



Evaluating the Influence of Financial and Non-Financial Incentives on the Performance of Healthcare Professionals

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Abstract

Hospitals are established with the primary aim of providing optimal health services to the public, which requires the presence of qualified human resources who demonstrate loyalty and high dedication to their work. To enhance performance, medical personnel not only need to possess strong abilities and skills but also require adequate financial and non-financial compensation. Compensation, encompassing salaries, wages, benefits, bonuses, and incentives, serves as a reward for their contributions and plays a crucial role in fostering a conducive work environment. A well-structured compensation system can motivate personnel and improve productivity, making it a vital aspect of human resource management. This study, employing a verificative research design, examined 121 medical personnel from all hospitals in Cianjur, selecting 93 respondents through proportional random sampling and collecting data via questionnaires. Results indicated that financial and non-financial compensation significantly impact medical personnel performance, accounting for 84.4% of the observed variance. These findings highlight the critical role of effective compensation systems in enhancing performance and underscore the need for continuous development of human resource quality in healthcare institutions.

Keywords: Compensation, Performance, Hospital

Introduction

The performance of medical personnel in hospitals is crucial to the organization's ability to achieve its objectives, as these individuals are among the most significant factors determining the success or failure of hospital performance (Pio & Lengkong, 2020) ^[14]. Consequently, hospitals must effectively manage medical personnel as vital human resources to ensure their sustainability and progress. This underscores the importance of providing appropriate remuneration tailored to the nature and circumstances of medical personnel, ensuring their contributions are adequately recognized and rewarded. Hospital leaders must treat medical personnel with respect and recognize them as individuals with both material and non-material needs. It is essential for leaders to understand, acknowledge, and strive to meet the needs of medical personnel, particularly doctors, in their efforts to deliver quality patient care. By addressing these needs, hospital leaders can create a supportive environment that enables medical personnel to work effectively and align their efforts with the organization's goals (Santika & Antari, 2020) ^[15].

Hospitals are established with the primary objective of delivering optimal health services to the community. Achieving these goals requires the active participation of all employees, including doctors, nurses, pharmacists, cleaning staff, and security personnel. To support the success of these objectives, it is essential to have high-quality human resources who demonstrate loyalty and strong dedication to their work. In addition to maintaining professional competence, employees must also receive adequate compensation to enhance their performance and overall contribution to the organization's success (Kamilah & Kurniawati, 2021) ^[6]. Employee performance is closely linked to human resources, which require focused attention as they are valuable assets for an organization, with their capabilities, skills, and productivity requiring continuous improvement. These attributes can be optimized when employees work in a conducive environment, characterized by supportive conditions that foster their well-being and performance.

One of the key elements of a conducive environment is the provision of appropriate compensation, which plays a significant role in motivating and enhancing the productivity of human resources (Simbolon *et al.*, 2023) ^[19].

Compensation refers to the rewards or benefits provided to employees in recognition of their contributions and achievements within the organization (Nguyen *et al.*, 2020) ^[11]. Economic compensation typically includes salaries, wages, allowances, bonuses, and incentives, while it can also encompass non-physical forms of recognition. Effective compensation systems must be designed to align with the sacrifices and efforts employees make for the organization. Financial compensation plays a critical role in shaping an organization's overall strategy, as it significantly impacts job satisfaction, productivity, employee retention, and other key organizational processes (Perangin-Angin *et al.*, 2016) ^[13].

Compensation can be broadly categorized into financial compensation and non-financial compensation. When designing a compensation system, it is essential to ensure that it effectively stimulates employee performance. As an integral part of employee performance management, the compensation system serves as a critical tool for aligning employee efforts with organizational goals. While compensation is a key factor in motivating employees to work in line with the organization's objectives, it must also consider the organization's financial capacity to provide fair and reasonable rewards that correspond to employee contributions. For the system to be mutually beneficial, both the organization and its employees must achieve their respective goals. However, the compensation provided will not yield proportional benefits if employee performance is not optimized (Alves & Lourenço, 2022) ^[3].

The significance of compensation as an indicator of job satisfaction is challenging to quantify, as employees' perceptions of rewards, monetary or otherwise, are often highly subjective and vary across individuals. Nevertheless, the compensation system holds immense potential as a critical tool for shaping employee behavior and enhancing performance. Unfortunately, many organizations underestimate this potential, viewing compensation merely as an expense to be minimized. This misguided perception can lead to the misuse of compensation systems, inadvertently fostering unproductive or even counterproductive behavior. Consequently, various organizational issues may arise, such as low employee motivation, poor job performance, high turnover rates, irresponsible actions, and even dishonesty among employees. These challenges are often rooted in compensation systems that fail to provide fair and proportionate rewards, underscoring the need for organizations to prioritize effective and equitable compensation strategies (Kamilah & Kurniawati, 2021) ^[6].

