The Influence of Workload Factors, Work Stress and Health Personnel Competency on the Implementation of Hospital Occupational Safety and Health Management Systems (SMK3RS)

Alfian Yoga Wiratna
Magister of Public Health Program, Institute of Health Science STRADA Indonesia, Kediri
Corresponding Author: alfianyogawiratna@gmail.com

ABSTRACT
Background: Accident prevention in the workplace cannot be separated from the influence of behavior and application by health workers in its implementation which prioritizes the interests of patient safety. The behavior and abilities of health workers play an important role in the implementation of patient safety. Several factors that influence the behavior of nurses in implementing the Hospital Occupational Health and Safety Management System (SMK3RS) are influenced by motivation, perceptions, attitudes, organizational culture, knowledge and experience.

Purpose: The purpose of this study was to determine and analyze how the description influence and relationship between workload, work stress and implementation of Hospital Occupational Health and Safety Management System (SMK3RS) at Lira Medika Hospital Karawang.

Method: The population in this study were employees of Medical and Nursing Services/Support who served in the Lira Medika Hospital, amounting to 442 people. The sampling technique used is purposive sampling with a total sample of 100 people. This type of research is descriptive verification research. The statistical instrument used is regression analysis using validity, reliability, normality tests.

Result: An influence of workload, work stress and competence on the assessment of the implementation of Hospital Occupational Health and Safety Management System (SMK3RS) by 19.05% because the rest is influenced by other variables or factors such as training, education level, motivation, leadership and others.

Conclusion: Based on the results of the study, it appears that the workload parameters have no effect on the implementation of Hospital Occupational Health and Safety Management System (SMK3RS) for Medical Service/Supporting Staff at Lira Medika Hospital. Meanwhile, the direct effect is work stress and work competence.

Keywords: Workload, Work Stress, Competence, SMK3RS
BACKGROUND

Health workers and workers in the medical sector are at risk of occupational diseases, including Covid19, as a result of their work. Managers need to work to protect the health of their employees. All workers need to understand the risks of their job and work according to safety procedures. Because health facilities are high-risk workplaces, work accident compensation insurance is important for the health and safety of health workers and workers in the medical field (Mustikawati Dyah Erti, 2020).

Hospitals as medical service companies have various problems, one of which is Occupational Safety and Health (K3). Various types of potential hazards in hospitals are caused by biological, chemical, ergonomic, physical, and psychosocial factors, including health workers, visitors, patients, and the surrounding environment. KAK), which can cause illness and work accidents in the area as well as other implications. There should be a standard of protection for hospital workers. Aspects of knowledge, attitude and involvement of K3 which are part of the behavior of nurses, also play an important role in the successful implementation of K3 in hospitals and efforts to overcome accidents in the workplace (Rifai et al., 2020).

Lira Medika Hospital is a type C private general hospital, and has been operating since June 5, 2014, in Karawang, West Java to maximize the needs of the Karawan community and its surroundings. Lira Medika Hospital has introduced the K3RS management system since its inception. RS. Lira Medika has been trying to achieve zero accidents during its implementation since the K3RS program was first implemented. Based on K3RS 2020 report data, there are still cases of Occupational Illness (PAK) and work Accident (KAK). The data obtained indicate that the main cause of PAK and KAK is the behavior of employees who tend to be negligent. The hospital strives to create a workplace that is healthy and safe from work accidents, such as changing the hazardous behavior of employees into safe behavior. Initial observation results.

Revealed that Lira Medika Hospital has a relatively high number of services per day, with an average of more than 50% of the available beds, and of course is a hospital with a high risk of work accidents for employees, patients and visitors. From initial observations, Lira Medika Hospital has implemented a comprehensive K3RS management system for employees to comply with standard precautions. It’s like when you want to dispose of used Toxic and Hazardous Waste (B3) for medical purposes that are infected with used syringes, I know there are. In the process of disposal, there are still employees who neglect to use personal protective equipment (PPE) in the form of gloves, so that employees are infected with syringes used by patients.

Accident prevention in the workplace cannot be separated from the influence of behavior and application by nurses, in its implementation which prioritizes the interests of patient safety. 36 of 2014, a health worker is every person who devotes himself to the health sector and has knowledge and or skills through education in the health sector which for certain types requires the authority to carry out health efforts. Health workers are grouped into 13 groups, medical personnel, clinical psychology staff, nursing staff, midwifery staff, pharmaceutical personnel, public health workers, environmental health workers, nutritionists, physical therapy personnel, medical technical personnel, biomedical engineering personnel, traditional health workers , and other health workers.

