The Influence of Competency in Improving Sanitary Performance (Survey at Regional Public Hospital and Health Center in Garut Regency)

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ABSTRACT

This study aims to examine the influence of competence on the performance of sanitarian staff at Regional General Hospital and Community Health Centers in Garut Regency. The method used in this research is quantitative with descriptive and verification approach methods. Data analysis used ANOVA test with F-count, and partial test (T test). The study population was 33 sanitarian workers, namely 3 sanitarian workers in dr. Slamet and 28 sanitarian workers at the Puskesmas. All of them are taken as samples so that they become saturated samples. Data collection techniques are carried out through observation, questionnaires and interviews. The results of research at the RSUD and Puskesmas in Garut Regency show that the competence of sanitarian workers is in the high conducive category. Furthermore, the performance of sanitarian workers is included in the high category, meaning that it is in line with expectations. The results of the quantitative test analysis showed that the competence partially affected the performance of sanitarian workers, with a higher level of influence on competence of Garut District Hospital and Puskesmas. Furthermore, the ANOVA test results with F-count show that competence simultaneously affect the performance of sanitarian workers in the Garut District Hospital and Public Health Center.

Keywords: Competence, Employee Performance, Sanitarian Staff, Public Health Centers

1. INTRODUCTION

Human resources play a crucial role in the management of a company. Effective and high-performing employees can greatly contribute to the organization's achievements (Firmansyah & Mahardhika, 2018). Inadequate employees with low productivity can pose a challenge for companies, putting them at a disadvantage. Effective management of human resources is crucial for achieving organizational objectives (Jannah et al., 2024). For this system to operate effectively, careful attention must be given to key factors like leadership, motivation, competence, work environment, and performance in its administration. Focus on these aspects will highlight the significance of human resource management in successfully reaching organizational objectives (Prasetya, 2019).

The hospital, whether run by the government or a private entity, plays a vital role in providing essential healthcare services and assisting with medical referrals and other health-related initiatives (Herlambang, 2016). It is anticipated that the hospital will focus on serving the community's social needs while carrying out its duties. The effectiveness of the hospital's operations can be measured by the level of service quality it provides. Human resources play a significant role in determining the quality of services offered by hospitals (Taufiqurrahman et al., 2015).

Human resource performance in a hospital is an important aspect for the sustainability of a hospital. The availability of good human resource performance such as doctors, sanitarians, pharmacists, sanitarians, health analysts, radiologists, chemotherapy, midwives, nurses, and so on greatly affects the quality of the hospital (Anam & Rahardja, 2017). The assessment of the performance of the implementation of environmental health

in hospitals is carried out by internal and external hospitals. The performance assessment refers to the Environmental Health Inspection (IKL) form. The results of the performance assessment of the implementation of Environmental Health in Hospitals and Health Centers are categorized as very good; good; less. Internal assessments carried out by hospitals as material for evaluation and performance improvement in the implementation of environmental health in hospitals and health centers. External assessments are carried out by district/city health offices, provincial health offices and the central government. In order to improve the performance of hospitals and health centers, awards can be given by the central government or local government and/or independent institutions appointed by the Government.

The problems that exist in the Regional General Hospital and Health Centers in Garut Regency, which are 1 hospital and 28 health centers, are the quality of environmental health in hospitals and health centers that guarantee health from physical, chemical, biological, radioactive and social aspects for human resources, patients, visitors and the surrounding community, as well as realizing environmentally friendly hospitals and health centers as stated in PMK No. 7 of 2019 concerning Hospital Environmental Health and PMK No. 13 of 2015 concerning the Implementation of Environmental Health Services in Health Centers. This is suspected to be due to the lack of competence of sanitarian personnel caused by the lack of training held by hospitals and health centers for sanitarian personnel, this is also suspected to be due to both work relationships, work conditions, and work services that are still weak and below competency standards.

From the results of the author's interviews with clients and/or sanitarian staff at 1 hospital and 28 health centers in Garut Regency due to insufficient time, facilities and infrastructure that support in providing services in the field of environmental health and also suspected to be related to the competence of an employee is training, where there is still a lack of special training for sanitarian staff which is only carried out once a year, if there is any.