Health facilities in Cianjur Regency are currently insufficient to meet the needs of the growing population. This is exacerbated by the continuous increase in population, leading to an ongoing demand for improved healthcare services. Specifically, hospital facilities, including essential medical installations, are still considered inadequate. Ideally, Cianjur Regency should have eight hospitals, but it currently operates only three. These include two regional general hospitals: RSUD Cianjur, which employs 35 medical personnel, including 30 specialists, 2 dentists, and 1 specialist dentist; and RSUD Cimacan, which has 10 general practitioners, 13 specialists, and 2 dentists. Additionally, there is one privately managed hospital, Dr. Hafiz Cianjur Hospital, which

employs 10 general practitioners, 15 specialists, 2 dentists, and 1 specialist dentist. This disparity between population growth and healthcare infrastructure highlights the need for expanded medical services in the region. A preliminary survey conducted at hospitals in Cianjur Regency revealed significant issues with the compensation system. Interviews with several doctors indicated dissatisfaction with the current system, as it fails to meet their expectations. Key concerns included disproportionate incentives and allowances, as well as an excessive workload. These issues highlight the need for a more equitable and supportive compensation structure that aligns with the demands placed on medical personnel.

The compensation system implemented by regional public hospitals is based on class and structural position for healthcare workers, whereas private hospitals determine compensation based on education and structural position. Although performance factors are considered when determining allowance increases, their influence is minimal. The current compensation system is viewed as objective for some doctors, as class, education, and structural position are less susceptible to manipulation. However, the impact of such a system weakens the competitive drive among healthcare workers, as performance-based rewards receive insufficient attention. This, in turn, negatively affects the overall performance of the hospital, as the compensation system fails to adequately incentivize and recognize individual contributions.

Hospital performance indicators, such as Bed Occupancy Rate (BOR) and Length of Stay (LOS), at RSDH Cianjur and RSUD Cimacan remain below the standards set by the Indonesian Ministry of Health. The only hospital meeting the BOR standards is RSUD Cianjur. This discrepancy is closely linked to the performance of human resources, particularly the doctors working in these three hospitals. The suboptimal performance in these areas highlights the need for improvements in both hospital management and the compensation and motivation of medical staff to meet national healthcare standards.

Various efforts have been undertaken by hospital management to improve performance, including increasing compensation for healthcare workers, expanding staff numbers, providing educational and training opportunities for doctors, conducting comparative studies outside the hospital, and implementing strict supervision and coaching. Despite these initiatives, the performance of doctors has not significantly improved. The performance indicators for doctors, as reflected in the hospital performance metrics, indicate that their current performance remains largely below the standards set by the Indonesian Ministry of Health. This suggests that additional strategies or reforms may be necessary to effectively enhance doctor performance and meet national healthcare standards.

In accordance with the hospital's Standard Operating Procedures (SOP), doctors are primarily employed to provide medical services within the hospital. They are expected to meet certain performance criteria, including maintaining a minimum number of working hours, ensuring punctual attendance, especially during emergencies, adhering to medical record documentation requirements, prescribing generic drugs when applicable, performing duties in line with standard work procedures, and actively participating in non-professional management activities. These six aspects form the core components for measuring doctor performance within the hospital.

The performance of hospital doctors in Cianjur Regency still falls short of established standards. Key issues include insufficient attention to service hour schedules, poor discipline regarding punctual attendance, and a lack of preparedness in adhering to standard protocols for prescribing generic drugs. Additionally, there is limited participation in non-specialist management activities. These factors contribute to the overall underperformance of doctors in the region, highlighting the need for improvements in these areas to meet the expected standards of care and hospital management.

