

Factors Influencing The Performance Of Health Workers Implementing Basic Emergency Obstetric Neonatal Care (PONED) At The Gowa District Health Center

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Abstract: Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) are important indicators in assessing the health status of a country. Although the trend of decreasing MMR and IMR in Indonesia shows improvement, these figures have not yet reached the SDGs target. Health centers with PONED services are at the forefront in handling obstetric and neonatal emergencies, so the performance of PONED implementers is very crucial. This study aims to analyze the influence of motivation, competence, organizational factors, work stress, work environment, and compensation on the performance of health workers implementing PONED in Gowa Regency. This study uses a quantitative approach with a cross-sectional design. The population in this study were all health workers at the PONED Health Center in Gowa Regency, with sampling using the proportionate stratified random sampling technique. Data were collected through questionnaires that had been tested for validity and reliability. Statistical tests used included the chi square test and logistic regression. The results of the analysis showed that all independent variables had a significant effect on the performance of PONED implementers ($p < 0.05$). The Nagelkerke R Square value of 0.421 indicates that the independent variable has an influence of 42.1% on performance. The competency variable is the most dominant factor with a significance value of 0.014 and an Exp B value of 5.587. In conclusion, increasing motivation, competence, organizational management, work stress management, work environment conditions, and providing adequate compensation have an effect on improving the performance of PONED implementers. Competence is the main factor that needs to be strengthened to support the success of PONED services and reduce maternal and neonatal mortality rates.

Keywords: Health Worker Performance, PONED, Maternal Mortality Rate (MMR), Competence, Logistic Regression

1. INTRODUCTION

Health development is an inseparable main component of national development. The goal is to increase the awareness, willingness, and ability of each individual to live a healthy life, so that the level of public health can be achieved optimally. Success in health development has a crucial role in improving the quality and competitiveness of Indonesian human resources. To realize the goals of national health development, various efforts are made comprehensively, gradually, and integrated (Sumiyati & Mariyati, 2023).

The direction of health development in Indonesia is focused on improving the level of health and quality of human resources. This is reflected in various efforts such as extending life expectancy, reducing infant, child, and maternal mortality rates during childbirth, increasing workforce productivity, and encouraging public awareness of the importance of clean and healthy living behaviors (Muldaniyah et al., 2022)

One of the health issues that is still a major concern is health services. The still high maternal mortality rate (MMR) and infant mortality rate (IMR) indicate the need for serious attention, especially to the various risks faced by mothers and newborns, such as disease, malnutrition, and the 4T factor (namely pregnancy or childbirth at too young or too old an age, too close a pregnancy spacing, and too frequent pregnancies). This situation worsens if there is a delay in emergency treatment due to complications, known as the 3T factor (late) in making a decision to refer, late in reaching the appropriate (health facility), and late in receiving services from competent medical personnel (Zulkarnain & Mutiara, 2021). One of the main causes of the high maternal mortality rate is the lack of proper delivery facilities and the limited number of health workers directly involved in the delivery process (Metti & Rosmadewi, 2019). To overcome this, efforts in maternity health services are made by encouraging every delivery process to be handled by trained medical personnel, such as obstetricians and gynecologists (SpOG), general practitioners, and midwives, and are attempted to take place in health care facilities (Muldaniyah et al.,

2022).

Throughout 2020, almost 800 women died every day due to preventable causes related to pregnancy and childbirth. Based on data from the 2020 Population Census, the maternal mortality rate in Indonesia was recorded at 189 per 100,000 live births. This figure places Indonesia as the country with the second highest maternal mortality rate in the ASEAN region, far surpassing countries such as Malaysia, Brunei, Thailand, and Vietnam, which have recorded figures below 100 per 100,000 live births.

According to data from the Maternal Perinatal Death Notification (MPDN), a maternal death reporting system managed by the Ministry of Health, the number of maternal deaths in 2022 was recorded at 4,005 cases and increased to 4,129 cases in 2023. Meanwhile, the number of infant deaths also increased, from 20,882 cases in 2022 to 29,945 in 2023. Based on data from UNICEF, premature birth is the leading cause of death in children under the age of five, with an estimated 15 million babies born prematurely each year worldwide. To reduce this risk, UNICEF encourages early detection during pregnancy as a preventive measure. The main causes of maternal death are generally bleeding and eclampsia (Ministry of Health, 2023). Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) are important indicators in assessing the health level of a country. According to WHO, infant mortality is defined as the number of babies who die before the age of one year per 1,000 live births in one year. This indicator is often used as a benchmark to describe social, economic, and environmental conditions in a region. Operationally, IMR is calculated based on the number of deaths of infants under one year of age per 1,000 live births in a certain time period. Based on data from the Ministry of Health, the maternal mortality rate in Indonesia reached 189 per 100,000 live births (Ministry of Health, 2023).

