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**ANALYSIS OF FACTORS ASSOCIATED WITH THE
PERFORMANCE OF PROGRAMS MANAGER SOURCE FROM THE
HEALTH OPERATIONAL ASSISTANCE
OF PUBLIC HEALTH CENTER
(Observational Study in Hulu Sungai Utara District)**

Nining Huliyah¹, Syamsul Arifin², Achmad Rofi'i², Husaini¹, Eko Suhartono²

¹Master of Public Health Study Program, Faculty Of Medicine, Lambung Mangkurat University

²Faculty of Medicine, LambungMangkurat University

Abstract - Health Operational Assistance of public health center is a supporter of public health center operations in achieving performance indicator targets and improving the quality of health services with promotive and preventive efforts in puskesmas working areas. Data from the Hulu Sungai Utara District Health Office in 2018 showed a 61.1% achievement of the activity program, a realization of a budget absorption of 73.85% and a timely reporting of 25.5%, the figure showed the non-optimal performance in achieving the target set at 100%. This study aims to explain factors related to the performance of program managers sourced from Health Operational Assistance of public health center. This research is an observational analytic study with cross sectional design. The study population was all community health center program managers with a sample of 91 people determined by proportional random sampling cluster technique. The research instrument used was a questionnaire. Descriptive and statistical data analysis using chi square test and multiple logistic regression tests. The results of the chi square test and fisher exact test showed that there was a relationship between training ($p = 0.004$), facilities ($p = 0.022$), and coaching ($p = 0.006$) with the performance of the program manager while the workload variable ($p = 0.108$) showed no relationship which is significant with the performance of program managers sourced from the Health Operational Assistance of public health center in Hulu Sungai Utara District. The result of logistic regression analysis shows that the training variable has the most dominant relationship with the performance of program managers from the Health Operational Assistance public health center ($p = 0.002$, exp. B = 10.116). Based on this there is a relationship of training, facilities and coaching with the performance of program managers sourced from the Health Operational Assistance of public health center.

Key words: Health Operational Assistance, training, facilities, workload, coaching

*Correspondent Author: *Nining Huliyah*

I. INTRODUCTION

Public health center is a health service facility that is used to carry out promotive, preventive, curative and rehabilitative public health services to achieve the highest degree of public health in the working area (Permenkes 43, 2019). One of the factors affecting health status is how much funding is budgeted for the health sector. Efforts made by the government are health support policies in the form of special allocation funds for non-physical Health Operational Assistance of Public Health center for regions (Permenkes 3, 2019).

The Health Operational Assistance is a central government assistance to local governments to support the operation of public Health center in the context of achieving national priority health programs in the health sector, specifically promotive and preventive activities as part of public health efforts. Health Operational Assistance of Public health center is a fund sourced from APBN revenues that is allocated to improve access and quality of health services which is focused on reducing maternal, infant and child mortality, overcoming nutritional problems, and preventing disease and environmental health, especially for health services for the poor population, and residents in disadvantaged, remote, border and island areas and health problem areas in carrying out health services that are promotive and preventive (Ministry of Health, 2018).

The target indicators for the performance of the Health Operational Assistance of public health center program set by the Ministry of Health are in the aspects of achieving the public health center program and 100% budget absorption as well as the public Health center management aspects in the accuracy of report submission. Data from the Hulu Sungai Utara district health office showed that the results of the health program achievement were 61.1%, budget absorption was 73.85%, and the timeliness of reporting was 55.5%. The data shows the performance of the Health Operational Assistance of Public Health Center sourced program in Hulu Sungai Utara District has not been implemented optimally.

One of the factors that influence the implementation of the public health center Health Operational Assistance program is human resources, in this case the manager program. This shows that the performance of the Health Operational Assistance program is cumulative from the performance of program managers. The theory of employee performance by Mathis and Jackson (2009) states that the support of an organization that is training and facilities are factors that affect employee performance. Employee performance theory is also expressed by Hall TL & Meija (1987) in Ilyas (2001) that employee performance is influenced by external factors namely workload and coaching.

II. RESEARCH METHODS

This research was an observational analytic study with a cross-sectional approach. The study was conducted at 13 Public Health Center in Hulu Sungai Utara District, South Kalimantan Province. The study population was all program managers. The sample size was determined by the Lameshow formula and obtained 91 respondents. The sampling technique uses a cluster random proportional method. The independent variables in this study are training, facilities, workload and coaching. While the dependent variable is the performance of program managers sourced from the Health Operational Assistance of public health center. The instrument used in this study was a questionnaire. The aims and benefits of the study were explained to respondents verbally and in written format attached to the questionnaire. Written informed consent was obtained from those who agreed to participate. Data were analyzed univariate, bivariate and multivariate. Univariate analysis with frequency distribution tables, bivariate analysis to determine the relationship between variables using the chi square test and multivariate analysis to find out the most dominant relationship using multiple logistic regression tests. Data were analyzed using SPSS. All tests were carried out at a significant level of 5%.

