

The Influence of Work Motivation on Performance in Puskesmas Accreditation in Donggala District



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ABSTRACT: Organizations cannot be separated from human life because they play an important role in social interaction. One of the benefits of an organization that is felt by humans is related to the achievement of common goals that cannot be achieved alone, because humans have limitations. With the existence of an organization, it is possible for a person to achieve goals that were previously considered difficult to do alone. The term performance etymologically comes from English which means performance. Performance generally provides a limit as success in carrying out work. Puskesmas accreditation is recognition given by an independent institution administering accreditation determined by the Minister of Health after meeting accreditation standards. The purpose of this study was to determine the effect of work motivation on performance in the accreditation of health centers in Donggala Regency. This type of quantitative research uses analytical techniques, the sample size uses the Slovin formula and the sampling uses the Accidental Sampling technique. Data collection using a questionnaire. Data were statistically analyzed using AMOS SEM. The results showed that there was a positive and significant effect of work motivation on the accreditation performance of the puskesmas with a C.R. of 3.314 >1.96 or P *** <0.05. Suggestions The leaders of the puskesmas simultaneously should be able to directly increase the work motivation of the employees at the puskesmas.

KEYWORDS: Work Motivation, Performance, Community Health Center Accreditation

INTRODUCTION

Organizations cannot be separated from human life because they have an important role in social interaction. One of the benefits of organizations felt by society is related to achieving shared goals that cannot be achieved alone, because humans have limitations. By organizing, someone can achieve goals that were previously considered difficult to achieve alone (Abidin, 2013).

Organizations are called social systems because the actors in the organization must be able to adapt and interact with other people. In organizational interactions, it is best for someone to be able to coexist with other people. Because everyone has the same needs in carrying out organizational functions to achieve organizational goals (Widyawati et al, 2019).

Organizational behavior is the study of human behavior in an organizational context. The first dimension includes the impact of organizations on humans and the second dimension includes the impact of humans on organizations (Wexley & Yukl, 1992). The basic framework of organizational behavior theory supports two main components, namely individual behavior and formal organizations as a reservoir of behavioral resources (Handoko, 2000). Organizational behavior indicators Leadership, communication, work motivation, team structure and processes, attitudinal and cognitive development, change processes, conflict and negotiation, and job design (Robins & Judge, 2016).

Motivation is the process of influencing or encouraging someone or an external work group to want to achieve something that has been determined. Motivation or motivation is a natural need to satisfy and maintain life. According to The Liang Gie (in Samsudin, 2005), Motivation is an effort made by managers to provide inspiration, enthusiasm and encourage other people, in this case employees, to take certain actions. Therefore, work motivation is what creates encouragement or enthusiasm for work. Motivation is a human psychological trait that drives a person's level of involvement in carrying out a task (Suarli and Bahtiar, 2015). According to Herzberg (in Mangkuprawira & Yubeis, 2007), motivation factors are: 1) achievement 2) recognition 3) the work itself 4) responsibility and 5) progress. Motivation is a factor that can influence an activity. Motivation is a force within a person that guides all their activities. This force is a driving force that motivates them to do what they do (Djarmiko & Hayati, 2004). Suggests that factors that influence work motivation include: organizational structure, management climate, organizational effectiveness, personnel policy and communication.

The Influence of Work Motivation on Performance in Puskesmas Accreditation in Donggala District

Puskesmas is a functional health organization which is a center for community health development that encourages community involvement and provides comprehensive and integrated services as its core activities. Puskesmas must strive to obtain, provide and manage quality services to meet the community's need for quality health services. In carrying out its functions, the Puskesmas is regulated by an organizational structure prepared by the district/city health service which includes: 1) Head of the Puskesmas, 2) Administration Section, 3) Head of UKM and Public Health Nursing, 4) Responsible for UKP, Pharmacy and Laboratory, 5) Responsible for the Health Service Network and Health Service Facility Network.

Law of the Republic of Indonesia Number 36 of 2009 concerning Health Article 54 paragraph (1) regulates that the provision of health services is carried out responsibly, safely, of quality, fairly and without discrimination. Since the implementation of the National Health Insurance Program (JKN) on January 1 2014, Regulation of the Minister of Health of the Republic of Indonesia Number 75 of 2014 concerning Health Centers, Article 39, requires Health Centers to be accredited.

