

## EMPLOYEE BEHAVIOR FOR KNOWLEDGE DEVELOPMENT IN THE HEALTHCARE INDUSTRY

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### Abstract

This study aims to determine the influence of personal mastery, organizational citizenship behavior through collaboration culture on knowledge utilization in the health industry. This study was conducted at a private hospital in Lumajang Regency, the sample in this study was 146 health workers. This study used the Structural Equaation Model analysis technique. The results of this study explain that all independent and intervening variables have a significant and positive effect on knowledge utilization. The variable of personal mastery has the greatest influence directly or indirectly on knowledge utilization.

**Keywords:** Personal Mastery, Organizational Citizenship Behavior, Collaboration Culture, Knowledge Utilization, Hospital

### INTRODUCTION

Hospitals are one of the health industries that never stop providing services to the community. Hospitals that have experienced an increase in terms of business are a separate view for investors. Based on data from the East Java Province Referral Health Service Section, the number of private hospitals in 2018 was more than state-owned hospitals and government hospitals as many as 185 general types and 79 special types. The data shows that the development of fast-growing private hospitals has its own concerns in the community. Private hospitals that are considered more private, better services, a sense of security and good facilities are the main concerns of the community.

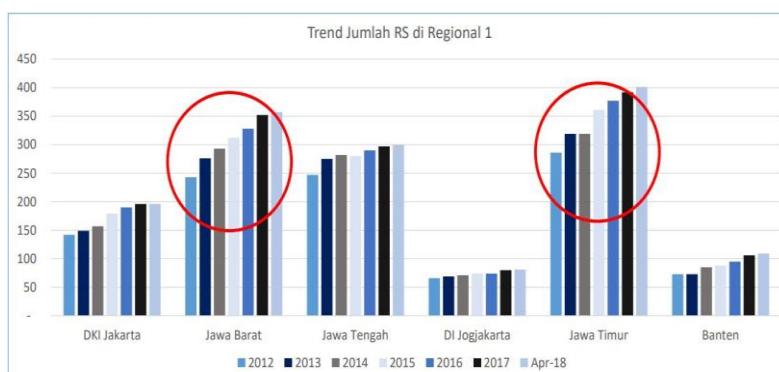


Figure 1: Hospital Trends in Regional 1

Source: Persi, 2018

The development of private hospitals continues to increase in every province in region 1, namely DKI Jakarta, West Java, Central Java, DI Jogjakarta, East Java and Banten. Based on the picture, East Java Province has the highest progress among other regions.

Since the implementation of the obligation to carry out accreditation every 3 years, making private hospitals further improve the quality of services. Hospital accreditation applies to private and government hospitals, but people's views on private hospitals have their own impressions. The perception of the public is that private hospitals have their own advantages over government hospitals even though all hospitals have been accredited.

Since the change in the way people pay for health services has changed to government-run health insurance, all government and private hospitals must serve payments through health insurance called BPJS health. Presidential Regulation of the Republic of Indonesia Number 111 of 2013, the National Social Security System (SJSN) which has a broad scope to overshadow public insurance which is now merged into 1 (one) namely BPJS (Social Security Organizing Agency). Public perception of how to pay using BPJS Kesehatan and the status of private hospitals, is a separate view for the community. It is easy for people to get services in private hospitals by using BPJS Kesehatan.

Lumajang Regency is a regency in East Java Province which only has 2 private hospitals. One of the private hospitals in Lumajang Regency has received an accreditation award with Plenary status, so that the quality and quality of service are in accordance with the accreditation points. The implementation of accreditation is not easy, hospitals must have awareness among employees to cooperate with each other in resolving accreditation demands and other policy changes that continue to develop in the hospital industry. Policies in the health sector are very rapidly developing, every year there are policy changes for the implementation of health BPJS.

These demands require the participation of all employees to continue to be willing to develop to improve their abilities and expertise in the hospital environment. The awareness and character of employees to be willing to participate in every activity and development of the hospital operational system is the most important thing. If the character of the employees of private hospitals is good, then the culture in the hospital becomes good too. Good employee character delivers the implementation of cultures in the health environment for the better. Health workers have the same culture, doctors have the same culture and mindset. This is because the pattern of education in the health sector in Indonesia has its own characteristics. The culture of seniority among health workers is still very high. Therefore, if the character of health workers is good, the cultures instilled since education will be even better.

The rapid development of hospitals and the very diverse external demands require human resources that can easily adapt to changes. A very important change is a change in terms of managing oneself to be willing to improve one's abilities and expertise through the acceptance and utilization of knowledge. Capital that is difficult for competitors to imitate is the knowledge capital owned by human resources. Therefore, these two variables are very important to research because they are important human resources that are important assets for hospitals.

Personal mastery according to Senge (1990) in Bui & Yehuda Baruch (2010) explains that self-mastery is the foundation for developing personal values that depart from individual beliefs, values and aspirations. According to Bstieler and Hemmert (2010), in organizational culture a different perspective is offered, embracing change and being open in discussing a problem. Collaboration Culture encourages the involvement of all member teams because of mutual respect, care and mutual support (Gloria Barczak, 2010). Positive self-mastery can encourage employees to develop themselves involved in a teamwork climate that respects, cooperates and cares for each other.

Organizational Citizenship Behavior is an action that goes beyond what it is based on formal rules and what is expected of employees in a state of performance standards. David Turniseed (1996) mentions that this behavior is a prosocial behavior such as helping others, innovating, volunteering (Matur & Silky Wigg, 2015). Organizational Citizenship Behaviour is a behavior that is beyond the expectations of the leadership, based on positive behavior for the betterment of the hospital. The willingness to Organizational Citizenship Behaviour is based on the employee's sense of awareness and concern as well as a sense of belonging in the heart and mind of an employee. Such behaviors can lead to the creation of cooperation between employees and shape culture easily.

Wasserman & Faust, (1994) in Crona (2011), knowledge utilization is the result of a type of social interaction and the structural position of social networks. The use of knowledge as a result of a social interaction carried out by employees, through interaction there is a transfer of knowledge that boils down to the use of knowledge. A hospital that has many work units in its operational process. Continuous and interconnected work units require very solid coordination. The demands and policy changes in the highly dynamic health field require employees to be able to understand and adapt quickly. This must be supported by the ability to get information or knowledge and the willingness to apply it.

Senge (1990); Appelbaum & Goransson (1997) in Bui & Yehuda Baruch (2010) describes that self-mastery and discipline in a gifted individual can build a team learning (the process of practicing a shared vision). According to Wibowo & Mochamad Mochklas (2020) that the role of nurses in hospitals is vital, nurse behavior is work achievement. Nurse work performance is the performance of nurses, to improve nurse performance is organizational citizenship behavior (OCB). Factors that drive organizational citizenship behavior (OCB) are job satisfaction, motivation, organizational characteristics (leadership and organizational culture). Health workers both functional and administrative who in essence provide services to patients so that the work performance of all health workers in the hospital is the same. Self-mastery of health workers can build a learning team, building a learning team requires cooperation between health workers through an awareness and openness that comes from a habit. It is organizational habits or cultures that are created that can encourage the realization of organizational citizenship behavior (OCB).

