

DEVELOPMENT OF THE NURSES PERFORMANCE AT PRIVATE CLINICAL MEDICINE INSTITUTION

DedenKomarPriatna

UniversitasWinayaMukti, Bandung. Indonesia

Email: dedenkomar@yahoo.com

ABSTRACT

The objective of this research is to find out the influence of leadership, compensation, and work motivation both partially and simultaneously on the nurses Performance. The methods used are descriptive survey and explanatory survey method. The populations are the nurses from 61 private Clinical medicine institution of West Java Province with 245 respondents as the samples. The data analysis method used is SEM (Structural Equation Modeling). The findings show that leadership and compensation positively and significantly influence on work motivation, both partially and simultaneously. Partially, the compensation is the most dominant variable to influence the work motivation. Leadership, compensation, and work motivation, both partially and simultaneously have a positive and significant contribution on nurse performance. Partially, work motivation is the most dominant variable to influence nurse performance. Work motivation is the most dominant variable influences the which the nurse performance. The finding Also shows that work motivation is the full mediating variable on the influence of leadership and compensation toward nurse performance. This research recommends to improve the performance of the nurses of private Clinical medicine institution in Districts / Cities of West Java Province.

Keywords: leadership, compensation, work motivation, nurse performance, clinical medicine institution

I. INTRODUCTION

1.1. Research Background

Growth in the Clinical medicine institution world today is increasingly developing in Indonesia, this matter characterized by many establishment of private Clinical medicine institutions, both local and foreign investors. All of that is inseparable from the various successes of Indonesia's economic development and rapid growth. Each Clinical medicine institution is trying to attract as many patients as possible by increasing good quality in terms of services, products, interest, and the growing use of technology. The main purpose of all of them is to provide satisfaction for patients. Clinical medicine institutions have a very important role in the economic system that is increasingly growing along with the growing needs of the community. Clinical medicine institutions also play a role as an *Agent of Development* in national development, where Clinical medicine institutions distribute medicine to the public in the form of healthy, in order to increase the ability of medicine mobility, and create a better climate for the business world.

Clinical medicine institution is one of the institutions known to serve publics with locations that are generally close to where people are in need. The legal basis of the Clinical medicine institution is Act Number 10 of 1998 concerning Clinical medicine institution. In this law it is mentioned that Clinical medicine institutions are institutions that carry out private business activities or based on Islamic principles which in their activities do not provide services in Clinical medicine institutions is very helpful for publics healthy

because of the activities of Clinical medicine institutions is primarily intended to serve small businesses and rural communities. However, with the growing needs of the community, the task of the Clinical medicine institution is not only aimed at rural communities but also includes the provision of Clinical medicine institution services to people in economically weak groups in urban areas.

The number of Clinical medicine institution private in regency / municipality about West Java fluctuating, this has an impact also on the amount of a sales and the amount of patients health. An increase in the number of sales means more and more patients are healthy in Clinical medicine institutions, whereas an increase in the public health means the balance of public health has increased from before. This means that more and more patients are using Clinical medicine institution services.

The Clinical medicine institution intermediary function, both in the collection of third party medicine and other healthy product, faces constraints that cause a decrease in the growth of third party medicine and healthy. High healthy rates, weakening public purchasing power, and human resources (HR) owned by Clinical medicine institutions are one of the causes of declining sales growth. The Clinical medicine institution with the functions *intermediary* in raising medicine from the public for further distribution to the public in the form of health continued to decline in growth.

Many factors lead to low performance of the Clinical medicine, which has the function of intermediation, both on third-party medicine. Some factors that become obstacles that cause a decrease in the growth of third party medicine and healthy include high sales interest rates, weakening purchasing power, equipment and technology used, and human resources (HR) owned. In order to create a healthy Clinical medicine institution system, in addition to improving the financial condition of the Clinical medicine institution system, it is also pursued by strengthening the Clinical medicine institution system that directs Clinical medicine institutions to *good corporate governance* practices and the fulfillment of prudential principles. Clinical medicine institutions as intermediary institutions must maintain trust at all times, therefore Clinical medicine institution need to be owned and managed by parties who meet the requirements of fit and proper, who in addition to having integrity also have high commitment and ability in supporting the development of sound Clinical medicine institution operations. In addition, the management of Clinical medicine institutions requires human resources that have high integrity, quality and have a good reputation.

Based on the description above background, so if these conditions are allowed to continue, it is feared the performance of nurses will continue to decline drastically that ultimately will further degrade the performance of the Clinical medicine institution.

II. LITERATURE REVIEW

2.1 Nurse Performance

Human Resources (HR) has an important role in achieving the organization's vision, mission and goals. In fact, its existence has become a talent in advancing companies to be able to compete in the midst of global competition. Abdul Hameed, et al (2014) states that organizational performance is determined by the performance of the organization's nurses themselves. Then Mahmood, Iqbal and Samsar (2014) through their research stated that nurse performance is the most important factor in organizational success, therefore there is a need to adopt an effective human resource strategy aimed at improving nurse performance in organization. But the existence of human resources (HR) alone is not enough, it requires quality human resources (HR) and international competitiveness, namely human resources (HR) that have superior performance (good). Not surprisingly, many companies dare to pay expensive nurses who perform superior and even they are looking for quality human resources (HR) to various countries.

