INTERNATIONAL JOURNAL OF SOCIAL AND MANAGEMENT STUDIES (IJOSMAS)

Vol.6 No. 3 https://www.ijosmas.org e-ISSN: 2775-0809

The Effect of Competency and Remuneration on Healthcare Workers Performance Mediated By Work Discipline at Rumah Sakit Pusat Pertamina

Heri Sugiarto[1*]; Veithzal Rivai Zainal[2)]

[1)] 55123110052@student.mercubuana.ac.id, Universitas Mercu Buana, Indonesia
[2)] veithzal47@gmail.com, Universitas Mercu Buana, Indonesia

**) Corresponding Author*

ABSTRACT

This study aims to examine and analyze the influence of competency and remuneration on the performance of healthcare workers, with work discipline as an intervening variable. A quantitative research method was employed, and data were collected through the distribution of research instruments to 149 healthcare workers at Rumah Sakit Pusat Pertamina. The data were analyzed used the Structural Equation Modeling-Partial Least Squares (SEM-PLS) approach. The results indicate that competency has a positive and significant effect on work discipline and the performance of healthcare workers, remuneration does not have a significant effect on either work discipline or performance, work discipline has a positive and significant effect on performance. Competency also has a positive and significant indirect effect on performance through work discipline, whereas remuneration does not affect performance through work discipline. This study develops a holistic model linking competency and remuneration to healthcare workers' performance, while also exploring the simultaneous role of work discipline as an intervening variable. It is recommended the hospitals optimize the productivity of healthcare workers by improving a transparent and fair remuneration system, enhancing training and educational opportunities, providing recognition and feedback on employee performance, and reinforcing adherence to work discipline.

Keywords*:* Competence, Remuneration, Work Discipline, Healthcare Workers Performance

Article Doi:
http:

Submitted: 14-08-2025	Revised:	Accepted:

INTRODUCTION

Rumah Sakit Pusat Pertamina (RSPP) is supported by 1,019 workers consisting of 6 Management, 53 Doctors, 388 Nurses, 143 Other Healthcare Workers and 138 Non-Clinical Personnel and 297 Outsourcing Personnel. Human resources (HR) are a vital asset for any organization or company. Proper HR management can drive the implementation of a vision and mission, and the achievement of goals. Good HR management results in excellent employee performance. A successful institution is supported by competent and dedicated human resources. A competent workforce is the foundation for gaining trust from its customers.

Evaluation of the average performance value of Healthcare workers (Doctors, nurses and other Healthcare workers) at Rumah Sakit Pusat Pertamina (RSPP) from 2022 – 2024 faces the challenge of decreasing the average value from the "Good" criteria to the "SUFFICIENT" criteria in 2024, so this needs special attention to prevent the same thing from happening in the following years which could also reduce public trust in the institution.

The average performance assessment results for 584 Healthcare Workers at Rumah Sakit Pusat Pertamina (RSPP) in 2022 decreased from GOOD criteria to SUFFICIENT criteria in 2023 and 2024. The Healthcare Worker performance assessment method used by Human Capital of Rumah Sakit Pusat Pertamina (RSPP) uses an assessment with a scale of ≤

Vol.6 No. 3 https://www.ijosmas.org e-ISSN: 2775-0809

3 to 7 with assessment aspects consisting of Individual Goal Setting (Cascading KPI Function, HSSE Objectives, Development Commitment, Community Involvement) and AKHLAK behavior survey 360 degres assessment.

To understand the context of this study, a preliminary survey was conducted on 30 employees of Rumah Sakit Pusat Pertamina (RSPP). The purpose was to identify key issues that may influence Performance of Healthcare Workers in the organization. Based on the results of the pre-survey, it can be seen in the performance variable that the company's appreciation for the performance of Healthcare Workers is not yet fair, guidance to achieve optimal performance of Healthcare Workers by direct leaders has not been running effectively while in the competency variable it shows that continuing education for Healthcare Workers with company facilities has not been fully supported and in the remuneration variable respondents said that remuneration is not yet fair and requires an evaluation of the implementation of the remuneration system, furthermore in the discipline variable respondents do not fully understand the enforcement of rules and sanctions set by the company for violations of work discipline.

LITERATURE REVIEW

According to Busro (2018) Performance is the result of work that can be achieved by employees, both individually and groups within an organization in accordance with the authority and responsibilities assigned by organization in an effort to achieve the vision, mission and objectives of the concerned organization including competence, perseverance, independence and the ability to solve problems within the given timeframe legally, not violating the law and in accordance with morals and ethics. Performance in carrying out its functions does not stand alone but is related to performance satisfaction and reward levels, influenced by skills, abilities, and individual traits. Thus, according to the partner-lawyer model, individual performance is fundamentally influenced by factors such as: expectations regarding rewards, motivation, ability, needs, and traits, perceptions of tasks, perceptions of reward levels, and performance satisfaction. Therefore, performance is essentially determined by three things: ability, desire, and environment. (Rivai, 2015)

Competence (Rivai, 2018) is generally understood as skills, abilities, and capabilities. In the context of human resource management, the term competence refers to the characteristics of a person that enables them to succeed in their job. There are various definitions of competence, but the one that is often used is a set of characteristics that underlie an individual to achieve superior performance. According to Wibowo (2018) Competence is the ability to perform a job based on skills and knowledge, supported by the work attitude required by the job. The dimensions of competence include knowledge, skills, and attitudes.

Remuneration or compensation (Rivai, 2021) states that compensation is something received by employees as a substitute for their contribution to the company. The provision of compensation is one of the implementations of human resource management functions related to all types of individual rewards given in exchange for performing organizational tasks. According to Hasibuan (2017) remuneration is all income in the form of money, goods directly or indirectly received by employees as compensation for the services provided to the company.

According to Rivai (2018), work discipline is a tool used by managers to communicate with employees so that they are willing to change certain behaviors and as an effort to increase awareness and willingness of individuals to comply with all company regulations and applicable social norms. Work discipline is an attitude of obedience of

employees towards the rules or regulations applicable in a company or organization based on awareness and consciousness, not coercion (Mohtar, 2019).

