct result of competence in health workers' performance. It shows that competence is the foundation in improving performance and even quality service quality. The competence of respondents is measured through the knowledge, skills, personal characteristics, and motives of the respondents. Another case with the lowest correlation found in the indirect relationship between health facilities and service quality through the performance of health workers shows that not always good facilities will guarantee quality and even high performance. Still, it can be ascertained that good performance tends to use good quality as well.

Keywords

Competency Facilities, Competence, Service Quality, and Performance.

1. Introduction

According to Khoeriyah health facilities as public facilities for the community need to increase the level of health that can affect regional activities and productivity (Khoeriyah, 2013). The existence of health facilities will have an impact on quality health and health conditions in an area. In addition to health facilities that affect service quality, competency factors also affect service quality. According to Azwar, 2010 to maintain the quality of health services in hospitals, benefits become the competence of qualified health workers and continue to be involved in a hospital quality control program (Azwar, 2010). Health workers also affect the quality of service. According to Mathis Robert the quality of

work can be measured through the perception/views of employees about the quality of work (Mathis Robert & Jackson John, 2006). And the perfection of their duties through the knowledge and skills of employees. Then according to Sudarmanto (reliability) includes consistency in performance and proper, correct, and accurate service (Sudarmanto 2015).

The West Sulawesi Health Office is one of several SKPDs in West Sulawesi Province with the task of assisting the Regional Head to organize a government in the health sector by realizing the West Sulawesi mission, namely "The realization of the acceleration of economic growth and welfare of the West Sulawesi Community in 2016" and its mission in increasing access quality of health and quality of life. The mission focuses on improving the quality and quality of health services to create happy and prosperous small families.

A health worker is anyone who devotes himself to the health sector and has the skills and knowledge of health through education. An essential element in accelerating health improvement is the ability of health workers to carry out their duties in the community. Health workers at the Regional General Hospital of Central Mamuju Regency demand professional personnel. Hence, they need high competence and dedication in carrying out government development that is carried out effectively, efficiently, and optimally (Nath et al., 2021; Suharyanto et al., 2021; Umanailo et al., 2021). To achieve this requires good performance for health workers through planning, control, supervision, and excellent service to the community. Health workers who perform well will understand their function as servants of the state and society (Jannah et al., 2019; Lionardo et al., 2020; Yusuf et al., 2019).

The phenomenon that occurs regarding the competence of health workers at the Regional General Hospital of Central Mamuju Regency is in the utilization of health workers that the competence of health workers is not by the needs of health services and the system of rewards and sanctions does not work correctly. The initial survey conducted by the author at the Regional General Hospital of Central Mamuju Regency, the health facilities at the Central Mamuju Regency General Hospital, was inadequate. For example, patient examination rooms, laboratory facilities, toilets, buildings, waiting rooms, and places of worship made people reluctant to an only hospital (Ervina et al., 2019; Novitasari et al., 2019; Rumaolat et al., 2019). It is recognized by its excellent and adequate buildings, sophisticated and complete examination equipment, comfortable inpatient rooms, good pharmacies, or pharmacies, and maintained and maintained environmental cleanliness.

An initial survey of ten outpatients at general hospital (RSUD) at Central Mamuju Regency gave dissatisfied answers to the services provided, such as environmental cleanliness, treatment rooms, patient waiting rooms, disease information, drug administration, responsiveness, and friendliness of doctors and nurses. From here, encourages researchers to research the Effect of Health Facilities and Competence on Service Quality through the Performance of Health Workers at the Regional General Hospital of Central Mamuju Regency