Over the past four years, the trend of Maternal Mortality Rate (MMR) has shown a decline, but the figure is still among the highest among ASEAN countries. In the RPJMN, the MMR target in 2023 is set at 194 per 100,000 live births (KH) and in 2024 it is 183 per 100,000 KH. However, this achievement is still far from the target of the Sustainable Development Goals (SDGs) which sets the MMR limit at less than 70 per 100,000 KH in 2030. Therefore, breakthroughs and acceleration strategies are needed to significantly reduce maternal mortality (Ministry of Health, 2024). Meanwhile, in the Ministry of Health's Strategic Plan (Renstra), the target for reducing the Infant Mortality Rate (IMR) is from 18.6 per 1,000 live births in 2022 to 17.6 in 2023 and down again to 16 in 2024. The trend of decreasing IMR itself is quite significant, from 68 in 1991 to 34 in 2003, and reaching 20.6 per 1,000 live births in 2020. However, this figure still does not meet the target set in the SDGs (Ministry of Health, 2023). PONEK services are health services provided by inpatient health centers in connection with basic obstetric and neonatal emergencies 24 hours a day, 7 days a week. Not only PONEK can receive referrals related to obstetric and neonatal emergencies, it turns out that PONEK can also be used as a referral for referral cases from the community, individual first-level services, and referrals from the nearest health center. Cases at the PONEK Health Center that need to be referred to the PONEK Hospital and non-PONEK Hospital include cases of pregnant women who require immediate referral to the hospital, such as pregnant women with narrow pelvis, pregnant women with a history of Caesarean section and pregnant women with antepartum bleeding. If hypertension is diagnosed during pregnancy (pre-eclampsia/eclampsia), there is rupture of membranes with the release of thick meconium, pregnant women with severe anemia and pregnant women with life-threatening comorbidities such as heart disease, then referral to the hospital is needed. The quality of PONEK services is one of the factors that can support and determine the achievement of public health. The success of a service is determined by the consistency of the quality of service provided and implemented by competent health workers. Handling complications and emergencies that can be handled at the PONEK Health Center is one of the goals of implementing PONEK services which is determined by input where the service system runs well if supported by adequate input (Rahmawati et al., 2020).

PONEK Health Center is a program that accelerates the reduction of Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR). PONEK Health Center is an inpatient health center that has the ability and PONEK facilities ready 24 hours to provide services to pregnant women, mothers in labor, postpartum mothers and newborns with complications (Purwati R., 2021).

Several efforts have been made, namely PONEK capable health centers and these health centers have met the requirements for PONEK capable health centers with the number of health workers who meet and are available, as well as health facilities and facilities, and PONEK implementing personnel (doctors, midwives and nurses) have attended PONEK training. However, the handling of new complications is

only around 40-50% that can be handled. And with the very limited number of Poned health centers, it greatly affects the number of coverage of delivery services by strong and fast health workers. Handling maternal and infant health problems during labor, especially obstetric and neonatal emergencies, this certainly requires competence, the ability of implementing personnel to achieve optimal performance in providing services to patients. The scope of complications that have not been able to be handled which should be handled by Poned implementing personnel at Poned Health Centers, the performance of Health Human Resources is due to the low capacity/ability of health workers, lack of training, lack of supporting equipment, salaries that are often given late, and inadequate incentives.

Based on this, the poor performance of Poned implementers at the Gowa Regency Health Center is possibly due to a lack of work motivation that arises from within the health workers. Based on previous research by Hapijah (2023) on the influence of work motivation, increasing employee motivation can be done by appreciating employees who show superior performance. This study shows that work motivation has a significant influence on employee performance at the Alabio Inpatient Health Center UPT. This means that if there is an increase in motivation of 1%, it can increase employee performance by 1.454%. In addition, the competency factor where poor work is possible is caused by the ability of health workers who are still lacking in providing services, especially for handling complications, competence (knowledge and skills) is required. Research by Fatimah and Linidah (2020) stated that there is a direct influence and magnitude between competence and midwife compliance in implementing the SOP for early handling of severe preclamaion is -7.50%. Based on this, the poor performance of Poned implementers at the Gowa Regency Health Center is possibly due to a lack of work motivation that arises from within the health workers. Based on previous research by Hapijah (2023) on the influence of work motivation, in increasing employee motivation can be done by appreciating employees who show superior performance. This study shows that work motivation has a significant influence on employee performance at the Alabio Inpatient Health Center UPT. This means that if there is an increase in motivation of 1%, it can encourage an increase in employee performance of 1.454%. In addition, the competence factor where the work is less possible is caused by the ability of health workers who are still lacking in providing services, especially for handling complications, competence (knowledge and skills) is required. Research by Fatimah and Linidah (2020) stated that there is a direct influence and magnitude between competence and midwife compliance in implementing SOP for early handling of severe preclamaion of -7.50%.

Based on several problems from the background that have been stated above, where motivation, competence, organizational support, work stress, work environment and the influence of compensation are still lacking from the performance of Poned implementers and several previous studies, so researchers are interested in studying and researching "the influence of motivation, competence, organizational factors, work stress, work environment, and compensation on the performance of health workers implementing Basic Emergency Obstetric Neonatal Handling at the Gowa Regency Health Center". Thus, this study can provide input in formulating policies to improve the performance of health workers, especially in Poned Services.