A well-structured compensation system holds strategic value for enhancing employee performance. According to researches, providing appropriate compensation is an effective means of boosting employee motivation, which in turn leads to improved performance aligned with organizational goals (Kaur, 2018; Meiliyana *et al.*, 2023; Saavana Kumar, 2020) [7, 9, 16]. Specifically, Polnaya's. This highlights the crucial role that compensation plays in driving productivity and performance across various sectors. The term compensation refers to all forms of monetary remuneration and any goods or commodities used as substitutes for monetary remuneration provided to employees (Alves & Lourenço, 2022) [3]. Compensation encompasses all income, both in the form of money and direct or indirect benefits, that employees receive in exchange for services rendered to the company (Sofiyanti & Najmudin, 2023) [20]. Compensation is typically divided into two categories: direct compensation, which includes salaries, wages, and incentives, and indirect compensation, which consists of benefits such as insurance, allowances, leave, and awards. Compensation plays a crucial role in influencing work performance, job satisfaction, and employee motivation. If employees perceive their compensation as inadequate, it can lead to a decline in performance, job satisfaction, and motivation. Consequently, the compensation system is a critical element that requires careful attention and management to ensure that it effectively supports and enhances employee engagement and productivity.

Financial compensation is divided into two categories: direct and indirect compensation. Direct compensation includes payments made to employees in the form of wages, salaries, bonuses, and allowances. Indirect compensation, or benefits, encompasses all payments not covered by direct financial compensation, such as holidays, various types of insurance, religious holiday allowances, official clothing, and other non-monetary benefits. These components together form a comprehensive compensation package that supports employee well-being and incentivizes performance. Non-financial compensation refers to the satisfaction a person derives from their work itself or from the psychological and physical environment in which they work. This type of compensation includes the fulfillment gained from performing meaningful tasks related to one's job. Non-financial compensation is closely tied to an individual's need for recognition and appreciation. It encompasses factors such as: 1) interpersonal relationships, 2) opportunities for promotion, 3) work experience, and 4) the level of responsibility entrusted to the individual. These elements contribute to job satisfaction and employee motivation, even though they do not involve direct financial rewards (Saavana Kumar, 2020) [16].

Performance assessment has been recognized and developed over the past 40 years, though the practice itself has existed

for centuries. Historically, performance appraisals were primarily used for administrative purposes, such as promotions, salary increases, and disciplinary actions. However, over time, the use of performance appraisals has evolved. They are now widely accepted and utilized for human resource development in various organizations, including hospitals. This shift reflects a broader understanding of performance assessments as a tool for enhancing employee development rather than solely serving administrative functions. The term performance refers to job performance, actual performance, or work performance, which denotes the achievements or results that an employee has attained. While there are various definitions of performance provided by experts, they all convey a similar understanding of the concept. Performance measurement, on the other hand, is the process of assessing progress toward achieving goals and objectives in managing human resources to produce goods and services. It includes evaluating the efficiency and effectiveness of actions taken in achieving organizational goals (Patarru' *et al.*, 2020; Sahraee, 2014) [12, 17].

Performance refers to the results of an employee's work, measured in terms of both quality and quantity, as achieved in the course of carrying out their duties and responsibilities. High performance is largely dependent on human factors, as individuals are the key resources for executing tasks. From the definitions above, performance can be understood as the ability or success an individual achieves in their work over a specified period, based on predetermined criteria that apply to specific roles. Therefore, a hospital must implement a strategy to enhance the quality of its human resources to foster improved performance and drive organizational success.

Method

The research method employed in this study is a case study, which aims to describe specific or typical social phenomena that occur within individuals, groups, or organizations, with the goal of drawing generalizable conclusions. The population of the study consisted of all medical personnel working at Dr. Hafiz Cianjur Hospital, Cianjur Regional General Hospital, and Cimacan Regional General Hospital in 2016, totaling 121 individuals. The sample included medical personnel from these hospitals who agreed to participate and consented to be research respondents. Based on the sample size formula, 93 participants were selected using proportional sampling. The data for this research consists of both primary and secondary sources. Primary data were collected through questionnaires, while secondary data were obtained from written documents relevant to the study.

Results and Discussion

Based on the primary data that has been processed, the results of the distribution of respondents by gender in this study are presented in Table 1. From the table data above, it can be observed that nearly half of the respondents (55.1%), totaling 52 individuals, were male, while the remaining 44.9%, or 41 individuals, were female. This indicates a relatively balanced distribution of respondents based on gender in this study.

There are several frequently debated issues, misunderstandings, and unsupported opinions regarding whether women's performance is the same as men's performance at work. To begin this analysis, it is important to acknowledge that there may indeed be differences between men and women that can

influence their performance. However, research has shown that there are no consistent male-female differences in areas such as problem-solving abilities, analytical skills, competitive drive, motivation, sociability, or learning ability. This suggests that any perceived differences in performance may stem from other factors, such as societal expectations or organizational dynamics, rather than inherent capabilities.