Lenihana (2018) Describes that through collaboration between employees, they can find out the factors that make employees satisfied, willing to change and willing to commit to their work. A culture of collaboration can be attributed to one's willingness to change by developing

individual abilities. Jeong, et al (2007), the ability to develop individuals can be through the utilization and use of knowledge. Organizational learning through controlling the character of human resources can make an organization effective. Organizational learning through the delivery and sharing of organizational vision is a predictive factor to create human resource commitment.

Responding to the challenges in the increasingly high health industry, the available human resources must be able to deal with them. The knowledge possessed must continue to be developed. The knowledge possessed by human resources will not contribute to the progress of the hospital, if the knowledge is not used for the progress of the hospital. Therefore, hospitals need employee character that can create employee behavior to be able to encourage human resources to become knowledge-rich human resources and contribute to the progress of the hospital.

## LITERATURE REVIEW

### Personal Mastery

Personal mastery according to Senge (1994) in Gracia-Morales, et al (2007) is the ability to grow and learn on a personal level. It concentrates on the organizational learning aspects that individuals have about what kind of personal vision we really want, concentrating all efforts on skills, abilities and self-professionalism. According to Flood (1998; Garcia-Morales, Llorens-Montes, & Verdu-Jover (2007); Senge (1990); Senge, et al (2000) in Retna, K.S (2011) a process of interaction in disciplined self-mastery and assessing the reality that occurs today, this interaction produces a creative tension. Personal mastery according to Senge (2009) in Beni et al, (2018) is one of the disciplines of continuous organizational learning to clarify and deepen personal vision, focus on energy, develop patience and see reality more objectively. The dimension of personal mastery consists of personal vision, increasing creativity, structural conflict, self-awareness and self-regulation.

According to Senge (1990); Senge et. Al (2000) in Retna, K. S. (2011), steps -langkah in personal mastery:

- 1) The first step in personal mastery is to define the vision and mission of the person who is most desired and becomes the most desirable. A focus on the final vision that is not a secondary goal is the basis for developing personal mastery (Senge, 1990).
- 2) The second step in personal mastery is to see the current reality clearly which is an equally important process for developing clarity of vision.

According to Senge (1990); Bokeno (2009) in Retna, K.S (2011) explains that the first choice in personal mastery is to stay true to your vision and the second choice is to commit to the truth. Senge (1990) in Retna K.S (2011) explains that committing to the truth does not mean seeking the truth or its main causes. A relentless willingness to eradicate ways of limiting ourselves or deceiving ourselves by seeing what we are and challenging theories about why things should be what they should be.

The key elements of personal mastery according to Senge (1990) are:

- 1) Personal vision; Focus on the highest intrinsic desires (and work to achieve that vision through personal growth.
- 2) Assessing current reality; Resolving the tension between personal vision and the present state of reality through clinging to the present vision
- 3) Commitment to truth; Overcoming structural conflicts
- 4) Personality growth; a commitment to continue learning for life by being disciplined on self-mastery (also continuing to focus on one's vision to expand and explore it).

The seven dimensions of self-mastery by Peter Senge (1990);

- 1) Self-Awareness; is the basis for personal mastery and effectiveness in relating to others. Self-awareness can be used as a key holder for personal and professional development.
- 2) Perceptual acuity; ability to interpret messages obtained through perception, observation, and the ability to hear.
- 3) Emotional Mastery; how a person understands the emotions of the self, knows the emotions of others, and his ability to manage emotions to appreciate others. Goleman (1995) divides five emotional intelligences in the book "Emotional Intelligence", namely:
  - a) Self-Awareness
  - b) Self-regulation; Controls or directs emotional stimulation and has a tendency to think before acting
  - c) Internal Motivation; motivating yourself, that in fact emotions do not solve the problem.
  - d) Empathy; The ability to understand the character and emotions of others. A skill in treating people according to their emotional reactions.
  - e) Social Skills; Ability to manage relationships and build networks and the ability to find common ground and build relationships.
- 4) Openness; Organizations are not inhabited by only one thought. A person can be open to other people's thoughts, and be willing to explore new ideas and experiences for the sake of a development
- 5) Flexibility and Adaptability; Changes and/or developments in the organization require a person to keep abreast of such changes and/or developments.
- 6) Autonomy; One must be able to control life to achieve a clear mind and intelligence, high sensitivity, aesthetic sense, responsibility as well as spiritual value.
- 7) Resourcefulness and Creative Resource fullness; one must be creative and innovative and always find new things in doing things. Always be open to new ideas and experiences as well as flexible and adaptation.

According to Marty Jacobs (2007), a person who has high personal mastery will have the following characteristics:

- 1) Have a special sense of his purpose in life
- 2) Able to accurately assess the reality that exists now
- 3) Skilled in managing creative tensions to motivate themselves in achieving future progress.
- 4) Seeing change as an opportunity
- 5) Have a great sense of curiosity
- 6) Placing a high priority on personal relationships without showing their selfishness or individualism
- 7) Systemic thinker, in which a person sees himself as one of the parts of a larger system.

### **Organizational Citizenship Behaviour**

Organizational citizenship behavior according to Organ (1997) in Titisari (2014) that as a free individual behavior, it is not directly or explicitly related to the reward system and can improve the effective functioning of the organization. Organ (1999) defines the behavior of company employees reviewed to improve the effectiveness of company performance without neglecting the employee's individual productivity goals (Barlian, 2015).

The dimensions of organizational citizenship behavior according to Organ et al (1988) in Titisari (2014), include:

- 1) Altruism (helping his co-workers),
- 2) Conscientiousness (compliance with regulations and exceeding company expectations),
- 3) Sportsmanship (tolerance to the less than ideal),
- 4) Courtesy (maintain good relations with colleagues), and
- 5) Civic virtue (following the development of the organization) (Barlian, 2015)

Internal and external factors in shaping Organizational Citizenship Behavior. According to Organ et al 2006 in Titisari 2014 which aims to improve Organizational Citizenship Behavior is influenced by two main factors;

- 1) Internal factors that come from the employee's own self, including job satisfaction, commitment, and personality, employee morale and motivation and so on.
- 2) External factors that come from outside the employee, including leadership style, trust in the leader, organizational culture and so on (Barlian, 2015).

