

The Influence of Organizational Culture and Work Environment on Improving Service Quality through Infection Prevention at Regional General Hospitals

Sitti Zam Zam

Student of Magister Program of Management, STIE AMKOP, Makassar, Indonesia
sitti.zam76@gmail.com

Hasan Nongkeng, Trimaya Cahya Mulat

STIE AMKOP, Makassar, Indonesia
nongkenghasan@gmail.com, trimayacm11@gmail.com

R. Ardian Priyambodo

Poltekkes Kemenkes, Makassar, Indonesia
ardiandrg@gmail.com

Yusriadi Yusriadi

Sekolah Tinggi Ilmu Administrasi Puangrimaggalatung, Makassar, Indonesia
yusriadi.yusriadi@uqconnect.edu.au

Chairun Nasirin

College of Health Sciences (STIKES), Mataram, Indonesia
chairun.nasirin@stikes-mataram.ac.id

Rudy Kurniawan

University of Sriwijaya, Palembang, Indonesia
rudykurniawan@fisip.unsri.ac.id

Abstract

The purpose of this study was to analyse the influence of organizational culture and work environment on improving service quality through infection prevention at the Tenriawaru Regional General Hospital (RSUD), Bone Regency. This study using a purposive sampling method, namely sampling based on specific considerations and criteria. The number of samples of 72 respondents, namely employees at Tenriawaru RSUD, Bone Regency. They collect data using the method of direct employee hearing related to the research problem and distribute the research questionnaire statement sheet. Data analysis was performed using path analysis. The research gave the results: 1) organizational culture influenced infection prevention in RSUD Tenriawaru Bone Regency. 2) the work environment affects the prevention of infection in the Tenriawaru Hospital, Bone Regency. 3) the organizational culture involves improving the quality of service at the Tenriawaru Hospital, Bone Regency. 4) the work environment affects enhancing service quality at the Tenriawaru Regional Hospital, Bone Regency. 5) impact on improving the quality of service at the Tenriawaru Hospital, Bone Regency. 6) organizational culture affects enhancing the quality of service by preventing infection at the Tenriawaru Hospital, Bone Regency. 7) the work environment. affects improving service quality by avoiding disease at the Tenriawaru Hospital, Bone Regency.

Keywords:

Organizational culture, work environment, infection prevention and service quality improvement

1. Introduction

One of the quality measures that a hospital would have as a health care provider is the percentage of nosocomial infections. The nosocomial infection management program is a measure of service quality control, such that cases of the nosocomial disease will reduce the image and quality of hospital services. The hospital PPI program

is essential to be enforced to measure the quality of care and protect patients, officials, visitors, and their families from infection risk. Nosocomial infections generally referred to as Healthcare Related Infections (HAIs), are cross-contamination caused by hospitals and other health care facilities. Cross-contamination may occur via the patient's own body, in contact with nurses and health staff, contaminated equipment, and the surrounding environment.

Human resources are the deciding factor for the performance of an enterprise. Every human being has a different level of needs, desires, and social context. The standard of the hospital personnel largely dictates the efficiency of the hospital. It is vital to have trained officers to maximize the results of the work. The organizational culture and work climate have a direct effect on improving the quality of service in hospitals and on the performance of employees.

The PPI Committee must exist as an essential element in the hospital. Wigglesworth (2014) notes that simple PPI measures are required to minimize the risk of spread of bacteria and microorganisms, whether the infection source is identified or unknown. The high number of HAIs signals a deterioration in the quality of medical facilities, prolongs hospitalization and rises in health care costs, and is the fundamental cause of increased morbidity and mortality (Darmadi, 2009; Saifuddin et al., 2004).

The Infection Prevention and Control Committee (KPPI) has not had the full sense so far in the hospital as anticipated. there are still committee nurses who do not understand the responsibilities, obligations, and duties that need to be fulfilled in the prevention and control of infections in hospitals, as stated in the Indonesian Ministry of Health research. & PERDALIN, 2008; Pristiwani & Arruum, 2013; TM et al, 2015.

Performance evaluation is expressed in improvements to the functions and priorities of the company. Performance assessment has the same definition as a performance assessment; it is different if it applies to the company's objectives. Some health organizations use the term performance evaluation more frequently to determine how well workers do their job according to job descriptions and standard operating procedures (SOPs) (Marquis & Huston, 2013).

In an attempt to achieve organizational objectives, organizational culture as a management tool may influence nurses' and other officers' performance, effectiveness, competitiveness, work ethic, and attitudes and abilities. Corporate culture can improve behavioral behaviors and human resource motivation to improve efficiency and improve organizational performance so that organizational objectives can be accomplished (Uha, 2010; Kanto et al., 2020; Umanailo, 2020; Nuraini et al., 2019).