Gender can influence an individual's decision to choose a job, as it relates to the compatibility between the individual and the role, as well as the organization. In the medical field, particularly among medical personnel (such as nurses) and non-medical staff, women tend to dominate, although men are also represented. This trend is often attributed to the qualities typically associated with women, such as greater patience and attention to detail, which are seen as valuable traits in patient care. These gendered perceptions may influence both career choices and the expectations placed on medical professionals within healthcare settings. From an age perspective, the majority of respondents (44.1%), totaling 51 individuals, were aged 21–30 years. A further 37.6%, or 35 individuals, were aged 31–40 years, and 18.3%, or 7 individuals, were aged 41 years and above. The relationship between age and performance is often considered significant, especially as it is commonly believed that performance may decline with age. However, this perception may be subject to various factors such as experience, role demands, and individual capabilities, which can also influence performance across different age groups.

Table 1: Respondent Characteristics

No	Characteristics	Frequency	Percentage (%)
Sex			
1	Laki-Laki	52	55.1
2	Perempuan	41	44.9
Total		93	100
Age			
1	21 – 30 Years old	41	44.1
2	31 – 40 Years old	35	37.6
3	≥ 41 Years old	17	18.3
Total		93	100
Job Specification			
1	Profesi Dokter	58	62.4
2	Profesi Dokter Gigi	10	10.7
3	Profesi Dokter Spesialis	21	22.6
4	Profesi Dokter Gigi Spesialis	4	4.3
Total		93	100

The age factor is an important characteristic that can influence an individual's judgment regarding job satisfaction and their desire to leave the company. In this study, respondents' ages ranged from 20 to 50 years. Age can impact various aspects of job satisfaction, as different life stages often bring varying expectations, priorities, and levels of commitment to work. These factors may affect both the overall satisfaction with the job and the likelihood of employees seeking new opportunities. It can also be observed that of the 93 respondents in this study, more than half (62.4%), or 58 individuals, had a medical professional education. The majority of respondents (22.6%), totaling 21 individuals, had specialist medical education, while a smaller portion (10.7%), or 10 individuals, had a dentist profession education. Additionally, 4.3%, or 4 individuals, had education as a specialist dentist. This distribution reflects the varied educational backgrounds of medical personnel, which

may influence their roles and responsibilities within the healthcare setting.

A higher level of education can significantly influence an individual's performance and income, as those with advanced qualifications, such as specialist medical education, typically earn more than those with a basic medical professional education. In general, a person's level of education affects their attitudes, decision-making abilities, and capacity to complete tasks more effectively and efficiently. For this study, the researcher specifically focused on formal education received by the respondents, recognizing that educational background plays a crucial role in shaping both professional competence and compensation. Based on data analysis, it was found that the assessment of financial compensation was categorized as sufficient, with a percentage of 61.5%. This indicates that the financial compensation received by medical personnel at hospitals in Cianjur District is generally regarded as adequate, covering aspects such as basic salary, incentives, bonuses, medical services, insurance, pension funds, and vacation allowances. However, this suggests there may still be room for improvement to ensure that compensation fully meets the expectations and needs of the medical staff.

The average responses to the statements representing each indicator for the Financial Compensation sub-variable were rated as adequate to good. This suggests that financial compensation is generally perceived as being related to the income and benefits received by medical personnel in their work. Of the 28 indicators representing the Financial Compensation sub-variable, there are 7 key dimensions, including basic salary, incentives, bonuses, medical services, insurance, pension funds, and vacation allowances. These dimensions collectively contribute to the overall assessment of financial compensation in the hospitals in Cianjur District. In the basic salary dimension, a percentage of 65.5% was obtained, indicating that it falls into the high category. Incentives received a percentage of 61.5%, placing them in the sufficient category. Bonuses received a percentage of 59.1%, which also falls within the sufficient category. Medical services were rated at 61%, categorized as sufficient. Insurance received a percentage of 61.7%, indicating it is in the sufficient category. Pension funds were rated at 61.2%, also in the sufficient category, and the holiday allowance received a percentage of 62.3%, which places it in the sufficient category as well. These results suggest that while certain aspects of financial compensation are considered adequate, there is room for improvement, particularly in areas like incentives, bonuses, and medical services.

Respondents' responses to indicators related to the non-financial compensation sub-variable show that the assessment of non-financial compensation falls into the high category, with a percentage of 71.6%. This indicates that the non-financial compensation received by medical personnel at hospitals in Cianjur District is generally perceived as good. The positive aspects include opportunities for self-development, career progression, legal protection, awards, praise, and access to facilities. These factors contribute significantly to the overall job satisfaction and motivation of medical personnel in the region.

