



# Determination of Employee Performance Culture in the Perspective of Human Capital Management Its Impact on Services at Hospital

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Received: January 15, 2025  
Revised: February 03, 2025  
Accepted: February 19, 2025

## Abstract

The purpose of this study was to determine and analyze the determination of employee performance culture and its impact on services at Aloe Saboe Gorontalo Hospital, including (a) competence, (b) management and (c) service incentives. This research method is a qualitative research type. The results of the study indicate: (1) the determination of employee competency development as human capital at the hospital is very possible because general practitioners and dentists are still dominant to be studied. Nursing staff and non-medical staff are still limited in quantity and quality. This limitation is not only in terms of quantity of manpower, but this limitation qualitatively still needs to be improved, both intellectual ability, performance, morals, attitudes, behavior, personality, and mindset as human capital in providing services, even though they have gone through "credentials". (2) Management as a dominant determinant influences the improvement of employee performance as human capital, even more so as a driver of controlling resources owned by the hospital. (3). Service incentives as a determinant motivate and build employee performance in carrying out service tasks at the Hospital. The use of service incentives as an effective instrument to improve service quality. The management of the hospital implements service incentives very appropriately considering the increasing development of competing hospitals with various services offered and have begun to use incentives as a means of improving services.

**Keyword:** Performance Culture, Employees, Human capital, Service.

## 1. Introduction

In public sector organizations, various determinants have an impact on employee performance culture, including competence, management, and other determinants such as incentives and motivation (El-Ghalayini, 2017; France et al., 2002; Kalogiannidis, 2021). Employee competence, management, work motivation, intellectual factors, morals, behavior, attitudes, performance, and others are the core of human capital inherent in an employee (Akinyemi, 2009; Soni, 2004; Armstrong, 2006; Wang et al., 2024). Human capital can be interpreted as the accumulation of various abilities possessed by an employee that are needed by a public sector organization in order to provide excellent service to its customers (Berman et al., 2021). However, conditions in the field are different, there is still a low quality of employee performance in the implementation of public services today, caused by conservative factors, too thick with political nuances and wasteful (Comon, 1993). In addition, the inability of the public bureaucracy to carry out its duties and functions optimally in public services includes a lack of capability, professionalism, and competence (Tjokrowinoto, 2001). Performance culture in public services is an absolute must, as one of the efforts to improve employee performance, especially in the hospital environment, demanding professionalism in carrying out service tasks and functions optimally. Various problems that arise in relation to bureaucratic performance and employee performance culture in health services, especially at the hospital. Prominent phenomena related to employee performance culture, both medical personnel and doctors as human capital in health services can be described.

From the management side, the top bureaucratic leaders structurally do not meet educational qualifications (general practitioners), while doctors quantitatively average specialist qualification positions and even more than that. In public sector organizations such as hospitals, the position of top management is very strategic, where humans as human capital management are required to have more knowledge or equal to other people they lead (Knies et al., 2024). Moreover, at the line level, many specialist doctors and medical personnel are experienced. In addition, there are still some employees who do not meet the standards of competence, skills, mentality, both nursing/non-nursing staff and non-medical staff. This is evident from many patients and members of the community who use the service feeling dissatisfied with the health care services provided by the Aloe Saboe Gorontalo Hospital. The dissatisfaction of patients and families, they cannot do much, if there is slow handling of patients, and limited time available to consult with doctors or nurses who handle the care. Especially for patients who have poor cards or use other cards. The hospital seems to be still trapped in routine tasks, but has not been able to evaluate the performance of its employees, can provide a special space for employees to participate in activities in the form of training in an effort to increase productivity, and quality of service. Employees as human capital management are determinants of the progress and decline of an organization, especially since the the hospital is a public bureaucracy that is the dream and trust of the all community.



Another determination that is no less important has an impact on the culture of employee performance that is not optimal, namely the incentives/compensation for employees and doctors are not completed on time, even the payment is indicated to be less proportional without considering experience, work intensity, and risk in carrying out service tasks. So that this condition has an impact on motivation and comfort in working.