The purpose of this study was to examine how the influence of competency and Remuneration on work performance with Discipline as a Mediating variable.

The hypotheses are formulated to address specific issues, with a focus on:

H1 : Competency has a positive and significant effect on work discipline of healthcare workers.

H2 : Competency has a positive and significant effect on work performance of healthcare workers.

H3 : Remuneration has a positive and significant effect on work discipline of healthcare workers

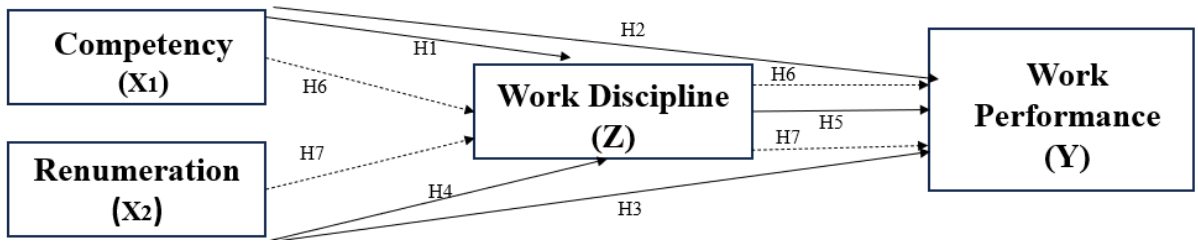
H4 : Remuneration has a positive and significant effect on work performance of healthcare workers.

H5 : Work discipline has a positive and significant effect on work performance of healthcare workers

H6 : Competency has a positive and significant effect on work performance of healthcare workers with work discipline as mediating variable

H7 : Renumeration has a positive and significant effect on work performance of healthcare workers with work discipline as mediating variable

Figure 1. Conceptual Framework



METHOD

This research was conducted at Rumah Sakit Pusat Pertamina (RSPP). A quantitative approach with a causal design was employed to empirically examine the hypothesized relationships among constructs. The use of quantitative methods enables the application of numerical data to test both direct and indirect effects between variables through structural equation modeling (Hair et al., 2021).

In this study, there are four types of variables: employee performance as the dependent variable. Meanwhile, competency and remuneration are independent variables; competency, remuneration, and work discipline are moderating variables that strengthen the relationship between the independent and dependent variables

The population in this study was all permanent workers in the Pertamina Central Hospital environment with the status of healthcare workers, consisting of all doctors, all nurses and all other healthcare workers.

The sample size for this study was 124 respondents. The sample size determination criteria were based on research considerations using Structural Equation Modeling (SEM) analysis. The Slovin calculation was carried out using the equation below (Santoso, 2023). The sample size in this study used a margin of error of 8%.

The collection data method used was quantitative, with a survey as the data collection instrument. The questionnaire served as the research instrument. Furthermore, this research

was conducted through observation and document review, including interviews for final verification.

Data analysis was performed using Partial Least Squares - Structural Equation Modeling (PLS-SEM) via SmartPLS 3.0 (Hair et al., 2017). This method enabled the simultaneous estimation of measurement models and structural models. SEM-PLS Analysis:

1. Measurement Model (Outer Model)
   Validity and reliability are tested as follows:
   a) *Convergent validity*: Outer loadings (>0.7 recommended, >0.6 acceptable) and Average Variance Extracted (AVE > 0.5) (Hair et al., 2022).
   b) *Discriminant validity*: Tested using cross-loadings, the Fornell-Larcker criterion, and Heterotrait-Monotrait (HTMT) ratio (<0.9).
   c) *Reliability*: Cronbach's Alpha (>0.7 confirmatory, >0.6 exploratory) and Composite Reliability (>0.7 confirmatory, >0.6 exploratory) (Hair et al., 2022).
   d) *Collinearity*: Variance Inflation Factor (VIF < 5) ensures no strong correlations among formative indicators.
2. Structural Model (Inner Model)
   The structural model is assessed using:
   a) R^2 *(explained variance)*: 0.75 (strong), 0.50 (moderate), 0.25 (weak) (Hair et al., 2022).
   b) f^2 *(effect size)*: 0.02 (small), 0.15 (medium), 0.35 (large).
   c) Q^2 *(predictive relevance)*: $Q^2 > 0$ indicates predictive relevance.

Hypothesis testing uses bootstrapping (5,000 samples) with t-values > 1.96 (5% significance level) (Hair et al., 2022).

RESULTS AND DISCUSSION

Results

In this study, data collection was conducted using a research instrument created via Google Forms to reach potential respondents. A total of 149 responses were collected.

Baseline Characteristic of Respondent

The description of the respondents in this study includes information on gender, age, education, and Division. This data was used to illustrate the overall demographic profile of the respondents.

Table 1. Respondent Profile

Variables	Frequency	Percentage (%)
Age		
≤ 35 years	17	11.4
36 – 45 years	45	30.2
46-56 years	87	58.4
Length Of Work		
< 5 years	8	5.4
5 - 10 years	6	4.0
10 - 20 years	45	30.2
> 20 years	90	60.4
Last Education		
D3/Equivalent	55	36.9
D4/Equivalent	2	1.3

Bachelor Professional	54	36.2
Bachelor Degree/ Equivalent	20	13.4
Master Degree)/Specialist/Equivalent	17	11.4
Doctoral Degree /Sub Specialist/Equivalent	1	0.7
Job Position		
Functional Executor	87	58.4
Supervisor/Senior Officer	36	2.2
Vice Director/Head Of/KSM	26	17.4
Worker Status		
Indefinite-Term Workers (PWTT)	132	88.6
Fixed-Term Workers (PWT)	14	9.4
Partnership Worker	3	2.0
Other Healthcare Workers	45	30.2
Nurses/Midwives	87	58.4
Doctor	17	11.4

The demographic profile of the respondents is summarized as follows. The distribution of respondents by age showed that the majority were 87 (58.4%) aged 46-56. Ninety (60.2%) respondents had worked at Rumah Sakit Pusat Pertamina (RSPP) for more than 20 years, with most having a Diploma 3 (D3) or Bachelor's degree. All job levels and employment statuses were represented in this study.