Minister of Health Regulation Number 52 of 2018 states that the occupational health and safety management system in health facilities includes: OHS plans in health facilities. Implementation of the OHS plan in health facilities. OHS performance monitoring and
evaluation in health facilities Review and improvement of OHS performance in medical facilities. Meanwhile, Permenkes No. 52 of 2018 also states that in its implementation, K3 standards for health facilities include the application of standard precautions carried out by health workers.

From the inhibiting factors for the implementation of the Occupational Safety and Health Management System here in after referred to as SMK3 proposed by Konradus (2012), it can be seen that the inhibiting factors that caused the implementation of SMK3 at Lira Medika Hospital were not on target due to the quality of Human Resources (HR) which was low K3 awareness and knowledge and safety behavior are still relatively low, there is no commitment from management and workers to the implementation of K3, low supervision of K3, less than optimal law enforcement against K3 violations.

Problems in this study Based on the above facts, the authors are encouraged to conduct further research on personal factors that can affect the implementation of SMK3RS, especially in terms of the application of K3 standard precautions. The author chose the research title "Analysis of the Effect of Workload Factors, Work Stress and Competence of Health Workers on the Implementation of Hospital Occupational Health and Safety Management System (SMK3RS) at Lira Medika Hospital Karawang". The variables used in this study are the result of a combination of several empirical studies, which differ in the object of research, which of course will give different results.

OBJECTIVE

The purpose of this research is to analyze the effect of workload, work stress, and competency of health workers on the implementation of the hospital occupational safety and health management system at Lira Medika Hospital.

METHODS

This research is an associative research, where this study aims to determine the relationship between two or more variables (Sugiyono, 2015). This research was conducted at Lira Medika Hospital Karawang, Indonesia at November 2021. The object of the research is health workers in Lira Medika Hospital Karawang, Indonesia. The population in this study were employees of Medical and Nursing Services/Support who served in the Lira Medika Hospital, amounting to 442 people. From the total population of health workers, 442 people were re-selected based on the status of permanent employees or working years of more than one year so that the total population according to the criteria above became 169 people, the number of samples taken was 100 respondents.

Analysis of the data used in this study is multiple linear regression. This model was chosen to determine how much influence the independent variables have on the dependent variable either partially or jointly. It is expected that the hypothesis that includes: H1: The workload affect the implementation of Hospital Occupational Safety and Health Management System at Lira Medika Hospital Karawang. H2: Work stress affects the performance of the companion the implementation of Hospital Occupational Safety and Health Management System at Lira Medika Hospital Karawang. H3: Competence affects the performance the implementation of Hospital Occupational Safety and Health Management System at Lira Medika Hospital Karawang. H4: Workload, Work Stress and Competence affects the
performance the implementatiton of Hospital Occupational Safety and Health Management System at Lira Medika Hospital Karawang, it can be validly tested.

RESULTS

Validity and Reliability Test Results

The stages of testing the questionnaire were carried out as an effort to measure the extent to which the questionnaire made had a level of validity and reliability. A valid questionnaire is a questionnaire that has a good level of readability so that respondents are able to fill out the questionnaire easily without any confusion in providing the answers to the questionnaire. While a reliable questionnaire is a questionnaire that can be used to measure different objects in different timescales on the same research subject. This test is carried out to see whether the data obtained in the field are really worthy of research or not. This test uses validity and reliability tests.

Validity Test Results

Validity test is used to measure whether or not a questionnaire is valid. The questionnaire is said to be valid if the questions on the questionnaire are able to reveal something that will be measured by the questionnaire. Validity testing was carried out with the help of a computer using the SPSS program with a significance level of 5% or 0.05. If \( r_{count} > r_{table} \), then it is said to be valid and vice versa.

Reliability Test Results

The reliability test is to measure a questionnaire which is an indicator of a variable or construct. A questionnaire is said to be reliable if a person's answer to a statement is consistent or stable from time to time. A variable is said to be reliable if it gives a Cronbach alpha value > 0.60.