## 2. The Art of Research

### 1. Research Approach

Before discussing the above problems, the author will first describe the research method used, namely the qualitative approach method. Bogdan and Taylor (1975), define qualitative methods as research procedures that produce descriptive data in the form of written or spoken words from people and observed behavior. This approach is directed at the background and individuals holistically (whole).

### 2. Research Focus and Instruments

The focus of the research is the determination of employee performance culture in the perspective of Human Capital Management and its impact on services at Aloei Saboe Hospital Gorontalo, including: (a) competence. (b) management and (c) service incentives. While the research instrument, or the main tool for collecting data is the researcher himself. (Lincoln & Guba, 1985).

## 3. Method

Data analysis in this study was conducted from the beginning of data collection activities until the discovery of the theme. In analyzing the data, this study refers to the theory put forward by Miles and Huberman (1987) with an interactive model consisting of three analysis components, namely "data reduction, data presentation and conclusion drawing". This analysis was conducted in an interactive form on the main components, as presented in the following figure:

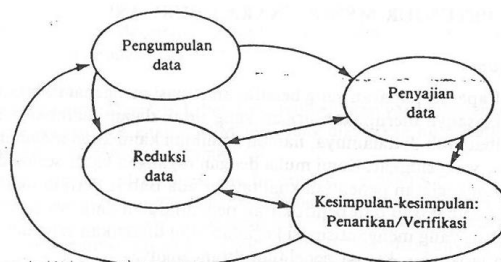


Figure 1. Research Data Analysis Model (Miles & Huberman, 1987)

Data validity is the degree of trust or truth of research results. According to Lincoln and Guba (1985), in qualitative research, reality is complex and dynamic. To obtain quality research results, data validity is needed. The level of data validity will be determined by four factors, namely: (1) degree of trust (credibility), (2) transferability (transferability), (3) dependability, and (4) certainty (confirmability).

## 4. Result

### 1. Employee Competence

Hospitals as public bureaucracies are required to be able to build a culture of employee performance in service, but various determinants influence it. including: employee competence. Competence of personnel, in this case employees are very strategic in their position in obtaining quality service. The types and number of employees/personnel at Aloei Saboe Hospital, Gorontalo in 2019 were 1,016 employees, consisting of: (a) medical personnel, totaling 72 people (b) paramedical care & non-nursing personnel 541 people. and (c). non-medical personnel totaling 403 people. (Aloei Saboe Hospital Profile, 2016)

These three types of personnel as human resources have a very strategic position. One theory that pays great attention to the position of "humans" (employees) in an organization is the theory of human capital management. Armstrong (2006) said that managing people activities is always closely related to the concept of human capital management (HCM). Human capital for human resources in public sector organizations can be utilized by employees whose main task is to provide public services delivery in the best possible way. (cheap, friendly, simple, efficient, effective, fast and accurate). In the perspective of human capital management, the human aspect is viewed as assets or capitals (Soni, 2004). Humans as human capital, their existence in the organization must be considered and treated better and more carefully by the organization compared to other capitals. (Akinyemy, 2009), (Lindgren, 2005), (Soni, 2004). If the human capital aspect does not receive more attention from the organization's leaders compared to other capitals aspects, their existence is likely to be dangerous for the organization.

Medical personnel (doctors) are functionally concentrated on patient services, whether in the ER, clinic, visit, laboratory, and radiology. Nursing and non-nursing personnel, their concentration is on patient services in the room. Non-medical personnel are very strategic for the smooth administration and other management to support the quality of service needed, both by

medical personnel and nursing/non-nursing personnel. The working relationship of the three personnel as human capital management at the hospital can be presented as follows:

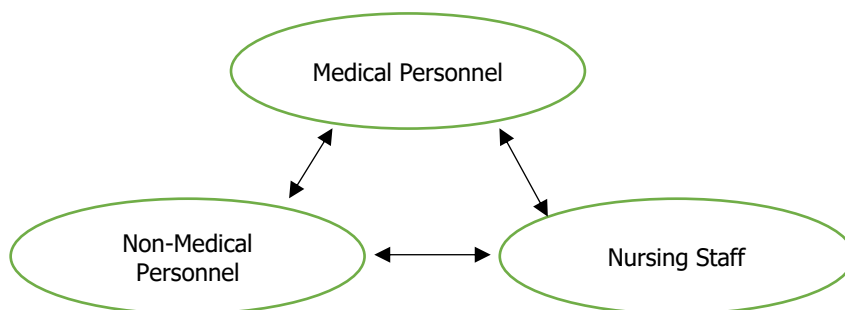


Figure: 2 Hospital Workforce Relations

## 2. Service Management

Management as one of the determinants that has an impact on improving employee performance, even more than that as a driver in controlling the resources owned by the hospital. To build a culture of employee performance as human capital in hospital services is not only concentrated on certain tasks, but more broadly on all lines. Therefore, employee performance is a reflection of the performance of the institution, in this case the hospital. To achieve optimal performance, the management of the hospital can build a humane kinship relationship (human relations) between hospital management and employees, hospitals and the community, employees and the community, or vice versa. Hospital service management has unique characteristics and complex problems. This phenomenon according to Terry, (2003:9) is an activity, the implementation of managing. Individuals who become managers handle new tasks that are entirely managerial. Hospital Management is faced with tough and complex challenges. Fundamentally, the tough challenges that always face the leaders of this organization include their level of ability to carry out management or carry out administrative processes properly and correctly, in providing services to those who need them (Prett, Plamping & Gordon, 2007). Public services are carried out by hospitals, the form of which cannot be separated from 3 types of services, consisting of; (1) oral services, (2) written services and (3) services in the form of actions (Moenir, 1995). Services in the form of actions mean services such as those carried out at the hospital in providing health services to the community.

Table 1. Minimum Hospital Service Standards

No	Indicator	Standard Terms
1	Inpatient Care Providers	a. Dr. Specialist b. Nurses with a minimum education of D3
2	Doctor in charge of inpatient care	100%
3	Availability of Inpatient Services	a. Child b. Internal diseases c. Nurse d. Surgery
4	Specialist Doctor Visiting Hours	08.00 s/d 14.00 (Every Working Hour)
5	Post-operative Infection Incident	Maximal 1,5 %
6	Nosocomial Infection Incident	Maximal 1,5 %
7	There were no incidents of patient falls resulting in disability/death.	100%
8	Patient death >48 hours	0,24%
9	Forced return home incident	Max 5 %
10	Customer satisfaction	90%

According to observations made by Betancourt, Green & Carrillo in (Carrizales, 2008:2) stated that there are at least 3 major challenges that must always be anticipated by public sector organizations (including hospitals) as providers in providing services to the community, namely; (1) a lack of diversity in leadership and the workforce, (2) Systems that are poorly designed to meet the needs of diverse populations, and (3) poor communication between providers and patients. These three obstacles are common and often faced by health service institutions, including the hospital. Therefore, in facing challenges like this, the hospital as a public organization prioritizes the principles of transparency and good management. Transparency as part of the



principles of good governance is to create an open and good public sector organization. Moreover, The Hospital as the pride of the community, should formulate a guideline for implementing medical service actions as a permanent procedure in the form of minimum inpatient service standards with the aim of achieving optimal service and preventing human error. The minimum service standards in question can be described as follows:

Viewing the data in table 1 fixed procedure as a minimum inpatient service standard attached to each treatment room in order to achieve customer satisfaction. This service management is a good policy for medical personnel and nursing staff in carrying out their duties. However, hospital management still tends to be trapped in static and abstract communication symbols, so that it seems that nursing staff are lulled by routine tasks that ignore other tasks. Moreover, even though the responsibility of nursing staff is optimal, but without being supported by supporting facilities and infrastructure for services in the treatment room, it will definitely have an impact on the quality of service. The condition of the room facilities, both physical and non-physical as part of the service should be a concern for hospital management. To improve employee performance, it is not always limited to direct interaction between medical personnel and nursing staff in providing services, but how the management of Aloe Saboe Hospital can plan the procurement of medical equipment administratively to support and achieve excellent service performance.