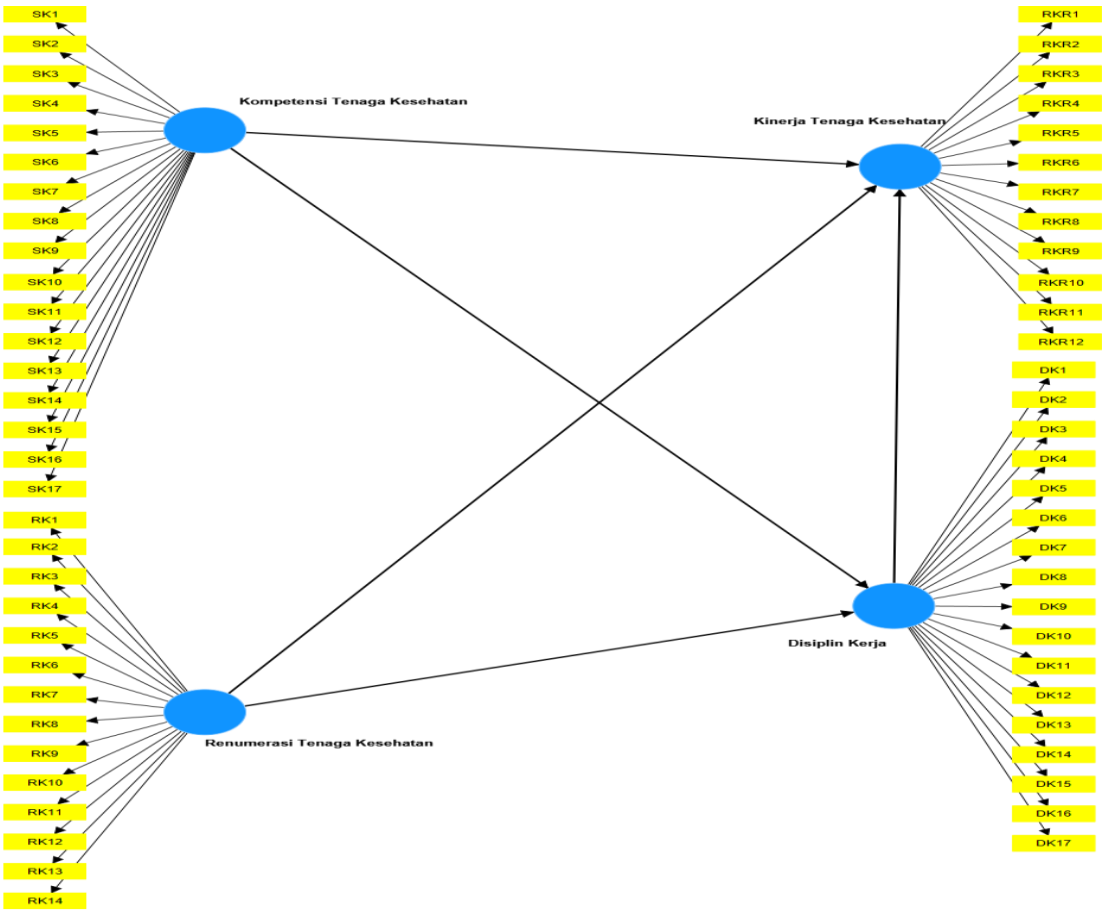
Partial Least Square (PLS) Data Analysis Method

Measurement Model Evaluation (Outer Model)

Convergent Validity

According to Hair et al. (2022), convergent validity testing for reflective indicators can be conducted by evaluating the outer loading values for each construct. The recommended value to meet the validity criteria is 0.7 or higher.

Figure 2. Outer Model



Source: SmartPLS 3.0 Output (2025)

The fulfillment of convergent validity criteria across all indicators indicates that the measurement model in this study has met the eligibility standards and is deemed appropriate for use in the subsequent analysis stage, namely the inner model testing. The visualization of the measurement model testing results is presented in Figure 2, which is the output generated using SmartPLS version 3.0. All indicators meet the required loading factor (>0.7), confirming their convergent validity for further analysis.

Table 2. Convergent Validity Test Results (AVE)

Variabel	Average Variance Extracted
Competency (X_1)	0,652
Remuneration (X_2)	0,690
Work Discipline (Z)	0,652
Work Performance (Y)	0,691

Source: SmartPLS 3.0 Output (2025)

The convergent validity test confirms that all constructs meet the AVE criterion (>0.50), ensuring validity for further analysis. These results indicate that each construct explains more than 50% of the variance in its indicators, validating their reliability. Reliability is measured using Cronbach's Alpha and Composite Reliability. Both are above 0.70, indicating that the measurement instruments are reliable (Hair et al., 2017).

Discriminant Validity

The next step is to evaluate discriminant validity using the Fornell-Larcker Criterion. This involves comparing the square root of the Average Variance Extracted (AVE) for each construct with the correlation values between constructs in the model. This method ensures that each construct is empirically distinct from others in the research model.

	Competency	Renumeration	Work Discipline	Work Performance
Competency	0.807			
Remuneration	0.267	0.831		
Work Discipline	0.760	0.275	0.808	
Work Performance	0.798	0.311	0.829	0.831

Source: SmartPLS 3.0 Output (2025)

The discriminant validity test using the Fornell-Larcker Criterion shows that the square root of the Average Variance Extracted (AVE) for each construct exceeds its correlations with other constructs. The AVE square roots are: Competency (0.807), Remuneration (0.831), Work Discipline (0.808) and, Work Performance (0.831), confirming the distinctiveness of each construct. Additionally, the Heterotrait-Monotrait Ratio (HTMT) values, all below 0.85, confirming that each construct is distinct from others (Hair et al., 2022).

Table 4. Heterotrait-Monotrait Ratio (HTMT) Test Results

Variabel	Competency	Renumeration	Discipline	Work Performance
Competency (X_1)				
Remuneration (X_2)	0,268			
Work Discipline (Z)	0,778	0,281		
Work Performance (Y)	0,822	0,31	0,85	

Source: SmartPLS 3.0 Output (2025)

Another method to assess discriminant validity is by examining reflective indicators using cross-loadings, as recommended by Hair et al. (2022). Each variable should have a loading value greater than 0.70. This approach evaluates discriminant validity at the item level, ensuring that an indicator has the highest loading factor for the construct it measures compared to other constructs. This confirms that the latent construct is more effective at predicting indicators within its block than those in other blocks.