Factors of the emergence of OCB in Bacrach et al, 2006, several factors that underlie the formation of Organizational Citizenship Behavior, including:

- 1) Individual characteristics; Individual characteristics, money affects the formation of the organization is divided into two parts, namely: Attitudinal which is an attitude towards work, including job satisfaction, organizational commitment, leadership support, and perception of justice. Dispositional associated with compliance, balance, sensiveness, and a tendency to express an affirmative or disapproving attitude regarding what is happening in an organization.
- 2) Job Characteristics The characteristics of work that involves oneself actively tend to be antecedents of Organizational Citizenship Behavior compared to the characteristics of routine and less independent work because routine work causes employees to feel bored and unable to develop their creativity so they are reluctant to take spontaneous initiatives to do something useful for the organization.
- 3) Organizational Characteristics Organizational characteristics that support the existence and self-development of employees positively, namely through organizational culture, organizational climate and appropriate system rewards can be an antecedent of Organizational Citizenship Behavior, where employees will show Organizational Citizenship Behavior as a form of reciprocity over what the employee gives. According to Organ 1995, there is strong evidence to suggest that organizational culture is an early condition that triggers OCB Organizational Citizenship Behavior. In addition, Sloat said, in a positive organizational climate, employees feel lighter to do their jobs beyond what is required in the job description and will always support the organization's goals if they are treated by superiors with sportsmanship and with full awareness, and believe that they are treated fairly by their organization.
- 4) Organizational leadership characteristics the characteristics of leaders in organizations that can be antecedents are of two kinds, namely transactional leadership characteristics that carry out leadership through an agreed transaction process between themselves and employees and transactional leadership characteristics that carry out leadership through the process of influencing to motivate employee self-development (Barlian, 2015).

Organizational Citizenship Behaviour Motive is a behavior that will not occur without an impulse or motivation, as well as Organizational Citizenship Behaviour which is determined by many things. One of the theories of the motive approach in organizations was put forward by Mc Clelland in Hardaningtyas (2005). According to Mc Clelland, human beings have three levels of motives, namely achievement motives, affiliation motives, power motives.

- 1) Achievement motif (nAch) the achievement motif is an encouragement to show a standard of privilege in order to achieve success. The motive of achievement will give rise to Organizational Citizenship Behaviour because the behavior of Organizational Citizenship Behaviour is considered necessary to obtain the success of the task.

- 2) **Affiliate Motives (nAff)** Affiliate motives are motives that encourage individuals to maintain relationships with others, and have a desire for friendly relationships and personal closeness.
- 3) **Motives of power (nPow)** the motive of power is a motive that encourages the individual to seek status and situations capable of controlling the work or actions of others, as well as looking for the need to make others behave in the desired way.

### **Collaboration Culture**

According to Bstieler and Hemmert (2010), in organizational culture a different perspective is offered, embracing change and being open in discussing a problem. Collaboration Culture encourages the involvement of all member teams because of mutual respect, care and mutual support (Gloria Barczak,2010).

Based on some of the considerations of experts in López (2004) regarding the main values of Collaboration Culture, namely:

- 1) **Along-term vision and advance management of the change:** Long-term mission and prioritizing change management; The team understands the natural and needed changes
- 2) **Communication and dialogus:** Communication and dialogue; Issues discussed openly to avoid mistakes
- 3) **Trust and respect to all individuals:** Trust and respect in all individuals; Consists of highly valuable and continuously valued assets
- 4) **Teamwork:** Work team; Collaboration and cooperation are encouraged within team members
- 5) **Empowerment:** Empowerment; All teams understand or are aware of the instructor's expectations
- 6) **Ambiguity tolerance:** everyone is highly valued opinionated and contributing
- 7) **Respect and diversity encouragement:** Mutual respect and diversity; Having different views is recommended in the team
- 8) **Risk assumption:** Risk assumptions; Someone who takes risks and experiments is encouraged in a team even if they make a mistake

Lei (2017) Based on the theory that collaboration culture becomes a core competency and makes it highly competitive with the following characteristics:

- 1) **Valuable;** because it is an effective platform for progress within the organization and valuable competence in creating better communication, stimulating information sharing and making greater co-operation as an apparent result it leads to greater creative efforts
- 2) **Rare;** firms try to assess and merge diverse skills that exist indifferent functions and across different organizations



- 3) Inimitable; very difficult for competitor to imitate and transfer because one of the most important characteristic of culture is tacit, intangible and high complexity
- 4) Important characteristic of culture is tacit, intangible and high complexity
- 5) Difficult to replace; that collaboration can act as a valued dynamic capability

Kumar and Banerjee (2012a) in Kumar et.al (2015), collaboration is the construction of four dimensions namely joint planning, sharing together, solving problems and measuring performance. Culture is defined as beliefs, shared values, ideas, and symbols that determine how a company conducts its daily activities. According to Kanter (1994) in Kumar, et al (2015), culture is one of the elements on which the most productive relationships are based and it must be consistent with transactional relationship-based activities based on organizational activity (McAfee, et al, 2002).

The culture of collaboration is defined as shared values, norms and practices about teamwork and communication (Meredith, et al, 2017). Flores (2004) in Meredith, et al (2017) mentions that the culture of collaboration as a work of relationships, which is spontaneous, voluntary, evolutionary, and development-oriented, where the founders work together becomes part of the personality of the organization.

### **Knowledge Utilization**

According to Jayachandran, Sharma, Kaufman& Raman (2005) in Salojärvi, Sainio et al. (2010), utilizing and learning knowledge for customer needs and behavior (knowledge utilization to increase knowledge), and in the development of customer-specific products and services (action-oriented knowledge utilization). According to Laursen& Saltern (2006) in Junfeng Zhang (2009), knowledge utilization by a subsidiary can be explained in terms of the extent to which it uses knowledge from various sources, such as suppliers, customers, competitors, outside research organizations and consultants, universities, its parent companies, peer units, and so on, in its product development.

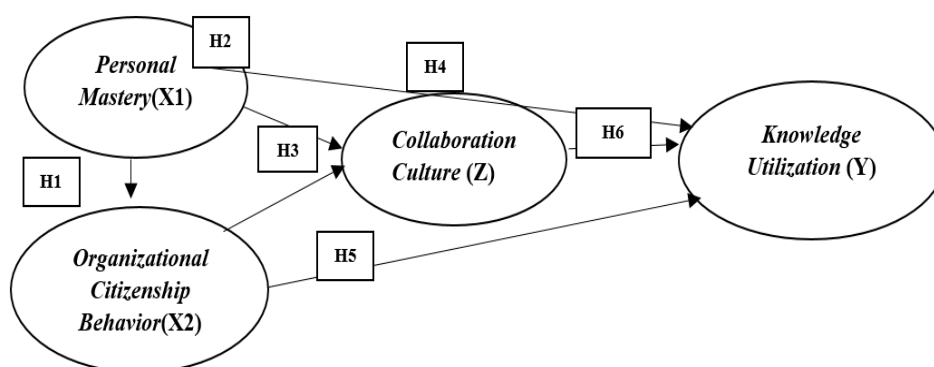
Agreement on the type of knowledge utilization situation is not a rare thing to study but the absence of a framework is a limiting factor. Despite the absence of the development of knowledge utilization groupings, the canned classification becomes a criterion of the situation in the description category. According to Glaser& Becker (1977); Weiss& Bacuvalas (1977) in Larsen (1980);

- 1) Participants in the knowledge utilization process
- 2) Objectives that have the potential for knowledge utilization
- 3) Receipt of benefits from potential knowledge utilization
- 4) Internal and external factors affecting knowledge utilization
- 5) The nature of knowledge utilization
- 6) Time frame

The knowledge utilization measurement scale was measured using a scale from Knott& Wildavski (1980) and modified by Landry et al (2003) in Crona (2011). This scale is designed to assess the development of six stages of knowledge utilization, namely:

- 1) Reception (acceptance of a knowledge related to work),
- 2) Cognition (understanding related knowledge that has been received),
- 3) Discussion (through a discussion, a knowledge is acceptable),
- 4) Reference (receiving knowledge as a reference for daily activities),
- 5) Effort (making an effort to support an accepted knowledge), and
- 6) Influence (the knowledge received influences the decisions that are in the work). The scale is a multiplication where each stage is assumed to be more important than the previous stage (Crona,2011).

