Factors Related to the Retention of Contract Employee Health Workers at Ulunambo Public Health Centre, Morowali Regency

Muhammad Ryman Napirah1*, Nurdin Rahman2, Marsia Laida1, Miftahul Haerati Sulaiman1, Stefiani Bengan Laba3
1 Department of Health Policy and Administration, Tadulako University, Indonesia
2 Department of Nutrition, Tadulako University, Palu, Indonesia
3 Department of Epidemiology, Tadulako University, Palu, Indonesia
*Corresponding author, contact: ryman_smart@yahoo.com

Abstract
The retention of health workers at the public health center is influenced by various factors, including work design, employee relations, career opportunities, and leadership. The decline in the number of contract employee health workers at Ulunambo Public Health Centre is evident from the data on the number of health workers. In 2014, there were 2 people; in 2015, there were 2 people; in 2016, there was 1 person, and in 2017, it dropped to 2 people. The purpose of this research is to investigate the relationship between work design, employee relations, career opportunities, and perceptions of leadership with the retention of health workers at Ulunambo Public Health Centre, Morowali Regency. The research employed an analytical survey approach with a cross-sectional study design. The sample size consisted of 33 respondents. Data were analyzed using univariate and bivariate methods at a confidence level of 95% (p < 0.05). The results of the chi-square test indicate a significant relationship between work design, employee relations, career opportunities, perceptions of leadership, and the retention of health workers (p < 0.05). It is recommended that Ulunambo Public Health Centre regularly provides training, information, and opportunities for employees seeking career development. Additionally, improving communication between management and employees through regular interactions is crucial. Furthermore, conducting regular supervision of employees’ work performance is also advised.

Keywords: Retention, Contract Employee, Health Worker

Key Messages:
• These findings highlight the multifaceted nature of factors influencing health worker retention. Organizational strategies should focus on optimizing job design, enhancing employee relations, providing clear career paths, and fostering effective leadership to ensure the continued presence of non-permanent health workers within the Ulunambo Health Center. By addressing these factors comprehensively, health centers can contribute to improved service delivery and overall healthcare outcomes.
1. Introduction

Health encompasses physical, mental, social, and economic well-being, all of which are interconnected and collectively contribute to an individual’s, group’s, or community’s overall health level (1). Hendrik L. Blum identified four primary factors that influence public health status, serving as determinants of health issues. These factors encompass behavioral (lifestyle), environmental (social, economic, political, cultural), health service-related (coverage type and quality), and genetic factors (heredity). These factors interact to affect both individual health and public health levels (2). A key element in public health services is the Community Health Center (Puskesmas), a critical component in Hendrik L. Blum’s framework as the third determinant factor (3). Puskesmas, serving as the frontline in public health services, plays a significant role in educating and providing primary care to the community (4). Public health graduates with expertise in health management are essential in crafting health programs, primarily focusing on preventive disease interventions.

Establishing residency in an area, particularly for health workers, is influenced by various factors, including individual attributes, leadership, organizational structure, supervision, material and non-material incentives, and government policies. After recruiting health workers to an area, it's essential to implement retention strategies to ensure they stay. This prevents high turnover rates, minimizes absenteeism, and boosts productivity. In Indonesia, the number of Puskesmas units were 9,655 in 2013, 9,731 in 2014, 9,754 in 2015, and 9,767 in 2016. The corresponding health worker numbers were 349,198 in 2013, 334,320 in 2014, 258,568 in 2015, and 289,465 in 2016 (5). For Central Sulawesi, the Puskesmas units numbered 183 in 2013, 184 in 2014, 189 in both 2015 and 2016. Health workers numbered 12,979 in 2015 and 9,671 in 2016 (5).