III. RESULTS AND DISCUSSION

1. Univariate Analysis

Table 1. Distribution of frequency of training, facilities, workload and coaching with the performance of program managers sourced from Health Operational Assistance of public health center in Hulu Sungai Utara District

Characteristic	Frequency (N)	Percentage (%)
Training		
Ever	19	20,9
Never	72	79,1
Facilities		
adequate	34	37,4
Inadequate	57	62,6
Workload		
Light	58	63,7
Weight	33	36,3
Coaching		
Good	16	17,6
Not Good	75	82,4
Program Manager Performance		
Optimal	16	17,6
Not Optimal	75	82,4

Source: Primary Data from 2020 Research

Based on table 1, it is known that most respondents have never received technical and administrative training (79.1%), have inadequate facilities (62.6%), have light workloads (63.7%) and have suboptimal performance (82.4%).

2. Bivariate Analysis

The relationship between training, facilities, workload and coaching with the performance of program managers sourced from Health Operational Assistance of public health center in Hulu Sungai Utara District can be seen in table 2.

Table 2. The relationship between training, facilities, workload and coaching with the performance of program managers sourced Health Operational Assistance of public health center in Hulu Sungai Utara District.

Variable	Program Manager Performance				Total	<i>p value</i>	PR	
	Not Optimal		Optimal					
	n	%	N	%				
Training								
Ever	64	88,9	8	11,1	72	100	0,004	5,818
Never	11	57,9	8	42,1	19	100		
Facilities								
Adequate	51	89,5	6	10,5	57	100	0,022	3,542
Inadequate	24	70,6	10	29,4	34	100		
Workload								
Weight	30	90,9	3	9,1	33	100		
Light	45	77,6	13	22,4	58	100	0,108	2,899
Coaching								

Not Good	66	88,0	9	12,0	75	100	0,006	5,704
Good	9	56,2	7	43,8	16	100		

Source: Primary Data from 2020 Research

Statistical test results show there is a relationship between the training program and the program manager performance of public health center ($p = 0.004$). In accordance with the theory put forward by Mathis and Jackson (2001) that training will have an impact on someone, while training is a process of giving employees more specific and sustainable knowledge and skills in accordance with their work. By implementing SOPs, methods, competencies and timely according to the specified accreditation will be able to improve employee performance in the accreditation process so as to improve the quality and performance of public health center that can be improved. This study discusses the research conducted by Putri et al (2019) company development through training to improve the skills, theories, conceptual and moral of employees in order to achieve optimal work results. This study also contradicts research by Kesuma (2018) that training has an important function in preparing competent human resources (HR), training that can facilitate evaluations between safety and funds not required by the HR itself.

The statistical test shows that there is a relationship facilities with program managers performance ($p = 0.022$). This is in accordance with the theory put forward by Mathis and Jackson (2001) about one of the supports provided by organizations in increasing support, with support provided in the form of supporting work tools or equipment that truly supports the company. Supporting adequate facilities in this case is equipment that supports technical and administrative program activities that are very helpful in carrying out activities properly and in accordance with the objectives to be achieved. Adequate facilities in the accuracy of the delivery program media and facilitate the implementation of accountability and reporting. In line with Nurchalimah's research (2019) which cites in his research the completeness of facilities, the quality of human resources, and good working environment conditions will have a positive and significant effect on performance. With the help of human resources, and with a supportive environment, employee performance will improve and vice versa. Budi, et al (2019) provide facilities in creating a good work environment to encourage work processes and improve employee performance. The higher the facilities provided, it will also be high productivity of employee performance, so this shows that the better the work facilities provided and provided can support the better the level of employee performance results.

Statistical test results show there is no relationship of workload with the program manager performance ($p = 0.187$). The results of this study are in accordance with Indriasari and Angraeni (2019) that there is no significant direct effect of workload on employee performance ($p = 0.973$). Although the workload is not directly related to performance, it must still pay serious attention to the workload received by the program manager. If the workload received is too large, it will cause work stress that can affect work motivation and decrease performance, workloads are expected to remain within reasonable limits and in accordance with the tasks that have been given. The results of this study are in line with research conducted by Polakitang, et al (2019) that there is no close relationship between workload and employee performance. This study is also in accordance with research conducted by Meskhati in Tarwaka (2015) which says that workload is a difference between the capacity or ability of workers with the demands of the work faced, given that human work is mental and physical, the burden is too high (overstres) or too low (Understres), so it is necessary to strive for the optimum level of loading intensity between the two extreme limits, and of course it will be different between one individual with another.

Statistical test results show that there is a relationship between coaching and the performance of program managers sourced from Health Operational Assistance of public health center ($p = 0.006$). This is consistent with the theory put forward by Hall TL and Meija, in Ilyas (2001) that coaching as a process in achieving organizational goals, and being a factor associated with improving performance in an organization. Guidance from the leadership is the main thing and must be done on an ongoing basis with the aim of achieving the results of the program activities and the absorption of the budget in accordance with the set targets and time. The results of this study are in line with research conducted by kambey and suharnomo (2013) that coaching has a positive effect on employee performance at the company. This study also corresponds to research conducted by Jufri et al (2019) which states that coaching is positively related to the performance of officers at public health center that are not 100% UCI with a value ($P = 0,000$).