Table 5. Discriminant Validity (Cross Loading) Test Results

Indicator	Competency	Remuneration	Work Discipline	Work Performance
SK1	**0,741**	0,109	0,484	0,550
SK2	**0,778**	-0,066	0,522	0,515
SK3	**0,795**	0,118	0,506	0,506
SK4	**0,791**	0,322	0,629	0,671
SK5	**0,768**	0,186	0,558	0,654
SK6	**0,826**	0,130	0,599	0,655
SK7	**0,843**	0,206	0,647	0,692
SK8	**0,794**	0,214	0,615	0,570
SK9	**0,865**	0,222	0,612	0,666
SK10	**0,793**	0,156	0,611	0,590
SK11	**0,837**	0,402	0,642	0,686
SK12	**0,838**	0,242	0,654	0,681
SK13	**0,779**	0,285	0,636	0,696
SK14	**0,791**	0,379	0,637	0,732
SK15	**0,819**	0,143	0,670	0,618

Indicator	Competency	Remuneration	Work Discipline	Work Performance
SK16	**0,828**	0,168	0,692	0,673
SK17	**0,832**	0,299	0,654	0,719
RK1	0,188	**0,851**	0,181	0,220
RK2	0,164	**0,804**	0,141	0,216
RK3	0,229	**0,913**	0,198	0,235
RK4	0,234	**0,923**	0,227	0,253
RK5	0,180	**0,819**	0,167	0,198
RK6	0,165	**0,818**	0,146	0,193
RK7	0,224	**0,752**	0,256	0,262
RK8	0,193	**0,890**	0,190	0,220
RK9	0,236	**0,927**	0,212	0,257
RK10	0,224	**0,763**	0,175	0,238
RK11	0,241	**0,746**	0,302	0,308
RK12	0,242	**0,729**	0,270	0,283
RK13	0,218	**0,848**	0,272	0,280
RK14	0,253	**0,811**	0,301	0,329
DK1	0,738	0,293	**0,861**	0,724
DK2	0,696	0,330	**0,889**	0,784
DK3	0,642	0,152	**0,807**	0,662
DK4	0,539	0,366	**0,758**	0,663
DK5	0,524	0,006	**0,694**	0,541
DK6	0,663	0,158	**0,877**	0,722
DK7	0,626	0,191	**0,858**	0,705
DK8	0,656	0,208	**0,872**	0,745
DK9	0,690	0,145	**0,881**	0,760
DK10	0,544	0,417	**0,751**	0,671
DK11	0,679	0,074	**0,820**	0,624
DK12	0,516	0,276	**0,720**	0,513
DK13	0,566	0,155	**0,786**	0,619
DK14	0,467	0,433	**0,712**	0,611
DK15	0,653	0,298	**0,843**	0,716
DK16	0,656	0,207	**0,844**	0,722
DK17	0,501	0,044	**0,708**	0,508
KRK1	0,799	0,263	0,680	**0,870**
KRK2	0,659	0,245	0,617	**0,823**
KRK3	0,577	0,108	0,581	**0,705**
KRK4	0,687	0,239	0,692	**0,856**
KRK5	0,720	0,244	0,740	**0,878**
KRK6	0,661	0,307	0,674	**0,834**
KRK7	0,667	0,207	0,650	**0,833**
KRK8	0,567	0,216	0,572	**0,737**
KRK9	0,696	0,306	0,787	**0,894**
KRK10	0,650	0,336	0,755	**0,866**
KRK11	0,585	0,263	0,768	**0,808**
KRK12	0,675	0,337	0,717	**0,850**

Source: SmartPLS 3.0 Output (2025)

The discriminant validity test using the cross-loading method at the item level shows that each indicator has a higher correlation with the variable it measures than with other variables. These results confirm that each indicator is more strongly related to its construct than to others, meeting the discriminant validity criteria at the item level and ensuring no issues with discriminant validity.

Reliability

Reliability testing was performed using Cronbach's Alpha and Composite Reliability to ass good reliabi y is a reliabl table below

Variable		
Competency (X1)		
Remuneration (X2)		
Work Discipline (Z)		
Work Performance (Y)	0,959	0,959

Source: SmartPLS 3,0. Output (2025)

The reliability test results show that all variables have Cronbach's Alpha and Composite Reliability values exceeding the 0.7 threshold, indicating good reliability for all constructs in this study. Specifically, Competency has a Cronbach's Alpha of 0.967 and Composite Reliability of 0.970, Remuneration has 0.965 and 0.965; Work Discipline has 0.966 and 0.966; Work Performance has 0.959 and 0.959. Since all constructs meet the reliability criteria, the measurement instruments used in this study are consistent and trustworthy for measuring the variables.

Structural Model Evaluation (Inner Model)

R-Square (R^2) Value

The R-Square (R^2) coefficient measures how well exogenous variables explain the variability of endogenous variables, with values ranging from 0 to 1. A value closer to 1 indicates better explanatory power and stronger prediction of the endogenous variable's variation. Conversely, a smaller R^2 value suggests limited explanatory ability. However, R^2 tends to increase with the addition of exogenous variables, even if they have no significant effect on the endogenous variable. Hair et al. (2022) classify R^2 values as substantial (≥0.67), moderate (≥0.33), and weak (≥0.19).

In this study, Work Performance (Y) and Work Discipline (Z) are the endogenous variables, influenced by exogenous variables Competency (X1) and Remuneration (X2).

Table 7. R^2 Value Test Result for Endogenous Variables

Variable	R^2	Category
Work Performance	0.758	Substansial
Work Discipline	0.584	Substansial

Source: SmartPLS 3.0 Output (2025)

R^2 represents how well endogenous constructs are explained by exogenous constructs. Higher R^2 indicates better explanatory power (Hair et al., 2022). The R-Square (R^2) values indicate a Substansial predictive ability for the endogenous variables in this study. Work Performance (Y) has an R^2 of 0.758, meaning Compenetncy (X1), Remuneration (X2),

explain 75,8% of its variability, while 24,2% is influenced by other factors. Similarly, Work Discipline (Z) has an R^2 of 0.584, with exogenous variables accounting for 58,4% of its variability and the remaining 42,6% attributed to external factors. These findings suggest that while the model provides substansial explanatory power, additional factors contribute to variations in the endogenous variables.