Performance according to Ibojo Bolanle Odunlami and Asabi Oludele Matthew, (2014) Performance (work performance) is the work of quality and quantity achieved by a person / nurse in carrying out their duties in accordance with the responsibilities given to him. Performance is a concept that is universal which is the operational effectiveness of an organization, parts of the organization and its nurses based on predetermined standards and criteria. Organizations are basically run by humans, so performance is actually

human behavior in playing the role that they perform in an organization to meet the standards of behavior that have been set in order to produce the desired results and actions.

In line with the explanation above, IrumShahzadi, Ayesha Javed, Syed ShahzaibPirzada, ShaguftaNasreen, and Farida Khanam, (2014) defines performance as a result or overall level of success of a person during a certain period in carrying out the task compared with various possibilities, such as standard outcomes, targets, or targets or criteria that have been determined in advance. The purpose and objective of performance is to set goals that are useful, not only for evaluating performance at the end of a certain period, but also the results of work processes throughout that period.

According to I GedeAgusAry Dharma, (2013) "performance can be improved by rectifying unwanted behavior through constructive feedback". It means that performance is not born by itself, the company has an obligation how to foster and develop nurses to behave as expected. Of course the provision of regular training is one of the efforts that can be done, but the company must be able to package the training program as part of the right target and appropriate. So the results of the training can significantly improve the ability of NURSEs to complete various tasks.

Based on the description of the theory above, then in this study the intended performance of NURSEs is the work achieved by an NURSE in carrying out their duties in accordance with the responsibilities given. Nurse performance consists of four dimensions, namely:

- 1) **The Work Quality dimension** consists of several indicators, namely:
 - a) Accuracy in working
 - b) Accuracy of work results
 - c) The work in accordance with work procedures
- 2) **Dimensions of Work Quantity** which consists of several indicators, namely:
 - a) The work that is in accordance with the target set
 - b) Conformity of work results with time allocation in completing work
 - c) The speed of completion of work exceeds the standard time
- 3) **The Reliability Dimension** which consists of several indicators, namely:
 - a) The ability to carry out leadership instructions
 - b) Initiative in carrying out the work
 - c) Initiatives in solving problems
 - d) Work presence
- 4) **Work Attitude Dimension** which consists of several indicators, namely:
 - a) Ability to work in teams
 - b) Cooperation with leaders
 - c) Loyalty to the leadership
 - d) Loyalty to the organization

2.2. Work Motivation

In essence, human behavior is motivated by the desire to get something that is the goal of the activity. The word motivation comes from the Latin word "*Motive*" which means encouragement, the driving force or the strength contained in the organization that causes the organization to act or act. Furthermore, absorbed in English *motivation* means giving a motive, the emergence of motives or things that cause encouragement or circumstances that cause impetus. Erwin Dinata, YohanesOemar and Machasin, (2014) explains the motive as an encouragement of needs in nurses that need to be met so that the nurse can adjust to his environment, while motivation is a condition that can move nurses to be able to achieve the goals of their motives.

According to FauzilahSalleh, ZaharahDzulkifli, Wan Amalina, and NurHaizal, (2011) defines motivation is as a person's needs, desires, impulses, impulses. Not many people can give birth to intrinsic motivation, most of the motivation in themselves is always triggered by other factors, such as work getting compensation, making mistakes getting sanctions, diligently studying because of scholarships and so

forth. This condition is human instinct in general, so in everyday life external motivation always dominates the birth of internal motivation in the sense of Fauzilahet.all as an impetus that gives birth to the desire to achieve goals.

According to AgungWidhiKurniawan, (2012) motivation is defined as a process to arouse enthusiasm for work to always feel compelled to carry out work to achieve goals. The impulse in question is how the organization is able to meet the needs of life and the tendency to maintain life. This motivational theory emphasizes the basic reasons why someone works and the answer is quite simple, namely the fulfillment of the needs of life of workers and their families. Thus motivation becomes the law of dependency for nurses . Every organization that is able to provide what is needed for the lives of its nurses , by itself the nurses will bind themselves to the organization, they tend to survive and loyal to the organization. However, these conditions depend on the extent to which the organization views its nurses as mere assets or workers.

Based on the description above, then in this study **work motivation is the force that gives rise to enthusiasm in carrying out work in order to achieve goals.** The dimensions used to measure work motivation in this study are using the ERG theory from Clayton Alderfer which includes three dimensions, including:

1) **Dimension of Existence** , with indicators:

- a. Suitability in fulfilling needs
- b. Job security certainty
- c. Protection at work

2) **Connected Dimension** , with indicators:

- a. Relationships with fellow nurses
- b. Relationship with leadership
- c. Relationship with work environment

3) **Growth Dimensions** , with indicators:

- a. Recognition of work results
- b. Award for work performance
- c. Involvement in work
- d. Job suitability with work ability
- e. Development of self potential

2.3. Leadership

The leader has a special position in an organization. Its existence is believed to be a person who can run, animate, develop, advance and achieve organizational goals. So that a leader must have a variety of advantages that are not owned by subordinates, including the position (position) as a symbol of power, with that leader has the *power* to rule directly against his nurses; leaders have charismatic, as a figure who can be a role model; the leader has an attraction as a lure for everyone around him being respectful and reticent; and the popular leader as one who is considered superior to the others. Cavazotte, F., Moreno, V., Hickmann, M., (2012) argues that leadership has the power to be able to distinguish between success and failure, both for organizations and for nurses. This understanding has an implicit meaning that leadership is a form of the highest place where he uses his influence to communicate his subordinates to achieve the goals of the organization / company that has been determined.