3. Multivariate Analysis

The most dominant relationship between training variables, facilities, workload and coaching with the performance of program managers sourced from Health Operational Assistance of public health center using multiple logistic regression tests can be seen in table 3:

Table 3. Results of multiple logistic regression tests

Variabel	Sig	Exp(B)	95% CI	
			Lower	Upper
Training	0,002	10,166	2,333	44,291
Facilities	0,072	3,590	0,892	14,446
Workload	0,117	3,384	0,736	15,570
Coaching	0,017	6,219	1,385	27,927

Information:

Sig = Significance Value

Exp (B) = Exponent Value B

95% CI Lower = Lower Data Interval

95% CI Upper = Upper Data Interval

Based on table 3 workload variables and facilities variables have p values of 0.117 and 0.072 (≥ 0.05). This shows that workload variables and facilities variables are excluded from multivariate testing in turn.

Table 4 Step II multivariate test results

Variable	Sig	Exp (B)	95 % CI	
			Lower	Upper
Training	0,002	9,320	2,302	37,729
Coaching	0,014	6,202	1,441	26,692
Facilities	0,110	2,951	0,784	11,106

The change in the value of Exp (B) after the Workload variable has been removed from the model can be seen in table 5.

Table 5 Changes in Exp (B) before and after

Variable	Exp (B) Before	Exp (B) After	Big Change (%)
Training	10,166	9,320	8,32

Coaching	6,129	6,202	0,27
Facilities	3,590	2,951	17,8

Table 5 shows there are variables with changes in Exp (B) of more than 10% so that the workload variable is put back into the model, then the facility variables are removed from the multivariate model as in table 6

Table 6 Step III multivariate test results

Variable	Sig	Exp (B)	95 % CI	
			Lower	Upper
Training	0,003	8,388	2,104	33,446
Coaching	0,004	8,518	2,011	36,079
Facilities	0,178	2,682	0,637	11,286

The change in the value of Exp (B) after the Facilities variable has been removed from the model can be seen in table 7

Table 7 Changes in Exp (B) before and after

Variable	Exp (B) Before	Exp (B) After	Big Change (%)
Training	10,166	8,388	17,48
Coaching	3,590	8,518	36,97
Facilities	3,384	2,682	20,74

Table 7 shows all the variables with changes in Exp (B) of more than 10% so that the facility variables are put back into the (final) model (Hastono, 2017) as in table 8

Table 8 Step IV multivariate test results

Variable	Sig	Exp(B)	95% CI	
			Lower	Upper
Training	0,002	10,166	2,333	44,291
Facilities	0,072	3,590	0,892	14,446
Workload	0,117	3,384	0,736	15,570
Coaching	0,017	6,219	1,385	27,927

Table 8 shows the results of multivariate analysis of variables that have a significant relationship with the program managers performance sourced from the Health Operational Assistance of public health center are training and coaching variables, while the confounding variables are workload and facility variables (Hastono, 2017). It can be concluded that from all the most dominant independent variables related to the performance of program managers sourced from the Health Operational Assistance of public health center is the training variable (p = 0.002) with an Exp B value of 10.166 which means that program managers who have never attended training will be 10.166 times more likely to have a performance that is not optimal compared to program managers who have attended training.

Based on the facts in the field technical training programs and administrative training are needed in the accuracy and suitability of the implementation of Health Operational Assistance program activities. Through training as a first step in knowing how to implement programs in the field, such as what procedures and technical instructions are in accordance with the rules, and how to evaluate appropriately. Training can improve competency, work

ability and increase knowledge and skills for employees, this includes for program management of Health Operational Assistance sourced activities where training / training that is followed by program managers specifically helps the implementation of Health Operational Assistance in administrative and technical accordance with technical guidelines Health Operational Assistance of public health center.

IV. CONCLUSION

Training, facilities and coaching have a relationship with the performance of program managers sourced from the Health Operational Assistance of public health center in Hulu Sungai Utara District. While the workload variable is not significantly related to program manager performance. The most dominant factor related is training. Public health center can increase the competence of program managers by proposing and mapping program managers who will be included in the technical and administrative training of the Health Operational Assistance of public health center to the Health Office. For the Health Service Office, they can allocate activities for training for public health center program managers in the District / City Health Operational Assistance program in the socialization of Health Operational Assistance of public health center performance targets.

V. ACKNOWLEDGMENTS

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VI. ETHICAL CLEARANCE

Before conducting the data retrieval, the researches conducted a decent test of ethics conducted at the Faculty of Medicine, Lambung Mangkurat University to determine that this study has met the feasibility. Information from ethical test that the study is eligible to continued (No.106 / KEPK-FK UNLAM / EC / IV / 2020). The feasibility of the research was conducted in an effort to protect human rights and security of research subjects

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