2. Literature Review

Facilities are infrastructure facilities that provide smoothness and facilitate work. Work is an activity of doing something. So, work facilities are a form of infrastructure that provides convenience in carrying out activities (Anoraga, 2005). For agency productivity, it is necessary to prepare complete work facilities. This increase in productivity can be supported by providing work facilities to assist and motivate health workers in completing work. This framework of thinking about the influence of health facilities on the performance of health workers is also supported by research conducted by (Hannan, Muzakkir, & Ilyas, 2016), that facilities have a significant positive effect on nurse performance. Furthermore, (Wulandari 2015), from the results of his research, concluded that work facilities positively and significantly influence employee performance. Lasmahadi expresses competence as an aspect of an individual's self that enables superior performance (Prayitno, Widodo, & Suprpto, 2002). Personal elements such as motives, systems, attitudes, skills, and knowledge. Competence leads to behavior, whereas behavior produces performance. Palan suggests that competence includes various characters and encourages the emergence of behavior. The basis of this trait is clear from how to behave in the workplace (Palan, 2007). Competence is related to what people are like and what can be done, not about what can be done. Competence lies with those who excel. Research Nita Indrawati shows that competence has a significant influence on employee performance from the results of his research (Nita Indrawati, 2017).

3. Methods

The research design is a survey to analyze facts and supporting data. This research was conducted at the Regional General Hospital of Central Mamuju Regency and operated from July 2019 to August 2019. Data collection was carried out through observation, interviews, questionnaires, documentation. The research subjects were the entire population of employees at the Regional General Hospital of Central Mamuju Regency with a total study population of 100 people. The sample in this study were all employees at the Regional General Hospital with a complete model of 100 people. Data analysis using path analysis determines the linear relationship between independent variables and utilizes the SPSS ver.25 program. Variables were measured using a Likert scale of 1-5, 1 = strongly disagree and 5 = strongly agree. Health workers need health facilities to facilitate, expedite and support work activities. The indicators used to refer to Moenir (2007), namely: 1) Management work tools facilities; 2) Operational work equipment facilities; 3) Work equipment facilities; 4) Infrastructure facilities, and 5) Social facilities.

Competence is defined as the abilities and characteristics of a person, such as skills, knowledge, attitudes, and behaviors needed to implement tasks in the health sector. The indicators used to refer to (Palan, 2007), namely: 1) Knowledge; 2) Skills; 3) Self-concept and values; 4) Personal characteristics, and 5) Motives. The performance of health workers is defined as the results of work both in quality and quantity that health workers achieve in carrying out their duties according to the responsibilities given to them. The indicators used to refer to Robbins (2006) and (Mathis Robert & Jackson John, 2006), namely: 1) Quality of work; 2) Quantity; 3) Commitment to work; 4) Reliability; and 5) Ability to work together. Service quality is defined as the suitability of the service expected from the hospital (desired service) with the service received or perceived by the patient or the perceived outcome. The indicators used to refer to Parasuraman in (Tjiptono & Fandy, 2008), namely: 1) Tangibles (physical evidence); 2) Reliability; 3) Responsiveness; 4) Assurance (guarantee); and 5) Empathy.

4. Results

4.1. Reliability Test

Data processing is done by validity and reliability test. Test validity with a significant level of 0.05 and 2-tailed tests compare r -count and r tables. Calculated r -value of Cronbach-Alpha column Correlated Item–Total Correlation. While r -table obtained using the formula $df=n-2$ (Sugiyono, 2009). Processing of known data of each item is valid. Then, reliability tests are performed on items using Cronbach-Alpha, and reliability if the Cronbach Alpha > 0.6 (Table 2) (Hall, 2001).

Table 1. Research Instrument Reliability Test

Variable	Cronbach's Alpha	Cut-o- Point	Status
Health facilities(X1)	0.801	0.60	Reliable
Competency(X2)	0.770	0.60	Reliable
Performance of health workers(Y1)	0.751	0.60	Reliable
Quality of service(Y2)	0.792	0.60	Reliable

Source: Data processing, 2019.

4.2. Path Analysis

Path analysis is presented in Figure 1.

1. The direct influence of health facilities on the performance of health workers; The beta-coefficient of health facilities (X1) on the performance of health workers (Y1) is 0.264 with an SE value of 0.097 at the level of 0.001. This shows that health facilities (X1) positively influence the performance of health workers (Y1).