Construct Cross-Validation Redundancy Testing Results

Predictive Relevance (Q^2) assesses the model's ability to generate accurate observed values for endogenous variables. It applies only to models with endogenous factors. A Q^2 value greater than 0 indicates that the model has predictive relevance, while a value of 0 or negati

Variable	Q^2	Description
Work Performance	0.90	Has relevant predictive value
Work Discipline	0.90	Has relevant predictive value

Source: SmartPLS 3.0 Output (2025)

Q^2 values greater than 0 for both dependent variables, suggesting that the model has good predictive relevance (Hair et al., 2022).

Effect Size (F^2) Value

F-Square (f^2) measures the relative impact of an exogenous variable on an endogenous variable, indicating the strength of the relationship. According to Ghozali (2021), an f^2 value of 0.02 represents a small effect, 0.15 indicates a moderate effect, and 0.35 signifies a large effect. The f^2 values obtained from the data processing results are presented in the following table:

Direct Effect	F-Square	Category Effect
Competency → Discipline	1,222	Strong
Competency → Work Performance	0,263	Moderate
Remuneration → Work Discipline	0,014	Small
Remuneration → Work Performance	0,017	Small
Discipline → Work Performance	0,455	Strong

Source: SmartPLS 3.0 Output (2025)

The Effect Size (F^2) test results indicate that relationships between variables have a strong effect for competency with discipline and discipline with work performance, except for the impact of remuneration with work performance and discipline, which falls into the small category.

Model Fit Test

Model fit evaluation in this study was conducted using two testing methods: Standardized Root Mean Square Residual (SRMR) and Normal Fit Index (NFI). The results of the model fit test are presented in the following table:

Model Fit	Value
SRMR	0.080
NFI	0.639

Source: SmartPLS 3.0 Output (2025)

The model fit test results show an SRMR value of 0.080, meaning the good fit criterion (<0.08) as per Hair et al. (2022). However, the NFI value is 0.639, below the recommended threshold of 0.90, indicating a suboptimal fit. Despite this, Hair et al. (2022) suggest that a model is acceptable if at least one fit criterion is meet. Since the SRMR value satisfies this condition, the model is deemed fit for further analysis.

Collinearity Statistic (VIF) Results

The VIF (Variance Inflation Factor) test is a method for detecting multicollinearity in regression analysis. The VIF test aims to identify whether multicollinearity exists in a regression model, namely whether there is a significant correlation between the independent variables. Interpretation of VIF results based on the following criteria: if the VIF value is <10, it means there is no significant multicollinearity problem, while a VIF value >10 indicates the presence of significant multicollinearity. The VIF test results are presented in the following table:

Table 11. Variance Inflation Factor (VIF) Test Results

Direct Effect	VIF
Competency → Work Discipline	1.075
Competency → Work Performance	2.390
Renumeration → Work Discipline	1.075
Renumeration → Work Performance	1.091
Discipline → Work Performance	2.405

Source: SmartPLS 3.0 Output (2025)

Based on the VIF test, the results showed that all variables had a VIF value <10, so it can be concluded that there is no significant multicollinearity problem among these variables.

Hypothesis Test Results

The hypothesis testing is conducted via bootstrapping, using p-values and t-statistics. The hypothesis testing results, obtained through the Bootstrapping procedure, assess whether the proposed hypotheses are accepted or rejected. According to Hair et al. (2022), path coefficient values range from -1 to +1, where values closer to +1 indicate a strong positive relationship, and values closer to -1 indicate a strong negative relationship. The hypothesis is accepted if the T-Statistic value exceeds ±1.96; otherwise, it is rejected, meaning the null hypothesis (H0) is accepted. All hypotheses are accepted as their p-values are below 0.05, confirming significant relationships among variables. The detailed hypothesis test results are presented in the following table:

Table 13. Hypothesis Test Results

Variabel	Original Sample (O)	Sample Mean (M)	Standard Deviation (STDEV)	T-*Statistics* (|O/STDEV|)	P-*Values*	Result
KMP » KNK	0,390	0,390	0,079	4,963	<0,001	Positive & Significant
KMP » DSK	0,739	0,738	0,050	14,651	<0,001	Positive & Significant
KMP » DSK » KNK	0,380	0,379	0,061	6,265	<0,001	Positive & Significant
RMN » KNK	0,066	0,070	0,039	1,693	0,091	Positive & No Significant
RMN » DSK	0,080	0,085	0,047	1,678	0,093	Positive & No Significant
RMN » DSK » KNK	0,041	0,044	0,026	1,570	0,116	Positive & No Significant
DSK » KNK	0,514	0,514	0,077	6,700	<0,001	Positive & Significant

Source: SmartPLS 3.0 Output (2025)

Description: KMP = Competency
KNK =Work Performance

Vol.6 No. 3 https://www.ijosmas.org e-ISSN: 2775-0809

RMN = Remuneration
DSK = Work Discipline

Discussion

This section provides an in-depth interpretation of the results based on the seven formulated research objectives. Each discussion is supported by numerical evidence from the hypothesis testing conducted through the SmartPLS 3.0 application.

The Influence of Competency on Work Discipline of Healthcare Workers

The research results show that competency influences the discipline of healthcare workers at Rumah Sakit Pusat Pertamina (RSPP). The higher the competency of healthcare workers, the higher their work discipline. This finding is supported by research conducted by Pertiwi & Savitri (2021), which demonstrated that competency influences work discipline and employee performance. When healthcare workers are able to improve their competencies through professional training and continuing their education to a higher level, it will increase their knowledge and understanding of the professional field, thereby creating awareness of the importance of adherence to standard operational procedures, professional ethics, compliance in using attributes as personal protective equipment, and accuracy in recording and reporting tasks, as well as increasing their ability to communicate effectively in order to provide complete patient care.