Emmanuel Akanpaadgi, Matthew Valogo, and Christopher Akaligang, (2014) explains leadership is an attempt to influence others interpersonally through the communication process, to achieve a goal. This understanding illustrates that leadership will be seen clearly what happens when the process of interaction between leaders and subordinates through the development of effective communication. In this case, the leader is always clicking communication to subordinates on various matters relating to the employment or regarding the settlement problem, thus awakened openness between one another which makes the atmosphere more intimate work.

HashimZameer, Shehzad Ali, WaqarNisar, and Muhammad Amir, (2014) defines leadership of a process of social influence (*a social influence proces s to influence people to Achieve a common goal*). This opinion has a very comprehensive explanation, that leadership is not a power, position or rank that is able to control people to do what they want, but leadership is a good attitude, exemplary behavior, polite speech, broad thinking, being flexible and wise in making decisions. Thus leadership is oriented to the environment, how nurses, how patients, how society, how business owners and so forth in achieving a common goal that is welfare. Therefore the leader will not talk about personal, materialistic or command matters, instead he will invite everyone to realize what must be done and what is a good way to achieve a common goal.

Mappamiring, (2015) argue that leadership is a social interaction between leaders and followers , in social interaction both parties can give each other the freedom to use their power to achieve the goals of the social system and personal goals of each. According to this opinion that leadership in fact puts forward the democratic aspect, in which there are elements of freedom in expressing the ability and expertise in achieving goals.

Based on the description of the theory above, in this research leadership is the ability of leaders to influence, motivate and set an example for followers in achieving their goals. The dimensions and indicators used are:

- 1) **Behavioral** Dimensions , with indicators:
 - a. Be a role model
 - b. Inspirator
 - c. Directions
- 2) Dimensions of **Managerial Ability** , with indicators:
 - a. Accuracy in overcoming problems
 - b. Participatory
 - c. Creating good working conditions
- 3) **Supervision** Dimensions , with indicators:
 - a. Giving Guidance
 - b. Provide evaluation

2.4. Compensation

Creating a solid and well-performing work team requires management's ability to build good relations with the work team. One way is to plan a good compensation scheme (Masud Ibrahim and Veronica AduBrobby, 2015). With adequate compensation, job satisfaction will be created which gives rise to work motivation so that effective performance is born.

Marwansyah and YohanesOemar, (2015) stated " *Compensation is the human Resources Management function that deals with every type of reward individuals receive in exchange for performance organizational tasks*". Compensation is the implementation of the human resource management function related to work agreements with nurses in exchange for performance with compensation given. In simple terms compensation is accepted if the nurse fulfills his obligations, namely carrying out the work given and vice versa the company fulfills its obligations which is to compensate the nurse's performance. This implies that there is a mutually interconnected relationship between nurses and business owners, among others respecting each other's roles and functions in order to achieve common goals.

In line with the above view KadekArySetiawan and Ni WayanMujiati, (2016) describe compensation as something that nurses receive as a substitute for their service contribution to the company. Giving compensation is one of the implementation of HRM functions that relate to all types of individual awards as an exchange in carrying out organizational tasks.

Furthermore Haryono (2007) explained that compensation is anything that is received by nurses as a reward for their work. The purpose of the compensation system is to value performance, ensure fairness, retain nurses, obtain quality nurses, control costs, meet regulations. Sedarmayanti surfaced basic purpose why people want to work, and therefore the company should be able to meet their expectations, which is

compensated appropriately and in accordance with the work of nurses. But in reality, many companies consider compensation as one of the biggest burdens, therefore adjustments need to be made in such a way as to reduce the burden, so businesspeople cannot avoid making it so that the salaries of nurses are minimal. Ficke H. Rawung, (2013) explains that:

More specifically, such compensation includes both financial and nonfinancial rewards. Financial rewards include direct payments plus indirect payments in the form of NURSE benefits. Non financial rewards include everything in a work environment that enhances a worker's sense of self respect and esteem by others.

Cascio explained that compensation consisted of financial and non- financial compensation . As we know that financial compensation is given direct wages to the nurse organization that had salary, incentives and bonuses. While non- financial compensation includes everything in work experience that can increase nurse feelings, a sense of respect and respect.

The explanation above, explains the compensation system that occurs in general, where a person gets what he has done based on different levels, although each direct compensation in the form of salary is definitely given, non- financial compensation becomes a different new expectation and makes people more valuable from other people. The following is illustrated by Ficke H. Rawung, (2013).

In detail we can see the compensation system that has been described by Ficke H. Rawung, (2013). Direct financial compensation includes salaries, transportation allowances, bonuses, incentives, holiday allowances, overtime pay, and other direct benefits. Indirect compensation includes promotion of positions, insurance, benefits, and inclusion in share ownership. Whereas non-financial compensation includes program involvement, decision making, policy makers, effective supervision, recognition, training opportunities and participation in maintaining organizational culture.