<table>
<thead>
<tr>
<th>No.</th>
<th>Variabel</th>
<th>Cronbach Apha</th>
<th>Role of Thumb</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Workload (X1)</td>
<td>0,470</td>
<td>0,6</td>
<td>Reliebel</td>
</tr>
<tr>
<td>2.</td>
<td>Work stress (X2)</td>
<td>0,476</td>
<td>0,6</td>
<td>Reliebel</td>
</tr>
<tr>
<td>3.</td>
<td>Competence (X3)</td>
<td>0,378</td>
<td>0,6</td>
<td>Reliebel</td>
</tr>
<tr>
<td>4.</td>
<td>Implementation SMK3RS</td>
<td>0,614</td>
<td>0,6</td>
<td>Reliebel</td>
</tr>
</tbody>
</table>

Table 1. Reliability Test Results

Source: Data Processed Questionnaire

Based on Table above, it shows that this test was carried out in a variable manner, not in question items on each variable, which can be seen the result is the Cronbah's alpha value is greater than 0.6, it can be concluded that the Variables Workload, Work Stress, Competence and Implementation of Hospital Occupational Safety and Health Management System (SMK3RS) are said to be reliable.
Classic Assumption Test Results

a. Normality Test Results

The results of the normality test of the data from the residuals with the Kolmogrov-Smirnov normality test using SPSS v.25.0 can be seen in the table below:

![Normal P-P Plot of Regression Standardized Residual](image)

**Figure 1 Picture of Normality Test Results**
Source: Data Processed Questionnaire

Based on the "Chart" output above, we can see that the plotting points in the picture "Normal P-P Plot of Regression Standardized Residual" always follow and approach the diagonal line. Therefore, as the basis or guidelines for decision making in the normality test of the probability plot technique, it can be concluded that the residual value is normally distributed. Thus, the assumption of normality for the residual value in linear regression analysis.

b. Heteroscedasticity Test Results

Heteroscedasticity test is used to determine whether or not there is an inequality of residuals in the regression model. In this discussion, a heteroscedasticity test was carried out using the Spearman's rho test, which correlated the residual value (Unstandardized residual) with each independent variable. If the correlation significance is less than 0.05, then the regression model has heteroscedasticity problems. (Widiawati, K. (2017). The test results are as follows:
From the figure above, it can be seen that the dots do not form a clear pattern, and the points spread above and below the number 0 on the Y axis. So it can be concluded that there is no heteroscedasticity problem in the regression model.

c. Multicollinearity Test Results

The multicollinearity test aims to test whether there is a correlation between the independent variables in the regression model. A good regression model should not have a correlation between the independent variables. To find out the existence of multicollinearity in the regression model, it can be seen from the value of Variance Inflation Factor (VIF).

<table>
<thead>
<tr>
<th>No.</th>
<th>Variabel</th>
<th>Tolerance</th>
<th>VIF &lt;10</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Workload (X1)</td>
<td>0,980</td>
<td>1,020</td>
<td>Does not experience multicollinearity</td>
</tr>
<tr>
<td>2.</td>
<td>Work stress (X2)</td>
<td>0,249</td>
<td>4,015</td>
<td>Does not experience multicollinearity</td>
</tr>
<tr>
<td>3.</td>
<td>Competence (X3)</td>
<td>0,249</td>
<td>4,014</td>
<td>Does not experience multicollinearity</td>
</tr>
</tbody>
</table>

Table 2: Multicollinearity Test Results

Source: Data Processed Questionnaire

Based on the results of Table 1, it shows that workload and work stress and competence have a tolerance value of < 1, so referring to the basis for decision making in the multicollinearity test, it can be concluded that there is no multicollinearity in the regression. While the VIF value has a value of < 10, it refers to the basis for making decisions. The VIF value in the multicollinearity test can be concluded that there is no multicollinearity in the regression.
Data analysis

Data analysis is a description of data analysis or testing based on data obtained by distributing questionnaires that can be realized in hypotheses. Where the hypothesis is a temporary answer to the problems that are formulated and will be investigated in research. With the formulation of the problem, it is necessary to prove by analysis. In this study, the data analysis technique was multiple regression analysis. The results of the data analysis can be seen as follows:

<table>
<thead>
<tr>
<th>Variabel</th>
<th>β</th>
<th>Std Error</th>
<th>t hitung</th>
<th>Sign</th>
</tr>
</thead>
<tbody>
<tr>
<td>Constant</td>
<td>15.584</td>
<td>7.509</td>
<td>2.075</td>
<td>0.041</td>
</tr>
<tr>
<td>Workload (X1)</td>
<td>0.709</td>
<td>0.100</td>
<td>7.098</td>
<td>0.000</td>
</tr>
<tr>
<td>Work stress (X2)</td>
<td>-0.159</td>
<td>0.220</td>
<td>-0.727</td>
<td>0.469</td>
</tr>
<tr>
<td>Competence (X3)</td>
<td>0.297</td>
<td>0.200</td>
<td>1.484</td>
<td>0.141</td>
</tr>
<tr>
<td>R</td>
<td>0.611</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>R Square</td>
<td>0.373</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adjusted R²</td>
<td>0.354</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 3 Data Analysis Results
Source: Data Processed Questionnaire