Procurement management is a demand of institutional needs, especially hospitals as public sector organizations. Procurement of medical equipment is administratively very urgent for use by specialist doctors when serving patients in every polyclinic or in work units in the hospital environment. Procurement management conditions like this can be assumed to be influenced by both internal and external determinations. The condition of employee performance culture as described here, if observed, is none other than caused by organizational control management that has not been directed. Therefore, management principles become important in the framework of achieving targets and objectives. Gullick (in Faried Ali, 2012) states that the principles of management are (a) Planning, (b) organizing, (c) Staffing, (d) directing (e) coordinating (f) reporting, and (budgeting).

Viewed from the perspective of employee motivation in the context of management and administration, the most important is the principle of "directing". This directing principle is how a leader or manager provides guidance, controls and directs subordinates properly so that they work according to the specified requirements in order to achieve organizational goals, especially in the service process. Theoretically, it has been stated that one of the main characteristics of a public sector organization is that it is an institution whose products are not in the form of goods or materials, but in the form of services often referred to as public services (Pratt, Plamping, & Gordon, 2007). In carrying out service tasks, hospital management faces many challenges. Furthermore, Pratt, Plamping & Gordon (2007) said that in order to face these challenges, a leader of a public organization, including a hospital, must do two main things, namely: (1) hierarchically be able to account for policies and implementation of his duties to the leaders above him. (2) Must be able to develop personal competence and provide motivation for employees as subordinates, so that their personal works performance is always in prime condition in order to provide quality and satisfying services. In the paradigm of quality public service management or excellent services, it is termed as customer-driven government (LAN-RI, 2003). This means a form and process of providing public services based on satisfaction, both to stakeholders, customers and citizens.

### 3. Employee Service Incentive

Hospital management has programmed service incentives to build a culture of employee performance as a means of promoting service. Providing incentives as a hospital management policy motivates employees to carry out their duties well, in order to achieve optimal service performance. Building a culture of performance in hospitals has been initiated since 2012. The implementation of a service incentive system is a strategic and appropriate step to improve employee performance in hospital services. Whatever the reason is with the agenda of organizing bureaucracy without being accompanied by the provision of incentives, surely any changes made will not get significant performance improvements or results. This step is the same as Osborne and Gaebler (2005:319) who said that orders are sometimes needed. But in today's world where workers are quite knowledgeable, "incentives" are often more "effective". The application of incentives for employees in hospitals will have motivation and targets to get concessions, rewards and punishments. An important principle of implementing an incentive system is that high performance achievement must be given a decent reward. While poor performance is given a fair and humane punishment. According to Mahmudi (2007:169) the implementation of a reward-oriented incentive system needs to be developed, because the reward system will encourage management to treat and place employees in an honorable position. Meanwhile, the punishment system tends to make employees subordinate and "inferior". However, in certain conditions, punishment cannot be abandoned because it can be used as a means of education and introspection to improve performance in the future. Miral Metawe.et.al (2005) studied "Problems with the implementation of performance measurement systems in the public sector where performance is linked to pay: a literature review drawn from the UK". This material examines the relationship between strategy and daily actions that occur in companies connecting reward programs to employees. The concept of reward and punishment is closely related to the performance measurement system with economic benefits, such as strategic control to increase productivity by monitoring employee activities and influencing their attitudes.

