

Research Article

The Effect of Work Environment, Work Stress And Work Motivation On Employee Performance And Its Impact on Working Career Development In Regional Office of Pt. Bank Rakyat Indonesia (Persero) Tbk Banda Aceh, Indonesia

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Article History

Received: 04.02.2020

Accepted: 12.02.2020

Published: 10.03.2020

Journal homepage:

<https://easpublisher.com/easmb>

Quick Response Code



Abstract: The purpose of this study was to determine / analyze: (1) the influence of the work environment on employee performance (2) the influence of work stress on employee performance, (3) the influence of work motivation on employee performance (4) the influence of the work environment on career development (5) work stress on career development, (6) the influence of work motivation on career development, (7) the influence of employee performance on career development (8) the indirect influence of the work environment on career development through employee performance (9) the indirect influence of work stress on career development through employee performance, (10) indirect influence of work motivation on career development through employee performance. This research was conducted at the Regional Office of PT. Bank BRI (Persero) Tbk Banda Aceh. As for the object of this study are the work environment, work stress, work motivation and employee performance and career development, with 125 respondents. The results showed that the work environment affects employee performance, work stress also affects employee performance, work motivation affects employee performance, the performance produced by employees has an influence on improving career development, work environment affects career development, work stress affects the development career, then work motivation affects career development, there is an indirect influence on the work environment on career development through employee performance, there is an indirect effect of work stress on career development through employee performance, there is an indirect influence of work motivation on career development through employee performance.

Keywords: Work Environment, Job Stress, Work Motivation, Employee Performance, Career Development.

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INTRODUCTION

Non-Communicable Diseases (NCD) is one of the main challenges for health and development in the 21st century that can cause harm both in terms of human pain itself and the harm caused to the socioeconomic state. That is because there is no government that is able to avoid the increasing burden due to NCD so that the country requires real handling of Non-Communicable Diseases and supported by resources and socio-economic support to be able to reduce the burden of Non-Communicable Diseases (WHO, 2018)

Non-Communicable Diseases (NCD) are currently a concern because they cause 71% of deaths in Indonesia, including 37% of cardiovascular diseases and 6% of diabetes mellitus (DM). The high chronic disease is caused by one of the risk factors, namely an increase in high blood pressure or hypertension (WHO, 2018). Indonesia for chronic diseases is dominated by hypertension and Diabetes Mellitus which is in contact with all aspects of social life and public health (Setiawan, 2017; Mihardja *et al.*, 2018). The Central Statistics Agency (2018) said that the greatest prevalence of the disease, namely hypertension, ranked first with 81,462 cases and DM ranked third with 17,843 cases. The high rate of chronic illnesses has made funding issued by the Health Insurance Agency of the Republic of Indonesia increase (Qudsi, *et al.*, 2017).

In the era of JKN (National Health Insurance), the Government together with the Health Social Security Organizing Agency (BPJS) in collaboration with the First Level Health Facilities developed a program with a proactive approach that was implemented in an integrated manner, the Chronic Disease Management Program (Prolanis).

Prolanis is a health service system and proactive approach implemented in an integrated manner that involves Participants, Health Facilities and Health BPJS in the context of health care for BPJS participants suffering from chronic diseases to achieve optimal quality of life with the cost of effective and efficient health services. With Prolanis, the target of increasing the health status, knowledge, abilities, and awareness of participants in the context of maintaining health independently can be realized optimally. This target is also based on applicable clinical guidelines. An indicator of the success of this program is the realization of the participant's Health Profile through continuous monitoring of participants. It is intended that the number of participants who live healthy with chronic diseases can be optimized and participants who fall in the acute phase/disease become increasingly severe can be minimized.

Considering that Diabetes Mellitus and Hypertension is a disease that can be said to never be cured but only that it can always be monitored and maintained its level of urgency, therefore this Prolanis program is very important to be implemented so that people who suffer from type 2 diabetes mellitus and hypertension can always monitor their health and achieve better health levels every day.

Evaluation of the implementation of the BPJS Chronic Disease Management Program (Prolanis) has been very rarely carried out since the enactment of this program. To assess whether the program is running as it should be needed indicators of service quality in the form of patient satisfaction.

Efforts to determine patient satisfaction and the expectations of patients with Diabetes Mellitus and Hypertension are very important for the Haji General Hospital Makassar as a partner or BPJS because it can be an evaluation and input for management in making policies in improving the service quality. Patients who feel their hopes, complaints, and complaints are even noticed will certainly feel satisfied and show evidence of increasing health care. So that health services for the community both from hospitals and BPJS will be more optimal.

Gadkari research (2013) that the management of chronic diseases to improve communication skills, problem-solving and goal-setting in managing diabetes for educators and primary care physicians, most people succeeding in managing diseases require lifestyle changes to monitor diets, increase physical activity and monitor regular medical services from health professionals.

METHODOLOGY

Research Design

The type used in this research is observational analytic with a cross-sectional study approach. This research will be carried out at Haji General Hospital Makassar from January - February 2020.