From some of the above understanding, the authors synthesize that, **compensation is all financial and non-financial giving provided by the organization as a remuneration for the performance that has been done by nurses** . The compensation dimension is:

1) **Dimensions Compensation Financial** which includes indicators:

- a. The amount of salary received
- b. Magnitude of incentives received
- c. The amount of bonus received
- d. Amount of meal allowance received
- e. The amount of money received
- f. Amount of overtime allowance
- g. Magnitude allowance
- h. Amount of holiday allowance
- i. The amount of health benefits
- j. The amount of pension benefits
- k. Amount of annual leave allowance

2) **Dimensions Compensation Non Financial** which includes indicators:

- a. Provision of protection programs
- b. Award level
- c. Career path
- d. Level of training opportunities
- e. Level of recognition

IV. METHODOLOGY

4.1 Method Used

The object of research that becomes the independent variable in this study is leadership and compensation, the intermediate variable is work motivation, while the dependent variable is nurse performance. The nature of this research is descriptive and verification. Descriptive research is research that

aims to obtain a description of the characteristics of variables. The nature of verification research basically wants to test the truth of a hypothesis carried out through data collection in the field. Where in this study will be tested whether leadership and compensation affect work motivation and nurse performance. Considering the nature of this research is descriptive and verification carried out through data collection in the field, the research method used is *descriptive survey* method and *explanatory survey* method. The unit of analysis in this study is the nurses of private clinical medicine institutions. The time period of this research is a *cross section time horizon*, that is information from a portion of the population (sample of respondents) collected directly at the scene empirically with the aim to find out the opinions of some populations towards the object being studied.

According to Muhamad Rizal, M. Syafii Idrus, Djumahir and Rahayu Mintarti, (2014) population is a generalization area that consists of objects / subjects that have certain qualities and characteristics determined by researchers to be studied / examined and then drawn conclusions. While Weston and Gore, (2006) states that the population is a whole group of people, events, or things that researchers want to investigate for research. The sample is part of the number and characteristics possessed by the population (Muhamad Rizal, M. Syafii Idrus, Djumahir and Rahayu Mintarti, 2014)). While Weston and Gore, (2006) states that the sample is a subgroup or part of the population consisting of several selected members of the population, in other words a portion of the population element. Joreskog and Sorbom (2001: 32) in Weston and Gore, (2006) state that the sample size needed for *Structural Equation Model analysis* is at least 200 observations.

The sampling method used in this study is to use probability sampling. According to Weston and Gore, (2006), probability sampling is a sampling method that provides equal opportunities for each element (manager) of the population to be selected as a sample. Then the probability sampling method used in sampling is the proportionate random sampling technique. Meanwhile, according to Weston and Gore, (2006) that the proportionate random sampling technique is sampling where the population elements consist of proportionally smaller elements. While Weston and Gore, (2006) proportionate random sampling is a sampling technique used to determine samples when the object to be examined or data sources are very broad.

V. RESULTS AND DISCUSSION

This chapter explains the results of data analysis that have been carried out based on the research methods described in the previous chapter. The discussion of this chapter begins with an explanation of the data from the research respondents' profiles. Then proceed with a discussion of the results of processing and analysis of data, and ends with conclusions obtained based on data analysis that has been done.

5.1 Results

Based on the distribution of questionnaires as many as 245 samples to the nurses of private clinical medicine institutions in WEST JAVA Province / City that were used as respondents. After collecting the results of filling out the questionnaire by the respondents it turned out that as many as 245 returned (all returned) and all were declared valid.

In this study, the analysis of this study was carried out by the *Structural Equation Model* (SEM) method using a *two step approach*, as proposed by Anderson and Gerbing (1998), namely

- (1) Analysis of the measurement model, which is intended to see the validity and the reliability of each construct (the relationship between latent variables (LV) and dimensions / manifests).
- (2) Structural model analysis, which is intended to study the relationship between constructs (the relationship between LV).

Structural model analysis is carried out with the aim to examine the relationship between latent variables (*Latent Variables* or *LV*) that exist in the research model. This study also tests the various hypotheses proposed and explained in the previous chapter. There are two forms of testing carried out in the structural model analysis, namely the overall model fit test (*GOF*) and the structural model suitability test.

In the overall model suitability test, it has the same steps as the suitability test of the measurement model. The results of this conformity test are in the form of *Goodness Fit of Statistics* (GOF) values. While the structural model suitability test is carried out through an examination of the significance of the estimated

coefficients. If the value of $|t| \geq 1.96$, then it shows that the coefficient is significant. The suitability test for structural model compatibility is the same as the suitability test for the *full model* as shown in Figure 1 and 2 below.

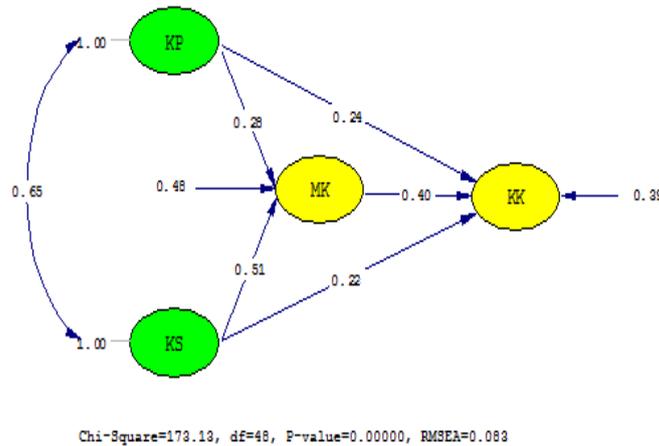


Figure 1 . Structural Model (Standardized)