The work atmosphere is another aspect that influences the efficiency of nurses and executive officers. Performance is heavily affected by the working climate. Officers definitely cannot perform their duties as planned unless they are assisted by comfortable working environments while doing their work every day. Suppose some things are not conducive and the atmosphere in which nurses and executive staff are disrupted. In that case, they immediately have a detrimental effect on the concentration of operations; they eventually affect efficiency (Nawawi, 2001), which affects the quality of service in hospitals.

Based on the above definition, the researcher is interested in researching "The Influence of Organizational Culture and Work Environment on Improving Service Quality through Prevention of Infection at the Regional General Hospital Tenriawaru, Bone Regency".

2. Literature Review

2.1 Organizational culture

Culture is a means of addressing problems both internally and externally that have been deemed acceptable for problem-solving, so the culture can be handed down as an inheritance to heirs or new members as a way of seeing what is appropriate and unacceptable for problem-solving (Shince, 2004). Culture is a common perception, beliefs, and norms that individuals believe and hold within an organization (Muchlas, 2008).

Robbins (1993) suggests that the differentiator between this organization and other organizations is an organizational culture that symbolizes a mutual awareness between the organization's members. Corporate culture governs the direction of shaping the attitudes and actions of members of an organization (Bin Tahir & Rinantanti, 2016). In general, organizational members are affected by the diversity of established resources and will not be isolated from the corporate culture individually or in groups of individuals.

A variety of benefits may be earned either by the organization's followers if institutional habits are implemented, which means paying attention to the outcomes that the organization believes. These advantages are as follows:

1. Feedback is provided to the decision-maker on any action.
2. Strengthening of the organizational commitment.
3. Continuity of all institutional participants.
4. Increasing trust is shown in all the organization elements since telling the details of the organization is how things are done and what is considered essential.

Observing the roles and benefits of culture above, it is essential to have a culture in an organization. It is realized that a culture is a tool (tool) for carrying out organizational activities and enthusiasm for organizational success. Culture is also still preserved and established.

2.2 Work environment

The work environment is one of the causes of success in the course of work. Even failure to perform work is often caused by the work environment, since the work atmosphere may influence workers, mainly the work atmosphere is linked to psychology. The effect itself can be both positive and negative.

Herman (2010) indicates that the atmosphere of the operation involves the working relationship between subordinates and supervisors and the physical environment in which workers work. A positive working climate provides a sense of security such that employees can be optimal in their activities. The setting of action is a place where workers are busy every day, which influences their emotions. If the officer is pleased with the working environment in which he is on duty, the officer can do his job faithfully to use the work more effectively. Output power would increase and directly boost the job efficiency of workers.

2.3 Infection Prevention

Seeing the origin of the infection can come from the community (community-acquired condition) or come from the hospital environment (hospital-acquired infection), previously known as nosocomial infection. Infectious disease is now one of the most severe health issues in the world, including in Indonesia. Health workers who conduct medical care activities if the procedure is broken may trigger the disease's spread to other patients and nurses themselves. The term nosocomial infection (Hospital-acquired infection) is the modern term "Healthcare-associated infections" (HAIs), which has a broader definition because it affects all health care facilities and not just the transmission to those that are treated, but also the information to nurses while taking patient care steps (Akib et al., 2008).

Contamination in the health care provider varies from high-risk patients, including old age characteristics, duration of lying down, consumers of immunosuppressive drugs and steroids, and reduced immunity. For patients undergoing direct medical action that may affect the integrity of body tissues or intrusive reactions, patients needing IV or long-term catheter urine are often cross-contaminated. Any organ in the body may be cross-contaminated, but urinary tract infections, lower respiratory infections, primary bloodstream infections, or phlebitis are the most common and surgical wound infections (MOH, 2003).

2.4 Service Quality Improvement

Quality is also called the life parameter. The concept of quality does not mean operational importance. On an operating basis, the rate does not reflect the functional meaning of products or services that the customer's wishes are fulfilled. In essence, a sense of satisfaction in customers is achieved by consistency.

Quality health services are required in the health sector. This is dictated by the nurse's work and the needs of the patient, the family, and the community. Some critical measurements characterize health services. Parasuraman et al. (2006) have implemented the SERVQUAL (Service Quality) model. SERVQUAL (quality of service) was used to assess the quality of health services.

2.5 Research Hypothesis

Based on the research formulation as a temporary answer, the following hypothesis can be put forward:

1. Organizational culture has a positive and significant effect on infection prevention in Tenriawaru Hospital, Bone Regency.
2. The work environment has a positive and significant effect on infection prevention at the Tenriawaru Regional General Hospital, Bone Regency.