**Conceptual Framework of Research**



**Figure: 2**

Source: Development of a conceptual framework by researchers (2021)

**Research Hypothesis**

The hypothesis built on this study is based on the formulation of the problem that has been prepared, as follows:

No	Hypothesis
Hypothesis 1	The better the personal mastery, the more collaboration culture will be
Hypothesis 2	The better the organizaational citizenship behavior, the more collaboration culture will be
Hypothesis 3	The better the personal mastery, the more knowledge utilization will be
Hypothesis 4	The better the organizaational citizenship behavior, the more knowledge utilization will be
Hypothesis 5	The better the collaboration culture, the more knowledge utilization will be

## Research Gap

The research gap that is the reference for this research can be carried out further study, as follows:

No	Name and Year	Heading	Result	Information
1	Syed Omar Sharifuddin, Syed-Ikhsan and Fytton Rowland (2004)	Knowledge Management in a public organization: a study on the relationship between organization elements and the performance of knowledge transfer	That there is a strong relationship between organizational elements and knowledge assets with knowledge transfer performance. There are insignificant and negative results between individualism and knowledge (as an asset) and the performance of knowledge transfer.	Insignificant
2	Side (1994)	Human Resources System and sustained competitive advantage: A competency-based perspective	Managerial competencies based on inputs, transformational, outputs are thought to be together for the competitive advantage of the company. Through a competency perspective that focuses on human resource activities, functions and processes that enhance and prevent the accumulation of competencies and exploitation, offset behavioral perspectives and thus have the potential to improve human resource management.	Significant and Positive
3	Zaim, Gurcan et al. (2015)	Determining the Critical Factors of Tacit Knowledge in Service Industry in Turkey	Tacit knowledge is divided into four factors, namely individual/personal knowledge, managerial knowledge, expertise knowledge, and collective knowledge. Managerial knowledge is the biggest factor over others and managerial communication is important for managerial knowledge.	Significantly positive
4	Kumar (2016)	Collaborative culture and relationship strength roles in collaborative relationships: a supply chain perspective	A culture of collaboration affects supply chain performance mediated by the power of relationships.	Significant and Positive
5	Cao and Zhang (2011)	Supply chain collaboration: Impact on collaborative advantage and firm performance	Supply chain collaboration increases the advantage of collaborating and improves company performance.	Significant and Positive
6	Moshtari (2016)	Inter-Organizational Fit, Relationship Management and Capability,	Collaboration will fail in private companies (not governments) with regard to the character of the partner	Significant and Negative

		Collaborative Performance within a Humanitarian Setting		
7	Nughroho (2018)	The effects of collaborative cultures and knowledge sharing on organizational learning	A Culture of Collaboration is the right culture that encourages organizational learning	Significant and Positive
8	Lau, P.Y.Y, et al (2020)	Learning organization and organizational citizenship behaviour in West Malaysia: moderating role of team-oriented culture	Organizational learning is significant to organizational citizenship behaviour moderated by culture	Significant and Positive
9	Chiang (2011)	The impacts of perceived organizational support and psychological empowerment on job performance: The mediating effects of organizational citizenship behavior	Organizational support and psychological empowerment, both of which have a positive effect on organizational citizenship behavior	Significant and Positive
10	Bui, H. T. M., & Baruch, Y. (2011)	. Learning organizations in higher education: An empirical evaluation within an international context.	Employees with a culture of collectivity are more likely to be committed to employees with an individualist culture	Signifkan and positive
11	Adebayo Saheed , Adewale (2018)	Impact of leadership self-efficacy and change- oriented behaviour on staff organizational citizenship behaviour in Nigerian Higher Education Institutions	Personal elements, social and economic organizations are responsible for the civic behavior of staff in the organization	Significant and positive

## RESEARCH METODOLOGY

### Research Design

The research design made by this researcher is to test the truth and development of a concept and theory more deeply, so that the results can solve a problem. This research design is confirmatory research as well as explanatory research. Confirmatory research is research that tests hypotheses based on empirical data, while explanatory research is a type of research that aims to analyze the relationship between variables or how one variable affects other variables.

### Population and Sample

Population is a combination of all elements in the form of events, things or people that have a similar character that are the center of attention of a researcher because it is seen as a universe of research (Ferdinand, 2014). The population in this study is the entire subject that the study studied and that has the same characteristics, characteristics. So the population of this study is all employees of private hospitals in Lumajang Regency. The total number of health workers related to the hospital accreditation process, 120 health workers at Wijaya Kusuma Hospital and 154 at Lumajang Islamic Hospital.

**Table 1: Total Number of Respondents Based on Research Variables**

No	Hospital	Number of Personnel	Indicator variable x 5	Sum
1	RS. ISLAM	120	145	$(120/274) \times 145 = 63.5$
2	RS. WIJAYA KUSUMA	154	145	$(154/274) \times 145 = 81.5$
		274		

Data Source: Data dia (2019)

The second sampling technique uses quota sampling, where the selection of these samples is carried out based on the highest quota or number for each category in the target population. The quota of respondents can be carried out based on the type of industry, the scale of the enterprise. Based on Ferdinand (2014) that SEM analysis requires a sample of at least 5 times the number of parameter indicators (29 indicators) to be analyzed, because in the Chi-Square test the sensitive SEM model has the number of samples, a good sample is needed ranging from 100-200 samples. Based on the opinions of Ferdinand (2014), and Supriyanto and Mashuri (2010), the number of samples in this study was 260 respondents obtained according to the criteria.

**Table 2: Distribution of the Number of Research Samples in Hospitals**

No	Power	Number of Samples taken in RS. Islam Lumajang	Number of Samples taken in RS. Wijaya Kusuma Lumajang
1	Nurse	$(63/120) \times 64 = 41$	$(80/154) \times 82 = 42$
2	Midwife	$(9/120) \times 64 = 6$	$(13/154) \times 82 = 7$
3	Doctor	$(21/120) \times 64 = 4$	$(13/154) \times 82 = 7$
4	Pharmacist	$(12/120) \times 64 = 8$	$(18/154) \times 82 = 10$
6	Administration	$(15/120) \times 64 = 8$	$(30/154) \times 82 = 16$
		64	82

Data Source: Data dia (2019)

The distribution of the number of samples between sections or work units in each hospital is obtained so that they can draw conclusions and generalize the research results obtained. So the number of research samples in private hospitals was 146 respondents.