The average responses to the statements representing each indicator for the Non-Financial Compensation sub-variable were rated as adequate to good. This suggests that non-financial compensation is closely related to guarantees and facilities in the work environment. Of the 23 indicators

representing the Non-Financial Compensation sub-variable, there are 6 key dimensions: self-development, career path, legal protection, awards, praise, and facilities. These dimensions reflect the non-monetary aspects of compensation that play a crucial role in the overall satisfaction and motivation of medical personnel in the hospitals in Cianjur District.

In the self-development dimension, a percentage of 69.8% was obtained, placing it in the high category. The career level dimension received a percentage of 73%, also in the high category. Legal protection was rated at 71.3%, which is categorized as high. The award dimension received a percentage of 68.6%, falling into the high category. Praise was rated at 72%, placing it in the high category as well. Finally, the facilities dimension received a percentage of 72%, which also falls into the high category. These results indicate that non-financial compensation, including self-development opportunities, career progression, legal protection, awards, praise, and facilities, is generally perceived positively by the medical personnel in Cianjur District hospitals.

The respondents' responses to indicators related to the sub-variable of medical personnel performance revealed that the assessment of medical personnel performance was in the high category, with a percentage of 74.7%. This indicates that the performance of medical personnel at hospitals in Cianjur Regency is generally perceived positively, particularly in terms of patient visits, responsiveness to complaints, medical procedures, professional ethics, and planning. These findings suggest that medical personnel in the region are performing well across multiple dimensions of their duties, contributing to the overall quality of healthcare services.

The average responses indicating "good" and "very well" for each indicator of the medical personnel performance sub-variable suggest that medical personnel performance is strongly related to the quality of service provided to patients. Among the 24 indicators representing this sub-variable, five key dimensions were identified: patient visits, responsiveness to complaints, medical actions, adherence to professional ethics, and planning. These dimensions reflect the core aspects of medical personnel performance and demonstrate a positive trend in their ability to provide effective and ethical care to patients.

In the visits dimension, the percentage value obtained is 74.1%, which falls into the high category. In the responding to complaints dimension, the percentage value is 75.2%, also in the high category. For medical actions, the percentage value is 74.4%, indicating it is in the high category as well. In terms of ethics, the percentage value is 74%, placing it in the high category. Lastly, in the planning dimension, the percentage value is 76.5%, which is also considered high. These results suggest that medical personnel in Cianjur Regency exhibit strong performance across all key areas, with their service quality being assessed positively in terms of visits, complaint responses, medical procedures, ethics, and planning.

The results of this research support the first hypothesis, which posits that financial compensation significantly influences the performance of medical personnel. Financial compensation, which includes both direct and indirect payments, plays a crucial role in enhancing the performance of medical staff. This finding aligns with research by Eta Setyawan Suseno, Djambur Hamid, and Ika Ruhana (2014), which also concluded that financial compensation positively

and significantly affects the performance of medical personnel. Financial compensation serves as a reflection of the recognition, status, and fulfillment of needs for medical staff and their families. When the compensation is greater, it signifies that the individual's position is elevated, their status is improved, and their needs are better met. Therefore, when the financial compensation provided is appropriate and effectively meets the needs of medical personnel, it can lead to improved performance as they are motivated to work harder and contribute more to the organization.

Non-financial compensation significantly influences the performance of medical personnel, contributing to improvements in their overall performance. The findings of this research are in line with the study conducted by Ekshu Hamdan and Roy Setiawan, which also found that non-financial compensation positively and significantly impacts the performance of medical personnel. Non-financial compensation refers to the rewards provided by the organization that are not monetary, but are related to the work itself and the work environment. These include factors such as job satisfaction, work environment, and recognition. When medical personnel find satisfaction in their tasks and feel comfortable in a positive work environment, they are more likely to perform their duties better. A good work environment and meaningful job factors contribute to a sense of well-being, motivating medical personnel to work more efficiently and effectively, ultimately leading to improved performance.

The results of this research support the third hypothesis, which posits that compensation—both financial and non-financial—has a significant influence on the performance of medical personnel. The amount of financial compensation received by medical personnel reflects their status, recognition, and the level of needs fulfillment for both themselves and their families. In addition, factors such as a good work environment and job satisfaction contribute to making medical personnel more comfortable and engaged in their work. When both financial and non-financial compensation are enhanced, medical personnel are more likely to be motivated and committed, resulting in improved performance. Therefore, the alignment of adequate compensation with the needs and expectations of medical personnel can lead to better outcomes in their work and overall performance in the healthcare setting.