2. METHOD

This type of research is quantitative research with an analytical survey approach, with a cross-sectional approach design, namely a study that aims to see a relationship/influence between independent variables on dependent variables at the same time, by measuring the influence of motivation variables, competence, organizational factors, work stress, work environment, and compensation on the performance of implementing personnel at the Poned Health Center, Gowa Regency. This research was conducted in September 2024 to January 2025 at the Health Center in Gowa Regency that was able to carry out Poned. Population is a collection of objects studied. The population in this study were all health workers from health centers implementing Poned in Gowa Regency. The sample is part of the population used as a data source. To determine the type of sample in this study, namely by Purposive Sampling, which includes all health workers at the Poned Health Center, Gowa Regency. The sampling technique (the sampling used in this study is probability sampling of the proportionate stratified random sampling type, namely a sampling technique for population members that is carried out by considering the strata in the population. This study uses independent variables (free) consisting of motivation, competence, organizational factors, work stress, work environment, and compensation, which act as factors that influence the dependent variable (bound), namely the performance of health workers

implementing Poned. The independent variable is a factor that causes change, while the dependent variable is the result or effect of this influence. To measure these two types of variables, the instrument used is a questionnaire, which is filled out by respondents through interviews guided by the researcher. This questionnaire is a modified result of previous research and has met the requirements for validity and reliability tests. The validity test in this study was carried out using the Product Moment Correlation Test with 30 respondents, and an r table value of 0.361 at a significance level of 5%, to ensure that the measuring instrument actually measures the variables in question in accordance with the standards set (Notoatmodjo, 2012).

3. FINDINGS AND DISCUSSIONS

Relationship between Motivation and Performance of Poned Implementing Staff

Table 1. Distribution of Respondents Based on the Relationship between Motivation and the Performance of Poned Implementing Staff at the Gowa District Health Center

Motivation	Performance of the Implementing Staff Poned				n	p value
	Good		Not good			
	n	%	n	%		
Motivated	68	62.1	14	19.9	82	0.004
Lack of Motivation	13	18.9	12	6,1	25	
Total	81	81,0	26	26,0	107	

Sumber: Data Primer 2025

Table 1 shows that out of 107 respondents, respondents who stated that they were motivated by good performance were 68 people (62.1%), respondents who stated that they were motivated by poor performance were 14 people (19.9%). Meanwhile, respondents who stated that they were less motivated by good performance were 13 people (18.9%) and respondents who stated that they were less motivated by poor performance were 12 people (6.1%). The results of the chi square test obtained a value (p value $0.004 < 0.05$), meaning that statistically there is a relationship between motivation and the performance of Poned implementing personnel at the Gowa Regency Health Center .

Relationship between Competence and Performance of Poned Implementing Staff

Table 2. Distribution of Respondents Based on the Relationship between Competence and Performance of Poned Implementing Personnel at the Gowa District Health Center

Competence	Performance of the Implementing Staff Poned				n	p value
	Good		Not good			
	n	%	n	%		
Competent	71	65.9	16	21.1	87	0.007
Less Competent	10	15.1	10	4.9	20	
Total	81	81.0	26	26.0	107	

Source: Primary Data 2025

Table 2 shows that out of 107 respondents, 71 respondents (65.9%) stated that they were competent and had good performance, 16 respondents (21.1%) stated that they were competent and had poor performance. Meanwhile, 10 respondents (15.1%) stated that they were less competent and had good performance, and 10 respondents (4.9%) stated that they were less competent and had poor performance. The results of the chi square test obtained a value (p value $0.007 < 0.05$), meaning that statistically there is a relationship between competence and the performance of Poned implementing personnel at the Gowa Regency Health Center.

Relationship between Organizational Factors and the Performance of Poned Implementing Staff

Table 3. Distribution of Respondents Based on the Relationship between Organizational Factors and the Performance of Poned Implementing Personnel at Health Centers Gowa Regency

Organizational Factors	Performance of Poned Implementing Staff		n	p value
	Good	Not good		

	n	%	n	%		
Good	67	62.1	15	19.9	82	0.018
Not good	14	18.9	11	6.1	25	
Total	81	81.0	26	6.0	107	

Source: Primary Data 2025

Table 3 shows that out of 107 respondents, respondents who stated that the organizational factors were good and the performance was good were 67 people (62.1%), respondents who stated that the organizational factors were good and the performance was not good were 15 people (19.9%). Meanwhile, respondents who stated that the organizational factors were not good and the performance was good were 14 people (18.9%), and respondents who stated that the organizational factors were not good and the performance was not good were 11 people (6.1%). The results of the chi square test obtained a value (p value $0.018 < 0.05$), meaning that statistically there is a relationship between organizational factors and the performance of Poned implementing personnel at the Gowa Regency Health Center.

Relationship between Work Stress and the Performance of Poned Implementing Staff

Table 4. Distribution of Respondents Based on the Relationship between Work Stress and the Performance of Poned Implementing Personnel at the Gowa District Health Center

Job Stress	Performance of the Implementing Staff Poned				n	p value
	Good		Not good			
	n	%	n	%		
Good	74	69.5	18	22.4	92	0.009
Not good	7	11.4	8	3.6	15	
Total	81	81.0	26	26.0	107	

Source: Primary Data 2025

Table 4 shows that out of 107 respondents, respondents who stated good work stress and good performance were 74 people (69.5%), respondents who stated good work stress and poor performance were 18 people (22.4%). Meanwhile, respondents who stated poor stress and good performance were 7 people (11.4%), and respondents who stated poor work stress and poor performance were 8 people (3.6%). The results of the chi square test obtained a value (p value $0.009 < 0.05$), meaning that statistically there is a relationship between work stress and the performance of Poned implementing personnel at the Gowa Regency Health Center .