1. Regression equation

Multiple linear regression equation with three independent variables, namely b1 = 0.709, b2 = -0.159, b3 = 0.297. The values at the output are then entered into the multiple linear regression equation as follows:

\[ Y' = a + b_1x_1 + b_2x_2 + b_3x_3 \]

\[ Y' = 15.584 + 0.709x_1 + (-0.159x_2) + 0.297x_3 \]

(Y' is the predicted dependent variable, a is a constant, b1, b2, and b3 is the regression coefficient, and x1, x2, and x3 are independent variables).

Based on the multiple linear regression equation above, it can be described as follows:

a. The constant value of is 15.584, it means that if the independent variable (free) is zero, then the dependent variable (bound) has a negative value of -6.522.

b. The value of the workload variable coefficient (X1) is positive at 0.709, this gives an illustration that the workload has a positive and significant influence on performance the implementatiton of Hospital Occupational Safety and Health Management System at Lira Medika Hospital Karawang. This means that for every 0.1 unit increase in workload, the workload will increase performance on the implementatiton of Hospital Occupational Safety and Health Management System at Lira Medika Hospital Karawang.

c. The coefficient of work stress variable (X2) has a negative value of -0.159, this illustrates that the work stress factor has no significant and significant effect performance on the
implementation of Hospital Occupational Safety and Health Management System at Lira Medika Hospital Karawang. This means that any increase in work stress will not increase the implementation of the Hospital Occupational Safety and Health Management System.

d. The coefficient of competency variable (X3) has a positive value of 0.297, this illustrates that the competency factor has a positive and significant influence on the implementation of Hospital Occupational Safety and Health Management System at Lira Medika Hospital Karawang. This means that every increase in work competence will increase the implementation of the Hospital Occupational Safety and Health Management System.

2. Coefficient of Determination R2

The analysis of the coefficient of determination or R Square is used to find out how big the percentage of the contribution given by the independent (free) variable together to the dependent (bound) variable. Based on the value of the coefficient of determination (R2) of 0.373. It shows that the variables of workload, work stress, competence can affect the implementation of Hospital Occupational Safety and Health Management System by 37.3% and the remaining 62.7% is influenced by other independent variables.

3. F test

The results of the analysis show that the value of F count is 19,054 with a significance level of 0.000 or the significance obtained is less than <0.01, meaning that H0 is rejected. Ha is accepted. So it can be concluded that the model used is accepted. This means that workload, work stress, work competence have a significant influence on the implementation of Hospital Occupational Safety and Health Management System (SMK3RS).

DISCUSSION

1. Effect of workload on the implementation of the Hospital Occupational Health and Safety Management System (SMK3RS)

Based on the results of data analysis, it is known that the Sig value for the Effect of Workload (X1) variable on SMK3RS is 0.000 > 0.05 while the value of tcount is 7.098 > ttable 1.985 so it can be concluded that the workload has no influence on the implementation of SMK3R so it can be concluded that the workload does not have a positive and significant impact on the implementation of SMK3RS for Medical Service/Supporting Staff at Lira Medika Hospital. it can be concluded that H1 is rejected.

Result shows that most of the respondents' answers are in the moderate category with a total of 56 respondents (55%). These results provide an illustration that in general the workload of the service/medical support staff at Lira Medika Hospital is Medium. However, it was also found that respondents with a high workload category were 3 people or 9%, and 41 respondents or 36% of respondents were in the high workload category.

Hart and Staveland (1988) stated that the workload is something that arises from the interaction between the demands of the tasks of the work environment which is used as a place...
of work, skills, behavior and perceptions of workers. Workload can sometimes also be defined operationally on various factors such as the demands of the task or the efforts made to measure the work. However, it is not wise to only consider the workload from one aspect only, as long as the other factors are interrelated in complex ways. In general, the optimum level of workload intensity will be achieved if there is excessive pressure and tension both physically and mentally. What is meant by pressure here is with regard to several aspects of human activity, tasks, organization, and from the environment that occur as a result of individual worker reactions because they do not get the appropriate desires. While tension is a logical consequence that must be accepted by the individual concerned as a result of the pressure received.