Puskesmas accreditation is one of the requirements to be recognized as a level 1 health service facility in collaboration with BPJS, regulated in Ministry of Health Regulation Number 71 of 2013 concerning Health Services Insured by National Health Insurance in Article 6 paragraph (2). The importance of Puskesmas certification is also regulated in the Regulation of the Ministry of Health of the Republic of Indonesia Number 46 of 2015, Article 3 which states that Puskesmas must be recognized and local governments must support and encourage, encourage and accelerate this process. Carry out recognition of the Puskesmas. Puskesmas that have been accredited will be re-evaluated for accreditation every 3 (three) years, so that the puskesmas continues to apply the principles of continuous quality improvement in providing services to the community in its working area. Puskesmas accreditation not only aims to evaluate the quality system and service system at the Puskesmas and other first level health service facilities, but also aims to develop these health service facilities as an effort to continuously improve the service system and performance with a focus on community needs, safety and management. risk. Not just an assessment to get a certificate of recognition. Striving to fulfill all requirements in the Puskesmas accreditation application, the need for good cooperation, communication and motivation in organizational interactions at the Puskesmas in order to improve the Puskesmas accreditation status. Health services, including the accreditation of Community Health Centers, are strongly influenced by organizational behavior and motivation. This is in accordance with the government's accreditation program for community health centers. Furthermore, the government carries out accreditation in the hope of improving the performance of community health centers in providing individual and/or community health services.

The performance of Puskesmas accreditation will be seen in the arrangement of the documentation system in one process of implementing Puskesmas accreditation. This is measured in the fulfillment of the required Puskesmas accreditation documents, as many as 772 assessment elements are divided into 9 chapters, of course according to the record of evidence from the results of the activities carried out. Provisions for Puskesmas accreditation criteria are described as follows: 1). Not Accredited: If the achievement of the value of Chapters I,II,III <75% and Chapters IV,V,VI <60%, VII,VIII,I X <20%, 2). Basic accreditation: if the achievement of Chapters I, II, III is > 75%, and Chapters IV, V, VI > 60%. Chapters VII,VIII,IX > 20%, 3). Middle Accredited: if the achievement of the value of Chapter I, II, III, VI, V > 75%, Chapter VI, VII > 60%, VIII, IX > 20%, 4). Primary Accredited: if the achievement of Chapters I,II,III,IV,V,VI,VII > 75 Chapters VIII,IX > 60 %, 5). Plenary Accredited: if the achievement score of all Chapters is > 75.

The implementation of accreditation for Community Health Centers in Central Sulawesi Province began in 2016. In 2016, accreditation assessments were carried out for 19 Community Health Centers, in 2017 for 49 Community Health Centers, in 2018 for 83 Community Health Centers and in 2019 for 48 centers. Puskesmas, in mid-2022, the ranking of puskesmas is 70. Puskesmas contributes 33.3%, with basic certification, 110 puskesmas is equivalent to 53.40%, with intermediate certification, 19 puskesmas or 9.22% achieved facility certification and there are no centers public health that reaches overall standards. Of the 199 (one hundred and ninety nine) community health centers registered with the Central Sulawesi Provincial Health Service.

Efforts to prepare Community Health Centers for accreditation include workshops, seminars, self-assessment, document preparation, as well as pre-survey implementation and evaluation. In preparing for the Puskesmas recognition assessment, the role of the leader, in this case the head of the Puskesmas, is very important to direct, encourage and manage all elements of the Puskesmas, the success of the manager or leader in leading. Each person is evaluated based on performance and teamwork (Mohelska & Sokolova, 2018)

Based on data from the Donggala District Health Service in 2022, information was obtained that the total number of Puskesmas was 18 (eighteen), 15 (fifteen) Puskesmas had undergone an accreditation assessment and 3 (three) Puskesmas had not undergone an accreditation assessment at all. Of the 15 (fifteen) health centers, it is known that 4 (four) health centers have basic accreditation status including: Kayuwou, Malei, Wani and Syekh Ahmad Pue Lasadindi Toaya Health Centers, 9 (nine) health centers with intermediate accreditation status include Lalundu Despot Health Center, Posi Hi . Abdul Ganing Tonggolobibi, Bunga Raya Balukang, Sabang, Tambu, Tompe, Lembasada and Labuan, 2 (two) community health centers with primary accreditation status include Pinembani and Sipatokkong Ogoamas Community Health Centers, and there are no community health centers with plenary accreditation status. Of the 9 (nine) Community Health Centers, it is known that 4 (four) Community Health Centers have undergone a re-accreditation assessment in 2021, but after the 4 (four) Community Health Center assessment there

The Influence of Work Motivation on Performance in Puskesmas Accreditation in Donggala District

has been no change from their previous accreditation status, these Community Health Centers include the Donggala, Labuan and Lembasada Community Health Centers which previously had accreditation status. Intermediate after the assessment, returned to intermediate accreditation status, the Syekh Ahmad Pue Lasadindi Toaya Community Health Center from previously having basic accreditation status after the assessment, returned to basic accreditation status. Meanwhile, 6 (six) Community Health Centers will be scheduled for reassessment in 2023. These Community Health Centers include: Posi Hi Community Health Center, Abdul Ganing Tonggolobibi, Bunga Raya Balukang, Sabang, Tambu, and Tompe, and Lalundu Despot, these 6 (six) health centers have intermediate accreditation status. Of course, with the hope that after the reassessment the community health centers can improve their accreditation status from their original status. So if the recognition status increases, it can be guaranteed that the Puskesmas will be fine.