Focusing on Morowali Regency, based on 2017 data from the Health Office, the Ulunambo Health Center had 32 personnel, followed by Kaleroang with 61, Lafeu with 37, Bahodopi with 38, Bahomote with 30, Wosu with 56, Bahoncustom with 60, and Laantulajaya with 61. Ulunambo Health Center in the Menui Islands District saw health worker movement of 2 in 2014, 3 in 2015, 2 in 2016, and 2 in 2017 (6). Interviews with health workers revealed that turnover led to service gaps impacting Puskesmas performance. Additionally, health worker requirement ratios have not been calculated, creating an obstacle for determining proper staff standards. Current standards refer to the Regulation of the Minister of Health Number 75 of 2014 regarding Isolated Health Center categories.

This research aims to explore the connection between work design, employee relations, career opportunities, and perceptions of leadership with health worker retention at Ulunambo Public Health Centre, Morowali Regency.

2. Methods

This study employed an analytical survey research design with a cross-sectional approach to investigate the relationships outlined in the title. The research was conducted at the Ulunambo Health Center, situated in the Menui Islands District of Morowali Regency. The study was carried out over a specific timeframe, aiming to comprehend the linkages between job design, employee relations, career opportunities, leadership, and the retention of non-permanent health workers (PTT). The study’s sample consisted of respondents within the Ulunambo Health Center’s non-permanent health worker group and the sample size in this study was 32 non-permanent health workers. The variables under scrutiny encompassed job design, employee relations, career opportunities, leadership perception, and the retention rate of non-permanent health workers. Respondents’ perceptions of these factors were crucial in understanding their influence on retention.

Data collection was achieved through the use of structured surveys, with respondents providing their perceptions on job design, employee relations, career opportunities, and leadership aspects. The retention rate of non-permanent health workers was determined based on historical records and data provided by the institution. To analyze the data, a chi-square test was employed, enabling the identification of relationships and potential dependencies between variables. The analysis aimed to establish whether a statistically significant association existed between the examined variables and the retention of non-permanent health workers.

3. Results

Table 1 shows that all variables have a significant relationship with the Retention of Non-Permanent Employee Health Workers, namely job design (p = 0.004), employee relations (p = 0.020), career opportunities (p
= 0.025), and Leadership (p = 0.009).

Table 1. Factors Related to Retention of Non-Permanent Health Workers (PTT) at UPTD Ulunambo Health Center, Menui Islands District, Morowali Regency

<table>
<thead>
<tr>
<th>Variable</th>
<th>Retention of Non-Permanent Employee Health Workers</th>
<th>ρ</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Low</td>
<td>%</td>
</tr>
<tr>
<td>Job Design</td>
<td>n</td>
<td></td>
</tr>
<tr>
<td>Poor</td>
<td>18</td>
<td>81.8</td>
</tr>
<tr>
<td>Good</td>
<td>3</td>
<td>27.3</td>
</tr>
<tr>
<td>Employee Relations</td>
<td>n</td>
<td></td>
</tr>
<tr>
<td>Poor</td>
<td>16</td>
<td>80.0</td>
</tr>
<tr>
<td>Good</td>
<td>5</td>
<td>38.5</td>
</tr>
<tr>
<td>Career Opportunities</td>
<td>n</td>
<td></td>
</tr>
<tr>
<td>Poor</td>
<td>14</td>
<td>82.4</td>
</tr>
<tr>
<td>Good</td>
<td>7</td>
<td>43.8</td>
</tr>
<tr>
<td>Leadership</td>
<td>n</td>
<td></td>
</tr>
<tr>
<td>Poor</td>
<td>17</td>
<td>81.0</td>
</tr>
<tr>
<td>Good</td>
<td>4</td>
<td>33.3</td>
</tr>
</tbody>
</table>

4. Discussion

The findings of this study reveal a significant correlation between job design and the retention of non-permanent health workers. Among respondents with inadequate job design, a majority of them exhibited low health worker retention rates, comprising 18 individuals (81.8%). Conversely, among those with favorable job designs, a higher proportion showcased better health worker retention, totaling 8 individuals (66.7%). On the other hand, respondents with good job designs also saw a smaller percentage of individuals with low health worker retention, totaling 3 individuals (27.3%). The analysis conducted using the Chi-square test resulted in a p-value of 0.004 (ρ < 0.05). Consequently, the null hypothesis (H0) was rejected, and the alternative hypothesis (Ha) was accepted. This signifies that a relationship exists between job design and the retention of non-permanent employees (PTT) at the Ulunambo Health Center UPTD in the Menui District, Morowali Regency.