A training program involving sanitarian staff from one regional hospital and 28 health centers in Garut Regency was held on December 1, 2019, at the Fave Hotel in Tasikmalaya City, under the theme "Building New Awareness of Competent Environmental Health Workers and Professional Hakli Organizational Governance Towards a Healthy Generation of Superior Indonesia." In principle, sanitarian staff must possess adequate competence to ensure optimal performance. However, in practice, there are still observable gaps in competence among staff at the Regional General Hospital (RSUD) and several health centers in Garut Regency. Based on these observations, the researcher was motivated to conduct a study titled "The Influence of Competency in Improving Sanitary Performance (Survey at Regional Publish Hospitals and Health Centers in Garut Regency)." The objective of this research is to examine and analyze the extent to which competence influences the performance of sanitarian staff at both the RSUD and Puskesmas in Garut Regency.

2. LITERATURE REVIEW

Competence as defined by Law No. 13 of 2013 is the capacity of an individual to perform tasks effectively, encompassing knowledge, abilities, and professional demeanor in alignment with prescribed benchmarks. In accordance with Edison et al. (2016) who stated that competence refers to a person's capacity to effectively perform a task and gain benefits from their understanding, skills, and mindset.

According to Spencer and Spencer, as cited in Edison et al. (2016), competence is defined as the inherent traits of a person that contribute to successful or exceptional job performance. Similarly, George Klemp, also cited in Edison et al. (2016) defines competence as a fundamental characteristic within a person that results in effective work outcomes and high performance. This suggests that every employee possesses inherent traits or characteristics that are linked to abilities which must be developed through various stages and processes. These competencies play a crucial role in the professional world, particularly in relation to one's job position, as they determine the extent to which an individual fulfills their role within a team. Furthermore, according to Spencer and Spencer (Priansa, 2014), competence consists of five key characteristics that serve as indicators of one's professional capacity.

a. Motive: Refers to an employee's description of something that is thought or desired, and is a drive to take action to fulfill his desires.

b. Character: Refers to an employee's mental characteristics and consistency of response to stimuli, pressure, situations, and information. This character determines the level of employee emotion in responding to stimuli and information.

c. Self-Concept: Refers to an employee's description of attitudes, values, and self-image towards the work, tasks or positions that he faces to be realized through his work and efforts.

d. Knowledge: Refers to an employee's ability that is formed from the information he receives. The knowledge possessed by a person predicts what they can do, not what they will do.

e. Skills: Refers to an employee's ability to perform physical or mental tasks. Competence is not an ability that cannot be influenced.
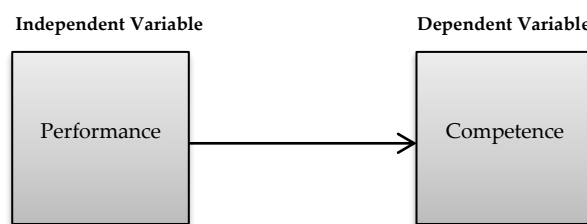

Figure 1. Conceptual Framework

3. RESEARCH METHODS

3.1. Research Design

This study was conducted at the Regional General Hospital and Community Health Centers in Garut Regency. The independent variable in this research is Competence (X), and the dependent variable is Performance (Y). The research employs a quantitative approach using descriptive and verification methods, utilizing both primary and secondary data (Sugiyono, 2013). The aim is to analyze the effect of competence on performance using statistical tests (Ghozali, 2018).

3.2. Population and Sample

The population in this study consists of 3 sanitarian staff at Dr. Slamet Regional General Hospital and 28 sanitarian staff at Community Health Centers, totaling 31 individuals. Due to the manageable size of the population, a non-probability sampling approach is implemented, utilizing the total sampling method where all individuals within the population are considered part of the research sample.

3.3. Data Collection Techniques and Instruments

Information was gathered through the use of surveys, watching behaviors, and conducting interviews. The survey included questions with set answers that were rated on a scale of 1 to 5. These tools were created to evaluate the abilities and effectiveness of the public health workers.

3.4. Data Analysis

Data analysis was performed using Microsoft Excel and SPSS version 26. Statistical tests used in this study include the ANOVA test (F-test) to examine simultaneous effects and the T-test to assess partial effects of competence on performance.

3.5. Ethical

The research conducted in this study follows ethical guidelines, which include allowing participants to voluntarily take part, receiving consent after providing necessary information, and safeguarding the privacy and identity of those being surveyed. Ethical considerations were followed throughout the data collection and analysis processes.