Based on the results of preliminary research conducted at several community health centers in Donggala Regency, information was obtained that the reason why the accreditation status of the community health centers did not increase after the evaluation was carried out was the responsibility of the health service support team. Providing assistance to community health center staff that is less than optimal in terms of criteria, standards and assessment factors can cause a lack of understanding among community health center staff. The aspect of performance motivation in improving the quality of Community Health Center accreditation needs special attention in Community Health Centers, problems such as task assignments are not based on professionalism, these problems have not been resolved properly, there are still employees who carry out tasks without basis. Regarding scientific discipline and expertise, the intensity of training activities for the accreditation team and public health central staff is also rarely carried out, coaching for the accreditation team, as content Not included in the recognition documentation process, is very lacking, incentives in the form of rewards for employees are inherent. This condition makes Puskesmas officers apathetic, resulting in feelings of boredom and reduced motivation in carrying out activities needed to fulfill Puskesmas accreditation requirements. Research by Zerlinna et al (2021) shows that leadership, communication and motivation abilities partially or simultaneously have a positive and significant effect on the performance of PT employees. Tjipta Rimba Djaja (Zerlinna et al, 2021).

Based on the data description, problem findings and gaps in previous research findings, the author is interested in conducting research on the Influence of Work Motivation on Performance in Community Health Center Accreditation in Donggala Regency.

The aim of this research is to analyze the influence of work motivation on performance in the accreditation of Community Health Centers in Donggala Regency.

METHODOLOGY

This research is quantitative research with an analytical survey design, the data studied is data from samples taken from the population, so that relative and distributed events are found (Kerlinger & Lee, 2000). The research was conducted at 6 (six) Community Health Centers in the working area of the Donggala District Health Office. The research period is 3 (three) months starting from December 2022 - February 2023. Data collection using a questionnaire was given to respondents in the research sample.

This research uses primary data and secondary data. Primary data comes from a sample of 180 respondents. While secondary data comes from Community Health Center reports, relevant documents and observation results, as supporting reference material in research studies. Data collection used several techniques including: distributing questionnaires and observing health center accreditation documents. Sampling uses Accidental Sampling, that is, anyone who happens to meet the researcher at the research location or community health center can be used as a sample provided that the officer they happen to meet meets the criteria as a source of research data (Sugiyono, 2013). The SEM analysis method begins with testing construct validity and reliability, analysis design and hypothesis testing, model interpretation and modification, and hypothesis testing. Hypothesis testing by analyzing the CR (Critical Ratio) value and P (Probability) value and comparing it with the required statistical limits. The CR value is > 1.96 and the P value is < 0.05 . The hypothesis is accepted if the value meets the requirements.

FINDINGS & DISCUSSION

Based on the research results, the work motivation variable has a positive and statistically significant effect on the efficiency of Community Health Center accreditation with a C.R. value. is $3.314 > 1.96$ or P is (** *) < 0.05 . These results show that the respondents' perception of work motivation as measured by the index: Achievement, work itself, responsibility and progress can improve the performance of the jointly accredited Community Health Center community. This means that if employees increase work motivation, the effectiveness of community health center accreditation will increase.

The magnitude of the influence of the regression coefficient of work motivation on the efficiency of community health center recognition is 0.360, meaning that if work motivation increases by one unit in the form of when employees try to improve their work performance, they can overcome difficulties in completing tasks work. Completing work is the most important form of obligation to carry out, and showing the best work results will increase the performance of Community Health Center

The Influence of Work Motivation on Performance in Puskesmas Accreditation in Donggala District

Certification by 0.360 times. Motivation is the driving force that encourages someone to do or not do an action. In essence, it exists internally and externally, and can be positive or negative. To lead it, it really depends on the toughness of the manager (Ardana et al, 2012). Motivation is called a natural need to satisfy and maintain life. The Liang Gie (in Samsudin, 2005) Motivation is an effort made by managers to provide inspiration, enthusiasm and encourage other people, in this case employees, to take certain actions (Samsudin, 2005). Therefore, work motivation is what creates encouragement or enthusiasm for work. Certo (2012) defines motivation as an internal condition that encourages a person to take action to ensure the achievement of his goals. In other words, motivation can explain the reasons behind someone's actions (Certo & Certo, 2012). Daft and Marcic (2009) explain that motivation refers to a person's internal and external forces that create enthusiasm and persistence to carry out certain actions (Daft & Marcic, 2009). Motivation provides an illustration of how efforts to achieve goals can be influenced by individual circumstances and the external environment (Wijaya & Arifin, 2016).