The concept of reward and punishment is the same as Galtung's view (1992:36) which explains three types of power over others, namely ideological power, "remunerative" power (incentives), and "punitive" power. These three types of power are explained as follows: (1) ideological power, the basis of which is persuasion and normative power. Therefore, someone who

has performance has great persuasive power to instill ideological influence. (2) Remunerative power (incentive) means giving many results or benefits (rewards). (3) Punitive power means the power to punish. (low performance)

In relation to the above theories that the provision of rewards and punishments in hospitals cannot be separated from performance management, it is also related to assessing performance, both employee performance, group performance, and organizational performance and how the mechanism for giving rewards for such performance. Performance assessments so as not to get caught up in the subjectivity of assessments, especially personal performance, it is necessary to understand the concept of work performance. Work performance has indeed been put forward by a number of experts, including by Lloyd Allard (in, Jeddawi, 2008:27), who stated that work performance assessments can be seen from a person's persistence, honesty, and dedication to what he does.

Table: 2 Distribution of Hospital Admissions

Type of Receipt	2014	2015	2016	2017	2018	2019	Total
BLUD Receipts	37,029,926,677	43,010,355,212	47,804,922,895	50,045,890,345	69,218,627,120	77.564.909.067	324,674,631,316
APBD Receipts	13.123.896.890	25,135,617,707	23,838,243,578	26,155,644,798	26,471,801,194	27.564.150.111	129,165,457,388
Amount of Receipts	37,029,926,677	68,145,972,919	71,643,166,473	76,201,535,143	95,690,428,314	105.129.059.178	453,840,088,704

Observing the empirical conditions of the application of service incentives and the development of income distribution by the management of the Aloei Saboe house is relevant to the results of Daniel K Benjamin's research, et.al (2007) with the theme Organization and incentives in the age of sail. The purpose of this study examines the existence of the British Navy (AL) for a century, claiming its shipping activities were the most successful in the bureaucracy at that time. The results of the study show that the reward program was carried out and convincingly could be measured based on performance, namely that a sailor could demonstrate the skills, attitudes and behavior of the organizational structure/bureaucracy of the British Navy's shipping, from landmen to ordinary classes to expert classes. Related to the results of the study, it would be more comprehensive if the management of the hospital, namely managers and employees when carrying out their duties, could provide achievements in the form of real work productivity. According to Sinungan (2000:12) work productivity as the relationship between real or physical results (goods or services) with actual input. Meanwhile, Klingner & Nanbaldian (in Gomes, 2003:160)) stated that productivity is employee effort, supported by high motivation, with employee ability, which is obtained through training. Increased work productivity means good performance, will be feedback for employee effort or motivation in the next stage. So the service incentive system approach is one of the determinants influencing employee performance at Hospital. The incentive system approach as a form of reward has great value for employee motivation and work productivity. Employees usually act for one reason, to achieve their main goal, the goal of fulfilling their needs. Fulfilled needs will automatically give rise to a spirit that encourages employees to do their best for patient service. So the position of service incentives is one of the important determinants for building an employee performance culture in services at Hospital.

## 5. Discussion

From the description, the position of employee competence as human capital in hospital services is very strategic and determines the progress of the organization. While on the other hand, non-medical personnel are still dominated by SLTA/D1 personnel totaling 216, consisting of 116 civil servants (PNS), 100 honorary staff. For undergraduate personnel, there are 76 people, consisting of 42 PNS, 34 honorary staff, while postgraduates are only 11 people (RSAS Profile, 2016). Non-medical personnel are very strategic for the smooth running of administration and other management to support the quality of service. In the human resource development system, hospital management tends to ignore non-medical personnel. In fact, non-medical personnel are more dominated by SLTA graduates whose managerial abilities are certainly limited. Meanwhile, undergraduate and postgraduate personnel still need to improve their capacity building, both in terms of education level, intellectual abilities, especially special training related to hospital services and management. Therefore, Farazmand (2004:11) explains that in developing domestic human resource capacity, it also promotes the supporting role of the government and the type of knowledge to support its effective government performance. Therefore, Senge (1996) suggests that the fifth discipline that needs to be built in a learning organization is to accustom each member of the organization to think systematically (systematic thinking), not to think individually or in a compartmentalized manner, because basically each member of the organization has the same goal, namely to achieve organizational goals.