Relationship between Work Environment and Performance of Poned Implementing Staff

Table 5. Distribution of Respondents Based on the Relationship between the Work Environment and the Performance of Poned Implementing Personnel at the Gowa District Health Center

Performance of the Implementing Staff Poned						
Work environment	Good		Not good		n	p value
	n	%	n	%		
Conducive	69	63.6	15	20.4	84	0.007
Less Conducive	12	17.4	11	5,6	23	
Total	81	81,0	26	26.0	107	

Sumber: Data Primer 2025

Table 5 shows that out of 107 respondents, 69 respondents (63.6%) stated that the work environment was conducive and performance was good, 15 respondents (20.4%) stated that the work environment was conducive and performance was poor. Meanwhile, 12 respondents (17.4%) stated that the work environment was less conducive and performance was good, and 11 respondents (5.6%) stated that the work environment was less conducive and performance was poor. The results of the chi square test obtained a value (p value $0.007 < 0.05$), meaning that statistically there is a relationship between the work environment and the performance of Poned implementing personnel at the Gowa Regency Health Center.

Relationship between Compensation and Performance of Poned Implementing Staff

Table 6. Distribution of Respondents Based on the Relationship between Compensation and the Performance of Poned Implementing Personnel at the Gowa District Health Center

Compensation	Performance of the Implementing Staff Poned				n	p value
	Good		Not good			
	n	%	n	%		
Enough	69	64.3	16	20.7	85	0.021
Not enough	12	16.7	10	5.3	22	
Total	81	81.0	26.0	26.0	107	

Source: Primary Data 2025

Table 6 shows that out of 107 respondents, respondents who stated that compensation was sufficient and performance was good were 69 people (64.3%), respondents who stated that compensation was sufficient and performance was not good were 16 people (20.7%). Meanwhile, respondents who stated that compensation was lacking and performance was good were 12 people (16.7%), and respondents who stated that compensation was lacking and performance was not good were 10 people (5.3%). The results of the chi square test obtained a value (p value $0.021 < 0.05$), meaning that statistically there is a relationship between compensation and the performance of Poned implementing personnel at the Gowa Regency Health Center.

Multivariate Analysis

Multivariate analysis was conducted to see the influence between more than one independent variable with one dependent variable. The analysis was conducted using multiple logistic regression test. With multiple logistic regression test, it is expected to obtain a good regression model, which is able to explain the influence of independent variables (motivation, competence, and organizational factors) on the dependent variable, namely the performance of Poned implementing personnel.

Table 7. Results of Multivariate Test Analysis

Independent Variable	Sig (Hosmer and Lemeshow Test)	Sig.	Exp (B)	Negelker e R Square	Overall Percentage (%)
Motivation	0.187	0.013	4,953	0.421	80.4
Competence		0.014	5,587		
Factor Organization		0.315	1,904		
Stress Beggar		0.175	2,852		
Work Environment		0.020	4,176		
Compensation		0.033	3,794		

Source: Data Primer 2024

Based on table 7, it shows that in terms of the suitability of the analysis model with the observation data, the sig value (Hosmer and Lemeshow Test) = 0.187 ($\text{sig} > 0.05$) which means that this logistic regression analysis model is suitable for use. Meanwhile, of the 6 variables tested for their influence on the performance of Poned implementers, there is one variable that has the most influence with a sig value of 0.014, namely the competency variable. The Negelkere R Square value shows the magnitude of the influence of all independent variables and dependent variables. The results of the analysis show a value of 0.421 (42.1%) which means that the independent variables in this study have an influence of 42.1% on the dependent variable. In addition, the Overall Percentage value in the results of this logistic regression test is 80.4% which means that the accuracy of the analysis model in this study is 80%.

DISCUSSION

Relationship between Motivation Variables and Poned Implementing Staff Performance

Poned services are services that play an important role in reducing maternal and infant mortality rates at the primary health facility level. The performance of health workers implementing Poned greatly determines the effectiveness of this service. One of the main factors that influences the performance of health workers is motivation. Work motivation can come from intrinsic factors (sense of responsibility, job satisfaction, curiosity, etc.) or extrinsic (salary, awards, job promotions, etc.) that influence the work spirit, productivity, and commitment of health workers in providing the best service. Motivation is an internal or external drive that drives someone to act to achieve a certain goal. Internal drive (intrinsic

motivation) is motivation that comes from within oneself without the need for external rewards, this drive arises because of interest, psychological needs, or personal values.

While external drive (extrinsic motivation) is motivation that comes from outside a person, usually in the form of rewards or threats. In the context of Poned health workers, motivation plays a very important role in ensuring that services run optimally even when faced with various challenges. Motivation as a driving force that creates a person's enthusiasm so that they are willing to cooperate, work effectively and integrate with all their efforts to achieve positive performance and satisfaction. So motivation questions how to direct the power and potential of subordinates to be willing to work together productively, successfully achieve and realize predetermined goals (Herlina et al., 2022). Based on the results of the univariate analysis in table 3.7, it shows that 107 respondents (100%) were mostly motivated, 82 people (76.6%), while 25 respondents (23.4%) were less motivated. Based on the results of the study, most respondents who had high motivation tended to show better performance compared to respondents who were less motivated.

This shows that driving factors, both from within and external support, have a stronger influence than the obstacles faced in carrying out their duties. Univariate analysis shows that although most respondents had high motivation, there were still respondents who were less motivated in carrying out their duties in providing services. Therefore, efforts to increase the motivation of Poned implementing personnel are very important to ensure optimal service quality. This is in line with research conducted by (Putri Octavianasari, 2017) which found a significant positive relationship between work motivation and performance. In the study, a correlation coefficient of 0.459 was obtained with a significance (p) = 0.000, indicating that the higher the work motivation, the higher the performance. Conversely, low work motivation can cause a decrease in performance.