The most prominent mean value for the work motivation variable is MK1, reaching 2.98 which contains the statement "I always try to improve my performance at work". This can be interpreted as work motivation which can be seen from the serious work attitude of the employees. To improve future performance. Next, employees must show their achievements in each job, employees must be encouraged to influence other people in their work environment, employees must report directly to colleagues regarding work they do that is not in accordance with the work of the agency. Standard, employees will benefit from a promotion system that recognizes achievements and pays employees based on the agency's workload, which can directly contribute to improving performance. Staff productivity at community health centers needs to be IMPROVED.

Next, to find out indicators of work motivation variables that managers can use as a basis for making changes to management policies at the Community Health Center, look at the most dominant Loading coefficient value, MK1, which reaches 0.766 (see table 35). Contains the statement "I always try to improve my performance at work. And the MK4 responsibility index of 0.761 contains the statement "completing something is the most important form of obligation that I have." This means that respondents want Puskesmas leaders to be able to appreciate the work of their staff and pay attention to the needs of their staff in supporting their work. Motivation is a condition of a person's personality that drives an individual's desire to carry out certain activities to achieve their goals (Handoko, 2000). Meanwhile, Winardi (2004) believes that motivation is "a hidden force that exists within humans which can be developed independently or developed by an external force which can influence the results of activities in a positive or negative direction, depending on the situation and human conditions" (Winardi, 2004).

Bernardin & Joyce (2000) defines performance or achievement as a record of results achieved in certain work functions or activities over a certain period of time. Performance is the success or failure of a person or group of people in completing a given task in connection with their sacrifices to achieve work results. If work performance is close to or in line with expectations, then the goal will be easily achieved (Bernardin & Joyce, 2000).

Larasati & Gilang (2014) In his research he stated that the need for achievement variable has the second largest influence on employee performance, meaning that the higher the employee's motivation towards the need for achievement, the better the performance they produce.

Theoretically, motivation is closely related to performance. In the Puskesmas recognition process, strong motivation or encouragement from all Puskesmas constituents, especially employees, will help improve their performance during the Puskesmas recognition process. Of course, accreditation is not easy, so without a solid foundation there will be no acceleration and synergistic collaboration to improve the accreditation of copper health centers. With strong momentum, constituents will unite to fight for increased recognition of community health centers. This is in line with the theory put forward by Mangkunegara (2005). This motivation is formed from the employee's attitude towards the work situation in the company. Motivation is a condition or energy that moves employees to achieve company goals. It is the professional attitude and positive mental attitude of employees towards work situations that strengthens their work motivation to achieve maximum performance.

The findings of this research support research by Shati & Dewi (2014) which found that motivation has a significant influence on employee performance in regional tourism companies in West Java province. And research by Sihombing & Nurlinda (2020) found that motivation has a significant influence on employee performance. Therefore, if work motivation is high, workers will work hard to complete their work, but if work motivation is low, on the contrary, it will make them less enthusiastic about working and give up more easily when faced with problems at work. In several studies it is often proven that work motivation influences performance. Therefore, this research can show that work motivation has a positive and significant effect on the accreditation performance of Community Health Centers in Donggala Regency (Magdalena & Nurlinda, 2020).

CONCLUSIONS

Based on the results of statistical analysis and testing, it was concluded that there was a positive and significant influence of work motivation on the performance of community health center accreditation in Donggala Regency. The most dominant indicators are MK1 achievement of 0.766 and MK4 responsibility of 0.761.

Based on the results of the analysis and conclusions, recommendations can be used as input for leaders in order to implement implementation or take strategic action to improve the performance of community health center accreditation, namely

The Influence of Work Motivation on Performance in Puskesmas Accreditation in Donggala District

to improve the performance of community health center accreditation in Donggala Regency, employees who have high work motivation are needed because work motivation has a positive effect and significant and most dominant on the accreditation performance of puskesmas. Efforts to improve the performance of community health center accreditation can be done by giving high levels of responsibility to employees and demanding optimal service at work.

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