4. RESULTS AND DISCUSSION

4.1. Validity Test

Validity Test The purpose of validity testing is to ensure that the measurement instrument used effectively measures the intended construct or variable, so that the results obtained are reliable and can be interpreted with confidence. The following are the results of the validity test:

Table 1. Competency Validity Test (X)

Question items	Correlation value	r value	Information
1	0,398	0,335	Valid
2	0,491	0,335	Valid
3	0,55	0,335	Valid
4	0,604	0,335	Valid
5	0,719	0,335	Valid
6	0,714	0,335	Valid
7	0,676	0,335	Valid
8	0,666	0,335	Valid
9	0,642	0,335	Valid
10	0,601	0,335	Valid
11	0,685	0,335	Valid
12	0,760	0,335	Valid
13	0,855	0,335	Valid
14	0,833	0,335	Valid
15	0,700	0,335	Valid
16	0,770	0,335	Valid
17	0,735	0,335	Valid
18	0,823	0,335	Valid
19	0,648	0,335	Valid
20	0,794	0,335	Valid
21	0,633	0,335	Valid

From the table 1 above, it is obtained that the Sanitarian Staff Competence variable consists of 21 statement items so that the calculated r value in the validity test exceeds the table r value, which indicates that the Competence question items as a whole can be categorized as valid, as shown by the data results from the table above.

Table 2. Performance Validity Test (Y)

Question items	Correlation value	r value	Information
1	0,489	0,335	Valid
2	0,801	0,335	Valid
3	0,895	0,335	Valid
4	0,682	0,335	Valid
5	0,850	0,335	Valid
6	0,678	0,335	Valid
7	0,717	0,335	Valid
8	0,690	0,335	Valid
9	0,817	0,335	Valid
10	0,749	0,335	Valid
11	0,89	0,335	Valid
12	0,817	0,335	Valid
13	0,804	0,335	Valid
14	0,727	0,335	Valid
15	0,740	0,335	Valid
16	0,667	0,335	Valid
17	0,677	0,335	Valid

Based on the table 2 above, the data results show that all question items obtained for the Performance variable consisting of 17 statement items can be categorized as valid. The validity test indicates that the obtained r value exceeds the predetermined r table value, demonstrating a clear relationship.

4.2. Reliability Test

Reliability testing assesses the consistency of measurement results when the same variable is measured multiple times with the same instrument. In order to be reliable, question items must be validated. Consistency in responses to questions indicates the reliability of a variable. The reliability coefficient of an instrument measures the consistency of responses to statements from respondents.

Table 3. Results of Research Instrument Reliability Test

Variable	Reliability Value	Information
Competence	0,954	Reliable
Performance	0,956	Reliable

According to the findings from the reliability test, it was revealed that the variable X, which pertains to the skills of sanitation workers, demonstrated a reliability rate of 0.954, equivalent to 95.4%, placing it in the reliable category, meaning that the competency measuring instrument (questionnaire) can be trusted with a very good level of reliability and if the measuring instrument (questionnaire) is used twice or more to measure the same symptoms with a reliability of 95.4. For the Y variable, namely performance, it has a reliability of 0.956 or 95.6% and is included in the reliable category, meaning that the performance measuring instrument (questionnaire) can be trusted with a very good level of reliability, if the measuring instrument (questionnaire) is used twice or more to measure the same symptoms with a reliability of 95.6%. Based on the table above, the findings of the reliability assessment for the Competence variable show that the Cronbach alpha value obtained is 0.838, surpassing the established threshold of 0.60. Therefore, it can be inferred that the reliability test results for the research data are trustworthy.

Table 4. Results of Aggression Analysis

Model		Unstandardized Coefficients		Standardized Coeffiecients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	-14.415	5.894		-2.452	0.02
	Competence (X1)	0.595	0.097	0.612	6.148	0

According to the data displayed in the table 4, we can derive the equation for multiple linear regression: **14,451 Y + 0.595 X.** This equation can be explained as follows:

a) Constant (a) = 14,451 indicates a constant price, where if the competency variable (X) = 0 then the Performance of sanitarian personnel, (Y) at the Regional General Hospital and Health Center in Garut Regency is worth 14,451 units.

b) Competency (X) = 0.595 indicates that the competency variable is directly proportional or in line with the performance of sanitarian personnel. Where good competence will improve the performance of sanitarian personnel

4.3. Simultaneous test (F test)

The F-test is utilized to determine if there is a significant impact of the competency variable (X) on the performance variable (Y) of sanitarian staff at the Regional General Hospital and Community Health Centers in Garut Regency. The hypotheses formulated for this test are as follows:

H_0: $\beta_1 = 0$, indicating that the competency variable (X) does not have a significant effect on the performance of sanitarian personnel (Y).