3. Organizational culture has a positive and significant effect on improving service quality at the Tenriawaru Regional General Hospital, Bone Regency.
4. The active environment has a positive and real impact on improving the quality of services at the Tenriawaru Regional General Hospital, Bone Regency.
5. Prevention of infection has a positive and significant effect on improving the quality of services at Tenriawaru Hospitasl. Bone Regency.
6. Organizational culture has a real direct impact on improving the quality of services through infection prevention at the Tenriawaru Regional General Hospital, Bone Regency.
7. The work environment has a positive and significant effect on improving service quality through infection prevention at the Tenriawaru Hospital, Bone Regency.

3. Research Method

This research design is descriptive quantitative explanatory research or explanation aimed at analyzing the research variables' influence through hypothesis testing (Machfoedz, 2009). This hypothesis intends to examine the impact of organizational culture and work environment on improving service quality through infection prevention at the Tenriawaru Regional Hospital, Bone Regency.

4. Results

4.1 Direct Influence

To make it easier to analyze the functional relationship between the variables then the coefficient values are arranged in the form of table 1 as shown in the table below:

Table 1. Direct Influence

Variable Independen	Variable Dependen	Symbol	Beta Coe	Sig	SE
Organizational culture (X1)	Prevention of infection (Y1)	X1--> Y1	0.095	0.004	0.045
Working environment (X2)		X2--> Y1	0.940	0.000	0.055
Organizational culture (X1)	Service Quality (Y2)	X1--> Y2	0.635	0.000	0.057
Working environments (X2)		X2--> Y2	0.326	0.000	0.037
Prevention of infection (Y1)		Y1--> Y2	0.329	0.000	0.056

The hypothesis test results obtained a coefficient of 0.095 and a relevant value of 0.045 for the direct influence of the organizational culture on preventing infection. Since the coefficient value has a positive value and a meaningful result of 0.045, which is less than 0.05, this implies that the organizational culture variable (X1) has a direct effect on the prevention of infection (Y1), the regression coefficient is 0.095, which means that if the organizational culture is increased, so the prevention of disease also increases. Although the effect is minimal, the corporate culture is very influential in the prevention of infections. In other words, prevention of illness, combined with a well-functioning organizational culture, will help ensure effective prevention of diseases.

The hypothesis that the organizational culture variables (X1) affect infection prevention (Y1) is accepted. To show that the introduction of the corporate culture affects the prevention of transmission of infections at Tenriawaru Hospital, Bone Regency.

From the hypothesis test on the direct effect of the work environment on preventing infection, the outcome is a coefficient of 0.940 and a meaningful result of 0.000. Since the coefficient value has a positive value, it also has a value of 0.000. It is less than 0.05, which means that the factor of working environments (X2) has a one-way influence on the prevention of infections (Y1), where the regression coefficient is 0.940, which implies that if the working environment improves, then the prevention of infection has been able to do so. Although the impact is minimal, the work environment is very influential in preventing disease. In other words, prevention of infection, accompanied by a healthy and pleasant working environment, would ensure better infection prevention. The hypothesis confirming the effect of the work environment factor (X2) on preventing infection (Y1) is therefore justified. It can also be believed that the introduction of the activity environment affects disease prevention in the Tenriawaru District Hospital. Bone, man.

Hypothesis test findings on the direct effect of organizational culture on service quality obtained a coefficient of 0.635 with a value of 0.000. The positive number of the caused it. And the results obtained with a value of 0.000 < 0.05, which indicates that the organizational culture variable (X1) has a one-way effect on the quality of service (Y2), regression coefficient of 0.635, suggesting the application of the administrative culture increases, the quality of service also increases by 0.635. Percent with the benchmark of other independent variables that have a continuous effect on the quality of service. Although the impact is minimal, the organizational culture

has a substantial influence on the quality of service. In other words, an improved corporate culture would enhance the quality of service.

Since a positive coefficient value is received, it can also be clarified that the organizational culture positively affects the quality of service. As a result, the more the corporate culture's adoption improves, the level of service will also improve. Similarly, if the corporate culture declines, it will affect the decline in service quality.

In the hypothesis test results on the direct effect of the working environment on service quality, the coefficient of 0.326 is also essential. Due to the positive coefficient value of 0.000, which indicates that it is less than 0.05, the work environment variable (X2) has a positive impact on service quality (Y2), with a coefficient value of 0.326, meaning that if the work environment is increased, the quality of service will be increased by 0.326 percent with a value of 0.326 percent. Although the effect is minimal, the working environment has a substantial impact on the quality of service. In other words, the level of service would improve if the working environment is more relaxed.