An organizational system consists of many interdependent and interrelated subsystems that work together to complement each other to facilitate the achievement of organizational goals in all categories, both large and small. Employees in every organization have varying levels of workload that they face on a daily basis. If for any reason the workload changes, the change changes employees' stress levels as well as their perception of fairness in the workload balance, especially when the change is positive. But is it positive, as in the case of increased workload; or negative, such as a reduction in workload; it has implications for employee job satisfaction and ultimately, work performance (Ali and Farooqi, 2014). This is in line with the opinion of research I. Rukmana (2020) which obtained the result that workload has no effect on employee performance at PT XYZ. This statement is supported by research conducted by Susiarty (2019) on different objects.

The results of this study indicate that the workload level of 55% of respondents is at a moderate level or can still be called balanced so that it has not been able to have a significant impact on the implementation of the SMK3RS program.

2. The Effect of Work Stress on the Implementation of the Occupational Health and Safety Management System (SMK3RS)

Based on the results of data analysis, it is known that the Sig value for the effect of the work stress variable (X2) on SMK3RS is 0.469 < 0.05 while the value of tcount -0.727 < ttable 1.985 so it can be concluded that work stress has an influence on the implementation of SMK3R. medicine. it can be concluded that H2 is accepted.

Table 4.6 shows that most of the respondents' answers are in the moderate category with a total of 70 respondents (70%). These results illustrate that in general the work stress of medical service/support workers at Lira Medika Hospital is moderate. However, it was also found that respondents with a high work stress category were 11 people or 11%, and 19 respondents or equal to 19% of respondents are in the category of high work stress.

This is in accordance with the theory According to Stranks (2005, work stress experienced by workers is not only detrimental to workers but also to the company. The impact of job stress experienced by workers can affect organizational performance in achieving company targets. Stress is a universal element that cannot be avoided and people from almost every culture and demographic must face levels of stress (Robbins, 1999). Meneze's dissertation (2005) states that employees' belief that their company does not value them, and sometimes employees do not even want to work with their organization for reasons that the organization does not offer them a part in decision making, no control over the work environment and lack of relaxation in the workplace, which are some of the main factors causing employee stress.
From the results of this study, it can be concluded that the work stress of employees at Lira Medika Hospital Karawang is mostly at moderate results as much as 66%. Employee work stress is becoming a plus for the implementation of the K3RS program in order to prevent PAK and KAK. Therefore, it is necessary to improve management efforts to reduce work stress on employees as an effort to support the implementation of the K3RS program.


Based on the results of data analysis, it is known that the Sig value for the influence of the Work Competency variable (X3) on the implementation of SMK3RS is 0.141 \(>0.05\) while the value of tcount is 1.484 > ttable 1.985 so it can be concluded that work competence has an influence on the implementation of SMK3RS. This means that the level of competence will have an impact on the implementation of SMK3RS, so it can be concluded that work competence has a positive and significant influence on the implementation of SMK3RS for Medical Service/Supporting Staff at Lira Medika Hospital. It can be concluded that H3 is accepted.

Result shows that most of the respondents' answers are in the moderate category with a total of 66 respondents (66%). These results provide an illustration that in general the competence of the service/medical support personnel at Lira Medika Hospital is Medium. However, it was also found that respondents with low competency categories were 25 people or 25%, and 9 respondents or 9% respondents are in the category of high competence.

These results are in line with the theory of Robbins (2003) which states that if employees have the ability or competence at work, they can help employees to handle stress carefully which will form an exciting work situation so that it has an impact on increasing employee safety behavior, this will greatly support the Occupational Safety and Health Management System (K3RS) program. is a variable that can have an influence on the safety behavior of health workers. One way to measure the level of competence of nurses is to look at the level or level of education, most of the health workers at the Lira Medika Hospital Karawang have an undergraduate education level and the profession is the standard and benchmark that nurses already have fairly good competence. Through good competence nurses will be able to provide the best service to patients.

From the results of the study, it can be concluded that the competence of employees at Lira Medika Hospital Karawang is mostly on average results. High employee competence will be an advantage for the implementation of the K3RS program in order to prevent PAK and KAK. Therefore it is necessary to improve employee competence so that it is better to support the achievement of the K3RS program, efforts to increase competence can be through employee education and training.