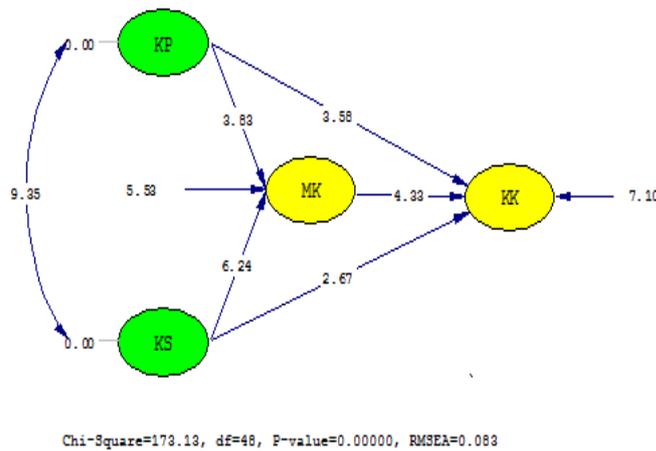


Figure 2. Structural Model (t-value)

Based on Figure 1 and 2 it can be seen the relationship between exogenous variables and endogenous variables. The results of testing the significance of the relationship between latent variables, or the trajectory between two latent variables, can be seen in Table 1 below. In Table 1 the coefficient values generated and the *t value* are shown . If the structural trajectory has a value of $t \text{ value} \geq 1.96$, then the coefficient of the trajectory is declared significant, and if $t \text{ value} < 1.96$, it is concluded that the coefficient of the trajectory is not significant.

Table 1. Significance Between Variables

No	Structural Tracks	Koe f. P ath way	t val ue	t crit eria	U ji res ults
1	Leadership → □ Work Motivation	0 , 2 8	3.8 3	1.9 6	Signific ant
2	Compensation → □ Work Motivation	0 , 5 1	6.2 4	1.9 6	Signific ant
3	Leadership → □ NU RSE Performance	0 , 2 4	3.5 8	1.9 6	Signific ant
4	Compensation → □ NURSE	0 , 2 2	2.6 7	1.9 6	Signific ant

No	Structural Tracks	Koe f. P ath way	t val ue	t crit eria	U ji res ults
	Performance				
5	Work Motivation → □NU RSE Performance	0.40	4.3 3	1.9 6	Signific ant

Source: Data processing results , 2017 (LISREL 8. 80)

5.2. Discussion

5.2.1. Leadership Has a Positive and Significant Effect on Work Motivation

The results of the data analysis with statistical tests proved that the leadership of positive and significant impact on nurse motivation Rural Clinical medicine institution of 0, 28 , the path coefficient shows that the contribution of the direct effect of leadership on job motivation for 7 , 84 % While the contribution of the indirect effect of leadership on nurse motivation is at 9,28 %.

According to YohanesSusanto, (2016) defines motivation is as a person's needs, desires, impulses, impulses. Not many people can give birth to intrinsic motivation, most of the motivation in themselves is always triggered by other factors, such as work getting compensation, making mistakes getting sanctions, diligently studying because of scholarships and so forth. This condition is human instinct in general, so in everyday life external motivation always dominates the birth of internal motivation in the sense of Edwin B. Flippo as an impetus that gives birth to the desire to achieve goals.

According to YopiDwiHariValianto and Tri Yuniati, (2015) motivation is defined as a process to arouse enthusiasm for work to always feel compelled to carry out work to achieve goals. The impulse in question is how the organization is able to meet the needs of life and the tendency to maintain life. This motivational theory emphasizes the basic reasons why someone works and the answer is quite simple, namely the fulfillment of the needs of life of workers and their families. Thus motivation becomes the law of dependency for nurses . Every organization that is able to provide what is needed for the lives of its nurses , by itself the nurses will bind themselves to the organization, they tend to survive and loyal to the organization. However, these conditions depend on the extent to which the organization views its nurses as mere assets or workers.

5.2.2. Compensation Impact Positive and Significant Against Work Motivation

The results of the data analysis with statistical tests proved that the compensation positive and significant impact on nurse motivation Rural Clinical medicine institution of 0,51, the path coefficient shows that the contribution of the direct effect of compensation on NURSE motivation for 26,01 % . While the contribution of the indirect effect of compensation to nurse motivation is at 9,28 %.

Furthermore Emmanuel Akanpaadgi, Matthew Valogo, and Christopher Akaligang, (2014) explained that compensation is anything that is received by nurses as a reward for their work. The purpose of the compensation system is to value performance, ensure fairness, retain nurses, obtain quality nurses, control costs, meet regulations. Emmanuel et.all surfaced basic purpose why people want to work, and therefore the company should be able to meet their expectations, which is compensated appropriately and in accordance with the work of nurses. But in reality, many companies consider compensation as one of the biggest burdens, therefore adjustments need to be made in such a way as to reduce the burden, so businesspeople cannot avoid making it so that the salaries of nurses are minimal.

5.2.3. Leadership and Compensation Together have a Positive and Significant Effect on Work Motivation

The results of data analysis with statistical tests state that leadership, and compensation together have a positive and significant effect on nurse work motivation , with the joint contribution amounting to 52 % ,

while 48 % is influenced by variables other than leadership, and compensation. But partially the most dominant variable influence on work motivation of nurses of Clinical medicine institutions is the compensation variable that is equal to 0,51 with a total contribution of 35,29 %. According to FauzilahSalleh, ZaharahDzulkifli, Wan Amalina, and NurHaizal, (2011) defines motivation is as a person's needs, desires, impulses, impulses. Not many people can give birth to intrinsic motivation, most of the motivation in themselves is always triggered by other factors, such as work getting compensation, making mistakes getting sanctions, diligently studying because of scholarships and so forth. This condition is human instinct in general, so in everyday life external motivation always dominates the birth of internal motivation in the sense of Fauzilahet.all as an impetus that gives birth to the desire to achieve goals.