To enhance the financial compensation in the performance of medical personnel, it is essential to focus on improving their skills and abilities. By continuously upgrading their skills, medical personnel can achieve higher quality performance, which in turn justifies the increase in compensation. Moreover, enhancing the discipline of medical personnel is crucial, as it encourages adherence to applicable regulations and standards, ensuring a higher level of professionalism and accountability (Ali & Al-Aali, 2015; Almutairi *et al.*, 2022; Jones & Harris, 2014) ^[1, 2, 5].

Additionally, job factors such as a supportive and positive work environment play a significant role in improving job satisfaction. When medical personnel feel comfortable and valued in their workplace, they are more likely to be motivated and perform their duties with greater dedication. Therefore, combining improved financial and non-financial compensation with continuous professional development and a conducive work environment can significantly enhance the performance and overall job satisfaction of medical personnel (Kaur, 2018; Ko, 2021; Perangin-Angin *et al.*, 2016) ^[7, 13].

Financial compensation, such as competitive salaries, bonuses, and incentives, directly impacts the motivation and sense of value felt by medical staff, ensuring they are adequately rewarded for their hard work and contributions. Non-financial compensation, such as opportunities for career advancement, recognition, praise, and a supportive work environment, also plays a crucial role in boosting morale and fostering a sense of fulfillment among medical personnel (Crispen *et al.*, 2013; Puspita & Harto, 2014; Sofiyanti & Najmudin, 2023) ^[4, 15, 20]. Furthermore, creating a conducive work environment, which includes proper facilities, legal protection, and a culture of collaboration and respect, encourages employees to perform at their best. Professional development opportunities, such as training and career path advancements, provide medical personnel with the necessary skills and knowledge to enhance their expertise, making them more effective in their roles. When these elements are combined, medical personnel are more likely to feel valued, empowered, and satisfied in their roles, leading to increased productivity, better patient care, and a stronger overall organizational performance. Thus, a holistic approach that integrates compensation with professional growth and a positive work culture can lead to sustained improvements in both individual and organizational outcomes (Monazam Tabrizi, 2023; Šprajc & Lukhanin, 2022) ^[10, 21]. Education plays a crucial role in improving the performance of medical personnel, as higher education levels typically lead to better-qualified human resources. This improvement in qualifications and skills can directly influence both financial and non-financial compensation. When medical personnel acquire higher education or specialized training, their ability to perform complex tasks increases, which justifies higher compensation, both in terms of salary and benefits. Additionally, this development often leads to greater job satisfaction and professional growth.

Regarding age, while it is commonly believed that performance declines with age, this is not always the case. Age can influence an individual's judgment regarding job satisfaction and their intention to remain with or leave an organization. However, older employees often bring valuable experience, knowledge, and a strong work ethic to their roles. The challenge lies in balancing the benefits of experience with the potential for fatigue or resistance to adopting new practices. Age-related performance shifts may depend more on personal health, motivation, and organizational support than on age alone. Ultimately, fostering a culture of continuous education and supporting medical personnel at all stages of their careers, regardless of age, is vital for maintaining high performance, job satisfaction, and effective compensation systems.

Conclusion

The research shows that medical personnel in Cianjur district receive adequate financial compensation (61.5%) including basic salary, incentives, bonuses, medical services, insurance, pension funds, and vacation allowances. Non-financial compensation, covering personal development, career advancement, legal protection, recognition, praise, and workplace facilities, is rated positively at 71.6%. The performance of medical personnel is good, with a percentage of 74.7%, reflecting their effectiveness in patient visits, responding to complaints, medical procedures, ethics, and planning. Financial compensation has a positive and significant effect on performance (82%), with a regression

equation $\hat{Y} = 3.585 + 0.991 X_1$, indicating that an increase in financial compensation raises performance. Similarly, non-financial compensation significantly influences performance (81.9%), with a regression equation $\hat{Y} = 9.881 + 0.964 X_2$, meaning an increase in non-financial compensation boosts performance. Both types of compensation combined have a significant effect on performance (84.4%), with the regression equation $\hat{Y} = 5.465 + 0.487 X_1 + 0.506 X_2$, demonstrating that improvements in both financial and non-financial compensation lead to higher performance.

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