The results of the bivariate study in table 3.8 show that 107 respondents who are motivated and have good performance are 68 people (62.1%). Meanwhile, respondents who are not motivated and have poor performance are 12 people (6.1%). The results of the chi-square test obtained a p value = 0.004 (p value < 0.05), meaning that statistically there is a significant relationship between motivation and the performance of Poned implementers. The researcher assumes that these results indicate that high motivation contributes positively to the performance of Poned implementers. High motivation can increase the commitment of Poned implementers in providing fast, accurate, and quality services to pregnant women and newborns. They will be more alert in handling obstetric and neonatal emergencies, thereby reducing maternal and infant mortality rates. Motivated Poned implementers will work faster and more efficiently. They are more focused on handling patients and are able to manage time well, so that the number of patients treated can increase without sacrificing the quality of service.

Health workers who feel appreciated and have high motivation tend to be more loyal to their workplace. This ensures the continuity of Poned services in health facilities. Respondents' answers about motivation can vary depending on the factors that influence them. However, based on the results of the study, the answer that motivates them the most in working is recognition of effort. This recognition is not only in the form of formal awards, but can also come in various ways that show appreciation for their hard work and dedication. Recognition of the efforts of Poned implementers not only increases their motivation to work better, but also helps improve the quality of health services in the field of obstetrics and neonatal. This award is either in the form of financial incentives, career development, or emotional support that can strengthen their commitment to work and provide encouragement to continue to improve performance. Recognition of effort is a factor that is very motivating for Poned implementers because it can increase a sense of appreciation, commitment to work, team solidarity, and professional development. Therefore, it is important for the management of health centers or health facilities to create a fair and transparent reward system, so that health workers feel appreciated for their contributions to health services. The awards given can be in the form of verbal recognition, formal awards, or financial incentives.

Relationship between Competency Variables and the Performance of Poned Implementing Staff

Competence is a combination of knowledge, skills, and attitudes that a person needs to carry out their duties or work effectively. Competence reflects the extent to which a person is able to meet performance standards in a field. Competence is a key factor in determining an individual's success in work. By developing various aspects of competence, both technical and non-technical, a person can improve their performance optimally. The competency variable in the context of health workers, including Poned implementers, refers to the ability, knowledge, skills, and attitudes possessed by an individual to carry out

their duties and responsibilities well. Competence is very important to ensure that health workers can provide quality medical services, especially in emergency situations that require accuracy, speed, and expertise.

Based on the results of the univariate analysis in table 3.9, it shows that out of 107 respondents, 87 competent respondents (81.3%) were while 20 less competent respondents (18.7%). Based on the results of the study, most competent respondents had good performance. This reflects more respondents who understand their tasks better, have adequate skills, and are able to complete the work efficiently. Most respondents have an educational background that is in accordance with their tasks, so they are better prepared to carry out the work. Coupled with sufficient work experience, the longer someone works in a field, the higher their experience and expertise. Respondents who have worked for a long time are likely to be accustomed to various challenges, thus increasing their competence. The results of the bivariate study in table 3.10 show that out of 107 respondents who are competent with good performance, there are 71 people (65.9%).

Meanwhile, there are 10 respondents with poor performance (4.9%). The results of the chi-square test obtained a p value = 0.007 (p value <0.05), meaning that statistically there is a significant relationship between competence and the performance of Poned implementers. The researcher assumes that these results indicate that competence contributes positively to the performance of Poned implementers. Competent individuals understand their tasks better, have adequate skills, and are able to complete work efficiently. High competence allows respondents to work according to standard procedures, reduce errors, and increase productivity. Adequate education and training also determine the competence of health workers, most respondents may have an educational background that is in accordance with their duties, so they are better prepared to carry out their work.

Sufficient work experience also helps respondents become competent, the longer someone works in a field, the higher their experience and expertise. Respondents who have worked for a long time are likely to be accustomed to various challenges, thus increasing their competence. This study is in line with the study conducted by (Indah et al., 2024) entitled "The Relationship between Midwives' Attitudes, Competence, and Workload with Midwives' Compliance and Implementation of Poned Referral SOPs at Health Centers" with the results that there is a significant relationship between midwives' competence and compliance in implementing Poned referral SOPs (p value 0.001<0.05).

Relationship of Organizational Factor Variables to the Performance of Poned Implementing Staff

Organizational factors are elements within an organization that can influence the behavior, performance, and effectiveness of individuals or work groups. Organizational factor variables include structural aspects, leadership, culture, rewards, facilities, and policies that can influence employee motivation and performance. Organizations that manage these factors well can increase the effectiveness and productivity of the workforce. A study by the Indonesian Ministry of Health (2021) showed that the availability of medical equipment and human resources affects the success of handling emergency cases by 80%. Health centers with supportive leadership have Poned personnel with a job satisfaction level 75% higher than those with less support. Adequate incentives increase the motivation of health workers by 60%.

Based on the results of the univariate analysis in table 3.11, it shows that out of 107 respondents, respondents with good organizational factors were 82 people (76.6%), while respondents with poor organizational factors were 25 people (23.4%). Based on the results of the study, most respondents with good organizational factors and have good performance. Good organizational factors have a significant impact on good performance, because well-structured organizational elements can facilitate the implementing staff in carrying out their duties efficiently and effectively. With a clear structure, effective coordination, and adequate training, especially in Poned services at health centers can increase significantly. These factors create an environment that supports implementing staff to provide quality and efficient services.