These findings are consistent with Darajat (2012), who posits that employees inherently desire a work environment characterized by safety, comfort, and conducive conditions. When the work environment fails to foster these attributes, employees may experience diminished motivation, reduced enthusiasm for their tasks, decreased productivity, and ultimately, a willingness to leave for better opportunities outside the current organization (7). Furthermore, these outcomes are aligned with the observations made by Mathis & Jackson (2011), highlighting the influence of several job-related factors on employee retention. Given the considerable amount of time individuals spend at work, favorable working conditions are anticipated. Any disruptions to these conditions can lead to a decline in the intention to continue working (8). Gatot & Adisasmito (2005) also corroborate these results, indicating an insignificant impact of task design variables on job satisfaction for nurses at the Gunung Jati Inpatient Installation in Cirebon (9).

The outcomes of this study reveal a significant correlation between employee relations and the retention of non-permanent health workers. Among respondents with perceptions of poor employee relations, a majority showed low health worker retention rates, with 16 individuals (80.0%). In contrast, those with positive perceptions of employee relations demonstrated higher health worker retention rates, totaling 8 individuals (61.5%). Conversely, respondents with good perceptions of employee relations exhibited a smaller percentage of individuals with low health worker retention, totaling 5 individuals (38.5%). The Chi-square test analysis yielded a p-value of 0.020 (ρ < 0.05), leading to the rejection of the null hypothesis (H0) and acceptance of the alternative hypothesis (Ha). This indicates a relationship between employee relations perception and the retention of non-permanent employees (PTT) at the Ulunambo Health Center UPTD in the Menui Islands District, Morowali Regency. These findings are in line with Nurhidayati (2016), who emphasizes the influential role of employee relations in retention. Harmonious employee relations necessitate interaction not only within a specific work unit.
but also across various units to prevent a rigid work environment. When the work atmosphere, including employee relationships, becomes non-conducive and hampers employee flexibility, individuals are more likely to resign (10).

Similarly, these results align with Willyams (2010), who suggests that employee performance hinges on relationships between colleagues and leaders. A positive working relationship fosters a sense of security among employees within the organization (11). However, the study contradicts Kaswan (2012), who contends that strained relationships, particularly those marked by fear and rigidity, can hinder workplace interactions. Such interactions impede communication, idea-sharing, and effective coordination, thereby potentially affecting work quality and collaboration (12).

The findings of this study reveal a significant correlation between career opportunities and the retention of non-permanent health workers. Respondents with unfavorable perceptions of career opportunities displayed a majority with low health worker retention rates, totaling 14 individuals (82.4%). Conversely, those with positive perceptions of career opportunities exhibited a higher health worker retention rate, encompassing 9 individuals (56.2%). However, respondents with optimistic perceptions also showed a fraction with low health worker retention, comprising 7 individuals (43.8%). Through the Chi-square test analysis, a p-value of 0.025 (p < 0.05) was obtained. Consequently, the null hypothesis (H0) was rejected, and the alternative hypothesis (Ha) was accepted. This signifies a relationship between career opportunities perception and the retention of non-permanent employees (PTT) at the Ulunambo Health Center UPTD in the Menui Islands District, Morowali Regency.