5.2.4. Leadership Has a Positive and Significant Impact on Nurse Performance

The results of the data analysis with statistical tests proved that the leadership of positive and significant effect on the performance of nurses of Rural Clinical medicine institutions of 0,24 , the path coefficient shows that the contribution of the direct influence of leadership on nurse performance amounted to 5.76 %. While the contribution of indirect leadership influence on nurse performance is 10,92 %. According to Connie, (2013) "performance can be improved by rectifying unwanted behavior through constructive feedback". It means that performance is not born by itself, the company has an obligation how to foster and develop nurses to behave as expected. Of course the provision of regular training is one of the efforts that can be done, but the company must be able to package the training program as part of the right target and appropriate. So the results of the training can significantly improve the ability of NURSEs to complete various tasks.

5.2.5. Compensation Impact Positive and Significant on Nurse Performance

The results of the data analysis with statistical tests proved that the compensation positive and significant effect on the performance of nurses of Clinical medicine institutions of 0,22, the path coefficient shows that the contribution of the direct effect of compensation to the nurse's performance of 4,84 % . While the contribution of the indirect effect of compensation to the nurse's performance is equal to 9,86.

Cavazotte, F., Moreno, V., Hickmann, M., (2012) stated " *Compensation is the human Resources Management function that deals with every type of reward individuals receive in exchange for performance organizational tasks*". Compensation is the implementation of the human resource management function related to work agreements with nurses in exchange for performance with compensation given. In simple terms compensation is accepted if the nurse fulfills his obligations, namely carrying out the work given and vice versa the company fulfills its obligations which is to compensate the nurse's performance. This implies that there is a mutually interconnected relationship between nurses and business owners, among others respecting each other's roles and functions in order to achieve common goals.

5.2.6. Work Motivation Has a Positive and Significant Effect on Nurse Performance

The results of the data analysis with statistical tests proved that nurse motivation positive and significant effect on the performance of nurses of Clinical medicine institutions of 0,40, the path coefficient shows that the contribution of the direct effect of nurse motivation on nurse performance by 16 %. While the contribution of the indirect influence nurse motivation on nurse performance is equal to 13,91 %.

In essence, human behavior is motivated by the desire to get something that is the goal of the activity. The word motivation comes from the Latin word "*Motive*" which means encouragement, the driving force or the strength contained in the organization that causes the organization to act or act. Furthermore, absorbed in English *motivation* means giving a motive, the emergence of motives or things that cause encouragement or circumstances that cause impetus. Biatna Dulbert, (2008) explains the motive as an

encouragement of needs in nurses that need to be met so that the nurse can adjust to his environment, while motivation is a condition that can move nurses to be able to achieve the goals of their motives.

5.2.7. Leadership , Compensation and Work Motivation Together have a Positive and Significant Effect on Nurse Performance

The results of data analysis with statistical tests state that leadership, compensation and work motivation together have a positive and significant effect on nurse performance , with large contributions jointly amounting to 61 % , while 39 % are influenced by variables other than leadership, compensation and work motivation . But partially the most dominant variable influence on the performance of nurses of Clinical medicine institutions is nurse motivation variable that is equal to 0,40 with a total contribution of 29,91 % .

Cavazotte, F., Moreno, V., Hickmann, M., (2012) defines leadership of a process of social influence (*a social influence process to influence people to Achieve a common goal*). This opinion has a very comprehensive explanation, that leadership is not a power, position or rank that is able to control people to do what they want, but leadership is a good attitude, exemplary behavior, polite speech, broad thinking, being flexible and wise in making decisions. Thus leadership is oriented to the environment, how nurses, how patients, how society, how business owners and so forth in achieving a common goal that is welfare. Therefore the leader will not talk about personal, materialistic or command matters, instead he will invite everyone to realize what must be done and what is a good way to achieve a common goal.

Ayesha Aslam, Amna Ghaffar, Tahleel Talha, and Hina Mushtaq, (2015) argue that leadership is a social interaction between leaders and followers , in social interaction both parties can give each other the freedom to use their power to achieve the goals of the social system and personal goals of each. According to this opinion that leadership in fact puts forward the democratic aspect, in which there are elements of freedom in expressing the ability and expertise in achieving goals.

VI. CONCLUSION

The results of the study pointed to k's that if the leadership with managerial capabilities and compensation with financial compensation were able to put together and the synergy it will be able to provide a positive and significant impact on increasing nurse motivation, especially in the dimension of growth in the Rural Clinical medicine institution. Based on these findings, managerial implications that can be applied to optimize nurse work motivation by increasing compensation by taking into account the most dominant dimension, namely the financial compensation dimension, so that Clinical medicine institutions must be able to maintain especially at the level of the amount of money transportation received, and still be able to maintain the high level of the level of the amount of salary received, the amount of incentives received, the amount of bonus received, the amount of meal allowance received, the amount of overtime benefits, the amount of job allowance, the amount of holiday allowances, the amount of health benefits, pension benefits, and the amount of annual leave benefits.

The results showed that if leadership with managerial skills, compensation with financial compensation, and work motivation with growth dimensions on nurses were able to be integrated and synergized, they would be able to provide a positive and significant effect on improving nurse performance, especially in the quantity of work at Clinical medicine institutions, both at the level of speed of completion of work beyond the standard time, also at the level of work results that are in accordance with the targets set and the suitability of work results with the allocation of time in completing work. Based on these findings, managerial implications that can be applied Clinical medicine institutions to optimize nurse performance by increasing nurse motivation to pay attention to the most dominant dimension, namely growth dimensions, so that Clinical medicine institutions should be able to maintain the motivation of its nurses in terms of level of recognition for the work, as well as reward high performance level, engagement in work, kesesuaian work with work ability, and development potential. The most dominant variable affecting nurse performance directly is the

compensation variable. While the role of work motivation variables is as *full mediating* for leadership variables and compensation for nurse performance.