The results of the bivariate study in table 3.12 show that out of 107 respondents, respondents with good organizational factors and good performance were 67 people (62.1%). While poor organizational factors with poor performance were 11 people (6.1%). The results of the chi-square test obtained a p value = 0.018 (p value <0.05), meaning that statistically there is a significant relationship between organizational factors and the performance of Poned implementing staff. The researcher assumes that organizational factors contribute positively to the performance of Poned implementing staff.

Organizational factors play an important role in determining the performance of health workers

implementing Poned in health centers. A clear structure and effective coordination enable the implementing staff to work more efficiently and organized, increasing responsiveness in emergency situations in emergency situations. Good leadership provides the direction and support needed to improve motivation and quality of service. A positive organizational culture creates a healthy work environment and supports effective teamwork. Organizations that have these factors in practice will improve the performance of Poned implementing staff which in turn contributes to improving the quality of maternal and infant health services at the health center.

Entitled analysis of the relationship between individual factors and organizational factors on the performance of health workers at the Dempo Health Center, Palembang City, where the results of the study stated that there was a significant relationship between leadership, rewards, and facilities with the performance of health workers. Facilities and infrastructure are the factors that have the most influence on the performance of health workers at the health center.

Relationship between Work Stress Variables and the Performance of Poned Implementing Staff

Job stress is a psychological condition that arises due to an imbalance between job demands and an individual's ability to cope with them. This stress has a negative impact on physical and mental health, as well as performance in the organization. Job stress is an unpleasant condition faced by health workers in carrying out tasks assigned by the leadership. So that this condition can hinder the process of carrying out tasks and if this condition is allowed to continue, it will result in poor performance of the employees themselves and the performance of the agency in general (Buulolo et al., 2021). Job stress as something that encompasses pressure, burden, conflict, fatigue, tension, panic, depression and loss of power.

According to Siagian (2014: 300), job stress is a condition of tension that affects a person's emotions, way of thinking and condition. Meanwhile, according to Handoko in Satoto and Ayungnityas (2016), job stress has a close relationship with a person's performance, if there is no stress, there are no work challenges and performance tends to be low. Furthermore, according to Robbins in Oemar (2017), work stress is a condition in which a person experiences tension due to conditions that affect him/her (Buulolo et al., 2021). Based on the results of the univariate analysis in table 3.13, it shows that out of 107 respondents, respondents with good work stress were 92 people (86.0%), while respondents with poor work stress were 15 people (14.0%). Based on the results of the study, most respondents had good work stress and had good performance. Good work stress has a significant impact on good performance, because stress is divided into two, namely stress that has a positive impact and stress that has a negative impact.

In a job, there are people who have high resilience to face stress because they are able to face the stress and not a few people whose ability to face stress is low, if this happens, the impact on the performance of the POned implementer will be negative, on the other hand, with work stress, the POned implementer feels the need to mobilize all his/her abilities to achieve high performance and thus can complete the task well. Because if that happens, stress changes its nature from a positive stimulus to a negative one. The results of this study indicate that the POned implementers are able to carry out their duties professionally, respond quickly in emergency situations, and demonstrate a cooperative attitude as a team. They appear accustomed to dealing with work pressure, such as handling patients with complications but are still able to maintain calm and accuracy of action. This reflects that, in certain contexts, health workers are able to deal with work stress positively, making it a challenge that drives performance, not a burden that hinders productivity.

The results of the bivariate study in table 3.14 show that out of 107 respondents, respondents with good work stress and good performance were 74 people (69.6%). While poor work stress with poor performance were 8 people (3.6%). The results of the chi square test obtained a p value = 0.009 (p value <0.05), meaning that statistically there is a significant relationship between work stress and the performance of the POned implementers. The researcher assumes that work stress contributes positively to the performance of the POned implementers. This is because if the stress experienced by someone exceeds the individual's capacity or in other words if the POned implementer experiences work stress, the productivity of the POned implementer's performance will decrease. The results of this study are in line with research conducted by Goni et al. (2019), based on the results of the test of the effect of work stress on the performance of health workers at the Mubune Health Center using a simple linear regression statistical test with a p value = 0.029 or (p <0.05).

So it can be concluded that there is an effect of work stress on the performance of health workers at the

Mubune Health Center. Research conducted at the Mubune Health Center shows that work stress has a negative effect on performance, which means that if employees experience work stress, the productivity of the employee's work performance will also decrease. The results of the analysis of the effect of work stress on the average PONED implementer who experience work stress because they have more than one responsibility so that when working it can cause small mistakes to occur, in general, the higher the level of work stress of the PONED implementer, the performance will also tend to decrease and vice versa. Health workers who experience work stress can also experience health problems and can cause their concentration levels to decrease so that the quality and quantity of performance will decrease, in addition, interpersonal relationships between employees will be bad and can cause their performance to be less than optimal.

Relationship of Work Environment Variables to the Performance of Poned Implementing Staff

One of the most important things for an agency is human resources. Work productivity is one of several parameters that can be used to assess the quality of existing human resources. One important factor that must be considered in efforts to increase productivity is the work environment. The work environment is all the tools and materials that are passed through in the work process, the surrounding conditions where human resources do their work, how they work, and the arrangement of their work individually or organizationally (Panjaitan, M., 2017). In addition to the environment where the organization is located and the people who are the center of it all, the work environment is one of the factors that influences performance and is a process where these environments interact with each other according to a certain pattern. Each has certain characteristics and/or values regarding the organization that cannot be separated from each other (Suprayitno Degdo, 2024).