Population and Sample

The population in this study was the whole number of participants in hypertension and diabetes mellitus who participated in Prolanis activities in the working area of Haji Makassar City Hospital. Based on Secondary Haji Hospital data in 2018, the number of Prolanis participants suffering from hypertension and diabetes mellitus was 106 participants. The sampling technique uses total sampling. Then the size of the sample in this study used the number of Prolanis participants who suffer from Diabetes Mellitus and Hypertension in Haji Hospital Makassar City in 2018 namely: 106 participants.

Data Analysis

Data Analysis used is univariate analysis to get an overview of the research problem. To see the effect of each independent variable on the dependent, bivariate analysis was used using the Chi-Square multiple logistic regression test.

RESULT

The data collected was about the characteristics of patients participating in the Prolanis Program at the Makassar City Hajj General Hospital, which included age, sex, occupation, education level, occupation, marital status.

Table 1: Distribution of Frequency of Respondents by Patient Age of Prolanis Participants in Haji HospitalMakassar

Age	Respondent	
	n	%
16-25	16	15,1
26-45	57	53,8

>46	33	31,1
Total	106	100.0

Source, primary data 2020

Table 1 shows that the age of respondents varied from age 16 to more than 46 years. Most respondents were 26-45 years old, 57 respondents (53.8%) while the least respondents were 16-25 years old, 16 respondents (15.1%).

Table 2: Distribution of Frequency of Respondents by Gender of Prolanis Patients in Haji Hospital Makassar

Sex	Respondent	
	n	%
Male	22	20,8
Female	84	79,2
Total	106	100.0

Source, primary data 2020

The gender characteristics in Table 2 show that there were 22 male respondents (20.8%) and 84 female respondents (79.2%).

Table 3: Frequency Distribution Based on the Latest Education of Prolanis Participants in Haji Hospital Makassar

Education	Respondent	
	n	%
Elementary	2	1.8
Junior School	4	3.8
High School	72	67.9
Higher Education	28	26.4
Total	106	100.0

Source, primary data 2020

The latest educational characteristics in Table 3 show that most respondents were high school graduates as many as 72 respondents (67.9%), while the lowest were primary school graduates of 2 respondents (1.8%).

Table 4: Distribution of Respondent Frequencies Based on Marriage Status of Prolanis Participant Patients in Haji Hospital Makassar

Status	Respondent	
	n	%
Married	83	78.3
Not Married	23	21.7
Total	106	100.0

Source, primary data 2020

The marital status characteristics in Table 4 show that most respondents were respondents with married status of 83 respondents (78.3%), while the lowest were respondents with unmarried status of 23 respondents (21.7%).

Table 5: Distribution of Frequency of Respondents Based on the Work of Prolanis Participants in Haji Makassar City Hospital

Occupation	Respondent	
	n	%
Entrepreneur	23	21.7
Housewife	39	36.8
Trader	26	24.5
Retirement	18	17.0
Other	0	0.00
Total	106	100.0

Source, primary data 2020

Based on Table 5 above, respondents' occupational characteristics show that the most respondents are respondents with a job as a housewife with 39 respondents (36.8%) followed by respondents with a merchant job of 26 respondents (24.5%) while the lowest is respondents who work as retirees 18 respondents (17.0%).

Table 6: Distribution of Respondent Frequencies Based on the Affordability of Prolanis Participants in Haji Hospital Makassar

	Affordability	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Enough	83	78.3	78.3	78.3
	Less	23	21.7	21.7	21.7
	Total	106	100.0	100.0	

Source, primary data 2020

Table 6 shows the frequency of the sample with the variable affordability where out of 106 respondents there were 83 respondents (78.3%) who stated that affordability was sufficient and there were 23 respondents (21.7%) who stated that affordability was lacking.

Table 7: Distribution of Frequency of Respondents Based on Patient Safety of Prolanis Participants in Haji Hospital Makassar

	Safety	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Enough	64	60.4	60.4	60.4
	Less	42	39.6	39.6	39.6
	Total	106	100.0	100.0	

Source, primary data 2020

Table 7 shows the frequency of the sample with service security variables whereof 106 respondents there were 64 respondents (60.4%) who stated that service security was sufficient and there were 42 respondents (39.6%) who stated security was lacking.

Bivariate Analysis

Table 8: Effect of Affordability/access to Patient Satisfaction Prolanis participants at Haji Hospital Makassar

Affordability/access	Patient Satisfaction				Total		Statistical Test
	Satisfied		Less Satisfied		n	%	
	n	%	n	%			
Enough	76	91.6	7	8.4	83	100	p= .000
Less	8	34.8	15	65.2	23	100	
Total	84	79.2	22	20.8	106	100	

Source, primary data 2020

Table 8 shows that of the 83 respondents who had sufficient affordability, there were 76 respondents (91.6%) who were satisfied with the hospital and 7 respondents (8.4%) were dissatisfied while of the 23 respondents who had affordability there were less 8 respondents (34.8%) who were satisfied with the service and 15 respondents (65.2%) who felt dissatisfied.

Statistical test results using the chi-square test obtained p-value = 0,000 because the value of p < 0.05 then there is the effect of affordability on patient satisfaction.