### Data Types and Sources

The types of data used in this study are primary and secondary data.

#### 1. Data Primer

The primary data referred to in this study is in the form of information or explanations from the interview results using questionnaires.

#### 2. Secondary Data

The secondary data used in this study were data on the number, job position and staffing status in a private hospital in Lumajang Regency.

**Table 3: Operational definitions, Indicators and Research Instruments**

No	Variable	Indicator	Research Instruments
1	Personal Mastery	<ul style="list-style-type: none"> <li>a) Personal vision; Focus on the highest intrinsic desires (and work to achieve that vision through personal growth.</li> <li>b) Assessing current reality; Resolving the tension between personal vision and the present state of reality through clinging to the present vision</li> <li>c) Commitment to truth; Overcoming structural conflicts</li> <li>d) Personality growth; a commitment to continue learning for life by being disciplined on self-mastery (also continuing to focus on one's vision to expand and explore it).</li> </ul>	<ul style="list-style-type: none"> <li>a) I really understand everything I want to achieve and I need</li> <li>b) I am willing to carry out the additional tasks that the hospital needs</li> <li>c) I organize a workspace to increase morale</li> <li>d) I am excited to carry out the task of the new task assigned to me</li> <li>e) I am willing to assist other units in completing their tasks</li> <li>f) I understand the character of each person in the hospital in order to work well</li> <li>g) I perform tasks according to the hospital workflow</li> <li>h) My habit is to study together to improve self-competence</li> <li>i) I love designing workspaces to increase morale at work</li> <li>j) I am always on the lookout for the latest hospital-related news</li> <li>k) I care about my unit's work targets</li> <li>l) I have always been kind and open to external parties</li> </ul>
2.	Collaboration Culture (X1) Source: López (2004)	<ul style="list-style-type: none"> <li>a) Long-term vision and advance management of the change (: <math>X_{1,1}</math></li> <li>b) Communication and Dialogus(<math>X_{1,2}</math>);</li> <li>c) Trust and respect to all individuals (; <math>X_{1,3}</math>)</li> <li>d) Teamwork (; <math>X_{1,4}</math>)</li> <li>e) Empowerment(<math>X_{1,5}</math>);</li> <li>f) Ambiguity tolerance (<math>X_{1,6}</math>);</li> </ul>	<ul style="list-style-type: none"> <li>a) The hospital has a long-term mission for agency change in accordance with the demands of the times</li> <li>b) The hospital values every contribution and always values the opinions of employees through communication</li> <li>c) The company considers each individual an asset and strives to value it sustainably</li> <li>d) Hospitals advocate for collaboration and cooperation between task differences and areas of work</li> <li>e) Hospitals emphasize on all departments or areas to understand the performance targets of each field or unit</li> <li>f) The hospital discusses the problem openly to avoid mistakes</li> </ul>
3.	Organizational Citizenship Behavior	<ul style="list-style-type: none"> <li>a) Altruism (helping his co-workers),</li> <li>b) Conscientiousness (compliance with regulations and exceeding company expectations),</li> <li>c) Sportsmanship (tolerance to the less than ideal),</li> <li>d) Courtesy (maintain good relations with colleagues), and</li> </ul>	<ul style="list-style-type: none"> <li>a) Employees willing to help with the work of other colleagues</li> <li>b) Employees willing to work more for the hospital</li> <li>c) Employees tolerate work activities</li> <li>d) Employees maintain good relations with other employees in the work environment</li> <li>e) Employees feel responsible for what happens inside the hospital</li> </ul>

		e) Civic virtue (following the development of the organization)	
4.	Knowledge Utilization Source: Crona (2011)	a) Reception (; X <sub>3.1</sub> ) b) Cognition (; X <sub>3.2</sub> ) c) Reference (;X <sub>3.3</sub> ) d) Effort(;X <sub>3,4</sub> ) e) Influence(;X <sub>3,5</sub> )	a) Receive knowledge for use in organizations b) Understand the knowledge used in your organization c) Citing knowledge from organized work as a reference d) Strives well in the use of knowledge e) Knowledge influences organized decision making

### Data Analysis Techniques

The program used to test SEM in this study is AMOS version 23.0, and AMOS is often used for management research. The causal model on AMOS shows a structural measurement and error to use to test hypotheses.

## RESULTS AND DISCUSSION

### Research Results

**Table 4: Description of the variable Personal Mastery (X1)**

Indicator	N	Minimum	Maximum	Mean	Std. Deviation
X1.1	146	2	5	4,51	,602
X1.2	146	2	5	4,45	,576
X1.3	146	2	5	4,27	,593
X1.4	146	2	5	4,29	,643
X1.5	146	2	5	4,35	,617
X1.6	146	2	5	4,28	,572
X1.7	146	2	5	4,18	,705
X1.8	146	2	5	4,33	,565
X1.9	146	2	5	4,20	,493
X1.10	146	2	5	4,10	,535
X1.11	146	2	5	4,10	,636
X1.12	146	2	5	4,14	,563
Valid N (list wise)	146				

Based on table 4, the personal mastery variable is dominated by affirmatives. Respondents had a dominant affirmative perception of the personal mastery variable.

**Table 5: Description of Variable Organizational Citizenship Behaviour**

	N	Minimum	Maximum	Mean	Std. Deviation
X2.1	146	2	5	3,88	,545
X2.2	146	2	5	3,83	,603
X2.3	146	2	5	4,03	,550
X2.4	146	2	5	4,15	,625
X2.5	146	2	5	4,02	,616
Valid N (list wise)	146				

Based on table 5, respondents' perceptions of Organizational Citizenship Behaviour are dominated by affirmative perceptions, this can be seen from the average variables.

**Table 6: Description of Variable Collaboration Culture**

	N	Minimum	Maximum	Mean	Std. Deviation
Z1	146	2	5	4,02	,581
Z2	146	2	5	3,97	,621
Z3	146	2	5	3,98	,581
Z4	146	2	5	3,88	,549
Z5	146	2	5	4,01	,563
Z6	146	2	5	3,99	,525
Valid N (list wise)	146				

Based on table 6, respondents' perceptions of collaboration culture are dominated by affirmative perceptions.

**Table 7: Description of Variable Knowledge Utilization**

	N	Minimum	Maximum	Mean	Std. Deviation
Y1	146	2	5	4,55	,780
Y2	146	2	5	4,12	,631
Y3	146	2	5	4,21	,704
Y4	146	2	5	3,96	,663
Y5	146	2	5	3,91	,714
Y6	146	2	5	4,14	,761
Valid N (list wise)	146				

Based on table 7, respondents' perception of knowledge utilization is dominated by the perception of agreeing.