The Influence of Competency on the Performance of Healthcare Workers

The higher competency of healthcare workers will be drive the higher their performance. Healthcare workers who are able and have the opportunity to improve their competency through training and professional education will have the ability and responsibility to systematically complete primary and secondary tasks to achieve performance targets. They will also be able to provide guidance to colleagues and take initiative in making appropriate decisions. This is supported by research conducted by Surtini et al. (2022), which shows that employees who possess competency in a job tend to stick with that job and perform well. However, different results were obtained from research conducted by Oppong & Zhau (2020), which showed that competency did not affect healthcare performance. This means that increasing competency does not necessarily lead to improved healthcare worker performance.

The Influence of Remuneration on Work Discipline of Healthcare Workers

Increasing remuneration has not improved the discipline of healthcare workers at Rumah Sakit Pusat Pertamina (RSPP). The remuneration received by healthcare workers does not impact their work discipline. Indicators of undisciplined behavior are still found, demonstrated by inaccurate medical resumes, patient complaints about delays in medical test results, and patient waiting times for medication exceeding established standards. This may be due to the suboptimal implementation of sanctions and rewards for workers who violate or comply with company regulations. The company's annual bonuses and incentives for workers also do not incorporate elements of work discipline, such as accurate reporting and recording in medical records, accurate reporting of medical test results, and the lack of complaints regarding patient care provided by healthcare workers. The results of this study different from those of Sardjana, Sudarmo, & Suharto (2018), which demonstrated that remuneration influences work discipline. The better the remuneration system, based on the principles of individual, internal, and external justice, and appropriateness, the better discipline.

The Influence of Remuneration on the Performance of Healthcare Workers

Increasing remuneration has not been able to improve the performance of healthcare workers at Rumah Sakit Pusat Pertamina (RSPP). This is supported by research conducted by Ritonga et al. (2024) which found that remuneration is not an internal factor influencing healthcare worker performance. This may be due to the Group Service Incentive benchmark received by workers based on the remuneration system (the Performance-Based Remuneration/REINATA application) only covering daily work activities for one month of work. Therefore, it cannot differentiate between high-performing, average, and low-performing workers. This leads to workers feeling that high performance is not accompanied by increased incentives. In this system, the only factor that reduces incentives is absenteeism. Furthermore, the Collective Labor Agreement (PKB) stipulates that permanent workers (PWTT) and their families receive health insurance, while permanent workers (PWT) receive health insurance for themselves. All workers receive an annual bonus provided they do not receive a warning letter during the year. Company awards for achievements and length of service have not been provided appropriately and on schedule. These factors can discourage workers from improving their performance in order to increase their remuneration. In contrast to the research conducted by Karnadi, et al (2023), the results showed that remuneration had a positive effect on the performance of PDHI Yogyakarta Hospital employees.

The Influence of Work Discipline on the Performance of Healthcare Workers

Higher levels of work discipline will improve the performance of healthcare workers at Rumah Sakit Pusat Pertamina (RSPP). High levels of discipline can foster professional performance because healthcare workers are able to carefully consider all applicable professional rules and ethics and consistently implement them, thus ensuring their implementation in patient care.

High levels of healthcare worker performance cannot be achieved if they do not understand and comply with applicable regulations in carrying out their work. Work discipline in recording, reporting, and documenting patient medical records can create effectiveness and optimization in healthcare services, thereby improving healthcare worker performance. This is supported by research conducted by Febrianti & Andriani (2024), which found that high levels of work discipline in healthcare workers can improve their performance. This is demonstrated by healthcare workers who adhere to work discipline regulations and work standards, consistently taking responsibility for their work, paying attention to punctuality and neatness in their uniforms, speedy recording, reporting, and documentation of work.

The Influence of Competence on Healthcare Worker Performance through Work Discipline

The higher the competence of healthcare workers, the better their performance will be through work discipline at Rumah Sakit Pusat Pertamina (RSPP). Work discipline can influence the relationship between competence and healthcare worker performance. Improving healthcare worker competence, whether through a series of company-organized or independent training programs, and through professional education, can produce reliable healthcare workers who can effectively and optimally carry out all assigned tasks according to standard operating procedures. They are able to manage stress in emergencies and complete tasks on time, while upholding professional ethics and complying with applicable regulations, recognizing that all established regulations protect the profession in providing patient care. The results of this study are supported by research conducted by Subandi et al.

(2023), which shows that competence and work discipline jointly influence employee performance. This is due to a consistent attitude within employees to maintain discipline in their work, which then unlocks their potential as a manifestation of competence, enabling employees to become more optimal and able to achieve predetermined goals and targets.

The Influence of Remuneration on Healthcare Worker Performance through Work Discipline

Increasing remuneration has not been able to improve healthcare worker performance through work discipline at Rumah Sakit Pusat Pertamina (RSPP). Work discipline has not yet been able to influence the relationship between remuneration and healthcare worker performance. This may be because financial remuneration, such as group service incentives, periodic salary increases and annual bonuses, as well as non-financial remuneration, such as employee and family health insurance, additional annual leave, awards for length of service, and opportunities for training or educational advancement, do not yet require elements of employee discipline such as zero patient complaints, accurate medical therapy, appropriate medical resume preparation, accurate reporting of results and medical support measures, and timely waiting times for patients with medication. The results of this study differ from those conducted by Paulus (2023), which showed that high remuneration and work discipline can improve employee performance. This is evidenced by the fact that a good remuneration system can influence employee performance by reducing absenteeism and lateness.

CONCLUSION

This study aimed to examine analyze the influence of competency and remuneration on the performance of healthcare workers, with work discipline as an intervening variable Based on the results of data analysis using Structural Equation Modeling - Partial Least Squares (SEM-PLS), it was concluded that the variables of competence and work discipline have a direct effect on the performance of healthcare workers. Meanwhile, the variable of remuneration of healthcare workers has no effect either directly or after being modernized by the variable of work discipline on the performance of healthcare workers.