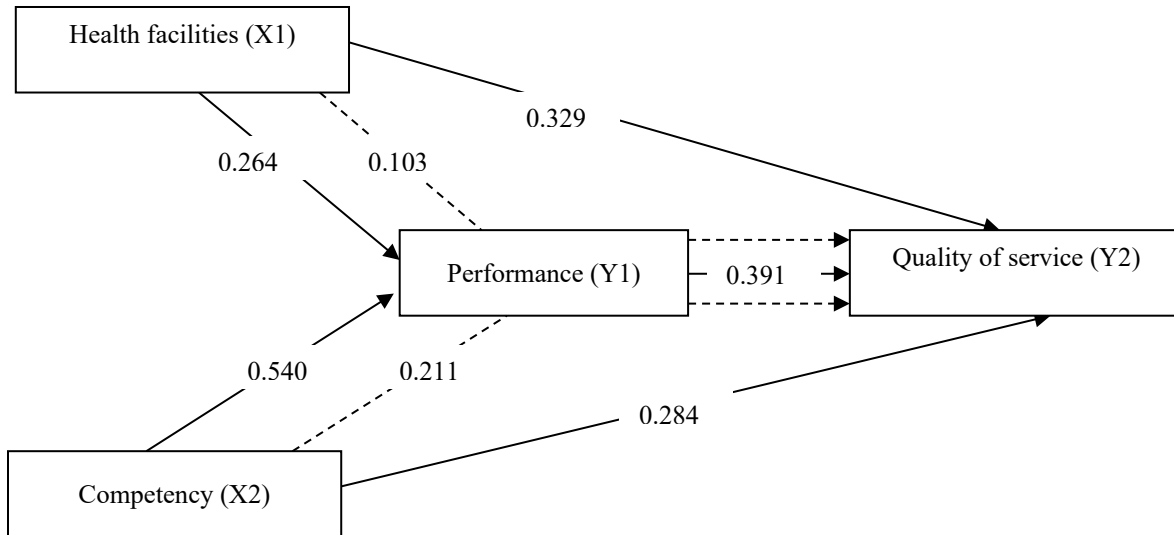


Figure 1. Path analysis

- The direct effect of competence (X2) on the performance of health workers (Y1). Beta-coefficient of competence (X2) on the performance of health workers (Y1) 0.540 with an SE value of 0.054 at the level of 0.000. Showing competence (X2) has a positive influence on the performance of health workers (Y1).
- The direct influence of health facilities (X1) on service quality (Y2) is 0.329 with an SE value of 0.058 at 0.000 level. This shows that health facilities (X1) have a positive influence on service quality (Y2).
- The direct effect of competence(X2) on service quality(Y2) is 0.284 with a SE value of 0.037 at the level of 0.001. Showing competence (X2) has a positive influence on service quality (Y2).
- The direct effect of health worker performance on service quality is 0.391 with an SE value of 0.057 at 0.000 level. It shows the performance of health workers (Y1) positively influences service quality (Y2).
- For indirect effect, the Sobel test was used. $z\text{-value} = a \cdot b / \sqrt{b^2 \cdot sa^2 + a^2 \cdot sb^2}$. a = coefficient value $x \rightarrow y$. Based on the results of calculations through the Sobel test, the indirect effect of health facilities (X1) on service quality (Y2) through the performance of health workers (Y1) obtained a value of 0.103. Meanwhile, the indirect effect of competence (X2) on service quality (Y2) through the performance of health workers (Y1) obtained a value of 0.211 (Table 2).

Table 2. Direct and Indirect Influence

Information	Symbol	Values-Coefficient
The direct influence of health facilities on the performance of health workers	X1--> Y1	0.264
The direct influence of competence on the performance of health workers	X2--> Y1	0.540
The direct effect of health facilities on the quality of services	X1--> Y2	0.329
The direct influence of competence on the quality of service	X2--> Y2	0.284
The direct influence of health workers' performance on the quality of services	Y1--> Y2	0.391
The indirect effect of health facilities (X1) on the quality of services(Y2) through the performance of health workers(Y1)	X1--> Y1--> Y2	0.103
The indirect influence of competence(X2) on the quality of service(Y2) through the performance of health workers (Y1)	X2--> Y1--> Y2	0.211

Source: Data processing, 2019.