**Table 8: Testing Validity, Reability, Normality, Multicollinearity and Outlier**

No	Testing	Standard	Result	Information
1.	Validity Test	Loading factor > 0.05, significance at ( $\alpha = 5.00\%$ ) and probability value less than 0.05.	No CR value < 0.05	Valid
2.	Reliability Test	Composite construct reliability dengan cut off value minimal 0.7	X1 = 0,943 X2 = 0,889 Z = 0.908 Y = 0.912	Reliability
3.	Normality Test	The critical ratio ( CR) used is 5% significant, hence the CR value is between - 2.58 to 2.58 ( $-2.58 \leq CR \leq 2.58$ )	CR = 2,235	Normal
4.	Multicollinearity Test	Sample covariance matrix > angka 0	154,218	No multicollinearity
5.	Uji Outlier	P1 and P2 < 50,998	48,602	No outlier occurs

Based on table 8, it is explained that the variables in this study did not experience multicollinearity and no outliers occurred. In addition, the variable data of this study are normal, valid and reliability.



**Table 9: Uji Kesesuaian Model (Goodness-of-fit-test)**

Criterion	Cut Off Value	Test Results	Information
Chi Square	Expected to be smaller than $df = 347$ i.e. $394,626X^2$	386,625	Fit
Sig. Probability	$\geq 0,05$	0,095	Fit
RMSEA	$\leq 0,08$	0,028	Fit
GFI	$\geq 0,90$	0,860	Marginal
AGFI	$\geq 0,90$	0,825	Marginal
CMIN/DF	$\leq 2$ or $3$	1,114	Fit
TLI	$\geq 0,95$	0,985	Fit
CFI	$\geq 0,95$	0,987	Fit

Data Source: Data in Processed (2020)

Based on table 9, it is known that of the eight criteria used to assess whether or not a model is feasible, only two criteria are declared marginal. However, overall it can be said that the conformity of the model is good and acceptable which means that there is a conformity between the model and the data. After testing the suitability of the research model, the next step is to test the causality developed in the study. From the corresponding model can be interpreted on each of the path coefficients. Detailed testing of the path coefficient is presented in the table as follows.

**Table 10: Causality Test Results**

	Estimate	S.E	C.R	P	Information
X2<---X1	.333	.110	3.016	0.003	Significant
Y<---X1	.191	.074	2.597	0.009	Significant
Y<---X2	.378	.066	5.697	0.00	Significant
Z<---X1	.526	.134	3.917	0.00	Significant
Z<---X2	.260	.117	2.231	0.026	Significant
Z<---Y	.334	.163	2.044	0.041	Significant

Data Source: Data in Processed (2020)

Based on table 10. The following equation is obtained:

$$Y = 0.191X_1 + 0.378X_2$$

$$Z = 0.526X_1 + 0.260X_2 + 0.334Y$$

Then the interpretation of the results of each path coefficient is as follows:

- 1) Hypothesis 1: The better the personal mastery, the more collaboration culture in the health industry will be
- 2) Hypothesis 2: The better organizational citizenship behaviour will increase collaboration culture in the healthcare industry
- 3) Hypothesis 3: The better personal mastery will increase knowledge utilization in the healthcare industry

- 4) Hypothesis 4: The better organizational citizenship behavior will increase knowledge utilization in the healthcare industry
- 5) Hypothesis 5: The better collaboration culture will increase knowledge utilization in the healthcare industry

**Table 11: Direct, Indirect and Total Effect Analysis Results**

Influence Between Variables	Direct Effects	Indirect Effects	Total Effects
(X1) ->(X2)	0.333	0.000	0.333
(X1)->(Z)	0.229	0.135	0.363
(X2) ->(Z)	0.378	0.000	0.378
(X1) -> (Y)	0.526	0.192	0.718
(X2) ->(Y)	0.260	0.126	0.386
(Z) ->(Y)	0.334	0.000	0.334

Source: Data processed (2020)

Based on table 11, it is known that the entire hypothesis shows a positive and significant effect. In direct, indirect and total relationships have been summarized in table 10. The direct relationship of latent variables of personal mastery (X1), organizational citizenship behavior (X2) to collaboration culture (Z) is positive. The direct relationship of these two latent variables, the relationship of organizational citizenship behavior (X2) to collaboration culture (Z) is greater than personal mastery (X1) to collaboration culture (Z). The direct relationship of the latent variable personal mastery (X1), organizational citizenship behavior (X2) to knowledge utilization (Y) is positive. The largest direct relationship is in the direct relationship of personal mastery (X1) to knowledge utilization (Y) of 0.357.

The indirect relationship between personal mastery (X1), organizational citizenship behavior (X2) and knowledge utilization (Y) is positive. The largest indirect relationship is personal mastery (X1) through collaboration culture (Z) to organizational citizenship behavior (X2) of 0.192. There is an indirect relationship between personal mastery (X1) through organizational citizenship behavior (X2) and collaboration culture (Z) of 0.126.

Total influence formed from various direct and indirect variables. The biggest total influence is the influence of the personal mastery variable (X1) on knowledge utilization (Y) through collaboration culture (Z). Personal mastery (X1) is the dominant construct for creating knowledge utilization (Y).

## DISCUSSION

### Personal mastery of collaboration culture in the healthcare industry

Based on testing, it shows that personal mastery (X1) has a positive and significant effect on collaboration culture (Z). The hypothesis states that the better the personal mastery (X1), the more collaboration culture (Z) in the healthcare industry. According to Flood (1998; Garcia-Morales, Llorens-Montes, &Verdu-Jover (2007); Senge (1990); Senge, et al (2000) in Retna, K.S (2011) a process of interaction in disciplined self-mastery and assessing the reality that

occurs today, this interaction produces a creative tension. Based on the table of descriptions of respondents' perceptions of personal mastery, that respondents dominated perceptions of agree. Respondents who came from different educational backgrounds and work units, had the same dominant perception of personal mastery. Self-mastery is one of the definitions of personal mastery, where self-control and self-knowledge are important. The respondent understands himself by knowing everything that is wanted and needed in him. A person who understands this, can help the organization in the development of the organization. If the employee understands that he is a good listener, the employee can become someone who can accommodate ideas, ideas, complaints and suggestions from various parties so that they can be input for the organization. If the employee understands that he wants a higher position, then the employee can help the internal and external activities of the organization to demonstrate his abilities.

Employees with the ability to assess the reality conditions that occur, will be able to accept if they receive additional tasks. When the hospital is experiencing a bad financial condition, employees are happy to contribute to helping the hospital with their efforts or expertise. Or if the hospital is undergoing hospital accreditation, then employees are happy and feel that they have concern to become a vision and mission and be as happy as the achievements that the sick person wants to achieve. So employees will be happy to help the hospital, for example, employees help and contribute to the improvement of documents and the implementation of standard operating procedures. The interaction that employees have makes a positive contribution to the organization because they do something outside of their main duties.

Employees have different characters, if there is an employee who is excited about the new tasks assigned to him, the employee is an employee who has a good character for the organization. Employees who do not stop to make improvements and activities that refer to the development of the organization are a rare attitude that employees have. A new task is a task that requires effort to learn things that have not been done before. Lazy employees will feel that the task is a burden and makes the work more and more. Curiosity and positive contribution of employees is a behavior that comes from within the employee that arises from the intention and seriousness to develop with the organization.