The work environment is a place where employees or workers do their daily work (Yandi, 2022). The work environment is divided into two indicators, namely the physical work environment and the non-physical work environment. The physical work environment is all physical conditions that are around the workplace environment that can affect employees directly or indirectly. While the non-physical work environment is a state of the work environment such as a harmonious work atmosphere in which there is communication between subordinates and superiors. Paying attention to the condition of the work environment is the same as creating conditions, there are several factors that affect the work environment such as lighting, air circulation, noise, employee relations and work safety. A work environment in a place that meets the desires and needs of employees as workers. Therefore, agencies must guarantee their rights when doing work related to work environment facilities.

Based on the results of the univariate analysis in table 3.15, it shows that out of 107 respondents, respondents with a conducive work environment were 84 people (78.5%) while respondents with a less conducive work environment were 23 people (21.5%). Based on the results of the study, most respondents have a conducive work environment and have good performance. A conducive work environment has a significant impact on good performance, because a comfortable work environment, both physically and non-physically, increases the job satisfaction of the implementing personnel. Complete facilities and infrastructure and a clear work system help the PONED implementers work faster and more precisely. Good interpersonal relationships between health workers and support from superiors create harmonious cooperation. And a good work environment creates a culture of discipline and compliance with standard operating procedures (SOP). However, there are some respondents who feel that their work environment is conducive but their performance is not good as many as 15 people (20.4%).

This shows that although a conducive work environment can provide physical and psychological comfort, it does not necessarily encourage individuals to work more productively. In some cases, excessive comfort can actually reduce the sense of responsibility in completing tasks. Respondents may feel safe, but are not motivated to improve their performance. The results of the bivariate study in table 3.16 show that out of 107 respondents, 69 respondents (63.6%) had a conducive work environment and good performance. Meanwhile, 11 people (5.6%) had a poor work environment with poor performance. The results of the chi-square test obtained a p value = 0.007 (p value <0.05), meaning that statistically there is a significant relationship between the work environment and the performance of the PONED implementers. The researcher assumes that the work environment contributes positively to the performance of the PONED implementers.

The work environment has important advantages, playing an important role in supporting the productivity of the PONED implementers, because the work environment is directly related to employee

productivity. For productive results, a comfortable work environment can provide a sense of security and smoothness while working, so that the Poned implementers are more productive and enthusiastic about working. However, a less conducive work environment can certainly cause dissatisfaction and depression of the Poned implementers, thus disrupting productivity which causes decreased performance (Sihaloho & Siregar, 2019). This is in line with research conducted by (Tarigan et al., 2022), which states that there is a significant positive relationship between the physical and non-physical work environment partially and simultaneously on employee productivity at the Lunto Health Center. A health worker will feel at home in the workplace to carry out his activities and complete his tasks or responsibilities if he enjoys his work environment. Performance is significantly increased by the work environment.

Relationship of Compensation Variables to the Performance of Poned Implementers

Compensation is an important thing where companies need to provide adequate monetary and non-monetary rewards to their employees. In order for employees to give their best performance for the company, remuneration is needed such as bonuses and allowances, a comfortable work environment, and work that allows them to show their abilities. Internal compensation must be managed properly. Thus, it can be accepted by both parties with the hope of ensuring employee satisfaction, which ultimately leads the company to achieve the desired level of performance. Compensation can improve employee performance and motivation. Therefore, organizations or companies need to manage regulations regarding compensation regulations rationally and fairly. If employees view compensation as inadequate, their work performance, motivation, and job satisfaction tend to decline. Compensation variables are a form of financial reward given to employees based on performance achievements, work results, or certain contributions. Compensation variables refer to elements in the employee compensation package that can change based on performance, work results, or other factors.

Not only fixed compensation (basic salary), compensation variables are designed to provide incentives to employees to achieve certain targets. This compensation is intended as a reward, compensation is one of the important functions in human resource management (HRM). Because compensation is one of the most sensitive aspects in employment relationships. Based on the results of the univariate analysis in table 3.17, it shows that out of 107 respondents, respondents with sufficient compensation were 85 people (79.4%) while respondents with insufficient compensation were 22 people (20.6%). Based on the results of the study, most respondents who received sufficient compensation had good performance. Sufficient compensation has a significant impact on good performance, because compensation that is given fairly will make the Poned implementers more enthusiastic in carrying out their duties. Performance-based incentives can encourage them to provide more optimal services. With guaranteed welfare, health workers, especially Poned implementers, are more focused on the quality of service that can improve their performance.

As for the results of the bivariate study in table 3.18, it is known that out of 107 respondents, respondents with sufficient compensation and good performance were 69 people (64.3%). Meanwhile, there were 10 people (9.3%) who had poor compensation with poor performance. The chi square test results obtained a p value = 0.021 (p value < 0.05), meaning that statistically there is a significant relationship between compensation and the performance of Poned implementers. The researcher assumes that compensation contributes positively to the performance of Poned implementers. Because adequate compensation can increase the enthusiasm of implementers to work better in providing health services. Adequate incentives can increase job satisfaction, which in turn encourages implementers to be more committed. Appropriate salaries and incentives can reduce turnover rates and increase the loyalty of Poned implementers to their duties.