5. Discussion

The influence of health facilities on the performance of health workers is positive; this is in line with the statement that facilities are infrastructure facilities that facilitate work (Anoraga, 2005). Also, these results support research (Hannan et al., 2016) that facilities have a significant positive effect on nurse performance. Furthermore, research by (Awaluddin, Alam, & Yusuf, 2011), that facilities have a significant positive impact on employee performance.

The Effect of Competence on Health Personnel Performance is positive; an increase in competence is followed by an increase in performance, assuming other factors are constant. The results of this study are supported by Lasmahadi's statement (Prayitno et al., 2002) that competence is a personal aspect of employees that enables them to achieve superior performance. These aspects include nature, values, systems, skills, and knowledge. Competence will drive behavior while behavior produces performance. (Palan, 2007) revealed that competence drives behavior. This basis is evident in how individuals behave in the workplace. Competence concerns people with what they can do, not what they can do. Competence lies with those who excel. The results of the study support research (Nita Indrawati, 2017) that competence has a significant influence on employee performance. Then, research by (Zulfikar 2016) found that competence has a considerable impact on employee performance.

The influence of health facilities on service quality is positive; improving health facilities is followed by increased service quality, assuming other factors are held constant. This result is supported by the statement (Khoeriyah, 2013) that health facilities as public facilities for community needs function to increase health levels. The existence of infrastructure facilities will have an impact on quality health status.

The influence of competence on service quality is positive; increasing competence is followed by improving service quality, assuming other factors are held constant—implementing quality in hospitals. The results of this study are in line with research (Maya Cynthia Rebecca, 2017) (Vika Nafidatul Jannah, 2018) that competence influences service quality.

Health Worker Performance on Service Quality is positive; performance improvement is followed by quality improvement, assuming other factors are constant. The study results are supported by the statement (Mathis Robert & Jackson John, 2006) that the quality of work is measured through the views/perceptions of employees on the quality of work produced. Then, Zeithaml & Berry (Sudarmanto, 2015) stated that reliability includes correct, precise, and accurate performance and service. The study results align with research (Surya & Yon, 2018) that influential version has a significant influence on service quality. Furthermore, analysis by (Handayani Ekawati, 2013) shows employee performance on service quality.

The influence of health facilities on service quality through the performance of health workers is positive. This can be seen in the path analysis of the indirect effect of health facilities by implementing health workers having a significant influence on service quality. Thus, the performance of health workers can influence health facilities on service quality. Health facilities as a support for health implementation activities significantly impact improving the quality of health services. Work facilities intended in this study are work tools, work equipment, and social facilities.

The influence of competence on service quality through the performance of health workers is a positive competency on service quality through the implementation of health workers. Thus, the version of health workers can affect the competence of service quality. The indirect effect of competence on service quality through employee performance is seen in the level of good knowledge possessed by health workers; knowledge is the primary basis in improving the understanding of health workers. Skills are also a support for improving the quality of hospital services through the performance of health workers; without good skills, it will be difficult for anyone to carry out their job duties, especially tasks or jobs that require high skills. Self-concept and values reflect the personality of a health worker; attitudes and discounts will be a reference in measuring how well and capable the person can interact with others. Health workers with a good self-concept will foster an attitude of enthusiasm from the patients they serve.

6. Conclusions

Based on the results of research on the effect of health facilities, competence, and performance of health workers on service quality, it can be concluded that all variables show a correlation that influences each other with different levels. Among the effects of the variables studied, the direct impact gives the highest correlation value compared to the indirect effect. The immediate effect of competence on the performance of health workers has the highest correlation value compared to the influence of other variables. Meanwhile, the lowest correlation is shown in the indirect effect of the health facility variable on service quality through the performance of health workers. Based on the highest

correlation found in this study, the direct influence of competence on the performance of health workers shows that competence is the foundation in improving performance and even quality service quality. This competence of respondents is measured through knowledge, skills, personal characteristics, and motives of the respondents. In contrast, the lowest correlation found in the indirect relationship between health facilities and service quality through the performance of health workers shows that not always good facilities will guarantee quality and even high performance. Still, good performance will inevitably result in good quality and reasonable utilization of facilities. For further research, it is necessary to add other variables that are certain to influence service quality.

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