The hypothesis testing results on the direct effect of infection prevention on service quality obtained a coefficient of 0.329 with a significance of 0.000. Because the coefficient is positive and has a significance value of $0.000 < 0.05$, it means that the infection prevention variable (Y1) has a positive effect on the quality of service (Y2). And the regression coefficient of 0.329 shows that if the implementation of infection prevention has increased, then the quality of service will also increase by 0.329%, together with the assumption that other independent variables that affect the quality of service are constant.

The hypothesis that there is an effect on the quality of service (Y2) of the working environment variables (X2) is justified. It can also be interpreted that the implementation of the work environment affects improving the standard of service at Tenriawaru Hospital, Bone Regency.

5. Discussion

This study's findings are consistent with the statement by Bono, Heling & Borg (2014) that the organizational culture is a community of people or associations that typically have multiple mutual objectives by working towards goals. That nurses develop shared beliefs and values that distinguish them from other groups or associations. This study's findings are also consistent with the results of the previous Mulyaningsih experiment (2013) on the PPI plan in the treatment room.

Since a positive coefficient value is obtained, it can also be clarified that the organizational culture positively impacts the prevention of infections. It can also be argued that the better the application of the organizational culture, the better the mechanism of infection prevention would be. Similarly, if the corporate culture's execution is not pleasant, it will have a detrimental impact on the prevention of infection.

The statement by Lewa and Subowo (2005) is consistent with the results of this study that the conditions under which they are active must be designed so that employees can relate the behavior of employees to their environment. This report, along with the findings of previous research by Albert Wibi Rahman (2015), is consistent with the competence and work environment for nurses' performance in the PPI segment at Petala Bumi Pekanbaru.

Because a positive coefficient value is obtained, it can also be explained that organizational culture has a positive influence on service quality. It means that the more the implementation of corporate culture is increasing, the quality of service will also increase. Likewise, on the contrary, if the performance of organizational culture decreases, it will affect the decrease in service quality. So, the hypothesis which explains the influence of corporate culture (X1) on service quality (Y2) is accepted.

So, it can be interpreted that the implementation of organizational culture affects improving the quality of service at the Tenriawaru hospital in the Bone Regency area. Since a positive coefficient value is obtained, it can also be shown that the working climate has a positive effect on the quality of service. It can also be perceived that increasing the ease of implementation in the work environment would improve service quality. Similarly, if the work environment's introduction reduces its comfort, the reduction in service quality would be affected.

6. Conclusion

The study results indicate that the organizational culture affects the prevention and control of infections in hospitals and other health facilities. Since the coefficient value is positive, it can also be shown that the work environment has a positive effect on preventing infection. Thus, it can be concluded that the better the execution of the work environment, the better the prevention of disease. Similarly, if the work environment's performance is not successful, infection prevention would have a detrimental impact on the nets. Even though the effect is small, infection prevention is exceptionally influential on the quality of service. In other words, the quality of service will increase if infection prevention is further improved. Because a positive coefficient value is obtained, it can also be seen that infection prevention has a positive effect on service quality. Thus, it can be said that the better the infection prevention program runs, the better the service quality. Likewise, if the implementation of infection prevention is not right, then the quality of service will be less useful.

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Bibliography

Sitti Zam Zam is a student at Magister Program of Management of STIE AMKOP, Indonesia. Her areas of interest and research include social science and economic. She has published some articles in national journals

Hasan Nongkeng is a lecturer at Management Department of STIE AMKOP, Indonesia. His areas of interest and research include economic, management, management human resource. He has published some books and many articles in national and international journals. He is a reviewer and editor in some local and international journals.

Trimaya Cahya Mulat is a lecture at Management Department of STIE AMKOP, Indonesia. Her areas of interest and research include social science, economic and management. She has published some articles in national and international journals.

R. Ardian Priyambodo is a lecture at Public Health of Poltekkes Kemenkes, Makassar, Indonesia. Her areas of interest and research include public health. She has published some articles in national and international journals.

Yusriadi Yusriadi is a lecturer at Public Administration Department of Sekolah Tinggi Ilmu Administrasi Puangrimaggalatung, Indonesia and chancellor on Sekolah Tinggi Ilmu Hukum Pengayoman. His areas of interest and research include social science, political science, sociology, legal studies, and public administration. He has published some books and many articles in national and international journals. He is a reviewer and editor in some local and international journals.

Chairun Nasirin is a lecturer at College of Health Sciences (STIKES Mataram), Indonesia. His research is related to health administration and health policy. Some of his research interests include health administration, community nursing, empowerment, health policy, and public health.

Rudy Kurniawan is a lecturer and researcher at the Faculty of Social and Political Studies, University of Sriwijaya, Palembang, Indonesia. Some of his research is related to sociology and society empowerment. His research interests include corporate social responsibility, resolution of conflict, and government studies.