Adequate compensation helps implementers focus on their work without being burdened by financial problems. And with good compensation, implementers are more motivated to improve service quality, efficiency, and productivity. This study is in line with the research conducted by (Alfian & Randa, 2023), that between the compensation variable and employee performance there is a positive and significant influence at the Lubuk Tarok Sijunjung Health Center. Where if in providing more appropriate compensation and accepted by employees of the Lubuk Tarok Sijunjung Health Center and in accordance with the energy and abilities given and also appreciate their hard work. Then employees will be more professional by working hard and making various efforts to achieve better work results so that their performance can be further improved.

Variables Most Related to the Dependent Variable

Based on the results of the multivariate analysis of this study, it shows that of the six variables tested for their influence on the performance of the PONED implementing personnel, there is one variable that has the most influence with a sig. value of 0.014, namely the competency variable and the Exp (B) value of 5.587. Seeing this, the Exp (B) value indicates the strength of the relationship between the competency variable and the performance of the PONED implementing personnel. In practice, this shows that PONED implementing personnel need health workers with high competence in handling critical conditions. Competent PONED personnel will be better able to make a quick and accurate diagnosis on pregnant women or babies who experience complications, make clinical decisions in accordance with Standard Operating Procedures (SOP) and carry out medical actions with high precision and accuracy to prevent maternal and infant deaths.

Competence increases efficiency and speed in medical actions. In an emergency situation, every second counts. Competent PONED personnel can reduce response time in handling emergency cases, use medical equipment effectively and manage health resources efficiently. And prevent medical errors that can endanger patients. Competent PONED personnel also affect the level of patient trust and satisfaction. Patients and families will have more confidence in health workers who have good skills and knowledge. PONED often involves the use of complex medical equipment, such as heart rate monitors, delivery aids, and neonatal equipment. Without adequate competence, PONED personnel may not be able to use medical equipment properly, leading to failure in medical actions or delays in treatment.

Competence variables are more influential than other variables, because although other variables can improve the performance of PONED personnel, without adequate competence, PONED personnel still cannot provide optimal services because PONED involves handling obstetric and neonatal emergency cases that require technical skills and in-depth medical knowledge. High competence makes PONED personnel more confident and motivated to work well, even in challenging working conditions. Therefore, improving PONED performance is most effectively done through training and improving competence.

Without competence, other factors will not work. Although other factors such as motivation, organizational factors, work stress, environment and compensation are important, they will only be effective if supported by adequate competence. For example, good compensation will not make PONED personnel more efficient if they do not have the knowledge and skills needed to handle emergency situations. And motivation can decrease if personnel feel unprepared or unable to handle difficult cases. In conclusion, competence is the basic foundation that supports the success of all other aspects. Without adequate competency, PONED implementers will not be able to provide effective and safe medical care, even if other factors are supportive. Therefore, competency development should be a top priority in improving the performance of PONED implementers.

Research Limitations

The limitations in this study are the limitations of variables that are not covered where researchers only focus on a few variables and ignore other important variables that can affect the performance of implementers, such as psychosocial support, ongoing training or health infrastructure. In addition, this study is likely to experience bias in data collection, data obtained from interviews or questionnaires can be influenced by the personal perceptions of respondents so that they are not completely objective. For example, implementers may feel pressured to provide more positive answers regarding factors such as compensation or health center management. This study is also limited to the location of the study which was only conducted in one district which cannot represent conditions in other districts or regions with different levels of health services or health center characteristics.

4. CONCLUSION

There is an influence between motivation on the performance of health workers implementing Basic Emergency Obstetric Neonatal Care (PONED) at the Gowa District Health Center with a value of (p value = 0.004). There is an influence between competence on the performance of health workers implementing Basic Emergency Obstetric Neonatal Care (PONED) at the Gowa District Health Center with a value of (p value = 0.007). There is an influence between organizational factors on the performance of health workers implementing Basic Emergency Obstetric Neonatal Care (PONED) at the Gowa District Health Center with a value of (p value = 0.018). There is an influence between work stress on the

performance of health workers implementing Basic Emergency Obstetric Neonatal Care (PONED) at the Gowa District Health Center with a value of (p value = 0.009). There is an influence between the work environment on the performance of health workers implementing Basic Emergency Obstetric Neonatal Care (PONED) at the Gowa District Health Center with a value of (p value = 0.007). There is an influence between compensation on the performance of health workers implementing Basic Emergency Obstetric Neonatal Handling (PONED) at the Gowa Regency Health Center with a value (p value = 0.021). The variable that has the most influence on the dependent variable is the competency variable on the performance of PONED implementing personnel with a value (sig = 0.014 and Exp B = 5.587).

Suggestion

The health center needs to improve managerial support and resources, such as medical devices, medicines and essential equipment. The availability of adequate facilities supports implementing personnel to provide the best service. Periodic monitoring and evaluation of performance needs to be carried out to assess how implementing personnel handle cases, whether they are in accordance with Standard Operating Procedures (SOP), and identify areas that need to be improved. Increase public understanding of PONED. The public needs to be educated about the importance of timely health services, such as early registration at the health center during pregnancy, which can reduce the burden on implementing PONED personnel in handling serious cases. The health center needs to improve communication and coordination with referral hospitals to ensure a clear referral flow and proper and fast case handling.

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