REFERENCE

- 1) Abdul Hameed, Muhammad Ramzan, Hafiz M. KashifZubair, Ghazanfar Ali, and Muhammad Arslan, (2014), Impact of Compensation on NURSE Performance (Empirical Evidence from the Clinical medicine institution Sector of Pakistan) . *International Journal of Business and Social Science Vol. 5 No. 2*.
- 2) AgungWidhiKurniawan, (2012), The Effect of Leadership and Human Resource Development on Job Satisfaction, Work Motivation and NURSE Performance at SULSELBAR Clinical medicine institution , *Equity; Journal of Economics and Finance, Achealthylation No. 80 / DIKTI / Kep / 2012. ISSN 1411-0393*
- 3) AndiAfrizal, (2012), The Effect of Leadership Style on Work Motivation and Job Satisfaction and Its Impact on NURSE Performance (BMT BinalhsanulFikri Yogyakarta case study), *Indonesian Sharia Economics Journal, Vol. V, No. 2, December 2015 / 1436H* .
- 4) ArifPartonoPrasetio, SyahrizalSiregar, and BachruddinSalehLuturlean, (2015), The Effect of Leadership Towards NURSE Performance in The Human Resources Department at The PLN West Java and WEST JAVA Distribution Office, *International Journal of Basic and Applied Sciences, 4 (1) 149-155*
- 5) Ayesha Aslam, AmnaGhaffar, TahleelTalha, and HinaMushtaq, (2015). Impact Of Compensation And Reward System On The Performance Of An Organization: An Empirical Study InClinical medicine institution Sector Of Pakistan. *European Journal of Business and Social Sciences, Vol. 4, No. 08, PP*
- 6) Biatna Dulbert, (2008), Analysis of Leadership Style Factors in Work Ethic Factors in Organizational Performance that Has Implemented SNI 19–90001–2001, *Journal of Standardization Vol. 9. 2008.319 - 325*.
- 7) Cavazotte, F., Moreno, V., Hickmann, M., (2012), Effects of Leader Intelligence, Personality and Emotional Intelligence on Transformational Leadership and Managerial Performance, *The Leadership Quarterly, Vol 23, pp. 443 - 455*.
- 8) Connie, (2013), *The Influence of Professional Competence, Work Motivation, and Innovation on The Performance of Physics Teachers , 2nd International Seminar on Quality and Affordable Education (ISQAE 2013)*.
- 9) Emmanuel Akanpaadgi, Matthew Valogo, and Christopher Akaligang, (2014), An Assessment of the Effects of Leadership on the Motivation of NURSEs towards the Achievement of Organizational Goals: A Case Study of the CLINICAL MEDICINE INSTITUTION in the Bolgatanga Municipality, *European Journal of Business and Management, ISSN 2222-1905 (Paper) ISSN 2222-2839 Vol.6, No.24*
- 10) Erwin Dinata, YohanesOemar and Machasin, (2014), The Effect of Leadership and Compensation on the Performance of Field Counseling Officers (PPL) in the Siak District Food and Discharge Management Implementing Agency, *Journal of Business Management, Vol. VI, No. 2, May 2014*.
- 11) FauzilahSalleh, ZaharahDzulkifli, Wan Amalina, and NurHaizal, (2011), The Effect of Motivation on Job Performance of State Government NURSEs in Malaysia, *International Journal of Humanities and Social Science Vol 1 No 4*
- 12) Ficke H. Rawung, (2013), The Effect of Leadership on The Work Motivation of Higher Education Administration NURSEs (Study at Manado State University), *IOSR Journal of Business and Management (IOSR-JBM), ISSN: 2278-487X, Volume 15 , Issue 1 (Nov. - Dec. 2013), PP 28-33*
- 13) Haryono , (2007) , Statistics for Business and Industry, Handout Subjects Business and Industrial Statistics , *Master M anagement of Technology, ITS , Surabaya* .
- 14) HashimZameer, Shehzad Ali, WaqarNisar, and Muhammad Amir, (2014), The Impact of the Motivation on the NURSE's Performance in Beverage Industry of Pakistan, *International Journal of Academic Research in Accounting, Finance and Management Sciences Vol. 4, No.1, pp. 293–298 E-ISSN: 2225-8329, P-ISSN: 2308-0337*