A culture of collaboration is defined as shared values, norms and practices on the subject of teamwork and communication (Meredith, et al, 2017). In accordance with this definition, the character of employees who are willing to help each other in completing tasks is one of the characteristics of good employee character. Respondents who have concern for their work team are one of the characteristics in personal mastery that can support the implementation of a culture of collaboration. Through a culture of collectivity and having a caring character is a condition that can help the organization in developing and achieving the vision and mission. Self-control to be willing to help other employees in completing tasks is one of the best self-control. Large teams, namely teams of all elements and members of the organization, are a broad environment for employees, the scope of each unit is a specific environment for employees. So if in a broad environment only employees are willing to help other employees, then these employees are valuable assets for the organization. Understanding character is one

of a person's ability to control themselves through eradicating situations and conditions. Employees can understand the character of each other employee so that they can control themselves in interacting. For example, an employee who wants to be invited to have passive behavior, then the employee must be able to control himself to be able to provoke or revive the employee's contribution to the organization. The willingness to help other employees become employees who have good behavior is a rare person for the organization. The leadership is an activity that is responded to from within the employee.

**Social Skills:** Ability to manage relationships and build networks and the ability to find common ground and build relationships. Employees who carry out their duties in accordance with the flow of the hospital is a form of discipline and the ability to build commonality in activities in the organization. These social abilities are abilities that employees must have. If the employee violates the organization's workflow, the employee needs to be coached. An organization is like a ship that must have a destination direction and carry all its crew to reach it. If there is a crew member who does not comply with the achievement of similarities on board, then the employee will become a burden and tend to undermine the organizational culture that has been built.

**Flexibility and Adaptability:** Changes and/or developments in the organization require a person to keep abreast of such changes and/or developments. One example is that employees have a habit of learning together in improving their competence through helping each other in completing the work of other employees. The administrative and management process is a process that can be done without any element of emergency so that the process can be learned by many employees.

**Openness (Openness):** A person can be open to accepting the thoughts of others, and be willing to explore new ideas and experiences for the sake of development. Hospitals provide space for health workers to come up with ideas so that hospitals get a lot of new input and understanding that has never been thought of before. Family activities such as social gatherings, recitations in the hospital environment can cause openness between the upper and lower lines so that new ideas and ideas can emerge.

**Autonomy (Autonomy):** One must be able to control life to achieve a clear mind and intelligence, high sensitivity, aesthetic sense, responsibility as well as spiritual value. An employee who has this ability can take care of himself and take care of his organization. Employees can also assist in maintaining the culture and environment of the hospital to be able to develop. Nurses are given autonomy over their work area, so nurses are willing to improve, improve and develop their nursing system which is considered ineffective in hospitals. For example, employees perceive that they like to design workspaces to increase morale at work. Kaaryawan has autonomy over his work and makes his work more convenient for them.

**Resourcefulness and creative power (Creative Resourcefulness):** Always be open to new ideas and experiences as well as flexible and adaptation. These health workers who have the resourcefulness and creative power can provide solutions and input for the development and improvement of the hospital. A person who has the sense and creative power tends to provide

solutions to a problem in unique ways. Employees who have a desire to find the latest news related to the hospital are employees who have concern for the hospital. Such employees have a sense of care for the hospital. If the hospital is in a bad position, employees will find ways together to solve the problem. Employees who care about the hospital tend to care about the development and performance of the hospital. On smaller units, such employees will be very.

So in this study, the better the personal mastery, the better the culture of collaboration carried out in the hospital. Personal mastery in employees becomes a capital for the organization to be able to bring all members or teams to collaborate with each other. Personal mastery can be a burden for the organization if the personal mastery owned by employees is going in a negative direction or harming the organization. Choosing employees who have consistent and positive personal mastery is a challenge for the organization.

### **Organizational citizenship behaviour towards collaboration culture in the health industry**

Based on testing, it shows that organizational citizenship behavior (X2) has a positive and significant effect on collaboration culture (Z). The hypothesis states that the better the organizational citizenship behavior (X2), the more collaboration culture (Z) in the health industry. Organizational citizenship behavior according to Organ (1997) in Titisari (2014) that as a free individual behavior, it is not directly or explicitly related to the reward system and can improve the effective functioning of the organization. A person who behaves not because of an award or punishment will have a good effect on the organization. This behavior describes a concern and a sense of belonging that exists in a person. Organ (1999) defines the behavior of company employees reviewed to improve the effectiveness of company performance without neglecting the employee's individual productivity goals (Barlian, 2015). Such behavior is not due to the achievement of individual performance values, not for himself but for the organization. The sense of belonging and care that grows in an employee then the employee is an asset to the company.

The dimension of organizational citizenship behavior according to Organ et al (1988) in Titisari (2014), namely altruism (helping colleagues). Employees who are willing to help colleagues are employees who have high concerns. According to the results of causality testing, a person who has good personal mastery then organizational citizenship behavior will also be good. Collaboration culture will be easy to grow or maintain if employees have behaviors that help each other. Conscientiousness occurs in an employee who has a high concern for the organization. A high sense of concern cannot be born out of thin air, because the organizational environment is a new environment and adaptation or adjustment must be made for employees. If an employee has good personal mastery, a sense of care and belonging will grow in the employee. Such an employee will respect and implement the organization's regulations. Behavior that exceeds organizational expectations is an invaluable behavior for the organization. This kind of behavior sometimes grows because of a long period of service or because past experiences shaped a person to behave in this way. Sportsmanship grows in an employee because it understands that a process has many obstacles and challenges. The obstacles faced are challenges and mistakes that occur are commonplace. Understanding each

process is a form of maturity in thinking. This maturity is a way of looking at and attitude of an employee who understands every organizational process. Working with a team is working with a crowd so there are many different perceptions and views, through Sportsmanship the organizational process can grow and develop. Courtesy in organizational citizenship behavior is a form of control in the person to want to relate well with other employees. This is a form of employee self-control to maintain and maintain relationships and work environment. This self-control is very good for maintaining cooperation between employees and fostering a culture of collaboration between work units. Civic virtue which is a form of employee concern by following the development of the organization. Employees who are indifferent to the organization's work program are a burden on the organization. Therefore, employees who intend to participate in developing the organization are employees who have organizational citizenship behavior.

Organizational citizenship behaviour is important for organizations, the relationship between organizational citizenship behaviour and personal mastery is very close. The relationship between the two is based on a high sense of belonging and concern for the organization. A person who understands himself and is able to control himself, can put himself well. The ability to place themselves well is very important for the organization, especially in carrying out operational systems according to procedures. Behavior that is beyond the expectations of the organization, if employees are willing to provide something better for the organization.