To achieve the fifth discipline, the other four disciplines are needed, namely: (1) having competence. (2) mental model. (3) building a vision. (4) learning team (5) building a way of thinking and acting systematically. To build the fifth discipline, it will be more comprehensive if in organizational management, managers and employees when carrying out their duties can provide achievements in the form of real work productivity, both physical and non-physical. If this is the way or there is consistency from hospital management to improve the competence of human resources, both medical personnel, nursing/non-nursing personnel, and non-medical personnel, then building a culture of employee performance in services from the perspective of



human capital management (HCM) at Aloe Saboe Gorontalo Hospital will be achieved according to the vision, mission and goals of the organization. If this is realized, it will certainly have implications for greater public trust and satisfaction for the management of the Aloe Saboe Gorontalo Hospital institution.

In addition, for the benefit of the service process at the Aloe Saboe Gorontalo Hospital, coordination is needed as part of the management function between work units in dealing with complicated and complex problems. So that the hospital must be managed in an integrated, professional, and credible manner in order to achieve excellent service that can provide a sense of satisfaction for the community using the service. Such a complicated form and pattern of service is impossible to achieve well, if not supported by quality management and personal competence from the employees who carry out the service in question. To achieve this hope is very much determined by the management determinant of how to motivate and improve the culture of employee performance in the perspective of human capital. Employees as human capital personal competence in the form of knowledge, expertise, attitudes and behavior possessed by an employee as an apparatus is used as an element of assessment of service quality. Personal competence possessed by an employee who is positioned as a public servant in the process of providing service to the community users in this modern era is very important and absolutely needed.

## **6. Conclusion**

Determination of employee competency development as human capital at the hospital in Gorontalo is very possible because general practitioners and dentists are still dominant to be studied. Nursing staff and non-medical staff are still limited in quantity and quality. This limitation is not only in terms of quantity of manpower, but this limitation qualitatively still needs to be improved, both intellectual ability, performance, morals, attitudes, behavior, personality, and mindset as human capital in providing services, even though they have gone through "credentials". Management as a dominant determinant influences the improvement of employee performance as human capital, even more so as a driver of controlling the resources owned by the hospital. Service incentives as a determinant of motivating and building employee performance as human capital in carrying out service tasks at the hospital. The use of service incentives as an effective instrument to improve service quality. The management of the hospital implements service incentives very appropriately considering the increasing development of competing hospitals with various services offered and have begun to use incentives as a means of increasing service utilization. There are several points that may be useful for hospital management, for example: First, medical personnel must be evenly distributed and proportional, supported by civil servant nurses whose procurement is quantitatively increased, the need for outsourcing and other nurses together with non-medical personnel to have their capacity increased (capacity building) through programmed activities. Second, hospitals as public organizations and more trusted by the community need to build a tripartite relationship between management and employees, management and the community, and employees and the community (MPM) and supported by high enthusiasm in managing all potentials in the hospital environment, both structurally, resources, planning and other things including management information systems (SIM) for the sake of efficiency and effectiveness of service. Third, hospitals need to implement service incentives with the aim of improving performance, motivation, work productivity, therefore at the implementation level it needs to be improved, by adhering to the principles of fairness, equality, proportionality, avoiding cuts, prioritizing the reward & punishment system so that employees work based on performance, and more effective budget utilization according to the urgency of service needs.

There are several weaknesses that may be found in this study, for example: First, Findings from qualitative research are often contextual and specific to a particular situation or group. This makes it difficult to generalize the results of the study to a wider population or to other hospitals with different cultures and contexts. Second, although qualitative research can provide in-depth insights into the cultural determinants of employee performance and its impact on hospital services, the weaknesses above need to be considered carefully. Researchers should strive to minimize bias, increase validity and reliability, and ensure that research findings can make a meaningful contribution to improving hospital services.

## **Acknowledgments**

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