4. Effect of workload, work stress, competence on the implementation of the Occupational Health and Safety Management System (SMK3RS)

The results of the analysis show that the calculated F value is 19.054 with a significance level of 0.000 or the significance obtained is less than \(<0.01\), meaning that H0 is rejected. Ha is accepted. Based on KMK RI No. 1087 / MENKES / SK / VII / 2010 Occupational Health and Safety (K3) is an effort to provide safety guarantees and improve the health status of workers by preventing Occupational Diseases (PAK), Occupational Accidents (KAK) and
controlling hazards in the workplace. Occupational Health and Safety in the hospital itself as an effort to improve and maintain guaranteed health for all hospital staff positions, patients, patient companions, hospital visitors, and the hospital environment so as to reduce the number of accidents and occupational diseases, so that can create a hospital environment that is safe, comfortable, healthy, and prosperous. K3RS management efforts are supported by the role of health workers and non-health workers who work in hospitals.

The results of previous research from the Journal of Nurse Behavior in the Application of Occupational Health and Safety Management in Aceh (2017), concluded the importance of disciplined behavior from health and non-health workers who work in hospitals that support the implementation of K3 in hospitals. It is necessary to develop knowledge and skills in the field of nursing management, especially related to K3 so that the services provided are more optimal and quality without forgetting the level of health and safety for nursing care providers. From the Journal of Factors Relating to the Implementation of OHS Applications in Health Workers at RSIA Permata Sarana Husada for the period of February 2015 (2017), it can be concluded that the implementation of K3 at RSIA Permata Sarana Husada has been implemented, but is still not good. There are still many workers who have not received knowledge and information about K3RS policies. There is a relationship between the level of knowledge about K3RS with efforts to implement K3 at RSIA Permata Sarana Husada.

The results of this study indicate that the model used is acceptable. This means that workload, work stress, work competence have a significant influence on the implementation of SMK3RS. Variable workload, work stress, work competence on the implementation of the Occupational Safety and Health Management System (SMK3RS). This finding is in accordance with the Prediction of Hypothesis 4 which predicts that workload, work stress, work competence have a significant influence on the implementation of SMK3R. /Medical Support at Lira Medika Hospital.

Hospitals have a role in promoting occupational safety and health among workers, employers and the public. In particular, the promotion of K3RS through an approach with humans, namely the workforce so that they can improve safe behavior at work and employees can always remember and understand more about the K3 aspects that are conveyed. Some of the OSH promotion activities carried out by the hospital include OSH training, OHS supervision and communication.

From the results of the study it can be concluded that the implementation of SMK3RS at Lira Medika Hospital Karawang is in the Good Enough category. This means that some employees have been exposed to messages in K3 promotions which are part of the K3RS program. Workload and Work Stress are still within normal limits and can be tolerated, the competencies possessed by employees are good according to hospital standards. This becomes a resource for the K3 manager and for the implementation of the K3RS system.

CONCLUSION

Based on the results of the study, it appears that the workload parameters have no effect on the implementation of SMK3R for Medical Service/Supporting Staff at Lira Medika Hospital. Meanwhile, the direct effect is work stress and work competence. This shows that the condition of a person's ability, whether experiencing work stress or having good work competence, has an effect on every work performance, this will greatly support the optimization of the implementation of the K3RS program. Self-confidence makes people able
to do a job better, and vice versa, emotional disturbances such as fear and shame can also reduce a person's work performance or appearance, so that competence will decrease.

In an effort to implement the optimal K3RS program, routine evaluations are needed to always remind the importance of working in a healthy and safe condition such as carrying out a cycle of K3 handling activities periodically daily, weekly, and monthly evaluations can be started from the internal work unit that handles similar work, led directly by the head of the working group. The level of risk can be reduced by making Standard Operating Procedures clear and easy to understand for each part of the work and monitoring the implementation of work safety standards on a regular basis.

It is known that employees already understand the importance of OHS regulations and implementation. However, in reality, it is not fully maximized. It is hoped that employees can change their perception to become professionally oriented, so that the implementation of K3 can be realized to the maximum. The implementation of socialization of K3 policies and various information about K3 is carried out repeatedly and continuously by the management by involving all elements within the company so that the implementation of SMK3 in the company can achieve optimal value.

ACKNOWLEDGMENTS
The author is thankful to respondents in Lira Medika Hospital, Karawang for their valuable information and their awareness to participate in this research

REFERENCES