Competency through training, development and suistainability education were proven to significantly effect both work discipline and employee performance. This supports the Human Capital Theory, which posits that investment in employee competencies enhances performance outcomes. Work discipline itself significantly mediates the relationship between competency and performance, as well as between training and development, demonstrating its essential role as a psychological mechanism that bridges individual input and organizational results.

This study develops a holistic model linking competency and remuneration to healthcare workers' performance, while also exploring the simultaneous role of work discipline as an intervening variable It is recommended the hospitals optimize the productivity of healthcare workers by improving a transparent and fair remuneration system, enhancing training and educational opportunities, providing recognition and feedback on employee performance, and reinforcing adherence to work discipline.

Future research may extend this model across investigate other variables that may influence the performance of healthcare workers such as motivation, transformational leadership, and organizational commitment behaviour.

REFERENCES

Amiani, K., & Purba, C. B. (2020). The Effect of Work Discipline, Remuneration and

Leadership Style on Employee Performance in PT. Dwi Karya Prima (PT DKP). *International Journal of Innovative Science and Research Technology*, *5*(8), 973–978. https://doi.org/10.38124/ijisrt20aug575

Andres Rodriguez-Clare, & Jonathan Dingel. (2021). The Effect of Compensation, Leadership Style and Work Discipline on The Performance of Hospital Employee in United States. *MEDALION JOURNAL: Medical Research, Nursing, Health and Midwife Participation*, *2*(1), 33–47. https://doi.org/10.59733/medalion.v2i1.23

Arnaud Costinot, & Mohsen Bahmani Oskooee. (2023). The Influence of Work Discipline and Work Spirit on Medical Employee Performance in the Women's Empowerment Office of Population Control and Family Planning in the City of Texas. *MEDALION JOURNAL: Medical Research, Nursing, Health and Midwife Participation*, *4*(2), 41–48. https://doi.org/10.59733/medalion.v4i2.71

Atnah, S., Girsang, E., & Nasution, A. N. (2023). Analysis of The Influence of Work Motivation on the Performance of Nurses in the Inpatient of General Hospital in Rantauprapat Regional Labuhanbatu District. *International Journal of Social Science Research and Review*, *6*(7), 112–118. https://doi.org/10.47814/ijssrr.v6i7.1258

Busro. (2018). Teori-teori Manajemen Sumber Daya Manusia. Prenada Media Group. Jakarta.

Calundu, R. (2018). Manajemen Kesehatan. edisi 1. CV Sah Media. Makasar

Carter, L., Murray, P., & Gray, D. (2011.). The Relationship between Interpersonal Relational Competence and Employee Performance: A Developmental Model. Common Ground Publishing LLC. Illionis.USA

Febrianti, I. T. D., & Andriani, H. (2024). The Effect of Compensation Policy and Work Discipline on Nurse Productivity at dr. H. Marzoeki Mahdi Mental Hospital Bogor in 2023. *Journal of Indonesian Health Policy and Administration*, *9*(1), 1. https://doi.org/10.7454/ihpa.v9i1.7344

Ganyang. (2018). Manajemen Sumber Daya Manusia Konsep dan Realita. In Media. Bogor

Hair, et al. (2022). *A Primer on Partial Least Squares Structural Equation Modeling SEM-PLS Third Edition*. SAGE.California

Handayani, S., Fannya, P., & Nazofah, P. (2018). Faktor yang Berhubungan dengan Kinerja Tenaga Kesehatan di Rawat INAP RSUD Batusangkar. *Jurnal Endurance*, *3*(3), 440. https://doi.org/10.22216/jen.v3i3.3005

Hasibuan. (2017.). Manajemen Sumber Daya Manusia. Bumi Aksara. Jakarta

John Zysman, & Alexander. (2020). The Effect of Work Discipline on Employee Performance with Incentives as Intervening Variables (Case Study of Medical Doctor and Nurses in California District). *MEDALION JOURNAL: Medical Research, Nursing, Health and Midwife Participation*, *1*(4), 147–155. https://doi.org/10.59733/medalion.v1i4.60

Kadarisman. (2014.). Manajemen Kompensasi. Raja Grafindo Persada. Jakarta

Kamirullah, et al. (2024). Factors Associated with Work Motivation for Hospital Nurses: A Scoping Review. *Asia Pacific Journal of Health Management*. https://doi.org/10.24083/apjhm.v19i1.3257

Karnadi, Choliq Hidayat, A., & Asakdiyah, S. (2023). The Influence of Leadership, Remuneration, and Work Motivation on the Performance of Employees of Yogyakarta Islamic Hospital PDHI. Jurnal Penelitian Ilmu Manajemen (JPIM), *8*(3), 437–454. https://jurnalekonomi.unisla.ac.id/index.php/jpim

Kartina, A., Mutiara, R., & Wekadigunawan, C. S. P. (2022). Compensation and Work Environment on the Performance of Non-Medical Employees with Work Discipline as Intervening Variables in Hospital X Bandung City. *Indonesian Journal of Multidisciplinary Science*, *1*(10), 1259–1271. https://doi.org/10.55324/ijoms.v1i10.199

Kitsios, F., & Kamariotou, M. (2021). Job Satisfaction behind Motivation: An Empirical Study in Public Health Workers. *Heliyon*, *7*(4), e06857. https://doi.org/10.1016/j.heliyon.2021.e06857

Kusumaningrum, R., Nur Jannah Nasution, Putu Agus Eka Rismawan, Merissa Fermica Iskandar, & Muhammad Fatkhurohman Albashori. (2023). The Relationship of Work Motivation, Work Discipline and Personal Characteristics of Nurses in Regional General Hospitals. JEMSI (Jurnal Ekonomi, Manajemen, dan Akuntansi), *9*(5), 2101–2106. https://doi.org/10.35870/jemsi.v9i5.1543

Lekartiwa, H., Rintari, N., & Moguche, A. (2020). Effects of Remuneration on Employee Turnover in Private Hospitals Samburu County. *Human Resource and Leadership Journal*, *5*(1), 15–28. https://doi.org/10.47941/hrlj.423

Ma'ruf Abdullah. (2014). Manajemen dan Evaluasi Kinerja Karyawan. Aswaja Pressindo. Yogyakarta.