H_1: At least one independent variable has a significant effect on the performance variable (Y).

Decision criteria:

a) Reject H_0 if Fcount > Ftable or Sig. < α (0.05), indicating a significant effect.

b) Fail to reject H_0 if Fcount ≤ Ftable or Sig. ≥ α (0.05), indicating no significant effect.

Table 5. Results of F-test

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	3158.129	2	1579.064	88.975	.000[b]
	Residual	532.417	30	17.747		
	Total	3690.545	32			

According to the results of the Anova test, the F count value obtained was 88.795 with a significance value of 0.000. With a significance level of α = 0.05 or 5%, it can be inferred that the null hypothesis (H0) is rejected in favor of the alternative hypothesis (H1) because the significance value of 0.000 is less than α = 0.05. Therefore, it can be deduced that the test is statistically significant, indicating that the variable of competency

(X) significantly influences the performance of sanitarian personnel (Y) at the Regional General Hospital and Health Center in Garut Regency.

4.4. Partial Test (T-test)

The following are the test results that are seen through the significance value:

Table 6. t-Test Results

Model		Unstandardized Coefficients		Standardized Coeffiecients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	-14.415	5.894		-2.452	0.02
	Competence (X1)	0.595	0.097	0.612	6.148	0

Source: SPSS V.26 Output

The t-test results indicate that the significance value is 0.000, indicating that the independent variable "competence" has a noteworthy impact on the dependent variable "performance." This suggests that the hypothesis Ha is supported while H0 is not. The results of the t-test for the Competence variable (X), obtained a t-test value of 6.148 with Sig (significance level) = 0.001, with an α value = 5% or 0.05. Based on the test criteria, the competency variable partially influences the improvement of the performance of sanitarian personnel (Y) at the Regional General Hospital and Health Center in Garut Regency.

4.5. Coefficient of Determination Test

Table 7. Results of Determination Coefficient Test

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.925[a]	0.856	0.846	4.213
a.	Predictors: (Constant), Competence (X)			
b.	Dependent Variable: Performance (Y)			

Source: SPSS V.26 Output

Based on the results in table 7, the corrected R2 value = 0.846 is obtained to determine how much the competency variable is in improving the performance of sanitarian workers at the Regional General Hospital and Health Center in Garut Regency, the following formula can be used:

KD = R2 x 100%

= 0.846 x 100%

= 84.6%

Thus, the contribution of the competency variable of sanitarian workers at the Regional General Hospital and Health Center in Garut Regency is 84.6%, the remaining 15.4% of the sanitarian worker performance variable is given by other factors that are not identified (analyzed).

Based on table 7, the results of the determination coefficient test show that the r square value on the workforce diversity variable is only able to explain employee engagement of 0.789. In addition, the results above also show that the contribution of the adjusted r square value on the workforce diversity variable to employee engagement is 0.616 or 61.6%.

5. CONCLUSIONS

After conducting various research phases, we can deduce several conclusions from this study. First, the competence of sanitarian personnel at the Regional General Hospital and Community Health Centers in Garut Regency, based on assessments from both the sanitarian personnel themselves and their leadership, falls into the high category. This indicates that their competence, measured through the dimensions of motive, trait, self-concept, knowledge, and skill, is in accordance with the standards established by these health institutions. However, both assessment groups agree that the dimensions of knowledge and skill still show relative deficiencies and require further improvement.

Second, the performance of sanitarian staff at these institutions is also rated in the high category by both the sanitarian personnel and their leaders. Performance was evaluated through the dimensions of work quality, work quantity, initiative, creativity, and discipline. Despite the overall high categorization, both

groups identified work quality and work quantity as the dimensions that are still lacking and need further enhancement.

Furthermore, the results of the t-test for the competence variable (X) yielded a t-value of 6.148 with a significance level (Sig.) of 0.000, which is less than the alpha value of 0.05. According to the testing criteria, this indicates that competence has a statistically significant effect on the performance of sanitarian personnel (Y). The findings confirm a positive influence meaning that the higher the competence, the better the performance of sanitarian personnel at the Regional General Hospital and Community Health Centers in Garut Regency.

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