- 15) IbojoBolanleOdunlami and Asabi Oludele Matthew, (2014), Compensation Management and NURSEs Performance in the Manufacturing Sector, A Case Study of a Reputable Organization in the Food and Beverage Industry, *International Journal of Managerial Studies and Research (IJMSR) Volume 2, Issue 9, PP 108-117 ISSN 2349-0330 (Print) & ISSN 2349-0349*
- 16) IrumShahzadi, Ayesha Javed, Syed ShahzaibPirzada, ShaguftaNasreen, and Farida Khanam, (2014), Impact of NURSE Motivation on NURSE Performance. *European Journal of Business and Management ISSN 2222-1905 (Paper) ISSN 2222-2839, Vol.6, No.23*
- 17) I GedeAgusAry Dharma, (2013), The Effect of Leadership and Compensation on the NURSE's Spirit and NURSE Performance at PT. United Indobali Denpasar, *E-Journal Management at Udayana University, (5), Vol. 2. n. 1. January 2013, ISSN 2302-8912*
- 18) KadekArySetiawan and Ni WayanMujiati, (2016), The Effect of Leadership Style and Compensation on NURSE Performance of PT. Astra Honda Nusa DuaBadung Regency, *E-Journal Management at Udayana University, Vol. 5, No. 12, 2016: 7956-7983, ISSN 2302-8912 .*
- 19) Mappamiring , (2015) , Effect of Cultural Organization, Leadership and Motivation of Work on the Performance of NURSEs (Studies in Islamic Clinical medicine institution in Makassar) , *International Journal of Academic Research in Business and Social Sciences, Vol. 5, No. 12 , ISSN: 2222-6990 .*
- 20) Mahmood, Iqbal and Samsaa, 2014, The Relationship between Role Ambiguity, Competency and Person-Job Fit with the Job Performance of NURSEs in the Service Sector SMEs in Malaysia. *Business Management Dynamics, Vol.1, No.2 .*
- 21) Marwansyah and YohanesOemar, (2015), The Effect of Leadership and Compensation on Work Motivation and Its Impact on the Performance of NURSEs of PT. OCBC NISP, Tbk., Pekanbaru Branch, *Journal of Management Box Vol. VII, No. 2, 2 May 2015*
- 22) Masud Ibrahim and Veronica AduBrobbe, (2015), Impact Of Motivation On NURSE Performance The Case Of Selected Micro Finance Companies In Ghana, *International Journal of Economics, Commerce and Management United Kingdom Vol. III, Issue 11, ISSN 2348 0386*
- 23) Mohammed OwaisQureshi and Syed RumaiyaSajjad , (2015) , An Empirical Analysis of the Impact of Compensation on Job Performance and Work-Family Conflicts in the Kingdom of Saudi Arabia - "A Correlation Model" , *European Scientific Journal Edition Vol. 11, No.4 ISSN: 1857 - 7881 (Print) e - ISSN 1857- 7431.*
- 24) Muhamad Rizal, M. SyafiieIdrus, Djumahir and RahayuMintarti, (2014), Effect of Compensation on Motivation, Organizational Commitment and NURSE Performance - Studies at Local Revenue Management in Kendari City , *International Journal of Business and Management Invention, ISSN 2319 - 8028 , Vol.3, PP 64-79.*
- 25) Muhammad Sulthan, HariSusanto and SendangNurseta, (2013), The Effect of Leadership and Compensation on Performance Through Increasing Work Discipline in NURSEs at the Production Section GenthongGatri Semarang, *Diponegoro Journal of Social Politics, 2013, p. 1-9*
- 26) MumuhMulyana, (2015), Performance Evaluation and Development of PRIVATEClinical medicine institutionNURSEs in WEST JAVA Province, Department of Management of the Bogor Institute of Agriculture Graduate School.
- 27) NegashRijalu, ShimelisZewude and RetaMegersa, (2014), The Effect of Compensation on NURSEs Motivation: In Jimma University Academic Staff, *Journal of Business Management and Accounts ISSN 2315-6899, Vol. 3*
- 28) Ninda and DadangIskandar, (2015), The Effect of Transformational Leadership on Work Motivation (Case Study: NURSE Human Capital Center (HCC) of PT. Telkom Japati Bandung), *e-Proceeding of Management : Vol. 2, No. 2, August 2015 . ISSN 2355-9357.*
- 29) Reni, (2015), The Effect of Leadership on NURSE Motivation at UD. Surya Phone in Samarinda, *e-Journal of Business Administration, 2015, 3 (4): 966-978, ISSN2355-5408.*
- 30) RijaluNegash, ShimelisZewude, and RetaMegersa, (2014), The Effect of Compensation on NURSEs Motivation: In Jimma University Academic Staff, *Basic Research Journal of Business Management and Accounts, ISSN 2315-6899, Vol. 3 (2) pp. 17-27.*
- 31) Sheila WambuiNjoroge&JosephatKwasira, (2015), Influence of Compensation and Reward on Performance of NURSEs at Nakuru County Government, *IOSR Journal of Business and Management (IOSR-JBM) e-ISSN: 2278-487X, p-ISSN: 2319- 7668. Volume 17, Issue 11 .Ver. I, PP 87-93.*

- 32) Shook et al., (2006), AN Assessment of the Use of Structural Equation Modeling in Strategic Management Research , *Strategic Management Journal, USA*.
- 33) SunarjiHarahap, (2016), The Effect of Islamic Leadership and Work Motivation on NURSE Performance at PT. Clinical medicine institutionSyariahMandiri, Tbk., Medan Sukaramai Sub-Branch Office, *Journal of Human Fallah, Vol. 2, No. 2, July-December 2016*.
- 34) Weston and Gore, (2006), *A Brief Guide to Structural Equation Modeling*, The Counseling Psychologist, Vol. 34 No. 5
- 35) YohanesSusanto, (2016), Leadership and Compensation for Work Motivation and Its Effect on NURSE Performance of Savings and Loan Cooperatives in Palembang City, *Sharia Economics Journal, Vol. 2, February 2016 Edition, ISSN 2461-002x*.
- 36) YopiDwiHariValianto and Tri Yuniati, (2015), The Effects of Leadership, Work Motivation and Compensation on NURSE Performance CV. SahabatMandiri, *Journal of Management Science and Research, Vol. 4, No. 8, August 2015*.