Mohtar. (2019). Hubungan Antara Motivasi Kerja dan Pengalaman Kerja dengan Kinerja Guru Madrasah. Uwais Inspirasi Indonesia. Sidoarjo

Mutiarani & Siswantoro. (2020). *The impact of local government characteristics on the accomplishment of Sustainable Development Goals (SDGs) The impact of local government characteristics on the accomplishment of Sustainable Development Goals (SDGs)*. https://doi.org/10.1080/23311975.2020.1847751

Pertiwi, W., & Savitri, C. (2021). Pengaruh Kompetensi, Disiplin Kerja, Dan Motivasi Kerja Terhadap Kinerja Pegawai. Jurnal Manajemen & Bisnis Kreatif, 63–77.

Putri, E. M. I. (2020). Sistem Penilaian Kinerja Perawat Pelaksana Berbasis Caring. https://doi.org/10.31237/osf.io/f68ac

Rahmati, Saadah, A. (2020). Faktor Kompensasi, Motivasi, dan Disiplin Kerja. LPPM. Jombang

Rahmawati, L., & Nadjib, M. (2023). The Role of Remuneration In Improving Hospital Performance. *Journal Research of Social Science, Economics, and Management*, *2*(9). https://doi.org/10.59141/jrssem.v2i09.418

Reza Putra, M., & Gupron, G. (2020). Employee Performance Models: Competence, Compensation and Motivation (Human Resources Literature Review Study). *Dinasti International Journal of Education Management And Social Science*, *2*(1), 185–198. https://doi.org/10.31933/dijemss.v2i1.629

Richard Frimpong Oppong, & Weihuan Zhau. (2020). The Influence of Competence on Performance with Motivation as an Intervening Variable on Medical Employees in America Public Service Department. *MEDALION JOURNAL: Medical Research,*

Nursing, Health and Midwife Participation, *1*(2), 63–70. https://doi.org/10.59733/medalion.v1i2.44

Ritonga, E. F., Mellita, D., & Gunarto, M. (2024). Pengaruh Remunerasi dan Kompetensi terhadap Kinerja yang Dimediasi oleh Kepuasan Kerja Pegawai Bagian Administrasi RSMH Palembang. Forum Bisnis Dan Kewirausahaan, *14*(1), 157–171.

Rivai. (2015). Manajemen Kinerja untuk Perusahaan dan Organisasi. BPFE. Yogyakarta

Rivai. (2018). Manajemen Sumber Daya Manusia untuk Perusahaan dari Teori ke Praktik. Raja Grafindo Persada. Jakarta

Rivai. (2021). Manajemen Kompensasi Islami. Indomedia Pustaka. Sidoarjo

Robbins, & J. (2015). *Organizational Behavior*. Pearson. Australia

Rosmawaty, E., & Pertiwi, W. (2021). *The Effect of Compensation and Competence on Employee Performance at Bank BJB Branch*. *1*(2), 53–61.

Sarah, H., Sjahri, E., & Patisina. (2023). The Influence of Work Culture and Work Discipline on Employee Performance at Advent Hospital Medan. *International Journal of Science, Technology & Management*, *4*(5), 1340–1350. https://doi.org/10.46729/ijstm.v4i5.926

Sari, D. P., Moolmirat, W., Fatimah, F. S., & Listyaningsih, S. (2022). Relationship between Discipline with Performance Hospital Administration Officer in the Era of the Covid-19 Pandemic. *Proceedings of the International Conference on Nursing and Health Sciences*, *3*(1), 143–146. https://doi.org/10.37287/picnhs.v3i1.1140

Sitorus. (2020). Pengaruh Komunikasi antar Pribadi Pimpinan terhadap Motivasi Kerja. Scopindo Media Pustaka. Surabaya

Stephen Martin, & Bob Feinberg. (2023). The Effect of Work Discipline on Medical Medical Employee Performance with Work Communication as an Intervening Variable (Case Study of Serdang Bedagai Hospital Centre Sultan Sulaiman Hospital). *MEDALION JOURNAL: Medical Research, Nursing, Health and Midwife Participation*, *4*(1), 22–30. https://doi.org/10.59733/medalion.v4i1.69

Subandi, et al. (2023). The Influence of Work Discipline, Competence, Rewards, and Remuneration on Employee Performance. *Journal.Unrika*, *12*, 325–336.

Sugiyono. (2022). Metode Penelitian Kuantitatif Kualitatif dan R & D. Alfabeta. Bandung.

Suhadi, Nani Yuniar, Adrian Tawai, & Amirullah. (2022). The Influence of Discipline on Nurse Performance at Bahteramas General Hospital, Southeast Sulawesi Province, Indonesia. *World Journal of Advanced Research and Reviews*, *16*(3), 853–859. https://doi.org/10.30574/wjarr.2022.16.3.1447

Surtiani, A., Kurniasih, I., Mulyati, Y., & Sandjaya, T. (2023). Pengaruh Kompetensi Terhadap Kinerja Pegawai Negeri Sipil Di Sespim Lemdiklat Kepolisian Republik Indonesia. *Responsive*, *5*(4), 221. https://doi.org/10.24198/responsive.v5i4.44642

Sutrisno, E. (2020). Manajemen Sumber Daya Manusia. Kencana Prenada Media. Jakarta.

Syafrizal, R. (2020). The Influence of The Work Environment and Discipline on the Work Productivity of Regional Hospital Employees. *Medical Research, Nursing, Health and Midwife* 168–177. https://doi.org/10.59733/medalion.v1i4.87

Wibowo. (2018). Manajemen Kinerja Edisi Kelima. Raja Grafindo Persada. Jakarta.

Yatimul Kais Diyanto, Yuly Peristiowati, & Koesnadi. (2022). Perception Analysis and Remuneration on Job Satisfaction of Health Officers at Nonggunong Pubklic Health Center, Sumenep Regency. *Journal for Quality in Public Health*, *5*(2), 417–424. https://doi.org/10.30994/jqph.v5i2.329

Zafar, S. (2022). Reward and Compensation Management on Performance of Health Care Workers in India. *Journal of Human Resource &Leadership*, *6*(4), 1–10. https://doi.org/10.53819/81018102t50108