These findings are consistent with Sutrisno (2016), who suggests that organizations should provide information about potential career paths, offer feedback on career path capabilities, incentivize self-development, and provide opportunities for other developmental programs. Lack of clarity in career paths can increase the likelihood of employee attrition (13). Similarly, these results are supported by Kumudha & Harsha (2016), who found that training opportunities in an organization impact employee retention (14). However, these results contrast with Nurhidayati (2016), as bivariate analysis in their study indicated no connection between employee perceptions of career opportunities and employee retention at Prikasih Hospital, yielding a p-value of 0.062 (10).

The findings of this study underscore a significant association between leadership and the retention of non-permanent health workers. Respondents who held unfavorable perceptions of leadership predominantly demonstrated low health worker retention rates, totaling 17 individuals (81.0%). In contrast, those with positive leadership perceptions displayed a higher health worker retention rate, encompassing 8 individuals (66.7%). Conversely, respondents with optimistic leadership perceptions also showcased a segment with low health worker retention, accounting for 4 individuals (33.3%). Through Chi-square test analysis, a p-value of 0.009 (p < 0.05) was obtained. This led to the rejection of the null hypothesis (H0) and the acceptance of the alternative hypothesis (Ha). This indicates a relationship between leadership perception and the retention of non-permanent employees (PTT) at the Ulunambo Health Center UPTD in the Menui Islands District, Morowali Regency.

These findings are in alignment with Hartanto (2008), emphasizing that leadership serves as the foundation of organizational development. Without effective leadership, attaining organizational goals and adapting to internal and external changes becomes challenging. Leaders wield influence over their subordinates, impacting factors such as job satisfaction and employee performance (15). Furthermore, these results mirror the perspective of Untari (2014), highlighting the substantial impact of leadership on organizational operations and continuity. Leadership’s significance lies in its role as a determinant of success in realizing the organization’s mission, vision, and objectives (16). However, these findings diverge from Herawaty (2012), whose bivariate analysis indicated a lack of significant correlation between leadership and employee retention, yielding a p-value of 0.627. Leadership’s influence is evident in indices such as job satisfaction, turnover intention, and turnover rate (17).

Implications of the study: 1) Organizational Strategies: The study’s findings underscore the significance of various factors, including job design, employee relations, career opportunities, and leadership, in influencing health worker retention. These findings offer valuable insights for healthcare organizations to devise and implement strategies aimed at enhancing these aspects to improve overall health worker retention rates. 2) Policy Formulation: The study’s outcomes provide evidence for policymakers to consider the importance of creating supportive policies that foster conducive work environments, address career advancement concerns,
and promote effective leadership practices. Such policies can contribute to more robust workforce retention within the healthcare sector. 3) Resource Allocation: Healthcare institutions can allocate resources more effectively by targeting interventions and programs aimed at improving job design, employee relations, career opportunities, and leadership development. This targeted approach can yield improved retention rates and enhance the quality of healthcare services.

5. Conclusion

In conclusion, this research delved into the relationship between various factors and the retention of non-permanent health workers at the Ulunambo Health Center, UPTD in the Menui Islands District, Morowali Regency. The study explored the dimensions of job design, employee relations, career opportunities, and leadership in relation to health worker retention.

The findings of the study unveiled significant connections between these factors and health worker retention. Firstly, job design played a pivotal role, as respondents with poor job design perceptions exhibited lower health worker retention rates, while those with favorable perceptions showcased higher rates. Secondly, employee relations exhibited a similar pattern, with respondents perceiving poor employee relations correlating with decreased retention rates and those perceiving positive relations demonstrating higher retention rates.

Funding: None

Acknowledgments: Thank you to the respondents and the leadership of the Ulunambo Public Health Centre, Morowali Regency

Conflicts of Interest: The authors declare no conflict of interest.

References


17. Anissa Herawaty A. Factors associated with the retention of employees in Rawamangun Surgical Hospital in 2012 [Internet]. [Jakarta]: Universitas Indonesia; 2012 [cited 2023 Aug 20]. Available from: https://lib.ui.ac.id