Table 9. Effect of Safety on Patient Satisfaction of Prolanis Participants in Haji Hospital Makassar

Safety	Patient Satisfaction				Total		Statistical Test
	Satisfied		Less Satisfied		n	%	
	N	%	N	%			
Enough	51	79.7	13	20.3	64	100	p= .008
Less	33	78.6	9	21.4	42	100	
Total	84	79.2	22	20.8	106	100	

Source, primary data 2020

Table 9 shows that of the 64 respondents, who felt sufficient security, there were 51 respondents (79.7%) who were satisfied with the hospital and 13 respondents (20.3%) were less satisfied while of the 42 respondents who felt security there were less than 33 respondents (78.6%) who were satisfied with the service and 9 respondents (21.4%) who were

dissatisfied. The results of statistical tests using the chi-square test obtained the value of $p = 0.008$ because the value of $p > 0.05$ then there was an influence safety for patient satisfaction.

Multivariate Analysis

The effect of service quality variables on patient satisfaction can be seen through analysis using a multivariate logistic regression test. With the multivariate logistic regression test, the effect of the independent variables simultaneously can be obtained together with the dependent variable and the independent variable that has the greatest effect on the dependent variable. The multivariate logistic regression test results between the independent variables with the dependent variable.

Table 10: Effect of Service Quality Variables on Patient Satisfaction of Prolanis Participants in Haji Hospital Makassar

Variable	B	S.E.	Wald	df	Sig.	Exp(B)
Access/Affordability	-3,795	,953	15,852	1	,000	5,022
Safety	1,622	,873	3,451	1	,003	1,064

The p-value of variables, namely, the affordability/access variable ($p = 0.000$), security ($p = 0.003$) has a value of $p < 0.05$, which means, statistically, this variable has a significant influence on patient satisfaction on the satisfaction of patients participating in prolanis program in hospitals Makassar City Hajj.

Based on the multivariate test results, it can be seen that the service quality variable which is very influential on patient satisfaction is to see the value of the influence of Exp (B) on the affordability variable of 5022 times on the satisfaction of patients participating in the Prolanis Program at Haji Hospital Makassar.

DISCUSSION

Respondents stated the location of Makassar City Haji Hospital where they participated in the prolanis program was easily accessible because they felt the distance was not too far and most respondents already had private vehicles and the language used by health workers was easy to understand. Whereas respondents who feel that affordability is not good or services are difficult to access because of the location of a residence far from the hospital and the difficulty of transportation for those who do not have private vehicles.

The bivariate statistical test results using the chi-square test obtained p -value = 0,000. Because the p -value < 0.05 this means that affordability is related to patient satisfaction. If the patient feels the distance and travel time is short, transportation to the hospital is easy, and the language of the officer is easy to understand, the number of satisfied patients increases. Meanwhile, if patients feel that the affordability aspect is not good, then their satisfaction will also decrease.

This research is in line with this research in line with Naidu's research (2019) about the relationship of service quality with inpatient satisfaction where there is a significant relationship between access to patient satisfaction and statistical test results obtained $\rho = 0.012$ ($\rho > 0.05$) The research explains that access is very influential and determines patient satisfaction, access obtained will increase patient confidence in the hospital. Accessibility and continuity of care are important aspects of good general practice and are important in efforts to improve quality. Patients tend to place great importance on availability and accessibility.

Safety-related to services obtained to reduce the risk of injury by identifying participant targets, side effects or other hazards associated with health services (Patterson *et al.*, 2002 Meeks *et al.*, 2014). This also concerns the willingness of people with hypertension and DM to join the prolanis program.

The univariate test results in table 9 show that, of the 106 respondents, there were 64 respondents (60.4%) who stated that security was good and there were 42 respondents (39.6%) who stated that security was not good. Respondents stated that security was good because they felt safe with actions taken by health workers. In addition, officers always pay attention and validate or check the history of the disease before taking action and conveying information.

In bivariate statistical test results using the chi-square test obtained p -value = 0.008. Because the value of $p > 0.05$ this means that the safety variable is related to patient satisfaction. In this case, the security dimension in health services in hospitals has an influence on patient satisfaction. Most respondents or prolanis participants have felt good security, but there are still some of them who are not satisfied with the overall service and vice versa. This happens if respondents feel other factors are more influential in determining their satisfaction. Despite the small mistakes made by health workers in conducting medical treatment, they can still feel satisfied with their servants because the officers serve them well and according to their expectations.

Research conducted by Shahbaz *et al.*, (2010) showed the same results that satisfied respondents with security at the Hospital more than dissatisfied respondents. The univariate test results showed that 87% of patients felt good

security, while respondents who felt poor security was only 11.2% and the final results found, the better the security at the hospital, the more satisfied the patients were. Conversely, the less good security at the hospital, the lower the patient satisfaction.

CONCLUSION

There is an influence of access/affordability and safety factors on the satisfaction of patients participating in the prolanis program at the Haji District General Hospital, Makassar. The results of this study indicate that the patient satisfaction prolanis program participants in Makassar City Haji Hospital influenced by several important factors where the most influential factor is affordability.

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