### **The effect of personal mastery on knowledge utilization in the healthcare industry**

Based on testing, it shows that personal mastery (X1) has a positive and significant effect on knowledge utilization (Y). The hypothesis states that the better personal mastery (X1) the more knowledge utilization (Y) in the health industry. According to Laursen & Saltern (2006) in Junfeng Zhang (2009), knowledge utilization by a subsidiary can be explained in terms of the extent to which it uses knowledge from various sources in its product development. The utilization of knowledge that a person has depends on one's will and willingness. This really depends on personal mastery, someone who is able to control himself then someone can determine and decide something. Personal mastery that has the same vision and mission as the organization will be able to encourage the movement of the organization through the use of knowledge possessed.

Personal mastery of a good employee, then will understand and place themselves in the work environment according to the workflow and work environment. A person will be willing to accept new knowledge in order to improve his working ability. Personal mastery is a self-control, if disagreement or disagreement can be done or controlled in a better way. If the knowledge has been received, the employee will be willing to understand it and explore it. An employee's willingness to do this is a good self-control. A person's willingness to understand and explore is a form of responsible care and attention. This is because sometimes employees are only limited to knowing without wanting to explore and think in detail.

A person who explores and thinks in detail is able to analyze things related to knowledge. Such employees are willing to discuss to gain even broader knowledge. Hospital employees with all

policy changes both internal and external make the need for information and knowledge important. Such as the policy of how to pay patients, which originally used the direct payment method to become a way of paying using insurance. People are directed to use state-run insurance so that the hospital's internal system changes and employees have to adjust to those changes. Internal hospital policies as internal knowledge are used and implemented every day. This knowledge becomes the basis or guideline for employees to carry out their activities and make quick decisions. The willingness to carry out the knowledge gained is not an easy thing. This requires effort from the employee to adjust and understand the knowledge again accepted by the employee's intellect and understanding. It takes a strong effort because knowledge becomes a reference or reference or basis for a person to be able to make decisions, find better ways and gain insights for hospital development. So with personal mastery in employees, employees can understand and accept and carry out the knowledge gained. Personal mastery is able to orient employees to be even better at using knowledge for hospital development. Good personal mastery makes OCB good in a person so that knowledge utilization is better. The direct influence of personal mastery is great on knowledge utilization in hospitals.

### **The effect of organizational citizenship behavior on knowledge utilization in the healthcare industry**

Based on the results of the analysis that organizational citizenship behavior (X2) has an effect and is significant on knowledge utilization (Y) in the health industry. The better the organizational citizenship behavior (X2), the better the knowledge utilization (Y) in the health industry. The direct influence of organizational citizenship behavior (X2) on knowledge utilization (Y) is greater than its indirect influence. Someone doing something beyond the expectations of the organization is a capital for the individual and an asset for the organization. On the use of knowledge, a person who implements a new policy by applying the knowledge or information provided to employees. This is based on the various motivations that exist in an employee. Organizational Citizenship Behaviour Motive is a behavior that will not occur without an impulse or motivation, as well as organizational citizenship behavior which is determined by many things. The motive of power, a person is willing to do everything to gain power. Behavior beyond the expectations of the organization is certainly very beneficial for the organization. If the employee has a motive for power then the method will be attractive to the leader or upper line to give the position to the employee. There are certain motives that each employee has.

Motive of achievement, a person will carry out the knowledge possessed immediately or quickly to be judged more disciplined and diligent than other employees. These kinds of motives depend on one's intentions or personality. If the intention is to get something, then it is motivation. If a person does organizational citizenship behavior because of his personality then the employee is an asset to the hospital. Through this motive, the use of knowledge can be carried out. The desire of employees to be judged as disciplined and diligent becomes an individual motivation that encourages the implementation of existing knowledge in the organization. Employees who have a caring and sense of belonging without motive for individual benefit are excellent things for the organization. In hospitals that have many fields

that will be an obstacle to be able to work together to use knowledge. In addition, employees who have high control can maintain a working atmosphere to be harmonious through good relations between employees. This motivation makes the hospital environment interconnected with each other so that the use of knowledge can be realized. Therefore, the direct influence of organizational citizenship behavior on the utilization of knowledge is higher than that of indirect pengaruh it.

### **The effect of collaboration culture on knowledge utilization in the healthcare industry**

Based on the test results, collaboration culture has an effect and is significant on knowledge utilization in the health industry. According to Kanter (1994) in Kumar, et al (2015), culture is one of the elements on which the most productive relationships are based and it must be consistent with transactional relationship-based activities based on organizational activity (McAfee, et al, 2002). Culture is formed by the organization to be able to support the achievement of organizational goals. The relationship that interacts with each other between employees is an organizational activity repeatedly until it becomes an activity that becomes routine for employees. The culture of collaboration is defined as shared values, norms and practices about teamwork and communication (Meredith, et al, 2017). Culture contains interactions that consist of many employees or many work teams that interact with each other based on a shared value and norm. The main culture of a hospital is the quality of service and patient safety, so in daily activities it is prioritized to provide services to patients to the maximum. Flores (2004) in Meredith, et al (2017) mentions that the culture of collaboration as a work of relationships, which is spontaneous, voluntary, evolutionary, and development-oriented, where the founders work together becomes part of the personality of the organization. Culture is formed by the leadership of the organization, the culture of being an employee an interaction whether it is spontaneous, voluntary or intentional. At its core, culture is formed to form an interaction that is in accordance with the norms of the company and profession to create the achievement of organizational goals. The culture in the hospital is formed by the leadership of the hospital, besides the dominant culture is formed by laws and regulations. So the culture of collaboration bridges the implementation of knowledge to continue to develop for the better in accordance with internal and external policies and regulations. The influence of a culture of direct and indirect collaboration on knowledge utilization is smaller than personal mastery. Broadly speaking, it can be concluded that personal mastery is the most important variable that affects the variables of collaboration culture and knowledge utilization in hospitals.

### **CONCLUSION**

Based on the results of research and discussion, that conclusions can be drawn in this research are:

- a) Personal mastery has a positive and significant effect on collaboration culture, its direct influence is greater than indirect influence. Personal mastery is the ability in employees to be willing to cooperate with other employees. So the willingness in this employee is very important to realize an interaction in an organization.



- b) Organizational citizenship behaviour has a positive and significant impact on collaboration culture, this is because organizational citizenship behavior is a will formed by various factors and motivations so that someone wants to do things that meet the expectations of the leadership or those expected. Employees with organizational citizenship behavior can easily work with other employees so that collaboration culture can be easily realized in an organization.
- c) Personal mastery has a positive and significant effect on knowledge utilization, its direct influence is greater than its indirect influence. This is because if a person is able to control themselves well, have a good vision, it will be easy to apply knowledge in the organization.
- d) Organizational citizenship behavior has a positive and significant impact on knowledge utilization, its direct influence is greater than its indirect influence. This is because employees with organizational citizenship behavior do something beyond the expectations expected by the leadership, it will be very easy for someone to apply knowledge, information and applicable policies.
- e) Collaboration culture has a positive and significant effect on knowledge utilization, this is because cultures that grow with a sense of mingling and interacting with each other for development or improvement will be very easy to use knowledge in an organization.

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